

DOC Professional Fee Schedule
 Effective as of January 1, 2024

PFS Conversion Factor:

60

HCPCS-Mod	CODE DESCRIPTION	Payment Methodology	Coverage	Non-Facility Pricing	Facility Pricing	PCTC Indicator	Global Days	Multiple Procedure (51/59)	Bilateral (50)	Assist Surgeon (80/81/AS)	CoSurgeon (62)	Team Surgeon (66)	ENDO BASE
10004-00	Fna bx w/o img gdn ea addl	R26C	Covered	90.63	72.52	0 ZZZ		0	0	0	0	0	0
10005-00	Fna bx w/us gdn 1st les	R26C	Covered	245.37	124.42	0 XXX		2	0	0	0	0	0
10006-00	Fna bx w/us gdn ea addl	R26C	Covered	106.53	85.83	0 ZZZ		0	0	0	0	0	0
10007-00	Fna bx w/fluor gdn 1st les	R26C	Covered	568.98	151.15	0 XXX		2	0	0	0	0	0
10008-00	Fna bx w/fluor gdn ea addl	R26C	Covered	260.00	84.72	0 ZZZ		0	0	0	0	0	0
10009-00	Fna bx w/ct gdn 1st les	R26C	Covered	805.25	184.97	0 XXX		2	0	0	0	0	0
10010-00	Fna bx w/ct gdn ea addl	R26C	Covered	436.97	118.74	0 ZZZ		0	0	0	0	0	0
10011-00	Fna bx w/mr gdn 1st les	RMCD	Covered	304.00	100.44	0 XXX		2	0	0	0	0	0
10012-00	Fna bx w/mr gdn ea addl	RMCD	Covered	171.24	65.49	0 ZZZ		0	0	0	0	0	0
10021-00	Fna bx w/o img gdn 1st les	R26C	Covered	184.21	93.02	0 XXX		2	0	0	0	0	0
10030-00	Img gid flu coll drg sft tis	R26C	Covered	1198.96	227.46	9 000		2	9	0	0	0	0
10035-00	Plmt sft tiss loclzj dev 1st	R26C	Covered	682.37	142.93	0 000		2	1	0	0	0	0
10036-00	Plmt sft tiss loclzj dev ea	R26C	Covered	563.11	71.54	0 ZZZ		0	0	0	0	0	0
10040-00	Acne surgery	R26C	Covered	216.83	90.71	0 010		2	0	1	0	0	0
10060-00	I&d abscess simple/single	R26C	Covered	235.17	195.72	0 010		2	0	1	0	0	0
10061-00	I&d abscess comp/multiple	R26C	Covered	389.73	330.88	0 010		2	0	1	0	0	0
10080-00	I&d pilonidal cyst simple	R26C	Covered	470.94	188.93	0 010		2	0	1	0	0	0
10081-00	I&d pilonidal cyst comp	R26C	Covered	631.50	295.17	0 010		2	0	1	0	0	0
10120-00	Inc&rmvl fb subq tiss smpl	R26C	Covered	283.13	192.58	0 010		2	0	1	0	0	0
10121-00	Inc&rmvl fb subq tiss comp	R26C	Covered	480.83	322.36	0 010		2	0	1	0	0	0
10140-00	I&d hmtma seroma/fluid collj	R26C	Covered	312.41	212.15	0 010		2	0	1	0	0	0
10160-00	Pnrx aspir abs hmtma bulla	R26C	Covered	238.43	173.75	0 010		2	0	1	0	0	0
10180-00	I&d complex po wound infctj	R26C	Covered	472.71	309.07	0 010		2	0	1	0	0	0
11000-00	Dbrdmt ecz/infected skin<10%	R26C	Covered	109.79	47.70	0 000		2	0	1	0	0	0
11001-00	Dbrdmt ecz/infct skn ea addl	R26C	Covered	50.07	25.49	0 ZZZ		0	0	1	0	0	0
11004-00	Dbrdmt skin xtrnl gent&per	R26C	Covered	922.35	922.35	0 000		2	0	1	0	0	0
11005-00	Dbrdmt skin abdominal wall	R26C	Covered	1223.77	1223.77	0 000		0	0	0	0	0	0
11006-00	Dbrdmt skin xtrnl gent per	R26C	Covered	1122.55	1122.55	0 000		2	0	1	0	0	0
11008-00	Rmv prstc mtrl/mesh abd wall	R26C	Covered	429.35	429.35	0 ZZZ		0	0	0	0	0	0
11010-00	Debride skin at fx site	R26C	Covered	808.58	473.54	0 010		2	2	1	0	0	0
11011-00	Debride skin musc at fx site	R26C	Covered	893.41	496.92	0 000		2	2	1	0	0	0
11012-00	Deb skin bone at fx site	R26C	Covered	1156.69	694.88	0 000		2	2	1	0	0	0
11042-00	Dbrdmt subq tis 1st 20sqcm/<	R26C	Covered	240.52	105.34	0 000		2	0	1	0	0	0
11043-00	Dbrdmt musc&/fsca 1st 20/<	R26C	Covered	417.60	261.72	0 000		2	0	1	0	0	0
11044-00	Dbrdmt bone 1st 20 sq cm/<	R26C	Covered	549.19	379.08	0 000		2	0	1	0	0	0
11045-00	Dbrdmt subq tiss each addl	R26C	Covered	70.87	41.76	0 ZZZ		0	0	0	0	0	0
11046-00	Dbrdmt musc&/fsca ea addl	R26C	Covered	126.24	90.02	0 ZZZ		0	0	0	0	0	0
11047-00	Dbrdmt bone each addl	R26C	Covered	206.13	158.27	0 ZZZ		0	0	0	0	0	0
11055-00	Paring/cutg b9 hyprkr les 1	R26C	Covered	135.25	26.59	0 000		2	0	1	0	0	0
11056-00	Parnng/cutg b9 hyprkr les 2-4	R26C	Covered	156.06	37.69	0 000		2	0	1	0	0	0
11057-00	Parnng/cutg b9 hyprkr les >4	R26C	Covered	169.75	49.44	0 000		2	0	1	0	0	0
11102-00	Tangntl bx skin single les	R26C	Covered	188.56	65.67	0 000		2	0	1	0	0	0
11103-00	Tangntl bx skin ea sep/addl	R26C	Covered	93.79	38.16	0 ZZZ		0	0	1	0	0	0
11104-00	Punch bx skin single lesion	R26C	Covered	233.96	80.67	0 000		2	0	1	0	0	0
11105-00	Punch bx skin ea sep/addl	R26C	Covered	110.42	43.80	0 ZZZ		0	0	1	0	0	0
11106-00	Incal bx skn single les	R26C	Covered	290.32	96.93	0 000		2	0	1	0	0	0

11107-00	Incal bx skn ea sep/addl	R26C	Covered	132.11	52.55	0 ZZZ	0	0	1	0	0
0094U-00	Rapid sequence gene testing	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0267U-00	Optical genome mapping and whole genome	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
11300-00	Shave skin lesion 0.5 cm/<	R26C	Covered	188.80	58.79	0 000	2	9	0	0	0
11301-00	Shave skin lesion 0.6-1.0 cm	R26C	Covered	226.58	88.81	0 000	2	9	0	0	0
11302-00	Shave skin lesion 1.1-2.0 cm	R26C	Covered	255.79	103.79	0 000	2	9	0	0	0
11303-00	Shave skin lesion >2.0 cm	R26C	Covered	281.67	123.20	0 000	2	9	0	0	0
11305-00	Shave skin lesion 0.5 cm/<	R26C	Covered	197.07	64.48	0 000	2	9	0	0	0
11306-00	Shave skin lesion 0.6-1.0 cm	R26C	Covered	228.88	84.64	0 000	2	9	0	0	0
11307-00	Shave skin lesion 1.1-2.0 cm	R26C	Covered	257.19	107.78	0 000	2	9	0	0	0
11308-00	Shave skin lesion >2.0 cm	R26C	Covered	269.81	120.40	0 000	2	9	0	0	0
11310-00	Shave skin lesion 0.5 cm/<	R26C	Covered	216.57	78.80	0 000	2	9	0	0	0
11311-00	Shave skin lesion 0.6-1.0 cm	R26C	Covered	254.35	108.82	0 000	2	9	0	0	0
11312-00	Shave skin lesion 1.1-2.0 cm	R26C	Covered	288.59	128.83	0 000	2	9	0	0	0
11313-00	Shave skin lesion >2.0 cm	R26C	Covered	333.91	166.39	0 000	2	9	0	0	0
11400-00	Exc tr-ext b9+marg 0.5 cm<	R26C	Covered	239.61	154.23	0 010	2	0	1	0	0
11401-00	Exc tr-ext b9+marg 0.6-1 cm	R26C	Covered	290.06	191.74	0 010	2	0	1	0	0
11402-00	Exc tr-ext b9+marg 1.1-2 cm	R26C	Covered	318.64	208.68	0 010	2	0	1	0	0
11403-00	Exc tr-ext b9+marg 2.1-3cm	R26C	Covered	363.42	268.99	0 010	2	0	1	0	0
11404-00	Exc tr-ext b9+marg 3.1-4 cm	R26C	Covered	408.67	292.24	0 010	2	0	1	0	0
11406-00	Exc tr-ext b9+marg >4.0 cm	R26C	Covered	569.56	431.15	0 010	2	0	1	0	0
11420-00	Exc h-f-nk-sp b9+marg 0.5/<	R26C	Covered	237.06	150.39	0 010	2	0	1	0	0
11421-00	Exc h-f-nk-sp b9+marg 0.6-1	R26C	Covered	295.83	196.87	0 010	2	0	1	0	0
11422-00	Exc h-f-nk-sp b9+marg 1.1-2	R26C	Covered	330.77	246.04	0 010	2	0	1	0	0
11423-00	Exc h-f-nk-sp b9+marg 2.1-3	R26C	Covered	376.79	282.36	0 010	2	0	1	0	0
11424-00	Exc h-f-nk-sp b9+marg 3.1-4	R26C	Covered	432.54	321.29	0 010	2	0	1	0	0
11426-00	Exc h-f-nk-sp b9+marg >4 cm	R26C	Covered	585.95	467.59	0 010	2	0	1	0	0
11440-00	Exc face-mm b9+marg 0.5 cm/<	R26C	Covered	269.37	198.87	0 010	2	0	1	0	0
11441-00	Exc face-mm b9+marg 0.6-1 cm	R26C	Covered	322.26	242.70	0 010	2	0	1	0	0
11442-00	Exc face-mm b9+marg 1.1-2 cm	R26C	Covered	356.44	265.88	0 010	2	0	1	0	0
11443-00	Exc face-mm b9+marg 2.1-3 cm	R26C	Covered	416.68	320.96	0 010	2	0	1	0	0
11444-00	Exc face-mm b9+marg 3.1-4 cm	R26C	Covered	513.54	400.35	0 010	2	0	1	0	0
11446-00	Exc face-mm b9+marg >4 cm	R26C	Covered	688.85	556.90	0 010	2	0	1	0	0
11450-00	Exc skn hrdnt ax smpl/ntrm	R26C	Covered	782.61	456.62	0 090	2	1	1	0	0
11451-00	Exc skn hrdnt ax complex	R26C	Covered	948.34	573.85	0 090	2	1	0	0	0
11462-00	Exc skn hrdnt ing smpl/ntrm	R26C	Covered	763.78	436.50	0 090	2	1	0	0	0
11463-00	Exc skn hrdnt ing complex	R26C	Covered	963.68	579.48	0 090	2	1	0	0	0
11470-00	Exc skn h/p/p/u smpl/ntrm	R26C	Covered	826.05	500.06	0 090	2	0	1	0	0
11471-00	Exc skn h/p/p/u complex	R26C	Covered	990.34	613.26	0 090	2	0	0	0	0
11600-00	Exc tr-ext mal+marg 0.5 cm/<	R26C	Covered	365.30	218.47	0 010	2	0	1	0	0
11601-00	Exc tr-ext mal+marg 0.6-1 cm	R26C	Covered	422.58	264.76	0 010	2	0	1	0	0
11602-00	Exc tr-ext mal+marg 1.1-2 cm	R26C	Covered	452.85	288.56	0 010	2	0	1	0	0
11603-00	Exc tr-ext mal+marg 2.1-3 cm	R26C	Covered	511.28	341.82	0 010	2	0	1	0	0
11604-00	Exc tr-ext mal+marg 3.1-4 cm	R26C	Covered	567.21	373.17	0 010	2	0	1	0	0
11606-00	Exc tr-ext mal+marg >4 cm	R26C	Covered	800.78	540.12	0 010	2	0	1	0	0
11620-00	Exc h-f-nk-sp mal+marg 0.5/<	R26C	Covered	366.60	219.77	0 010	2	0	1	0	0
11621-00	Exc s/n/h/f/g mal+mrg 0.6-1	R26C	Covered	423.23	265.42	0 010	2	0	1	0	0
11622-00	Exc s/n/h/f/g mal+mrg 1.1-2	R26C	Covered	466.72	301.14	0 010	2	0	1	0	0
11623-00	Exc s/n/h/f/g mal+mrg 2.1-3	R26C	Covered	540.18	368.13	0 010	2	0	1	0	0
11624-00	Exc s/n/h/f/g mal+mrg 3.1-4	R26C	Covered	611.20	414.57	0 010	2	0	1	0	0
11626-00	Exc s/n/h/f/g mal+mrg >4 cm	R26C	Covered	725.59	497.91	0 010	2	0	1	0	0
11640-00	Exc f/e/e/n/l mal+mrg 0.5cm<	R26C	Covered	377.38	227.32	0 010	2	0	1	0	0
11641-00	Exc f/e/e/n/l mal+mrg 0.6-1	R26C	Covered	437.16	276.75	0 010	2	0	1	0	0
11642-00	Exc f/e/e/n/l mal+mrg 1.1-2	R26C	Covered	492.01	321.90	0 010	2	0	1	0	0

11643-00	Exc f/e/e/n/l mal+mrg 2.1-3	R26C	Covered	572.24	398.25	0 010	2	0	1	0	0
11644-00	Exc f/e/e/n/l mal+mrg 3.1-4	R26C	Covered	702.65	489.85	0 010	2	0	1	0	0
11646-00	Exc f/e/e/n/l mal+mrg >4 cm	R26C	Covered	897.41	667.15	0 010	2	0	1	0	0
11719-00	Trim nail(s) any number	R26C	Covered	26.55	12.97	0 000	2	0	1	0	0
11720-00	Debride nail 1-5	R26C	Covered	60.99	24.12	0 000	0	0	1	0	0
11721-00	Debride nail 6 or more	R26C	Covered	82.17	40.77	0 000	0	0	1	0	0
11730-00	Removal of nail plate	R26C	Covered	214.30	94.00	0 000	2	0	1	0	0
11732-00	Remove nail plate add-on	R26C	Covered	60.75	29.06	0 ZZZ	0	0	1	0	0
11740-00	Drain blood from under nail	R26C	Covered	109.30	59.50	0 000	2	0	1	0	0
11750-00	Removal of nail bed	R26C	Covered	299.09	183.96	0 010	2	0	1	0	0
11755-00	Biopsy nail unit	R26C	Covered	226.50	105.55	0 000	2	0	0	0	0
11760-00	Repair of nail bed	R26C	Covered	341.87	195.05	0 010	2	0	1	0	0
11762-00	Reconstruction of nail bed	R26C	Covered	528.87	331.60	0 010	2	0	1	0	0
11765-00	Excision of nail fold toe	R26C	Covered	312.65	170.35	0 010	2	0	1	0	0
11770-00	Remove pilonidal cyst simple	R26C	Covered	643.78	315.85	0 010	2	0	1	0	0
11771-00	Remove pilonidal cyst exten	R26C	Covered	1121.21	773.23	0 090	2	0	1	0	0
11772-00	Remove pilonidal cyst compl	R26C	Covered	1376.89	1004.33	0 090	2	0	1	0	0
11900-00	Inject skin lesions </w 7	R26C	Covered	106.27	51.94	0 000	2	0	1	0	0
11901-00	Inject skin lesions >7	R26C	Covered	128.56	79.40	0 000	2	0	1	0	0
11920-00	Correct skin color 6.0 cm/<	R26C	Covered	366.40	196.29	0 000	2	0	0	0	0
11921-00	Correct skn color 6.1-20.0cm	R26C	Covered	402.90	224.38	0 000	2	0	0	0	0
0446T-00	Insj impltbl glucose sensor	NCOV	Not Covered	Code not covered	Code not co	0 000	2	0	1	0	0
0448T-00	Remvl insj impltbl gluc sens	NCOV	Not Covered	Code not covered	Code not co	0 000	2	0	1	0	0
55874-00	Tprnl plmt biodegrdabl matrl	NCOV	Not Covered	Code not covered	Code not co	0 000	2	0	1	1	1
0265U-00	Whole genome and mDNA sequence analysis for detection of abnormalities	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0212U-00	Rare diseases genetic testing of complete DNA of first affected person in family	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
11960-00	Insert tissue expander(s)	R26C	Covered	1812.61	1812.61	0 090	2	0	1	0	0
11970-00	Rplcmt tiss xpndr perm implt	R26C	Covered	983.76	983.76	0 090	2	1	1	0	0
11971-00	Rmvl tis xpndr wo insj implt	R26C	Covered	974.17	974.17	0 090	2	1	0	0	0
11976-00	Remove contraceptive capsule	R26C	Covered	257.72	154.23	0 000	2	0	0	0	0
0295U-00	Protein expression profiling by	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
11981-00	Insertion drug dlvr implant	RMCD	Covered	358.03	334.49	0 000	2	0	0	0	0
11982-00	Remove drug implant device	R26C	Covered	196.41	121.38	0 000	2	0	0	0	0
11983-00	Remove/insert drug implant	RMCD	Covered	381.94	357.84	0 000	2	0	0	0	0
12001-00	Rpr s/n/ax/gen/trnk 2.5cm/<	R26C	Covered	170.82	73.80	0 000	2	0	1	0	0
12002-00	Rpr s/n/ax/gen/trnk2.6-7.5cm	R26C	Covered	204.86	96.20	0 000	2	0	1	0	0
12004-00	Rpr s/n/ax/gen/trk7.6-12.5cm	R26C	Covered	236.36	119.29	0 000	2	0	1	0	0
12005-00	Rpr s/n/a/gen/trk12.6-20.0cm	R26C	Covered	313.72	151.37	0 000	2	0	1	0	0
12006-00	Rpr s/n/a/gen/trk20.1-30.0cm	R26C	Covered	360.92	186.29	0 000	2	0	1	0	0
12007-00	Rpr s/n/ax/gen/trnk >30.0 cm	R26C	Covered	406.02	232.03	0 000	2	0	1	1	0
12011-00	Rpr f/e/e/n/l/m 2.5 cm/<	R26C	Covered	201.85	90.60	0 000	2	0	1	0	0
12013-00	Rpr f/e/e/n/l/m 2.6-5.0 cm	R26C	Covered	208.52	92.75	0 000	2	0	1	0	0
12014-00	Rpr f/e/e/n/l/m 5.1-7.5 cm	R26C	Covered	252.81	119.57	0 000	2	0	1	0	0
12015-00	Rpr f/e/e/n/l/m 7.6-12.5 cm	R26C	Covered	303.98	150.04	0 000	2	0	1	0	0
12016-00	Rpr fe/e/en/l/m 12.6-20.0 cm	R26C	Covered	382.76	203.60	0 000	2	0	1	0	0
12017-00	Rpr fe/e/en/l/m 20.1-30.0 cm	R26C	Covered	243.75	243.75	0 000	2	0	0	0	0
12018-00	Rpr f/e/e/n/l/m >30.0 cm	R26C	Covered	274.79	274.79	0 000	2	0	2	0	0
12020-00	Tx supfc wnd dehsn simpl clsr	R26C	Covered	548.46	330.49	0 010	2	0	1	0	0
12021-00	Tx supfc wnd dehsn w/packing	R26C	Covered	320.08	248.93	0 010	2	0	1	0	0
12031-00	Intmd rpr s/a/t/ext 2.5 cm/<	R26C	Covered	488.83	270.85	0 010	2	0	1	0	0
12032-00	Intmd rpr s/a/t/ext 2.6-7.5	R26C	Covered	563.96	341.46	0 010	2	0	1	0	0
12034-00	Intmd rpr s/tr/ext 7.6-12.5	R26C	Covered	615.76	362.21	0 010	2	0	1	0	0

12035-00	Intmd rpr s/a/t/ext 12.6-20	R26C	Covered	705.97	416.85	0 010	2	0	1	0	0
12036-00	Intmd rpr s/a/t/ext 20.1-30	R26C	Covered	774.80	478.57	0 010	2	0	1	0	0
12037-00	Intmd rpr s/tr/ext >30.0 cm	R26C	Covered	865.14	553.38	0 010	2	0	0	1	0
12041-00	Intmd rpr n-hf/genit 2.5cm/<	R26C	Covered	489.13	257.58	0 010	2	0	1	0	0
12042-00	Intmd rpr n-hf/genit2.6-7.5	R26C	Covered	572.79	348.35	0 010	2	0	1	0	0
12044-00	Intmd rpr n-hf/genit7.6-12.5	R26C	Covered	705.04	375.82	0 010	2	0	1	0	0
12045-00	Intmd rpr n-hf/genit12.6-20	R26C	Covered	748.61	475.67	0 010	2	0	1	0	0
12046-00	Intmd rpr n-hf/genit20.1-30	R26C	Covered	890.79	535.70	0 010	2	0	0	0	0
12047-00	Intmd rpr n-hf/genit >30.0cm	R26C	Covered	971.75	591.43	0 010	2	0	2	1	0
12051-00	Intmd rpr face/mm 2.5 cm/<	R26C	Covered	524.04	300.90	0 010	2	0	1	0	0
12052-00	Intmd rpr face/mm 2.6-5.0 cm	R26C	Covered	581.63	353.96	0 010	2	0	1	0	0
12053-00	Intmd rpr face/mm 5.1-7.5 cm	R26C	Covered	670.60	380.19	0 010	2	0	1	0	0
12054-00	Intmd rpr face/mm 7.6-12.5cm	R26C	Covered	699.63	381.41	0 010	2	0	1	0	0
12055-00	Intmd rpr face/mm 12.6-20 cm	R26C	Covered	912.48	519.23	0 010	2	0	1	0	0
12056-00	Intmd rpr face/mm 20.1-30.0	R26C	Covered	1047.29	665.67	0 010	2	0	0	0	0
12057-00	Intmd rpr face/mm >30.0 cm	R26C	Covered	1088.55	722.46	0 010	2	0	2	1	0
13100-00	Cmplx rpr trunk 1.1-2.5 cm	R26C	Covered	627.19	352.30	0 010	2	0	1	0	0
13101-00	Cmplx rpr trunk 2.6-7.5 cm	R26C	Covered	731.50	437.21	0 010	2	0	1	0	0
13102-00	Cmplx rpr trunk addl 5cm/<	R26C	Covered	208.90	120.94	0 ZZZ	0	0	1	0	0
13120-00	Cmplx rpr s/a/l 1.1-2.5 cm	R26C	Covered	652.90	410.35	0 010	2	0	1	0	0
13121-00	Cmplx rpr s/a/l 2.6-7.5 cm	R26C	Covered	781.53	452.96	0 010	2	0	1	0	0
13122-00	Cmplx rpr s/a/l addl 5 cm/>	R26C	Covered	226.97	139.66	0 ZZZ	0	0	1	0	0
13131-00	Cmplx rpr f/c/c/m/n/ax/g/h/f	R26C	Covered	711.39	424.21	0 010	2	0	1	0	0
13132-00	Cmplx rpr f/c/c/m/n/ax/g/h/f	R26C	Covered	861.66	530.49	0 010	2	0	1	0	0
13133-00	Cmplx rpr f/c/c/m/n/ax/g/h/f	R26C	Covered	300.05	214.68	0 ZZZ	0	0	1	0	0
13151-00	Cmplx rpr e/n/e/l 1.1-2.5 cm	R26C	Covered	771.48	486.24	0 010	2	0	1	0	0
13152-00	Cmplx rpr e/n/e/l 2.6-7.5 cm	R26C	Covered	903.33	585.10	0 010	2	0	1	0	0
13153-00	Cmplx rpr e/n/e/l addl 5cm/<	R26C	Covered	326.86	230.48	0 ZZZ	0	0	1	0	0
13160-00	Sec clsr surg wnd/dehnsn xtn	R26C	Covered	1374.11	1374.11	0 090	2	0	1	0	0
14000-00	Tis trnfr trunk 10 sq cm/<	R26C	Covered	1149.94	889.93	0 090	2	0	1	0	0
14001-00	Tis trnfr trunk 10.1-30sqcm	R26C	Covered	1450.17	1138.42	0 090	2	0	1	0	0
14020-00	Tis trnfr s/a/l 10 sq cm/<	R26C	Covered	1282.68	1012.31	0 090	2	0	1	0	0
14021-00	Tis trnfr s/a/l 10.1-30 sqcm	R26C	Covered	1571.91	1256.28	0 090	2	0	1	0	0
14040-00	Tis trnfr f/c/c/m/n/a/g/h/f	R26C	Covered	1381.76	1110.75	0 090	2	0	1	0	0
14041-00	Tis trnfr f/c/c/m/n/a/g/h/f	R26C	Covered	1676.80	1354.69	0 090	2	0	1	0	0
14060-00	Tis trnfr e/n/e/l 10 sq cm/<	R26C	Covered	1393.63	1186.00	0 090	2	0	1	0	0
14061-00	Tis trnfr e/n/e/l10.1-30sqcm	R26C	Covered	1811.21	1455.47	0 090	2	0	1	0	0
14301-00	Tis trnfr any 30.1-60 sq cm	R26C	Covered	1935.65	1512.64	0 090	2	0	2	0	0
14302-00	Tis trnfr addl 30 sq cm	R26C	Covered	358.63	358.63	0 ZZZ	0	0	2	0	0
14350-00	Filletted finger/toe flap	R26C	Covered	1200.90	1200.90	0 090	2	0	0	0	0
15002-00	Wound prep trk/arm/leg	R26C	Covered	612.39	368.55	0 000	0	0	0	0	0
15003-00	Wound prep addl 100 cm	R26C	Covered	120.62	72.76	0 ZZZ	0	0	0	0	0
15004-00	Wound prep f/n/hf/g	R26C	Covered	705.59	443.64	0 000	0	0	0	0	0
15005-00	Wnd prep f/n/hf/g addl cm	R26C	Covered	199.06	146.02	0 ZZZ	0	0	0	0	0
15040-00	Harvest cultured skin graft	R26C	Covered	475.90	210.71	0 000	0	0	1	0	0
15050-00	Pinch graft up to 2 cm diam	R26C	Covered	1060.60	809.00	0 090	2	0	1	0	0
15100-00	Skin splt grft trnk/arm/leg	R26C	Covered	1535.74	1236.91	0 090	2	0	1	0	0
15101-00	Skin splt grft t/a/l add-on	R26C	Covered	330.12	183.95	0 ZZZ	0	0	1	0	0
15110-00	Epidrm autogrft trnk/arm/leg	R26C	Covered	1452.81	1220.61	0 090	2	0	1	0	0
15111-00	Epidrm autogrft t/a/l add-on	R26C	Covered	186.86	162.93	0 ZZZ	0	0	1	0	0
15115-00	Epidrm a-grft face/nck/hf/g	R26C	Covered	1424.68	1203.47	0 090	2	0	1	0	0
15116-00	Epidrm a-grft f/n/hf/g addl	R26C	Covered	254.15	223.10	0 ZZZ	0	0	1	1	0
15120-00	Skn splt a-grft fac/nck/hf/g	R26C	Covered	1507.02	1201.08	0 090	2	0	1	0	0
15121-00	Skn splt a-grft f/n/hf/g add	R26C	Covered	369.23	221.76	0 ZZZ	0	0	1	1	0

15130-00	Derm autograft trnk/arm/leg	R26C	Covered	1288.24	1049.57	0 090	2	0	1	0	0
15131-00	Derm autograft t/a/l add-on	R26C	Covered	166.18	149.36	0 ZZZ	0	0	1	1	0
15135-00	Derm autograft face/nck/hf/g	R26C	Covered	1558.74	1333.01	0 090	2	0	1	0	0
15136-00	Derm autograft f/n/hf/g add	R26C	Covered	163.59	149.36	0 ZZZ	0	0	1	1	0
15150-00	Cult skin grft t/arm/leg	R26C	Covered	1192.01	1063.94	0 090	2	0	1	0	0
15151-00	Cult skin grft t/a/l addl	R26C	Covered	190.58	171.18	0 ZZZ	0	0	1	0	0
15152-00	Cult skin graft t/a/l +%	R26C	Covered	244.30	226.19	0 ZZZ	0	0	1	0	0
15155-00	Cult skin graft f/n/hf/g	R26C	Covered	1392.82	1262.81	0 090	2	0	1	0	0
15156-00	Cult skin grft f/n/hfg add	R26C	Covered	255.22	235.82	0 ZZZ	0	0	1	1	0
15157-00	Cult epiderm grft f/n/hfg +%	R26C	Covered	284.93	257.11	0 ZZZ	0	0	1	1	0
15200-00	Fth grf fr trnk 20 sq cm/<	R26C	Covered	1503.06	1175.13	0 090	2	0	1	0	0
15201-00	Fth grf fr trnk each addl	R26C	Covered	250.87	126.68	0 ZZZ	0	0	1	0	0
15220-00	Fth grf fr s/a/l 20 sq cm/<	R26C	Covered	1398.31	1083.32	0 090	2	0	1	0	0
15221-00	Fth grf fr s/a/l each addl	R26C	Covered	233.08	115.36	0 ZZZ	0	0	1	0	0
15240-00	Fth gr fr f/c/c/m/n/ax/g/h/f	R26C	Covered	1684.73	1420.19	0 090	2	0	1	0	0
15241-00	Fth gr f/c/c/m/n/ax/g/h/f ea	R26C	Covered	312.43	179.84	0 ZZZ	0	0	1	0	0
15260-00	Fth grf fr n/e/e/l 20 sqcm/<	R26C	Covered	1818.11	1510.88	0 090	2	0	1	0	0
15261-00	Fth grf fr n/e/e/l each addl	R26C	Covered	368.65	231.53	0 ZZZ	0	0	1	0	0
15271-00	Skin sub graft trnk/arm/leg	R26C	Covered	280.43	142.66	0 000	2	0	1	0	0
15272-00	Skin sub graft t/a/l add-on	R26C	Covered	43.58	28.05	0 ZZZ	0	0	1	0	0
15273-00	Skin sub grft t/arm/lg child	R26C	Covered	546.91	323.11	0 000	2	0	1	0	0
15274-00	Skn sub grft t/a/l child add	R26C	Covered	143.86	72.06	0 ZZZ	0	0	1	0	0
15275-00	Skin sub graft face/nk/hf/g	R26C	Covered	289.99	160.63	0 000	2	0	1	0	0
15276-00	Skin sub graft f/n/hf/g addl	R26C	Covered	56.59	41.72	0 ZZZ	0	0	1	0	0
15277-00	Skn sub grft f/n/hf/g child	R26C	Covered	602.25	368.76	0 000	2	0	1	1	0
15278-00	Skn sub grft f/n/hf/g ch add	R26C	Covered	167.80	90.83	0 ZZZ	0	0	1	1	0
15570-00	Skin pedicle flap trunk	R26C	Covered	1605.31	1257.33	0 090	2	0	1	0	0
15572-00	Skin pedicle flap arms/legs	R26C	Covered	1571.73	1285.85	0 090	2	0	1	0	0
15574-00	Pedcle fh/ch/ch/m/n/ax/g/h/f	R26C	Covered	1583.14	1295.96	0 090	2	0	1	0	0
15576-00	Pedicle e/n/e/l/ntroral	R26C	Covered	1413.82	1150.58	0 090	2	0	1	0	0
15600-00	Delay flap trunk	R26C	Covered	631.00	385.86	0 090	2	0	0	0	0
15610-00	Delay flap arms/legs	R26C	Covered	682.43	441.82	0 090	2	0	0	0	0
15620-00	Delay flap f/c/c/n/ax/g/h/f	R26C	Covered	823.82	588.38	0 090	2	0	1	0	0
15630-00	Delay flap eye/nos/ear/lip	R26C	Covered	854.08	621.88	0 090	2	0	1	0	0
15650-00	Transfer skin pedicle flap	R26C	Covered	986.19	717.12	0 090	2	0	0	0	0
15730-00	Mdfc flap w/prsrv vasc pedcl	R26C	Covered	2613.69	1625.38	0 090	2	0	1	1	0
15731-00	Forehead flap w/vasc pedicle	R26C	Covered	1997.43	1748.41	0 090	2	0	0	0	0
15733-00	Musc myoq/fscq flp h&n pedcl	R26C	Covered	1780.70	1780.70	0 090	2	0	1	1	0
15734-00	Muscle-skin graft trunk	R26C	Covered	2522.90	2522.90	0 090	2	0	2	1	0
15736-00	Muscle-skin graft arm	R26C	Covered	2098.59	2098.59	0 090	2	0	1	1	0
15738-00	Muscle-skin graft leg	R26C	Covered	2162.25	2162.25	0 090	2	0	2	1	0
15740-00	Island pedicle flap graft	R26C	Covered	1820.16	1481.24	0 090	2	0	1	0	0
15750-00	Neurovascular pedicle flap	R26C	Covered	1612.84	1612.84	0 090	2	0	2	0	0
15756-00	Free myo/skin flap microvasc	R26C	Covered	3902.59	3902.59	0 090	2	0	2	2	0
15757-00	Free skin flap microvasc	R26C	Covered	3885.86	3885.86	0 090	2	0	2	2	0
15758-00	Free fascial flap microvasc	R26C	Covered	3872.92	3872.92	0 090	2	0	2	2	0
15760-00	Composite skin graft	R26C	Covered	1527.43	1235.73	0 090	2	0	1	0	0
15769-00	Grfg autol soft tiss dir exc	R26C	Covered	834.95	834.95	0 090	2	0	1	0	0
15770-00	Derma-fat-fascia graft	R26C	Covered	1191.75	1191.75	0 090	2	0	2	1	0
15771-00	Grfg autol fat lipo 50 cc/<	R26C	Covered	1090.84	897.45	0 090	2	0	1	0	0
15772-00	Grfg autol fat lipo ea addl	R26C	Covered	334.57	247.90	0 ZZZ	0	0	1	0	0
15773-00	Grfg autol fat lipo 25 cc/<	R26C	Covered	1066.14	880.51	0 090	2	0	1	0	0
15774-00	Grfg autol fat lipo ea addl	R26C	Covered	325.78	239.75	0 ZZZ	0	0	1	0	0

0214U-00	Rare diseases genetic testing of protein coding genes of first affected person	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0335U-00	Whole genome sequence analysis of fetal sample for detection of abnormalities	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
15777-00	Acellular derm matrix implt	R26C	Covered	355.20	355.20	0 ZZZ	0	1	1	0	0
15778-00	Impl absrb msh/prsth dly cls	R26C	Covered	618.53	618.53	0 000	2	0	2	1	0
15780-00	Dermabrasion total face	R26C	Covered	1560.12	1199.85	0 090	2	0	0	0	0
15781-00	Dermabrasion segmental face	R26C	Covered	977.53	765.38	0 090	2	0	1	0	0
15782-00	Dermabrasion other than face	R26C	Covered	902.01	675.63	0 090	2	0	0	0	0
15783-00	Dermabrasion suprfl any site	R26C	Covered	834.17	647.89	0 090	2	0	0	0	0
15786-00	Abrasion lesion single	R26C	Covered	424.39	239.40	0 010	2	0	1	0	0
15787-00	Abrasion lesions add-on	R26C	Covered	55.73	29.21	0 ZZZ	0	0	1	0	0
15788-00	Chemical peel face epiderm	R26C	Covered	736.15	400.46	0 090	2	0	1	0	0
15789-00	Chemical peel face dermal	R26C	Covered	985.43	746.11	0 090	2	0	1	0	0
15792-00	Chemical peel nonfacial	R26C	Covered	632.27	389.72	0 090	2	0	0	0	0
15793-00	Chemical peel nonfacial	R26C	Covered	880.84	650.57	0 090	2	0	0	0	0
0242U-00	Gene analysis of 55-74 genes associated with solid organ cancer in cell-free	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0108U-00	Computer-assisted digital imaging of esophagus specimen slides to evaluate risk	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0261U-00	Image analysis with artificial intelligence assessment of 4 cellular and immune	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
15822-00	Revision of upper eyelid	R26C	Covered	850.50	726.31	0 090	2	1	1	0	0
15823-00	Revision of upper eyelid	R26C	Covered	1147.57	1006.57	0 090	2	1	1	0	0
30468-00	Rpr nsl vlv collapse w/implt	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	2	1	0	0
0036U-00	Exome gene analysis for somatic mutation in tumor	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
53860-00	Transurethral rf treatment	NCOV	Not Covered	Code not covered	Code not covered	0 090	2	0	0	0	0
19105-00	Cryosurg ablate fa each	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	1	1	0	0
0300U-00	Whole genome sequencing and optical genome mapping of paired tumor and normal	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
15830-00	Exc skin abd	R26C	Covered	2006.66	2006.66	0 090	2	0	2	1	0
0045U-00	mRNA gene analysis of 12 genes in breast ductal carcinoma in situ tumor tissue	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0288U-00	PCR measurement of 11 genes (BAG1, BRCA1, CDC6, CDK2AP1, ERBB3, FUT3, IL11,	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0019U-00	RNA gene analysis of tumor tissue	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0287U-00	Next-generation DNA and RNA sequencing of 112 genes in tumor specimen, with	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0037U-00	DNA gene analysis of 324 genes in solid organ tumor	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0239U-00	Gene analysis of 311 or more genes associated with	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0244U-00	Gene analysis of 257 genes associated with solid organ cancer in tumor tissue	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
15839-00	Excise excess skin & tissue	R26C	Covered	1583.85	1283.08	0 090	2	0	0	0	0
15840-00	Nerve palsy fascial graft	R26C	Covered	1767.39	1767.39	0 090	2	0	1	0	0
15841-00	Nerve palsy muscle graft	R26C	Covered	3057.58	3057.58	0 090	2	0	2	1	0
15842-00	Nerve palsy microsurg graft	R26C	Covered	4597.54	4597.54	0 090	2	0	2	1	0
15845-00	Skin and muscle repair face	R26C	Covered	1851.11	1851.11	0 090	2	0	2	0	0
0055U-00	DNA gene analysis of 96 target sequences in plasma	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
15851-00	Removal sutr/staple req anes	R26C	Covered	98.47	114.64	0 000	2	0	1	0	0
15852-00	Dressing change not for burn	R26C	Covered	74.27	74.27	0 000	2	0	1	0	0
15853-00	Removal sutr/staplr req anes	R26C	Covered	22.04	22.04	5 ZZZ	0	0	1	0	0
15854-00	Removal sutr&staplr req anes	R26C	Covered	29.85	29.85	5 ZZZ	0	0	1	0	0
15860-00	Test for blood flow in graft	R26C	Covered	174.59	174.59	0 000	2	0	0	0	0

mRNA gene expression profiling of 7 gene pathways											
0262U-00	in solid organ tumor tissue	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
93620-26	Electrophysiology evaluation	RCMS	Covered	989.22	989.22	1 000	2	0	0	0	0
93597-26	R&l hrt cath chd abnl nt cnj	RCMS	Covered	744.88	744.88	1 000	2	0	0	0	0
Gene expression profiling by whole transcriptome											
0266U-00	and next-generation sequencing	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
15920-00	Removal of tail bone ulcer	R26C	Covered	1086.48	1086.48	0 090	2	0	0	0	0
15922-00	Removal of tail bone ulcer	R26C	Covered	1398.59	1398.59	0 090	2	0	2	1	0
15931-00	Remove sacrum pressure sore	R26C	Covered	1192.45	1192.45	0 090	2	0	1	0	0
15933-00	Remove sacrum pressure sore	R26C	Covered	1498.11	1498.11	0 090	2	0	0	0	0
15934-00	Remove sacrum pressure sore	R26C	Covered	1710.75	1710.75	0 090	2	0	1	0	0
15935-00	Remove sacrum pressure sore	R26C	Covered	2010.88	2010.88	0 090	2	0	2	1	0
15936-00	Remove sacrum pressure sore	R26C	Covered	1524.17	1524.17	0 090	2	0	1	1	0
15937-00	Remove sacrum pressure sore	R26C	Covered	1771.63	1771.63	0 090	2	0	1	1	0
15940-00	Remove hip pressure sore	R26C	Covered	1209.95	1209.95	0 090	2	0	1	0	0
15941-00	Remove hip pressure sore	R26C	Covered	1614.23	1614.23	0 090	2	0	0	0	0
15944-00	Remove hip pressure sore	R26C	Covered	1632.95	1632.95	0 090	2	0	0	0	0
15945-00	Remove hip pressure sore	R26C	Covered	1779.73	1779.73	0 090	2	0	0	0	0
15946-00	Remove hip pressure sore	R26C	Covered	2743.51	2743.51	0 090	2	0	1	1	0
15950-00	Remove thigh pressure sore	R26C	Covered	1121.83	1121.83	0 090	2	0	1	0	0
15951-00	Remove thigh pressure sore	R26C	Covered	1577.39	1577.39	0 090	2	0	0	1	0
15952-00	Remove thigh pressure sore	R26C	Covered	1599.73	1599.73	0 090	2	0	2	1	0
15953-00	Remove thigh pressure sore	R26C	Covered	1761.48	1761.48	0 090	2	0	1	1	0
15956-00	Remove thigh pressure sore	R26C	Covered	2024.61	2024.61	0 090	2	0	1	1	0
15958-00	Remove thigh pressure sore	R26C	Covered	2019.98	2019.98	0 090	2	0	1	1	0
95965-26	Meg spontaneous	RCMS	Covered	728.54	728.54	1 XXX	0	0	0	0	0
16000-00	Initial treatment of burn(s)	R26C	Covered	143.37	76.10	0 000	2	0	1	0	0
16020-00	Dress/debrid p-thick burn s	R26C	Covered	157.56	98.70	0 000	2	0	1	0	0
16025-00	Dress/debrid p-thick burn m	R26C	Covered	282.41	191.85	0 000	2	0	1	0	0
16030-00	Dress/debrid p-thick burn l	R26C	Covered	350.90	222.19	0 000	2	0	1	0	0
16035-00	Incision of burn scab initi	R26C	Covered	326.52	326.52	0 000	2	0	1	0	0
16036-00	Escharotomy addl incision	R26C	Covered	132.83	132.83	0 ZZZ	0	0	1	0	0
17000-00	Destruct premalg lesion	R26C	Covered	125.97	101.39	0 010	2	0	1	0	0
17003-00	Destruct premalg les 2-14	R26C	Covered	12.78	3.72	0 ZZZ	0	0	1	0	0
17004-00	Destroy premal lesions 15/>	R26C	Covered	311.65	176.47	0 010	0	0	1	0	0
17106-00	Destruction of skin lesions	R26C	Covered	632.49	497.31	0 090	2	0	1	0	0
17107-00	Destruction of skin lesions	R26C	Covered	822.07	648.73	0 090	2	0	1	0	0
17108-00	Destruction of skin lesions	R26C	Covered	1148.94	934.84	0 090	2	0	0	0	0
17110-00	Destruct b9 lesion 1-14	R26C	Covered	214.92	126.96	0 010	2	0	1	0	0
17111-00	Destruct lesion 15 or more	R26C	Covered	249.59	152.57	0 010	2	0	1	0	0
17250-00	Chem caut of granltj tissue	R26C	Covered	162.71	66.34	0 000	2	0	1	0	0
17260-00	Dstrj mal les t/a/l 0.5 cm/<	R26C	Covered	184.95	127.38	0 010	2	0	1	0	0
17261-00	Dstrj mal les t/a/l .6-1.0cm	R26C	Covered	277.21	156.91	0 010	2	0	1	0	0
17262-00	Dstrj mal les t/a/l 1.1-2.0	R26C	Covered	331.43	197.54	0 010	2	0	1	0	0
17263-00	Dstrj mal les t/a/l 2.1-3.0	R26C	Covered	357.87	218.16	0 010	2	0	1	0	0
17264-00	Dstrj mal les t/a/l 3.1-4.0	R26C	Covered	383.25	232.54	0 010	2	0	1	0	0
17266-00	Dstrj mal les t/a/l >4.0 cm	R26C	Covered	434.27	271.92	0 010	2	0	1	0	0
17270-00	Dstr mal les s/n/h/f/g .5 /<	R26C	Covered	278.02	171.29	0 010	2	0	1	0	0
17271-00	Dstr mal les s/n/h/f/g 0.6-1	R26C	Covered	309.09	188.14	0 010	2	0	1	0	0
17272-00	Dstr mal les s/n/h/f/g 1.1-2	R26C	Covered	349.54	216.30	0 010	2	0	1	0	0
17273-00	Dstr mal les s/n/h/f/g 2.1-3	R26C	Covered	386.75	243.80	0 010	2	0	1	0	0
17274-00	Dstr mal les s/n/h/f/g 3.1-4	R26C	Covered	450.20	296.91	0 010	2	0	1	0	0
17276-00	Dstr mal les s/n/h/f/g >4.0	R26C	Covered	519.35	356.36	0 010	2	0	1	0	0
17280-00	Dstr mal ls f/e/n/l/m .5/<	R26C	Covered	262.34	156.26	0 010	2	0	1	0	0

17281-00	Dstr mal ls f/e/e/n/l/m .6-1	R26C	Covered	332.92	210.67	0 010	2	0	1	0	0
17282-00	Dstr mal ls f/e/e/n/l/m1.1-2	R26C	Covered	379.67	242.55	0 010	2	0	1	0	0
17283-00	Dstr mal ls f/e/e/n/l/m2.1-3	R26C	Covered	446.22	301.99	0 010	2	0	1	0	0
17284-00	Dstr mal ls f/e/e/n/l/m3.1-4	R26C	Covered	505.27	350.68	0 010	2	0	1	0	0
17286-00	Dstr mal ls f/e/e/n/l/m>4.0	R26C	Covered	644.48	475.02	0 010	2	0	1	0	0
17311-00	Mohs 1 stage h/n/hf/g	R26C	Covered	1260.15	617.87	0 000	2	0	1	0	0
17312-00	Mohs addl stage	R26C	Covered	768.82	328.35	0 ZZZ	0	0	1	0	0
17313-00	Mohs 1 stage t/a/l	R26C	Covered	1186.68	554.11	0 000	2	0	1	0	0
17314-00	Mohs addl stage t/a/l	R26C	Covered	737.92	304.56	0 ZZZ	0	0	1	0	0
17315-00	Mohs surg addl block	R26C	Covered	146.44	86.94	0 ZZZ	0	0	1	0	0
17340-00	Cryotherapy of skin	R26C	Covered	93.79	86.68	0 010	2	0	1	0	0
	mRNA gene expression profiling of genes in heart										
0087U-00	transplant biopsy tissue to	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
17380-00	Hair removal by electrolysis	Other	Covered	100.00	100.00	0 000	2	0	0	0	0
93631-26	Heart pacing mapping	RCMS	Covered	621.22	621.22	1 000	0	0	0	0	0
19000-00	Puncture aspir cyst breast	R26C	Covered	184.81	70.98	0 000	2	0	1	0	0
19001-00	Puncture aspir cyst brst ea	R26C	Covered	46.46	35.47	0 ZZZ	0	0	1	0	0
19020-00	Mastotomy expl drg absc dp	R26C	Covered	846.45	545.04	0 090	2	1	1	0	0
19030-00	Njx px only mam ducto/glcto	R26C	Covered	302.62	129.27	0 000	2	1	1	0	0
19081-00	Bx breast 1st lesion strtctc	R26C	Covered	927.88	277.20	0 000	2	1	0	0	0
19082-00	Bx breast addl lesion strtctc	R26C	Covered	721.37	138.60	0 ZZZ	0	0	0	0	0
19083-00	Bx breast 1st lesion us imag	R26C	Covered	925.38	261.12	0 000	2	1	0	0	0
19084-00	Bx breast addl lesion us imag	R26C	Covered	710.72	130.54	0 ZZZ	0	0	0	0	0
19085-00	Bx breast 1st lesion mr imag	R26C	Covered	1432.31	306.23	0 000	2	1	0	0	0
19086-00	Bx breast addl lesion mr imag	R26C	Covered	1116.50	152.77	0 ZZZ	0	0	0	0	0
19100-00	Bx breast percut w/o image	R26C	Covered	266.22	109.70	0 000	2	1	1	0	0
19101-00	Biopsy of breast open	R26C	Covered	579.07	375.97	0 010	2	1	1	0	0
	mRNA gene expression profiling of genes in kidney										
0088U-00	transplant tissue to evaluate	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
19110-00	Nipple exploration	R26C	Covered	865.76	606.39	0 090	2	1	1	0	0
19112-00	Excise breast duct fistula	R26C	Covered	827.36	561.53	0 090	2	1	0	0	0
19120-00	Removal of breast lesion	R26C	Covered	906.17	707.60	0 090	2	1	1	0	0
19125-00	Excision breast lesion	R26C	Covered	993.46	778.08	0 090	2	1	1	1	0
19126-00	Excision addl breast lesion	R26C	Covered	252.72	252.72	0 ZZZ	0	0	1	1	0
19281-00	Perq device breast 1st imag	R26C	Covered	447.75	168.33	0 000	2	1	0	0	0
19282-00	Perq device breast ea imag	R26C	Covered	320.57	84.49	0 ZZZ	0	0	0	0	0
19283-00	Perq dev breast 1st strtctc	R26C	Covered	479.58	168.47	0 000	2	1	0	0	0
19284-00	Perq dev breast addl strtctc	R26C	Covered	354.95	83.94	0 ZZZ	0	0	0	0	0
19285-00	Perq dev breast 1st us imag	R26C	Covered	688.83	142.93	0 000	2	1	0	0	0
19286-00	Perq dev breast add us imag	R26C	Covered	567.59	71.49	0 ZZZ	0	0	0	0	0
19287-00	Perq dev breast 1st mr guide	R26C	Covered	1193.54	214.93	0 000	2	1	0	0	0
19288-00	Perq dev breast add mr guide	R26C	Covered	925.62	107.42	0 ZZZ	0	0	0	0	0
19294-00	Prepj tum cav iort prtl mast	R26C	Covered	259.61	259.61	0 ZZZ	0	0	0	0	0
19296-00	Place po breast cath for rad	R26C	Covered	6901.14	338.06	0 000	2	1	0	0	0
19297-00	Place breast cath for rad	R26C	Covered	148.56	148.56	0 ZZZ	0	0	0	0	0
19298-00	Place breast rad tube/caths	R26C	Covered	1635.50	561.81	0 000	2	1	0	0	0
19300-00	Removal of breast tissue	R26C	Covered	1031.01	750.30	0 090	2	1	1	0	0
19301-00	Partial mastectomy	R26C	Covered	1096.04	1096.04	0 090	2	1	0	0	0
19302-00	P-mastectomy w/ln removal	R26C	Covered	1502.79	1502.79	0 090	2	1	2	1	0
19303-00	Mast simple complete	R26C	Covered	1583.37	1583.37	0 090	2	1	2	1	0
19305-00	Mast radical	R26C	Covered	1907.91	1907.91	0 090	2	1	2	1	0
19306-00	Mast rad urban type	R26C	Covered	2030.06	2030.06	0 090	2	1	2	1	0
19307-00	Mast mod rad	R26C	Covered	1956.35	1956.35	0 090	2	1	2	1	0

mRNA gene expression profiling of 101 genes in											
0153U-00	breast growth tissue specimen	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
19318-00	Breast reduction	R26C	Covered	1881.02	1881.02	0 090	2	1	2	1	0
19325-00	Breast augmentation w/implt	R26C	Covered	1078.24	1078.24	0 090	2	1	0	0	0
19328-00	Rmvl intact breast implant	R26C	Covered	966.63	966.63	0 090	2	1	1	0	0
19330-00	Rmvl ruptured breast implant	R26C	Covered	1121.02	1121.02	0 090	2	1	1	0	0
19340-00	Insj breast implt sm d mast	R26C	Covered	1314.82	1314.82	0 090	2	1	1	1	0
19342-00	Insj/rplcmt brst implt sep d	R26C	Covered	1325.30	1325.30	0 090	2	1	0	1	0
19350-00	Breast reconstruction	R26C	Covered	1482.76	1174.88	0 090	2	1	1	0	0
19355-00	Correct inverted nipple(s)	R26C	Covered	1344.74	1075.02	0 090	2	1	0	0	0
19357-00	Tiss xpndr plmt brst rcnstj	R26C	Covered	2032.79	2032.79	0 090	2	1	2	1	0
19361-00	Brst rcnstj latsms drsi flap	R26C	Covered	2666.69	2666.69	0 090	2	1	2	1	0
19364-00	Brst rcnstj free flap	R26C	Covered	4606.94	4606.94	0 090	2	1	2	1	0
19367-00	Brst rcnstj 1 pdcl tram flap	R26C	Covered	3026.02	3026.02	0 090	2	1	2	1	0
19368-00	Brst rcnstj 1pdcl tram anast	R26C	Covered	3683.69	3683.69	0 090	2	1	2	1	0
19369-00	Brst rcnstj 2 pdcl tram flap	R26C	Covered	3426.34	3426.34	0 090	2	1	2	1	0
19370-00	Revj peri-implt capsule brst	R26C	Covered	1171.46	1171.46	0 090	2	1	1	0	0
19371-00	Peri-implt capslc brst compl	R26C	Covered	1235.63	1235.63	0 090	2	1	1	0	0
19380-00	Revj reconstructed breast	R26C	Covered	1404.07	1404.07	0 090	2	1	1	0	0
19396-00	Design custom breast implant	R26C	Covered	495.98	243.73	0 000	2	1	0	0	0
93596-26	R&I hrt cath chd nml nt cnj	RCMS	Covered	571.31	571.31	1 000	2	0	0	0	0
20100-00	Explore wound neck	R26C	Covered	990.58	990.58	0 010	2	1	2	0	0
20101-00	Explore wound chest	R26C	Covered	1053.36	345.11	0 010	2	0	1	0	0
20102-00	Explore wound abdomen	R26C	Covered	1115.77	424.99	0 010	2	0	1	0	0
20103-00	Explore wound extremity	R26C	Covered	1014.38	588.78	0 010	2	0	0	0	0
20150-00	Excise epiphyseal bar	R26C	Covered	1718.68	1718.68	0 090	2	1	2	1	0
20200-00	Muscle biopsy superficial	R26C	Covered	392.54	157.10	0 000	2	0	1	0	0
20205-00	Deep muscle biopsy	R26C	Covered	543.08	252.66	0 000	2	0	1	0	0
20206-00	Biopsy muscle perq needle	R26C	Covered	413.80	99.45	0 000	2	0	1	0	0
20220-00	Bone biopsy trocar/ndl supfc	R26C	Covered	432.20	150.20	0 000	2	0	1	0	0
20225-00	Bone biopsy trocar/ndl deep	R26C	Covered	707.63	221.88	0 000	2	0	1	0	0
20240-00	Bone biopsy open superficial	R26C	Covered	242.19	242.19	0 000	2	0	1	0	0
20245-00	Bone biopsy open deep	R26C	Covered	576.60	576.60	0 000	2	0	1	0	0
20250-00	Biopsy vrt bdy open thoracic	R26C	Covered	657.41	657.41	0 010	2	0	1	0	0
20251-00	Biopsy vrt bdy open lmrbr/crv	R26C	Covered	705.39	705.39	0 010	2	0	2	0	0
20500-00	Injection of sinus tract	R26C	Covered	227.27	160.00	0 010	2	0	1	0	0
20501-00	Injct sinus tract for x-ray	R26C	Covered	266.43	62.05	0 000	2	0	1	0	0
20520-00	Removal of foreign body	R26C	Covered	400.79	264.32	0 010	2	0	1	0	0
20525-00	Removal of foreign body	R26C	Covered	848.90	428.48	0 010	2	0	1	0	0
20526-00	Ther injection carp tunnel	R26C	Covered	146.55	96.10	0 000	2	1	1	0	0
20527-00	Inj dupuytren cord w/enzyme	R26C	Covered	155.46	112.13	0 000	2	1	1	0	0
20550-00	Inj tendon sheath/ligament	R26C	Covered	103.62	66.11	0 000	2	1	1	0	0
20551-00	Inj tendon origin/insertion	R26C	Covered	103.57	66.06	0 000	2	0	1	0	0
20552-00	Inj trigger point 1/2 muscl	R26C	Covered	94.82	63.78	0 000	2	0	1	0	0
20553-00	Injct trigger points 3/>	R26C	Covered	109.40	72.53	0 000	2	0	1	0	0
20555-00	Place ndl musc/tis for rt	R26C	Covered	595.21	595.21	0 000	2	0	0	0	0
20560-00	Ndl insj w/o njx 1 or 2 musc	R26C	Covered	47.96	26.61	0 XXX	0	0	1	0	0
20561-00	Ndl insj w/o njx 3+ musc	R26C	Covered	68.72	39.62	0 XXX	0	0	1	0	0
20600-00	Drain/inj joint/bursa w/o us	R26C	Covered	96.81	61.24	0 000	2	1	1	0	0
20604-00	Drain/inj joint/bursa w/us	R26C	Covered	151.59	78.50	0 000	2	1	1	0	0
20605-00	Drain/inj joint/bursa w/o us	R26C	Covered	99.32	63.10	0 000	2	1	1	0	0
20606-00	Drain/inj joint/bursa w/us	R26C	Covered	163.59	88.56	0 000	2	1	1	0	0
20610-00	Drain/inj joint/bursa w/o us	R26C	Covered	115.90	77.09	0 000	2	1	1	0	0
20611-00	Drain/inj joint/bursa w/us	R26C	Covered	180.11	100.55	0 000	2	1	1	0	0

20612-00	Aspirate/inj ganglion cyst	R26C	Covered	118.05	70.83	0 000	2	0	1	0	0
20615-00	Treatment of bone cyst	R26C	Covered	467.82	288.65	0 010	2	0	1	0	0
20650-00	Insert and remove bone pin	R26C	Covered	422.33	296.20	0 010	2	0	1	1	0
20660-00	Apply rem fixation device	R26C	Covered	373.33	373.33	0 000	2	0	1	0	0
20661-00	Application halo cranial	R26C	Covered	906.70	906.70	0 090	2	0	1	0	0
20662-00	Application halo pelvic	R26C	Covered	926.26	926.26	0 090	2	0	0	0	0
20663-00	Application halo femoral	R26C	Covered	857.09	857.09	0 090	2	1	0	0	0
20664-00	Appl halo cranial 6+pins	R26C	Covered	1471.33	1471.33	0 090	2	0	1	0	0
20665-00	Rmvl tongs/halo anthr indiv	R26C	Covered	217.71	178.26	0 010	2	0	0	0	0
20670-00	Removal implant superficial	R26C	Covered	667.61	260.13	0 010	2	0	1	0	0
20680-00	Removal of implant deep	R26C	Covered	1084.54	735.27	0 090	2	0	0	0	0
20690-00	Appl unipln uni ext fixj sys	R26C	Covered	1029.44	1029.44	0 090	2	0	1	0	0
20692-00	Appl mltpln uni ext fixj sys	R26C	Covered	1968.77	1968.77	0 090	2	0	2	1	0
20693-00	Adjmt/revj ext fixj sys anes	R26C	Covered	793.55	793.55	0 090	2	0	1	0	0
20694-00	Rmvl ext fixj sys under anes	R26C	Covered	783.84	610.50	0 090	2	0	1	0	0
20696-00	App mltpln uni xtrnl fix 1st	R26C	Covered	2018.23	2018.23	0 090	2	0	2	1	0
20697-00	App mltpln uni xtrnl fix xch	R26C	Covered	3432.71	3432.71	3 000	0	0	2	1	0
20700-00	Mnl prep&insj dp rx dlvr dev	R26C	Covered	139.75	139.75	0 ZZZ	0	0	0	0	0
20701-00	Rmvl deep rx delivery device	R26C	Covered	105.94	105.94	0 ZZZ	0	0	0	0	0
20702-00	Mnl prep&insj imed rx dev	R26C	Covered	235.11	235.11	0 ZZZ	0	0	0	0	0
20703-00	Rmvl imed rx delivery device	R26C	Covered	171.30	171.30	0 ZZZ	0	0	0	0	0
20704-00	Mnl prep&insj i-artic rx dev	R26C	Covered	247.15	247.15	0 ZZZ	0	0	0	0	0
20705-00	Rmvl i-artic rx delivery dev	R26C	Covered	204.50	204.50	0 ZZZ	0	0	0	0	0
20802-00	Replantation arm complete	R26C	Covered	4621.54	4621.54	0 090	2	1	2	1	0
20805-00	Replant forearm complete	R26C	Covered	5471.45	5471.45	0 090	2	1	2	1	0
20808-00	Replantation hand complete	R26C	Covered	6578.50	6578.50	0 090	2	1	2	1	0
20816-00	Replantation digit complete	R26C	Covered	3459.40	3459.40	0 090	2	0	2	1	0
20822-00	Replantation digit complete	R26C	Covered	3009.15	3009.15	0 090	2	0	2	1	0
20824-00	Replantation thumb complete	R26C	Covered	3467.16	3467.16	0 090	2	1	2	1	0
20827-00	Replantation thumb complete	R26C	Covered	3086.96	3086.96	0 090	2	1	2	1	0
20838-00	Replantation foot complete	R26C	Covered	4696.44	4696.44	0 090	2	1	2	1	0
20900-00	Removal of bone for graft	R26C	Covered	706.02	306.94	0 000	2	0	2	1	0
20902-00	Removal of bone for graft	R26C	Covered	462.83	462.83	0 000	2	0	2	1	0
20910-00	Remove cartilage for graft	R26C	Covered	849.96	849.96	0 090	2	0	0	0	0
20912-00	Remove cartilage for graft	R26C	Covered	858.35	858.35	0 090	2	0	0	0	0
20920-00	Removal of fascia for graft	R26C	Covered	715.10	715.10	0 090	2	0	1	1	0
20922-00	Removal of fascia for graft	R26C	Covered	1083.81	856.13	0 090	2	0	2	1	0
20924-00	Removal of tendon for graft	R26C	Covered	890.48	890.48	0 090	2	0	2	1	0
20930-00	Sp bone agrft morsel add-on	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
20931-00	Sp bone agrft struct add-on	R26C	Covered	171.00	171.00	0 ZZZ	0	0	1	1	0
20932-00	Osteoart agrft w/surf & b1	R26C	Covered	1238.71	1238.71	0 ZZZ	0	0	2	1	0
20933-00	Hemicrt intrclry agrft prtl	R26C	Covered	1136.38	1136.38	0 ZZZ	0	0	2	1	0
20934-00	Intercalary agrft compl	R26C	Covered	1237.46	1237.46	0 ZZZ	0	0	2	1	0
20936-00	Sp bone agrft local add-on	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
20937-00	Sp bone agrft morsel add-on	R26C	Covered	263.25	263.25	0 ZZZ	0	0	2	1	0
20938-00	Sp bone agrft struct add-on	R26C	Covered	284.54	284.54	0 ZZZ	0	0	2	1	0
20939-00	Bone marrow aspir bone grfg	R26C	Covered	109.62	109.62	0 ZZZ	0	1	0	0	0
20950-00	Fluid pressure muscle	R26C	Covered	496.75	153.94	0 000	2	0	0	0	0
20955-00	Fibula bone graft microvasc	R26C	Covered	4182.02	4182.02	0 090	2	0	2	1	0
20956-00	Iliac bone graft microvasc	R26C	Covered	4440.71	4440.71	0 090	2	0	2	1	0
20957-00	Mt bone graft microvasc	R26C	Covered	4631.28	4631.28	0 090	2	0	2	1	0
20962-00	Other bone graft microvasc	R26C	Covered	4544.13	4544.13	0 090	2	0	2	1	0
20969-00	Bone/skin graft microvasc	R26C	Covered	4658.27	4658.27	0 090	2	0	2	1	0
20970-00	Bone/skin graft iliac crest	R26C	Covered	4787.18	4787.18	0 090	2	0	2	1	0

20972-00	Bone/skin graft metatarsal	R26C	Covered	4771.89	4771.89	0 090	2	0	2	0	0
20973-00	Bone/skin graft great toe	R26C	Covered	5034.26	5034.26	0 090	2	1	2	1	0
20974-00	Electrical bone stimulation	R26C	Covered	151.63	87.59	0 000	0	0	1	0	0
20975-00	Electrical bone stimulation	R26C	Covered	291.24	291.24	0 000	0	0	2	1	0
20979-00	Us bone stimulation	R26C	Covered	103.43	53.63	0 000	0	0	1	0	0
20982-00	Ablate bone tumor(s) perq	R26C	Covered	6564.07	607.69	0 000	2	1	1	0	0
20983-00	Ablate bone tumor(s) perq	R26C	Covered	9612.87	577.07	0 000	2	1	1	0	0
20985-00	Cptr-asst dir ms px	R26C	Covered	237.79	237.79	0 ZZZ	0	0	0	0	0
75956-26	Xray endovasc thor ao repr	RCMS	Covered	523.11	523.11	1 XXX	0	0	0	0	0
21010-00	Incision of jaw joint	R26C	Covered	1324.52	1324.52	0 090	2	1	0	0	0
21011-00	Exc face les sc <2 cm	R26C	Covered	688.64	469.37	0 090	2	0	2	0	0
21012-00	Exc face les sbq 2 cm/>	R26C	Covered	593.63	593.63	0 090	2	0	2	0	0
21013-00	Exc face tum deep < 2 cm	R26C	Covered	966.52	708.45	0 090	2	0	2	0	0
21014-00	Exc face tum deep 2 cm/>	R26C	Covered	911.88	911.88	0 090	2	0	2	0	0
21015-00	Resect face/scalp tum < 2 cm	R26C	Covered	1223.35	1223.35	0 090	2	0	1	0	0
21016-00	Resect face/scalp tum 2 cm/>	R26C	Covered	1726.98	1726.98	0 090	2	0	2	0	0
21025-00	Excision of bone lower jaw	R26C	Covered	1438.13	1182.00	0 090	2	0	1	0	0
21026-00	Excision of facial bone(s)	R26C	Covered	985.03	777.41	0 090	2	0	1	0	0
21029-00	Contour of face bone lesion	R26C	Covered	1393.41	1106.23	0 090	2	0	0	0	0
21030-00	Excise max/zygoma b9 tumor	R26C	Covered	842.71	653.20	0 090	2	1	1	0	0
21031-00	Remove exostosis mandible	R26C	Covered	711.85	497.12	0 090	2	1	1	0	0
21032-00	Remove exostosis maxilla	R26C	Covered	690.40	473.72	0 090	2	0	1	0	0
21034-00	Excise max/zygoma mal tumor	R26C	Covered	2309.61	1972.63	0 090	2	0	2	1	0
21040-00	Excise mandible lesion	R26C	Covered	851.76	655.78	0 090	2	0	1	0	0
21044-00	Removal of jaw bone lesion	R26C	Covered	1519.98	1519.98	0 090	2	0	2	1	0
21045-00	Extensive jaw surgery	R26C	Covered	2099.12	2099.12	0 090	2	0	2	1	0
21046-00	Remove mandible cyst complex	R26C	Covered	1768.41	1768.41	0 090	2	0	0	1	0
21047-00	Excise lwr jaw cyst w/repair	R26C	Covered	2125.91	2125.91	0 090	2	0	2	1	0
21048-00	Remove maxilla cyst complex	R26C	Covered	1780.88	1780.88	0 090	2	0	0	1	0
21049-00	Excis uppr jaw cyst w/repair	R26C	Covered	2015.41	2015.41	0 090	2	0	2	1	0
21050-00	Removal of jaw joint	R26C	Covered	1553.60	1553.60	0 090	2	1	0	0	0
21060-00	Remove jaw joint cartilage	R26C	Covered	1403.96	1403.96	0 090	2	1	2	1	0
21070-00	Remove coronoid process	R26C	Covered	1085.41	1085.41	0 090	2	1	0	0	0
21073-00	Mnpj of tmj w/anesth	R26C	Covered	703.74	429.50	0 090	2	1	0	0	0
21076-00	Prepare face/oral prosthesis	R26C	Covered	1546.43	1230.79	0 010	2	0	0	0	0
21077-00	Prepare face/oral prosthesis	R26C	Covered	3778.31	3026.08	0 090	2	1	0	0	0
21079-00	Prepare face/oral prosthesis	R26C	Covered	2599.62	2037.55	0 090	2	0	1	0	0
21080-00	Prepare face/oral prosthesis	R26C	Covered	2969.79	2300.36	0 090	2	0	1	0	0
21081-00	Prepare face/oral prosthesis	R26C	Covered	2749.25	2111.50	0 090	2	0	0	0	0
21082-00	Prepare face/oral prosthesis	R26C	Covered	2574.30	1951.43	0 090	2	0	0	0	0
21083-00	Prepare face/oral prosthesis	R26C	Covered	2452.20	1804.75	0 090	2	0	0	0	0
21084-00	Prepare face/oral prosthesis	R26C	Covered	2792.40	2085.45	0 090	2	0	0	0	0
21085-00	Prepare face/oral prosthesis	R26C	Covered	1231.73	846.24	0 010	2	0	0	0	0
21086-00	Prepare face/oral prosthesis	R26C	Covered	2808.01	2230.42	0 090	2	1	0	0	0
21087-00	Prepare face/oral prosthesis	R26C	Covered	2808.01	2230.42	0 090	2	0	0	0	0
93594-26	R hrt cath chd abnl nt cnj	RCMS	Covered	504.39	504.39	1 000	2	0	0	0	0
93595-26	L hrt cath chd nm/abn nt cnj	RCMS	Covered	459.28	459.28	1 000	2	0	0	0	0
21100-00	Maxillofacial fixation	R26C	Covered	1156.97	647.94	0 090	2	0	0	0	0
21110-00	Interdental fixation	R26C	Covered	1604.18	1320.23	0 090	2	0	1	0	0
21116-00	Injection jaw joint x-ray	R26C	Covered	403.41	77.42	0 000	2	1	1	0	0
21120-00	Reconstruction of chin	R26C	Covered	1212.86	913.39	0 090	2	0	1	1	0
21121-00	Reconstruction of chin	R26C	Covered	1153.48	952.98	0 090	2	0	2	0	0
21122-00	Reconstruction of chin	R26C	Covered	1325.43	1325.43	0 090	2	0	2	0	0
21123-00	Reconstruction of chin	R26C	Covered	1520.12	1520.12	0 090	2	0	2	1	0

21125-00	Augmentation lower jaw bone	R26C	Covered	4905.07	1188.56	0 090	2	0	2	0	0
21127-00	Augmentation lower jaw bone	R26C	Covered	7632.39	1374.60	0 090	2	0	2	1	0
21137-00	Reduction of forehead	R26C	Covered	1309.74	1309.74	0 090	2	0	2	0	0
21138-00	Reduction of forehead	R26C	Covered	1585.73	1585.73	0 090	2	0	2	1	0
21139-00	Reduction of forehead	R26C	Covered	1890.34	1890.34	0 090	2	0	2	1	0
21141-00	Lefort i-1 piece w/o graft	R26C	Covered	2374.17	2374.17	0 090	2	0	2	1	0
21142-00	Lefort i-2 piece w/o graft	R26C	Covered	2433.87	2433.87	0 090	2	0	2	1	0
21143-00	Lefort i-3/> piece w/o graft	R26C	Covered	2506.92	2506.92	0 090	2	0	2	1	0
21145-00	Lefort i-1 piece w/ graft	R26C	Covered	2745.98	2745.98	0 090	2	0	2	0	0
21146-00	Lefort i-2 piece w/ graft	R26C	Covered	2868.35	2868.35	0 090	2	0	2	1	0
21147-00	Lefort i-3/> piece w/ graft	R26C	Covered	3014.22	3014.22	0 090	2	0	2	0	0
21150-00	Lefort ii anterior intrusion	R26C	Covered	2858.21	2858.21	0 090	2	0	2	0	0
21151-00	Lefort ii w/bone grafts	R26C	Covered	3138.80	3138.80	0 090	2	0	2	0	0
21154-00	Lefort iii w/o lefort i	R26C	Covered	3377.94	3377.94	0 090	2	0	2	1	0
21155-00	Lefort iii w/ lefort i	R26C	Covered	3738.59	3738.59	0 090	2	0	2	0	0
21159-00	Lefort iii w/fhdw/o lefort i	R26C	Covered	4464.66	4464.66	0 090	2	0	2	1	0
21160-00	Lefort iii w/fhd w/ lefort i	R26C	Covered	4835.84	4835.84	0 090	2	0	2	0	0
21172-00	Reconstruct orbit/forehead	R26C	Covered	3347.53	3347.53	0 090	2	0	2	1	0
21175-00	Reconstruct orbit/forehead	R26C	Covered	3766.83	3766.83	0 090	2	0	2	0	0
21179-00	Reconstruct entire forehead	R26C	Covered	2602.68	2602.68	0 090	2	0	2	0	0
21180-00	Reconstruct entire forehead	R26C	Covered	2901.58	2901.58	0 090	2	0	2	1	0
21181-00	Contour cranial bone lesion	R26C	Covered	1288.93	1288.93	0 090	2	0	0	0	0
21182-00	Reconstruct cranial bone	R26C	Covered	3598.45	3598.45	0 090	2	0	2	1	0
21183-00	Reconstruct cranial bone	R26C	Covered	3909.18	3909.18	0 090	2	0	2	1	0
21184-00	Reconstruct cranial bone	R26C	Covered	4200.50	4200.50	0 090	2	0	2	0	0
21188-00	Reconstruction of midface	R26C	Covered	2810.78	2810.78	0 090	2	0	2	0	0
21193-00	Reconst lwr jaw w/o graft	R26C	Covered	2184.30	2184.30	0 090	2	2	2	1	0
21194-00	Reconst lwr jaw w/graft	R26C	Covered	2524.89	2524.89	0 090	2	2	2	0	0
21195-00	Reconst lwr jaw w/o fixation	R26C	Covered	2389.85	2389.85	0 090	2	2	2	0	0
21196-00	Reconst lwr jaw w/fixation	R26C	Covered	2549.68	2549.68	0 090	2	2	2	1	0
21198-00	Reconstr lwr jaw segment	R26C	Covered	1778.72	1778.72	0 090	2	0	2	1	0
21199-00	Reconstr lwr jaw w/advance	R26C	Covered	1792.06	1792.06	0 090	2	0	2	1	0
21206-00	Reconstruct upper jaw bone	R26C	Covered	1722.57	1722.57	0 090	2	0	2	1	0
21208-00	Augmentation of facial bones	R26C	Covered	3054.43	1316.48	0 090	2	0	0	0	0
21209-00	Reduction of facial bones	R26C	Covered	1463.64	1097.55	0 090	2	0	2	0	0
21210-00	Face bone graft	R26C	Covered	3289.60	1355.67	0 090	2	0	1	0	0
21215-00	Lower jaw bone graft	R26C	Covered	7742.89	1408.13	0 090	2	0	1	1	0
21230-00	Rib cartilage graft	R26C	Covered	1302.54	1302.54	0 090	2	0	0	0	0
21235-00	Ear cartilage graft	R26C	Covered	1346.31	1022.27	0 090	2	0	1	0	0
21240-00	Reconstruction of jaw joint	R26C	Covered	1862.81	1862.81	0 090	2	1	2	1	0
21242-00	Reconstruction of jaw joint	R26C	Covered	1809.11	1809.11	0 090	2	1	2	1	0
21243-00	Reconstruction of jaw joint	R26C	Covered	2991.04	2991.04	0 090	2	1	2	1	0
21244-00	Reconstruction of lower jaw	R26C	Covered	1792.97	1792.97	0 090	2	0	2	1	0
21245-00	Reconstruction of jaw	R26C	Covered	2232.57	1697.02	0 090	2	0	2	0	0
21246-00	Reconstruction of jaw	R26C	Covered	1510.14	1510.14	0 090	2	0	2	0	0
21247-00	Reconstruct lower jaw bone	R26C	Covered	2800.81	2800.81	0 090	2	1	2	1	0
21248-00	Reconstruction of jaw	R26C	Covered	1778.24	1410.85	0 090	2	0	1	0	0
21249-00	Reconstruction of jaw	R26C	Covered	2394.60	1959.95	0 090	2	0	0	0	0
21255-00	Reconstruct lower jaw bone	R26C	Covered	2392.16	2392.16	0 090	2	1	2	1	0
21256-00	Reconstruction of orbit	R26C	Covered	2143.71	2143.71	0 090	2	1	2	1	0
21260-00	Revise eye sockets	R26C	Covered	2382.92	2382.92	0 090	2	0	2	1	0
21261-00	Revise eye sockets	R26C	Covered	4181.20	4181.20	0 090	2	0	2	1	0
21263-00	Revise eye sockets	R26C	Covered	3876.75	3876.75	0 090	2	0	2	1	0
21267-00	Revise eye sockets	R26C	Covered	2790.34	2790.34	0 090	2	1	2	1	0

21268-00	Revise eye sockets	R26C	Covered	3484.43	3484.43	0 090	2	1	2	1	0
21270-00	Augmentation cheek bone	R26C	Covered	1823.44	1295.66	0 090	2	1	2	1	0
21275-00	Revision orbitofacial bones	R26C	Covered	1464.93	1464.93	0 090	2	0	2	1	0
21280-00	Revision of eyelid	R26C	Covered	1072.65	1072.65	0 090	2	1	0	0	0
21282-00	Revision of eyelid	R26C	Covered	731.60	731.60	0 090	2	1	1	0	0
21295-00	Revision of jaw muscle/bone	R26C	Covered	365.12	365.12	0 090	2	1	0	0	0
21296-00	Revision of jaw muscle/bone	R26C	Covered	738.82	738.82	0 090	2	1	0	0	0
75957-26	Xray endovasc thor ao repr	RCMS	Covered	449.15	449.15	1 XXX	0	0	0	0	0
21315-00	Clsd tx nsl fx mnpj wo stblj	R26C	Covered	284.19	102.44	0 000	2	0	1	0	0
21320-00	Clsd tx nsl fx w/mnpj&stablj	R26C	Covered	401.12	163.74	0 000	2	0	1	0	0
21325-00	Open tx nose fx uncomplecatd	R26C	Covered	817.66	817.66	0 090	2	0	0	0	0
21330-00	Open tx nose fx w/skele fixj	R26C	Covered	971.67	971.67	0 090	2	0	0	0	0
21335-00	Open tx nose & septal fx	R26C	Covered	1282.94	1282.94	0 090	2	0	1	0	0
21336-00	Open tx septal fx w/wo stabj	R26C	Covered	1158.02	1158.02	0 090	2	0	0	0	0
21337-00	Closed tx septal&nose fx	R26C	Covered	771.86	546.77	0 090	2	0	0	0	0
21338-00	Open nasoethmoid fx w/o fixj	R26C	Covered	1221.16	1221.16	0 090	2	0	0	0	0
21339-00	Open nasoethmoid fx w/ fixj	R26C	Covered	1370.43	1370.43	0 090	2	0	2	1	0
21340-00	Perq tx nasoethmoid fx	R26C	Covered	1325.86	1325.86	0 090	2	0	0	0	0
21343-00	Open tx dprsd front sinus fx	R26C	Covered	1937.73	1937.73	0 090	2	0	2	1	0
21344-00	Open tx compl front sinus fx	R26C	Covered	2433.18	2433.18	0 090	2	0	2	2	0
21345-00	Closed tx nose/jaw fx	R26C	Covered	1459.17	1140.30	0 090	2	0	0	0	0
21346-00	Opn tx nasomax fx w/fixj	R26C	Covered	1842.81	1842.81	0 090	2	0	1	1	0
21347-00	Opn tx nasomax fx multiple	R26C	Covered	1846.51	1846.51	0 090	2	0	2	1	0
21348-00	Opn tx nasomax fx w/graft	R26C	Covered	1908.71	1908.71	0 090	2	0	2	2	0
21355-00	Perq tx malar fracture	R26C	Covered	823.27	589.12	0 010	2	1	0	0	0
21356-00	Opn tx dprsd zygomatic arch	R26C	Covered	993.76	716.29	0 010	2	1	0	0	0
21360-00	Opn tx dprsd malar fracture	R26C	Covered	938.74	938.74	0 090	2	1	2	0	0
21365-00	Opn tx complx malar fx	R26C	Covered	1881.50	1881.50	0 090	2	1	2	1	0
21366-00	Opn tx complx malar w/grft	R26C	Covered	2197.11	2197.11	0 090	2	1	2	2	0
21385-00	Opn tx orbit fx transantral	R26C	Covered	1283.97	1283.97	0 090	2	1	2	1	0
21386-00	Opn tx orbit fx periorbital	R26C	Covered	1205.71	1205.71	0 090	2	1	2	0	0
21387-00	Opn tx orbit fx combined	R26C	Covered	1337.96	1337.96	0 090	2	1	2	0	0
21390-00	Opn tx orbit periorbtl implt	R26C	Covered	1426.42	1426.42	0 090	2	1	2	1	0
21395-00	Opn tx orbit periorbt w/grft	R26C	Covered	1735.43	1735.43	0 090	2	1	2	1	0
21400-00	Closed tx orbit w/o manipulj	R26C	Covered	406.14	313.00	0 090	2	1	0	0	0
21401-00	Closed tx orbit w/manipulj	R26C	Covered	940.29	592.96	0 090	2	1	2	0	0
21406-00	Opn tx orbit fx w/o implant	R26C	Covered	1029.21	1029.21	0 090	2	1	2	1	0
21407-00	Opn tx orbit fx w/implant	R26C	Covered	1144.87	1144.87	0 090	2	1	2	1	0
21408-00	Opn tx orbit fx w/bone grft	R26C	Covered	1563.35	1563.35	0 090	2	1	2	2	0
21421-00	Treat mouth roof fracture	R26C	Covered	1194.54	999.86	0 090	2	0	0	0	0
21422-00	Treat mouth roof fracture	R26C	Covered	1106.14	1106.14	0 090	2	0	2	1	0
21423-00	Treat mouth roof fracture	R26C	Covered	1386.23	1386.23	0 090	2	0	2	2	0
21431-00	Treat craniofacial fracture	R26C	Covered	1267.02	1267.02	0 090	2	0	2	0	0
21432-00	Treat craniofacial fracture	R26C	Covered	1253.30	1253.30	0 090	2	0	2	0	0
21433-00	Treat craniofacial fracture	R26C	Covered	2960.92	2960.92	0 090	2	0	2	1	0
21435-00	Treat craniofacial fracture	R26C	Covered	2427.49	2427.49	0 090	2	0	2	0	0
21436-00	Treat craniofacial fracture	R26C	Covered	3490.23	3490.23	0 090	2	0	2	2	0
21440-00	Treat dental ridge fracture	R26C	Covered	1440.99	1144.11	0 090	2	0	0	0	0
21445-00	Treat dental ridge fracture	R26C	Covered	1442.50	1155.96	0 090	2	0	2	0	0
21450-00	Treat lower jaw fracture	R26C	Covered	1110.07	896.63	0 090	2	0	0	0	0
21451-00	Treat lower jaw fracture	R26C	Covered	1436.46	1188.73	0 090	2	0	0	0	0
21452-00	Treat lower jaw fracture	R26C	Covered	1396.62	864.95	0 090	2	0	0	0	0
21453-00	Treat lower jaw fracture	R26C	Covered	2042.33	1726.04	0 090	2	0	0	0	0
21454-00	Treat lower jaw fracture	R26C	Covered	880.16	880.16	0 090	2	0	0	1	0

21461-00	Treat lower jaw fracture	R26C	Covered	3444.38	1950.92	0 090	2	0	1	1	0
21462-00	Treat lower jaw fracture	R26C	Covered	3662.25	2121.57	0 090	2	0	2	1	0
21465-00	Treat lower jaw fracture	R26C	Covered	1421.06	1421.06	0 090	2	1	2	1	0
21470-00	Treat lower jaw fracture	R26C	Covered	2051.37	2051.37	0 090	2	0	2	1	0
21480-00	Reset dislocated jaw	R26C	Covered	265.31	50.58	0 000	2	1	1	0	0
21485-00	Reset dislocated jaw	R26C	Covered	1810.87	1470.65	0 090	2	1	0	0	0
21490-00	Repair dislocated jaw	R26C	Covered	1400.33	1400.33	0 090	2	1	2	1	0
21497-00	Interdental wiring	R26C	Covered	1328.67	1096.47	0 090	2	0	0	0	0
93624-26	Electrophysiologic study	RCMS	Covered	380.30	380.30	1 000	2	0	0	0	0
21501-00	Drain neck/chest lesion	R26C	Covered	889.98	598.27	0 090	2	0	1	0	0
21502-00	Drain chest lesion	R26C	Covered	849.86	849.86	0 090	2	0	2	0	0
21510-00	Drainage of bone lesion	R26C	Covered	768.89	768.89	0 090	2	0	0	0	0
21550-00	Biopsy of neck/chest	R26C	Covered	493.21	277.18	0 010	2	0	1	0	0
21552-00	Exc neck les sc 3 cm/>	R26C	Covered	761.20	761.20	0 090	2	0	2	0	0
21554-00	Exc neck tum deep 5 cm/>	R26C	Covered	1242.69	1242.69	0 090	2	0	2	0	0
21555-00	Exc neck les sc < 3 cm	R26C	Covered	784.58	540.09	0 090	2	0	1	0	0
21556-00	Exc neck tum deep < 5 cm	R26C	Covered	917.64	917.64	0 090	2	0	1	0	0
21557-00	Resect neck thorax tumor<5cm	R26C	Covered	1620.33	1620.33	0 090	2	0	2	1	0
21558-00	Resect neck tumor 5 cm/>	R26C	Covered	2240.95	2240.95	0 090	2	0	2	1	0
21600-00	Partial removal of rib	R26C	Covered	982.14	982.14	0 090	2	0	2	1	0
21601-00	Exc chest wall tumor w/ribs	R26C	Covered	1891.46	1891.46	0 090	2	0	2	1	0
21602-00	Exc ch wal tum w/o lymphadec	R26C	Covered	2558.39	2558.39	0 090	2	0	2	1	0
21603-00	Exc ch wal tum w/lymphadec	R26C	Covered	2782.83	2782.83	0 090	2	0	2	1	0
21610-00	Partial removal of rib	R26C	Covered	1925.70	1925.70	0 090	2	0	2	0	0
21615-00	Removal of rib	R26C	Covered	1010.85	1010.85	0 090	2	1	2	1	0
21616-00	Removal of rib and nerves	R26C	Covered	1139.98	1139.98	0 090	2	1	2	0	0
21620-00	Partial removal of sternum	R26C	Covered	849.01	849.01	0 090	2	0	2	1	0
21627-00	Sternal debridement	R26C	Covered	939.99	939.99	0 090	2	0	2	0	0
21630-00	Extensive sternum surgery	R26C	Covered	2262.64	2262.64	0 090	2	0	2	1	0
21632-00	Extensive sternum surgery	R26C	Covered	1978.34	1978.34	0 090	2	0	2	1	0
21685-00	Hyoid myotomy & suspension	R26C	Covered	1721.28	1721.28	0 090	2	0	2	1	0
21700-00	Revision of neck muscle	R26C	Covered	568.79	568.79	0 090	2	1	2	0	0
21705-00	Revision of neck muscle/rib	R26C	Covered	838.96	838.96	0 090	2	1	2	0	0
21720-00	Revision of neck muscle	R26C	Covered	890.97	890.97	0 090	2	0	2	0	0
21725-00	Revision of neck muscle	R26C	Covered	952.41	952.41	0 090	2	0	2	1	0
21740-00	Reconstruction of sternum	R26C	Covered	1649.77	1649.77	0 090	2	0	2	1	0
21742-00	Repair stern/nuss w/o scope	RMCD	Covered	1167.74	1167.74	0 090	2	0	2	1	0
95966-26	Meg evoked single	RCMS	Covered	345.28	345.28	1 XXX	0	0	0	0	0
21750-00	Repair of sternum separation	R26C	Covered	1098.91	1098.91	0 090	2	0	2	1	0
21811-00	Optx of rib fx w/fixj scope	R26C	Covered	945.45	945.45	0 000	2	1	2	0	0
21812-00	Treatment of rib fracture	R26C	Covered	1142.32	1142.32	0 000	2	1	2	0	0
21813-00	Treatment of rib fracture	R26C	Covered	1548.91	1548.91	0 000	2	1	2	0	0
21820-00	Treat sternum fracture	R26C	Covered	279.36	275.48	0 090	2	0	1	0	0
21825-00	Treat sternum fracture	R26C	Covered	939.45	939.45	0 090	2	0	2	1	0
93593-26	R hrt cath chd nml nt cnj	RCMS	Covered	332.43	332.43	1 000	2	0	0	0	0
21920-00	Biopsy soft tissue of back	R26C	Covered	472.60	274.04	0 010	2	0	1	0	0
21925-00	Biopsy soft tissue of back	R26C	Covered	889.82	664.73	0 090	2	0	1	0	0
21930-00	Exc back les sc < 3 cm	R26C	Covered	901.04	633.91	0 090	2	0	1	0	0
21931-00	Exc back les sc 3 cm/>	R26C	Covered	795.86	795.86	0 090	2	0	2	0	0
21932-00	Exc back tum deep < 5 cm	R26C	Covered	1124.76	1124.76	0 090	2	0	2	0	0
21933-00	Exc back tum deep 5 cm/>	R26C	Covered	1241.19	1241.19	0 090	2	0	2	0	0
21935-00	Resect back tum < 5 cm	R26C	Covered	1706.45	1706.45	0 090	2	0	1	1	0
21936-00	Resect back tum 5 cm/>	R26C	Covered	2343.30	2343.30	0 090	2	0	2	1	0
22010-00	I&d p-spine c/t/cerv-thor	R26C	Covered	1622.89	1622.89	0 090	2	0	0	0	0

22015-00	I&d abscess p-spine l/s/l	R26C	Covered	1600.74	1600.74	0 090	2	0	1	0	0
22100-00	Remove part of neck vertebra	R26C	Covered	1557.42	1557.42	0 090	2	0	2	1	0
22101-00	Remove part thorax vertebra	R26C	Covered	1481.14	1481.14	0 090	2	0	2	1	0
22102-00	Remove part lumbar vertebra	R26C	Covered	1334.58	1334.58	0 090	2	0	2	1	0
22103-00	Remove extra spine segment	R26C	Covered	215.46	215.46	0 ZZZ	0	0	2	1	0
22110-00	Remove part of neck vertebra	R26C	Covered	1756.76	1756.76	0 090	2	0	2	1	0
22112-00	Remove part thorax vertebra	R26C	Covered	1845.81	1845.81	0 090	2	0	2	1	0
22114-00	Remove part lumbar vertebra	R26C	Covered	1845.81	1845.81	0 090	2	0	2	1	0
22116-00	Remove extra spine segment	R26C	Covered	218.28	218.28	0 ZZZ	0	0	2	1	0
22206-00	Incis spine 3 column thorac	R26C	Covered	3936.95	3936.95	0 090	2	0	2	1	0
22207-00	Incis spine 3 column lumbar	R26C	Covered	3888.14	3888.14	0 090	2	0	2	1	0
22208-00	Incis spine 3 column adl seg	R26C	Covered	910.73	910.73	0 ZZZ	0	0	2	1	0
22210-00	Incis 1 vertebral seg cerv	R26C	Covered	2931.35	2931.35	0 090	2	0	2	1	0
22212-00	Incis 1 vertebral seg thorac	R26C	Covered	2515.78	2515.78	0 090	2	0	2	1	0
22214-00	Incis 1 vertebral seg lumbar	R26C	Covered	2513.32	2513.32	0 090	2	0	2	1	0
22216-00	Incis addl spine segment	R26C	Covered	570.13	570.13	0 ZZZ	0	0	2	1	0
22220-00	Osteot dsc ant 1 vrt sgm crv	R26C	Covered	2679.58	2679.58	0 090	2	0	2	1	0
22222-00	Osteot dsc ant 1vrt sgm thrc	R26C	Covered	2812.22	2812.22	0 090	2	0	2	1	0
22224-00	Osteot dsc ant 1vrt sgm lmb	R26C	Covered	2667.81	2667.81	0 090	2	0	2	1	0
22226-00	Osteot dsc ant 1vrt sgm ea	R26C	Covered	568.41	568.41	0 ZZZ	0	0	2	1	0
22310-00	Closed tx vert fx w/o manj	R26C	Covered	556.77	528.96	0 090	2	0	1	0	0
22315-00	Closed tx vert fx w/manj	R26C	Covered	1583.29	1346.56	0 090	2	0	1	0	0
22318-00	Treat odontoid fx w/o graft	R26C	Covered	2626.83	2626.83	0 090	2	0	2	2	0
22319-00	Treat odontoid fx w/graft	R26C	Covered	2882.94	2882.94	0 090	2	0	2	2	0
22325-00	Treat spine fracture	R26C	Covered	2421.48	2421.48	0 090	2	0	2	1	0
22326-00	Treat neck spine fracture	R26C	Covered	2445.38	2445.38	0 090	2	0	2	1	0
22327-00	Treat thorax spine fracture	R26C	Covered	2512.03	2512.03	0 090	2	0	2	1	0
22328-00	Treat each add spine fx	R26C	Covered	433.11	433.11	0 ZZZ	0	0	2	1	0
22505-00	Manipulation of spine	R26C	Covered	220.51	220.51	0 010	2	0	1	0	0
22510-00	Perq cervicothoracic inject	R26C	Covered	3354.78	730.07	0 010	2	0	1	0	0
22511-00	Perq lumbosacral injection	R26C	Covered	3357.28	688.58	0 010	2	0	1	0	0
22512-00	Vertebroplasty addl inject	R26C	Covered	1342.19	337.71	0 ZZZ	0	0	1	0	0
22513-00	Perq vertebral augmentation	R26C	Covered	10754.16	852.30	0 010	2	0	1	0	0
22514-00	Perq vertebral augmentation	R26C	Covered	10716.66	796.05	0 010	2	0	1	0	0
22515-00	Perq vertebral augmentation	R26C	Covered	5511.84	353.61	0 ZZZ	0	0	1	0	0
22526-00	Idet single level	RCMS	Covered	3731.40	574.37	9 010	9	9	9	9	9
22527-00	Idet 1 or more levels	RCMS	Covered	3080.70	261.95	9 ZZZ	9	9	9	9	9
22532-00	Arthrd lat xtrcvtry tq thrc	R26C	Covered	2903.56	2903.56	0 090	2	0	2	2	0
22533-00	Arthrd lat xtrcvtry tq lmb	R26C	Covered	2758.51	2758.51	0 090	2	0	2	2	0
22534-00	Arthrd lat xtrcvtry tq ea ad	R26C	Covered	565.30	565.30	0 ZZZ	0	0	2	2	0
22548-00	Arthrd ant toral/xoral c1-c2	R26C	Covered	3094.28	3094.28	0 090	2	0	2	2	0
22551-00	Arthrd ant ntrbdy cervical	R26C	Covered	2733.97	2733.97	0 090	2	0	2	2	0
22552-00	Arthrd ant ntrbd cervical ea	R26C	Covered	613.37	613.37	0 ZZZ	0	0	2	2	0
22554-00	Arthrd ant ntrbd min dsc crv	R26C	Covered	2058.82	2058.82	0 090	2	0	2	2	0
22556-00	Arthrd ant ntrbd min dsc thc	R26C	Covered	2736.02	2736.02	0 090	2	0	2	2	0
22558-00	Arthrd ant ntrbd min dsc lum	R26C	Covered	2495.74	2495.74	0 090	2	0	2	2	0
22585-00	Arthrd ant ntrbd min dsc ea	R26C	Covered	508.07	508.07	0 ZZZ	0	0	2	2	0
22586-00	Arthrd pre-sac ntrbdy l5-s1	R26C	Covered	3196.35	3196.35	0 090	2	0	2	2	0
22590-00	Arthrd pst tq craniocervical	R26C	Covered	2559.43	2559.43	0 090	2	0	2	2	0
22595-00	Arthrd pst tq atlas-axis	R26C	Covered	2453.02	2453.02	0 090	2	0	2	2	0
22600-00	Arthrd pst tq 1ntrspc crv	R26C	Covered	2132.92	2132.92	0 090	2	0	2	2	0
22610-00	Arthrd pst tq 1ntrspc thrc	R26C	Covered	2109.70	2109.70	0 090	2	0	2	2	0
22612-00	Arthrd pst tq 1ntrspc lumbar	R26C	Covered	2595.09	2595.09	0 090	2	0	2	2	0
22614-00	Arthrd pst tq 1ntrspc ea add	R26C	Covered	606.94	606.94	0 ZZZ	0	0	2	2	0

22630-00	Arthrd pst tq 1ntrspc lum	R26C	Covered	2504.67	2504.67	0 090	2	0	2	2	0
22632-00	Arthrd pst tq 1ntrspc lm ea	R26C	Covered	491.52	491.52	0 ZZZ	0	0	2	2	0
22633-00	Arthrd cmbn 1ntrspc lumbar	R26C	Covered	2926.08	2926.08	0 090	2	0	2	2	0
22634-00	Arthrd cmbn 1ntrspc ea addl	R26C	Covered	751.45	751.45	0 ZZZ	0	0	2	2	0
22800-00	Arthrd pst dfrm<6 vrt sgm	R26C	Covered	2267.67	2267.67	0 090	2	0	2	1	0
22802-00	Arthrd pst dfrm 7-12 vrt sgm	R26C	Covered	3460.99	3460.99	0 090	2	0	2	1	0
22804-00	Arthrd pst dfrm 13+ vrt sgm	R26C	Covered	3966.96	3966.96	0 090	2	0	2	1	0
22808-00	Arthrd ant dfrm 2-3 vrt sgm	R26C	Covered	2964.47	2964.47	0 090	2	0	2	1	0
22810-00	Arthrd ant dfrm 4-7 vrt sgm	R26C	Covered	3382.42	3382.42	0 090	2	0	2	1	0
22812-00	Arthrd ant dfrm 8+ vrt sgm	R26C	Covered	3711.36	3711.36	0 090	2	0	2	1	0
22818-00	Kyphectomy 1-2 segments	R26C	Covered	3606.36	3606.36	0 090	2	0	2	2	2
22819-00	Kyphectomy 3 or more	R26C	Covered	4153.64	4153.64	0 090	2	0	2	2	2
22830-00	Exploration of spinal fusion	R26C	Covered	1371.84	1371.84	0 090	2	0	2	1	0
22840-00	Insert spine fixation device	R26C	Covered	1182.06	1182.06	0 ZZZ	0	0	2	1	0
22841-00	Insert spine fixation device	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
22842-00	Insert spine fixation device	R26C	Covered	1185.89	1185.89	0 ZZZ	0	0	2	2	0
22843-00	Insert spine fixation device	R26C	Covered	1269.25	1269.25	0 ZZZ	0	0	2	2	0
22844-00	Insert spine fixation device	R26C	Covered	1553.06	1553.06	0 ZZZ	0	0	2	2	0
22845-00	Insert spine fixation device	R26C	Covered	1125.60	1125.60	0 ZZZ	0	0	2	2	0
22846-00	Insert spine fixation device	R26C	Covered	1169.98	1169.98	0 ZZZ	0	0	2	2	0
22847-00	Insert spine fixation device	R26C	Covered	1311.40	1311.40	0 ZZZ	0	0	2	2	0
22848-00	Insert pelv fixation device	R26C	Covered	566.95	566.95	0 ZZZ	0	0	2	2	0
22849-00	Reinsert spinal fixation	R26C	Covered	2135.41	2135.41	0 090	2	0	2	1	0
22850-00	Remove spine fixation device	R26C	Covered	1231.13	1231.13	0 090	2	0	2	1	0
22852-00	Remove spine fixation device	R26C	Covered	1188.94	1188.94	0 090	2	0	2	1	0
22853-00	Insj biomechanical device	R26C	Covered	401.10	401.10	0 ZZZ	0	0	2	2	0
22854-00	Insj biomechanical device	R26C	Covered	517.55	517.55	0 ZZZ	0	0	2	2	0
22855-00	Removal anterior instrmj	R26C	Covered	1815.24	1815.24	0 090	2	0	2	1	0
22856-00	Tot disc arthrp 1ntrspc crv	R26C	Covered	2632.31	2632.31	0 090	2	0	2	2	0
22857-00	Tot disc arthrp 1ntrspc lmbr	R26C	Covered	2948.29	2948.29	0 090	2	0	2	2	0
22858-00	Tot disc arthrp 2nd lvl crv	R26C	Covered	792.23	792.23	0 ZZZ	0	0	2	2	0
22859-00	Insj biomechanical device	R26C	Covered	518.42	518.42	0 ZZZ	0	0	2	2	0
22860-00	Tot disc arthrp 2ntrspc lmbr	RCMS	Covered	593.56	593.56	0 ZZZ	0	0	2	2	0
22861-00	Rev rplcm arthrp 1ntrspc crv	R26C	Covered	3595.61	3595.61	0 090	2	0	2	2	0
22862-00	Rev rplcm rthrp 1ntrspc lmbr	R26C	Covered	3619.68	3619.68	0 090	2	0	2	2	2
22864-00	Rmvl tot arthrp 1ntrspc crv	R26C	Covered	3224.25	3224.25	0 090	2	0	2	2	0
22865-00	Rmvl tot arthrp 1ntrspc lmbr	R26C	Covered	3536.59	3536.59	0 090	2	0	2	2	2
22867-00	Insj stablj dev w/dcmprn	R26C	Covered	1759.20	1759.20	0 090	2	0	2	0	0
22868-00	Insj stablj dev w/dcmprn	R26C	Covered	375.97	375.97	0 ZZZ	0	0	2	2	0
22869-00	Insj stablj dev w/o dcmprn	R26C	Covered	772.09	772.09	0 090	2	0	2	0	0
22870-00	Insj stablj dev w/o dcmprn	R26C	Covered	202.81	202.81	0 ZZZ	0	0	2	2	0
70558-26	Mri brain w/dye	RCMS	Covered	299.94	299.94	1 XXX	0	0	0	0	0
22900-00	Exc abdl tum deep < 5 cm	R26C	Covered	959.87	959.87	0 090	2	0	2	1	0
22901-00	Exc abdl tum deep 5 cm/>	R26C	Covered	1119.35	1119.35	0 090	2	0	2	1	0
22902-00	Exc abd les sc < 3 cm	R26C	Covered	842.82	576.34	0 090	2	0	2	1	0
22903-00	Exc abd les sc 3 cm/>	R26C	Covered	745.00	745.00	0 090	2	0	2	1	0
22904-00	Radical resect abd tumor<5cm	R26C	Covered	1746.48	1746.48	0 090	2	0	2	1	1
22905-00	Rad resect abd tumor 5 cm/>	R26C	Covered	2197.00	2197.00	0 090	2	0	2	1	1
95967-26	Meg evoked each addl	RCMS	Covered	298.63	298.63	1 ZZZ	0	0	0	0	0
23000-00	Removal of calcium deposits	R26C	Covered	1013.46	641.55	0 090	2	1	2	1	0
23020-00	Release shoulder joint	R26C	Covered	1209.03	1209.03	0 090	2	1	2	0	0
23030-00	Drain shoulder lesion	R26C	Covered	802.14	444.46	0 010	2	0	1	0	0
23031-00	Drain shoulder bursa	R26C	Covered	798.36	392.82	0 010	2	1	1	0	0
23035-00	Drain shoulder bone lesion	R26C	Covered	1185.79	1185.79	0 090	2	1	2	0	0

23040-00	Exploratory shoulder surgery	R26C	Covered	1255.70	1255.70	0 090	2	1	2	1	0
23044-00	Exploratory shoulder surgery	R26C	Covered	988.88	988.88	0 090	2	1	1	1	0
23065-00	Biopsy shoulder tissues	R26C	Covered	410.51	282.44	0 010	2	1	1	0	0
23066-00	Biopsy shoulder tissues	R26C	Covered	1050.21	658.25	0 090	2	1	1	0	0
23071-00	Exc shoulder les sc 3 cm/>	R26C	Covered	719.51	719.51	0 090	2	1	2	0	0
23073-00	Exc shoulder tum deep 5 cm/>	R26C	Covered	1189.11	1189.11	0 090	2	1	2	0	0
23075-00	Exc shoulder les sc < 3 cm	R26C	Covered	936.08	578.40	0 090	2	1	1	0	0
23076-00	Exc shoulder tum deep < 5 cm	R26C	Covered	940.62	940.62	0 090	2	1	1	0	0
23077-00	Resect shoulder tumor < 5 cm	R26C	Covered	1880.41	1880.41	0 090	2	1	2	1	0
23078-00	Resect shoulder tumor 5 cm/>	R26C	Covered	2403.79	2403.79	0 090	2	1	2	1	0
23100-00	Biopsy of shoulder joint	R26C	Covered	903.54	903.54	0 090	2	1	2	1	0
23101-00	Shoulder joint surgery	R26C	Covered	814.48	814.48	0 090	2	1	1	1	0
23105-00	Remove shoulder joint lining	R26C	Covered	1129.57	1129.57	0 090	2	1	2	1	0
23106-00	Incision of collarbone joint	R26C	Covered	897.25	897.25	0 090	2	1	1	1	0
23107-00	Explore treat shoulder joint	R26C	Covered	1168.52	1168.52	0 090	2	1	2	1	0
23120-00	Partial removal collar bone	R26C	Covered	1044.86	1044.86	0 090	2	1	2	1	0
23125-00	Removal of collar bone	R26C	Covered	1241.49	1241.49	0 090	2	1	2	1	0
23130-00	Remove shoulder bone part	R26C	Covered	1096.15	1096.15	0 090	2	1	1	1	0
23140-00	Removal of bone lesion	R26C	Covered	983.04	983.04	0 090	2	1	1	0	0
23145-00	Removal of bone lesion	R26C	Covered	1218.81	1218.81	0 090	2	1	2	1	0
23146-00	Removal of bone lesion	R26C	Covered	1101.79	1101.79	0 090	2	1	0	0	0
23150-00	Removal of humerus lesion	R26C	Covered	1171.74	1171.74	0 090	2	1	2	1	0
23155-00	Removal of humerus lesion	R26C	Covered	1392.40	1392.40	0 090	2	1	2	1	0
23156-00	Removal of humerus lesion	R26C	Covered	1191.20	1191.20	0 090	2	1	2	0	0
23170-00	Remove collar bone lesion	R26C	Covered	1000.24	1000.24	0 090	2	1	1	0	0
23172-00	Remove shoulder blade lesion	R26C	Covered	1009.65	1009.65	0 090	2	1	2	0	0
23174-00	Remove humerus lesion	R26C	Covered	1343.71	1343.71	0 090	2	1	2	1	0
23180-00	Remove collar bone lesion	R26C	Covered	1152.96	1152.96	0 090	2	1	1	1	0
23182-00	Remove shoulder blade lesion	R26C	Covered	1186.86	1186.86	0 090	2	1	2	0	0
23184-00	Remove humerus lesion	R26C	Covered	1300.08	1300.08	0 090	2	1	2	1	0
23190-00	Partial removal of scapula	R26C	Covered	1016.23	1016.23	0 090	2	1	2	1	0
23195-00	Removal of head of humerus	R26C	Covered	1306.83	1306.83	0 090	2	1	2	1	0
23200-00	Resect clavicle tumor	R26C	Covered	2558.14	2558.14	0 090	2	1	2	1	0
23210-00	Resect scapula tumor	R26C	Covered	2986.83	2986.83	0 090	2	1	2	1	0
23220-00	Resect prox humerus tumor	R26C	Covered	3267.30	3267.30	0 090	2	1	2	1	0
23330-00	Remove shoulder foreign body	R26C	Covered	557.79	299.72	0 010	2	1	0	0	0
23333-00	Remove shoulder fb deep	R26C	Covered	840.05	840.05	0 090	2	1	0	0	0
23334-00	Shoulder prosthesis removal	R26C	Covered	1828.66	1828.66	0 090	2	1	1	1	0
23335-00	Shoulder prosthesis removal	R26C	Covered	2169.25	2169.25	0 090	2	1	1	1	0
23350-00	Injection for shoulder x-ray	R26C	Covered	303.80	85.18	0 000	2	1	1	0	0
23395-00	Muscle transfer shoulder/arm	R26C	Covered	2211.60	2211.60	0 090	2	0	2	1	0
23397-00	Muscle transfers	R26C	Covered	1954.77	1954.77	0 090	2	0	2	1	0
23400-00	Fixation of shoulder blade	R26C	Covered	1679.17	1679.17	0 090	2	1	2	1	0
23405-00	Incision of tendon & muscle	R26C	Covered	1083.90	1083.90	0 090	2	0	2	1	0
23406-00	Incise tendon(s) & muscle(s)	R26C	Covered	1287.68	1287.68	0 090	2	0	2	0	0
23410-00	Repair rotator cuff acute	R26C	Covered	1426.79	1426.79	0 090	2	1	2	1	0
23412-00	Repair rotator cuff chronic	R26C	Covered	1480.88	1480.88	0 090	2	1	2	1	0
23415-00	Release of shoulder ligament	R26C	Covered	1226.96	1226.96	0 090	2	1	1	1	0
23420-00	Repair of shoulder	R26C	Covered	1691.68	1691.68	0 090	2	1	2	1	0
23430-00	Repair biceps tendon	R26C	Covered	1303.51	1303.51	0 090	2	1	2	1	0
23440-00	Remove/transplant tendon	R26C	Covered	1316.06	1316.06	0 090	2	1	2	1	0
23450-00	Repair shoulder capsule	R26C	Covered	1628.55	1628.55	0 090	2	1	2	1	0
23455-00	Repair shoulder capsule	R26C	Covered	1696.94	1696.94	0 090	2	1	2	1	0
23460-00	Repair shoulder capsule	R26C	Covered	1873.41	1873.41	0 090	2	1	2	1	0

23462-00	Repair shoulder capsule	R26C	Covered	1829.07	1829.07	0 090	2	1	2	1	0
23465-00	Repair shoulder capsule	R26C	Covered	1919.22	1919.22	0 090	2	1	2	1	0
23466-00	Repair shoulder capsule	R26C	Covered	1943.06	1943.06	0 090	2	1	2	1	0
23470-00	Reconstruct shoulder joint	R26C	Covered	2052.28	2052.28	0 090	2	1	2	1	0
23472-00	Reconstruct shoulder joint	R26C	Covered	2460.08	2460.08	0 090	2	1	2	1	0
23473-00	Revis reconst shoulder joint	R26C	Covered	2730.84	2730.84	0 090	2	1	2	1	0
23474-00	Revis reconst shoulder joint	R26C	Covered	2942.36	2942.36	0 090	2	1	2	1	0
23480-00	Revision of collar bone	R26C	Covered	1422.75	1422.75	0 090	2	1	1	1	0
23485-00	Revision of collar bone	R26C	Covered	1643.25	1643.25	0 090	2	1	2	1	0
23490-00	Reinforce clavicle	R26C	Covered	1490.80	1490.80	0 090	2	1	2	0	0
23491-00	Reinforce shoulder bones	R26C	Covered	1751.60	1751.60	0 090	2	1	2	1	0
23500-00	Cltx clavicular fx w/o mnpj	R26C	Covered	419.05	429.40	0 090	2	1	1	0	0
23505-00	Cltx clavicular fx w/mnpj	R26C	Covered	665.89	613.50	0 090	2	1	1	0	0
23515-00	Optx clavicular fx w/int fix	R26C	Covered	1264.90	1264.90	0 090	2	1	2	1	0
23520-00	Cltx strnclav dislc w/o mnpj	R26C	Covered	451.86	447.98	0 090	2	1	0	0	0
23525-00	Cltx strnclav dislc w/mnpj	R26C	Covered	741.12	671.27	0 090	2	1	0	0	0
23530-00	Optx strnclav dislc aqt/chrn	R26C	Covered	1016.84	1016.84	0 090	2	1	2	0	0
23532-00	Optx strclv dslc aq/chrn grf	R26C	Covered	1104.65	1104.65	0 090	2	1	2	0	0
23540-00	Cltx acromclav dislc wo mnpj	R26C	Covered	447.06	443.18	0 090	2	1	1	0	0
23545-00	Cltx acromclav dislc w/mnpj	R26C	Covered	673.13	597.45	0 090	2	1	0	0	0
23550-00	Optx acromclv dislc aqt/chrn	R26C	Covered	1009.80	1009.80	0 090	2	1	2	1	0
23552-00	Optx acrclv dslc aq/chrn grf	R26C	Covered	1143.07	1143.07	0 090	2	1	2	1	0
23570-00	Cltx scapular fx w/o mnpj	R26C	Covered	439.30	455.47	0 090	2	1	1	0	0
23575-00	Cltx scap fx w/mnpj +-tractj	R26C	Covered	759.28	695.25	0 090	2	1	0	0	0
23585-00	Optx scapular fx w/int fixj	R26C	Covered	1684.65	1684.65	0 090	2	1	2	1	0
23600-00	Cltx prox humrl fx w/o mnpj	R26C	Covered	628.82	593.90	0 090	2	1	1	0	0
23605-00	Cltx prx hmrl fx mnpj+-tract	R26C	Covered	862.92	774.95	0 090	2	1	1	0	0
23615-00	Optx prox humrl fx w/int fix	R26C	Covered	1536.68	1536.68	0 090	2	1	2	1	0
23616-00	Optx prx hmrl fx fix rpr rpl	R26C	Covered	2115.99	2115.99	0 090	2	1	2	2	0
23620-00	Cltx gr hmrl tbrs fx wo mnpj	R26C	Covered	510.50	487.21	0 090	2	1	1	0	0
23625-00	Cltx gr hmrl tbrs fx w/mnpj	R26C	Covered	712.43	645.16	0 090	2	1	1	0	0
23630-00	Optx gr hmrl tbrs fx int fix	R26C	Covered	1368.44	1368.44	0 090	2	1	2	1	0
23650-00	Cltx sho dslc w/mnpj wo anes	R26C	Covered	616.42	550.45	0 090	2	1	1	0	0
23655-00	Cltx sho dslc w/mnpj w/anes	R26C	Covered	738.23	738.23	0 090	2	1	1	0	0
23660-00	Optx acute shoulder dislc	R26C	Covered	1034.25	1034.25	0 090	2	1	2	1	0
23665-00	Cltx sho dslc fx gr hmrl tbr	R26C	Covered	801.36	729.57	0 090	2	1	1	0	0
23670-00	Optx sho dislc fx	R26C	Covered	1514.86	1514.86	0 090	2	1	2	1	0
23675-00	Cltx sho dislc neck fx mnpj	R26C	Covered	1009.34	902.62	0 090	2	1	1	0	0
23680-00	Optx sho dislc neck fx fixj	R26C	Covered	1599.76	1599.76	0 090	2	1	2	1	0
23700-00	Mnpj anes sho jt fixj aprats	R26C	Covered	345.48	345.48	0 010	2	1	1	0	0
23800-00	Arthrodesis glenohumeral jt	R26C	Covered	1769.85	1769.85	0 090	2	1	2	1	0
23802-00	Arthrd glenohumeral jt w/grf	R26C	Covered	2206.63	2206.63	0 090	2	1	2	1	0
23900-00	Interthoracoscplr amputation	R26C	Covered	2359.03	2359.03	0 090	2	0	2	0	0
23920-00	Disarticulation shoulder	R26C	Covered	1930.44	1930.44	0 090	2	1	2	1	0
23921-00	Disarticulation sho sec clsr	R26C	Covered	841.65	841.65	0 090	2	1	1	0	0
75958-26	Xray place prox ext thor ao	RCMS	Covered	295.81	295.81	1 XXX	0	0	0	0	0
23930-00	I&d upr a/e dp absc/hmtma	R26C	Covered	651.69	372.92	0 010	2	1	1	0	0
23931-00	I&d upr a/e bursa	R26C	Covered	564.30	290.06	0 010	2	1	1	0	0
23935-00	Inc dp opn b1 crtx hum/elbw	R26C	Covered	917.02	917.02	0 090	2	1	0	0	0
24000-00	Arthrt elbw expl drg/rmvl fb	R26C	Covered	851.98	851.98	0 090	2	1	0	1	0
24006-00	Arthrt elbw caps exc rls	R26C	Covered	1254.21	1254.21	0 090	2	1	2	2	0
24065-00	Biopsy arm/elbow soft tissue	R26C	Covered	478.30	291.38	0 010	2	1	1	0	0
24066-00	Biopsy arm/elbow soft tissue	R26C	Covered	1137.80	745.19	0 090	2	1	1	0	0
24071-00	Exc arm/elbow les sc 3 cm/>	R26C	Covered	697.27	697.27	0 090	2	1	2	0	0

24073-00	Ex arm/elbow tum deep 5 cm/>	R26C	Covered	1183.15	1183.15	0 090	2	1	2	0	0
24075-00	Exc arm/elbow les sc < 3 cm	R26C	Covered	965.66	579.53	0 090	2	1	1	0	0
24076-00	Ex arm/elbow tum deep < 5 cm	R26C	Covered	954.42	954.42	0 090	2	1	1	0	0
24077-00	Rad rescj tum tiss a/e <5cm	R26C	Covered	1729.58	1729.58	0 090	2	1	1	1	0
24079-00	Rad rescj tum tiss a/e 5 cm+	R26C	Covered	2219.65	2219.65	0 090	2	1	2	1	0
24100-00	Arthrt elbw synovial bx only	R26C	Covered	752.97	752.97	0 090	2	1	2	1	0
24101-00	Arthrt elbw jt expl bx rmvl	R26C	Covered	899.03	899.03	0 090	2	1	2	0	0
24102-00	Arthrt elbow w/synovectomy	R26C	Covered	1090.41	1090.41	0 090	2	1	2	1	0
24105-00	Excision olecranon bursa	R26C	Covered	659.52	659.52	0 090	2	1	1	0	0
24110-00	Exc/curtg b1 cst/b9 tum hum	R26C	Covered	1045.65	1045.65	0 090	2	1	1	1	0
24115-00	Exc/crtg b1 cst/tum hum agrf	R26C	Covered	1287.26	1287.26	0 090	2	1	2	1	0
24116-00	Exc/crtg b1 cst/tum hum algr	R26C	Covered	1488.08	1488.08	0 090	2	1	2	0	0
24120-00	Exc/crtg b1 cst/b9 tum rds	R26C	Covered	947.37	947.37	0 090	2	1	0	0	0
24125-00	Exc/crtg b1 cst/tum rds agrf	R26C	Covered	1099.01	1099.01	0 090	2	1	2	1	0
24126-00	Exc/crtg b1 cst/tum rds algr	R26C	Covered	1144.78	1144.78	0 090	2	1	2	0	0
24130-00	Excision radial head	R26C	Covered	913.44	913.44	0 090	2	1	1	1	0
24134-00	Sequestrectomy shft/dstl hum	R26C	Covered	1305.08	1305.08	0 090	2	1	2	0	0
24136-00	Sequestrectomy radial h/n	R26C	Covered	1113.06	1113.06	0 090	2	1	1	0	0
24138-00	Sequestrectomy olecrn proces	R26C	Covered	1222.08	1222.08	0 090	2	1	2	0	0
24140-00	Partial exc bone humerus	R26C	Covered	1233.56	1233.56	0 090	2	1	2	0	0
24145-00	Prtl exc bone radial h/n	R26C	Covered	1048.22	1048.22	0 090	2	1	1	1	0
24147-00	Prtl exc bone olecrn process	R26C	Covered	1118.88	1118.88	0 090	2	1	1	1	0
24149-00	Radical resection of elbow	R26C	Covered	2059.69	2059.69	0 090	2	1	2	1	0
24150-00	Rad rescj tum dstl/shft hum	R26C	Covered	2621.34	2621.34	0 090	2	1	2	1	0
24152-00	Rad resection tum radial h/n	R26C	Covered	2291.32	2291.32	0 090	2	1	2	1	0
24155-00	Resection of elbow joint	R26C	Covered	1474.21	1474.21	0 090	2	1	2	1	0
24160-00	Rmvl prosth humrl&ulnar cmpnt	R26C	Covered	2147.14	2147.14	0 090	2	1	1	1	0
24164-00	Removal prosth radial head	R26C	Covered	1263.66	1263.66	0 090	2	1	1	1	0
24200-00	Rmvl fb upper arm/elbw subq	R26C	Covered	403.27	251.27	0 010	2	1	0	0	0
24201-00	Rmvl fb upper arm/elbw deep	R26C	Covered	1131.07	717.12	0 090	2	1	1	0	0
24220-00	Injection px for elbow arthg	R26C	Covered	353.83	113.87	0 000	2	1	0	0	0
24300-00	Mnpj elbow under anes	R26C	Covered	818.27	818.27	0 090	2	1	1	0	0
24301-00	Musc/tdn transfer upr a/e 1	R26C	Covered	1309.58	1309.58	0 090	2	0	2	1	0
24305-00	Tendon lngth upr a/e ea tdn	R26C	Covered	1029.46	1029.46	0 090	2	0	0	0	0
24310-00	Tnot opn elbw to sho ea tdn	R26C	Covered	844.57	844.57	0 090	2	0	0	0	0
24320-00	Tenoplasty elbow to sho 1	R26C	Covered	1357.48	1357.48	0 090	2	0	2	1	0
24330-00	Flexor-plasty elbow	R26C	Covered	1255.23	1255.23	0 090	2	1	2	0	0
24331-00	Flexor-plasty elbw w/advmnt	R26C	Covered	1365.63	1365.63	0 090	2	1	2	0	0
24332-00	Tenolysis triceps	R26C	Covered	1089.32	1089.32	0 090	2	1	1	0	0
24340-00	Tenodesis biceps tdn at elbw	R26C	Covered	1059.45	1059.45	0 090	2	1	2	1	0
24341-00	Rpr tdn/musc upr a/e each	R26C	Covered	1331.92	1331.92	0 090	2	1	2	1	0
24342-00	Repair of ruptured tendon	R26C	Covered	1351.14	1351.14	0 090	2	1	2	1	0
24343-00	Repr elbow lat ligmnt w/tiss	R26C	Covered	1267.60	1267.60	0 090	2	1	2	1	0
24344-00	Reconstruct elbow lat ligmnt	R26C	Covered	1917.91	1917.91	0 090	2	1	2	1	0
24345-00	Repr elbw med ligmnt w/tissu	R26C	Covered	1260.53	1260.53	0 090	2	1	2	1	0
24346-00	Reconstruct elbow med ligmnt	R26C	Covered	1917.91	1917.91	0 090	2	1	2	1	0
24357-00	Repair elbow perc	R26C	Covered	759.53	759.53	0 090	2	1	0	0	0
24358-00	Repair elbow w/deb open	R26C	Covered	946.42	946.42	0 090	2	1	0	0	0
24359-00	Repair elbow deb/attch open	R26C	Covered	1169.15	1169.15	0 090	2	1	0	0	0
24360-00	Reconstruct elbow joint	R26C	Covered	1564.40	1564.40	0 090	2	1	2	1	0
24361-00	Reconstruct elbow joint	R26C	Covered	1737.74	1737.74	0 090	2	1	2	1	0
24362-00	Reconstruct elbow joint	R26C	Covered	1824.43	1824.43	0 090	2	1	2	0	0
24363-00	Replace elbow joint	R26C	Covered	2474.03	2474.03	0 090	2	1	2	0	0
24365-00	Reconstruct head of radius	R26C	Covered	1124.73	1124.73	0 090	2	1	2	1	0

24366-00	Reconstruct head of radius	R26C	Covered	1193.83	1193.83	0 090	2	1	2	1	0
24370-00	Revise reconst elbow joint	R26C	Covered	2620.46	2620.46	0 090	2	1	2	0	0
24371-00	Revise reconst elbow joint	R26C	Covered	2999.08	2999.08	0 090	2	1	2	0	0
24400-00	Revision of humerus	R26C	Covered	1443.29	1443.29	0 090	2	1	2	1	0
24410-00	Revision of humerus	R26C	Covered	1824.37	1824.37	0 090	2	1	2	1	0
24420-00	Revision of humerus	R26C	Covered	1860.68	1860.68	0 090	2	1	2	1	0
24430-00	Repair of humerus	R26C	Covered	1820.96	1820.96	0 090	2	1	2	1	0
24435-00	Repair humerus with graft	R26C	Covered	1876.85	1876.85	0 090	2	1	2	1	0
24470-00	Revision of elbow joint	R26C	Covered	1182.01	1182.01	0 090	2	1	2	0	0
24495-00	Decompression of forearm	R26C	Covered	1667.98	1667.98	0 090	2	1	0	0	0
24498-00	Reinforce humerus	R26C	Covered	1502.02	1502.02	0 090	2	1	2	1	0
24500-00	Treat humerus fracture	R26C	Covered	681.38	623.17	0 090	2	1	1	0	0
24505-00	Treat humerus fracture	R26C	Covered	926.69	818.67	0 090	2	1	1	0	0
24515-00	Treat humerus fracture	R26C	Covered	1534.65	1534.65	0 090	2	1	2	1	0
24516-00	Treat humerus fracture	R26C	Covered	1487.95	1487.95	0 090	2	1	2	2	0
24530-00	Treat humerus fracture	R26C	Covered	717.39	652.06	0 090	2	1	1	0	0
24535-00	Treat humerus fracture	R26C	Covered	1131.75	1028.26	0 090	2	1	1	0	0
24538-00	Treat humerus fracture	R26C	Covered	1396.31	1396.31	0 090	2	1	1	0	0
24545-00	Treat humerus fracture	R26C	Covered	1609.89	1609.89	0 090	2	1	2	1	0
24546-00	Treat humerus fracture	R26C	Covered	1792.15	1792.15	0 090	2	1	2	2	0
24560-00	Treat humerus fracture	R26C	Covered	627.61	550.64	0 090	2	1	1	0	0
24565-00	Treat humerus fracture	R26C	Covered	992.81	897.09	0 090	2	1	1	0	0
24566-00	Treat humerus fracture	R26C	Covered	1277.38	1277.38	0 090	2	1	1	0	0
24575-00	Treat humerus fracture	R26C	Covered	1291.34	1291.34	0 090	2	1	2	1	0
24576-00	Treat humerus fracture	R26C	Covered	666.85	588.58	0 090	2	1	1	0	0
24577-00	Treat humerus fracture	R26C	Covered	1019.22	918.97	0 090	2	1	1	0	0
24579-00	Treat humerus fracture	R26C	Covered	1460.18	1460.18	0 090	2	1	2	1	0
24582-00	Treat humerus fracture	R26C	Covered	1447.59	1447.59	0 090	2	1	1	0	0
24586-00	Treat elbow fracture	R26C	Covered	1872.40	1872.40	0 090	2	1	2	1	0
24587-00	Treat elbow fracture	R26C	Covered	1870.29	1870.29	0 090	2	1	2	1	0
24600-00	Treat elbow dislocation	R26C	Covered	690.31	617.87	0 090	2	1	1	0	0
24605-00	Treat elbow dislocation	R26C	Covered	861.82	861.82	0 090	2	1	1	0	0
24615-00	Treat elbow dislocation	R26C	Covered	1248.32	1248.32	0 090	2	1	2	1	0
24620-00	Treat elbow fracture	R26C	Covered	1051.95	1051.95	0 090	2	1	0	0	0
24635-00	Treat elbow fracture	R26C	Covered	1194.39	1194.39	0 090	2	1	2	1	0
24640-00	Treat elbow dislocation	R26C	Covered	194.12	146.25	0 010	2	1	0	0	0
24650-00	Treat radius fracture	R26C	Covered	501.50	464.63	0 090	2	1	1	0	0
24655-00	Treat radius fracture	R26C	Covered	834.41	743.86	0 090	2	1	1	0	0
24665-00	Treat radius fracture	R26C	Covered	1167.82	1167.82	0 090	2	1	2	1	0
24666-00	Treat radius fracture	R26C	Covered	1285.72	1285.72	0 090	2	1	2	1	0
24670-00	Treat ulnar fracture	R26C	Covered	552.13	501.04	0 090	2	1	1	0	0
24675-00	Treat ulnar fracture	R26C	Covered	848.35	760.38	0 090	2	1	1	0	0
24685-00	Treat ulnar fracture	R26C	Covered	1158.87	1158.87	0 090	2	1	2	1	0
24800-00	Fusion of elbow joint	R26C	Covered	1453.56	1453.56	0 090	2	1	2	1	0
24802-00	Fusion/graft of elbow joint	R26C	Covered	1729.58	1729.58	0 090	2	1	2	0	0
24900-00	Amputation of upper arm	R26C	Covered	1285.32	1285.32	0 090	2	1	2	1	0
24920-00	Amputation of upper arm	R26C	Covered	1276.87	1276.87	0 090	2	1	2	1	0
24925-00	Amputation follow-up surgery	R26C	Covered	1007.70	1007.70	0 090	2	1	2	0	0
24930-00	Amputation follow-up surgery	R26C	Covered	1343.36	1343.36	0 090	2	1	2	0	0
24931-00	Amputate upper arm & implant	R26C	Covered	1602.86	1602.86	0 090	2	1	2	0	0
24935-00	Revision of amputation	R26C	Covered	2120.58	2120.58	0 090	2	1	0	0	0
24940-00	Revision of upper arm	RMCD	Covered	397.70	397.70	0 090	2	1	2	0	0
70559-26	Mri brain w/o & w/dye	RCMS	Covered	273.34	273.34	1 XXX	0	0	0	0	0
25000-00	Incision of tendon sheath	R26C	Covered	636.16	636.16	0 090	2	1	1	0	0

25001-00	Incise flexor carpi radialis	R26C	Covered	636.06	636.06	0 090	2	1	1	0	0
25020-00	Decompress forearm 1 space	R26C	Covered	1355.08	1355.08	0 090	2	1	1	0	0
25023-00	Decompress forearm 1 space	R26C	Covered	2336.29	2336.29	0 090	2	1	0	0	0
25024-00	Decompress forearm 2 spaces	R26C	Covered	1360.05	1360.05	0 090	2	1	1	0	0
25025-00	Decompress forearm 2 spaces	R26C	Covered	2103.89	2103.89	0 090	2	1	0	0	0
25028-00	Drainage of forearm lesion	R26C	Covered	1271.89	1271.89	0 090	2	1	1	0	0
25031-00	Drainage of forearm bursa	R26C	Covered	664.73	664.73	0 090	2	1	0	0	0
25035-00	Treat forearm bone lesion	R26C	Covered	1041.59	1041.59	0 090	2	1	0	0	0
25040-00	Explore/treat wrist joint	R26C	Covered	986.63	986.63	0 090	2	1	0	0	0
25065-00	Biopsy forearm soft tissues	R26C	Covered	474.03	283.22	0 010	2	1	1	0	0
25066-00	Biopsy forearm soft tissues	R26C	Covered	663.76	663.76	0 090	2	1	1	0	0
25071-00	Exc forearm les sc 3 cm/>	R26C	Covered	735.81	735.81	0 090	2	1	2	0	0
25073-00	Exc forearm tum deep 3 cm/>	R26C	Covered	940.26	940.26	0 090	2	1	2	0	0
25075-00	Exc forearm les sc < 3 cm	R26C	Covered	949.42	561.34	0 090	2	1	1	0	0
25076-00	Exc forearm tum deep < 3 cm	R26C	Covered	919.68	919.68	0 090	2	1	1	0	0
25077-00	Resect forearm/wrist tum<3cm	R26C	Covered	1428.97	1428.97	0 090	2	1	1	0	0
25078-00	Resect forearm/wrist tum 3cm>	R26C	Covered	1967.08	1967.08	0 090	2	1	2	0	0
25085-00	Incision of wrist capsule	R26C	Covered	805.13	805.13	0 090	2	1	2	0	0
25100-00	Biopsy of wrist joint	R26C	Covered	633.04	633.04	0 090	2	1	0	0	0
25101-00	Explore/treat wrist joint	R26C	Covered	732.69	732.69	0 090	2	1	0	0	0
25105-00	Remove wrist joint lining	R26C	Covered	873.92	873.92	0 090	2	1	0	1	0
25107-00	Remove wrist joint cartilage	R26C	Covered	1107.36	1107.36	0 090	2	1	2	1	0
25109-00	Excise tendon forearm/wrist	R26C	Covered	956.37	956.37	0 090	2	1	1	0	0
25110-00	Remove wrist tendon lesion	R26C	Covered	627.56	627.56	0 090	2	1	1	0	0
25111-00	Remove wrist tendon lesion	R26C	Covered	594.84	594.84	0 090	2	1	1	0	0
25112-00	Reremove wrist tendon lesion	R26C	Covered	706.56	706.56	0 090	2	1	1	0	0
25115-00	Remove wrist/forearm lesion	R26C	Covered	1338.23	1338.23	0 090	2	1	1	0	0
25116-00	Remove wrist/forearm lesion	R26C	Covered	1081.99	1081.99	0 090	2	1	0	1	0
25118-00	Excise wrist tendon sheath	R26C	Covered	694.66	694.66	0 090	2	1	1	0	0
25119-00	Partial removal of ulna	R26C	Covered	895.74	895.74	0 090	2	1	2	1	0
25120-00	Removal of forearm lesion	R26C	Covered	898.41	898.41	0 090	2	1	0	1	0
25125-00	Remove/graft forearm lesion	R26C	Covered	1054.45	1054.45	0 090	2	1	0	0	0
25126-00	Remove/graft forearm lesion	R26C	Covered	1061.39	1061.39	0 090	2	1	2	0	0
25130-00	Removal of wrist lesion	R26C	Covered	814.77	814.77	0 090	2	1	0	0	0
25135-00	Remove & graft wrist lesion	R26C	Covered	997.37	997.37	0 090	2	1	2	1	0
25136-00	Remove & graft wrist lesion	R26C	Covered	888.80	888.80	0 090	2	1	2	1	0
25145-00	Remove forearm bone lesion	R26C	Covered	927.77	927.77	0 090	2	1	2	0	0
25150-00	Partial removal of ulna	R26C	Covered	1005.17	1005.17	0 090	2	1	1	1	0
25151-00	Partial removal of radius	R26C	Covered	1037.68	1037.68	0 090	2	1	2	1	0
25170-00	Resect radius/ulnar tumor	R26C	Covered	2493.69	2493.69	0 090	2	1	2	1	0
25210-00	Removal of wrist bone	R26C	Covered	885.22	885.22	0 090	2	0	0	1	0
25215-00	Removal of wrist bones	R26C	Covered	1100.29	1100.29	0 090	2	1	2	1	0
25230-00	Partial removal of radius	R26C	Covered	778.78	778.78	0 090	2	1	1	1	0
25240-00	Partial removal of ulna	R26C	Covered	773.84	773.84	0 090	2	1	0	1	0
25246-00	Injection for wrist x-ray	R26C	Covered	363.08	125.06	0 000	2	1	1	0	0
25248-00	Remove forearm foreign body	R26C	Covered	753.06	753.06	0 090	2	1	1	0	0
25250-00	Removal of wrist prosthesis	R26C	Covered	948.40	948.40	0 090	2	1	2	0	0
25251-00	Removal of wrist prosthesis	R26C	Covered	1257.75	1257.75	0 090	2	1	2	0	0
25259-00	Manipulate wrist w/anesthes	R26C	Covered	803.99	803.99	0 090	2	1	1	0	0
25260-00	Repair forearm tendon/muscle	R26C	Covered	1131.08	1131.08	0 090	2	0	1	0	0
25263-00	Repair forearm tendon/muscle	R26C	Covered	1123.89	1123.89	0 090	2	0	2	0	0
25265-00	Repair forearm tendon/muscle	R26C	Covered	1320.33	1320.33	0 090	2	0	2	0	0
25270-00	Repair forearm tendon/muscle	R26C	Covered	884.52	884.52	0 090	2	0	0	0	0
25272-00	Repair forearm tendon/muscle	R26C	Covered	991.19	991.19	0 090	2	0	0	0	0

25274-00	Repair forearm tendon/muscle	R26C	Covered	1177.25	1177.25	0 090	2	0	0	1	0
25275-00	Repair forearm tendon sheath	R26C	Covered	1189.09	1189.09	0 090	2	1	0	1	0
25280-00	Revise wrist/forearm tendon	R26C	Covered	1007.48	1007.48	0 090	2	0	0	1	0
25290-00	Incise wrist/forearm tendon	R26C	Covered	783.77	783.77	0 090	2	0	1	0	0
25295-00	Release wrist/forearm tendon	R26C	Covered	941.57	941.57	0 090	2	0	1	0	0
25300-00	Fusion of tendons at wrist	R26C	Covered	1216.69	1216.69	0 090	2	1	2	0	0
25301-00	Fusion of tendons at wrist	R26C	Covered	1139.71	1139.71	0 090	2	1	2	0	0
25310-00	Transplant forearm tendon	R26C	Covered	1105.61	1105.61	0 090	2	0	2	1	0
25312-00	Transplant forearm tendon	R26C	Covered	1262.17	1262.17	0 090	2	0	2	1	0
25315-00	Revise palsy hand tendon(s)	R26C	Covered	1339.97	1339.97	0 090	2	1	2	0	0
25316-00	Revise palsy hand tendon(s)	R26C	Covered	1587.03	1587.03	0 090	2	1	2	0	0
25320-00	Repair/revise wrist joint	R26C	Covered	1753.96	1753.96	0 090	2	1	2	0	0
25332-00	Revise wrist joint	R26C	Covered	1481.42	1481.42	0 090	2	1	2	0	0
25335-00	Realignment of hand	R26C	Covered	1632.76	1632.76	0 090	2	1	2	0	0
25337-00	Reconstruct ulna/radioulnar	R26C	Covered	1569.97	1569.97	0 090	2	1	1	0	0
25350-00	Revision of radius	R26C	Covered	1191.22	1191.22	0 090	2	1	2	0	0
25355-00	Revision of radius	R26C	Covered	1334.55	1334.55	0 090	2	1	2	0	0
25360-00	Revision of ulna	R26C	Covered	1158.31	1158.31	0 090	2	1	2	1	0
25365-00	Revise radius & ulna	R26C	Covered	1588.28	1588.28	0 090	2	1	2	0	0
25370-00	Revise radius or ulna	R26C	Covered	1755.43	1755.43	0 090	2	1	2	0	0
25375-00	Revise radius & ulna	R26C	Covered	1648.44	1648.44	0 090	2	1	2	1	0
25390-00	Shorten radius or ulna	R26C	Covered	1347.46	1347.46	0 090	2	1	2	1	0
25391-00	Lengthen radius or ulna	R26C	Covered	1718.05	1718.05	0 090	2	1	2	1	0
25392-00	Shorten radius & ulna	R26C	Covered	1746.92	1746.92	0 090	2	1	2	0	0
25393-00	Lengthen radius & ulna	R26C	Covered	1935.31	1935.31	0 090	2	1	2	0	0
25394-00	Repair carpal bone shorten	R26C	Covered	1367.22	1367.22	0 090	2	1	2	1	0
25400-00	Repair radius or ulna	R26C	Covered	1400.23	1400.23	0 090	2	1	2	1	0
25405-00	Repair/graft radius or ulna	R26C	Covered	1795.22	1795.22	0 090	2	1	2	1	0
25415-00	Repair radius & ulna	R26C	Covered	1672.24	1672.24	0 090	2	1	2	1	0
25420-00	Repair/graft radius & ulna	R26C	Covered	2000.48	2000.48	0 090	2	1	2	1	0
25425-00	Repair/graft radius or ulna	R26C	Covered	1664.74	1664.74	0 090	2	1	2	1	0
25426-00	Repair/graft radius & ulna	R26C	Covered	1925.25	1925.25	0 090	2	1	2	1	0
25430-00	Vasc graft into carpal bone	R26C	Covered	1285.85	1285.85	0 090	2	1	1	0	0
25431-00	Repair nonunion carpal bone	R26C	Covered	1372.93	1372.93	0 090	2	1	2	1	0
25440-00	Repair/graft wrist bone	R26C	Covered	1347.58	1347.58	0 090	2	1	2	1	0
25441-00	Reconstruct wrist joint	R26C	Covered	1622.70	1622.70	0 090	2	1	2	1	0
25442-00	Reconstruct wrist joint	R26C	Covered	1419.93	1419.93	0 090	2	1	2	1	0
25443-00	Reconstruct wrist joint	R26C	Covered	1372.99	1372.99	0 090	2	1	2	1	0
25444-00	Reconstruct wrist joint	R26C	Covered	1441.03	1441.03	0 090	2	1	2	0	0
25445-00	Reconstruct wrist joint	R26C	Covered	1266.56	1266.56	0 090	2	1	1	1	0
25446-00	Wrist replacement	R26C	Covered	2024.85	2024.85	0 090	2	1	2	1	0
25447-00	Repair wrist joints	R26C	Covered	1467.71	1467.71	0 090	2	1	2	1	0
25449-00	Remove wrist joint implant	R26C	Covered	1793.77	1793.77	0 090	2	1	2	1	0
25450-00	Revision of wrist joint	R26C	Covered	1090.82	1090.82	0 090	2	1	1	0	0
25455-00	Revision of wrist joint	R26C	Covered	1282.61	1282.61	0 090	2	1	1	0	0
25490-00	Reinforce radius	R26C	Covered	1258.65	1258.65	0 090	2	1	2	0	0
25491-00	Reinforce ulna	R26C	Covered	1290.42	1290.42	0 090	2	1	2	0	0
25492-00	Reinforce radius and ulna	R26C	Covered	1572.85	1572.85	0 090	2	1	2	0	0
25500-00	Treat fracture of radius	R26C	Covered	539.41	484.43	0 090	2	1	1	0	0
25505-00	Treat fracture of radius	R26C	Covered	935.51	837.84	0 090	2	1	1	0	0
25515-00	Treat fracture of radius	R26C	Covered	1186.63	1186.63	0 090	2	1	2	1	0
25520-00	Treat fracture of radius	R26C	Covered	1050.12	983.50	0 090	2	1	1	0	0
25525-00	Treat fracture of radius	R26C	Covered	1390.41	1390.41	0 090	2	1	2	2	0
25526-00	Treat fracture of radius	R26C	Covered	1665.15	1665.15	0 090	2	1	2	2	0

25530-00	Treat fracture of ulna	R26C	Covered	504.91	460.28	0 090	2	1	1	0	0
25535-00	Treat fracture of ulna	R26C	Covered	911.00	833.38	0 090	2	1	1	0	0
25545-00	Treat fracture of ulna	R26C	Covered	1112.16	1112.16	0 090	2	1	2	1	0
25560-00	Treat fracture radius & ulna	R26C	Covered	549.84	486.46	0 090	2	1	1	0	0
25565-00	Treat fracture radius & ulna	R26C	Covered	948.56	836.66	0 090	2	1	1	0	0
25574-00	Treat fracture radius & ulna	R26C	Covered	1193.83	1193.83	0 090	2	1	2	2	0
25575-00	Treat fracture radius/ulna	R26C	Covered	1581.95	1581.95	0 090	2	1	2	1	0
25600-00	Treat fracture radius/ulna	R26C	Covered	644.97	615.22	0 090	2	1	1	0	0
25605-00	Treat fracture radius/ulna	R26C	Covered	983.55	922.10	0 090	2	1	1	0	0
25606-00	Treat fx distal radial	R26C	Covered	1191.49	1191.49	0 090	2	1	1	0	0
25607-00	Treat fx rad extra-articul	R26C	Covered	1312.34	1312.34	0 090	2	1	2	0	0
25608-00	Treat fx rad intra-articul	R26C	Covered	1457.97	1457.97	0 090	2	1	2	0	0
25609-00	Treat fx radial 3+ frag	R26C	Covered	1843.08	1843.08	0 090	2	1	2	0	0
25622-00	Treat wrist bone fracture	R26C	Covered	582.79	534.28	0 090	2	1	1	0	0
25624-00	Treat wrist bone fracture	R26C	Covered	912.92	818.49	0 090	2	1	0	0	0
25628-00	Treat wrist bone fracture	R26C	Covered	1270.88	1270.88	0 090	2	1	2	0	0
25630-00	Treat wrist bone fracture	R26C	Covered	573.68	529.70	0 090	2	1	1	0	0
25635-00	Treat wrist bone fracture	R26C	Covered	864.90	776.93	0 090	2	1	0	0	0
25645-00	Treat wrist bone fracture	R26C	Covered	1010.56	1010.56	0 090	2	1	2	0	0
25650-00	Treat wrist bone fracture	R26C	Covered	618.41	569.26	0 090	2	1	1	0	0
25651-00	Pin ulnar styloid fracture	R26C	Covered	886.25	886.25	0 090	2	1	0	0	0
25652-00	Treat fracture ulnar styloid	R26C	Covered	1106.01	1106.01	0 090	2	1	1	1	0
25660-00	Treat wrist dislocation	R26C	Covered	819.20	819.20	0 090	2	1	0	0	0
25670-00	Treat wrist dislocation	R26C	Covered	1073.56	1073.56	0 090	2	1	2	1	0
25671-00	Pin radioulnar dislocation	R26C	Covered	959.68	959.68	0 090	2	1	1	0	0
25675-00	Treat wrist dislocation	R26C	Covered	840.85	750.30	0 090	2	1	0	0	0
25676-00	Treat wrist dislocation	R26C	Covered	1119.95	1119.95	0 090	2	1	2	0	0
25680-00	Treat wrist fracture	R26C	Covered	957.75	957.75	0 090	2	1	0	0	0
25685-00	Treat wrist fracture	R26C	Covered	1284.10	1284.10	0 090	2	1	2	0	0
25690-00	Treat wrist dislocation	R26C	Covered	890.16	890.16	0 090	2	1	0	0	0
25695-00	Treat wrist dislocation	R26C	Covered	1114.72	1114.72	0 090	2	1	2	1	0
25800-00	Fusion of wrist joint	R26C	Covered	1284.62	1284.62	0 090	2	1	2	1	0
25805-00	Fusion/graft of wrist joint	R26C	Covered	1475.24	1475.24	0 090	2	1	2	1	0
25810-00	Fusion/graft of wrist joint	R26C	Covered	1521.53	1521.53	0 090	2	1	2	1	0
25820-00	Fusion of hand bones	R26C	Covered	1161.47	1161.47	0 090	2	1	2	1	0
25825-00	Fuse hand bones with graft	R26C	Covered	1414.44	1414.44	0 090	2	1	2	1	0
25830-00	Fusion radioulnar jnt/ulna	R26C	Covered	1842.54	1842.54	0 090	2	1	2	1	0
25900-00	Amputation of forearm	R26C	Covered	1260.54	1260.54	0 090	2	1	0	0	0
25905-00	Amputation of forearm	R26C	Covered	1226.12	1226.12	0 090	2	1	2	0	0
25907-00	Amputation follow-up surgery	R26C	Covered	1083.64	1083.64	0 090	2	1	2	0	0
25909-00	Amputation follow-up surgery	R26C	Covered	1199.02	1199.02	0 090	2	1	2	0	0
25915-00	Amputation of forearm	R26C	Covered	1991.27	1991.27	0 090	2	1	2	0	0
25920-00	Amputate hand at wrist	R26C	Covered	1290.38	1290.38	0 090	2	1	0	0	0
25922-00	Amputate hand at wrist	R26C	Covered	1150.26	1150.26	0 090	2	1	2	0	0
25924-00	Amputation follow-up surgery	R26C	Covered	1260.65	1260.65	0 090	2	1	2	0	0
25927-00	Amputation of hand	R26C	Covered	1545.73	1545.73	0 090	2	1	0	0	0
25929-00	Amputation follow-up surgery	R26C	Covered	1057.24	1057.24	0 090	2	1	2	0	0
25931-00	Amputation follow-up surgery	R26C	Covered	1437.58	1437.58	0 090	2	1	1	0	0
70557-26	Mri brain w/o dye	RCMS	Covered	271.95	271.95	1 XXX	0	0	0	0	0
26010-00	Drainage of finger abscess	R26C	Covered	647.69	255.73	0 010	2	0	1	0	0
26011-00	Drainage of finger abscess	R26C	Covered	893.54	330.82	0 010	2	0	1	0	0
26020-00	Drain hand tendon sheath	R26C	Covered	994.97	994.97	0 090	2	0	1	0	0
26025-00	Drainage of palm bursa	R26C	Covered	750.11	750.11	0 090	2	1	0	0	0
26030-00	Drainage of palm bursas	R26C	Covered	875.85	875.85	0 090	2	1	0	0	0

26034-00	Treat hand bone lesion	R26C	Covered	990.38	990.38	0 090	2	0	1	0	0
26035-00	Decompress fingers/hand	R26C	Covered	1509.94	1509.94	0 090	2	0	0	0	0
26037-00	Decompress fingers/hand	R26C	Covered	990.29	990.29	0 090	2	1	0	0	0
26040-00	Release palm contracture	R26C	Covered	579.40	579.40	0 090	2	1	1	0	0
26045-00	Release palm contracture	R26C	Covered	848.39	848.39	0 090	2	1	1	0	0
26055-00	Incise finger tendon sheath	R26C	Covered	1104.44	533.32	0 090	2	0	1	0	0
26060-00	Incision of finger tendon	R26C	Covered	468.30	468.30	0 090	2	0	0	0	0
26070-00	Explore/treat hand joint	R26C	Covered	587.37	587.37	0 090	2	1	1	0	0
26075-00	Explore/treat finger joint	R26C	Covered	614.99	614.99	0 090	2	1	1	0	0
26080-00	Explore/treat finger joint	R26C	Covered	726.51	726.51	0 090	2	0	1	0	0
26100-00	Biopsy hand joint lining	R26C	Covered	616.94	616.94	0 090	2	1	0	0	0
26105-00	Biopsy finger joint lining	R26C	Covered	620.66	620.66	0 090	2	1	0	0	0
26110-00	Biopsy finger joint lining	R26C	Covered	593.17	593.17	0 090	2	0	1	0	0
26111-00	Exc hand les sc 1.5 cm/>	R26C	Covered	737.98	737.98	0 090	2	0	2	0	0
26113-00	Exc hand tum deep 1.5 cm/>	R26C	Covered	972.64	972.64	0 090	2	0	2	0	0
26115-00	Exc hand les sc < 1.5 cm	R26C	Covered	1016.50	599.31	0 090	2	0	1	0	0
26116-00	Exc hand tum deep < 1.5 cm	R26C	Covered	936.27	936.27	0 090	2	0	1	0	0
26117-00	Rad resect hand tumor < 3 cm	R26C	Covered	1307.17	1307.17	0 090	2	0	1	0	0
26118-00	Rad resect hand tumor 3 cm/>	R26C	Covered	1816.33	1816.33	0 090	2	0	2	0	0
26121-00	Release palm contracture	R26C	Covered	1066.68	1066.68	0 090	2	1	1	0	0
26123-00	Release palm contracture	R26C	Covered	1486.56	1486.56	0 090	2	1	1	0	0
26125-00	Release palm contracture	R26C	Covered	447.33	447.33	0 ZZZ	0	0	1	0	0
26130-00	Remove wrist joint lining	R26C	Covered	841.37	841.37	0 090	2	1	1	0	0
26135-00	Revise finger joint each	R26C	Covered	987.51	987.51	0 090	2	0	0	0	0
26140-00	Revise finger joint each	R26C	Covered	912.27	912.27	0 090	2	0	1	0	0
26145-00	Tendon excision palm/finger	R26C	Covered	924.16	924.16	0 090	2	0	1	0	0
26160-00	Remove tendon sheath lesion	R26C	Covered	1148.35	575.28	0 090	2	0	1	0	0
26170-00	Removal of palm tendon each	R26C	Covered	738.06	738.06	0 090	2	0	0	0	0
26180-00	Removal of finger tendon	R26C	Covered	813.74	813.74	0 090	2	0	0	0	0
26185-00	Remove finger bone	R26C	Covered	1002.18	1002.18	0 090	2	1	2	1	0
26200-00	Remove hand bone lesion	R26C	Covered	808.37	808.37	0 090	2	0	0	0	0
26205-00	Remove/graft bone lesion	R26C	Covered	1067.26	1067.26	0 090	2	0	1	0	0
26210-00	Removal of finger lesion	R26C	Covered	809.97	809.97	0 090	2	0	1	0	0
26215-00	Remove/graft finger lesion	R26C	Covered	1004.58	1004.58	0 090	2	0	1	0	0
26230-00	Partial removal of hand bone	R26C	Covered	891.25	891.25	0 090	2	0	0	0	0
26235-00	Partial removal finger bone	R26C	Covered	880.66	880.66	0 090	2	0	0	0	0
26236-00	Partial removal finger bone	R26C	Covered	792.85	792.85	0 090	2	0	1	0	0
26250-00	Extensive hand surgery	R26C	Covered	1836.41	1836.41	0 090	2	0	0	0	0
26260-00	Resect prox finger tumor	R26C	Covered	1383.11	1383.11	0 090	2	0	2	0	0
26262-00	Resect distal finger tumor	R26C	Covered	1110.21	1110.21	0 090	2	0	2	0	0
26320-00	Removal of implant from hand	R26C	Covered	633.10	633.10	0 090	2	0	1	0	0
26340-00	Manipulate finger w/anesth	R26C	Covered	672.61	672.61	0 090	2	1	1	0	0
26341-00	Manipulat palm cord post inj	R26C	Covered	216.52	140.19	0 010	2	1	1	0	0
26350-00	Repair finger/hand tendon	R26C	Covered	1373.35	1373.35	0 090	2	0	1	0	0
26352-00	Repair/graft hand tendon	R26C	Covered	1513.77	1513.77	0 090	2	0	2	1	0
26356-00	Repair finger/hand tendon	R26C	Covered	1423.86	1423.86	0 090	2	0	1	0	0
26357-00	Repair finger/hand tendon	R26C	Covered	1577.63	1577.63	0 090	2	0	2	0	0
26358-00	Repair/graft hand tendon	R26C	Covered	1729.52	1729.52	0 090	2	0	2	0	0
26370-00	Repair finger/hand tendon	R26C	Covered	1428.19	1428.19	0 090	2	0	0	0	0
26372-00	Repair/graft hand tendon	R26C	Covered	1650.08	1650.08	0 090	2	0	2	0	0
26373-00	Repair finger/hand tendon	R26C	Covered	1592.95	1592.95	0 090	2	0	2	0	0
26390-00	Revise hand/finger tendon	R26C	Covered	1569.36	1569.36	0 090	2	0	2	1	0
26392-00	Repair/graft hand tendon	R26C	Covered	1792.60	1792.60	0 090	2	0	2	1	0
26410-00	Repair hand tendon	R26C	Covered	1110.52	1110.52	0 090	2	0	1	0	0

26412-00	Repair/graft hand tendon	R26C	Covered	1307.80	1307.80	0 090	2	0	0	0	0
26415-00	Excision hand/finger tendon	R26C	Covered	1532.55	1532.55	0 090	2	0	0	0	0
26416-00	Graft hand or finger tendon	R26C	Covered	1651.78	1651.78	0 090	2	0	1	0	0
26418-00	Repair finger tendon	R26C	Covered	1162.50	1162.50	0 090	2	0	1	0	0
26420-00	Repair/graft finger tendon	R26C	Covered	1354.25	1354.25	0 090	2	0	2	0	0
26426-00	Repair finger/hand tendon	R26C	Covered	902.09	902.09	0 090	2	0	1	0	0
26428-00	Repair/graft finger tendon	R26C	Covered	1445.94	1445.94	0 090	2	0	0	0	0
26432-00	Repair finger tendon	R26C	Covered	1008.75	1008.75	0 090	2	0	1	0	0
26433-00	Repair finger tendon	R26C	Covered	1054.38	1054.38	0 090	2	0	1	0	0
26434-00	Repair/graft finger tendon	R26C	Covered	1268.15	1268.15	0 090	2	0	2	0	0
26437-00	Realignment of tendons	R26C	Covered	1221.28	1221.28	0 090	2	0	1	0	0
26440-00	Release palm/finger tendon	R26C	Covered	1201.08	1201.08	0 090	2	0	1	0	0
26442-00	Release palm & finger tendon	R26C	Covered	1797.16	1797.16	0 090	2	0	1	0	0
26445-00	Release hand/finger tendon	R26C	Covered	1121.69	1121.69	0 090	2	0	1	0	0
26449-00	Release forearm/hand tendon	R26C	Covered	1253.50	1253.50	0 090	2	0	0	0	0
26450-00	Incision of palm tendon	R26C	Covered	858.56	858.56	0 090	2	0	0	0	0
26455-00	Incision of finger tendon	R26C	Covered	852.85	852.85	0 090	2	0	0	0	0
26460-00	Incise hand/finger tendon	R26C	Covered	837.80	837.80	0 090	2	0	1	0	0
26471-00	Fusion of finger tendons	R26C	Covered	1209.29	1209.29	0 090	2	0	0	0	0
26474-00	Fusion of finger tendons	R26C	Covered	1194.82	1194.82	0 090	2	0	2	0	0
26476-00	Tendon lengthening	R26C	Covered	1181.64	1181.64	0 090	2	0	1	0	0
26477-00	Tendon shortening	R26C	Covered	1158.60	1158.60	0 090	2	0	1	1	0
26478-00	Lengthening of hand tendon	R26C	Covered	1204.49	1204.49	0 090	2	0	0	0	0
26479-00	Shortening of hand tendon	R26C	Covered	1234.95	1234.95	0 090	2	0	2	0	0
26480-00	Transplant hand tendon	R26C	Covered	1439.64	1439.64	0 090	2	0	0	0	0
26483-00	Transplant/graft hand tendon	R26C	Covered	1581.81	1581.81	0 090	2	0	2	1	0
26485-00	Transplant palm tendon	R26C	Covered	1522.15	1522.15	0 090	2	0	2	1	0
26489-00	Transplant/graft palm tendon	R26C	Covered	1731.10	1731.10	0 090	2	0	0	0	0
26490-00	Revise thumb tendon	R26C	Covered	1509.61	1509.61	0 090	2	0	0	0	0
26492-00	Tendon transfer with graft	R26C	Covered	1662.57	1662.57	0 090	2	0	2	1	0
26494-00	Hand tendon/muscle transfer	R26C	Covered	1515.29	1515.29	0 090	2	0	2	1	0
26496-00	Revise thumb tendon	R26C	Covered	1622.01	1622.01	0 090	2	0	0	0	0
26497-00	Finger tendon transfer	R26C	Covered	1620.10	1620.10	0 090	2	0	2	0	0
26498-00	Finger tendon transfer	R26C	Covered	2078.54	2078.54	0 090	2	0	2	1	0
26499-00	Revision of finger	R26C	Covered	1563.57	1563.57	0 090	2	0	2	1	0
26500-00	Hand tendon reconstruction	R26C	Covered	1255.58	1255.58	0 090	2	0	0	0	0
26502-00	Hand tendon reconstruction	R26C	Covered	1367.98	1367.98	0 090	2	0	2	0	0
26508-00	Release thumb contracture	R26C	Covered	1240.63	1240.63	0 090	2	1	0	0	0
26510-00	Thumb tendon transfer	R26C	Covered	1175.30	1175.30	0 090	2	0	0	0	0
26516-00	Fusion of knuckle joint	R26C	Covered	1350.51	1350.51	0 090	2	1	0	0	0
26517-00	Fusion of knuckle joints	R26C	Covered	1555.42	1555.42	0 090	2	1	2	0	0
26518-00	Fusion of knuckle joints	R26C	Covered	1573.63	1573.63	0 090	2	1	2	1	0
26520-00	Release knuckle contracture	R26C	Covered	1257.11	1257.11	0 090	2	0	1	0	0
26525-00	Release finger contracture	R26C	Covered	1263.56	1263.56	0 090	2	0	1	1	0
26530-00	Revise knuckle joint	R26C	Covered	970.14	970.14	0 090	2	0	2	0	0
26531-00	Revise knuckle with implant	R26C	Covered	1124.86	1124.86	0 090	2	0	2	1	0
26535-00	Revise finger joint	R26C	Covered	790.72	790.72	0 090	2	0	1	0	0
26536-00	Revise/implant finger joint	R26C	Covered	1374.71	1374.71	0 090	2	0	0	0	0
26540-00	Repair hand joint	R26C	Covered	1275.69	1275.69	0 090	2	0	0	1	0
26541-00	Repair hand joint with graft	R26C	Covered	1507.72	1507.72	0 090	2	0	2	1	0
26542-00	Repair hand joint with graft	R26C	Covered	1316.55	1316.55	0 090	2	0	0	0	0
26545-00	Reconstruct finger joint	R26C	Covered	1338.76	1338.76	0 090	2	0	0	0	0
26546-00	Repair nonunion hand	R26C	Covered	1873.54	1873.54	0 090	2	1	2	0	0
26548-00	Reconstruct finger joint	R26C	Covered	1446.76	1446.76	0 090	2	0	0	0	0

26550-00	Construct thumb replacement	R26C	Covered	2869.09	2869.09	0 090	2	1	2	0	0
26551-00	Great toe-hand transfer	R26C	Covered	5600.55	5600.55	0 090	2	1	2	0	0
26553-00	Single transfer toe-hand	R26C	Covered	5562.67	5562.67	0 090	2	1	2	1	0
26554-00	Double transfer toe-hand	R26C	Covered	6457.81	6457.81	0 090	2	1	2	1	0
26555-00	Positional change of finger	R26C	Covered	2431.79	2431.79	0 090	2	0	2	0	0
26556-00	Toe joint transfer	R26C	Covered	5794.10	5794.10	0 090	2	0	2	1	0
26560-00	Repair of web finger	R26C	Covered	1162.41	1162.41	0 090	2	0	2	0	0
26561-00	Repair of web finger	R26C	Covered	1748.09	1748.09	0 090	2	0	2	1	0
26562-00	Repair of web finger	R26C	Covered	2424.56	2424.56	0 090	2	0	2	0	0
26565-00	Correct metacarpal flaw	R26C	Covered	1293.47	1293.47	0 090	2	0	2	0	0
26567-00	Correct finger deformity	R26C	Covered	1308.78	1308.78	0 090	2	0	0	0	0
26568-00	Lengthen metacarpal/finger	R26C	Covered	1675.17	1675.17	0 090	2	0	2	0	0
26580-00	Repair hand deformity	R26C	Covered	2691.74	2691.74	0 090	2	1	2	0	0
26587-00	Reconstruct extra finger	R26C	Covered	1811.21	1811.21	0 090	2	0	2	0	0
26590-00	Repair finger deformity	R26C	Covered	2494.36	2494.36	0 090	2	0	2	0	0
26591-00	Repair muscles of hand	R26C	Covered	914.02	914.02	0 090	2	0	0	0	0
26593-00	Release muscles of hand	R26C	Covered	1185.85	1185.85	0 090	2	0	1	0	0
26596-00	Excision constricting tissue	R26C	Covered	1460.20	1460.20	0 090	2	0	2	0	0
26600-00	Treat metacarpal fracture	R26C	Covered	572.39	543.29	0 090	2	0	1	0	0
26605-00	Treat metacarpal fracture	R26C	Covered	621.59	554.97	0 090	2	0	1	0	0
26607-00	Treat metacarpal fracture	R26C	Covered	917.38	917.38	0 090	2	0	0	0	0
26608-00	Treat metacarpal fracture	R26C	Covered	872.84	872.84	0 090	2	0	0	0	0
26615-00	Treat metacarpal fracture	R26C	Covered	1031.78	1031.78	0 090	2	0	1	0	0
26641-00	Treat thumb dislocation	R26C	Covered	778.98	703.30	0 090	2	1	0	0	0
26645-00	Treat thumb fracture	R26C	Covered	798.99	720.08	0 090	2	1	0	0	0
26650-00	Treat thumb fracture	R26C	Covered	875.97	875.97	0 090	2	1	1	0	0
26665-00	Treat thumb fracture	R26C	Covered	1126.74	1126.74	0 090	2	1	1	1	0
26670-00	Treat hand dislocation	R26C	Covered	649.07	572.75	0 090	2	0	0	0	0
26675-00	Treat hand dislocation	R26C	Covered	851.99	769.84	0 090	2	0	0	0	0
26676-00	Pin hand dislocation	R26C	Covered	927.17	927.17	0 090	2	0	1	0	0
26685-00	Treat hand dislocation	R26C	Covered	1040.87	1040.87	0 090	2	0	1	1	0
26686-00	Treat hand dislocation	R26C	Covered	1097.60	1097.60	0 090	2	0	2	0	0
26700-00	Treat knuckle dislocation	R26C	Covered	627.68	573.35	0 090	2	0	1	0	0
26705-00	Treat knuckle dislocation	R26C	Covered	811.23	727.14	0 090	2	0	0	0	0
26706-00	Pin knuckle dislocation	R26C	Covered	815.41	815.41	0 090	2	0	1	0	0
26715-00	Treat knuckle dislocation	R26C	Covered	1028.05	1028.05	0 090	2	0	0	0	0
26720-00	Treat finger fracture each	R26C	Covered	382.86	358.29	0 090	2	0	1	0	0
26725-00	Treat finger fracture each	R26C	Covered	637.77	561.45	0 090	2	0	1	0	0
26727-00	Treat finger fracture each	R26C	Covered	862.16	862.16	0 090	2	0	1	0	0
26735-00	Treat finger fracture each	R26C	Covered	1063.77	1063.77	0 090	2	0	1	0	0
26740-00	Treat finger fracture each	R26C	Covered	443.29	417.42	0 090	2	0	1	0	0
26742-00	Treat finger fracture each	R26C	Covered	691.18	612.92	0 090	2	0	1	0	0
26746-00	Treat finger fracture each	R26C	Covered	1312.56	1312.56	0 090	2	0	1	0	0
26750-00	Treat finger fracture each	R26C	Covered	355.54	360.07	0 090	2	0	1	0	0
26755-00	Treat finger fracture each	R26C	Covered	596.47	503.33	0 090	2	0	1	0	0
26756-00	Pin finger fracture each	R26C	Covered	776.67	776.67	0 090	2	0	0	0	0
26765-00	Treat finger fracture each	R26C	Covered	910.63	910.63	0 090	2	0	1	0	0
26770-00	Treat finger dislocation	R26C	Covered	537.83	484.14	0 090	2	0	1	0	0
26775-00	Treat finger dislocation	R26C	Covered	739.86	657.71	0 090	2	0	1	0	0
26776-00	Pin finger dislocation	R26C	Covered	820.08	820.08	0 090	2	0	1	0	0
26785-00	Treat finger dislocation	R26C	Covered	984.68	984.68	0 090	2	0	1	0	0
26820-00	Thumb fusion with graft	R26C	Covered	1495.17	1495.17	0 090	2	1	2	1	0
26841-00	Fusion of thumb	R26C	Covered	1410.78	1410.78	0 090	2	1	0	1	0
26842-00	Thumb fusion with graft	R26C	Covered	1498.95	1498.95	0 090	2	1	2	1	0

26843-00	Fusion of hand joint	R26C	Covered	1413.09	1413.09	0 090	2	0	2	1	0
26844-00	Fusion/graft of hand joint	R26C	Covered	1546.02	1546.02	0 090	2	0	2	1	0
26850-00	Fusion of knuckle	R26C	Covered	1336.75	1336.75	0 090	2	0	0	0	0
26852-00	Fusion of knuckle with graft	R26C	Covered	1507.32	1507.32	0 090	2	0	2	1	0
26860-00	Fusion of finger joint	R26C	Covered	1132.77	1132.77	0 090	2	0	1	0	0
26861-00	Fusion of finger jnt add-on	R26C	Covered	169.40	169.40	0 ZZZ	0	0	1	0	0
26862-00	Fusion/graft of finger joint	R26C	Covered	1393.74	1393.74	0 090	2	0	2	1	0
26863-00	Fuse/graft added joint	R26C	Covered	377.69	377.69	0 ZZZ	0	0	2	0	0
26910-00	Amputate metacarpal bone	R26C	Covered	1375.81	1375.81	0 090	2	0	1	0	0
26951-00	Amputation of finger/thumb	R26C	Covered	1288.63	1288.63	0 090	2	0	1	0	0
26952-00	Amputation of finger/thumb	R26C	Covered	1246.31	1246.31	0 090	2	0	1	0	0
93622-26	Electrophysiology evaluation	RCMS	Covered	271.40	271.40	1 ZZZ	0	0	0	0	0
26990-00	Drainage of pelvis lesion	R26C	Covered	1205.23	1205.23	0 090	2	0	1	0	0
26991-00	Drainage of pelvis bursa	R26C	Covered	1269.90	921.27	0 090	2	0	0	0	0
26992-00	Drainage of bone lesion	R26C	Covered	1759.87	1759.87	0 090	2	0	0	0	0
27000-00	Incision of hip tendon	R26C	Covered	709.98	709.98	0 090	2	1	1	1	0
27001-00	Incision of hip tendon	R26C	Covered	949.28	949.28	0 090	2	1	2	1	0
27003-00	Incision of hip tendon	R26C	Covered	1057.28	1057.28	0 090	2	1	2	1	0
27005-00	Incision of hip tendon	R26C	Covered	1255.99	1255.99	0 090	2	1	2	1	0
27006-00	Incision of hip tendons	R26C	Covered	1269.33	1269.33	0 090	2	1	2	1	0
27025-00	Incision of hip/thigh fascia	R26C	Covered	1610.81	1610.81	0 090	2	1	0	1	0
27027-00	Buttock fasciotomy	R26C	Covered	1518.76	1518.76	0 090	2	1	0	0	0
27030-00	Drainage of hip joint	R26C	Covered	1609.89	1609.89	0 090	2	1	2	1	0
27033-00	Exploration of hip joint	R26C	Covered	1671.86	1671.86	0 090	2	1	2	1	0
27035-00	Denervation of hip joint	R26C	Covered	2068.49	2068.49	0 090	2	1	2	1	0
27036-00	Excision of hip joint/muscle	R26C	Covered	1761.04	1761.04	0 090	2	1	2	1	0
27040-00	Biopsy of soft tissues	R26C	Covered	620.76	348.46	0 010	2	1	1	0	0
27041-00	Biopsy of soft tissues	R26C	Covered	1227.79	1227.79	0 090	2	1	1	0	0
27043-00	Exc hip pelvis les sc 3 cm/>	R26C	Covered	794.61	794.61	0 090	2	1	1	0	0
27045-00	Exc hip/pelv tum deep 5 cm/>	R26C	Covered	1247.17	1247.17	0 090	2	1	2	1	0
27047-00	Exc hip/pelvis les sc < 3 cm	R26C	Covered	883.77	625.69	0 090	2	1	1	0	0
27048-00	Exc hip/pelv tum deep < 5 cm	R26C	Covered	1046.65	1046.65	0 090	2	1	2	1	0
27049-00	Resect hip/pelv tum < 5 cm	R26C	Covered	2423.17	2423.17	0 090	2	1	2	1	0
27050-00	Biopsy of sacroiliac joint	R26C	Covered	729.95	729.95	0 090	2	1	0	1	0
27052-00	Biopsy of hip joint	R26C	Covered	1024.79	1024.79	0 090	2	1	2	1	0
27054-00	Removal of hip joint lining	R26C	Covered	1207.03	1207.03	0 090	2	1	2	1	0
27057-00	Buttock fasciotomy w/dbrdmt	R26C	Covered	1725.31	1725.31	0 090	2	1	0	0	0
27059-00	Resect hip/pelv tum 5 cm/>	R26C	Covered	3020.13	3020.13	0 090	2	1	2	1	0
27060-00	Removal of ischial bursa	R26C	Covered	828.22	828.22	0 090	2	1	1	0	0
27062-00	Remove femur lesion/bursa	R26C	Covered	807.06	807.06	0 090	2	1	1	1	0
27065-00	Remove hip bone les super	R26C	Covered	930.13	930.13	0 090	2	1	2	1	0
27066-00	Remove hip bone les deep	R26C	Covered	1422.26	1422.26	0 090	2	1	2	1	0
27067-00	Remove/graft hip bone lesion	R26C	Covered	1787.95	1787.95	0 090	2	1	2	0	0
27070-00	Part remove hip bone super	R26C	Covered	1550.27	1550.27	0 090	2	1	2	1	0
27071-00	Part removal hip bone deep	R26C	Covered	1701.04	1701.04	0 090	2	1	2	1	0
27075-00	Resect hip tumor	R26C	Covered	3501.77	3501.77	0 090	2	0	2	1	0
27076-00	Resect hip tum incl acetabul	R26C	Covered	4215.23	4215.23	0 090	2	0	2	1	0
27077-00	Resect hip tum w/innom bone	R26C	Covered	4691.00	4691.00	0 090	2	0	2	1	0
27078-00	Rsect hip tum incl femur	R26C	Covered	3454.09	3454.09	0 090	2	0	2	1	0
27080-00	Removal of tail bone	R26C	Covered	874.23	874.23	0 090	2	0	2	1	0
27086-00	Remove hip foreign body	R26C	Covered	576.52	301.63	0 010	2	1	0	0	0
27087-00	Remove hip foreign body	R26C	Covered	1051.45	1051.45	0 090	2	1	2	1	0
27090-00	Removal of hip prosthesis	R26C	Covered	1437.69	1437.69	0 090	2	1	2	1	0
27091-00	Removal of hip prosthesis	R26C	Covered	2698.88	2698.88	0 090	2	1	2	1	0

27093-00	Injection for hip x-ray	R26C	Covered	432.23	115.94	0 000	2	1	1	0	0
27095-00	Injection for hip x-ray	R26C	Covered	573.43	138.13	0 000	2	1	1	0	0
27096-00	Inject sacroiliac joint	R26C	Covered	304.70	145.59	0 000	2	1	1	0	0
27097-00	Revision of hip tendon	R26C	Covered	1195.25	1195.25	0 090	2	1	2	0	0
27098-00	Transfer tendon to pelvis	R26C	Covered	1219.03	1219.03	0 090	2	1	2	0	0
27100-00	Transfer of abdominal muscle	R26C	Covered	1447.23	1447.23	0 090	2	1	2	1	0
27105-00	Transfer of spinal muscle	R26C	Covered	1513.16	1513.16	0 090	2	1	2	0	0
27110-00	Transfer of iliopsoas muscle	R26C	Covered	1677.53	1677.53	0 090	2	1	2	1	0
27111-00	Transfer of iliopsoas muscle	R26C	Covered	1566.52	1566.52	0 090	2	1	2	1	0
27120-00	Reconstruction of hip socket	R26C	Covered	2217.77	2217.77	0 090	2	1	2	1	0
27122-00	Reconstruction of hip socket	R26C	Covered	1892.64	1892.64	0 090	2	1	2	1	0
27125-00	Partial hip replacement	R26C	Covered	1938.13	1938.13	0 090	2	1	2	1	0
27130-00	Total hip arthroplasty	R26C	Covered	2180.47	2180.47	0 090	2	1	2	1	0
27132-00	Total hip arthroplasty	R26C	Covered	2827.52	2827.52	0 090	2	1	2	1	0
27134-00	Revise hip joint replacement	R26C	Covered	3197.04	3197.04	0 090	2	1	2	1	0
27137-00	Revise hip joint replacement	R26C	Covered	2476.68	2476.68	0 090	2	1	2	1	0
27138-00	Revise hip joint replacement	R26C	Covered	2570.10	2570.10	0 090	2	1	2	1	0
27140-00	Transplant femur ridge	R26C	Covered	1548.55	1548.55	0 090	2	1	2	1	0
27146-00	Incision of hip bone	R26C	Covered	2185.74	2185.74	0 090	2	1	2	1	0
27147-00	Revision of hip bone	R26C	Covered	2486.38	2486.38	0 090	2	1	2	1	0
27151-00	Incision of hip bones	R26C	Covered	2680.83	2680.83	0 090	2	1	2	1	0
27156-00	Revision of hip bones	R26C	Covered	2881.69	2881.69	0 090	2	1	2	1	0
27158-00	Revision of pelvis	R26C	Covered	2380.70	2380.70	0 090	2	2	2	0	0
27161-00	Incision of neck of femur	R26C	Covered	2088.56	2088.56	0 090	2	1	2	1	0
27165-00	Incision/fixation of femur	R26C	Covered	2345.77	2345.77	0 090	2	1	2	1	0
27170-00	Repair/graft femur head/neck	R26C	Covered	1990.51	1990.51	0 090	2	1	2	1	0
27175-00	Treat slipped epiphysis	R26C	Covered	1157.45	1157.45	0 090	2	1	0	0	0
27176-00	Treat slipped epiphysis	R26C	Covered	1596.65	1596.65	0 090	2	1	2	1	0
27177-00	Treat slipped epiphysis	R26C	Covered	1917.91	1917.91	0 090	2	1	2	1	0
27178-00	Treat slipped epiphysis	R26C	Covered	1596.65	1596.65	0 090	2	1	2	1	0
27179-00	Revise head/neck of femur	R26C	Covered	1687.93	1687.93	0 090	2	1	2	0	0
27181-00	Treat slipped epiphysis	R26C	Covered	1925.42	1925.42	0 090	2	1	2	0	0
27185-00	Revision of femur epiphysis	R26C	Covered	1255.23	1255.23	0 090	2	1	1	1	0
27187-00	Reinforce hip bones	R26C	Covered	1719.40	1719.40	0 090	2	1	2	1	0
27197-00	Clsd tx pelvic ring fx	R26C	Covered	236.75	236.75	0 000	2	0	1	0	0
27198-00	Clsd tx pelvic ring fx	R26C	Covered	543.16	543.16	0 000	2	0	0	2	0
27200-00	Treat tail bone fracture	R26C	Covered	351.98	356.51	0 090	2	0	1	0	0
27202-00	Treat tail bone fracture	R26C	Covered	919.74	919.74	0 090	2	0	2	0	0
27215-00	Treat pelvic fracture(s)	RCMS	Covered	1069.11	1069.11	9 090	9	9	9	9	9
27216-00	Treat pelvic ring fracture	RCMS	Covered	1578.11	1578.11	9 090	9	9	9	9	9
27217-00	Treat pelvic ring fracture	RCMS	Covered	1484.83	1484.83	9 090	9	9	9	9	9
27218-00	Treat pelvic ring fracture	RCMS	Covered	2026.72	2026.72	9 090	9	9	9	9	9
27220-00	Treat hip socket fracture	R26C	Covered	738.09	727.09	0 090	2	1	1	0	0
27222-00	Treat hip socket fracture	R26C	Covered	1689.97	1689.97	0 090	2	1	1	0	0
27226-00	Treat hip wall fracture	R26C	Covered	1812.65	1812.65	0 090	2	1	2	2	0
27227-00	Treat hip fracture(s)	R26C	Covered	2794.69	2794.69	0 090	2	1	2	2	0
27228-00	Treat hip fracture(s)	R26C	Covered	3164.33	3164.33	0 090	2	1	2	2	0
27230-00	Treat thigh fracture	R26C	Covered	875.62	857.51	0 090	2	1	1	0	0
27232-00	Treat thigh fracture	R26C	Covered	1231.34	1231.34	0 090	2	1	1	0	0
27235-00	Treat thigh fracture	R26C	Covered	1565.15	1565.15	0 090	2	1	1	1	0
27236-00	Treat thigh fracture	R26C	Covered	2043.26	2043.26	0 090	2	1	2	1	0
27238-00	Treat thigh fracture	R26C	Covered	836.96	836.96	0 090	2	1	1	0	0
27240-00	Treat thigh fracture	R26C	Covered	1641.70	1641.70	0 090	2	1	1	0	0
27244-00	Treat thigh fracture	R26C	Covered	2099.17	2099.17	0 090	2	1	2	1	0

27245-00	Treat thigh fracture	R26C	Covered	2097.14	2097.14	0 090	2	1	2	2	0
27246-00	Treat thigh fracture	R26C	Covered	700.54	692.78	0 090	2	1	1	0	0
27248-00	Treat thigh fracture	R26C	Covered	1283.31	1283.31	0 090	2	1	2	1	0
27250-00	Treat hip dislocation	R26C	Covered	285.06	285.06	0 000	2	1	1	0	0
27252-00	Treat hip dislocation	R26C	Covered	1289.69	1289.69	0 090	2	1	1	0	0
27253-00	Treat hip dislocation	R26C	Covered	1616.63	1616.63	0 090	2	1	2	1	0
27254-00	Treat hip dislocation	R26C	Covered	2169.54	2169.54	0 090	2	1	2	1	0
27256-00	Treat hip dislocation	R26C	Covered	550.36	398.36	0 010	2	1	0	0	0
27257-00	Treat hip dislocation	R26C	Covered	617.56	617.56	0 010	2	1	0	0	0
27258-00	Treat hip dislocation	R26C	Covered	1907.31	1907.31	0 090	2	1	2	1	0
27259-00	Treat hip dislocation	R26C	Covered	2623.83	2623.83	0 090	2	1	2	0	0
27265-00	Treat hip dislocation	R26C	Covered	747.37	747.37	0 090	2	1	1	0	0
27266-00	Treat hip dislocation	R26C	Covered	1024.96	1024.96	0 090	2	1	1	0	0
27267-00	Cltx thigh fx	R26C	Covered	790.43	790.43	0 090	2	1	2	1	0
27268-00	Cltx thigh fx w/mnpj	R26C	Covered	961.05	961.05	0 090	2	1	2	1	0
27269-00	Optx thigh fx	R26C	Covered	2105.61	2105.61	0 090	2	1	2	1	0
27275-00	Manipulation of hip joint	R26C	Covered	327.42	327.42	0 010	2	0	1	0	0
27279-00	Arthrd si jt perq/min nvas	R26C	Covered	1369.63	1369.63	0 090	2	1	2	1	0
27280-00	Arthr si jt opn b1grf instrm	R26C	Covered	2224.31	2224.31	0 090	2	1	2	1	0
27282-00	Arthrodesis symphysis pubis	R26C	Covered	1494.96	1494.96	0 090	2	0	2	1	0
27284-00	Arthrodesis hip joint	R26C	Covered	2702.78	2702.78	0 090	2	1	2	1	0
27286-00	Arthrd hip jt sbtrchc osteot	R26C	Covered	2780.66	2780.66	0 090	2	1	2	1	0
27290-00	Amputation of leg at hip	R26C	Covered	2757.88	2757.88	0 090	2	0	2	1	0
27295-00	Amputation of leg at hip	R26C	Covered	2130.21	2130.21	0 090	2	1	2	1	0
75959-26	Xray place dist ext thor ao	RCMS	Covered	261.26	261.26	1 XXX	0	0	0	0	0
27301-00	Drain thigh/knee lesion	R26C	Covered	1207.37	888.49	0 090	2	1	1	0	0
27303-00	Drainage of bone lesion	R26C	Covered	1123.40	1123.40	0 090	2	1	2	1	0
27305-00	Incise thigh tendon & fascia	R26C	Covered	857.51	857.51	0 090	2	1	2	1	0
27306-00	Incision of thigh tendon	R26C	Covered	629.98	629.98	0 090	2	1	2	0	0
27307-00	Incision of thigh tendons	R26C	Covered	741.96	741.96	0 090	2	1	0	1	0
27310-00	Exploration of knee joint	R26C	Covered	1280.38	1280.38	0 090	2	1	2	1	0
27323-00	Biopsy thigh soft tissues	R26C	Covered	505.47	312.08	0 010	2	1	1	0	0
27324-00	Biopsy thigh soft tissues	R26C	Covered	722.51	722.51	0 090	2	1	1	0	0
27325-00	Neurectomy hamstring	R26C	Covered	999.59	999.59	0 090	2	1	2	0	0
27326-00	Neurectomy popliteal	R26C	Covered	930.53	930.53	0 090	2	1	2	1	0
27327-00	Exc thigh/knee les sc < 3 cm	R26C	Covered	910.99	554.60	0 090	2	1	1	0	0
27328-00	Exc thigh/knee tum deep <5cm	R26C	Covered	1071.78	1071.78	0 090	2	1	1	0	0
27329-00	Resect thigh/knee tum < 5 cm	R26C	Covered	1753.06	1753.06	0 090	2	1	2	1	0
27330-00	Biopsy knee joint lining	R26C	Covered	756.74	756.74	0 090	2	1	1	1	0
27331-00	Explore/treat knee joint	R26C	Covered	847.73	847.73	0 090	2	1	2	1	0
27332-00	Removal of knee cartilage	R26C	Covered	1138.10	1138.10	0 090	2	1	2	1	0
27333-00	Removal of knee cartilage	R26C	Covered	1043.18	1043.18	0 090	2	1	2	1	0
27334-00	Remove knee joint lining	R26C	Covered	1204.47	1204.47	0 090	2	1	2	1	0
27335-00	Remove knee joint lining	R26C	Covered	1335.76	1335.76	0 090	2	1	2	1	0
27337-00	Exc thigh/knee les sc 3 cm/>	R26C	Covered	718.22	718.22	0 090	2	1	2	0	0
27339-00	Exc thigh/knee tum dep 5cm/>	R26C	Covered	1285.30	1285.30	0 090	2	1	2	0	0
27340-00	Removal of kneecap bursa	R26C	Covered	677.43	677.43	0 090	2	1	1	0	0
27345-00	Removal of knee cyst	R26C	Covered	866.82	866.82	0 090	2	1	2	1	0
27347-00	Remove knee cyst	R26C	Covered	937.33	937.33	0 090	2	1	2	1	0
27350-00	Removal of kneecap	R26C	Covered	1152.89	1152.89	0 090	2	1	2	1	0
27355-00	Remove femur lesion	R26C	Covered	1070.26	1070.26	0 090	2	1	2	1	0
27356-00	Remove femur lesion/graft	R26C	Covered	1293.15	1293.15	0 090	2	1	2	1	0
27357-00	Remove femur lesion/graft	R26C	Covered	1427.09	1427.09	0 090	2	1	2	1	0
27358-00	Remove femur lesion/fixation	R26C	Covered	449.92	449.92	0 ZZZ	0	0	2	0	0

27360-00	Partial removal leg bone(s)	R26C	Covered	1586.51	1586.51	0 090	2	1	2	1	0
27364-00	Resect thigh/knee tum 5 cm/>	R26C	Covered	2616.87	2616.87	0 090	2	1	2	1	0
27365-00	Resect femur/knee tumor	R26C	Covered	3451.00	3451.00	0 090	2	1	2	1	0
27369-00	Njx cntrst kne arthg/ct/mri	R26C	Covered	346.69	68.57	0 000	2	1	1	0	0
27372-00	Removal of foreign body	R26C	Covered	1059.89	701.56	0 090	2	1	0	0	0
27380-00	Repair of kneecap tendon	R26C	Covered	1108.66	1108.66	0 090	2	1	2	1	0
27381-00	Repair/graft kneecap tendon	R26C	Covered	1439.08	1439.08	0 090	2	1	2	1	0
27385-00	Repair of thigh muscle	R26C	Covered	1088.73	1088.73	0 090	2	1	2	1	0
27386-00	Repair/graft of thigh muscle	R26C	Covered	1504.54	1504.54	0 090	2	1	2	1	0
27390-00	Incision of thigh tendon	R26C	Covered	804.04	804.04	0 090	2	1	2	0	0
27391-00	Incision of thigh tendons	R26C	Covered	1023.87	1023.87	0 090	2	0	0	1	0
27392-00	Incision of thigh tendons	R26C	Covered	1248.65	1248.65	0 090	2	2	2	1	0
27393-00	Lengthening of thigh tendon	R26C	Covered	889.08	889.08	0 090	2	1	2	1	0
27394-00	Lengthening of thigh tendons	R26C	Covered	1150.08	1150.08	0 090	2	0	2	0	0
27395-00	Lengthening of thigh tendons	R26C	Covered	1532.67	1532.67	0 090	2	2	2	1	0
27396-00	Transplant of thigh tendon	R26C	Covered	1088.62	1088.62	0 090	2	1	2	1	0
27397-00	Transplants of thigh tendons	R26C	Covered	1590.32	1590.32	0 090	2	1	2	0	0
27400-00	Revise thigh muscles/tendons	R26C	Covered	1219.69	1219.69	0 090	2	1	2	1	0
27403-00	Repair of knee cartilage	R26C	Covered	1133.74	1133.74	0 090	2	1	2	1	0
27405-00	Repair of knee ligament	R26C	Covered	1188.50	1188.50	0 090	2	1	2	1	0
27407-00	Repair of knee ligament	R26C	Covered	1391.15	1391.15	0 090	2	1	2	1	0
27409-00	Repair of knee ligaments	R26C	Covered	1671.85	1671.85	0 090	2	1	2	1	0
27412-00	Autochondrocyte implant knee	R26C	Covered	2803.25	2803.25	0 090	2	1	2	1	0
27415-00	Osteochondral knee allograft	R26C	Covered	2352.08	2352.08	0 090	2	1	2	1	0
27416-00	Osteochondral knee autograft	R26C	Covered	1688.03	1688.03	0 090	2	1	0	0	0
27418-00	Repair degenerated kneecap	R26C	Covered	1436.50	1436.50	0 090	2	1	2	1	0
27420-00	Revision of unstable kneecap	R26C	Covered	1308.85	1308.85	0 090	2	1	2	1	0
27422-00	Revision of unstable kneecap	R26C	Covered	1295.82	1295.82	0 090	2	1	2	1	0
27424-00	Revision/removal of kneecap	R26C	Covered	1306.94	1306.94	0 090	2	1	2	1	0
27425-00	Lat retinacular release open	R26C	Covered	815.35	815.35	0 090	2	1	1	1	0
27427-00	Reconstruction knee	R26C	Covered	1241.13	1241.13	0 090	2	1	2	1	0
27428-00	Reconstruction knee	R26C	Covered	1935.51	1935.51	0 090	2	1	2	1	0
27429-00	Reconstruction knee	R26C	Covered	2181.40	2181.40	0 090	2	1	2	1	0
27430-00	Revision of thigh muscles	R26C	Covered	1296.76	1296.76	0 090	2	1	2	1	0
27435-00	Incision of knee joint	R26C	Covered	1412.28	1412.28	0 090	2	1	2	1	0
27437-00	Revise kneecap	R26C	Covered	1159.98	1159.98	0 090	2	1	1	1	0
27438-00	Revise kneecap with implant	R26C	Covered	1458.44	1458.44	0 090	2	1	2	1	0
27440-00	Revision of knee joint	R26C	Covered	1387.21	1387.21	0 090	2	1	2	1	0
27441-00	Revision of knee joint	R26C	Covered	1429.87	1429.87	0 090	2	1	2	1	0
27442-00	Revision of knee joint	R26C	Covered	1504.21	1504.21	0 090	2	1	2	1	0
27443-00	Revision of knee joint	R26C	Covered	1417.99	1417.99	0 090	2	1	2	1	0
27445-00	Revision of knee joint	R26C	Covered	2141.20	2141.20	0 090	2	1	2	1	0
27446-00	Revision of knee joint	R26C	Covered	1959.98	1959.98	0 090	2	1	2	1	0
27447-00	Total knee arthroplasty	R26C	Covered	2177.79	2177.79	0 090	2	1	2	1	0
27448-00	Incision of thigh	R26C	Covered	1436.19	1436.19	0 090	2	1	2	1	0
27450-00	Incision of thigh	R26C	Covered	1741.90	1741.90	0 090	2	1	2	1	0
27454-00	Realignment of thigh bone	R26C	Covered	2209.63	2209.63	0 090	2	1	2	1	0
27455-00	Realignment of knee	R26C	Covered	1663.87	1663.87	0 090	2	1	2	1	0
27457-00	Realignment of knee	R26C	Covered	1624.49	1624.49	0 090	2	1	2	1	0
27465-00	Shortening of thigh bone	R26C	Covered	2128.50	2128.50	0 090	2	1	2	1	0
27466-00	Lengthening of thigh bone	R26C	Covered	2031.47	2031.47	0 090	2	1	2	1	0
27468-00	Shorten/lengthen thighs	R26C	Covered	2286.82	2286.82	0 090	2	1	2	1	0
27470-00	Repair of thigh	R26C	Covered	2027.95	2027.95	0 090	2	1	2	1	0
27472-00	Repair/graft of thigh	R26C	Covered	2162.36	2162.36	0 090	2	1	2	1	0

27475-00	Surgery to stop leg growth	R26C	Covered	1163.26	1163.26	0 090	2	1	1	1	0
27477-00	Surgery to stop leg growth	R26C	Covered	1278.13	1278.13	0 090	2	1	1	1	0
27479-00	Surgery to stop leg growth	R26C	Covered	1584.91	1584.91	0 090	2	1	2	0	0
27485-00	Surgery to stop leg growth	R26C	Covered	1175.60	1175.60	0 090	2	1	1	0	0
27486-00	Revise/replace knee joint	R26C	Covered	2390.05	2390.05	0 090	2	1	2	1	0
27487-00	Revise/replace knee joint	R26C	Covered	2962.45	2962.45	0 090	2	1	2	1	0
27488-00	Removal of knee prosthesis	R26C	Covered	2056.93	2056.93	0 090	2	1	2	1	0
27495-00	Reinforce thigh	R26C	Covered	1937.18	1937.18	0 090	2	1	2	1	0
27496-00	Decompression of thigh/knee	R26C	Covered	977.52	977.52	0 090	2	1	1	0	0
27497-00	Decompression of thigh/knee	R26C	Covered	1019.20	1019.20	0 090	2	1	0	2	0
27498-00	Decompression of thigh/knee	R26C	Covered	1156.31	1156.31	0 090	2	1	2	2	0
27499-00	Decompression of thigh/knee	R26C	Covered	1229.79	1229.79	0 090	2	1	2	2	0
27500-00	Treatment of thigh fracture	R26C	Covered	937.48	851.45	0 090	2	1	1	0	0
27501-00	Treatment of thigh fracture	R26C	Covered	897.53	882.65	0 090	2	1	0	0	0
27502-00	Treatment of thigh fracture	R26C	Covered	1293.30	1293.30	0 090	2	1	1	0	0
27503-00	Treatment of thigh fracture	R26C	Covered	1388.50	1388.50	0 090	2	1	0	0	0
27506-00	Treatment of thigh fracture	R26C	Covered	2291.48	2291.48	0 090	2	1	2	1	0
27507-00	Treatment of thigh fracture	R26C	Covered	1652.69	1652.69	0 090	2	1	2	2	0
27508-00	Treatment of thigh fracture	R26C	Covered	948.67	892.40	0 090	2	1	1	0	0
27509-00	Treatment of thigh fracture	R26C	Covered	1200.37	1200.37	0 090	2	1	0	0	0
27510-00	Treatment of thigh fracture	R26C	Covered	1183.40	1183.40	0 090	2	1	1	0	0
27511-00	Treatment of thigh fracture	R26C	Covered	1694.92	1694.92	0 090	2	1	2	2	0
27513-00	Treatment of thigh fracture	R26C	Covered	2087.62	2087.62	0 090	2	1	2	2	0
27514-00	Treatment of thigh fracture	R26C	Covered	1645.84	1645.84	0 090	2	1	2	1	0
27516-00	Treat thigh fx growth plate	R26C	Covered	946.79	878.88	0 090	2	1	1	0	0
27517-00	Treat thigh fx growth plate	R26C	Covered	1214.45	1214.45	0 090	2	1	0	0	0
27519-00	Treat thigh fx growth plate	R26C	Covered	1521.26	1521.26	0 090	2	1	2	1	0
27520-00	Treat kneecap fracture	R26C	Covered	612.54	561.45	0 090	2	1	1	0	0
27524-00	Treat kneecap fracture	R26C	Covered	1313.55	1313.55	0 090	2	1	2	1	0
27530-00	Treat knee fracture	R26C	Covered	582.64	544.48	0 090	2	1	1	0	0
27532-00	Treat knee fracture	R26C	Covered	1111.70	1027.61	0 090	2	1	1	0	0
27535-00	Treat knee fracture	R26C	Covered	1532.33	1532.33	0 090	2	1	2	2	0
27536-00	Treat knee fracture	R26C	Covered	2036.22	2036.22	0 090	2	1	2	1	0
27538-00	Treat knee fracture(s)	R26C	Covered	887.33	818.77	0 090	2	1	0	0	0
27540-00	Treat knee fracture	R26C	Covered	1414.95	1414.95	0 090	2	1	2	1	0
27550-00	Treat knee dislocation	R26C	Covered	926.15	841.42	0 090	2	1	0	0	0
27552-00	Treat knee dislocation	R26C	Covered	1123.39	1123.39	0 090	2	1	0	0	0
27556-00	Treat knee dislocation	R26C	Covered	1497.47	1497.47	0 090	2	1	2	1	0
27557-00	Treat knee dislocation	R26C	Covered	1773.58	1773.58	0 090	2	1	2	1	0
27558-00	Treat knee dislocation	R26C	Covered	2010.72	2010.72	0 090	2	1	2	2	0
27560-00	Treat kneecap dislocation	R26C	Covered	690.08	623.46	0 090	2	1	1	0	0
27562-00	Treat kneecap dislocation	R26C	Covered	879.58	879.58	0 090	2	1	0	0	0
27566-00	Treat kneecap dislocation	R26C	Covered	1542.95	1542.95	0 090	2	1	2	1	0
27570-00	Fixation of knee joint	R26C	Covered	274.83	274.83	0 010	2	1	1	0	0
27580-00	Fusion of knee	R26C	Covered	2534.50	2534.50	0 090	2	1	2	1	0
27590-00	Amputate leg at thigh	R26C	Covered	1267.46	1267.46	0 090	2	1	2	1	0
27591-00	Amputate leg at thigh	R26C	Covered	1658.90	1658.90	0 090	2	1	2	1	0
27592-00	Amputate leg at thigh	R26C	Covered	1098.18	1098.18	0 090	2	1	2	1	0
27594-00	Amputation follow-up surgery	R26C	Covered	854.65	854.65	0 090	2	1	1	0	0
27596-00	Amputation follow-up surgery	R26C	Covered	1176.67	1176.67	0 090	2	1	1	1	0
27598-00	Amputate lower leg at knee	R26C	Covered	1142.02	1142.02	0 090	2	1	2	1	0
79445-26	Nuclear rx intra-arterial	RCMS	Covered	189.87	189.87	1 XXX	0	0	0	0	0
27600-00	Decompression of lower leg	R26C	Covered	682.16	682.16	0 090	2	1	1	1	0
27601-00	Decompression of lower leg	R26C	Covered	771.80	771.80	0 090	2	1	1	0	0

27602-00	Decompression of lower leg	R26C	Covered	781.59	781.59	0 090	2	1	2	1	0
27603-00	Drain lower leg lesion	R26C	Covered	947.16	687.15	0 090	2	1	1	0	0
27604-00	Drain lower leg bursa	R26C	Covered	817.23	573.38	0 090	2	1	0	0	0
27605-00	Incision of achilles tendon	R26C	Covered	610.91	328.25	0 010	2	1	0	0	0
27606-00	Incision of achilles tendon	R26C	Covered	472.41	472.41	0 010	2	1	1	1	0
27607-00	Treat lower leg bone lesion	R26C	Covered	1048.62	1048.62	0 090	2	1	1	0	0
27610-00	Explore/treat ankle joint	R26C	Covered	1133.08	1133.08	0 090	2	1	1	0	0
27612-00	Exploration of ankle joint	R26C	Covered	1016.74	1016.74	0 090	2	1	2	1	0
27613-00	Biopsy lower leg soft tissue	R26C	Covered	467.60	288.44	0 010	2	1	1	0	0
27614-00	Biopsy lower leg soft tissue	R26C	Covered	1072.36	737.32	0 090	2	1	1	0	0
27615-00	Resect leg/ankle tum < 5 cm	R26C	Covered	1711.32	1711.32	0 090	2	1	0	1	0
27616-00	Resect leg/ankle tum 5 cm/>	R26C	Covered	2117.50	2117.50	0 090	2	1	0	1	0
27618-00	Exc leg/ankle tum < 3 cm	R26C	Covered	889.13	541.80	0 090	2	1	1	0	0
27619-00	Exc leg/ankle tum deep <5 cm	R26C	Covered	825.96	825.96	0 090	2	1	1	0	0
27620-00	Explore/treat ankle joint	R26C	Covered	801.88	801.88	0 090	2	1	2	1	0
27625-00	Remove ankle joint lining	R26C	Covered	1016.06	1016.06	0 090	2	1	2	1	0
27626-00	Remove ankle joint lining	R26C	Covered	1092.29	1092.29	0 090	2	1	2	0	0
27630-00	Removal of tendon lesion	R26C	Covered	989.85	641.87	0 090	2	1	1	0	0
27632-00	Exc leg/ankle les sc 3 cm/>	R26C	Covered	704.57	704.57	0 090	2	1	2	0	0
27634-00	Exc leg/ankle tum dep 5 cm/>	R26C	Covered	1157.34	1157.34	0 090	2	1	2	0	0
27635-00	Remove lower leg bone lesion	R26C	Covered	1022.54	1022.54	0 090	2	1	1	1	0
27637-00	Remove/graft leg bone lesion	R26C	Covered	1309.79	1309.79	0 090	2	1	2	1	0
27638-00	Remove/graft leg bone lesion	R26C	Covered	1297.85	1297.85	0 090	2	1	2	1	0
27640-00	Partial removal of tibia	R26C	Covered	1446.48	1446.48	0 090	2	1	1	1	0
27641-00	Partial removal of fibula	R26C	Covered	1144.35	1144.35	0 090	2	1	1	1	0
27645-00	Resect tibia tumor	R26C	Covered	2986.83	2986.83	0 090	2	1	2	1	0
27646-00	Resect fibula tumor	R26C	Covered	2605.87	2605.87	0 090	2	1	2	1	0
27647-00	Resect talus/calcaneus tum	R26C	Covered	1751.20	1751.20	0 090	2	1	2	0	0
27648-00	Injection for ankle x-ray	R26C	Covered	397.28	86.82	0 000	2	1	0	0	0
27650-00	Repair achilles tendon	R26C	Covered	1168.04	1168.04	0 090	2	1	2	1	0
27652-00	Repair/graft achilles tendon	R26C	Covered	1188.90	1188.90	0 090	2	1	1	1	0
27654-00	Repair of achilles tendon	R26C	Covered	1267.69	1267.69	0 090	2	1	2	1	0
27656-00	Repair leg fascia defect	R26C	Covered	972.91	615.23	0 090	2	1	2	0	0
27658-00	Repair of leg tendon each	R26C	Covered	663.26	663.26	0 090	2	0	2	1	0
27659-00	Repair of leg tendon each	R26C	Covered	842.90	842.90	0 090	2	0	2	1	0
27664-00	Repair of leg tendon each	R26C	Covered	651.24	651.24	0 090	2	0	0	0	0
27665-00	Repair of leg tendon each	R26C	Covered	759.97	759.97	0 090	2	0	2	1	0
27675-00	Repair lower leg tendons	R26C	Covered	882.40	882.40	0 090	2	1	2	1	0
27676-00	Repair lower leg tendons	R26C	Covered	1074.98	1074.98	0 090	2	1	2	0	0
27680-00	Release of lower leg tendon	R26C	Covered	752.20	752.20	0 090	2	0	1	1	0
27681-00	Release of lower leg tendons	R26C	Covered	901.60	901.60	0 090	2	1	1	1	0
27685-00	Revision of lower leg tendon	R26C	Covered	1200.74	834.65	0 090	2	1	2	1	0
27686-00	Revise lower leg tendons	R26C	Covered	943.04	943.04	0 090	2	1	1	1	0
27687-00	Revision of calf tendon	R26C	Covered	811.26	811.26	0 090	2	1	2	1	0
27690-00	Revise lower leg tendon	R26C	Covered	1135.99	1135.99	0 090	2	1	2	1	0
27691-00	Revise lower leg tendon	R26C	Covered	1310.74	1310.74	0 090	2	1	2	1	0
27692-00	Revise additional leg tendon	R26C	Covered	168.90	168.90	0 ZZZ	0	0	2	1	0
27695-00	Repair of ankle ligament	R26C	Covered	866.92	866.92	0 090	2	1	1	1	0
27696-00	Repair of ankle ligaments	R26C	Covered	974.31	974.31	0 090	2	1	1	1	0
27698-00	Repair of ankle ligament	R26C	Covered	1122.14	1122.14	0 090	2	1	2	1	0
27700-00	Revision of ankle joint	R26C	Covered	1242.71	1242.71	0 090	2	1	2	1	0
27702-00	Reconstruct ankle joint	R26C	Covered	1663.75	1663.75	0 090	2	1	2	1	0
27703-00	Reconstruction ankle joint	R26C	Covered	1912.27	1912.27	0 090	2	1	2	0	0
27704-00	Removal of ankle implant	R26C	Covered	1001.77	1001.77	0 090	2	1	1	1	0

27705-00	Incision of tibia	R26C	Covered	1307.14	1307.14	0 090	2	1	2	1	0
27707-00	Incision of fibula	R26C	Covered	730.62	730.62	0 090	2	1	1	1	0
27709-00	Incision of tibia & fibula	R26C	Covered	1964.93	1964.93	0 090	2	1	2	1	0
27712-00	Realignment of lower leg	R26C	Covered	1896.54	1896.54	0 090	2	1	2	1	0
27715-00	Revision of lower leg	R26C	Covered	1842.68	1842.68	0 090	2	1	2	1	0
27720-00	Repair of tibia	R26C	Covered	1516.71	1516.71	0 090	2	1	2	1	0
27722-00	Repair/graft of tibia	R26C	Covered	1552.74	1552.74	0 090	2	1	2	1	0
27724-00	Repair/graft of tibia	R26C	Covered	2129.43	2129.43	0 090	2	1	2	1	0
27725-00	Repair of lower leg	R26C	Covered	2093.20	2093.20	0 090	2	1	2	1	0
27726-00	Repair fibula nonunion	R26C	Covered	1645.77	1645.77	0 090	2	1	1	1	0
27727-00	Repair of lower leg	R26C	Covered	1790.86	1790.86	0 090	2	1	2	1	0
27730-00	Repair of tibia epiphysis	R26C	Covered	1037.56	1037.56	0 090	2	1	1	1	0
27732-00	Repair of fibula epiphysis	R26C	Covered	811.98	811.98	0 090	2	1	1	0	0
27734-00	Repair lower leg epiphyses	R26C	Covered	1154.50	1154.50	0 090	2	1	1	0	0
27740-00	Repair of leg epiphyses	R26C	Covered	1238.33	1238.33	0 090	2	1	2	0	0
27742-00	Repair of leg epiphyses	R26C	Covered	1355.64	1355.64	0 090	2	1	2	1	0
27745-00	Reinforce tibia	R26C	Covered	1300.36	1300.36	0 090	2	1	2	1	0
27750-00	Treatment of tibia fracture	R26C	Covered	650.40	599.95	0 090	2	1	1	0	0
27752-00	Treatment of tibia fracture	R26C	Covered	968.64	874.85	0 090	2	1	1	0	0
27756-00	Treatment of tibia fracture	R26C	Covered	1026.19	1026.19	0 090	2	1	2	1	0
27758-00	Treatment of tibia fracture	R26C	Covered	1554.93	1554.93	0 090	2	1	2	1	0
27759-00	Treatment of tibia fracture	R26C	Covered	1716.14	1716.14	0 090	2	1	2	2	0
27760-00	Cltx medial ankle fx	R26C	Covered	627.91	575.52	0 090	2	1	1	0	0
27762-00	Cltx med ankle fx w/mnpj	R26C	Covered	892.10	794.43	0 090	2	1	1	0	0
27766-00	Optx medial ankle fx	R26C	Covered	1071.28	1071.28	0 090	2	1	1	1	0
27767-00	Cltx post ankle fx	R26C	Covered	547.57	546.92	0 090	2	1	1	0	0
27768-00	Cltx post ankle fx w/mnpj	R26C	Covered	812.94	812.94	0 090	2	1	1	0	0
27769-00	Optx post ankle fx	R26C	Covered	1267.91	1267.91	0 090	2	1	1	0	0
27780-00	Treatment of fibula fracture	R26C	Covered	583.33	533.52	0 090	2	1	1	0	0
27781-00	Treatment of fibula fracture	R26C	Covered	809.16	738.01	0 090	2	1	1	0	0
27784-00	Treatment of fibula fracture	R26C	Covered	1256.38	1256.38	0 090	2	1	1	1	0
27786-00	Treatment of ankle fracture	R26C	Covered	589.70	536.02	0 090	2	1	1	0	0
27788-00	Treatment of ankle fracture	R26C	Covered	783.05	700.26	0 090	2	1	1	0	0
27792-00	Treatment of ankle fracture	R26C	Covered	1137.75	1137.75	0 090	2	1	1	1	0
27808-00	Treatment of ankle fracture	R26C	Covered	634.43	572.99	0 090	2	1	1	0	0
27810-00	Treatment of ankle fracture	R26C	Covered	867.96	771.59	0 090	2	1	1	0	0
27814-00	Treatment of ankle fracture	R26C	Covered	1336.17	1336.17	0 090	2	1	2	1	0
27816-00	Treatment of ankle fracture	R26C	Covered	624.02	548.35	0 090	2	1	1	0	0
27818-00	Treatment of ankle fracture	R26C	Covered	897.89	789.23	0 090	2	1	1	0	0
27822-00	Treatment of ankle fracture	R26C	Covered	1540.67	1540.67	0 090	2	1	2	1	0
27823-00	Treatment of ankle fracture	R26C	Covered	1724.46	1724.46	0 090	2	1	2	1	0
27824-00	Treat lower leg fracture	R26C	Covered	587.61	565.62	0 090	2	1	1	0	0
27825-00	Treat lower leg fracture	R26C	Covered	982.67	873.36	0 090	2	1	0	0	0
27826-00	Treat lower leg fracture	R26C	Covered	1510.69	1510.69	0 090	2	1	2	2	0
27827-00	Treat lower leg fracture	R26C	Covered	1960.41	1960.41	0 090	2	1	2	2	0
27828-00	Treat lower leg fracture	R26C	Covered	2301.47	2301.47	0 090	2	1	2	2	0
27829-00	Treat lower leg joint	R26C	Covered	1256.66	1256.66	0 090	2	1	2	2	0
27830-00	Treat lower leg dislocation	R26C	Covered	721.84	661.04	0 090	2	1	0	0	0
27831-00	Treat lower leg dislocation	R26C	Covered	740.98	740.98	0 090	2	1	0	0	0
27832-00	Treat lower leg dislocation	R26C	Covered	1327.21	1327.21	0 090	2	1	2	1	0
27840-00	Treat ankle dislocation	R26C	Covered	699.39	699.39	0 090	2	1	1	0	0
27842-00	Treat ankle dislocation	R26C	Covered	877.76	877.76	0 090	2	1	1	0	0
27846-00	Treat ankle dislocation	R26C	Covered	1268.70	1268.70	0 090	2	1	2	1	0
27848-00	Treat ankle dislocation	R26C	Covered	1375.56	1375.56	0 090	2	1	2	1	0

27860-00	Fixation of ankle joint	R26C	Covered	291.05	291.05	0 010	2	1	0	0	0
27870-00	Fusion of ankle joint open	R26C	Covered	1747.39	1747.39	0 090	2	1	2	1	0
27871-00	Fusion of tibiofibular joint	R26C	Covered	1210.04	1210.04	0 090	2	1	2	1	0
27880-00	Amputation of lower leg	R26C	Covered	1456.58	1456.58	0 090	2	1	2	1	0
27881-00	Amputation of lower leg	R26C	Covered	1391.54	1391.54	0 090	2	1	2	1	0
27882-00	Amputation of lower leg	R26C	Covered	963.88	963.88	0 090	2	1	0	1	0
27884-00	Amputation follow-up surgery	R26C	Covered	968.28	968.28	0 090	2	1	1	0	0
27886-00	Amputation follow-up surgery	R26C	Covered	1080.51	1080.51	0 090	2	1	1	1	0
27888-00	Amputation of foot at ankle	R26C	Covered	912.16	912.16	0 090	2	1	2	1	0
27889-00	Amputation of foot at ankle	R26C	Covered	1059.08	1059.08	0 090	2	1	1	1	0
27892-00	Decompression of leg	R26C	Covered	921.54	921.54	0 090	2	1	0	0	0
27893-00	Decompression of leg	R26C	Covered	1084.19	1084.19	0 090	2	1	0	0	0
27894-00	Decompression of leg	R26C	Covered	1372.18	1372.18	0 090	2	1	2	0	0
93318-26	Echo transesophageal intraop	RCMS	Covered	176.52	176.52	1 XXX	6	0	0	0	0
28001-00	Drainage of bursa of foot	R26C	Covered	313.81	166.99	0 000	2	0	1	0	0
28002-00	Treatment of foot infection	R26C	Covered	450.17	245.14	0 000	2	0	1	0	0
28003-00	Treatment of foot infection	R26C	Covered	676.76	443.91	0 000	2	0	1	0	0
28005-00	Treat foot bone lesion	R26C	Covered	1023.05	1023.05	0 090	2	0	1	0	0
28008-00	Incision of foot fascia	R26C	Covered	787.36	533.81	0 090	2	1	1	0	0
28010-00	Incision of toe tendon	R26C	Covered	432.01	382.20	0 090	2	0	1	0	0
28011-00	Incision of toe tendons	R26C	Covered	577.61	507.76	0 090	2	0	1	0	0
28020-00	Exploration of foot joint	R26C	Covered	993.37	656.39	0 090	2	0	1	1	0
28022-00	Exploration of foot joint	R26C	Covered	895.13	591.13	0 090	2	0	1	0	0
28024-00	Exploration of toe joint	R26C	Covered	852.54	559.54	0 090	2	0	1	0	0
28035-00	Decompression of tibia nerve	R26C	Covered	967.69	644.29	0 090	2	1	1	1	0
28039-00	Exc foot/toe tum sc 1.5 cm/>	R26C	Covered	869.14	603.96	0 090	2	1	2	0	0
28041-00	Exc foot/toe tum dep 1.5cm/>	R26C	Covered	802.81	802.81	0 090	2	1	0	0	0
28043-00	Exc foot/toe tum sc < 1.5 cm	R26C	Covered	705.63	472.79	0 090	2	1	1	0	0
28045-00	Exc foot/toe tum deep <1.5cm	R26C	Covered	880.25	626.70	0 090	2	1	0	0	0
28046-00	Resect foot/toe tumor < 3 cm	R26C	Covered	1234.02	1234.02	0 090	2	1	1	1	0
28047-00	Resect foot/toe tumor 3 cm/>	R26C	Covered	1784.07	1784.07	0 090	2	1	2	1	0
28050-00	Biopsy of foot joint lining	R26C	Covered	769.10	508.44	0 090	2	1	1	1	0
28052-00	Biopsy of foot joint lining	R26C	Covered	721.08	466.25	0 090	2	1	1	1	0
28054-00	Biopsy of toe joint lining	R26C	Covered	680.72	428.47	0 090	2	1	0	0	0
28055-00	Neurectomy foot	R26C	Covered	697.17	697.17	0 090	2	1	0	0	0
28060-00	Partial removal foot fascia	R26C	Covered	951.23	650.46	0 090	2	1	1	0	0
28062-00	Removal of foot fascia	R26C	Covered	1058.23	727.72	0 090	2	1	1	1	0
28070-00	Removal of foot joint lining	R26C	Covered	932.26	618.56	0 090	2	0	1	0	0
28072-00	Removal of foot joint lining	R26C	Covered	903.24	587.60	0 090	2	0	1	0	0
28080-00	Removal of foot lesion	R26C	Covered	987.93	693.63	0 090	2	0	0	0	0
28086-00	Excise foot tendon sheath	R26C	Covered	961.14	629.33	0 090	2	1	2	1	0
28088-00	Excise foot tendon sheath	R26C	Covered	857.98	533.28	0 090	2	1	0	0	0
28090-00	Removal of foot lesion	R26C	Covered	859.59	559.47	0 090	2	1	1	0	0
28092-00	Removal of toe lesions	R26C	Covered	783.31	497.42	0 090	2	0	1	0	0
28100-00	Removal of ankle/heel lesion	R26C	Covered	1118.20	747.58	0 090	2	1	2	1	0
28102-00	Remove/graft foot lesion	R26C	Covered	1077.64	1077.64	0 090	2	1	2	0	0
28103-00	Remove/graft foot lesion	R26C	Covered	698.91	698.91	0 090	2	1	2	0	0
28104-00	Removal of foot lesion	R26C	Covered	962.96	637.61	0 090	2	0	2	1	0
28106-00	Remove/graft foot lesion	R26C	Covered	767.69	767.69	0 090	2	0	2	1	0
28107-00	Remove/graft foot lesion	R26C	Covered	934.45	627.22	0 090	2	0	2	0	0
28108-00	Removal of toe lesions	R26C	Covered	802.02	525.19	0 090	2	0	1	0	0
28110-00	Part removal of metatarsal	R26C	Covered	856.21	533.45	0 090	2	1	1	1	0
28111-00	Part removal of metatarsal	R26C	Covered	870.42	572.25	0 090	2	1	1	1	0
28112-00	Part removal of metatarsal	R26C	Covered	887.88	565.77	0 090	2	1	1	1	0

28113-00	Part removal of metatarsal	R26C	Covered	1076.57	777.10	0 090	2	1	0	0	0
28114-00	Removal of metatarsal heads	R26C	Covered	1929.09	1492.50	0 090	2	1	2	1	0
28116-00	Revision of foot	R26C	Covered	1390.79	1033.76	0 090	2	1	1	0	0
28118-00	Removal of heel bone	R26C	Covered	1104.09	756.12	0 090	2	1	2	1	0
28119-00	Removal of heel spur	R26C	Covered	966.72	658.85	0 090	2	1	1	1	0
28120-00	Part removal of ankle/heel	R26C	Covered	1217.22	884.77	0 090	2	1	1	1	0
28122-00	Partial removal of foot bone	R26C	Covered	1081.16	790.10	0 090	2	1	2	1	0
28124-00	Partial removal of toe	R26C	Covered	881.02	609.37	0 090	2	1	1	0	0
28126-00	Partial removal of toe	R26C	Covered	721.85	453.43	0 090	2	0	1	0	0
28130-00	Removal of ankle bone	R26C	Covered	1101.75	1101.75	0 090	2	1	2	1	0
28140-00	Removal of metatarsal	R26C	Covered	1019.82	746.87	0 090	2	0	1	1	0
28150-00	Removal of toe	R26C	Covered	770.70	506.16	0 090	2	0	1	0	0
28153-00	Partial removal of toe	R26C	Covered	750.05	482.28	0 090	2	0	1	0	0
28160-00	Partial removal of toe	R26C	Covered	755.66	486.59	0 090	2	0	1	0	0
28171-00	Resect tarsal tumor	R26C	Covered	1891.72	1891.72	0 090	2	0	2	0	0
28173-00	Resect metatarsal tumor	R26C	Covered	1283.20	1283.20	0 090	2	0	1	1	0
28175-00	Resect phalanx of toe tumor	R26C	Covered	842.66	842.66	0 090	2	0	1	1	0
28190-00	Removal of foot foreign body	R26C	Covered	447.16	238.89	0 010	2	1	1	0	0
28192-00	Removal of foot foreign body	R26C	Covered	844.37	561.07	0 090	2	1	1	0	0
28193-00	Removal of foot foreign body	R26C	Covered	955.46	659.87	0 090	2	1	1	0	0
28200-00	Repair of foot tendon	R26C	Covered	908.98	590.11	0 090	2	0	1	1	0
28202-00	Repair/graft of foot tendon	R26C	Covered	1090.11	768.01	0 090	2	0	2	1	0
28208-00	Repair of foot tendon	R26C	Covered	892.41	580.66	0 090	2	0	1	1	0
28210-00	Repair/graft of foot tendon	R26C	Covered	1082.24	759.49	0 090	2	0	2	0	0
28220-00	Release of foot tendon	R26C	Covered	830.57	553.74	0 090	2	1	1	0	0
28222-00	Release of foot tendons	R26C	Covered	984.38	664.86	0 090	2	1	1	0	0
28225-00	Release of foot tendon	R26C	Covered	763.95	481.30	0 090	2	1	1	1	0
28226-00	Release of foot tendons	R26C	Covered	1127.96	714.01	0 090	2	1	1	0	0
28230-00	Incision of foot tendon(s)	R26C	Covered	796.71	516.00	0 090	2	1	1	0	0
28232-00	Incision of toe tendon	R26C	Covered	699.30	440.58	0 090	2	0	1	0	0
28234-00	Incision of foot tendon	R26C	Covered	761.46	494.98	0 090	2	0	1	0	0
28238-00	Revision of foot tendon	R26C	Covered	1218.98	871.00	0 090	2	1	2	1	0
28240-00	Release of big toe	R26C	Covered	816.39	531.79	0 090	2	1	1	0	0
28250-00	Revision of foot fascia	R26C	Covered	1071.43	735.09	0 090	2	1	2	1	0
28260-00	Release of midfoot joint	R26C	Covered	1317.62	956.71	0 090	2	1	2	1	0
28261-00	Revision of foot tendon	R26C	Covered	1915.05	1473.93	0 090	2	1	0	0	0
28262-00	Revision of foot and ankle	R26C	Covered	2425.55	1912.64	0 090	2	1	2	1	0
28264-00	Release of midfoot joint	R26C	Covered	1564.23	1180.03	0 090	2	1	2	0	0
28270-00	Release of foot contracture	R26C	Covered	896.36	606.60	0 090	2	1	1	0	0
28272-00	Release of toe joint each	R26C	Covered	708.05	457.74	0 090	2	1	1	0	0
28280-00	Fusion of toes	R26C	Covered	926.78	621.49	0 090	2	1	0	0	0
28285-00	Repair of hammertoe	R26C	Covered	992.46	701.40	0 090	2	1	1	1	0
28286-00	Repair of hammertoe	R26C	Covered	817.93	541.10	0 090	2	1	1	0	0
28288-00	Partial removal of foot bone	R26C	Covered	1110.88	791.36	0 090	2	0	1	0	0
28289-00	Corrj halux rigidus w/o implt	R26C	Covered	1262.70	829.34	0 090	2	1	2	1	0
28291-00	Corrj halux rigidus w/implt	R26C	Covered	1261.32	863.54	0 090	2	1	2	1	0
28292-00	Cor hlx vlgs rsc prx phlx bs	R26C	Covered	1286.18	878.70	0 090	2	1	2	1	0
28295-00	Cor hlx vlgs prx mtar osteot	R26C	Covered	1926.35	1071.93	0 090	2	1	2	1	0
28296-00	Cor hlx vlgs dstl mtar osteo	R26C	Covered	1636.96	926.13	0 090	2	1	2	1	0
28297-00	Cor hlx vlgs jt arthrd	R26C	Covered	1879.74	1072.53	0 090	2	1	2	1	0
28298-00	Cor hlx vlgs prx phlx osteot	R26C	Covered	1535.58	908.18	0 090	2	1	2	1	0
28299-00	Cor hlx vlgs double osteot	R26C	Covered	1863.33	1063.89	0 090	2	1	2	1	0
28300-00	Incision of heel bone	R26C	Covered	1142.70	1142.70	0 090	2	1	2	1	0
28302-00	Incision of ankle bone	R26C	Covered	1250.20	1250.20	0 090	2	1	2	1	0

28304-00	Incision of midfoot bones	R26C	Covered	1491.72	1082.30	0 090	2	1	2	1	0
28305-00	Incise/graft midfoot bones	R26C	Covered	1188.71	1188.71	0 090	2	1	2	1	0
28306-00	Incision of metatarsal	R26C	Covered	1115.55	727.47	0 090	2	1	2	1	0
28307-00	Incision of metatarsal	R26C	Covered	1424.62	915.59	0 090	2	1	0	0	0
28308-00	Incision of metatarsal	R26C	Covered	1050.30	700.38	0 090	2	1	2	1	0
28309-00	Incision of metatarsals	R26C	Covered	1580.59	1580.59	0 090	2	1	0	0	0
28310-00	Revision of big toe	R26C	Covered	1003.19	653.92	0 090	2	1	1	1	0
28312-00	Revision of toe	R26C	Covered	1003.34	622.37	0 090	2	0	1	1	0
28313-00	Repair deformity of toe	R26C	Covered	965.70	648.12	0 090	2	0	1	0	0
28315-00	Removal of sesamoid bone	R26C	Covered	878.07	588.31	0 090	2	1	1	1	0
28320-00	Repair of foot bones	R26C	Covered	1085.92	1085.92	0 090	2	1	2	1	0
28322-00	Repair of metatarsals	R26C	Covered	1420.44	1022.01	0 090	2	0	2	1	0
28340-00	Resect enlarged toe tissue	R26C	Covered	1039.39	735.39	0 090	2	0	1	0	0
28341-00	Resect enlarged toe	R26C	Covered	1202.04	871.53	0 090	2	0	1	0	0
28344-00	Repair extra toe(s)	R26C	Covered	775.52	509.04	0 090	2	1	1	1	0
28345-00	Repair webbed toe(s)	R26C	Covered	942.89	655.06	0 090	2	0	0	0	0
28360-00	Reconstruct cleft foot	R26C	Covered	1909.61	1909.61	0 090	2	1	2	0	0
28400-00	Treatment of heel fracture	R26C	Covered	467.44	431.86	0 090	2	1	1	0	0
28405-00	Treatment of heel fracture	R26C	Covered	828.26	735.12	0 090	2	1	0	0	0
28406-00	Treatment of heel fracture	R26C	Covered	1062.22	1062.22	0 090	2	1	0	0	0
28415-00	Treat heel fracture	R26C	Covered	1966.85	1966.85	0 090	2	1	2	1	0
28420-00	Treat/graft heel fracture	R26C	Covered	2250.64	2250.64	0 090	2	1	2	1	0
28430-00	Treatment of ankle fracture	R26C	Covered	452.27	393.41	0 090	2	1	1	0	0
28435-00	Treatment of ankle fracture	R26C	Covered	686.88	602.15	0 090	2	1	0	0	0
28436-00	Treatment of ankle fracture	R26C	Covered	904.84	904.84	0 090	2	1	1	0	0
28445-00	Treat ankle fracture	R26C	Covered	1826.37	1826.37	0 090	2	1	2	1	0
28446-00	Osteochondral talus autograft	R26C	Covered	2103.31	2103.31	0 090	2	1	2	1	0
28450-00	Treat midfoot fracture each	R26C	Covered	400.19	360.09	0 090	2	0	1	0	0
28455-00	Treat midfoot fracture each	R26C	Covered	479.46	426.43	0 090	2	0	0	0	0
28456-00	Treat midfoot fracture	R26C	Covered	691.42	691.42	0 090	2	0	1	0	0
28465-00	Treat midfoot fracture each	R26C	Covered	1147.69	1147.69	0 090	2	0	1	0	0
28470-00	Treat metatarsal fracture	R26C	Covered	412.58	387.35	0 090	2	0	1	0	0
28475-00	Treat metatarsal fracture	R26C	Covered	486.10	424.01	0 090	2	0	1	0	0
28476-00	Treat metatarsal fracture	R26C	Covered	719.43	719.43	0 090	2	0	0	0	0
28485-00	Treat metatarsal fracture	R26C	Covered	1020.83	1020.83	0 090	2	0	1	1	0
28490-00	Treat big toe fracture	R26C	Covered	270.43	236.15	0 090	2	1	1	0	0
28495-00	Treat big toe fracture	R26C	Covered	341.67	280.88	0 090	2	1	1	0	0
28496-00	Treat big toe fracture	R26C	Covered	948.01	505.60	0 090	2	1	1	0	0
28505-00	Treat big toe fracture	R26C	Covered	1185.48	889.25	0 090	2	1	1	0	0
28510-00	Treatment of toe fracture	R26C	Covered	230.24	229.59	0 090	2	0	1	0	0
28515-00	Treatment of toe fracture	R26C	Covered	313.59	271.55	0 090	2	0	1	0	0
28525-00	Treat toe fracture	R26C	Covered	1047.26	738.09	0 090	2	0	0	0	0
28530-00	Treat sesamoid bone fracture	R26C	Covered	222.62	192.86	0 090	2	1	0	0	0
28531-00	Treat sesamoid bone fracture	R26C	Covered	619.61	335.02	0 090	2	1	1	2	0
28540-00	Treat foot dislocation	R26C	Covered	372.58	332.48	0 090	2	1	0	0	0
28545-00	Treat foot dislocation	R26C	Covered	580.94	503.98	0 090	2	1	0	0	0
28546-00	Treat foot dislocation	R26C	Covered	1094.82	647.88	0 090	2	1	0	0	0
28555-00	Repair foot dislocation	R26C	Covered	1553.03	1168.83	0 090	2	1	2	1	0
28570-00	Treat foot dislocation	R26C	Covered	446.99	370.02	0 090	2	1	0	0	0
28575-00	Treat foot dislocation	R26C	Covered	703.85	624.94	0 090	2	1	0	0	0
28576-00	Treat foot dislocation	R26C	Covered	698.66	698.66	0 090	2	1	0	0	0
28585-00	Repair foot dislocation	R26C	Covered	1626.57	1259.83	0 090	2	1	2	1	0
28600-00	Treat foot dislocation	R26C	Covered	355.73	302.69	0 090	2	0	0	0	0
28605-00	Treat foot dislocation	R26C	Covered	642.19	567.81	0 090	2	0	0	0	0

28606-00	Treat foot dislocation	R26C	Covered	702.94	702.94	0 090	2	0	1	0	0
28615-00	Repair foot dislocation	R26C	Covered	1478.18	1478.18	0 090	2	0	2	1	0
28630-00	Treat toe dislocation	R26C	Covered	282.92	194.95	0 010	2	0	0	0	0
28635-00	Treat toe dislocation	R26C	Covered	316.75	236.54	0 010	2	0	0	0	0
28636-00	Treat toe dislocation	R26C	Covered	649.63	395.44	0 010	2	0	1	2	0
28645-00	Repair toe dislocation	R26C	Covered	1189.73	874.73	0 090	2	0	1	1	0
28660-00	Treat toe dislocation	R26C	Covered	230.28	166.89	0 010	2	0	1	0	0
28665-00	Treat toe dislocation	R26C	Covered	279.10	229.29	0 010	2	0	0	0	0
28666-00	Treat toe dislocation	R26C	Covered	319.84	319.84	0 010	2	0	1	2	0
28675-00	Repair of toe dislocation	R26C	Covered	1057.89	747.43	0 090	2	0	1	0	0
28705-00	Fusion of foot bones	R26C	Covered	2109.86	2109.86	0 090	2	1	2	1	0
28715-00	Fusion of foot bones	R26C	Covered	1646.00	1646.00	0 090	2	1	2	1	0
28725-00	Fusion of foot bones	R26C	Covered	1369.76	1369.76	0 090	2	1	2	1	0
28730-00	Fusion of foot bones	R26C	Covered	1280.75	1280.75	0 090	2	1	2	1	0
28735-00	Fusion of foot bones	R26C	Covered	1362.81	1362.81	0 090	2	1	2	1	0
28737-00	Revision of foot bones	R26C	Covered	1217.59	1217.59	0 090	2	1	2	1	0
28740-00	Fusion of foot bones	R26C	Covered	1494.26	1093.89	0 090	2	1	2	1	0
28750-00	Fusion of big toe joint	R26C	Covered	1413.11	1024.38	0 090	2	1	0	0	0
28755-00	Fusion of big toe joint	R26C	Covered	927.33	603.29	0 090	2	1	1	1	0
28760-00	Fusion of big toe joint	R26C	Covered	1401.31	1021.00	0 090	2	1	2	1	0
28800-00	Amputation of midfoot	R26C	Covered	933.47	933.47	0 090	2	1	2	1	0
28805-00	Amputation thru metatarsal	R26C	Covered	1224.35	1224.35	0 090	2	1	0	0	0
28810-00	Amputation toe & metatarsal	R26C	Covered	738.76	738.76	0 090	2	0	0	0	0
28820-00	Amputation of toe	R26C	Covered	536.73	304.53	0 000	2	0	1	0	0
28825-00	Partial amputation of toe	R26C	Covered	528.66	297.11	0 000	2	0	1	0	0
28890-00	Hi enrgy eswt plantar fascia	R26C	Covered	577.19	405.79	0 090	2	1	1	1	0
93317-26	Echo transeosophageal	RCMS	Covered	151.86	151.86	1 XXX	0	0	0	0	0
29000-00	Application of body cast	R26C	Covered	651.51	326.17	0 000	2	0	0	0	0
29010-00	Application of body cast	R26C	Covered	517.85	279.83	0 000	2	0	0	0	0
29015-00	Application of body cast	R26C	Covered	551.10	313.07	0 000	2	0	0	0	0
29035-00	Application of body cast	R26C	Covered	490.29	252.27	0 000	2	0	0	0	0
29040-00	Application of body cast	R26C	Covered	554.88	302.63	0 000	2	0	0	0	0
29044-00	Application of body cast	R26C	Covered	545.48	292.58	0 000	2	0	0	0	0
29046-00	Application of body cast	R26C	Covered	594.43	327.95	0 000	2	0	0	0	0
29049-00	Application of figure eight	R26C	Covered	184.30	122.21	0 000	2	0	0	0	0
29055-00	Application of shoulder cast	R26C	Covered	419.75	239.94	0 000	2	0	0	0	0
29058-00	Application of shoulder cast	R26C	Covered	224.44	161.70	0 000	2	0	0	0	0
29065-00	Application of long arm cast	R26C	Covered	179.16	119.65	0 000	2	1	1	0	0
29075-00	Application of forearm cast	R26C	Covered	161.99	110.25	0 000	2	1	1	0	0
29085-00	Apply hand/wrist cast	R26C	Covered	177.82	118.96	0 000	2	1	1	0	0
29086-00	Apply finger cast	R26C	Covered	146.03	89.76	0 000	2	1	1	0	0
29105-00	Apply long arm splint	R26C	Covered	151.57	68.13	0 000	2	1	1	0	0
29125-00	Apply forearm splint	R26C	Covered	125.25	71.56	0 000	2	1	1	0	0
29126-00	Apply forearm splint	R26C	Covered	146.58	87.72	0 000	2	1	1	0	0
29130-00	Application of finger splint	R26C	Covered	75.44	48.92	0 000	2	1	1	0	0
29131-00	Application of finger splint	R26C	Covered	99.18	59.72	0 000	2	1	1	0	0
29200-00	Strapping of chest	R26C	Covered	59.37	32.21	0 000	2	0	1	0	0
29240-00	Strapping of shoulder	R26C	Covered	54.84	31.56	0 000	2	1	1	0	0
29260-00	Strapping of elbow or wrist	R26C	Covered	52.95	32.90	0 000	2	1	1	0	0
29280-00	Strapping of hand or finger	R26C	Covered	53.69	34.29	0 000	2	1	1	0	0
29305-00	Application of hip cast	R26C	Covered	463.59	276.67	0 000	2	0	0	0	0
29325-00	Application of hip casts	R26C	Covered	510.61	308.80	0 000	2	0	0	0	0
29345-00	Application of long leg cast	R26C	Covered	246.08	171.69	0 000	2	1	1	0	0
29355-00	Application of long leg cast	R26C	Covered	256.11	183.02	0 000	2	1	1	0	0

29358-00	Apply long leg cast brace	R26C	Covered	298.54	177.59	0 000	2	1	1	0	0
29365-00	Application of long leg cast	R26C	Covered	228.08	152.41	0 000	2	1	1	0	0
29405-00	Apply short leg cast	R26C	Covered	148.20	103.57	0 000	2	1	1	0	0
29425-00	Apply short leg cast	R26C	Covered	139.65	96.31	0 000	2	1	1	0	0
29435-00	Apply short leg cast	R26C	Covered	226.79	149.82	0 000	2	1	1	0	0
29440-00	Addition of walker to cast	R26C	Covered	79.51	49.11	0 000	2	1	1	0	0
29445-00	Apply rigid leg cast	R26C	Covered	232.02	171.87	0 000	2	1	1	0	0
29450-00	Application of leg cast	R26C	Covered	263.33	196.07	0 000	2	1	1	0	0
29505-00	Application long leg splint	R26C	Covered	167.98	92.31	0 000	2	1	1	0	0
29515-00	Application lower leg splint	R26C	Covered	133.50	87.58	0 000	2	1	1	0	0
29520-00	Strapping of hip	R26C	Covered	64.55	32.21	0 000	2	1	0	0	0
29530-00	Strapping of knee	R26C	Covered	54.20	31.56	0 000	2	1	1	0	0
29540-00	Strapping of ankle and/or ft	R26C	Covered	51.01	29.67	0 000	2	1	1	0	0
29550-00	Strapping of toes	R26C	Covered	35.34	19.17	0 000	2	1	1	0	0
29580-00	Application of paste boot	R26C	Covered	117.84	44.11	0 000	2	1	1	0	0
29581-00	Apply multlay comprs lwr leg	R26C	Covered	167.82	48.16	0 000	2	1	0	0	0
29584-00	Appl multlay comprs arm/hand	R26C	Covered	153.27	27.79	0 000	2	1	0	0	0
29700-00	Removal/revision of cast	R26C	Covered	117.91	55.81	0 000	2	0	1	0	0
29705-00	Removal/revision of cast	R26C	Covered	114.03	75.86	0 000	2	1	1	0	0
29710-00	Removal/revision of cast	R26C	Covered	220.49	137.69	0 000	2	1	0	0	0
29720-00	Repair of body cast	R26C	Covered	160.35	73.68	0 000	2	0	1	0	0
29730-00	Windowing of cast	R26C	Covered	117.35	75.95	0 000	2	0	1	0	0
29740-00	Wedging of cast	R26C	Covered	177.17	115.08	0 000	2	0	1	0	0
29750-00	Wedging of clubfoot cast	R26C	Covered	190.30	128.86	0 000	2	1	0	0	0
93621-26	Electrophysiology evaluation	RCMS	Covered	131.34	131.34	1 ZZZ	0	0	0	0	0
29800-00	Jaw arthroscopy/surgery	R26C	Covered	936.63	936.63	0 090	2	1	0	0	0
29804-00	Jaw arthroscopy/surgery	R26C	Covered	1066.07	1066.07	0 090	2	1066.07	2	1	0
29805-00	Sho arthrs dx +- synovial bx	R26C	Covered	828.06	828.06	0 090	2	1	1	1	0
29806-00	Sho arthrs srg capsulorrhaphy	R26C	Covered	1830.90	1830.90	0 090	3	1	1	1	0 29805
29807-00	Sho arthrs srg rpr slap les	R26C	Covered	1789.62	1789.62	0 090	3	1	1	1	0 29805
29819-00	Sho arthrs srg rmvl loose/fb	R26C	Covered	1033.10	1033.10	0 090	3	1	1	1	0 29805
29820-00	Sho arthrs srg prtl synvct	R26C	Covered	938.28	938.28	0 090	3	1	2	1	0 29805
29821-00	Sho arthrs srg compl synvct	R26C	Covered	1041.86	1041.86	0 090	3	1	2	1	0 29805
29822-00	Sho arthrs srg lmtd dbrdmt	R26C	Covered	955.85	955.85	0 090	3	1	2	0	0 29805
29823-00	Sho arthrs srg xtmsv dbrdmt	R26C	Covered	1041.55	1041.55	0 090	3	1	2	1	0 29805
29824-00	Sho arthrs srg dstl clavicl	R26C	Covered	1190.59	1190.59	0 090	3	1	2	1	0 29805
29825-00	Sho arthrs srg lss&rescj ads	R26C	Covered	1031.71	1031.71	0 090	3	1	2	1	0 29805
29826-00	Sho arthrs srg decompression	R26C	Covered	283.39	283.39	0 ZZZ	0	1	2	1	0
29827-00	Sho arthrs srg rt&tr cuff rpr	R26C	Covered	1841.67	1841.67	0 090	3	1	2	1	0 29805
29828-00	Sho arthrs srg bicip tenodsis	R26C	Covered	1585.64	1585.64	0 090	3	1	2	1	0 29805
29830-00	Elbow arthroscopy	R26C	Covered	813.29	813.29	0 090	2	1	1	0	0
29834-00	Elbow arthroscopy/surgery	R26C	Covered	869.55	869.55	0 090	3	1	2	1	0 29830
29835-00	Elbow arthroscopy/surgery	R26C	Covered	899.04	899.04	0 090	3	1	2	1	0 29830
29836-00	Elbow arthroscopy/surgery	R26C	Covered	1028.24	1028.24	0 090	3	1	2	1	0 29830
29837-00	Elbow arthroscopy/surgery	R26C	Covered	925.38	925.38	0 090	3	1	2	1	0 29830
29838-00	Elbow arthroscopy/surgery	R26C	Covered	1048.96	1048.96	0 090	3	1	0	0	0 29830
29840-00	Wrist arthroscopy	R26C	Covered	805.52	805.52	0 090	2	1	0	0	0
29843-00	Wrist arthroscopy/surgery	R26C	Covered	862.94	862.94	0 090	3	1	2	1	0 29840
29844-00	Wrist arthroscopy/surgery	R26C	Covered	885.32	885.32	0 090	3	1	2	0	0 29840
29845-00	Wrist arthroscopy/surgery	R26C	Covered	1036.53	1036.53	0 090	3	1	2	1	0 29840
29846-00	Wrist arthroscopy/surgery	R26C	Covered	926.17	926.17	0 090	3	1	0	0	0 29840
29847-00	Wrist arthroscopy/surgery	R26C	Covered	956.22	956.22	0 090	3	1	2	0	0 29840
29848-00	Wrist endoscopy/surgery	R26C	Covered	915.50	915.50	0 090	2	1	1	0	0
29850-00	Knee arthroscopy/surgery	R26C	Covered	1096.06	1096.06	0 090	2	1	0	2	0

29851-00	Knee arthroscopy/surgery	R26C	Covered	1604.66	1604.66	0 090	2	1	2	2	0	
29855-00	Tibial arthroscopy/surgery	R26C	Covered	1359.43	1359.43	0 090	2	1	2	2	0	
29856-00	Tibial arthroscopy/surgery	R26C	Covered	1709.64	1709.64	0 090	2	1	2	2	0	
29860-00	Hip arthroscopy dx	R26C	Covered	1148.38	1148.38	0 090	2	1	2	1	0	
29861-00	Hip arthro w/fb removal	R26C	Covered	1241.64	1241.64	0 090	3	1	2	1	0	29860
29862-00	Hip arthro w/debridement	R26C	Covered	1422.84	1422.84	0 090	3	1	2	1	0	29860
29863-00	Hip arthro w/synovectomy	R26C	Covered	1422.15	1422.15	0 090	3	1	2	1	0	29860
29866-00	Autgrft implnt knee w/scope	R26C	Covered	1823.03	1823.03	0 090	2	1	0	0	0	
29867-00	Allgrft implnt knee w/scope	R26C	Covered	2198.93	2198.93	0 090	2	1	0	0	0	
29868-00	Meniscal trnspl knee w/scope	R26C	Covered	2837.80	2837.80	0 090	2	1	0	0	0	
29870-00	Knee arthroscopy dx	R26C	Covered	1004.61	729.08	0 090	2	1	1	1	0	
29871-00	Knee arthroscopy/drainage	R26C	Covered	909.72	909.72	0 090	3	1	1	0	0	29870
29873-00	Knee arthroscopy/surgery	R26C	Covered	963.44	963.44	0 090	3	1	1	1	0	29870
29874-00	Knee arthroscopy/surgery	R26C	Covered	945.75	945.75	0 090	3	1	0	0	0	29870
29875-00	Knee arthroscopy/surgery	R26C	Covered	876.79	876.79	0 090	3	1	0	0	0	29870
29876-00	Knee arthroscopy/surgery	R26C	Covered	1143.16	1143.16	0 090	3	1	1	0	0	29870
29877-00	Knee arthroscopy/surgery	R26C	Covered	1089.89	1089.89	0 090	3	1	0	0	0	29870
29879-00	Knee arthroscopy/surgery	R26C	Covered	1157.75	1157.75	0 090	3	1	0	0	0	29870
29880-00	Knee arthroscopy/surgery	R26C	Covered	989.75	989.75	0 090	3	1	0	1	0	29870
29881-00	Knee arthroscopy/surgery	R26C	Covered	955.85	955.85	0 090	3	1	0	0	0	29870
29882-00	Knee arthroscopy/surgery	R26C	Covered	1202.83	1202.83	0 090	3	1	1	0	0	29870
29883-00	Knee arthroscopy/surgery	R26C	Covered	1462.79	1462.79	0 090	3	1	0	0	0	29870
29884-00	Knee arthroscopy/surgery	R26C	Covered	1088.02	1088.02	0 090	3	1	2	1	0	29870
29885-00	Knee arthroscopy/surgery	R26C	Covered	1321.28	1321.28	0 090	3	1	2	1	0	29870
29886-00	Knee arthroscopy/surgery	R26C	Covered	1117.33	1117.33	0 090	3	1	1	0	0	29870
29887-00	Knee arthroscopy/surgery	R26C	Covered	1316.90	1316.90	0 090	3	1	2	1	0	29870
29888-00	Knee arthroscopy/surgery	R26C	Covered	1681.00	1681.00	0 090	2	1	2	1	0	
29889-00	Knee arthroscopy/surgery	R26C	Covered	2111.96	2111.96	0 090	2	1	2	1	0	
29891-00	Ankle arthroscopy/surgery	R26C	Covered	1189.59	1189.59	0 090	2	1	2	0	0	
29892-00	Ankle arthroscopy/surgery	R26C	Covered	1140.42	1140.42	0 090	2	1	2	0	0	
29893-00	Scope plantar fasciotomy	R26C	Covered	1237.86	802.57	0 090	2	1	1	1	0	
29894-00	Ankle arthroscopy/surgery	R26C	Covered	888.98	888.98	0 090	2	1	2	1	0	
29895-00	Ankle arthroscopy/surgery	R26C	Covered	818.48	818.48	0 090	2	1	2	1	0	
29897-00	Ankle arthroscopy/surgery	R26C	Covered	872.78	872.78	0 090	2	1	2	0	0	
29898-00	Ankle arthroscopy/surgery	R26C	Covered	989.50	989.50	0 090	2	1	2	1	0	
29899-00	Ankle arthroscopy/surgery	R26C	Covered	1736.08	1736.08	0 090	2	1	2	1	0	
29900-00	Mcp joint arthroscopy dx	R26C	Covered	904.50	904.50	0 090	2	1	0	0	0	
29901-00	Mcp joint arthroscopy surg	R26C	Covered	963.84	963.84	0 090	2	1	0	0	0	
29902-00	Mcp joint arthroscopy surg	R26C	Covered	1017.85	1017.85	0 090	2	1	0	0	0	
29904-00	Subtalar arthro w/fb rmvl	R26C	Covered	1119.44	1119.44	0 090	2	1	2	0	0	
29905-00	Subtalar arthro w/exc	R26C	Covered	924.25	924.25	0 090	2	1	2	0	0	
29906-00	Subtalar arthro w/deb	R26C	Covered	1152.43	1152.43	0 090	2	1	2	0	0	
29907-00	Subtalar arthro w/fusion	R26C	Covered	1523.11	1523.11	0 090	2	1	2	0	0	
29914-00	Hip arthro w/femoroplasty	R26C	Covered	1712.78	1712.78	0 090	3	1	2	1	0	29860
29915-00	Hip arthro acetabuloplasty	R26C	Covered	1753.40	1753.40	0 090	3	1	2	1	0	29860
29916-00	Hip arthro w/labral repair	R26C	Covered	1746.80	1746.80	0 090	3	1	2	1	0	29860
93662-26	Intracardiac ecg (ice)	RCMS	Covered	124.58	124.58	1 ZZZ	0	0	0	0	0	
30000-00	Drainage of nose lesion	R26C	Covered	497.83	218.41	0 010	2	0	0	0	0	
30020-00	Drainage of nose lesion	R26C	Covered	507.53	221.64	0 010	2	0	1	0	0	
30100-00	Intranasal biopsy	R26C	Covered	262.78	121.78	0 000	2	0	1	0	0	
30110-00	Removal of nose polyp(s)	R26C	Covered	465.45	239.72	0 010	2	1	1	0	0	
30115-00	Removal of nose polyp(s)	R26C	Covered	856.94	856.94	0 090	2	1	1	0	0	
30117-00	Removal of intranasal lesion	R26C	Covered	1874.10	759.67	0 090	2	0	1	0	0	
30118-00	Removal of intranasal lesion	R26C	Covered	1287.55	1287.55	0 090	2	0	1	1	0	

30120-00	Revision of nose	R26C	Covered	928.97	751.75	0 090	2	0	1	0	0
30124-00	Removal of nose lesion	R26C	Covered	558.22	558.22	0 090	2	0	1	0	0
30125-00	Removal of nose lesion	R26C	Covered	1188.07	1188.07	0 090	2	0	2	0	0
30130-00	Excise inferior turbinate	R26C	Covered	772.05	772.05	0 090	2	1	1	0	0
30140-00	Resect inferior turbinate	R26C	Covered	538.81	307.26	0 000	2	1	1	0	0
30150-00	Partial removal of nose	R26C	Covered	1434.87	1434.87	0 090	2	0	1	1	0
30160-00	Removal of nose	R26C	Covered	1467.20	1467.20	0 090	2	0	2	1	0
30200-00	Injection treatment of nose	R26C	Covered	205.75	106.79	0 000	2	0	1	0	0
30210-00	Nasal sinus therapy	R26C	Covered	282.19	188.40	0 010	2	0	1	0	0
30220-00	Insert nasal septal button	R26C	Covered	572.47	231.61	0 010	2	0	1	0	0
30300-00	Remove nasal foreign body	R26C	Covered	396.23	226.76	0 010	2	0	1	0	0
30310-00	Remove nasal foreign body	R26C	Covered	382.25	382.25	0 010	2	0	0	0	0
30320-00	Remove nasal foreign body	R26C	Covered	897.74	897.74	0 090	2	0	0	0	0
30400-00	Reconstruction of nose	R26C	Covered	2232.85	2232.85	0 090	2	0	0	0	0
30410-00	Reconstruction of nose	R26C	Covered	2545.45	2545.45	0 090	2	0	2	0	0
30420-00	Reconstruction of nose	R26C	Covered	2617.15	2617.15	0 090	2	0	1	0	0
30430-00	Revision of nose	R26C	Covered	1972.34	1972.34	0 090	2	0	2	0	0
30435-00	Revision of nose	R26C	Covered	2419.21	2419.21	0 090	2	0	2	0	0
0253U-00	RNA gene expression profiling of 238 genes by next-	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
30460-00	Revision of nose	R26C	Covered	1459.58	1459.58	0 090	2	0	2	2	0
30462-00	Revision of nose	R26C	Covered	2794.84	2794.84	0 090	2	0	2	2	0
30465-00	Repair nasal stenosis	R26C	Covered	1847.73	1847.73	0 090	2	0	0	0	0
58565-00	Hysteroscopy sterilization	NCOV	Not Covered	Code not covered	Code not covered	0 090	3	2	1	2	0
30469-00	Rpr nsl vlv collapse w/rmdlg	R26C	Covered	4709.29	260.60	0 000	2	2	1	0	0
30520-00	Repair of nasal septum	R26C	Covered	1231.70	1231.70	0 090	2	0	1	0	0
30540-00	Rpr choanal atresia ntransal	R26C	Covered	1345.19	1345.19	0 090	2	0	2	0	0
30545-00	Rpr choanal atresia trsnpltn	R26C	Covered	1811.20	1811.20	0 090	2	0	2	0	0
30560-00	Lysis intranasal synechia	R26C	Covered	609.65	279.13	0 010	2	0	1	0	0
30580-00	Repair upper jaw fistula	R26C	Covered	1113.03	824.56	0 090	2	0	1	0	0
30600-00	Repair mouth/nose fistula	R26C	Covered	946.37	688.29	0 090	2	0	0	0	0
30620-00	Intranasal reconstruction	R26C	Covered	1242.77	1242.77	0 090	2	0	1	0	0
30630-00	Repair nasal septum defect	R26C	Covered	1215.32	1215.32	0 090	2	0	0	0	0
30801-00	Ablate inf turbinate superf	R26C	Covered	411.60	282.89	0 010	2	2	1	0	0
30802-00	Ablate inf turbinate submuc	R26C	Covered	515.92	369.74	0 010	2	2	1	0	0
30901-00	Control of nosebleed	R26C	Covered	288.31	93.62	0 000	2	1	1	0	0
30903-00	Control of nosebleed	R26C	Covered	451.86	127.17	0 000	2	1	1	0	0
30905-00	Control of nosebleed	R26C	Covered	651.11	175.72	0 000	2	2	1	0	0
30906-00	Repeat control of nosebleed	R26C	Covered	696.05	222.59	0 000	2	2	1	0	0
30915-00	Ligation nasal sinus artery	R26C	Covered	1086.07	1086.07	0 090	2	0	1	0	0
30920-00	Ligation upper jaw artery	R26C	Covered	1563.07	1563.07	0 090	2	0	1	0	0
30930-00	Ther fx nasal inf turbinate	R26C	Covered	215.70	215.70	0 010	2	2	1	0	0
93598-26	Car outp meas drg cath chd	RCMS	Covered	117.51	117.51	1 ZZZ	0	0	0	0	0
31000-00	Irrigation maxillary sinus	R26C	Covered	347.98	201.80	0 010	2	1	1	0	0
31002-00	Irrigation sphenoid sinus	R26C	Covered	349.09	349.09	0 010	2	1	0	0	0
31020-00	Exploration maxillary sinus	R26C	Covered	785.24	633.89	0 090	2	1	1	0	0
31030-00	Exploration maxillary sinus	R26C	Covered	1184.25	936.52	0 090	2	1	1	0	0
31032-00	Explore sinus remove polyps	R26C	Covered	1080.99	1080.99	0 090	2	1	1	0	0
31040-00	Exploration behind upper jaw	R26C	Covered	1448.70	1448.70	0 090	2	1	1	1	0
31050-00	Exploration sphenoid sinus	R26C	Covered	943.88	943.88	0 090	2	1	1	0	0
31051-00	Sphenoid sinus surgery	R26C	Covered	1264.54	1264.54	0 090	2	1	1	0	0
31070-00	Exploration of frontal sinus	R26C	Covered	876.45	876.45	0 090	2	1	1	0	0
31075-00	Exploration of frontal sinus	R26C	Covered	1497.80	1497.80	0 090	2	1	2	1	0
31080-00	Removal of frontal sinus	R26C	Covered	1967.34	1967.34	0 090	2	1	2	0	0
31081-00	Removal of frontal sinus	R26C	Covered	2100.49	2100.49	0 090	2	1	2	1	0

31084-00	Removal of frontal sinus	R26C	Covered	2170.49	2170.49	0 090	2	1	2	1	0	
31085-00	Removal of frontal sinus	R26C	Covered	2233.55	2233.55	0 090	2	1	2	1	0	
31086-00	Removal of frontal sinus	R26C	Covered	2116.09	2116.09	0 090	2	1	2	0	0	
31087-00	Removal of frontal sinus	R26C	Covered	2002.92	2002.92	0 090	2	1	2	1	0	
31090-00	Exploration of sinuses	R26C	Covered	2022.88	2022.88	0 090	2	1	1	0	0	
31200-00	Removal of ethmoid sinus	R26C	Covered	1175.42	1175.42	0 090	2	1	1	0	0	
31201-00	Removal of ethmoid sinus	R26C	Covered	1414.71	1414.71	0 090	2	1	1	0	0	
31205-00	Removal of ethmoid sinus	R26C	Covered	1732.95	1732.95	0 090	2	1	2	1	0	
31225-00	Removal of upper jaw	R26C	Covered	3160.43	3160.43	0 090	2	1	2	1	0	
31230-00	Removal of upper jaw	R26C	Covered	3512.03	3512.03	0 090	2	1	2	1	0	
31231-00	Nasal endoscopy dx	R26C	Covered	350.26	110.95	0 000	2	2	1	0	0	
31233-00	Nsl/sins ndsc dx max sinus	R26C	Covered	505.92	234.91	0 000	3	1	0	0	0	31231
31235-00	Nsl/sins ndsc dx sphn sinus	R26C	Covered	574.21	276.69	0 000	3	1	0	0	0	31231
31237-00	Nsl/sins ndsc surg bx polypc	R26C	Covered	467.69	276.89	0 000	3	1	1	0	0	31231
31238-00	Nsl/sins ndsc srg nsl hemrrg	R26C	Covered	452.37	289.37	0 000	3	1	0	0	0	31231
31239-00	Nsl/sinus endoscopy surg dcr	R26C	Covered	1080.06	1080.06	0 010	3	1	0	0	0	31231
31240-00	Nsl/sns ndsc cnch bull rescj	R26C	Covered	274.91	274.91	0 000	3	1	0	0	0	31231
31241-00	Nsl/sns ndsc lig sphnptn art	R26C	Covered	755.14	755.14	0 000	3	1	0	0	0	31231
31253-00	Nsl/sins ndsc total	R26C	Covered	848.78	848.78	0 000	3	1	1	0	0	31231
31254-00	Nsl/sins ndsc w/prtl ethmdct	R26C	Covered	796.01	415.70	0 000	3	1	1	0	0	31231
31255-00	Nsl/sins ndsc w/tot ethmdct	R26C	Covered	550.67	550.67	0 000	3	1	1	0	0	31231
31256-00	Exploration maxillary sinus	R26C	Covered	308.82	308.82	0 000	3	1	1	0	0	31231
31257-00	Nsl/sins ndsc tot w/sphendt	R26C	Covered	756.99	756.99	0 000	3	1	1	0	0	31231
31259-00	Nsl/sins ndsc sphn tiss rmvl	R26C	Covered	800.63	800.63	0 000	3	1	1	0	0	31231
31267-00	Endoscopy maxillary sinus	R26C	Covered	452.63	452.63	0 000	3	1	1	0	0	31231
31276-00	Nsl/sins ndsc frnt tiss rmvl	R26C	Covered	643.25	643.25	0 000	3	1	1	0	0	31231
31287-00	Nasal/sinus endoscopy surg	R26C	Covered	344.45	344.45	0 000	3	1	0	0	0	31231
31288-00	Nasal/sinus endoscopy surg	R26C	Covered	399.49	399.49	0 000	3	1	0	0	0	31231
31290-00	Nasal/sinus endoscopy surg	R26C	Covered	1971.15	1971.15	0 010	3	1	0	0	0	31231
31291-00	Nasal/sinus endoscopy surg	R26C	Covered	2079.92	2079.92	0 010	3	1	0	0	0	31231
31292-00	Nsl/sins ndsc med/inf dcmprn	R26C	Covered	1719.71	1719.71	0 010	3	1	0	0	0	31231
31293-00	Nsl/sins ndsc med&inf dcmprn	R26C	Covered	1862.93	1862.93	0 010	3	1	0	0	0	31231
31294-00	Nsl/sins ndsc surg on dcmprn	R26C	Covered	2122.81	2122.81	0 010	3	1	0	0	0	31231
31295-00	Nsl/sins ndsc surg max sins	R26C	Covered	3154.16	270.72	0 000	3	1	2	0	0	31231
31296-00	Nsl/sins ndsc surg frnt sins	R26C	Covered	3198.11	307.56	0 000	3	1	2	0	0	31231
31297-00	Nsl/sins ndsc surg sphn sins	R26C	Covered	3129.16	247.02	0 000	3	1	0	0	0	31231
31298-00	Nsl/sins ndsc surg frnt&sphn	R26C	Covered	5937.41	436.38	0 000	3	1	0	0	0	31231
79300-26	Nuclr rx interstit colloid	RCMS	Covered	113.51	113.51	1 XXX	0	0	0	0	0	
31300-00	Removal of larynx lesion	R26C	Covered	2232.68	2232.68	0 090	2	0	2	1	0	
31360-00	Removal of larynx	R26C	Covered	3605.85	3605.85	0 090	2	0	2	1	0	
31365-00	Removal of larynx	R26C	Covered	4423.69	4423.69	0 090	2	0	2	1	0	
31367-00	Partial removal of larynx	R26C	Covered	3829.11	3829.11	0 090	2	0	2	1	0	
31368-00	Partial removal of larynx	R26C	Covered	4226.91	4226.91	0 090	2	0	2	1	0	
31370-00	Partial removal of larynx	R26C	Covered	3607.87	3607.87	0 090	2	0	2	1	0	
31375-00	Partial removal of larynx	R26C	Covered	3432.23	3432.23	0 090	2	0	2	1	0	
31380-00	Partial removal of larynx	R26C	Covered	3386.63	3386.63	0 090	2	0	2	1	0	
31382-00	Partial removal of larynx	R26C	Covered	3699.76	3699.76	0 090	2	0	2	1	0	
31390-00	Removal of larynx & pharynx	R26C	Covered	4884.52	4884.52	0 090	2	0	2	1	0	
31395-00	Reconstruct larynx & pharynx	R26C	Covered	5133.93	5133.93	0 090	2	0	2	1	0	
31400-00	Revision of larynx	R26C	Covered	1825.50	1825.50	0 090	2	0	2	0	0	
31420-00	Removal of epiglottis	R26C	Covered	1478.09	1478.09	0 090	2	0	2	1	0	
31500-00	Insert emergency airway	R26C	Covered	232.23	232.23	0 000	0	0	1	0	0	
31502-00	Change of windpipe airway	R26C	Covered	59.33	59.33	0 000	2	0	1	0	0	
31505-00	Diagnostic laryngoscopy	R26C	Covered	167.46	89.20	0 000	2	0	1	0	0	

31510-00	Laryngoscopy with biopsy	R26C	Covered	396.74	211.11	0 000	3	0	0	0	0	31505
31511-00	Remove foreign body larynx	R26C	Covered	383.10	233.05	0 000	3	0	1	0	0	31505
31512-00	Removal of larynx lesion	R26C	Covered	396.94	224.89	0 000	3	0	0	0	0	31505
31513-00	Injection into vocal cord	R26C	Covered	227.41	227.41	0 000	3	0	0	0	0	31505
31515-00	Laryngoscopy for aspiration	R26C	Covered	392.54	193.32	0 000	2	0	1	0	0	
30450-00	Revision of nose	NCOV	Not Covered	Code not covered	Code not cov	0 090	2	0	2	0	0	
31525-00	Dx laryngoscopy excl nb	R26C	Covered	454.04	276.17	0 000	2	0	1	0	0	
31526-00	Dx laryngoscopy w/oper scope	R26C	Covered	270.54	270.54	0 000	2	0	1	0	0	
31527-00	Laryngoscopy for treatment	R26C	Covered	334.85	334.85	0 000	3	0	0	0	0	31525
31528-00	Laryngoscopy and dilation	R26C	Covered	248.54	248.54	0 000	3	0	0	0	0	31525
31529-00	Laryngoscopy and dilation	R26C	Covered	277.27	277.27	0 000	3	0	0	0	0	31525
31530-00	Laryngoscopy w/fb removal	R26C	Covered	339.79	339.79	0 000	3	0	1	0	0	31525
31531-00	Laryngoscopy w/fb & op scope	R26C	Covered	362.29	362.29	0 000	3	0	0	0	0	31526
31535-00	Laryngoscopy w/biopsy	R26C	Covered	324.89	324.89	0 000	3	0	1	0	0	31525
31536-00	Laryngoscopy w/bx & op scope	R26C	Covered	360.47	360.47	0 000	3	0	1	0	0	31526
31540-00	Laryngoscopy w/exc of tumor	R26C	Covered	412.35	412.35	0 000	3	0	1	0	0	31525
31541-00	Laryngosc w/tumr exc + scope	R26C	Covered	449.24	449.24	0 000	3	0	1	0	0	31526
31545-00	Remove vc lesion w/scope	R26C	Covered	616.21	616.21	0 000	3	1	1	0	0	31526
31546-00	Remove vc lesion scope/graft	R26C	Covered	930.58	930.58	0 000	3	1	1	0	0	31526
31551-00	Laryngoplasty laryngeal sten	R26C	Covered	2730.29	2730.29	0 090	2	0	0	1	0	
31552-00	Laryngoplasty laryngeal sten	R26C	Covered	2640.25	2640.25	0 090	2	0	0	1	0	
31553-00	Laryngoplasty laryngeal sten	R26C	Covered	2991.27	2991.27	0 090	2	0	0	1	0	
31554-00	Laryngoplasty laryngeal sten	R26C	Covered	2992.56	2992.56	0 090	2	0	0	1	0	
31560-00	Laryngosc w/arytenoidectomy	R26C	Covered	531.60	531.60	0 000	3	0	0	0	0	31525
31561-00	Laryngosc remve cart + scop	R26C	Covered	580.97	580.97	0 000	3	0	0	0	0	31526
31570-00	Laryngoscope w/vc inj	R26C	Covered	617.16	390.13	0 000	3	0	1	0	0	31525
31571-00	Laryngosc w/vc inj + scope	R26C	Covered	425.48	425.48	0 000	3	0	1	0	0	31526
31572-00	Largsc w/laser dstrj les	R26C	Covered	978.60	311.10	0 000	3	1	0	0	0	31575
31573-00	Largsc w/ther injection	R26C	Covered	529.02	257.36	0 000	3	1	0	0	0	31575
31574-00	Largsc w/njx augmentation	R26C	Covered	1781.27	258.05	0 000	3	1	0	0	0	31575
31575-00	Diagnostic laryngoscopy	R26C	Covered	238.90	121.18	0 000	2	0	1	0	0	
31576-00	Laryngoscopy with biopsy	R26C	Covered	502.93	207.99	0 000	3	0	1	0	0	31575
31577-00	Largsc w/rmvl foreign bdy(s)	R26C	Covered	503.99	229.74	0 000	3	0	0	0	0	31575
31578-00	Largsc w/removal lesion	R26C	Covered	565.28	258.05	0 000	3	0	0	0	0	31575
31579-00	Laryngoscopy telescopic	R26C	Covered	362.52	209.23	0 000	3	0	1	0	0	31575
31580-00	Laryngoplasty laryngeal web	R26C	Covered	2313.91	2313.91	0 090	2	0	0	1	0	
31584-00	Laryngoplasty fx rdctj fixj	R26C	Covered	2522.98	2522.98	0 090	2	0	0	1	0	
31587-00	Laryngoplasty cricoid split	R26C	Covered	2160.37	2160.37	0 090	2	0	0	1	0	
31590-00	Reinnervate larynx	R26C	Covered	1705.04	1705.04	0 090	2	0	2	1	0	
31591-00	Laryngoplasty medialization	R26C	Covered	1973.91	1973.91	0 090	2	1	0	1	0	
31592-00	Cricotracheal resection	R26C	Covered	3052.74	3052.74	0 090	2	0	0	1	0	
93623-26	Stimulation pacing heart	RCMS	Covered	112.85	112.85	1 ZZZ	0	0	0	0	0	
31600-00	Incision of windpipe	R26C	Covered	500.20	500.20	0 000	2	0	1	0	0	
31601-00	Incision of windpipe	R26C	Covered	765.39	765.39	0 000	2	0	2	1	0	
31603-00	Incision of windpipe	R26C	Covered	524.54	524.54	0 000	2	0	1	0	0	
31605-00	Incision of windpipe	R26C	Covered	532.50	532.50	0 000	2	0	1	0	0	
31610-00	Incision of windpipe	R26C	Covered	1706.29	1706.29	0 090	2	0	1	0	0	
31611-00	Surgery/speech prosthesis	R26C	Covered	971.09	971.09	0 090	2	0	2	1	0	
31612-00	Puncture/clear windpipe	R26C	Covered	169.16	80.55	0 000	2	0	0	0	0	
31613-00	Repair windpipe opening	R26C	Covered	763.36	763.36	0 090	2	0	1	0	0	
31614-00	Repair windpipe opening	R26C	Covered	1276.51	1276.51	0 090	2	0	1	0	0	
31615-00	Visualization of windpipe	R26C	Covered	312.87	201.62	0 000	2	0	1	0	0	
31622-00	Dx bronchoscope/wash	R26C	Covered	455.35	223.79	0 000	2	0	1	0	0	
31623-00	Dx bronchoscope/brush	R26C	Covered	506.97	226.26	0 000	3	0	1	0	0	31622

31624-00	Dx bronchoscope/lavage	R26C	Covered	469.51	228.90	0 000	3	0	1	0	0	31622
31625-00	Bronchoscopy w/biopsy(s)	R26C	Covered	644.49	266.11	0 000	3	0	1	0	0	31622
31626-00	Bronchoscopy w/markers	R26C	Covered	1473.26	331.02	0 000	2	0	0	0	0	
31627-00	Navigational bronchoscopy	R26C	Covered	2037.08	162.00	0 ZZZ	0	0	0	0	0	
31628-00	Bronchoscopy/lung bx each	R26C	Covered	686.16	300.67	0 000	3	0	1	0	0	31622
31629-00	Bronchoscopy/needle bx each	R26C	Covered	838.26	317.59	0 000	3	0	1	0	0	31622
31630-00	Bronchoscopy dilate/fx repr	R26C	Covered	333.99	333.99	0 000	3	0	1	0	0	31622
31631-00	Bronchoscopy dilate w/stent	R26C	Covered	380.64	380.64	0 000	3	0	1	0	0	31622
31632-00	Bronchoscopy/lung bx addl	R26C	Covered	115.42	83.08	0 ZZZ	0	0	1	0	0	
31633-00	Bronchoscopy/needle bx addl	R26C	Covered	142.29	106.07	0 ZZZ	0	0	1	0	0	
31634-00	Bronch w/balloon occlusion	R26C	Covered	2797.46	319.57	0 000	3	0	2	0	0	31622
31635-00	Bronchoscopy w/fb removal	R26C	Covered	531.12	296.98	0 000	3	0	1	0	0	31622
31636-00	Bronchoscopy bronch stents	R26C	Covered	365.72	365.72	0 000	3	0	1	0	0	31622
31637-00	Bronchoscopy stent add-on	R26C	Covered	128.43	128.43	0 ZZZ	0	0	1	0	0	
31638-00	Bronchoscopy revise stent	R26C	Covered	416.68	416.68	0 000	3	0	1	0	0	31622
31640-00	Bronchoscopy w/tumor excise	R26C	Covered	419.07	419.07	0 000	3	0	1	0	0	31622
31641-00	Bronchoscopy treat blockage	R26C	Covered	429.86	429.86	0 000	3	0	1	0	0	31622
31643-00	Diag bronchoscope/catheter	R26C	Covered	291.01	291.01	0 000	2	0	1	0	0	
31645-00	Brnchsc w/ther aspir 1st	R26C	Covered	502.40	250.79	0 000	3	0	1	0	0	31622
31646-00	Brnchsc w/ther aspir sbsq	R26C	Covered	242.68	242.68	0 000	2	0	1	0	0	
31647-00	Bronchial valve init insert	R26C	Covered	349.75	349.75	0 000	3	0	1	0	0	31622
31648-00	Bronchial valve remov init	R26C	Covered	336.95	336.95	0 000	3	0	1	0	0	31622
31649-00	Bronchial valve remov addl	R26C	Covered	113.91	113.91	0 ZZZ	0	0	1	0	0	
31651-00	Bronchial valve addl insert	R26C	Covered	128.43	128.43	0 ZZZ	0	0	1	0	0	
31652-00	Bronch ebus samplng 1/2 node	R26C	Covered	2357.05	374.60	0 000	2	0	1	0	0	
31653-00	Bronch ebus samplng 3/> node	R26C	Covered	2442.70	414.33	0 000	2	0	1	0	0	
31654-00	Bronch ebus ivntj perph les	R26C	Covered	219.59	113.52	0 ZZZ	0	0	1	0	0	
31660-00	Bronch thermoplasty 1 lobe	R26C	Covered	324.18	324.18	0 000	3	0	1	0	0	31622
31661-00	Bronch thermoplasty 2/> lobes	R26C	Covered	342.06	342.06	0 000	3	0	1	0	0	31622
31717-00	Bronchial brush biopsy	R26C	Covered	534.55	183.34	0 000	2	0	1	0	0	
31720-00	Clearance of airways	R26C	Covered	83.56	83.56	0 000	2	0	1	0	0	
31725-00	Clearance of airways	R26C	Covered	134.99	134.99	0 000	2	0	1	0	0	
31730-00	Intro windpipe wire/tube	R26C	Covered	1985.70	238.05	0 000	2	0	1	0	0	
31750-00	Repair of windpipe	R26C	Covered	2430.36	2430.36	0 090	2	0	2	1	0	
31755-00	Repair of windpipe	R26C	Covered	3143.37	3143.37	0 090	2	0	2	1	0	
31760-00	Repair of windpipe	R26C	Covered	2197.61	2197.61	0 090	2	0	2	1	0	
31766-00	Reconstruction of windpipe	R26C	Covered	2798.09	2798.09	0 090	2	0	2	1	0	
31770-00	Repair/graft of bronchus	R26C	Covered	2097.81	2097.81	0 090	2	0	2	1	0	
31775-00	Reconstruct bronchus	R26C	Covered	2214.00	2214.00	0 090	2	0	2	0	0	
31780-00	Reconstruct windpipe	R26C	Covered	2077.10	2077.10	0 090	2	0	2	1	0	
31781-00	Reconstruct windpipe	R26C	Covered	2472.41	2472.41	0 090	2	0	2	1	0	
31785-00	Remove windpipe lesion	R26C	Covered	1851.71	1851.71	0 090	2	0	2	1	0	
31786-00	Remove windpipe lesion	R26C	Covered	2280.27	2280.27	0 090	2	0	2	1	0	
31800-00	Repair of windpipe injury	R26C	Covered	1272.57	1272.57	0 090	2	0	0	0	0	
31805-00	Repair of windpipe injury	R26C	Covered	1323.52	1323.52	0 090	2	0	2	1	0	
31820-00	Closure of windpipe lesion	R26C	Covered	808.67	589.41	0 090	2	0	0	0	0	
31825-00	Repair of windpipe defect	R26C	Covered	1111.26	859.65	0 090	2	0	0	0	0	
31830-00	Revise windpipe scar	R26C	Covered	911.40	662.38	0 090	2	0	0	0	0	
93616-26	Esophageal recording	RCMS	Covered	102.72	102.72	1 000	0	0	0	0	0	
32035-00	Thoracostomy w/rib resection	R26C	Covered	1207.04	1207.04	0 090	2	1	2	1	0	
32036-00	Thoracostomy w/flap drainage	R26C	Covered	1301.61	1301.61	0 090	2	1	2	1	0	
32096-00	Open wedge/bx lung infiltr	R26C	Covered	1280.88	1280.88	0 090	2	0	2	1	0	
32097-00	Open wedge/bx lung nodule	R26C	Covered	1283.47	1283.47	0 090	2	0	2	1	0	
32098-00	Open biopsy of lung pleura	R26C	Covered	1217.70	1217.70	0 090	2	0	2	1	0	

32100-00	Exploration of chest	R26C	Covered	1307.12	1307.12	0 090	2	0	2	1	0
32110-00	Explore/repair chest	R26C	Covered	2372.82	2372.82	0 090	2	0	2	1	0
32120-00	Re-exploration of chest	R26C	Covered	1412.38	1412.38	0 090	2	0	2	1	0
32124-00	Explore chest free adhesions	R26C	Covered	1493.64	1493.64	0 090	2	0	2	1	0
32140-00	Removal of lung lesion(s)	R26C	Covered	1590.79	1590.79	0 090	2	0	2	1	0
32141-00	Remove/treat lung lesions	R26C	Covered	2407.82	2407.82	0 090	2	0	2	1	0
32150-00	Removal of lung lesion(s)	R26C	Covered	1645.55	1645.55	0 090	2	0	2	1	0
32151-00	Remove lung foreign body	R26C	Covered	1613.31	1613.31	0 090	2	0	2	1	0
32160-00	Open chest heart massage	R26C	Covered	1301.46	1301.46	0 090	2	0	2	1	0
32200-00	Drain open lung lesion	R26C	Covered	1843.29	1843.29	0 090	2	0	2	1	0
32215-00	Treat chest lining	R26C	Covered	1301.21	1301.21	0 090	2	1	2	1	0
32220-00	Release of lung	R26C	Covered	2574.59	2574.59	0 090	2	1	2	1	0
32225-00	Partial release of lung	R26C	Covered	1601.75	1601.75	0 090	2	1	2	1	0
32310-00	Removal of chest lining	R26C	Covered	1479.44	1479.44	0 090	2	0	2	1	0
32320-00	Free/remove chest lining	R26C	Covered	2573.50	2573.50	0 090	2	0	2	1	0
32400-00	Needle biopsy chest lining	R26C	Covered	308.33	141.45	0 000	2	0	1	0	0
32408-00	Core ndl bx lng/med perq	R26C	Covered	1597.05	256.88	0 000	2	0	1	0	0
32440-00	Remove lung pneumonectomy	R26C	Covered	2492.96	2492.96	0 090	2	0	2	1	0
32442-00	Sleeve pneumonectomy	R26C	Covered	4750.99	4750.99	0 090	2	0	2	1	0
32445-00	Removal of lung extrapleural	R26C	Covered	5530.91	5530.91	0 090	2	0	2	1	0
32480-00	Partial removal of lung	R26C	Covered	2352.39	2352.39	0 090	2	0	2	1	0
32482-00	Bilobectomy	R26C	Covered	2515.57	2515.57	0 090	2	0	2	1	0
32484-00	Segmentectomy	R26C	Covered	2268.95	2268.95	0 090	2	0	2	1	0
32486-00	Sleeve lobectomy	R26C	Covered	3653.73	3653.73	0 090	2	0	2	1	0
32488-00	Completion pneumonectomy	R26C	Covered	3754.89	3754.89	0 090	2	0	2	1	0
32491-00	Lung volume reduction	R26C	Covered	2349.94	2349.94	0 090	2	1	2	1	0
32501-00	Repair bronchus add-on	R26C	Covered	373.40	373.40	0 ZZZ	0	0	2	1	0
32503-00	Resect apical lung tumor	R26C	Covered	2834.09	2834.09	0 090	2	0	2	1	0
32504-00	Resect apical lung tum/chest	R26C	Covered	3217.60	3217.60	0 090	2	0	2	1	0
32505-00	Wedge resect of lung initial	R26C	Covered	1494.70	1494.70	0 090	2	0	2	1	0
32506-00	Wedge resect of lung add-on	R26C	Covered	240.76	240.76	0 ZZZ	0	0	2	1	0
32507-00	Wedge resect of lung diag	R26C	Covered	240.11	240.11	0 ZZZ	0	0	2	1	0
32540-00	Removal of lung lesion	R26C	Covered	2734.52	2734.52	0 090	2	0	2	1	0
32550-00	Insert pleural cath	R26C	Covered	1442.56	340.41	0 000	0	0	1	0	0
32551-00	Insertion of chest tube	R26C	Covered	253.24	253.24	0 000	2	1	1	0	0
32552-00	Remove lung catheter	R26C	Covered	321.10	269.35	0 010	2	0	0	0	0
32553-00	Ins mark thor for rt perq	R26C	Covered	937.35	296.37	0 000	2	0	2	0	0
32554-00	Aspirate pleura w/o imaging	R26C	Covered	433.72	149.12	0 000	2	1	1	0	0
32555-00	Aspirate pleura w/ imaging	R26C	Covered	582.71	184.93	0 000	2	1	1	0	0
32556-00	Insert cath pleura w/o image	R26C	Covered	1397.49	204.79	0 000	2	1	1	0	0
32557-00	Insert cath pleura w/ image	R26C	Covered	1236.97	251.89	0 000	2	1	1	0	0
32560-00	Treat pleurodesis w/agent	R26C	Covered	468.58	124.48	0 000	2	0	1	0	0
32561-00	Lyse chest fibrin init day	R26C	Covered	168.68	113.05	0 000	2	0	2	0	0
32562-00	Lyse chest fibrin subq day	R26C	Covered	151.06	101.25	0 000	2	0	2	0	0
32601-00	Thoracoscopy diagnostic	R26C	Covered	487.33	487.33	0 000	2	0	0	0	0
32604-00	Thoracoscopy wbx sac	R26C	Covered	748.30	748.30	0 000	2	0	0	0	0
32606-00	Thoracoscopy w/bx med space	R26C	Covered	722.74	722.74	0 000	2	0	0	0	0
32607-00	Thoracoscopy w/bx infiltrate	R26C	Covered	486.04	486.04	0 000	2	0	0	0	0
32608-00	Thoracoscopy w/bx nodule	R26C	Covered	593.76	593.76	0 000	2	0	0	0	0
32609-00	Thoracoscopy w/bx pleura	R26C	Covered	411.10	411.10	0 000	2	0	0	0	0
32650-00	Thoracoscopy w/pleurodesis	R26C	Covered	1089.53	1089.53	0 090	2	1	2	1	0
32651-00	Thoracoscopy remove cortex	R26C	Covered	1750.27	1750.27	0 090	2	1	2	1	0
32652-00	Thoracoscopy rem totl cortex	R26C	Covered	2635.94	2635.94	0 090	2	1	2	1	0
32653-00	Thoracoscopy remov fb/fibrin	R26C	Covered	1701.94	1701.94	0 090	2	0	2	1	0

32654-00	Thoracoscopy contrl bleeding	R26C	Covered	1900.76	1900.76	0 090	2	1	2	1	0
32655-00	Thoracoscopy resect bullae	R26C	Covered	1535.03	1535.03	0 090	2	1	2	1	0
32656-00	Thoracoscopy w/pleurectomy	R26C	Covered	1297.85	1297.85	0 090	2	1	2	1	0
32658-00	Thoracoscopy w/sac fb remove	R26C	Covered	1156.07	1156.07	0 090	2	0	2	1	0
32659-00	Thoracoscopy w/sac drainage	R26C	Covered	1192.13	1192.13	0 090	2	0	2	1	0
32661-00	Thoracoscopy w/pericard exc	R26C	Covered	1284.32	1284.32	0 090	2	0	2	1	0
32662-00	Thoracoscopy w/mediast exc	R26C	Covered	1436.21	1436.21	0 090	2	0	2	1	0
32663-00	Thoracoscopy w/lobectomy	R26C	Covered	2211.72	2211.72	0 090	2	0	2	1	0
32664-00	Thoracoscopy w/ th nrv exc	R26C	Covered	1360.61	1360.61	0 090	2	1	2	1	0
32665-00	Thoracoscopy w/esoph musc exc	R26C	Covered	1951.94	1951.94	0 090	2	0	2	1	0
32666-00	Thoracoscopy w/wedge resect	R26C	Covered	1399.99	1399.99	0 090	2	1	2	1	0
32667-00	Thoracoscopy w/w resect addl	R26C	Covered	240.80	240.80	0 ZZZ	0	0	2	1	0
32668-00	Thoracoscopy w/w resect diag	R26C	Covered	240.80	240.80	0 ZZZ	0	0	2	1	0
32669-00	Thoracoscopy remove segment	R26C	Covered	2125.57	2125.57	0 090	2	0	2	1	0
32670-00	Thoracoscopy bilobectomy	R26C	Covered	2527.32	2527.32	0 090	2	0	2	1	0
32671-00	Thoracoscopy pneumonectomy	R26C	Covered	2781.88	2781.88	0 090	2	0	2	1	0
32672-00	Thoracoscopy for lvrs	R26C	Covered	2393.56	2393.56	0 090	2	0	2	1	0
32673-00	Thoracoscopy w/thymus resect	R26C	Covered	1930.95	1930.95	0 090	2	0	2	1	0
32674-00	Thoracoscopy lymph node exc	R26C	Covered	330.29	330.29	0 ZZZ	0	0	2	1	0
32701-00	Thorax stereo rad targetw/tx	R26C	Covered	334.75	334.75	2 XXX	0	0	0	1	0
32800-00	Repair lung hernia	R26C	Covered	1515.15	1515.15	0 090	2	0	2	1	0
32810-00	Close chest after drainage	R26C	Covered	1453.23	1453.23	0 090	2	0	2	0	0
32815-00	Close bronchial fistula	R26C	Covered	4412.96	4412.96	0 090	2	0	2	1	0
32820-00	Reconstruct injured chest	R26C	Covered	2134.93	2134.93	0 090	2	0	2	1	0
74235-26	Remove esophagus obstruction	RCMS	Covered	99.78	99.78	1 XXX	0	0	0	0	0
32851-00	Lung transplant single	R26C	Covered	5124.60	5124.60	0 090	2	0	2	1	2
32852-00	Lung transplant with bypass	R26C	Covered	5544.06	5544.06	0 090	2	0	2	1	2
32853-00	Lung transplant double	R26C	Covered	7137.16	7137.16	0 090	2	2	2	1	2
32854-00	Lung transplant with bypass	R26C	Covered	7551.04	7551.04	0 090	2	2	2	1	2
32855-00	Prepare donor lung single	RMCD	Covered	194.26	194.26	0 XXX	2	0	2	1	0
32856-00	Prepare donor lung double	RMCD	Covered	198.44	198.44	0 XXX	2	0	2	1	0
32900-00	Removal of rib(s)	R26C	Covered	2159.23	2159.23	0 090	2	0	2	1	0
32905-00	Revise & repair chest wall	R26C	Covered	2117.91	2117.91	0 090	2	0	2	1	0
32906-00	Revise & repair chest wall	R26C	Covered	2597.03	2597.03	0 090	2	0	2	1	0
32940-00	Revision of lung	R26C	Covered	1962.15	1962.15	0 090	2	0	2	1	0
32960-00	Therapeutic pneumothorax	R26C	Covered	228.97	156.52	0 000	2	0	1	0	0
32994-00	Ablate pulm tumor perq crybl	R26C	Covered	9114.46	732.58	0 000	2	1	2	0	0
32997-00	Total lung lavage	R26C	Covered	576.35	576.35	0 000	2	1	1	0	0
32998-00	Ablate pulm tumor perq rf	R26C	Covered	5786.02	733.87	0 000	2	1	2	0	0
75807-26	Lymph vessel x-ray trunk	RCMS	Covered	90.89	90.89	1 XXX	0	2	0	0	0
33016-00	Pericardiocentesis w/imaging	R26C	Covered	369.02	369.02	0 000	2	0	1	0	0
33017-00	Prprd drg 6yr+ w/o cgen car	R26C	Covered	388.54	388.54	0 000	2	0	1	0	0
33018-00	Prprd drg 0-5yr or w/anomaly	R26C	Covered	452.42	452.42	0 000	2	0	1	0	0
33019-00	Perq prprd drg insj cath ct	R26C	Covered	349.87	349.87	0 000	2	0	1	0	0
33020-00	Incision of heart sac	R26C	Covered	1318.94	1318.94	0 090	2	0	2	1	0
33025-00	Incision of heart sac	R26C	Covered	1233.77	1233.77	0 090	2	0	2	1	0
33030-00	Partial removal of heart sac	R26C	Covered	3150.01	3150.01	0 090	2	0	2	1	0
33031-00	Partial removal of heart sac	R26C	Covered	3878.70	3878.70	0 090	2	0	2	1	0
33050-00	Resect heart sac lesion	R26C	Covered	1614.53	1614.53	0 090	2	0	2	1	0
33120-00	Removal of heart lesion	R26C	Covered	3272.35	3272.35	0 090	2	0	2	1	0
33130-00	Removal of heart lesion	R26C	Covered	2169.35	2169.35	0 090	2	0	2	1	0
33140-00	Heart revascularize (tmr)	R26C	Covered	2448.07	2448.07	0 090	2	0	2	0	0
33141-00	Heart tmr w/other procedure	R26C	Covered	202.58	202.58	0 ZZZ	0	0	2	1	0
33202-00	Insert epicard eltrd open	R26C	Covered	1233.77	1233.77	0 090	2	0	1	0	0

33203-00	Insert epicard eltrd endo	R26C	Covered	1288.40	1288.40	0 090	2	0	1	0	0
33206-00	Insert heart pm atrial	R26C	Covered	742.96	742.96	0 090	2	0	1	2	0
33207-00	Insert heart pm ventricular	R26C	Covered	774.77	774.77	0 090	2	0	1	2	0
33208-00	Insrt heart pm atrial & vent	R26C	Covered	837.40	837.40	0 090	2	0	1	2	0
33210-00	Insert electrd/pm cath snl	R26C	Covered	255.61	255.61	0 000	2	0	1	0	0
33211-00	Insert card electrodes dual	R26C	Covered	267.09	267.09	0 000	2	0	1	0	0
33212-00	Insert pulse gen snl lead	R26C	Covered	529.19	529.19	0 090	2	0	1	0	0
33213-00	Insert pulse gen dual leads	R26C	Covered	553.64	553.64	0 090	2	0	1	0	0
33214-00	Upgrade of pacemaker system	R26C	Covered	782.38	782.38	0 090	2	0	0	2	0
33215-00	Reposition pacing-defib lead	R26C	Covered	506.16	506.16	0 090	2	0	1	0	0
33216-00	Insert 1 electrode pm-defib	R26C	Covered	612.11	612.11	0 090	2	0	1	0	0
33217-00	Insert 2 electrode pm-defib	R26C	Covered	607.05	607.05	0 090	2	0	1	0	0
33218-00	Repair lead pace-defib one	R26C	Covered	643.26	643.26	0 090	2	0	1	0	0
33220-00	Repair lead pace-defib dual	R26C	Covered	623.73	623.73	0 090	2	0	1	0	0
33221-00	Insert pulse gen mult leads	R26C	Covered	586.41	586.41	0 090	2	0	1	0	0
33222-00	Relocation pocket pacemaker	R26C	Covered	572.36	572.36	0 090	2	0	1	0	0
33223-00	Relocate pocket for defib	R26C	Covered	670.45	670.45	0 090	2	0	0	0	0
33224-00	Insert pacing lead & connect	R26C	Covered	811.36	811.36	0 000	2	0	1	0	0
33225-00	L ventric pacing lead add-on	R26C	Covered	728.00	728.00	0 ZZZ	0	0	1	0	0
33226-00	Reposition l ventric lead	R26C	Covered	774.37	774.37	0 000	2	0	1	0	0
33227-00	Remove&replace pm gen singl	R26C	Covered	555.70	555.70	0 090	2	0	1	0	0
33228-00	Remv&replc pm gen dual lead	R26C	Covered	580.11	580.11	0 090	2	0	1	0	0
33229-00	Remv&replc pm gen mult leads	R26C	Covered	610.39	610.39	0 090	2	0	1	0	0
33230-00	Insrt pulse gen w/dual leads	R26C	Covered	607.08	607.08	0 090	2	0	1	0	0
33231-00	Insrt pulse gen w/mult leads	R26C	Covered	655.33	655.33	0 090	2	0	1	0	0
33233-00	Removal of pm generator	R26C	Covered	392.16	392.16	0 090	2	0	1	0	0
33234-00	Removal of pacemaker system	R26C	Covered	790.01	790.01	0 090	2	0	1	0	0
33235-00	Removal pacemaker electrode	R26C	Covered	1039.90	1039.90	0 090	2	0	1	0	0
33236-00	Remove electrode/thoracotomy	R26C	Covered	1275.82	1275.82	0 090	2	0	0	2	0
33237-00	Remove electrode/thoracotomy	R26C	Covered	1364.01	1364.01	0 090	2	0	0	2	0
33238-00	Remove electrode/thoracotomy	R26C	Covered	1544.84	1544.84	0 090	2	0	0	2	0
33240-00	Insrt pulse gen w/singl lead	R26C	Covered	601.34	601.34	0 090	2	0	1	0	0
33241-00	Remove pulse generator	R26C	Covered	358.18	358.18	0 090	2	0	1	0	0
33243-00	Remove eltrd/thoracotomy	R26C	Covered	2197.29	2197.29	0 090	2	0	2	1	0
33244-00	Remove elctrd transvenously	R26C	Covered	1402.37	1402.37	0 090	2	0	1	1	0
33249-00	Insj/rplcmt defib w/lead(s)	R26C	Covered	1474.57	1474.57	0 090	2	0	1	1	0
33250-00	Ablate heart dysrhythm focus	R26C	Covered	2306.18	2306.18	0 090	2	0	2	1	0
33251-00	Ablate heart dysrhythm focus	R26C	Covered	2566.99	2566.99	0 090	2	0	2	1	0
33254-00	Ablate atria lmtd	R26C	Covered	2165.29	2165.29	0 090	2	0	2	1	0
33255-00	Ablate atria w/o bypass ext	R26C	Covered	2571.52	2571.52	0 090	2	0	2	1	0
33256-00	Ablate atria w/bypass exten	R26C	Covered	3035.00	3035.00	0 090	2	0	2	1	0
33257-00	Ablate atria lmtd add-on	R26C	Covered	940.24	940.24	0 ZZZ	0	0	2	0	0
33258-00	Ablate atria x10sv add-on	R26C	Covered	1044.05	1044.05	0 ZZZ	0	0	2	0	0
33259-00	Ablate atria w/bypass add-on	R26C	Covered	1364.24	1364.24	0 ZZZ	0	0	2	0	0
33261-00	Ablate heart dysrhythm focus	R26C	Covered	2545.33	2545.33	0 090	2	0	2	1	0
33262-00	Rmvl& replc pulse gen 1 lead	R26C	Covered	609.01	609.01	0 090	2	0	1	0	0
33263-00	Rmvl & rplcmt dfb gen 2 lead	R26C	Covered	631.58	631.58	0 090	2	0	1	0	0
33264-00	Rmvl & rplcmt dfb gen mit ld	R26C	Covered	658.02	658.02	0 090	2	0	1	0	0
33265-00	Ablate atria lmtd endo	R26C	Covered	2164.54	2164.54	0 090	2	0	2	1	0
33266-00	Ablate atria x10sv endo	R26C	Covered	2899.44	2899.44	0 090	2	0	2	1	0
33267-00	Excl laa open any method	R26C	Covered	1658.52	1658.52	0 090	2	0	2	1	0
33268-00	Excl laa opn oth px any meth	R26C	Covered	200.00	200.00	0 ZZZ	0	0	2	0	0
33269-00	Excl laa thrscp any method	R26C	Covered	1321.95	1321.95	0 090	2	0	2	1	0
33270-00	Ins/rep subq defibrillator	R26C	Covered	908.19	908.19	0 090	2	0	1	0	0

33271-00	Insj subq impltbl dfb elctrd	R26C	Covered	736.25	736.25	0 090	2	0	1	0	0
33272-00	Rmvl of subq defibrillator	R26C	Covered	568.12	568.12	0 090	2	0	1	0	0
33273-00	Repos prev impltbl subq dfb	R26C	Covered	653.14	653.14	0 090	2	0	1	0	0
33274-00	Tcat insj/rpl perm ldlb pm	R26C	Covered	774.13	774.13	0 090	2	0	1	2	0
33275-00	Tcat rmvl perm ldlb pm w/img	R26C	Covered	809.60	809.60	0 090	2	0	1	0	0
33285-00	Insj subq car rhythm mntr	R26C	Covered	8015.35	139.27	0 000	2	0	1	0	0
33286-00	Rmvl subq car rhythm mntr	R26C	Covered	224.07	136.75	0 000	2	0	1	0	0
33289-00	Tcat impl wrls p-art prs snr	R26C	Covered	528.86	528.86	0 000	2	0	0	0	0
33300-00	Repair of heart wound	R26C	Covered	3816.77	3816.77	0 090	2	0	2	1	0
33305-00	Repair of heart wound	R26C	Covered	6360.77	6360.77	0 090	2	0	2	1	0
33310-00	Exploratory heart surgery	R26C	Covered	1866.30	1866.30	0 090	2	0	2	1	0
33315-00	Exploratory heart surgery	R26C	Covered	3007.10	3007.10	0 090	2	0	2	1	0
33320-00	Repair major blood vessel(s)	R26C	Covered	1699.46	1699.46	0 090	2	0	2	1	0
33321-00	Repair major vessel	R26C	Covered	1891.55	1891.55	0 090	2	0	2	1	0
33322-00	Repair major blood vessel(s)	R26C	Covered	2214.84	2214.84	0 090	2	0	2	1	0
33330-00	Insert major vessel graft	R26C	Covered	2258.05	2258.05	0 090	2	0	2	1	0
33335-00	Insert major vessel graft	R26C	Covered	2940.11	2940.11	0 090	2	0	2	1	0
33340-00	Perq clsr tcat l atr apndge	R26C	Covered	1231.39	1231.39	0 000	2	0	0	2	1
33361-00	Replace aortic valve perq	R26C	Covered	1889.09	1889.09	0 000	2	0	0	2	1
33362-00	Replace aortic valve open	R26C	Covered	2056.71	2056.71	0 000	2	0	0	2	1
33363-00	Replace aortic valve open	R26C	Covered	2132.53	2132.53	0 000	2	0	0	2	1
33364-00	Replace aortic valve open	R26C	Covered	2117.74	2117.74	0 000	2	0	0	2	1
33365-00	Replace aortic valve open	R26C	Covered	2225.38	2225.38	0 000	2	0	0	2	1
33366-00	Trcath replace aortic valve	R26C	Covered	2449.04	2449.04	0 000	2	0	0	2	1
33367-00	Replace aortic valve w/byp	R26C	Covered	940.01	940.01	0 ZZZ	0	0	0	0	1
33368-00	Replace aortic valve w/byp	R26C	Covered	1138.68	1138.68	0 ZZZ	0	0	0	0	1
33369-00	Replace aortic valve w/byp	R26C	Covered	1503.42	1503.42	0 ZZZ	0	0	0	0	1
33370-00	Tcat plmt&rmvl cepd perq	R26C	Covered	208.32	208.32	0 ZZZ	0	0	0	0	0
33390-00	Valvuloplasty aortic valve	R26C	Covered	3022.47	3022.47	0 090	2	0	2	1	0
33391-00	Valvuloplasty aortic valve	R26C	Covered	3577.72	3577.72	0 090	2	0	2	1	0
33404-00	Prepare heart-aorta conduit	R26C	Covered	2761.70	2761.70	0 090	2	0	2	1	0
33405-00	Replacement aortic valve opn	R26C	Covered	3561.99	3561.99	0 090	2	0	2	1	0
33406-00	Replacement aortic valve opn	R26C	Covered	4497.45	4497.45	0 090	2	0	2	1	0
33410-00	Replacement aortic valve opn	R26C	Covered	3975.84	3975.84	0 090	2	0	2	1	0
33411-00	Replacement of aortic valve	R26C	Covered	5233.08	5233.08	0 090	2	0	2	0	0
33412-00	Replacement of aortic valve	R26C	Covered	4896.79	4896.79	0 090	2	0	2	1	0
33413-00	Replacement of aortic valve	R26C	Covered	5029.57	5029.57	0 090	2	0	2	1	0
33414-00	Repair of aortic valve	R26C	Covered	3349.57	3349.57	0 090	2	0	2	1	0
33415-00	Revision subvalvular tissue	R26C	Covered	3181.33	3181.33	0 090	2	0	2	1	0
33416-00	Revise ventricle muscle	R26C	Covered	3184.37	3184.37	0 090	2	0	2	1	0
33417-00	Repair of aortic valve	R26C	Covered	2640.30	2640.30	0 090	2	0	2	1	0
33418-00	Repair tcat mitral valve	R26C	Covered	2846.94	2846.94	0 090	2	0	2	1	0
33419-00	Repair tcat mitral valve	R26C	Covered	661.27	661.27	0 ZZZ	0	0	2	1	0
33420-00	Revision of mitral valve	R26C	Covered	2298.11	2298.11	0 090	2	0	1	1	0
33422-00	Revision of mitral valve	R26C	Covered	2632.28	2632.28	0 090	2	0	2	1	0
33425-00	Repair of mitral valve	R26C	Covered	4275.39	4275.39	0 090	2	0	2	1	0
33426-00	Repair of mitral valve	R26C	Covered	3739.69	3739.69	0 090	2	0	2	1	0
33427-00	Repair of mitral valve	R26C	Covered	3832.85	3832.85	0 090	2	0	2	1	0
33430-00	Replacement of mitral valve	R26C	Covered	4397.43	4397.43	0 090	2	0	2	1	0
33440-00	Rplcmt a-valve tlcj autol pv	R26C	Covered	5292.08	5292.08	0 090	2	0	2	1	0
33460-00	Revision of tricuspid valve	R26C	Covered	3742.38	3742.38	0 090	2	0	2	1	0
33463-00	Valvuloplasty tricuspid	R26C	Covered	4828.74	4828.74	0 090	2	0	2	1	0
33464-00	Valvuloplasty tricuspid	R26C	Covered	3834.12	3834.12	0 090	2	0	2	1	0
33465-00	Replace tricuspid valve	R26C	Covered	4309.72	4309.72	0 090	2	0	2	1	0

33468-00	Revision of tricuspid valve	R26C	Covered	3814.42	3814.42	0 090	2	0	2	1	0
33471-00	Vlvt pv clsd hrt via p-art	R26C	Covered	2106.58	2106.58	0 090	2	0	2	1	0
33474-00	Revision of pulmonary valve	R26C	Covered	3414.78	3414.78	0 090	2	0	2	1	0
33475-00	Replacement pulmonary valve	R26C	Covered	3655.76	3655.76	0 090	2	0	2	1	0
33476-00	Revision of heart chamber	R26C	Covered	2418.80	2418.80	0 090	2	0	2	1	0
33477-00	Implant tcvt pulm vlv perq	R26C	Covered	2124.60	2124.60	0 000	2	0	0	1	1
33478-00	Revision of heart chamber	R26C	Covered	2496.25	2496.25	0 090	2	0	2	1	0
33496-00	Repair prosth valve clot	R26C	Covered	2631.34	2631.34	0 090	2	0	2	1	0
33500-00	Repair heart vessel fistula	R26C	Covered	2467.31	2467.31	0 090	2	0	2	1	0
33501-00	Repair heart vessel fistula	R26C	Covered	1778.14	1778.14	0 090	2	0	2	2	0
33502-00	Coronary artery correction	R26C	Covered	2042.32	2042.32	0 090	2	0	2	1	0
33503-00	Coronary artery graft	R26C	Covered	2127.17	2127.17	0 090	2	0	0	1	0
33504-00	Coronary artery graft	R26C	Covered	2331.90	2331.90	0 090	2	0	2	1	0
33505-00	Repair artery w/tunnel	R26C	Covered	3193.11	3193.11	0 090	2	0	2	1	0
33506-00	Repair artery translocation	R26C	Covered	3193.30	3193.30	0 090	2	0	2	1	0
33507-00	Repair art intramural	R26C	Covered	2688.86	2688.86	0 090	2	0	2	1	0
33508-00	Endoscopic vein harvest	R26C	Covered	24.99	24.99	0 ZZZ	0	0	2	1	0
33509-00	Ndsc hrv uxtr art 1 sgm cab	R26C	Covered	266.23	266.23	0 ZZZ	0	0	2	1	0
33510-00	Cabg vein single	R26C	Covered	3042.43	3042.43	0 090	2	0	2	0	0
33511-00	Cabg vein two	R26C	Covered	3338.83	3338.83	0 090	2	0	2	0	0
33512-00	Cabg vein three	R26C	Covered	3796.58	3796.58	0 090	2	0	2	0	0
33513-00	Cabg vein four	R26C	Covered	3870.78	3870.78	0 090	2	0	2	0	0
33514-00	Cabg vein five	R26C	Covered	4084.08	4084.08	0 090	2	0	2	0	0
33516-00	Cabg vein six or more	R26C	Covered	4226.84	4226.84	0 090	2	0	2	0	0
33517-00	Cabg artery-vein single	R26C	Covered	288.19	288.19	0 ZZZ	0	0	2	0	0
33518-00	Cabg artery-vein two	R26C	Covered	631.89	631.89	0 ZZZ	0	0	2	0	0
33519-00	Cabg artery-vein three	R26C	Covered	835.68	835.68	0 ZZZ	0	0	2	0	0
33521-00	Cabg artery-vein four	R26C	Covered	1001.85	1001.85	0 ZZZ	0	0	2	0	0
33522-00	Cabg artery-vein five	R26C	Covered	1125.06	1125.06	0 ZZZ	0	0	2	0	0
33523-00	Cabg art-vein six or more	R26C	Covered	1271.65	1271.65	0 ZZZ	0	0	2	0	0
33530-00	Coronary artery bypass/reop	R26C	Covered	806.86	806.86	0 ZZZ	0	0	2	0	0
33533-00	Cabg arterial single	R26C	Covered	2945.84	2945.84	0 090	2	0	2	0	0
33534-00	Cabg arterial two	R26C	Covered	3454.70	3454.70	0 090	2	0	2	0	0
33535-00	Cabg arterial three	R26C	Covered	3835.95	3835.95	0 090	2	0	2	0	0
33536-00	Cabg arterial four or more	R26C	Covered	4130.89	4130.89	0 090	2	0	2	0	0
33542-00	Removal of heart lesion	R26C	Covered	4101.08	4101.08	0 090	2	0	2	1	0
33545-00	Repair of heart damage	R26C	Covered	4785.17	4785.17	0 090	2	0	2	1	0
33548-00	Restore/remodel ventricle	R26C	Covered	4622.00	4622.00	0 090	2	0	2	1	0
33572-00	Open coronary endarterectomy	R26C	Covered	354.51	354.51	0 ZZZ	0	0	2	0	0
33600-00	Closure of valve	R26C	Covered	2718.45	2718.45	0 090	2	0	2	1	0
33602-00	Closure of valve	R26C	Covered	2640.90	2640.90	0 090	2	0	2	1	0
33606-00	Anastomosis/artery-aorta	R26C	Covered	2806.86	2806.86	0 090	2	0	2	1	0
33608-00	Repair anomaly w/conduit	R26C	Covered	2843.43	2843.43	0 090	2	0	2	1	0
33610-00	Repair by enlargement	R26C	Covered	2805.29	2805.29	0 090	2	0	2	1	0
33611-00	Repair double ventricle	R26C	Covered	3046.17	3046.17	0 090	2	0	2	1	0
33612-00	Repair double ventricle	R26C	Covered	3126.29	3126.29	0 090	2	0	2	1	0
33615-00	Repair modified fontan	R26C	Covered	3137.79	3137.79	0 090	2	0	2	1	0
33617-00	Repair single ventricle	R26C	Covered	3392.98	3392.98	0 090	2	0	2	1	0
33619-00	Repair single ventricle	R26C	Covered	4325.77	4325.77	0 090	2	0	2	1	0
33620-00	Apply r&l pulm art bands	R26C	Covered	2576.99	2576.99	0 090	2	0	2	1	0
33621-00	Transthor cath for stent	R26C	Covered	1475.02	1475.02	0 090	2	0	2	1	0
33622-00	Redo compl cardiac anomaly	R26C	Covered	5313.15	5313.15	0 090	2	0	2	1	0
33641-00	Repair heart septum defect	R26C	Covered	2569.10	2569.10	0 090	2	0	2	1	0
33645-00	Revision of heart veins	R26C	Covered	2712.44	2712.44	0 090	2	0	2	1	0

33647-00	Repair heart septum defects	R26C	Covered	2841.03	2841.03	0 090	2	0	2	1	0
33660-00	Repair of heart defects	R26C	Covered	2748.50	2748.50	0 090	2	0	2	1	0
33665-00	Repair of heart defects	R26C	Covered	2988.67	2988.67	0 090	2	0	2	1	0
33670-00	Repair of heart chambers	R26C	Covered	3058.88	3058.88	0 090	2	0	2	1	0
33675-00	Close mult vsd	R26C	Covered	3077.50	3077.50	0 090	2	0	2	1	0
33676-00	Close mult vsd w/resection	R26C	Covered	3157.62	3157.62	0 090	2	0	2	1	0
33677-00	Cl mult vsd w/rem pul band	R26C	Covered	3277.05	3277.05	0 090	2	0	2	1	0
33681-00	Repair heart septum defect	R26C	Covered	2919.77	2919.77	0 090	2	0	2	1	0
33684-00	Repair heart septum defect	R26C	Covered	2950.48	2950.48	0 090	2	0	2	1	0
33688-00	Repair heart septum defect	R26C	Covered	2927.48	2927.48	0 090	2	0	2	1	0
33690-00	Reinforce pulmonary artery	R26C	Covered	1925.44	1925.44	0 090	2	0	2	1	0
33692-00	Repair of heart defects	R26C	Covered	3038.80	3038.80	0 090	2	0	2	1	0
33694-00	Repair of heart defects	R26C	Covered	3046.17	3046.17	0 090	2	0	2	1	0
33697-00	Repair of heart defects	R26C	Covered	3205.71	3205.71	0 090	2	0	2	1	0
33702-00	Repair of heart defects	R26C	Covered	2447.98	2447.98	0 090	2	0	2	1	0
33710-00	Repair of heart defects	R26C	Covered	3199.97	3199.97	0 090	2	0	2	0	0
33720-00	Repair of heart defect	R26C	Covered	2449.84	2449.84	0 090	2	0	2	1	0
33724-00	Repair venous anomaly	R26C	Covered	2414.50	2414.50	0 090	2	0	2	1	0
33726-00	Repair pul venous stenosis	R26C	Covered	3170.68	3170.68	0 090	2	0	2	1	0
33730-00	Repair heart-vein defect(s)	R26C	Covered	3148.14	3148.14	0 090	2	0	2	1	0
33732-00	Repair heart-vein defect	R26C	Covered	2610.87	2610.87	0 090	2	0	2	1	0
33735-00	Revision of heart chamber	R26C	Covered	2071.78	2071.78	0 090	2	0	2	0	0
33736-00	Revision of heart chamber	R26C	Covered	2241.24	2241.24	0 090	2	0	2	1	0
33737-00	Revision of heart chamber	R26C	Covered	2067.77	2067.77	0 090	2	0	2	1	0
33741-00	Tas congenital car anomal	R26C	Covered	1174.01	1174.01	0 000	2	0	2	0	0
33745-00	Tis cgen car anomal 1st shnt	R26C	Covered	1677.78	1677.78	0 000	2	0	2	0	0
33746-00	Tis cgen car anomal ea addl	R26C	Covered	670.84	670.84	0 ZZZ	0	0	2	0	0
33750-00	Major vessel shunt	R26C	Covered	1996.67	1996.67	0 090	2	0	2	1	0
33755-00	Major vessel shunt	R26C	Covered	2103.68	2103.68	0 090	2	0	2	1	0
33762-00	Major vessel shunt	R26C	Covered	2027.35	2027.35	0 090	2	0	2	1	0
33764-00	Major vessel shunt & graft	R26C	Covered	2103.68	2103.68	0 090	2	0	2	1	0
33766-00	Major vessel shunt	R26C	Covered	2104.21	2104.21	0 090	2	0	2	1	0
33767-00	Major vessel shunt	R26C	Covered	2242.43	2242.43	0 090	2	0	2	1	0
33768-00	Cavopulmonary shunting	R26C	Covered	637.86	637.86	0 ZZZ	0	0	2	2	0
33770-00	Repair great vessels defect	R26C	Covered	3290.17	3290.17	0 090	2	0	2	1	0
33771-00	Repair great vessels defect	R26C	Covered	3370.74	3370.74	0 090	2	0	2	1	0
33774-00	Repair great vessels defect	R26C	Covered	2847.06	2847.06	0 090	2	0	2	1	0
33775-00	Repair great vessels defect	R26C	Covered	2923.12	2923.12	0 090	2	0	2	0	0
33776-00	Repair great vessels defect	R26C	Covered	3094.35	3094.35	0 090	2	0	2	1	0
33777-00	Repair great vessels defect	R26C	Covered	2965.25	2965.25	0 090	2	0	2	0	0
33778-00	Repair great vessels defect	R26C	Covered	3675.44	3675.44	0 090	2	0	2	1	0
33779-00	Repair great vessels defect	R26C	Covered	3603.49	3603.49	0 090	2	0	2	1	0
33780-00	Repair great vessels defect	R26C	Covered	3676.01	3676.01	0 090	2	0	2	1	0
33781-00	Repair great vessels defect	R26C	Covered	3577.05	3577.05	0 090	2	0	2	0	0
33782-00	Nikaidoh proc	R26C	Covered	5000.98	5000.98	0 090	2	0	2	1	0
33783-00	Nikaidoh proc w/ostia implt	R26C	Covered	5399.47	5399.47	0 090	2	0	2	1	0
33786-00	Repair arterial trunk	R26C	Covered	3545.19	3545.19	0 090	2	0	2	1	0
33788-00	Revision of pulmonary artery	R26C	Covered	2411.89	2411.89	0 090	2	0	2	1	0
33800-00	Aortic suspension	R26C	Covered	1562.60	1562.60	0 090	2	0	2	2	0
33802-00	Repair vessel defect	R26C	Covered	1741.38	1741.38	0 090	2	0	2	1	0
33803-00	Repair vessel defect	R26C	Covered	1820.11	1820.11	0 090	2	0	2	1	0
33813-00	Repair septal defect	R26C	Covered	1978.94	1978.94	0 090	2	0	2	1	0
33814-00	Repair septal defect	R26C	Covered	2420.74	2420.74	0 090	2	0	2	1	0
33820-00	Revise major vessel	R26C	Covered	1541.56	1541.56	0 090	2	0	2	0	0

33822-00	Revise major vessel	R26C	Covered	1622.84	1622.84	0 090	2	0	2	1	0
33824-00	Revise major vessel	R26C	Covered	1887.59	1887.59	0 090	2	0	2	1	0
33840-00	Remove aorta constriction	R26C	Covered	1977.03	1977.03	0 090	2	0	2	1	0
33845-00	Remove aorta constriction	R26C	Covered	2129.93	2129.93	0 090	2	0	2	1	0
33851-00	Remove aorta constriction	R26C	Covered	2028.37	2028.37	0 090	2	0	2	1	0
33852-00	Repair septal defect	R26C	Covered	2222.27	2222.27	0 090	2	0	2	0	0
33853-00	Repair septal defect	R26C	Covered	2894.12	2894.12	0 090	2	0	2	1	0
33858-00	As-aort grf f/aortic dsj	R26C	Covered	5273.02	5273.02	0 090	2	0	2	1	0
33859-00	As-aort grf f/ds oth/thn dsj	R26C	Covered	3800.29	3800.29	0 090	2	0	2	1	0
33863-00	Ascending aortic graft	R26C	Covered	4889.14	4889.14	0 090	2	0	2	1	0
33864-00	Ascending aortic graft	R26C	Covered	4986.30	4986.30	0 090	2	0	2	1	0
33866-00	Aortic hemiarch graft	R26C	Covered	1414.50	1414.50	0 ZZZ	0	0	0	0	1
33871-00	Transvrs a-arch grf hypthrm	R26C	Covered	5057.57	5057.57	0 090	2	0	2	1	0
33875-00	Thoracic aortic graft	R26C	Covered	4276.89	4276.89	0 090	2	0	2	2	0
33877-00	Thoracoabdominal graft	R26C	Covered	5554.84	5554.84	0 090	2	0	2	2	0
33880-00	Endovasc taa repr incl subcl	R26C	Covered	2745.17	2745.17	0 090	2	2	2	2	0
33881-00	Endovasc taa repr w/o subcl	R26C	Covered	2359.34	2359.34	0 090	2	2	2	2	0
33883-00	Insert endovasc prosth taa	R26C	Covered	1722.17	1722.17	0 090	2	0	2	2	0
33884-00	Endovasc prosth taa add-on	R26C	Covered	590.79	590.79	0 ZZZ	0	0	2	2	0
33886-00	Endovasc prosth delayed	R26C	Covered	1485.63	1485.63	0 090	2	0	2	2	0
33889-00	Artery transpose/endovas taa	R26C	Covered	1204.10	1204.10	0 000	2	1	2	2	0
33891-00	Car-car bp grft/endovas taa	R26C	Covered	1440.16	1440.16	0 000	2	1	2	2	0
33894-00	Evasc st rpr thrc/aa acrs br	R26C	Covered	1532.64	1532.64	0 000	2	0	0	0	0
33895-00	Evasc st rpr thrc/aa x crsg	R26C	Covered	1219.73	1219.73	0 000	2	0	0	0	0
33897-00	Perq trluml angp nt/recr coa	R26C	Covered	906.78	906.78	0 000	2	0	0	0	0
33900-00	Perq p-art revsc 1 nm nt uni	R26C	Covered	930.42	930.42	0 000	2	0	0	0	0
33901-00	Perq p-art revsc 1 nm nt bi	R26C	Covered	1222.65	1222.65	0 000	2	2	0	0	0
33902-00	Perq p-art revsc 1 abnor uni	R26C	Covered	1180.79	1180.79	0 000	2	0	0	0	0
33903-00	Perq p-art revsc 1 abnor bi	R26C	Covered	1391.83	1391.83	0 000	2	2	0	0	0
33904-00	Perq p-art revsc each addl	R26C	Covered	466.54	466.54	0 ZZZ	0	0	0	0	0
33910-00	Remove lung artery emboli	R26C	Covered	4091.48	4091.48	0 090	2	0	2	1	0
33915-00	Remove lung artery emboli	R26C	Covered	2166.46	2166.46	0 090	2	0	2	1	0
33916-00	Surgery of great vessel	R26C	Covered	6489.37	6489.37	0 090	2	0	2	1	0
33917-00	Repair pulmonary artery	R26C	Covered	2319.40	2319.40	0 090	2	0	2	1	0
33920-00	Repair pulmonary atresia	R26C	Covered	2835.25	2835.25	0 090	2	0	2	1	0
33922-00	Transect pulmonary artery	R26C	Covered	2207.30	2207.30	0 090	2	0	2	1	0
33924-00	Remove pulmonary shunt	R26C	Covered	437.06	437.06	0 ZZZ	0	0	2	1	0
33925-00	Rpr pul art unifocal w/o cpb	R26C	Covered	2680.75	2680.75	0 090	2	0	2	1	0
33926-00	Repr pul art unifocal w/cpb	R26C	Covered	3750.87	3750.87	0 090	2	0	2	1	0
33927-00	Impltj tot rplcmt hrt sys	R26C	Covered	3905.99	3905.99	0 XXX	2	0	2	0	0
93572-26	Heart flow reserve measure	RCMS	Covered	83.67	83.67	1 ZZZ	0	0	0	0	0
74363-26	X-ray bile duct dilation	RCMS	Covered	72.48	72.48	1 XXX	0	0	0	0	0
95824-26	Eeg cerebral death only	RCMS	Covered	69.05	69.05	1 XXX	0	0	0	0	0
74742-26	X-ray fallopian tube	RCMS	Covered	51.45	51.45	1 XXX	0	0	0	0	0
33935-00	Transplantation heart/lung	R26C	Covered	7688.04	7688.04	0 090	2	0	2	1	2
74329-26	X-ray for pancreas endoscopy	RCMS	Covered	41.60	41.60	1 XXX	0	0	0	0	0
33944-00	Prepare donor heart	RMCD	Covered	206.82	206.82	0 XXX	2	0	2	1	0
33945-00	Transplantation of heart	R26C	Covered	7592.17	7592.17	0 090	2	0	2	1	2
33946-00	Ecmo/ecls initiation venous	R26C	Covered	485.89	485.89	0 XXX	0	0	1	0	0
33947-00	Ecmo/ecls initiation artery	R26C	Covered	537.17	537.17	0 XXX	0	0	1	0	0
33948-00	Ecmo/ecls daily mgmt-venous	R26C	Covered	384.40	384.40	0 XXX	0	0	1	0	0
33949-00	Ecmo/ecls daily mgmt artery	R26C	Covered	373.96	373.96	0 XXX	0	0	1	0	0
33951-00	Ecmo/ecls insj prph cannula	R26C	Covered	652.28	652.28	0 000	2	0	0	0	0
33952-00	Ecmo/ecls insj prph cannula	R26C	Covered	666.37	666.37	0 000	2	0	0	0	0

33953-00	Ecmo/ecls insj prph cannula	R26C	Covered	727.88	727.88	0 000	2	0	0	0	0
33954-00	Ecmo/ecls insj prph cannula	R26C	Covered	734.68	734.68	0 000	2	0	0	0	0
33955-00	Ecmo/ecls insj ctr cannula	R26C	Covered	1273.21	1273.21	0 000	2	0	0	1	1
33956-00	Ecmo/ecls insj ctr cannula	R26C	Covered	1287.59	1287.59	0 000	2	0	0	1	1
33957-00	Ecmo/ecls repos perph cnula	R26C	Covered	285.02	285.02	0 000	2	0	0	0	0
33958-00	Ecmo/ecls repos perph cnula	R26C	Covered	285.02	285.02	0 000	2	0	0	0	0
33959-00	Ecmo/ecls repos perph cnula	R26C	Covered	361.36	361.36	0 000	2	0	0	0	0
33962-00	Ecmo/ecls repos perph cnula	R26C	Covered	361.36	361.36	0 000	2	0	0	0	0
33963-00	Ecmo/ecls repos perph cnula	R26C	Covered	719.16	719.16	0 000	2	0	0	1	1
33964-00	Ecmo/ecls repos perph cnula	R26C	Covered	759.17	759.17	0 000	2	0	0	1	1
33965-00	Ecmo/ecls rmlv perph cannula	R26C	Covered	285.02	285.02	0 000	2	0	0	0	0
33966-00	Ecmo/ecls rmlv prph cannula	R26C	Covered	368.96	368.96	0 000	2	0	0	0	0
33967-00	Insert i-aort percut device	R26C	Covered	404.18	404.18	0 000	2	0	0	0	0
33968-00	Remove aortic assist device	R26C	Covered	53.14	53.14	0 000	0	0	1	0	0
33969-00	Ecmo/ecls rmlv perph cannula	R26C	Covered	419.99	419.99	0 000	2	0	0	0	0
33970-00	Aortic circulation assist	R26C	Covered	549.46	549.46	0 000	2	0	2	1	0
33971-00	Aortic circulation assist	R26C	Covered	1140.32	1140.32	0 090	2	0	1	0	0
33973-00	Insert balloon device	R26C	Covered	771.32	771.32	0 000	2	0	2	1	0
33974-00	Remove intra-aortic balloon	R26C	Covered	1434.42	1434.42	0 090	2	0	1	0	0
33975-00	Implant ventricular device	R26C	Covered	2009.67	2009.67	0 XXX	2	0	2	0	0
33976-00	Implant ventricular device	R26C	Covered	2432.90	2432.90	0 XXX	2	2	2	0	0
33977-00	Remove ventricular device	R26C	Covered	1755.26	1755.26	0 XXX	2	0	2	0	0
33978-00	Remove ventricular device	R26C	Covered	2066.06	2066.06	0 XXX	2	2	2	0	0
33979-00	Insert intracorporeal device	R26C	Covered	2991.72	2991.72	0 XXX	2	0	2	0	0
33980-00	Remove intracorporeal device	R26C	Covered	2763.68	2763.68	0 XXX	2	0	2	0	0
33981-00	Replace vad pump ext	R26C	Covered	1274.16	1274.16	0 XXX	2	0	2	0	0
33982-00	Replace vad intra w/o bp	R26C	Covered	2995.06	2995.06	0 XXX	2	0	2	0	0
33983-00	Replace vad intra w/bp	R26C	Covered	3524.19	3524.19	0 XXX	2	0	2	0	0
33984-00	Ecmo/ecls rmlv prph cannula	R26C	Covered	436.99	436.99	0 000	2	0	0	0	0
33985-00	Ecmo/ecls rmlv ctr cannula	R26C	Covered	789.72	789.72	0 000	2	0	0	1	1
33986-00	Ecmo/ecls rmlv ctr cannula	R26C	Covered	807.97	807.97	0 000	2	0	0	1	1
33987-00	Artery expos/graft artery	R26C	Covered	319.83	319.83	0 ZZZ	0	0	0	1	1
33988-00	Insertion of left heart vent	R26C	Covered	1193.88	1193.88	0 000	2	0	0	1	1
33989-00	Removal of left heart vent	R26C	Covered	759.17	759.17	0 000	2	0	0	1	1
33990-00	Insj perq vad l hrt arterial	R26C	Covered	563.70	563.70	0 000	2	0	2	0	0
33991-00	Insj perq vad l hrt artrl&ven	R26C	Covered	699.55	699.55	0 000	2	0	2	0	0
33992-00	Rmlv perq left heart vad	R26C	Covered	293.32	293.32	0 000	2	0	2	0	0
33993-00	Reposg perq r/l hrt vad	R26C	Covered	262.67	262.67	0 000	2	0	2	0	0
33995-00	Insj perq vad r hrt venous	R26C	Covered	556.90	556.90	0 000	2	0	2	0	0
33997-00	Rmlv perq right heart vad	R26C	Covered	251.61	251.61	0 000	2	0	2	0	0
78414-26	Non-imaging heart function	RCMS	Covered	37.75	37.75	1 XXX	0	0	0	0	0
34001-00	Removal of artery clot	R26C	Covered	1399.37	1399.37	0 090	2	1	2	1	0
34051-00	Removal of artery clot	R26C	Covered	1593.78	1593.78	0 090	2	1	2	1	0
34101-00	Removal of artery clot	R26C	Covered	926.75	926.75	0 090	2	1	2	1	0
34111-00	Removal of arm artery clot	R26C	Covered	925.46	925.46	0 090	2	1	2	1	0
34151-00	Removal of artery clot	R26C	Covered	2141.37	2141.37	0 090	2	1	2	1	0
34201-00	Removal of artery clot	R26C	Covered	1570.25	1570.25	0 090	2	1	2	1	0
34203-00	Removal of leg artery clot	R26C	Covered	1464.03	1464.03	0 090	2	1	2	1	0
34401-00	Removal of vein clot	R26C	Covered	2393.06	2393.06	0 090	2	1	2	1	0
34421-00	Removal of vein clot	R26C	Covered	1068.92	1068.92	0 090	2	1	2	1	0
34451-00	Removal of vein clot	R26C	Covered	2184.12	2184.12	0 090	2	1	2	1	0
34471-00	Removal of vein clot	R26C	Covered	1650.60	1650.60	0 090	2	1	1	1	0
34490-00	Removal of vein clot	R26C	Covered	889.32	889.32	0 090	2	1	1	0	0
34501-00	Repair valve femoral vein	R26C	Covered	1386.04	1386.04	0 090	2	1	2	1	0

34502-00	Reconstruct vena cava	R26C	Covered	2448.24	2448.24	0 090	2	0	2	0	0
34510-00	Transposition of vein valve	R26C	Covered	1563.96	1563.96	0 090	2	1	2	1	0
34520-00	Cross-over vein graft	R26C	Covered	1518.00	1518.00	0 090	2	1	2	1	0
34530-00	Leg vein fusion	R26C	Covered	1452.26	1452.26	0 090	2	1	2	1	0
34701-00	Evasc rpr a-ao ndgft	R26C	Covered	1900.10	1900.10	0 090	2	0	2	2	0
34702-00	Evasc rpr a-ao ndgft rpt	R26C	Covered	2817.06	2817.06	0 090	2	0	2	2	0
34703-00	Evasc rpr a-unilac ndgft	R26C	Covered	2105.28	2105.28	0 090	2	0	2	2	0
34704-00	Evasc rpr a-unilac ndgft rpt	R26C	Covered	3495.93	3495.93	0 090	2	0	2	2	0
34705-00	Evac rpr a-biliac ndgft	R26C	Covered	2339.38	2339.38	0 090	2	0	2	2	0
34706-00	Evasc rpr a-ao ndgft rpt	R26C	Covered	3466.51	3466.51	0 090	2	0	2	2	0
34707-00	Evasc rpr ilio-iliac ndgft	R26C	Covered	1782.62	1782.62	0 090	2	1	2	2	0
34708-00	Evasc rpr ilio-iliac rpt	R26C	Covered	2750.36	2750.36	0 090	2	1	2	2	0
34709-00	Plmt xtn prosth evasc rpr	R26C	Covered	487.84	487.84	0 ZZZ	0	0	2	2	0
34710-00	Dlyd plmt xtn prosth 1st vsl	R26C	Covered	1230.85	1230.85	0 090	2	0	2	2	0
34711-00	Dlyd plmt xtn prosth ea addl	R26C	Covered	443.40	443.40	0 ZZZ	0	0	2	2	0
34712-00	Tcat dlvr enhncd fixj dev	R26C	Covered	1023.54	1023.54	0 090	2	0	2	2	0
34713-00	Perq access & clsr fem art	R26C	Covered	186.47	186.47	0 ZZZ	0	1	2	2	0
34714-00	Opn fem art expos cndt crtj	R26C	Covered	412.39	412.39	0 ZZZ	0	1	2	2	0
34715-00	Opn ax/subcla art expos	R26C	Covered	450.61	450.61	0 ZZZ	0	1	2	2	0
34716-00	Opn ax/subcla art expos cndt	R26C	Covered	571.88	571.88	0 ZZZ	0	1	2	2	0
34717-00	Evasc rpr a-iliac ndgft	R26C	Covered	667.98	667.98	0 ZZZ	0	0	2	2	0
34718-00	Evasc rpr n/a a-iliac ndgft	R26C	Covered	1894.50	1894.50	0 090	2	0	2	2	0
34808-00	Endovas iliac a device addon	R26C	Covered	304.42	304.42	0 ZZZ	0	0	2	2	0
34812-00	Opn fem art expos	R26C	Covered	310.85	310.85	0 ZZZ	0	1	2	2	0
34813-00	Femoral endovas graft add-on	R26C	Covered	353.01	353.01	0 ZZZ	0	0	2	2	0
34820-00	Opn iliac art expos	R26C	Covered	504.11	504.11	0 ZZZ	0	1	2	2	0
34830-00	Open aortic tube prosth repr	R26C	Covered	2672.95	2672.95	0 090	2	0	2	2	0
34831-00	Open aortoilac prosth repr	R26C	Covered	2933.25	2933.25	0 090	2	0	2	2	0
34832-00	Open aortofemor prosth repr	R26C	Covered	2871.16	2871.16	0 090	2	0	2	2	0
34833-00	Opn ilac art expos cndt crtj	R26C	Covered	587.67	587.67	0 ZZZ	0	1	2	2	0
34834-00	Opn brach art expos	R26C	Covered	193.93	193.93	0 ZZZ	0	1	2	2	0
34839-00	Plnning pt spec fenest graft	BSVC	Covered	Bundled	Bundled	0 YYY	0	0	0	0	0
34841-00	Endovasc visc aorta 1 graft	RMCD	Covered	1483.51	1483.51	0 YYY	2	0	2	2	0
34842-00	Endovasc visc aorta 2 graft	RMCD	Covered	1483.51	1483.51	0 YYY	2	0	2	2	0
34843-00	Endovasc visc aorta 3 graft	RMCD	Covered	1602.19	1602.19	0 YYY	2	0	2	2	0
34844-00	Endovasc visc aorta 4 graft	RMCD	Covered	1780.21	1780.21	0 YYY	2	0	2	2	0
34845-00	Visc & infraren abd 1 prosth	RMCD	Covered	1483.51	1483.51	0 YYY	2	0	2	2	0
34846-00	Visc & infraren abd 2 prosth	RMCD	Covered	1542.86	1542.86	0 YYY	2	0	2	2	0
34847-00	Visc & infraren abd 3 prosth	RMCD	Covered	1542.86	1542.86	0 YYY	2	0	2	2	0
34848-00	Visc & infraren abd 4+ prost	RMCD	Covered	1602.19	1602.19	0 YYY	2	0	2	2	0
35001-00	Repair defect of artery	R26C	Covered	1734.51	1734.51	0 090	2	1	2	1	0
35002-00	Repair artery rupture neck	R26C	Covered	1740.73	1740.73	0 090	2	1	2	1	0
35005-00	Repair defect of artery	R26C	Covered	1528.76	1528.76	0 090	2	1	2	1	0
35011-00	Repair defect of artery	R26C	Covered	1568.38	1568.38	0 090	2	1	2	1	0
35013-00	Repair artery rupture arm	R26C	Covered	1969.71	1969.71	0 090	2	1	2	1	0
35021-00	Repair defect of artery	R26C	Covered	2002.93	2002.93	0 090	2	1	2	1	0
35022-00	Repair artery rupture chest	R26C	Covered	2282.84	2282.84	0 090	2	1	2	1	0
35045-00	Repair defect of arm artery	R26C	Covered	1510.43	1510.43	0 090	2	1	2	1	0
35081-00	Repair defect of artery	R26C	Covered	2647.02	2647.02	0 090	2	0	2	1	0
35082-00	Repair artery rupture aorta	R26C	Covered	3300.77	3300.77	0 090	2	0	2	1	0
35091-00	Repair defect of artery	R26C	Covered	2702.15	2702.15	0 090	2	1	2	1	0
35092-00	Repair artery rupture aorta	R26C	Covered	3951.95	3951.95	0 090	2	1	2	1	0
35102-00	Repair defect of artery	R26C	Covered	2876.23	2876.23	0 090	2	1	2	1	0
35103-00	Repair artery rupture aorta	R26C	Covered	3370.71	3370.71	0 090	2	1	2	1	0

35111-00	Repair defect of artery	R26C	Covered	2023.34	2023.34	0 090	2	0	2	1	0
35112-00	Repair artery rupture spleen	R26C	Covered	2481.56	2481.56	0 090	2	1	2	1	0
35121-00	Repair defect of artery	R26C	Covered	2399.70	2399.70	0 090	2	1	2	0	0
35122-00	Repair artery rupture belly	R26C	Covered	2864.95	2864.95	0 090	2	1	2	1	0
35131-00	Repair defect of artery	R26C	Covered	2121.88	2121.88	0 090	2	1	2	1	0
35132-00	Repair artery rupture groin	R26C	Covered	2481.56	2481.56	0 090	2	1	2	1	0
35141-00	Repair defect of artery	R26C	Covered	1676.97	1676.97	0 090	2	1	2	1	0
35142-00	Repair artery rupture thigh	R26C	Covered	2026.35	2026.35	0 090	2	1	2	1	0
35151-00	Repair defect of artery	R26C	Covered	1905.53	1905.53	0 090	2	1	2	1	0
35152-00	Repair ruptd popliteal art	R26C	Covered	2128.13	2128.13	0 090	2	1	2	1	0
35180-00	Repair blood vessel lesion	R26C	Covered	1207.74	1207.74	0 090	2	0	2	1	0
35182-00	Repair blood vessel lesion	R26C	Covered	2828.39	2828.39	0 090	2	0	2	1	0
35184-00	Repair blood vessel lesion	R26C	Covered	1476.99	1476.99	0 090	2	0	2	1	0
35188-00	Repair blood vessel lesion	R26C	Covered	2010.31	2010.31	0 090	2	0	2	1	0
35189-00	Repair blood vessel lesion	R26C	Covered	2295.30	2295.30	0 090	2	0	2	1	0
35190-00	Repair blood vessel lesion	R26C	Covered	1189.68	1189.68	0 090	2	0	2	1	0
35201-00	Repair blood vessel lesion	R26C	Covered	1474.09	1474.09	0 090	2	1	2	1	0
35206-00	Repair blood vessel lesion	R26C	Covered	1265.14	1265.14	0 090	2	1	2	1	0
35207-00	Repair blood vessel lesion	R26C	Covered	1304.07	1304.07	0 090	2	1	1	1	0
35211-00	Repair blood vessel lesion	R26C	Covered	2206.82	2206.82	0 090	2	1	2	1	0
35216-00	Repair blood vessel lesion	R26C	Covered	3358.34	3358.34	0 090	2	1	2	1	0
35221-00	Repair blood vessel lesion	R26C	Covered	2319.40	2319.40	0 090	2	1	2	1	0
35226-00	Repair blood vessel lesion	R26C	Covered	1292.20	1292.20	0 090	2	1	2	1	0
35231-00	Repair blood vessel lesion	R26C	Covered	2080.54	2080.54	0 090	2	1	2	1	0
35236-00	Repair blood vessel lesion	R26C	Covered	1579.03	1579.03	0 090	2	1	2	1	0
35241-00	Repair blood vessel lesion	R26C	Covered	2273.47	2273.47	0 090	2	1	2	1	0
35246-00	Repair blood vessel lesion	R26C	Covered	2465.17	2465.17	0 090	2	1	2	1	0
35251-00	Repair blood vessel lesion	R26C	Covered	2719.64	2719.64	0 090	2	1	2	1	0
35256-00	Repair blood vessel lesion	R26C	Covered	1569.55	1569.55	0 090	2	1	2	1	0
35261-00	Repair blood vessel lesion	R26C	Covered	1506.33	1506.33	0 090	2	1	2	1	0
35266-00	Repair blood vessel lesion	R26C	Covered	1354.73	1354.73	0 090	2	1	2	1	0
35271-00	Repair blood vessel lesion	R26C	Covered	2196.19	2196.19	0 090	2	1	2	1	0
35276-00	Repair blood vessel lesion	R26C	Covered	2312.87	2312.87	0 090	2	1	2	1	0
35281-00	Repair blood vessel lesion	R26C	Covered	2510.01	2510.01	0 090	2	1	2	1	0
35286-00	Repair blood vessel lesion	R26C	Covered	1437.38	1437.38	0 090	2	1	2	1	0
35301-00	Rechanneling of artery	R26C	Covered	1737.54	1737.54	0 090	2	1	2	1	0
35302-00	Rechanneling of artery	R26C	Covered	1717.07	1717.07	0 090	2	1	2	1	0
35303-00	Rechanneling of artery	R26C	Covered	1877.25	1877.25	0 090	2	1	2	1	0
35304-00	Rechanneling of artery	R26C	Covered	1952.24	1952.24	0 090	2	1	2	1	0
35305-00	Rechanneling of artery	R26C	Covered	1879.29	1879.29	0 090	2	1	2	1	0
35306-00	Rechanneling of artery	R26C	Covered	665.49	665.49	0 ZZZ	0	0	2	1	0
35311-00	Rechanneling of artery	R26C	Covered	2436.99	2436.99	0 090	2	1	2	1	0
35321-00	Rechanneling of artery	R26C	Covered	1394.48	1394.48	0 090	2	1	2	1	0
35331-00	Rechanneling of artery	R26C	Covered	2232.87	2232.87	0 090	2	1	2	1	0
35341-00	Rechanneling of artery	R26C	Covered	2136.52	2136.52	0 090	2	1	2	1	0
35351-00	Rechanneling of artery	R26C	Covered	1971.56	1971.56	0 090	2	1	2	1	0
35355-00	Rechanneling of artery	R26C	Covered	1575.61	1575.61	0 090	2	1	2	1	0
35361-00	Rechanneling of artery	R26C	Covered	2314.02	2314.02	0 090	2	1	2	1	0
35363-00	Rechanneling of artery	R26C	Covered	2465.36	2465.36	0 090	2	1	2	1	0
35371-00	Rechanneling of artery	R26C	Covered	1256.92	1256.92	0 090	2	1	2	1	0
35372-00	Rechanneling of artery	R26C	Covered	1501.52	1501.52	0 090	2	1	2	1	0
35390-00	Reoperation carotid add-on	R26C	Covered	240.25	240.25	0 ZZZ	0	0	2	1	0
35400-00	Angioscopy	R26C	Covered	222.69	222.69	0 ZZZ	0	0	0	1	0
35500-00	Harvest vein for bypass	R26C	Covered	480.36	480.36	0 ZZZ	0	0	2	1	0

35501-00	Art byp grft ipsilat carotid	R26C	Covered	2214.30	2214.30	0 090	2	1	2	1	0
35506-00	Art byp grft subclav-carotid	R26C	Covered	1935.97	1935.97	0 090	2	1	2	1	0
35508-00	Art byp grft carotid-vertbrl	R26C	Covered	2027.73	2027.73	0 090	2	1	2	1	0
35509-00	Art byp grft contral carotid	R26C	Covered	2143.79	2143.79	0 090	2	1	2	1	0
35510-00	Art byp grft carotid-brchial	R26C	Covered	1870.04	1870.04	0 090	2	1	2	1	0
35511-00	Art byp grft subclav-subclav	R26C	Covered	1704.58	1704.58	0 090	2	1	2	1	0
35512-00	Art byp grft subclav-brchial	R26C	Covered	1833.91	1833.91	0 090	2	1	2	1	0
35515-00	Art byp grft subclav-vertbrl	R26C	Covered	2027.73	2027.73	0 090	2	1	2	1	0
35516-00	Art byp grft subclav-axillary	R26C	Covered	1855.63	1855.63	0 090	2	1	2	1	0
35518-00	Art byp grft axillary-axilry	R26C	Covered	1736.98	1736.98	0 090	2	1	2	1	0
35521-00	Art byp grft axill-femoral	R26C	Covered	1873.95	1873.95	0 090	2	1	2	1	0
35522-00	Art byp grft axill-brachial	R26C	Covered	1780.22	1780.22	0 090	2	1	2	1	0
35523-00	Art byp grft brchl-ulnr-rdl	R26C	Covered	1877.19	1877.19	0 090	2	1	2	1	0
35525-00	Art byp grft brachial-brchl	R26C	Covered	1739.45	1739.45	0 090	2	1	2	1	0
35526-00	Art byp grft aor/carot/innom	R26C	Covered	2719.14	2719.14	0 090	2	1	2	1	0
35531-00	Art byp grft aorcel/aormesen	R26C	Covered	2952.85	2952.85	0 090	2	1	2	1	0
35533-00	Art byp grft axill/fem/fem	R26C	Covered	2290.96	2290.96	0 090	2	1	2	1	0
35535-00	Art byp grft hepato renal	R26C	Covered	2883.05	2883.05	0 090	2	1	2	1	0
35536-00	Art byp grft splenorenal	R26C	Covered	2565.02	2565.02	0 090	2	1	2	1	0
35537-00	Art byp grft aortoiliac	R26C	Covered	3154.26	3154.26	0 090	2	0	2	1	0
35538-00	Art byp grft aortobi-iliac	R26C	Covered	3531.43	3531.43	0 090	2	0	2	1	0
35539-00	Art byp grft aortofemoral	R26C	Covered	3314.98	3314.98	0 090	2	1	2	1	0
35540-00	Art byp grft aortobifemoral	R26C	Covered	3690.12	3690.12	0 090	2	1	2	1	0
35556-00	Art byp grft fem-popliteal	R26C	Covered	2134.43	2134.43	0 090	2	1	2	1	0
35558-00	Art byp grft fem-femoral	R26C	Covered	1914.05	1914.05	0 090	2	1	2	1	0
35560-00	Art byp grft aortorenal	R26C	Covered	2586.92	2586.92	0 090	2	1	2	1	0
35563-00	Art byp grft ilioliac	R26C	Covered	2017.31	2017.31	0 090	2	1	2	1	0
35565-00	Art byp grft iliofemoral	R26C	Covered	2015.78	2015.78	0 090	2	1	2	1	0
35566-00	Art byp fem-ant-post tib/prl	R26C	Covered	2535.12	2535.12	0 090	2	1	2	1	0
35570-00	Art byp tibial-tib/peroneal	R26C	Covered	2242.62	2242.62	0 090	2	1	2	1	0
35571-00	Art byp pop-tib-prl-other	R26C	Covered	2025.32	2025.32	0 090	2	1	2	1	0
35572-00	Harvest femoropopliteal vein	R26C	Covered	520.74	520.74	0 ZZZ	0	0	2	0	0
35583-00	Vein byp grft fem-popliteal	R26C	Covered	2205.58	2205.58	0 090	2	1	2	1	0
35585-00	Vein byp fem-tibial peroneal	R26C	Covered	2549.45	2549.45	0 090	2	1	2	1	0
35587-00	Vein byp pop-tib peroneal	R26C	Covered	2031.93	2031.93	0 090	2	1	2	1	0
35600-00	Open hrv uxtr art 1 sgm cab	R26C	Covered	286.28	286.28	0 ZZZ	0	0	2	1	0
35601-00	Art byp common ipsi carotid	R26C	Covered	2141.43	2141.43	0 090	2	1	2	1	0
35606-00	Art byp carotid-subclavian	R26C	Covered	1806.60	1806.60	0 090	2	1	2	1	0
35612-00	Art byp subclav-subclavian	R26C	Covered	1600.97	1600.97	0 090	2	1	2	1	0
35616-00	Art byp subclav-axillary	R26C	Covered	1677.14	1677.14	0 090	2	1	2	1	0
35621-00	Art byp axillary-femoral	R26C	Covered	1682.37	1682.37	0 090	2	1	2	1	0
35623-00	Art byp axillary-pop-tibial	R26C	Covered	2002.93	2002.93	0 090	2	1	2	1	0
35626-00	Art byp aorsubcl/carot/innom	R26C	Covered	2470.73	2470.73	0 090	2	1	2	1	0
35631-00	Art byp aor-celiac-msn-renal	R26C	Covered	2833.90	2833.90	0 090	2	1	2	1	0
35632-00	Art byp ilio-celiac	R26C	Covered	2739.04	2739.04	0 090	2	1	2	1	0
35633-00	Art byp ilio-mesenteric	R26C	Covered	3014.20	3014.20	0 090	2	1	2	1	0
35634-00	Art byp iliorenal	R26C	Covered	2681.07	2681.07	0 090	2	1	2	1	0
35636-00	Art byp sphenorenal	R26C	Covered	2422.37	2422.37	0 090	2	1	2	1	0
35637-00	Art byp aortoiliac	R26C	Covered	2517.77	2517.77	0 090	2	0	2	1	0
35638-00	Art byp aortobi-iliac	R26C	Covered	2651.92	2651.92	0 090	2	0	2	1	0
35642-00	Art byp carotid-vertebral	R26C	Covered	1521.89	1521.89	0 090	2	1	2	1	0
35645-00	Art byp subclav-vertebrl	R26C	Covered	1451.56	1451.56	0 090	2	1	2	1	0
35646-00	Art byp aortobifemoral	R26C	Covered	2607.66	2607.66	0 090	2	0	2	1	0
35647-00	Art byp aortofemoral	R26C	Covered	2375.41	2375.41	0 090	2	1	2	1	0

35650-00	Art byp axillary-axillary	R26C	Covered	1557.45	1557.45	0 090	2	1	2	1	0
35654-00	Art byp axill-fem-femoral	R26C	Covered	2087.88	2087.88	0 090	2	0	2	1	0
35656-00	Art byp femoral-popliteal	R26C	Covered	1646.47	1646.47	0 090	2	1	2	1	0
35661-00	Art byp femoral-femoral	R26C	Covered	1669.39	1669.39	0 090	2	1	2	1	0
35663-00	Art byp ilioiliac	R26C	Covered	1859.67	1859.67	0 090	2	1	2	1	0
35665-00	Art byp iliofemoral	R26C	Covered	1807.90	1807.90	0 090	2	1	2	1	0
35666-00	Art byp fem-ant-post tib/prl	R26C	Covered	1994.19	1994.19	0 090	2	1	2	1	0
35671-00	Art byp pop-tibl-prl-other	R26C	Covered	1757.53	1757.53	0 090	2	1	2	1	0
35681-00	Composite byp grft pros&vein	R26C	Covered	120.48	120.48	0 ZZZ	0	0	2	1	0
35682-00	Composite byp grft 2 veins	R26C	Covered	530.77	530.77	0 ZZZ	0	0	0	1	0
35683-00	Composite byp grft 3/> segmt	R26C	Covered	611.34	611.34	0 ZZZ	0	0	0	1	0
35685-00	Bypass graft patency/patch	R26C	Covered	296.28	296.28	0 ZZZ	0	0	2	1	0
35686-00	Bypass graft/av fist patency	R26C	Covered	240.50	240.50	0 ZZZ	0	0	2	1	0
35691-00	Art trnsposj vertbrl carotid	R26C	Covered	1449.65	1449.65	0 090	2	1	2	1	0
35693-00	Art trnsposj subclavian	R26C	Covered	1296.59	1296.59	0 090	2	1	2	1	0
35694-00	Art trnsposj subclav carotid	R26C	Covered	1512.62	1512.62	0 090	2	1	2	1	0
35695-00	Art trnsposj carotid subclav	R26C	Covered	1568.69	1568.69	0 090	2	1	2	1	0
35697-00	Reimplant artery each	R26C	Covered	220.11	220.11	0 ZZZ	0	0	2	2	0
35700-00	Reoperation bypass graft	R26C	Covered	228.30	228.30	0 ZZZ	0	0	2	1	0
35701-00	Expl n/flwd surg neck art	R26C	Covered	734.88	734.88	0 090	2	1	2	1	0
35702-00	Expl n/flwd surg uxtr art	R26C	Covered	654.71	654.71	0 090	2	1	2	1	0
35703-00	Expl n/flwd surg lxtr art	R26C	Covered	655.09	655.09	0 090	2	1	2	1	0
35800-00	Explore neck vessels	R26C	Covered	1226.78	1226.78	0 090	2	0	2	1	0
35820-00	Explore chest vessels	R26C	Covered	3157.50	3157.50	0 090	2	0	2	1	0
35840-00	Explore abdominal vessels	R26C	Covered	1958.24	1958.24	0 090	2	0	2	1	0
35860-00	Explore limb vessels	R26C	Covered	1321.50	1321.50	0 090	2	0	2	1	0
35870-00	Repair vessel graft defect	R26C	Covered	1904.63	1904.63	0 090	2	0	2	1	0
35875-00	Removal of clot in graft	R26C	Covered	922.76	922.76	0 090	2	0	1	1	0
35876-00	Removal of clot in graft	R26C	Covered	1453.65	1453.65	0 090	2	0	2	1	0
35879-00	Revise graft w/vein	R26C	Covered	1417.54	1417.54	0 090	2	1	2	1	0
35881-00	Revise graft w/vein	R26C	Covered	1588.67	1588.67	0 090	2	1	2	1	0
35883-00	Revj fem anast nonautog grf	R26C	Covered	1829.29	1829.29	0 090	2	1	2	1	0
35884-00	Revj fem anast autog vn grf	R26C	Covered	1882.89	1882.89	0 090	2	1	2	1	0
35901-00	Excision graft neck	R26C	Covered	752.63	752.63	0 090	2	0	2	1	0
35903-00	Excision graft extremity	R26C	Covered	897.58	897.58	0 090	2	0	2	1	0
35905-00	Excision graft thorax	R26C	Covered	2550.13	2550.13	0 090	2	0	2	1	0
35907-00	Excision graft abdomen	R26C	Covered	2911.84	2911.84	0 090	2	0	2	1	0
36000-00	Place needle in vein	RCMS	Covered	58.25	15.56	9 XXX	9	9	9	9	9
36002-00	Pseudoaneurysm injection trt	R26C	Covered	270.65	171.69	0 000	2	1	1	0	0
36005-00	Injection ext venography	R26C	Covered	470.51	76.61	0 000	2	1	0	0	0
36010-00	Place catheter in vein	R26C	Covered	995.92	172.55	0 XXX	2	1	1	0	0
36011-00	Place catheter in vein	R26C	Covered	1477.84	250.86	0 XXX	2	1	1	0	0
36012-00	Place catheter in vein	R26C	Covered	1540.67	280.06	0 XXX	2	1	1	0	0
36013-00	Place catheter in artery	R26C	Covered	1456.18	206.56	0 XXX	2	0	1	0	0
36014-00	Place catheter in artery	R26C	Covered	1453.54	244.68	0 XXX	2	1	1	0	0
36015-00	Place catheter in artery	R26C	Covered	1564.64	282.68	0 XXX	2	1	1	0	0
36100-00	Establish access to artery	R26C	Covered	967.03	232.27	0 XXX	2	1	1	0	0
36140-00	Intro ndl icath upr/lxtr art	R26C	Covered	947.57	139.71	0 XXX	2	0	1	0	0
36160-00	Establish access to aorta	R26C	Covered	1022.17	201.38	0 XXX	2	0	1	0	0
36200-00	Place catheter in aorta	R26C	Covered	1082.57	215.86	0 000	2	1	1	0	0
36215-00	Place catheter in artery	R26C	Covered	1921.79	349.42	0 000	2	0	1	0	0
36216-00	Place catheter in artery	R26C	Covered	1948.91	429.58	0 000	2	0	1	0	0
36217-00	Place catheter in artery	R26C	Covered	3346.35	520.48	0 000	2	0	1	0	0
36218-00	Place catheter in artery	R26C	Covered	385.78	83.07	0 ZZZ	0	0	1	0	0

36221-00	Place cath thoracic aorta	R26C	Covered	1815.42	310.32	0 000	2	2	1	0	0
36222-00	Place cath carotid/inom art	R26C	Covered	2262.91	446.05	0 000	2	1	1	0	0
36223-00	Place cath carotid/inom art	R26C	Covered	3089.29	508.56	0 000	2	1	1	0	0
36224-00	Place cath carotid art	R26C	Covered	3824.67	568.03	0 000	2	1	1	0	0
36225-00	Place cath subclavian art	R26C	Covered	2928.84	503.99	0 000	2	1	1	0	0
36226-00	Place cath vertebral art	R26C	Covered	3724.92	565.31	0 000	2	1	1	0	0
36227-00	Place cath xtrnl carotid	R26C	Covered	424.94	185.62	0 ZZZ	0	1	1	0	0
36228-00	Place cath intracranial art	R26C	Covered	2392.69	379.20	0 ZZZ	0	1	1	0	0
36245-00	Ins cath abd/l-ext art 1st	R26C	Covered	2292.91	377.09	0 XXX	2	1	1	0	0
36246-00	Ins cath abd/l-ext art 2nd	R26C	Covered	1507.89	395.39	0 000	2	1	1	0	0
36247-00	Ins cath abd/l-ext art 3rd	R26C	Covered	2615.71	476.74	0 000	2	1	1	0	0
36248-00	Ins cath abd/l-ext art addl	R26C	Covered	210.72	79.42	0 ZZZ	0	0	1	0	0
36251-00	Ins cath ren art 1st unilat	R26C	Covered	2371.78	407.45	0 000	2	0	1	0	0
36252-00	Ins cath ren art 1st bilat	R26C	Covered	2538.83	558.97	0 000	2	2	1	0	0
36253-00	Ins cath ren art 2nd+ unilat	R26C	Covered	3736.17	584.31	0 000	2	0	1	0	0
36254-00	Ins cath ren art 2nd+ bilat	R26C	Covered	3628.48	652.55	0 000	2	2	1	0	0
36260-00	Insertion of infusion pump	R26C	Covered	1088.44	1088.44	0 090	2	0	1	0	0
36261-00	Revision of infusion pump	R26C	Covered	697.05	697.05	0 090	2	0	2	0	0
36262-00	Removal of infusion pump	R26C	Covered	536.85	536.85	0 090	2	0	1	0	0
78282-26	Gi protein loss exam	RCMS	Covered	27.02	27.02	1 XXX	0	0	0	0	0
36400-00	Bl draw < 3 yrs fem/jugular	R26C	Covered	49.76	32.29	0 XXX	2	0	1	0	0
36405-00	Bl draw <3 yrs scalp vein	R26C	Covered	44.16	26.05	0 XXX	2	0	1	0	0
36406-00	Bl draw <3 yrs other vein	R26C	Covered	32.98	15.52	0 XXX	2	0	1	0	0
36410-00	Non-routine bl draw 3/> yrs	R26C	Covered	32.38	15.56	0 XXX	2	0	1	0	0
36415-00	Routine venipuncture	LCMS	Covered	8.83	8.83	9 XXX	9	9	9	9	9
36416-00	Collj capillary blood spec	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
36420-00	Venipuncture cutdown < 1 yr	R26C	Covered	74.07	74.07	0 XXX	2	0	0	0	0
36425-00	Venipuncture cutdown 1 yr/>	R26C	Covered	66.11	66.11	0 XXX	2	0	1	0	0
36430-00	Transfusion bld/bld compnt	R26C	Covered	80.34	80.34	5 XXX	0	0	1	0	0
36440-00	Bld push tfuj 2 yr/<	R26C	Covered	87.51	87.51	0 XXX	2	0	0	0	0
0248U-00	Culture of brain cancer cells with 12 drug panel	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0172U-00	DNA gene analysis (BRCA1, DNA repair associated	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0018U-00	MicroRNA gene analysis of thyroid nodule tissue	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
36460-00	Intrauterine transfusion ftl	R26C	Covered	568.90	568.90	0 XXX	2	0	2	0	0
36465-00	Njx noncmpnd sclrsnt 1 vein	R26C	Covered	2435.32	188.98	0 000	2	1	1	0	0
36466-00	Njx noncmpnd sclrsnt mlt vn	R26C	Covered	2562.76	240.74	0 000	2	1	1	0	0
0048U-00	DNA gene analysis of 468 genes in solid organ tumor	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
36470-00	Njx sclrsnt 1 incmptnt vein	R26C	Covered	211.87	60.52	0 000	2	1	1	0	0
36471-00	Njx sclrsnt mlt incmptnt vn	R26C	Covered	363.59	120.40	0 000	2	1	1	0	0
36473-00	Endovenous mchnchem 1st vein	R26C	Covered	2247.17	286.07	0 000	2	1	1	0	0
36474-00	Endovenous mchnchem add-on	R26C	Covered	455.94	140.95	0 ZZZ	0	1	1	0	0
36475-00	Endovenous rf 1st vein	R26C	Covered	1961.37	437.51	0 000	2	1	1	0	0
36476-00	Endovenous rf vein add-on	R26C	Covered	496.16	208.33	0 ZZZ	0	1	1	0	0
36478-00	Endovenous laser 1st vein	R26C	Covered	1787.10	441.10	0 000	2	1	1	0	0
36479-00	Endovenous laser vein addon	R26C	Covered	537.51	214.11	0 ZZZ	0	1	1	0	0
36481-00	Insertion of catheter vein	R26C	Covered	3212.53	541.89	0 000	2	0	1	0	0
36482-00	Endoven ther chem adhes 1st	R26C	Covered	3129.96	283.39	0 000	2	1	1	0	0
36483-00	Endoven ther chem adhes sbsq	R26C	Covered	234.33	137.31	0 ZZZ	0	1	1	0	0
36500-00	Insertion of catheter vein	R26C	Covered	290.88	290.88	0 000	2	0	1	0	0
0250U-00	Gene analysis of 505 genes associated with solid organ cancer in tumor tissue	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
36511-00	Apheresis wbc	R26C	Covered	196.55	196.55	0 000	2	0	1	0	0
36512-00	Apheresis rbc	R26C	Covered	186.81	186.81	0 000	2	0	1	0	0
36513-00	Apheresis platelets	R26C	Covered	183.25	183.25	0 000	2	0	1	0	0

36514-00	Apheresis plasma	R26C	Covered	1273.66	161.82	0 000	2	0	1	0	0
36516-00	Apheresis immunoads slctv	R26C	Covered	3420.18	139.61	0 000	2	0	1	0	0
36522-00	Photopheresis	R26C	Covered	2567.36	168.38	0 000	2	0	1	0	0
36555-00	Insert non-tunnel cv cath	R26C	Covered	345.09	143.28	0 000	0	0	1	0	0
36556-00	Insert non-tunnel cv cath	R26C	Covered	390.10	140.44	0 000	0	0	1	0	0
36557-00	Insert tunneled cv cath	R26C	Covered	2114.14	526.89	0 010	2	1	0	0	0
36558-00	Insert tunneled cv cath	R26C	Covered	1515.44	437.23	0 010	2	1	0	0	0
36560-00	Insert tunneled cv cath	R26C	Covered	2239.78	625.37	0 010	2	1	0	0	0
36561-00	Insert tunneled cv cath	R26C	Covered	1778.75	554.36	0 010	2	1	0	0	0
36563-00	Insert tunneled cv cath	R26C	Covered	1992.69	596.25	0 010	2	0	0	0	0
36565-00	Insert tunneled cv cath	R26C	Covered	1486.47	547.96	0 010	2	1	0	0	0
36566-00	Insert tunneled cv cath	R26C	Covered	7926.68	590.68	0 010	2	1	0	0	0
36568-00	Insj picc <5 yr w/o imaging	R26C	Covered	151.41	151.41	0 000	0	0	1	0	0
36569-00	Insj picc 5 yr+ w/o imaging	R26C	Covered	155.66	155.66	0 000	0	0	1	0	0
36570-00	Insert picvad cath	R26C	Covered	2672.40	545.72	0 010	2	1	0	0	0
36571-00	Insert picvad cath	R26C	Covered	2304.57	517.46	0 010	2	1	0	0	0
36572-00	Insj picc rs&i <5 yr	R26C	Covered	691.88	133.05	0 000	0	0	1	0	0
36573-00	Insj picc rs&i 5 yr+	R26C	Covered	711.47	140.99	0 000	0	0	1	0	0
36575-00	Repair tunneled cv cath	R26C	Covered	270.02	56.58	0 000	2	0	0	0	0
36576-00	Repair tunneled cv cath	R26C	Covered	615.19	305.37	0 010	2	0	0	0	0
36578-00	Replace tunneled cv cath	R26C	Covered	771.61	338.26	0 010	2	0	0	0	0
36580-00	Replace cvad cath	R26C	Covered	345.61	108.23	0 000	0	0	1	0	0
36581-00	Replace tunneled cv cath	R26C	Covered	1436.27	310.19	0 010	2	0	0	0	0
36582-00	Replace tunneled cv cath	R26C	Covered	1592.53	477.45	0 010	2	0	0	0	0
36583-00	Replace tunneled cv cath	R26C	Covered	2093.69	539.43	0 010	2	0	0	0	0
36584-00	Compl rplcmt picc rs&i	R26C	Covered	607.11	98.73	0 000	0	0	1	0	0
36585-00	Replace picvad cath	R26C	Covered	2110.09	474.33	0 010	2	0	0	0	0
36589-00	Removal tunneled cv cath	R26C	Covered	288.30	231.38	0 010	2	0	0	0	0
36590-00	Removal tunneled cv cath	R26C	Covered	385.00	319.03	0 010	2	0	0	0	0
36591-00	Draw blood off venous device	R26C	Covered	53.08	53.08	3 XXX	0	0	0	0	0
36592-00	Collect blood from picc	R26C	Covered	57.61	57.61	3 XXX	0	0	0	0	0
36593-00	Declot vascular device	R26C	Covered	66.07	66.07	3 XXX	0	0	0	0	0
36595-00	Mech remov tunneled cv cath	R26C	Covered	1091.42	302.97	0 000	2	0	1	0	0
36596-00	Mech remov tunneled cv cath	R26C	Covered	212.98	76.50	0 000	2	0	1	0	0
36597-00	Reposition venous catheter	R26C	Covered	199.08	100.12	0 000	2	0	1	0	0
36598-00	Inj w/fluor eval cv device	R26C	Covered	222.53	60.18	9 000	2	1	0	0	0
36600-00	Withdrawal of arterial blood	R26C	Covered	50.59	26.01	0 XXX	2	0	1	0	0
36620-00	Insertion catheter artery	R26C	Covered	74.79	74.79	0 000	0	0	1	0	0
36625-00	Insertion catheter artery	R26C	Covered	172.49	172.49	0 000	0	0	1	0	0
36640-00	Insertion catheter artery	R26C	Covered	208.59	208.59	0 000	2	0	1	0	0
0297U-00	Whole genome sequencing of paired tumor and normal DNA specimens, in tissue,	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
36680-00	Insert needle bone cavity	R26C	Covered	96.61	96.61	0 000	2	0	0	0	0
36800-00	Insertion of cannula	R26C	Covered	203.39	203.39	0 000	2	0	1	0	0
36810-00	Insertion of cannula	R26C	Covered	360.34	360.34	0 000	2	0	1	0	0
36815-00	Insertion of cannula	R26C	Covered	208.18	208.18	0 000	2	0	1	0	0
36818-00	Av fuse uppr arm cephalic	R26C	Covered	1079.19	1079.19	0 090	2	0	2	1	0
36819-00	Av fuse uppr arm basilic	R26C	Covered	1137.05	1137.05	0 090	2	0	2	1	0
36820-00	Av fusion/forearm vein	R26C	Covered	1135.60	1135.60	0 090	2	1	2	1	0
36821-00	Av fusion direct any site	R26C	Covered	1032.02	1032.02	0 090	2	0	2	1	0
36823-00	Insertion of cannula(s)	R26C	Covered	2276.49	2276.49	0 090	2	0	1	0	0
36825-00	Artery-vein autograft	R26C	Covered	1241.38	1241.38	0 090	2	0	2	1	0
36830-00	Artery-vein nonautograft	R26C	Covered	1041.41	1041.41	0 090	2	0	2	1	0
36831-00	Open thrombect av fistula	R26C	Covered	966.68	966.68	0 090	2	0	2	1	0

36832-00	Av fistula revision open	R26C	Covered	1184.89	1184.89	0 090	2	0	2	1	0
36833-00	Av fistula revision	R26C	Covered	1261.12	1261.12	0 090	2	0	2	1	0
36835-00	Artery to vein shunt	R26C	Covered	792.41	792.41	0 090	2	0	1	0	0
36836-00	Prq av fstl crtj uxtr 1 acs	R26C	Covered	15468.18	584.02	0 000	2	0	2	1	0
36837-00	Prq av fstl crt uxtr sep acs	R26C	Covered	18398.16	751.52	0 000	2	0	2	1	0
36838-00	Dist revas ligation hemo	R26C	Covered	1751.88	1751.88	0 090	2	1	2	1	0
36860-00	External cannula declotting	R26C	Covered	412.40	172.43	0 000	2	0	1	0	0
36861-00	Cannula declotting	R26C	Covered	216.33	216.33	0 000	2	0	1	0	0
36901-00	Intro cath dialysis circuit	R26C	Covered	1301.01	273.24	0 000	2	0	1	0	0
36902-00	Intro cath dialysis circuit	R26C	Covered	2236.07	390.10	0 000	2	0	1	0	0
36903-00	Intro cath dialysis circuit	R26C	Covered	7966.62	507.72	0 000	2	0	1	0	0
36904-00	Thrmbc/nfs dialysis circuit	R26C	Covered	3341.97	596.95	0 000	2	0	1	1	0
36905-00	Thrmbc/nfs dialysis circuit	R26C	Covered	4214.40	722.97	0 000	2	0	1	1	0
36906-00	Thrmbc/nfs dialysis circuit	R26C	Covered	10118.65	829.95	0 000	2	0	1	1	0
36907-00	Balo angiop ctr dialysis seg	R26C	Covered	1082.22	236.20	0 ZZZ	0	0	1	0	0
36908-00	Stent plmt ctr dialysis seg	R26C	Covered	2627.01	330.87	0 ZZZ	0	0	1	0	0
36909-00	Dialysis circuit embolj	R26C	Covered	3536.08	322.13	0 ZZZ	0	0	1	0	0
37140-00	Revision of circulation	R26C	Covered	3706.83	3706.83	0 090	2	0	1	1	0
37145-00	Revision of circulation	R26C	Covered	3441.96	3441.96	0 090	2	0	2	0	0
37160-00	Revision of circulation	R26C	Covered	3535.61	3535.61	0 090	2	0	2	1	0
37180-00	Revision of circulation	R26C	Covered	3398.67	3398.67	0 090	2	0	2	1	0
37181-00	Splice spleen/kidney veins	R26C	Covered	3706.83	3706.83	0 090	2	0	2	1	0
37182-00	Insert hepatic shunt (tips)	R26C	Covered	1356.66	1356.66	0 000	2	0	0	0	0
37183-00	Revision tips	R26C	Covered	10929.73	623.62	0 000	2	0	0	0	0
37184-00	Prim art m-thrmbc 1st vsl	R26C	Covered	3123.22	684.78	0 000	2	1	1	2	0
37185-00	Prim art m-thrmbc sbsq vsl	R26C	Covered	851.71	256.01	0 ZZZ	0	2	1	2	0
37186-00	Sec art thrombectomy add-on	R26C	Covered	2173.05	379.47	0 ZZZ	0	2	1	2	0
37187-00	Venous mech thrombectomy	R26C	Covered	3106.15	634.08	0 000	2	1	1	2	0
37188-00	Ven mechnl thrmbc repeat tx	R26C	Covered	2672.67	450.26	0 000	0	1	1	2	0
37191-00	Ins endovas vena cava filtr	R26C	Covered	3773.88	360.07	0 000	2	0	1	0	0
37192-00	Redo endovas vena cava filtr	R26C	Covered	2306.45	517.40	0 000	2	0	1	0	0
37193-00	Rem endovas vena cava filter	R26C	Covered	2754.66	561.36	0 000	2	0	1	0	0
74300-26	X-ray bile ducts/pancreas	RCMS	Covered	22.97	22.97	1 XXX	0	0	0	0	0
37197-00	Remove intrvas foreign body	R26C	Covered	2887.27	482.47	0 000	2	0	1	0	0
37200-00	Transcatheter biopsy	R26C	Covered	357.03	357.03	0 000	2	0	1	0	0
37211-00	Thrombolytic art therapy	R26C	Covered	611.21	611.21	0 000	2	1	1	0	0
37212-00	Thrombolytic venous therapy	R26C	Covered	538.48	538.48	0 000	2	1	1	0	0
37213-00	Thrombolytic art/ven therapy	R26C	Covered	367.55	367.55	0 000	2	0	1	0	0
37214-00	Cessj therapy cath removal	R26C	Covered	192.92	192.92	0 000	2	0	1	0	0
37215-00	Transcath stent cca w/eps	R26C	Covered	1534.42	1534.42	0 090	2	1	0	0	0
37216-00	Transcath stent cca w/o eps	RCMS	Covered	1707.50	1707.50	9 090	9	9	9	9	9
37217-00	Stent placemt retro carotid	R26C	Covered	1664.46	1664.46	0 090	2	1	0	0	0
37218-00	Stent placemt ante carotid	R26C	Covered	1301.31	1301.31	0 090	2	1	0	0	0
37220-00	Iliac revasc	R26C	Covered	4628.52	617.72	0 000	2	1	1	0	0
37221-00	Iliac revasc w/stent	R26C	Covered	5677.16	756.95	0 000	2	1	0	0	0
37222-00	Iliac revasc add-on	R26C	Covered	1112.76	284.86	0 ZZZ	0	1	0	0	0
37223-00	Iliac revasc w/stent add-on	R26C	Covered	2336.57	323.08	0 ZZZ	0	1	0	0	0
37224-00	Fem/popl revas w/tla	R26C	Covered	5384.44	683.49	0 000	2	1	0	0	0
37225-00	Fem/popl revas w/ather	R26C	Covered	16405.21	927.93	0 000	2	1	0	0	0
37226-00	Fem/popl revasc w/stent	R26C	Covered	15199.94	796.36	0 000	2	1	0	0	0
37227-00	Fem/popl revasc stnt & ather	R26C	Covered	20962.42	1107.60	0 000	2	1	0	0	0
37228-00	Tib/per revasc w/tla	R26C	Covered	7662.97	832.76	0 000	2	1	0	0	0
37229-00	Tib/per revasc w/ather	R26C	Covered	16672.63	1082.17	0 000	2	1	0	0	0
37230-00	Tib/per revasc w/stent	R26C	Covered	16690.58	1073.59	0 000	2	1	0	0	0

37231-00	Tib/per revasc stent & ather	R26C	Covered	22121.58	1162.67	0 000	2	1	0	0	0
37232-00	Tib/per revasc add-on	R26C	Covered	1496.60	309.72	0 ZZZ	0	1	0	0	0
37233-00	Tibper revasc w/ather add-on	R26C	Covered	1905.41	505.09	0 ZZZ	0	1	0	0	0
37234-00	Revasc opn/prq tib/pero stent	R26C	Covered	6807.85	436.87	0 ZZZ	0	1	0	0	0
37235-00	Tib/per revasc stnt & ather	R26C	Covered	7398.08	595.04	0 ZZZ	0	1	0	0	0
37236-00	Open/perq place stent 1st	R26C	Covered	5070.36	681.82	0 000	2	1	0	0	0
37237-00	Open/perq place stent ea add	R26C	Covered	2379.81	323.64	0 ZZZ	0	1	0	0	0
37238-00	Open/perq place stent same	R26C	Covered	6455.92	482.72	0 000	2	1	0	0	0
37239-00	Open/perq place stent ea add	R26C	Covered	3226.49	236.33	0 ZZZ	0	1	0	0	0
37241-00	Vasc embolize/occlude venous	R26C	Covered	8663.00	692.49	0 000	2	0	1	0	0
37242-00	Vasc embolize/occlude artery	R26C	Covered	13280.82	764.60	0 000	2	0	1	0	0
37243-00	Vasc embolize/occlude organ	R26C	Covered	16132.59	932.15	0 000	2	0	1	0	0
37244-00	Vasc embolize/occlude bleed	R26C	Covered	12271.75	1096.34	0 000	2	0	1	0	0
37246-00	Trluml balo angiop 1st art	R26C	Covered	3343.52	549.99	0 000	2	1	1	0	0
37247-00	Trluml balo angiop addl art	R26C	Covered	1067.12	272.20	0 ZZZ	0	1	1	0	0
37248-00	Trluml balo angiop 1st vein	R26C	Covered	2494.35	481.51	0 000	2	1	1	0	0
37249-00	Trluml balo angiop addl vein	R26C	Covered	798.12	230.88	0 ZZZ	0	1	1	0	0
37252-00	Intrvasc us noncoronary 1st	R26C	Covered	1773.33	139.51	0 ZZZ	0	0	0	1	0
37253-00	Intrvasc us noncoronary addl	R26C	Covered	309.35	111.43	0 ZZZ	0	0	0	1	0
37500-00	Endoscopy ligate perf veins	R26C	Covered	982.28	982.28	0 090	2	1	1	1	0
74301-26	X-rays at surgery add-on	RCMS	Covered	17.34	17.34	1 ZZZ	0	0	0	0	0
37565-00	Ligation of neck vein	R26C	Covered	1212.17	1212.17	0 090	2	1	0	1	0
37600-00	Ligation of neck artery	R26C	Covered	1269.42	1269.42	0 090	2	0	2	1	0
37605-00	Ligation of neck artery	R26C	Covered	1135.02	1135.02	0 090	2	0	2	1	0
37606-00	Ligation of neck artery	R26C	Covered	1193.09	1193.09	0 090	2	0	2	0	0
37607-00	Ligation of a-v fistula	R26C	Covered	601.68	601.68	0 090	2	0	1	1	0
37609-00	Temporal artery procedure	R26C	Covered	553.19	344.92	0 010	2	1	1	0	0
37615-00	Ligation of neck artery	R26C	Covered	876.53	876.53	0 090	2	0	2	1	0
37616-00	Ligation of chest artery	R26C	Covered	1815.14	1815.14	0 090	2	0	2	1	0
37617-00	Ligation of abdomen artery	R26C	Covered	2121.75	2121.75	0 090	2	0	2	1	0
37618-00	Ligation of extremity artery	R26C	Covered	648.82	648.82	0 090	2	0	2	1	0
37619-00	Ligation of inf vena cava	R26C	Covered	2751.10	2751.10	0 090	2	0	2	0	0
37650-00	Revision of major vein	R26C	Covered	717.41	717.41	0 090	2	1	1	1	0
37660-00	Revision of major vein	R26C	Covered	2112.70	2112.70	0 090	2	1	2	1	0
37700-00	Revise leg vein	R26C	Covered	397.71	397.71	0 090	2	1	1	0	0
37718-00	Ligate/strip short leg vein	R26C	Covered	617.58	617.58	0 090	2	1	1	1	0
37722-00	Ligate/strip long leg vein	R26C	Covered	728.03	728.03	0 090	2	1	1	1	0
37735-00	Removal of leg veins/lesion	R26C	Covered	905.53	905.53	0 090	2	1	1	1	0
37760-00	Ligate leg veins radical	R26C	Covered	896.80	896.80	0 090	2	1	1	1	0
37761-00	Ligate leg veins open	R26C	Covered	859.67	859.67	0 090	2	1	2	1	0
37765-00	Stab phleb veins xtr 10-20	R26C	Covered	727.65	432.06	0 010	2	1	1	1	0
37766-00	Phleb veins - extrem 20+	R26C	Covered	850.32	528.21	0 010	2	1	1	1	0
37780-00	Revision of leg vein	R26C	Covered	379.31	379.31	0 090	2	1	1	1	0
37785-00	Ligate/divide/excise vein	R26C	Covered	602.41	416.78	0 090	2	1	1	0	0
37788-00	Revascularization penis	R26C	Covered	2164.80	2164.80	0 090	2	0	2	1	0
37790-00	Penile venous occlusion	R26C	Covered	845.20	845.20	0 090	2	0	0	0	0
15877-00	Suction lipectomy trunk	NBYR	Covered	By Report	By Report	0 000	2	0	0	0	0
38100-00	Removal of spleen total	R26C	Covered	1870.12	1870.12	0 090	2	0	2	1	0
38101-00	Removal of spleen partial	R26C	Covered	1878.79	1878.79	0 090	2	0	2	1	0
38102-00	Removal of spleen total	R26C	Covered	418.61	418.61	0 ZZZ	0	0	2	1	0
38115-00	Repair of ruptured spleen	R26C	Covered	2078.91	2078.91	0 090	2	0	2	1	0
38120-00	Laparoscopy splenectomy	R26C	Covered	1735.57	1735.57	0 090	2	0	2	1	0
15878-00	Suction lipectomy upr extrem	NBYR	Covered	By Report	By Report	0 000	2	1	0	0	0
38200-00	Injection for spleen x-ray	R26C	Covered	222.39	222.39	0 000	2	0	0	0	0

38204-00	Bl donor search management	RCMS	Covered	173.00	173.00	9 XXX	9	9	9	9	9
38205-00	Harvest allogeneic stem cell	R26C	Covered	149.21	149.21	0 000	2	0	0	0	0
38206-00	Harvest auto stem cells	R26C	Covered	145.97	145.97	0 000	2	0	0	0	0
38207-00	Cryopreserve stem cells	RCMS	Covered	77.16	77.16	9 XXX	9	9	9	9	9
38208-00	Thaw preserved stem cells	RCMS	Covered	48.55	48.55	9 XXX	9	9	9	9	9
38209-00	Wash harvest stem cells	RCMS	Covered	20.50	20.50	9 XXX	9	9	9	9	9
38210-00	T-cell depletion of harvest	RCMS	Covered	135.63	135.63	9 XXX	9	9	9	9	9
38211-00	Tumor cell deplete of harvst	RCMS	Covered	122.59	122.59	9 XXX	9	9	9	9	9
38212-00	Rbc depletion of harvest	RCMS	Covered	80.89	80.89	9 XXX	9	9	9	9	9
38213-00	Platelet deplete of harvest	RCMS	Covered	20.50	20.50	9 XXX	9	9	9	9	9
38214-00	Volume deplete of harvest	RCMS	Covered	69.66	69.66	9 XXX	9	9	9	9	9
38215-00	Harvest stem cell concentrte	RCMS	Covered	80.89	80.89	9 XXX	9	9	9	9	9
38220-00	Dx bone marrow aspirations	R26C	Covered	294.61	118.04	0 XXX	2	1	0	0	0
38221-00	Dx bone marrow biopsies	R26C	Covered	304.65	123.55	0 XXX	2	1	0	0	0
38222-00	Dx bone marrow bx & aspir	R26C	Covered	327.40	130.78	0 XXX	2	1	0	0	0
38230-00	Bone marrow harvest allogeneic	R26C	Covered	333.24	333.24	0 000	2	0	0	0	0
38232-00	Bone marrow harvest autolog	R26C	Covered	318.62	318.62	0 000	2	0	0	0	0
38240-00	Transplt allo hct/donor	R26C	Covered	431.92	431.92	0 XXX	2	0	0	0	0
38241-00	Transplt autol hct/donor	R26C	Covered	318.46	318.46	0 XXX	2	0	0	0	0
38242-00	Transplt allo lymphocytes	R26C	Covered	225.28	225.28	0 000	2	0	0	0	0
38243-00	Transplj hematopoietic boost	R26C	Covered	220.67	220.67	0 000	2	0	0	0	0
38300-00	Drainage lymph node lesion	R26C	Covered	613.90	366.18	0 010	2	0	1	0	0
38305-00	Drainage lymph node lesion	R26C	Covered	841.00	841.00	0 090	2	0	1	0	0
38308-00	Incision of lymph channels	R26C	Covered	794.75	794.75	0 090	2	0	2	1	0
38380-00	Thoracic duct procedure	R26C	Covered	1008.12	1008.12	0 090	2	0	2	1	0
38381-00	Thoracic duct procedure	R26C	Covered	1302.14	1302.14	0 090	2	0	2	1	0
38382-00	Thoracic duct procedure	R26C	Covered	1122.80	1122.80	0 090	2	0	2	1	0
38500-00	Biopsy/removal lymph nodes	R26C	Covered	587.75	429.28	0 010	2	1	1	0	0
38505-00	Needle biopsy lymph nodes	R26C	Covered	321.19	147.84	0 000	2	1	1	0	0
38510-00	Biopsy/removal lymph nodes	R26C	Covered	925.41	710.03	0 010	2	1	1	0	0
38520-00	Biopsy/removal lymph nodes	R26C	Covered	796.46	796.46	0 090	2	1	1	0	0
38525-00	Biopsy/removal lymph nodes	R26C	Covered	741.20	741.20	0 090	2	1	1	0	0
38530-00	Biopsy/removal lymph nodes	R26C	Covered	967.21	967.21	0 090	2	1	2	1	0
38531-00	Open bx/exc inguinofem nodes	R26C	Covered	751.04	751.04	0 090	2	1	0	0	0
38542-00	Explore deep node(s) neck	R26C	Covered	908.23	908.23	0 090	2	1	2	1	0
38550-00	Removal neck/armpit lesion	R26C	Covered	887.01	887.01	0 090	2	0	0	0	0
38555-00	Removal neck/armpit lesion	R26C	Covered	1697.98	1697.98	0 090	2	0	2	1	0
38562-00	Removal pelvic lymph nodes	R26C	Covered	1214.52	1214.52	0 090	2	2	2	1	0
38564-00	Removal abdomen lymph nodes	R26C	Covered	1170.25	1170.25	0 090	2	0	2	1	0
38570-00	Laparoscopy lymph node biop	R26C	Covered	882.01	882.01	0 010	3	0	2	2	0 49320
38571-00	Laparoscopy lymphadenectomy	R26C	Covered	1138.37	1138.37	0 010	3	2	2	2	0 49320
38572-00	Laparoscopy lymphadenectomy	R26C	Covered	1532.82	1532.82	0 010	3	2	2	2	0 49320
38573-00	Laps pelvic lymphadec	R26C	Covered	2002.00	2002.00	0 010	3	2	2	2	0 49320
15999-00	Unlisted px exc pressure ulc	NBYR	Covered			0 YYY	2	0	0	1	1
38700-00	Removal of lymph nodes neck	R26C	Covered	1405.28	1405.28	0 090	2	1	2	1	0
38720-00	Removal of lymph nodes neck	R26C	Covered	2298.98	2298.98	0 090	2	1	2	1	0
38724-00	Removal of lymph nodes neck	R26C	Covered	2502.95	2502.95	0 090	2	1	2	1	0
38740-00	Remove armpit lymph nodes	R26C	Covered	1168.77	1168.77	0 090	2	1	2	1	0
38745-00	Remove armpit lymph nodes	R26C	Covered	1458.99	1458.99	0 090	2	1	2	1	0
38746-00	Remove thoracic lymph nodes	R26C	Covered	330.20	330.20	0 ZZZ	0	0	2	1	0
38747-00	Remove abdominal lymph nodes	R26C	Covered	421.87	421.87	0 ZZZ	0	0	2	1	0
38760-00	Remove groin lymph nodes	R26C	Covered	1405.16	1405.16	0 090	2	1	2	1	0
38765-00	Remove groin lymph nodes	R26C	Covered	2177.38	2177.38	0 090	2	1	2	1	0
38770-00	Remove pelvis lymph nodes	R26C	Covered	1381.39	1381.39	0 090	2	1	2	1	0

38780-00	Remove abdomen lymph nodes	R26C	Covered	1769.53	1769.53	0 090	2	0	2	1	0
38790-00	Inject for lymphatic x-ray	R26C	Covered	140.79	140.79	0 000	2	1	1	0	0
38792-00	Ra tracer id of sentinl node	R26C	Covered	152.43	54.11	0 000	2	1	1	0	0
38794-00	Access thoracic lymph duct	R26C	Covered	492.72	492.72	0 090	2	0	0	0	0
38900-00	Io map of sent lymph node	R26C	Covered	219.41	219.41	0 ZZZ	0	1	2	1	0
17999-00	Unlistd px skn muc memb subq	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1
39000-00	Exploration of chest	R26C	Covered	848.43	848.43	0 090	2	0	2	1	0
39010-00	Exploration of chest	R26C	Covered	1275.89	1275.89	0 090	2	0	2	1	0
39200-00	Resect mediastinal cyst	R26C	Covered	1386.80	1386.80	0 090	2	0	2	1	0
39220-00	Resect mediastinal tumor	R26C	Covered	1836.05	1836.05	0 090	2	0	2	1	0
39401-00	Mediastinoscpy w/medstnl bx	R26C	Covered	490.66	490.66	0 000	2	0	1	0	0
39402-00	Mediastinoscpy w/lmph nod bx	R26C	Covered	635.22	635.22	0 000	2	0	1	0	0
19499-00	Unlisted procedure breast	NBYR	Covered	By Report	By Report	0 YYY	2	1	0	1	1
39501-00	Repair diaphragm laceration	R26C	Covered	1397.15	1397.15	0 090	2	0	2	1	0
39503-00	Repair of diaphragm hernia	R26C	Covered	9019.34	9019.34	0 090	2	0	2	1	0
39540-00	Repair of diaphragm hernia	R26C	Covered	1408.73	1408.73	0 090	2	0	2	1	0
39541-00	Repair of diaphragm hernia	R26C	Covered	1509.77	1509.77	0 090	2	0	2	1	0
39545-00	Revision of diaphragm	R26C	Covered	1451.91	1451.91	0 090	2	0	2	1	0
39560-00	Resect diaphragm simple	R26C	Covered	1330.11	1330.11	0 090	2	0	2	1	0
39561-00	Resect diaphragm complex	R26C	Covered	2056.83	2056.83	0 090	2	0	2	1	0
20999-00	Unlisted px musckel general	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1
40490-00	Biopsy of lip	R26C	Covered	225.47	120.69	0 000	2	0	1	0	0
40500-00	Partial excision of lip	R26C	Covered	982.06	673.54	0 090	2	0	1	0	0
40510-00	Partial excision of lip	R26C	Covered	897.04	624.09	0 090	2	0	1	0	0
40520-00	Partial excision of lip	R26C	Covered	920.63	636.68	0 090	2	0	1	0	0
40525-00	Reconstruct lip with flap	R26C	Covered	974.99	974.99	0 090	2	0	1	0	0
40527-00	Reconstruct lip with flap	R26C	Covered	1111.01	1111.01	0 090	2	0	0	0	0
40530-00	Partial removal of lip	R26C	Covered	1014.88	719.29	0 090	2	0	1	0	0
40650-00	Rpr lip fth vermilion only	R26C	Covered	883.91	563.10	0 090	2	0	0	0	0
40652-00	Rpr lip fth<half ver ht/cpx	R26C	Covered	949.43	645.44	0 090	2	0	0	0	0
40654-00	Rpr lip fth>1half ver ht/cpx	R26C	Covered	1074.48	762.72	0 090	2	0	1	0	0
40700-00	Repair cleft lip/nasal	R26C	Covered	1746.77	1746.77	0 090	2	0	0	0	0
40701-00	Repair cleft lip/nasal	R26C	Covered	2051.22	2051.22	0 090	2	2	2	0	0
40702-00	Repair cleft lip/nasal	R26C	Covered	1727.72	1727.72	0 090	2	2	2	0	0
40720-00	Repair cleft lip/nasal	R26C	Covered	1772.22	1772.22	0 090	2	1	0	0	0
40761-00	Repair cleft lip/nasal	R26C	Covered	1854.82	1854.82	0 090	2	0	1	0	0
21088-00	Prepare face/oral prosthesis	NBYR	Covered	By Report	By Report	0 090	0	0	0	0	0
40800-00	Drainage of mouth lesion	R26C	Covered	380.66	218.96	0 010	2	0	1	0	0
40801-00	Drainage of mouth lesion	R26C	Covered	540.79	360.34	0 010	2	0	1	0	0
40804-00	Removal foreign body mouth	R26C	Covered	354.61	208.43	0 010	2	0	0	0	0
40805-00	Removal foreign body mouth	R26C	Covered	526.54	357.73	0 010	2	0	0	0	0
40806-00	Incision of lip fold	R26C	Covered	189.83	53.36	0 000	2	0	0	0	0
40808-00	Biopsy of mouth lesion	R26C	Covered	317.98	162.10	0 010	2	0	1	0	0
40810-00	Excision of mouth lesion	R26C	Covered	406.86	223.82	0 010	2	0	1	0	0
40812-00	Excise/repair mouth lesion	R26C	Covered	513.95	329.61	0 010	2	0	1	0	0
40814-00	Excise/repair mouth lesion	R26C	Covered	684.76	513.36	0 090	2	0	1	0	0
40816-00	Excision of mouth lesion	R26C	Covered	743.62	550.23	0 090	2	0	1	0	0
40818-00	Excise oral mucosa for graft	R26C	Covered	675.57	484.77	0 090	2	0	0	0	0
40819-00	Excise lip or cheek fold	R26C	Covered	501.02	364.55	0 090	2	0	0	0	0
40820-00	Treatment of mouth lesion	R26C	Covered	490.24	310.43	0 010	2	0	1	0	0
40830-00	Repair mouth laceration	R26C	Covered	415.60	262.96	0 010	2	0	0	0	0
40831-00	Repair mouth laceration	R26C	Covered	545.00	362.61	0 010	2	0	0	0	0
40840-00	Reconstruction of mouth	R26C	Covered	1566.56	1114.45	0 090	2	0	2	0	0
40842-00	Reconstruction of mouth	R26C	Covered	1677.89	1183.73	0 090	2	0	0	0	0

40843-00	Reconstruction of mouth	R26C	Covered	2144.18	1500.62	0 090	2	2	2	0	0
40844-00	Reconstruction of mouth	R26C	Covered	2679.92	2037.65	0 090	2	0	2	0	0
40845-00	Reconstruction of mouth	R26C	Covered	2639.73	2103.53	0 090	2	0	0	0	0
21089-00	Unlisted maxifcl prosth px	NBYR	Covered	By Report	By Report	0 YYY	0	0	1	1	1
41000-00	Drainage of mouth lesion	R26C	Covered	268.39	188.83	0 010	2	0	1	0	0
41005-00	Drainage of mouth lesion	R26C	Covered	429.55	212.88	0 010	2	0	0	0	0
41006-00	Drainage of mouth lesion	R26C	Covered	625.03	416.11	0 090	2	0	0	0	0
41007-00	Drainage of mouth lesion	R26C	Covered	607.32	399.70	0 090	2	0	0	0	0
41008-00	Drainage of mouth lesion	R26C	Covered	725.84	463.88	0 090	2	0	0	0	0
41009-00	Drainage of mouth lesion	R26C	Covered	783.81	515.39	0 090	2	0	0	0	0
41010-00	Incision of tongue fold	R26C	Covered	407.79	201.46	0 010	2	0	0	0	0
41015-00	Drainage of mouth lesion	R26C	Covered	735.61	540.93	0 090	2	0	0	0	0
41016-00	Drainage of mouth lesion	R26C	Covered	859.70	625.56	0 090	2	0	0	0	0
41017-00	Drainage of mouth lesion	R26C	Covered	860.25	622.88	0 090	2	0	0	0	0
41018-00	Drainage of mouth lesion	R26C	Covered	962.97	721.07	0 090	2	0	0	0	0
41019-00	Place needles h&n for rt	R26C	Covered	864.69	864.69	0 000	2	0	0	1	1
41100-00	Biopsy of tongue	R26C	Covered	348.51	192.63	0 010	2	0	1	0	0
41105-00	Biopsy of tongue	R26C	Covered	349.61	198.26	0 010	2	0	1	0	0
41108-00	Biopsy of floor of mouth	R26C	Covered	314.64	165.23	0 010	2	0	1	0	0
41110-00	Excision of tongue lesion	R26C	Covered	428.96	234.92	0 010	2	0	1	0	0
41112-00	Excision of tongue lesion	R26C	Covered	627.76	441.48	0 090	2	0	1	0	0
41113-00	Excision of tongue lesion	R26C	Covered	668.15	477.99	0 090	2	0	1	0	0
41114-00	Excision of tongue lesion	R26C	Covered	1100.30	1100.30	0 090	2	0	0	0	0
41115-00	Excision of tongue fold	R26C	Covered	487.06	263.91	0 010	2	0	0	0	0
41116-00	Excision of mouth lesion	R26C	Covered	620.46	392.79	0 090	2	0	1	0	0
41120-00	Partial removal of tongue	R26C	Covered	1909.16	1909.16	0 090	2	0	2	1	0
41130-00	Partial removal of tongue	R26C	Covered	2334.39	2334.39	0 090	2	0	2	1	0
41135-00	Tongue and neck surgery	R26C	Covered	3796.41	3796.41	0 090	2	0	2	1	0
41140-00	Removal of tongue	R26C	Covered	3840.82	3840.82	0 090	2	0	2	1	0
41145-00	Tongue removal neck surgery	R26C	Covered	4819.72	4819.72	0 090	2	0	2	1	0
41150-00	Tongue mouth jaw surgery	R26C	Covered	3860.15	3860.15	0 090	2	0	2	1	0
41153-00	Tongue mouth neck surgery	R26C	Covered	4185.77	4185.77	0 090	2	0	2	1	0
41155-00	Tongue jaw & neck surgery	R26C	Covered	5192.78	5192.78	0 090	2	0	2	1	0
41250-00	Repair tongue laceration	R26C	Covered	521.29	269.68	0 010	2	0	0	0	0
41251-00	Repair tongue laceration	R26C	Covered	571.50	319.89	0 010	2	0	0	0	0
41252-00	Repair tongue laceration	R26C	Covered	593.39	365.07	0 010	2	0	0	0	0
41510-00	Tongue to lip surgery	R26C	Covered	840.50	840.50	0 090	2	0	0	0	0
41512-00	Tongue suspension	R26C	Covered	1206.97	1206.97	0 090	2	0	0	0	0
41520-00	Reconstruction tongue fold	R26C	Covered	680.34	457.19	0 090	2	0	0	0	0
41530-00	Tongue base vol reduction	R26C	Covered	1724.62	691.04	0 000	2	0	0	0	0
21299-00	Unlisted cranfcl&maxifcl px	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1
41800-00	Drainage of gum lesion	R26C	Covered	548.45	283.26	0 010	2	0	1	0	0
41805-00	Removal foreign body gum	R26C	Covered	582.73	365.40	0 010	2	0	0	0	0
41806-00	Removal foreign body jawbone	R26C	Covered	763.41	507.92	0 010	2	0	0	0	0
21499-00	Unlisted musckel px head	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1
21743-00	Repair sternum/nuss w/scope	NBYR	Covered	By Report	By Report	0 090	2	0	2	1	0
41822-00	Excision of gum lesion	R26C	Covered	655.00	357.47	0 010	2	0	0	0	0
41823-00	Excision of gum lesion	R26C	Covered	976.26	662.56	0 090	2	0	0	0	0
41825-00	Excision of gum lesion	R26C	Covered	414.38	222.28	0 010	2	0	1	0	0
41826-00	Excision of gum lesion	R26C	Covered	555.74	355.23	0 010	2	0	1	0	0
41827-00	Excision of gum lesion	R26C	Covered	800.07	521.30	0 090	2	0	1	0	0
41828-00	Excision of gum lesion	R26C	Covered	640.47	385.63	0 010	2	0	0	0	0
41830-00	Removal of gum tissue	R26C	Covered	861.40	559.99	0 010	2	0	0	0	0
21899-00	Unlisted px neck/thorax	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1

22899-00	Unlisted procedure spine	NBYR	Covered	By Report	By Report	0 YYY	2	0	2	1	1
41872-00	Repair gum	R26C	Covered	874.38	551.63	0 090	2	0	0	0	0
41874-00	Repair tooth socket	R26C	Covered	712.33	441.32	0 090	2	0	0	0	0
22999-00	Unlisted px abdomen muscskel	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1
42000-00	Drainage mouth roof lesion	R26C	Covered	297.96	197.70	0 010	2	0	0	0	0
42100-00	Biopsy roof of mouth	R26C	Covered	269.14	199.29	0 010	2	0	1	0	0
42104-00	Excision lesion mouth roof	R26C	Covered	403.92	243.51	0 010	2	0	1	0	0
42106-00	Excision lesion mouth roof	R26C	Covered	464.91	289.63	0 010	2	0	1	0	0
42107-00	Excision lesion mouth roof	R26C	Covered	815.76	581.61	0 090	2	0	1	0	0
42120-00	Remove palate/lesion	R26C	Covered	1795.53	1795.53	0 090	2	0	2	1	0
42140-00	Excision of uvula	R26C	Covered	585.68	299.14	0 090	2	0	1	0	0
42145-00	Repair palate pharynx/uvula	R26C	Covered	1220.20	1220.20	0 090	2	0	1	0	0
42160-00	Treatment mouth roof lesion	R26C	Covered	419.51	253.28	0 010	2	0	0	0	0
42180-00	Repair lac palate<2 cm	R26C	Covered	465.90	334.60	0 010	2	0	0	0	0
42182-00	Repair palate	R26C	Covered	595.54	455.83	0 010	2	0	0	0	0
42200-00	Reconstruct cleft palate	R26C	Covered	1613.29	1613.29	0 090	2	0	2	0	0
42205-00	Reconstruct cleft palate	R26C	Covered	1667.49	1667.49	0 090	2	0	2	0	0
42210-00	Reconstruct cleft palate	R26C	Covered	1865.08	1865.08	0 090	2	0	2	0	0
42215-00	Reconstruct cleft palate	R26C	Covered	1233.37	1233.37	0 090	2	0	2	0	0
42220-00	Reconstruct cleft palate	R26C	Covered	1020.93	1020.93	0 090	2	0	2	0	0
42225-00	Reconstruct cleft palate	R26C	Covered	1761.32	1761.32	0 090	2	0	2	0	0
42226-00	Lengthening of palate	R26C	Covered	1632.30	1632.30	0 090	2	0	2	0	0
42227-00	Lengthening of palate	R26C	Covered	1517.95	1517.95	0 090	2	0	2	0	0
42235-00	Repair palate	R26C	Covered	1344.89	1344.89	0 090	2	0	2	0	0
42260-00	Repair nose to lip fistula	R26C	Covered	1553.81	1180.60	0 090	2	0	2	0	0
42280-00	Preparation palate mold	R26C	Covered	327.01	195.06	0 010	2	0	0	0	0
42281-00	Insertion palate prosthesis	R26C	Covered	416.23	293.34	0 010	2	0	0	0	0
23929-00	Unlisted procedure shoulder	NBYR	Covered	By Report	By Report	0 YYY	2	0	2	1	1
42300-00	Drainage of salivary gland	R26C	Covered	395.95	281.47	0 010	2	0	1	0	0
42305-00	Drainage of salivary gland	R26C	Covered	769.47	769.47	0 090	2	0	0	0	0
42310-00	Drainage of salivary gland	R26C	Covered	316.63	246.77	0 010	2	0	0	0	0
42320-00	Drainage of salivary gland	R26C	Covered	479.98	320.86	0 010	2	0	0	0	0
42330-00	Removal of salivary stone	R26C	Covered	429.93	296.04	0 010	2	0	1	0	0
42335-00	Removal of salivary stone	R26C	Covered	804.58	474.71	0 090	2	0	1	0	0
42340-00	Removal of salivary stone	R26C	Covered	982.85	617.41	0 090	2	1	0	0	0
42400-00	Biopsy of salivary gland	R26C	Covered	177.79	94.35	0 000	2	0	1	0	0
42405-00	Biopsy of salivary gland	R26C	Covered	554.49	402.49	0 010	2	0	1	0	0
42408-00	Excision of salivary cyst	R26C	Covered	1006.63	632.13	0 090	2	0	0	0	0
42409-00	Drainage of salivary cyst	R26C	Covered	736.39	420.10	0 090	2	0	2	0	0
42410-00	Excise parotid gland/lesion	R26C	Covered	1103.68	1103.68	0 090	2	1	2	1	0
42415-00	Excise parotid gland/lesion	R26C	Covered	1842.25	1842.25	0 090	2	1	2	1	0
42420-00	Excise parotid gland/lesion	R26C	Covered	2057.66	2057.66	0 090	2	1	2	1	0
42425-00	Excise parotid gland/lesion	R26C	Covered	1462.97	1462.97	0 090	2	1	2	1	0
42426-00	Excise parotid gland/lesion	R26C	Covered	2326.26	2326.26	0 090	2	1	2	1	0
42440-00	Excise submaxillary gland	R26C	Covered	736.50	736.50	0 090	2	1	2	1	0
42450-00	Excise sublingual gland	R26C	Covered	865.15	653.65	0 090	2	0	0	0	0
42500-00	Repair salivary duct	R26C	Covered	825.83	623.38	0 090	2	0	0	0	0
42505-00	Repair salivary duct	R26C	Covered	1048.15	819.83	0 090	2	0	1	0	0
42507-00	Parotid duct diversion	R26C	Covered	889.36	889.36	0 090	2	0	2	0	0
42509-00	Parotid duct diversion	R26C	Covered	1446.60	1446.60	0 090	2	2	0	0	0
42510-00	Parotid duct diversion	R26C	Covered	1082.44	1082.44	0 090	2	2	2	1	0
42550-00	Injection for salivary x-ray	R26C	Covered	285.41	104.95	0 000	2	0	1	0	0
42600-00	Closure of salivary fistula	R26C	Covered	1005.42	637.39	0 090	2	0	0	0	0
42650-00	Dilation of salivary duct	R26C	Covered	135.93	105.53	0 000	2	0	1	0	0

42660-00	Dilation of salivary duct	R26C	Covered	197.37	147.57	0 000	2	0	0	0	0
42665-00	Ligation of salivary duct	R26C	Covered	702.41	394.54	0 090	2	0	0	0	0
24999-00	Unlisted px humerus/elbow	NBYR	Covered	By Report	By Report	0 YYY	2	1	0	1	1
42700-00	Drainage of tonsil abscess	R26C	Covered	354.93	244.98	0 010	2	0	1	0	0
42720-00	Drainage of throat abscess	R26C	Covered	793.35	671.11	0 010	2	0	0	0	0
42725-00	Drainage of throat abscess	R26C	Covered	1395.75	1395.75	0 090	2	0	2	1	0
42800-00	Biopsy of throat	R26C	Covered	292.25	211.40	0 010	2	0	1	0	0
42804-00	Biopsy of upper nose/throat	R26C	Covered	405.94	225.48	0 010	2	0	1	0	0
42806-00	Biopsy of upper nose/throat	R26C	Covered	450.77	257.37	0 010	2	0	1	0	0
42808-00	Excise pharynx lesion	R26C	Covered	425.79	295.79	0 010	2	0	1	0	0
42809-00	Remove pharynx foreign body	R26C	Covered	379.65	223.13	0 010	2	0	1	0	0
42810-00	Excision of neck cyst	R26C	Covered	721.95	513.68	0 090	2	1	2	0	0
42815-00	Excision of neck cyst	R26C	Covered	958.56	958.56	0 090	2	1	2	1	0
42820-00	Remove tonsils and adenoids	R26C	Covered	519.38	519.38	0 090	2	0	0	0	0
42821-00	Remove tonsils and adenoids	R26C	Covered	542.86	542.86	0 090	2	0	0	0	0
42825-00	Removal of tonsils	R26C	Covered	484.76	484.76	0 090	2	0	0	0	0
42826-00	Removal of tonsils	R26C	Covered	459.77	459.77	0 090	2	0	1	0	0
42830-00	Removal of adenoids	R26C	Covered	386.05	386.05	0 090	2	0	0	0	0
42831-00	Removal of adenoids	R26C	Covered	421.05	421.05	0 090	2	0	0	0	0
42835-00	Removal of adenoids	R26C	Covered	361.69	361.69	0 090	2	0	0	0	0
42836-00	Removal of adenoids	R26C	Covered	442.26	442.26	0 090	2	0	0	0	0
42842-00	Extensive surgery of throat	R26C	Covered	1806.20	1806.20	0 090	2	0	0	0	0
42844-00	Extensive surgery of throat	R26C	Covered	2446.48	2446.48	0 090	2	0	2	1	0
42845-00	Extensive surgery of throat	R26C	Covered	3847.24	3847.24	0 090	2	0	2	1	0
42860-00	Excision of tonsil tags	R26C	Covered	354.19	354.19	0 090	2	0	0	0	0
42870-00	Excision of lingual tonsil	R26C	Covered	1077.27	1077.27	0 090	2	0	0	0	0
42890-00	Partial removal of pharynx	R26C	Covered	2500.70	2500.70	0 090	2	0	2	1	0
42892-00	Revision of pharyngeal walls	R26C	Covered	3275.86	3275.86	0 090	2	0	2	1	0
42894-00	Revision of pharyngeal walls	R26C	Covered	4141.80	4141.80	0 090	2	0	2	1	0
42900-00	Repair throat wound	R26C	Covered	579.99	579.99	0 010	2	0	0	0	0
42950-00	Reconstruction of throat	R26C	Covered	1444.32	1444.32	0 090	2	0	2	1	0
42953-00	Repair throat esophagus	R26C	Covered	1733.80	1733.80	0 090	2	0	2	0	0
42955-00	Surgical opening of throat	R26C	Covered	1373.99	1373.99	0 090	2	0	2	0	0
42960-00	Control throat bleeding	R26C	Covered	284.12	284.12	0 010	2	0	0	0	0
42961-00	Control throat bleeding	R26C	Covered	749.25	749.25	0 090	2	0	2	0	0
42962-00	Control throat bleeding	R26C	Covered	918.66	918.66	0 090	2	0	1	0	0
42970-00	Control nose/throat bleeding	R26C	Covered	732.89	732.89	0 090	2	0	1	0	0
42971-00	Control nose/throat bleeding	R26C	Covered	804.15	804.15	0 090	2	0	2	0	0
42972-00	Control nose/throat bleeding	R26C	Covered	895.42	895.42	0 090	2	0	2	0	0
25999-00	Unlisted px forearm/wrist	NBYR	Covered	By Report	By Report	0 YYY	2	1	0	1	1
43020-00	Incision of esophagus	R26C	Covered	947.44	947.44	0 090	2	0	2	1	0
43030-00	Throat muscle surgery	R26C	Covered	919.65	919.65	0 090	2	0	2	1	0
43045-00	Incision of esophagus	R26C	Covered	2099.81	2099.81	0 090	2	0	2	1	0
43100-00	Excision of esophagus lesion	R26C	Covered	1122.26	1122.26	0 090	2	0	2	1	0
43101-00	Excision of esophagus lesion	R26C	Covered	1616.78	1616.78	0 090	2	0	2	1	0
43107-00	Removal of esophagus	R26C	Covered	4728.03	4728.03	0 090	2	0	2	1	0
43108-00	Removal of esophagus	R26C	Covered	6904.33	6904.33	0 090	2	0	2	1	0
43112-00	Esphg tot w/thrcm	R26C	Covered	5468.16	5468.16	0 090	2	0	2	2	0
43113-00	Removal of esophagus	R26C	Covered	6776.81	6776.81	0 090	2	0	2	2	0
43116-00	Partial removal of esophagus	R26C	Covered	7711.01	7711.01	0 090	2	0	2	1	0
43117-00	Partial removal of esophagus	R26C	Covered	5153.00	5153.00	0 090	2	0	2	2	0
43118-00	Partial removal of esophagus	R26C	Covered	5645.57	5645.57	0 090	2	0	2	2	0
43121-00	Partial removal of esophagus	R26C	Covered	4493.75	4493.75	0 090	2	0	2	2	0
43122-00	Partial removal of esophagus	R26C	Covered	4117.52	4117.52	0 090	2	0	2	1	0

43123-00	Partial removal of esophagus	R26C	Covered	7020.06	7020.06	0 090	2	0	2	1	0
43124-00	Removal of esophagus	R26C	Covered	5967.98	5967.98	0 090	2	0	2	1	0
43130-00	Removal of esophagus pouch	R26C	Covered	1361.50	1361.50	0 090	2	0	2	1	0
43135-00	Removal of esophagus pouch	R26C	Covered	2323.51	2323.51	0 090	2	0	2	1	0
43180-00	Esophagoscopy rigid trnso	R26C	Covered	949.01	949.01	0 090	2	0	1	0	0
43191-00	Esophagoscopy rigid trnso dx	R26C	Covered	268.91	268.91	0 000	2	0	1	0	0
43192-00	Esophagoscp rig trnso inject	R26C	Covered	293.75	293.75	0 000	3	0	1	0	0 43191
43193-00	Esophagoscp rig trnso biopsy	R26C	Covered	292.46	292.46	0 000	3	0	1	0	0 43191
43194-00	Esophagoscp rig trnso rem fb	R26C	Covered	320.11	320.11	0 000	3	0	1	0	0 43191
43195-00	Esophagoscopy rigid balloon	R26C	Covered	319.37	319.37	0 000	3	0	1	0	0 43191
43196-00	Esophagoscp guide wire dilat	R26C	Covered	339.13	339.13	0 000	3	0	1	0	0 43191
43197-00	Esophagoscopy flex dx brush	R26C	Covered	349.65	137.50	0 000	2	0	1	0	0
43198-00	Esophagoscp flex trnsn biopsy	R26C	Covered	387.98	166.13	0 000	3	0	1	0	0 43197
43200-00	Esophagoscopy flexible brush	R26C	Covered	492.24	150.73	0 000	2	0	1	0	0
43201-00	Esoph scope w/submucous inj	R26C	Covered	482.76	178.11	0 000	3	0	1	0	0 43200
43202-00	Esophagoscopy flex biopsy	R26C	Covered	668.99	177.42	0 000	3	0	1	0	0 43200
43204-00	Esoph scope w/sclerosis inj	R26C	Covered	232.79	232.79	0 000	3	0	1	0	0 43200
43205-00	Esophagus endoscopy/ligation	R26C	Covered	242.81	242.81	0 000	3	0	1	0	0 43200
43206-00	Esoph optical endomicroscopy	R26C	Covered	563.42	229.02	0 000	3	0	1	0	0 43200
43210-00	Egd esophagogastrc findoplsty	R26C	Covered	713.94	713.94	0 000	3	0	1	0	0 43235
43211-00	Esophagoscp mucosal resect	R26C	Covered	401.82	401.82	0 000	3	0	1	0	0 43200
43212-00	Esophagoscp stent placement	R26C	Covered	314.67	314.67	0 000	3	0	1	0	0 43200
43213-00	Esophagoscopy retro balloon	R26C	Covered	2289.98	434.31	0 000	3	0	1	0	0 43200
43214-00	Esophagoscp dilate balloon 30	R26C	Covered	327.47	327.47	0 000	3	0	1	0	0 43200
43215-00	Esophagoscopy flex remove fb	R26C	Covered	727.69	238.70	0 000	3	0	1	0	0 43200
43216-00	Esophagoscopy lesion removal	R26C	Covered	765.23	230.32	0 000	3	0	1	0	0 43200
43217-00	Esophagoscopy snare les remv	R26C	Covered	783.61	275.23	0 000	3	0	1	0	0 43200
43220-00	Esophagoscopy balloon <30mm	R26C	Covered	1702.32	202.39	0 000	3	0	1	0	0 43200
43226-00	Esoph endoscopy dilation	R26C	Covered	716.73	219.99	0 000	3	0	1	0	0 43200
43227-00	Esophagoscopy control bleed	R26C	Covered	1113.96	282.18	0 000	3	0	1	0	0 43200
43229-00	Esophagoscopy lesion ablate	R26C	Covered	1328.63	335.79	0 000	3	0	1	0	0 43200
43231-00	Esophagoscp ultrasound exam	R26C	Covered	270.60	270.60	0 000	3	0	1	2	0 43200
43232-00	Esophagoscopy w/us needle bx	R26C	Covered	341.08	341.08	0 000	3	0	1	2	0 43200
43233-00	Egd balloon dil esoph30 mm/>	R26C	Covered	384.23	384.23	0 000	3	0	1	0	0 43235
43235-00	Egd diagnostic brush wash	R26C	Covered	534.45	211.05	0 000	2	0	1	0	0
43236-00	Uppr gi scope w/submuc inj	R26C	Covered	750.14	237.88	0 000	3	0	1	0	0 43235
43237-00	Endoscopic us exam esoph	R26C	Covered	335.68	335.68	0 000	3	0	1	0	0 43235
43238-00	Egd us fine needle bx/aspir	R26C	Covered	397.40	397.40	0 000	3	0	1	0	0 43235
43239-00	Egd biopsy single/multiple	R26C	Covered	702.28	237.88	0 000	3	0	1	0	0 43235
43240-00	Egd w/transmural drain cyst	R26C	Covered	667.55	667.55	0 000	3	0	1	0	0 43235
43241-00	Egd tube/cath insertion	R26C	Covered	242.80	242.80	0 000	3	0	1	0	0 43235
43242-00	Egd us fine needle bx/aspir	R26C	Covered	449.19	449.19	0 000	3	0	1	0	0 43235
43243-00	Egd injection varices	R26C	Covered	402.57	402.57	0 000	3	0	1	0	0 43235
43244-00	Egd varices ligation	R26C	Covered	419.24	419.24	0 000	3	0	1	0	0 43235
43245-00	Egd dilate stricture	R26C	Covered	1107.73	297.29	0 000	3	0	1	0	0 43235
43246-00	Egd place gastrostomy tube	R26C	Covered	336.04	336.04	0 000	3	0	0	2	0 43235
43247-00	Egd remove foreign body	R26C	Covered	707.06	301.51	0 000	3	0	1	0	0 43235
43248-00	Egd guide wire insertion	R26C	Covered	767.80	284.64	0 000	3	0	1	0	0 43235
43249-00	Esoph egd dilation <30 mm	R26C	Covered	2041.54	262.84	0 000	3	0	1	0	0 43235
43250-00	Egd cautery tumor polyp	R26C	Covered	832.58	287.97	0 000	3	0	1	0	0 43235
43251-00	Egd remove lesion snare	R26C	Covered	917.90	335.13	0 000	3	0	1	0	0 43235
43252-00	Egd optical endomicroscopy	R26C	Covered	625.31	288.33	0 000	3	0	1	0	0 43235
43253-00	Egd us transmural injxn/mark	R26C	Covered	448.55	448.55	0 000	3	0	1	0	0 43235
43254-00	Egd endo mucosal resection	R26C	Covered	461.03	461.03	0 000	3	0	1	0	0 43235

43255-00	Egd control bleeding any	R26C	Covered	1169.75	343.14	0 000	3	0	1	0	0	43235
43257-00	Egd w/thrml txmnt gerd	R26C	Covered	394.17	394.17	0 000	3	0	1	0	0	43235
43259-00	Egd us exam duodenum/jejunum	R26C	Covered	386.78	386.78	0 000	3	0	1	0	0	43235
43260-00	Ercp w/specimen collection	R26C	Covered	549.67	549.67	0 000	2	0	1	0	0	
43261-00	Endo cholangiopancreatograph	R26C	Covered	576.50	576.50	0 000	3	0	1	0	0	43260
43262-00	Endo cholangiopancreatograph	R26C	Covered	608.21	608.21	0 000	3	0	1	0	0	43260
43263-00	Ercp sphincter pressure meas	R26C	Covered	608.91	608.91	0 000	3	0	1	0	0	43260
43264-00	Ercp remove duct calculi	R26C	Covered	620.09	620.09	0 000	3	0	1	0	0	43260
43265-00	Ercp lithotripsy calculi	R26C	Covered	736.72	736.72	0 000	3	0	1	0	0	43260
43266-00	Egd endoscopic stent place	R26C	Covered	368.77	368.77	0 000	3	0	1	0	0	43235
43270-00	Egd lesion ablation	R26C	Covered	1364.26	383.71	0 000	3	0	1	0	0	43235
43273-00	Endoscopic pancreatoscopy	R26C	Covered	202.05	202.05	0 ZZZ	0	0	0	0	0	
43274-00	Ercp duct stent placement	R26C	Covered	786.05	786.05	0 000	3	0	1	0	0	43260
43275-00	Ercp remove forgn body duct	R26C	Covered	640.68	640.68	0 000	3	0	1	0	0	43260
43276-00	Ercp stent exchange w/dilate	R26C	Covered	818.47	818.47	0 000	3	0	1	0	0	43260
43277-00	Ercp ea duct/ampulla dilate	R26C	Covered	644.40	644.40	0 000	3	0	1	0	0	43260
43278-00	Ercp lesion ablate w/dilate	R26C	Covered	736.16	736.16	0 000	3	0	1	0	0	43260
43279-00	Lap myotomy heller	R26C	Covered	2065.79	2065.79	0 090	2	0	2	1	0	
43280-00	Laparoscopy fundoplasty	R26C	Covered	1747.00	1747.00	0 090	2	0	2	1	0	
43281-00	Lap paraesophag hern repair	R26C	Covered	2464.66	2464.66	0 090	2	0	2	1	0	
43282-00	Lap paraesoph her rpr w/mesh	R26C	Covered	2772.18	2772.18	0 090	2	0	2	1	0	
43283-00	Lap esoph lengthening	R26C	Covered	246.17	246.17	0 ZZZ	0	0	2	1	0	
43284-00	Laps esophgl sphnctr agmntj	R26C	Covered	1076.87	1076.87	0 090	2	0	2	1	0	
43285-00	Rmvl esophgl sphnctr dev	R26C	Covered	1105.72	1105.72	0 090	2	0	2	1	0	
43286-00	Esphg tot w/laps mobilj	R26C	Covered	5043.47	5043.47	0 090	2	0	2	1	0	
43287-00	Esphg dstl 2/3 w/laps mobilj	R26C	Covered	5613.04	5613.04	0 090	2	0	2	2	0	
43288-00	Esphg thrsc mobilj	R26C	Covered	5927.18	5927.18	0 090	2	0	2	2	0	
26989-00	Unlisted px hands/fingers	NBYR	Covered	By Report	By Report	0 YYY	2	0	1	1	1	
43290-00	Egd flx trnsorl dplmnt balo	R26C	Covered	4991.53	294.47	0 000	3	0	1	0	0	43235
43291-00	Egd flx trnsorl rmlv balo	R26C	Covered	856.89	273.47	0 000	3	0	1	0	0	43235
43300-00	Repair of esophagus	R26C	Covered	1107.74	1107.74	0 090	2	0	2	1	0	
43305-00	Repair esophagus and fistula	R26C	Covered	1901.65	1901.65	0 090	2	0	2	1	0	
43310-00	Repair of esophagus	R26C	Covered	2347.19	2347.19	0 090	2	0	2	1	0	
43312-00	Repair esophagus and fistula	R26C	Covered	2482.05	2482.05	0 090	2	0	2	1	0	
43313-00	Esophagoplasty congenital	R26C	Covered	4682.81	4682.81	0 090	2	0	2	1	0	
43314-00	Tracheo-esophagoplasty cong	R26C	Covered	4979.83	4979.83	0 090	2	0	2	1	0	
43320-00	Fuse esophagus & stomach	R26C	Covered	2260.70	2260.70	0 090	2	0	2	1	0	
43325-00	Revise esophagus & stomach	R26C	Covered	2199.79	2199.79	0 090	2	0	2	1	0	
43327-00	Esoph fundoplasty lap	R26C	Covered	1333.49	1333.49	0 090	2	0	2	1	0	
43328-00	Esoph fundoplasty thor	R26C	Covered	1777.21	1777.21	0 090	2	0	2	1	0	
43330-00	Esophagomyotomy abdominal	R26C	Covered	2165.35	2165.35	0 090	2	0	2	1	0	
43331-00	Esophagomyotomy thoracic	R26C	Covered	2141.16	2141.16	0 090	2	0	2	1	0	
43332-00	Transab esoph hiat hern rpr	R26C	Covered	1855.08	1855.08	0 090	2	0	2	1	0	
43333-00	Transab esoph hiat hern rpr	R26C	Covered	2031.27	2031.27	0 090	2	0	2	1	0	
43334-00	Transthor diaphrag hern rpr	R26C	Covered	1965.54	1965.54	0 090	2	0	2	1	0	
43335-00	Transthor diaphrag hern rpr	R26C	Covered	2101.27	2101.27	0 090	2	0	2	1	0	
43336-00	Thorabd diaphr hern repair	R26C	Covered	2288.22	2288.22	0 090	2	0	2	1	0	
43337-00	Thorabd diaphr hern repair	R26C	Covered	2434.52	2434.52	0 090	2	0	2	1	0	
43338-00	Esoph lengthening	R26C	Covered	176.32	176.32	0 ZZZ	0	0	2	1	0	
43340-00	Fuse esophagus & intestine	R26C	Covered	2233.76	2233.76	0 090	2	0	2	1	0	
43341-00	Fuse esophagus & intestine	R26C	Covered	2235.08	2235.08	0 090	2	0	2	1	0	
43351-00	Surgical opening esophagus	R26C	Covered	2127.15	2127.15	0 090	2	0	2	1	0	
43352-00	Surgical opening esophagus	R26C	Covered	1722.80	1722.80	0 090	2	0	2	1	0	
43360-00	Gastrointestinal repair	R26C	Covered	3552.62	3552.62	0 090	2	0	2	1	0	

43361-00	Gastrointestinal repair	R26C	Covered	4337.71	4337.71	0 090	2	0	2	1	0
43400-00	Ligate esophagus veins	R26C	Covered	2457.65	2457.65	0 090	2	0	2	1	0
43405-00	Ligate/staple esophagus	R26C	Covered	2339.77	2339.77	0 090	2	0	2	1	0
43410-00	Repair esophagus wound	R26C	Covered	1807.45	1807.45	0 090	2	0	2	1	0
43415-00	Repair esophagus wound	R26C	Covered	4111.71	4111.71	0 090	2	0	2	1	0
43420-00	Repair esophagus opening	R26C	Covered	1768.73	1768.73	0 090	2	0	0	1	0
43425-00	Repair esophagus opening	R26C	Covered	2299.39	2299.39	0 090	2	0	2	1	0
43450-00	Dilate esophagus 1/mult pass	R26C	Covered	348.91	138.70	0 000	2	0	1	0	0
43453-00	Dilate esophagus	R26C	Covered	1517.96	149.98	0 000	2	0	1	0	0
43460-00	Pressure treatment esophagus	R26C	Covered	363.73	363.73	0 000	2	0	1	0	0
43496-00	Free jejunum flap microvasc	RMCD	Covered	921.50	921.50	0 090	2	0	2	1	0
43497-00	Transorl lwr esophgl myotomy	R26C	Covered	1353.56	1353.56	0 090	3	0	1	0	0
27299-00	Unlisted px pelvis/hip joint	NBYR	Covered	By Report	By Report	0 YYY	2	1	2	1	1
43500-00	Surgical opening of stomach	R26C	Covered	1290.44	1290.44	0 090	2	0	2	1	0
43501-00	Surgical repair of stomach	R26C	Covered	2195.94	2195.94	0 090	2	0	2	1	0
43502-00	Surgical repair of stomach	R26C	Covered	2463.21	2463.21	0 090	2	0	2	1	0
43510-00	Surgical opening of stomach	R26C	Covered	1558.81	1558.81	0 090	2	0	2	1	0
43520-00	Incision of pyloric muscle	R26C	Covered	1144.79	1144.79	0 090	2	0	2	1	0
43605-00	Biopsy of stomach	R26C	Covered	1372.25	1372.25	0 090	2	0	2	1	0
43610-00	Excision of stomach lesion	R26C	Covered	1594.80	1594.80	0 090	2	0	2	1	0
43611-00	Excision of stomach lesion	R26C	Covered	2004.31	2004.31	0 090	2	0	2	1	0
43620-00	Removal of stomach	R26C	Covered	3178.17	3178.17	0 090	2	0	2	1	0
43621-00	Removal of stomach	R26C	Covered	3647.88	3647.88	0 090	2	0	2	1	0
43622-00	Removal of stomach	R26C	Covered	3691.89	3691.89	0 090	2	0	2	1	0
43631-00	Removal of stomach partial	R26C	Covered	2351.43	2351.43	0 090	2	0	2	1	0
43632-00	Removal of stomach partial	R26C	Covered	3272.43	3272.43	0 090	2	0	2	1	0
43633-00	Removal of stomach partial	R26C	Covered	3099.26	3099.26	0 090	2	0	2	1	0
43634-00	Removal of stomach partial	R26C	Covered	3401.50	3401.50	0 090	2	0	2	1	0
43635-00	Removal of stomach partial	R26C	Covered	176.81	176.81	0 ZZZ	0	0	2	1	0
43640-00	Vagotomy & pylorus repair	R26C	Covered	1937.66	1937.66	0 090	2	0	2	1	0
43641-00	Vagotomy & pylorus repair	R26C	Covered	1959.60	1959.60	0 090	2	0	2	1	0
43644-00	Lap gastric bypass/roux-en-y	R26C	Covered	2801.75	2801.75	0 090	2	0	2	1	0
43645-00	Lap gastr bypass incl smll i	R26C	Covered	2980.86	2980.86	0 090	2	0	2	1	0
27599-00	Unlisted px femur/knee	NBYR	Covered	By Report	By Report	0 YYY	2	1	2	1	1
43648-00	Lap revise/remv eltrd antrum	RMCD	Covered	797.43	797.43	0 YYY	2	0	2	1	0
43651-00	Laparoscopy vagus nerve	R26C	Covered	1088.52	1088.52	0 090	2	0	2	1	0
43652-00	Laparoscopy vagus nerve	R26C	Covered	1259.74	1259.74	0 090	2	0	2	1	0
43653-00	Laparoscopy gastrostomy	R26C	Covered	969.20	969.20	0 090	2	0	2	1	0
27899-00	Unlisted px leg/ankle	NBYR	Covered	By Report	By Report	0 YYY	2	1	0	1	1
43752-00	Nasal/orogastric w/tube plmt	R26C	Covered	67.17	67.17	0 000	0	0	1	0	0
43753-00	Tx gastro intub w/asp	R26C	Covered	34.84	34.84	0 000	0	0	2	0	0
43754-00	Dx gastr intub w/asp spec	R26C	Covered	446.95	65.98	0 000	0	0	2	0	0
43755-00	Dx gastr intub w/asp specs	R26C	Covered	383.64	104.87	0 000	0	0	2	0	0
43756-00	Dx duod intub w/asp spec	R26C	Covered	525.86	89.91	0 000	0	0	2	0	0
43757-00	Dx duod intub w/asp specs	R26C	Covered	703.39	134.21	0 000	0	0	2	0	0
43761-00	Reposition gastrostomy tube	R26C	Covered	209.89	170.43	0 000	2	0	1	0	0
43762-00	Rplc gtube no revj trc	R26C	Covered	425.92	60.47	0 000	2	0	1	0	0
43763-00	Rplc gtube revj gstrst trc	R26C	Covered	625.11	147.12	0 000	2	0	1	0	0
43770-00	Lap place gastr adj device	R26C	Covered	1844.10	1844.10	0 090	2	0	2	1	0
43771-00	Lap revise gastr adj device	R26C	Covered	2083.09	2083.09	0 090	2	0	2	1	0
43772-00	Lap rmvl gastr adj device	R26C	Covered	1546.20	1546.20	0 090	2	0	2	1	0
43773-00	Lap replace gastr adj device	R26C	Covered	2083.09	2083.09	0 090	2	0	2	1	0
43774-00	Lap rmvl gastr adj all parts	R26C	Covered	1566.71	1566.71	0 090	2	0	2	1	0
43775-00	Lap sleeve gastrectomy	R26C	Covered	1745.05	1745.05	0 090	2	0	2	1	0

43235

43800-00	Reconstruction of pylorus	R26C	Covered	1514.35	1514.35	0 090	2	0	2	1	0
43810-00	Fusion of stomach and bowel	R26C	Covered	1650.52	1650.52	0 090	2	0	2	1	0
43820-00	Fusion of stomach and bowel	R26C	Covered	2188.68	2188.68	0 090	2	0	2	1	0
43825-00	Fusion of stomach and bowel	R26C	Covered	2126.45	2126.45	0 090	2	0	2	1	0
43830-00	Place gastrostomy tube	R26C	Covered	1168.13	1168.13	0 090	2	0	2	1	0
0298U-00	Whole transcriptome sequencing of paired tumor and normal DNA specimens, in	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
43832-00	Place gastrostomy tube	R26C	Covered	1705.74	1705.74	0 090	2	0	2	1	0
43840-00	Repair of stomach lesion	R26C	Covered	2209.88	2209.88	0 090	2	0	2	1	0
43842-00	V-band gastropasty	RCMS	Covered	2019.91	2019.91	9 090	9	9	9	9	9
43843-00	Gastropasty w/o v-band	R26C	Covered	2085.85	2085.85	0 090	2	0	2	2	0
43845-00	Gastropasty duodenal switch	R26C	Covered	3161.49	3161.49	0 090	2	0	2	1	0
43846-00	Gastric bypass for obesity	R26C	Covered	2676.59	2676.59	0 090	2	0	2	1	0
43847-00	Gastric bypass incl small i	R26C	Covered	2922.39	2922.39	0 090	2	0	2	1	0
43848-00	Revision gastropasty	R26C	Covered	3127.49	3127.49	0 090	2	0	2	1	0
43860-00	Revise stomach-bowel fusion	R26C	Covered	2649.80	2649.80	0 090	2	0	2	1	0
43865-00	Revise stomach-bowel fusion	R26C	Covered	2751.13	2751.13	0 090	2	0	2	1	0
43870-00	Repair stomach opening	R26C	Covered	1171.94	1171.94	0 090	2	0	2	1	0
43880-00	Repair stomach-bowel fistula	R26C	Covered	2590.44	2590.44	0 090	2	0	2	1	0
28899-00	Unlisted px foot/toes	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1
29799-00	Unlisted px casting/strpg	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1
43886-00	Revise gastric port open	R26C	Covered	633.76	633.76	0 090	2	0	2	1	0
43887-00	Remove gastric port open	R26C	Covered	569.95	569.95	0 090	2	0	2	1	0
43888-00	Change gastric port open	R26C	Covered	787.92	787.92	0 090	2	0	2	1	0
29999-00	Unlisted px arthroscopy	NBYR	Covered	By Report	By Report	0 YYY	2	1	0	1	1
44005-00	Freeing of bowel adhesion	R26C	Covered	1775.02	1775.02	0 090	2	0	2	1	0
44010-00	Incision of small bowel	R26C	Covered	1437.62	1437.62	0 090	2	0	2	1	0
44015-00	Insert needle cath bowel	R26C	Covered	222.41	222.41	0 ZZZ	0	0	2	1	0
44020-00	Explore small intestine	R26C	Covered	1587.32	1587.32	0 090	2	0	2	1	0
44021-00	Decompress small bowel	R26C	Covered	1582.39	1582.39	0 090	2	0	2	1	0
44025-00	Incision of large bowel	R26C	Covered	1604.11	1604.11	0 090	2	0	2	1	0
44050-00	Reduce bowel obstruction	R26C	Covered	1529.19	1529.19	0 090	2	0	2	1	0
44055-00	Correct malrotation of bowel	R26C	Covered	2403.27	2403.27	0 090	2	0	2	1	0
44100-00	Biopsy of bowel	R26C	Covered	181.51	181.51	0 000	2	0	1	0	0
44110-00	Excise intestine lesion(s)	R26C	Covered	1413.62	1413.62	0 090	2	0	2	1	0
44111-00	Excision of bowel lesion(s)	R26C	Covered	1615.45	1615.45	0 090	2	0	2	1	0
44120-00	Removal of small intestine	R26C	Covered	1982.00	1982.00	0 090	2	0	2	1	0
44121-00	Removal of small intestine	R26C	Covered	380.98	380.98	0 ZZZ	0	0	2	1	0
44125-00	Removal of small intestine	R26C	Covered	1923.36	1923.36	0 090	2	0	2	1	0
44126-00	Enterectomy w/o taper cong	R26C	Covered	3959.49	3959.49	0 090	2	0	2	1	0
44127-00	Enterectomy w/taper cong	R26C	Covered	4558.28	4558.28	0 090	2	0	2	1	0
44128-00	Enterectomy cong add-on	R26C	Covered	380.11	380.11	0 ZZZ	0	0	2	1	0
44130-00	Bowel to bowel fusion	R26C	Covered	2147.41	2147.41	0 090	2	0	2	1	0
30999-00	Unlisted procedure nose	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1
31299-00	Unlisted px accessory sinus	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1
31599-00	Unlisted procedure larynx	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1
31899-00	Unlisted px trachea bronchi	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1
32850-00	Donor pneumonectomy	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
44139-00	Mobilization of colon	R26C	Covered	191.58	191.58	0 ZZZ	0	0	2	1	0
44140-00	Partial removal of colon	R26C	Covered	2189.90	2189.90	0 090	2	0	2	1	0
44141-00	Partial removal of colon	R26C	Covered	2961.88	2961.88	0 090	2	0	2	1	0
44143-00	Partial removal of colon	R26C	Covered	2690.13	2690.13	0 090	2	0	2	1	0
44144-00	Partial removal of colon	R26C	Covered	2873.21	2873.21	0 090	2	0	2	1	0
44145-00	Partial removal of colon	R26C	Covered	2704.47	2704.47	0 090	2	0	2	1	0

44146-00	Partial removal of colon	R26C	Covered	3444.59	3444.59	0 090	2	0	2	1	0	
44147-00	Partial removal of colon	R26C	Covered	3130.80	3130.80	0 090	2	0	2	1	0	
44150-00	Removal of colon	R26C	Covered	3054.21	3054.21	0 090	2	0	2	1	0	
44151-00	Removal of colon/ileostomy	R26C	Covered	3481.76	3481.76	0 090	2	0	2	1	0	
44155-00	Removal of colon/ileostomy	R26C	Covered	3420.11	3420.11	0 090	2	0	2	1	0	
44156-00	Removal of colon/ileostomy	R26C	Covered	3720.16	3720.16	0 090	2	0	2	1	0	
44157-00	Colectomy w/ileoanal anast	R26C	Covered	3535.28	3535.28	0 090	2	0	2	1	0	
44158-00	Colectomy w/neo-rectum pouch	R26C	Covered	3620.62	3620.62	0 090	2	0	2	1	0	
44160-00	Removal of colon	R26C	Covered	2031.83	2031.83	0 090	2	0	2	1	0	
44180-00	Lap enterolysis	R26C	Covered	1502.62	1502.62	0 090	2	0	2	1	0	
44186-00	Lap jejunostomy	R26C	Covered	1072.62	1072.62	0 090	2	0	2	1	0	
44187-00	Lap ileo/jejuno-stomy	R26C	Covered	1837.32	1837.32	0 090	2	0	2	1	0	
44188-00	Lap colostomy	R26C	Covered	2019.85	2019.85	0 090	2	0	2	1	0	
44202-00	Lap enterectomy	R26C	Covered	2260.77	2260.77	0 090	2	0	2	1	0	
44203-00	Lap resect s/intestine addl	R26C	Covered	380.24	380.24	0 ZZZ	0	0	2	1	0	
44204-00	Laparo partial colectomy	R26C	Covered	2515.68	2515.68	0 090	2	0	2	1	0	
44205-00	Lap colectomy part w/ileum	R26C	Covered	2194.92	2194.92	0 090	2	0	2	1	0	
44206-00	Lap part colectomy w/stoma	R26C	Covered	2846.61	2846.61	0 090	2	0	2	1	0	
44207-00	L colectomy/coloproctostomy	R26C	Covered	2975.87	2975.87	0 090	2	0	2	1	0	
44208-00	L colectomy/coloproctostomy	R26C	Covered	3251.78	3251.78	0 090	2	0	2	1	0	
44210-00	Laparo total proctocolectomy	R26C	Covered	2958.26	2958.26	0 090	2	0	2	1	0	
44211-00	Lap colectomy w/proctectomy	R26C	Covered	3608.58	3608.58	0 090	2	0	2	1	0	
44212-00	Laparo total proctocolectomy	R26C	Covered	3403.52	3403.52	0 090	2	0	2	1	0	
44213-00	Lap mobil splenic fl add-on	R26C	Covered	300.16	300.16	0 ZZZ	0	0	2	1	0	
44227-00	Lap close enterostomy	R26C	Covered	2706.82	2706.82	0 090	2	0	2	1	0	
32999-00	Unlisted px lungs & pleura	NBYR	Covered	By Report	By Report	0 YYY	2	0	1	1	1	
44300-00	Open bowel to skin	R26C	Covered	1378.88	1378.88	0 090	2	0	2	1	0	
44310-00	Ileostomy/jejunostomy	R26C	Covered	1714.46	1714.46	0 090	2	0	2	1	0	
44312-00	Revision of ileostomy	R26C	Covered	1010.43	1010.43	0 090	2	0	0	0	0	
44314-00	Revision of ileostomy	R26C	Covered	1682.39	1682.39	0 090	2	0	2	1	0	
44316-00	Devise bowel pouch	R26C	Covered	2289.69	2289.69	0 090	2	0	2	1	0	
44320-00	Colostomy	R26C	Covered	1978.93	1978.93	0 090	2	0	2	1	0	
44322-00	Colostomy with biopsies	R26C	Covered	1696.98	1696.98	0 090	2	0	2	1	0	
44340-00	Revision of colostomy	R26C	Covered	1067.39	1067.39	0 090	2	0	1	1	0	
44345-00	Revision of colostomy	R26C	Covered	1747.08	1747.08	0 090	2	0	2	1	0	
44346-00	Revision of colostomy	R26C	Covered	1955.84	1955.84	0 090	2	0	2	1	0	
44360-00	Small bowel endoscopy	R26C	Covered	247.19	247.19	0 000	2	0	1	0	0	
44361-00	Small bowel endoscopy/biopsy	R26C	Covered	272.11	272.11	0 000	3	0	1	0	0	44360
44363-00	Small bowel endoscopy	R26C	Covered	328.23	328.23	0 000	3	0	0	0	0	44360
44364-00	Small bowel endoscopy	R26C	Covered	350.03	350.03	0 000	3	0	0	0	0	44360
44365-00	Small bowel endoscopy	R26C	Covered	312.07	312.07	0 000	3	0	0	0	0	44360
44366-00	Small bowel endoscopy	R26C	Covered	410.49	410.49	0 000	3	0	1	0	0	44360
44369-00	Small bowel endoscopy	R26C	Covered	419.85	419.85	0 000	3	0	0	0	0	44360
44370-00	Small bowel endoscopy/stent	R26C	Covered	457.76	457.76	0 000	3	0	0	0	0	44360
44372-00	Small bowel endoscopy	R26C	Covered	406.29	406.29	0 000	3	0	1	0	0	44360
44373-00	Small bowel endoscopy	R26C	Covered	325.79	325.79	0 000	3	0	1	0	0	44360
44376-00	Small bowel endoscopy	R26C	Covered	485.21	485.21	0 000	2	0	0	0	0	
44377-00	Small bowel endoscopy/biopsy	R26C	Covered	509.11	509.11	0 000	3	0	0	0	0	44376
44378-00	Small bowel endoscopy	R26C	Covered	654.98	654.98	0 000	3	0	0	0	0	44376
44379-00	S bowel endoscope w/stent	R26C	Covered	698.56	698.56	0 000	3	0	0	0	0	44376
44380-00	Small bowel endoscopy br/wa	R26C	Covered	372.27	100.61	0 000	2	0	1	0	0	
44381-00	Small bowel endoscopy br/wa	R26C	Covered	1867.95	146.82	0 000	3	0	1	0	0	44380
44382-00	Small bowel endoscopy	R26C	Covered	564.03	128.74	0 000	3	0	1	0	0	44380
44384-00	Small bowel endoscopy	R26C	Covered	258.96	258.96	0 000	3	0	1	0	0	44380

44385-00	Endoscopy of bowel pouch	R26C	Covered	404.90	125.48	0 000	2	0	1	0	0
44386-00	Endoscopy bowel pouch/biop	R26C	Covered	584.28	154.16	0 000	2	0	1	0	0
44388-00	Colonoscopy thru stoma spx	R26C	Covered	577.97	263.63	0 000	2	0	1	0	0
44388-53	Colonoscopy thru stoma spx	R26C	Covered	288.69	132.16	0 000	2	0	1	0	0
44389-00	Colonoscopy with biopsy	R26C	Covered	761.74	292.16	0 000	3	0	1	0	0 44388
44390-00	Colonoscopy for foreign body	R26C	Covered	742.95	360.04	0 000	3	0	1	0	0 44388
44391-00	Colonoscopy for bleeding	R26C	Covered	1187.44	393.17	0 000	3	0	1	0	0 44388
44392-00	Colonoscopy & polypectomy	R26C	Covered	705.71	332.51	0 000	3	0	1	0	0 44388
44394-00	Colonoscopy w/snare	R26C	Covered	801.15	382.02	0 000	3	0	1	0	0 44388
44401-00	Colonoscopy with ablation	R26C	Covered	4491.73	414.30	0 000	3	0	1	0	0 44388
44402-00	Colonoscopy w/stent plcmt	R26C	Covered	446.72	446.72	0 000	3	0	1	0	0 44388
44403-00	Colonoscopy w/resection	R26C	Covered	518.50	518.50	0 000	3	0	1	0	0 44388
44404-00	Colonoscopy w/injection	R26C	Covered	779.20	292.16	0 000	3	0	1	0	0 44388
44405-00	Colonoscopy w/dilation	R26C	Covered	1037.06	313.93	0 000	3	0	1	0	0 44388
44406-00	Colonoscopy w/ultrasound	R26C	Covered	392.46	392.46	0 000	3	0	1	0	0 44388
44407-00	Colonoscopy w/ndl aspir/bx	R26C	Covered	469.78	469.78	0 000	3	0	1	0	0 44388
44408-00	Colonoscopy w/decompression	R26C	Covered	396.19	396.19	0 000	3	0	1	0	0 44388
44500-00	Intro gastrointestinal tube	R26C	Covered	32.30	32.30	0 000	0	0	0	0	0
44602-00	Suture small intestine	R26C	Covered	2263.38	2263.38	0 090	2	0	2	1	0
44603-00	Suture small intestine	R26C	Covered	2622.47	2622.47	0 090	2	0	2	1	0
44604-00	Suture large intestine	R26C	Covered	1716.66	1716.66	0 090	2	0	2	1	0
44605-00	Repair of bowel lesion	R26C	Covered	2100.48	2100.48	0 090	2	0	2	1	0
44615-00	Intestinal stricturoplasty	R26C	Covered	1753.98	1753.98	0 090	2	0	2	1	0
44620-00	Repair bowel opening	R26C	Covered	1432.24	1432.24	0 090	2	0	2	1	0
44625-00	Repair bowel opening	R26C	Covered	1675.95	1675.95	0 090	2	0	2	1	0
44626-00	Repair bowel opening	R26C	Covered	2584.61	2584.61	0 090	2	0	2	1	0
44640-00	Repair bowel-skin fistula	R26C	Covered	2274.50	2274.50	0 090	2	0	2	1	0
44650-00	Repair bowel fistula	R26C	Covered	2353.15	2353.15	0 090	2	0	2	1	0
44660-00	Repair bowel-bladder fistula	R26C	Covered	2215.78	2215.78	0 090	2	0	2	1	0
44661-00	Repair bowel-bladder fistula	R26C	Covered	2522.81	2522.81	0 090	2	0	2	1	0
44680-00	Surgical revision intestine	R26C	Covered	1743.31	1743.31	0 090	2	0	2	1	0
44700-00	Suspend bowel w/prosthesis	R26C	Covered	1680.55	1680.55	0 090	2	0	2	1	0
44701-00	Intraop colon lavage add-on	R26C	Covered	265.87	265.87	0 ZZZ	0	0	2	1	0
44705-00	Prepare fecal microbiota	RCMS	Covered	203.44	122.59	9 XXX	9	9	9	9	9
33928-00	Rmvl & rplcmt tot hrt sys	NBYR	Covered	By Report	By Report	0 XXX	2	0	2	0	0
44720-00	Prep donor intestine/venous	R26C	Covered	428.29	428.29	0 XXX	2	0	2	1	0
44721-00	Prep donor intestine/artery	R26C	Covered	599.47	599.47	0 XXX	2	0	2	1	0
33929-00	Rmvl rplcmt hrt sys f/trnspl	NBYR	Covered	By Report	By Report	0 ZZZ	0	0	2	0	0
44800-00	Excision of bowel pouch	R26C	Covered	1293.90	1293.90	0 090	2	0	2	1	0
44820-00	Excision of mesentery lesion	R26C	Covered	1392.55	1392.55	0 090	2	0	2	1	0
44850-00	Repair of mesentery	R26C	Covered	1237.20	1237.20	0 090	2	0	2	1	0
33930-00	Removal of donor heart/lung	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
44900-00	Drain appendix abscess open	R26C	Covered	1284.37	1284.37	0 090	2	0	2	1	0
44950-00	Appendectomy	R26C	Covered	1051.76	1051.76	0 090	2	0	2	1	0
44955-00	Appendectomy add-on	R26C	Covered	134.05	134.05	0 ZZZ	0	0	2	1	0
44960-00	Appendectomy	R26C	Covered	1430.08	1430.08	0 090	2	0	2	1	0
44970-00	Laparoscopy appendectomy	R26C	Covered	998.70	998.70	0 090	2	0	2	2	0
33933-00	Prepare donor heart/lung	NBYR	Covered	By Report	By Report	0 XXX	2	0	2	1	0
45000-00	Drainage of pelvic abscess	R26C	Covered	742.87	742.87	0 090	2	0	2	1	0
45005-00	Drainage of rectal abscess	R26C	Covered	574.70	284.94	0 010	2	0	1	0	0
45020-00	Drainage of rectal abscess	R26C	Covered	977.43	977.43	0 090	2	0	1	0	0
45100-00	Biopsy of rectum	R26C	Covered	533.03	533.03	0 090	2	0	1	0	0
45108-00	Removal of anorectal lesion	R26C	Covered	636.24	636.24	0 090	2	0	1	1	0
45110-00	Removal of rectum	R26C	Covered	3048.14	3048.14	0 090	2	0	2	1	0

45111-00	Partial removal of rectum	R26C	Covered	1817.40	1817.40	0 090	2	0	2	1	0	
45112-00	Removal of rectum	R26C	Covered	3082.46	3082.46	0 090	2	0	2	1	0	
45113-00	Partial proctectomy	R26C	Covered	3179.97	3179.97	0 090	2	0	2	1	0	
45114-00	Partial removal of rectum	R26C	Covered	2922.95	2922.95	0 090	2	0	2	1	0	
45116-00	Partial removal of rectum	R26C	Covered	2635.86	2635.86	0 090	2	0	2	1	0	
45119-00	Remove rectum w/reservoir	R26C	Covered	3202.47	3202.47	0 090	2	0	2	1	0	
45120-00	Removal of rectum	R26C	Covered	2595.13	2595.13	0 090	2	0	2	1	0	
45121-00	Removal of rectum and colon	R26C	Covered	2824.80	2824.80	0 090	2	0	2	1	0	
45123-00	Partial proctectomy	R26C	Covered	1883.21	1883.21	0 090	2	0	2	1	0	
45126-00	Pelvic exenteration	R26C	Covered	4600.59	4600.59	0 090	2	0	2	1	0	
45130-00	Excision of rectal prolapse	R26C	Covered	1830.79	1830.79	0 090	2	0	2	1	0	
45135-00	Excision of rectal prolapse	R26C	Covered	2230.97	2230.97	0 090	2	0	2	1	0	
45136-00	Excise ileoanal reservoir	R26C	Covered	3057.86	3057.86	0 090	2	0	2	1	0	
45150-00	Excision of rectal stricture	R26C	Covered	717.77	717.77	0 090	2	0	0	0	0	
45160-00	Excision of rectal lesion	R26C	Covered	1683.65	1683.65	0 090	2	0	2	1	0	
45171-00	Exc rect tum transanal part	R26C	Covered	1077.74	1077.74	0 090	2	0	2	1	0	
45172-00	Exc rect tum transanal full	R26C	Covered	1424.59	1424.59	0 090	2	0	2	1	0	
45190-00	Destruction rectal tumor	R26C	Covered	1220.95	1220.95	0 090	2	0	1	1	0	
45300-00	Proctosigmoidoscopy dx	R26C	Covered	238.10	82.22	0 000	2	0	1	0	0	
45303-00	Proctosigmoidoscopy dilate	R26C	Covered	1795.71	145.73	0 000	3	0	1	0	0	45300
45305-00	Proctosigmoidoscopy w/bx	R26C	Covered	335.38	124.52	0 000	3	0	1	0	0	45300
45307-00	Proctosigmoidoscopy fb	R26C	Covered	384.37	164.46	0 000	3	0	0	0	0	45300
45308-00	Proctosigmoidoscopy removal	R26C	Covered	371.68	138.83	0 000	3	0	1	0	0	45300
45309-00	Proctosigmoidoscopy removal	R26C	Covered	382.38	146.94	0 000	3	0	1	0	0	45300
45315-00	Proctosigmoidoscopy removal	R26C	Covered	409.35	172.62	0 000	3	0	1	0	0	45300
45317-00	Proctosigmoidoscopy bleed	R26C	Covered	403.43	188.69	0 000	3	0	1	0	0	45300
45320-00	Proctosigmoidoscopy ablate	R26C	Covered	400.32	171.36	0 000	3	0	1	0	0	45300
45321-00	Proctosigmoidoscopy volvul	R26C	Covered	168.89	168.89	0 000	3	0	1	0	0	45300
45327-00	Proctosigmoidoscopy w/stent	R26C	Covered	190.18	190.18	0 000	3	0	1	0	0	45300
45330-00	Diagnostic sigmoidoscopy	R26C	Covered	351.09	98.84	0 000	2	0	1	0	0	
45331-00	Sigmoidoscopy and biopsy	R26C	Covered	541.51	125.62	0 000	3	0	1	0	0	45330
45332-00	Sigmoidoscopy w/fb removal	R26C	Covered	516.88	181.19	0 000	3	0	1	0	0	45330
45333-00	Sigmoidoscopy & polypectomy	R26C	Covered	615.37	160.67	0 000	3	0	1	0	0	45330
45334-00	Sigmoidoscopy for bleeding	R26C	Covered	927.31	202.89	0 000	3	0	1	0	0	45330
45335-00	Sigmoidoscopy w/submuc inj	R26C	Covered	550.91	116.26	0 000	3	0	1	0	0	45330
45337-00	Sigmoidoscopy & decompress	R26C	Covered	194.24	194.24	0 000	3	0	1	0	0	45330
45338-00	Sigmoidoscopy w/tumr remove	R26C	Covered	556.59	206.67	0 000	3	0	1	0	0	45330
45340-00	Sig w/tndsc balloon dilation	R26C	Covered	864.63	135.03	0 000	3	0	1	0	0	45330
45341-00	Sigmoidoscopy w/ultrasound	R26C	Covered	214.12	214.12	0 000	3	0	1	0	0	45330
45342-00	Sigmoidoscopy w/us guide bx	R26C	Covered	290.38	290.38	0 000	3	0	1	0	0	45330
45346-00	Sigmoidoscopy w/ablation	R26C	Covered	4355.94	274.63	0 000	3	0	1	0	0	45330
45347-00	Sigmoidoscopy w/plcmt stent	R26C	Covered	263.90	263.90	0 000	3	0	1	0	0	45330
45349-00	Sigmoidoscopy w/resection	R26C	Covered	339.42	339.42	0 000	3	0	1	0	0	45330
45350-00	Sgmdsc w/band ligation	R26C	Covered	1271.96	173.69	0 000	3	0	1	0	0	45330
45378-00	Diagnostic colonoscopy	R26C	Covered	621.19	314.60	0 000	2	0	1	0	0	
45378-53	Diagnostic colonoscopy	R26C	Covered	310.27	157.63	0 000	2	0	1	0	0	
45379-00	Colonoscopy w/fb removal	R26C	Covered	793.61	406.82	0 000	3	0	1	0	0	45378
45380-00	Colonoscopy and biopsy	R26C	Covered	799.92	342.63	0 000	3	0	1	0	0	45378
45381-00	Colonoscopy submucous njx	R26C	Covered	817.39	341.99	0 000	3	0	1	0	0	45378
45382-00	Colonoscopy w/control bleed	R26C	Covered	1233.39	441.70	0 000	3	0	1	0	0	45378
45384-00	Colonoscopy w/lesion removal	R26C	Covered	892.57	382.89	0 000	3	0	1	0	0	45378
45385-00	Colonoscopy w/lesion removal	R26C	Covered	828.24	433.05	0 000	3	0	1	0	0	45378
45386-00	Colonoscopy w/balloon dilat	R26C	Covered	1133.69	360.76	0 000	3	0	1	0	0	45378
45388-00	Colonoscopy w/ablation	R26C	Covered	4632.49	458.69	0 000	3	0	1	0	0	45378

45389-00	Colonoscopy w/stent plcmt	R26C	Covered	493.50	493.50	0 000	3	0	1	0	0	45378
45390-00	Colonoscopy w/resection	R26C	Covered	566.48	566.48	0 000	3	0	1	0	0	45378
45391-00	Colonoscopy w/endscope us	R26C	Covered	440.44	440.44	0 000	3	0	1	0	0	45378
45392-00	Colonoscopy w/endoscopic fnb	R26C	Covered	518.50	518.50	0 000	3	0	1	0	0	45378
45393-00	Colonoscopy w/decompression	R26C	Covered	424.45	424.45	0 000	3	0	1	0	0	45378
45395-00	Lap removal of rectum	R26C	Covered	3278.25	3278.25	0 090	2	0	2	1	0	
45397-00	Lap remove rectum w/pouch	R26C	Covered	3568.93	3568.93	0 090	2	0	2	1	0	
45398-00	Colonoscopy w/band ligation	R26C	Covered	1531.79	395.36	0 000	3	0	1	0	0	45378
33940-00	Removal of donor heart	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9	
45400-00	Laparoscopic proc	R26C	Covered	1911.73	1911.73	0 090	2	0	2	1	0	
45402-00	Lap proctopexy w/sig resect	R26C	Covered	2521.86	2521.86	0 090	2	0	2	1	0	
33999-00	Unlisted px cardiac surgery	NBYR	Covered	By Report	By Report	0 YYY	2	0	2	1	1	
45500-00	Repair of rectum	R26C	Covered	963.70	963.70	0 090	2	0	0	0	0	
45505-00	Repair of rectum	R26C	Covered	1053.18	1053.18	0 090	2	0	1	0	0	
45520-00	Treatment of rectal prolapse	R26C	Covered	308.00	72.57	0 000	2	0	1	0	0	
45540-00	Correct rectal prolapse	R26C	Covered	1775.85	1775.85	0 090	2	0	2	1	0	
45541-00	Correct rectal prolapse	R26C	Covered	1590.52	1590.52	0 090	2	0	2	1	0	
45550-00	Repair rectum/remove sigmoid	R26C	Covered	2442.36	2442.36	0 090	2	0	2	1	0	
45560-00	Repair of rectocele	R26C	Covered	1187.61	1187.61	0 090	2	0	2	1	0	
45562-00	Exploration/repair of rectum	R26C	Covered	1924.38	1924.38	0 090	2	0	2	1	0	
45563-00	Exploration/repair of rectum	R26C	Covered	2703.22	2703.22	0 090	2	0	2	1	0	
45800-00	Repair rect/bladder fistula	R26C	Covered	2075.29	2075.29	0 090	2	0	2	1	0	
45805-00	Repair fistula w/colostomy	R26C	Covered	2395.20	2395.20	0 090	2	0	2	1	0	
45820-00	Repair rectourethral fistula	R26C	Covered	2080.32	2080.32	0 090	2	0	2	1	0	
45825-00	Repair fistula w/colostomy	R26C	Covered	2513.82	2513.82	0 090	2	0	2	1	0	
45900-00	Reduction of rectal prolapse	R26C	Covered	358.01	358.01	0 010	2	0	0	0	0	
45905-00	Dilation of anal sphincter	R26C	Covered	298.10	298.10	0 010	2	0	1	0	0	
45910-00	Dilation of rectal narrowing	R26C	Covered	336.54	336.54	0 010	2	0	1	0	0	
45915-00	Remove rectal obstruction	R26C	Covered	639.13	397.22	0 010	2	0	1	0	0	
45990-00	Surg dx exam anorectal	R26C	Covered	178.18	178.18	0 000	2	0	0	1	1	
36299-00	Unlisted px vascular njx	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1	
46020-00	Placement of seton	R26C	Covered	198.14	198.14	0 000	2	0	1	0	0	
46030-00	Removal of rectal marker	R26C	Covered	472.05	147.36	0 000	2	0	0	0	0	
46040-00	Incision of rectal abscess	R26C	Covered	992.28	743.26	0 090	2	0	1	0	0	
46045-00	Incision of rectal abscess	R26C	Covered	766.03	766.03	0 090	2	0	1	0	0	
46050-00	Incision of anal abscess	R26C	Covered	441.29	179.34	0 010	2	0	1	0	0	
46060-00	Incision of rectal abscess	R26C	Covered	855.88	855.88	0 090	2	0	1	0	0	
46070-00	Incision of anal septum	R26C	Covered	477.61	477.61	0 090	2	0	0	0	0	
46080-00	Incision of anal sphincter	R26C	Covered	520.27	268.02	0 010	2	0	1	0	0	
46083-00	Incise external hemorrhoid	R26C	Covered	383.70	193.54	0 010	2	0	1	0	0	
46200-00	Removal of anal fissure	R26C	Covered	876.28	613.03	0 090	2	0	1	0	0	
46220-00	Excise anal ext tag/papilla	R26C	Covered	464.71	213.75	0 010	2	0	1	0	0	
46221-00	Ligation of hemorrhoid(s)	R26C	Covered	521.53	344.95	0 010	2	0	1	0	0	
46230-00	Removal of anal tags	R26C	Covered	571.53	300.52	0 010	2	0	1	0	0	
46250-00	Remove ext hem groups 2+	R26C	Covered	866.29	557.12	0 090	2	0	1	0	0	
46255-00	Remove int/ext hem 1 group	R26C	Covered	937.13	618.25	0 090	2	0	1	0	0	
46257-00	Remove in/ex hem grp & fiss	R26C	Covered	744.43	744.43	0 090	2	0	1	0	0	
46258-00	Remove in/ex hem grp w/fistu	R26C	Covered	822.32	822.32	0 090	2	0	0	0	0	
46260-00	Remove in/ex hem groups 2+	R26C	Covered	835.73	835.73	0 090	2	0	1	0	0	
46261-00	Remove in/ex hem grps & fiss	R26C	Covered	925.37	925.37	0 090	2	0	1	0	0	
46262-00	Remove in/ex hem grps w/fist	R26C	Covered	994.19	994.19	0 090	2	0	1	0	0	
46270-00	Remove anal fist subq	R26C	Covered	963.39	707.90	0 090	2	0	1	0	0	
46275-00	Remove anal fist inter	R26C	Covered	1021.50	748.55	0 090	2	0	1	0	0	
46280-00	Remove anal fist complex	R26C	Covered	847.11	847.11	0 090	2	0	1	0	0	

46285-00	Remove anal fist 2 stage	R26C	Covered	1019.65	749.94	0 090	2	0	1	0	0	
46288-00	Repair anal fistula	R26C	Covered	980.38	980.38	0 090	2	0	1	0	0	
46320-00	Removal of hemorrhoid clot	R26C	Covered	392.75	198.07	0 010	2	0	1	0	0	
46500-00	Injection into hemorrhoid(s)	R26C	Covered	584.32	335.95	0 010	2	0	1	0	0	
46505-00	Chemodeneration anal musc	R26C	Covered	568.38	443.55	0 010	2	1	1	0	0	
46600-00	Diagnostic anoscopy spx	R26C	Covered	221.42	72.66	0 000	2	0	1	0	0	
	DNA gene analysis of targeted sequences in 194											
0050U-00	genes for acute myelogenous	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9	
46604-00	Anoscopy and dilation	R26C	Covered	1227.69	113.25	0 000	3	0	1	0	0	46600
46606-00	Anoscopy and biopsy	R26C	Covered	526.04	128.90	0 000	3	0	1	0	0	46600
	Measurement of transplant donor cell-free DNA in											
0118U-00	transplant recipient plasma	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9	
46608-00	Anoscopy remove for body	R26C	Covered	536.61	138.83	0 000	3	0	1	0	0	46600
46610-00	Anoscopy remove lesion	R26C	Covered	512.28	135.85	0 000	3	0	1	0	0	46600
46611-00	Anoscopy	R26C	Covered	415.65	138.81	0 000	3	0	1	0	0	46600
46612-00	Anoscopy remove lesions	R26C	Covered	612.39	155.75	0 000	3	0	1	0	0	46600
46614-00	Anoscopy control bleeding	R26C	Covered	313.14	111.34	0 000	3	0	1	0	0	46600
46615-00	Anoscopy	R26C	Covered	325.65	156.84	0 000	3	0	1	0	0	46600
46700-00	Repair of anal stricture	R26C	Covered	1140.40	1140.40	0 090	2	0	1	0	0	
46705-00	Repair of anal stricture	R26C	Covered	975.40	975.40	0 090	2	0	2	1	0	
46706-00	Repr of anal fistula w/glue	R26C	Covered	305.81	305.81	0 010	2	0	1	0	0	
46707-00	Repair anorectal fist w/plug	R26C	Covered	863.75	863.75	0 090	2	0	0	0	0	
46710-00	Repr per/vag pouch sngl proc	R26C	Covered	1828.30	1828.30	0 090	2	0	2	1	0	
46712-00	Repr per/vag pouch dbl proc	R26C	Covered	3583.10	3583.10	0 090	2	0	2	1	0	
46715-00	Rep perf anoper fistu	R26C	Covered	938.07	938.07	0 090	2	0	2	0	0	
46716-00	Rep perf anoper/vestib fistu	R26C	Covered	2071.71	2071.71	0 090	2	0	2	1	0	
46730-00	Construction of absent anus	R26C	Covered	3273.87	3273.87	0 090	2	0	2	1	0	
46735-00	Construction of absent anus	R26C	Covered	3744.34	3744.34	0 090	2	0	2	1	0	
46740-00	Construction of absent anus	R26C	Covered	3560.14	3560.14	0 090	2	0	2	1	0	
46742-00	Repair of imperforated anus	R26C	Covered	4087.44	4087.44	0 090	2	0	2	1	0	
46744-00	Repair of cloacal anomaly	R26C	Covered	5705.02	5705.02	0 090	2	0	2	1	0	
46746-00	Repair of cloacal anomaly	R26C	Covered	6271.59	6271.59	0 090	2	0	2	1	0	
46748-00	Repair of cloacal anomaly	R26C	Covered	6783.96	6783.96	0 090	2	0	2	1	0	
46750-00	Repair of anal sphincter	R26C	Covered	1287.33	1287.33	0 090	2	0	2	1	0	
46751-00	Repair of anal sphincter	R26C	Covered	1128.18	1128.18	0 090	2	0	2	1	0	
46753-00	Reconstruction of anus	R26C	Covered	1038.76	1038.76	0 090	2	0	1	0	0	
46754-00	Removal of suture from anus	R26C	Covered	645.35	438.38	0 010	2	0	0	0	0	
46760-00	Repair of anal sphincter	R26C	Covered	1928.09	1928.09	0 090	2	0	2	1	0	
46761-00	Repair of anal sphincter	R26C	Covered	1558.94	1558.94	0 090	2	0	2	1	0	
46900-00	Destruction anal lesion(s)	R26C	Covered	445.89	245.38	0 010	2	0	1	0	0	
46910-00	Destruction anal lesion(s)	R26C	Covered	488.86	237.90	0 010	2	0	1	0	0	
46916-00	Cryosurgery anal lesion(s)	R26C	Covered	487.74	256.19	0 010	2	0	1	0	0	
46917-00	Laser surgery anal lesions	R26C	Covered	836.10	226.81	0 010	2	0	1	0	0	
46922-00	Excision of anal lesion(s)	R26C	Covered	581.54	240.68	0 010	2	0	1	0	0	
46924-00	Destruction anal lesion(s)	R26C	Covered	1043.41	316.41	0 010	2	0	1	0	0	
46930-00	Destroy internal hemorrhoids	R26C	Covered	401.64	276.16	0 090	2	0	0	0	0	
46940-00	Treatment of anal fissure	R26C	Covered	490.47	252.45	0 010	2	0	1	0	0	
46942-00	Treatment of anal fissure	R26C	Covered	469.38	227.48	0 010	2	0	0	0	0	
46945-00	Int hrhc lig 1 hroid w/o img	R26C	Covered	613.34	613.34	0 090	2	0	1	0	0	
46946-00	Int hrhc lig 2+hroid w/o img	R26C	Covered	682.40	682.40	0 090	2	0	1	0	0	
46947-00	Hemorrhoidopexy by stapling	R26C	Covered	667.04	667.04	0 090	2	0	1	0	0	
	Rare diseases genetic testing of complete DNA of											
0213U-00	relative of affected person in	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9	
37195-00	Thrombolytic therapy stroke	NBYR	Covered	By Report	By Report	5 XXX	0	0	0	0	0	

47000-00	Needle biopsy of liver	R26C	Covered	560.96	150.24	0 000	2	0	1	0	0
47001-00	Needle biopsy liver add-on	R26C	Covered	162.97	162.97	0 ZZZ	0	0	1	1	0
47010-00	Open drainage liver lesion	R26C	Covered	1989.13	1989.13	0 090	2	0	2	1	0
47015-00	Inject/aspirate liver cyst	R26C	Covered	1906.75	1906.75	0 090	2	0	2	1	0
47100-00	Wedge biopsy of liver	R26C	Covered	1412.91	1412.91	0 090	2	0	2	1	0
47120-00	Partial removal of liver	R26C	Covered	3789.73	3789.73	0 090	2	0	2	1	0
47122-00	Extensive removal of liver	R26C	Covered	5485.68	5485.68	0 090	2	0	2	1	0
47125-00	Partial removal of liver	R26C	Covered	4936.04	4936.04	0 090	2	0	2	1	0
47130-00	Partial removal of liver	R26C	Covered	5288.44	5288.44	0 090	2	0	2	1	0
37501-00	Unlisted vasc endoscopy px	NBYR	Covered	By Report	By Report	0 YYY	2	1	1	1	1
47135-00	Transplantation of liver	R26C	Covered	8723.40	8723.40	0 090	2	0	2	1	2
47140-00	Partial removal donor liver	R26C	Covered	5771.70	5771.70	0 090	2	0	2	1	2
47141-00	Partial removal donor liver	R26C	Covered	6883.99	6883.99	0 090	2	0	2	1	2
47142-00	Partial removal donor liver	R26C	Covered	7564.32	7564.32	0 090	2	0	2	1	0
47143-00	Prep donor liver whole	RMCD	Covered	206.82	206.82	0 XXX	2	0	2	1	0
47144-00	Prep donor liver 3-segment	RMCD	Covered	356.62	356.62	0 090	2	0	2	1	0
37799-00	Unlisted px vascular surgery	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1
47146-00	Prep donor liver/venous	R26C	Covered	513.49	513.49	0 XXX	2	0	2	1	0
47147-00	Prep donor liver/arterial	R26C	Covered	600.62	600.62	0 XXX	2	0	2	1	0
47300-00	Surgery for liver lesion	R26C	Covered	1865.21	1865.21	0 090	2	0	2	1	0
47350-00	Repair liver wound	R26C	Covered	2234.87	2234.87	0 090	2	0	2	1	0
47360-00	Repair liver wound	R26C	Covered	3023.08	3023.08	0 090	2	0	2	1	0
47361-00	Repair liver wound	R26C	Covered	4836.88	4836.88	0 090	2	0	2	1	0
47362-00	Repair liver wound	R26C	Covered	2357.11	2357.11	0 090	2	0	2	1	0
47370-00	Laparo ablate liver tumor rf	R26C	Covered	2041.09	2041.09	0 090	2	0	2	1	0
47371-00	Laparo ablate liver cryosurg	R26C	Covered	2043.64	2043.64	0 090	2	0	2	1	0
38129-00	Unlisted laps px spleen	NBYR	Covered	By Report	By Report	0 YYY	2	0	2	1	1
47380-00	Open ablate liver tumor rf	R26C	Covered	2353.81	2353.81	0 090	2	0	2	1	0
47381-00	Open ablate liver tumor cryo	R26C	Covered	2392.89	2392.89	0 090	2	0	2	1	0
47382-00	Percut ablate liver rf	R26C	Covered	6783.79	1238.13	0 010	2	0	1	0	0
47383-00	Perq abltj lvr cryoablation	R26C	Covered	11082.42	757.55	0 010	2	0	1	0	0
38589-00	Unlisted laps px lymphctc sys	NBYR	Covered	By Report	By Report	0 YYY	2	1	2	1	1
47400-00	Incision of liver duct	R26C	Covered	3455.30	3455.30	0 090	2	0	2	1	0
47420-00	Incision of bile duct	R26C	Covered	2184.84	2184.84	0 090	2	0	2	1	0
47425-00	Incision of bile duct	R26C	Covered	2221.94	2221.94	0 090	2	0	2	1	0
47460-00	Incise bile duct sphincter	R26C	Covered	2068.29	2068.29	0 090	2	0	2	1	0
47480-00	Incision of gallbladder	R26C	Covered	1463.18	1463.18	0 090	2	0	2	1	0
47490-00	Incision of gallbladder	R26C	Covered	586.47	586.47	0 010	2	0	1	0	0
47531-00	Injection for cholangiogram	R26C	Covered	794.34	120.37	0 000	2	0	1	0	0
47532-00	Injection for cholangiogram	R26C	Covered	1556.72	352.37	0 000	2	0	1	0	0
47533-00	Plmt biliary drainage cath	R26C	Covered	2161.32	440.19	0 000	2	0	1	0	0
47534-00	Plmt biliary drainage cath	R26C	Covered	2357.44	615.61	0 000	2	0	1	0	0
47535-00	Conversion ext bil drg cath	R26C	Covered	1647.46	327.99	0 000	2	0	1	0	0
47536-00	Exchange biliary drg cath	R26C	Covered	1181.85	221.35	0 000	2	0	1	0	0
47537-00	Removal biliary drg cath	R26C	Covered	916.70	163.18	0 000	2	0	1	0	0
47538-00	Perq plmt bile duct stent	R26C	Covered	7063.66	391.91	0 000	2	0	1	0	0
47539-00	Perq plmt bile duct stent	R26C	Covered	7905.89	708.30	0 000	2	0	1	0	0
47540-00	Perq plmt bile duct stent	R26C	Covered	7886.78	729.94	0 000	2	0	1	0	0
47541-00	Plmt access bil tree sm bwl	R26C	Covered	2147.73	560.48	0 000	2	0	1	0	0
47542-00	Dilate biliary duct/ampulla	R26C	Covered	918.46	225.09	0 ZZZ	0	0	1	0	0
47543-00	Endoluminal bx biliary tree	R26C	Covered	716.76	238.13	0 ZZZ	0	0	1	0	0
47544-00	Removal duct gblldr calculi	R26C	Covered	1554.76	259.22	0 ZZZ	0	0	1	0	0
47550-00	Bile duct endoscopy add-on	R26C	Covered	258.74	258.74	0 ZZZ	0	0	2	1	0
47552-00	Biliary endo perq dx w/speci	R26C	Covered	458.60	458.60	0 000	2	0	1	1	0

47553-00	Biliary endoscopy thru skin	R26C	Covered	455.64	455.64	0 000	3	0	1	0	0	47552
47554-00	Biliary endoscopy thru skin	R26C	Covered	738.44	738.44	0 000	3	0	1	1	0	47552
47555-00	Biliary endoscopy thru skin	R26C	Covered	542.23	542.23	0 000	3	0	1	0	0	47552
47556-00	Biliary endoscopy thru skin	R26C	Covered	613.97	613.97	0 000	3	0	1	0	0	47552
47562-00	Laparoscopic cholecystectomy	R26C	Covered	1089.27	1089.27	0 090	2	0	2	1	0	
47563-00	Laparo cholecystectomy/graph	R26C	Covered	1182.28	1182.28	0 090	2	0	2	1	0	
47564-00	Laparo cholecystectomy/explr	R26C	Covered	1832.82	1832.82	0 090	2	0	2	1	0	
47570-00	Laparo cholecystoenterostomy	R26C	Covered	1268.88	1268.88	0 090	2	0	2	1	0	
38999-00	Unlistd px hemic/lymphctc sys	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1	
47600-00	Removal of gallbladder	R26C	Covered	1752.31	1752.31	0 090	2	0	2	1	0	
47605-00	Removal of gallbladder	R26C	Covered	1840.38	1840.38	0 090	2	0	2	1	0	
47610-00	Removal of gallbladder	R26C	Covered	2026.53	2026.53	0 090	2	0	2	1	0	
47612-00	Removal of gallbladder	R26C	Covered	2060.62	2060.62	0 090	2	0	2	1	0	
47620-00	Removal of gallbladder	R26C	Covered	2219.96	2219.96	0 090	2	0	2	1	0	
47700-00	Exploration of bile ducts	R26C	Covered	1742.78	1742.78	0 090	2	0	2	1	0	
47701-00	Bile duct revision	R26C	Covered	2808.92	2808.92	0 090	2	0	0	0	0	
47711-00	Excision of bile duct tumor	R26C	Covered	2535.28	2535.28	0 090	2	0	2	1	0	
47712-00	Excision of bile duct tumor	R26C	Covered	3210.69	3210.69	0 090	2	0	2	1	0	
47715-00	Excision of bile duct cyst	R26C	Covered	2167.73	2167.73	0 090	2	0	2	1	0	
47720-00	Fuse gallbladder & bowel	R26C	Covered	1892.95	1892.95	0 090	2	0	2	1	0	
47721-00	Fuse upper gi structures	R26C	Covered	2205.39	2205.39	0 090	2	0	2	1	0	
47740-00	Fuse gallbladder & bowel	R26C	Covered	2140.15	2140.15	0 090	2	0	2	1	0	
47741-00	Fuse gallbladder & bowel	R26C	Covered	2396.00	2396.00	0 090	2	0	2	1	0	
47760-00	Fuse bile ducts and bowel	R26C	Covered	3642.12	3642.12	0 090	2	0	2	1	0	
47765-00	Fuse liver ducts & bowel	R26C	Covered	4844.79	4844.79	0 090	2	0	2	1	0	
47780-00	Fuse bile ducts and bowel	R26C	Covered	3981.12	3981.12	0 090	2	0	2	1	0	
47785-00	Fuse bile ducts and bowel	R26C	Covered	5187.44	5187.44	0 090	2	0	2	1	0	
47800-00	Reconstruction of bile ducts	R26C	Covered	2549.76	2549.76	0 090	2	0	2	1	0	
47801-00	Placement bile duct support	R26C	Covered	1829.66	1829.66	0 090	2	0	2	1	0	
47802-00	Fuse liver duct & intestine	R26C	Covered	2476.23	2476.23	0 090	2	0	2	1	0	
47900-00	Suture bile duct injury	R26C	Covered	2244.21	2244.21	0 090	2	0	2	1	0	
39499-00	Unlisted px mediastinum	NBYR	Covered	By Report	By Report	0 YYY	2	0	2	1	1	
48000-00	Drainage of abdomen	R26C	Covered	3026.56	3026.56	0 090	2	0	2	1	0	
48001-00	Placement of drain pancreas	R26C	Covered	3689.56	3689.56	0 090	2	0	2	1	0	
48020-00	Removal of pancreatic stone	R26C	Covered	1924.65	1924.65	0 090	2	0	2	1	0	
48100-00	Biopsy of pancreas open	R26C	Covered	1464.28	1464.28	0 090	2	0	2	1	0	
48102-00	Needle biopsy pancreas	R26C	Covered	935.97	400.42	0 010	2	0	1	0	0	
48105-00	Resect/debride pancreas	R26C	Covered	4603.49	4603.49	0 090	2	0	2	1	0	
48120-00	Removal of pancreas lesion	R26C	Covered	1808.69	1808.69	0 090	2	0	2	1	0	
48140-00	Partial removal of pancreas	R26C	Covered	2543.81	2543.81	0 090	2	0	2	1	0	
48145-00	Partial removal of pancreas	R26C	Covered	2635.88	2635.88	0 090	2	0	2	1	0	
48146-00	Pancreatectomy	R26C	Covered	3060.58	3060.58	0 090	2	0	2	1	0	
48148-00	Removal of pancreatic duct	R26C	Covered	2036.26	2036.26	0 090	2	0	2	1	0	
48150-00	Partial removal of pancreas	R26C	Covered	5028.10	5028.10	0 090	2	0	2	1	0	
48152-00	Pancreatectomy	R26C	Covered	4636.99	4636.99	0 090	2	0	2	1	0	
48153-00	Pancreatectomy	R26C	Covered	4992.27	4992.27	0 090	2	0	2	1	0	
48154-00	Pancreatectomy	R26C	Covered	4657.07	4657.07	0 090	2	0	2	1	0	
48155-00	Removal of pancreas	R26C	Covered	2972.57	2972.57	0 090	2	0	2	1	0	
39599-00	Unlisted px diaphragm	NBYR	Covered	By Report	By Report	0 YYY	2	0	2	1	1	
48400-00	Injection intraop add-on	R26C	Covered	167.40	167.40	0 ZZZ	0	0	0	0	0	
48500-00	Surgery of pancreatic cyst	R26C	Covered	1885.06	1885.06	0 090	2	0	2	1	0	
48510-00	Drain pancreatic pseudocyst	R26C	Covered	1801.64	1801.64	0 090	2	0	2	1	0	
48520-00	Fuse pancreas cyst and bowel	R26C	Covered	1786.14	1786.14	0 090	2	0	2	1	0	
48540-00	Fuse pancreas cyst and bowel	R26C	Covered	2111.06	2111.06	0 090	2	0	2	1	0	

48545-00	Pancreatorrhaphy	R26C	Covered	2185.29	2185.29	0 090	2	0	2	1	0	
48547-00	Duodenal exclusion	R26C	Covered	2883.28	2883.28	0 090	2	0	2	1	0	
48548-00	Fuse pancreas and bowel	R26C	Covered	2696.13	2696.13	0 090	2	0	2	1	0	
40799-00	Unlisted procedure lips	NBYR	Covered	By Report	By Report	0 YYY	2	0	2	1	1	
48551-00	Prep donor pancreas	RMCD	Covered	240.36	240.36	0 XXX	2	0	2	1	0	
48552-00	Prep donor pancreas/venous	R26C	Covered	368.18	368.18	0 XXX	2	0	2	1	0	
48554-00	Transpl allograft pancreas	R26C	Covered	4393.10	4393.10	0 090	2	0	2	2	2	
48556-00	Removal allograft pancreas	R26C	Covered	2137.68	2137.68	0 090	2	0	2	2	2	
40899-00	Unlisted px vestibule mouth	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1	
49000-00	Exploration of abdomen	R26C	Covered	1268.29	1268.29	0 090	2	0	2	1	0	
49002-00	Reopening of abdomen	R26C	Covered	1697.57	1697.57	0 090	2	0	2	1	0	
49010-00	Exploration behind abdomen	R26C	Covered	1498.29	1498.29	0 090	2	0	2	1	0	
49013-00	Prpertl pel pack hemrrg trma	R26C	Covered	715.56	715.56	0 000	2	0	1	0	0	
49014-00	Reexploration pelvic wound	R26C	Covered	600.84	600.84	0 000	2	0	1	0	0	
49020-00	Drainage abdom abscess open	R26C	Covered	2609.23	2609.23	0 090	2	0	2	0	0	
49040-00	Drain open abdom abscess	R26C	Covered	1645.61	1645.61	0 090	2	0	2	1	0	
49060-00	Drain open retroperi abscess	R26C	Covered	1798.61	1798.61	0 090	2	0	1	1	0	
49062-00	Drain to peritoneal cavity	R26C	Covered	1262.72	1262.72	0 090	2	0	2	1	0	
49082-00	Abd paracentesis	R26C	Covered	394.49	124.77	0 000	2	0	1	0	0	
49083-00	Abd paracentesis w/imaging	R26C	Covered	543.57	182.01	0 000	2	0	1	0	0	
49084-00	Peritoneal lavage	R26C	Covered	170.25	170.25	0 000	2	0	1	0	0	
49180-00	Biopsy abdominal mass	R26C	Covered	318.75	139.58	0 000	2	0	1	0	0	
49185-00	Sclerotx fluid collection	R26C	Covered	2374.92	200.38	0 000	0	0	1	0	0	
49203-00	Exc abd tum 5 cm or less	R26C	Covered	1973.40	1973.40	0 090	2	0	2	1	0	
49204-00	Exc abd tum over 5 cm	R26C	Covered	2507.80	2507.80	0 090	2	0	2	1	0	
49205-00	Exc abd tum over 10 cm	R26C	Covered	2871.08	2871.08	0 090	2	0	2	1	0	
49215-00	Excise sacral spine tumor	R26C	Covered	3652.08	3652.08	0 090	2	0	2	1	0	
49250-00	Excision of umbilicus	R26C	Covered	1001.18	1001.18	0 090	2	0	1	1	0	
49255-00	Removal of omentum	R26C	Covered	1331.86	1331.86	0 090	2	0	2	1	0	
49320-00	Diag laparo separate proc	R26C	Covered	549.71	549.71	0 010	2	0	2	0	0	
49321-00	Laparoscopy biopsy	R26C	Covered	577.65	577.65	0 010	3	0	2	2	0	49320
49322-00	Laparoscopy aspiration	R26C	Covered	624.09	624.09	0 010	3	0	2	2	0	49320
49323-00	Laparo drain lymphocele	R26C	Covered	1066.06	1066.06	0 090	3	0	2	2	0	49320
49324-00	Lap insert tunnel ip cath	R26C	Covered	632.23	632.23	0 010	3	0	2	2	0	49320
49325-00	Lap revision perm ip cath	R26C	Covered	672.29	672.29	0 010	3	0	2	2	0	49320
49326-00	Lap w/omentopexy add-on	R26C	Covered	294.54	294.54	0 ZZZ	0	0	2	1	0	
49327-00	Lap ins device for rt	R26C	Covered	203.80	203.80	0 ZZZ	0	0	2	1	0	
41599-00	Unlisted px tongue flr mouth	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1	
49400-00	Air injection into abdomen	R26C	Covered	267.90	150.83	0 000	2	0	1	0	0	
49402-00	Remove foreign body adbomen	R26C	Covered	1400.33	1400.33	0 090	2	0	1	1	0	
49405-00	Image cath fluid colxn visc	R26C	Covered	1648.56	327.15	0 000	2	0	1	0	0	
49406-00	Image cath fluid peri/retro	R26C	Covered	1649.21	327.15	0 000	2	0	1	0	0	
49407-00	Image cath fluid trns/vgnl	R26C	Covered	1395.71	343.37	0 000	2	0	1	0	0	
49411-00	Ins mark abd/pel for rt perq	R26C	Covered	892.55	317.55	0 000	2	0	0	0	0	
49412-00	Ins device for rt guide open	R26C	Covered	128.58	128.58	0 ZZZ	0	0	0	1	0	
49418-00	Insert tun ip cath perc	R26C	Covered	1829.31	337.15	0 000	2	0	0	0	0	
49419-00	Insert tun ip cath w/port	R26C	Covered	687.24	687.24	0 090	2	0	1	0	0	
49421-00	Ins tun ip cath for dial opn	R26C	Covered	358.31	358.31	0 000	2	0	1	0	0	
49422-00	Remove tunneled ip cath	R26C	Covered	353.02	353.02	0 000	2	0	1	0	0	
49423-00	Exchange drainage catheter	R26C	Covered	1099.79	117.95	0 000	2	0	0	0	0	
49424-00	Assess cyst contrast inject	R26C	Covered	338.28	62.74	0 000	2	0	0	0	0	
49425-00	Insert abdomen-venous drain	R26C	Covered	1286.00	1286.00	0 090	2	0	2	1	0	
49426-00	Revise abdomen-venous shunt	R26C	Covered	1107.16	1107.16	0 090	2	0	1	0	0	
49427-00	Injection abdominal shunt	R26C	Covered	63.67	63.67	0 000	2	0	0	0	0	

49428-00	Ligation of shunt	R26C	Covered	706.56	706.56	0 010	2	0	1	0	0
49429-00	Removal of shunt	R26C	Covered	746.39	746.39	0 010	2	0	1	0	0
49435-00	Insert subq exten to ip cath	R26C	Covered	183.38	183.38	0 ZZZ	0	0	2	1	0
49436-00	Embedded ip cath exit-site	R26C	Covered	988.07	310.87	0 010	2	0	2	1	0
49440-00	Place gastrostomy tube perc	R26C	Covered	1543.45	343.64	0 010	2	0	0	0	0
49441-00	Place duod/jej tube perc	R26C	Covered	1776.38	401.28	0 010	2	0	0	0	0
49442-00	Place cecostomy tube perc	R26C	Covered	1477.80	357.55	0 010	2	0	0	0	0
49446-00	Change g-tube to g-j perc	R26C	Covered	1488.90	243.81	0 000	2	0	0	0	0
49450-00	Replace g/c tube perc	R26C	Covered	1118.89	109.24	0 000	2	0	0	0	0
49451-00	Replace duod/jej tube perc	R26C	Covered	1192.29	147.70	0 000	2	0	0	0	0
49452-00	Replace g-j tube perc	R26C	Covered	1441.68	227.63	0 000	2	0	0	0	0
49460-00	Fix g/colon tube w/device	R26C	Covered	1383.61	84.83	0 000	2	0	0	0	0
49465-00	Fluoro exam of g/colon tube	R26C	Covered	257.23	51.55	0 000	2	0	0	0	0
49491-00	Rpr hern preemie reduc	R26C	Covered	1316.82	1316.82	0 090	2	1	2	1	0
49492-00	Rpr ing hern preemie blocked	R26C	Covered	1572.93	1572.93	0 090	2	1	2	1	0
49495-00	Rpr ing hernia baby reduc	R26C	Covered	681.21	681.21	0 090	2	1	2	1	0
49496-00	Rpr ing hernia baby blocked	R26C	Covered	1023.12	1023.12	0 090	2	1	2	1	0
49500-00	Rpr ing hernia init reduce	R26C	Covered	704.22	704.22	0 090	2	1	2	1	0
49501-00	Rpr ing hernia init blocked	R26C	Covered	1006.45	1006.45	0 090	2	1	2	1	0
49505-00	Prp i/hern init reduc >5 yr	R26C	Covered	871.65	871.65	0 090	2	1	2	1	0
49507-00	Prp i/hern init block >5 yr	R26C	Covered	977.18	977.18	0 090	2	1	2	1	0
49520-00	Rerepair ing hernia reduce	R26C	Covered	1047.29	1047.29	0 090	2	1	2	1	0
49521-00	Rerepair ing hernia blocked	R26C	Covered	1180.90	1180.90	0 090	2	1	2	1	0
49525-00	Repair ing hernia sliding	R26C	Covered	952.39	952.39	0 090	2	1	2	1	0
49540-00	Repair lumbar hernia	R26C	Covered	1111.41	1111.41	0 090	2	1	2	1	0
49550-00	Rpr rem hernia init reduce	R26C	Covered	959.37	959.37	0 090	2	1	2	1	0
49553-00	Rpr fem hernia init blocked	R26C	Covered	1047.97	1047.97	0 090	2	1	2	1	0
49555-00	Rerepair fem hernia reduce	R26C	Covered	1001.20	1001.20	0 090	2	1	2	1	0
49557-00	Rerepair fem hernia blocked	R26C	Covered	1190.19	1190.19	0 090	2	1	2	1	0
49591-00	Rpr aa hrn 1st < 3 cm rdc	R26C	Covered	550.37	550.37	0 000	2	0	2	1	0
49592-00	Rpr aa hrn 1st < 3 ncr/strn	R26C	Covered	760.31	760.31	0 000	2	0	2	1	0
49593-00	Rpr aa hrn 1st 3-10 rdc	R26C	Covered	915.72	915.72	0 000	2	0	2	1	0
49594-00	Rpr aa hrn 1st 3-10 ncr/strn	R26C	Covered	1188.47	1188.47	0 000	2	0	2	1	0
49595-00	Rpr aa hrn 1st > 10 rdc	R26C	Covered	1230.91	1230.91	0 000	2	0	2	1	0
49596-00	Rpr aa hrn 1st > 10 ncr/strn	R26C	Covered	1633.53	1633.53	0 000	2	0	2	1	0
49600-00	Repair umbilical lesion	R26C	Covered	1212.05	1212.05	0 090	2	0	2	1	0
49605-00	Repair umbilical lesion	R26C	Covered	7798.79	7798.79	0 090	2	0	2	1	0
49606-00	Repair umbilical lesion	R26C	Covered	1838.83	1838.83	0 090	2	0	2	1	0
49610-00	Repair umbilical lesion	R26C	Covered	1145.83	1145.83	0 090	2	0	2	1	0
49611-00	Repair umbilical lesion	R26C	Covered	1016.18	1016.18	0 090	2	0	2	1	0
49613-00	Rpr aa hrn rcr < 3 rdc	R26C	Covered	678.83	678.83	0 000	2	0	2	1	0
49614-00	Rpr aa hrn rcr < 3 ncr/strn	R26C	Covered	913.73	913.73	0 000	2	0	2	1	0
49615-00	Rpr aa hrn rcr 3-10 rdc	R26C	Covered	1022.27	1022.27	0 000	2	0	2	1	0
49616-00	Rpr aa hrn rcr 3-10 ncr/strn	R26C	Covered	1368.30	1368.30	0 000	2	0	2	1	0
49617-00	Rpr aa hrn rcr > 10 rdc	R26C	Covered	1416.28	1416.28	0 000	2	0	2	1	0
49618-00	Rpr aa hrn rcr > 10 ncr/strn	R26C	Covered	1977.69	1977.69	0 000	2	0	2	1	0
49621-00	Rpr parastomal hernia rdc	R26C	Covered	1199.51	1199.51	0 000	2	0	2	1	0
49622-00	Rpr parastomal hrna ncr/strn	R26C	Covered	1480.02	1480.02	0 000	2	0	2	1	0
49623-00	Rmvl ninfct mesh hernia rpr	R26C	Covered	318.32	318.32	0 ZZZ	0	0	2	1	0
49650-00	Lap ing hernia repair init	R26C	Covered	727.25	727.25	0 090	2	1	2	1	0
49651-00	Lap ing hernia repair recur	R26C	Covered	946.90	946.90	0 090	2	1	2	1	0
41820-00	Excision gum each quadrant	NBYR	Covered	By Report	By Report	0 000	2	0	0	0	0
49900-00	Repair of abdominal wall	R26C	Covered	1381.99	1381.99	0 090	2	0	2	1	0
49904-00	Omental flap extra-abdom	R26C	Covered	2311.94	2311.94	0 090	2	0	1	1	1

49905-00	Omental flap intra-abdom	R26C	Covered	561.14	561.14	0 ZZZ	0	0	2	2	0
49906-00	Free omental flap microvasc	RMCD	Covered	1600.72	1600.72	0 090	2	0	1	1	0
41821-00	Excision of gum flap	NBYR	Covered	By Report	By Report	0 000	2	0	0	0	0
50010-00	Exploration of kidney	R26C	Covered	1226.95	1226.95	0 090	2	1	2	1	0
50020-00	Renal abscess open drain	R26C	Covered	1756.11	1756.11	0 090	2	0	1	1	0
50040-00	Nfros nfrot w/drg	R26C	Covered	1597.73	1597.73	0 090	2	1	1	1	0
50045-00	Nephrotomy w/exploration	R26C	Covered	1608.92	1608.92	0 090	2	1	2	1	0
50060-00	NI removal calculus	R26C	Covered	1956.13	1956.13	0 090	2	1	2	1	0
50065-00	NI sec surg operj calculus	R26C	Covered	2071.20	2071.20	0 090	2	1	2	0	0
50070-00	NI comp cgen kdn abnormality	R26C	Covered	2032.05	2032.05	0 090	2	1	2	1	0
50075-00	NI rmvl lg staghorn calculus	R26C	Covered	2493.26	2493.26	0 090	2	1	2	1	0
50080-00	Perq ni/pl lithotrp smpl<2cm	R26C	Covered	1205.14	1205.14	0 090	2	1	1	0	0
50081-00	Perq ni/pl lithotrp cplx>2cm	R26C	Covered	1928.43	1928.43	0 090	2	1	2	1	0
50100-00	Trnsxj/repos abrrnt rnl vsls	R26C	Covered	1767.97	1767.97	0 090	2	1	2	1	0
50120-00	Pyelotomy w/exploration	R26C	Covered	1636.74	1636.74	0 090	2	1	2	1	0
50125-00	Pyelotomy w/drg pyelostomy	R26C	Covered	1693.55	1693.55	0 090	2	1	2	1	0
50130-00	Pyelotomy w/removal calculus	R26C	Covered	1776.89	1776.89	0 090	2	1	2	1	0
50135-00	Pyelotomy complicated	R26C	Covered	1925.56	1925.56	0 090	2	1	2	1	0
50200-00	Renal biopsy perq	R26C	Covered	959.46	216.93	0 000	2	1	1	0	0
50205-00	Renal bx surg exposure kdn	R26C	Covered	1245.24	1245.24	0 090	2	1	2	1	0
50220-00	Remove kidney open	R26C	Covered	1784.83	1784.83	0 090	2	1	2	1	0
50225-00	Removal kidney open complex	R26C	Covered	2053.42	2053.42	0 090	2	1	2	1	0
50230-00	Removal kidney open radical	R26C	Covered	2174.37	2174.37	0 090	2	1	2	2	0
50234-00	Removal of kidney & ureter	R26C	Covered	2221.98	2221.98	0 090	2	1	2	1	0
50236-00	Removal of kidney & ureter	R26C	Covered	2509.27	2509.27	0 090	2	1	2	1	0
50240-00	Partial removal of kidney	R26C	Covered	2276.47	2276.47	0 090	2	1	2	1	0
50250-00	Cryoablate renal mass open	R26C	Covered	2090.95	2090.95	0 090	2	0	2	1	0
50280-00	Removal of kidney lesion	R26C	Covered	1631.94	1631.94	0 090	2	1	2	1	0
50290-00	Removal of kidney lesion	R26C	Covered	1552.99	1552.99	0 090	2	0	2	1	0
41850-00	Treatment of gum lesion	NBYR	Covered	By Report	By Report	0 000	2	0	0	0	0
50320-00	Remove kidney living donor	R26C	Covered	2538.54	2538.54	0 090	2	1	2	1	0
50323-00	Prep cadaver renal allograft	RMCD	Covered	198.44	198.44	0 XXX	2	0	2	1	0
50325-00	Prep donor renal graft	RMCD	Covered	198.44	198.44	0 XXX	2	0	2	1	0
50327-00	Prep renal graft/venous	R26C	Covered	341.47	341.47	0 XXX	2	0	2	1	0
50328-00	Prep renal graft/arterial	R26C	Covered	299.52	299.52	0 XXX	2	0	2	1	0
50329-00	Prep renal graft/ureteral	R26C	Covered	284.34	284.34	0 XXX	2	0	2	1	0
50340-00	Removal of kidney	R26C	Covered	1605.12	1605.12	0 090	2	1	2	1	0
50360-00	Transplantation of kidney	R26C	Covered	3981.32	3981.32	0 090	2	0	2	2	2
50365-00	Transplantation of kidney	R26C	Covered	4788.95	4788.95	0 090	2	1	2	2	2
50370-00	Remove transplanted kidney	R26C	Covered	2024.67	2024.67	0 090	2	0	2	1	0
50380-00	Reimplantation of kidney	R26C	Covered	3397.56	3397.56	0 090	2	0	2	1	0
50382-00	Change ureter stent percut	R26C	Covered	1851.41	419.40	0 000	2	1	1	0	0
50384-00	Remove ureter stent percut	R26C	Covered	1584.71	378.43	0 000	2	1	1	0	0
50385-00	Change stent via transureth	R26C	Covered	1890.10	363.00	0 000	2	1	0	0	0
50386-00	Remove stent via transureth	R26C	Covered	1410.87	275.73	0 000	2	1	0	0	0
50387-00	Change nephroureteral cath	R26C	Covered	1033.43	138.91	0 000	2	1	0	0	0
50389-00	Remove renal tube w/fluoro	R26C	Covered	778.90	89.41	0 000	2	1	1	0	0
50390-00	Drainage of kidney lesion	R26C	Covered	158.88	158.88	0 000	2	1	1	0	0
50391-00	Instll rx agnt into rnal tub	R26C	Covered	220.51	165.54	0 000	2	1	1	0	0
50396-00	Measure kidney pressure	R26C	Covered	201.01	201.01	0 000	2	1	0	0	0
50400-00	Revision of kidney/ureter	R26C	Covered	1982.88	1982.88	0 090	2	1	2	1	0
50405-00	Revision of kidney/ureter	R26C	Covered	2389.33	2389.33	0 090	2	1	2	1	0
50430-00	Njx px nfrosgrm &/urtrgrm	R26C	Covered	1181.56	261.16	0 000	2	1	0	0	0
50431-00	Njx px nfrosgrm &/urtrgrm	R26C	Covered	604.91	114.64	0 000	2	1	1	0	0

50432-00	Plmt nephrostomy catheter	R26C	Covered	1689.31	345.90	0 000	2	1	1	0	0
50433-00	Plmt nephroureteral catheter	R26C	Covered	2101.67	427.75	0 000	2	1	1	0	0
50434-00	Convert nephrostomy catheter	R26C	Covered	1689.64	321.01	0 000	2	1	1	0	0
50435-00	Exchange nephrostomy cath	R26C	Covered	1119.88	170.37	0 000	2	1	1	0	0
50436-00	Dilat xst trc ndurlgc px	R26C	Covered	255.07	255.07	0 000	2	1	1	0	0
50437-00	Dilat xst trc new access rcs	R26C	Covered	421.83	421.83	0 000	2	1	1	0	0
50500-00	Repair of kidney wound	R26C	Covered	2091.68	2091.68	0 090	2	0	2	1	0
50520-00	Close kidney-skin fistula	R26C	Covered	1890.91	1890.91	0 090	2	0	2	1	0
50525-00	Close nephrovisceral fistula	R26C	Covered	2384.54	2384.54	0 090	2	0	2	1	0
50526-00	Close nephrovisceral fistula	R26C	Covered	2548.82	2548.82	0 090	2	0	2	0	0
50540-00	Revision of horseshoe kidney	R26C	Covered	1968.58	1968.58	0 090	2	2	2	1	0
50541-00	Laparo ablate renal cyst	R26C	Covered	1572.83	1572.83	0 090	2	1	2	1	0
50542-00	Laparo ablate renal mass	R26C	Covered	1991.73	1991.73	0 090	2	1	2	1	0
50543-00	Laparo partial nephrectomy	R26C	Covered	2553.79	2553.79	0 090	2	1	2	1	0
50544-00	Laparoscopy pyeloplasty	R26C	Covered	2118.81	2118.81	0 090	2	1	2	1	0
50545-00	Laparo radical nephrectomy	R26C	Covered	2277.73	2277.73	0 090	2	1	2	1	0
50546-00	Laparoscopic nephrectomy	R26C	Covered	2056.39	2056.39	0 090	2	1	2	1	0
50547-00	Laparo removal donor kidney	R26C	Covered	2681.97	2681.97	0 090	2	1	2	1	0
50548-00	Laparo remove w/ureter	R26C	Covered	2287.75	2287.75	0 090	2	1	2	1	0
41870-00	Gum graft	NBYR	Covered	By Report	By Report	0 000	2	0	0	0	0
50551-00	Kidney endoscopy	R26C	Covered	635.96	497.55	0 000	2	1	0	0	0
50553-00	Kidney endoscopy	R26C	Covered	682.54	531.84	0 000	2	1	1	0	0
50555-00	Kidney endoscopy & biopsy	R26C	Covered	725.99	577.23	0 000	3	1	0	0	0 50551
50557-00	Kidney endoscopy & treatment	R26C	Covered	738.63	584.69	0 000	3	1	0	0	0 50551
50561-00	Kidney endoscopy & treatment	R26C	Covered	837.05	666.29	0 000	3	1	0	0	0 50551
50562-00	Renal scope w/tumor resect	R26C	Covered	982.46	982.46	0 090	2	0	2	1	0
50570-00	Kidney endoscopy	R26C	Covered	827.99	827.99	0 000	2	1	0	0	0
50572-00	Kidney endoscopy	R26C	Covered	895.10	895.10	0 000	3	1	0	0	0 50570
50574-00	Kidney endoscopy & biopsy	R26C	Covered	951.08	951.08	0 000	3	1	0	0	0 50570
50575-00	Kidney endoscopy	R26C	Covered	1199.95	1199.95	0 000	3	1	1	0	0 50570
50576-00	Kidney endoscopy & treatment	R26C	Covered	948.56	948.56	0 000	3	1	0	0	0 50570
50580-00	Kidney endoscopy & treatment	R26C	Covered	1021.41	1021.41	0 000	3	1	0	0	0 50570
50590-00	Fragmenting of kidney stone	R26C	Covered	1329.11	998.60	0 090	2	1	1	0	0
50592-00	Perc rf ablate renal tumor	R26C	Covered	5273.61	583.66	0 010	2	1	1	0	0
50593-00	Perc cryo ablate renal tum	R26C	Covered	7050.22	776.26	0 010	2	1	2	0	0
50600-00	Exploration of ureter	R26C	Covered	1612.92	1612.92	0 090	2	1	2	1	0
50605-00	Insert ureteral support	R26C	Covered	1657.06	1657.06	0 090	2	1	2	1	0
50606-00	Endoluminal bx urtr rnl plvs	R26C	Covered	887.27	226.89	0 ZZZ	0	1	1	0	0
50610-00	Removal of ureter stone	R26C	Covered	1624.94	1624.94	0 090	2	1	2	1	0
50620-00	Removal of ureter stone	R26C	Covered	1555.88	1555.88	0 090	2	1	2	1	0
50630-00	Removal of ureter stone	R26C	Covered	1537.28	1537.28	0 090	2	1	2	1	0
50650-00	Removal of ureter	R26C	Covered	1782.12	1782.12	0 090	2	1	2	1	0
50660-00	Removal of ureter	R26C	Covered	1962.37	1962.37	0 090	2	0	2	1	0
50684-00	Injection for ureter x-ray	R26C	Covered	238.72	89.95	0 000	2	1	1	0	0
50686-00	Measure ureter pressure	R26C	Covered	261.49	153.47	0 000	2	0	0	0	0
50688-00	Change of ureter tube/stent	R26C	Covered	136.93	136.93	0 010	2	0	1	0	0
50690-00	Injection for ureter x-ray	R26C	Covered	217.89	122.17	0 000	2	0	1	0	0
50693-00	Plmt ureteral stent prq	R26C	Covered	1853.75	344.12	0 000	2	1	1	0	0
50694-00	Plmt ureteral stent prq	R26C	Covered	2071.14	448.96	0 000	2	1	1	0	0
50695-00	Plmt ureteral stent prq	R26C	Covered	2481.79	574.37	0 000	2	1	1	0	0
50700-00	Revision of ureter	R26C	Covered	1598.39	1598.39	0 090	2	1	2	1	0
50705-00	Ureteral embolization/occl	R26C	Covered	3428.86	289.29	0 ZZZ	0	1	1	0	0
50706-00	Balloon dilate urtrl strix	R26C	Covered	1555.55	300.76	0 ZZZ	0	1	1	0	0
50715-00	Release of ureter	R26C	Covered	2035.24	2035.24	0 090	2	1	2	1	0

50722-00	Release of ureter	R26C	Covered	1729.43	1729.43	0 090	2	0	2	1	0
50725-00	Release/revise ureter	R26C	Covered	1893.26	1893.26	0 090	2	0	2	1	0
50727-00	Revise ureter	R26C	Covered	897.81	897.81	0 090	2	0	2	2	0
50728-00	Revise ureter	R26C	Covered	1218.84	1218.84	0 090	2	0	2	2	0
50740-00	Fusion of ureter & kidney	R26C	Covered	1993.25	1993.25	0 090	2	1	2	1	0
50750-00	Fusion of ureter & kidney	R26C	Covered	1979.15	1979.15	0 090	2	1	2	0	0
50760-00	Fusion of ureters	R26C	Covered	1910.83	1910.83	0 090	2	1	2	1	0
50770-00	Splicing of ureters	R26C	Covered	1979.15	1979.15	0 090	2	0	2	1	0
50780-00	Reimplant ureter in bladder	R26C	Covered	1891.97	1891.97	0 090	2	1	2	1	0
50782-00	Reimplant ureter in bladder	R26C	Covered	1847.82	1847.82	0 090	2	1	2	2	0
50783-00	Reimplant ureter in bladder	R26C	Covered	1934.97	1934.97	0 090	2	1	2	2	0
50785-00	Reimplant ureter in bladder	R26C	Covered	2072.95	2072.95	0 090	2	1	2	1	0
50800-00	Implant ureter in bowel	R26C	Covered	1595.41	1595.41	0 090	2	1	2	1	0
50810-00	Fusion of ureter & bowel	R26C	Covered	2297.47	2297.47	0 090	2	0	2	1	0
50815-00	Urine shunt to intestine	R26C	Covered	2107.61	2107.61	0 090	2	1	2	1	0
50820-00	Construct bowel bladder	R26C	Covered	2245.28	2245.28	0 090	2	1	2	1	0
50825-00	Construct bowel bladder	R26C	Covered	2815.68	2815.68	0 090	2	0	2	1	0
50830-00	Revise urine flow	R26C	Covered	3075.13	3075.13	0 090	2	0	2	1	0
50840-00	Replace ureter by bowel	R26C	Covered	2118.79	2118.79	0 090	2	1	2	1	0
50845-00	Appendico-vesicostomy	R26C	Covered	2165.78	2165.78	0 090	2	0	2	1	0
50860-00	Transplant ureter to skin	R26C	Covered	1631.33	1631.33	0 090	2	1	2	1	0
50900-00	Repair of ureter	R26C	Covered	1459.55	1459.55	0 090	2	1	2	1	0
50920-00	Closure ureter/skin fistula	R26C	Covered	1524.28	1524.28	0 090	2	0	2	1	0
50930-00	Closure ureter/bowel fistula	R26C	Covered	1891.96	1891.96	0 090	2	0	2	1	0
50940-00	Release of ureter	R26C	Covered	1534.21	1534.21	0 090	2	1	2	1	0
50945-00	Laparoscopy ureterolithotomy	R26C	Covered	1664.60	1664.60	0 090	2	1	2	1	0
50947-00	Laparo new ureter/bladder	R26C	Covered	2365.90	2365.90	0 090	2	1	2	1	0
50948-00	Laparo new ureter/bladder	R26C	Covered	2171.58	2171.58	0 090	2	1	2	1	0
41899-00	Unlisted px dental/vlr strux	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1
50951-00	Endoscopy of ureter	R26C	Covered	667.56	519.44	0 000	2	1	0	0	0
50953-00	Endoscopy of ureter	R26C	Covered	705.59	552.95	0 000	3	1	0	0	0 50951
50955-00	Ureter endoscopy & biopsy	R26C	Covered	751.15	595.92	0 000	3	1	0	0	0 50951
50957-00	Ureter endoscopy & treatment	R26C	Covered	758.75	599.00	0 000	3	1	0	0	0 50951
50961-00	Ureter endoscopy & treatment	R26C	Covered	685.59	536.82	0 000	3	1	0	0	0 50951
50970-00	Ureter endoscopy	R26C	Covered	625.68	625.68	0 000	2	1	0	0	0
50972-00	Ureter endoscopy & catheter	R26C	Covered	604.47	604.47	0 000	2	1	0	0	0
50974-00	Ureter endoscopy & biopsy	R26C	Covered	796.86	796.86	0 000	3	1	0	0	0 50970
50976-00	Ureter endoscopy & treatment	R26C	Covered	785.67	785.67	0 000	3	1	0	0	0 50970
50980-00	Ureter endoscopy & treatment	R26C	Covered	601.40	601.40	0 000	2	1	0	0	0
51020-00	Incise & treat bladder	R26C	Covered	829.51	829.51	0 090	2	0	2	1	0
51030-00	Incise & treat bladder	R26C	Covered	834.31	834.31	0 090	2	0	0	0	0
51040-00	Incise & drain bladder	R26C	Covered	518.69	518.69	0 090	2	0	2	1	0
51045-00	Incise bladder/drain ureter	R26C	Covered	861.09	861.09	0 090	2	0	2	0	0
51050-00	Removal of bladder stone	R26C	Covered	827.31	827.31	0 090	2	0	2	1	0
51060-00	Removal of ureter stone	R26C	Covered	1019.28	1019.28	0 090	2	0	2	1	0
51065-00	Remove ureter calculus	R26C	Covered	1014.11	1014.11	0 090	2	0	0	0	0
51080-00	Drainage of bladder abscess	R26C	Covered	721.47	721.47	0 090	2	0	2	1	0
51100-00	Drain bladder by needle	R26C	Covered	134.55	65.99	0 000	2	0	1	0	0
51101-00	Drain bladder by trocar/cath	R26C	Covered	287.05	85.89	0 000	2	0	1	0	0
51102-00	Drain bl w/cath insertion	R26C	Covered	433.99	243.83	0 000	2	0	1	0	0
51500-00	Removal of bladder cyst	R26C	Covered	1111.29	1111.29	0 090	2	0	2	1	0
51520-00	Removal of bladder lesion	R26C	Covered	1041.00	1041.00	0 090	2	0	2	1	0
51525-00	Removal of bladder lesion	R26C	Covered	1479.83	1479.83	0 090	2	0	2	1	0
51530-00	Removal of bladder lesion	R26C	Covered	1334.02	1334.02	0 090	2	0	2	1	0

51535-00	Repair of ureter lesion	R26C	Covered	1350.19	1350.19	0 090	2	1	2	1	0
51550-00	Partial removal of bladder	R26C	Covered	1648.43	1648.43	0 090	2	0	2	1	0
51555-00	Partial removal of bladder	R26C	Covered	2154.04	2154.04	0 090	2	0	2	1	0
51565-00	Revise bladder & ureter(s)	R26C	Covered	2212.13	2212.13	0 090	2	0	2	1	0
51570-00	Removal of bladder	R26C	Covered	2512.02	2512.02	0 090	2	0	2	1	0
51575-00	Removal of bladder & nodes	R26C	Covered	3097.70	3097.70	0 090	2	2	2	1	0
51580-00	Remove bladder/revise tract	R26C	Covered	3239.30	3239.30	0 090	2	0	2	1	0
51585-00	Removal of bladder & nodes	R26C	Covered	3597.60	3597.60	0 090	2	2	2	1	0
51590-00	Remove bladder/revise tract	R26C	Covered	3282.65	3282.65	0 090	2	0	2	1	0
51595-00	Remove bladder/revise tract	R26C	Covered	3716.74	3716.74	0 090	2	2	2	1	0
51596-00	Remove bladder/create pouch	R26C	Covered	4006.63	4006.63	0 090	2	0	2	1	0
51597-00	Removal of pelvic structures	R26C	Covered	3905.56	3905.56	0 090	2	0	2	1	0
51600-00	Injection for bladder x-ray	R26C	Covered	398.01	73.96	0 000	2	0	1	0	0
51605-00	Preparation for bladder xray	R26C	Covered	67.09	67.09	0 000	2	0	1	0	0
51610-00	Injection for bladder x-ray	R26C	Covered	238.37	112.25	0 000	2	0	1	0	0
51700-00	Irrigation of bladder	R26C	Covered	141.63	50.43	0 000	2	0	1	0	0
51701-00	Insert bladder catheter	R26C	Covered	80.52	43.01	0 000	2	0	1	0	0
51702-00	Insert temp bladder cath	R26C	Covered	115.40	42.96	0 000	2	0	1	0	0
51703-00	Insert bladder cath complex	R26C	Covered	273.89	129.65	0 000	2	0	1	0	0
51705-00	Change of bladder tube	R26C	Covered	179.41	89.50	0 000	2	0	1	0	0
51710-00	Change of bladder tube	R26C	Covered	249.08	139.13	0 000	2	0	1	0	0
51715-00	Endoscopic injection/implant	R26C	Covered	672.82	337.77	0 000	2	0	0	0	0
51720-00	Treatment of bladder lesion	R26C	Covered	162.06	73.45	0 000	2	0	1	0	0
51725-00	Simple cystometrogram	R26C	Covered	425.08	425.08	1 000	2	0	0	0	0
51725-26	Simple cystometrogram	R26C	Covered	129.40	129.40	1 000	2	0	0	0	0
51725-TC	Simple cystometrogram	R26C	Covered	295.68	295.68	1 000	2	0	0	0	0
51726-00	Complex cystometrogram	R26C	Covered	565.90	565.90	1 000	2	0	1	0	0
51726-26	Complex cystometrogram	R26C	Covered	144.74	144.74	1 000	2	0	1	0	0
51726-TC	Complex cystometrogram	R26C	Covered	421.16	421.16	1 000	2	0	1	0	0
51727-00	Cystometrogram w/up	R26C	Covered	686.96	686.96	1 000	2	0	0	0	0
51727-26	Cystometrogram w/up	R26C	Covered	180.43	180.43	1 000	2	0	0	0	0
51727-TC	Cystometrogram w/up	R26C	Covered	506.54	506.54	1 000	2	0	0	0	0
51728-00	Cystometrogram w/vp	R26C	Covered	684.84	684.84	1 000	2	0	0	0	0
51728-26	Cystometrogram w/vp	R26C	Covered	177.65	177.65	1 000	2	0	0	0	0
51728-TC	Cystometrogram w/vp	R26C	Covered	507.19	507.19	1 000	2	0	0	0	0
51729-00	Cystometrogram w/vp&up	R26C	Covered	717.29	717.29	1 000	2	0	0	0	0
51729-26	Cystometrogram w/vp&up	R26C	Covered	213.93	213.93	1 000	2	0	0	0	0
51729-TC	Cystometrogram w/vp&up	R26C	Covered	503.35	503.35	1 000	2	0	0	0	0
51736-00	Urine flow measurement	R26C	Covered	24.66	24.66	1 XXX	2	0	0	0	0
51736-26	Urine flow measurement	R26C	Covered	14.26	14.26	1 XXX	2	0	0	0	0
51736-TC	Urine flow measurement	R26C	Covered	10.40	10.40	1 XXX	2	0	0	0	0
51741-00	Electro-urowflowmetry first	R26C	Covered	25.35	25.35	1 XXX	2	0	1	0	0
51741-26	Electro-urowflowmetry first	R26C	Covered	14.31	14.31	1 XXX	2	0	1	0	0
51741-TC	Electro-urowflowmetry first	R26C	Covered	11.04	11.04	1 XXX	2	0	1	0	0
51784-00	Anal/urinary muscle study	R26C	Covered	117.11	117.11	1 XXX	2	0	1	0	0
51784-26	Anal/urinary muscle study	R26C	Covered	63.38	63.38	1 XXX	2	0	1	0	0
51784-TC	Anal/urinary muscle study	R26C	Covered	53.73	53.73	1 XXX	2	0	1	0	0
51785-00	Anal/urinary muscle study	R26C	Covered	812.05	812.05	1 XXX	2	0	0	0	0
51785-26	Anal/urinary muscle study	R26C	Covered	143.12	143.12	1 XXX	2	0	0	0	0
51785-TC	Anal/urinary muscle study	R26C	Covered	668.93	668.93	1 XXX	2	0	0	0	0
51792-00	Urinary reflex study	R26C	Covered	517.18	517.18	1 000	2	0	0	0	0
51792-26	Urinary reflex study	R26C	Covered	93.39	93.39	1 000	2	0	0	0	0
51792-TC	Urinary reflex study	R26C	Covered	423.80	423.80	1 000	2	0	0	0	0
51797-00	Intraabdominal pressure test	R26C	Covered	358.82	358.82	1 ZZZ	0	0	0	0	0

51797-26	Intraabdominal pressure test	R26C	Covered	67.76	67.76	1 ZZZ	0	0	0	0	0
51797-TC	Intraabdominal pressure test	R26C	Covered	291.06	291.06	1 ZZZ	0	0	0	0	0
51798-00	Us urine capacity measure	R26C	Covered	21.39	21.39	3 XXX	0	0	0	0	0
51800-00	Revision of bladder/urethra	R26C	Covered	1787.01	1787.01	0 090	2	0	2	1	0
51820-00	Revision of urinary tract	R26C	Covered	1870.68	1870.68	0 090	2	2	2	1	0
51840-00	Attach bladder/urethra	R26C	Covered	1213.21	1213.21	0 090	2	0	2	1	0
51841-00	Attach bladder/urethra	R26C	Covered	1404.64	1404.64	0 090	2	0	2	1	0
51845-00	Repair bladder neck	R26C	Covered	1015.32	1015.32	0 090	2	0	2	1	0
51860-00	Repair of bladder wound	R26C	Covered	1280.67	1280.67	0 090	2	0	2	1	0
51865-00	Repair of bladder wound	R26C	Covered	1538.44	1538.44	0 090	2	0	2	1	0
51880-00	Repair of bladder opening	R26C	Covered	810.66	810.66	0 090	2	0	2	1	0
51900-00	Repair bladder/vagina lesion	R26C	Covered	1428.57	1428.57	0 090	2	0	2	1	0
51920-00	Close bladder-uterus fistula	R26C	Covered	1325.95	1325.95	0 090	2	0	2	1	0
51925-00	Hysterectomy/bladder repair	R26C	Covered	1851.65	1851.65	0 090	2	0	2	1	0
51940-00	Correction of bladder defect	R26C	Covered	2803.47	2803.47	0 090	2	0	2	1	0
51960-00	Revision of bladder & bowel	R26C	Covered	2376.62	2376.62	0 090	2	0	2	1	0
51980-00	Construct bladder opening	R26C	Covered	1239.49	1239.49	0 090	2	0	2	1	0
51990-00	Laparo urethral suspension	R26C	Covered	1284.34	1284.34	0 090	2	0	2	1	0
51992-00	Laparo sling operation	R26C	Covered	1422.56	1422.56	0 090	2	0	2	1	0
42299-00	Unlisted px palate uvula	NBYR	Covered	By Report	By Report	0 YYY	2	0	2	1	1
52000-00	Cystoscopy	R26C	Covered	447.69	136.58	0 000	2	0	1	0	0
52001-00	Cystoscopy removal of clots	R26C	Covered	789.15	486.44	0 000	3	0	1	0	0 52000
52005-00	Cystoscopy & ureter catheter	R26C	Covered	561.95	228.85	0 000	3	0	1	0	0 52000
52007-00	Cystoscopy and biopsy	R26C	Covered	836.07	283.06	0 000	3	1	1	0	0 52000
52010-00	Cystoscopy & duct catheter	R26C	Covered	706.62	282.32	0 000	3	0	1	0	0 52000
52204-00	Cystoscopy w/biopsy(s)	R26C	Covered	702.24	241.72	0 000	3	0	1	0	0 52000
52214-00	Cystoscopy and treatment	R26C	Covered	1404.17	294.26	0 000	3	0	1	0	0 52000
52224-00	Cystoscopy and treatment	R26C	Covered	1462.51	340.31	0 000	3	0	1	0	0 52000
52234-00	Cystoscopy and treatment	R26C	Covered	417.33	417.33	0 000	3	0	1	0	0 52000
52235-00	Cystoscopy and treatment	R26C	Covered	489.03	489.03	0 000	3	0	1	0	0 52000
52240-00	Cystoscopy and treatment	R26C	Covered	662.63	662.63	0 000	3	0	1	0	0 52000
52250-00	Cystoscopy and radiotracer	R26C	Covered	406.10	406.10	0 000	3	0	1	0	0 52000
52260-00	Cystoscopy and treatment	R26C	Covered	357.08	357.08	0 000	3	0	1	0	0 52000
52265-00	Cystoscopy and treatment	R26C	Covered	687.02	275.66	0 000	3	0	1	0	0 52000
52270-00	Cystoscopy & revise urethra	R26C	Covered	776.58	309.59	0 000	3	0	1	0	0 52000
52275-00	Cystoscopy & revise urethra	R26C	Covered	992.06	421.58	0 000	3	0	1	0	0 52000
52276-00	Cystoscopy and treatment	R26C	Covered	448.41	448.41	0 000	3	0	1	0	0 52000
52277-00	Cystoscopy and treatment	R26C	Covered	546.75	546.75	0 000	3	0	0	0	0 52000
52281-00	Cystoscopy and treatment	R26C	Covered	602.10	259.95	0 000	3	0	1	0	0 52000
52282-00	Cystoscopy implant stent	R26C	Covered	569.42	569.42	0 000	3	0	1	0	0 52000
52283-00	Cystoscopy and treatment	R26C	Covered	644.12	342.71	0 000	3	0	1	0	0 52000
52285-00	Cystoscopy and treatment	R26C	Covered	637.56	332.92	0 000	3	0	1	0	0 52000
52287-00	Cystoscopy chemodenervation	R26C	Covered	714.51	285.69	0 000	3	0	1	0	0 52000
52290-00	Cystoscopy and treatment	R26C	Covered	413.56	413.56	0 000	3	2	1	0	0 52000
52300-00	Cystoscopy and treatment	R26C	Covered	474.56	474.56	0 000	3	2	0	0	0 52000
52301-00	Cystoscopy and treatment	R26C	Covered	491.38	491.38	0 000	3	2	0	0	0 52000
52305-00	Cystoscopy and treatment	R26C	Covered	470.68	470.68	0 000	3	0	1	0	0 52000
52310-00	Cystoscopy and treatment	R26C	Covered	587.69	257.82	0 000	3	0	1	0	0 52000
52315-00	Cystoscopy and treatment	R26C	Covered	852.03	464.60	0 000	3	0	1	0	0 52000
52317-00	Remove bladder stone	R26C	Covered	1634.75	584.99	0 000	3	0	1	0	0 52000
52318-00	Remove bladder stone	R26C	Covered	797.47	797.47	0 000	3	0	1	0	0 52000
52320-00	Cystoscopy and treatment	R26C	Covered	417.06	417.06	0 000	3	1	1	0	0 52000
52325-00	Cystoscopy stone removal	R26C	Covered	540.92	540.92	0 000	3	1	1	0	0 52000
52327-00	Cystoscopy inject material	R26C	Covered	435.48	435.48	0 000	3	1	1	0	0 52000

52330-00	Cystoscopy and treatment	R26C	Covered	1110.63	445.72	0 000	3	1	1	0	0	52000
52332-00	Cystoscopy and treatment	R26C	Covered	743.53	265.54	0 000	3	1	1	0	0	52000
52334-00	Create passage to kidney	R26C	Covered	311.49	311.49	0 000	3	0	1	0	0	52000
52341-00	Cysto w/ureter stricture tx	R26C	Covered	481.57	481.57	0 000	3	1	1	0	0	52000
52342-00	Cysto w/up stricture tx	R26C	Covered	523.89	523.89	0 000	3	1	1	0	0	52000
52343-00	Cysto w/renal stricture tx	R26C	Covered	582.29	582.29	0 000	3	1	1	0	0	52000
52344-00	Cysto/uretero stricture tx	R26C	Covered	624.70	624.70	0 000	3	1	1	0	0	52000
52345-00	Cysto/uretero w/up stricture	R26C	Covered	666.36	666.36	0 000	3	1	0	0	0	52351
52346-00	Cystouretero w/renal strict	R26C	Covered	752.87	752.87	0 000	3	1	0	0	0	52351
52351-00	Cystouretero & or pyeloscope	R26C	Covered	512.59	512.59	0 000	2	0	1	0	0	
52352-00	Cystouretero w/stone remove	R26C	Covered	599.11	599.11	0 000	3	1	1	0	0	52351
52353-00	Cystouretero w/lithotripsy	R26C	Covered	661.98	661.98	0 000	3	1	1	0	0	52351
52354-00	Cystouretero w/biopsy	R26C	Covered	704.30	704.30	0 000	3	1	1	0	0	52351
52355-00	Cystouretero w/excise tumor	R26C	Covered	788.33	788.33	0 000	3	1	1	0	0	52351
52356-00	Cysto/uretero w/lithotripsy	R26C	Covered	701.71	701.71	0 000	3	1	1	0	0	52351
52400-00	Cystouretero w/congen repr	R26C	Covered	821.74	821.74	0 090	3	0	1	0	0	52000
52402-00	Cystourethro cut ejacul duct	R26C	Covered	446.22	446.22	0 000	3	0	1	0	0	52000
52441-00	Cystourethro w/implant	RCMS	Covered	2394.70	355.34	0 000	3	0	1	0	0	52000
52442-00	Cystourethro w/addl implant	RCMS	Covered	1647.26	85.24	0 ZZZ	0	0	1	0	0	
52450-00	Incision of prostate	R26C	Covered	836.32	836.32	0 090	2	0	1	0	0	
52500-00	Revision of bladder neck	R26C	Covered	866.24	866.24	0 090	2	0	1	0	0	
52601-00	Prostatectomy (turp)	R26C	Covered	1257.62	1257.62	0 090	2	0	1	0	0	
52630-00	Remove prostate regrowth	R26C	Covered	716.17	716.17	0 090	2	0	1	0	0	
52640-00	Relieve bladder contracture	R26C	Covered	576.52	576.52	0 090	2	0	1	0	0	
52647-00	Laser surgery of prostate	R26C	Covered	2896.96	1131.20	0 090	2	0	1	0	0	
52648-00	Laser surgery of prostate	R26C	Covered	2981.48	1203.43	0 090	2	0	1	0	0	
52649-00	Prostate laser enucleation	R26C	Covered	1430.78	1430.78	0 090	2	0	0	0	0	
52700-00	Drainage of prostate abscess	R26C	Covered	775.21	775.21	0 090	2	0	0	0	0	
53000-00	Incision of urethra	R26C	Covered	262.64	262.64	0 010	2	0	1	0	0	
53010-00	Incision of urethra	R26C	Covered	531.09	531.09	0 090	2	0	1	0	0	
53020-00	Incision of urethra	R26C	Covered	165.54	165.54	0 000	2	0	1	0	0	
53025-00	Incision of urethra	R26C	Covered	119.79	119.79	0 000	2	0	0	0	0	
53040-00	Drainage of urethra abscess	R26C	Covered	689.66	689.66	0 090	2	0	0	0	0	
53060-00	Drainage of urethra abscess	R26C	Covered	332.53	285.96	0 010	2	0	1	0	0	
53080-00	Drainage of urinary leakage	R26C	Covered	740.89	740.89	0 090	2	0	1	0	0	
53085-00	Drainage of urinary leakage	R26C	Covered	1130.28	1130.28	0 090	2	0	2	1	0	
53200-00	Biopsy of urethra	R26C	Covered	278.08	242.51	0 000	2	0	1	0	0	
53210-00	Removal of urethra	R26C	Covered	1343.32	1343.32	0 090	2	0	2	1	0	
53215-00	Removal of urethra	R26C	Covered	1596.51	1596.51	0 090	2	0	2	1	0	
53220-00	Treatment of urethra lesion	R26C	Covered	792.23	792.23	0 090	2	0	0	0	0	
53230-00	Removal of urethra lesion	R26C	Covered	1057.17	1057.17	0 090	2	0	2	1	0	
53235-00	Removal of urethra lesion	R26C	Covered	1105.70	1105.70	0 090	2	0	2	1	0	
53240-00	Surgery for urethra pouch	R26C	Covered	746.82	746.82	0 090	2	0	1	0	0	
53250-00	Removal of urethra gland	R26C	Covered	698.18	698.18	0 090	2	0	1	0	0	
53260-00	Treatment of urethra lesion	R26C	Covered	367.85	316.10	0 010	2	0	1	0	0	
53265-00	Treatment of urethra lesion	R26C	Covered	408.24	327.39	0 010	2	0	1	0	0	
53270-00	Removal of urethra gland	R26C	Covered	378.27	323.94	0 010	2	0	1	0	0	
53275-00	Repair of urethra defect	R26C	Covered	454.63	454.63	0 010	2	0	1	0	0	
53400-00	Revise urethra stage 1	R26C	Covered	1386.40	1386.40	0 090	2	0	2	1	0	
53405-00	Revise urethra stage 2	R26C	Covered	1509.90	1509.90	0 090	2	0	2	1	0	
53410-00	Reconstruction of urethra	R26C	Covered	1688.97	1688.97	0 090	2	0	2	1	0	
53415-00	Reconstruction of urethra	R26C	Covered	1940.79	1940.79	0 090	2	0	2	1	0	
53420-00	Reconstruct urethra stage 1	R26C	Covered	1452.02	1452.02	0 090	2	0	1	1	0	
53425-00	Reconstruct urethra stage 2	R26C	Covered	1611.97	1611.97	0 090	2	0	2	1	0	

53430-00	Reconstruction of urethra	R26C	Covered	1667.79	1667.79	0 090	2	0	2	1	0
53431-00	Reconstruct urethra/bladder	R26C	Covered	1979.31	1979.31	0 090	2	0	2	1	0
53440-00	Male sling procedure	R26C	Covered	1305.44	1305.44	0 090	2	0	2	1	0
53442-00	Remove/revise male sling	R26C	Covered	1370.96	1370.96	0 090	2	0	2	0	0
53444-00	Insert tandem cuff	R26C	Covered	1373.78	1373.78	0 090	2	0	2	1	0
53445-00	Insert uro/ves nck sphincter	R26C	Covered	1319.60	1319.60	0 090	2	0	2	1	0
53446-00	Remove uro sphincter	R26C	Covered	1121.80	1121.80	0 090	2	0	2	1	0
53447-00	Remove/replace ur sphincter	R26C	Covered	1398.05	1398.05	0 090	2	0	2	1	0
53448-00	Remov/replc ur sphinctr comp	R26C	Covered	2191.58	2191.58	0 090	2	0	2	1	0
53449-00	Repair uro sphincter	R26C	Covered	1069.58	1069.58	0 090	2	0	2	1	0
53450-00	Revision of urethra	R26C	Covered	719.99	719.99	0 090	2	0	1	0	0
53460-00	Revision of urethra	R26C	Covered	802.80	802.80	0 090	2	0	0	0	0
53500-00	Urethrls transvag w/ scope	R26C	Covered	1286.08	1286.08	0 090	2	0	2	1	0
53502-00	Repair of urethra injury	R26C	Covered	851.59	851.59	0 090	2	0	1	0	0
53505-00	Repair of urethra injury	R26C	Covered	850.94	850.94	0 090	2	0	2	0	0
53510-00	Repair of urethra injury	R26C	Covered	1103.18	1103.18	0 090	2	0	2	1	0
53515-00	Repair of urethra injury	R26C	Covered	1376.90	1376.90	0 090	2	0	2	1	0
53520-00	Repair of urethra defect	R26C	Covered	978.84	978.84	0 090	2	0	1	0	0
53600-00	Dilate urethra stricture	R26C	Covered	158.33	107.88	0 000	2	0	1	0	0
53601-00	Dilate urethra stricture	R26C	Covered	155.86	91.18	0 000	2	0	1	0	0
53605-00	Dilate urethra stricture	R26C	Covered	107.66	107.66	0 000	2	0	1	0	0
53620-00	Dilate urethra stricture	R26C	Covered	311.56	148.56	0 000	2	0	1	0	0
53621-00	Dilate urethra stricture	R26C	Covered	300.18	122.31	0 000	2	0	1	0	0
53660-00	Dilation of urethra	R26C	Covered	139.95	72.04	0 000	2	0	1	0	0
53661-00	Dilation of urethra	R26C	Covered	137.32	69.41	0 000	2	0	1	0	0
53665-00	Dilation of urethra	R26C	Covered	64.08	64.08	0 000	2	0	1	0	0
53850-00	Prostatic microwave thermotx	R26C	Covered	2667.48	632.65	0 090	2	0	1	0	0
53852-00	Prostatic rf thermotx	R26C	Covered	2596.62	675.62	0 090	2	0	1	0	0
53854-00	Trurl dstrj prst8 tiss rf wv	R26C	Covered	3147.04	675.62	0 090	2	0	1	0	0
53855-00	Insert prost urethral stent	R26C	Covered	1236.40	138.14	0 000	2	0	0	0	0
Rare diseases genetic testing of protein coding genes											
0215U-00	of relative of affected	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
42699-00	Unlisted px salivry gland/dux	NBYR	Covered	By Report	By Report	0 YYY	2	0	2	1	1
Whole genome sequence analysis of comparator											
0336U-00	genome (parent) for detection of	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
54001-00	Slitting of prepuce	R26C	Covered	363.15	248.67	0 010	2	0	1	0	0
54015-00	Drain penis lesion	R26C	Covered	529.40	529.40	0 010	2	0	0	0	0
54050-00	Destruction penis lesion(s)	R26C	Covered	268.63	194.89	0 010	2	0	1	0	0
54055-00	Destruction penis lesion(s)	R26C	Covered	255.85	173.70	0 010	2	0	1	0	0
54056-00	Cryosurgery penis lesion(s)	R26C	Covered	269.87	205.19	0 010	2	0	1	0	0
54057-00	Laser surg penis lesion(s)	R26C	Covered	264.14	176.83	0 010	2	0	1	0	0
54060-00	Excision of penis lesion(s)	R26C	Covered	361.44	234.66	0 010	2	0	1	0	0
54065-00	Destruction penis lesion(s)	R26C	Covered	409.42	309.17	0 010	2	0	1	0	0
54100-00	Biopsy of penis	R26C	Covered	374.54	214.78	0 000	2	0	1	0	0
54105-00	Biopsy of penis	R26C	Covered	499.84	373.71	0 010	2	0	1	0	0
54110-00	Treatment of penis lesion	R26C	Covered	1087.17	1087.17	0 090	2	0	2	0	0
54111-00	Treat penis lesion graft	R26C	Covered	1381.43	1381.43	0 090	2	0	2	1	0
54112-00	Treat penis lesion graft	R26C	Covered	1617.45	1617.45	0 090	2	0	2	1	0
54115-00	Treatment of penis lesion	R26C	Covered	815.15	753.06	0 090	2	0	2	0	0
54120-00	Partial removal of penis	R26C	Covered	1102.43	1102.43	0 090	2	0	2	1	0
54125-00	Removal of penis	R26C	Covered	1420.91	1420.91	0 090	2	0	2	1	0
54130-00	Remove penis & nodes	R26C	Covered	2052.14	2052.14	0 090	2	2	2	1	0
54135-00	Remove penis & nodes	R26C	Covered	2584.09	2584.09	0 090	2	2	2	0	0
54150-00	Circumcision w/region block	R26C	Covered	266.67	162.54	0 000	2	0	0	0	0

54160-00	Circumcision neonate	R26C	Covered	402.31	253.55	0 010	2	0	1	0	0
54161-00	Circum 28 days or older	R26C	Covered	345.97	345.97	0 010	2	0	1	0	0
54162-00	Lysis penil circumic lesion	R26C	Covered	463.69	352.44	0 010	2	0	1	0	0
54163-00	Repair of circumcision	R26C	Covered	390.60	390.60	0 010	2	0	1	0	0
54164-00	Frenulotomy of penis	R26C	Covered	347.68	347.68	0 010	2	0	1	0	0
54200-00	Treatment of penis lesion	R26C	Covered	215.60	158.03	0 010	2	0	1	0	0
54205-00	Treatment of penis lesion	R26C	Covered	932.68	932.68	0 090	2	0	2	0	0
54220-00	Treatment of penis lesion	R26C	Covered	400.58	226.59	0 000	2	0	1	0	0
54230-00	Prepare penis study	R26C	Covered	192.80	139.12	0 000	2	0	1	0	0
54231-00	Dynamic cavernosometry	R26C	Covered	257.07	200.80	0 000	2	0	1	0	0
54235-00	Penile injection	R26C	Covered	162.29	129.31	0 000	2	0	1	0	0
0120U-00	mRNA, gene expression profiling of 58 genes in	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0092U-00	Measurement of 3 protein biomarkers for lung	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
	Genomic sequence analysis of 42 genes for										
0276U-00	detection of abnormalities associated	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0218U-00	DNA analysis of gene sequence for identification and	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
	Analysis of 32 phosphoproteins and protein analytes										
0249U-00	associated with breast	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0217U-00	DNA analysis of gene sequence of 51 genes for	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
54300-00	Revision of penis	R26C	Covered	1123.78	1123.78	0 090	2	0	2	1	0
54304-00	Revision of penis	R26C	Covered	1296.01	1296.01	0 090	2	0	2	0	0
54308-00	Reconstruction of urethra	R26C	Covered	1243.87	1243.87	0 090	2	0	2	1	0
54312-00	Reconstruction of urethra	R26C	Covered	1419.29	1419.29	0 090	2	0	2	1	0
54316-00	Reconstruction of urethra	R26C	Covered	1714.14	1714.14	0 090	2	0	2	1	0
54318-00	Reconstruction of urethra	R26C	Covered	1238.70	1238.70	0 090	2	0	2	1	0
54322-00	Reconstruction of urethra	R26C	Covered	1351.87	1351.87	0 090	2	0	2	0	0
54324-00	Reconstruction of urethra	R26C	Covered	1669.88	1669.88	0 090	2	0	2	1	0
54326-00	Reconstruction of urethra	R26C	Covered	1626.39	1626.39	0 090	2	0	2	1	0
54328-00	Revise penis/urethra	R26C	Covered	1616.46	1616.46	0 090	2	0	2	1	0
54332-00	Revise penis/urethra	R26C	Covered	1740.85	1740.85	0 090	2	0	2	1	0
54336-00	Revise penis/urethra	R26C	Covered	2045.09	2045.09	0 090	2	0	2	1	0
54340-00	Rpr hypspad comp simple	R26C	Covered	995.55	995.55	0 090	2	0	2	1	0
54344-00	Rpr hypspad comp moblj&urtp	R26C	Covered	1630.12	1630.12	0 090	2	0	2	1	0
54348-00	Rpr hypspad comp dsj & urtp	R26C	Covered	1741.69	1741.69	0 090	2	0	2	1	0
54352-00	Revj prior hypspad repair	R26C	Covered	2424.00	2424.00	0 090	2	0	2	1	0
54360-00	Penis plastic surgery	R26C	Covered	1251.11	1251.11	0 090	2	0	2	1	0
54380-00	Repair penis	R26C	Covered	1386.11	1386.11	0 090	2	0	2	1	0
54385-00	Repair penis	R26C	Covered	1611.73	1611.73	0 090	2	0	2	1	0
54390-00	Repair penis and bladder	R26C	Covered	2133.71	2133.71	0 090	2	0	2	1	0
	Cell-free DNA sequencing of disease-causing										
0152U-00	organisms in plasma specimen, with	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
95783-00	Polysom <6 yrs cpap/bilvl	NCOV	Not Covered	Code not covered	Code not covered	1 XXX	0	0	0	0	0
0022U-00	DNA and RNA targeted sequencing analysis of 1-23	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
54406-00	Remove multi-comp penis pros	R26C	Covered	1270.17	1270.17	0 090	2	0	2	1	0
	mRNA gene expression profiling of 23 genes in skin										
0090U-00	melanoma tissue sample	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0170U-00	RNA gene sequencing for probability of autism	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0296U-00	mRNA gene expression profiling of at least 20	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
54415-00	Remove self-contd penis pros	R26C	Covered	933.68	933.68	0 090	2	0	2	1	0
54416-00	Remv/repl penis contain pros	R26C	Covered	1254.25	1254.25	0 090	2	0	2	1	0
54417-00	Remv/replc penis pros compl	R26C	Covered	1555.68	1555.68	0 090	2	0	2	1	0
54420-00	Revision of penis	R26C	Covered	1220.10	1220.10	0 090	2	0	2	0	0
54430-00	Revision of penis	R26C	Covered	1113.88	1113.88	0 090	2	2	2	0	0
54435-00	Revision of penis	R26C	Covered	730.83	730.83	0 090	2	0	1	0	0

54437-00	Repair corporeal tear	R26C	Covered	1188.08	1188.08	0 090	2	0	2	1	0
54438-00	Replantation of penis	R26C	Covered	2297.37	2297.37	0 090	2	0	2	1	0
42999-00	Unlisted px phrnx adnd/tnsl	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1
54450-00	Preputial stretching	R26C	Covered	121.12	96.55	0 000	2	0	1	0	0
54500-00	Biopsy of testis	R26C	Covered	128.89	128.89	0 000	2	1	0	0	0
54505-00	Biopsy of testis	R26C	Covered	367.35	367.35	0 010	2	1	0	0	0
54512-00	Excise lesion testis	R26C	Covered	936.14	936.14	0 090	2	1	1	1	0
54520-00	Removal of testis	R26C	Covered	575.84	575.84	0 090	2	1	1	0	0
54522-00	Orchiectomy partial	R26C	Covered	1023.43	1023.43	0 090	2	1	2	1	0
54530-00	Removal of testis	R26C	Covered	891.84	891.84	0 090	2	1	2	1	0
54535-00	Extensive testis surgery	R26C	Covered	1291.78	1291.78	0 090	2	1	2	0	0
54550-00	Exploration for testis	R26C	Covered	860.16	860.16	0 090	2	1	2	0	0
54560-00	Exploration for testis	R26C	Covered	1194.52	1194.52	0 090	2	1	2	1	0
54600-00	Reduce testis torsion	R26C	Covered	794.77	794.77	0 090	2	1	1	0	0
54620-00	Suspension of testis	R26C	Covered	519.49	519.49	0 010	2	1	1	0	0
54640-00	Orchiopexy ingun/scrot appr	R26C	Covered	744.35	744.35	0 090	2	1	0	0	0
54650-00	Orchiopexy (fowler-stephens)	R26C	Covered	1240.80	1240.80	0 090	2	1	2	0	0
54660-00	Revision of testis	R26C	Covered	634.83	634.83	0 090	2	1	0	0	0
54670-00	Repair testis injury	R26C	Covered	722.35	722.35	0 090	2	1	0	0	0
54680-00	Relocation of testis(es)	R26C	Covered	1363.97	1363.97	0 090	2	1	2	1	0
54690-00	Laparoscopy orchiectomy	R26C	Covered	1136.34	1136.34	0 090	2	1	2	1	0
54692-00	Laparoscopy orchiopexy	R26C	Covered	1304.15	1304.15	0 090	2	1	1	0	0
43289-00	Unlisted laps px esoph	NBYR	Covered	By Report	By Report	0 YYY	2	1	2	1	1
54700-00	Drainage of scrotum	R26C	Covered	372.88	372.88	0 010	2	1	1	0	0
54800-00	Biopsy of epididymis	R26C	Covered	214.78	214.78	0 000	2	1	0	0	0
54830-00	Remove epididymis lesion	R26C	Covered	658.54	658.54	0 090	2	1	0	0	0
54840-00	Remove epididymis lesion	R26C	Covered	568.46	568.46	0 090	2	1	1	0	0
54860-00	Removal of epididymis	R26C	Covered	737.54	737.54	0 090	2	0	1	0	0
54861-00	Removal of epididymis	R26C	Covered	994.29	994.29	0 090	2	0	0	0	0
54865-00	Explore epididymis	R26C	Covered	637.34	637.34	0 090	2	0	0	0	0
54900-00	Fusion of spermatic ducts	R26C	Covered	1387.97	1387.97	0 090	2	0	0	0	0
54901-00	Fusion of spermatic ducts	R26C	Covered	1825.74	1825.74	0 090	2	2	0	0	0
55000-00	Drainage of hydrocele	R26C	Covered	217.77	147.27	0 000	2	1	1	0	0
55040-00	Removal of hydrocele	R26C	Covered	597.15	597.15	0 090	2	0	1	0	0
55041-00	Removal of hydroceles	R26C	Covered	897.35	897.35	0 090	2	2	1	0	0
55060-00	Repair of hydrocele	R26C	Covered	670.38	670.38	0 090	2	1	0	0	0
55100-00	Drainage of scrotum abscess	R26C	Covered	420.32	296.78	0 010	2	0	1	0	0
55110-00	Explore scrotum	R26C	Covered	682.85	682.85	0 090	2	0	1	0	0
55120-00	Removal of scrotum lesion	R26C	Covered	629.08	629.08	0 090	2	0	0	0	0
55150-00	Removal of scrotum	R26C	Covered	863.89	863.89	0 090	2	0	2	1	0
55175-00	Revision of scrotum	R26C	Covered	644.21	644.21	0 090	2	0	0	0	0
55180-00	Revision of scrotum	R26C	Covered	1199.10	1199.10	0 090	2	0	0	0	0
55200-00	Incision of sperm duct	R26C	Covered	695.03	490.00	0 090	2	2	0	0	0
55250-00	Removal of sperm duct(s)	R26C	Covered	615.49	411.10	0 090	2	2	1	0	0
55300-00	Prepare sperm duct x-ray	R26C	Covered	317.55	317.55	0 000	2	2	0	0	0
0179U-00	Cell-free DNA analysis of targeted sequences in 23	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
55500-00	Removal of hydrocele	R26C	Covered	684.44	684.44	0 090	2	1	0	0	0
55520-00	Removal of sperm cord lesion	R26C	Covered	774.63	774.63	0 090	2	1	2	1	0
55530-00	Revise spermatic cord veins	R26C	Covered	620.05	620.05	0 090	2	1	1	1	0
55535-00	Revise spermatic cord veins	R26C	Covered	756.79	756.79	0 090	2	1	2	1	0
55540-00	Revise hernia & sperm veins	R26C	Covered	925.27	925.27	0 090	2	1	1	1	0
55550-00	Laparo ligate spermatic vein	R26C	Covered	755.46	755.46	0 090	2	1	2	1	0
43499-00	Unlisted procedure esophagus	NBYR	Covered	By Report	By Report	0 YYY	2	0	1	1	1
55600-00	Incise sperm duct pouch	R26C	Covered	742.52	742.52	0 090	2	1	0	0	0

55605-00	Incise sperm duct pouch	R26C	Covered	920.43	920.43	0 090	2	1	0	0	0
55650-00	Remove sperm duct pouch	R26C	Covered	1247.68	1247.68	0 090	2	1	2	1	0
55680-00	Remove sperm pouch lesion	R26C	Covered	613.06	613.06	0 090	2	1	0	0	0
55700-00	Biopsy of prostate	R26C	Covered	439.30	221.32	0 000	2	0	1	0	0
55705-00	Biopsy of prostate	R26C	Covered	460.70	460.70	0 010	2	0	1	1	0
55706-00	Prostate saturation sampling	R26C	Covered	658.83	658.83	0 010	2	0	2	1	0
55720-00	Drainage of prostate abscess	R26C	Covered	791.24	791.24	0 090	2	0	2	1	0
55725-00	Drainage of prostate abscess	R26C	Covered	1044.17	1044.17	0 090	2	0	2	1	0
55801-00	Removal of prostate	R26C	Covered	1888.11	1888.11	0 090	2	0	2	1	0
55810-00	Extensive prostate surgery	R26C	Covered	2239.24	2239.24	0 090	2	0	2	1	0
55812-00	Extensive prostate surgery	R26C	Covered	2751.67	2751.67	0 090	2	0	2	1	0
55815-00	Extensive prostate surgery	R26C	Covered	3008.01	3008.01	0 090	2	2	2	1	0
55821-00	Removal of prostate	R26C	Covered	1448.15	1448.15	0 090	2	0	2	1	0
55831-00	Removal of prostate	R26C	Covered	1483.06	1483.06	0 090	2	0	2	1	0
55840-00	Extensive prostate surgery	R26C	Covered	2010.58	2010.58	0 090	2	0	2	1	0
55842-00	Extensive prostate surgery	R26C	Covered	2009.89	2009.89	0 090	2	0	2	1	0
55845-00	Extensive prostate surgery	R26C	Covered	2332.29	2332.29	0 090	2	2	2	1	0
55860-00	Surgical exposure prostate	R26C	Covered	1509.29	1509.29	0 090	2	0	1	1	0
55862-00	Extensive prostate surgery	R26C	Covered	1883.44	1883.44	0 090	2	0	2	1	0
55865-00	Extensive prostate surgery	R26C	Covered	2290.68	2290.68	0 090	2	2	2	1	0
55866-00	Laps surg prst&ect rpbic rad	R26C	Covered	2046.17	2046.17	0 090	2	0	2	1	0
55867-00	Laps surg prst&ect smpl stot	R26C	Covered	1799.77	1799.77	0 090	2	0	2	1	0
0114U-00	Gene analysis (VIM and CCNA1 methylation) in esophageal cells to evaluate	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
55873-00	Cryoablate prostate	R26C	Covered	10855.25	1325.30	0 090	2	0	1	0	0
0341U-00	Fetal DNA sequencing of products of conception for detection of abnormal	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
55875-00	Transperi needle place pros	R26C	Covered	1368.84	1368.84	0 090	2	0	0	0	0
55876-00	Place rt device/marker pros	R26C	Covered	276.15	179.13	0 000	2	0	1	1	1
55880-00	Abltj mal prst& tiss hifu	R26C	Covered	1690.62	1690.62	0 090	2	0	1	0	0
43647-00	Lap impl electrode antrum	NBYR	Covered	By Report	By Report	0 YYY	2	0	2	1	0
55920-00	Place needles pelvic for rt	R26C	Covered	813.02	813.02	0 000	2	0	0	0	0
43659-00	Unlisted laps px stomach	NBYR	Covered	By Report	By Report	0 YYY	2	1	2	1	1
43881-00	Impl/redo electr d antrum	NBYR	Covered	By Report	By Report	0 YYY	2	0	2	1	0
56405-00	I & d of vulva/perineum	R26C	Covered	266.38	228.21	0 010	2	0	1	2	0
56420-00	Drainage of gland abscess	R26C	Covered	344.14	196.67	0 010	2	0	1	0	0
56440-00	Surgery for vulva lesion	R26C	Covered	315.04	315.04	0 010	2	0	1	0	0
56441-00	Lysis of labial lesion(s)	R26C	Covered	332.55	277.57	0 010	2	0	0	0	0
56442-00	Hymenotomy	R26C	Covered	82.64	82.64	0 000	2	0	0	0	0
56501-00	Destroy vulva lesions sim	R26C	Covered	355.88	241.40	0 010	2	0	1	0	0
56515-00	Destroy vulva lesion/s compl	R26C	Covered	500.67	373.90	0 010	2	0	1	0	0
56605-00	Biopsy of vulva/perineum	R26C	Covered	173.13	99.40	0 000	2	0	1	2	0
56606-00	Biopsy of vulva/perineum	R26C	Covered	66.19	48.73	0 ZZZ	0	0	1	2	0
56620-00	Partial removal of vulva	R26C	Covered	1046.42	1046.42	0 090	2	0	2	1	0
56625-00	Complete removal of vulva	R26C	Covered	1175.51	1175.51	0 090	2	0	2	1	0
56630-00	Extensive vulva surgery	R26C	Covered	1672.60	1672.60	0 090	2	0	2	1	0
56631-00	Extensive vulva surgery	R26C	Covered	2054.75	2054.75	0 090	2	0	2	2	0
56632-00	Extensive vulva surgery	R26C	Covered	2498.72	2498.72	0 090	2	2	2	2	0
56633-00	Extensive vulva surgery	R26C	Covered	2146.10	2146.10	0 090	2	0	2	2	0
56634-00	Extensive vulva surgery	R26C	Covered	2243.69	2243.69	0 090	2	0	2	2	0
56637-00	Extensive vulva surgery	R26C	Covered	2619.07	2619.07	0 090	2	0	2	2	0
56640-00	Extensive vulva surgery	R26C	Covered	2634.48	2634.48	0 090	2	1	2	1	0
56700-00	Partial removal of hymen	R26C	Covered	358.52	358.52	0 010	2	0	2	1	0
56740-00	Remove vagina gland lesion	R26C	Covered	546.95	546.95	0 010	2	1	1	0	0

56800-00	Repair of vagina	R26C	Covered	441.74	441.74	0 010	2	0	2	1	0
56805-00	Repair clitoris	R26C	Covered	1991.28	1991.28	0 090	2	0	2	1	0
56810-00	Repair of perineum	R26C	Covered	474.95	474.95	0 010	2	0	2	2	0
56820-00	Exam of vulva w/scope	R26C	Covered	224.89	142.75	0 000	2	0	1	0	0
56821-00	Exam/biopsy of vulva w/scope	R26C	Covered	299.59	190.93	0 000	2	0	1	0	0
57000-00	Exploration of vagina	R26C	Covered	353.43	353.43	0 010	2	0	0	0	0
57010-00	Drainage of pelvic abscess	R26C	Covered	800.27	800.27	0 090	2	0	0	0	0
57020-00	Drainage of pelvic fluid	R26C	Covered	223.00	132.45	0 000	2	0	0	0	0
57022-00	l & d vaginal hematoma pp	R26C	Covered	316.81	316.81	0 010	2	0	0	0	0
57023-00	l & d vag hematoma non-ob	R26C	Covered	552.48	552.48	0 010	2	0	0	0	0
57061-00	Destroy vag lesions simple	R26C	Covered	309.66	208.12	0 010	2	0	1	0	0
57065-00	Destroy vag lesions complex	R26C	Covered	447.00	327.99	0 010	2	0	1	0	0
57100-00	Biopsy of vagina	R26C	Covered	185.77	110.10	0 000	2	0	1	0	0
57105-00	Biopsy of vagina	R26C	Covered	323.15	263.65	0 010	2	0	1	0	0
57106-00	Remove vagina wall partial	R26C	Covered	949.98	949.98	0 090	2	0	2	1	0
57107-00	Remove vagina tissue part	R26C	Covered	2505.87	2505.87	0 090	2	0	2	1	0
57109-00	Vaginectomy partial w/nodes	R26C	Covered	2980.91	2980.91	0 090	2	2	2	1	0
57110-00	Remove vagina wall complete	R26C	Covered	1548.49	1548.49	0 090	2	0	2	1	0
57111-00	Remove vagina tissue compl	R26C	Covered	2980.91	2980.91	0 090	2	2	2	1	0
57120-00	Closure of vagina	R26C	Covered	926.06	926.06	0 090	2	0	2	1	0
57130-00	Remove vagina lesion	R26C	Covered	416.64	304.74	0 010	2	0	2	1	0
57135-00	Remove vagina lesion	R26C	Covered	447.54	331.11	0 010	2	0	1	0	0
57150-00	Treat vagina infection	R26C	Covered	105.80	43.06	0 000	2	0	1	0	0
57155-00	Insert uteri tandem/ovoids	R26C	Covered	727.15	501.41	0 000	2	0	1	2	0
57156-00	Ins vag brachytx device	R26C	Covered	421.96	268.67	0 000	2	0	0	0	0
57160-00	Insert pessary/other device	R26C	Covered	133.02	76.74	0 000	2	0	1	0	0
57170-00	Fitting of diaphragm/cap	R26C	Covered	138.81	78.65	0 000	2	0	0	0	0
57180-00	Treat vaginal bleeding	R26C	Covered	365.48	214.78	0 010	2	0	1	0	0
57200-00	Repair of vagina	R26C	Covered	591.01	591.01	0 090	2	0	2	1	0
57210-00	Repair vagina/perineum	R26C	Covered	691.75	691.75	0 090	2	0	2	1	0
57220-00	Revision of urethra	R26C	Covered	612.80	612.80	0 090	2	0	2	1	0
57230-00	Repair of urethral lesion	R26C	Covered	732.10	732.10	0 090	2	0	2	1	0
57240-00	Anterior colporrhaphy	R26C	Covered	1063.76	1063.76	0 090	2	0	2	1	0
57250-00	Repair rectum & vagina	R26C	Covered	1065.34	1065.34	0 090	2	0	2	1	0
57260-00	Cmbn ant pst colprhy	R26C	Covered	1337.43	1337.43	0 090	2	0	2	1	0
57265-00	Cmbn ap colprhy w/ntrcl rpr	R26C	Covered	1491.78	1491.78	0 090	2	0	2	1	0
57267-00	Insert mesh/pelvic flr addon	R26C	Covered	418.50	418.50	0 ZZZ	0	0	2	1	0
57268-00	Repair of bowel bulge	R26C	Covered	889.46	889.46	0 090	2	0	2	1	0
57270-00	Repair of bowel pouch	R26C	Covered	1399.51	1399.51	0 090	2	0	2	1	0
57280-00	Suspension of vagina	R26C	Covered	1655.38	1655.38	0 090	2	0	2	1	0
57282-00	Colpopexy extraperitoneal	R26C	Covered	1198.00	1198.00	0 090	2	0	2	1	0
57283-00	Colpopexy intraperitoneal	R26C	Covered	1203.39	1203.39	0 090	2	0	2	1	0
57284-00	Repair paravag defect open	R26C	Covered	1433.66	1433.66	0 090	2	0	2	2	0
57285-00	Repair paravag defect vag	R26C	Covered	1195.49	1195.49	0 090	2	0	2	2	0
57287-00	Revise/remove sling repair	R26C	Covered	1305.24	1305.24	0 090	2	0	2	1	0
57288-00	Repair bladder defect	R26C	Covered	1291.87	1291.87	0 090	2	0	2	1	0
57289-00	Repair bladder & vagina	R26C	Covered	1370.32	1370.32	0 090	2	0	2	1	0
57291-00	Construction of vagina	R26C	Covered	954.42	954.42	0 090	2	0	2	0	0
57292-00	Construct vagina with graft	R26C	Covered	1418.89	1418.89	0 090	2	0	2	1	0
57295-00	Revise vag graft via vagina	R26C	Covered	876.89	876.89	0 090	2	0	2	1	0
57296-00	Revise vag graft open abd	R26C	Covered	1634.76	1634.76	0 090	2	0	2	1	0
57300-00	Repair rectum-vagina fistula	R26C	Covered	1074.69	1074.69	0 090	2	0	2	1	0
57305-00	Repair rectum-vagina fistula	R26C	Covered	1671.69	1671.69	0 090	2	0	2	1	0
57307-00	Fistula repair & colostomy	R26C	Covered	1892.77	1892.77	0 090	2	0	2	1	0

57308-00	Fistula repair transperine	R26C	Covered	1165.99	1165.99	0 090	2	0	2	1	0
57310-00	Repair urethrovaginal lesion	R26C	Covered	876.23	876.23	0 090	2	0	2	1	0
57311-00	Repair urethrovaginal lesion	R26C	Covered	982.67	982.67	0 090	2	0	2	1	0
57320-00	Repair bladder-vagina lesion	R26C	Covered	980.19	980.19	0 090	2	0	2	1	0
57330-00	Repair bladder-vagina lesion	R26C	Covered	1340.22	1340.22	0 090	2	0	2	1	0
57335-00	Repair vagina	R26C	Covered	2012.82	2012.82	0 090	2	0	2	1	0
57400-00	Dilation of vagina	R26C	Covered	220.66	220.66	0 000	2	0	0	0	0
57410-00	Pelvic examination	R26C	Covered	182.11	182.11	0 000	2	0	1	0	0
57415-00	Remove vaginal foreign body	R26C	Covered	310.40	310.40	0 010	2	0	0	0	0
57420-00	Exam of vagina w/scope	R26C	Covered	238.18	152.16	0 000	2	0	1	0	0
57421-00	Exam/biopsy of vag w/scope	R26C	Covered	316.61	204.71	0 000	2	0	1	0	0
57423-00	Repair paravag defect lap	R26C	Covered	1588.48	1588.48	0 090	2	0	2	2	0
57425-00	Laparoscopy surg colpopexy	R26C	Covered	1666.00	1666.00	0 090	2	0	2	1	0
57426-00	Revise prosth vag graft lap	R26C	Covered	1512.32	1512.32	0 090	2	0	2	1	0
57452-00	Exam of cervix w/scope	R26C	Covered	227.48	156.33	0 000	2	0	1	0	0
57454-00	Bx/curett of cervix w/scope	R26C	Covered	297.39	226.89	0 000	3	0	1	0	0 57452
57455-00	Biopsy of cervix w/scope	R26C	Covered	288.73	182.66	0 000	3	0	1	0	0 57452
57456-00	Endocerv curettage w/scope	R26C	Covered	272.37	170.17	0 000	3	0	1	0	0 57452
57460-00	Bx of cervix w/scope leep	R26C	Covered	572.00	269.95	0 000	3	0	1	0	0 57452
57461-00	Conz of cervix w/scope leep	R26C	Covered	633.52	306.24	0 000	3	0	1	0	0 57452
0067U-00	Protein expression profiling of 4 biomarkers of breast cancer in precancerous	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
57500-00	Biopsy of cervix	R26C	Covered	282.79	129.50	0 000	2	0	1	0	0
57505-00	Endocervical curettage	R26C	Covered	286.71	198.10	0 010	2	0	1	0	0
57510-00	Cauterization of cervix	R26C	Covered	300.68	193.96	0 010	2	0	1	0	0
57511-00	Cryocautery of cervix	R26C	Covered	363.27	261.72	0 010	2	0	1	0	0
57513-00	Laser surgery of cervix	R26C	Covered	375.56	260.43	0 010	2	0	1	0	0
57520-00	Conization of cervix	R26C	Covered	635.36	524.11	0 090	2	0	1	0	0
57522-00	Conization of cervix	R26C	Covered	543.51	449.73	0 090	2	0	1	0	0
57530-00	Removal of cervix	R26C	Covered	662.04	662.04	0 090	2	0	2	1	0
57531-00	Removal of cervix radical	R26C	Covered	2903.75	2903.75	0 090	2	2	2	1	0
57540-00	Removal of residual cervix	R26C	Covered	1357.75	1357.75	0 090	2	0	2	1	0
57545-00	Remove cervix/repair pelvis	R26C	Covered	1428.34	1428.34	0 090	2	0	2	1	0
57550-00	Removal of residual cervix	R26C	Covered	757.21	757.21	0 090	2	0	2	1	0
57555-00	Remove cervix/repair vagina	R26C	Covered	1070.65	1070.65	0 090	2	0	2	1	0
57556-00	Remove cervix repair bowel	R26C	Covered	1018.11	1018.11	0 090	2	0	2	1	0
57558-00	D&c of cervical stump	R26C	Covered	286.36	228.80	0 010	2	0	1	0	0
57700-00	Revision of cervix	R26C	Covered	639.79	639.79	0 090	2	0	0	0	0
57720-00	Revision of cervix	R26C	Covered	591.70	591.70	0 090	2	0	2	0	0
57800-00	Dilation of cervical canal	R26C	Covered	141.20	82.99	0 000	2	0	1	0	0
58100-00	Biopsy of uterus lining	R26C	Covered	181.21	105.53	0 000	2	0	1	0	0
58110-00	Bx done w/colposcopy add-on	R26C	Covered	86.87	66.82	0 ZZZ	0	0	0	0	0
58120-00	Dilation and curettage	R26C	Covered	533.43	406.66	0 010	2	0	1	0	0
58140-00	Myomectomy abdom method	R26C	Covered	1574.51	1574.51	0 090	2	0	2	1	0
58145-00	Myomectomy vag method	R26C	Covered	987.89	987.89	0 090	2	0	2	1	0
58146-00	Myomectomy abdom complex	R26C	Covered	1961.41	1961.41	0 090	2	0	2	1	0
58150-00	Total hysterectomy	R26C	Covered	1738.48	1738.48	0 090	2	0	2	1	0
58152-00	Total hysterectomy	R26C	Covered	2101.54	2101.54	0 090	2	0	2	1	0
58180-00	Partial hysterectomy	R26C	Covered	1639.28	1639.28	0 090	2	0	2	1	0
58200-00	Extensive hysterectomy	R26C	Covered	2302.63	2302.63	0 090	2	0	2	1	0
58210-00	Extensive hysterectomy	R26C	Covered	3111.01	3111.01	0 090	2	2	2	1	0
58240-00	Removal of pelvis contents	R26C	Covered	4985.40	4985.40	0 090	2	0	2	1	0
58260-00	Vaginal hysterectomy	R26C	Covered	1439.74	1439.74	0 090	2	0	2	1	0
58262-00	Vag hyst including t/o	R26C	Covered	1587.37	1587.37	0 090	2	0	2	2	0

58263-00	Vag hyst w/t/o & vag repair	R26C	Covered	1699.10	1699.10	0 090	2	0	2	2	0
58267-00	Vag hyst w/urinary repair	R26C	Covered	1826.53	1826.53	0 090	2	0	2	1	0
58270-00	Vag hyst w/enterocele repair	R26C	Covered	1530.53	1530.53	0 090	2	0	2	1	0
58275-00	Hysterectomy/revise vagina	R26C	Covered	1697.61	1697.61	0 090	2	0	2	1	0
58280-00	Hysterectomy/revise vagina	R26C	Covered	1807.89	1807.89	0 090	2	0	2	1	0
58285-00	Extensive hysterectomy	R26C	Covered	2447.36	2447.36	0 090	2	0	2	1	0
58290-00	Vag hyst complex	R26C	Covered	1955.17	1955.17	0 090	2	0	2	1	0
58291-00	Vag hyst incl t/o complex	R26C	Covered	2109.96	2109.96	0 090	2	0	2	2	0
58292-00	Vag hyst t/o & repair compl	R26C	Covered	2221.74	2221.74	0 090	2	0	2	2	0
58294-00	Vag hyst w/enterocele compl	R26C	Covered	2065.60	2065.60	0 090	2	0	2	1	0
58300-00	Insert intrauterine device	RMCD	Covered	366.78	366.78	9 XXX	9	9	9	9	9
58301-00	Remove intrauterine device	R26C	Covered	197.84	110.52	0 000	2	0	0	0	0
95782-00	Polysom <6 yrs 4/> paramtrs	NCOV	Not Covered	Code not covered	Code not covered	1 XXX	0	0	0	0	0
	Whole transcriptome sequencing of paired tumor										
0299U-00	and normal DNA specimens, in	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
54411-00	Remov/replc penis pros comp	NCOV	Not Covered	Code not covered	Code not covered	0 090	2	0	2	1	0
58340-00	Catheter for hysteroigraphy	R26C	Covered	457.75	100.07	0 000	2	0	1	0	0
	mRNA gene expression profiling of 144 genes in										
0291U-00	whole blood for detection of	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
58346-00	Insert heyman uteri capsule	R26C	Covered	900.85	900.85	0 090	2	0	1	0	0
	mRNA gene expression profiling of 72 genes in										
0292U-00	whole blood for detection of	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
58353-00	Endometr ablate thermal	R26C	Covered	1737.73	400.80	0 010	2	0	1	2	0
58356-00	Endometrial cryoablation	R26C	Covered	3135.92	596.58	0 010	2	0	2	2	0
58400-00	Suspension of uterus	R26C	Covered	812.45	812.45	0 090	2	0	2	1	0
58410-00	Suspension of uterus	R26C	Covered	1397.58	1397.58	0 090	2	0	2	1	0
58520-00	Repair of ruptured uterus	R26C	Covered	1369.44	1369.44	0 090	2	0	2	1	0
58540-00	Revision of uterus	R26C	Covered	1567.61	1567.61	0 090	2	0	2	0	0
58541-00	Lsh uterus 250 g or less	R26C	Covered	1260.08	1260.08	0 090	3	0	2	2	0
58542-00	Lsh w/t/o ut 250 g or less	R26C	Covered	1424.54	1424.54	0 090	2	0	2	2	0
58543-00	Lsh uterus above 250 g	R26C	Covered	1441.67	1441.67	0 090	2	0	2	2	0
58544-00	Lsh w/t/o uterus above 250 g	R26C	Covered	1546.60	1546.60	0 090	2	0	2	2	0
58545-00	Laparoscopic myomectomy	R26C	Covered	1536.09	1536.09	0 090	2	0	2	2	0
58546-00	Laparo-myomectomy complex	R26C	Covered	1886.32	1886.32	0 090	2	0	2	2	0
58548-00	Lap radical hyst	R26C	Covered	3223.85	3223.85	0 090	2	2	2	2	0
58550-00	Laparo-asst vag hysterectomy	R26C	Covered	1509.27	1509.27	0 090	3	2	2	2	0
58552-00	Laparo-vag hyst incl t/o	R26C	Covered	1674.98	1674.98	0 090	2	0	2	2	0
58553-00	Laparo-vag hyst complex	R26C	Covered	1896.94	1896.94	0 090	2	0	2	2	0
58554-00	Laparo-vag hyst w/t/o compl	R26C	Covered	2215.92	2215.92	0 090	2	0	2	2	0
58555-00	Hysteroscopy dx sep proc	R26C	Covered	664.41	256.28	0 000	2	0	0	2	0
58558-00	Hysteroscopy biopsy	R26C	Covered	2499.25	388.74	0 000	3	0	1	2	0
58559-00	Hysteroscopy lysis	R26C	Covered	476.08	476.08	0 000	3	0	1	2	0
58560-00	Hysteroscopy resect septum	R26C	Covered	523.56	523.56	0 000	3	0	2	2	0
58561-00	Hysteroscopy remove myoma	R26C	Covered	598.57	598.57	0 000	3	0	0	2	0
58562-00	Hysteroscopy remove fb	R26C	Covered	781.87	372.45	0 000	3	0	1	2	0
58563-00	Hysteroscopy ablation	R26C	Covered	3990.44	412.99	0 000	3	0	0	2	0
	Gene sequence analysis panel of 15 genes associated										
0101U-00	with hereditary colon	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
58570-00	Tlh uterus 250 g or less	R26C	Covered	1389.17	1389.17	0 090	2	0	2	2	0
58571-00	Tlh w/t/o 250 g or less	R26C	Covered	1563.35	1563.35	0 090	2	0	2	2	0
58572-00	Tlh uterus over 250 g	R26C	Covered	1728.84	1728.84	0 090	2	0	2	2	0
58573-00	Tlh w/t/o uterus over 250 g	R26C	Covered	2082.27	2082.27	0 090	2	0	2	2	0
58575-00	Laps tot hyst resj mal	R26C	Covered	3306.25	3306.25	0 090	2	2	2	2	0
43882-00	Revise/remove electrd antrum	NBYR	Covered	By Report	By Report	0 YYY	2	0	2	1	0

43999-00	Unlisted procedure stomach	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1
58600-00	Division of fallopian tube	R26C	Covered	642.74	642.74	0 090	2	2	2	1	0
58605-00	Division of fallopian tube	R26C	Covered	585.82	585.82	0 090	2	2	2	0	0
58611-00	Ligate oviduct(s) add-on	R26C	Covered	125.48	125.48	0 ZZZ	0	0	2	0	0
58615-00	Occlude fallopian tube(s)	R26C	Covered	440.55	440.55	0 010	2	0	2	0	0
58660-00	Laparoscopy lysis	R26C	Covered	1155.51	1155.51	0 090	3	0	2	2	0 49320
58661-00	Laparoscopy remove adnexa	R26C	Covered	1111.55	1111.55	0 010	3	1	2	2	0 49320
58662-00	Laparoscopy excise lesions	R26C	Covered	1218.54	1218.54	0 090	3	0	2	2	0 49320
58670-00	Laparoscopy tubal cauterly	R26C	Covered	644.03	644.03	0 090	3	0	1	2	0 49320
58671-00	Laparoscopy tubal block	R26C	Covered	644.03	644.03	0 090	3	0	1	2	0 49320
	Gene sequence analysis panel of 24 genes associated										
0103U-00	with hereditary ovarian	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
58673-00	Laparoscopy salpingostomy	R26C	Covered	1347.03	1347.03	0 090	3	1	2	0	0 49320
58674-00	Laps abltj uterine fibroids	R26C	Covered	1386.97	1386.97	0 090	2	0	2	2	0
44132-00	Enterectomy cadaver donor	NBYR	Covered	By Report	By Report	0 XXX	0	0	0	0	0
58700-00	Removal of fallopian tube	R26C	Covered	1368.93	1368.93	0 090	2	2	2	1	0
58720-00	Removal of ovary/tube(s)	R26C	Covered	1308.69	1308.69	0 090	2	2	2	1	0
58740-00	Adhesiolysis tube ovary	R26C	Covered	1536.27	1536.27	0 090	2	0	2	1	0
95783-TC	Polysom <6 yrs cpap/bilvl	NCOV	Not Covered	Code not covered	Code not covered	1 XXX	0	0	0	0	0
0156U-00	Gene analysis copy number sequence analysis	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
76145-00	Med physic dos eval rad exps	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
58770-00	Create new tubal opening	R26C	Covered	1473.46	1473.46	0 090	2	1	2	0	0
58800-00	Drainage of ovarian cyst(s)	R26C	Covered	645.39	554.19	0 090	2	2	1	0	0
58805-00	Drainage of ovarian cyst(s)	R26C	Covered	748.54	748.54	0 090	2	2	2	1	0
58820-00	Drain ovary abscess open	R26C	Covered	599.85	599.85	0 090	2	1	2	0	0
58822-00	Drain ovary abscess percut	R26C	Covered	1229.80	1229.80	0 090	2	1	2	1	0
58825-00	Transposition ovary(s)	R26C	Covered	1219.56	1219.56	0 090	2	0	2	1	0
58900-00	Biopsy of ovary(s)	R26C	Covered	763.54	763.54	0 090	2	2	2	1	0
58920-00	Partial removal of ovary(s)	R26C	Covered	1226.76	1226.76	0 090	2	2	2	1	0
58925-00	Removal of ovarian cyst(s)	R26C	Covered	1309.78	1309.78	0 090	2	2	2	1	0
58940-00	Removal of ovary(s)	R26C	Covered	961.01	961.01	0 090	2	2	2	1	0
58943-00	Removal of ovary(s)	R26C	Covered	2068.73	2068.73	0 090	2	0	2	1	0
58950-00	Resect ovarian malignancy	R26C	Covered	1985.79	1985.79	0 090	2	2	2	1	0
58951-00	Resect ovarian malignancy	R26C	Covered	2471.15	2471.15	0 090	2	2	2	1	0
58952-00	Resect ovarian malignancy	R26C	Covered	2827.36	2827.36	0 090	2	2	2	1	0
58953-00	Tah rad dissect for debulk	R26C	Covered	3418.58	3418.58	0 090	2	2	2	1	0
58954-00	Tah rad debulk/lymph remove	R26C	Covered	3692.86	3692.86	0 090	2	2	2	1	0
58956-00	Bso omentectomy w/tah	R26C	Covered	2332.82	2332.82	0 090	2	2	2	1	0
58957-00	Resect recurrent gyn mal	R26C	Covered	2725.68	2725.68	0 090	2	2	2	1	0
58958-00	Resect recur gyn mal w/lym	R26C	Covered	2811.50	2811.50	0 090	2	2	2	1	0
58960-00	Exploration of abdomen	R26C	Covered	1726.46	1726.46	0 090	2	0	2	1	0
95782-TC	Polysom <6 yrs 4/> paramtrs	NCOV	Not Covered	Code not covered	Code not covered	1 XXX	0	0	0	0	0
15835-00	Excise excessive skin buttck	NCOV	Not Covered	Code not covered	Code not covered	0 090	2	0	0	0	0
15832-00	Excise excessive skin thigh	NCOV	Not Covered	Code not covered	Code not covered	0 090	2	1	2	1	0
44133-00	Enterectomy live donor	NBYR	Covered	By Report	By Report	0 XXX	0	0	0	0	0
59000-00	Amniocentesis diagnostic	R26C	Covered	201.85	128.11	0 000	2	0	1	0	0
59001-00	Amniocentesis therapeutic	R26C	Covered	279.17	279.17	0 000	2	0	1	0	0
59012-00	Fetal cord puncture prenatal	R26C	Covered	313.73	313.73	0 000	2	0	0	0	0
59015-00	Chorion biopsy	R26C	Covered	259.81	206.13	0 000	2	0	0	0	0
59020-00	Fetal contract stress test	R26C	Covered	125.09	125.09	1 000	0	0	0	0	0
59020-26	Fetal contract stress test	R26C	Covered	57.78	57.78	1 000	0	0	0	0	0
59020-TC	Fetal contract stress test	R26C	Covered	67.31	67.31	1 000	0	0	0	0	0
59025-00	Fetal non-stress test	R26C	Covered	85.26	85.26	1 000	0	0	0	0	0
59025-26	Fetal non-stress test	R26C	Covered	46.41	46.41	1 000	0	0	0	0	0

59025-TC	Fetal non-stress test	R26C	Covered	38.86	38.86	1 000	0	0	0	0	0
59030-00	Fetal scalp blood sample	R26C	Covered	173.58	173.58	0 000	2	0	0	0	0
59050-00	Fetal monitor w/report	R26C	Covered	77.31	77.31	0 XXX	0	0	0	0	0
59051-00	Fetal monitor/interpret only	R26C	Covered	64.82	64.82	0 XXX	0	0	0	0	0
59070-00	Transabdom amnioinfus w/us	R26C	Covered	661.71	482.55	0 000	2	0	2	0	0
59072-00	Umbilical cord occlud w/us	R26C	Covered	809.68	809.68	0 000	2	0	1	0	0
59074-00	Fetal fluid drainage w/us	R26C	Covered	631.96	482.55	0 000	2	0	2	0	0
59076-00	Fetal shunt placement w/us	R26C	Covered	809.68	809.68	0 000	2	0	2	0	0
59100-00	Remove uterus lesion	R26C	Covered	1380.43	1380.43	0 090	2	0	2	1	0
59120-00	Treat ectopic pregnancy	R26C	Covered	1319.38	1319.38	0 090	2	0	2	1	0
59121-00	Treat ectopic pregnancy	R26C	Covered	1318.55	1318.55	0 090	2	0	2	1	0
59130-00	Treat ectopic pregnancy	R26C	Covered	1522.98	1522.98	0 090	2	0	0	0	0
59136-00	Treat ectopic pregnancy	R26C	Covered	1445.53	1445.53	0 090	2	0	2	0	0
59140-00	Treat ectopic pregnancy	R26C	Covered	689.08	689.08	0 090	2	0	2	0	0
59150-00	Treat ectopic pregnancy	R26C	Covered	1280.20	1280.20	0 090	2	0	2	0	0
59151-00	Treat ectopic pregnancy	R26C	Covered	1250.26	1250.26	0 090	2	0	2	0	0
59160-00	D & c after delivery	R26C	Covered	473.81	308.23	0 010	2	0	0	0	0
59200-00	Insert cervical dilator	R26C	Covered	187.51	69.15	0 000	2	0	1	0	0
59300-00	Episiotomy or vaginal repair	R26C	Covered	396.40	234.05	0 000	2	0	0	0	0
59320-00	Revision of cervix	R26C	Covered	240.29	240.29	0 000	2	0	0	0	0
59325-00	Revision of cervix	R26C	Covered	377.44	377.44	0 000	2	0	0	0	0
59350-00	Repair of uterus	R26C	Covered	430.30	430.30	0 000	2	0	2	0	0
59400-00	Obstetrical care	R26C	Covered	3965.65	3965.65	0 MMM	2	0	1	0	0
59409-00	Obstetrical care	R26C	Covered	1262.44	1262.44	0 MMM	2	0	0	0	0
59410-00	Obstetrical care	R26C	Covered	1720.74	1720.74	0 MMM	2	0	1	0	0
59412-00	Antepartum manipulation	R26C	Covered	162.01	162.01	0 MMM	0	0	0	0	0
59414-00	Deliver placenta	R26C	Covered	140.27	140.27	0 MMM	2	0	0	0	0
59425-00	Antepartum care only	R26C	Covered	940.20	682.78	0 MMM	0	0	0	0	0
59426-00	Antepartum care only	R26C	Covered	1717.10	1252.05	0 MMM	0	0	0	0	0
59430-00	Care after delivery	R26C	Covered	450.26	282.09	0 MMM	2	0	1	0	0
59510-00	Cesarean delivery	R26C	Covered	4340.96	4340.96	0 MMM	2	0	1	0	0
59514-00	Cesarean delivery only	R26C	Covered	1411.67	1411.67	0 MMM	2	0	2	1	0
59515-00	Cesarean delivery	R26C	Covered	2109.06	2109.06	0 MMM	2	0	1	0	0
59525-00	Remove uterus after cesarean	R26C	Covered	743.59	743.59	0 ZZZ	0	0	2	1	0
59610-00	Vbac delivery	R26C	Covered	4085.35	4085.35	0 MMM	2	0	0	0	0
59612-00	Vbac delivery only	R26C	Covered	1402.14	1402.14	0 MMM	2	0	0	0	0
59614-00	Vbac care after delivery	R26C	Covered	1817.62	1817.62	0 MMM	2	0	0	0	0
59618-00	Attempted vbac delivery	R26C	Covered	4377.81	4377.81	0 MMM	2	0	0	0	0
59620-00	Attempted vbac delivery only	R26C	Covered	1451.91	1451.91	0 MMM	2	0	2	0	0
59622-00	Attempted vbac after care	R26C	Covered	2185.93	2185.93	0 MMM	2	0	0	0	0
59812-00	Treatment of miscarriage	R26C	Covered	614.50	506.48	0 090	2	0	1	0	0
59820-00	Care of miscarriage	R26C	Covered	757.74	654.25	0 090	2	0	1	0	0
59821-00	Treatment of miscarriage	R26C	Covered	738.43	630.42	0 090	2	0	0	0	0
59830-00	Treat uterus infection	R26C	Covered	765.79	765.79	0 090	2	0	0	0	0
59840-00	Abortion	R26C	Covered	424.70	369.73	0 010	2	0	0	0	0
59841-00	Abortion	R26C	Covered	713.07	606.35	0 010	2	0	0	0	0
59850-00	Abortion	R26C	Covered	638.74	638.74	0 090	2	0	0	0	0
59851-00	Abortion	R26C	Covered	711.75	711.75	0 090	2	0	0	0	0
59852-00	Abortion	R26C	Covered	975.15	975.15	0 090	2	0	0	0	0
59855-00	Abortion	R26C	Covered	691.85	691.85	0 090	2	0	0	0	0
59856-00	Abortion	R26C	Covered	803.56	803.56	0 090	2	0	0	0	0
59857-00	Abortion	R26C	Covered	929.73	929.73	0 090	2	0	0	0	0
99468-00	Neonate crit care initial	NCOV	Not Covered	Code not covered	Code not cov	0 XXX	0	0	0	0	0
59870-00	Evacuate mole of uterus	R26C	Covered	909.41	909.41	0 090	2	0	2	0	0

59871-00	Remove cerclage suture	R26C	Covered	212.13	212.13	0 000	2	0	0	0	0
44135-00	Intestine transplnt cadaver	NBYR	Covered	By Report	By Report	0 XXX	0	0	0	0	0
44136-00	Intestine transplant live	NBYR	Covered	By Report	By Report	0 XXX	0	0	0	0	0
15834-00	Excise excessive skin hip	NCOV	Not Covered	Code not covered	Code not cov	0 090	2	1	0	0	0
60000-00	Drain thyroid/tongue cyst	R26C	Covered	342.79	287.81	0 010	2	0	0	0	0
60100-00	Biopsy of thyroid	R26C	Covered	196.52	129.90	0 000	2	0	1	0	0
60200-00	Remove thyroid lesion	R26C	Covered	1144.57	1144.57	0 090	2	0	2	1	0
60210-00	Partial thyroid excision	R26C	Covered	1199.10	1199.10	0 090	2	0	2	1	0
60212-00	Partial thyroid excision	R26C	Covered	1678.92	1678.92	0 090	2	0	2	1	0
60220-00	Partial removal of thyroid	R26C	Covered	1206.35	1206.35	0 090	2	0	2	1	0
60225-00	Partial removal of thyroid	R26C	Covered	1599.86	1599.86	0 090	2	0	2	1	0
60240-00	Removal of thyroid	R26C	Covered	1542.96	1542.96	0 090	2	0	2	1	0
60252-00	Removal of thyroid	R26C	Covered	2216.61	2216.61	0 090	2	0	2	1	0
60254-00	Extensive thyroid surgery	R26C	Covered	2795.77	2795.77	0 090	2	0	2	1	0
60260-00	Repeat thyroid surgery	R26C	Covered	1835.08	1835.08	0 090	2	1	2	1	0
60270-00	Removal of thyroid	R26C	Covered	2272.98	2272.98	0 090	2	0	2	1	0
60271-00	Removal of thyroid	R26C	Covered	1774.09	1774.09	0 090	2	0	2	1	0
60280-00	Remove thyroid duct lesion	R26C	Covered	810.29	810.29	0 090	2	0	2	1	0
60281-00	Remove thyroid duct lesion	R26C	Covered	1055.02	1055.02	0 090	2	0	2	1	0
60300-00	Aspir/inj thyroid cyst	R26C	Covered	197.84	82.71	0 000	2	0	1	0	0
60500-00	Explore parathyroid glands	R26C	Covered	1623.32	1623.32	0 090	2	0	2	1	0
60502-00	Re-explore parathyroids	R26C	Covered	2162.72	2162.72	0 090	2	0	2	1	0
60505-00	Explore parathyroid glands	R26C	Covered	2359.63	2359.63	0 090	2	0	2	1	0
60512-00	Autotransplant parathyroid	R26C	Covered	391.96	391.96	0 ZZZ	0	0	2	1	0
60520-00	Removal of thymus gland	R26C	Covered	1724.11	1724.11	0 090	2	0	2	1	0
60521-00	Removal of thymus gland	R26C	Covered	1810.99	1810.99	0 090	2	0	2	1	0
60522-00	Removal of thymus gland	R26C	Covered	2181.15	2181.15	0 090	2	0	2	1	0
60540-00	Explore adrenal gland	R26C	Covered	1792.53	1792.53	0 090	2	1	2	1	0
60545-00	Explore adrenal gland	R26C	Covered	2060.86	2060.86	0 090	2	1	2	1	0
60600-00	Remove carotid body lesion	R26C	Covered	2181.17	2181.17	0 090	2	0	2	1	0
60605-00	Remove carotid body lesion	R26C	Covered	2523.33	2523.33	0 090	2	0	2	1	0
60650-00	Laparoscopy adrenalectomy	R26C	Covered	1958.87	1958.87	0 090	2	1	2	1	0
44137-00	Remove intestinal allograft	NBYR	Covered	By Report	By Report	0 XXX	2	0	2	1	0
44238-00	Unlisted laps px intestine	NBYR	Covered	By Report	By Report	0 YYY	2	1	2	1	1
61000-00	Remove cranial cavity fluid	R26C	Covered	177.40	177.40	0 000	2	2	1	0	0
61001-00	Remove cranial cavity fluid	R26C	Covered	169.11	169.11	0 000	2	2	1	0	0
61020-00	Remove brain cavity fluid	R26C	Covered	170.09	170.09	0 000	2	0	1	0	0
61026-00	Injection into brain canal	R26C	Covered	179.91	179.91	0 000	2	0	1	0	0
61050-00	Remove brain canal fluid	R26C	Covered	139.61	139.61	0 000	2	0	0	0	0
61055-00	Injection into brain canal	R26C	Covered	196.55	196.55	0 000	0	0	1	0	0
61070-00	Brain canal shunt procedure	R26C	Covered	95.60	95.60	0 000	2	0	1	0	0
61105-00	Twist drill hole	R26C	Covered	768.09	768.09	0 090	2	0	0	0	0
61107-00	Drill skull for implantation	R26C	Covered	466.84	466.84	0 000	0	0	1	0	0
61108-00	Drill skull for drainage	R26C	Covered	1471.17	1471.17	0 090	2	0	1	0	0
61120-00	Burr hole for puncture	R26C	Covered	1212.86	1212.86	0 090	2	0	0	0	0
61140-00	Pierce skull for biopsy	R26C	Covered	2020.76	2020.76	0 090	2	0	2	0	0
61150-00	Pierce skull for drainage	R26C	Covered	2121.68	2121.68	0 090	2	0	1	1	0
61151-00	Pierce skull for drainage	R26C	Covered	1577.88	1577.88	0 090	2	0	1	0	0
61154-00	Pierce skull & remove clot	R26C	Covered	2039.07	2039.07	0 090	2	1	2	1	0
61156-00	Pierce skull for drainage	R26C	Covered	1946.50	1946.50	0 090	2	0	2	1	0
61210-00	Pierce skull implant device	R26C	Covered	546.76	546.76	0 000	2	0	1	0	0
61215-00	Insert brain-fluid device	R26C	Covered	860.47	860.47	0 090	2	0	1	1	0
61250-00	Pierce skull & explore	R26C	Covered	1389.62	1389.62	0 090	2	1	2	1	0
61253-00	Pierce skull & explore	R26C	Covered	1577.88	1577.88	0 090	2	2	2	0	0

61304-00	Open skull for exploration	R26C	Covered	2569.94	2569.94	0 090	2	0	2	1	0
61305-00	Open skull for exploration	R26C	Covered	3124.16	3124.16	0 090	2	0	2	1	0
61312-00	Open skull for drainage	R26C	Covered	3207.50	3207.50	0 090	2	0	2	1	0
61313-00	Open skull for drainage	R26C	Covered	3106.23	3106.23	0 090	2	0	2	1	0
61314-00	Open skull for drainage	R26C	Covered	2858.46	2858.46	0 090	2	0	2	1	0
61315-00	Open skull for drainage	R26C	Covered	3219.32	3219.32	0 090	2	0	2	1	0
61316-00	Implt cran bone flap to abdo	R26C	Covered	130.50	130.50	0 ZZZ	0	0	1	0	0
61320-00	Open skull for drainage	R26C	Covered	2944.16	2944.16	0 090	2	0	2	1	0
61321-00	Open skull for drainage	R26C	Covered	3301.62	3301.62	0 090	2	0	2	1	0
61322-00	Decompressive craniotomy	R26C	Covered	3704.85	3704.85	0 090	2	0	2	1	0
61323-00	Decompressive lobectomy	R26C	Covered	3692.94	3692.94	0 090	2	0	2	1	0
61330-00	Decompress eye socket	R26C	Covered	2807.34	2807.34	0 090	2	1	2	1	0
61333-00	Explore orbit/remove lesion	R26C	Covered	3123.62	3123.62	0 090	2	1	2	1	0
61340-00	Subtemporal decompression	R26C	Covered	2264.20	2264.20	0 090	2	1	2	1	0
61343-00	Incise skull (press relief)	R26C	Covered	3413.24	3413.24	0 090	2	0	2	1	0
61345-00	Relieve cranial pressure	R26C	Covered	3179.96	3179.96	0 090	2	0	2	1	0
61450-00	Incise skull for surgery	R26C	Covered	2980.60	2980.60	0 090	2	0	2	1	0
61458-00	Incise skull for brain wound	R26C	Covered	3133.68	3133.68	0 090	2	0	2	1	0
61460-00	Incise skull for surgery	R26C	Covered	3275.02	3275.02	0 090	2	0	2	2	0
61500-00	Removal of skull lesion	R26C	Covered	2127.15	2127.15	0 090	2	0	2	1	0
61501-00	Remove infected skull bone	R26C	Covered	1872.99	1872.99	0 090	2	0	2	1	0
61510-00	Removal of brain lesion	R26C	Covered	3453.42	3453.42	0 090	2	0	2	1	0
61512-00	Remove brain lining lesion	R26C	Covered	3953.18	3953.18	0 090	2	0	2	1	0
61514-00	Removal of brain abscess	R26C	Covered	2991.88	2991.88	0 090	2	0	2	1	0
61516-00	Removal of brain lesion	R26C	Covered	2930.08	2930.08	0 090	2	0	2	1	0
61517-00	Implt brain chemotx add-on	R26C	Covered	129.90	129.90	0 ZZZ	0	0	1	0	0
61518-00	Removal of brain lesion	R26C	Covered	4303.71	4303.71	0 090	2	0	2	1	0
61519-00	Remove brain lining lesion	R26C	Covered	4537.93	4537.93	0 090	2	0	2	1	0
61520-00	Removal of brain lesion	R26C	Covered	5812.47	5812.47	0 090	2	0	2	2	0
61521-00	Removal of brain lesion	R26C	Covered	4882.81	4882.81	0 090	2	0	2	1	0
61522-00	Removal of brain abscess	R26C	Covered	3396.68	3396.68	0 090	2	0	2	1	0
61524-00	Removal of brain lesion	R26C	Covered	3242.09	3242.09	0 090	2	0	2	1	0
61526-00	Removal of brain lesion	R26C	Covered	5372.55	5372.55	0 090	2	0	1	2	0
61530-00	Removal of brain lesion	R26C	Covered	4712.26	4712.26	0 090	2	0	1	2	0
61531-00	Implant brain electrodes	R26C	Covered	1956.34	1956.34	0 090	2	0	2	2	0
61533-00	Implant brain electrodes	R26C	Covered	2395.56	2395.56	0 090	2	0	2	1	0
61534-00	Removal of brain lesion	R26C	Covered	2596.31	2596.31	0 090	2	0	2	1	0
61535-00	Remove brain electrodes	R26C	Covered	1616.70	1616.70	0 090	2	0	2	1	0
61536-00	Removal of brain lesion	R26C	Covered	3976.50	3976.50	0 090	2	0	2	1	0
61537-00	Removal of brain tissue	R26C	Covered	3772.63	3772.63	0 090	2	0	2	1	0
61538-00	Removal of brain tissue	R26C	Covered	4083.15	4083.15	0 090	2	0	2	1	0
61539-00	Removal of brain tissue	R26C	Covered	3653.27	3653.27	0 090	2	0	2	1	0
61540-00	Removal of brain tissue	R26C	Covered	3376.27	3376.27	0 090	2	0	2	1	0
61541-00	Incision of brain tissue	R26C	Covered	3340.27	3340.27	0 090	2	0	2	1	0
61543-00	Removal of brain tissue	R26C	Covered	3375.16	3375.16	0 090	2	0	2	1	0
61544-00	Remove & treat brain lesion	R26C	Covered	2949.48	2949.48	0 090	2	0	2	0	0
61545-00	Excision of brain tumor	R26C	Covered	4920.77	4920.77	0 090	2	0	2	1	0
61546-00	Removal of pituitary gland	R26C	Covered	3575.43	3575.43	0 090	2	0	2	1	0
61548-00	Removal of pituitary gland	R26C	Covered	2496.61	2496.61	0 090	2	0	2	2	0
61550-00	Release of skull seams	R26C	Covered	1925.04	1925.04	0 090	2	0	2	1	0
61552-00	Release of skull seams	R26C	Covered	2351.60	2351.60	0 090	2	0	2	1	0
61556-00	Incise skull/sutures	R26C	Covered	2675.72	2675.72	0 090	2	0	2	1	0
61557-00	Incise skull/sutures	R26C	Covered	2660.39	2660.39	0 090	2	0	2	1	0
61558-00	Excision of skull/sutures	R26C	Covered	2948.60	2948.60	0 090	2	0	2	1	0

61559-00	Excision of skull/sutures	R26C	Covered	3744.96	3744.96	0 090	2	0	2	1	0
61563-00	Excision of skull tumor	R26C	Covered	3084.46	3084.46	0 090	2	0	2	1	0
61564-00	Excision of skull tumor	R26C	Covered	3732.62	3732.62	0 090	2	1	2	1	0
61566-00	Removal of brain tissue	R26C	Covered	3471.89	3471.89	0 090	2	0	2	1	0
61567-00	Incision of brain tissue	R26C	Covered	3953.32	3953.32	0 090	2	0	2	1	0
61570-00	Remove foreign body brain	R26C	Covered	2925.28	2925.28	0 090	2	0	2	1	0
61571-00	Incise skull for brain wound	R26C	Covered	3104.55	3104.55	0 090	2	0	2	1	0
61575-00	Skull base/brainstem surgery	R26C	Covered	3867.51	3867.51	0 090	2	0	2	1	0
61576-00	Skull base/brainstem surgery	R26C	Covered	6587.10	6587.10	0 090	2	0	2	1	0
61580-00	Craniofacial approach skull	R26C	Covered	4253.15	4253.15	0 090	2	1	1	1	2
61581-00	Craniofacial approach skull	R26C	Covered	4774.44	4774.44	0 090	2	1	1	2	2
61582-00	Craniofacial approach skull	R26C	Covered	4965.90	4965.90	0 090	2	0	2	1	2
61583-00	Craniofacial approach skull	R26C	Covered	4675.54	4675.54	0 090	2	0	2	1	2
61584-00	Orbitocranial approach/skull	R26C	Covered	4617.65	4617.65	0 090	2	1	2	1	2
61585-00	Orbitocranial approach/skull	R26C	Covered	5199.95	5199.95	0 090	2	1	2	1	2
61586-00	Resect nasopharynx skull	R26C	Covered	4172.35	4172.35	0 090	2	0	2	1	2
61590-00	Infratemporal approach/skull	R26C	Covered	5137.43	5137.43	0 090	2	1	2	1	2
61591-00	Infratemporal approach/skull	R26C	Covered	5163.23	5163.23	0 090	2	1	2	1	2
61592-00	Orbitocranial approach/skull	R26C	Covered	5043.10	5043.10	0 090	2	1	2	1	2
61595-00	Transtemporal approach/skull	R26C	Covered	4017.58	4017.58	0 090	2	1	1	1	2
61596-00	Transcochlear approach/skull	R26C	Covered	4229.50	4229.50	0 090	2	1	2	1	2
61597-00	Transcondylar approach/skull	R26C	Covered	4687.62	4687.62	0 090	2	1	2	1	2
61598-00	Transpetrosal approach/skull	R26C	Covered	4544.14	4544.14	0 090	2	0	2	1	2
61600-00	Resect/excise cranial lesion	R26C	Covered	3625.66	3625.66	0 090	2	0	2	1	2
61601-00	Resect/excise cranial lesion	R26C	Covered	3923.86	3923.86	0 090	2	0	2	1	2
61605-00	Resect/excise cranial lesion	R26C	Covered	3765.62	3765.62	0 090	2	0	2	1	2
61606-00	Resect/excise cranial lesion	R26C	Covered	4668.27	4668.27	0 090	2	0	2	1	2
61607-00	Resect/excise cranial lesion	R26C	Covered	4777.45	4777.45	0 090	2	0	2	1	2
61608-00	Resect/excise cranial lesion	R26C	Covered	5146.39	5146.39	0 090	2	0	2	1	2
61611-00	Transect artery sinus	R26C	Covered	695.10	695.10	0 ZZZ	0	0	2	1	2
61613-00	Remove aneurysm sinus	R26C	Covered	5142.67	5142.67	0 090	2	1	2	1	2
61615-00	Resect/excise lesion skull	R26C	Covered	4492.46	4492.46	0 090	2	0	2	1	2
61616-00	Resect/excise lesion skull	R26C	Covered	5328.01	5328.01	0 090	2	0	2	1	2
61618-00	Repair dura	R26C	Covered	2082.94	2082.94	0 090	2	0	2	1	2
61619-00	Repair dura	R26C	Covered	2345.83	2345.83	0 090	2	0	2	1	2
61623-00	Endovasc temporary vessel occl	R26C	Covered	893.97	893.97	0 000	2	0	1	0	0
61624-00	Transcath occlusion cns	R26C	Covered	1793.24	1793.24	0 000	2	0	1	0	0
61626-00	Transcath occlusion non-cns	R26C	Covered	1434.91	1434.91	0 000	2	0	1	0	0
61630-00	Intracranial angioplasty	R26C	Covered	2163.68	2163.68	0 XXX	2	0	2	1	0
61635-00	Intracran angioplasty w/stent	R26C	Covered	2349.75	2349.75	0 XXX	2	0	2	1	0
61640-00	Dilate ic vasospasm init	RCMS	Covered	756.77	756.77	9 000	9	9	9	9	9
61641-00	Dilat ic vspasm ea vsl sm ter	RCMS	Covered	265.96	265.96	9 ZZZ	9	9	9	9	9
61642-00	Dilat ic vspasm ea diff ter	RCMS	Covered	531.91	531.91	9 ZZZ	9	9	9	9	9
61645-00	Perq art m-thrombectc &/nfs	R26C	Covered	1318.22	1318.22	0 000	0	1	0	0	0
61650-00	Evasc prlng admn rx agnt 1st	R26C	Covered	896.42	896.42	0 000	2	0	1	0	0
61651-00	Evasc prlng admn rx agnt add	R26C	Covered	381.89	381.89	0 ZZZ	0	0	1	0	0
61680-00	Intracranial vessel surgery	R26C	Covered	3527.36	3527.36	0 090	2	0	2	1	0
61682-00	Intracranial vessel surgery	R26C	Covered	6330.86	6330.86	0 090	2	0	2	1	0
61684-00	Intracranial vessel surgery	R26C	Covered	4380.26	4380.26	0 090	2	0	2	1	0
61686-00	Intracranial vessel surgery	R26C	Covered	6839.11	6839.11	0 090	2	0	2	1	0
61690-00	Intracranial vessel surgery	R26C	Covered	3390.66	3390.66	0 090	2	0	2	1	0
61692-00	Intracranial vessel surgery	R26C	Covered	5571.12	5571.12	0 090	2	0	2	1	0
61697-00	Brain aneurysm repr complx	R26C	Covered	6449.11	6449.11	0 090	2	0	2	1	0
61698-00	Brain aneurysm repr complx	R26C	Covered	7039.29	7039.29	0 090	2	0	2	1	0

61700-00	Brain aneurysm repr simple	R26C	Covered	5242.11	5242.11	0 090	2	0	2	1	0
61702-00	Inner skull vessel surgery	R26C	Covered	6140.00	6140.00	0 090	2	0	2	1	0
61703-00	Clamp neck artery	R26C	Covered	2146.46	2146.46	0 090	2	0	2	1	0
61705-00	Revise circulation to head	R26C	Covered	4011.99	4011.99	0 090	2	0	2	1	0
61708-00	Revise circulation to head	R26C	Covered	3927.83	3927.83	0 090	2	0	2	0	0
61710-00	Revise circulation to head	R26C	Covered	3317.62	3317.62	0 090	2	0	0	0	0
61711-00	Fusion of skull arteries	R26C	Covered	4022.43	4022.43	0 090	2	0	2	1	0
61720-00	Incise skull/brain surgery	R26C	Covered	2006.51	2006.51	0 090	2	0	1	0	0
61735-00	Incise skull/brain surgery	R26C	Covered	2505.77	2505.77	0 090	2	0	1	1	0
61736-00	Litt icr 1 traj 1 smpl les	R26C	Covered	1841.37	1841.37	0 000	0	0	1	0	0
61737-00	Litt icr mlt trj mlt/cplx ls	R26C	Covered	2186.91	2186.91	0 000	0	1	0	0	0
61750-00	Incise skull/brain biopsy	R26C	Covered	2210.16	2210.16	0 090	2	0	1	1	0
61751-00	Brain biopsy w/ct/mr guide	R26C	Covered	2204.57	2204.57	0 090	2	0	1	1	0
61760-00	Implant brain electrodes	R26C	Covered	2472.06	2472.06	0 090	2	0	1	2	0
61770-00	Incise skull for treatment	R26C	Covered	2528.67	2528.67	0 090	2	0	1	1	0
61781-00	Scan proc cranial intra	R26C	Covered	350.96	350.96	0 ZZZ	0	0	0	0	0
61782-00	Scan proc cranial extra	R26C	Covered	291.22	291.22	0 ZZZ	0	0	0	0	0
61783-00	Scan proc spinal	R26C	Covered	352.65	352.65	0 ZZZ	0	0	0	0	0
61790-00	Treat trigeminal nerve	R26C	Covered	1419.91	1419.91	0 090	2	1	1	0	0
61791-00	Treat trigeminal tract	R26C	Covered	1786.91	1786.91	0 090	2	1	0	0	0
61796-00	Srs cranial lesion simple	R26C	Covered	1616.23	1616.23	0 090	0	0	2	0	0
61797-00	Srs cran les simple addl	R26C	Covered	326.36	326.36	0 ZZZ	0	0	2	0	0
61798-00	Srs cranial lesion complex	R26C	Covered	2162.25	2162.25	0 090	0	0	2	0	0
61799-00	Srs cran les complex addl	R26C	Covered	451.18	451.18	0 ZZZ	0	0	2	0	0
61800-00	Apply srs headframe add-on	R26C	Covered	229.10	229.10	0 ZZZ	0	0	2	0	0
61850-00	Implant neuroelectrodes	R26C	Covered	1569.12	1569.12	0 090	2	0	2	0	0
61860-00	Implant neuroelectrodes	R26C	Covered	2441.81	2441.81	0 090	2	0	2	0	0
61863-00	Implant neuroelectrode	R26C	Covered	2378.22	2378.22	0 090	2	1	2	1	0
61864-00	Implant neuroelectrde addl	R26C	Covered	420.68	420.68	0 ZZZ	0	0	2	1	0
61867-00	Implant neuroelectrode	R26C	Covered	3534.14	3534.14	0 090	2	1	2	1	0
61868-00	Implant neuroelectrde addl	R26C	Covered	742.05	742.05	0 ZZZ	0	0	2	1	0
61880-00	Revise/remove neuroelectrode	R26C	Covered	968.21	968.21	0 090	2	1	2	1	0
61885-00	Insrt/redo neurostim 1 array	R26C	Covered	880.89	880.89	0 090	2	1	0	0	0
61886-00	Implant neurostim arrays	R26C	Covered	1463.70	1463.70	0 090	2	0	0	0	0
61888-00	Revise/remove neuroreceiver	R26C	Covered	642.02	642.02	0 010	2	1	1	0	0
62000-00	Treat skull fracture	R26C	Covered	1648.76	1648.76	0 090	2	0	1	0	0
62005-00	Treat skull fracture	R26C	Covered	2007.81	2007.81	0 090	2	0	2	1	0
62010-00	Treatment of head injury	R26C	Covered	2419.51	2419.51	0 090	2	0	2	1	0
62100-00	Repair brain fluid leakage	R26C	Covered	2524.42	2524.42	0 090	2	0	2	1	0
62115-00	Reduction of skull defect	R26C	Covered	2673.49	2673.49	0 090	2	0	2	1	0
62117-00	Reduction of skull defect	R26C	Covered	3050.35	3050.35	0 090	2	0	2	1	0
62120-00	Repair skull cavity lesion	R26C	Covered	3377.83	3377.83	0 090	2	0	2	1	0
62121-00	Incise skull repair	R26C	Covered	2605.19	2605.19	0 090	2	0	2	1	0
62140-00	Crnop skull defect<5 cm diam	R26C	Covered	1654.59	1654.59	0 090	2	0	2	1	0
62141-00	Crnop skull defect>5 cm diam	R26C	Covered	1829.95	1829.95	0 090	2	0	2	1	0
62142-00	Rmvl b1 flp/prostc plate skl	R26C	Covered	1443.26	1443.26	0 090	2	0	2	0	0
62143-00	Rpl b1 flp/prostc plate skl	R26C	Covered	1668.77	1668.77	0 090	2	0	2	1	0
62145-00	Repair of skull & brain	R26C	Covered	2230.22	2230.22	0 090	2	0	2	1	0
62146-00	Crnop w/autograft<5 cm diam	R26C	Covered	1974.79	1974.79	0 090	2	0	2	1	0
62147-00	Crnop w/autograft>5 cm diam	R26C	Covered	2249.11	2249.11	0 090	2	0	2	1	0
62148-00	Retr bone flap to fix skull	R26C	Covered	187.52	187.52	0 ZZZ	0	0	1	0	0
62160-00	Neuroendoscopy add-on	R26C	Covered	279.98	279.98	0 ZZZ	0	0	1	0	0
62161-00	Dissect brain w/scope	R26C	Covered	2400.51	2400.51	0 090	2	0	2	1	0
62162-00	Remove colloid cyst w/scope	R26C	Covered	2951.88	2951.88	0 090	2	0	2	1	0

62164-00	Remove brain tumor w/scope	R26C	Covered	3281.75	3281.75	0 090	2	0	2	1	0
62165-00	Remove pituit tumor w/scope	R26C	Covered	2475.45	2475.45	0 090	2	0	0	1	0
62180-00	Establish brain cavity shunt	R26C	Covered	2505.94	2505.94	0 090	2	0	2	0	0
62190-00	Establish brain cavity shunt	R26C	Covered	1495.06	1495.06	0 090	2	0	1	1	0
62192-00	Establish brain cavity shunt	R26C	Covered	1591.80	1591.80	0 090	2	0	2	1	0
62194-00	Replace/irrigate catheter	R26C	Covered	817.91	817.91	0 010	2	0	0	0	0
62200-00	Establish brain cavity shunt	R26C	Covered	2163.60	2163.60	0 090	2	0	2	1	0
62201-00	Brain cavity shunt w/scope	R26C	Covered	1945.94	1945.94	0 090	2	0	1	0	0
62220-00	Establish brain cavity shunt	R26C	Covered	1551.35	1551.35	0 090	2	0	2	1	0
62223-00	Establish brain cavity shunt	R26C	Covered	1673.46	1673.46	0 090	2	0	2	1	0
62225-00	Replace/irrigate catheter	R26C	Covered	891.35	891.35	0 090	2	0	1	0	0
62230-00	Replace/revise brain shunt	R26C	Covered	1351.53	1351.53	0 090	2	0	2	1	0
62252-00	Csf shunt reprogram	R26C	Covered	147.84	147.84	1 XXX	0	0	0	0	0
62252-26	Csf shunt reprogram	R26C	Covered	69.53	69.53	1 XXX	0	0	0	0	0
62252-TC	Csf shunt reprogram	R26C	Covered	78.31	78.31	1 XXX	0	0	0	0	0
62256-00	Remove brain cavity shunt	R26C	Covered	1006.79	1006.79	0 090	2	0	2	0	0
62258-00	Replace brain cavity shunt	R26C	Covered	1773.65	1773.65	0 090	2	0	2	1	0
62263-00	Epidural lysis mult sessions	R26C	Covered	1206.60	579.20	0 010	2	0	1	0	0
62264-00	Epidural lysis on single day	R26C	Covered	808.21	427.89	0 010	2	0	1	0	0
62267-00	Interdiscal perq aspir dx	R26C	Covered	480.63	264.60	0 000	2	0	0	0	0
62268-00	Drain spinal cord cyst	R26C	Covered	508.22	508.22	0 000	2	0	1	0	0
62269-00	Needle biopsy spinal cord	R26C	Covered	448.88	448.88	0 000	2	0	0	0	0
62270-00	Dx lmr spi pnxr	R26C	Covered	263.00	101.94	0 000	2	0	1	0	0
62272-00	Ther spi pnxr drg csf	R26C	Covered	325.87	144.12	0 000	2	0	1	0	0
62273-00	Inject epidural patch	R26C	Covered	304.41	196.39	0 000	2	0	1	0	0
62280-00	Treat spinal cord lesion	R26C	Covered	611.30	282.72	0 010	2	0	1	0	0
62281-00	Treat spinal cord lesion	R26C	Covered	442.18	275.95	0 010	2	0	1	0	0
62282-00	Treat spinal canal lesion	R26C	Covered	581.18	251.96	0 010	2	0	1	0	0
62284-00	Injection for myelogram	R26C	Covered	346.01	142.91	0 000	2	0	1	0	0
62287-00	Dcmpn px perq 1/mlt lumbar	R26C	Covered	1077.27	1077.27	0 090	2	0	1	0	0
62290-00	Njx px discography lumbar	R26C	Covered	637.02	271.58	0 000	2	0	1	0	0
62291-00	Njx px discography crv/thrc	R26C	Covered	572.55	247.21	0 000	2	0	1	0	0
62292-00	Njx chemonucleolysis lmr	R26C	Covered	1034.51	1034.51	0 090	2	0	0	0	0
62294-00	Injection into spinal artery	R26C	Covered	1518.27	1518.27	0 090	2	0	1	0	0
62302-00	Myelography lumbar injection	R26C	Covered	468.80	204.90	0 000	2	0	1	0	0
62303-00	Myelography lumbar injection	R26C	Covered	477.80	205.50	0 000	2	0	1	0	0
62304-00	Myelography lumbar injection	R26C	Covered	466.37	202.47	0 000	2	0	1	0	0
62305-00	Myelography lumbar injection	R26C	Covered	509.31	210.49	0 000	2	0	1	0	0
62320-00	Njx interlaminar crv/thrc	R26C	Covered	296.21	170.73	0 000	2	9	1	0	0
62321-00	Njx interlaminar crv/thrc	R26C	Covered	491.33	187.98	0 000	2	9	1	0	0
62322-00	Njx interlaminar lmr/sac	R26C	Covered	246.36	136.40	0 000	2	9	1	0	0
62323-00	Njx interlaminar lmr/sac	R26C	Covered	484.10	173.64	0 000	2	9	1	0	0
62324-00	Njx interlaminar crv/thrc	R26C	Covered	248.87	153.79	0 000	2	9	1	0	0
62325-00	Njx interlaminar crv/thrc	R26C	Covered	464.53	191.58	0 000	2	9	1	0	0
62326-00	Njx interlaminar lmr/sac	R26C	Covered	249.94	147.10	0 000	2	9	1	0	0
62327-00	Njx interlaminar lmr/sac	R26C	Covered	510.33	187.57	0 000	2	9	1	0	0
62328-00	Dx lmr spi pnxr w/fluor/ct	R26C	Covered	412.53	146.05	0 000	2	0	1	0	0
62329-00	Ther spi pnxr csf fluor/ct	R26C	Covered	480.54	173.95	0 000	2	0	1	0	0
62350-00	Implant spinal canal cath	R26C	Covered	682.59	682.59	0 010	2	0	1	1	0
62351-00	Implant spinal canal cath	R26C	Covered	1496.89	1496.89	0 090	2	0	2	2	0
62355-00	Remove spinal canal catheter	R26C	Covered	477.20	477.20	0 010	2	0	0	0	0
62360-00	Insert spine infusion device	R26C	Covered	532.98	532.98	0 010	2	0	0	1	0
62361-00	Implant spine infusion pump	R26C	Covered	719.89	719.89	0 010	2	0	0	1	0
62362-00	Implant spine infusion pump	R26C	Covered	654.46	654.46	0 010	2	0	0	1	0

62365-00	Remove spine infusion device	R26C	Covered	510.10	510.10	0 010	2	0	0	0	0
62367-00	Analyze spine infus pump	R26C	Covered	56.62	42.39	0 XXX	0	0	1	0	0
62368-00	Analyze sp inf pump w/reprog	R26C	Covered	78.61	58.56	0 XXX	0	0	1	0	0
62369-00	Anal sp inf pmp w/reprg&fill	R26C	Covered	171.75	59.86	0 XXX	0	0	1	0	0
62370-00	Anl sp inf pmp w/mdreprg&fil	R26C	Covered	169.66	78.46	0 XXX	0	0	1	0	0
44715-00	Prepare donor intestine	NBYR	Covered	By Report	By Report	0 XXX	2	0	2	1	0
63001-00	Remove spine lamina 1/2 crvl	R26C	Covered	1968.53	1968.53	0 090	2	0	2	2	0
63003-00	Remove spine lamina 1/2 thrc	R26C	Covered	1978.28	1978.28	0 090	2	0	2	2	0
63005-00	Remove spine lamina 1/2 lmb	R26C	Covered	1940.39	1940.39	0 090	2	0	2	2	0
63011-00	Remove spine lamina 1/2 scr1	R26C	Covered	1819.96	1819.96	0 090	2	0	2	2	0
63012-00	Remove lamina/facets lumbar	R26C	Covered	1939.79	1939.79	0 090	2	0	2	2	0
63015-00	Remove spine lamina >2 crvl	R26C	Covered	2364.53	2364.53	0 090	2	0	2	2	0
63016-00	Remove spine lamina >2 thrc	R26C	Covered	2433.08	2433.08	0 090	2	0	2	2	0
63017-00	Remove spine lamina >2 lmb	R26C	Covered	2032.61	2032.61	0 090	2	0	2	2	0
63020-00	Neck spine disk surgery	R26C	Covered	1808.91	1808.91	0 090	2	1	2	2	0
63030-00	Low back disk surgery	R26C	Covered	1520.66	1520.66	0 090	2	1	2	2	0
63035-00	Spinal disk surgery add-on	R26C	Covered	363.85	363.85	0 ZZZ	0	1	2	2	0
63040-00	Laminotomy single cervical	R26C	Covered	2249.92	2249.92	0 090	2	1	2	2	0
63042-00	Laminotomy single lumbar	R26C	Covered	2130.48	2130.48	0 090	2	1	2	2	0
63043-00	Laminotomy addl cervical	RMCD	Covered	395.17	395.17	0 ZZZ	0	1	2	2	0
63044-00	Laminotomy addl lumbar	RMCD	Covered	371.63	371.63	0 ZZZ	0	1	2	2	0
63045-00	Lam facetec & foramot crv	R26C	Covered	2080.44	2080.44	0 090	2	2	2	2	0
63046-00	Lam facetec & foramot thrc	R26C	Covered	2003.93	2003.93	0 090	2	2	2	2	0
63047-00	Lam facetec & foramot lumbar	R26C	Covered	1818.90	1818.90	0 090	2	2	2	2	0
63048-00	Lam facetec & foramot ea addl	R26C	Covered	327.38	327.38	0 ZZZ	0	0	2	2	0
63050-00	Cervical laminoplasty 2/> seg	R26C	Covered	2409.85	2409.85	0 090	2	0	2	2	0
63051-00	C-laminoplasty w/graft/plate	R26C	Covered	2753.17	2753.17	0 090	2	0	2	2	0
63052-00	Lam facetc/frmt arthrd lum 1	R26C	Covered	401.20	401.20	0 ZZZ	0	0	2	2	0
63053-00	Lam factc/frmt arthrd lum ea	R26C	Covered	356.40	356.40	0 ZZZ	0	0	2	2	0
63055-00	Decompress spinal cord thrc	R26C	Covered	2580.91	2580.91	0 090	2	0	2	1	0
63056-00	Decompress spinal cord lmb	R26C	Covered	2401.01	2401.01	0 090	2	0	2	1	0
63057-00	Decompress spine cord add-on	R26C	Covered	494.40	494.40	0 ZZZ	0	0	2	1	0
63064-00	Decompress spinal cord thrc	R26C	Covered	2822.12	2822.12	0 090	2	0	2	1	0
63066-00	Decompress spine cord add-on	R26C	Covered	305.40	305.40	0 ZZZ	0	0	2	1	0
63075-00	Neck spine disk surgery	R26C	Covered	2197.22	2197.22	0 090	2	0	2	2	0
63076-00	Neck spine disk surgery	R26C	Covered	380.47	380.47	0 ZZZ	0	0	2	2	0
63077-00	Spine disk surgery thorax	R26C	Covered	2468.41	2468.41	0 090	2	0	2	2	0
63078-00	Spine disk surgery thorax	R26C	Covered	307.31	307.31	0 ZZZ	0	0	2	2	0
63081-00	Remove vert body dcmprn crvl	R26C	Covered	2828.03	2828.03	0 090	2	0	2	1	2
63082-00	Remove vertebral body add-on	R26C	Covered	411.49	411.49	0 ZZZ	0	0	2	1	2
63085-00	Remove vert body dcmprn thrc	R26C	Covered	3094.55	3094.55	0 090	2	0	2	2	2
63086-00	Remove vertebral body add-on	R26C	Covered	295.21	295.21	0 ZZZ	0	0	2	2	2
63087-00	Remov vertbr dcmprn thrclmbr	R26C	Covered	3853.75	3853.75	0 090	2	0	2	2	2
63088-00	Remove vertebral body add-on	R26C	Covered	398.07	398.07	0 ZZZ	0	0	2	2	2
63090-00	Remove vert body dcmprn lmb	R26C	Covered	3167.36	3167.36	0 090	2	0	2	2	2
63091-00	Remove vertebral body add-on	R26C	Covered	278.48	278.48	0 ZZZ	0	0	2	2	2
63101-00	Remove vert body dcmprn thrc	R26C	Covered	3695.96	3695.96	0 090	2	0	2	1	0
63102-00	Remove vert body dcmprn lmb	R26C	Covered	3670.46	3670.46	0 090	2	0	2	1	0
63103-00	Remove vertebral body add-on	R26C	Covered	454.94	454.94	0 ZZZ	0	0	2	1	0
63170-00	Incise spinal cord tract(s)	R26C	Covered	2509.17	2509.17	0 090	2	0	2	1	0
63172-00	Drainage of spinal cyst	R26C	Covered	2222.87	2222.87	0 090	2	0	2	1	0
63173-00	Drainage of spinal cyst	R26C	Covered	2705.78	2705.78	0 090	2	0	2	1	0
63185-00	Incise spine nrv half segmnt	R26C	Covered	1960.70	1960.70	0 090	2	0	2	1	0
63190-00	Incise spine nrv >2 segmnts	R26C	Covered	2108.89	2108.89	0 090	2	0	2	1	0

63191-00	Incise spine accessory nerve	R26C	Covered	2188.27	2188.27	0 090	2	1	2	1	0
63197-00	Lam w/cordotomy 1stg thrc	R26C	Covered	2684.17	2684.17	0 090	2	0	2	1	0
63200-00	Release spinal cord lumbar	R26C	Covered	2426.33	2426.33	0 090	2	0	2	0	0
63250-00	Revise spinal cord vsls crvl	R26C	Covered	4552.51	4552.51	0 090	2	0	2	1	0
63251-00	Revise spinal cord vsls thrc	R26C	Covered	4660.93	4660.93	0 090	2	0	2	1	0
63252-00	Revise spine cord vsl thrlmb	R26C	Covered	4660.32	4660.32	0 090	2	0	2	1	0
63265-00	Excise intraspinal lesion crv	R26C	Covered	2648.00	2648.00	0 090	2	0	2	1	0
63266-00	Excise intraspinal lesion thrc	R26C	Covered	2721.72	2721.72	0 090	2	0	2	1	0
63267-00	Excise intraspinal lesion lmb	R26C	Covered	2217.89	2217.89	0 090	2	0	2	1	0
63268-00	Excise intraspinal lesion scr1	R26C	Covered	2316.16	2316.16	0 090	2	0	2	1	0
63270-00	Excise intraspinal lesion crvl	R26C	Covered	3233.20	3233.20	0 090	2	0	2	1	0
63271-00	Excise intraspinal lesion thrc	R26C	Covered	3233.03	3233.03	0 090	2	0	2	1	0
63272-00	Excise intraspinal lesion lmb	R26C	Covered	2982.98	2982.98	0 090	2	0	2	1	0
63273-00	Excise intraspinal lesion scr1	R26C	Covered	2921.46	2921.46	0 090	2	0	2	0	0
63275-00	Bx/exc xdr1 spine lesn crvl	R26C	Covered	2846.21	2846.21	0 090	2	0	2	1	0
63276-00	Bx/exc xdr1 spine lesn thrc	R26C	Covered	2826.69	2826.69	0 090	2	0	2	1	0
63277-00	Bx/exc xdr1 spine lesn lmb	R26C	Covered	2500.93	2500.93	0 090	2	0	2	1	0
63278-00	Bx/exc xdr1 spine lesn scr1	R26C	Covered	2513.26	2513.26	0 090	2	0	2	1	0
63280-00	Bx/exc idr1 spine lesn crvl	R26C	Covered	3308.03	3308.03	0 090	2	0	2	1	0
63281-00	Bx/exc idr1 spine lesn thrc	R26C	Covered	3283.92	3283.92	0 090	2	0	2	1	0
63282-00	Bx/exc idr1 spine lesn lmb	R26C	Covered	3106.44	3106.44	0 090	2	0	2	1	0
63283-00	Bx/exc idr1 spine lesn scr1	R26C	Covered	2984.28	2984.28	0 090	2	0	2	1	0
63285-00	Bx/exc idr1 imed lesn cervl	R26C	Covered	4043.79	4043.79	0 090	2	0	2	1	0
63286-00	Bx/exc idr1 imed lesn thrc	R26C	Covered	3993.16	3993.16	0 090	2	0	2	1	0
63287-00	Bx/exc idr1 imed lesn thrlmb	R26C	Covered	4233.27	4233.27	0 090	2	0	2	1	0
63290-00	Bx/exc xdr1/idr1 lsn any lvl	R26C	Covered	4302.94	4302.94	0 090	2	0	2	1	0
63295-00	Repair laminectomy defect	R26C	Covered	492.63	492.63	0 ZZZ	0	2	2	2	0
63300-00	Remove vert xdr1 body crvl	R26C	Covered	2902.12	2902.12	0 090	2	0	2	1	0
63301-00	Remove vert xdr1 body thrc	R26C	Covered	3435.46	3435.46	0 090	2	0	2	1	0
63302-00	Remove vert xdr1 body thrlmb	R26C	Covered	3396.15	3396.15	0 090	2	0	2	1	0
63303-00	Remov vert xdr1 bdy lmb/sac	R26C	Covered	3585.54	3585.54	0 090	2	0	2	1	0
63304-00	Remove vert idr1 body crvl	R26C	Covered	3648.92	3648.92	0 090	2	0	2	1	0
63305-00	Remove vert idr1 body thrc	R26C	Covered	3873.32	3873.32	0 090	2	0	2	1	0
63306-00	Remov vert idr1 bdy thrc/lmb	R26C	Covered	3808.63	3808.63	0 090	2	0	2	1	0
63307-00	Remov vert idr1 bdy lmb/sac	R26C	Covered	3723.78	3723.78	0 090	2	0	2	1	0
63308-00	Remove vertebral body add-on	R26C	Covered	490.19	490.19	0 ZZZ	0	0	2	1	0
63600-00	Remove spinal cord lesion	R26C	Covered	1729.26	1729.26	0 090	2	0	0	0	0
63610-00	Stimulation of spinal cord	R26C	Covered	882.09	882.09	0 000	2	0	0	0	0
63620-00	Srs spinal lesion	R26C	Covered	1776.24	1776.24	0 090	0	0	2	0	0
63621-00	Srs spinal lesion addl	R26C	Covered	375.12	375.12	0 ZZZ	0	0	2	0	0
63650-00	Implant neuroelectrodes	R26C	Covered	4340.58	726.27	0 010	2	0	1	0	0
63655-00	Implant neuroelectrodes	R26C	Covered	1384.13	1384.13	0 090	2	0	2	1	0
63661-00	Remove spine eltrd perq aray	R26C	Covered	1252.72	562.58	0 010	2	0	2	1	0
63662-00	Remove spine eltrd plate	R26C	Covered	1402.45	1402.45	0 090	2	0	2	1	0
63663-00	Revise spine eltrd perq aray	R26C	Covered	1657.47	778.47	0 010	2	0	2	1	0
63664-00	Revise spine eltrd plate	R26C	Covered	1456.99	1456.99	0 090	2	0	2	1	0
63685-00	Ins/rplc spi npg/rcvr pocket	R26C	Covered	578.10	578.10	0 010	2	0	2	1	0
63688-00	Rev/rmv imp sp npg/r dtch cn	R26C	Covered	510.41	510.41	0 010	2	0	1	0	0
63700-00	Repair of spinal herniation	R26C	Covered	2096.07	2096.07	0 090	2	0	2	1	0
63702-00	Repair of spinal herniation	R26C	Covered	2278.50	2278.50	0 090	2	0	2	1	0
63704-00	Repair of spinal herniation	R26C	Covered	2653.07	2653.07	0 090	2	0	2	1	0
63706-00	Repair of spinal herniation	R26C	Covered	2926.89	2926.89	0 090	2	0	2	1	0
63707-00	Repair spinal fluid leakage	R26C	Covered	1542.00	1542.00	0 090	2	0	2	1	0
63709-00	Repair spinal fluid leakage	R26C	Covered	1825.17	1825.17	0 090	2	0	2	1	0

63710-00	Graft repair of spine defect	R26C	Covered	1795.10	1795.10	0 090	2	0	2	1	0
63740-00	Install spinal shunt	R26C	Covered	1593.72	1593.72	0 090	2	0	2	1	0
63741-00	Install spinal shunt	R26C	Covered	1116.45	1116.45	0 090	2	0	2	1	0
63744-00	Revision of spinal shunt	R26C	Covered	1115.78	1115.78	0 090	2	0	2	1	0
63746-00	Removal of spinal shunt	R26C	Covered	1005.74	1005.74	0 090	2	0	0	0	0
64400-00	Njx aa&/strd trigeminal nrv	R26C	Covered	205.69	84.74	0 000	2	1	1	0	0
64405-00	Njx aa&/strd gr ocpl nrv	R26C	Covered	129.96	85.34	0 000	2	1	1	0	0
64408-00	Njx aa&/strd vagus nrv	R26C	Covered	148.94	77.15	0 000	2	1	0	0	0
64415-00	Njx aa&/strd brch plxs img	R26C	Covered	246.37	119.59	0 000	2	1	1	0	0
64416-00	Njx aa&/strd brch pl nfs img	R26C	Covered	131.45	131.45	0 000	2	1	1	0	0
64417-00	Njx aa&/strd ax nerve img	R26C	Covered	298.21	109.99	0 000	2	1	1	0	0
64418-00	Njx aa&/strd sprscap nrv	R26C	Covered	156.03	95.24	0 000	2	1	1	0	0
64420-00	Njx aa&/strd ntrcost nrv 1	R26C	Covered	179.95	101.69	0 000	2	1	1	0	0
64421-00	Njx aa&/strd ntrcost nrv ea	R26C	Covered	59.73	42.91	0 ZZZ	0	1	1	0	0
64425-00	Njx aa&/strd ii ih nerves	R26C	Covered	204.84	94.88	0 000	2	1	1	0	0
64430-00	Njx aa&/strd pudental nerve	R26C	Covered	179.71	94.33	0 000	2	1	1	0	0
64435-00	Njx aa&/strd paracr v nrv	R26C	Covered	145.80	74.01	0 000	2	1	1	0	0
64445-00	Njx aa&/strd sciatic nrv img	R26C	Covered	294.06	124.60	0 000	2	1	1	0	0
64446-00	Njx aa&/strd sc nrv nfs img	R26C	Covered	128.42	128.42	0 000	2	1	1	0	0
64447-00	Njx aa&/strd femoral nrv img	R26C	Covered	213.26	109.13	0 000	2	1	1	0	0
64448-00	Njx aa&/strd fem nrv nfs img	R26C	Covered	122.82	122.82	0 000	2	1	1	0	0
64449-00	Njx aa&/strd l mbr plex nfs	R26C	Covered	108.90	108.90	0 000	2	1	1	0	0
64450-00	Njx aa&/strd other pn/branch	R26C	Covered	137.85	72.53	0 000	2	1	1	0	0
64451-00	Njx aa&/strd nrv nrvtg si jt	R26C	Covered	428.09	142.85	0 000	2	1	1	0	0
64454-00	Njx aa&/strd gnclr nrv brnch	R26C	Covered	416.45	144.14	0 000	2	1	1	0	0
64455-00	Njx aa&/strd pltr com dg nrv	R26C	Covered	90.50	57.51	0 000	2	1	0	0	0
64461-00	Pvb thoracic single inj site	R26C	Covered	243.59	132.99	0 000	2	1	1	0	0
64462-00	Pvb thoracic 2nd+ inj site	R26C	Covered	128.08	82.81	0 ZZZ	0	1	1	0	0
64463-00	Pvb thoracic cont infusion	R26C	Covered	424.76	138.87	0 000	2	1	1	0	0
64479-00	Njx aa&/strd tfrm epi c/t 1	R26C	Covered	494.62	230.08	0 000	2	1	1	0	0
64480-00	Njx aa&/strd tfrm epi c/t ea	R26C	Covered	250.03	105.79	0 ZZZ	0	1	1	0	0
64483-00	Njx aa&/strd tfrm epi l/s 1	R26C	Covered	460.43	196.53	0 000	2	1	1	0	0
64484-00	Njx aa&/strd tfrm epi l/s ea	R26C	Covered	206.13	89.06	0 ZZZ	0	1	1	0	0
64486-00	Tap block unil by injection	R26C	Covered	204.48	93.88	0 000	2	1	1	0	0
64487-00	Tap block uni by infusion	R26C	Covered	400.34	107.98	0 000	2	1	1	0	0
64488-00	Tap block bi injection	R26C	Covered	252.45	117.26	0 000	2	2	1	0	0
64489-00	Tap block bi by infusion	R26C	Covered	654.07	131.45	0 000	2	2	1	0	0
64490-00	Inj paravert f jnt c/t 1 lev	R26C	Covered	356.60	185.20	0 000	2	1	2	0	0
64491-00	Inj paravert f jnt c/t 2 lev	R26C	Covered	177.15	102.12	0 ZZZ	0	1	2	0	0
64492-00	Inj paravert f jnt c/t 3 lev	R26C	Covered	177.79	104.06	0 ZZZ	0	1	2	0	0
64493-00	Inj paravert f jnt l/s 1 lev	R26C	Covered	329.82	159.71	0 000	2	1	2	0	0
64494-00	Inj paravert f jnt l/s 2 lev	R26C	Covered	166.68	87.77	0 ZZZ	0	1	2	0	0
64495-00	Inj paravert f jnt l/s 3 lev	R26C	Covered	166.68	89.71	0 ZZZ	0	1	2	0	0
64505-00	N block spenopalatine gangl	R26C	Covered	255.16	177.54	0 000	2	1	1	0	0
64510-00	N block stellate ganglion	R26C	Covered	272.64	136.81	0 000	2	1	1	0	0
64517-00	N block inj hypogas plxs	R26C	Covered	357.76	223.22	0 000	2	0	1	0	0
64520-00	N block lumbar/thoracic	R26C	Covered	434.52	151.23	0 000	2	1	1	0	0
64530-00	N block inj celiac pelus	R26C	Covered	428.55	167.24	0 000	2	0	1	0	0
64553-00	Implant neuroelectrodes	R26C	Covered	7329.28	711.87	0 010	2	0	0	0	0
64555-00	Implant neuroelectrodes	R26C	Covered	4057.88	566.46	0 010	2	0	1	0	0
64561-00	Implant neuroelectrodes	R26C	Covered	1357.37	520.41	0 010	2	1	1	0	0
64566-00	Neuroeltrd stim post tibial	R26C	Covered	219.24	51.07	0 000	2	0	0	0	0
64568-00	Opn impltj crnl nrv nea&pg	R26C	Covered	1028.87	1028.87	0 090	2	1	0	0	0
64569-00	Revise/repl vagus n eltrd	R26C	Covered	1247.90	1247.90	0 090	2	1	0	1	1

64570-00	Remove vagus n eltrd	R26C	Covered	1199.59	1199.59	0 090	2	1	0	1	1
64575-00	Opn impltj nea perph nerve	R26C	Covered	550.35	550.35	0 090	2	0	1	0	0
64580-00	Opn impltj nea neuromuscular	R26C	Covered	535.34	535.34	0 090	2	0	2	0	0
64581-00	Opn impltj nea sacral nerve	R26C	Covered	1120.69	1120.69	0 090	2	0	1	0	0
64585-00	Rev/rmv perph nstim eltrd ra	R26C	Covered	444.65	253.84	0 010	2	0	1	0	0
64590-00	Ins/rpl prph sac/gstr npg/r	R26C	Covered	794.64	507.46	0 010	2	0	1	1	0
64595-00	Rev/rmv prph sac/gstr npg/r	R26C	Covered	659.24	397.28	0 010	2	0	1	0	0
64600-00	Injection treatment of nerve	R26C	Covered	867.91	400.28	0 010	2	2	1	0	0
64605-00	Injection treatment of nerve	R26C	Covered	1603.40	673.30	0 010	2	1	0	0	0
64610-00	Injection treatment of nerve	R26C	Covered	1338.59	771.99	0 010	2	1	1	0	0
64611-00	Chemodenerv saliv glands	R26C	Covered	231.36	193.85	0 010	2	2	0	0	0
64612-00	Destroy nerve face muscle	R26C	Covered	245.58	209.36	0 010	2	1	1	0	0
64615-00	Chemodenerv musc migraine	R26C	Covered	255.12	194.32	0 010	2	2	1	0	0
64616-00	Chemodenerv musc neck dyston	R26C	Covered	233.86	176.94	0 010	2	1	1	0	0
64617-00	Chemodener muscle larynx emg	R26C	Covered	291.39	185.96	0 010	2	1	1	0	0
64620-00	Injection treatment of nerve	R26C	Covered	377.12	312.44	0 010	2	0	1	0	0
64624-00	Dstrj nulyt agt gnclr nrv	R26C	Covered	730.63	258.46	0 010	2	1	0	0	0
64625-00	Rf abltj nrv nrvtg si jt	R26C	Covered	885.40	345.32	0 010	2	1	1	0	0
64629-00	Trml dstrj ios bvn ea addl	R26C	Covered	333.69	333.69	0 ZZZ	0	0	1	0	0
64630-00	Injection treatment of nerve	R26C	Covered	456.80	329.38	0 010	2	0	0	0	0
64632-00	N block inj common digit	R26C	Covered	165.78	119.21	0 010	2	1	0	0	0
64633-00	Destroy cerv/thor facet jnt	R26C	Covered	818.40	339.12	0 010	2	1	1	0	0
64634-00	Destroy c/th facet jnt addl	R26C	Covered	483.15	115.77	0 ZZZ	0	1	1	0	0
64635-00	Destroy lumb/sac facet jnt	R26C	Covered	825.52	339.77	0 010	2	1	1	0	0
64636-00	Destroy l/s facet jnt addl	R26C	Covered	454.58	101.42	0 ZZZ	0	1	1	0	0
64640-00	Injection treatment of nerve	R26C	Covered	462.20	209.95	0 010	2	1	1	0	0
64642-00	Chemodenerv 1 extremity 1-4	R26C	Covered	268.40	177.85	0 000	2	0	1	0	0
64643-00	Chemodenerv 1 extrem 1-4 ea	R26C	Covered	162.60	116.03	0 ZZZ	0	0	1	0	0
64644-00	Chemodenerv 1 extrem 5/> musc	R26C	Covered	315.60	194.00	0 000	2	0	1	0	0
64645-00	Chemodenerv 1 extrem 5/> ea	R26C	Covered	209.58	131.96	0 ZZZ	0	0	1	0	0
64646-00	Chemodenerv trunk musc 1-5	R26C	Covered	278.59	189.33	0 000	2	0	1	0	0
64647-00	Chemodenerv trunk musc 6/>	R26C	Covered	315.36	216.40	0 000	2	0	1	0	0
64650-00	Chemodenerv eccrine glands	R26C	Covered	162.77	68.98	0 000	2	0	0	0	0
64653-00	Chemodenerv eccrine glands	R26C	Covered	188.27	85.43	0 000	2	0	0	0	0
64680-00	Injection treatment of nerve	R26C	Covered	635.67	283.81	0 010	2	0	1	0	0
64681-00	Injection treatment of nerve	R26C	Covered	840.68	385.98	0 010	2	0	1	0	0
64702-00	Revise finger/toe nerve	R26C	Covered	920.76	920.76	0 090	2	0	1	0	0
64704-00	Revise hand/foot nerve	R26C	Covered	585.18	585.18	0 090	2	0	2	1	0
64708-00	Revise arm/leg nerve	R26C	Covered	914.03	914.03	0 090	2	0	2	1	0
64712-00	Revision of sciatic nerve	R26C	Covered	1034.10	1034.10	0 090	2	1	2	1	0
64713-00	Revision of arm nerve(s)	R26C	Covered	1363.50	1363.50	0 090	2	1	2	1	0
64714-00	Revise low back nerve(s)	R26C	Covered	1312.60	1312.60	0 090	2	1	2	1	0
64716-00	Revision of cranial nerve	R26C	Covered	903.87	903.87	0 090	2	0	2	1	0
64718-00	Revise ulnar nerve at elbow	R26C	Covered	1073.69	1073.69	0 090	2	1	0	0	0
64719-00	Revise ulnar nerve at wrist	R26C	Covered	728.36	728.36	0 090	2	1	1	0	0
64721-00	Carpal tunnel surgery	R26C	Covered	799.70	784.82	0 090	2	1	1	0	0
64722-00	Relieve pressure on nerve(s)	R26C	Covered	648.52	648.52	0 090	2	0	2	1	0
64726-00	Release foot/toe nerve	R26C	Covered	485.21	485.21	0 090	2	0	1	0	0
64727-00	Internal nerve revision	R26C	Covered	312.22	312.22	0 ZZZ	0	0	1	0	0
64732-00	Incision of brow nerve	R26C	Covered	764.71	764.71	0 090	2	1	2	0	0
64734-00	Incision of cheek nerve	R26C	Covered	862.37	862.37	0 090	2	1	0	0	0
64736-00	Incision of chin nerve	R26C	Covered	594.48	594.48	0 090	2	1	2	0	0
64738-00	Incision of jaw nerve	R26C	Covered	808.80	808.80	0 090	2	1	2	0	0
64740-00	Incision of tongue nerve	R26C	Covered	829.25	829.25	0 090	2	1	2	0	0

64742-00	Incision of facial nerve	R26C	Covered	900.71	900.71	0 090	2	1	2	0	0
64744-00	Incise nerve back of head	R26C	Covered	842.63	842.63	0 090	2	1	0	0	0
64746-00	Incise diaphragm nerve	R26C	Covered	716.81	716.81	0 090	2	1	2	1	0
64755-00	Incision of stomach nerves	R26C	Covered	1501.50	1501.50	0 090	2	0	2	1	0
64760-00	Incision of vagus nerve	R26C	Covered	873.46	873.46	0 090	2	0	2	1	0
64763-00	Incise hip/thigh nerve	R26C	Covered	863.78	863.78	0 090	2	1	2	1	0
64766-00	Incise hip/thigh nerve	R26C	Covered	1061.78	1061.78	0 090	2	1	2	0	0
64771-00	Sever cranial nerve	R26C	Covered	1007.81	1007.81	0 090	2	0	2	0	0
64772-00	Incision of spinal nerve	R26C	Covered	973.30	973.30	0 090	2	0	2	1	0
64774-00	Remove skin nerve lesion	R26C	Covered	749.30	749.30	0 090	2	0	1	0	0
64776-00	Remove digit nerve lesion	R26C	Covered	718.00	718.00	0 090	2	0	0	0	0
64778-00	Digit nerve surgery add-on	R26C	Covered	295.53	295.53	0 ZZZ	0	0	1	0	0
64782-00	Remove limb nerve lesion	R26C	Covered	807.01	807.01	0 090	2	0	1	1	0
64783-00	Limb nerve surgery add-on	R26C	Covered	352.61	352.61	0 ZZZ	0	0	1	0	0
64784-00	Remove nerve lesion	R26C	Covered	1249.69	1249.69	0 090	2	0	0	0	0
64786-00	Remove sciatic nerve lesion	R26C	Covered	1642.52	1642.52	0 090	2	1	2	0	0
64787-00	Implant nerve end	R26C	Covered	387.77	387.77	0 ZZZ	0	0	0	0	0
64788-00	Remove skin nerve lesion	R26C	Covered	720.02	720.02	0 090	2	0	1	0	0
64790-00	Removal of nerve lesion	R26C	Covered	1430.06	1430.06	0 090	2	0	0	1	0
64792-00	Removal of nerve lesion	R26C	Covered	1798.11	1798.11	0 090	2	0	2	1	0
64795-00	Biopsy of nerve	R26C	Covered	315.11	315.11	0 000	2	0	1	0	0
64802-00	Sympathectomy cervical	R26C	Covered	1382.12	1382.12	0 090	2	1	2	1	0
64804-00	Remove sympathetic nerves	R26C	Covered	1901.77	1901.77	0 090	2	1	2	1	0
64809-00	Remove sympathetic nerves	R26C	Covered	1733.34	1733.34	0 090	2	1	2	1	0
64818-00	Remove sympathetic nerves	R26C	Covered	1337.32	1337.32	0 090	2	1	2	1	0
64820-00	Sympathectomy digital artery	R26C	Covered	1340.69	1340.69	0 090	2	0	1	0	0
64821-00	Remove sympathetic nerves	R26C	Covered	1222.27	1222.27	0 090	2	1	1	0	0
64822-00	Remove sympathetic nerves	R26C	Covered	1222.27	1222.27	0 090	2	1	1	0	0
64823-00	Sympathectomy supfc palmar	R26C	Covered	1376.02	1376.02	0 090	2	1	1	0	0
64831-00	Repair of digit nerve	R26C	Covered	1223.24	1223.24	0 090	2	1	1	0	0
64832-00	Repair nerve add-on	R26C	Covered	551.59	551.59	0 ZZZ	0	0	0	0	0
64834-00	Repair of hand or foot nerve	R26C	Covered	1302.84	1302.84	0 090	2	1	0	0	0
64835-00	Repair of hand or foot nerve	R26C	Covered	1406.67	1406.67	0 090	2	1	2	0	0
64836-00	Repair of hand or foot nerve	R26C	Covered	1406.67	1406.67	0 090	2	1	2	0	0
64837-00	Repair nerve add-on	R26C	Covered	594.87	594.87	0 ZZZ	0	0	2	0	0
64840-00	Repair of leg nerve	R26C	Covered	1650.92	1650.92	0 090	2	1	2	0	0
64856-00	Repair/transpose nerve	R26C	Covered	1713.92	1713.92	0 090	2	0	1	1	0
64857-00	Repair arm/leg nerve	R26C	Covered	1796.01	1796.01	0 090	2	0	2	1	0
64858-00	Repair sciatic nerve	R26C	Covered	1995.00	1995.00	0 090	2	1	2	1	0
64859-00	Nerve surgery	R26C	Covered	404.11	404.11	0 ZZZ	0	0	2	1	0
64861-00	Repair of arm nerves	R26C	Covered	2404.36	2404.36	0 090	2	1	2	1	0
64862-00	Repair of low back nerves	R26C	Covered	2322.99	2322.99	0 090	2	1	2	0	0
64864-00	Repair of facial nerve	R26C	Covered	1484.46	1484.46	0 090	2	0	2	1	0
64865-00	Repair of facial nerve	R26C	Covered	1904.84	1904.84	0 090	2	0	2	1	0
64866-00	Fusion of facial/other nerve	R26C	Covered	2157.88	2157.88	0 090	2	0	2	1	0
64868-00	Fusion of facial/other nerve	R26C	Covered	1745.69	1745.69	0 090	2	0	2	1	0
64872-00	Subsequent repair of nerve	R26C	Covered	189.46	189.46	0 ZZZ	0	0	2	1	0
64874-00	Repair & revise nerve add-on	R26C	Covered	283.60	283.60	0 ZZZ	0	0	2	1	0
64876-00	Repair nerve/shorten bone	R26C	Covered	320.67	320.67	0 ZZZ	0	0	2	1	0
64885-00	Nerve graft head/neck <4 cm	R26C	Covered	1863.17	1863.17	0 090	2	0	2	1	0
64886-00	Nerve graft head/neck >4 cm	R26C	Covered	2222.95	2222.95	0 090	2	0	2	1	0
64890-00	Nrv grf 1strnd hnd/foot <4cm	R26C	Covered	1835.32	1835.32	0 090	2	0	2	0	0
64891-00	Nrv grf 1strnd hnd/foot >4cm	R26C	Covered	1949.80	1949.80	0 090	2	0	2	0	0
64892-00	Nrv grf 1strnd arm/leg <4cm	R26C	Covered	1787.65	1787.65	0 090	2	0	2	1	0

64893-00	Nrv grf 1strnd arm/leg >4 cm	R26C	Covered	1903.98	1903.98	0 090	2	0	2	0	0
64895-00	Nrv grf mlstst hnd/foot <4 cm	R26C	Covered	2238.99	2238.99	0 090	2	0	2	1	0
64896-00	Nrv grf mlstst hnd/foot >4 cm	R26C	Covered	2414.92	2414.92	0 090	2	0	2	1	0
64897-00	Nrv grf mlstst arm/leg <4 cm	R26C	Covered	2143.02	2143.02	0 090	2	0	2	1	0
64898-00	Nrv grf mlstst arm/leg >4 cm	R26C	Covered	2320.78	2320.78	0 090	2	0	2	1	0
64901-00	Nerve graft add-on	R26C	Covered	970.76	970.76	0 ZZZ	0	0	2	1	0
64902-00	Nerve graft add-on	R26C	Covered	1123.81	1123.81	0 ZZZ	0	0	2	1	0
64905-00	Nerve pedicle transfer	R26C	Covered	1711.07	1711.07	0 090	2	0	2	1	0
64907-00	Nerve pedicle transfer	R26C	Covered	2196.73	2196.73	0 090	2	0	2	1	0
64910-00	Nerve repair w/allograft	R26C	Covered	1336.17	1336.17	0 090	2	0	2	1	0
64911-00	Neurorraphy w/vein autograft	R26C	Covered	1767.37	1767.37	0 090	2	0	2	1	0
64912-00	Nrv rpr w/nrv algrft 1st	R26C	Covered	1557.84	1557.84	0 090	2	0	2	1	0
64913-00	Nrv rpr w/nrv algrft ea addl	R26C	Covered	287.68	287.68	0 ZZZ	0	0	2	1	0
44799-00	Unlisted px small intestine	NBYR	Covered	By Report	By Report	0 YYY	2	0	1	1	1
65091-00	Revise eye	R26C	Covered	1375.94	1375.94	0 090	2	1	0	1	0
65093-00	Revise eye with implant	R26C	Covered	1365.15	1365.15	0 090	2	1	1	1	0
65101-00	Removal of eye	R26C	Covered	1574.16	1574.16	0 090	2	1	1	0	0
65103-00	Remove eye/insert implant	R26C	Covered	1622.09	1622.09	0 090	2	1	1	1	0
65105-00	Remove eye/attach implant	R26C	Covered	1761.76	1761.76	0 090	2	1	2	1	0
65110-00	Removal of eye	R26C	Covered	2411.46	2411.46	0 090	2	1	2	1	0
65112-00	Remove eye/revise socket	R26C	Covered	2756.68	2756.68	0 090	2	1	2	1	0
65114-00	Remove eye/revise socket	R26C	Covered	2873.56	2873.56	0 090	2	1	2	1	0
65125-00	Revise ocular implant	R26C	Covered	852.55	540.79	0 090	2	1	1	1	0
65130-00	Insert ocular implant	R26C	Covered	1578.91	1578.91	0 090	2	1	1	1	0
65135-00	Insert ocular implant	R26C	Covered	1597.66	1597.66	0 090	2	1	1	0	0
65140-00	Attach ocular implant	R26C	Covered	1714.25	1714.25	0 090	2	1	1	0	0
65150-00	Revise ocular implant	R26C	Covered	1302.57	1302.57	0 090	2	1	0	0	0
65155-00	Reinsert ocular implant	R26C	Covered	1779.90	1779.90	0 090	2	1	1	0	0
65175-00	Removal of ocular implant	R26C	Covered	1445.29	1445.29	0 090	2	1	1	1	0
65205-00	Remove foreign body from eye	R26C	Covered	51.27	51.91	0 000	2	1	1	0	0
65210-00	Remove foreign body from eye	R26C	Covered	69.56	64.38	0 000	2	1	1	0	0
65220-00	Remove foreign body from eye	R26C	Covered	109.55	71.39	0 000	2	1	1	0	0
65222-00	Remove foreign body from eye	R26C	Covered	125.03	90.10	0 000	2	1	1	0	0
65235-00	Remove foreign body from eye	R26C	Covered	1332.35	1332.35	0 090	2	1	0	0	0
65260-00	Remove foreign body from eye	R26C	Covered	1778.44	1778.44	0 090	2	1	2	0	0
65265-00	Remove foreign body from eye	R26C	Covered	1999.15	1999.15	0 090	2	1	2	1	0
65270-00	Repair of eye wound	R26C	Covered	533.18	253.12	0 010	2	1	0	0	0
65272-00	Repair of eye wound	R26C	Covered	981.04	638.89	0 090	2	1	1	0	0
65273-00	Repair of eye wound	R26C	Covered	684.83	684.83	0 090	2	1	1	1	0
65275-00	Repair of eye wound	R26C	Covered	1084.45	830.26	0 090	2	1	0	0	0
65280-00	Repair of eye wound	R26C	Covered	1208.46	1208.46	0 090	2	1	0	0	0
65285-00	Repair of eye wound	R26C	Covered	1987.14	1987.14	0 090	2	1	1	0	0
65286-00	Repair of eye wound	R26C	Covered	1289.60	894.40	0 090	2	1	1	0	0
65290-00	Repair of eye socket wound	R26C	Covered	885.04	885.04	0 090	2	1	1	1	0
65400-00	Removal of eye lesion	R26C	Covered	1274.24	1095.73	0 090	2	1	1	0	0
65410-00	Biopsy of cornea	R26C	Covered	263.90	183.70	0 000	2	1	0	0	0
65420-00	Removal of eye lesion	R26C	Covered	1005.25	696.72	0 090	2	1	1	0	0
65426-00	Removal of eye lesion	R26C	Covered	1241.82	869.26	0 090	2	1	1	0	0
65430-00	Corneal smear	R26C	Covered	209.52	181.71	0 000	2	1	1	0	0
65435-00	Curette/treat cornea	R26C	Covered	151.33	126.10	0 000	2	1	1	0	0
65436-00	Curette/treat cornea	R26C	Covered	706.76	669.89	0 090	2	1	1	0	0
65450-00	Treatment of corneal lesion	R26C	Covered	609.27	595.68	0 090	2	1	1	0	0
65600-00	Revision of cornea	R26C	Covered	810.44	621.58	0 090	2	1	1	0	0
65710-00	Corneal transplant	R26C	Covered	2065.90	2065.90	0 090	2	1	2	1	0

65730-00	Corneal transplant	R26C	Covered	2264.92	2264.92	0 090	2	1	2	1	0
65750-00	Corneal transplant	R26C	Covered	2274.56	2274.56	0 090	2	1	2	1	0
65755-00	Corneal transplant	R26C	Covered	2267.28	2267.28	0 090	2	1	2	1	0
65756-00	Corneal trnspl endothelial	R26C	Covered	2119.61	2119.61	0 090	2	1	2	1	0
65757-00	Prep corneal endo allograft	RMCD	Covered	110.87	110.87	0 ZZZ	0	0	0	0	0
58750-00	Repair oviduct	NCOV	Not Covered	Code not covered	Code not covered	0 090	2	1	2	1	0
58752-00	Revise ovarian tube(s)	NCOV	Not Covered	Code not covered	Code not covered	0 090	2	1	2	0	0
15837-00	Excise excess skin arm/hand	NCOV	Not Covered	Code not covered	Code not covered	0 090	2	0	0	0	0
65770-00	Revise cornea with implant	R26C	Covered	2528.51	2528.51	0 090	2	1	2	0	0
0216U-00	DNA analysis of gene sequence of 12 genes for	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
65772-00	Correction of astigmatism	R26C	Covered	837.75	736.85	0 090	2	1	1	0	0
65775-00	Correction of astigmatism	R26C	Covered	1046.70	1046.70	0 090	2	1	1	0	0
65778-00	Cover eye w/membrane	R26C	Covered	2105.48	78.41	0 000	2	1	0	0	0
65779-00	Cover eye w/membrane suture	R26C	Covered	2227.23	210.51	0 000	2	1	0	0	0
65780-00	Ocular reconst transplant	R26C	Covered	1079.21	1079.21	0 090	2	1	1	1	0
65781-00	Ocular reconst transplant	R26C	Covered	2387.36	2387.36	0 090	2	1	2	1	0
65782-00	Ocular reconst transplant	R26C	Covered	2064.49	2064.49	0 090	2	1	1	1	0
65785-00	Impltj ntrstrml crnl rng seg	R26C	Covered	4064.21	808.21	0 090	2	1	1	1	0
65800-00	Drainage of eye	R26C	Covered	217.10	156.95	0 000	2	1	1	0	0
65810-00	Drainage of eye	R26C	Covered	844.19	844.19	0 090	2	1	1	0	0
65815-00	Drainage of eye	R26C	Covered	1188.93	866.18	0 090	2	1	1	0	0
65820-00	Relieve inner eye pressure	R26C	Covered	1510.52	1510.52	0 090	2	1	0	0	0
65850-00	Incision of eye	R26C	Covered	1521.19	1521.19	0 090	2	1	1	1	0
65855-00	Trabeculoplasty laser surg	R26C	Covered	446.72	367.81	0 010	2	1	1	1	1
65860-00	Incise inner eye adhesions	R26C	Covered	562.37	445.95	0 090	2	1	0	0	0
65865-00	Incise inner eye adhesions	R26C	Covered	872.20	872.20	0 090	2	1	1	1	0
65870-00	Incise inner eye adhesions	R26C	Covered	1081.19	1081.19	0 090	2	1	1	1	0
65875-00	Incise inner eye adhesions	R26C	Covered	1154.76	1154.76	0 090	2	1	1	1	0
65880-00	Incise inner eye adhesions	R26C	Covered	1211.07	1211.07	0 090	2	1	1	0	0
65900-00	Remove eye lesion	R26C	Covered	1797.31	1797.31	0 090	2	1	2	0	0
65920-00	Remove implant of eye	R26C	Covered	1437.48	1437.48	0 090	2	1	1	1	0
65930-00	Remove blood clot from eye	R26C	Covered	1162.44	1162.44	0 090	2	1	1	1	0
66020-00	Injection treatment of eye	R26C	Covered	367.42	238.71	0 010	2	1	1	0	0
66030-00	Injection treatment of eye	R26C	Covered	333.03	203.67	0 010	2	1	1	0	0
66130-00	Remove eye lesion	R26C	Covered	1292.45	1016.92	0 090	2	1	0	0	0
66150-00	Glaucoma surgery	R26C	Covered	1599.85	1599.85	0 090	2	1	1	1	0
66155-00	Glaucoma surgery	R26C	Covered	1599.24	1599.24	0 090	2	1	1	0	0
66160-00	Glaucoma surgery	R26C	Covered	1790.62	1790.62	0 090	2	1	1	1	0
66170-00	Glaucoma surgery	R26C	Covered	1983.75	1983.75	0 090	2	1	2	1	0
66172-00	Incision of eye	R26C	Covered	2170.09	2170.09	0 090	2	1	2	1	0
66174-00	Trluml dil aq o/f can w/o st	R26C	Covered	1136.01	1136.01	0 090	2	1	2	1	0
66175-00	Trluml dil aq o/f can w/st	R26C	Covered	1313.70	1313.70	0 090	2	1	2	1	0
66179-00	Aqueous shunt eye w/o graft	R26C	Covered	1956.40	1956.40	0 090	2	1	2	0	0
66180-00	Aqueous shunt eye w/graft	R26C	Covered	2058.91	2058.91	0 090	2	1	2	0	0
66183-00	Insert ant drainage device	R26C	Covered	1866.05	1866.05	0 090	2	1	2	0	0
66184-00	Revision of aqueous shunt	R26C	Covered	1442.81	1442.81	0 090	2	1	2	0	0
66185-00	Revise aqueous shunt eye	R26C	Covered	1546.01	1546.01	0 090	2	1	2	0	0
66225-00	Repair/graft eye lesion	R26C	Covered	1687.63	1687.63	0 090	2	1	1	1	0
66250-00	Follow-up surgery of eye	R26C	Covered	1389.50	1009.18	0 090	2	1	1	0	0
66500-00	Incision of iris	R26C	Covered	729.65	729.65	0 090	2	1	1	1	0
66505-00	Incision of iris	R26C	Covered	792.95	792.95	0 090	2	1	1	0	0
66600-00	Remove iris and lesion	R26C	Covered	1656.93	1656.93	0 090	2	1	1	0	0
66605-00	Removal of iris	R26C	Covered	1969.17	1969.17	0 090	2	1	1	0	0
66625-00	Removal of iris	R26C	Covered	780.71	780.71	0 090	2	1	1	0	0

66630-00	Removal of iris	R26C	Covered	1028.58	1028.58	0 090	2	1	1	0	0
66635-00	Removal of iris	R26C	Covered	1037.93	1037.93	0 090	2	1	1	0	0
66680-00	Repair iris & ciliary body	R26C	Covered	949.53	949.53	0 090	2	1	1	1	0
66682-00	Repair iris & ciliary body	R26C	Covered	1311.03	1311.03	0 090	2	1	1	0	0
66700-00	Destruction ciliary body	R26C	Covered	830.44	709.49	0 090	2	1	0	0	0
66710-00	Ciliary transsleral therapy	R26C	Covered	810.39	708.84	0 090	2	1	1	0	0
66711-00	Ecp ciliary body destruction	R26C	Covered	928.96	928.96	0 090	3	1	1	0	0
66720-00	Destruction ciliary body	R26C	Covered	864.85	752.31	0 090	2	1	1	0	0
66740-00	Destruction ciliary body	R26C	Covered	805.21	709.49	0 090	2	1	1	0	0
66761-00	Revision of iris	R26C	Covered	551.50	428.61	0 010	2	1	1	0	0
66762-00	Revision of iris	R26C	Covered	876.12	771.34	0 090	2	1	1	0	0
66770-00	Removal of inner eye lesion	R26C	Covered	970.50	874.12	0 090	2	1	1	0	0
66820-00	Incision secondary cataract	R26C	Covered	871.94	871.94	0 090	2	1	1	0	0
66821-00	After cataract laser surgery	R26C	Covered	617.18	572.55	0 090	2	1	1	0	0
66825-00	Reposition intraocular lens	R26C	Covered	1527.64	1527.64	0 090	2	1	0	0	0
66830-00	Removal of lens lesion	R26C	Covered	1282.14	1282.14	0 090	2	1	1	0	0
66840-00	Removal of lens material	R26C	Covered	1252.13	1252.13	0 090	2	1	1	0	0
66850-00	Removal of lens material	R26C	Covered	1423.19	1423.19	0 090	2	1	1	0	0
66852-00	Removal of lens material	R26C	Covered	1511.41	1511.41	0 090	2	1	0	1	0
66920-00	Extraction of lens	R26C	Covered	1350.31	1350.31	0 090	2	1	0	1	0
66930-00	Extraction of lens	R26C	Covered	1545.01	1545.01	0 090	2	1	0	0	0
66940-00	Extraction of lens	R26C	Covered	1418.03	1418.03	0 090	2	1	0	1	0
66982-00	Xcapsl ctrc rmlv cplx wo ecp	R26C	Covered	1342.72	1342.72	0 090	2	1	1	0	0
66983-00	Cataract surg w/iol 1 stage	RMCD	Covered	789.29	789.29	0 090	2	1	1	0	0
66984-00	Xcapsl ctrc rmlv w/o ecp	R26C	Covered	982.29	982.29	0 090	2	1	1	0	0
66985-00	Insert lens prosthesis	R26C	Covered	1392.84	1392.84	0 090	2	1	1	1	0
66986-00	Exchange lens prosthesis	R26C	Covered	1626.10	1626.10	0 090	2	1	1	1	0
66987-00	Xcapsl ctrc rmlv cplx w/ecp	RMCD	Covered	894.44	894.44	0 090	2	1	0	1	1
66988-00	Xcapsl ctrc rmlv w/ecp	RMCD	Covered	732.07	732.07	0 090	2	1	0	1	1
66990-00	Ophthalmic endoscope add-on	R26C	Covered	155.08	155.08	0 ZZZ	0	0	1	0	0
66991-00	Xcapsl ctrc rmlv insj 1+	RCMS	Covered	1233.73	1233.73	0 090	2	1	1	0	0
44899-00	Unlisted px meckel's dvrctcm	NBYR	Covered	By Report	By Report	0 YYY	2	0	2	1	1
67005-00	Partial removal of eye fluid	R26C	Covered	869.15	869.15	0 090	2	1	1	1	0
67010-00	Partial removal of eye fluid	R26C	Covered	989.89	989.89	0 090	2	1	1	1	0
67015-00	Release of eye fluid	R26C	Covered	1103.41	1103.41	0 090	2	1	1	1	0
67025-00	Replace eye fluid	R26C	Covered	1358.72	1142.69	0 090	2	1	1	1	0
67027-00	Implant eye drug system	R26C	Covered	1524.92	1524.92	0 090	2	1	2	1	0
67028-00	Injection eye drug	R26C	Covered	205.76	163.07	0 000	2	1	1	0	0
67030-00	Incise inner eye strands	R26C	Covered	1023.61	1023.61	0 090	2	1	1	1	0
67031-00	Laser surgery eye strands	R26C	Covered	711.17	641.96	0 090	2	1	1	0	0
67036-00	Removal of inner eye fluid	R26C	Covered	1614.96	1614.96	0 090	2	1	2	1	0
67039-00	Laser treatment of retina	R26C	Covered	1725.05	1725.05	0 090	2	1	2	1	0
67040-00	Laser treatment of retina	R26C	Covered	1858.27	1858.27	0 090	2	1	2	1	0
67041-00	Vit for macular pucker	R26C	Covered	2046.38	2046.38	0 090	2	1	2	1	0
67042-00	Vit for macular hole	R26C	Covered	2046.38	2046.38	0 090	2	1	2	1	0
67043-00	Vit for membrane dissect	R26C	Covered	2156.42	2156.42	0 090	2	1	2	1	0
67101-00	Repair detached retina crtx	R26C	Covered	616.96	518.00	0 010	2	1	1	0	0
67105-00	Repair detached retina pc	R26C	Covered	542.96	499.62	0 010	2	1	1	0	0
67107-00	Repair detached retina	R26C	Covered	2012.60	2012.60	0 090	2	1	2	1	0
67108-00	Repair detached retina	R26C	Covered	2128.28	2128.28	0 090	2	1	2	1	0
67110-00	Repair detached retina	R26C	Covered	1626.72	1475.36	0 090	2	1	1	0	0
67113-00	Repair retinal detach cplx	R26C	Covered	2379.81	2379.81	0 090	2	1	2	1	0
67115-00	Release encircling material	R26C	Covered	908.48	908.48	0 090	2	1	1	0	0
67120-00	Remove eye implant material	R26C	Covered	1232.28	1006.55	0 090	2	1	1	1	0

67121-00	Remove eye implant material	R26C	Covered	1627.48	1627.48	0 090	2	1	2	1	0
67141-00	Proph rta dtchmnt crtx dthrm	R26C	Covered	499.46	395.33	0 010	2	1	1	0	0
67145-00	Proph rta dtchmnt pc	R26C	Covered	447.72	395.33	0 010	2	1	1	0	0
67208-00	Treatment of retinal lesion	R26C	Covered	1093.85	1042.75	0 090	2	1	1	0	0
67210-00	Treatment of retinal lesion	R26C	Covered	937.40	903.12	0 090	2	1	1	0	0
67218-00	Treatment of retinal lesion	R26C	Covered	2485.58	2485.58	0 090	2	1	1	0	0
67220-00	Treatment of choroid lesion	R26C	Covered	967.11	903.72	0 090	2	1	1	0	0
67221-00	Ocular photodynamic ther	R26C	Covered	493.57	368.09	0 000	2	0	1	0	0
67225-00	Eye photodynamic ther add-on	R26C	Covered	51.39	48.16	0 ZZZ	0	0	1	0	0
67227-00	Dstrj extensive retinopathy	R26C	Covered	539.34	458.49	0 010	2	1	1	0	0
67228-00	Treatment x10sv retinopathy	R26C	Covered	615.80	542.72	0 010	2	1	1	0	0
67229-00	Tr retinal les preterm inf	R26C	Covered	2076.90	2076.90	0 090	2	1	1	0	0
67250-00	Reinforce eye wall	R26C	Covered	1662.61	1662.61	0 090	2	1	1	1	0
67255-00	Reinforce/graft eye wall	R26C	Covered	1254.32	1254.32	0 090	2	1	2	1	0
44979-00	Unlisted laps px appendix	NBYR	Covered	By Report	By Report	0 YYY	2	1	2	1	1
67311-00	Revise eye muscle	R26C	Covered	825.70	825.70	0 090	2	1	1	0	0
67312-00	Revise two eye muscles	R26C	Covered	1193.42	1193.42	0 090	2	1	1	1	0
67314-00	Revise eye muscle	R26C	Covered	825.70	825.70	0 090	2	1	1	0	0
67316-00	Revise two eye muscles	R26C	Covered	1278.50	1278.50	0 090	2	1	0	0	0
67318-00	Revise eye muscle(s)	R26C	Covered	1238.26	1238.26	0 090	2	1	1	1	0
67320-00	Revise eye muscle(s) add-on	R26C	Covered	307.01	307.01	0 ZZZ	0	0	1	0	0
67331-00	Eye surgery follow-up add-on	R26C	Covered	280.78	280.78	0 ZZZ	0	1	1	1	0
67332-00	Rerevise eye muscles add-on	R26C	Covered	357.59	357.59	0 ZZZ	0	1	1	1	0
67334-00	Revise eye muscle w/suture	R26C	Covered	276.02	276.02	0 ZZZ	0	1	1	1	0
67335-00	Eye suture during surgery	R26C	Covered	328.75	328.75	0 ZZZ	0	1	1	1	0
67340-00	Revise eye muscle add-on	R26C	Covered	513.36	513.36	0 ZZZ	0	0	2	0	0
67343-00	Release eye tissue	R26C	Covered	1221.18	1221.18	0 090	2	1	1	1	0
67345-00	Destroy nerve of eye muscle	R26C	Covered	431.45	378.41	0 010	2	1	1	0	0
67346-00	Biopsy eye muscle	R26C	Covered	343.69	343.69	0 000	2	1	0	0	0
45399-00	Unlisted procedure colon	NBYR	Covered	By Report	By Report	0 YYY	2	0	1	1	1
67400-00	Explore/biopsy eye socket	R26C	Covered	1902.95	1902.95	0 090	2	1	1	1	0
67405-00	Explore/drain eye socket	R26C	Covered	1669.94	1669.94	0 090	2	1	1	0	0
67412-00	Explore/treat eye socket	R26C	Covered	1817.61	1817.61	0 090	2	1	1	1	0
67413-00	Explore/treat eye socket	R26C	Covered	1770.49	1770.49	0 090	2	1	2	0	0
67414-00	Explr/decompress eye socket	R26C	Covered	2626.88	2626.88	0 090	2	1	2	1	0
67415-00	Aspiration orbital contents	R26C	Covered	180.72	180.72	0 000	2	1	0	0	0
67420-00	Explore/treat eye socket	R26C	Covered	3133.37	3133.37	0 090	2	1	2	1	0
67430-00	Explore/treat eye socket	R26C	Covered	2541.68	2541.68	0 090	2	1	2	0	0
67440-00	Explore/drain eye socket	R26C	Covered	2465.03	2465.03	0 090	2	1	2	1	0
67445-00	Explr/decompress eye socket	R26C	Covered	2768.22	2768.22	0 090	2	1	2	1	0
67450-00	Explore/biopsy eye socket	R26C	Covered	2553.54	2553.54	0 090	2	1	2	1	0
67500-00	Inject/treat eye socket	R26C	Covered	138.81	112.94	0 000	2	1	1	0	0
67505-00	Inject/treat eye socket	R26C	Covered	155.58	127.77	0 000	2	1	1	0	0
67515-00	Inject/treat eye socket	R26C	Covered	92.44	83.38	0 000	2	1	1	0	0
67550-00	Insert eye socket implant	R26C	Covered	1988.97	1988.97	0 090	2	1	1	1	0
67560-00	Revise eye socket implant	R26C	Covered	2030.39	2030.39	0 090	2	1	0	0	0
67570-00	Decompress optic nerve	R26C	Covered	2329.48	2329.48	0 090	2	1	2	1	0
45499-00	Laparoscope proc rectum	NBYR	Covered	By Report	By Report	0 YYY	2	0	2	1	1
67700-00	Drainage of eyelid abscess	R26C	Covered	536.43	212.38	0 010	2	1	1	0	0
67710-00	Incision of eyelid	R26C	Covered	459.36	179.94	0 010	2	1	1	0	0
67715-00	Incision of eyelid fold	R26C	Covered	489.96	193.07	0 010	2	1	1	0	0
67800-00	Remove eyelid lesion	R26C	Covered	237.57	184.53	0 010	2	0	1	0	0
67801-00	Remove eyelid lesions	R26C	Covered	299.19	235.81	0 010	2	0	1	0	0
67805-00	Remove eyelid lesions	R26C	Covered	374.90	294.05	0 010	2	0	1	0	0

67808-00	Remove eyelid lesion(s)	R26C	Covered	668.16	668.16	0 090	2	0	1	0	0
67810-00	Biopsy eyelid & lid margin	R26C	Covered	344.54	118.81	0 000	2	1	1	0	0
67820-00	Revise eyelashes	R26C	Covered	33.77	40.24	0 000	2	1	1	0	0
67825-00	Revise eyelashes	R26C	Covered	248.49	223.26	0 010	2	1	1	0	0
67830-00	Revise eyelashes	R26C	Covered	506.10	249.32	0 010	2	1	1	0	0
67835-00	Revise eyelashes	R26C	Covered	799.98	799.98	0 090	2	1	0	0	0
67840-00	Remove eyelid lesion	R26C	Covered	523.03	283.71	0 010	2	1	1	0	0
67850-00	Dstrj lesion lid margin <1cm	R26C	Covered	402.10	236.52	0 010	2	1	1	0	0
67875-00	Closure of eyelid by suture	R26C	Covered	339.40	171.23	0 000	2	1	1	0	0
67880-00	Revision of eyelid	R26C	Covered	864.14	668.16	0 090	2	1	1	0	0
67882-00	Revision of eyelid	R26C	Covered	1052.47	853.26	0 090	2	1	1	0	0
67900-00	Repair brow defect	R26C	Covered	1195.54	907.71	0 090	2	1	1	0	0
67901-00	Repair eyelid defect	R26C	Covered	1468.77	1065.81	0 090	2	1	1	0	0
67902-00	Repair eyelid defect	R26C	Covered	1308.73	1308.73	0 090	2	1	1	1	0
67903-00	Repair eyelid defect	R26C	Covered	1109.61	865.76	0 090	2	1	1	1	0
67904-00	Repair eyelid defect	R26C	Covered	1358.86	1072.33	0 090	2	1	1	1	0
67906-00	Repair eyelid defect	R26C	Covered	909.50	909.50	0 090	2	1	1	0	0
67908-00	Repair eyelid defect	R26C	Covered	1002.56	786.53	0 090	2	1	1	0	0
67909-00	Revise eyelid defect	R26C	Covered	1011.44	792.18	0 090	2	1	1	0	0
67911-00	Revise eyelid defect	R26C	Covered	1008.55	1008.55	0 090	2	1	1	0	0
67912-00	Correction eyelid w/implant	R26C	Covered	1671.77	869.09	0 090	2	1	1	0	0
67914-00	Repair eyelid defect	R26C	Covered	911.25	600.79	0 090	2	1	1	0	0
67915-00	Repair eyelid defect	R26C	Covered	595.01	369.27	0 090	2	1	1	0	0
67916-00	Repair eyelid defect	R26C	Covered	1130.11	778.25	0 090	2	1	1	0	0
67917-00	Repair eyelid defect	R26C	Covered	1153.12	824.55	0 090	2	1	1	0	0
67921-00	Repair eyelid defect	R26C	Covered	895.20	573.74	0 090	2	1	1	0	0
67922-00	Repair eyelid defect	R26C	Covered	577.54	369.27	0 090	2	1	1	0	0
67923-00	Repair eyelid defect	R26C	Covered	1131.36	779.50	0 090	2	1	1	0	0
67924-00	Repair eyelid defect	R26C	Covered	1202.88	825.15	0 090	2	1	1	0	0
67930-00	Repair eyelid wound	R26C	Covered	684.52	418.69	0 010	2	1	1	0	0
67935-00	Repair eyelid wound	R26C	Covered	1099.48	781.25	0 090	2	1	1	0	0
67938-00	Remove eyelid foreign body	R26C	Covered	511.84	216.25	0 010	2	1	1	0	0
67950-00	Revision of eyelid	R26C	Covered	1076.71	834.16	0 090	2	1	1	1	0
67961-00	Revision of eyelid	R26C	Covered	1086.73	821.54	0 090	2	1	0	0	0
67966-00	Revision of eyelid	R26C	Covered	1421.26	1174.83	0 090	2	1	1	0	0
67971-00	Reconstruction of eyelid	R26C	Covered	1290.12	1290.12	0 090	2	1	1	1	0
67973-00	Reconstruction of eyelid	R26C	Covered	1655.11	1655.11	0 090	2	1	2	1	0
67974-00	Reconstruction of eyelid	R26C	Covered	1653.69	1653.69	0 090	2	1	2	1	0
67975-00	Reconstruction of eyelid	R26C	Covered	1222.65	1222.65	0 090	2	1	1	0	0
45999-00	Unlisted procedure rectum	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1
68020-00	Incise/drain eyelid lining	R26C	Covered	223.25	200.62	0 010	2	1	1	0	0
68040-00	Treatment of eyelid lesions	R26C	Covered	114.59	85.49	0 000	2	1	1	0	0
68100-00	Biopsy of eyelid lining	R26C	Covered	335.47	171.18	0 000	2	1	1	0	0
68110-00	Remove eyelid lining lesion	R26C	Covered	441.79	270.39	0 010	2	1	1	0	0
68115-00	Remove eyelid lining lesion	R26C	Covered	621.48	331.07	0 010	2	1	1	0	0
68130-00	Remove eyelid lining lesion	R26C	Covered	1024.64	751.69	0 090	2	1	1	0	0
68135-00	Remove eyelid lining lesion	R26C	Covered	288.28	271.46	0 010	2	1	1	0	0
68200-00	Treat eyelid by injection	R26C	Covered	75.89	61.02	0 000	2	1	1	0	0
68320-00	Revise/graft eyelid lining	R26C	Covered	1378.86	981.73	0 090	2	1	1	1	0
68325-00	Revise/graft eyelid lining	R26C	Covered	1185.53	1185.53	0 090	2	1	1	1	0
68326-00	Revise/graft eyelid lining	R26C	Covered	1163.76	1163.76	0 090	2	1	1	0	0
68328-00	Revise/graft eyelid lining	R26C	Covered	1269.93	1269.93	0 090	2	1	0	0	0
68330-00	Revise eyelid lining	R26C	Covered	1154.81	835.94	0 090	2	1	0	0	0
68335-00	Revise/graft eyelid lining	R26C	Covered	1167.44	1167.44	0 090	2	1	1	1	0

68340-00	Separate eyelid adhesions	R26C	Covered	1118.56	718.84	0 090	2	1	0	0	0
68360-00	Revise eyelid lining	R26C	Covered	1004.96	745.59	0 090	2	1	1	0	0
68362-00	Revise eyelid lining	R26C	Covered	1183.67	1183.67	0 090	2	1	1	1	0
68371-00	Harvest eye tissue alograft	R26C	Covered	749.78	749.78	0 010	2	1	1	0	0
46999-00	Unlisted procedure anus	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1
68400-00	Incise/drain tear gland	R26C	Covered	559.18	237.72	0 010	2	1	1	0	0
68420-00	Incise/drain tear sac	R26C	Covered	619.82	299.01	0 010	2	1	1	0	0
68440-00	Incise tear duct opening	R26C	Covered	194.44	185.38	0 010	2	1	1	0	0
68500-00	Removal of tear gland	R26C	Covered	1936.15	1936.15	0 090	2	1	1	0	0
68505-00	Partial removal tear gland	R26C	Covered	1928.01	1928.01	0 090	2	1	1	0	0
68510-00	Biopsy of tear gland	R26C	Covered	830.42	508.96	0 000	2	1	0	0	0
68520-00	Removal of tear sac	R26C	Covered	1346.79	1346.79	0 090	2	1	0	0	0
68525-00	Biopsy of tear sac	R26C	Covered	450.34	450.34	0 000	2	1	1	1	0
68530-00	Clearance of tear duct	R26C	Covered	805.83	454.62	0 010	2	1	1	0	0
68540-00	Remove tear gland lesion	R26C	Covered	1789.40	1789.40	0 090	2	1	1	1	0
68550-00	Remove tear gland lesion	R26C	Covered	2226.55	2226.55	0 090	2	1	1	0	0
68700-00	Repair tear ducts	R26C	Covered	1089.90	1089.90	0 090	2	1	1	0	0
68705-00	Revise tear duct opening	R26C	Covered	486.73	300.45	0 010	2	1	1	0	0
68720-00	Create tear sac drain	R26C	Covered	1473.36	1473.36	0 090	2	1	2	1	0
68745-00	Create tear duct drain	R26C	Covered	1485.00	1485.00	0 090	2	1	2	1	0
68750-00	Create tear duct drain	R26C	Covered	1568.08	1568.08	0 090	2	1	2	1	0
68760-00	Close tear duct opening	R26C	Covered	408.96	266.02	0 010	2	1	1	0	0
68761-00	Close tear duct opening	R26C	Covered	271.71	215.44	0 010	2	1	0	0	0
68770-00	Close tear system fistula	R26C	Covered	1132.98	1132.98	0 090	2	1	0	0	0
68801-00	Dilate tear duct opening	R26C	Covered	180.73	147.74	0 010	2	1	1	0	0
68810-00	Probe nasolacrimal duct	R26C	Covered	298.56	233.23	0 010	2	1	1	0	0
68811-00	Probe nasolacrimal duct	R26C	Covered	244.23	244.23	0 010	2	1	1	0	0
68815-00	Probe nasolacrimal duct	R26C	Covered	701.34	404.46	0 010	2	1	1	0	0
68816-00	Probe nl duct w/balloon	R26C	Covered	1618.02	283.67	0 010	2	1	1	0	0
68840-00	Explore/irrigate tear ducts	R26C	Covered	247.01	215.31	0 010	2	1	1	0	0
68841-00	Insj rx elut implt lac canal	R26C	Covered	69.43	57.78	0 000	2	1	1	0	0
68850-00	Injection for tear sac x-ray	R26C	Covered	105.23	91.64	0 000	2	1	1	0	0
47133-00	Removal of donor liver	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
69000-00	Drain external ear lesion	R26C	Covered	343.86	226.14	0 010	2	1	1	0	0
69005-00	Drain external ear lesion	R26C	Covered	400.61	288.07	0 010	2	1	1	0	0
69020-00	Drain outer ear canal lesion	R26C	Covered	434.25	262.84	0 010	2	1	1	0	0
15833-00	Excise excessive skin leg	NCOV	Not Covered	Code not covered	Code not covered	0 090	2	1	0	0	0
69100-00	Biopsy of external ear	R26C	Covered	177.08	80.70	0 000	2	0	1	0	0
69105-00	Biopsy of external ear canal	R26C	Covered	270.85	113.67	0 000	2	1	1	0	0
69110-00	Remove external ear partial	R26C	Covered	871.56	596.03	0 090	2	1	1	0	0
69120-00	Removal of external ear	R26C	Covered	706.47	706.47	0 090	2	0	1	0	0
69140-00	Remove ear canal lesion(s)	R26C	Covered	1655.63	1655.63	0 090	2	1	0	0	0
69145-00	Remove ear canal lesion(s)	R26C	Covered	768.16	470.63	0 090	2	1	1	0	0
69150-00	Extensive ear canal surgery	R26C	Covered	1784.48	1784.48	0 090	2	0	1	1	0
69155-00	Extensive ear/neck surgery	R26C	Covered	2873.11	2873.11	0 090	2	0	2	1	0
69200-00	Clear outer ear canal	R26C	Covered	146.93	82.25	0 000	2	1	1	0	0
69205-00	Clear outer ear canal	R26C	Covered	171.36	171.36	0 010	2	1	1	0	0
69209-00	Remove impacted ear wax uni	R26C	Covered	30.45	30.45	5 000	2	1	1	0	0
69210-00	Remove impacted ear wax uni	R26C	Covered	85.96	55.56	0 000	2	2	1	0	0
69220-00	Clean out mastoid cavity	R26C	Covered	142.21	89.17	0 000	2	1	1	0	0
69222-00	Clean out mastoid cavity	R26C	Covered	404.11	249.53	0 010	2	1	1	0	0
0171U-00	DNA analysis of targeted sequences in 23 genes for detection of abnormalites	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
69310-00	Rebuild outer ear canal	R26C	Covered	2032.90	2032.90	0 090	2	1	1	0	0

69728-00	Rmv ntr oi imp sk tc>=100	R26C	Covered	1057.43	1057.43	0 090	2	1	1	0	0
69729-00	Impl oi implt sk tc esp>=100	R26C	Covered	1182.18	1182.18	0 090	2	1	1	0	0
69730-00	Rplc oi implt sk tc esp>=100	R26C	Covered	1218.20	1218.20	0 090	2	1	1	0	0
69740-00	Repair facial nerve	R26C	Covered	2054.94	2054.94	0 090	2	1	2	0	0
69745-00	Repair facial nerve	R26C	Covered	2194.18	2194.18	0 090	2	1	2	0	0
47399-00	Unlisted procedure liver	NBYR	Covered	By Report	By Report	0 YYY	2	0	1	1	1
69801-00	Incise inner ear	R26C	Covered	418.33	215.23	0 000	2	1	0	0	0
69805-00	Explore inner ear	R26C	Covered	1818.78	1818.78	0 090	2	1	2	0	0
69806-00	Explore inner ear	R26C	Covered	1637.16	1637.16	0 090	2	1	1	0	0
69905-00	Remove inner ear	R26C	Covered	1650.66	1650.66	0 090	2	1	1	0	0
69910-00	Remove inner ear & mastoid	R26C	Covered	1754.71	1754.71	0 090	2	1	0	0	0
69915-00	Incise inner ear nerve	R26C	Covered	2633.09	2633.09	0 090	2	1	2	1	0
69930-00	Implant cochlear device	R26C	Covered	2139.63	2139.63	0 090	2	1	0	0	0
47579-00	Unlisted laps px biliary trc	NBYR	Covered	By Report	By Report	0 YYY	2	1	2	1	1
69950-00	Incise inner ear nerve	R26C	Covered	3039.80	3039.80	0 090	2	1	2	1	0
69955-00	Release facial nerve	R26C	Covered	3447.99	3447.99	0 090	2	1	2	1	0
69960-00	Release inner ear canal	R26C	Covered	3286.94	3286.94	0 090	2	1	2	1	0
69970-00	Remove inner ear lesion	R26C	Covered	3720.31	3720.31	0 090	2	1	2	1	0
47999-00	Unlisted px biliary tract	NBYR	Covered	By Report	By Report	0 YYY	2	0	1	1	1
69990-00	Microsurgery add-on	R26C	Covered	324.26	324.26	0 ZZZ	0	0	2	0	0
70010-00	Contrast x-ray of brain	R26C	Covered	100.01	100.01	0 XXX	0	0	0	0	0
70015-00	Contrast x-ray of brain	R26C	Covered	313.27	313.27	1 XXX	0	0	0	0	0
70015-26	Contrast x-ray of brain	R26C	Covered	99.78	99.78	1 XXX	0	0	0	0	0
70015-TC	Contrast x-ray of brain	R26C	Covered	213.49	213.49	1 XXX	0	0	0	0	0
70030-00	X-ray eye for foreign body	R26C	Covered	61.49	61.49	1 XXX	0	3	0	0	0
70030-26	X-ray eye for foreign body	R26C	Covered	14.87	14.87	1 XXX	0	3	0	0	0
70030-TC	X-ray eye for foreign body	R26C	Covered	46.62	46.62	1 XXX	0	3	0	0	0
70100-00	X-ray exam of jaw <4views	R26C	Covered	73.77	73.77	1 XXX	0	0	0	0	0
70100-26	X-ray exam of jaw <4views	R26C	Covered	15.52	15.52	1 XXX	0	0	0	0	0
70100-TC	X-ray exam of jaw <4views	R26C	Covered	58.26	58.26	1 XXX	0	0	0	0	0
70110-00	X-ray exam of jaw 4/> views	R26C	Covered	82.56	82.56	1 XXX	0	0	0	0	0
70110-26	X-ray exam of jaw 4/> views	R26C	Covered	21.06	21.06	1 XXX	0	0	0	0	0
70110-TC	X-ray exam of jaw 4/> views	R26C	Covered	61.49	61.49	1 XXX	0	0	0	0	0
70120-00	X-ray exam of mastoids	R26C	Covered	72.48	72.48	1 XXX	0	3	0	0	0
70120-26	X-ray exam of mastoids	R26C	Covered	15.52	15.52	1 XXX	0	3	0	0	0
70120-TC	X-ray exam of mastoids	R26C	Covered	56.97	56.97	1 XXX	0	3	0	0	0
70130-00	X-ray exam of mastoids	R26C	Covered	117.18	117.18	1 XXX	0	3	0	0	0
70130-26	X-ray exam of mastoids	R26C	Covered	28.52	28.52	1 XXX	0	3	0	0	0
70130-TC	X-ray exam of mastoids	R26C	Covered	88.66	88.66	1 XXX	0	3	0	0	0
70134-00	X-ray exam of middle ear	R26C	Covered	117.78	117.78	1 XXX	0	0	0	0	0
70134-26	X-ray exam of middle ear	R26C	Covered	31.06	31.06	1 XXX	0	0	0	0	0
70134-TC	X-ray exam of middle ear	R26C	Covered	86.72	86.72	1 XXX	0	0	0	0	0
70140-00	X-ray exam of facial bones	R26C	Covered	60.15	60.15	1 XXX	0	0	0	0	0
70140-26	X-ray exam of facial bones	R26C	Covered	16.77	16.77	1 XXX	0	0	0	0	0
70140-TC	X-ray exam of facial bones	R26C	Covered	43.38	43.38	1 XXX	0	0	0	0	0
70150-00	X-ray exam of facial bones	R26C	Covered	89.63	89.63	1 XXX	0	0	0	0	0
70150-26	X-ray exam of facial bones	R26C	Covered	22.32	22.32	1 XXX	0	0	0	0	0
70150-TC	X-ray exam of facial bones	R26C	Covered	67.31	67.31	1 XXX	0	0	0	0	0
70160-00	X-ray exam of nasal bones	R26C	Covered	71.23	71.23	1 XXX	0	0	0	0	0
70160-26	X-ray exam of nasal bones	R26C	Covered	14.26	14.26	1 XXX	0	0	0	0	0
70160-TC	X-ray exam of nasal bones	R26C	Covered	56.97	56.97	1 XXX	0	0	0	0	0
70170-00	X-ray exam of tear duct	RMCD	Covered	16.57	16.57	1 XXX	0	0	0	0	0
70170-26	X-ray exam of tear duct	RMCD	Covered	25.44	25.44	1 XXX	0	0	0	0	0
70170-TC	X-ray exam of tear duct	RMCD	Covered	8.17	8.17	1 XXX	0	0	0	0	0

70190-00	X-ray exam of eye sockets	R26C	Covered	71.07	71.07	1 XXX	0	3	0	0	0
70190-26	X-ray exam of eye sockets	R26C	Covered	19.28	19.28	1 XXX	0	3	0	0	0
70190-TC	X-ray exam of eye sockets	R26C	Covered	51.79	51.79	1 XXX	0	3	0	0	0
70200-00	X-ray exam of eye sockets	R26C	Covered	90.85	90.85	1 XXX	0	0	0	0	0
70200-26	X-ray exam of eye sockets	R26C	Covered	24.18	24.18	1 XXX	0	0	0	0	0
70200-TC	X-ray exam of eye sockets	R26C	Covered	66.67	66.67	1 XXX	0	0	0	0	0
70210-00	X-ray exam of sinuses	R26C	Covered	60.88	60.88	1 XXX	0	0	0	0	0
70210-26	X-ray exam of sinuses	R26C	Covered	14.91	14.91	1 XXX	0	0	0	0	0
70210-TC	X-ray exam of sinuses	R26C	Covered	45.97	45.97	1 XXX	0	0	0	0	0
70220-00	X-ray exam of sinuses	R26C	Covered	71.03	71.03	1 XXX	0	0	0	0	0
70220-26	X-ray exam of sinuses	R26C	Covered	18.59	18.59	1 XXX	0	0	0	0	0
70220-TC	X-ray exam of sinuses	R26C	Covered	52.44	52.44	1 XXX	0	0	0	0	0
70240-00	X-ray exam pituitary saddle	R26C	Covered	62.09	62.09	1 XXX	0	0	0	0	0
70240-26	X-ray exam pituitary saddle	R26C	Covered	16.12	16.12	1 XXX	0	0	0	0	0
70240-TC	X-ray exam pituitary saddle	R26C	Covered	45.97	45.97	1 XXX	0	0	0	0	0
70250-00	X-ray exam of skull	R26C	Covered	67.95	67.95	1 XXX	0	0	0	0	0
70250-26	X-ray exam of skull	R26C	Covered	15.52	15.52	1 XXX	0	0	0	0	0
70250-TC	X-ray exam of skull	R26C	Covered	52.44	52.44	1 XXX	0	0	0	0	0
70260-00	X-ray exam of skull	R26C	Covered	84.38	84.38	1 XXX	0	0	0	0	0
70260-26	X-ray exam of skull	R26C	Covered	24.18	24.18	1 XXX	0	0	0	0	0
70260-TC	X-ray exam of skull	R26C	Covered	60.20	60.20	1 XXX	0	0	0	0	0
70300-00	X-ray exam of teeth	R26C	Covered	23.64	23.64	1 XXX	0	0	0	0	0
70300-26	X-ray exam of teeth	R26C	Covered	8.71	8.71	1 XXX	0	0	0	0	0
70300-TC	X-ray exam of teeth	R26C	Covered	14.92	14.92	1 XXX	0	0	0	0	0
70310-00	X-ray exam of teeth	R26C	Covered	77.09	77.09	1 XXX	0	0	0	0	0
70310-26	X-ray exam of teeth	R26C	Covered	14.30	14.30	1 XXX	0	0	0	0	0
70310-TC	X-ray exam of teeth	R26C	Covered	62.79	62.79	1 XXX	0	0	0	0	0
70320-00	Full mouth x-ray of teeth	R26C	Covered	101.43	101.43	1 XXX	0	0	0	0	0
70320-26	Full mouth x-ray of teeth	R26C	Covered	19.24	19.24	1 XXX	0	0	0	0	0
70320-TC	Full mouth x-ray of teeth	R26C	Covered	82.19	82.19	1 XXX	0	0	0	0	0
70328-00	X-ray exam of jaw joint	R26C	Covered	65.37	65.37	1 XXX	0	0	0	0	0
70328-26	X-ray exam of jaw joint	R26C	Covered	15.52	15.52	1 XXX	0	0	0	0	0
70328-TC	X-ray exam of jaw joint	R26C	Covered	49.85	49.85	1 XXX	0	0	0	0	0
70330-00	X-ray exam of jaw joints	R26C	Covered	100.71	100.71	1 XXX	0	2	0	0	0
70330-26	X-ray exam of jaw joints	R26C	Covered	20.46	20.46	1 XXX	0	2	0	0	0
70330-TC	X-ray exam of jaw joints	R26C	Covered	80.25	80.25	1 XXX	0	2	0	0	0
70332-00	X-ray exam of jaw joint	R26C	Covered	155.90	155.90	1 XXX	0	3	0	0	0
70332-26	X-ray exam of jaw joint	R26C	Covered	45.25	45.25	1 XXX	0	3	0	0	0
70332-TC	X-ray exam of jaw joint	R26C	Covered	110.65	110.65	1 XXX	0	3	0	0	0
70336-00	Magnetic image jaw joint	R26C	Covered	515.37	515.37	1 XXX	4	2	0	0	0
70336-26	Magnetic image jaw joint	R26C	Covered	123.32	123.32	1 XXX	4	2	0	0	0
70336-TC	Magnetic image jaw joint	R26C	Covered	392.06	392.06	1 XXX	4	2	0	0	0
70350-00	X-ray head for orthodontia	R26C	Covered	30.48	30.48	1 XXX	0	0	0	0	0
70350-26	X-ray head for orthodontia	R26C	Covered	14.91	14.91	1 XXX	0	0	0	0	0
70350-TC	X-ray head for orthodontia	R26C	Covered	15.57	15.57	1 XXX	0	0	0	0	0
70355-00	Panoramic x-ray of jaws	R26C	Covered	33.59	33.59	1 XXX	0	0	0	0	0
70355-26	Panoramic x-ray of jaws	R26C	Covered	17.38	17.38	1 XXX	0	0	0	0	0
70355-TC	Panoramic x-ray of jaws	R26C	Covered	16.22	16.22	1 XXX	0	0	0	0	0
70360-00	X-ray exam of neck	R26C	Covered	58.90	58.90	1 XXX	0	0	0	0	0
70360-26	X-ray exam of neck	R26C	Covered	15.52	15.52	1 XXX	0	0	0	0	0
70360-TC	X-ray exam of neck	R26C	Covered	43.38	43.38	1 XXX	0	0	0	0	0
70370-00	Throat x-ray & fluoroscopy	R26C	Covered	200.69	200.69	1 XXX	0	0	0	0	0
70370-26	Throat x-ray & fluoroscopy	R26C	Covered	26.66	26.66	1 XXX	0	0	0	0	0
70370-TC	Throat x-ray & fluoroscopy	R26C	Covered	174.04	174.04	1 XXX	0	0	0	0	0

70371-00	Speech evaluation complex	R26C	Covered	205.88	205.88	1 XXX	0	0	0	0	0
70371-26	Speech evaluation complex	R26C	Covered	73.88	73.88	1 XXX	0	0	0	0	0
70371-TC	Speech evaluation complex	R26C	Covered	131.99	131.99	1 XXX	0	0	0	0	0
70380-00	X-ray exam of salivary gland	R26C	Covered	71.23	71.23	1 XXX	0	0	0	0	0
70380-26	X-ray exam of salivary gland	R26C	Covered	14.26	14.26	1 XXX	0	0	0	0	0
70380-TC	X-ray exam of salivary gland	R26C	Covered	56.97	56.97	1 XXX	0	0	0	0	0
70390-00	X-ray exam of salivary duct	R26C	Covered	221.16	221.16	1 XXX	0	0	0	0	0
70390-26	X-ray exam of salivary duct	R26C	Covered	31.60	31.60	1 XXX	0	0	0	0	0
70390-TC	X-ray exam of salivary duct	R26C	Covered	189.56	189.56	1 XXX	0	0	0	0	0
70450-00	Ct head/brain w/o dye	R26C	Covered	204.54	204.54	1 XXX	4	0	0	0	0
70450-26	Ct head/brain w/o dye	R26C	Covered	71.26	71.26	1 XXX	4	0	0	0	0
70450-TC	Ct head/brain w/o dye	R26C	Covered	133.29	133.29	1 XXX	4	0	0	0	0
70460-00	Ct head/brain w/dye	R26C	Covered	286.34	286.34	1 XXX	4	0	0	0	0
70460-26	Ct head/brain w/dye	R26C	Covered	94.84	94.84	1 XXX	4	0	0	0	0
70460-TC	Ct head/brain w/dye	R26C	Covered	191.50	191.50	1 XXX	4	0	0	0	0
70470-00	Ct head/brain w/o & w/dye	R26C	Covered	335.04	335.04	1 XXX	4	0	0	0	0
70470-26	Ct head/brain w/o & w/dye	R26C	Covered	106.63	106.63	1 XXX	4	0	0	0	0
70470-TC	Ct head/brain w/o & w/dye	R26C	Covered	228.41	228.41	1 XXX	4	0	0	0	0
70480-00	Ct orbit/ear/fossa w/o dye	R26C	Covered	305.90	305.90	1 XXX	4	0	0	0	0
70480-26	Ct orbit/ear/fossa w/o dye	R26C	Covered	107.88	107.88	1 XXX	4	0	0	0	0
70480-TC	Ct orbit/ear/fossa w/o dye	R26C	Covered	198.02	198.02	1 XXX	4	0	0	0	0
70481-00	Ct orbit/ear/fossa w/dye	R26C	Covered	350.42	350.42	1 XXX	4	0	0	0	0
70481-26	Ct orbit/ear/fossa w/dye	R26C	Covered	94.84	94.84	1 XXX	4	0	0	0	0
70481-TC	Ct orbit/ear/fossa w/dye	R26C	Covered	255.58	255.58	1 XXX	4	0	0	0	0
70482-00	Ct orbit/ear/fossa w/o&w/dye	R26C	Covered	409.42	409.42	1 XXX	4	0	0	0	0
70482-26	Ct orbit/ear/fossa w/o&w/dye	R26C	Covered	105.98	105.98	1 XXX	4	0	0	0	0
70482-TC	Ct orbit/ear/fossa w/o&w/dye	R26C	Covered	303.44	303.44	1 XXX	4	0	0	0	0
70486-00	Ct maxillofacial w/o dye	R26C	Covered	248.53	248.53	1 XXX	4	0	0	0	0
70486-26	Ct maxillofacial w/o dye	R26C	Covered	71.90	71.90	1 XXX	4	0	0	0	0
70486-TC	Ct maxillofacial w/o dye	R26C	Covered	176.62	176.62	1 XXX	4	0	0	0	0
70487-00	Ct maxillofacial w/dye	R26C	Covered	293.50	293.50	1 XXX	4	0	0	0	0
70487-26	Ct maxillofacial w/dye	R26C	Covered	94.19	94.19	1 XXX	4	0	0	0	0
70487-TC	Ct maxillofacial w/dye	R26C	Covered	199.31	199.31	1 XXX	4	0	0	0	0
70488-00	Ct maxillofacial w/o & w/dye	R26C	Covered	356.39	356.39	1 XXX	4	0	0	0	0
70488-26	Ct maxillofacial w/o & w/dye	R26C	Covered	105.98	105.98	1 XXX	4	0	0	0	0
70488-TC	Ct maxillofacial w/o & w/dye	R26C	Covered	250.41	250.41	1 XXX	4	0	0	0	0
70490-00	Ct soft tissue neck w/o dye	R26C	Covered	288.39	288.39	1 XXX	4	0	0	0	0
70490-26	Ct soft tissue neck w/o dye	R26C	Covered	107.23	107.23	1 XXX	4	0	0	0	0
70490-TC	Ct soft tissue neck w/o dye	R26C	Covered	181.15	181.15	1 XXX	4	0	0	0	0
70491-00	Ct soft tissue neck w/dye	R26C	Covered	355.96	355.96	1 XXX	4	0	0	0	0
70491-26	Ct soft tissue neck w/dye	R26C	Covered	115.90	115.90	1 XXX	4	0	0	0	0
70491-TC	Ct soft tissue neck w/dye	R26C	Covered	240.06	240.06	1 XXX	4	0	0	0	0
70492-00	Ct sft tsue nck w/o & w/dye	R26C	Covered	427.51	427.51	1 XXX	4	0	0	0	0
70492-26	Ct sft tsue nck w/o & w/dye	R26C	Covered	135.06	135.06	1 XXX	4	0	0	0	0
70492-TC	Ct sft tsue nck w/o & w/dye	R26C	Covered	292.45	292.45	1 XXX	4	0	0	0	0
70496-00	Ct angiography head	R26C	Covered	535.11	535.11	1 XXX	4	0	0	0	0
70496-26	Ct angiography head	R26C	Covered	146.24	146.24	1 XXX	4	0	0	0	0
70496-TC	Ct angiography head	R26C	Covered	388.87	388.87	1 XXX	4	0	0	0	0
70498-00	Ct angiography neck	R26C	Covered	534.47	534.47	1 XXX	4	0	0	0	0
70498-26	Ct angiography neck	R26C	Covered	146.24	146.24	1 XXX	4	0	0	0	0
70498-TC	Ct angiography neck	R26C	Covered	388.22	388.22	1 XXX	4	0	0	0	0
70540-00	Mri orbit/face/neck w/o dye	R26C	Covered	440.80	440.80	1 XXX	4	0	0	0	0
70540-26	Mri orbit/face/neck w/o dye	R26C	Covered	112.78	112.78	1 XXX	4	0	0	0	0
70540-TC	Mri orbit/face/neck w/o dye	R26C	Covered	328.02	328.02	1 XXX	4	0	0	0	0

70542-00	Mri orbit/face/neck w/dye	R26C	Covered	522.64	522.64	1 XXX	4	0	0	0	0
70542-26	Mri orbit/face/neck w/dye	R26C	Covered	135.71	135.71	1 XXX	4	0	0	0	0
70542-TC	Mri orbit/face/neck w/dye	R26C	Covered	386.93	386.93	1 XXX	4	0	0	0	0
70543-00	Mri orbit/fac/nck w/o &w/dye	R26C	Covered	659.13	659.13	1 XXX	4	0	0	0	0
70543-26	Mri orbit/fac/nck w/o &w/dye	R26C	Covered	179.71	179.71	1 XXX	4	0	0	0	0
70543-TC	Mri orbit/fac/nck w/o &w/dye	R26C	Covered	479.42	479.42	1 XXX	4	0	0	0	0
70544-00	Mr angiography head w/o dye	R26C	Covered	420.04	420.04	1 XXX	4	0	0	0	0
70544-26	Mr angiography head w/o dye	R26C	Covered	100.38	100.38	1 XXX	4	0	0	0	0
70544-TC	Mr angiography head w/o dye	R26C	Covered	319.66	319.66	1 XXX	4	0	0	0	0
70545-00	Mr angiography head w/dye	R26C	Covered	443.33	443.33	1 XXX	4	0	0	0	0
70545-26	Mr angiography head w/dye	R26C	Covered	100.38	100.38	1 XXX	4	0	0	0	0
70545-TC	Mr angiography head w/dye	R26C	Covered	342.95	342.95	1 XXX	4	0	0	0	0
70546-00	Mr angiograph head w/o&w/dye	R26C	Covered	645.47	645.47	1 XXX	4	0	0	0	0
70546-26	Mr angiograph head w/o&w/dye	R26C	Covered	123.96	123.96	1 XXX	4	0	0	0	0
70546-TC	Mr angiograph head w/o&w/dye	R26C	Covered	521.51	521.51	1 XXX	4	0	0	0	0
70547-00	Mr angiography neck w/o dye	R26C	Covered	420.69	420.69	1 XXX	4	0	0	0	0
70547-26	Mr angiography neck w/o dye	R26C	Covered	100.38	100.38	1 XXX	4	0	0	0	0
70547-TC	Mr angiography neck w/o dye	R26C	Covered	320.31	320.31	1 XXX	4	0	0	0	0
70548-00	Mr angiography neck w/dye	R26C	Covered	478.47	478.47	1 XXX	4	0	0	0	0
70548-26	Mr angiography neck w/dye	R26C	Covered	125.83	125.83	1 XXX	4	0	0	0	0
70548-TC	Mr angiography neck w/dye	R26C	Covered	352.65	352.65	1 XXX	4	0	0	0	0
70549-00	Mr angiograph neck w/o&w/dye	R26C	Covered	674.67	674.67	1 XXX	4	0	0	0	0
70549-26	Mr angiograph neck w/o&w/dye	R26C	Covered	150.58	150.58	1 XXX	4	0	0	0	0
70549-TC	Mr angiograph neck w/o&w/dye	R26C	Covered	524.10	524.10	1 XXX	4	0	0	0	0
70551-00	Mri brain stem w/o dye	R26C	Covered	379.55	379.55	1 XXX	4	0	0	0	0
70551-26	Mri brain stem w/o dye	R26C	Covered	123.96	123.96	1 XXX	4	0	0	0	0
70551-TC	Mri brain stem w/o dye	R26C	Covered	255.58	255.58	1 XXX	4	0	0	0	0
70552-00	Mri brain stem w/dye	R26C	Covered	525.29	525.29	1 XXX	4	0	0	0	0
70552-26	Mri brain stem w/dye	R26C	Covered	149.36	149.36	1 XXX	4	0	0	0	0
70552-TC	Mri brain stem w/dye	R26C	Covered	375.93	375.93	1 XXX	4	0	0	0	0
70553-00	Mri brain stem w/o & w/dye	R26C	Covered	617.23	617.23	1 XXX	4	0	0	0	0
70553-26	Mri brain stem w/o & w/dye	R26C	Covered	191.50	191.50	1 XXX	4	0	0	0	0
70553-TC	Mri brain stem w/o & w/dye	R26C	Covered	425.74	425.74	1 XXX	4	0	0	0	0
70554-00	Fmri brain by tech	R26C	Covered	740.87	740.87	1 XXX	4	3	0	0	0
70554-26	Fmri brain by tech	R26C	Covered	177.32	177.32	1 XXX	4	3	0	0	0
70554-TC	Fmri brain by tech	R26C	Covered	563.55	563.55	1 XXX	4	3	0	0	0
70555-00	Fmri brain by phys/psych	RMCD	Covered	596.06	596.06	1 XXX	0	3	0	0	0
70555-26	Fmri brain by phys/psych	RMCD	Covered	209.28	209.28	1 XXX	0	3	0	0	0
70555-TC	Fmri brain by phys/psych	RMCD	Covered	528.51	528.51	1 XXX	0	3	0	0	0
48160-00	Pancreas removal/transplant	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
48550-00	Donor pancreatectomy	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
48999-00	Unlisted procedure pancreas	NBYR	Covered	By Report	By Report	0 YYY	2	0	2	1	1
49329-00	Unlstd laps px abd pertm&omn	NBYR	Covered	By Report	By Report	0 YYY	2	1	2	1	1
49659-00	Unlstd laps px hrnap hrnrph	NBYR	Covered	By Report	By Report	0 YYY	2	1	2	1	1
49999-00	Unlisted px abd pertm&omn	NBYR	Covered	By Report	By Report	0 YYY	2	0	1	1	1
50300-00	Remove cadaver donor kidney	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
50549-00	Unlisted laps px renal	NBYR	Covered	By Report	By Report	0 YYY	2	1	2	1	1
50949-00	Unlisted laps px ureter	NBYR	Covered	By Report	By Report	0 YYY	2	1	2	1	1
71045-00	X-ray exam chest 1 view	R26C	Covered	47.90	47.90	1 XXX	0	0	0	0	0
71045-26	X-ray exam chest 1 view	R26C	Covered	14.87	14.87	1 XXX	0	0	0	0	0
71045-TC	X-ray exam chest 1 view	R26C	Covered	33.03	33.03	1 XXX	0	0	0	0	0
71046-00	X-ray exam chest 2 views	R26C	Covered	63.27	63.27	1 XXX	0	0	0	0	0
71046-26	X-ray exam chest 2 views	R26C	Covered	18.59	18.59	1 XXX	0	0	0	0	0
71046-TC	X-ray exam chest 2 views	R26C	Covered	44.68	44.68	1 XXX	0	0	0	0	0

71047-00	X-ray exam chest 3 views	R26C	Covered	79.89	79.89	1 XXX	0	0	0	0	0
71047-26	X-ray exam chest 3 views	R26C	Covered	23.57	23.57	1 XXX	0	0	0	0	0
71047-TC	X-ray exam chest 3 views	R26C	Covered	56.32	56.32	1 XXX	0	0	0	0	0
71048-00	X-ray exam chest 4+ views	R26C	Covered	86.20	86.20	1 XXX	0	0	0	0	0
71048-26	X-ray exam chest 4+ views	R26C	Covered	26.00	26.00	1 XXX	0	0	0	0	0
71048-TC	X-ray exam chest 4+ views	R26C	Covered	60.20	60.20	1 XXX	0	0	0	0	0
71100-00	X-ray exam ribs uni 2 views	R26C	Covered	69.09	69.09	1 XXX	0	0	0	0	0
71100-26	X-ray exam ribs uni 2 views	R26C	Covered	18.59	18.59	1 XXX	0	0	0	0	0
71100-TC	X-ray exam ribs uni 2 views	R26C	Covered	50.50	50.50	1 XXX	0	0	0	0	0
71101-00	X-ray exam unilat ribs/chest	R26C	Covered	79.89	79.89	1 XXX	0	0	0	0	0
71101-26	X-ray exam unilat ribs/chest	R26C	Covered	22.93	22.93	1 XXX	0	0	0	0	0
71101-TC	X-ray exam unilat ribs/chest	R26C	Covered	56.97	56.97	1 XXX	0	0	0	0	0
71110-00	X-ray exam ribs bil 3 views	R26C	Covered	83.05	83.05	1 XXX	0	2	0	0	0
71110-26	X-ray exam ribs bil 3 views	R26C	Covered	24.79	24.79	1 XXX	0	2	0	0	0
71110-TC	X-ray exam ribs bil 3 views	R26C	Covered	58.26	58.26	1 XXX	0	2	0	0	0
71111-00	X-ray exam ribs/chest4/> vws	R26C	Covered	99.15	99.15	1 XXX	0	2	0	0	0
71111-26	X-ray exam ribs/chest4/> vws	R26C	Covered	27.31	27.31	1 XXX	0	2	0	0	0
71111-TC	X-ray exam ribs/chest4/> vws	R26C	Covered	71.84	71.84	1 XXX	0	2	0	0	0
71120-00	X-ray exam breastbone 2/>vws	R26C	Covered	63.35	63.35	1 XXX	0	0	0	0	0
71120-26	X-ray exam breastbone 2/>vws	R26C	Covered	16.73	16.73	1 XXX	0	0	0	0	0
71120-TC	X-ray exam breastbone 2/>vws	R26C	Covered	46.62	46.62	1 XXX	0	0	0	0	0
71130-00	X-ray stenoclavic jt 3/>vws	R26C	Covered	78.15	78.15	1 XXX	0	0	0	0	0
71130-26	X-ray stenoclavic jt 3/>vws	R26C	Covered	18.59	18.59	1 XXX	0	0	0	0	0
71130-TC	X-ray stenoclavic jt 3/>vws	R26C	Covered	59.55	59.55	1 XXX	0	0	0	0	0
71250-00	Ct thorax dx c-	R26C	Covered	256.13	256.13	1 XXX	4	0	0	0	0
71250-26	Ct thorax dx c-	R26C	Covered	90.50	90.50	1 XXX	4	0	0	0	0
71250-TC	Ct thorax dx c-	R26C	Covered	165.63	165.63	1 XXX	4	0	0	0	0
71260-00	Ct thorax dx c+	R26C	Covered	323.13	323.13	1 XXX	4	0	0	0	0
71260-26	Ct thorax dx c+	R26C	Covered	97.95	97.95	1 XXX	4	0	0	0	0
71260-TC	Ct thorax dx c+	R26C	Covered	225.18	225.18	1 XXX	4	0	0	0	0
71270-00	Ct thorax dx c-/c+	R26C	Covered	380.99	380.99	1 XXX	4	0	0	0	0
71270-26	Ct thorax dx c-/c+	R26C	Covered	104.72	104.72	1 XXX	4	0	0	0	0
71270-TC	Ct thorax dx c-/c+	R26C	Covered	276.28	276.28	1 XXX	4	0	0	0	0
71271-00	Ct thorax lung cancer scr c-	R26C	Covered	264.59	264.59	1 XXX	4	0	0	0	0
71271-26	Ct thorax lung cancer scr c-	R26C	Covered	90.50	90.50	1 XXX	4	0	0	0	0
71271-TC	Ct thorax lung cancer scr c-	R26C	Covered	174.08	174.08	1 XXX	4	0	0	0	0
71275-00	Ct angiography chest	R26C	Covered	545.23	545.23	1 XXX	4	0	0	0	0
71275-26	Ct angiography chest	R26C	Covered	151.84	151.84	1 XXX	4	0	0	0	0
71275-TC	Ct angiography chest	R26C	Covered	393.40	393.40	1 XXX	4	0	0	0	0
71550-00	Mri chest w/o dye	R26C	Covered	662.32	662.32	1 XXX	4	0	0	0	0
71550-26	Mri chest w/o dye	R26C	Covered	122.10	122.10	1 XXX	4	0	0	0	0
71550-TC	Mri chest w/o dye	R26C	Covered	540.22	540.22	1 XXX	4	0	0	0	0
71551-00	Mri chest w/dye	R26C	Covered	731.82	731.82	1 XXX	4	0	0	0	0
71551-26	Mri chest w/dye	R26C	Covered	145.03	145.03	1 XXX	4	0	0	0	0
71551-TC	Mri chest w/dye	R26C	Covered	586.79	586.79	1 XXX	4	0	0	0	0
71552-00	Mri chest w/o & w/dye	R26C	Covered	922.68	922.68	1 XXX	4	0	0	0	0
71552-26	Mri chest w/o & w/dye	R26C	Covered	189.03	189.03	1 XXX	4	0	0	0	0
71552-TC	Mri chest w/o & w/dye	R26C	Covered	733.66	733.66	1 XXX	4	0	0	0	0
71555-00	Mri angio chest w or w/o dye	R26C	Covered	651.35	651.35	1 XXX	4	0	0	0	0
71555-26	Mri angio chest w or w/o dye	R26C	Covered	149.89	149.89	1 XXX	4	0	0	0	0
71555-TC	Mri angio chest w or w/o dye	R26C	Covered	501.46	501.46	1 XXX	4	0	0	0	0
72020-00	X-ray exam of spine 1 view	R26C	Covered	45.39	45.39	1 XXX	0	0	0	0	0
72020-26	X-ray exam of spine 1 view	R26C	Covered	13.65	13.65	1 XXX	0	0	0	0	0
72020-TC	X-ray exam of spine 1 view	R26C	Covered	31.74	31.74	1 XXX	0	0	0	0	0

72040-00	X-ray exam neck spine 2-3 vw	R26C	Covered	74.91	74.91	1 XXX	0	0	0	0	0
72040-26	X-ray exam neck spine 2-3 vw	R26C	Covered	19.24	19.24	1 XXX	0	0	0	0	0
72040-TC	X-ray exam neck spine 2-3 vw	R26C	Covered	55.67	55.67	1 XXX	0	0	0	0	0
72050-00	X-ray exam neck spine 4/5vws	R26C	Covered	101.88	101.88	1 XXX	0	0	0	0	0
72050-26	X-ray exam neck spine 4/5vws	R26C	Covered	22.93	22.93	1 XXX	0	0	0	0	0
72050-TC	X-ray exam neck spine 4/5vws	R26C	Covered	78.96	78.96	1 XXX	0	0	0	0	0
72052-00	X-ray exam neck spine 6/>vws	R26C	Covered	118.63	118.63	1 XXX	0	0	0	0	0
72052-26	X-ray exam neck spine 6/>vws	R26C	Covered	25.44	25.44	1 XXX	0	0	0	0	0
72052-TC	X-ray exam neck spine 6/>vws	R26C	Covered	93.19	93.19	1 XXX	0	0	0	0	0
72070-00	X-ray exam thorac spine 2vws	R26C	Covered	62.05	62.05	1 XXX	0	0	0	0	0
72070-26	X-ray exam thorac spine 2vws	R26C	Covered	17.38	17.38	1 XXX	0	0	0	0	0
72070-TC	X-ray exam thorac spine 2vws	R26C	Covered	44.68	44.68	1 XXX	0	0	0	0	0
72072-00	X-ray exam thorac spine 3vws	R26C	Covered	74.87	74.87	1 XXX	0	0	0	0	0
72072-26	X-ray exam thorac spine 3vws	R26C	Covered	19.20	19.20	1 XXX	0	0	0	0	0
72072-TC	X-ray exam thorac spine 3vws	R26C	Covered	55.67	55.67	1 XXX	0	0	0	0	0
72074-00	X-ray exam thorac spine4/>vw	R26C	Covered	84.50	84.50	1 XXX	0	0	0	0	0
72074-26	X-ray exam thorac spine4/>vw	R26C	Covered	21.06	21.06	1 XXX	0	0	0	0	0
72074-TC	X-ray exam thorac spine4/>vw	R26C	Covered	63.43	63.43	1 XXX	0	0	0	0	0
72080-00	X-ray exam thoracolmb 2/> vw	R26C	Covered	65.25	65.25	1 XXX	0	0	0	0	0
72080-26	X-ray exam thoracolmb 2/> vw	R26C	Covered	17.99	17.99	1 XXX	0	0	0	0	0
72080-TC	X-ray exam thoracolmb 2/> vw	R26C	Covered	47.26	47.26	1 XXX	0	0	0	0	0
72081-00	X-ray exam entire spi 1 vw	R26C	Covered	80.58	80.58	1 XXX	0	0	0	0	0
72081-26	X-ray exam entire spi 1 vw	R26C	Covered	22.32	22.32	1 XXX	0	0	0	0	0
72081-TC	X-ray exam entire spi 1 vw	R26C	Covered	58.26	58.26	1 XXX	0	0	0	0	0
72082-00	X-ray exam entire spi 2/3 vw	R26C	Covered	133.47	133.47	1 XXX	0	0	0	0	0
72082-26	X-ray exam entire spi 2/3 vw	R26C	Covered	26.70	26.70	1 XXX	0	0	0	0	0
72082-TC	X-ray exam entire spi 2/3 vw	R26C	Covered	106.77	106.77	1 XXX	0	0	0	0	0
72083-00	X-ray exam entire spi 4/5 vw	R26C	Covered	151.37	151.37	1 XXX	0	0	0	0	0
72083-26	X-ray exam entire spi 4/5 vw	R26C	Covered	31.02	31.02	1 XXX	0	0	0	0	0
72083-TC	X-ray exam entire spi 4/5 vw	R26C	Covered	120.35	120.35	1 XXX	0	0	0	0	0
72084-00	X-ray exam entire spi 6/> vw	R26C	Covered	187.46	187.46	1 XXX	0	0	0	0	0
72084-26	X-ray exam entire spi 6/> vw	R26C	Covered	35.36	35.36	1 XXX	0	0	0	0	0
72084-TC	X-ray exam entire spi 6/> vw	R26C	Covered	152.09	152.09	1 XXX	0	0	0	0	0
72100-00	X-ray exam l-s spine 2/3 vws	R26C	Covered	75.56	75.56	1 XXX	0	0	0	0	0
72100-26	X-ray exam l-s spine 2/3 vws	R26C	Covered	19.24	19.24	1 XXX	0	0	0	0	0
72100-TC	X-ray exam l-s spine 2/3 vws	R26C	Covered	56.32	56.32	1 XXX	0	0	0	0	0
72110-00	X-ray exam l-2 spine 4/>vws	R26C	Covered	98.69	98.69	1 XXX	0	0	0	0	0
72110-26	X-ray exam l-2 spine 4/>vws	R26C	Covered	22.32	22.32	1 XXX	0	0	0	0	0
72110-TC	X-ray exam l-2 spine 4/>vws	R26C	Covered	76.37	76.37	1 XXX	0	0	0	0	0
72114-00	X-ray exam l-s spine bending	R26C	Covered	116.04	116.04	1 XXX	0	0	0	0	0
72114-26	X-ray exam l-s spine bending	R26C	Covered	25.44	25.44	1 XXX	0	0	0	0	0
72114-TC	X-ray exam l-s spine bending	R26C	Covered	90.60	90.60	1 XXX	0	0	0	0	0
72120-00	X-ray bend only l-s spine	R26C	Covered	76.85	76.85	1 XXX	0	0	0	0	0
72120-26	X-ray bend only l-s spine	R26C	Covered	19.24	19.24	1 XXX	0	0	0	0	0
72120-TC	X-ray bend only l-s spine	R26C	Covered	57.61	57.61	1 XXX	0	0	0	0	0
72125-00	Ct neck spine w/o dye	R26C	Covered	251.22	251.22	1 XXX	4	0	0	0	0
72125-26	Ct neck spine w/o dye	R26C	Covered	83.65	83.65	1 XXX	4	0	0	0	0
72125-TC	Ct neck spine w/o dye	R26C	Covered	167.57	167.57	1 XXX	4	0	0	0	0
72126-00	Ct neck spine w/dye	R26C	Covered	326.13	326.13	1 XXX	4	0	0	0	0
72126-26	Ct neck spine w/dye	R26C	Covered	102.25	102.25	1 XXX	4	0	0	0	0
72126-TC	Ct neck spine w/dye	R26C	Covered	223.89	223.89	1 XXX	4	0	0	0	0
72127-00	Ct neck spine w/o & w/dye	R26C	Covered	382.90	382.90	1 XXX	4	0	0	0	0
72127-26	Ct neck spine w/o & w/dye	R26C	Covered	105.98	105.98	1 XXX	4	0	0	0	0
72127-TC	Ct neck spine w/o & w/dye	R26C	Covered	276.92	276.92	1 XXX	4	0	0	0	0

72128-00	Ct chest spine w/o dye	R26C	Covered	250.58	250.58	1 XXX	4	0	0	0	0
72128-26	Ct chest spine w/o dye	R26C	Covered	83.65	83.65	1 XXX	4	0	0	0	0
72128-TC	Ct chest spine w/o dye	R26C	Covered	166.92	166.92	1 XXX	4	0	0	0	0
72129-00	Ct chest spine w/dye	R26C	Covered	328.12	328.12	1 XXX	4	0	0	0	0
72129-26	Ct chest spine w/dye	R26C	Covered	102.29	102.29	1 XXX	4	0	0	0	0
72129-TC	Ct chest spine w/dye	R26C	Covered	225.83	225.83	1 XXX	4	0	0	0	0
72130-00	Ct chest spine w/o & w/dye	R26C	Covered	385.49	385.49	1 XXX	4	0	0	0	0
72130-26	Ct chest spine w/o & w/dye	R26C	Covered	106.63	106.63	1 XXX	4	0	0	0	0
72130-TC	Ct chest spine w/o & w/dye	R26C	Covered	278.87	278.87	1 XXX	4	0	0	0	0
72131-00	Ct lumbar spine w/o dye	R26C	Covered	249.28	249.28	1 XXX	4	0	0	0	0
72131-26	Ct lumbar spine w/o dye	R26C	Covered	83.65	83.65	1 XXX	4	0	0	0	0
72131-TC	Ct lumbar spine w/o dye	R26C	Covered	165.63	165.63	1 XXX	4	0	0	0	0
72132-00	Ct lumbar spine w/dye	R26C	Covered	326.78	326.78	1 XXX	4	0	0	0	0
72132-26	Ct lumbar spine w/dye	R26C	Covered	102.25	102.25	1 XXX	4	0	0	0	0
72132-TC	Ct lumbar spine w/dye	R26C	Covered	224.53	224.53	1 XXX	4	0	0	0	0
72133-00	Ct lumbar spine w/o & w/dye	R26C	Covered	383.55	383.55	1 XXX	4	0	0	0	0
72133-26	Ct lumbar spine w/o & w/dye	R26C	Covered	105.98	105.98	1 XXX	4	0	0	0	0
72133-TC	Ct lumbar spine w/o & w/dye	R26C	Covered	277.57	277.57	1 XXX	4	0	0	0	0
72141-00	Mri neck spine w/o dye	R26C	Covered	368.55	368.55	1 XXX	4	0	0	0	0
72141-26	Mri neck spine w/o dye	R26C	Covered	123.96	123.96	1 XXX	4	0	0	0	0
72141-TC	Mri neck spine w/o dye	R26C	Covered	244.58	244.58	1 XXX	4	0	0	0	0
72142-00	Mri neck spine w/dye	R26C	Covered	535.04	535.04	1 XXX	4	0	0	0	0
72142-26	Mri neck spine w/dye	R26C	Covered	150.05	150.05	1 XXX	4	0	0	0	0
72142-TC	Mri neck spine w/dye	R26C	Covered	384.99	384.99	1 XXX	4	0	0	0	0
72146-00	Mri chest spine w/o dye	R26C	Covered	367.90	367.90	1 XXX	4	0	0	0	0
72146-26	Mri chest spine w/o dye	R26C	Covered	123.96	123.96	1 XXX	4	0	0	0	0
72146-TC	Mri chest spine w/o dye	R26C	Covered	243.94	243.94	1 XXX	4	0	0	0	0
72147-00	Mri chest spine w/dye	R26C	Covered	530.47	530.47	1 XXX	4	0	0	0	0
72147-26	Mri chest spine w/dye	R26C	Covered	149.36	149.36	1 XXX	4	0	0	0	0
72147-TC	Mri chest spine w/dye	R26C	Covered	381.11	381.11	1 XXX	4	0	0	0	0
72148-00	Mri lumbar spine w/o dye	R26C	Covered	369.84	369.84	1 XXX	4	0	0	0	0
72148-26	Mri lumbar spine w/o dye	R26C	Covered	124.61	124.61	1 XXX	4	0	0	0	0
72148-TC	Mri lumbar spine w/o dye	R26C	Covered	245.23	245.23	1 XXX	4	0	0	0	0
72149-00	Mri lumbar spine w/dye	R26C	Covered	525.34	525.34	1 XXX	4	0	0	0	0
72149-26	Mri lumbar spine w/dye	R26C	Covered	149.41	149.41	1 XXX	4	0	0	0	0
72149-TC	Mri lumbar spine w/dye	R26C	Covered	375.93	375.93	1 XXX	4	0	0	0	0
72156-00	Mri neck spine w/o & w/dye	R26C	Covered	620.47	620.47	1 XXX	4	0	0	0	0
72156-26	Mri neck spine w/o & w/dye	R26C	Covered	192.14	192.14	1 XXX	4	0	0	0	0
72156-TC	Mri neck spine w/o & w/dye	R26C	Covered	428.32	428.32	1 XXX	4	0	0	0	0
72157-00	Mri chest spine w/o & w/dye	R26C	Covered	621.76	621.76	1 XXX	4	0	0	0	0
72157-26	Mri chest spine w/o & w/dye	R26C	Covered	192.14	192.14	1 XXX	4	0	0	0	0
72157-TC	Mri chest spine w/o & w/dye	R26C	Covered	429.62	429.62	1 XXX	4	0	0	0	0
72158-00	Mri lumbar spine w/o & w/dye	R26C	Covered	619.17	619.17	1 XXX	4	0	0	0	0
72158-26	Mri lumbar spine w/o & w/dye	R26C	Covered	192.14	192.14	1 XXX	4	0	0	0	0
72158-TC	Mri lumbar spine w/o & w/dye	R26C	Covered	427.03	427.03	1 XXX	4	0	0	0	0
72159-00	Mr angio spine w/o&w/dye	R26C	Covered	674.67	674.67	1 XXX	4	0	0	0	0
72159-26	Mr angio spine w/o&w/dye	R26C	Covered	151.22	151.22	1 XXX	4	0	0	0	0
72159-TC	Mr angio spine w/o&w/dye	R26C	Covered	523.45	523.45	1 XXX	4	0	9	0	0
72170-00	X-ray exam of pelvis	R26C	Covered	52.47	52.47	1 XXX	0	0	0	0	0
72170-26	X-ray exam of pelvis	R26C	Covered	14.91	14.91	1 XXX	0	0	0	0	0
72170-TC	X-ray exam of pelvis	R26C	Covered	37.56	37.56	1 XXX	0	0	0	0	0
72190-00	X-ray exam of pelvis	R26C	Covered	79.97	79.97	1 XXX	0	0	0	0	0
72190-26	X-ray exam of pelvis	R26C	Covered	21.71	21.71	1 XXX	0	0	0	0	0
72190-TC	X-ray exam of pelvis	R26C	Covered	58.26	58.26	1 XXX	0	0	0	0	0

72191-00	Ct angiograph pelv w/o&w/dye	R26C	Covered	591.20	591.20	1 XXX	4	0	0	0	0
72191-26	Ct angiograph pelv w/o&w/dye	R26C	Covered	149.29	149.29	1 XXX	4	0	0	0	0
72191-TC	Ct angiograph pelv w/o&w/dye	R26C	Covered	441.91	441.91	1 XXX	4	0	0	0	0
72192-00	Ct pelvis w/o dye	R26C	Covered	256.09	256.09	1 XXX	4	0	0	0	0
72192-26	Ct pelvis w/o dye	R26C	Covered	91.11	91.11	1 XXX	4	0	0	0	0
72192-TC	Ct pelvis w/o dye	R26C	Covered	164.98	164.98	1 XXX	4	0	0	0	0
72193-00	Ct pelvis w/dye	R26C	Covered	446.67	446.67	1 XXX	4	0	0	0	0
72193-26	Ct pelvis w/dye	R26C	Covered	97.31	97.31	1 XXX	4	0	0	0	0
72193-TC	Ct pelvis w/dye	R26C	Covered	349.37	349.37	1 XXX	4	0	0	0	0
72194-00	Ct pelvis w/o & w/dye	R26C	Covered	493.65	493.65	1 XXX	4	0	0	0	0
72194-26	Ct pelvis w/o & w/dye	R26C	Covered	101.60	101.60	1 XXX	4	0	0	0	0
72194-TC	Ct pelvis w/o & w/dye	R26C	Covered	392.06	392.06	1 XXX	4	0	0	0	0
72195-00	Mri pelvis w/o dye	R26C	Covered	445.60	445.60	1 XXX	4	0	0	0	0
72195-26	Mri pelvis w/o dye	R26C	Covered	122.75	122.75	1 XXX	4	0	0	0	0
72195-TC	Mri pelvis w/o dye	R26C	Covered	322.85	322.85	1 XXX	4	0	0	0	0
72196-00	Mri pelvis w/dye	R26C	Covered	521.61	521.61	1 XXX	4	0	0	0	0
72196-26	Mri pelvis w/dye	R26C	Covered	144.38	144.38	1 XXX	4	0	0	0	0
72196-TC	Mri pelvis w/dye	R26C	Covered	377.23	377.23	1 XXX	4	0	0	0	0
72197-00	Mri pelvis w/o & w/dye	R26C	Covered	655.05	655.05	1 XXX	4	0	0	0	0
72197-26	Mri pelvis w/o & w/dye	R26C	Covered	184.04	184.04	1 XXX	4	0	0	0	0
72197-TC	Mri pelvis w/o & w/dye	R26C	Covered	471.01	471.01	1 XXX	4	0	0	0	0
72198-00	Mr angio pelvis w/o & w/dye	R26C	Covered	659.80	659.80	1 XXX	4	0	0	0	0
72198-26	Mr angio pelvis w/o & w/dye	R26C	Covered	149.28	149.28	1 XXX	4	0	0	0	0
72198-TC	Mr angio pelvis w/o & w/dye	R26C	Covered	510.51	510.51	1 XXX	4	0	0	0	0
72200-00	X-ray exam si joints	R26C	Covered	62.82	62.82	1 XXX	0	0	0	0	0
72200-26	X-ray exam si joints	R26C	Covered	14.26	14.26	1 XXX	0	0	0	0	0
72200-TC	X-ray exam si joints	R26C	Covered	48.56	48.56	1 XXX	0	0	0	0	0
72202-00	X-ray exam si joints 3/> vws	R26C	Covered	74.23	74.23	1 XXX	0	0	0	0	0
72202-26	X-ray exam si joints 3/> vws	R26C	Covered	19.20	19.20	1 XXX	0	0	0	0	0
72202-TC	X-ray exam si joints 3/> vws	R26C	Covered	55.03	55.03	1 XXX	0	0	0	0	0
72220-00	X-ray exam sacrum tailbone	R26C	Covered	61.52	61.52	1 XXX	0	0	0	0	0
72220-26	X-ray exam sacrum tailbone	R26C	Covered	14.91	14.91	1 XXX	0	0	0	0	0
72220-TC	X-ray exam sacrum tailbone	R26C	Covered	46.62	46.62	1 XXX	0	0	0	0	0
72240-00	Myelography neck spine	R26C	Covered	209.58	209.58	1 XXX	0	0	0	0	0
72240-26	Myelography neck spine	R26C	Covered	76.29	76.29	1 XXX	0	0	0	0	0
72240-TC	Myelography neck spine	R26C	Covered	133.29	133.29	1 XXX	0	0	0	0	0
72255-00	Myelography thoracic spine	R26C	Covered	201.77	201.77	1 XXX	0	0	0	0	0
72255-26	Myelography thoracic spine	R26C	Covered	76.24	76.24	1 XXX	0	0	0	0	0
72255-TC	Myelography thoracic spine	R26C	Covered	125.53	125.53	1 XXX	0	0	0	0	0
72265-00	Myelography l-s spine	R26C	Covered	205.27	205.27	1 XXX	0	0	0	0	0
72265-26	Myelography l-s spine	R26C	Covered	70.69	70.69	1 XXX	0	0	0	0	0
72265-TC	Myelography l-s spine	R26C	Covered	134.58	134.58	1 XXX	0	0	0	0	0
72270-00	Myelography 2/> spine regions	R26C	Covered	285.65	285.65	1 XXX	0	0	0	0	0
72270-26	Myelography 2/> spine regions	R26C	Covered	114.85	114.85	1 XXX	0	0	0	0	0
72270-TC	Myelography 2/> spine regions	R26C	Covered	170.80	170.80	1 XXX	0	0	0	0	0
72285-00	Discography cerv/thor spine	R26C	Covered	248.61	248.61	1 XXX	0	0	0	0	0
72285-26	Discography cerv/thor spine	R26C	Covered	99.80	99.80	1 XXX	0	0	0	0	0
72285-TC	Discography cerv/thor spine	R26C	Covered	148.81	148.81	1 XXX	0	0	0	0	0
72295-00	X-ray of lower spine disk	R26C	Covered	209.80	209.80	1 XXX	0	0	0	0	0
72295-26	X-ray of lower spine disk	R26C	Covered	70.04	70.04	1 XXX	0	0	0	0	0
72295-TC	X-ray of lower spine disk	R26C	Covered	139.76	139.76	1 XXX	0	0	0	0	0
73000-00	X-ray exam of collar bone	R26C	Covered	61.56	61.56	1 XXX	0	3	0	0	0
73000-26	X-ray exam of collar bone	R26C	Covered	14.30	14.30	1 XXX	0	3	0	0	0
73000-TC	X-ray exam of collar bone	R26C	Covered	47.26	47.26	1 XXX	0	3	0	0	0

73010-00	X-ray exam of shoulder blade	R26C	Covered	44.71	44.71	1 XXX	0	3	0	0	0
73010-26	X-ray exam of shoulder blade	R26C	Covered	15.55	15.55	1 XXX	0	3	0	0	0
73010-TC	X-ray exam of shoulder blade	R26C	Covered	29.15	29.15	1 XXX	0	3	0	0	0
73020-00	X-ray exam of shoulder	R26C	Covered	40.26	40.26	1 XXX	0	3	0	0	0
73020-26	X-ray exam of shoulder	R26C	Covered	13.04	13.04	1 XXX	0	3	0	0	0
73020-TC	X-ray exam of shoulder	R26C	Covered	27.21	27.21	1 XXX	0	3	0	0	0
73030-00	X-ray exam of shoulder	R26C	Covered	66.01	66.01	1 XXX	0	3	0	0	0
73030-26	X-ray exam of shoulder	R26C	Covered	16.16	16.16	1 XXX	0	3	0	0	0
73030-TC	X-ray exam of shoulder	R26C	Covered	49.85	49.85	1 XXX	0	3	0	0	0
73040-00	Contrast x-ray of shoulder	R26C	Covered	250.98	250.98	1 XXX	0	3	0	0	0
73040-26	Contrast x-ray of shoulder	R26C	Covered	47.19	47.19	1 XXX	0	3	0	0	0
73040-TC	Contrast x-ray of shoulder	R26C	Covered	203.79	203.79	1 XXX	0	3	0	0	0
73050-00	X-ray exam of shoulders	R26C	Covered	54.37	54.37	1 XXX	0	2	0	0	0
73050-26	X-ray exam of shoulders	R26C	Covered	16.16	16.16	1 XXX	0	2	0	0	0
73050-TC	X-ray exam of shoulders	R26C	Covered	38.21	38.21	1 XXX	0	2	0	0	0
73060-00	X-ray exam of humerus	R26C	Covered	60.27	60.27	1 XXX	0	0	0	0	0
73060-26	X-ray exam of humerus	R26C	Covered	13.65	13.65	1 XXX	0	0	0	0	0
73060-TC	X-ray exam of humerus	R26C	Covered	46.62	46.62	1 XXX	0	0	0	0	0
73070-00	X-ray exam of elbow	R26C	Covered	55.10	55.10	1 XXX	0	3	0	0	0
73070-26	X-ray exam of elbow	R26C	Covered	14.30	14.30	1 XXX	0	3	0	0	0
73070-TC	X-ray exam of elbow	R26C	Covered	40.80	40.80	1 XXX	0	3	0	0	0
73080-00	X-ray exam of elbow	R26C	Covered	62.17	62.17	1 XXX	0	3	0	0	0
73080-26	X-ray exam of elbow	R26C	Covered	14.91	14.91	1 XXX	0	3	0	0	0
73080-TC	X-ray exam of elbow	R26C	Covered	47.26	47.26	1 XXX	0	3	0	0	0
73085-00	Contrast x-ray of elbow	R26C	Covered	189.54	189.54	1 XXX	0	3	0	0	0
73085-26	Contrast x-ray of elbow	R26C	Covered	45.25	45.25	1 XXX	0	3	0	0	0
73085-TC	Contrast x-ray of elbow	R26C	Covered	144.28	144.28	1 XXX	0	3	0	0	0
73090-00	X-ray exam of forearm	R26C	Covered	55.10	55.10	1 XXX	0	3	0	0	0
73090-26	X-ray exam of forearm	R26C	Covered	13.65	13.65	1 XXX	0	3	0	0	0
73090-TC	X-ray exam of forearm	R26C	Covered	41.44	41.44	1 XXX	0	3	0	0	0
73092-00	X-ray exam of arm infant	R26C	Covered	59.62	59.62	1 XXX	0	3	0	0	0
73092-26	X-ray exam of arm infant	R26C	Covered	13.65	13.65	1 XXX	0	3	0	0	0
73092-TC	X-ray exam of arm infant	R26C	Covered	45.97	45.97	1 XXX	0	3	0	0	0
73100-00	X-ray exam of wrist	R26C	Covered	64.15	64.15	1 XXX	0	3	0	0	0
73100-26	X-ray exam of wrist	R26C	Covered	14.30	14.30	1 XXX	0	3	0	0	0
73100-TC	X-ray exam of wrist	R26C	Covered	49.85	49.85	1 XXX	0	3	0	0	0
73110-00	X-ray exam of wrist	R26C	Covered	78.34	78.34	1 XXX	0	3	0	0	0
73110-26	X-ray exam of wrist	R26C	Covered	14.91	14.91	1 XXX	0	3	0	0	0
73110-TC	X-ray exam of wrist	R26C	Covered	63.43	63.43	1 XXX	0	3	0	0	0
73115-00	Contrast x-ray of wrist	R26C	Covered	257.45	257.45	1 XXX	0	3	0	0	0
73115-26	Contrast x-ray of wrist	R26C	Covered	47.84	47.84	1 XXX	0	3	0	0	0
73115-TC	Contrast x-ray of wrist	R26C	Covered	209.61	209.61	1 XXX	0	3	0	0	0
73120-00	X-ray exam of hand	R26C	Covered	59.62	59.62	1 XXX	0	3	0	0	0
73120-26	X-ray exam of hand	R26C	Covered	14.30	14.30	1 XXX	0	3	0	0	0
73120-TC	X-ray exam of hand	R26C	Covered	45.32	45.32	1 XXX	0	3	0	0	0
73130-00	X-ray exam of hand	R26C	Covered	70.58	70.58	1 XXX	0	3	0	0	0
73130-26	X-ray exam of hand	R26C	Covered	14.91	14.91	1 XXX	0	3	0	0	0
73130-TC	X-ray exam of hand	R26C	Covered	55.67	55.67	1 XXX	0	3	0	0	0
73140-00	X-ray exam of finger(s)	R26C	Covered	72.68	72.68	1 XXX	0	3	0	0	0
73140-26	X-ray exam of finger(s)	R26C	Covered	11.83	11.83	1 XXX	0	3	0	0	0
73140-TC	X-ray exam of finger(s)	R26C	Covered	60.85	60.85	1 XXX	0	3	0	0	0
73200-00	Ct upper extremity w/o dye	R26C	Covered	313.31	313.31	1 XXX	4	3	0	0	0
73200-26	Ct upper extremity w/o dye	R26C	Covered	83.65	83.65	1 XXX	4	3	0	0	0
73200-TC	Ct upper extremity w/o dye	R26C	Covered	229.66	229.66	1 XXX	4	3	0	0	0

73201-00	Ct upper extremity w/dye	R26C	Covered	390.40	390.40	1 XXX	4	3	0	0	0
73201-26	Ct upper extremity w/dye	R26C	Covered	97.31	97.31	1 XXX	4	3	0	0	0
73201-TC	Ct upper extremity w/dye	R26C	Covered	293.09	293.09	1 XXX	4	3	0	0	0
73202-00	Ct uppr extremity w/o&w/dye	R26C	Covered	485.89	485.89	1 XXX	4	3	0	0	0
73202-26	Ct uppr extremity w/o&w/dye	R26C	Covered	101.60	101.60	1 XXX	4	3	0	0	0
73202-TC	Ct uppr extremity w/o&w/dye	R26C	Covered	384.29	384.29	1 XXX	4	3	0	0	0
73206-00	Ct angio upr extrm w/o&w/dye	R26C	Covered	576.32	576.32	1 XXX	4	0	0	0	0
73206-26	Ct angio upr extrm w/o&w/dye	R26C	Covered	149.29	149.29	1 XXX	4	0	0	0	0
73206-TC	Ct angio upr extrm w/o&w/dye	R26C	Covered	427.03	427.03	1 XXX	4	0	0	0	0
73218-00	Mri upper extremity w/o dye	R26C	Covered	594.79	594.79	1 XXX	4	3	0	0	0
73218-26	Mri upper extremity w/o dye	R26C	Covered	114.08	114.08	1 XXX	4	3	0	0	0
73218-TC	Mri upper extremity w/o dye	R26C	Covered	480.71	480.71	1 XXX	4	3	0	0	0
73219-00	Mri upper extremity w/dye	R26C	Covered	648.76	648.76	1 XXX	4	3	0	0	0
73219-26	Mri upper extremity w/dye	R26C	Covered	136.35	136.35	1 XXX	4	3	0	0	0
73219-TC	Mri upper extremity w/dye	R26C	Covered	512.41	512.41	1 XXX	4	3	0	0	0
73220-00	Mri uppr extremity w/o&w/dye	R26C	Covered	801.42	801.42	1 XXX	4	3	0	0	0
73220-26	Mri uppr extremity w/o&w/dye	R26C	Covered	180.35	180.35	1 XXX	4	3	0	0	0
73220-TC	Mri uppr extremity w/o&w/dye	R26C	Covered	621.07	621.07	1 XXX	4	3	0	0	0
73221-00	Mri joint upr extrem w/o dye	R26C	Covered	394.23	394.23	1 XXX	4	3	0	0	0
73221-26	Mri joint upr extrem w/o dye	R26C	Covered	114.08	114.08	1 XXX	4	3	0	0	0
73221-TC	Mri joint upr extrem w/o dye	R26C	Covered	280.16	280.16	1 XXX	4	3	0	0	0
73222-00	Mri joint upr extrem w/dye	R26C	Covered	612.54	612.54	1 XXX	4	3	0	0	0
73222-26	Mri joint upr extrem w/dye	R26C	Covered	137.00	137.00	1 XXX	4	3	0	0	0
73222-TC	Mri joint upr extrem w/dye	R26C	Covered	475.54	475.54	1 XXX	4	3	0	0	0
73223-00	Mri joint upr extr w/o&w/dye	R26C	Covered	756.15	756.15	1 XXX	4	3	0	0	0
73223-26	Mri joint upr extr w/o&w/dye	R26C	Covered	181.00	181.00	1 XXX	4	3	0	0	0
73223-TC	Mri joint upr extr w/o&w/dye	R26C	Covered	575.15	575.15	1 XXX	4	3	0	0	0
73225-00	Mr angio upr extr w/o&w/dye	R26C	Covered	668.48	668.48	1 XXX	4	0	0	0	0
73225-26	Mr angio upr extr w/o&w/dye	R26C	Covered	145.03	145.03	1 XXX	4	0	0	0	0
73225-TC	Mr angio upr extr w/o&w/dye	R26C	Covered	523.45	523.45	1 XXX	4	0	9	0	0
73501-00	X-ray exam hip uni 1 view	R26C	Covered	62.13	62.13	1 XXX	0	0	0	0	0
73501-26	X-ray exam hip uni 1 view	R26C	Covered	16.16	16.16	1 XXX	0	0	0	0	0
73501-TC	X-ray exam hip uni 1 view	R26C	Covered	45.97	45.97	1 XXX	0	0	0	0	0
73502-00	X-ray exam hip uni 2-3 views	R26C	Covered	90.44	90.44	1 XXX	0	0	0	0	0
73502-26	X-ray exam hip uni 2-3 views	R26C	Covered	19.24	19.24	1 XXX	0	0	0	0	0
73502-TC	X-ray exam hip uni 2-3 views	R26C	Covered	71.20	71.20	1 XXX	0	0	0	0	0
73503-00	X-ray exam hip uni 4/> views	R26C	Covered	114.17	114.17	1 XXX	0	0	0	0	0
73503-26	X-ray exam hip uni 4/> views	R26C	Covered	23.57	23.57	1 XXX	0	0	0	0	0
73503-TC	X-ray exam hip uni 4/> views	R26C	Covered	90.60	90.60	1 XXX	0	0	0	0	0
73521-00	X-ray exam hips bi 2 views	R26C	Covered	78.15	78.15	1 XXX	0	0	0	0	0
73521-26	X-ray exam hips bi 2 views	R26C	Covered	19.24	19.24	1 XXX	0	0	0	0	0
73521-TC	X-ray exam hips bi 2 views	R26C	Covered	58.91	58.91	1 XXX	0	0	0	0	0
73522-00	X-ray exam hips bi 3-4 views	R26C	Covered	102.45	102.45	1 XXX	0	0	0	0	0
73522-26	X-ray exam hips bi 3-4 views	R26C	Covered	25.43	25.43	1 XXX	0	0	0	0	0
73522-TC	X-ray exam hips bi 3-4 views	R26C	Covered	77.02	77.02	1 XXX	0	0	0	0	0
73523-00	X-ray exam hips bi 5/> views	R26C	Covered	117.30	117.30	1 XXX	0	0	0	0	0
73523-26	X-ray exam hips bi 5/> views	R26C	Covered	26.70	26.70	1 XXX	0	0	0	0	0
73523-TC	X-ray exam hips bi 5/> views	R26C	Covered	90.60	90.60	1 XXX	0	0	0	0	0
73525-00	Contrast x-ray of hip	R26C	Covered	244.61	244.61	1 XXX	0	3	0	0	0
73525-26	Contrast x-ray of hip	R26C	Covered	49.23	49.23	1 XXX	0	3	0	0	0
73525-TC	Contrast x-ray of hip	R26C	Covered	195.38	195.38	1 XXX	0	3	0	0	0
73551-00	X-ray exam of femur 1	R26C	Covered	55.10	55.10	1 XXX	0	3	0	0	0
73551-26	X-ray exam of femur 1	R26C	Covered	14.30	14.30	1 XXX	0	3	0	0	0
73551-TC	X-ray exam of femur 1	R26C	Covered	40.80	40.80	1 XXX	0	3	0	0	0

73552-00	X-ray exam of femur 2/>	R26C	Covered	67.31	67.31	1 XXX	0	3	0	0	0
73552-26	X-ray exam of femur 2/>	R26C	Covered	15.52	15.52	1 XXX	0	3	0	0	0
73552-TC	X-ray exam of femur 2/>	R26C	Covered	51.79	51.79	1 XXX	0	3	0	0	0
73560-00	X-ray exam of knee 1 or 2	R26C	Covered	64.80	64.80	1 XXX	0	3	0	0	0
73560-26	X-ray exam of knee 1 or 2	R26C	Covered	14.30	14.30	1 XXX	0	3	0	0	0
73560-TC	X-ray exam of knee 1 or 2	R26C	Covered	50.50	50.50	1 XXX	0	3	0	0	0
73562-00	X-ray exam of knee 3	R26C	Covered	77.66	77.66	1 XXX	0	3	0	0	0
73562-26	X-ray exam of knee 3	R26C	Covered	16.16	16.16	1 XXX	0	3	0	0	0
73562-TC	X-ray exam of knee 3	R26C	Covered	61.49	61.49	1 XXX	0	3	0	0	0
73564-00	X-ray exam knee 4 or more	R26C	Covered	89.79	89.79	1 XXX	0	3	0	0	0
73564-26	X-ray exam knee 4 or more	R26C	Covered	19.89	19.89	1 XXX	0	3	0	0	0
73564-TC	X-ray exam knee 4 or more	R26C	Covered	69.90	69.90	1 XXX	0	3	0	0	0
73565-00	X-ray exam of knees	R26C	Covered	75.79	75.79	1 XXX	0	2	0	0	0
73565-26	X-ray exam of knees	R26C	Covered	14.30	14.30	1 XXX	0	2	0	0	0
73565-TC	X-ray exam of knees	R26C	Covered	61.49	61.49	1 XXX	0	2	0	0	0
73580-00	Contrast x-ray of knee joint	R26C	Covered	208.24	208.24	1 XXX	0	3	0	0	0
73580-26	Contrast x-ray of knee joint	R26C	Covered	52.96	52.96	1 XXX	0	3	0	0	0
73580-TC	Contrast x-ray of knee joint	R26C	Covered	155.28	155.28	1 XXX	0	3	0	0	0
73590-00	X-ray exam of lower leg	R26C	Covered	59.62	59.62	1 XXX	0	3	0	0	0
73590-26	X-ray exam of lower leg	R26C	Covered	13.65	13.65	1 XXX	0	3	0	0	0
73590-TC	X-ray exam of lower leg	R26C	Covered	45.97	45.97	1 XXX	0	3	0	0	0
73592-00	X-ray exam of leg infant	R26C	Covered	59.62	59.62	1 XXX	0	3	0	0	0
73592-26	X-ray exam of leg infant	R26C	Covered	13.65	13.65	1 XXX	0	3	0	0	0
73592-TC	X-ray exam of leg infant	R26C	Covered	45.97	45.97	1 XXX	0	3	0	0	0
73600-00	X-ray exam of ankle	R26C	Covered	60.92	60.92	1 XXX	0	3	0	0	0
73600-26	X-ray exam of ankle	R26C	Covered	13.65	13.65	1 XXX	0	3	0	0	0
73600-TC	X-ray exam of ankle	R26C	Covered	47.26	47.26	1 XXX	0	3	0	0	0
73610-00	X-ray exam of ankle	R26C	Covered	69.29	69.29	1 XXX	0	3	0	0	0
73610-26	X-ray exam of ankle	R26C	Covered	14.91	14.91	1 XXX	0	3	0	0	0
73610-TC	X-ray exam of ankle	R26C	Covered	54.38	54.38	1 XXX	0	3	0	0	0
73615-00	Contrast x-ray of ankle	R26C	Covered	243.87	243.87	1 XXX	0	3	0	0	0
73615-26	Contrast x-ray of ankle	R26C	Covered	48.49	48.49	1 XXX	0	3	0	0	0
73615-TC	Contrast x-ray of ankle	R26C	Covered	195.38	195.38	1 XXX	0	3	0	0	0
73620-00	X-ray exam of foot	R26C	Covered	53.80	53.80	1 XXX	0	3	0	0	0
73620-26	X-ray exam of foot	R26C	Covered	13.01	13.01	1 XXX	0	3	0	0	0
73620-TC	X-ray exam of foot	R26C	Covered	40.80	40.80	1 XXX	0	3	0	0	0
73630-00	X-ray exam of foot	R26C	Covered	64.76	64.76	1 XXX	0	3	0	0	0
73630-26	X-ray exam of foot	R26C	Covered	14.26	14.26	1 XXX	0	3	0	0	0
73630-TC	X-ray exam of foot	R26C	Covered	50.50	50.50	1 XXX	0	3	0	0	0
73650-00	X-ray exam of heel	R26C	Covered	53.80	53.80	1 XXX	0	3	0	0	0
73650-26	X-ray exam of heel	R26C	Covered	13.65	13.65	1 XXX	0	3	0	0	0
73650-TC	X-ray exam of heel	R26C	Covered	40.15	40.15	1 XXX	0	3	0	0	0
73660-00	X-ray exam of toe(s)	R26C	Covered	55.21	55.21	1 XXX	0	3	0	0	0
73660-26	X-ray exam of toe(s)	R26C	Covered	11.18	11.18	1 XXX	0	3	0	0	0
73660-TC	X-ray exam of toe(s)	R26C	Covered	44.03	44.03	1 XXX	0	3	0	0	0
73700-00	Ct lower extremity w/o dye	R26C	Covered	249.93	249.93	1 XXX	4	3	0	0	0
73700-26	Ct lower extremity w/o dye	R26C	Covered	83.65	83.65	1 XXX	4	3	0	0	0
73700-TC	Ct lower extremity w/o dye	R26C	Covered	166.27	166.27	1 XXX	4	3	0	0	0
73701-00	Ct lower extremity w/dye	R26C	Covered	322.49	322.49	1 XXX	4	3	0	0	0
73701-26	Ct lower extremity w/dye	R26C	Covered	97.31	97.31	1 XXX	4	3	0	0	0
73701-TC	Ct lower extremity w/dye	R26C	Covered	225.18	225.18	1 XXX	4	3	0	0	0
73702-00	Ct lwr extremity w/o&w/dye	R26C	Covered	379.17	379.17	1 XXX	4	3	0	0	0
73702-26	Ct lwr extremity w/o&w/dye	R26C	Covered	101.60	101.60	1 XXX	4	3	0	0	0
73702-TC	Ct lwr extremity w/o&w/dye	R26C	Covered	277.57	277.57	1 XXX	4	3	0	0	0

73706-00	Ct angio lwr extr w/o&w/dye	R26C	Covered	627.11	627.11	1 XXX	4	3	0	0	0
73706-26	Ct angio lwr extr w/o&w/dye	R26C	Covered	157.35	157.35	1 XXX	4	3	0	0	0
73706-TC	Ct angio lwr extr w/o&w/dye	R26C	Covered	469.77	469.77	1 XXX	4	3	0	0	0
73718-00	Mri lower extremity w/o dye	R26C	Covered	434.98	434.98	1 XXX	4	3	0	0	0
73718-26	Mri lower extremity w/o dye	R26C	Covered	112.78	112.78	1 XXX	4	3	0	0	0
73718-TC	Mri lower extremity w/o dye	R26C	Covered	322.20	322.20	1 XXX	4	3	0	0	0
73719-00	Mri lower extremity w/dye	R26C	Covered	512.29	512.29	1 XXX	4	3	0	0	0
73719-26	Mri lower extremity w/dye	R26C	Covered	135.71	135.71	1 XXX	4	3	0	0	0
73719-TC	Mri lower extremity w/dye	R26C	Covered	376.58	376.58	1 XXX	4	3	0	0	0
73720-00	Mri lwr extremity w/o&w/dye	R26C	Covered	655.89	655.89	1 XXX	4	3	0	0	0
73720-26	Mri lwr extremity w/o&w/dye	R26C	Covered	179.71	179.71	1 XXX	4	3	0	0	0
73720-TC	Mri lwr extremity w/o&w/dye	R26C	Covered	476.19	476.19	1 XXX	4	3	0	0	0
73721-00	Mri jnt of lwr extre w/o dye	R26C	Covered	393.59	393.59	1 XXX	4	3	0	0	0
73721-26	Mri jnt of lwr extre w/o dye	R26C	Covered	114.08	114.08	1 XXX	4	3	0	0	0
73721-TC	Mri jnt of lwr extre w/o dye	R26C	Covered	279.51	279.51	1 XXX	4	3	0	0	0
73722-00	Mri joint of lwr extr w/dye	R26C	Covered	613.19	613.19	1 XXX	4	3	0	0	0
73722-26	Mri joint of lwr extr w/dye	R26C	Covered	136.35	136.35	1 XXX	4	3	0	0	0
73722-TC	Mri joint of lwr extr w/dye	R26C	Covered	476.83	476.83	1 XXX	4	3	0	0	0
73723-00	Mri joint lwr extr w/o&w/dye	R26C	Covered	752.91	752.91	1 XXX	4	3	0	0	0
73723-26	Mri joint lwr extr w/o&w/dye	R26C	Covered	180.35	180.35	1 XXX	4	3	0	0	0
73723-TC	Mri joint lwr extr w/o&w/dye	R26C	Covered	572.56	572.56	1 XXX	4	3	0	0	0
73725-00	Mr ang lwr ext w or w/o dye	R26C	Covered	654.59	654.59	1 XXX	4	3	0	0	0
73725-26	Mr ang lwr ext w or w/o dye	R26C	Covered	149.90	149.90	1 XXX	4	3	0	0	0
73725-TC	Mr ang lwr ext w or w/o dye	R26C	Covered	504.69	504.69	1 XXX	4	3	0	0	0
74018-00	X-ray exam abdomen 1 view	R26C	Covered	56.96	56.96	1 XXX	0	0	0	0	0
74018-26	X-ray exam abdomen 1 view	R26C	Covered	15.52	15.52	1 XXX	0	0	0	0	0
74018-TC	X-ray exam abdomen 1 view	R26C	Covered	41.44	41.44	1 XXX	0	0	0	0	0
74019-00	X-ray exam abdomen 2 views	R26C	Covered	69.05	69.05	1 XXX	0	0	0	0	0
74019-26	X-ray exam abdomen 2 views	R26C	Covered	19.20	19.20	1 XXX	0	0	0	0	0
74019-TC	X-ray exam abdomen 2 views	R26C	Covered	49.85	49.85	1 XXX	0	0	0	0	0
74021-00	X-ray exam abdomen 3+ views	R26C	Covered	81.18	81.18	1 XXX	0	0	0	0	0
74021-26	X-ray exam abdomen 3+ views	R26C	Covered	22.93	22.93	1 XXX	0	0	0	0	0
74021-TC	X-ray exam abdomen 3+ views	R26C	Covered	58.26	58.26	1 XXX	0	0	0	0	0
74022-00	X-ray exam complete abdomen	R26C	Covered	93.97	93.97	1 XXX	0	0	0	0	0
74022-26	X-ray exam complete abdomen	R26C	Covered	26.66	26.66	1 XXX	0	0	0	0	0
74022-TC	X-ray exam complete abdomen	R26C	Covered	67.31	67.31	1 XXX	0	0	0	0	0
74150-00	Ct abdomen w/o dye	R26C	Covered	262.82	262.82	1 XXX	4	0	0	0	0
74150-26	Ct abdomen w/o dye	R26C	Covered	99.78	99.78	1 XXX	4	0	0	0	0
74150-TC	Ct abdomen w/o dye	R26C	Covered	163.04	163.04	1 XXX	4	0	0	0	0
74160-00	Ct abdomen w/dye	R26C	Covered	454.05	454.05	1 XXX	4	0	0	0	0
74160-26	Ct abdomen w/dye	R26C	Covered	106.63	106.63	1 XXX	4	0	0	0	0
74160-TC	Ct abdomen w/dye	R26C	Covered	347.43	347.43	1 XXX	4	0	0	0	0
74170-00	Ct abdomen w/o & w/dye	R26C	Covered	511.11	511.11	1 XXX	4	0	0	0	0
74170-26	Ct abdomen w/o & w/dye	R26C	Covered	117.11	117.11	1 XXX	4	0	0	0	0
74170-TC	Ct abdomen w/o & w/dye	R26C	Covered	394.00	394.00	1 XXX	4	0	0	0	0
74174-00	Ct angio abd&pelv w/o&w/dye	R26C	Covered	739.23	739.23	1 XXX	4	0	0	0	0
74174-26	Ct angio abd&pelv w/o&w/dye	R26C	Covered	182.79	182.79	1 XXX	4	0	0	0	0
74174-TC	Ct angio abd&pelv w/o&w/dye	R26C	Covered	556.44	556.44	1 XXX	4	0	0	0	0
74175-00	Ct angio abdom w/o & w/dye	R26C	Covered	593.74	593.74	1 XXX	4	0	0	0	0
74175-26	Ct angio abdom w/o & w/dye	R26C	Covered	151.19	151.19	1 XXX	4	0	0	0	0
74175-TC	Ct angio abdom w/o & w/dye	R26C	Covered	442.55	442.55	1 XXX	4	0	0	0	0
74176-00	Ct abd & pelvis w/o contrast	R26C	Covered	350.77	350.77	1 XXX	4	0	9	0	0
74176-26	Ct abd & pelvis w/o contrast	R26C	Covered	145.64	145.64	1 XXX	4	0	9	0	0
74176-TC	Ct abd & pelvis w/o contrast	R26C	Covered	205.13	205.13	1 XXX	4	0	9	0	0

74177-00	Ct abd & pelv w/contrast	R26C	Covered	590.42	590.42	1 XXX	4	0	9	0	0
74177-26	Ct abd & pelv w/contrast	R26C	Covered	152.44	152.44	1 XXX	4	0	9	0	0
74177-TC	Ct abd & pelv w/contrast	R26C	Covered	437.98	437.98	1 XXX	4	0	9	0	0
74178-00	Ct abd & pelv 1/> regns	R26C	Covered	662.21	662.21	1 XXX	4	0	9	0	0
74178-26	Ct abd & pelv 1/> regns	R26C	Covered	167.91	167.91	1 XXX	4	0	9	0	0
74178-TC	Ct abd & pelv 1/> regns	R26C	Covered	494.30	494.30	1 XXX	4	0	9	0	0
74181-00	Mri abdomen w/o dye	R26C	Covered	378.98	378.98	1 XXX	4	0	0	0	0
74181-26	Mri abdomen w/o dye	R26C	Covered	122.10	122.10	1 XXX	4	0	0	0	0
74181-TC	Mri abdomen w/o dye	R26C	Covered	256.87	256.87	1 XXX	4	0	0	0	0
74182-00	Mri abdomen w/dye	R26C	Covered	589.52	589.52	1 XXX	4	0	0	0	0
74182-26	Mri abdomen w/dye	R26C	Covered	144.38	144.38	1 XXX	4	0	0	0	0
74182-TC	Mri abdomen w/dye	R26C	Covered	445.14	445.14	1 XXX	4	0	0	0	0
74183-00	Mri abdomen w/o & w/dye	R26C	Covered	657.64	657.64	1 XXX	4	0	0	0	0
74183-26	Mri abdomen w/o & w/dye	R26C	Covered	184.04	184.04	1 XXX	4	0	0	0	0
74183-TC	Mri abdomen w/o & w/dye	R26C	Covered	473.60	473.60	1 XXX	4	0	0	0	0
74185-00	Mri angio abdom w orw/o dye	R26C	Covered	657.21	657.21	1 XXX	4	0	0	0	0
74185-26	Mri angio abdom w orw/o dye	R26C	Covered	149.28	149.28	1 XXX	4	0	0	0	0
74185-TC	Mri angio abdom w orw/o dye	R26C	Covered	507.93	507.93	1 XXX	4	0	0	0	0
74190-00	X-ray exam of peritoneum	RMCD	Covered	24.60	24.60	1 XXX	0	0	0	0	0
74190-26	X-ray exam of peritoneum	RMCD	Covered	38.37	38.37	1 XXX	0	0	0	0	0
74190-TC	X-ray exam of peritoneum	RMCD	Covered	12.20	12.20	1 XXX	0	0	0	0	0
74210-00	X-ray xm phrnx&/crv esoph c+	R26C	Covered	178.99	178.99	1 XXX	0	0	0	0	0
74210-26	X-ray xm phrnx&/crv esoph c+	R26C	Covered	48.94	48.94	1 XXX	0	0	0	0	0
74210-TC	X-ray xm phrnx&/crv esoph c+	R26C	Covered	130.05	130.05	1 XXX	0	0	0	0	0
74220-00	X-ray xm esophagus 1cntrst	R26C	Covered	184.13	184.13	1 XXX	0	0	0	0	0
74220-26	X-ray xm esophagus 1cntrst	R26C	Covered	50.19	50.19	1 XXX	0	0	0	0	0
74220-TC	X-ray xm esophagus 1cntrst	R26C	Covered	133.93	133.93	1 XXX	0	0	0	0	0
74221-00	X-ray xm esophagus 2cntrst	R26C	Covered	207.07	207.07	1 XXX	0	0	0	0	0
74221-26	X-ray xm esophagus 2cntrst	R26C	Covered	58.26	58.26	1 XXX	0	0	0	0	0
74221-TC	X-ray xm esophagus 2cntrst	R26C	Covered	148.81	148.81	1 XXX	0	0	0	0	0
74230-00	X-ray xm swlng funcj c+	R26C	Covered	237.44	237.44	1 XXX	0	0	0	0	0
74230-26	X-ray xm swlng funcj c+	R26C	Covered	44.64	44.64	1 XXX	0	0	0	0	0
74230-TC	X-ray xm swlng funcj c+	R26C	Covered	192.79	192.79	1 XXX	0	0	0	0	0
51999-00	Unlisted laps px bladder	NBYR	Covered	By Report	By Report	0 YYY	0	0	0	1	1
53899-00	Unlisted px urinary system	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1
54440-00	Repair of penis	NBYR	Covered	By Report	By Report	0 O90	2	0	2	1	0
74240-00	X-ray xm upr gi trc 1cntrst	R26C	Covered	231.90	231.90	1 XXX	0	0	0	0	0
74240-26	X-ray xm upr gi trc 1cntrst	R26C	Covered	67.57	67.57	1 XXX	0	0	0	0	0
74240-TC	X-ray xm upr gi trc 1cntrst	R26C	Covered	164.33	164.33	1 XXX	0	0	0	0	0
74246-00	X-ray xm upr gi trc 2cntrst	R26C	Covered	262.61	262.61	1 XXX	0	0	0	0	0
74246-26	X-ray xm upr gi trc 2cntrst	R26C	Covered	74.99	74.99	1 XXX	0	0	0	0	0
74246-TC	X-ray xm upr gi trc 2cntrst	R26C	Covered	187.62	187.62	1 XXX	0	0	0	0	0
74248-00	X-ray sm int f-thru std	R26C	Covered	154.03	154.03	1 ZZZ	0	0	0	0	0
74248-26	X-ray sm int f-thru std	R26C	Covered	58.26	58.26	1 ZZZ	0	0	0	0	0
74248-TC	X-ray sm int f-thru std	R26C	Covered	95.77	95.77	1 ZZZ	0	0	0	0	0
74250-00	X-ray xm sm int 1cntrst std	R26C	Covered	229.92	229.92	1 XXX	0	0	0	0	0
74250-26	X-ray xm sm int 1cntrst std	R26C	Covered	67.53	67.53	1 XXX	0	0	0	0	0
74250-TC	X-ray xm sm int 1cntrst std	R26C	Covered	162.39	162.39	1 XXX	0	0	0	0	0
74251-00	X-ray xm sm int 2cntrst std	R26C	Covered	694.31	694.31	1 XXX	0	0	0	0	0
74251-26	X-ray xm sm int 2cntrst std	R26C	Covered	97.91	97.91	1 XXX	0	0	0	0	0
74251-TC	X-ray xm sm int 2cntrst std	R26C	Covered	596.40	596.40	1 XXX	0	0	0	0	0
54410-00	Remove/replace penis prosth	NCOV	Not Covered	Code not covered	Code not cov	0 O90	2	0	2	1	0
58760-00	Fimbrioplasty	NCOV	Not Covered	Code not covered	Code not cov	0 O90	2	1	2	1	0
54405-00	Insert multi-comp penis pros	NCOV	Not Covered	Code not covered	Code not cov	0 O90	2	0	2	1	0

15819-00	Plastic surgery neck	NCOV	Not Covered	Code not covered	Code not cov	0 090	2	0	0	0	0
15836-00	Excise excessive skin arm	NCOV	Not Covered	Code not covered	Code not cov	0 090	2	1	0	0	0
54408-00	Repair multi-comp penis pros	NCOV	Not Covered	Code not covered	Code not cov	0 090	2	0	2	1	0
19316-00	Suspension of breast	NCOV	Not Covered	Code not covered	Code not cov	0 090	2	1	2	1	0
99471-00	Ped critical care initial	NCOV	Not Covered	Code not covered	Code not cov	0 XXX	0	0	0	0	0
0175U-00	Gene analysis panel for detection of variants in 15	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
74270-00	X-ray xm colon 1cntrst std	R26C	Covered	289.87	289.87	1 XXX	0	0	0	0	0
74270-26	X-ray xm colon 1cntrst std	R26C	Covered	86.73	86.73	1 XXX	0	0	0	0	0
74270-TC	X-ray xm colon 1cntrst std	R26C	Covered	203.14	203.14	1 XXX	0	0	0	0	0
74280-00	X-ray xm colon 2cntrst std	R26C	Covered	415.93	415.93	1 XXX	0	0	0	0	0
74280-26	X-ray xm colon 2cntrst std	R26C	Covered	105.37	105.37	1 XXX	0	0	0	0	0
74280-TC	X-ray xm colon 2cntrst std	R26C	Covered	310.56	310.56	1 XXX	0	0	0	0	0
74283-00	Ther nma rdctj intus/obstrcj	R26C	Covered	479.68	479.68	1 XXX	0	0	0	0	0
74283-26	Ther nma rdctj intus/obstrcj	R26C	Covered	176.93	176.93	1 XXX	0	0	0	0	0
74283-TC	Ther nma rdctj intus/obstrcj	R26C	Covered	302.75	302.75	1 XXX	0	0	0	0	0
74290-00	Contrast x-ray gallbladder	R26C	Covered	161.89	161.89	1 XXX	0	0	0	0	0
74290-26	Contrast x-ray gallbladder	R26C	Covered	26.66	26.66	1 XXX	0	0	0	0	0
74290-TC	Contrast x-ray gallbladder	R26C	Covered	135.23	135.23	1 XXX	0	0	0	0	0
54699-00	Unlisted laps px testis	NBYR	Unlisted	By Report	By Report	0 YYY	2	1	2	1	1
55559-00	Unlstd laps px sprmatic cord	NBYR	Covered	By Report	By Report	0 YYY	2	1	2	1	1
55899-00	Unlisted px male genital sys	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1
55970-00	Sex transformation m to f	NBYR	Covered	By Report	By Report	9 YYY	9	9	9	9	9
55980-00	Sex transformation f to m	NBYR	Covered	By Report	By Report	9 YYY	9	9	9	9	9
58578-00	Unlisted laps px uterus	NBYR	Covered	By Report	By Report	0 YYY	2	1	2	1	1
74328-00	X-ray bile duct endoscopy	RMCD	Covered	28.87	28.87	1 XXX	0	0	0	0	0
74328-26	X-ray bile duct endoscopy	RMCD	Covered	40.95	40.95	1 XXX	0	0	0	0	0
74328-TC	X-ray bile duct endoscopy	RMCD	Covered	15.92	15.92	1 XXX	0	0	0	0	0
58579-00	Unlisted hystsc px uterus	NBYR	Unlisted	By Report	By Report	0 YYY	2	1	2	1	1
58679-00	Unlisted laps px ovidct ovry	NBYR	Covered	By Report	By Report	0 YYY	2	1	2	1	1
58999-00	Unlisted px fml genital sys	NBYR	Covered	By Report	By Report	0 YYY	2	0	1	1	1
74330-00	X-ray bile/panc endoscopy	RMCD	Covered	33.50	33.50	1 XXX	0	0	0	0	0
74330-26	X-ray bile/panc endoscopy	RMCD	Covered	47.76	47.76	1 XXX	0	0	0	0	0
74330-TC	X-ray bile/panc endoscopy	RMCD	Covered	19.19	19.19	1 XXX	0	0	0	0	0
74340-00	X-ray guide for gi tube	RMCD	Covered	30.73	30.73	1 XXX	0	0	0	0	0
74340-26	X-ray guide for gi tube	RMCD	Covered	44.60	44.60	1 XXX	0	0	0	0	0
74340-TC	X-ray guide for gi tube	RMCD	Covered	16.30	16.30	1 XXX	0	0	0	0	0
74355-00	X-ray guide intestinal tube	RMCD	Covered	41.34	41.34	1 XXX	0	0	0	0	0
74355-26	X-ray guide intestinal tube	RMCD	Covered	63.84	63.84	1 XXX	0	0	0	0	0
74355-TC	X-ray guide intestinal tube	RMCD	Covered	21.00	21.00	1 XXX	0	0	0	0	0
74360-00	X-ray guide gi dilation	RMCD	Covered	32.47	32.47	1 XXX	0	0	0	0	0
74360-26	X-ray guide gi dilation	RMCD	Covered	46.64	46.64	1 XXX	0	0	0	0	0
74360-TC	X-ray guide gi dilation	RMCD	Covered	18.02	18.02	1 XXX	0	0	0	0	0
59897-00	Unlisted fetal invas px w/us	NBYR	Covered	By Report	By Report	0 YYY	2	0	1	0	0
59898-00	Unlstd laps px mat care&dlvr	NBYR	Covered	By Report	By Report	0 YYY	2	1	2	1	1
60659-00	Unlisted laps px endoc sys	NBYR	Covered	By Report	By Report	0 YYY	2	1	2	0	0
74400-00	Urography iv +-kub tomog	R26C	Covered	257.04	257.04	1 XXX	0	0	0	0	0
74400-26	Urography iv +-kub tomog	R26C	Covered	40.92	40.92	1 XXX	0	0	0	0	0
74400-TC	Urography iv +-kub tomog	R26C	Covered	216.13	216.13	1 XXX	0	0	0	0	0
74410-00	Urography nfs drip&/bolus	R26C	Covered	270.58	270.58	1 XXX	0	0	0	0	0
74410-26	Urography nfs drip&/bolus	R26C	Covered	40.87	40.87	1 XXX	0	0	0	0	0
74410-TC	Urography nfs drip&/bolus	R26C	Covered	229.71	229.71	1 XXX	0	0	0	0	0
74415-00	Urography nfs drip&/bls w/nf	R26C	Covered	288.69	288.69	1 XXX	0	0	0	0	0
74415-26	Urography nfs drip&/bls w/nf	R26C	Covered	40.87	40.87	1 XXX	0	0	0	0	0
74415-TC	Urography nfs drip&/bls w/nf	R26C	Covered	247.82	247.82	1 XXX	0	0	0	0	0

74420-00	Urography rtrgr +-kub	R26C	Covered	147.52	147.52	1 XXX	0	0	0	0	0
74420-26	Urography rtrgr +-kub	R26C	Covered	43.34	43.34	1 XXX	0	0	0	0	0
74420-TC	Urography rtrgr +-kub	R26C	Covered	104.18	104.18	1 XXX	0	0	0	0	0
74425-00	Urography antegrade rs&i	R26C	Covered	259.46	259.46	1 XXX	0	0	0	0	0
74425-26	Urography antegrade rs&i	R26C	Covered	42.09	42.09	1 XXX	0	0	0	0	0
74425-TC	Urography antegrade rs&i	R26C	Covered	217.37	217.37	1 XXX	0	0	0	0	0
74430-00	Contrast x-ray bladder	R26C	Covered	77.16	77.16	1 XXX	0	0	0	0	0
74430-26	Contrast x-ray bladder	R26C	Covered	26.66	26.66	1 XXX	0	0	0	0	0
74430-TC	Contrast x-ray bladder	R26C	Covered	50.50	50.50	1 XXX	0	0	0	0	0
74440-00	X-ray male genital tract	R26C	Covered	186.18	186.18	1 XXX	0	0	0	0	0
74440-26	X-ray male genital tract	R26C	Covered	31.55	31.55	1 XXX	0	0	0	0	0
74440-TC	X-ray male genital tract	R26C	Covered	154.63	154.63	1 XXX	0	0	0	0	0
74445-00	X-ray exam of penis	RMCD	Covered	55.39	55.39	1 XXX	0	0	0	0	0
74445-26	X-ray exam of penis	RMCD	Covered	95.35	95.35	1 XXX	0	0	0	0	0
74445-TC	X-ray exam of penis	RMCD	Covered	25.63	25.63	1 XXX	0	0	0	0	0
74450-00	X-ray urethra/bladder	RMCD	Covered	18.61	18.61	1 XXX	0	0	0	0	0
74450-26	X-ray urethra/bladder	RMCD	Covered	27.87	27.87	1 XXX	0	0	0	0	0
74450-TC	X-ray urethra/bladder	RMCD	Covered	9.47	9.47	1 XXX	0	0	0	0	0
74455-00	X-ray urethra/bladder	R26C	Covered	199.32	199.32	1 XXX	0	0	0	0	0
74455-26	X-ray urethra/bladder	R26C	Covered	27.87	27.87	1 XXX	0	0	0	0	0
74455-TC	X-ray urethra/bladder	R26C	Covered	171.45	171.45	1 XXX	0	0	0	0	0
74470-00	X-ray exam of kidney lesion	RMCD	Covered	27.69	27.69	1 XXX	0	0	0	0	0
74470-26	X-ray exam of kidney lesion	RMCD	Covered	43.31	43.31	1 XXX	0	0	0	0	0
74470-TC	X-ray exam of kidney lesion	RMCD	Covered	13.27	13.27	1 XXX	0	0	0	0	0
74485-00	Dilation urtr/urt rs&i	R26C	Covered	225.92	225.92	1 XXX	0	0	0	0	0
74485-26	Dilation urtr/urt rs&i	R26C	Covered	69.35	69.35	1 XXX	0	0	0	0	0
74485-TC	Dilation urtr/urt rs&i	R26C	Covered	156.57	156.57	1 XXX	0	0	0	0	0
74712-00	Mri fetal sngl/1st gestation	R26C	Covered	792.47	792.47	1 XXX	4	0	0	0	0
74712-26	Mri fetal sngl/1st gestation	R26C	Covered	252.25	252.25	1 XXX	4	0	0	0	0
74712-TC	Mri fetal sngl/1st gestation	R26C	Covered	540.22	540.22	1 XXX	4	0	0	0	0
74713-00	Mri fetal ea addl gestation	R26C	Covered	382.63	382.63	1 ZZZ	0	0	0	0	0
74713-26	Mri fetal ea addl gestation	R26C	Covered	155.56	155.56	1 ZZZ	0	0	0	0	0
74713-TC	Mri fetal ea addl gestation	R26C	Covered	227.07	227.07	1 ZZZ	0	0	0	0	0
74740-00	X-ray female genital tract	R26C	Covered	178.47	178.47	1 XXX	0	0	0	0	0
74740-26	X-ray female genital tract	R26C	Covered	32.25	32.25	1 XXX	0	0	0	0	0
74740-TC	X-ray female genital tract	R26C	Covered	146.22	146.22	1 XXX	0	0	0	0	0
60699-00	Unlisted px endocrine system	NBYR	Covered	By Report	By Report	0 YYY	2	0	2	1	1
62380-00	Ndsc dcmprn 1 ntrspc lumbar	NBYR	Covered	By Report	By Report	0 090	2	1	2	2	0
64999-00	Unlisted px nervous system	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1
74775-00	X-ray exam of perineum	RMCD	Covered	32.82	32.82	1 XXX	0	0	0	0	0
74775-26	X-ray exam of perineum	RMCD	Covered	52.05	52.05	1 XXX	0	0	0	0	0
74775-TC	X-ray exam of perineum	RMCD	Covered	15.63	15.63	1 XXX	0	0	0	0	0
75557-00	Cardiac mri for morph	R26C	Covered	538.59	538.59	1 XXX	4	0	0	0	0
75557-26	Cardiac mri for morph	R26C	Covered	195.69	195.69	1 XXX	4	0	0	0	0
75557-TC	Cardiac mri for morph	R26C	Covered	342.90	342.90	1 XXX	4	0	0	0	0
75559-00	Cardiac mri w/stress img	R26C	Covered	728.31	728.31	1 XXX	4	0	0	0	0
75559-26	Cardiac mri w/stress img	R26C	Covered	245.05	245.05	1 XXX	4	0	0	0	0
75559-TC	Cardiac mri w/stress img	R26C	Covered	483.25	483.25	1 XXX	4	0	0	0	0
75561-00	Cardiac mri for morph w/dye	R26C	Covered	706.53	706.53	1 XXX	4	0	0	0	0
75561-26	Cardiac mri for morph w/dye	R26C	Covered	216.76	216.76	1 XXX	4	0	0	0	0
75561-TC	Cardiac mri for morph w/dye	R26C	Covered	489.77	489.77	1 XXX	4	0	0	0	0
75563-00	Card mri w/stress img & dye	R26C	Covered	825.27	825.27	1 XXX	4	0	0	0	0
75563-26	Card mri w/stress img & dye	R26C	Covered	248.83	248.83	1 XXX	4	0	0	0	0
75563-TC	Card mri w/stress img & dye	R26C	Covered	576.44	576.44	1 XXX	4	0	0	0	0

75565-00	Card mri veloc flow mapping	R26C	Covered	88.98	88.98	1 ZZZ	0	0	0	0	0
75565-26	Card mri veloc flow mapping	R26C	Covered	21.06	21.06	1 ZZZ	0	0	0	0	0
75565-TC	Card mri veloc flow mapping	R26C	Covered	67.91	67.91	1 ZZZ	0	0	0	0	0
75571-00	Ct hrt w/o dye w/ca test	R26C	Covered	193.31	193.31	1 XXX	4	0	0	0	0
75571-26	Ct hrt w/o dye w/ca test	R26C	Covered	48.33	48.33	1 XXX	4	0	0	0	0
75571-TC	Ct hrt w/o dye w/ca test	R26C	Covered	144.98	144.98	1 XXX	4	0	0	0	0
75572-00	Ct hrt w/3d image	R26C	Covered	439.34	439.34	1 XXX	4	0	0	0	0
75572-26	Ct hrt w/3d image	R26C	Covered	145.55	145.55	1 XXX	4	0	0	0	0
75572-TC	Ct hrt w/3d image	R26C	Covered	293.79	293.79	1 XXX	4	0	0	0	0
75573-00	Ct hrt c+ strux cgen hrt ds	R26C	Covered	584.57	584.57	1 XXX	4	0	0	0	0
75573-26	Ct hrt c+ strux cgen hrt ds	R26C	Covered	212.47	212.47	1 XXX	4	0	0	0	0
75573-TC	Ct hrt c+ strux cgen hrt ds	R26C	Covered	372.10	372.10	1 XXX	4	0	0	0	0
75574-00	Ct angio hrt w/3d image	R26C	Covered	621.98	621.98	1 XXX	4	0	0	0	0
75574-26	Ct angio hrt w/3d image	R26C	Covered	200.07	200.07	1 XXX	4	0	0	0	0
75574-TC	Ct angio hrt w/3d image	R26C	Covered	421.90	421.90	1 XXX	4	0	0	0	0
75580-00	N-invas est c ffr sw aly cta	R26C	Covered	1745.80	1745.80	1 XXX	0	0	0	0	0
75580-26	N-invas est c ffr sw aly cta	R26C	Covered	62.54	62.54	1 XXX	0	0	0	0	0
75580-TC	N-invas est c ffr sw aly cta	R26C	Covered	1683.26	1683.26	1 XXX	0	0	0	0	0
75600-00	Contrast exam thoracic aorta	R26C	Covered	346.49	346.49	1 XXX	6	0	0	0	0
75600-26	Contrast exam thoracic aorta	R26C	Covered	38.52	38.52	1 XXX	6	0	0	0	0
75600-TC	Contrast exam thoracic aorta	R26C	Covered	307.97	307.97	1 XXX	6	0	0	0	0
75605-00	Contrast exam thoracic aorta	R26C	Covered	221.90	221.90	1 XXX	6	0	0	0	0
75605-26	Contrast exam thoracic aorta	R26C	Covered	90.50	90.50	1 XXX	6	0	0	0	0
75605-TC	Contrast exam thoracic aorta	R26C	Covered	131.39	131.39	1 XXX	6	0	0	0	0
75625-00	Contrast exam abdominl aorta	R26C	Covered	226.33	226.33	1 XXX	6	0	0	0	0
75625-26	Contrast exam abdominl aorta	R26C	Covered	110.50	110.50	1 XXX	6	0	0	0	0
75625-TC	Contrast exam abdominl aorta	R26C	Covered	115.82	115.82	1 XXX	6	0	0	0	0
75630-00	X-ray aorta leg arteries	R26C	Covered	282.40	282.40	1 XXX	6	0	0	0	0
75630-26	X-ray aorta leg arteries	R26C	Covered	158.12	158.12	1 XXX	6	0	0	0	0
75630-TC	X-ray aorta leg arteries	R26C	Covered	124.28	124.28	1 XXX	6	0	0	0	0
75635-00	Ct angio abdominal arteries	R26C	Covered	797.40	797.40	1 XXX	4	0	0	0	0
75635-26	Ct angio abdominal arteries	R26C	Covered	197.58	197.58	1 XXX	4	0	0	0	0
75635-TC	Ct angio abdominal arteries	R26C	Covered	599.82	599.82	1 XXX	4	0	0	0	0
75705-00	Artery x-rays spine	R26C	Covered	449.06	449.06	1 XXX	6	0	0	0	0
75705-26	Artery x-rays spine	R26C	Covered	187.61	187.61	1 XXX	6	0	0	0	0
75705-TC	Artery x-rays spine	R26C	Covered	261.45	261.45	1 XXX	6	0	0	0	0
75710-00	Artery x-rays arm/leg	R26C	Covered	269.24	269.24	1 XXX	6	0	0	0	0
75710-26	Artery x-rays arm/leg	R26C	Covered	136.55	136.55	1 XXX	6	0	0	0	0
75710-TC	Artery x-rays arm/leg	R26C	Covered	132.69	132.69	1 XXX	6	0	0	0	0
75716-00	Artery x-rays arms/legs	R26C	Covered	294.16	294.16	1 XXX	6	2	0	0	0
75716-26	Artery x-rays arms/legs	R26C	Covered	155.65	155.65	1 XXX	6	2	0	0	0
75716-TC	Artery x-rays arms/legs	R26C	Covered	138.51	138.51	1 XXX	6	2	0	0	0
75726-00	Artery x-rays abdomen	R26C	Covered	311.03	311.03	1 XXX	6	0	0	0	0
75726-26	Artery x-rays abdomen	R26C	Covered	161.53	161.53	1 XXX	6	0	0	0	0
75726-TC	Artery x-rays abdomen	R26C	Covered	149.51	149.51	1 XXX	6	0	0	0	0
75731-00	Artery x-rays adrenal gland	R26C	Covered	287.68	287.68	1 XXX	6	0	0	0	0
75731-26	Artery x-rays adrenal gland	R26C	Covered	95.44	95.44	1 XXX	6	0	0	0	0
75731-TC	Artery x-rays adrenal gland	R26C	Covered	192.24	192.24	1 XXX	6	0	0	0	0
75733-00	Artery x-rays adrenals	R26C	Covered	324.49	324.49	1 XXX	6	2	0	0	0
75733-26	Artery x-rays adrenals	R26C	Covered	108.92	108.92	1 XXX	6	2	0	0	0
75733-TC	Artery x-rays adrenals	R26C	Covered	215.57	215.57	1 XXX	6	2	0	0	0
75736-00	Artery x-rays pelvis	R26C	Covered	266.48	266.48	1 XXX	6	0	0	0	0
75736-26	Artery x-rays pelvis	R26C	Covered	89.12	89.12	1 XXX	6	0	0	0	0
75736-TC	Artery x-rays pelvis	R26C	Covered	177.36	177.36	1 XXX	6	0	0	0	0

75741-00	Artery x-rays lung	R26C	Covered	239.90	239.90	1 XXX	6	0	0	0	0
75741-26	Artery x-rays lung	R26C	Covered	103.98	103.98	1 XXX	6	0	0	0	0
75741-TC	Artery x-rays lung	R26C	Covered	135.92	135.92	1 XXX	6	0	0	0	0
75743-00	Artery x-rays lungs	R26C	Covered	271.02	271.02	1 XXX	6	2	0	0	0
75743-26	Artery x-rays lungs	R26C	Covered	132.51	132.51	1 XXX	6	2	0	0	0
75743-TC	Artery x-rays lungs	R26C	Covered	138.51	138.51	1 XXX	6	2	0	0	0
75746-00	Artery x-rays lung	R26C	Covered	251.46	251.46	1 XXX	6	0	0	0	0
75746-26	Artery x-rays lung	R26C	Covered	91.61	91.61	1 XXX	6	0	0	0	0
75746-TC	Artery x-rays lung	R26C	Covered	159.85	159.85	1 XXX	6	0	0	0	0
75756-00	Artery x-rays chest	R26C	Covered	307.32	307.32	1 XXX	6	0	0	0	0
75756-26	Artery x-rays chest	R26C	Covered	93.09	93.09	1 XXX	6	0	0	0	0
75756-TC	Artery x-rays chest	R26C	Covered	214.23	214.23	1 XXX	6	0	0	0	0
75774-00	Artery x-ray each vessel	R26C	Covered	177.59	177.59	1 ZZZ	0	0	0	0	0
75774-26	Artery x-ray each vessel	R26C	Covered	79.23	79.23	1 ZZZ	0	0	0	0	0
75774-TC	Artery x-ray each vessel	R26C	Covered	98.36	98.36	1 ZZZ	0	0	0	0	0
75801-00	Lymph vessel x-ray arm/leg	RMCD	Covered	51.61	51.61	1 XXX	0	0	0	0	0
75801-26	Lymph vessel x-ray arm/leg	RMCD	Covered	70.54	70.54	1 XXX	0	0	0	0	0
75801-TC	Lymph vessel x-ray arm/leg	RMCD	Covered	27.97	27.97	1 XXX	0	0	0	0	0
75803-00	Lymph vessel x-ray arms/legs	RMCD	Covered	66.10	66.10	1 XXX	0	2	0	0	0
75803-26	Lymph vessel x-ray arms/legs	RMCD	Covered	98.56	98.56	1 XXX	0	2	0	0	0
75803-TC	Lymph vessel x-ray arms/legs	RMCD	Covered	34.04	34.04	1 XXX	0	2	0	0	0
75805-00	Lymph vessel x-ray trunk	RMCD	Covered	50.15	50.15	1 XXX	0	0	0	0	0
75805-26	Lymph vessel x-ray trunk	RMCD	Covered	68.18	68.18	1 XXX	0	0	0	0	0
75805-TC	Lymph vessel x-ray trunk	RMCD	Covered	27.97	27.97	1 XXX	0	0	0	0	0
66999-00	Unlisted px ant segment eye	NBYR	Covered	By Report	By Report	0 YYY	2	1	0	1	1
67299-00	Unlisted px posterior segmnt	NBYR	Covered	By Report	By Report	0 YYY	2	1	0	1	1
67399-00	Unlisted px extraocular musc	NBYR	Covered	By Report	By Report	0 YYY	2	1	2	1	1
75809-00	Nonvascular shunt x-ray	R26C	Covered	154.23	154.23	1 XXX	6	0	0	0	0
75809-26	Nonvascular shunt x-ray	R26C	Covered	39.70	39.70	1 XXX	6	0	0	0	0
75809-TC	Nonvascular shunt x-ray	R26C	Covered	114.53	114.53	1 XXX	6	0	0	0	0
75810-00	Vein x-ray spleen/liver	RMCD	Covered	69.89	69.89	1 XXX	0	0	0	0	0
75810-26	Vein x-ray spleen/liver	RMCD	Covered	81.40	81.40	1 XXX	0	0	0	0	0
75810-TC	Vein x-ray spleen/liver	RMCD	Covered	42.76	42.76	1 XXX	0	0	0	0	0
75820-00	Vein x-ray arm/leg	R26C	Covered	199.42	199.42	1 XXX	6	0	0	0	0
75820-26	Vein x-ray arm/leg	R26C	Covered	84.89	84.89	1 XXX	6	0	0	0	0
75820-TC	Vein x-ray arm/leg	R26C	Covered	114.53	114.53	1 XXX	6	0	0	0	0
75822-00	Vein x-ray arms/legs	R26C	Covered	244.55	244.55	1 XXX	6	2	0	0	0
75822-26	Vein x-ray arms/legs	R26C	Covered	117.73	117.73	1 XXX	6	2	0	0	0
75822-TC	Vein x-ray arms/legs	R26C	Covered	126.82	126.82	1 XXX	6	2	0	0	0
75825-00	Vein x-ray trunk	R26C	Covered	207.76	207.76	1 XXX	6	0	0	0	0
75825-26	Vein x-ray trunk	R26C	Covered	88.71	88.71	1 XXX	6	0	0	0	0
75825-TC	Vein x-ray trunk	R26C	Covered	119.06	119.06	1 XXX	6	0	0	0	0
75827-00	Vein x-ray chest	R26C	Covered	217.42	217.42	1 XXX	6	0	0	0	0
75827-26	Vein x-ray chest	R26C	Covered	89.95	89.95	1 XXX	6	0	0	0	0
75827-TC	Vein x-ray chest	R26C	Covered	127.47	127.47	1 XXX	6	0	0	0	0
75831-00	Vein x-ray kidney	R26C	Covered	220.51	220.51	1 XXX	6	0	0	0	0
75831-26	Vein x-ray kidney	R26C	Covered	88.47	88.47	1 XXX	6	0	0	0	0
75831-TC	Vein x-ray kidney	R26C	Covered	132.04	132.04	1 XXX	6	0	0	0	0
75833-00	Vein x-ray kidneys	R26C	Covered	268.77	268.77	1 XXX	6	2	0	0	0
75833-26	Vein x-ray kidneys	R26C	Covered	116.04	116.04	1 XXX	6	2	0	0	0
75833-TC	Vein x-ray kidneys	R26C	Covered	152.74	152.74	1 XXX	6	2	0	0	0
75840-00	Vein x-ray adrenal gland	R26C	Covered	239.77	239.77	1 XXX	6	0	0	0	0
75840-26	Vein x-ray adrenal gland	R26C	Covered	95.44	95.44	1 XXX	6	0	0	0	0
75840-TC	Vein x-ray adrenal gland	R26C	Covered	144.33	144.33	1 XXX	6	0	0	0	0

75842-00	Vein x-ray adrenal glands	R26C	Covered	296.07	296.07	1 XXX	6	2	0	0	0
75842-26	Vein x-ray adrenal glands	R26C	Covered	125.22	125.22	1 XXX	6	2	0	0	0
75842-TC	Vein x-ray adrenal glands	R26C	Covered	170.85	170.85	1 XXX	6	2	0	0	0
75860-00	Vein x-ray neck	R26C	Covered	232.15	232.15	1 XXX	6	0	0	0	0
75860-26	Vein x-ray neck	R26C	Covered	91.70	91.70	1 XXX	6	0	0	0	0
75860-TC	Vein x-ray neck	R26C	Covered	140.45	140.45	1 XXX	6	0	0	0	0
75870-00	Vein x-ray skull	R26C	Covered	285.57	285.57	1 XXX	6	0	0	0	0
75870-26	Vein x-ray skull	R26C	Covered	96.61	96.61	1 XXX	6	0	0	0	0
75870-TC	Vein x-ray skull	R26C	Covered	188.96	188.96	1 XXX	6	0	0	0	0
75872-00	Vein x-ray skull epidural	R26C	Covered	239.77	239.77	1 XXX	6	0	0	0	0
75872-26	Vein x-ray skull epidural	R26C	Covered	95.44	95.44	1 XXX	6	0	0	0	0
75872-TC	Vein x-ray skull epidural	R26C	Covered	144.33	144.33	1 XXX	6	0	0	0	0
75880-00	Vein x-ray eye socket	R26C	Covered	202.59	202.59	1 XXX	6	0	0	0	0
75880-26	Vein x-ray eye socket	R26C	Covered	58.90	58.90	1 XXX	6	0	0	0	0
75880-TC	Vein x-ray eye socket	R26C	Covered	143.68	143.68	1 XXX	6	0	0	0	0
75885-00	Vein x-ray liver w/hemodynam	R26C	Covered	251.73	251.73	1 XXX	6	0	0	0	0
75885-26	Vein x-ray liver w/hemodynam	R26C	Covered	112.57	112.57	1 XXX	6	0	0	0	0
75885-TC	Vein x-ray liver w/hemodynam	R26C	Covered	139.16	139.16	1 XXX	6	0	0	0	0
75887-00	Vein x-ray liver w/o hemodyn	R26C	Covered	253.67	253.67	1 XXX	6	0	0	0	0
75887-26	Vein x-ray liver w/o hemodyn	R26C	Covered	113.22	113.22	1 XXX	6	0	0	0	0
75887-TC	Vein x-ray liver w/o hemodyn	R26C	Covered	140.45	140.45	1 XXX	6	0	0	0	0
75889-00	Vein x-ray liver w/hemodynam	R26C	Covered	228.87	228.87	1 XXX	6	0	0	0	0
75889-26	Vein x-ray liver w/hemodynam	R26C	Covered	89.72	89.72	1 XXX	6	0	0	0	0
75889-TC	Vein x-ray liver w/hemodynam	R26C	Covered	139.16	139.16	1 XXX	6	0	0	0	0
75891-00	Vein x-ray liver	R26C	Covered	230.77	230.77	1 XXX	6	0	0	0	0
75891-26	Vein x-ray liver	R26C	Covered	90.32	90.32	1 XXX	6	0	0	0	0
75891-TC	Vein x-ray liver	R26C	Covered	140.45	140.45	1 XXX	6	0	0	0	0
75893-00	Venous sampling by catheter	R26C	Covered	197.44	197.44	1 XXX	6	0	0	0	0
75893-26	Venous sampling by catheter	R26C	Covered	43.41	43.41	1 XXX	6	0	0	0	0
75893-TC	Venous sampling by catheter	R26C	Covered	154.03	154.03	1 XXX	6	0	0	0	0
75894-00	X-rays transcath therapy	RMCD	Covered	112.63	112.63	1 XXX	0	0	0	0	0
75894-26	X-rays transcath therapy	RMCD	Covered	115.17	115.17	1 XXX	0	0	0	0	0
75894-TC	X-rays transcath therapy	RMCD	Covered	72.75	72.75	1 XXX	0	0	0	0	0
75898-00	Follow-up angiography	RMCD	Covered	90.59	90.59	1 XXX	0	0	0	0	0
75898-26	Follow-up angiography	RMCD	Covered	145.97	145.97	1 XXX	0	0	0	0	0
75898-TC	Follow-up angiography	RMCD	Covered	39.58	39.58	1 XXX	0	0	0	0	0
75901-00	Remove cva device obstruct	R26C	Covered	436.21	436.21	1 XXX	0	0	0	0	0
75901-26	Remove cva device obstruct	R26C	Covered	38.98	38.98	1 XXX	0	0	0	0	0
75901-TC	Remove cva device obstruct	R26C	Covered	397.23	397.23	1 XXX	0	0	0	0	0
75902-00	Remove cva lumen obstruct	R26C	Covered	166.19	166.19	1 XXX	0	0	0	0	0
75902-26	Remove cva lumen obstruct	R26C	Covered	30.96	30.96	1 XXX	0	0	0	0	0
75902-TC	Remove cva lumen obstruct	R26C	Covered	135.23	135.23	1 XXX	0	0	0	0	0
67599-00	Unlisted procedure orbit	NBYR	Covered	By Report	By Report	0 YYY	2	1	2	1	1
67999-00	Unlisted procedure eyelids	NBYR	Covered	By Report	By Report	0 YYY	2	1	0	1	1
68399-00	Unlisted px conjunctiva	NBYR	Covered	By Report	By Report	0 YYY	2	1	0	1	1
68899-00	Unlisted px lacrimal system	NBYR	Covered	By Report	By Report	0 YYY	2	1	0	1	1
69399-00	Unlisted px external ear	NBYR	Covered	By Report	By Report	0 YYY	2	0	0	1	1
69710-00	Implant/replace hearing aid	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
69799-00	Unlisted px middle ear	NBYR	Covered	By Report	By Report	0 YYY	2	1	0	1	1
69949-00	Unlisted px inner ear	NBYR	Covered	By Report	By Report	0 YYY	2	1	0	1	1
69979-00	Unlisted px temporal bone	NBYR	Covered	By Report	By Report	0 YYY	2	1	0	1	1
70557-00	Mri brain w/o dye	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
70557-TC	Mri brain w/o dye	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
70558-00	Mri brain w/dye	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0

75970-00	Vascular biopsy	RMCD	Covered	58.05	58.05	1 XXX	0	0	0	0	0
75970-26	Vascular biopsy	RMCD	Covered	64.96	64.96	1 XXX	0	0	0	0	0
75970-TC	Vascular biopsy	RMCD	Covered	36.70	36.70	1 XXX	0	0	0	0	0
75984-00	Xray control catheter change	R26C	Covered	177.55	177.55	1 XXX	0	0	0	0	0
75984-26	Xray control catheter change	R26C	Covered	65.61	65.61	1 XXX	0	0	0	0	0
75984-TC	Xray control catheter change	R26C	Covered	111.94	111.94	1 XXX	0	0	0	0	0
75989-00	Abscess drainage under x-ray	R26C	Covered	205.99	205.99	1 XXX	0	0	0	0	0
75989-26	Abscess drainage under x-ray	R26C	Covered	95.99	95.99	1 XXX	0	0	0	0	0
75989-TC	Abscess drainage under x-ray	R26C	Covered	110.00	110.00	1 XXX	0	0	0	0	0
76000-00	Fluoroscopy <1 hr phys/qhp	R26C	Covered	79.22	79.22	1 XXX	0	0	0	0	0
76000-26	Fluoroscopy <1 hr phys/qhp	R26C	Covered	25.49	25.49	1 XXX	0	0	0	0	0
76000-TC	Fluoroscopy <1 hr phys/qhp	R26C	Covered	53.73	53.73	1 XXX	0	0	0	0	0
76010-00	X-ray nose to rectum	R26C	Covered	55.02	55.02	1 XXX	0	0	0	0	0
76010-26	X-ray nose to rectum	R26C	Covered	14.87	14.87	1 XXX	0	0	0	0	0
76010-TC	X-ray nose to rectum	R26C	Covered	40.15	40.15	1 XXX	0	0	0	0	0
76080-00	X-ray exam of fistula	R26C	Covered	110.67	110.67	1 XXX	0	0	0	0	0
76080-26	X-ray exam of fistula	R26C	Covered	42.71	42.71	1 XXX	0	0	0	0	0
76080-TC	X-ray exam of fistula	R26C	Covered	67.96	67.96	1 XXX	0	0	0	0	0
76098-00	X-ray exam surgical specimen	R26C	Covered	79.78	79.78	1 XXX	0	0	0	0	0
76098-26	X-ray exam surgical specimen	R26C	Covered	26.70	26.70	1 XXX	0	0	0	0	0
76098-TC	X-ray exam surgical specimen	R26C	Covered	53.08	53.08	1 XXX	0	0	0	0	0
76100-00	X-ray exam of body section	R26C	Covered	168.68	168.68	1 XXX	0	0	0	0	0
76100-26	X-ray exam of body section	R26C	Covered	48.98	48.98	1 XXX	0	0	0	0	0
76100-TC	X-ray exam of body section	R26C	Covered	119.71	119.71	1 XXX	0	0	0	0	0
76120-00	Cine/video x-rays	R26C	Covered	225.09	225.09	1 XXX	0	0	0	0	0
76120-26	Cine/video x-rays	R26C	Covered	33.59	33.59	1 XXX	0	0	0	0	0
76120-TC	Cine/video x-rays	R26C	Covered	191.50	191.50	1 XXX	0	0	0	0	0
76125-00	Cine/video x-rays add-on	RMCD	Covered	14.62	14.62	1 ZZZ	0	0	0	0	0
76125-26	Cine/video x-rays add-on	RMCD	Covered	22.97	22.97	1 ZZZ	0	0	0	0	0
76125-TC	Cine/video x-rays add-on	RMCD	Covered	7.41	7.41	1 ZZZ	0	0	0	0	0
0174U-00	Mass spectrometry testing for 30 protein targets in tissue specimen to predict Gene sequence analysis panel of 17 genes associated with hereditary breast	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0102U-00	with hereditary breast	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
76376-00	3d render w/intrp postproces	R26C	Covered	46.53	46.53	1 XXX	0	0	0	0	0
76376-26	3d render w/intrp postproces	R26C	Covered	16.73	16.73	1 XXX	0	0	0	0	0
76376-TC	3d render w/intrp postproces	R26C	Covered	29.80	29.80	1 XXX	0	0	0	0	0
76377-00	3d render w/intrp postproces	R26C	Covered	144.07	144.07	1 XXX	0	0	0	0	0
76377-26	3d render w/intrp postproces	R26C	Covered	66.36	66.36	1 XXX	0	0	0	0	0
76377-TC	3d render w/intrp postproces	R26C	Covered	77.71	77.71	1 XXX	0	0	0	0	0
76380-00	Cat scan follow-up study	R26C	Covered	251.99	251.99	1 XXX	0	0	0	0	0
76380-26	Cat scan follow-up study	R26C	Covered	79.25	79.25	1 XXX	0	0	0	0	0
76380-TC	Cat scan follow-up study	R26C	Covered	172.74	172.74	1 XXX	0	0	0	0	0
76390-00	Mr spectroscopy	RMCD	Covered	243.32	243.32	1 XXX	0	0	0	0	0
76390-26	Mr spectroscopy	RMCD	Covered	41.52	41.52	1 XXX	0	0	0	0	0
76390-TC	Mr spectroscopy	RMCD	Covered	201.80	201.80	1 XXX	0	0	0	0	0
0129U-00	Gene analysis of genes associated with hereditary breast cancer and related	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
74263-00	Ct colonography screening	NCOV	Not Covered	Code not covered	Code not covered	1 XXX	9	9	9	9	9
0245U-00	Gene analysis of 10 genes and 37 RNA fusions and expression of 4 mRNA markers,	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
70558-TC	Mri brain w/dye	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
70559-00	Mri brain w/o & w/dye	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
70559-TC	Mri brain w/o & w/dye	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0

74235-00	Remove esophagus obstruction	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
74235-TC	Remove esophagus obstruction	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
74300-00	X-ray bile ducts/pancreas	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
74300-TC	X-ray bile ducts/pancreas	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
74301-00	X-rays at surgery add-on	NBYR	Covered	By Report	By Report	1 ZZZ	0	0	0	0	0
74301-TC	X-rays at surgery add-on	NBYR	Covered	By Report	By Report	1 ZZZ	0	0	0	0	0
74329-00	X-ray for pancreas endoscopy	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
74329-TC	X-ray for pancreas endoscopy	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
74363-00	X-ray bile duct dilation	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
76506-00	Echo exam of head	R26C	Covered		212.61 212.61	1 XXX	0	0	0	0	0
76506-26	Echo exam of head	R26C	Covered		53.45 53.45	1 XXX	0	0	0	0	0
76506-TC	Echo exam of head	R26C	Covered		159.16 159.16	1 XXX	0	0	0	0	0
76510-00	Oph us dx b-scan&quan a-scan	R26C	Covered		129.31 129.31	1 XXX	7	3	0	0	0
76510-26	Oph us dx b-scan&quan a-scan	R26C	Covered		71.05 71.05	1 XXX	7	3	0	0	0
76510-TC	Oph us dx b-scan&quan a-scan	R26C	Covered		58.26 58.26	1 XXX	7	3	0	0	0
76511-00	Oph us dx quan a-scan only	R26C	Covered		106.91 106.91	1 XXX	7	3	0	0	0
76511-26	Oph us dx quan a-scan only	R26C	Covered		64.82 64.82	1 XXX	7	3	0	0	0
76511-TC	Oph us dx quan a-scan only	R26C	Covered		42.09 42.09	1 XXX	7	3	0	0	0
76512-00	Oph us dx b-scan	R26C	Covered		89.76 89.76	1 XXX	7	3	0	0	0
76512-26	Oph us dx b-scan	R26C	Covered		55.43 55.43	1 XXX	7	3	0	0	0
76512-TC	Oph us dx b-scan	R26C	Covered		34.33 34.33	1 XXX	7	3	0	0	0
76513-00	Oph us dx ant sgm us uni/bi	R26C	Covered		141.99 141.99	1 XXX	7	3	0	0	0
76513-26	Oph us dx ant sgm us uni/bi	R26C	Covered		58.51 58.51	1 XXX	7	3	0	0	0
76513-TC	Oph us dx ant sgm us uni/bi	R26C	Covered		83.48 83.48	1 XXX	7	3	0	0	0
76514-00	Echo exam of eye thickness	R26C	Covered		20.25 20.25	1 XXX	7	2	0	0	0
76514-26	Echo exam of eye thickness	R26C	Covered		13.73 13.73	1 XXX	7	2	0	0	0
76514-TC	Echo exam of eye thickness	R26C	Covered		6.52 6.52	1 XXX	7	2	0	0	0
76516-00	Echo exam of eye	R26C	Covered		87.79 87.79	1 XXX	7	2	0	0	0
76516-26	Echo exam of eye	R26C	Covered		40.53 40.53	1 XXX	7	2	0	0	0
76516-TC	Echo exam of eye	R26C	Covered		47.26 47.26	1 XXX	7	2	0	0	0
76519-00	Echo exam of eye	R26C	Covered		128.64 128.64	1 XXX	7	2	0	0	0
76519-26	Echo exam of eye	R26C	Covered		54.86 54.86	1 XXX	7	3	0	0	0
76519-TC	Echo exam of eye	R26C	Covered		73.78 73.78	1 XXX	7	2	0	0	0
76529-00	Echo exam of eye	R26C	Covered		162.81 162.81	1 XXX	0	3	0	0	0
76529-26	Echo exam of eye	R26C	Covered		58.62 58.62	1 XXX	0	3	0	0	0
76529-TC	Echo exam of eye	R26C	Covered		104.18 104.18	1 XXX	0	3	0	0	0
76536-00	Us exam of head and neck	R26C	Covered		209.51 209.51	1 XXX	0	0	0	0	0
76536-26	Us exam of head and neck	R26C	Covered		47.11 47.11	1 XXX	0	0	0	0	0
76536-TC	Us exam of head and neck	R26C	Covered		162.39 162.39	1 XXX	0	0	0	0	0
76604-00	Us exam chest	R26C	Covered		105.90 105.90	1 XXX	4	0	0	0	0
76604-26	Us exam chest	R26C	Covered		47.64 47.64	1 XXX	4	0	0	0	0
76604-TC	Us exam chest	R26C	Covered		58.26 58.26	1 XXX	4	0	0	0	0
76641-00	Ultrasound breast complete	R26C	Covered		193.37 193.37	1 XXX	0	1	0	0	0
76641-26	Ultrasound breast complete	R26C	Covered		61.37 61.37	1 XXX	0	1	0	0	0
76641-TC	Ultrasound breast complete	R26C	Covered		131.99 131.99	1 XXX	0	1	0	0	0
76642-00	Ultrasound breast limited	R26C	Covered		159.28 159.28	1 XXX	0	1	0	0	0
76642-26	Ultrasound breast limited	R26C	Covered		57.04 57.04	1 XXX	0	1	0	0	0
76642-TC	Ultrasound breast limited	R26C	Covered		102.24 102.24	1 XXX	0	1	0	0	0
76700-00	Us exam abdom complete	R26C	Covered		218.98 218.98	1 XXX	4	0	0	0	0
76700-26	Us exam abdom complete	R26C	Covered		67.53 67.53	1 XXX	4	0	0	0	0
76700-TC	Us exam abdom complete	R26C	Covered		151.45 151.45	1 XXX	4	0	0	0	0
76705-00	Echo exam of abdomen	R26C	Covered		164.12 164.12	1 XXX	4	0	0	0	0
76705-26	Echo exam of abdomen	R26C	Covered		48.94 48.94	1 XXX	4	0	0	0	0
76705-TC	Echo exam of abdomen	R26C	Covered		115.18 115.18	1 XXX	4	0	0	0	0

76706-00	Us abdl aorta screen aaa	R26C	Covered	202.43	202.43	1 XXX	0	0	0	0	0
76706-26	Us abdl aorta screen aaa	R26C	Covered	45.86	45.86	1 XXX	0	0	0	0	0
76706-TC	Us abdl aorta screen aaa	R26C	Covered	156.57	156.57	1 XXX	0	0	0	0	0
76770-00	Us exam abdo back wall comp	R26C	Covered	204.33	204.33	1 XXX	4	0	0	0	0
76770-26	Us exam abdo back wall comp	R26C	Covered	61.98	61.98	1 XXX	4	0	0	0	0
76770-TC	Us exam abdo back wall comp	R26C	Covered	142.34	142.34	1 XXX	4	0	0	0	0
76775-00	Us exam abdo back wall lim	R26C	Covered	111.12	111.12	1 XXX	4	0	0	0	0
76775-26	Us exam abdo back wall lim	R26C	Covered	48.33	48.33	1 XXX	4	0	0	0	0
76775-TC	Us exam abdo back wall lim	R26C	Covered	62.79	62.79	1 XXX	4	0	0	0	0
76776-00	Us exam k transpl w/doppler	R26C	Covered	279.32	279.32	1 XXX	4	0	0	0	0
76776-26	Us exam k transpl w/doppler	R26C	Covered	63.20	63.20	1 XXX	4	0	0	0	0
76776-TC	Us exam k transpl w/doppler	R26C	Covered	216.13	216.13	1 XXX	4	0	0	0	0
76800-00	Us exam spinal canal	R26C	Covered	319.29	319.29	1 XXX	0	0	0	0	0
76800-26	Us exam spinal canal	R26C	Covered	103.21	103.21	1 XXX	0	0	0	0	0
76800-TC	Us exam spinal canal	R26C	Covered	216.08	216.08	1 XXX	0	0	0	0	0
76801-00	Ob us < 14 wks single fetus	R26C	Covered	220.81	220.81	1 XXX	0	0	0	0	0
76801-26	Ob us < 14 wks single fetus	R26C	Covered	83.65	83.65	1 XXX	0	0	0	0	0
76801-TC	Ob us < 14 wks single fetus	R26C	Covered	137.17	137.17	1 XXX	0	0	0	0	0
76802-00	Ob us < 14 wks addl fetus	R26C	Covered	111.39	111.39	1 ZZZ	0	0	0	0	0
76802-26	Ob us < 14 wks addl fetus	R26C	Covered	70.64	70.64	1 ZZZ	0	0	0	0	0
76802-TC	Ob us < 14 wks addl fetus	R26C	Covered	40.75	40.75	1 ZZZ	0	0	0	0	0
76805-00	Ob us >= 14 wks snl fetus	R26C	Covered	255.79	255.79	1 XXX	0	0	0	0	0
76805-26	Ob us >= 14 wks snl fetus	R26C	Covered	84.29	84.29	1 XXX	0	0	0	0	0
76805-TC	Ob us >= 14 wks snl fetus	R26C	Covered	171.50	171.50	1 XXX	0	0	0	0	0
76810-00	Ob us >= 14 wks addl fetus	R26C	Covered	163.84	163.84	1 ZZZ	0	0	0	0	0
76810-26	Ob us >= 14 wks addl fetus	R26C	Covered	84.24	84.24	1 ZZZ	0	0	0	0	0
76810-TC	Ob us >= 14 wks addl fetus	R26C	Covered	79.60	79.60	1 ZZZ	0	0	0	0	0
76811-00	Ob us detailed snl fetus	R26C	Covered	332.49	332.49	1 XXX	0	0	0	0	0
76811-26	Ob us detailed snl fetus	R26C	Covered	162.89	162.89	1 XXX	0	0	0	0	0
76811-TC	Ob us detailed snl fetus	R26C	Covered	169.60	169.60	1 XXX	0	0	0	0	0
76812-00	Ob us detailed addl fetus	R26C	Covered	361.37	361.37	1 ZZZ	0	0	0	0	0
76812-26	Ob us detailed addl fetus	R26C	Covered	153.01	153.01	1 ZZZ	0	0	0	0	0
76812-TC	Ob us detailed addl fetus	R26C	Covered	208.36	208.36	1 ZZZ	0	0	0	0	0
76813-00	Ob us nuchal meas 1 gest	R26C	Covered	217.44	217.44	1 XXX	0	0	0	0	0
76813-26	Ob us nuchal meas 1 gest	R26C	Covered	100.97	100.97	1 XXX	0	0	0	0	0
76813-TC	Ob us nuchal meas 1 gest	R26C	Covered	116.47	116.47	1 XXX	0	0	0	0	0
76814-00	Ob us nuchal meas add-on	R26C	Covered	138.58	138.58	1 XXX	0	0	0	0	0
76814-26	Ob us nuchal meas add-on	R26C	Covered	84.84	84.84	1 XXX	0	0	0	0	0
76814-TC	Ob us nuchal meas add-on	R26C	Covered	53.73	53.73	1 XXX	0	0	0	0	0
76815-00	Ob us limited fetus(s)	R26C	Covered	152.24	152.24	1 XXX	0	0	0	0	0
76815-26	Ob us limited fetus(s)	R26C	Covered	54.52	54.52	1 XXX	0	0	0	0	0
76815-TC	Ob us limited fetus(s)	R26C	Covered	97.71	97.71	1 XXX	0	0	0	0	0
76816-00	Ob us follow-up per fetus	R26C	Covered	208.33	208.33	1 XXX	0	0	0	0	0
76816-26	Ob us follow-up per fetus	R26C	Covered	73.10	73.10	1 XXX	0	0	0	0	0
76816-TC	Ob us follow-up per fetus	R26C	Covered	135.23	135.23	1 XXX	0	0	0	0	0
76817-00	Transvaginal us obstetric	R26C	Covered	174.49	174.49	1 XXX	0	0	0	0	0
76817-26	Transvaginal us obstetric	R26C	Covered	63.84	63.84	1 XXX	0	0	0	0	0
76817-TC	Transvaginal us obstetric	R26C	Covered	110.65	110.65	1 XXX	0	0	0	0	0
76818-00	Fetal biophys profile w/nst	R26C	Covered	223.17	223.17	1 XXX	0	0	0	0	0
76818-26	Fetal biophys profile w/nst	R26C	Covered	90.43	90.43	1 XXX	0	0	0	0	0
76818-TC	Fetal biophys profile w/nst	R26C	Covered	132.74	132.74	1 XXX	0	0	0	0	0
76819-00	Fetal biophys profil w/o nst	R26C	Covered	160.83	160.83	1 XXX	0	0	0	0	0
76819-26	Fetal biophys profil w/o nst	R26C	Covered	65.65	65.65	1 XXX	0	0	0	0	0
76819-TC	Fetal biophys profil w/o nst	R26C	Covered	95.17	95.17	1 XXX	0	0	0	0	0

76820-00	Umbilical artery echo	R26C	Covered	83.52	83.52	1 XXX	0	0	0	0	0
76820-26	Umbilical artery echo	R26C	Covered	42.73	42.73	1 XXX	0	0	0	0	0
76820-TC	Umbilical artery echo	R26C	Covered	40.80	40.80	1 XXX	0	0	0	0	0
76821-00	Middle cerebral artery echo	R26C	Covered	168.17	168.17	1 XXX	0	0	0	0	0
76821-26	Middle cerebral artery echo	R26C	Covered	60.10	60.10	1 XXX	0	0	0	0	0
76821-TC	Middle cerebral artery echo	R26C	Covered	108.06	108.06	1 XXX	0	0	0	0	0
76825-00	Echo exam of fetal heart	R26C	Covered	497.03	497.03	1 XXX	0	0	0	0	0
76825-26	Echo exam of fetal heart	R26C	Covered	142.44	142.44	1 XXX	0	0	0	0	0
76825-TC	Echo exam of fetal heart	R26C	Covered	354.59	354.59	1 XXX	0	0	0	0	0
76826-00	Echo exam of fetal heart	R26C	Covered	298.36	298.36	1 XXX	0	0	0	0	0
76826-26	Echo exam of fetal heart	R26C	Covered	70.59	70.59	1 XXX	0	0	0	0	0
76826-TC	Echo exam of fetal heart	R26C	Covered	227.77	227.77	1 XXX	0	0	0	0	0
76827-00	Echo exam of fetal heart	R26C	Covered	131.77	131.77	1 XXX	0	0	0	0	0
76827-26	Echo exam of fetal heart	R26C	Covered	49.58	49.58	1 XXX	0	0	0	0	0
76827-TC	Echo exam of fetal heart	R26C	Covered	82.19	82.19	1 XXX	0	0	0	0	0
76828-00	Echo exam of fetal heart	R26C	Covered	91.05	91.05	1 XXX	0	0	0	0	0
76828-26	Echo exam of fetal heart	R26C	Covered	47.67	47.67	1 XXX	0	0	0	0	0
76828-TC	Echo exam of fetal heart	R26C	Covered	43.38	43.38	1 XXX	0	0	0	0	0
76830-00	Transvaginal us non-ob	R26C	Covered	225.86	225.86	1 XXX	0	0	0	0	0
76830-26	Transvaginal us non-ob	R26C	Covered	58.25	58.25	1 XXX	0	0	0	0	0
76830-TC	Transvaginal us non-ob	R26C	Covered	167.62	167.62	1 XXX	0	0	0	0	0
76831-00	Echo exam uterus	R26C	Covered	221.13	221.13	1 XXX	4	0	0	0	0
76831-26	Echo exam uterus	R26C	Covered	61.97	61.97	1 XXX	4	0	0	0	0
76831-TC	Echo exam uterus	R26C	Covered	159.16	159.16	1 XXX	4	0	0	0	0
76856-00	Us exam pelvic complete	R26C	Covered	199.30	199.30	1 XXX	4	0	0	0	0
76856-26	Us exam pelvic complete	R26C	Covered	57.60	57.60	1 XXX	4	0	0	0	0
76856-TC	Us exam pelvic complete	R26C	Covered	141.70	141.70	1 XXX	4	0	0	0	0
76857-00	Us exam pelvic limited	R26C	Covered	91.98	91.98	1 XXX	4	0	0	0	0
76857-26	Us exam pelvic limited	R26C	Covered	41.48	41.48	1 XXX	4	0	0	0	0
76857-TC	Us exam pelvic limited	R26C	Covered	50.50	50.50	1 XXX	4	0	0	0	0
76870-00	Us exam scrotum	R26C	Covered	189.15	189.15	1 XXX	4	0	0	0	0
76870-26	Us exam scrotum	R26C	Covered	53.27	53.27	1 XXX	4	0	0	0	0
76870-TC	Us exam scrotum	R26C	Covered	135.88	135.88	1 XXX	4	0	0	0	0
76872-00	Us transrectal	R26C	Covered	385.58	385.58	1 XXX	0	0	0	0	0
76872-26	Us transrectal	R26C	Covered	58.20	58.20	1 XXX	0	0	0	0	0
76872-TC	Us transrectal	R26C	Covered	327.38	327.38	1 XXX	0	0	0	0	0
76873-00	Echograp trans r pros study	R26C	Covered	330.02	330.02	1 XXX	0	0	0	0	0
76873-26	Echograp trans r pros study	R26C	Covered	136.53	136.53	1 XXX	0	0	0	0	0
76873-TC	Echograp trans r pros study	R26C	Covered	193.49	193.49	1 XXX	0	0	0	0	0
76881-00	Us compl joint r-t w/img	R26C	Covered	97.63	97.63	1 XXX	0	0	0	0	0
76881-26	Us compl joint r-t w/img	R26C	Covered	76.88	76.88	1 XXX	0	0	0	0	0
76881-TC	Us compl joint r-t w/img	R26C	Covered	20.74	20.74	1 XXX	0	0	0	0	0
76882-00	Us lmtd jt/fcl evl nvasc xtr	R26C	Covered	117.20	117.20	1 XXX	0	0	0	0	0
76882-26	Us lmtd jt/fcl evl nvasc xtr	R26C	Covered	57.65	57.65	1 XXX	0	0	0	0	0
76882-TC	Us lmtd jt/fcl evl nvasc xtr	R26C	Covered	59.55	59.55	1 XXX	0	0	0	0	0
76883-00	Us nrv&acc strux 1xtr compre	R26C	Covered	129.50	129.50	1 XXX	0	0	0	0	0
76883-26	Us nrv&acc strux 1xtr compre	R26C	Covered	102.29	102.29	1 XXX	0	0	0	0	0
76883-TC	Us nrv&acc strux 1xtr compre	R26C	Covered	27.21	27.21	1 XXX	0	0	0	0	0
76885-00	Us exam infant hips dynamic	R26C	Covered	256.76	256.76	1 XXX	0	0	0	0	0
76885-26	Us exam infant hips dynamic	R26C	Covered	61.98	61.98	1 XXX	0	0	0	0	0
76885-TC	Us exam infant hips dynamic	R26C	Covered	194.78	194.78	1 XXX	0	0	0	0	0
76886-00	Us exam infant hips static	R26C	Covered	188.58	188.58	1 XXX	0	0	0	0	0
76886-26	Us exam infant hips static	R26C	Covered	52.05	52.05	1 XXX	0	0	0	0	0
76886-TC	Us exam infant hips static	R26C	Covered	136.52	136.52	1 XXX	0	0	0	0	0

76932-00	Echo guide for heart biopsy	RMCD	Covered	38.88	38.88	1 YYY	0	0	0	0	0
76932-26	Echo guide for heart biopsy	RMCD	Covered	60.55	60.55	1 XXX	0	0	0	0	0
76932-TC	Echo guide for heart biopsy	RMCD	Covered	18.77	18.77	1 YYY	0	0	0	0	0
76936-00	Echo guide for artery repair	R26C	Covered	483.00	483.00	1 XXX	0	0	0	0	0
76936-26	Echo guide for artery repair	R26C	Covered	158.16	158.16	1 XXX	0	0	0	0	0
76936-TC	Echo guide for artery repair	R26C	Covered	324.83	324.83	1 XXX	0	0	0	0	0
76937-00	Us guide vascular access	R26C	Covered	70.81	70.81	1 ZZZ	0	0	0	0	0
76937-26	Us guide vascular access	R26C	Covered	23.55	23.55	1 ZZZ	0	0	0	0	0
76937-TC	Us guide vascular access	R26C	Covered	47.26	47.26	1 ZZZ	0	0	0	0	0
76940-00	Us guide tissue ablation	RMCD	Covered	108.52	108.52	1 YYY	0	0	0	0	0
76940-26	Us guide tissue ablation	RMCD	Covered	167.46	167.46	1 XXX	0	0	0	0	0
76940-TC	Us guide tissue ablation	RMCD	Covered	52.94	52.94	1 YYY	0	0	0	0	0
76941-00	Echo guide for transfusion	RMCD	Covered	67.38	67.38	1 XXX	0	0	0	0	0
76941-26	Echo guide for transfusion	RMCD	Covered	115.22	115.22	1 XXX	0	0	0	0	0
76941-TC	Echo guide for transfusion	RMCD	Covered	30.98	30.98	1 XXX	0	0	0	0	0
76942-00	Echo guide for biopsy	R26C	Covered	107.53	107.53	1 XXX	0	0	0	0	0
76942-26	Echo guide for biopsy	R26C	Covered	53.15	53.15	1 XXX	0	0	0	0	0
76942-TC	Echo guide for biopsy	R26C	Covered	54.38	54.38	1 XXX	0	0	0	0	0
76945-00	Echo guide villus sampling	RMCD	Covered	34.77	34.77	1 XXX	0	0	0	0	0
76945-26	Echo guide villus sampling	RMCD	Covered	57.59	57.59	1 XXX	0	0	0	0	0
76945-TC	Echo guide villus sampling	RMCD	Covered	16.75	16.75	1 XXX	0	0	0	0	0
76946-00	Echo guide for amniocentesis	R26C	Covered	62.00	62.00	1 XXX	0	0	0	0	0
76946-26	Echo guide for amniocentesis	R26C	Covered	32.85	32.85	1 XXX	0	0	0	0	0
76946-TC	Echo guide for amniocentesis	R26C	Covered	29.15	29.15	1 XXX	0	0	0	0	0
76948-00	Echo guide ova aspiration	R26C	Covered	152.71	152.71	1 XXX	0	0	0	0	0
76948-26	Echo guide ova aspiration	R26C	Covered	57.59	57.59	1 XXX	0	0	0	0	0
76948-TC	Echo guide ova aspiration	R26C	Covered	95.13	95.13	1 XXX	0	0	0	0	0
76965-00	Echo guidance radiotherapy	R26C	Covered	174.22	174.22	1 XXX	0	0	0	0	0
76965-26	Echo guidance radiotherapy	R26C	Covered	121.14	121.14	1 XXX	0	0	0	0	0
76965-TC	Echo guidance radiotherapy	R26C	Covered	53.08	53.08	1 XXX	0	0	0	0	0
76975-00	Gi endoscopic ultrasound	RMCD	Covered	44.51	44.51	1 XXX	0	0	0	0	0
76975-26	Gi endoscopic ultrasound	RMCD	Covered	72.66	72.66	1 XXX	0	0	0	0	0
76975-TC	Gi endoscopic ultrasound	RMCD	Covered	21.04	21.04	1 XXX	0	0	0	0	0
76977-00	Us bone density measure	R26C	Covered	12.84	12.84	1 XXX	0	0	0	0	0
76977-26	Us bone density measure	R26C	Covered	4.38	4.38	1 XXX	0	0	0	0	0
76977-TC	Us bone density measure	R26C	Covered	8.46	8.46	1 XXX	0	0	0	0	0
76978-00	Us trgt dyn mbubb 1st les	R26C	Covered	417.81	417.81	1 XXX	4	0	0	0	0
76978-26	Us trgt dyn mbubb 1st les	R26C	Covered	136.35	136.35	1 XXX	4	0	0	0	0
76978-TC	Us trgt dyn mbubb 1st les	R26C	Covered	281.45	281.45	1 XXX	4	0	0	0	0
76979-00	Us trgt dyn mbubb ea addl	R26C	Covered	270.52	270.52	1 ZZZ	0	0	0	0	0
76979-26	Us trgt dyn mbubb ea addl	R26C	Covered	71.26	71.26	1 ZZZ	0	0	0	0	0
76979-TC	Us trgt dyn mbubb ea addl	R26C	Covered	199.26	199.26	1 ZZZ	0	0	0	0	0
76981-00	Use parenchyma	R26C	Covered	197.75	197.75	1 XXX	4	0	0	0	0
76981-26	Use parenchyma	R26C	Covered	50.23	50.23	1 XXX	4	0	0	0	0
76981-TC	Use parenchyma	R26C	Covered	147.52	147.52	1 XXX	4	0	0	0	0
76982-00	Use 1st target lesion	R26C	Covered	176.40	176.40	1 XXX	4	0	0	0	0
76982-26	Use 1st target lesion	R26C	Covered	50.23	50.23	1 XXX	4	0	0	0	0
76982-TC	Use 1st target lesion	R26C	Covered	126.17	126.17	1 XXX	4	0	0	0	0
76983-00	Use ea addl target lesion	R26C	Covered	115.31	115.31	1 ZZZ	0	0	0	0	0
76983-26	Use ea addl target lesion	R26C	Covered	44.11	44.11	1 ZZZ	0	0	0	0	0
76983-TC	Use ea addl target lesion	R26C	Covered	71.20	71.20	1 ZZZ	0	0	0	0	0
76998-00	Us guide intraop	RMCD	Covered	68.14	68.14	1 XXX	0	0	0	0	0
76998-26	Us guide intraop	RMCD	Covered	76.11	76.11	1 XXX	0	0	0	0	0
76998-TC	Us guide intraop	RMCD	Covered	33.79	33.79	1 XXX	0	0	0	0	0

74363-TC	X-ray bile duct dilation	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
74742-00	X-ray fallopian tube	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
74742-TC	X-ray fallopian tube	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
77001-00	Fluoroguide for vein device	R26C	Covered	186.97	186.97	1 ZZZ	0	0	0	0	0
77001-26	Fluoroguide for vein device	R26C	Covered	30.40	30.40	1 ZZZ	0	0	0	0	0
77001-TC	Fluoroguide for vein device	R26C	Covered	156.57	156.57	1 ZZZ	0	0	0	0	0
77002-00	Needle localization by xray	R26C	Covered	220.58	220.58	1 ZZZ	0	0	0	0	0
77002-26	Needle localization by xray	R26C	Covered	47.19	47.19	1 ZZZ	0	0	0	0	0
77002-TC	Needle localization by xray	R26C	Covered	173.39	173.39	1 ZZZ	0	0	0	0	0
77003-00	Fluoroguide for spine inject	R26C	Covered	199.05	199.05	1 ZZZ	0	0	0	0	0
77003-26	Fluoroguide for spine inject	R26C	Covered	50.24	50.24	1 ZZZ	0	0	0	0	0
77003-TC	Fluoroguide for spine inject	R26C	Covered	148.81	148.81	1 ZZZ	0	0	0	0	0
77011-00	Ct scan for localization	R26C	Covered	419.36	419.36	1 XXX	0	0	9	0	0
77011-26	Ct scan for localization	R26C	Covered	108.20	108.20	1 XXX	0	0	9	0	0
77011-TC	Ct scan for localization	R26C	Covered	311.16	311.16	1 XXX	0	0	9	0	0
77012-00	Ct scan for needle biopsy	R26C	Covered	257.87	257.87	1 XXX	0	0	9	0	0
77012-26	Ct scan for needle biopsy	R26C	Covered	121.35	121.35	1 XXX	0	0	9	0	0
77012-TC	Ct scan for needle biopsy	R26C	Covered	136.52	136.52	1 XXX	0	0	9	0	0
77013-00	Ct guide for tissue ablation	RMCD	Covered	579.38	579.38	1 XXX	0	0	0	0	0
77013-26	Ct guide for tissue ablation	RMCD	Covered	316.78	316.78	1 XXX	0	0	0	0	0
77013-TC	Ct guide for tissue ablation	RMCD	Covered	476.49	476.49	1 XXX	0	0	0	0	0
77014-00	Ct scan for therapy guide	R26C	Covered	225.89	225.89	1 XXX	0	0	9	0	0
77014-26	Ct scan for therapy guide	R26C	Covered	80.31	80.31	1 XXX	0	0	9	0	0
77014-TC	Ct scan for therapy guide	R26C	Covered	145.58	145.58	1 XXX	0	0	9	0	0
77021-00	Mri guidance ndl plmt rs&i	R26C	Covered	814.67	814.67	1 XXX	0	0	9	0	0
77021-26	Mri guidance ndl plmt rs&i	R26C	Covered	125.73	125.73	1 XXX	0	0	9	0	0
77021-TC	Mri guidance ndl plmt rs&i	R26C	Covered	688.94	688.94	1 XXX	0	0	9	0	0
77022-00	Mri gdn parnchyma tiss abltj	RMCD	Covered	221.37	221.37	1 XXX	0	0	0	0	0
77022-26	Mri gdn parnchyma tiss abltj	RMCD	Covered	349.30	349.30	1 XXX	0	0	9	0	0
77022-TC	Mri gdn parnchyma tiss abltj	RMCD	Covered	105.40	105.40	1 XXX	0	0	0	0	0
77046-00	Mri breast c- unilateral	R26C	Covered	413.25	413.25	1 XXX	4	0	0	0	0
77046-26	Mri breast c- unilateral	R26C	Covered	121.45	121.45	1 XXX	4	0	0	0	0
77046-TC	Mri breast c- unilateral	R26C	Covered	291.80	291.80	1 XXX	4	0	0	0	0
77047-00	Mri breast c- bilateral	R26C	Covered	424.35	424.35	1 XXX	4	2	0	0	0
77047-26	Mri breast c- bilateral	R26C	Covered	133.85	133.85	1 XXX	4	2	0	0	0
77047-TC	Mri breast c- bilateral	R26C	Covered	290.51	290.51	1 XXX	4	2	0	0	0
77048-00	Mri breast c+ w/cad uni	R26C	Covered	653.50	653.50	1 XXX	4	0	0	0	0
77048-26	Mri breast c+ w/cad uni	R26C	Covered	176.02	176.02	1 XXX	4	0	0	0	0
77048-TC	Mri breast c+ w/cad uni	R26C	Covered	477.48	477.48	1 XXX	4	0	0	0	0
77049-00	Mri breast c+ w/cad bi	R26C	Covered	665.70	665.70	1 XXX	4	2	0	0	0
77049-26	Mri breast c+ w/cad bi	R26C	Covered	192.75	192.75	1 XXX	4	2	0	0	0
77049-TC	Mri breast c+ w/cad bi	R26C	Covered	472.95	472.95	1 XXX	4	2	0	0	0
77053-00	X-ray of mammary duct	R26C	Covered	101.58	101.58	1 XXX	0	0	9	0	0
77053-26	X-ray of mammary duct	R26C	Covered	30.38	30.38	1 XXX	0	0	9	0	0
77053-TC	X-ray of mammary duct	R26C	Covered	71.20	71.20	1 XXX	0	0	9	0	0
77054-00	X-ray of mammary ducts	R26C	Covered	130.98	130.98	1 XXX	0	0	9	0	0
77054-26	X-ray of mammary ducts	R26C	Covered	37.79	37.79	1 XXX	0	0	9	0	0
77054-TC	X-ray of mammary ducts	R26C	Covered	93.19	93.19	1 XXX	0	0	9	0	0
77061-00	Breast tomosynthesis uni	BSVC	Covered	Bundled	Bundled	1 XXX	0	0	9	0	0
77061-26	Breast tomosynthesis uni	BSVC	Covered	Bundled	Bundled	1 XXX	0	0	9	0	0
77061-TC	Breast tomosynthesis uni	BSVC	Covered	Bundled	Bundled	1 XXX	0	0	9	0	0
77062-00	Breast tomosynthesis bi	BSVC	Covered	Bundled	Bundled	1 XXX	0	0	9	0	0
77062-26	Breast tomosynthesis bi	BSVC	Covered	Bundled	Bundled	1 XXX	0	0	9	0	0
77062-TC	Breast tomosynthesis bi	BSVC	Covered	Bundled	Bundled	1 XXX	0	0	9	0	0

77063-00	Breast tomosynthesis bi	R26C	Covered	96.76	96.76	1 ZZZ	0	2	9	0	0
77063-26	Breast tomosynthesis bi	R26C	Covered	50.19	50.19	1 ZZZ	0	2	9	0	0
77063-TC	Breast tomosynthesis bi	R26C	Covered	46.57	46.57	1 ZZZ	0	2	9	0	0
77065-00	Dx mammo incl cad uni	R26C	Covered	237.04	237.04	1 XXX	0	0	0	0	0
77065-26	Dx mammo incl cad uni	R26C	Covered	68.18	68.18	1 XXX	0	0	0	0	0
77065-TC	Dx mammo incl cad uni	R26C	Covered	168.86	168.86	1 XXX	0	0	0	0	0
77066-00	Dx mammo incl cad bi	R26C	Covered	299.78	299.78	1 XXX	0	2	0	0	0
77066-26	Dx mammo incl cad bi	R26C	Covered	83.65	83.65	1 XXX	0	2	0	0	0
77066-TC	Dx mammo incl cad bi	R26C	Covered	216.13	216.13	1 XXX	0	2	0	0	0
77067-00	Scr mammo bi incl cad	R26C	Covered	242.41	242.41	1 XXX	0	2	0	0	0
77067-26	Scr mammo bi incl cad	R26C	Covered	63.84	63.84	1 XXX	0	2	0	0	0
77067-TC	Scr mammo bi incl cad	R26C	Covered	178.56	178.56	1 XXX	0	2	0	0	0
77071-00	X-ray stress view	R26C	Covered	100.93	100.93	2 XXX	0	2	0	0	0
77072-00	X-rays for bone age	R26C	Covered	48.51	48.51	1 XXX	0	0	0	0	0
77072-26	X-rays for bone age	R26C	Covered	16.12	16.12	1 XXX	0	0	0	0	0
77072-TC	X-rays for bone age	R26C	Covered	32.39	32.39	1 XXX	0	0	0	0	0
77073-00	X-rays bone length studies	R26C	Covered	85.15	85.15	1 XXX	0	0	0	0	0
77073-26	X-rays bone length studies	R26C	Covered	23.01	23.01	1 XXX	0	0	0	0	0
77073-TC	X-rays bone length studies	R26C	Covered	62.14	62.14	1 XXX	0	0	0	0	0
77074-00	X-rays bone survey limited	R26C	Covered	123.26	123.26	1 XXX	0	0	0	0	0
77074-26	X-rays bone survey limited	R26C	Covered	37.19	37.19	1 XXX	0	0	0	0	0
77074-TC	X-rays bone survey limited	R26C	Covered	86.07	86.07	1 XXX	0	0	0	0	0
77075-00	X-rays bone survey complete	R26C	Covered	188.25	188.25	1 XXX	0	0	0	0	0
77075-26	X-rays bone survey complete	R26C	Covered	46.51	46.51	1 XXX	0	0	0	0	0
77075-TC	X-rays bone survey complete	R26C	Covered	141.74	141.74	1 XXX	0	0	0	0	0
77076-00	X-rays bone survey infant	R26C	Covered	201.94	201.94	1 XXX	0	0	0	0	0
77076-26	X-rays bone survey infant	R26C	Covered	58.90	58.90	1 XXX	0	0	0	0	0
77076-TC	X-rays bone survey infant	R26C	Covered	143.04	143.04	1 XXX	0	0	0	0	0
77077-00	Joint survey single view	R26C	Covered	88.11	88.11	1 XXX	0	0	0	0	0
77077-26	Joint survey single view	R26C	Covered	29.21	29.21	1 XXX	0	0	0	0	0
77077-TC	Joint survey single view	R26C	Covered	58.91	58.91	1 XXX	0	0	0	0	0
77078-00	Ct bone density axial	R26C	Covered	198.33	198.33	1 XXX	0	0	0	0	0
77078-26	Ct bone density axial	R26C	Covered	21.06	21.06	1 XXX	0	0	0	0	0
77078-TC	Ct bone density axial	R26C	Covered	177.27	177.27	1 XXX	0	0	0	0	0
77080-00	Dxa bone density axial	R26C	Covered	73.70	73.70	1 XXX	0	0	0	0	0
77080-26	Dxa bone density axial	R26C	Covered	16.73	16.73	1 XXX	0	0	0	0	0
77080-TC	Dxa bone density axial	R26C	Covered	56.97	56.97	1 XXX	0	0	0	0	0
77081-00	Dxa bone density/peripheral	R26C	Covered	59.47	59.47	1 XXX	0	0	0	0	0
77081-26	Dxa bone density/peripheral	R26C	Covered	16.73	16.73	1 XXX	0	0	0	0	0
77081-TC	Dxa bone density/peripheral	R26C	Covered	42.74	42.74	1 XXX	0	0	0	0	0
77084-00	Magnetic image bone marrow	R26C	Covered	619.73	619.73	1 XXX	0	0	0	0	0
77084-26	Magnetic image bone marrow	R26C	Covered	134.49	134.49	1 XXX	0	0	0	0	0
77084-TC	Magnetic image bone marrow	R26C	Covered	485.24	485.24	1 XXX	0	0	0	0	0
77085-00	Dxa bone density study	R26C	Covered	100.52	100.52	1 XXX	0	0	0	0	0
77085-26	Dxa bone density study	R26C	Covered	25.40	25.40	1 XXX	0	0	0	0	0
77085-TC	Dxa bone density study	R26C	Covered	75.12	75.12	1 XXX	0	0	0	0	0
77086-00	Fracture assessment via dxa	R26C	Covered	63.46	63.46	1 XXX	0	0	0	0	0
77086-26	Fracture assessment via dxa	R26C	Covered	14.26	14.26	1 XXX	0	0	0	0	0
77086-TC	Fracture assessment via dxa	R26C	Covered	49.20	49.20	1 XXX	0	0	0	0	0
77089-00	Tbs dxa cal w/i&r fx risk	R26C	Covered	75.68	75.68	4 XXX	0	0	0	0	0
77090-00	Tbs techl prep&transmis data	R26C	Covered	4.57	4.57	3 XXX	0	0	0	0	0
77091-00	Tbs techl calculation only	R26C	Covered	53.73	53.73	3 XXX	0	0	0	0	0
77092-00	Tbs i&r fx rsk qhp	R26C	Covered	17.38	17.38	2 XXX	0	0	0	0	0
77261-00	Radiation therapy planning	R26C	Covered	126.61	126.61	2 XXX	0	0	0	0	0

77262-00	Radiation therapy planning	R26C	Covered	193.32	193.32	2 XXX	0	0	0	0	0
77263-00	Radiation therapy planning	R26C	Covered	297.41	297.41	2 XXX	0	0	0	0	0
77280-00	Set radiation therapy field	R26C	Covered	517.49	517.49	1 XXX	0	0	0	0	0
77280-26	Set radiation therapy field	R26C	Covered	67.91	67.91	1 XXX	0	0	0	0	0
77280-TC	Set radiation therapy field	R26C	Covered	449.57	449.57	1 XXX	0	0	0	0	0
77285-00	Set radiation therapy field	R26C	Covered	848.02	848.02	1 XXX	0	0	0	0	0
77285-26	Set radiation therapy field	R26C	Covered	102.82	102.82	1 XXX	0	0	0	0	0
77285-TC	Set radiation therapy field	R26C	Covered	745.21	745.21	1 XXX	0	0	0	0	0
77290-00	Set radiation therapy field	R26C	Covered	856.57	856.57	1 XXX	0	0	0	0	0
77290-26	Set radiation therapy field	R26C	Covered	148.18	148.18	1 XXX	0	0	0	0	0
77290-TC	Set radiation therapy field	R26C	Covered	708.39	708.39	1 XXX	0	0	0	0	0
77293-00	Respirator motion mgmt simul	R26C	Covered	777.93	777.93	1 ZZZ	0	0	0	0	0
77293-26	Respirator motion mgmt simul	R26C	Covered	189.85	189.85	1 ZZZ	0	0	0	0	0
77293-TC	Respirator motion mgmt simul	R26C	Covered	588.08	588.08	1 ZZZ	0	0	0	0	0
77295-00	3-d radiotherapy plan	R26C	Covered	900.96	900.96	1 XXX	0	0	0	0	0
77295-26	3-d radiotherapy plan	R26C	Covered	405.83	405.83	1 XXX	0	0	0	0	0
77295-TC	3-d radiotherapy plan	R26C	Covered	495.13	495.13	1 XXX	0	0	0	0	0
75807-00	Lymph vessel x-ray trunk	NBYR	Covered	By Report	By Report	1 XXX	0	2	0	0	0
75807-TC	Lymph vessel x-ray trunk	NBYR	Covered	By Report	By Report	1 XXX	0	2	0	0	0
75956-00	Xray endovasc thor ao repr	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
77300-00	Radiation therapy dose plan	R26C	Covered	123.25	123.25	1 XXX	0	0	0	0	0
77300-26	Radiation therapy dose plan	R26C	Covered	58.52	58.52	1 XXX	0	0	0	0	0
77300-TC	Radiation therapy dose plan	R26C	Covered	64.73	64.73	1 XXX	0	0	0	0	0
77301-00	Radiotherapy dose plan imrt	R26C	Covered	3508.14	3508.14	1 XXX	0	0	0	0	0
77301-26	Radiotherapy dose plan imrt	R26C	Covered	756.30	756.30	1 XXX	0	0	0	0	0
77301-TC	Radiotherapy dose plan imrt	R26C	Covered	2751.84	2751.84	1 XXX	0	0	0	0	0
77306-00	Telethx isodose plan simple	R26C	Covered	277.57	277.57	1 XXX	0	0	0	0	0
77306-26	Telethx isodose plan simple	R26C	Covered	132.59	132.59	1 XXX	0	0	0	0	0
77306-TC	Telethx isodose plan simple	R26C	Covered	144.98	144.98	1 XXX	0	0	0	0	0
77307-00	Telethx isodose plan cplx	R26C	Covered	536.64	536.64	1 XXX	0	0	0	0	0
77307-26	Telethx isodose plan cplx	R26C	Covered	274.49	274.49	1 XXX	0	0	0	0	0
77307-TC	Telethx isodose plan cplx	R26C	Covered	262.14	262.14	1 XXX	0	0	0	0	0
77316-00	Brachytx isodose plan simple	R26C	Covered	465.93	465.93	1 XXX	0	0	0	0	0
77316-26	Brachytx isodose plan simple	R26C	Covered	132.59	132.59	1 XXX	0	0	0	0	0
77316-TC	Brachytx isodose plan simple	R26C	Covered	333.34	333.34	1 XXX	0	0	0	0	0
77317-00	Brachytx isodose intermed	R26C	Covered	613.16	613.16	1 XXX	0	0	0	0	0
77317-26	Brachytx isodose intermed	R26C	Covered	173.70	173.70	1 XXX	0	0	0	0	0
77317-TC	Brachytx isodose intermed	R26C	Covered	439.46	439.46	1 XXX	0	0	0	0	0
77318-00	Brachytx isodose complex	R26C	Covered	867.39	867.39	1 XXX	0	0	0	0	0
77318-26	Brachytx isodose complex	R26C	Covered	273.85	273.85	1 XXX	0	0	0	0	0
77318-TC	Brachytx isodose complex	R26C	Covered	593.54	593.54	1 XXX	0	0	0	0	0
77321-00	Special teletx port plan	R26C	Covered	176.34	176.34	1 XXX	0	0	0	0	0
77321-26	Special teletx port plan	R26C	Covered	90.27	90.27	1 XXX	0	0	0	0	0
77321-TC	Special teletx port plan	R26C	Covered	86.07	86.07	1 XXX	0	0	0	0	0
77331-00	Special radiation dosimetry	R26C	Covered	119.73	119.73	1 XXX	0	0	0	0	0
77331-26	Special radiation dosimetry	R26C	Covered	82.82	82.82	1 XXX	0	0	0	0	0
77331-TC	Special radiation dosimetry	R26C	Covered	36.91	36.91	1 XXX	0	0	0	0	0
77332-00	Radiation treatment aid(s)	R26C	Covered	72.77	72.77	1 XXX	0	0	0	0	0
77332-26	Radiation treatment aid(s)	R26C	Covered	42.97	42.97	1 XXX	0	0	0	0	0
77332-TC	Radiation treatment aid(s)	R26C	Covered	29.80	29.80	1 XXX	0	0	0	0	0
77333-00	Radiation treatment aid(s)	R26C	Covered	260.51	260.51	1 XXX	0	0	0	0	0
77333-26	Radiation treatment aid(s)	R26C	Covered	70.95	70.95	1 XXX	0	0	0	0	0
77333-TC	Radiation treatment aid(s)	R26C	Covered	189.56	189.56	1 XXX	0	0	0	0	0
77334-00	Radiation treatment aid(s)	R26C	Covered	235.76	235.76	1 XXX	0	0	0	0	0

77334-26	Radiation treatment aid(s)	R26C	Covered	108.94	108.94	1 XXX	0	0	0	0	0
77334-TC	Radiation treatment aid(s)	R26C	Covered	126.82	126.82	1 XXX	0	0	0	0	0
77336-00	Radiation physics consult	R26C	Covered	167.90	167.90	3 XXX	0	0	0	0	0
77338-00	Design mlc device for imrt	R26C	Covered	876.48	876.48	1 XXX	0	0	0	0	0
77338-26	Design mlc device for imrt	R26C	Covered	406.48	406.48	1 XXX	0	0	0	0	0
77338-TC	Design mlc device for imrt	R26C	Covered	470.00	470.00	1 XXX	0	0	0	0	0
77370-00	Radiation physics consult	R26C	Covered	271.72	271.72	3 XXX	0	0	0	0	0
77371-00	Srs multisource	RMCD	Covered	2133.08	2133.08	3 XXX	0	0	0	0	0
77372-00	Srs linear based	R26C	Covered	1837.21	1837.21	3 XXX	0	0	0	0	0
77373-00	Sbrt delivery	R26C	Covered	1915.71	1915.71	3 XXX	0	0	0	0	0
0260U-00	Optical genome mapping for detection of abnormalities associated with rare	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0264U-00	Detection of abnormalities associated with rare heritable diseases by optical	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
75956-TC	Xray endovasc thor ao repr	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
75957-00	Xray endovasc thor ao repr	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
75957-TC	Xray endovasc thor ao repr	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
75958-00	Xray place prox ext thor ao	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
77401-00	Radiation treatment delivery	R26C	Covered	80.25	80.25	3 XXX	0	0	0	0	0
75958-TC	Xray place prox ext thor ao	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
75959-00	Xray place dist ext thor ao	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
75959-TC	Xray place dist ext thor ao	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
77417-00	Radiology port images(s)	R26C	Covered	28.51	28.51	3 XXX	0	0	0	0	0
77423-00	Neutron beam tx complex	RMCD	Covered	40.10	40.10	3 XXX	0	0	0	0	0
76496-00	Unlisted fluoroscopic px	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
76496-26	Unlisted fluoroscopic px	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
77427-00	Radiation tx management x5	R26C	Covered	339.94	339.94	2 XXX	9	9	9	9	9
77431-00	Radiation therapy management	R26C	Covered	192.22	192.22	2 XXX	0	0	0	0	0
77432-00	Stereotactic radiation trmt	R26C	Covered	750.83	750.83	2 XXX	0	0	0	0	0
77435-00	Sbrt management	R26C	Covered	1136.00	1136.00	2 XXX	0	0	0	0	0
77469-00	Io radiation tx management	R26C	Covered	566.99	566.99	0 XXX	0	0	0	0	0
77470-00	Special radiation treatment	R26C	Covered	261.02	261.02	1 XXX	0	0	0	0	0
77470-26	Special radiation treatment	R26C	Covered	192.37	192.37	1 XXX	0	0	0	0	0
77470-TC	Special radiation treatment	R26C	Covered	68.66	68.66	1 XXX	0	0	0	0	0
76496-TC	Unlisted fluoroscopic px	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
76497-00	Unlisted ct procedure	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
76497-26	Unlisted ct procedure	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
77520-00	Proton trmt simple w/o comp	RMCD	Covered	569.60	569.60	3 XXX	0	0	0	0	0
77522-00	Proton trmt simple w/comp	RMCD	Covered	569.60	569.60	3 XXX	0	0	0	0	0
77523-00	Proton trmt intermediate	RMCD	Covered	654.05	654.05	3 XXX	0	0	0	0	0
77525-00	Proton treatment complex	RMCD	Covered	738.52	738.52	3 XXX	0	0	0	0	0
77600-00	Hyperthermia treatment	R26C	Covered	1045.21	1045.21	1 XXX	0	0	0	0	0
77600-26	Hyperthermia treatment	R26C	Covered	128.41	128.41	1 XXX	0	0	0	0	0
77600-TC	Hyperthermia treatment	R26C	Covered	916.80	916.80	1 XXX	0	0	0	0	0
77605-00	Hyperthermia treatment	R26C	Covered	1801.91	1801.91	1 XXX	0	0	0	0	0
77605-26	Hyperthermia treatment	R26C	Covered	165.83	165.83	1 XXX	0	0	0	0	0
77605-TC	Hyperthermia treatment	R26C	Covered	1636.09	1636.09	1 XXX	0	0	0	0	0
77610-00	Hyperthermia treatment	R26C	Covered	1315.62	1315.62	1 XXX	0	0	0	0	0
77610-26	Hyperthermia treatment	R26C	Covered	124.53	124.53	1 XXX	0	0	0	0	0
77610-TC	Hyperthermia treatment	R26C	Covered	1191.09	1191.09	1 XXX	0	0	0	0	0
77615-00	Hyperthermia treatment	R26C	Covered	2064.91	2064.91	1 XXX	0	0	0	0	0
77615-26	Hyperthermia treatment	R26C	Covered	174.95	174.95	1 XXX	0	0	0	0	0
77615-TC	Hyperthermia treatment	R26C	Covered	1889.96	1889.96	1 XXX	0	0	0	0	0
77620-00	Hyperthermia treatment	R26C	Covered	1206.01	1206.01	1 XXX	0	0	0	0	0

77620-26	Hyperthermia treatment	R26C	Covered	133.29	133.29	1 XXX	0	0	0	0	0
77620-TC	Hyperthermia treatment	R26C	Covered	1072.72	1072.72	1 XXX	0	0	0	0	0
77750-00	Infuse radioactive materials	R26C	Covered	728.13	728.13	1 090	0	0	0	0	0
77750-26	Infuse radioactive materials	R26C	Covered	473.70	473.70	1 090	0	0	0	0	0
77750-TC	Infuse radioactive materials	R26C	Covered	254.43	254.43	1 090	0	0	0	0	0
77761-00	Apply intrcav radiat simple	R26C	Covered	789.39	789.39	1 090	0	0	0	0	0
77761-26	Apply intrcav radiat simple	R26C	Covered	364.76	364.76	1 090	0	0	0	0	0
77761-TC	Apply intrcav radiat simple	R26C	Covered	424.63	424.63	1 090	0	0	0	0	0
77762-00	Apply intrcav radiat interm	R26C	Covered	1032.73	1032.73	1 090	0	0	0	0	0
77762-26	Apply intrcav radiat interm	R26C	Covered	545.91	545.91	1 090	0	0	0	0	0
77762-TC	Apply intrcav radiat interm	R26C	Covered	486.82	486.82	1 090	0	0	0	0	0
77763-00	Apply intrcav radiat compl	R26C	Covered	1455.53	1455.53	1 090	0	0	0	0	0
77763-26	Apply intrcav radiat compl	R26C	Covered	820.40	820.40	1 090	0	0	0	0	0
77763-TC	Apply intrcav radiat compl	R26C	Covered	635.12	635.12	1 090	0	0	0	0	0
58672-00	Laparoscopy fimbrioplasty	NCOV	Not Covered	Code not covered	Code not cov	0 090	3	1	2	0	0
69300-00	Revise external ear	NCOV	Not Covered	Code not covered	Code not cov	0 YYY	2	1	0	0	0
54401-00	Insert self-contd prosthesis	NCOV	Not Covered	Code not covered	Code not cov	0 090	2	0	1	1	0
15838-00	Excise excess skin fat pad	NCOV	Not Covered	Code not covered	Code not cov	0 090	2	0	0	0	0
15821-00	Revision of lower eyelid	NCOV	Not Covered	Code not covered	Code not cov	0 090	2	1	0	0	0
0332U-00	Genetic profiling of 8 epigenetic markers to evaluate probability of responding	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
77770-00	Hdr rdncf ntrstl/icav brchtx	R26C	Covered	659.91	659.91	1 XXX	0	0	0	0	0
77770-26	Hdr rdncf ntrstl/icav brchtx	R26C	Covered	184.87	184.87	1 XXX	0	0	0	0	0
77770-TC	Hdr rdncf ntrstl/icav brchtx	R26C	Covered	475.03	475.03	1 XXX	0	0	0	0	0
77771-00	Hdr rdncf ntrstl/icav brchtx	R26C	Covered	1144.22	1144.22	1 XXX	0	0	0	0	0
77771-26	Hdr rdncf ntrstl/icav brchtx	R26C	Covered	359.78	359.78	1 XXX	0	0	0	0	0
77771-TC	Hdr rdncf ntrstl/icav brchtx	R26C	Covered	784.44	784.44	1 XXX	0	0	0	0	0
77772-00	Hdr rdncf ntrstl/icav brchtx	R26C	Covered	1709.12	1709.12	1 XXX	0	0	0	0	0
77772-26	Hdr rdncf ntrstl/icav brchtx	R26C	Covered	507.81	507.81	1 XXX	0	0	0	0	0
77772-TC	Hdr rdncf ntrstl/icav brchtx	R26C	Covered	1201.31	1201.31	1 XXX	0	0	0	0	0
77778-00	Apply interstit radiat compl	R26C	Covered	1721.08	1721.08	1 000	0	0	0	0	0
77778-26	Apply interstit radiat compl	R26C	Covered	829.69	829.69	1 000	0	0	0	0	0
77778-TC	Apply interstit radiat compl	R26C	Covered	891.40	891.40	1 000	0	0	0	0	0
77789-00	Apply surf ldr radionuclide	R26C	Covered	250.08	250.08	1 000	0	0	0	0	0
77789-26	Apply surf ldr radionuclide	R26C	Covered	108.33	108.33	1 000	0	0	0	0	0
77789-TC	Apply surf ldr radionuclide	R26C	Covered	141.74	141.74	1 000	0	0	0	0	0
77790-00	Radiation handling	R26C	Covered	33.73	33.73	3 XXX	0	0	0	0	0
76497-TC	Unlisted ct procedure	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
76498-00	Unlisted mr procedure	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
76498-26	Unlisted mr procedure	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78012-00	Thyroid uptake measurement	R26C	Covered	154.03	154.03	1 XXX	0	0	0	0	0
78012-26	Thyroid uptake measurement	R26C	Covered	15.48	15.48	1 XXX	0	0	0	0	0
78012-TC	Thyroid uptake measurement	R26C	Covered	138.56	138.56	1 XXX	0	0	0	0	0
78013-00	Thyroid imaging w/blood flow	R26C	Covered	327.41	327.41	1 XXX	0	0	0	0	0
78013-26	Thyroid imaging w/blood flow	R26C	Covered	30.34	30.34	1 XXX	0	0	0	0	0
78013-TC	Thyroid imaging w/blood flow	R26C	Covered	297.07	297.07	1 XXX	0	0	0	0	0
78014-00	Thyroid imaging w/blood flow	R26C	Covered	416.81	416.81	1 XXX	0	0	0	0	0
78014-26	Thyroid imaging w/blood flow	R26C	Covered	40.83	40.83	1 XXX	0	0	0	0	0
78014-TC	Thyroid imaging w/blood flow	R26C	Covered	375.98	375.98	1 XXX	0	0	0	0	0
78015-00	Thyroid met imaging	R26C	Covered	404.55	404.55	1 XXX	0	0	0	0	0
78015-26	Thyroid met imaging	R26C	Covered	56.39	56.39	1 XXX	0	0	0	0	0
78015-TC	Thyroid met imaging	R26C	Covered	348.17	348.17	1 XXX	0	0	0	0	0
78016-00	Thyroid met imaging/studies	R26C	Covered	482.88	482.88	1 XXX	0	0	0	0	0
78016-26	Thyroid met imaging/studies	R26C	Covered	58.30	58.30	1 XXX	0	0	0	0	0

49320

78016-TC	Thyroid met imaging/studies	R26C	Covered	424.58	424.58	1 XXX	0	0	0	0	0
78018-00	Thyroid met imaging body	R26C	Covered	542.92	542.92	1 XXX	0	0	0	0	0
78018-26	Thyroid met imaging body	R26C	Covered	68.58	68.58	1 XXX	0	0	0	0	0
78018-TC	Thyroid met imaging body	R26C	Covered	474.34	474.34	1 XXX	0	0	0	0	0
78020-00	Thyroid met uptake	R26C	Covered	146.61	146.61	1 ZZZ	0	0	0	0	0
78020-26	Thyroid met uptake	R26C	Covered	46.26	46.26	1 ZZZ	0	0	0	0	0
78020-TC	Thyroid met uptake	R26C	Covered	100.35	100.35	1 ZZZ	0	0	0	0	0
78070-00	Parathyroid planar imaging	R26C	Covered	514.10	514.10	1 XXX	0	0	0	0	0
78070-26	Parathyroid planar imaging	R26C	Covered	66.28	66.28	1 XXX	0	0	0	0	0
78070-TC	Parathyroid planar imaging	R26C	Covered	447.82	447.82	1 XXX	0	0	0	0	0
78071-00	Parathyrd planar w/wo subtrj	R26C	Covered	610.30	610.30	1 XXX	0	0	0	0	0
78071-26	Parathyrd planar w/wo subtrj	R26C	Covered	98.44	98.44	1 XXX	0	0	0	0	0
78071-TC	Parathyrd planar w/wo subtrj	R26C	Covered	511.85	511.85	1 XXX	0	0	0	0	0
78072-00	Parathyrd planar w/spect&ct	R26C	Covered	756.95	756.95	1 XXX	0	0	0	0	0
78072-26	Parathyrd planar w/spect&ct	R26C	Covered	129.27	129.27	1 XXX	0	0	0	0	0
78072-TC	Parathyrd planar w/spect&ct	R26C	Covered	627.68	627.68	1 XXX	0	0	0	0	0
78075-00	Adrenal cortex & medulla img	R26C	Covered	777.67	777.67	1 XXX	0	0	0	0	0
78075-26	Adrenal cortex & medulla img	R26C	Covered	61.98	61.98	1 XXX	0	0	0	0	0
78075-TC	Adrenal cortex & medulla img	R26C	Covered	715.69	715.69	1 XXX	0	0	0	0	0
76498-TC	Unlisted mr procedure	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
76499-00	Unlisted dx radiographic px	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
76499-26	Unlisted dx radiographic px	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78102-00	Bone marrow imaging ltd	R26C	Covered	305.37	305.37	1 XXX	0	0	0	0	0
78102-26	Bone marrow imaging ltd	R26C	Covered	43.87	43.87	1 XXX	0	0	0	0	0
78102-TC	Bone marrow imaging ltd	R26C	Covered	261.50	261.50	1 XXX	0	0	0	0	0
78103-00	Bone marrow imaging mult	R26C	Covered	325.88	325.88	1 XXX	0	0	0	0	0
78103-26	Bone marrow imaging mult	R26C	Covered	53.39	53.39	1 XXX	0	0	0	0	0
78103-TC	Bone marrow imaging mult	R26C	Covered	272.49	272.49	1 XXX	0	0	0	0	0
78104-00	Bone marrow imaging body	R26C	Covered	437.73	437.73	1 XXX	0	0	0	0	0
78104-26	Bone marrow imaging body	R26C	Covered	64.94	64.94	1 XXX	0	0	0	0	0
78104-TC	Bone marrow imaging body	R26C	Covered	372.79	372.79	1 XXX	0	0	0	0	0
78110-00	Plasma volume single	R26C	Covered	130.15	130.15	1 XXX	0	0	0	0	0
78110-26	Plasma volume single	R26C	Covered	13.54	13.54	1 XXX	0	0	0	0	0
78110-TC	Plasma volume single	R26C	Covered	116.61	116.61	1 XXX	0	0	0	0	0
78111-00	Plasma volume multiple	R26C	Covered	137.79	137.79	1 XXX	0	0	0	0	0
78111-26	Plasma volume multiple	R26C	Covered	15.36	15.36	1 XXX	0	0	0	0	0
78111-TC	Plasma volume multiple	R26C	Covered	122.43	122.43	1 XXX	0	0	0	0	0
78120-00	Red cell mass single	R26C	Covered	133.23	133.23	1 XXX	0	0	0	0	0
78120-26	Red cell mass single	R26C	Covered	16.61	16.61	1 XXX	0	0	0	0	0
78120-TC	Red cell mass single	R26C	Covered	116.61	116.61	1 XXX	0	0	0	0	0
78121-00	Red cell mass multiple	R26C	Covered	145.16	145.16	1 XXX	0	0	0	0	0
78121-26	Red cell mass multiple	R26C	Covered	22.73	22.73	1 XXX	0	0	0	0	0
78121-TC	Red cell mass multiple	R26C	Covered	122.43	122.43	1 XXX	0	0	0	0	0
78122-00	Blood volume	R26C	Covered	184.81	184.81	1 XXX	0	0	0	0	0
78122-26	Blood volume	R26C	Covered	35.85	35.85	1 XXX	0	0	0	0	0
78122-TC	Blood volume	R26C	Covered	148.95	148.95	1 XXX	0	0	0	0	0
78130-00	Red cell survival study	R26C	Covered	234.03	234.03	1 XXX	0	0	0	0	0
78130-26	Red cell survival study	R26C	Covered	43.59	43.59	1 XXX	0	0	0	0	0
78130-TC	Red cell survival study	R26C	Covered	190.44	190.44	1 XXX	0	0	0	0	0
78140-00	Red cell sequestration	R26C	Covered	206.17	206.17	1 XXX	0	0	0	0	0
78140-26	Red cell sequestration	R26C	Covered	43.59	43.59	1 XXX	0	0	0	0	0
78140-TC	Red cell sequestration	R26C	Covered	162.58	162.58	1 XXX	0	0	0	0	0
78185-00	Spleen imaging	R26C	Covered	295.56	295.56	1 XXX	0	0	0	0	0
78185-26	Spleen imaging	R26C	Covered	28.24	28.24	1 XXX	0	0	0	0	0

78185-TC	Spleen imaging	R26C	Covered	267.32	267.32	1 XXX	0	0	0	0	0
78191-00	Platelet survival	R26C	Covered	234.03	234.03	1 XXX	0	0	0	0	0
78191-26	Platelet survival	R26C	Covered	43.59	43.59	1 XXX	0	0	0	0	0
78191-TC	Platelet survival	R26C	Covered	190.44	190.44	1 XXX	0	0	0	0	0
78195-00	Lymph system imaging	R26C	Covered	616.17	616.17	1 XXX	0	0	0	0	0
78195-26	Lymph system imaging	R26C	Covered	97.80	97.80	1 XXX	0	0	0	0	0
78195-TC	Lymph system imaging	R26C	Covered	518.37	518.37	1 XXX	0	0	0	0	0
76499-TC	Unlisted dx radiographic px	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
76999-00	Echo examination procedure	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
76999-26	Echo examination procedure	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78201-00	Liver imaging	R26C	Covered	337.49	337.49	1 XXX	0	0	0	0	0
78201-26	Liver imaging	R26C	Covered	35.25	35.25	1 XXX	0	0	0	0	0
78201-TC	Liver imaging	R26C	Covered	302.24	302.24	1 XXX	0	0	0	0	0
78202-00	Liver imaging with flow	R26C	Covered	371.50	371.50	1 XXX	0	0	0	0	0
78202-26	Liver imaging with flow	R26C	Covered	41.44	41.44	1 XXX	0	0	0	0	0
78202-TC	Liver imaging with flow	R26C	Covered	330.06	330.06	1 XXX	0	0	0	0	0
78215-00	Liver and spleen imaging	R26C	Covered	347.64	347.64	1 XXX	0	0	0	0	0
78215-26	Liver and spleen imaging	R26C	Covered	40.23	40.23	1 XXX	0	0	0	0	0
78215-TC	Liver and spleen imaging	R26C	Covered	307.42	307.42	1 XXX	0	0	0	0	0
78216-00	Liver & spleen image/flow	R26C	Covered	241.30	241.30	1 XXX	0	0	0	0	0
78216-26	Liver & spleen image/flow	R26C	Covered	45.73	45.73	1 XXX	0	0	0	0	0
78216-TC	Liver & spleen image/flow	R26C	Covered	195.57	195.57	1 XXX	0	0	0	0	0
78226-00	Hepatobiliary system imaging	R26C	Covered	567.37	567.37	1 XXX	0	0	0	0	0
78226-26	Hepatobiliary system imaging	R26C	Covered	61.34	61.34	1 XXX	0	0	0	0	0
78226-TC	Hepatobiliary system imaging	R26C	Covered	506.03	506.03	1 XXX	0	0	0	0	0
78227-00	Hepatobil syst image w/drug	R26C	Covered	762.17	762.17	1 XXX	0	0	0	0	0
78227-26	Hepatobil syst image w/drug	R26C	Covered	74.29	74.29	1 XXX	0	0	0	0	0
78227-TC	Hepatobil syst image w/drug	R26C	Covered	687.88	687.88	1 XXX	0	0	0	0	0
78230-00	Salivary gland imaging	R26C	Covered	312.23	312.23	1 XXX	0	0	0	0	0
78230-26	Salivary gland imaging	R26C	Covered	37.79	37.79	1 XXX	0	0	0	0	0
78230-TC	Salivary gland imaging	R26C	Covered	274.43	274.43	1 XXX	0	0	0	0	0
78231-00	Serial salivary imaging	R26C	Covered	195.53	195.53	1 XXX	0	0	0	0	0
78231-26	Serial salivary imaging	R26C	Covered	36.83	36.83	1 XXX	0	0	0	0	0
78231-TC	Serial salivary imaging	R26C	Covered	158.70	158.70	1 XXX	0	0	0	0	0
78232-00	Salivary gland function exam	R26C	Covered	191.84	191.84	1 XXX	0	0	0	0	0
78232-26	Salivary gland function exam	R26C	Covered	33.14	33.14	1 XXX	0	0	0	0	0
78232-TC	Salivary gland function exam	R26C	Covered	158.70	158.70	1 XXX	0	0	0	0	0
78258-00	Esophageal motility study	R26C	Covered	376.47	376.47	1 XXX	0	0	0	0	0
78258-26	Esophageal motility study	R26C	Covered	58.70	58.70	1 XXX	0	0	0	0	0
78258-TC	Esophageal motility study	R26C	Covered	317.77	317.77	1 XXX	0	0	0	0	0
78261-00	Gastric mucosa imaging	R26C	Covered	352.04	352.04	1 XXX	0	0	0	0	0
78261-26	Gastric mucosa imaging	R26C	Covered	49.10	49.10	1 XXX	0	0	0	0	0
78261-TC	Gastric mucosa imaging	R26C	Covered	302.94	302.94	1 XXX	0	0	0	0	0
78262-00	Gastroesophageal reflux exam	R26C	Covered	431.73	431.73	1 XXX	0	0	0	0	0
78262-26	Gastroesophageal reflux exam	R26C	Covered	56.99	56.99	1 XXX	0	0	0	0	0
78262-TC	Gastroesophageal reflux exam	R26C	Covered	374.73	374.73	1 XXX	0	0	0	0	0
78264-00	Gastric emptying imag study	R26C	Covered	576.92	576.92	1 XXX	0	0	0	0	0
78264-26	Gastric emptying imag study	R26C	Covered	65.02	65.02	1 XXX	0	0	0	0	0
78264-TC	Gastric emptying imag study	R26C	Covered	511.90	511.90	1 XXX	0	0	0	0	0
78265-00	Gastric emptying imag study	R26C	Covered	686.78	686.78	1 XXX	0	0	0	0	0
78265-26	Gastric emptying imag study	R26C	Covered	80.45	80.45	1 XXX	0	0	0	0	0
78265-TC	Gastric emptying imag study	R26C	Covered	606.33	606.33	1 XXX	0	0	0	0	0
78266-00	Gastric emptying imag study	R26C	Covered	781.52	781.52	1 XXX	0	0	0	0	0
78266-26	Gastric emptying imag study	R26C	Covered	86.53	86.53	1 XXX	0	0	0	0	0

78266-TC	Gastric emptying imag study	R26C	Covered	694.99	694.99	1 XXX	0	0	0	0	0
78267-00	Breath tst attain/anal c-14	LCMS	Covered	11.06	11.06	9 XXX	9	9	9	9	9
78268-00	Breath test analysis c-14	LCMS	Covered	94.41	94.41	9 XXX	9	9	9	9	9
78278-00	Acute gi blood loss imaging	R26C	Covered	607.88	607.88	1 XXX	0	0	0	0	0
78278-26	Acute gi blood loss imaging	R26C	Covered	81.75	81.75	1 XXX	0	0	0	0	0
78278-TC	Acute gi blood loss imaging	R26C	Covered	526.13	526.13	1 XXX	0	0	0	0	0
76999-TC	Echo examination procedure	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
77299-00	Unlisted px ther rad tx plng	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
77299-26	Unlisted px ther rad tx plng	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78290-00	Meckels divert exam	R26C	Covered	574.72	574.72	1 XXX	0	0	0	0	0
78290-26	Meckels divert exam	R26C	Covered	55.70	55.70	1 XXX	0	0	0	0	0
78290-TC	Meckels divert exam	R26C	Covered	519.02	519.02	1 XXX	0	0	0	0	0
78291-00	Leveen/shunt patency exam	R26C	Covered	460.79	460.79	1 XXX	0	0	0	0	0
78291-26	Leveen/shunt patency exam	R26C	Covered	73.77	73.77	1 XXX	0	0	0	0	0
78291-TC	Leveen/shunt patency exam	R26C	Covered	387.02	387.02	1 XXX	0	0	0	0	0
77299-TC	Unlisted px ther rad tx plng	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
77387-00	Guidance for radj tx dlvr	NBYR	Covered	By Report	By Report	0 XXX	0	0	0	0	0
77399-00	Unlisted px med radj physics	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78300-00	Bone imaging limited area	R26C	Covered	395.00	395.00	1 XXX	0	0	0	0	0
78300-26	Bone imaging limited area	R26C	Covered	51.41	51.41	1 XXX	0	0	0	0	0
78300-TC	Bone imaging limited area	R26C	Covered	343.59	343.59	1 XXX	0	0	0	0	0
78305-00	Bone imaging multiple areas	R26C	Covered	475.77	475.77	1 XXX	0	0	0	0	0
78305-26	Bone imaging multiple areas	R26C	Covered	68.10	68.10	1 XXX	0	0	0	0	0
78305-TC	Bone imaging multiple areas	R26C	Covered	407.67	407.67	1 XXX	0	0	0	0	0
78306-00	Bone imaging whole body	R26C	Covered	514.46	514.46	1 XXX	4	0	0	0	0
78306-26	Bone imaging whole body	R26C	Covered	70.57	70.57	1 XXX	4	0	0	0	0
78306-TC	Bone imaging whole body	R26C	Covered	443.89	443.89	1 XXX	4	0	0	0	0
78315-00	Bone imaging 3 phase	R26C	Covered	603.89	603.89	1 XXX	0	0	0	0	0
78315-26	Bone imaging 3 phase	R26C	Covered	84.22	84.22	1 XXX	0	0	0	0	0
78315-TC	Bone imaging 3 phase	R26C	Covered	519.66	519.66	1 XXX	0	0	0	0	0
78350-00	Bone mineral single photon	RCMS	Covered	60.04	60.04	1 XXX	9	9	9	9	9
78350-26	Bone mineral single photon	RCMS	Covered	19.24	19.24	1 XXX	9	9	9	9	9
78350-TC	Bone mineral single photon	RCMS	Covered	40.80	40.80	1 XXX	9	9	9	9	9
78351-00	Bone mineral dual photon	RCMS	Covered	26.09	26.09	9 XXX	9	9	9	9	9
77399-26	Unlisted px med radj physics	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
77399-TC	Unlisted px med radj physics	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
77402-00	Radiation treatment delivery	NBYR	Covered	By Report	By Report	3 XXX	0	0	0	0	0
77407-00	Radiation treatment delivery	NBYR	Covered	By Report	By Report	3 XXX	0	0	0	0	0
77412-00	Radiation treatment delivery	NBYR	Covered	By Report	By Report	3 XXX	0	0	0	0	0
77424-00	Io rad tx delivery by x-ray	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
78428-00	Cardiac shunt imaging	R26C	Covered	329.74	329.74	1 XXX	6	0	0	0	0
78428-26	Cardiac shunt imaging	R26C	Covered	63.72	63.72	1 XXX	6	0	0	0	0
78428-TC	Cardiac shunt imaging	R26C	Covered	266.02	266.02	1 XXX	6	0	0	0	0
78429-00	Myocrd img pet 1 std w/ct	RMCD	Covered	1240.76	1240.76	1 XXX	0	0	0	0	0
78429-26	Myocrd img pet 1 std w/ct	RMCD	Covered	139.60	139.60	1 XXX	0	0	0	0	0
78429-TC	Myocrd img pet 1 std w/ct	RMCD	Covered	1196.70	1196.70	1 XXX	0	0	0	0	0
78430-00	Myocrd img pet rst/strs w/ct	RMCD	Covered	1131.14	1131.14	1 XXX	0	0	0	0	0
78430-26	Myocrd img pet rst/strs w/ct	RMCD	Covered	133.43	133.43	1 XXX	0	0	0	0	0
78430-TC	Myocrd img pet rst/strs w/ct	RMCD	Covered	1090.01	1090.01	1 XXX	0	0	0	0	0
78431-00	Myocrd img pet rst&strs ct	RMCD	Covered	1881.68	1881.68	1 XXX	0	0	0	0	0
78431-26	Myocrd img pet rst&strs ct	RMCD	Covered	155.87	155.87	1 XXX	0	0	0	0	0
78431-TC	Myocrd img pet rst&strs ct	RMCD	Covered	1832.96	1832.96	1 XXX	0	0	0	0	0
78432-00	Myocrd img pet 2rtracer	RMCD	Covered	1660.10	1660.10	1 XXX	0	0	0	0	0
78432-26	Myocrd img pet 2rtracer	RMCD	Covered	166.25	166.25	1 XXX	0	0	0	0	0

78432-TC	Myocrd img pet 2rtracer	RMCD	Covered	1607.65	1607.65	1 XXX	0	0	0	0	0
78433-00	Myocrd img pet 2rtracer ct	RMCD	Covered	2105.44	2105.44	1 XXX	0	0	0	0	0
78433-26	Myocrd img pet 2rtracer ct	RMCD	Covered	181.72	181.72	1 XXX	0	0	0	0	0
78433-TC	Myocrd img pet 2rtracer ct	RMCD	Covered	2050.64	2050.64	1 XXX	0	0	0	0	0
78434-00	Aqmbf pet rest & rx stress	RMCD	Covered	136.25	136.25	1 ZZZ	0	0	0	0	0
78434-26	Aqmbf pet rest & rx stress	RMCD	Covered	51.32	51.32	1 ZZZ	0	0	0	0	0
78434-TC	Aqmbf pet rest & rx stress	RMCD	Covered	119.99	119.99	1 ZZZ	0	0	0	0	0
78445-00	Vascular flow imaging	R26C	Covered	358.78	358.78	1 XXX	6	0	0	0	0
78445-26	Vascular flow imaging	R26C	Covered	41.66	41.66	1 XXX	6	0	0	0	0
78445-TC	Vascular flow imaging	R26C	Covered	317.12	317.12	1 XXX	6	0	0	0	0
78451-00	Ht muscle image spect sing	R26C	Covered	595.97	595.97	1 XXX	6	0	0	0	0
78451-26	Ht muscle image spect sing	R26C	Covered	113.86	113.86	1 XXX	6	0	0	0	0
78451-TC	Ht muscle image spect sing	R26C	Covered	482.10	482.10	1 XXX	6	0	0	0	0
78452-00	Ht muscle image spect mult	R26C	Covered	825.48	825.48	1 XXX	6	0	0	0	0
78452-26	Ht muscle image spect mult	R26C	Covered	134.32	134.32	1 XXX	6	0	0	0	0
78452-TC	Ht muscle image spect mult	R26C	Covered	691.16	691.16	1 XXX	6	0	0	0	0
78453-00	Ht muscle image planar sing	R26C	Covered	508.10	508.10	1 XXX	6	0	0	0	0
78453-26	Ht muscle image planar sing	R26C	Covered	80.97	80.97	1 XXX	6	0	0	0	0
78453-TC	Ht muscle image planar sing	R26C	Covered	427.12	427.12	1 XXX	6	0	0	0	0
78454-00	Ht musc image planar mult	R26C	Covered	758.66	758.66	1 XXX	6	0	0	0	0
78454-26	Ht musc image planar mult	R26C	Covered	111.53	111.53	1 XXX	6	0	0	0	0
78454-TC	Ht musc image planar mult	R26C	Covered	647.13	647.13	1 XXX	6	0	0	0	0
78456-00	Acute venous thrombus image	R26C	Covered	550.18	550.18	1 XXX	6	9	9	9	9
78456-26	Acute venous thrombus image	R26C	Covered	82.91	82.91	1 XXX	6	9	9	9	9
78456-TC	Acute venous thrombus image	R26C	Covered	467.27	467.27	1 XXX	6	9	9	9	9
78457-00	Venous thrombosis imaging	R26C	Covered	286.32	286.32	1 XXX	6	0	0	0	0
78457-26	Venous thrombosis imaging	R26C	Covered	57.16	57.16	1 XXX	6	0	0	0	0
78457-TC	Venous thrombosis imaging	R26C	Covered	229.16	229.16	1 XXX	6	0	0	0	0
78458-00	Ven thrombosis images bilat	R26C	Covered	364.94	364.94	1 XXX	6	2	0	0	0
78458-26	Ven thrombosis images bilat	R26C	Covered	75.64	75.64	1 XXX	6	2	0	0	0
78458-TC	Ven thrombosis images bilat	R26C	Covered	289.31	289.31	1 XXX	6	2	0	0	0
78459-00	Myocrd img pet single study	RMCD	Covered	596.59	596.59	1 XXX	0	0	0	0	0
78459-26	Myocrd img pet single study	RMCD	Covered	129.18	129.18	1 XXX	0	0	0	0	0
78459-TC	Myocrd img pet single study	RMCD	Covered	555.84	555.84	1 XXX	0	0	0	0	0
78466-00	Heart infarct image	R26C	Covered	317.11	317.11	1 XXX	6	0	0	0	0
78466-26	Heart infarct image	R26C	Covered	56.91	56.91	1 XXX	6	0	0	0	0
78466-TC	Heart infarct image	R26C	Covered	260.20	260.20	1 XXX	6	0	0	0	0
78468-00	Heart infarct image (ef)	R26C	Covered	348.42	348.42	1 XXX	6	0	0	0	0
78468-26	Heart infarct image (ef)	R26C	Covered	66.23	66.23	1 XXX	6	0	0	0	0
78468-TC	Heart infarct image (ef)	R26C	Covered	282.19	282.19	1 XXX	6	0	0	0	0
78469-00	Heart infarct image (3d)	R26C	Covered	390.64	390.64	1 XXX	6	0	0	0	0
78469-26	Heart infarct image (3d)	R26C	Covered	76.11	76.11	1 XXX	6	0	0	0	0
78469-TC	Heart infarct image (3d)	R26C	Covered	314.53	314.53	1 XXX	6	0	0	0	0
78472-00	Gated heart planar single	R26C	Covered	399.51	399.51	1 XXX	6	0	0	0	0
78472-26	Gated heart planar single	R26C	Covered	81.10	81.10	1 XXX	6	0	0	0	0
78472-TC	Gated heart planar single	R26C	Covered	318.41	318.41	1 XXX	6	0	0	0	0
78473-00	Gated heart multiple	R26C	Covered	508.30	508.30	1 XXX	6	0	0	0	0
78473-26	Gated heart multiple	R26C	Covered	121.28	121.28	1 XXX	6	0	0	0	0
78473-TC	Gated heart multiple	R26C	Covered	387.02	387.02	1 XXX	6	0	0	0	0
78481-00	Heart first pass single	R26C	Covered	312.79	312.79	1 XXX	6	0	0	0	0
78481-26	Heart first pass single	R26C	Covered	81.10	81.10	1 XXX	6	0	0	0	0
78481-TC	Heart first pass single	R26C	Covered	231.70	231.70	1 XXX	6	0	0	0	0
78483-00	Heart first pass multiple	R26C	Covered	419.64	419.64	1 XXX	6	0	0	0	0
78483-26	Heart first pass multiple	R26C	Covered	121.92	121.92	1 XXX	6	0	0	0	0

78483-TC	Heart first pass multiple	R26C	Covered	297.72	297.72	1 XXX	6	0	0	0	0
78491-00	Myocrd img pet 1std rst/strs	RMCD	Covered	895.90	895.90	1 XXX	0	0	0	0	0
78491-26	Myocrd img pet 1std rst/strs	RMCD	Covered	127.39	127.39	1 XXX	0	0	0	0	0
78491-TC	Myocrd img pet 1std rst/strs	RMCD	Covered	856.46	856.46	1 XXX	0	0	0	0	0
78492-00	Myocrd img pet mlt rst&strs	RMCD	Covered	1485.95	1485.95	1 XXX	0	0	0	0	0
78492-26	Myocrd img pet mlt rst&strs	RMCD	Covered	149.79	149.79	1 XXX	0	0	0	0	0
78492-TC	Myocrd img pet mlt rst&strs	RMCD	Covered	1438.91	1438.91	1 XXX	0	0	0	0	0
78494-00	Heart image spect	R26C	Covered	401.93	401.93	1 XXX	6	0	0	0	0
78494-26	Heart image spect	R26C	Covered	98.39	98.39	1 XXX	6	0	0	0	0
78494-TC	Heart image spect	R26C	Covered	303.54	303.54	1 XXX	6	0	0	0	0
78496-00	Heart first pass add-on	R26C	Covered	77.75	77.75	1 ZZZ	0	0	0	0	0
78496-26	Heart first pass add-on	R26C	Covered	41.48	41.48	1 ZZZ	0	0	0	0	0
78496-TC	Heart first pass add-on	R26C	Covered	36.27	36.27	1 ZZZ	0	0	0	0	0
77425-00	Io rad tx deliver by elctrns	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
77499-00	Unlisted px ther rad tx mgmt	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
77499-26	Unlisted px ther rad tx mgmt	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78579-00	Lung ventilation imaging	R26C	Covered	329.49	329.49	1 XXX	0	0	0	0	0
78579-26	Lung ventilation imaging	R26C	Covered	40.23	40.23	1 XXX	0	0	0	0	0
78579-TC	Lung ventilation imaging	R26C	Covered	289.26	289.26	1 XXX	0	0	0	0	0
78580-00	Lung perfusion imaging	R26C	Covered	412.74	412.74	1 XXX	0	0	0	0	0
78580-26	Lung perfusion imaging	R26C	Covered	60.69	60.69	1 XXX	0	0	0	0	0
78580-TC	Lung perfusion imaging	R26C	Covered	352.05	352.05	1 XXX	0	0	0	0	0
78582-00	Lung ventilat&perfus imaging	R26C	Covered	578.42	578.42	1 XXX	0	0	0	0	0
78582-26	Lung ventilat&perfus imaging	R26C	Covered	87.91	87.91	1 XXX	0	0	0	0	0
78582-TC	Lung ventilat&perfus imaging	R26C	Covered	490.51	490.51	1 XXX	0	0	0	0	0
78597-00	Lung perfusion differential	R26C	Covered	349.86	349.86	1 XXX	0	0	0	0	0
78597-26	Lung perfusion differential	R26C	Covered	59.31	59.31	1 XXX	0	0	0	0	0
78597-TC	Lung perfusion differential	R26C	Covered	290.55	290.55	1 XXX	0	0	0	0	0
78598-00	Lung perf&ventilat diferentl	R26C	Covered	526.14	526.14	1 XXX	0	0	0	0	0
78598-26	Lung perf&ventilat diferentl	R26C	Covered	68.62	68.62	1 XXX	0	0	0	0	0
78598-TC	Lung perf&ventilat diferentl	R26C	Covered	457.52	457.52	1 XXX	0	0	0	0	0
77499-TC	Unlisted px ther rad tx mgmt	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
77799-00	Unlisted px clin brachytx	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
77799-26	Unlisted px clin brachytx	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78600-00	Brain image < 4 views	R26C	Covered	321.32	321.32	1 XXX	0	0	0	0	0
78600-26	Brain image < 4 views	R26C	Covered	36.54	36.54	1 XXX	0	0	0	0	0
78600-TC	Brain image < 4 views	R26C	Covered	284.78	284.78	1 XXX	0	0	0	0	0
78601-00	Brain image w/flow < 4 views	R26C	Covered	383.14	383.14	1 XXX	0	0	0	0	0
78601-26	Brain image w/flow < 4 views	R26C	Covered	42.09	42.09	1 XXX	0	0	0	0	0
78601-TC	Brain image w/flow < 4 views	R26C	Covered	341.05	341.05	1 XXX	0	0	0	0	0
78605-00	Brain image 4+ views	R26C	Covered	354.65	354.65	1 XXX	0	0	0	0	0
78605-26	Brain image 4+ views	R26C	Covered	44.64	44.64	1 XXX	0	0	0	0	0
78605-TC	Brain image 4+ views	R26C	Covered	310.01	310.01	1 XXX	0	0	0	0	0
78606-00	Brain image w/flow 4 + views	R26C	Covered	576.81	576.81	1 XXX	0	0	0	0	0
78606-26	Brain image w/flow 4 + views	R26C	Covered	52.62	52.62	1 XXX	0	0	0	0	0
78606-TC	Brain image w/flow 4 + views	R26C	Covered	524.19	524.19	1 XXX	0	0	0	0	0
78608-00	Brain imaging (pet)	RMCD	Covered	959.24	959.24	1 XXX	0	0	0	0	0
78608-26	Brain imaging (pet)	RMCD	Covered	121.85	121.85	1 XXX	0	0	0	0	0
78608-TC	Brain imaging (pet)	RMCD	Covered	921.94	921.94	1 XXX	0	0	0	0	0
78609-00	Brain imaging (pet)	RCMS	Covered	128.83	128.83	1 XXX	9	9	9	9	9
78609-26	Brain imaging (pet)	RCMS	Covered	128.83	128.83	1 XXX	9	9	9	9	9
78609-TC	Brain imaging (pet)	NCOV	Not Covered	Code not covered	Code not cov	1 XXX	9	9	9	9	9
78610-00	Brain flow imaging only	R26C	Covered	310.18	310.18	1 XXX	0	0	0	0	0
78610-26	Brain flow imaging only	R26C	Covered	24.75	24.75	1 XXX	0	0	0	0	0

78610-TC	Brain flow imaging only	R26C	Covered	285.43	285.43	1 XXX	0	0	0	0	0
78630-00	Cerebrospinal fluid scan	R26C	Covered	588.95	588.95	1 XXX	0	0	0	0	0
78630-26	Cerebrospinal fluid scan	R26C	Covered	55.70	55.70	1 XXX	0	0	0	0	0
78630-TC	Cerebrospinal fluid scan	R26C	Covered	533.25	533.25	1 XXX	0	0	0	0	0
78635-00	Csf ventriculography	R26C	Covered	591.16	591.16	1 XXX	0	0	0	0	0
78635-26	Csf ventriculography	R26C	Covered	51.45	51.45	1 XXX	0	0	0	0	0
78635-TC	Csf ventriculography	R26C	Covered	539.71	539.71	1 XXX	0	0	0	0	0
78645-00	Csf shunt evaluation	R26C	Covered	565.44	565.44	1 XXX	0	0	0	0	0
78645-26	Csf shunt evaluation	R26C	Covered	46.43	46.43	1 XXX	0	0	0	0	0
78645-TC	Csf shunt evaluation	R26C	Covered	519.02	519.02	1 XXX	0	0	0	0	0
78650-00	Csf leakage imaging	R26C	Covered	474.00	474.00	1 XXX	0	0	0	0	0
78650-26	Csf leakage imaging	R26C	Covered	43.59	43.59	1 XXX	0	0	0	0	0
78650-TC	Csf leakage imaging	R26C	Covered	430.40	430.40	1 XXX	0	0	0	0	0
78660-00	Nuclear exam of tear flow	R26C	Covered	252.36	252.36	1 XXX	0	0	0	0	0
78660-26	Nuclear exam of tear flow	R26C	Covered	37.43	37.43	1 XXX	0	0	0	0	0
78660-TC	Nuclear exam of tear flow	R26C	Covered	214.93	214.93	1 XXX	0	0	0	0	0
77799-TC	Unlisted px clin brachytx	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78099-00	Unlisted endocrine px dx nuc	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78099-26	Unlisted endocrine px dx nuc	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78700-00	Kidney imaging morphol	R26C	Covered	301.88	301.88	1 XXX	0	0	0	0	0
78700-26	Kidney imaging morphol	R26C	Covered	36.50	36.50	1 XXX	0	0	0	0	0
78700-TC	Kidney imaging morphol	R26C	Covered	265.38	265.38	1 XXX	0	0	0	0	0
78701-00	Kidney imaging with flow	R26C	Covered	398.09	398.09	1 XXX	0	0	0	0	0
78701-26	Kidney imaging with flow	R26C	Covered	40.87	40.87	1 XXX	0	0	0	0	0
78701-TC	Kidney imaging with flow	R26C	Covered	357.22	357.22	1 XXX	0	0	0	0	0
78707-00	K flow/funcnt image w/o drug	R26C	Covered	408.64	408.64	1 XXX	0	0	0	0	0
78707-26	K flow/funcnt image w/o drug	R26C	Covered	77.94	77.94	1 XXX	0	0	0	0	0
78707-TC	K flow/funcnt image w/o drug	R26C	Covered	330.70	330.70	1 XXX	0	0	0	0	0
78708-00	K flow/funcnt image w/drug	R26C	Covered	328.85	328.85	1 XXX	0	0	0	0	0
78708-26	K flow/funcnt image w/drug	R26C	Covered	99.00	99.00	1 XXX	0	0	0	0	0
78708-TC	K flow/funcnt image w/drug	R26C	Covered	229.85	229.85	1 XXX	0	0	0	0	0
78709-00	K flow/funcnt image multiple	R26C	Covered	642.51	642.51	1 XXX	0	0	0	0	0
78709-26	K flow/funcnt image multiple	R26C	Covered	115.09	115.09	1 XXX	0	0	0	0	0
78709-TC	K flow/funcnt image multiple	R26C	Covered	527.42	527.42	1 XXX	0	0	0	0	0
78725-00	Kidney function study	R26C	Covered	183.09	183.09	1 XXX	0	0	0	0	0
78725-26	Kidney function study	R26C	Covered	30.26	30.26	1 XXX	0	0	0	0	0
78725-TC	Kidney function study	R26C	Covered	152.83	152.83	1 XXX	0	0	0	0	0
78730-00	Urinary bladder retention	R26C	Covered	131.41	131.41	1 ZZZ	0	0	0	0	0
78730-26	Urinary bladder retention	R26C	Covered	13.64	13.64	1 ZZZ	0	0	0	0	0
78730-TC	Urinary bladder retention	R26C	Covered	117.76	117.76	1 ZZZ	0	0	0	0	0
78740-00	Ureteral reflux study	R26C	Covered	402.31	402.31	1 XXX	0	0	0	0	0
78740-26	Ureteral reflux study	R26C	Covered	47.03	47.03	1 XXX	0	0	0	0	0
78740-TC	Ureteral reflux study	R26C	Covered	355.28	355.28	1 XXX	0	0	0	0	0
78761-00	Testicular imaging w/flow	R26C	Covered	374.69	374.69	1 XXX	0	0	0	0	0
78761-26	Testicular imaging w/flow	R26C	Covered	59.51	59.51	1 XXX	0	0	0	0	0
78761-TC	Testicular imaging w/flow	R26C	Covered	315.18	315.18	1 XXX	0	0	0	0	0
78099-TC	Unlisted endocrine px dx nuc	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78199-00	Unlstd hematop ret/endo lymf	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78199-26	Unlstd hematop ret/endo lymf	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78800-00	Rp locljz tum 1 area 1 d img	R26C	Covered	442.33	442.33	1 XXX	0	0	0	0	0
78800-26	Rp locljz tum 1 area 1 d img	R26C	Covered	52.76	52.76	1 XXX	0	0	0	0	0
78800-TC	Rp locljz tum 1 area 1 d img	R26C	Covered	389.56	389.56	1 XXX	0	0	0	0	0
78801-00	Rp locljz tum 2+area 1+d img	R26C	Covered	475.52	475.52	1 XXX	0	0	0	0	0
78801-26	Rp locljz tum 2+area 1+d img	R26C	Covered	59.43	59.43	1 XXX	0	0	0	0	0

78801-TC	Rp loclczj tum 2+area 1+d img	R26C	Covered	416.08	416.08	1 XXX	0	0	0	0	0
78802-00	Rp loclczj tum whbdy 1 d img	R26C	Covered	537.98	537.98	1 XXX	4	0	0	0	0
78802-26	Rp loclczj tum whbdy 1 d img	R26C	Covered	64.98	64.98	1 XXX	4	0	0	0	0
78802-TC	Rp loclczj tum whbdy 1 d img	R26C	Covered	473.00	473.00	1 XXX	4	0	0	0	0
78803-00	Rp loclczj tum spect 1 area	R26C	Covered	663.72	663.72	1 XXX	4	0	0	0	0
78803-26	Rp loclczj tum spect 1 area	R26C	Covered	88.48	88.48	1 XXX	4	0	0	0	0
78803-TC	Rp loclczj tum spect 1 area	R26C	Covered	575.24	575.24	1 XXX	4	0	0	0	0
78804-00	Rp loclczj tum whbdy 2+d img	R26C	Covered	1124.74	1124.74	1 XXX	0	0	0	0	0
78804-26	Rp loclczj tum whbdy 2+d img	R26C	Covered	82.32	82.32	1 XXX	0	0	0	0	0
78804-TC	Rp loclczj tum whbdy 2+d img	R26C	Covered	1042.42	1042.42	1 XXX	0	0	0	0	0
78808-00	Iv inj ra drug dx study	R26C	Covered	75.07	75.07	5 XXX	0	0	0	0	0
78811-00	Pet image ltd area	RMCD	Covered	860.24	860.24	1 XXX	0	0	0	0	0
78811-26	Pet image ltd area	RMCD	Covered	124.98	124.98	1 XXX	0	0	0	0	0
78811-TC	Pet image ltd area	RMCD	Covered	814.93	814.93	1 XXX	0	0	0	0	0
78812-00	Pet image skull-thigh	RMCD	Covered	971.98	971.98	1 XXX	0	0	0	0	0
78812-26	Pet image skull-thigh	RMCD	Covered	157.83	157.83	1 XXX	0	0	0	0	0
78812-TC	Pet image skull-thigh	RMCD	Covered	922.54	922.54	1 XXX	0	0	0	0	0
78813-00	Pet image full body	RMCD	Covered	972.46	972.46	1 XXX	0	0	0	0	0
78813-26	Pet image full body	RMCD	Covered	161.44	161.44	1 XXX	0	0	0	0	0
78813-TC	Pet image full body	RMCD	Covered	922.22	922.22	1 XXX	0	0	0	0	0
78814-00	Pet image w/ct lmt d	RMCD	Covered	979.36	979.36	1 XXX	0	0	0	0	0
78814-26	Pet image w/ct lmt d	RMCD	Covered	178.82	178.82	1 XXX	0	0	0	0	0
78814-TC	Pet image w/ct lmt d	RMCD	Covered	923.18	923.18	1 XXX	0	0	0	0	0
78815-00	Pet image w/ct skull-thigh	RMCD	Covered	986.08	986.08	1 XXX	0	0	0	0	0
78815-26	Pet image w/ct skull-thigh	RMCD	Covered	199.27	199.27	1 XXX	0	0	0	0	0
78815-TC	Pet image w/ct skull-thigh	RMCD	Covered	923.55	923.55	1 XXX	0	0	0	0	0
78816-00	Pet image w/ct full body	RMCD	Covered	986.53	986.53	1 XXX	0	0	0	0	0
78816-26	Pet image w/ct full body	RMCD	Covered	201.58	201.58	1 XXX	0	0	0	0	0
78816-TC	Pet image w/ct full body	RMCD	Covered	923.84	923.84	1 XXX	0	0	0	0	0
78830-00	Rp loclczj tum spect w/ct 1	R26C	Covered	831.07	831.07	1 XXX	0	0	0	0	0
78830-26	Rp loclczj tum spect w/ct 1	R26C	Covered	118.66	118.66	1 XXX	0	0	0	0	0
78830-TC	Rp loclczj tum spect w/ct 1	R26C	Covered	712.41	712.41	1 XXX	0	0	0	0	0
78831-00	Rp loclczj tum spect 2 areas	R26C	Covered	1244.66	1244.66	1 XXX	0	0	0	0	0
78831-26	Rp loclczj tum spect 2 areas	R26C	Covered	149.20	149.20	1 XXX	0	0	0	0	0
78831-TC	Rp loclczj tum spect 2 areas	R26C	Covered	1095.46	1095.46	1 XXX	0	0	0	0	0
78832-00	Rp loclczj tum spect w/ct 2	R26C	Covered	1574.75	1574.75	1 XXX	0	0	0	0	0
78832-26	Rp loclczj tum spect w/ct 2	R26C	Covered	170.03	170.03	1 XXX	0	0	0	0	0
78832-TC	Rp loclczj tum spect w/ct 2	R26C	Covered	1404.72	1404.72	1 XXX	0	0	0	0	0
78835-00	Rp quan meas single area	R26C	Covered	169.06	169.06	1 ZZZ	0	0	0	0	0
78835-26	Rp quan meas single area	R26C	Covered	37.07	37.07	1 ZZZ	0	0	0	0	0
78835-TC	Rp quan meas single area	R26C	Covered	131.99	131.99	1 ZZZ	0	0	0	0	0
78199-TC	Unlstd hematop ret/endo lym p	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78282-00	Gi protein loss exam	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78282-TC	Gi protein loss exam	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
79005-00	Nuclear rx oral admin	R26C	Covered	246.95	246.95	1 XXX	0	0	0	0	0
79005-26	Nuclear rx oral admin	R26C	Covered	148.54	148.54	1 XXX	0	0	0	0	0
79005-TC	Nuclear rx oral admin	R26C	Covered	98.41	98.41	1 XXX	0	0	0	0	0
79101-00	Nuclear rx iv admin	R26C	Covered	268.96	268.96	1 XXX	0	0	0	0	0
79101-26	Nuclear rx iv admin	R26C	Covered	166.03	166.03	1 XXX	0	0	0	0	0
79101-TC	Nuclear rx iv admin	R26C	Covered	102.94	102.94	1 XXX	0	0	0	0	0
79200-00	Nuclear rx intracav admin	R26C	Covered	241.49	241.49	1 XXX	0	0	0	0	0
79200-26	Nuclear rx intracav admin	R26C	Covered	141.10	141.10	1 XXX	0	0	0	0	0
79200-TC	Nuclear rx intracav admin	R26C	Covered	100.40	100.40	1 XXX	0	0	0	0	0
78299-00	Unlisted gi px dx nuc med	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0

78299-26	Unlisted gi px dx nuc med	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78299-TC	Unlisted gi px dx nuc med	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
79403-00	Hematopoietic nuclear tx	R26C	Covered	389.57	389.57	1 XXX	0	0	0	0	0
79403-26	Hematopoietic nuclear tx	R26C	Covered	195.99	195.99	1 XXX	0	0	0	0	0
79403-TC	Hematopoietic nuclear tx	R26C	Covered	193.58	193.58	1 XXX	0	0	0	0	0
79440-00	Nuclear rx intra-articular	R26C	Covered	216.87	216.87	1 XXX	0	0	0	0	0
79440-26	Nuclear rx intra-articular	R26C	Covered	141.10	141.10	1 XXX	0	0	0	0	0
79440-TC	Nuclear rx intra-articular	R26C	Covered	75.77	75.77	1 XXX	0	0	0	0	0
78399-00	Unlisted musckel px dx nuc	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78399-26	Unlisted musckel px dx nuc	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78399-TC	Unlisted musckel px dx nuc	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78414-00	Non-imaging heart function	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78414-TC	Non-imaging heart function	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78499-00	Unlisted cv px dx nuc med	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
80047-00	Metabolic panel ionized ca	LCMS	Covered	13.73	13.73	9 XXX	9	9	9	9	9
80048-00	Metabolic panel total ca	LCMS	Covered	8.46	8.46	9 XXX	9	9	9	9	9
80050-00	General health panel	RMCD	Covered	34.10	34.10	9 XXX	9	9	9	9	9
80051-00	Electrolyte panel	LCMS	Covered	7.01	7.01	9 XXX	9	9	9	9	9
80053-00	Comprehen metabolic panel	LCMS	Covered	10.56	10.56	9 XXX	9	9	9	9	9
80055-00	Obstetric panel	LCMS	Covered	47.81	47.81	9 XXX	9	9	9	9	9
80061-00	Lipid panel	LCMS	Covered	13.39	13.39	9 XXX	9	9	9	9	9
80069-00	Renal function panel	LCMS	Covered	8.68	8.68	9 XXX	9	9	9	9	9
80074-00	Acute hepatitis panel	LCMS	Covered	47.63	47.63	9 XXX	9	9	9	9	9
80076-00	Hepatic function panel	LCMS	Covered	8.17	8.17	9 XXX	9	9	9	9	9
80081-00	Obstetric panel	LCMS	Covered	74.86	74.86	9 XXX	9	9	9	9	9
80143-00	Drug assay acetaminophen	LCMS	Covered	18.64	18.64	9 XXX	9	9	9	9	9
80145-00	Drug assay adalimumab	LCMS	Covered	38.57	38.57	9 XXX	9	9	9	9	9
80150-00	Assay of amikacin	LCMS	Covered	15.08	15.08	9 XXX	9	9	9	9	9
80151-00	Drug assay amiodarone	LCMS	Covered	18.64	18.64	9 XXX	9	9	9	9	9
80155-00	Drug assay caffeine	LCMS	Covered	38.57	38.57	9 XXX	9	9	9	9	9
80156-00	Assay carbamazepine total	LCMS	Covered	14.57	14.57	9 XXX	9	9	9	9	9
80157-00	Assay carbamazepine free	LCMS	Covered	13.25	13.25	9 XXX	9	9	9	9	9
80158-00	Drug assay cyclosporine	LCMS	Covered	18.05	18.05	9 XXX	9	9	9	9	9
80159-00	Drug assay clozapine	LCMS	Covered	20.15	20.15	9 XXX	9	9	9	9	9
80161-00	Asy carbamazepin 10,11-epxid	LCMS	Covered	18.64	18.64	9 XXX	9	9	9	9	9
80162-00	Assay of digoxin total	LCMS	Covered	13.28	13.28	9 XXX	9	9	9	9	9
88120-00	Cytp urne 3-5 probes ea spec	NCOV	Not Covered	Code not covered	Code not co	1 XXX	0	0	0	0	0
80164-00	Assay dipropylacetic acid tot	LCMS	Covered	13.54	13.54	9 XXX	9	9	9	9	9
74263-TC	Ct colonography screening	NCOV	Not Covered	Code not covered	Code not co	1 XXX	9	9	9	9	9
80167-00	Drug assay felbamate	LCMS	Covered	18.64	18.64	9 XXX	9	9	9	9	9
80168-00	Assay of ethosuximide	LCMS	Covered	16.34	16.34	9 XXX	9	9	9	9	9
80169-00	Drug assay everolimus	LCMS	Covered	13.73	13.73	9 XXX	9	9	9	9	9
80170-00	Assay of gentamicin	LCMS	Covered	16.38	16.38	9 XXX	9	9	9	9	9
80171-00	Drug screen quant gabapentin	LCMS	Covered	21.67	21.67	9 XXX	9	9	9	9	9
80173-00	Assay of haloperidol	LCMS	Covered	15.78	15.78	9 XXX	9	9	9	9	9
80175-00	Drug screen quan lamotrigine	LCMS	Covered	13.25	13.25	9 XXX	9	9	9	9	9
80176-00	Assay of lidocaine	LCMS	Covered	14.69	14.69	9 XXX	9	9	9	9	9
80177-00	Drug scrn quan levetiracetam	LCMS	Covered	13.25	13.25	9 XXX	9	9	9	9	9
80178-00	Assay of lithium	LCMS	Covered	6.61	6.61	9 XXX	9	9	9	9	9
80179-00	Drug assay salicylate	LCMS	Covered	18.64	18.64	9 XXX	9	9	9	9	9
80180-00	Drug scrn quan mycophenolate	LCMS	Covered	18.05	18.05	9 XXX	9	9	9	9	9
80181-00	Drug assay flecainide	LCMS	Covered	18.64	18.64	9 XXX	9	9	9	9	9
80183-00	Drug scrn quant oxcarbazepin	LCMS	Covered	13.25	13.25	9 XXX	9	9	9	9	9
80184-00	Assay of phenobarbital	LCMS	Covered	15.30	15.30	9 XXX	9	9	9	9	9

80185-00	Assay of phenytoin total	LCMS	Covered	13.25	13.25	9 XXX	9	9	9	9	9
80186-00	Assay of phenytoin free	LCMS	Covered	13.76	13.76	9 XXX	9	9	9	9	9
80187-00	Drug assay posaconazole	LCMS	Covered	27.11	27.11	9 XXX	9	9	9	9	9
80188-00	Assay of primidone	LCMS	Covered	16.59	16.59	9 XXX	9	9	9	9	9
80189-00	Drug assay itraconazole	LCMS	Covered	27.11	27.11	9 XXX	9	9	9	9	9
80190-00	Assay of procainamide	LCMS	Covered	60.00	60.00	9 XXX	9	9	9	9	9
80192-00	Assay of procainamide	LCMS	Covered	16.75	16.75	9 XXX	9	9	9	9	9
80193-00	Drug assay leflunomide	LCMS	Covered	38.57	38.57	9 XXX	9	9	9	9	9
80194-00	Assay of quinidine	LCMS	Covered	14.60	14.60	9 XXX	9	9	9	9	9
80195-00	Assay of sirolimus	LCMS	Covered	13.73	13.73	9 XXX	9	9	9	9	9
80197-00	Assay of tacrolimus	LCMS	Covered	13.73	13.73	9 XXX	9	9	9	9	9
80198-00	Assay of theophylline	LCMS	Covered	14.14	14.14	9 XXX	9	9	9	9	9
80199-00	Drug screen quant tiagabine	LCMS	Covered	27.11	27.11	9 XXX	9	9	9	9	9
80200-00	Assay of tobramycin	LCMS	Covered	16.13	16.13	9 XXX	9	9	9	9	9
80201-00	Assay of topiramate	LCMS	Covered	11.92	11.92	9 XXX	9	9	9	9	9
80202-00	Assay of vancomycin	LCMS	Covered	13.54	13.54	9 XXX	9	9	9	9	9
80203-00	Drug screen quant zonisamide	LCMS	Covered	13.25	13.25	9 XXX	9	9	9	9	9
80204-00	Drug assay methotrexate	LCMS	Covered	38.57	38.57	9 XXX	9	9	9	9	9
80210-00	Drug assay rifinamide	LCMS	Covered	27.11	27.11	9 XXX	9	9	9	9	9
80220-00	Drug asy hydroxychloroquine	RMCD	Covered	18.10	18.10	9 XXX	9	9	9	9	9
80230-00	Drug assay infliximab	LCMS	Covered	38.57	38.57	9 XXX	9	9	9	9	9
80235-00	Drug assay lacosamide	LCMS	Covered	27.11	27.11	9 XXX	9	9	9	9	9
80280-00	Drug assay vedolizumab	LCMS	Covered	38.57	38.57	9 XXX	9	9	9	9	9
80285-00	Drug assay voriconazole	LCMS	Covered	27.11	27.11	9 XXX	9	9	9	9	9
80299-00	Quantitative assay drug	LCMS	Covered	18.64	18.64	9 XXX	9	9	9	9	9
80305-00	Drug test prsmv dir opt obs	LCMS	Covered	12.60	12.60	9 XXX	9	9	9	9	9
80306-00	Drug test prsmv instrmnt	LCMS	Covered	17.14	17.14	9 XXX	9	9	9	9	9
80307-00	Drug test prsmv chem anlyzr	LCMS	Covered	62.14	62.14	9 XXX	9	9	9	9	9
15820-00	Revision of lower eyelid	NCOV	Not Covered	Code not covered	Code not covered	0 090	2	1	0	0	0
43831-00	Place gastrostomy tube	NCOV	Not Covered	Code not covered	Code not covered	0 090	2	0	2	1	0
88120-TC	Cytp urne 3-5 probes ea spec	NCOV	Not Covered	Code not covered	Code not covered	1 XXX	0	0	0	0	0
99475-00	Ped crit care age 2-5 init	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
0003U-00	Measurement of proteins associated with ovarian	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
	Measurement of tumor necrosis factor receptor 1A,										
0105U-00	receptor superfamily 2	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
54400-00	Insert semi-rigid prosthesis	NCOV	Not Covered	Code not covered	Code not covered	0 090	2	0	1	1	0
74262-00	Ct colonography dx w/dye	NCOV	Not Covered	Code not covered	Code not covered	1 XXX	4	0	0	0	0
15776-00	Hair trnspl >15 punch grafts	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	0	0	0	0
	Evaluation of gastric emptying by measurement of										
0106U-00	radiolabeled carbon dioxide in	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
55400-00	Repair of sperm duct	NCOV	Not Covered	Code not covered	Code not covered	0 090	2	1	2	1	0
0231U-00	Gene analysis (calcium voltage-gated channel	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0117U-00	Analysis of 11 biochemical substances in urine to	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
97610-00	Low frequency non-thermal us	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
88121-00	Cytp urine 3-5 probes cmptr	NCOV	Not Covered	Code not covered	Code not covered	1 XXX	0	0	0	0	0
74261-00	Ct colonography dx	NCOV	Not Covered	Code not covered	Code not covered	1 XXX	4	0	0	0	0
46948-00	Int hrhc tranal dartlztj 2+	NCOV	Not Covered	Code not covered	Code not covered	0 090	2	0	1	0	0
0095U-00	Test for markers of eosinophilic inflammation of	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0021U-00	Detection of 8 autoantibodies in prostate tissue	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0089U-00	Gene expression profiling of melanoma in superficial	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
	Measurement of PCA3 gene in urine and prostate-										
0113U-00	specific antigen (PSA) in serum	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0203U-00	mRNA gene expression profiling of 17 genes in	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9

0289U-00	mRNA gene expression profiling of 24 genes in whole blood for detection of	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0290U-00	mRNA gene expression profiling of 36 genes in whole blood for pain management	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0293U-00	mRNA gene expression profiling of 54 genes in whole blood for detection of	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0294U-00	mRNA gene expression profiling of 18 genes in whole blood for detection of	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0060U-00	Gene analysis for identical twins in maternal blood	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0252U-00	Analysis of fetal DNA, short tandem-repeat comparative analysis, for abnormal	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0254U-00	Preimplantation genetic assessment of embryo by gene sequence analysis of 24	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0063U-00	Testing for amines associated with autism spectrum	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0247U-00	Quantitative measurement of insulin-like growth factor-binding protein 4 and	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0263U-00	LC-MS/MS spectroscopy of 16 central carbon metabolites associated with autism	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0134U-00	Targeted mRNA sequence analysis of 18 genes associated with hereditary pan	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0029U-00	Gene analysis of targeted sequences for adverse drug reactions and drug response	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0132U-00	Targeted mRNA sequence analysis of 17 genes associated with hereditary ovarian	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0219U-00	Gene analysis of human immunodeficiency virus targeted sequence analysis for	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
88121-TC	Cytp urine 3-5 probes cmptr	NCOV	Not Covered	Code not covered	Code not covered	1 XXX	0	0	0	0	0
0084U-00	DNA red blood cell antigen typing	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0246U-00	Blood typing for 16 or more blood groups with phenotype prediction of 51 or	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0131U-00	Targeted mRNA sequence analysis of 13 genes associated with hereditary breast	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0135U-00	Targeted mRNA sequence analysis of 12 genes	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
74262-TC	Ct colonography dx w/dye	NCOV	Not Covered	Code not covered	Code not covered	1 XXX	4	0	0	0	0
77768-00	Hdr rdnc1 skn surf brachytx	NCOV	Not Covered	Code not covered	Code not covered	1 XXX	0	0	0	0	0
99472-00	Ped critical care subsq	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
0133U-00	Targeted mRNA sequence analysis of 11 genes associated with hereditary prostate	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0111U-00	Gene analysis (KRAS and NRAS) in prostate tumor	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
99469-00	Neonate crit care subsq	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
0070U-00	Gene analysis (cytochrome P450, family 2, subfamily	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
15775-00	Hair trnsp1 1-15 punch grfts	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	0	0	0	0
0333U-00	Surveillance for liver cancer in high risk patients	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0268U-00	Genomic sequence analysis of 15 genes for detection of abnormalities associated	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0269U-00	Genomic sequence analysis of 22 genes for detection of abnormalities associated	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0270U-00	Genomic sequence analysis of 20 genes for detection of abnormalities associated	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0271U-00	Genomic sequence analysis of 24 genes for detection of abnormalities associated	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0272U-00	Comprehensive genomic sequence analysis of 60	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0273U-00	Genomic sequence analysis of 9 genes for detection of abnormalities associated	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9

0274U-00	Genomic sequence analysis of 62 genes for detection of abnormalities associated	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0277U-00	Genomic sequence analysis of 40 genes for detection of abnormalities associated	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
80400-00	Acth stimulation panel	LCMS	Covered	32.62	32.62	9 XXX	9	9	9	9	9
80402-00	Acth stimulation panel	LCMS	Covered	86.96	86.96	9 XXX	9	9	9	9	9
80406-00	Acth stimulation panel	LCMS	Covered	78.26	78.26	9 XXX	9	9	9	9	9
80408-00	Aldosterone suppression eval	LCMS	Covered	125.50	125.50	9 XXX	9	9	9	9	9
80410-00	Calcitonin stimulat panel	LCMS	Covered	80.37	80.37	9 XXX	9	9	9	9	9
80412-00	Crh stimulation panel	LCMS	Covered	801.62	801.62	9 XXX	9	9	9	9	9
80414-00	Testosterone response panel	LCMS	Covered	51.64	51.64	9 XXX	9	9	9	9	9
80415-00	Tot estradiol response panel	LCMS	Covered	55.89	55.89	9 XXX	9	9	9	9	9
80416-00	Renin stimulation panel	LCMS	Covered	209.32	209.32	9 XXX	9	9	9	9	9
80417-00	Renin stimulation panel	LCMS	Covered	43.99	43.99	9 XXX	9	9	9	9	9
80418-00	Pituitary evaluation panel	LCMS	Covered	579.48	579.48	9 XXX	9	9	9	9	9
80420-00	Dexamethasone panel	LCMS	Covered	161.88	161.88	9 XXX	9	9	9	9	9
80422-00	Glucagon tolerance panel	LCMS	Covered	46.07	46.07	9 XXX	9	9	9	9	9
80424-00	Glucagon tolerance panel	LCMS	Covered	50.50	50.50	9 XXX	9	9	9	9	9
80426-00	Gonadotropin hormone panel	LCMS	Covered	148.41	148.41	9 XXX	9	9	9	9	9
80428-00	Growth hormone panel	LCMS	Covered	66.70	66.70	9 XXX	9	9	9	9	9
80430-00	Growth hormone panel	LCMS	Covered	129.33	129.33	9 XXX	9	9	9	9	9
80432-00	Insulin suppression panel	LCMS	Covered	165.61	165.61	9 XXX	9	9	9	9	9
80434-00	Insulin tolerance panel	LCMS	Covered	285.03	285.03	9 XXX	9	9	9	9	9
80435-00	Insulin tolerance panel	LCMS	Covered	103.00	103.00	9 XXX	9	9	9	9	9
80436-00	Metyrapone panel	LCMS	Covered	91.16	91.16	9 XXX	9	9	9	9	9
80438-00	Trh stimulation panel	LCMS	Covered	50.41	50.41	9 XXX	9	9	9	9	9
80439-00	Trh stimulation panel	LCMS	Covered	67.21	67.21	9 XXX	9	9	9	9	9
80503-00	Path clin consltj sf 5-20	R26C	Covered	48.87	39.17	0 XXX	0	0	0	0	0
80504-00	Path clin consltj mod 21-40	R26C	Covered	95.65	84.00	0 XXX	0	0	0	0	0
80505-00	Path clin consltj high 41-60	R26C	Covered	171.67	157.44	0 XXX	0	0	0	0	0
80506-00	Path clin consltj prolng svc	R26C	Covered	75.98	75.98	1 ZZZ	0	0	0	0	0
81000-00	Urinalysis nonauto w/scope	LCMS	Covered	4.02	4.02	9 XXX	9	9	9	9	9
81001-00	Urinalysis auto w/scope	LCMS	Covered	3.17	3.17	9 XXX	9	9	9	9	9
81002-00	Urinalysis nonauto w/o scope	LCMS	Covered	3.48	3.48	9 XXX	9	9	9	9	9
81003-00	Urinalysis auto w/o scope	LCMS	Covered	2.25	2.25	9 XXX	9	9	9	9	9
81005-00	Urinalysis	LCMS	Covered	2.17	2.17	9 XXX	9	9	9	9	9
81007-00	Urine screen for bacteria	LCMS	Covered	29.98	29.98	9 XXX	9	9	9	9	9
81015-00	Microscopic exam of urine	LCMS	Covered	3.05	3.05	9 XXX	9	9	9	9	9
81020-00	Urinalysis glass test	LCMS	Covered	4.70	4.70	9 XXX	9	9	9	9	9
81025-00	Urine pregnancy test	LCMS	Covered	8.61	8.61	9 XXX	9	9	9	9	9
81050-00	Urinalysis volume measure	LCMS	Covered	3.64	3.64	9 XXX	9	9	9	9	9
78499-26	Unlisted cv px dx nuc med	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
81105-00	Hpa-1 genotyping	LCMS	Covered	122.22	122.22	9 XXX	9	9	9	9	9
81106-00	Hpa-2 genotyping	LCMS	Covered	122.22	122.22	9 XXX	9	9	9	9	9
81107-00	Hpa-3 genotyping	LCMS	Covered	122.22	122.22	9 XXX	9	9	9	9	9
81108-00	Hpa-4 genotyping	LCMS	Covered	122.22	122.22	9 XXX	9	9	9	9	9
81109-00	Hpa-5 genotyping	LCMS	Covered	122.22	122.22	9 XXX	9	9	9	9	9
81110-00	Hpa-6 genotyping	LCMS	Covered	122.22	122.22	9 XXX	9	9	9	9	9
81111-00	Hpa-9 genotyping	LCMS	Covered	122.22	122.22	9 XXX	9	9	9	9	9
81112-00	Hpa-15 genotyping	LCMS	Covered	122.22	122.22	9 XXX	9	9	9	9	9
81120-00	Idh1 common variants	LCMS	Covered	193.25	193.25	9 XXX	9	9	9	9	9
81121-00	Idh2 common variants	LCMS	Covered	295.79	295.79	9 XXX	9	9	9	9	9
81161-00	Dmd dup/delet analysis	LCMS	Covered	279.00	279.00	9 XXX	9	9	9	9	9
81162-00	Brca1&2 gen full seq dup/del	LCMS	Covered	1824.88	1824.88	9 XXX	9	9	9	9	9

81163-00	Brca1&2 gene full seq alys	LCMS	Covered	468.00	468.00	9 XXX	9	9	9	9	9
81164-00	Brca1&2 gen ful dup/del alys	LCMS	Covered	584.23	584.23	9 XXX	9	9	9	9	9
81165-00	Brca1 gene full seq alys	LCMS	Covered	282.88	282.88	9 XXX	9	9	9	9	9
81166-00	Brca1 gene full dup/del alys	LCMS	Covered	301.35	301.35	9 XXX	9	9	9	9	9
81167-00	Brca2 gene full dup/del alys	LCMS	Covered	282.88	282.88	9 XXX	9	9	9	9	9
81168-00	Ccnd1/igh translocation alys	LCMS	Covered	207.31	207.31	9 XXX	9	9	9	9	9
81170-00	Abl1 gene	LCMS	Covered	300.00	300.00	9 XXX	9	9	9	9	9
81171-00	Aff2 gen aly detc abnl allele	LCMS	Covered	137.00	137.00	9 XXX	9	9	9	9	9
81172-00	Aff2 gen alys charac alleles	LCMS	Covered	274.83	274.83	9 XXX	9	9	9	9	9
81173-00	Ar gene full gene sequence	LCMS	Covered	301.35	301.35	9 XXX	9	9	9	9	9
81174-00	Ar gene known famil variant	LCMS	Covered	185.20	185.20	9 XXX	9	9	9	9	9
81175-00	Asx11 full gene sequence	LCMS	Covered	676.50	676.50	9 XXX	9	9	9	9	9
81176-00	Asx11 gene target seq alys	LCMS	Covered	241.90	241.90	9 XXX	9	9	9	9	9
81177-00	Atn1 gene detc abnor alleles	LCMS	Covered	137.00	137.00	9 XXX	9	9	9	9	9
81178-00	Atxn1 gene detc abnor allele	LCMS	Covered	137.00	137.00	9 XXX	9	9	9	9	9
81179-00	Atxn2 gene detc abnor allele	LCMS	Covered	137.00	137.00	9 XXX	9	9	9	9	9
81180-00	Atxn3 gene detc abnor allele	LCMS	Covered	137.00	137.00	9 XXX	9	9	9	9	9
81181-00	Atxn7 gene detc abnor allele	LCMS	Covered	137.00	137.00	9 XXX	9	9	9	9	9
81182-00	Atxn8os gen detc abnor allele	LCMS	Covered	137.00	137.00	9 XXX	9	9	9	9	9
81183-00	Atxn10 gene detc abnor allele	LCMS	Covered	137.00	137.00	9 XXX	9	9	9	9	9
81184-00	Cacna1a gen detc abnor allele	LCMS	Covered	137.00	137.00	9 XXX	9	9	9	9	9
81185-00	Cacna1a gene full gene seq	LCMS	Covered	846.27	846.27	9 XXX	9	9	9	9	9
81186-00	Cacna1a gen known famil vrnt	LCMS	Covered	185.20	185.20	9 XXX	9	9	9	9	9
81187-00	Cnbp gene detc abnor allele	LCMS	Covered	137.00	137.00	9 XXX	9	9	9	9	9
81188-00	Cstb gene detc abnor allele	LCMS	Covered	137.00	137.00	9 XXX	9	9	9	9	9
81189-00	Cstb gene full gene sequence	LCMS	Covered	274.83	274.83	9 XXX	9	9	9	9	9
81190-00	Cstb gene known famil vrnt	LCMS	Covered	185.20	185.20	9 XXX	9	9	9	9	9
81191-00	Ntrk1 translocation analysis	LCMS	Covered	207.31	207.31	9 XXX	9	9	9	9	9
81192-00	Ntrk2 translocation analysis	LCMS	Covered	207.31	207.31	9 XXX	9	9	9	9	9
81193-00	Ntrk3 translocation analysis	LCMS	Covered	207.31	207.31	9 XXX	9	9	9	9	9
81194-00	Ntrk translocation analysis	LCMS	Covered	518.28	518.28	9 XXX	9	9	9	9	9
81200-00	Aspa gene	LCMS	Covered	47.25	47.25	9 XXX	9	9	9	9	9
81201-00	Apc gene full sequence	LCMS	Covered	780.00	780.00	9 XXX	9	9	9	9	9
81202-00	Apc gene known fam variants	LCMS	Covered	280.00	280.00	9 XXX	9	9	9	9	9
81203-00	Apc gene dup/delet variants	LCMS	Covered	200.00	200.00	9 XXX	9	9	9	9	9
81204-00	Ar gene charac alleles	LCMS	Covered	137.00	137.00	9 XXX	9	9	9	9	9
81205-00	Bckdhb gene	LCMS	Covered	94.99	94.99	9 XXX	9	9	9	9	9
81206-00	Bcr/abl1 gene major bp	LCMS	Covered	163.96	163.96	9 XXX	9	9	9	9	9
81207-00	Bcr/abl1 gene minor bp	LCMS	Covered	144.84	144.84	9 XXX	9	9	9	9	9
81208-00	Bcr/abl1 gene other bp	LCMS	Covered	214.62	214.62	9 XXX	9	9	9	9	9
81209-00	Blm gene	LCMS	Covered	39.31	39.31	9 XXX	9	9	9	9	9
81210-00	Braf gene	LCMS	Covered	175.40	175.40	9 XXX	9	9	9	9	9
81212-00	Brca1&2 185&5385&6174 vrnt	LCMS	Covered	440.00	440.00	9 XXX	9	9	9	9	9
81215-00	Brca1 gene known famil vrnt	LCMS	Covered	375.25	375.25	9 XXX	9	9	9	9	9
81216-00	Brca2 gene full seq alys	LCMS	Covered	185.12	185.12	9 XXX	9	9	9	9	9
81217-00	Brca2 gene known famil vrnt	LCMS	Covered	375.25	375.25	9 XXX	9	9	9	9	9
81218-00	Cebpa gene full sequence	LCMS	Covered	241.90	241.90	9 XXX	9	9	9	9	9
0278U-00	Genomic sequence analysis of 14 genes for detection of abnormalities associated	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
81220-00	Cftr gene com variants	LCMS	Covered	556.60	556.60	9 XXX	9	9	9	9	9
81221-00	Cftr gene known fam variants	LCMS	Covered	97.22	97.22	9 XXX	9	9	9	9	9
81222-00	Cftr gene dup/delet variants	LCMS	Covered	435.07	435.07	9 XXX	9	9	9	9	9
81223-00	Cftr gene full sequence	LCMS	Covered	499.00	499.00	9 XXX	9	9	9	9	9
81224-00	Cftr gene intron poly t	LCMS	Covered	168.75	168.75	9 XXX	9	9	9	9	9

81225-00	Cyp2c19 gene com variants	LCMS	Covered	291.36	291.36	9 XXX	9	9	9	9	9
81226-00	Cyp2d6 gene com variants	LCMS	Covered	450.91	450.91	9 XXX	9	9	9	9	9
81227-00	Cyp2c9 gene com variants	LCMS	Covered	174.81	174.81	9 XXX	9	9	9	9	9
81228-00	Cytog alys chrml abnr cgh	LCMS	Covered	900.00	900.00	9 XXX	9	9	9	9	9
81229-00	Cytog alys chrml abnr snpcgh	LCMS	Covered	1160.00	1160.00	9 XXX	9	9	9	9	9
74261-TC	Ct colonography dx	NCOV	Not Covered	Code not covered	Code not covered	1 XXX	4	0	0	0	0
0236U-00	Gene analysis (survival of motor neuron 1, telomeric	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0071U-00	Gene analysis (cytochrome P450, family 2, subfamily	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
81233-00	Btk gene common variants	LCMS	Covered	175.40	175.40	9 XXX	9	9	9	9	9
81234-00	Dmpk gene detc abnor allele	LCMS	Covered	137.00	137.00	9 XXX	9	9	9	9	9
81235-00	Egfr gene com variants	LCMS	Covered	324.58	324.58	9 XXX	9	9	9	9	9
81236-00	Ezh2 gene full gene sequence	LCMS	Covered	282.88	282.88	9 XXX	9	9	9	9	9
81237-00	Ezh2 gene common variants	LCMS	Covered	175.40	175.40	9 XXX	9	9	9	9	9
81238-00	F9 full gene sequence	LCMS	Covered	600.00	600.00	9 XXX	9	9	9	9	9
81239-00	Dmpk gene charac alleles	LCMS	Covered	274.83	274.83	9 XXX	9	9	9	9	9
81240-00	F2 gene	LCMS	Covered	65.69	65.69	9 XXX	9	9	9	9	9
81241-00	F5 gene	LCMS	Covered	73.37	73.37	9 XXX	9	9	9	9	9
81242-00	Fancc gene	LCMS	Covered	36.62	36.62	9 XXX	9	9	9	9	9
81243-00	Fmr1 gen aly detc abnl allele	LCMS	Covered	57.04	57.04	9 XXX	9	9	9	9	9
81244-00	Fmr1 gen alys charac alleles	LCMS	Covered	44.89	44.89	9 XXX	9	9	9	9	9
81245-00	Flt3 gene	LCMS	Covered	165.51	165.51	9 XXX	9	9	9	9	9
81246-00	Flt3 gene analysis	LCMS	Covered	83.00	83.00	9 XXX	9	9	9	9	9
81247-00	G6pd gene alys cmn variant	LCMS	Covered	174.81	174.81	9 XXX	9	9	9	9	9
81248-00	G6pd known familial variant	LCMS	Covered	375.25	375.25	9 XXX	9	9	9	9	9
81249-00	G6pd full gene sequence	LCMS	Covered	600.00	600.00	9 XXX	9	9	9	9	9
81250-00	G6pc gene	LCMS	Covered	58.49	58.49	9 XXX	9	9	9	9	9
81251-00	Gba gene	LCMS	Covered	47.25	47.25	9 XXX	9	9	9	9	9
81252-00	Gjb2 gene full sequence	LCMS	Covered	101.12	101.12	9 XXX	9	9	9	9	9
81253-00	Gjb2 gene known fam variants	LCMS	Covered	61.52	61.52	9 XXX	9	9	9	9	9
81254-00	Gjb6 gene com variants	LCMS	Covered	35.00	35.00	9 XXX	9	9	9	9	9
81255-00	Hexa gene	LCMS	Covered	51.45	51.45	9 XXX	9	9	9	9	9
81256-00	Hfe gene	LCMS	Covered	65.36	65.36	9 XXX	9	9	9	9	9
81257-00	Hba1/hba2 gene	LCMS	Covered	102.26	102.26	9 XXX	9	9	9	9	9
81258-00	Hba1/hba2 gene fam vrnt	LCMS	Covered	375.25	375.25	9 XXX	9	9	9	9	9
81259-00	Hba1/hba2 full gene sequence	LCMS	Covered	600.00	600.00	9 XXX	9	9	9	9	9
81260-00	Ikbkap gene	LCMS	Covered	39.31	39.31	9 XXX	9	9	9	9	9
81261-00	Igh gene rearrange amp meth	LCMS	Covered	197.99	197.99	9 XXX	9	9	9	9	9
81262-00	Igh gene rearrang dir probe	LCMS	Covered	68.55	68.55	9 XXX	9	9	9	9	9
81263-00	Igh vari regional mutation	LCMS	Covered	294.52	294.52	9 XXX	9	9	9	9	9
81264-00	Igk rearrangeabn clonal pop	LCMS	Covered	172.73	172.73	9 XXX	9	9	9	9	9
81265-00	Str markers specimen anal	LCMS	Covered	233.07	233.07	9 XXX	9	9	9	9	9
0235U-00	Gene analysis (phosphatase and tensin homolog),	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
99477-00	Init day hosp neonate care	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
	Targeted mRNA sequence analysis of genes										
0130U-00	associated with hereditary colon	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
81269-00	Hba1/hba2 gene dup/del vrnts	LCMS	Covered	202.40	202.40	9 XXX	9	9	9	9	9
81270-00	Jak2 gene	LCMS	Covered	91.66	91.66	9 XXX	9	9	9	9	9
81271-00	Htt gene detc abnor alleles	LCMS	Covered	137.00	137.00	9 XXX	9	9	9	9	9
81272-00	Kit gene targeted seq analys	LCMS	Covered	329.51	329.51	9 XXX	9	9	9	9	9
0237U-00	Gene analysis for cardiac ion channelopathies,	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
81274-00	Htt gene charac alleles	LCMS	Covered	274.83	274.83	9 XXX	9	9	9	9	9
81275-00	Kras gene variants exon 2	LCMS	Covered	193.25	193.25	9 XXX	9	9	9	9	9
	DNA sequence analysis of MLH1, MSH2, MSH6,										
0238U-00	PMS2, and EPCAM for Lynch syndrome	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9

81277-00	Cytogenomic neo microra alys	LCMS	Covered	1160.00	1160.00	9 XXX	9	9	9	9	9
81278-00	Igh@/bcl2 translocation alys	LCMS	Covered	207.31	207.31	9 XXX	9	9	9	9	9
81279-00	Jak2 gene trgt sequence alys	LCMS	Covered	185.20	185.20	9 XXX	9	9	9	9	9
81283-00	Iffn1 gene	LCMS	Covered	73.37	73.37	9 XXX	9	9	9	9	9
81284-00	Fxn gene detc abnor alleles	LCMS	Covered	137.00	137.00	9 XXX	9	9	9	9	9
81285-00	Fxn gene charac alleles	LCMS	Covered	274.83	274.83	9 XXX	9	9	9	9	9
81286-00	Fxn gene full gene sequence	LCMS	Covered	274.83	274.83	9 XXX	9	9	9	9	9
99476-00	Ped crit care age 2-5 subsq	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
81288-00	Mlh1 gene	LCMS	Covered	192.32	192.32	9 XXX	9	9	9	9	9
81289-00	Fxn gene known famil variant	LCMS	Covered	185.20	185.20	9 XXX	9	9	9	9	9
81290-00	Mcoln1 gene	LCMS	Covered	39.31	39.31	9 XXX	9	9	9	9	9
81291-00	Mthfr gene	LCMS	Covered	65.34	65.34	9 XXX	9	9	9	9	9
81292-00	Mlh1 gene full seq	LCMS	Covered	675.40	675.40	9 XXX	9	9	9	9	9
81293-00	Mlh1 gene known variants	LCMS	Covered	331.00	331.00	9 XXX	9	9	9	9	9
81294-00	Mlh1 gene dup/delete variant	LCMS	Covered	202.40	202.40	9 XXX	9	9	9	9	9
81295-00	Msh2 gene full seq	LCMS	Covered	381.70	381.70	9 XXX	9	9	9	9	9
81296-00	Msh2 gene known variants	LCMS	Covered	337.73	337.73	9 XXX	9	9	9	9	9
81297-00	Msh2 gene dup/delete variant	LCMS	Covered	213.30	213.30	9 XXX	9	9	9	9	9
81298-00	Msh6 gene full seq	LCMS	Covered	641.85	641.85	9 XXX	9	9	9	9	9
81299-00	Msh6 gene known variants	LCMS	Covered	308.00	308.00	9 XXX	9	9	9	9	9
81300-00	Msh6 gene dup/delete variant	LCMS	Covered	238.00	238.00	9 XXX	9	9	9	9	9
77768-TC	Hdr rdncl skn surf brachytx	NCOV	Not Covered	Code not covered	Code not covered	1 XXX	0	0	0	0	0
81302-00	Mecp2 gene full seq	LCMS	Covered	527.87	527.87	9 XXX	9	9	9	9	9
81303-00	Mecp2 gene known variant	LCMS	Covered	120.00	120.00	9 XXX	9	9	9	9	9
81304-00	Mecp2 gene dup/delet variant	LCMS	Covered	150.00	150.00	9 XXX	9	9	9	9	9
81305-00	Myd88 gene p.leu265pro vrnt	LCMS	Covered	175.40	175.40	9 XXX	9	9	9	9	9
81306-00	Nudt15 gene common variants	LCMS	Covered	291.36	291.36	9 XXX	9	9	9	9	9
81307-00	Palb2 gene full gene seq	LCMS	Covered	676.50	676.50	9 XXX	9	9	9	9	9
81308-00	Palb2 gene known famil vrnt	LCMS	Covered	301.35	301.35	9 XXX	9	9	9	9	9
81309-00	Pik3ca gene trgt seq alys	LCMS	Covered	274.83	274.83	9 XXX	9	9	9	9	9
81310-00	Npm1 gene	LCMS	Covered	246.52	246.52	9 XXX	9	9	9	9	9
81311-00	Nras gene variants exon 2&3	LCMS	Covered	295.79	295.79	9 XXX	9	9	9	9	9
81312-00	Pabpn1 gene detc abnor allele	LCMS	Covered	137.00	137.00	9 XXX	9	9	9	9	9
81313-00	Pca3/klk3 antigen	LCMS	Covered	255.05	255.05	9 XXX	9	9	9	9	9
0035U-00	Testing for presence of prion protein in	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
81315-00	Pml/raralpha com breakpoints	LCMS	Covered	207.31	207.31	9 XXX	9	9	9	9	9
81316-00	Pml/raralpha 1 breakpoint	LCMS	Covered	207.31	207.31	9 XXX	9	9	9	9	9
81317-00	Pms2 gene full seq analysis	LCMS	Covered	676.50	676.50	9 XXX	9	9	9	9	9
81318-00	Pms2 known familial variants	LCMS	Covered	331.00	331.00	9 XXX	9	9	9	9	9
81319-00	Pms2 gene dup/delet variants	LCMS	Covered	203.50	203.50	9 XXX	9	9	9	9	9
81320-00	Plcg2 gene common variants	LCMS	Covered	291.36	291.36	9 XXX	9	9	9	9	9
81321-00	Pten gene full sequence	LCMS	Covered	600.00	600.00	9 XXX	9	9	9	9	9
81322-00	Pten gene known fam variant	LCMS	Covered	46.60	46.60	9 XXX	9	9	9	9	9
81323-00	Pten gene dup/delet variant	LCMS	Covered	300.00	300.00	9 XXX	9	9	9	9	9
81324-00	Pmp22 gene dup/delet	LCMS	Covered	758.36	758.36	9 XXX	9	9	9	9	9
81325-00	Pmp22 gene full sequence	LCMS	Covered	769.58	769.58	9 XXX	9	9	9	9	9
81326-00	Pmp22 gene known fam variant	LCMS	Covered	46.60	46.60	9 XXX	9	9	9	9	9
0234U-00	Gene analysis (methyl CpG binding protein 2), full	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0122U-00	Blood test for sickle cells using P-Selectin	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
81329-00	Smn1 gene dos/deletion alys	LCMS	Covered	137.00	137.00	9 XXX	9	9	9	9	9
0121U-00	Blood test for sickle cells using VCAM-1	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
81331-00	Snrpn/ube3a gene	LCMS	Covered	51.07	51.07	9 XXX	9	9	9	9	9
0003M-00	Molecular pathology test for liver disease, including non-alcohol liver disease	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9

81403-00	Mopath procedure level 4	LCMS	Covered	185.20	185.20	9 XXX	9	9	9	9	9
81404-00	Mopath procedure level 5	LCMS	Covered	274.83	274.83	9 XXX	9	9	9	9	9
81405-00	Mopath procedure level 6	LCMS	Covered	301.35	301.35	9 XXX	9	9	9	9	9
81406-00	Mopath procedure level 7	LCMS	Covered	282.88	282.88	9 XXX	9	9	9	9	9
81407-00	Mopath procedure level 8	LCMS	Covered	846.27	846.27	9 XXX	9	9	9	9	9
81408-00	Mopath procedure level 9	LCMS	Covered	2000.00	2000.00	9 XXX	9	9	9	9	9
81410-00	Aortic dysfunction/dilation	LCMS	Covered	504.00	504.00	9 XXX	9	9	9	9	9
81411-00	Aortic dysfunction/dilation	LCMS	Covered	1350.19	1350.19	9 XXX	9	9	9	9	9
81412-00	Ashkenazi jewish assoc dis	LCMS	Covered	2448.56	2448.56	9 XXX	9	9	9	9	9
81413-00	Car ion chnnpth inc 10 gns	LCMS	Covered	584.90	584.90	9 XXX	9	9	9	9	9
81414-00	Car ion chnnpth inc 2 gns	LCMS	Covered	584.90	584.90	9 XXX	9	9	9	9	9
81415-00	Exome sequence analysis	LCMS	Covered	4780.00	4780.00	9 XXX	9	9	9	9	9
81416-00	Exome sequence analysis	LCMS	Covered	12000.00	12000.00	9 XXX	9	9	9	9	9
81417-00	Exome re-evaluation	LCMS	Covered	320.00	320.00	9 XXX	9	9	9	9	9
78499-TC	Unlisted cv px dx nuc med	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
0078U-00	Gene analysis of 16 genes to evaluate risk of opioid-	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
81420-00	Fetal chrmmoml aneuploidy	LCMS	Covered	759.05	759.05	9 XXX	9	9	9	9	9
81422-00	Fetal chrmmoml microdeltj	LCMS	Covered	759.05	759.05	9 XXX	9	9	9	9	9
81425-00	Genome sequence analysis	LCMS	Covered	5031.20	5031.20	9 XXX	9	9	9	9	9
81426-00	Genome sequence analysis	LCMS	Covered	2709.95	2709.95	9 XXX	9	9	9	9	9
81427-00	Genome re-evaluation	LCMS	Covered	2337.65	2337.65	9 XXX	9	9	9	9	9
81430-00	Hearing loss sequence analys	LCMS	Covered	1625.00	1625.00	9 XXX	9	9	9	9	9
81431-00	Hearing loss dup/del analys	LCMS	Covered	679.57	679.57	9 XXX	9	9	9	9	9
58976-00	Transfer of embryo	NCOV	Not Covered	Code not covered	Code not co	0 000	2	0	2	1	0
	Evaluation of response to radiation in cell-free DNA										
0285U-00	by quantitative branched	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
58970-00	Retrieval of oocyte	NCOV	Not Covered	Code not covered	Code not co	0 000	2	0	0	0	0
81435-00	Hereditary colon ca dsordrs	LCMS	Covered	584.90	584.90	9 XXX	9	9	9	9	9
81436-00	Hereditary colon ca dsordrs	LCMS	Covered	584.90	584.90	9 XXX	9	9	9	9	9
0040U-00	Gene analysis (t(9;22)) for translocation analysis	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
	Gene analysis (fms-related tyrosine kinase 3) for										
0046U-00	internal tandem duplication	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
81439-00	Hrdtry cardmypy gene panel	LCMS	Covered	584.90	584.90	9 XXX	9	9	9	9	9
81440-00	Mitochondrial gene	LCMS	Covered	3324.00	3324.00	9 XXX	9	9	9	9	9
81441-00	Ibmfs seq alys pnl 30 genes	RMCD	Covered	2377.06	2377.06	9 XXX	9	9	9	9	9
0049U-00	Gene analysis (nucleophosmin)	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
81443-00	Genetic tstg severe inh cond	LCMS	Covered	2448.56	2448.56	9 XXX	9	9	9	9	9
81445-00	So neo gsap 5-50dna/dna&rna	LCMS	Covered	597.91	597.91	9 XXX	9	9	9	9	9
81448-00	Hrdtry perph neurphy panel	LCMS	Covered	584.90	584.90	9 XXX	9	9	9	9	9
81449-00	So neo gsap 5-50 rna alys	RMCD	Covered	580.45	580.45	9 XXX	9	9	9	9	9
81450-00	HI neo gsap 5-50dna/dna&rna	LCMS	Covered	759.53	759.53	9 XXX	9	9	9	9	9
81451-00	HI neo gsap 5-50 rna alys	RMCD	Covered	737.35	737.35	9 XXX	9	9	9	9	9
81455-00	So/hl 51/>gsap dna/dna&rna	LCMS	Covered	2919.60	2919.60	9 XXX	9	9	9	9	9
81456-00	So/hl 51/>gsap rna alys	RMCD	Covered	2834.35	2834.35	9 XXX	9	9	9	9	9
81460-00	Whole mitochondrial genome	LCMS	Covered	1287.00	1287.00	9 XXX	9	9	9	9	9
81465-00	Whole mitochondrial genome	LCMS	Covered	936.00	936.00	9 XXX	9	9	9	9	9
81470-00	X-linked intellectual dblt	LCMS	Covered	914.00	914.00	9 XXX	9	9	9	9	9
0136U-00	mRNA gene analysis (ataxia telangiectasia mutated)	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
78599-00	Unlisted resp px dx nuc med	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
99466-00	Ped crit care transport	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	0	0	0
76391-00	Mr elastography	NCOV	Not Covered	Code not covered	Code not co	1 XXX	4	0	0	0	0
	Screening test for 3 protein biomarkers of colorectal										
0163U-00	cancer in serum or plasma	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9

0229U-00	Gene analysis (branched chain amino acid transaminase 1 and IKAROS family zinc IgG and IgM analysis of 80 biomarkers of systemic	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0062U-00	lupus erythematosus in serum	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0069U-00	mRNA expression profiling of miR-31-3 in colon	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
81507-00	Fetal aneuploidy trisom risk	LCMS	Covered	795.00	795.00	9 XXX	9	9	9	9	9
77767-TC	Hdr rdnlc skn surf brachytx	NCOV	Not Covered	Code not covered	Code not covered	1 XXX	0	0	0	0	0
0195U-00	Gene analysis (Kruppel-like factor 1) targeted	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
46607-00	Diagnostic anoscopy & biopsy	NCOV	Not Covered	Code not covered	Code not covered	0 000	3	0	1	0	0
99184-00	Hypothermia ill neonate	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
59866-00	Abortion (mpr)	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	0	2	1	0
99345-00	Home/res vst new high mdm 75	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
0123U-00	Test for fragility of red blood cells	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
81518-00	Onc brst mrna 11 genes	LCMS	Covered	3873.00	3873.00	9 XXX	9	9	9	9	9
81519-00	Oncology breast mrna	LCMS	Covered	3873.00	3873.00	9 XXX	9	9	9	9	9
81520-00	Onc breast mrna 58 genes	LCMS	Covered	2510.21	2510.21	9 XXX	9	9	9	9	9
81521-00	Onc breast mrna 70 genes	LCMS	Covered	3873.00	3873.00	9 XXX	9	9	9	9	9
81522-00	Onc breast mrna 12 genes	LCMS	Covered	3873.00	3873.00	9 XXX	9	9	9	9	9
81523-00	Onc brst mrna 70 cnt 31 gene	RMCD	Covered	3759.91	3759.91	9 XXX	9	9	9	9	9
0112U-00	Gene analysis for detection of infectious agent and	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
90792-00	Psych diag eval w/med srvc	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	9	0	0
0033U-00	Gene analysis (5-hydroxytryptamine receptor 2A) for	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
99350-00	Home/res vst est high mdm 60	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
96931-00	Rcm celur subclulr img skn	NCOV	Not Covered	Code not covered	Code not covered	4 XXX	0	0	0	0	0
0058U-00	Measurement of antibodies to Merkel cell polyoma virus oncoprotein in serum	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
81539-00	Oncology prostate prob score	LCMS	Covered	760.00	760.00	9 XXX	9	9	9	9	9
0059U-00	Test for presence of antibodies to Merkel cell polyoma virus oncoprotein in	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
81541-00	Onc prostate mrna 46 genes	LCMS	Covered	3873.00	3873.00	9 XXX	9	9	9	9	9
81542-00	Onc prostate mrna 22 cnt gen	LCMS	Covered	3873.00	3873.00	9 XXX	9	9	9	9	9
81546-00	Onc thyr mrna 10,196 gen alg	LCMS	Covered	3600.00	3600.00	9 XXX	9	9	9	9	9
55870-00	Electroejaculation	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	0	1	1	0
81552-00	Onc uveal mlnma mrna 15 gene	LCMS	Covered	7776.00	7776.00	9 XXX	9	9	9	9	9
90791-00	Psych diagnostic evaluation	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	9	0	0
81560-00	Trnsply pd lvr&bwl cd154+cll	LCMS	Covered	640.73	640.73	9 XXX	9	9	9	9	9
54000-00	Slitting of prepuce	NCOV	Not Covered	Code not covered	Code not covered	0 010	2	0	0	0	0
81596-00	Nfct ds chrnc hcv 6 assays	LCMS	Covered	72.19	72.19	9 XXX	9	9	9	9	9
0182U-00	Red blood cell antigen genotyping, CD55 molecule [Cromer blood group] exons 1-10	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
82009-00	Test for acetone/ketones	LCMS	Covered	4.52	4.52	9 XXX	9	9	9	9	9
82010-00	Acetone assay	LCMS	Covered	8.17	8.17	9 XXX	9	9	9	9	9
82013-00	Acetylcholinesterase assay	LCMS	Covered	12.29	12.29	9 XXX	9	9	9	9	9
82016-00	Acylcarnitines qual	LCMS	Covered	16.49	16.49	9 XXX	9	9	9	9	9
82017-00	Acylcarnitines quant	LCMS	Covered	16.87	16.87	9 XXX	9	9	9	9	9
82024-00	Assay of acth	LCMS	Covered	38.62	38.62	9 XXX	9	9	9	9	9
82030-00	Assay of adp & amp	LCMS	Covered	25.80	25.80	9 XXX	9	9	9	9	9
82040-00	Assay of serum albumin	LCMS	Covered	4.95	4.95	9 XXX	9	9	9	9	9
82042-00	Other source albumin quan ea	LCMS	Covered	7.78	7.78	9 XXX	9	9	9	9	9
82043-00	Ur albumin quantitative	LCMS	Covered	5.78	5.78	9 XXX	9	9	9	9	9
82044-00	Ur albumin semiquantitative	LCMS	Covered	6.23	6.23	9 XXX	9	9	9	9	9
82045-00	Albumin ischemia modified	LCMS	Covered	33.94	33.94	9 XXX	9	9	9	9	9
82075-00	Assay of breath ethanol	LCMS	Covered	30.00	30.00	9 XXX	9	9	9	9	9
82077-00	Assay spec xcp ur&breath ia	LCMS	Covered	17.27	17.27	9 XXX	9	9	9	9	9

46600

82085-00	Assay of aldolase	LCMS	Covered	9.71	9.71	9 XXX	9	9	9	9	9
82088-00	Assay of aldosterone	LCMS	Covered	40.75	40.75	9 XXX	9	9	9	9	9
82103-00	Alpha-1-antitrypsin total	LCMS	Covered	13.44	13.44	9 XXX	9	9	9	9	9
82104-00	Alpha-1-antitrypsin pheno	LCMS	Covered	14.46	14.46	9 XXX	9	9	9	9	9
82105-00	Alpha-fetoprotein serum	LCMS	Covered	16.77	16.77	9 XXX	9	9	9	9	9
82106-00	Alpha-fetoprotein amniotic	LCMS	Covered	17.00	17.00	9 XXX	9	9	9	9	9
82107-00	Alpha-fetoprotein I3	LCMS	Covered	64.41	64.41	9 XXX	9	9	9	9	9
82108-00	Assay of aluminum	LCMS	Covered	25.48	25.48	9 XXX	9	9	9	9	9
82120-00	Amines vaginal fluid qual	LCMS	Covered	5.99	5.99	9 XXX	9	9	9	9	9
82127-00	Amino acid single qual	LCMS	Covered	14.18	14.18	9 XXX	9	9	9	9	9
82128-00	Amino acids mult qual	LCMS	Covered	13.87	13.87	9 XXX	9	9	9	9	9
82131-00	Amino acids single quant	LCMS	Covered	22.98	22.98	9 XXX	9	9	9	9	9
82135-00	Assay aminolevulinic acid	LCMS	Covered	16.45	16.45	9 XXX	9	9	9	9	9
82136-00	Amino acids quant 2-5	LCMS	Covered	19.61	19.61	9 XXX	9	9	9	9	9
82139-00	Amino acids quan 6 or more	LCMS	Covered	16.87	16.87	9 XXX	9	9	9	9	9
82140-00	Assay of ammonia	LCMS	Covered	14.57	14.57	9 XXX	9	9	9	9	9
82143-00	Amniotic fluid scan	LCMS	Covered	9.35	9.35	9 XXX	9	9	9	9	9
82150-00	Assay of amylase	LCMS	Covered	6.48	6.48	9 XXX	9	9	9	9	9
82154-00	Androstenediol glucuronide	LCMS	Covered	28.83	28.83	9 XXX	9	9	9	9	9
82157-00	Assay of androstenedione	LCMS	Covered	29.28	29.28	9 XXX	9	9	9	9	9
82160-00	Assay of androsterone	LCMS	Covered	25.55	25.55	9 XXX	9	9	9	9	9
82163-00	Assay of angiotensin ii	LCMS	Covered	20.52	20.52	9 XXX	9	9	9	9	9
82164-00	Angiotensin i enzyme test	LCMS	Covered	14.60	14.60	9 XXX	9	9	9	9	9
82172-00	Assay of apolipoprotein	LCMS	Covered	21.09	21.09	9 XXX	9	9	9	9	9
82175-00	Assay of arsenic	LCMS	Covered	18.97	18.97	9 XXX	9	9	9	9	9
82180-00	Assay of ascorbic acid	LCMS	Covered	9.89	9.89	9 XXX	9	9	9	9	9
82190-00	Atomic absorption	LCMS	Covered	15.90	15.90	9 XXX	9	9	9	9	9
82232-00	Assay of beta-2 protein	LCMS	Covered	16.18	16.18	9 XXX	9	9	9	9	9
82239-00	Bile acids total	LCMS	Covered	17.12	17.12	9 XXX	9	9	9	9	9
82240-00	Bile acids cholyglycine	LCMS	Covered	26.58	26.58	9 XXX	9	9	9	9	9
82247-00	Bilirubin total	LCMS	Covered	5.02	5.02	9 XXX	9	9	9	9	9
82248-00	Bilirubin direct	LCMS	Covered	5.02	5.02	9 XXX	9	9	9	9	9
82252-00	Fecal bilirubin test	LCMS	Covered	4.56	4.56	9 XXX	9	9	9	9	9
82261-00	Assay of biotinidase	LCMS	Covered	16.87	16.87	9 XXX	9	9	9	9	9
82270-00	Occult blood feces	LCMS	Covered	4.38	4.38	9 XXX	9	9	9	9	9
82271-00	Occult blood other sources	LCMS	Covered	5.32	5.32	9 XXX	9	9	9	9	9
82272-00	Occult bld feces 1-3 tests	LCMS	Covered	4.23	4.23	9 XXX	9	9	9	9	9
82274-00	Assay test for blood fecal	LCMS	Covered	15.92	15.92	9 XXX	9	9	9	9	9
82286-00	Assay of bradykinin	LCMS	Covered	5.16	5.16	9 XXX	9	9	9	9	9
82300-00	Assay of cadmium	LCMS	Covered	23.64	23.64	9 XXX	9	9	9	9	9
82306-00	Vitamin d 25 hydroxy	LCMS	Covered	29.60	29.60	9 XXX	9	9	9	9	9
82308-00	Assay of calcitonin	LCMS	Covered	26.79	26.79	9 XXX	9	9	9	9	9
82310-00	Assay of calcium	LCMS	Covered	5.16	5.16	9 XXX	9	9	9	9	9
82330-00	Assay of calcium	LCMS	Covered	13.68	13.68	9 XXX	9	9	9	9	9
82331-00	Calcium infusion test	LCMS	Covered	13.34	13.34	9 XXX	9	9	9	9	9
82340-00	Assay of calcium in urine	LCMS	Covered	6.03	6.03	9 XXX	9	9	9	9	9
82355-00	Calculus analysis qual	LCMS	Covered	11.58	11.58	9 XXX	9	9	9	9	9
82360-00	Calculus assay quant	LCMS	Covered	12.87	12.87	9 XXX	9	9	9	9	9
82365-00	Calculus spectroscopy	LCMS	Covered	12.90	12.90	9 XXX	9	9	9	9	9
82370-00	X-ray assay calculus	LCMS	Covered	12.52	12.52	9 XXX	9	9	9	9	9
82373-00	Assay c-d transfer measure	LCMS	Covered	18.06	18.06	9 XXX	9	9	9	9	9
82374-00	Assay blood carbon dioxide	LCMS	Covered	4.88	4.88	9 XXX	9	9	9	9	9
82375-00	Assay carboxyhb quant	LCMS	Covered	12.32	12.32	9 XXX	9	9	9	9	9
82376-00	Assay carboxyhb qual	LCMS	Covered	14.07	14.07	9 XXX	9	9	9	9	9

82378-00	Carcinoembryonic antigen	LCMS	Covered	18.96	18.96	9 XXX	9	9	9	9	9
82379-00	Assay of carnitine	LCMS	Covered	16.87	16.87	9 XXX	9	9	9	9	9
82380-00	Assay of carotene	LCMS	Covered	9.22	9.22	9 XXX	9	9	9	9	9
82382-00	Assay urine catecholamines	LCMS	Covered	27.30	27.30	9 XXX	9	9	9	9	9
82383-00	Assay blood catecholamines	LCMS	Covered	29.08	29.08	9 XXX	9	9	9	9	9
82384-00	Assay three catecholamines	LCMS	Covered	25.25	25.25	9 XXX	9	9	9	9	9
82387-00	Assay of cathepsin-d	LCMS	Covered	18.06	18.06	9 XXX	9	9	9	9	9
82390-00	Assay of ceruloplasmin	LCMS	Covered	10.74	10.74	9 XXX	9	9	9	9	9
82397-00	Chemiluminescent assay	LCMS	Covered	14.12	14.12	9 XXX	9	9	9	9	9
82415-00	Assay of chloramphenicol	LCMS	Covered	12.67	12.67	9 XXX	9	9	9	9	9
82435-00	Assay of blood chloride	LCMS	Covered	4.60	4.60	9 XXX	9	9	9	9	9
82436-00	Assay of urine chloride	LCMS	Covered	5.75	5.75	9 XXX	9	9	9	9	9
82438-00	Assay other fluid chlorides	LCMS	Covered	5.00	5.00	9 XXX	9	9	9	9	9
82441-00	Test for chlorohydrocarbons	LCMS	Covered	6.01	6.01	9 XXX	9	9	9	9	9
82465-00	Assay bld/serum cholesterol	LCMS	Covered	4.35	4.35	9 XXX	9	9	9	9	9
82480-00	Assay serum cholinesterase	LCMS	Covered	7.87	7.87	9 XXX	9	9	9	9	9
82482-00	Assay rbc cholinesterase	LCMS	Covered	9.81	9.81	9 XXX	9	9	9	9	9
82485-00	Assay chondroitin sulfate	LCMS	Covered	20.65	20.65	9 XXX	9	9	9	9	9
82495-00	Assay of chromium	LCMS	Covered	20.28	20.28	9 XXX	9	9	9	9	9
82507-00	Assay of citrate	LCMS	Covered	27.80	27.80	9 XXX	9	9	9	9	9
82523-00	Collagen crosslinks	LCMS	Covered	18.68	18.68	9 XXX	9	9	9	9	9
82525-00	Assay of copper	LCMS	Covered	12.41	12.41	9 XXX	9	9	9	9	9
82528-00	Assay of corticosterone	LCMS	Covered	22.52	22.52	9 XXX	9	9	9	9	9
82530-00	Cortisol free	LCMS	Covered	16.71	16.71	9 XXX	9	9	9	9	9
82533-00	Total cortisol	LCMS	Covered	16.30	16.30	9 XXX	9	9	9	9	9
82540-00	Assay of creatine	LCMS	Covered	4.64	4.64	9 XXX	9	9	9	9	9
82542-00	Col chromatography qual/quan	LCMS	Covered	24.09	24.09	9 XXX	9	9	9	9	9
82550-00	Assay of ck (cpk)	LCMS	Covered	6.51	6.51	9 XXX	9	9	9	9	9
82552-00	Assay of cpk in blood	LCMS	Covered	13.39	13.39	9 XXX	9	9	9	9	9
82553-00	Creatine mb fraction	LCMS	Covered	11.55	11.55	9 XXX	9	9	9	9	9
82554-00	Creatine isoforms	LCMS	Covered	11.87	11.87	9 XXX	9	9	9	9	9
82565-00	Assay of creatinine	LCMS	Covered	5.12	5.12	9 XXX	9	9	9	9	9
82570-00	Assay of urine creatinine	LCMS	Covered	5.18	5.18	9 XXX	9	9	9	9	9
82575-00	Creatinine clearance test	LCMS	Covered	9.46	9.46	9 XXX	9	9	9	9	9
82585-00	Assay of cryofibrinogen	LCMS	Covered	14.14	14.14	9 XXX	9	9	9	9	9
82595-00	Assay of cryoglobulin	LCMS	Covered	6.47	6.47	9 XXX	9	9	9	9	9
82600-00	Assay of cyanide	LCMS	Covered	19.40	19.40	9 XXX	9	9	9	9	9
82607-00	Vitamin b-12	LCMS	Covered	15.08	15.08	9 XXX	9	9	9	9	9
82608-00	B-12 binding capacity	LCMS	Covered	14.32	14.32	9 XXX	9	9	9	9	9
82610-00	Cystatin c	LCMS	Covered	18.52	18.52	9 XXX	9	9	9	9	9
82615-00	Test for urine cystines	LCMS	Covered	9.55	9.55	9 XXX	9	9	9	9	9
82626-00	Dehydroepiandrosterone	LCMS	Covered	25.27	25.27	9 XXX	9	9	9	9	9
82627-00	Dehydroepiandrosterone	LCMS	Covered	22.23	22.23	9 XXX	9	9	9	9	9
82633-00	Desoxycorticosterone	LCMS	Covered	30.98	30.98	9 XXX	9	9	9	9	9
82634-00	Deoxycortisol	LCMS	Covered	29.28	29.28	9 XXX	9	9	9	9	9
82638-00	Assay of dibucaine number	LCMS	Covered	12.25	12.25	9 XXX	9	9	9	9	9
0230U-00	Gene analysis (androgen receptor), full sequence	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
82652-00	Vit d 1 25-dihydroxy	LCMS	Covered	38.50	38.50	9 XXX	9	9	9	9	9
82653-00	El-1 fecal quantitative	LCMS	Covered	22.97	22.97	9 XXX	9	9	9	9	9
82656-00	El-1 fecal qual/semiq	LCMS	Covered	11.53	11.53	9 XXX	9	9	9	9	9
82657-00	Enzyme cell activity	LCMS	Covered	22.17	22.17	9 XXX	9	9	9	9	9
82658-00	Enzyme cell activity ra	LCMS	Covered	44.03	44.03	9 XXX	9	9	9	9	9
82664-00	Electrophoretic test	LCMS	Covered	61.50	61.50	9 XXX	9	9	9	9	9
82668-00	Assay of erythropoietin	LCMS	Covered	18.79	18.79	9 XXX	9	9	9	9	9

82670-00	Assay of total estradiol	LCMS	Covered	27.94	27.94	9 XXX	9	9	9	9	9
82671-00	Assay of estrogens	LCMS	Covered	32.30	32.30	9 XXX	9	9	9	9	9
82672-00	Assay of estrogen	LCMS	Covered	21.70	21.70	9 XXX	9	9	9	9	9
82677-00	Assay of estriol	LCMS	Covered	24.18	24.18	9 XXX	9	9	9	9	9
82679-00	Assay of estrone	LCMS	Covered	24.95	24.95	9 XXX	9	9	9	9	9
82681-00	Assay dir meas fr estradiol	LCMS	Covered	27.94	27.94	9 XXX	9	9	9	9	9
82693-00	Assay of ethylene glycol	LCMS	Covered	14.90	14.90	9 XXX	9	9	9	9	9
82696-00	Assay of etiocholanolone	LCMS	Covered	26.24	26.24	9 XXX	9	9	9	9	9
82705-00	Fats/lipids feces qual	LCMS	Covered	5.10	5.10	9 XXX	9	9	9	9	9
82710-00	Fats/lipids feces quant	LCMS	Covered	16.80	16.80	9 XXX	9	9	9	9	9
82715-00	Assay of fecal fat	LCMS	Covered	22.97	22.97	9 XXX	9	9	9	9	9
82725-00	Assay of blood fatty acids	LCMS	Covered	18.77	18.77	9 XXX	9	9	9	9	9
82726-00	Long chain fatty acids	LCMS	Covered	19.75	19.75	9 XXX	9	9	9	9	9
82728-00	Assay of ferritin	LCMS	Covered	13.63	13.63	9 XXX	9	9	9	9	9
82731-00	Assay of fetal fibronectin	LCMS	Covered	64.41	64.41	9 XXX	9	9	9	9	9
82735-00	Assay of fluoride	LCMS	Covered	18.54	18.54	9 XXX	9	9	9	9	9
82746-00	Assay of folic acid serum	LCMS	Covered	14.70	14.70	9 XXX	9	9	9	9	9
82747-00	Assay of folic acid rbc	LCMS	Covered	17.65	17.65	9 XXX	9	9	9	9	9
82757-00	Assay of semen fructose	LCMS	Covered	17.34	17.34	9 XXX	9	9	9	9	9
82759-00	Assay of rbc galactokinase	LCMS	Covered	21.48	21.48	9 XXX	9	9	9	9	9
82760-00	Assay of galactose	LCMS	Covered	11.20	11.20	9 XXX	9	9	9	9	9
82775-00	Assay galactose transferase	LCMS	Covered	21.07	21.07	9 XXX	9	9	9	9	9
82776-00	Galactose transferase test	LCMS	Covered	11.74	11.74	9 XXX	9	9	9	9	9
76391-TC	Mr elastography	NCOV	Not Covered	Code not covered	Code not covered	1 XXX	4	0	0	0	0
82784-00	Assay iga/igd/igg/igm each	LCMS	Covered	9.30	9.30	9 XXX	9	9	9	9	9
82785-00	Assay of ige	LCMS	Covered	16.46	16.46	9 XXX	9	9	9	9	9
82787-00	Igg 1 2 3 or 4 each	LCMS	Covered	8.02	8.02	9 XXX	9	9	9	9	9
82800-00	Blood ph	LCMS	Covered	11.00	11.00	9 XXX	9	9	9	9	9
82803-00	Blood gases any combination	LCMS	Covered	26.07	26.07	9 XXX	9	9	9	9	9
82805-00	Blood gases w/o2 saturation	LCMS	Covered	78.77	78.77	9 XXX	9	9	9	9	9
82810-00	Blood gases o2 sat only	LCMS	Covered	9.77	9.77	9 XXX	9	9	9	9	9
82820-00	Hemoglobin-oxygen affinity	LCMS	Covered	13.34	13.34	9 XXX	9	9	9	9	9
82930-00	Gastric analy w/ph ea spec	LCMS	Covered	6.71	6.71	9 XXX	9	9	9	9	9
82938-00	Gastrin test	LCMS	Covered	17.69	17.69	9 XXX	9	9	9	9	9
82941-00	Assay of gastrin	LCMS	Covered	17.63	17.63	9 XXX	9	9	9	9	9
82943-00	Assay of glucagon	LCMS	Covered	14.29	14.29	9 XXX	9	9	9	9	9
82945-00	Glucose other fluid	LCMS	Covered	3.93	3.93	9 XXX	9	9	9	9	9
82946-00	Glucagon tolerance test	LCMS	Covered	17.77	17.77	9 XXX	9	9	9	9	9
82947-00	Assay glucose blood quant	LCMS	Covered	3.93	3.93	9 XXX	9	9	9	9	9
82948-00	Reagent strip/blood glucose	LCMS	Covered	5.04	5.04	9 XXX	9	9	9	9	9
82950-00	Glucose test	LCMS	Covered	4.75	4.75	9 XXX	9	9	9	9	9
82951-00	Glucose tolerance test (gtt)	LCMS	Covered	12.87	12.87	9 XXX	9	9	9	9	9
82952-00	Gtt-added samples	LCMS	Covered	3.92	3.92	9 XXX	9	9	9	9	9
82955-00	Assay of g6pd enzyme	LCMS	Covered	9.70	9.70	9 XXX	9	9	9	9	9
82960-00	Test for g6pd enzyme	LCMS	Covered	6.05	6.05	9 XXX	9	9	9	9	9
82962-00	Glucose blood test	LCMS	Covered	3.28	3.28	9 XXX	9	9	9	9	9
82963-00	Assay of glucosidase	LCMS	Covered	21.48	21.48	9 XXX	9	9	9	9	9
82965-00	Assay of gdh enzyme	LCMS	Covered	13.15	13.15	9 XXX	9	9	9	9	9
82977-00	Assay of ggt	LCMS	Covered	7.20	7.20	9 XXX	9	9	9	9	9
82978-00	Assay of glutathione	LCMS	Covered	15.45	15.45	9 XXX	9	9	9	9	9
82979-00	Assay rbc glutathione	LCMS	Covered	9.44	9.44	9 XXX	9	9	9	9	9
82985-00	Assay of glycated protein	LCMS	Covered	16.76	16.76	9 XXX	9	9	9	9	9
83001-00	Assay of gonadotropin (fsh)	LCMS	Covered	18.58	18.58	9 XXX	9	9	9	9	9
83002-00	Assay of gonadotropin (lh)	LCMS	Covered	18.52	18.52	9 XXX	9	9	9	9	9

83003-00	Assay growth hormone (hgh)	LCMS	Covered	16.67	16.67	9 XXX	9	9	9	9	9
83006-00	Growth stimulation gene 2	LCMS	Covered	75.60	75.60	9 XXX	9	9	9	9	9
83009-00	H pylori (c-13) blood	LCMS	Covered	67.36	67.36	9 XXX	9	9	9	9	9
83010-00	Assay of haptoglobin quant	LCMS	Covered	12.58	12.58	9 XXX	9	9	9	9	9
83012-00	Assay of haptoglobins	LCMS	Covered	26.89	26.89	9 XXX	9	9	9	9	9
83013-00	H pylori (c-13) breath	LCMS	Covered	67.36	67.36	9 XXX	9	9	9	9	9
83014-00	H pylori drug admin	LCMS	Covered	7.86	7.86	9 XXX	9	9	9	9	9
83015-00	Heavy metal qual any anal	LCMS	Covered	20.94	20.94	9 XXX	9	9	9	9	9
83018-00	Heavy metal quant each nes	LCMS	Covered	21.96	21.96	9 XXX	9	9	9	9	9
83020-00	Hemoglobin electrophoresis	LCMS	Covered	12.87	12.87	9 XXX	9	9	9	9	9
83020-26	Hemoglobin electrophoresis	RCMS	Covered	31.59	31.59	6 XXX	0	0	0	0	0
83021-00	Hemoglobin chromatography	LCMS	Covered	18.06	18.06	9 XXX	9	9	9	9	9
83026-00	Hemoglobin copper sulfate	LCMS	Covered	4.01	4.01	9 XXX	9	9	9	9	9
83030-00	Hemoglobin f fetal chemical	LCMS	Covered	10.74	10.74	9 XXX	9	9	9	9	9
83033-00	Hemoglobin ftl f assay qual	LCMS	Covered	8.00	8.00	9 XXX	9	9	9	9	9
83036-00	Hemoglobin glycosylated a1c	LCMS	Covered	9.71	9.71	9 XXX	9	9	9	9	9
83037-00	Hb glycosylated a1c home dev	LCMS	Covered	9.71	9.71	9 XXX	9	9	9	9	9
83045-00	Hgb methemoglobin qual	LCMS	Covered	6.49	6.49	9 XXX	9	9	9	9	9
83050-00	Hgb methemoglobin quan	LCMS	Covered	8.20	8.20	9 XXX	9	9	9	9	9
83051-00	Hemoglobin plasma	LCMS	Covered	7.31	7.31	9 XXX	9	9	9	9	9
83060-00	Hgb sulfhemoglobin quan	LCMS	Covered	8.80	8.80	9 XXX	9	9	9	9	9
83065-00	Hemoglobin thermolabile	LCMS	Covered	9.00	9.00	9 XXX	9	9	9	9	9
83068-00	Hemoglobin unstable screen	LCMS	Covered	9.47	9.47	9 XXX	9	9	9	9	9
83069-00	Hemoglobin urine	LCMS	Covered	3.95	3.95	9 XXX	9	9	9	9	9
83070-00	Assay of hemosiderin qual	LCMS	Covered	4.75	4.75	9 XXX	9	9	9	9	9
83080-00	Assay of b hexosaminidase ea	LCMS	Covered	16.87	16.87	9 XXX	9	9	9	9	9
83088-00	Assay of histamine	LCMS	Covered	29.53	29.53	9 XXX	9	9	9	9	9
83090-00	Assay of homocysteine	LCMS	Covered	17.92	17.92	9 XXX	9	9	9	9	9
83150-00	Assay of homovanillic acid	LCMS	Covered	22.41	22.41	9 XXX	9	9	9	9	9
83491-00	Asy hydroxycorticosteroids17	LCMS	Covered	17.90	17.90	9 XXX	9	9	9	9	9
83497-00	Assay of 5-hiaa	LCMS	Covered	12.90	12.90	9 XXX	9	9	9	9	9
83498-00	Asy hydroxyprogesterone 17-d	LCMS	Covered	27.17	27.17	9 XXX	9	9	9	9	9
83500-00	Assay free hydroxyproline	LCMS	Covered	22.65	22.65	9 XXX	9	9	9	9	9
83505-00	Assay total hydroxyproline	LCMS	Covered	24.30	24.30	9 XXX	9	9	9	9	9
83516-00	Immunoassay nonantibody	LCMS	Covered	11.53	11.53	9 XXX	9	9	9	9	9
83518-00	Immunoassay dipstick	LCMS	Covered	9.64	9.64	9 XXX	9	9	9	9	9
83519-00	Ria nonantibody	LCMS	Covered	18.40	18.40	9 XXX	9	9	9	9	9
83520-00	Immunoassay quant nos nonab	LCMS	Covered	17.27	17.27	9 XXX	9	9	9	9	9
83521-00	Ig light chains free each	LCMS	Covered	17.27	17.27	9 XXX	9	9	9	9	9
83525-00	Assay of insulin	LCMS	Covered	11.43	11.43	9 XXX	9	9	9	9	9
83527-00	Assay of insulin	LCMS	Covered	12.95	12.95	9 XXX	9	9	9	9	9
83528-00	Assay of intrinsic factor	LCMS	Covered	19.82	19.82	9 XXX	9	9	9	9	9
83529-00	Asay of interleukin-6 (il-6)	LCMS	Covered	17.27	17.27	9 XXX	9	9	9	9	9
83540-00	Assay of iron	LCMS	Covered	6.47	6.47	9 XXX	9	9	9	9	9
83550-00	Iron binding test	LCMS	Covered	8.74	8.74	9 XXX	9	9	9	9	9
83570-00	Assay of idh enzyme	LCMS	Covered	8.85	8.85	9 XXX	9	9	9	9	9
83582-00	Assay of ketogenic steroids	LCMS	Covered	15.47	15.47	9 XXX	9	9	9	9	9
83586-00	Assay 17- ketosteroids	LCMS	Covered	12.80	12.80	9 XXX	9	9	9	9	9
83593-00	Fractionation ketosteroids	LCMS	Covered	28.50	28.50	9 XXX	9	9	9	9	9
83605-00	Assay of lactic acid	LCMS	Covered	11.57	11.57	9 XXX	9	9	9	9	9
83615-00	Lactate (ld) (ldh) enzyme	LCMS	Covered	6.04	6.04	9 XXX	9	9	9	9	9
83625-00	Assay of ldh enzymes	LCMS	Covered	12.79	12.79	9 XXX	9	9	9	9	9
83630-00	Lactoferrin fecal (qual)	LCMS	Covered	19.70	19.70	9 XXX	9	9	9	9	9
83631-00	Lactoferrin fecal (quant)	LCMS	Covered	19.63	19.63	9 XXX	9	9	9	9	9

83632-00	Placental lactogen	LCMS	Covered	20.22	20.22	9 XXX	9	9	9	9	9
83633-00	Test urine for lactose	LCMS	Covered	11.25	11.25	9 XXX	9	9	9	9	9
83655-00	Assay of lead	LCMS	Covered	12.11	12.11	9 XXX	9	9	9	9	9
83661-00	L/s ratio fetal lung	LCMS	Covered	21.99	21.99	9 XXX	9	9	9	9	9
83662-00	Foam stability fetal lung	LCMS	Covered	18.91	18.91	9 XXX	9	9	9	9	9
83663-00	Fluoro polarize fetal lung	LCMS	Covered	18.91	18.91	9 XXX	9	9	9	9	9
83664-00	Lamellar bdy fetal lung	LCMS	Covered	19.32	19.32	9 XXX	9	9	9	9	9
83670-00	Assay of lap enzyme	LCMS	Covered	9.81	9.81	9 XXX	9	9	9	9	9
83690-00	Assay of lipase	LCMS	Covered	6.89	6.89	9 XXX	9	9	9	9	9
83695-00	Assay of lipoprotein(a)	LCMS	Covered	14.32	14.32	9 XXX	9	9	9	9	9
83698-00	Assay lipoprotein pla2	LCMS	Covered	46.31	46.31	9 XXX	9	9	9	9	9
83700-00	Lipopro bld electrophoretic	LCMS	Covered	11.26	11.26	9 XXX	9	9	9	9	9
83701-00	Lipoprotein bld hr fraction	LCMS	Covered	33.86	33.86	9 XXX	9	9	9	9	9
83704-00	Lipoprotein bld quan part	LCMS	Covered	34.19	34.19	9 XXX	9	9	9	9	9
83718-00	Assay of lipoprotein	LCMS	Covered	8.19	8.19	9 XXX	9	9	9	9	9
83719-00	Assay of blood lipoprotein	LCMS	Covered	12.75	12.75	9 XXX	9	9	9	9	9
83721-00	Assay of blood lipoprotein	LCMS	Covered	10.50	10.50	9 XXX	9	9	9	9	9
83722-00	Lipoprtn dir meas sd ldl chl	LCMS	Covered	34.19	34.19	9 XXX	9	9	9	9	9
83727-00	Assay of lrh hormone	LCMS	Covered	17.19	17.19	9 XXX	9	9	9	9	9
83735-00	Assay of magnesium	LCMS	Covered	6.70	6.70	9 XXX	9	9	9	9	9
83775-00	Assay malate dehydrogenase	LCMS	Covered	7.37	7.37	9 XXX	9	9	9	9	9
83785-00	Assay of manganese	LCMS	Covered	26.65	26.65	9 XXX	9	9	9	9	9
83789-00	Mass spectrometry qual/quan	LCMS	Covered	24.11	24.11	9 XXX	9	9	9	9	9
83825-00	Assay of mercury	LCMS	Covered	16.26	16.26	9 XXX	9	9	9	9	9
83835-00	Assay of metanephrines	LCMS	Covered	16.94	16.94	9 XXX	9	9	9	9	9
83857-00	Assay of methemalbumin	LCMS	Covered	10.74	10.74	9 XXX	9	9	9	9	9
36450-00	Bld exchange truj newborn	NCOV	Not Covered	Code not covered	Code not co	0 XXX	2	0	0	0	0
83864-00	Mucopolysaccharides	LCMS	Covered	28.50	28.50	9 XXX	9	9	9	9	9
83872-00	Assay synovial fluid mucin	LCMS	Covered	5.86	5.86	9 XXX	9	9	9	9	9
83873-00	Assay of csf protein	LCMS	Covered	17.20	17.20	9 XXX	9	9	9	9	9
83874-00	Assay of myoglobin	LCMS	Covered	12.92	12.92	9 XXX	9	9	9	9	9
90865-00	Narcosynthesis	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	0	0	0
83880-00	Assay of natriuretic peptide	LCMS	Covered	39.26	39.26	9 XXX	9	9	9	9	9
83883-00	Assay nephelometry not spec	LCMS	Covered	13.60	13.60	9 XXX	9	9	9	9	9
83885-00	Assay of nickel	LCMS	Covered	24.51	24.51	9 XXX	9	9	9	9	9
83915-00	Assay of nucleotidase	LCMS	Covered	11.15	11.15	9 XXX	9	9	9	9	9
83916-00	Oligoclonal bands	LCMS	Covered	27.39	27.39	9 XXX	9	9	9	9	9
83918-00	Organic acids total quant	LCMS	Covered	23.60	23.60	9 XXX	9	9	9	9	9
83919-00	Organic acids qual each	LCMS	Covered	16.45	16.45	9 XXX	9	9	9	9	9
83921-00	Organic acid single quant	LCMS	Covered	21.21	21.21	9 XXX	9	9	9	9	9
83930-00	Assay of blood osmolality	LCMS	Covered	6.61	6.61	9 XXX	9	9	9	9	9
83935-00	Assay of urine osmolality	LCMS	Covered	6.82	6.82	9 XXX	9	9	9	9	9
83937-00	Assay of osteocalcin	LCMS	Covered	29.85	29.85	9 XXX	9	9	9	9	9
83945-00	Assay of oxalate	LCMS	Covered	14.45	14.45	9 XXX	9	9	9	9	9
83950-00	Oncoprotein her-2/neu	LCMS	Covered	64.41	64.41	9 XXX	9	9	9	9	9
99387-00	Init pm e/m new pat 65+ yrs	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
83970-00	Assay of parathormone	LCMS	Covered	41.28	41.28	9 XXX	9	9	9	9	9
83986-00	Assay ph body fluid nos	LCMS	Covered	3.58	3.58	9 XXX	9	9	9	9	9
83987-00	Exhaled breath condensate	LCMS	Covered	3.58	3.58	9 XXX	9	9	9	9	9
83992-00	Assay for phencyclidine	RMCD	Covered	16.60	16.60	9 XXX	9	9	9	9	9
83993-00	Assay for calprotectin fecal	LCMS	Covered	19.63	19.63	9 XXX	9	9	9	9	9
84030-00	Assay of blood pku	LCMS	Covered	5.50	5.50	9 XXX	9	9	9	9	9
84035-00	Assay of phenylketones	LCMS	Covered	3.98	3.98	9 XXX	9	9	9	9	9
84060-00	Assay acid phosphatase	LCMS	Covered	7.64	7.64	9 XXX	9	9	9	9	9

84066-00	Assay prostate phosphatase	LCMS	Covered	9.66	9.66	9 XXX	9	9	9	9	9
84075-00	Assay alkaline phosphatase	LCMS	Covered	5.18	5.18	9 XXX	9	9	9	9	9
84078-00	Assay alkaline phosphatase	LCMS	Covered	8.26	8.26	9 XXX	9	9	9	9	9
84080-00	Assay alkaline phosphatases	LCMS	Covered	14.78	14.78	9 XXX	9	9	9	9	9
84081-00	Assay phosphatidylglycerol	LCMS	Covered	16.52	16.52	9 XXX	9	9	9	9	9
84085-00	Assay of rbc pg6d enzyme	LCMS	Covered	9.44	9.44	9 XXX	9	9	9	9	9
84087-00	Assay phosphohexose enzymes	LCMS	Covered	10.73	10.73	9 XXX	9	9	9	9	9
84100-00	Assay of phosphorus	LCMS	Covered	4.74	4.74	9 XXX	9	9	9	9	9
84105-00	Assay of urine phosphorus	LCMS	Covered	5.78	5.78	9 XXX	9	9	9	9	9
84106-00	Test for porphobilinogen	LCMS	Covered	5.82	5.82	9 XXX	9	9	9	9	9
84110-00	Assay of porphobilinogen	LCMS	Covered	8.44	8.44	9 XXX	9	9	9	9	9
84112-00	Eval amniotic fluid protein	LCMS	Covered	98.11	98.11	9 XXX	9	9	9	9	9
84119-00	Test urine for porphyrins	LCMS	Covered	13.36	13.36	9 XXX	9	9	9	9	9
84120-00	Assay of urine porphyrins	LCMS	Covered	14.71	14.71	9 XXX	9	9	9	9	9
84126-00	Assay of feces porphyrins	LCMS	Covered	39.11	39.11	9 XXX	9	9	9	9	9
84132-00	Assay of serum potassium	LCMS	Covered	4.76	4.76	9 XXX	9	9	9	9	9
84133-00	Assay of urine potassium	LCMS	Covered	4.73	4.73	9 XXX	9	9	9	9	9
84134-00	Assay of prealbumin	LCMS	Covered	14.59	14.59	9 XXX	9	9	9	9	9
84135-00	Assay of pregnanediol	LCMS	Covered	21.27	21.27	9 XXX	9	9	9	9	9
84138-00	Assay of pregnanetriol	LCMS	Covered	21.05	21.05	9 XXX	9	9	9	9	9
84140-00	Assay of pregnenolone	LCMS	Covered	20.67	20.67	9 XXX	9	9	9	9	9
84143-00	Assay of 17-hydroxypregno	LCMS	Covered	22.81	22.81	9 XXX	9	9	9	9	9
84144-00	Assay of progesterone	LCMS	Covered	20.86	20.86	9 XXX	9	9	9	9	9
84145-00	Procalcitonin (pct)	LCMS	Covered	27.22	27.22	9 XXX	9	9	9	9	9
84146-00	Assay of prolactin	LCMS	Covered	19.38	19.38	9 XXX	9	9	9	9	9
84150-00	Assay of prostaglandin	LCMS	Covered	41.77	41.77	9 XXX	9	9	9	9	9
84152-00	Assay of psa complexed	LCMS	Covered	18.39	18.39	9 XXX	9	9	9	9	9
84153-00	Assay of psa total	LCMS	Covered	18.39	18.39	9 XXX	9	9	9	9	9
84154-00	Assay of psa free	LCMS	Covered	18.39	18.39	9 XXX	9	9	9	9	9
84155-00	Assay of protein serum	LCMS	Covered	3.67	3.67	9 XXX	9	9	9	9	9
84156-00	Assay of protein urine	LCMS	Covered	3.67	3.67	9 XXX	9	9	9	9	9
84157-00	Assay of protein other	LCMS	Covered	4.00	4.00	9 XXX	9	9	9	9	9
84160-00	Assay of protein any source	LCMS	Covered	5.61	5.61	9 XXX	9	9	9	9	9
84163-00	Pappa serum	LCMS	Covered	15.05	15.05	9 XXX	9	9	9	9	9
84165-00	Protein e-phoresis serum	LCMS	Covered	10.74	10.74	9 XXX	9	9	9	9	9
84165-26	Protein e-phoresis serum	RCMS	Covered	31.59	31.59	6 XXX	0	0	0	0	0
84166-00	Protein e-phoresis/urine/csf	LCMS	Covered	17.83	17.83	9 XXX	9	9	9	9	9
84166-26	Protein e-phoresis/urine/csf	RCMS	Covered	31.59	31.59	6 XXX	0	0	0	0	0
84181-00	Western blot test	LCMS	Covered	17.03	17.03	9 XXX	9	9	9	9	9
84181-26	Western blot test	RCMS	Covered	31.59	31.59	6 XXX	0	0	0	0	0
84182-00	Protein western blot test	LCMS	Covered	29.21	29.21	9 XXX	9	9	9	9	9
84182-26	Protein western blot test	RCMS	Covered	31.59	31.59	6 XXX	0	0	0	0	0
84202-00	Assay rbc protoporphyrin	LCMS	Covered	14.35	14.35	9 XXX	9	9	9	9	9
84203-00	Test rbc protoporphyrin	LCMS	Covered	9.74	9.74	9 XXX	9	9	9	9	9
84206-00	Assay of proinsulin	LCMS	Covered	26.69	26.69	9 XXX	9	9	9	9	9
84207-00	Assay of vitamin b-6	LCMS	Covered	28.10	28.10	9 XXX	9	9	9	9	9
84210-00	Assay of pyruvate	LCMS	Covered	14.48	14.48	9 XXX	9	9	9	9	9
84220-00	Assay of pyruvate kinase	LCMS	Covered	9.44	9.44	9 XXX	9	9	9	9	9
84228-00	Assay of quinine	LCMS	Covered	11.63	11.63	9 XXX	9	9	9	9	9
84233-00	Assay of estrogen	LCMS	Covered	87.88	87.88	9 XXX	9	9	9	9	9
84234-00	Assay of progesterone	LCMS	Covered	64.88	64.88	9 XXX	9	9	9	9	9
84235-00	Assay of endocrine hormone	LCMS	Covered	71.23	71.23	9 XXX	9	9	9	9	9
84238-00	Assay nonendocrine receptor	LCMS	Covered	36.57	36.57	9 XXX	9	9	9	9	9
84244-00	Assay of renin	LCMS	Covered	21.99	21.99	9 XXX	9	9	9	9	9

84252-00	Assay of vitamin b-2	LCMS	Covered	20.24	20.24	9 XXX	9	9	9	9	9
84255-00	Assay of selenium	LCMS	Covered	25.53	25.53	9 XXX	9	9	9	9	9
84260-00	Assay of serotonin	LCMS	Covered	30.98	30.98	9 XXX	9	9	9	9	9
84270-00	Assay of sex hormone globul	LCMS	Covered	21.73	21.73	9 XXX	9	9	9	9	9
84275-00	Assay of silicic acid	LCMS	Covered	13.44	13.44	9 XXX	9	9	9	9	9
84285-00	Assay of silica	LCMS	Covered	25.21	25.21	9 XXX	9	9	9	9	9
84295-00	Assay of serum sodium	LCMS	Covered	4.81	4.81	9 XXX	9	9	9	9	9
84300-00	Assay of urine sodium	LCMS	Covered	5.06	5.06	9 XXX	9	9	9	9	9
84302-00	Assay of sweat sodium	LCMS	Covered	4.86	4.86	9 XXX	9	9	9	9	9
84305-00	Assay of somatomedin	LCMS	Covered	21.26	21.26	9 XXX	9	9	9	9	9
84307-00	Assay of somatostatin	LCMS	Covered	18.28	18.28	9 XXX	9	9	9	9	9
84311-00	Spectrophotometry	LCMS	Covered	8.10	8.10	9 XXX	9	9	9	9	9
84315-00	Body fluid specific gravity	LCMS	Covered	3.28	3.28	9 XXX	9	9	9	9	9
84375-00	Chromatogram assay sugars	LCMS	Covered	39.00	39.00	9 XXX	9	9	9	9	9
84376-00	Sugars single qual	LCMS	Covered	5.50	5.50	9 XXX	9	9	9	9	9
84377-00	Sugars multiple qual	LCMS	Covered	5.50	5.50	9 XXX	9	9	9	9	9
84378-00	Sugars single quant	LCMS	Covered	11.53	11.53	9 XXX	9	9	9	9	9
84379-00	Sugars multiple quant	LCMS	Covered	11.53	11.53	9 XXX	9	9	9	9	9
84392-00	Assay of urine sulfate	LCMS	Covered	5.49	5.49	9 XXX	9	9	9	9	9
84402-00	Assay of free testosterone	LCMS	Covered	25.47	25.47	9 XXX	9	9	9	9	9
84403-00	Assay of total testosterone	LCMS	Covered	25.81	25.81	9 XXX	9	9	9	9	9
84410-00	Testosterone bioavailable	LCMS	Covered	51.28	51.28	9 XXX	9	9	9	9	9
84425-00	Assay of vitamin b-1	LCMS	Covered	21.23	21.23	9 XXX	9	9	9	9	9
84430-00	Assay of thiocyanate	LCMS	Covered	11.63	11.63	9 XXX	9	9	9	9	9
84431-00	Thromboxane urine	LCMS	Covered	35.11	35.11	9 XXX	9	9	9	9	9
84432-00	Assay of thyroglobulin	LCMS	Covered	16.06	16.06	9 XXX	9	9	9	9	9
84433-00	Asy thiopurin s-mthyltrnsfrs	RMCD	Covered	21.52	21.52	9 XXX	9	9	9	9	9
84436-00	Assay of total thyroxine	LCMS	Covered	6.87	6.87	9 XXX	9	9	9	9	9
84437-00	Assay of neonatal thyroxine	LCMS	Covered	6.47	6.47	9 XXX	9	9	9	9	9
84439-00	Assay of free thyroxine	LCMS	Covered	9.02	9.02	9 XXX	9	9	9	9	9
84442-00	Assay of thyroid activity	LCMS	Covered	14.78	14.78	9 XXX	9	9	9	9	9
84443-00	Assay thyroid stim hormone	LCMS	Covered	16.80	16.80	9 XXX	9	9	9	9	9
84445-00	Assay of tsi globulin	LCMS	Covered	50.86	50.86	9 XXX	9	9	9	9	9
84446-00	Assay of vitamin e	LCMS	Covered	14.18	14.18	9 XXX	9	9	9	9	9
84449-00	Assay of transcortin	LCMS	Covered	18.00	18.00	9 XXX	9	9	9	9	9
84450-00	Transferase (ast) (sgot)	LCMS	Covered	5.18	5.18	9 XXX	9	9	9	9	9
84460-00	Alanine amino (alt) (sgpt)	LCMS	Covered	5.30	5.30	9 XXX	9	9	9	9	9
84466-00	Assay of transferrin	LCMS	Covered	12.76	12.76	9 XXX	9	9	9	9	9
84478-00	Assay of triglycerides	LCMS	Covered	5.74	5.74	9 XXX	9	9	9	9	9
84479-00	Assay of thyroid (t3 or t4)	LCMS	Covered	6.47	6.47	9 XXX	9	9	9	9	9
84480-00	Assay triiodothyronine (t3)	LCMS	Covered	14.18	14.18	9 XXX	9	9	9	9	9
84481-00	Free assay (ft-3)	LCMS	Covered	16.94	16.94	9 XXX	9	9	9	9	9
84482-00	T3 reverse	LCMS	Covered	15.76	15.76	9 XXX	9	9	9	9	9
84484-00	Assay of troponin quant	LCMS	Covered	12.47	12.47	9 XXX	9	9	9	9	9
84485-00	Assay duodenal fluid trypsin	LCMS	Covered	7.20	7.20	9 XXX	9	9	9	9	9
84488-00	Test feces for trypsin	LCMS	Covered	7.30	7.30	9 XXX	9	9	9	9	9
84490-00	Assay of feces for trypsin	LCMS	Covered	9.93	9.93	9 XXX	9	9	9	9	9
84510-00	Assay of tyrosine	LCMS	Covered	10.63	10.63	9 XXX	9	9	9	9	9
84512-00	Assay of troponin qual	LCMS	Covered	10.09	10.09	9 XXX	9	9	9	9	9
84520-00	Assay of urea nitrogen	LCMS	Covered	3.95	3.95	9 XXX	9	9	9	9	9
84525-00	Urea nitrogen semi-quant	LCMS	Covered	5.13	5.13	9 XXX	9	9	9	9	9
84540-00	Assay of urine/urea-n	LCMS	Covered	5.56	5.56	9 XXX	9	9	9	9	9
84545-00	Urea-n clearance test	LCMS	Covered	7.20	7.20	9 XXX	9	9	9	9	9
84550-00	Assay of blood/uric acid	LCMS	Covered	4.52	4.52	9 XXX	9	9	9	9	9

84560-00	Assay of urine/uric acid	LCMS	Covered	5.08	5.08	9 XXX	9	9	9	9	9
84577-00	Assay of feces/urobilinogen	LCMS	Covered	16.80	16.80	9 XXX	9	9	9	9	9
84578-00	Test urine urobilinogen	LCMS	Covered	4.47	4.47	9 XXX	9	9	9	9	9
84580-00	Assay of urine urobilinogen	LCMS	Covered	9.55	9.55	9 XXX	9	9	9	9	9
84583-00	Assay of urine urobilinogen	LCMS	Covered	6.05	6.05	9 XXX	9	9	9	9	9
84585-00	Assay of urine vma	LCMS	Covered	15.50	15.50	9 XXX	9	9	9	9	9
84586-00	Assay of vip	LCMS	Covered	35.33	35.33	9 XXX	9	9	9	9	9
84588-00	Assay of vasopressin	LCMS	Covered	33.94	33.94	9 XXX	9	9	9	9	9
84590-00	Assay of vitamin a	LCMS	Covered	11.61	11.61	9 XXX	9	9	9	9	9
84591-00	Assay of nos vitamin	LCMS	Covered	17.06	17.06	9 XXX	9	9	9	9	9
84597-00	Assay of vitamin k	LCMS	Covered	13.72	13.72	9 XXX	9	9	9	9	9
84600-00	Assay of volatiles	LCMS	Covered	17.11	17.11	9 XXX	9	9	9	9	9
84620-00	Xylose tolerance test	LCMS	Covered	12.91	12.91	9 XXX	9	9	9	9	9
84630-00	Assay of zinc	LCMS	Covered	11.39	11.39	9 XXX	9	9	9	9	9
84681-00	Assay of c-peptide	LCMS	Covered	20.81	20.81	9 XXX	9	9	9	9	9
84702-00	Chorionic gonadotropin test	LCMS	Covered	15.05	15.05	9 XXX	9	9	9	9	9
84703-00	Chorionic gonadotropin assay	LCMS	Covered	7.52	7.52	9 XXX	9	9	9	9	9
84704-00	Hcg free betachain test	LCMS	Covered	15.29	15.29	9 XXX	9	9	9	9	9
84830-00	Ovulation tests	LCMS	Covered	12.70	12.70	9 XXX	9	9	9	9	9
78599-26	Unlisted resp px dx nuc med	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
85002-00	Bleeding time test	LCMS	Covered	4.82	4.82	9 XXX	9	9	9	9	9
85004-00	Automated diff wbc count	LCMS	Covered	6.47	6.47	9 XXX	9	9	9	9	9
85007-00	Bl smear w/diff wbc count	LCMS	Covered	3.80	3.80	9 XXX	9	9	9	9	9
85008-00	Bl smear w/o diff wbc count	LCMS	Covered	3.43	3.43	9 XXX	9	9	9	9	9
85009-00	Manual diff wbc count b-coat	LCMS	Covered	5.07	5.07	9 XXX	9	9	9	9	9
85013-00	Spun microhematocrit	LCMS	Covered	7.00	7.00	9 XXX	9	9	9	9	9
85014-00	Hematocrit	LCMS	Covered	2.37	2.37	9 XXX	9	9	9	9	9
85018-00	Hemoglobin	LCMS	Covered	2.37	2.37	9 XXX	9	9	9	9	9
85025-00	Complete cbc w/auto diff wbc	LCMS	Covered	7.77	7.77	9 XXX	9	9	9	9	9
85027-00	Complete cbc automated	LCMS	Covered	6.47	6.47	9 XXX	9	9	9	9	9
85032-00	Manual cell count each	LCMS	Covered	4.31	4.31	9 XXX	9	9	9	9	9
85041-00	Automated rbc count	LCMS	Covered	3.02	3.02	9 XXX	9	9	9	9	9
85044-00	Manual reticulocyte count	LCMS	Covered	4.31	4.31	9 XXX	9	9	9	9	9
85045-00	Automated reticulocyte count	LCMS	Covered	3.99	3.99	9 XXX	9	9	9	9	9
85046-00	Reticyte/hgb concentrate	LCMS	Covered	5.57	5.57	9 XXX	9	9	9	9	9
85048-00	Automated leukocyte count	LCMS	Covered	2.54	2.54	9 XXX	9	9	9	9	9
85049-00	Automated platelet count	LCMS	Covered	4.48	4.48	9 XXX	9	9	9	9	9
85055-00	Reticulated platelet assay	LCMS	Covered	35.74	35.74	9 XXX	9	9	9	9	9
85060-00	Blood smear interpretation	R26C	Covered	41.72	41.72	8 XXX	0	0	0	0	0
85097-00	Bone marrow interpretation	R26C	Covered	127.87	84.53	0 XXX	0	0	0	0	0
85130-00	Chromogenic substrate assay	LCMS	Covered	11.89	11.89	9 XXX	9	9	9	9	9
85170-00	Blood clot retraction	LCMS	Covered	16.30	16.30	9 XXX	9	9	9	9	9
85175-00	Blood clot lysis time	LCMS	Covered	20.37	20.37	9 XXX	9	9	9	9	9
85210-00	Clot factor ii prothrom spec	LCMS	Covered	12.98	12.98	9 XXX	9	9	9	9	9
85220-00	Blooc clot factor v test	LCMS	Covered	17.65	17.65	9 XXX	9	9	9	9	9
85230-00	Clot factor vii proconvertin	LCMS	Covered	17.90	17.90	9 XXX	9	9	9	9	9
85240-00	Clot factor viii ahg 1 stage	LCMS	Covered	17.90	17.90	9 XXX	9	9	9	9	9
85244-00	Clot factor viii reltd antgn	LCMS	Covered	20.42	20.42	9 XXX	9	9	9	9	9
85245-00	Clot factor viii vw ristoctn	LCMS	Covered	22.94	22.94	9 XXX	9	9	9	9	9
85246-00	Clot factor viii vw antigen	LCMS	Covered	22.94	22.94	9 XXX	9	9	9	9	9
85247-00	Clot factor viii multimetric	LCMS	Covered	22.94	22.94	9 XXX	9	9	9	9	9
85250-00	Clot factor ix ptc/chrstmas	LCMS	Covered	19.04	19.04	9 XXX	9	9	9	9	9
85260-00	Clot factor x stuart-power	LCMS	Covered	17.90	17.90	9 XXX	9	9	9	9	9
85270-00	Clot factor xi pta	LCMS	Covered	17.90	17.90	9 XXX	9	9	9	9	9

85280-00	Clot factor xii hageman	LCMS	Covered	19.35	19.35	9 XXX	9	9	9	9	9
85290-00	Clot factor xiii fibrin stab	LCMS	Covered	16.34	16.34	9 XXX	9	9	9	9	9
85291-00	Clot factor xiii fibrin scrn	LCMS	Covered	9.11	9.11	9 XXX	9	9	9	9	9
85292-00	Clot factor fletcher fact	LCMS	Covered	18.93	18.93	9 XXX	9	9	9	9	9
85293-00	Clot factor wght kininogen	LCMS	Covered	18.93	18.93	9 XXX	9	9	9	9	9
85300-00	Antithrombin iii activity	LCMS	Covered	11.85	11.85	9 XXX	9	9	9	9	9
85301-00	Antithrombin iii antigen	LCMS	Covered	10.81	10.81	9 XXX	9	9	9	9	9
85302-00	Clot inhibit prot c antigen	LCMS	Covered	12.01	12.01	9 XXX	9	9	9	9	9
85303-00	Clot inhibit prot c activity	LCMS	Covered	13.84	13.84	9 XXX	9	9	9	9	9
85305-00	Clot inhibit prot s total	LCMS	Covered	11.61	11.61	9 XXX	9	9	9	9	9
85306-00	Clot inhibit prot s free	LCMS	Covered	15.32	15.32	9 XXX	9	9	9	9	9
85307-00	Assay activated protein c	LCMS	Covered	15.32	15.32	9 XXX	9	9	9	9	9
85335-00	Factor inhibitor test	LCMS	Covered	12.87	12.87	9 XXX	9	9	9	9	9
85337-00	Thrombomodulin	LCMS	Covered	17.27	17.27	9 XXX	9	9	9	9	9
85345-00	Coagulation time lee & white	LCMS	Covered	4.69	4.69	9 XXX	9	9	9	9	9
85347-00	Coagulation time activated	LCMS	Covered	4.28	4.28	9 XXX	9	9	9	9	9
85348-00	Coagulation time otr method	LCMS	Covered	4.49	4.49	9 XXX	9	9	9	9	9
85360-00	Euglobulin lysis	LCMS	Covered	8.41	8.41	9 XXX	9	9	9	9	9
85362-00	Fibrin degradation products	LCMS	Covered	6.89	6.89	9 XXX	9	9	9	9	9
85366-00	Fibrinogen test	LCMS	Covered	80.46	80.46	9 XXX	9	9	9	9	9
85370-00	Fibrinogen test	LCMS	Covered	12.43	12.43	9 XXX	9	9	9	9	9
85378-00	Fibrin degrade semiquant	LCMS	Covered	9.72	9.72	9 XXX	9	9	9	9	9
85379-00	Fibrin degradation quant	LCMS	Covered	10.18	10.18	9 XXX	9	9	9	9	9
85380-00	Fibrin degradj d-dimer	LCMS	Covered	10.18	10.18	9 XXX	9	9	9	9	9
85384-00	Fibrinogen activity	LCMS	Covered	9.72	9.72	9 XXX	9	9	9	9	9
85385-00	Fibrinogen antigen	LCMS	Covered	14.46	14.46	9 XXX	9	9	9	9	9
85390-00	Fibrinolysins screen i&r	LCMS	Covered	15.48	15.48	9 XXX	9	9	9	9	9
85390-26	Fibrinolysins screen i&r	RCMS	Covered	64.44	64.44	6 XXX	0	0	0	0	0
85396-00	Clotting assay whole blood	R26C	Covered	34.23	34.23	0 XXX	0	0	0	0	0
58350-00	Reopen fallopian tube	NCOV	Not Covered	Code not covered	Code not cov	0 010	2	1	1	0	0
85400-00	Fibrinolytic plasmin	LCMS	Covered	7.71	7.71	9 XXX	9	9	9	9	9
85410-00	Fibrinolytic antiplasmin	LCMS	Covered	7.71	7.71	9 XXX	9	9	9	9	9
85415-00	Fibrinolytic plasminogen	LCMS	Covered	17.19	17.19	9 XXX	9	9	9	9	9
85420-00	Fibrinolytic plasminogen	LCMS	Covered	6.53	6.53	9 XXX	9	9	9	9	9
85421-00	Fibrinolytic plasminogen	LCMS	Covered	10.18	10.18	9 XXX	9	9	9	9	9
85441-00	Heinz bodies direct	LCMS	Covered	4.20	4.20	9 XXX	9	9	9	9	9
85445-00	Heinz bodies induced	LCMS	Covered	6.82	6.82	9 XXX	9	9	9	9	9
85460-00	Hemoglobin fetal	LCMS	Covered	7.73	7.73	9 XXX	9	9	9	9	9
85461-00	Hemoglobin fetal	LCMS	Covered	9.36	9.36	9 XXX	9	9	9	9	9
85475-00	Hemolysin acid	LCMS	Covered	8.87	8.87	9 XXX	9	9	9	9	9
85520-00	Heparin assay	LCMS	Covered	13.09	13.09	9 XXX	9	9	9	9	9
85525-00	Heparin neutralization	LCMS	Covered	11.84	11.84	9 XXX	9	9	9	9	9
85530-00	Heparin-protamine tolerance	LCMS	Covered	13.09	13.09	9 XXX	9	9	9	9	9
85536-00	Iron stain peripheral blood	LCMS	Covered	6.88	6.88	9 XXX	9	9	9	9	9
85540-00	Wbc alkaline phosphatase	LCMS	Covered	8.60	8.60	9 XXX	9	9	9	9	9
85547-00	Rbc mechanical fragility	LCMS	Covered	8.60	8.60	9 XXX	9	9	9	9	9
85549-00	Muramidase	LCMS	Covered	18.75	18.75	9 XXX	9	9	9	9	9
85555-00	Rbc osmotic fragility	LCMS	Covered	7.47	7.47	9 XXX	9	9	9	9	9
85557-00	Rbc osmotic fragility	LCMS	Covered	13.36	13.36	9 XXX	9	9	9	9	9
85576-00	Blood platelet aggregation	LCMS	Covered	24.91	24.91	9 XXX	9	9	9	9	9
85576-26	Blood platelet aggregation	RCMS	Covered	31.59	31.59	6 XXX	0	0	0	0	0
85597-00	Phospholipid plltl neutraliz	LCMS	Covered	17.98	17.98	9 XXX	9	9	9	9	9
11954-00	Tx contour defects >10.0 cc	NCOV	Not Covered	Code not covered	Code not cov	0 000	2	0	0	0	0
85610-00	Prothrombin time	LCMS	Covered	4.29	4.29	9 XXX	9	9	9	9	9

85611-00	Prothrombin test	LCMS	Covered	3.94	3.94	9 XXX	9	9	9	9	9
85612-00	Viper venom prothrombin time	LCMS	Covered	17.49	17.49	9 XXX	9	9	9	9	9
85613-00	Russell viper venom diluted	LCMS	Covered	9.58	9.58	9 XXX	9	9	9	9	9
85635-00	Reptilase test	LCMS	Covered	9.85	9.85	9 XXX	9	9	9	9	9
85651-00	Rbc sed rate nonautomated	LCMS	Covered	4.27	4.27	9 XXX	9	9	9	9	9
85652-00	Rbc sed rate automated	LCMS	Covered	2.70	2.70	9 XXX	9	9	9	9	9
85660-00	Rbc sickle cell test	LCMS	Covered	5.51	5.51	9 XXX	9	9	9	9	9
85670-00	Thrombin time plasma	LCMS	Covered	5.77	5.77	9 XXX	9	9	9	9	9
85675-00	Thrombin time titer	LCMS	Covered	6.85	6.85	9 XXX	9	9	9	9	9
85705-00	Thromboplastin inhibition	LCMS	Covered	9.63	9.63	9 XXX	9	9	9	9	9
85730-00	Thromboplastin time partial	LCMS	Covered	6.01	6.01	9 XXX	9	9	9	9	9
85732-00	Thromboplastin time partial	LCMS	Covered	6.47	6.47	9 XXX	9	9	9	9	9
85810-00	Blood viscosity examination	LCMS	Covered	11.67	11.67	9 XXX	9	9	9	9	9
78599-TC	Unlisted resp px dx nuc med	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
86000-00	Agglutinins febrile antigen	LCMS	Covered	6.98	6.98	9 XXX	9	9	9	9	9
86001-00	Allergen specific igg	LCMS	Covered	7.82	7.82	9 XXX	9	9	9	9	9
86003-00	Allg spec ige crude xtrc ea	LCMS	Covered	5.22	5.22	9 XXX	9	9	9	9	9
86005-00	Allg spec ige multiallg scr	LCMS	Covered	7.97	7.97	9 XXX	9	9	9	9	9
86008-00	Allg spec ige recomb ea	LCMS	Covered	17.93	17.93	9 XXX	9	9	9	9	9
86015-00	Actin antibody each	LCMS	Covered	12.05	12.05	9 XXX	9	9	9	9	9
86021-00	Wbc antibody identification	LCMS	Covered	15.05	15.05	9 XXX	9	9	9	9	9
86022-00	Platelet antibodies	LCMS	Covered	18.37	18.37	9 XXX	9	9	9	9	9
86023-00	Immunoglobulin assay	LCMS	Covered	12.46	12.46	9 XXX	9	9	9	9	9
86036-00	Anca screen each antibody	LCMS	Covered	12.05	12.05	9 XXX	9	9	9	9	9
86037-00	Anca titer each antibody	LCMS	Covered	12.05	12.05	9 XXX	9	9	9	9	9
86038-00	Antinuclear antibodies	LCMS	Covered	12.09	12.09	9 XXX	9	9	9	9	9
86039-00	Antinuclear antibodies (ana)	LCMS	Covered	11.16	11.16	9 XXX	9	9	9	9	9
86042-00	Under Qualitative or Semiquantitative	LCMS	Covered	18.40	18.40	9 XXX	9	9	9	9	9
86043-00	Under Qualitative or Semiquantitative	LCMS	Covered	12.05	12.05	9 XXX	9	9	9	9	9
86051-00	Aquaporin-4 antb elisa	LCMS	Covered	11.53	11.53	9 XXX	9	9	9	9	9
86052-00	Aquaporin-4 antb cba each	LCMS	Covered	12.05	12.05	9 XXX	9	9	9	9	9
86053-00	Aqaprn-4 antb flo cymtry ea	LCMS	Covered	37.73	37.73	9 XXX	9	9	9	9	9
86060-00	Antistreptolysin o titer	LCMS	Covered	7.30	7.30	9 XXX	9	9	9	9	9
86063-00	Antistreptolysin o screen	LCMS	Covered	5.77	5.77	9 XXX	9	9	9	9	9
86077-00	Phys blood bank serv xmatch	R26C	Covered	95.53	86.47	0 XXX	0	0	0	0	0
86078-00	Phys blood bank serv reactj	R26C	Covered	95.53	86.47	0 XXX	0	0	0	0	0
86079-00	Phys blood bank serv authrj	R26C	Covered	95.53	86.47	0 XXX	0	0	0	0	0
86140-00	C-reactive protein	LCMS	Covered	5.18	5.18	9 XXX	9	9	9	9	9
86141-00	C-reactive protein hs	LCMS	Covered	12.95	12.95	9 XXX	9	9	9	9	9
86146-00	Beta-2 glycoprotein antibody	LCMS	Covered	25.45	25.45	9 XXX	9	9	9	9	9
86147-00	Cardiolipin antibody ea ig	LCMS	Covered	25.45	25.45	9 XXX	9	9	9	9	9
86148-00	Anti-phospholipid antibody	LCMS	Covered	16.07	16.07	9 XXX	9	9	9	9	9
0137U-00	mRNA gene analysis (partner and localizer of BRCA2)	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
86153-26	Cell enumeration phys interp	R26C	Covered	59.50	59.50	6 XXX	0	0	0	0	0
86155-00	Chemotaxis assay	LCMS	Covered	15.99	15.99	9 XXX	9	9	9	9	9
86156-00	Cold agglutinin screen	LCMS	Covered	8.07	8.07	9 XXX	9	9	9	9	9
86157-00	Cold agglutinin titer	LCMS	Covered	8.06	8.06	9 XXX	9	9	9	9	9
86160-00	Complement antigen	LCMS	Covered	12.00	12.00	9 XXX	9	9	9	9	9
86161-00	Complement/function activity	LCMS	Covered	12.00	12.00	9 XXX	9	9	9	9	9
86162-00	Complement total (ch50)	LCMS	Covered	20.32	20.32	9 XXX	9	9	9	9	9
86171-00	Complement fixation each	LCMS	Covered	10.01	10.01	9 XXX	9	9	9	9	9
86200-00	Ccp antibody	LCMS	Covered	12.95	12.95	9 XXX	9	9	9	9	9
86215-00	Deoxyribonuclease antibody	LCMS	Covered	13.25	13.25	9 XXX	9	9	9	9	9
86225-00	Dna antibody native	LCMS	Covered	13.74	13.74	9 XXX	9	9	9	9	9

86226-00	Dna antibody single strand	LCMS	Covered	12.11	12.11	9 XXX	9	9	9	9	9
86231-00	Ema each ig class	LCMS	Covered	12.09	12.09	9 XXX	9	9	9	9	9
86235-00	Nuclear antigen antibody	LCMS	Covered	17.93	17.93	9 XXX	9	9	9	9	9
86255-00	Fluorescent antibody screen	LCMS	Covered	12.05	12.05	9 XXX	9	9	9	9	9
86255-26	Fluorescent antibody screen	RCMS	Covered	31.59	31.59	6 XXX	0	0	0	0	0
86256-00	Fluorescent antibody titer	LCMS	Covered	12.05	12.05	9 XXX	9	9	9	9	9
86256-26	Fluorescent antibody titer	RCMS	Covered	31.59	31.59	6 XXX	0	0	0	0	0
86258-00	Dgp antibody each ig class	LCMS	Covered	12.05	12.05	9 XXX	9	9	9	9	9
86277-00	Growth hormone antibody	LCMS	Covered	15.74	15.74	9 XXX	9	9	9	9	9
86280-00	Hemagglutination inhibition	LCMS	Covered	8.19	8.19	9 XXX	9	9	9	9	9
86294-00	Immunoassay tumor qual	LCMS	Covered	25.57	25.57	9 XXX	9	9	9	9	9
86300-00	Immunoassay tumor ca 15-3	LCMS	Covered	20.81	20.81	9 XXX	9	9	9	9	9
86301-00	Immunoassay tumor ca 19-9	LCMS	Covered	20.81	20.81	9 XXX	9	9	9	9	9
86304-00	Immunoassay tumor ca 125	LCMS	Covered	20.81	20.81	9 XXX	9	9	9	9	9
86305-00	Human epididymis protein 4	LCMS	Covered	20.81	20.81	9 XXX	9	9	9	9	9
86308-00	Heterophile antibody screen	LCMS	Covered	5.18	5.18	9 XXX	9	9	9	9	9
86309-00	Heterophile antibody titer	LCMS	Covered	6.47	6.47	9 XXX	9	9	9	9	9
86310-00	Heterophile antibody absrbj	LCMS	Covered	7.37	7.37	9 XXX	9	9	9	9	9
86316-00	Immunoassay tumor other	LCMS	Covered	20.81	20.81	9 XXX	9	9	9	9	9
86317-00	Immunoassay infectious agent	LCMS	Covered	14.99	14.99	9 XXX	9	9	9	9	9
86318-00	Ia infectious agent antibody	LCMS	Covered	18.09	18.09	9 XXX	9	9	9	9	9
86320-00	Serum immunoelectrophoresis	LCMS	Covered	29.92	29.92	9 XXX	9	9	9	9	9
86320-26	Serum immunoelectrophoresis	RCMS	Covered	31.59	31.59	6 XXX	0	0	0	0	0
86325-00	Other immunoelectrophoresis	LCMS	Covered	23.13	23.13	9 XXX	9	9	9	9	9
86325-26	Other immunoelectrophoresis	RCMS	Covered	31.59	31.59	6 XXX	0	0	0	0	0
86327-00	Immunoelectrophoresis assay	LCMS	Covered	29.92	29.92	9 XXX	9	9	9	9	9
86327-26	Immunoelectrophoresis assay	RCMS	Covered	38.51	38.51	6 XXX	0	0	0	0	0
86328-00	Ia nfct ab sarscov2 covid19	LCMS	Covered	45.28	45.28	9 XXX	9	9	9	9	9
86329-00	Immunodiffusion nes	LCMS	Covered	14.05	14.05	9 XXX	9	9	9	9	9
86331-00	Immunodiffusion ouchterlony	LCMS	Covered	11.98	11.98	9 XXX	9	9	9	9	9
86332-00	Immune complex assay	LCMS	Covered	24.37	24.37	9 XXX	9	9	9	9	9
86334-00	Immunofix e-phoresis serum	LCMS	Covered	22.34	22.34	9 XXX	9	9	9	9	9
86334-26	Immunofix e-phoresis serum	RCMS	Covered	31.59	31.59	6 XXX	0	0	0	0	0
86335-00	Immunifix e-phorsis/urine/csf	LCMS	Covered	29.35	29.35	9 XXX	9	9	9	9	9
86335-26	Immunifix e-phorsis/urine/csf	RCMS	Covered	31.59	31.59	6 XXX	0	0	0	0	0
86336-00	Inhibin a	LCMS	Covered	15.59	15.59	9 XXX	9	9	9	9	9
86337-00	Insulin antibodies	LCMS	Covered	21.41	21.41	9 XXX	9	9	9	9	9
86340-00	Intrinsic factor antibody	LCMS	Covered	15.08	15.08	9 XXX	9	9	9	9	9
86341-00	Islet cell antibody	LCMS	Covered	23.57	23.57	9 XXX	9	9	9	9	9
86343-00	Leukocyte histamine release	LCMS	Covered	12.46	12.46	9 XXX	9	9	9	9	9
86344-00	Leukocyte phagocytosis	LCMS	Covered	10.39	10.39	9 XXX	9	9	9	9	9
86352-00	Cell function assay w/stim	LCMS	Covered	135.86	135.86	9 XXX	9	9	9	9	9
86353-00	Lymphocyte transformation	LCMS	Covered	49.03	49.03	9 XXX	9	9	9	9	9
86355-00	B cells total count	LCMS	Covered	37.73	37.73	9 XXX	9	9	9	9	9
86356-00	Mononuclear cell antigen	LCMS	Covered	26.78	26.78	9 XXX	9	9	9	9	9
86357-00	Nk cells total count	LCMS	Covered	37.73	37.73	9 XXX	9	9	9	9	9
86359-00	T cells total count	LCMS	Covered	37.73	37.73	9 XXX	9	9	9	9	9
86360-00	T cell absolute count/ratio	LCMS	Covered	46.98	46.98	9 XXX	9	9	9	9	9
86361-00	T cell absolute count	LCMS	Covered	26.78	26.78	9 XXX	9	9	9	9	9
86362-00	Mog-igg1 antb cba each	LCMS	Covered	12.05	12.05	9 XXX	9	9	9	9	9
86363-00	Mog-igg1 antb flo cytmtry ea	LCMS	Covered	37.73	37.73	9 XXX	9	9	9	9	9
86364-00	Tiss trnsgltmase ea ig clas	LCMS	Covered	11.53	11.53	9 XXX	9	9	9	9	9
86367-00	Stem cells total count	LCMS	Covered	77.78	77.78	9 XXX	9	9	9	9	9
86376-00	Microsomal antibody each	LCMS	Covered	14.55	14.55	9 XXX	9	9	9	9	9

86381-00	Mitochondrial antibody each	LCMS	Covered	25.45	25.45	9 XXX	9	9	9	9	9
86382-00	Neutralization test viral	LCMS	Covered	16.91	16.91	9 XXX	9	9	9	9	9
86384-00	Nitroblue tetrazolium dye	LCMS	Covered	13.61	13.61	9 XXX	9	9	9	9	9
0157U-00	mRNA gene analysis of APC regulator of WNT	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
86403-00	Particle agglut antbdy scrn	LCMS	Covered	11.54	11.54	9 XXX	9	9	9	9	9
86406-00	Particle agglut antbdy titr	LCMS	Covered	10.64	10.64	9 XXX	9	9	9	9	9
86408-00	Neutrlzg antb sarscov2 scr	LCMS	Covered	42.13	42.13	9 XXX	9	9	9	9	9
86409-00	Neutrlzg antb sarscov2 titer	RMCD	Covered	72.45	72.45	9 XXX	9	9	9	9	9
86413-00	Sars-cov-2 antb quantitative	RMCD	Covered	46.80	46.80	9 XXX	9	9	9	9	9
86430-00	Rheumatoid factor test qual	LCMS	Covered	6.14	6.14	9 XXX	9	9	9	9	9
86431-00	Rheumatoid factor quant	LCMS	Covered	5.67	5.67	9 XXX	9	9	9	9	9
86480-00	Tb test cell immun measure	LCMS	Covered	61.98	61.98	9 XXX	9	9	9	9	9
86481-00	Tb ag response t-cell susp	LCMS	Covered	100.00	100.00	9 XXX	9	9	9	9	9
86485-00	Skin test candida	RMCD	Covered	19.79	19.79	3 XXX	0	0	0	0	0
86486-00	Skin test unlisted antign ea	R26C	Covered	11.69	11.69	3 XXX	0	0	0	0	0
86490-00	Coccidioidomycosis skin test	R26C	Covered	147.52	147.52	3 XXX	0	0	0	0	0
86510-00	Histoplasmosis skin test	R26C	Covered	14.28	14.28	3 XXX	0	0	0	0	0
86580-00	Tb intradermal test	R26C	Covered	19.45	19.45	3 XXX	0	0	0	0	0
86590-00	Streptokinase antibody	LCMS	Covered	12.66	12.66	9 XXX	9	9	9	9	9
86592-00	Syphilis test non-trep qual	LCMS	Covered	4.27	4.27	9 XXX	9	9	9	9	9
86593-00	Syphilis test non-trep quant	LCMS	Covered	4.40	4.40	9 XXX	9	9	9	9	9
86596-00	Voltage-gtd ca chnl antb ea	LCMS	Covered	12.05	12.05	9 XXX	9	9	9	9	9
86602-00	Antinomyces antibody	LCMS	Covered	10.18	10.18	9 XXX	9	9	9	9	9
86603-00	Adenovirus antibody	LCMS	Covered	12.87	12.87	9 XXX	9	9	9	9	9
86606-00	Aspergillus antibody	LCMS	Covered	15.05	15.05	9 XXX	9	9	9	9	9
86609-00	Bacterium antibody	LCMS	Covered	12.88	12.88	9 XXX	9	9	9	9	9
86611-00	Bartonella antibody	LCMS	Covered	10.18	10.18	9 XXX	9	9	9	9	9
86612-00	Blastomyces antibody	LCMS	Covered	12.90	12.90	9 XXX	9	9	9	9	9
86615-00	Bordetella antibody	LCMS	Covered	13.19	13.19	9 XXX	9	9	9	9	9
86617-00	Lyme disease antibody	LCMS	Covered	15.49	15.49	9 XXX	9	9	9	9	9
86618-00	Lyme disease antibody	LCMS	Covered	17.03	17.03	9 XXX	9	9	9	9	9
86619-00	Borrelia antibody	LCMS	Covered	13.38	13.38	9 XXX	9	9	9	9	9
86622-00	Brucella antibody	LCMS	Covered	8.93	8.93	9 XXX	9	9	9	9	9
86625-00	Campylobacter antibody	LCMS	Covered	13.12	13.12	9 XXX	9	9	9	9	9
86628-00	Candida antibody	LCMS	Covered	12.01	12.01	9 XXX	9	9	9	9	9
86631-00	Chlamydia antibody	LCMS	Covered	11.82	11.82	9 XXX	9	9	9	9	9
86632-00	Chlamydia igm antibody	LCMS	Covered	12.68	12.68	9 XXX	9	9	9	9	9
86635-00	Coccidioides antibody	LCMS	Covered	11.47	11.47	9 XXX	9	9	9	9	9
86638-00	Q fever antibody	LCMS	Covered	12.12	12.12	9 XXX	9	9	9	9	9
86641-00	Cryptococcus antibody	LCMS	Covered	14.41	14.41	9 XXX	9	9	9	9	9
86644-00	Cmv antibody	LCMS	Covered	14.39	14.39	9 XXX	9	9	9	9	9
86645-00	Cmv antibody igm	LCMS	Covered	16.85	16.85	9 XXX	9	9	9	9	9
86648-00	Diphtheria antibody	LCMS	Covered	15.21	15.21	9 XXX	9	9	9	9	9
86651-00	Encephalitis californ antbdy	LCMS	Covered	13.19	13.19	9 XXX	9	9	9	9	9
86652-00	Encephalitis east eqne anbdy	LCMS	Covered	13.19	13.19	9 XXX	9	9	9	9	9
86653-00	Encephalitis st louis antbdy	LCMS	Covered	13.19	13.19	9 XXX	9	9	9	9	9
86654-00	Encephalitis west eqne antbdy	LCMS	Covered	13.19	13.19	9 XXX	9	9	9	9	9
86658-00	Enterovirus antibody	LCMS	Covered	13.03	13.03	9 XXX	9	9	9	9	9
86663-00	Epstein-barr antibody	LCMS	Covered	13.12	13.12	9 XXX	9	9	9	9	9
86664-00	Epstein-barr nuclear antigen	LCMS	Covered	15.29	15.29	9 XXX	9	9	9	9	9
86665-00	Epstein-barr capsid vca	LCMS	Covered	18.14	18.14	9 XXX	9	9	9	9	9
86666-00	Ehrlichia antibody	LCMS	Covered	10.18	10.18	9 XXX	9	9	9	9	9
86668-00	Francisella tularensis	LCMS	Covered	14.16	14.16	9 XXX	9	9	9	9	9
86671-00	Fungus nes antibody	LCMS	Covered	12.25	12.25	9 XXX	9	9	9	9	9

86674-00	Giardia lamblia antibody	LCMS	Covered	14.72	14.72	9 XXX	9	9	9	9	9
86677-00	Helicobacter pylori antibody	LCMS	Covered	16.85	16.85	9 XXX	9	9	9	9	9
86682-00	Helminth antibody	LCMS	Covered	13.01	13.01	9 XXX	9	9	9	9	9
86684-00	Hemophilus influenza antibdy	LCMS	Covered	15.84	15.84	9 XXX	9	9	9	9	9
86687-00	Htlv-i antibody	LCMS	Covered	9.09	9.09	9 XXX	9	9	9	9	9
86688-00	Htlv-ii antibody	LCMS	Covered	14.00	14.00	9 XXX	9	9	9	9	9
86689-00	Htlv/hiv confirmj antibody	LCMS	Covered	19.35	19.35	9 XXX	9	9	9	9	9
86692-00	Hepatitis delta agent antbdy	LCMS	Covered	17.16	17.16	9 XXX	9	9	9	9	9
86694-00	Herpes simplex nes antbdy	LCMS	Covered	14.39	14.39	9 XXX	9	9	9	9	9
86695-00	Herpes simplex type 1 test	LCMS	Covered	13.19	13.19	9 XXX	9	9	9	9	9
86696-00	Herpes simplex type 2 test	LCMS	Covered	19.35	19.35	9 XXX	9	9	9	9	9
86698-00	Histoplasma antibody	LCMS	Covered	13.79	13.79	9 XXX	9	9	9	9	9
86701-00	Hiv-1antibody	LCMS	Covered	8.89	8.89	9 XXX	9	9	9	9	9
86702-00	Hiv-2 antibody	LCMS	Covered	13.52	13.52	9 XXX	9	9	9	9	9
86703-00	Hiv-1/hiv-2 1 result antbdy	LCMS	Covered	13.71	13.71	9 XXX	9	9	9	9	9
86704-00	Hep b core antibody total	LCMS	Covered	12.05	12.05	9 XXX	9	9	9	9	9
86705-00	Hep b core antibody igm	LCMS	Covered	11.77	11.77	9 XXX	9	9	9	9	9
86706-00	Hep b surface antibody	LCMS	Covered	10.74	10.74	9 XXX	9	9	9	9	9
86707-00	Hepatitis be antibody	LCMS	Covered	11.57	11.57	9 XXX	9	9	9	9	9
86708-00	Hepatitis a antibody	LCMS	Covered	12.39	12.39	9 XXX	9	9	9	9	9
86709-00	Hepatitis a igm antibody	LCMS	Covered	11.26	11.26	9 XXX	9	9	9	9	9
86710-00	Influenza virus antibody	LCMS	Covered	13.55	13.55	9 XXX	9	9	9	9	9
86711-00	John cunningham antibody	LCMS	Covered	16.89	16.89	9 XXX	9	9	9	9	9
86713-00	Legionella antibody	LCMS	Covered	15.30	15.30	9 XXX	9	9	9	9	9
86717-00	Leishmania antibody	LCMS	Covered	12.25	12.25	9 XXX	9	9	9	9	9
86720-00	Leptospira antibody	LCMS	Covered	16.20	16.20	9 XXX	9	9	9	9	9
86723-00	Listeria monocytogenes	LCMS	Covered	13.19	13.19	9 XXX	9	9	9	9	9
86727-00	Lymph choriomeningitis ab	LCMS	Covered	12.87	12.87	9 XXX	9	9	9	9	9
86732-00	Mucormycosis antibody	LCMS	Covered	15.00	15.00	9 XXX	9	9	9	9	9
86735-00	Mumps antibody	LCMS	Covered	13.05	13.05	9 XXX	9	9	9	9	9
86738-00	Mycoplasma antibody	LCMS	Covered	13.24	13.24	9 XXX	9	9	9	9	9
86741-00	Neisseria meningitidis	LCMS	Covered	13.19	13.19	9 XXX	9	9	9	9	9
86744-00	Nocardia antibody	LCMS	Covered	15.99	15.99	9 XXX	9	9	9	9	9
86747-00	Parvovirus antibody	LCMS	Covered	15.03	15.03	9 XXX	9	9	9	9	9
86750-00	Malaria antibody	LCMS	Covered	13.19	13.19	9 XXX	9	9	9	9	9
86753-00	Protozoa antibody nos	LCMS	Covered	12.39	12.39	9 XXX	9	9	9	9	9
86756-00	Respiratory virus antibody	LCMS	Covered	15.89	15.89	9 XXX	9	9	9	9	9
86757-00	Rickettsia antibody	LCMS	Covered	19.35	19.35	9 XXX	9	9	9	9	9
86759-00	Rotavirus antibody	LCMS	Covered	18.23	18.23	9 XXX	9	9	9	9	9
86762-00	Rubella antibody	LCMS	Covered	14.39	14.39	9 XXX	9	9	9	9	9
86765-00	Rubeola antibody	LCMS	Covered	12.88	12.88	9 XXX	9	9	9	9	9
86768-00	Salmonella antibody	LCMS	Covered	13.19	13.19	9 XXX	9	9	9	9	9
86769-00	Sars-cov-2 covid-19 antibody	LCMS	Covered	42.13	42.13	9 XXX	9	9	9	9	9
86771-00	Shigella antibody	LCMS	Covered	24.48	24.48	9 XXX	9	9	9	9	9
86774-00	Tetanus antibody	LCMS	Covered	14.80	14.80	9 XXX	9	9	9	9	9
86777-00	Toxoplasma antibody	LCMS	Covered	14.39	14.39	9 XXX	9	9	9	9	9
86778-00	Toxoplasma antibody igm	LCMS	Covered	14.41	14.41	9 XXX	9	9	9	9	9
86780-00	Treponema pallidum	LCMS	Covered	13.24	13.24	9 XXX	9	9	9	9	9
86784-00	Trichinella antibody	LCMS	Covered	12.56	12.56	9 XXX	9	9	9	9	9
86787-00	Varicella-zoster antibody	LCMS	Covered	12.88	12.88	9 XXX	9	9	9	9	9
86788-00	West nile virus ab igm	LCMS	Covered	16.85	16.85	9 XXX	9	9	9	9	9
86789-00	West nile virus antibody	LCMS	Covered	14.39	14.39	9 XXX	9	9	9	9	9
86790-00	Virus antibody nos	LCMS	Covered	12.88	12.88	9 XXX	9	9	9	9	9
86793-00	Yersinia antibody	LCMS	Covered	13.19	13.19	9 XXX	9	9	9	9	9

86794-00	Zika virus igm antibody	LCMS	Covered	16.85	16.85	9 XXX	9	9	9	9	9
86800-00	Thyroglobulin antibody	LCMS	Covered	15.91	15.91	9 XXX	9	9	9	9	9
86803-00	Hepatitis c ab test	LCMS	Covered	14.27	14.27	9 XXX	9	9	9	9	9
86804-00	Hep c ab test confirm	LCMS	Covered	15.49	15.49	9 XXX	9	9	9	9	9
86805-00	Lymphocytotoxicity assay	LCMS	Covered	189.51	189.51	9 XXX	9	9	9	9	9
86806-00	Lymphocytotoxicity assay	LCMS	Covered	47.59	47.59	9 XXX	9	9	9	9	9
86807-00	Cytotoxic antibody screening	LCMS	Covered	78.65	78.65	9 XXX	9	9	9	9	9
86808-00	Cytotoxic antibody screening	LCMS	Covered	29.68	29.68	9 XXX	9	9	9	9	9
86812-00	Hla typing a b or c	LCMS	Covered	25.81	25.81	9 XXX	9	9	9	9	9
86813-00	Hla typing a b or c	LCMS	Covered	58.00	58.00	9 XXX	9	9	9	9	9
86816-00	Hla typing dr/dq	LCMS	Covered	30.17	30.17	9 XXX	9	9	9	9	9
86817-00	Hla typing dr/dq	LCMS	Covered	106.14	106.14	9 XXX	9	9	9	9	9
86821-00	Lymphocyte culture mixed	LCMS	Covered	36.56	36.56	9 XXX	9	9	9	9	9
0158U-00	mRNA gene analysis of mutL homolog 1	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0159U-00	mRNA gene analysis of mutS homolog 2	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
86828-00	Hla class i&ii antibody qual	LCMS	Covered	64.19	64.19	9 XXX	9	9	9	9	9
86829-00	Hla class i/ii antibody qual	LCMS	Covered	64.19	64.19	9 XXX	9	9	9	9	9
86830-00	Hla class i phenotype qual	LCMS	Covered	95.52	95.52	9 XXX	9	9	9	9	9
86831-00	Hla class ii phenotype qual	LCMS	Covered	81.88	81.88	9 XXX	9	9	9	9	9
86832-00	Hla class i high defin qual	LCMS	Covered	323.75	323.75	9 XXX	9	9	9	9	9
86833-00	Hla class ii high defin qual	LCMS	Covered	325.80	325.80	9 XXX	9	9	9	9	9
86834-00	Hla class i semiquant panel	LCMS	Covered	357.56	357.56	9 XXX	9	9	9	9	9
86835-00	Hla class ii semiquant panel	LCMS	Covered	322.96	322.96	9 XXX	9	9	9	9	9
78699-00	Unlisted nrvs sys px dx nuc	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
86850-00	Rbc antibody screen	LCMS	Covered	9.77	9.77	9 XXX	9	9	9	9	9
78699-26	Unlisted nrvs sys px dx nuc	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78699-TC	Unlisted nrvs sys px dx nuc	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
86880-00	Coombs test direct	LCMS	Covered	5.39	5.39	9 XXX	9	9	9	9	9
86885-00	Coombs test indirect qual	LCMS	Covered	5.72	5.72	9 XXX	9	9	9	9	9
86886-00	Coombs test indirect titer	LCMS	Covered	5.18	5.18	9 XXX	9	9	9	9	9
78799-00	Unlisted gu px dx nuc med	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78799-26	Unlisted gu px dx nuc med	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
86900-00	Blood typing serologic abo	LCMS	Covered	2.99	2.99	9 XXX	9	9	9	9	9
86901-00	Blood typing serologic rh(d)	LCMS	Covered	2.99	2.99	9 XXX	9	9	9	9	9
86902-00	Blood type antigen donor ea	LCMS	Covered	6.35	6.35	9 XXX	9	9	9	9	9
86904-00	Blood typing patient serum	LCMS	Covered	16.34	16.34	9 XXX	9	9	9	9	9
86905-00	Blood typing rbc antigens	LCMS	Covered	3.83	3.83	9 XXX	9	9	9	9	9
86906-00	Bld typing serologic rh phnt	LCMS	Covered	7.75	7.75	9 XXX	9	9	9	9	9
0160U-00	mRNA gene analysis of mutS homolog 6	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0161U-00	mRNA gene analysis of PMS1 homolog 2, mismatch repair system component	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
78799-TC	Unlisted gu px dx nuc med	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78999-00	Unlisted misc px dx nuc med	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78999-26	Unlisted misc px dx nuc med	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
78999-TC	Unlisted misc px dx nuc med	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
79300-00	Nuclr rx interstit colloid	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
79300-TC	Nuclr rx interstit colloid	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
79445-00	Nuclear rx intra-arterial	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
79445-TC	Nuclear rx intra-arterial	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
86940-00	Hemolysins/agglutinins auto	LCMS	Covered	8.77	8.77	9 XXX	9	9	9	9	9
86941-00	Hemolysins/agglutinins	LCMS	Covered	12.11	12.11	9 XXX	9	9	9	9	9
79999-00	Rp therapy unlisted px	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
86950-00	Leukocyte transfusion	RMCD	Covered	3.74	3.74	9 XXX	9	9	9	9	9
79999-26	Rp therapy unlisted px	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0

79999-TC	Rp therapy unlisted px	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
81099-00	Unlisted urinalysis px	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
81418-00	Rx metab gen seq alysn pnl 6	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
81479-00	Unlisted molecular pathology	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
84999-00	Unlisted chemistry procedure	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
85999-00	Unlisted hematology&coagi px	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
86849-00	Immunology procedure	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
86860-00	Rbc antibody elution	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
86870-00	Rbc antibody identification	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
86890-00	Autologous blood process	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
87003-00	Small animal inoculation	LCMS	Covered			16.84 16.84 9 XXX	9	9	9	9	9
87015-00	Specimen infect agnt concntj	LCMS	Covered			6.68 6.68 9 XXX	9	9	9	9	9
87040-00	Blood culture for bacteria	LCMS	Covered			10.32 10.32 9 XXX	9	9	9	9	9
87045-00	Feces culture aerobic bact	LCMS	Covered			9.44 9.44 9 XXX	9	9	9	9	9
87046-00	Stool cultr aerobic bact ea	LCMS	Covered			9.44 9.44 9 XXX	9	9	9	9	9
87070-00	Culture othr specimn aerobic	LCMS	Covered			8.62 8.62 9 XXX	9	9	9	9	9
87071-00	Culture aerobic quant other	LCMS	Covered			9.89 9.89 9 XXX	9	9	9	9	9
87073-00	Culture bacteria anaerobic	LCMS	Covered			9.66 9.66 9 XXX	9	9	9	9	9
87075-00	Cultr bacteria except blood	LCMS	Covered			9.47 9.47 9 XXX	9	9	9	9	9
87076-00	Culture anaerobe ident each	LCMS	Covered			8.08 8.08 9 XXX	9	9	9	9	9
87077-00	Culture aerobic identify	LCMS	Covered			8.08 8.08 9 XXX	9	9	9	9	9
87081-00	Culture screen only	LCMS	Covered			6.63 6.63 9 XXX	9	9	9	9	9
87084-00	Culture of specimen by kit	LCMS	Covered			27.07 27.07 9 XXX	9	9	9	9	9
87086-00	Urine culture/colony count	LCMS	Covered			8.07 8.07 9 XXX	9	9	9	9	9
87088-00	Urine bacteria culture	LCMS	Covered			8.09 8.09 9 XXX	9	9	9	9	9
87101-00	Skin fungi culture	LCMS	Covered			7.71 7.71 9 XXX	9	9	9	9	9
87102-00	Fungus isolation culture	LCMS	Covered			8.41 8.41 9 XXX	9	9	9	9	9
87103-00	Blood fungus culture	LCMS	Covered			20.46 20.46 9 XXX	9	9	9	9	9
87106-00	Fungi identification yeast	LCMS	Covered			10.32 10.32 9 XXX	9	9	9	9	9
87107-00	Fungi identification mold	LCMS	Covered			10.32 10.32 9 XXX	9	9	9	9	9
87109-00	Mycoplasma	LCMS	Covered			15.39 15.39 9 XXX	9	9	9	9	9
87110-00	Chlamydia culture	LCMS	Covered			19.60 19.60 9 XXX	9	9	9	9	9
87116-00	Mycobacteria culture	LCMS	Covered			10.80 10.80 9 XXX	9	9	9	9	9
87118-00	Mycobacteric identification	LCMS	Covered			14.61 14.61 9 XXX	9	9	9	9	9
87140-00	Culture type immunofluoresc	LCMS	Covered			5.57 5.57 9 XXX	9	9	9	9	9
87143-00	Culture typing glc/hplc	LCMS	Covered			12.52 12.52 9 XXX	9	9	9	9	9
87147-00	Culture type immunologic	LCMS	Covered			5.18 5.18 9 XXX	9	9	9	9	9
87149-00	Dna/rna direct probe	LCMS	Covered			20.05 20.05 9 XXX	9	9	9	9	9
	Red blood cell antigen genotyping, ATP binding										
0193U-00	cassette subfamily G member 2	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
87152-00	Culture type pulse field gel	LCMS	Covered			7.74 7.74 9 XXX	9	9	9	9	9
	Red blood cell antigen genotyping, Rh blood group D										
0198U-00	antigen exons 1-10 and Rh	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
87154-00	Cul typ id bld pthgn 6+ trgt	LCMS	Covered			218.06 218.06 9 XXX	9	9	9	9	9
87158-00	Culture typing added method	LCMS	Covered			7.74 7.74 9 XXX	9	9	9	9	9
87164-00	Dark field examination	LCMS	Covered			10.74 10.74 9 XXX	9	9	9	9	9
87164-26	Dark field examination	RCMS	Covered			34.18 34.18 6 XXX	0	0	0	0	0
87166-00	Dark field examination	LCMS	Covered			11.30 11.30 9 XXX	9	9	9	9	9
87168-00	Macroscopic exam arthropod	LCMS	Covered			4.27 4.27 9 XXX	9	9	9	9	9
87169-00	Macroscopic exam parasite	LCMS	Covered			4.31 4.31 9 XXX	9	9	9	9	9
87172-00	Pinworm exam	LCMS	Covered			4.27 4.27 9 XXX	9	9	9	9	9
87176-00	Tissue homogenization cultr	LCMS	Covered			5.88 5.88 9 XXX	9	9	9	9	9
87177-00	Ova and parasites smears	LCMS	Covered			8.90 8.90 9 XXX	9	9	9	9	9
87181-00	Microbe susceptible diffuse	LCMS	Covered			4.75 4.75 9 XXX	9	9	9	9	9

87184-00	Microbe susceptible disk	LCMS	Covered	7.48	7.48	9 XXX	9	9	9	9	9
87185-00	Microbe susceptible enzyme	LCMS	Covered	4.75	4.75	9 XXX	9	9	9	9	9
87186-00	Microbe susceptible mic	LCMS	Covered	8.65	8.65	9 XXX	9	9	9	9	9
87187-00	Microbe susceptible mlc	LCMS	Covered	40.17	40.17	9 XXX	9	9	9	9	9
87188-00	Microbe suscept macrobroth	LCMS	Covered	6.64	6.64	9 XXX	9	9	9	9	9
87190-00	Microbe suscept mycobacteri	LCMS	Covered	7.31	7.31	9 XXX	9	9	9	9	9
87197-00	Bactericidal level serum	LCMS	Covered	15.02	15.02	9 XXX	9	9	9	9	9
87205-00	Smear gram stain	LCMS	Covered	4.27	4.27	9 XXX	9	9	9	9	9
87206-00	Smear fluorescent/acid stai	LCMS	Covered	5.39	5.39	9 XXX	9	9	9	9	9
87207-00	Smear special stain	LCMS	Covered	5.99	5.99	9 XXX	9	9	9	9	9
87207-26	Smear special stain	RCMS	Covered	31.59	31.59	6 XXX	0	0	0	0	0
87209-00	Smear complex stain	LCMS	Covered	17.98	17.98	9 XXX	9	9	9	9	9
87210-00	Smear wet mount saline/ink	LCMS	Covered	5.82	5.82	9 XXX	9	9	9	9	9
87220-00	Tissue exam for fungi	LCMS	Covered	4.27	4.27	9 XXX	9	9	9	9	9
87230-00	Assay toxin or antitoxin	LCMS	Covered	19.74	19.74	9 XXX	9	9	9	9	9
87250-00	Virus inoculate eggs/animal	LCMS	Covered	19.56	19.56	9 XXX	9	9	9	9	9
87252-00	Virus inoculation tissue	LCMS	Covered	26.07	26.07	9 XXX	9	9	9	9	9
87253-00	Virus inoculate tissue addl	LCMS	Covered	20.20	20.20	9 XXX	9	9	9	9	9
87254-00	Virus inoculation shell via	LCMS	Covered	19.56	19.56	9 XXX	9	9	9	9	9
87255-00	Genet virus isolate hsv	LCMS	Covered	33.86	33.86	9 XXX	9	9	9	9	9
87260-00	Adenovirus ag if	LCMS	Covered	14.43	14.43	9 XXX	9	9	9	9	9
87265-00	Pertussis ag if	LCMS	Covered	11.98	11.98	9 XXX	9	9	9	9	9
87267-00	Enterovirus antibody dfa	LCMS	Covered	13.42	13.42	9 XXX	9	9	9	9	9
87269-00	Giardia ag if	LCMS	Covered	13.61	13.61	9 XXX	9	9	9	9	9
87270-00	Chlamydia trachomatis ag if	LCMS	Covered	11.98	11.98	9 XXX	9	9	9	9	9
87271-00	Cytomegalovirus dfa	LCMS	Covered	13.42	13.42	9 XXX	9	9	9	9	9
87272-00	Cryptosporidium ag if	LCMS	Covered	11.98	11.98	9 XXX	9	9	9	9	9
87273-00	Herpes simplex 2 ag if	LCMS	Covered	11.98	11.98	9 XXX	9	9	9	9	9
87274-00	Herpes simplex 1 ag if	LCMS	Covered	11.98	11.98	9 XXX	9	9	9	9	9
87275-00	Influenza b ag if	LCMS	Covered	12.25	12.25	9 XXX	9	9	9	9	9
87276-00	Influenza a ag if	LCMS	Covered	16.07	16.07	9 XXX	9	9	9	9	9
87278-00	Legion pneumophilia ag if	LCMS	Covered	15.60	15.60	9 XXX	9	9	9	9	9
87279-00	Parainfluenza ag if	LCMS	Covered	16.43	16.43	9 XXX	9	9	9	9	9
87280-00	Respiratory syncytial ag if	LCMS	Covered	13.42	13.42	9 XXX	9	9	9	9	9
87281-00	Pneumocystis carinii ag if	LCMS	Covered	11.98	11.98	9 XXX	9	9	9	9	9
87283-00	Rubeola ag if	LCMS	Covered	60.80	60.80	9 XXX	9	9	9	9	9
87285-00	Treponema pallidum ag if	LCMS	Covered	12.18	12.18	9 XXX	9	9	9	9	9
87290-00	Varicella zoster ag if	LCMS	Covered	13.42	13.42	9 XXX	9	9	9	9	9
87299-00	Antibody detection nos if	LCMS	Covered	16.10	16.10	9 XXX	9	9	9	9	9
87300-00	Ag detection polyval if	LCMS	Covered	11.98	11.98	9 XXX	9	9	9	9	9
87301-00	Adenovirus ag ia	LCMS	Covered	11.98	11.98	9 XXX	9	9	9	9	9
87305-00	Aspergillus ag ia	LCMS	Covered	11.98	11.98	9 XXX	9	9	9	9	9
87320-00	Chlmyd trach ag ia	LCMS	Covered	15.00	15.00	9 XXX	9	9	9	9	9
87324-00	Clostridium ag ia	LCMS	Covered	11.98	11.98	9 XXX	9	9	9	9	9
87327-00	Cryptococcus neoform ag ia	LCMS	Covered	13.42	13.42	9 XXX	9	9	9	9	9
87328-00	Cryptosporidium ag ia	LCMS	Covered	13.82	13.82	9 XXX	9	9	9	9	9
87329-00	Giardia ag ia	LCMS	Covered	11.98	11.98	9 XXX	9	9	9	9	9
87332-00	Cytomegalovirus ag ia	LCMS	Covered	11.98	11.98	9 XXX	9	9	9	9	9
87335-00	E coli O157 ag ia	LCMS	Covered	12.66	12.66	9 XXX	9	9	9	9	9
87336-00	Entamoeb hist dispr ag ia	LCMS	Covered	16.00	16.00	9 XXX	9	9	9	9	9
87337-00	Entamoeb hist group ag ia	LCMS	Covered	11.98	11.98	9 XXX	9	9	9	9	9
87338-00	Hpylori stool ag ia	LCMS	Covered	14.38	14.38	9 XXX	9	9	9	9	9
87339-00	H pylori ag ia	LCMS	Covered	16.00	16.00	9 XXX	9	9	9	9	9
87340-00	Hepatitis b surface ag ia	LCMS	Covered	10.33	10.33	9 XXX	9	9	9	9	9

87341-00	Hep b surface ag neutr lzj ia	LCMS	Covered	10.33	10.33	9 XXX	9	9	9	9	9
87350-00	Hepatitis be ag ia	LCMS	Covered	11.53	11.53	9 XXX	9	9	9	9	9
87380-00	Hepatitis delta agent ag ia	LCMS	Covered	18.36	18.36	9 XXX	9	9	9	9	9
87385-00	Histoplasma capsul ag ia	LCMS	Covered	13.25	13.25	9 XXX	9	9	9	9	9
87389-00	Hiv-1 ag w/hiv-1&-2 ab ag ia	LCMS	Covered	24.08	24.08	9 XXX	9	9	9	9	9
87390-00	Hiv-1 ag ia	LCMS	Covered	24.06	24.06	9 XXX	9	9	9	9	9
87391-00	Hiv-2 ag ia	LCMS	Covered	21.90	21.90	9 XXX	9	9	9	9	9
87400-00	Influenza a/b each ag ia	LCMS	Covered	14.13	14.13	9 XXX	9	9	9	9	9
87420-00	Resp syncytial virus ag ia	LCMS	Covered	13.91	13.91	9 XXX	9	9	9	9	9
87425-00	Rotavirus ag ia	LCMS	Covered	11.98	11.98	9 XXX	9	9	9	9	9
87426-00	Sarscov coronavirus ag ia	LCMS	Covered	35.33	35.33	9 XXX	9	9	9	9	9
87427-00	Shiga-like toxin ag ia	LCMS	Covered	11.98	11.98	9 XXX	9	9	9	9	9
0222U-00	Red blood cell antigen genotyping, RH proximal promoter, exons 1-10, portions	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
87430-00	Strep a ag ia	LCMS	Covered	16.81	16.81	9 XXX	9	9	9	9	9
87449-00	Nos each organism ag ia	LCMS	Covered	11.98	11.98	9 XXX	9	9	9	9	9
87451-00	Polyvalent mult org ea ag ia	LCMS	Covered	10.51	10.51	9 XXX	9	9	9	9	9
87467-00	Hepatitis b surface ag quan	RMCD	Covered	14.61	14.61	9 XXX	9	9	9	9	9
87468-00	Anaplsma phgcytophlm amp prb	RMCD	Covered	34.07	34.07	9 XXX	9	9	9	9	9
87469-00	Babesia microti amp prb	RMCD	Covered	34.07	34.07	9 XXX	9	9	9	9	9
87471-00	Bartonella dna amp probe	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87472-00	Bartonella dna quant	LCMS	Covered	42.84	42.84	9 XXX	9	9	9	9	9
87475-00	Lyme dis dna dir probe	LCMS	Covered	20.05	20.05	9 XXX	9	9	9	9	9
87476-00	Lyme dis dna amp probe	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87478-00	Borrelia miyamotoi amp prb	RMCD	Covered	34.07	34.07	9 XXX	9	9	9	9	9
87480-00	Candida dna dir probe	LCMS	Covered	20.05	20.05	9 XXX	9	9	9	9	9
87481-00	Candida dna amp probe	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87482-00	Candida dna quant	LCMS	Covered	55.74	55.74	9 XXX	9	9	9	9	9
87483-00	Cns dna amp probe type 12-25	LCMS	Covered	416.78	416.78	9 XXX	9	9	9	9	9
87484-00	Ehrlichia chaffeensis amp prb	RMCD	Covered	34.07	34.07	9 XXX	9	9	9	9	9
87485-00	Chlmyd pneum dna dir probe	LCMS	Covered	20.05	20.05	9 XXX	9	9	9	9	9
87486-00	Chlmyd pneum dna amp probe	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87487-00	Chlmyd pneum dna quant	LCMS	Covered	42.84	42.84	9 XXX	9	9	9	9	9
87490-00	Chlmyd trach dna dir probe	LCMS	Covered	22.75	22.75	9 XXX	9	9	9	9	9
87491-00	Chlmyd trach dna amp probe	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87492-00	Chlmyd trach dna quant	LCMS	Covered	53.47	53.47	9 XXX	9	9	9	9	9
87493-00	C diff amplified probe	LCMS	Covered	37.27	37.27	9 XXX	9	9	9	9	9
87495-00	Cytomeg dna dir probe	LCMS	Covered	30.03	30.03	9 XXX	9	9	9	9	9
87496-00	Cytomeg dna amp probe	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87497-00	Cytomeg dna quant	LCMS	Covered	42.84	42.84	9 XXX	9	9	9	9	9
87498-00	Enterovirus probe&revrs trns	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87500-00	Vanomycin dna amp probe	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87501-00	Influenza dna amp prob 1+	LCMS	Covered	51.31	51.31	9 XXX	9	9	9	9	9
87502-00	Influenza dna amp probe	LCMS	Covered	95.80	95.80	9 XXX	9	9	9	9	9
87503-00	Influenza dna amp prob addl	LCMS	Covered	29.22	29.22	9 XXX	9	9	9	9	9
87505-00	Nfct agent detection gi	LCMS	Covered	128.29	128.29	9 XXX	9	9	9	9	9
87506-00	ladna-dna/rna probe tq 6-11	LCMS	Covered	262.99	262.99	9 XXX	9	9	9	9	9
87507-00	ladna-dna/rna probe tq 12-25	LCMS	Covered	416.78	416.78	9 XXX	9	9	9	9	9
87510-00	Gardner vag dna dir probe	LCMS	Covered	20.05	20.05	9 XXX	9	9	9	9	9
87511-00	Gardner vag dna amp probe	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87512-00	Gardner vag dna quant	LCMS	Covered	41.76	41.76	9 XXX	9	9	9	9	9
87516-00	Hepatitis b dna amp probe	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87517-00	Hepatitis b dna quant	LCMS	Covered	42.84	42.84	9 XXX	9	9	9	9	9
87520-00	Hepatitis c rna dir probe	LCMS	Covered	31.22	31.22	9 XXX	9	9	9	9	9

87521-00	Hepatitis c probe&rvers trnsc	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87522-00	Hepatitis c revrs trnscrpj	LCMS	Covered	42.84	42.84	9 XXX	9	9	9	9	9
87525-00	Hepatitis g dna dir probe	LCMS	Covered	29.80	29.80	9 XXX	9	9	9	9	9
87526-00	Hepatitis g dna amp probe	LCMS	Covered	39.26	39.26	9 XXX	9	9	9	9	9
87527-00	Hepatitis g dna quant	LCMS	Covered	41.76	41.76	9 XXX	9	9	9	9	9
87528-00	Hsv dna dir probe	LCMS	Covered	20.05	20.05	9 XXX	9	9	9	9	9
87529-00	Hsv dna amp probe	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87530-00	Hsv dna quant	LCMS	Covered	42.84	42.84	9 XXX	9	9	9	9	9
87531-00	Hhv-6 dna dir probe	LCMS	Covered	58.00	58.00	9 XXX	9	9	9	9	9
87532-00	Hhv-6 dna amp probe	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87533-00	Hhv-6 dna quant	LCMS	Covered	41.76	41.76	9 XXX	9	9	9	9	9
87534-00	Hiv-1 dna dir probe	LCMS	Covered	21.92	21.92	9 XXX	9	9	9	9	9
87535-00	Hiv-1 probe&reverse trnscrpj	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87536-00	Hiv-1 quant&revrse trnscrpj	LCMS	Covered	85.10	85.10	9 XXX	9	9	9	9	9
87537-00	Hiv-2 dna dir probe	LCMS	Covered	21.92	21.92	9 XXX	9	9	9	9	9
87538-00	Hiv-2 probe&revrse trnscrpj	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87539-00	Hiv-2 quant&revrse trnscrpj	LCMS	Covered	58.62	58.62	9 XXX	9	9	9	9	9
87540-00	Legion pneumo dna dir prob	LCMS	Covered	20.05	20.05	9 XXX	9	9	9	9	9
87541-00	Legion pneumo dna amp prob	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87542-00	Legion pneumo dna quant	LCMS	Covered	41.76	41.76	9 XXX	9	9	9	9	9
87550-00	Mycobacteria dna dir probe	LCMS	Covered	20.05	20.05	9 XXX	9	9	9	9	9
87551-00	Mycobacteria dna amp probe	LCMS	Covered	48.24	48.24	9 XXX	9	9	9	9	9
87552-00	Mycobacteria dna quant	LCMS	Covered	42.84	42.84	9 XXX	9	9	9	9	9
87555-00	M.tuberculo dna dir probe	LCMS	Covered	26.88	26.88	9 XXX	9	9	9	9	9
87556-00	M.tuberculo dna amp probe	LCMS	Covered	41.68	41.68	9 XXX	9	9	9	9	9
87557-00	M.tuberculo dna quant	LCMS	Covered	42.84	42.84	9 XXX	9	9	9	9	9
87560-00	M.avium-intra dna dir prob	LCMS	Covered	27.29	27.29	9 XXX	9	9	9	9	9
87561-00	M.avium-intra dna amp prob	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87562-00	M.avium-intra dna quant	LCMS	Covered	42.84	42.84	9 XXX	9	9	9	9	9
87563-00	M. genitalium amp probe	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87580-00	M.pneumon dna dir probe	LCMS	Covered	20.05	20.05	9 XXX	9	9	9	9	9
87581-00	M.pneumon dna amp probe	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87582-00	M.pneumon dna quant	LCMS	Covered	302.62	302.62	9 XXX	9	9	9	9	9
87590-00	N.gonorrhoeae dna dir prob	LCMS	Covered	26.88	26.88	9 XXX	9	9	9	9	9
87591-00	N.gonorrhoeae dna amp prob	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87592-00	N.gonorrhoeae dna quant	LCMS	Covered	42.84	42.84	9 XXX	9	9	9	9	9
96020-26	Functional brain mapping	NCOV	Not Covered	Code not covered	Code not covered	1 XXX	0	0	0	0	0
90837-00	Psytx w pt 60 minutes	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	9	0	0
87624-00	Hpv high-risk types	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87625-00	Hpv types 16 & 18 only	LCMS	Covered	40.55	40.55	9 XXX	9	9	9	9	9
87631-00	Resp virus 3-5 targets	LCMS	Covered	142.63	142.63	9 XXX	9	9	9	9	9
87632-00	Resp virus 6-11 targets	LCMS	Covered	218.06	218.06	9 XXX	9	9	9	9	9
87633-00	Resp virus 12-25 targets	LCMS	Covered	416.78	416.78	9 XXX	9	9	9	9	9
87634-00	Rsv dna/rna amp probe	LCMS	Covered	70.20	70.20	9 XXX	9	9	9	9	9
87635-00	Sars-cov-2 covid-19 amp prb	LCMS	Covered	51.31	51.31	9 XXX	9	9	9	9	9
0115U-00	Respiratory infectious agent detection by nucleic acid (DNA and RNA), 18 viral DNA analysis for detection of PIK3CA gene mutation	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0155U-00	in breast growth tissue	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
87640-00	Staph a dna amp probe	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87641-00	Mr-staph dna amp probe	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87650-00	Strep a dna dir probe	LCMS	Covered	20.05	20.05	9 XXX	9	9	9	9	9
87651-00	Strep a dna amp probe	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87652-00	Strep a dna quant	LCMS	Covered	41.76	41.76	9 XXX	9	9	9	9	9

87653-00	Strep b dna amp probe	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87660-00	Trichomonas vagin dir probe	LCMS	Covered	20.05	20.05	9 XXX	9	9	9	9	9
87661-00	Trichomonas vaginalis amplif	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87662-00	Zika virus dna/rna amp probe	LCMS	Covered	51.31	51.31	9 XXX	9	9	9	9	9
87797-00	Detect agent nos dna dir	LCMS	Covered	30.03	30.03	9 XXX	9	9	9	9	9
87798-00	Detect agent nos dna amp	LCMS	Covered	35.09	35.09	9 XXX	9	9	9	9	9
87799-00	Detect agent nos dna quant	LCMS	Covered	42.84	42.84	9 XXX	9	9	9	9	9
87800-00	Detect agnt mult dna direc	LCMS	Covered	43.67	43.67	9 XXX	9	9	9	9	9
87801-00	Detect agnt mult dna ampli	LCMS	Covered	70.20	70.20	9 XXX	9	9	9	9	9
87802-00	Strep b assay w/optic	LCMS	Covered	12.73	12.73	9 XXX	9	9	9	9	9
87803-00	Clostridium toxin a w/optic	LCMS	Covered	16.00	16.00	9 XXX	9	9	9	9	9
87804-00	Influenza assay w/optic	LCMS	Covered	16.55	16.55	9 XXX	9	9	9	9	9
0177U-00	DNA gene analysis (phosphatidylinositol-4,5-bisphosphate 3-kinase catalytic	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
87807-00	Rsv assay w/optic	LCMS	Covered	13.10	13.10	9 XXX	9	9	9	9	9
87808-00	Trichomonas assay w/optic	LCMS	Covered	15.29	15.29	9 XXX	9	9	9	9	9
87809-00	Adenovirus assay w/optic	LCMS	Covered	21.76	21.76	9 XXX	9	9	9	9	9
87810-00	Chlmyd trach assay w/optic	LCMS	Covered	35.29	35.29	9 XXX	9	9	9	9	9
87811-00	Sars-cov-2 covid19 w/optic	LCMS	Covered	41.38	41.38	9 XXX	9	9	9	9	9
87850-00	N. gonorrhoeae assay w/optic	LCMS	Covered	24.56	24.56	9 XXX	9	9	9	9	9
87880-00	Strep a assay w/optic	LCMS	Covered	16.53	16.53	9 XXX	9	9	9	9	9
87899-00	Agent nos assay w/optic	LCMS	Covered	16.07	16.07	9 XXX	9	9	9	9	9
87900-00	Phenotype infect agent drug	LCMS	Covered	130.35	130.35	9 XXX	9	9	9	9	9
87901-00	Nfct agt gntyp alys hiv1 rev	LCMS	Covered	257.45	257.45	9 XXX	9	9	9	9	9
87902-00	Nfct agt gntyp alys hep c	LCMS	Covered	257.45	257.45	9 XXX	9	9	9	9	9
87903-00	Phenotype dna hiv w/culture	LCMS	Covered	488.66	488.66	9 XXX	9	9	9	9	9
87904-00	Phenotype dna hiv w/clt add	LCMS	Covered	26.07	26.07	9 XXX	9	9	9	9	9
0180U-00	Red blood cell antigen genotyping, ABO blood group	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
87906-00	Nfct agt gntyp alys hiv1	LCMS	Covered	128.73	128.73	9 XXX	9	9	9	9	9
87910-00	Nfct agt gntyp alys cmv	LCMS	Covered	257.45	257.45	9 XXX	9	9	9	9	9
87912-00	Nfct agt gntyp alys hep b	LCMS	Covered	257.45	257.45	9 XXX	9	9	9	9	9
87913-00	Nfct agt gntyp alys sarscov2	LCMS	Covered	257.45	257.45	9 XXX	9	9	9	9	9
86891-00	Autologous blood op salvage	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
0187U-00	Red blood cell antigen genotyping, atypical chemokine receptor 1 [Duffy blood	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0189U-00	Red blood cell antigen genotyping, glycophorin A [MNS blood group] introns 1,	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0190U-00	Red blood cell antigen genotyping, glycophorin B [MNS blood group] introns 1,	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0191U-00	Red blood cell antigen genotyping, CD44 molecule [Indian blood group] exons 2,	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0192U-00	Red blood cell antigen genotyping, solute carrier	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0199U-00	Red blood cell antigen genotyping, erythroblast membrane associated protein	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0200U-00	Red blood cell antigen genotyping, X-linked Kx blood	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0221U-00	Red blood cell antigen genotyping, ABO, alpha	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0232U-00	Gene analysis (cystatin B), full gene analysis	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0233U-00	Gene analysis (frataxin)	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
46601-00	Diagnostic anoscopy	NCOV	Not Covered	Code not covered	Code not covered	0 000	3	0	1	0	0
99386-00	Prev visit new age 40-64	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
31520-00	Dx laryngoscopy newborn	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	0	0	0	0
90839-00	Psytx crisis initial 60 min	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
11952-00	Tx contour defects 5.1-10cc	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	0	0	0	0
99344-00	Home/res vst new mod mdm 60	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0

88104-00	Cytopath fl nongyn smears	R26C	Covered	142.84	142.84	1 XXX	0	0	0	0	0
88104-26	Cytopath fl nongyn smears	R26C	Covered	48.96	48.96	1 XXX	0	0	0	0	0
88104-TC	Cytopath fl nongyn smears	R26C	Covered	93.88	93.88	1 XXX	0	0	0	0	0
88106-00	Cytopath fl nongyn filter	R26C	Covered	135.17	135.17	1 XXX	0	0	0	0	0
88106-26	Cytopath fl nongyn filter	R26C	Covered	33.53	33.53	1 XXX	0	0	0	0	0
88106-TC	Cytopath fl nongyn filter	R26C	Covered	101.64	101.64	1 XXX	0	0	0	0	0
88108-00	Cytopath concentrate tech	R26C	Covered	130.33	130.33	1 XXX	0	0	0	0	0
88108-26	Cytopath concentrate tech	R26C	Covered	39.73	39.73	1 XXX	0	0	0	0	0
88108-TC	Cytopath concentrate tech	R26C	Covered	90.60	90.60	1 XXX	0	0	0	0	0
88112-00	Cytopath cell enhance tech	R26C	Covered	128.56	128.56	1 XXX	0	0	0	0	0
88112-26	Cytopath cell enhance tech	R26C	Covered	48.96	48.96	1 XXX	0	0	0	0	0
88112-TC	Cytopath cell enhance tech	R26C	Covered	79.60	79.60	1 XXX	0	0	0	0	0
99465-00	Nb resuscitation	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
0023U-00	DNA gene analysis for acute myelogenous leukemia	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0116U-00	Analysis of 35 or more drugs in mouth fluid to	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
96932-00	Rcm celulr subcelulr img skn	NCOV	Not Covered	Code not covered	Code not covered	3 XXX	0	0	0	0	0
99397-00	Per pm reeval est pat 65+ yr	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
99384-00	Prev visit new age 12-17	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
88125-00	Forensic cytopathology	R26C	Covered	53.41	53.41	1 XXX	0	0	0	0	0
88125-26	Forensic cytopathology	R26C	Covered	24.26	24.26	1 XXX	0	0	0	0	0
88125-TC	Forensic cytopathology	R26C	Covered	29.15	29.15	1 XXX	0	0	0	0	0
88130-00	Sex chromatin identification	LCMS	Covered	17.98	17.98	9 XXX	9	9	9	9	9
88140-00	Sex chromatin identification	LCMS	Covered	7.99	7.99	9 XXX	9	9	9	9	9
88141-00	Cytopath c/v interpret	R26C	Covered	44.96	44.96	2 XXX	0	0	0	0	0
88142-00	Cytopath c/v thin layer	LCMS	Covered	20.26	20.26	9 XXX	9	9	9	9	9
88143-00	Cytopath c/v thin layer redo	LCMS	Covered	23.04	23.04	9 XXX	9	9	9	9	9
88147-00	Cytopath c/v automated	LCMS	Covered	50.56	50.56	9 XXX	9	9	9	9	9
88148-00	Cytopath c/v auto rescreen	LCMS	Covered	17.76	17.76	9 XXX	9	9	9	9	9
88150-00	Cytopath c/v manual	LCMS	Covered	17.76	17.76	9 XXX	9	9	9	9	9
88152-00	Cytopath c/v auto redo	LCMS	Covered	27.64	27.64	9 XXX	9	9	9	9	9
88153-00	Cytopath c/v redo	LCMS	Covered	24.03	24.03	9 XXX	9	9	9	9	9
88155-00	Cytopath c/v index add-on	LCMS	Covered	14.65	14.65	9 XXX	9	9	9	9	9
88160-00	Cytopath smear other source	R26C	Covered	150.84	150.84	1 XXX	0	0	0	0	0
88160-26	Cytopath smear other source	R26C	Covered	45.31	45.31	1 XXX	0	0	0	0	0
88160-TC	Cytopath smear other source	R26C	Covered	105.52	105.52	1 XXX	0	0	0	0	0
88161-00	Cytopath smear other source	R26C	Covered	154.07	154.07	1 XXX	0	0	0	0	0
88161-26	Cytopath smear other source	R26C	Covered	44.67	44.67	1 XXX	0	0	0	0	0
88161-TC	Cytopath smear other source	R26C	Covered	109.40	109.40	1 XXX	0	0	0	0	0
88162-00	Cytopath smear other source	R26C	Covered	244.30	244.30	1 XXX	0	0	0	0	0
88162-26	Cytopath smear other source	R26C	Covered	70.17	70.17	1 XXX	0	0	0	0	0
88162-TC	Cytopath smear other source	R26C	Covered	174.13	174.13	1 XXX	0	0	0	0	0
88164-00	Cytopath tbs c/v manual	LCMS	Covered	17.76	17.76	9 XXX	9	9	9	9	9
88165-00	Cytopath tbs c/v redo	LCMS	Covered	42.22	42.22	9 XXX	9	9	9	9	9
88166-00	Cytopath tbs c/v auto redo	LCMS	Covered	17.76	17.76	9 XXX	9	9	9	9	9
88167-00	Cytopath tbs c/v select	LCMS	Covered	17.76	17.76	9 XXX	9	9	9	9	9
88172-00	Cytp dx eval fna 1st ea site	R26C	Covered	104.13	104.13	1 XXX	0	0	0	0	0
88172-26	Cytp dx eval fna 1st ea site	R26C	Covered	62.68	62.68	1 XXX	0	0	0	0	0
88172-TC	Cytp dx eval fna 1st ea site	R26C	Covered	41.44	41.44	1 XXX	0	0	0	0	0
88173-00	Cytopath eval fna report	R26C	Covered	316.27	316.27	1 XXX	0	0	0	0	0
88173-26	Cytopath eval fna report	R26C	Covered	124.03	124.03	1 XXX	0	0	0	0	0
88173-TC	Cytopath eval fna report	R26C	Covered	192.24	192.24	1 XXX	0	0	0	0	0
88174-00	Cytopath c/v auto in fluid	LCMS	Covered	25.37	25.37	9 XXX	9	9	9	9	9
88175-00	Cytopath c/v auto fluid redo	LCMS	Covered	26.61	26.61	9 XXX	9	9	9	9	9
95783-26	Polysom <6 yrs cpap/bilvl	NCOV	Not Covered	Code not covered	Code not covered	1 XXX	0	0	0	0	0

99443-00	Phone e/m phys/qhp 21-30 min	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	0	0	0
G0426-00	Inpt/ed teleconsult50	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	0	0	0
88182-00	Cell marker study	R26C	Covered	317.45	317.45	1 XXX	0	0	0	0	0
88182-26	Cell marker study	R26C	Covered	68.19	68.19	1 XXX	0	0	0	0	0
88182-TC	Cell marker study	R26C	Covered	249.25	249.25	1 XXX	0	0	0	0	0
88184-00	Flowcytometry/ tc 1 marker	R26C	Covered	150.15	150.15	3 XXX	0	0	0	0	0
88185-00	Flowcytometry/tc add-on	R26C	Covered	45.92	45.92	3 ZZZ	0	0	0	0	0
88187-00	Flowcytometry/read 2-8	R26C	Covered	63.23	63.23	2 XXX	0	0	0	0	0
88188-00	Flowcytometry/read 9-15	R26C	Covered	108.79	108.79	2 XXX	0	0	0	0	0
88189-00	Flowcytometry/read 16 & >	R26C	Covered	147.04	147.04	2 XXX	0	0	0	0	0
86920-00	Compatibility test spin	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
86921-00	Compatibility test incubate	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
86922-00	Compatibility test antiglob	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
88230-00	Tissue culture lymphocyte	LCMS	Covered	116.49	116.49	9 XXX	9	9	9	9	9
88233-00	Tissue culture skin/biopsy	LCMS	Covered	140.73	140.73	9 XXX	9	9	9	9	9
88235-00	Tissue culture placenta	LCMS	Covered	150.30	150.30	9 XXX	9	9	9	9	9
88237-00	Tissue culture bone marrow	LCMS	Covered	143.75	143.75	9 XXX	9	9	9	9	9
88239-00	Tissue culture tumor	LCMS	Covered	147.52	147.52	9 XXX	9	9	9	9	9
99349-00	Home/res vst est mod mdm 40	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	0	0	0
99396-00	Prev visit est age 40-64	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
88245-00	Chromosome analysis 20-25	LCMS	Covered	173.17	173.17	9 XXX	9	9	9	9	9
88248-00	Chromosome analysis 50-100	LCMS	Covered	173.17	173.17	9 XXX	9	9	9	9	9
88249-00	Chromosome analysis 100	LCMS	Covered	173.17	173.17	9 XXX	9	9	9	9	9
88261-00	Chromosome analysis 5	LCMS	Covered	264.34	264.34	9 XXX	9	9	9	9	9
88262-00	Chromosome analysis 15-20	LCMS	Covered	125.49	125.49	9 XXX	9	9	9	9	9
88263-00	Chromosome analysis 45	LCMS	Covered	150.29	150.29	9 XXX	9	9	9	9	9
88264-00	Chromosome analysis 20-25	LCMS	Covered	144.61	144.61	9 XXX	9	9	9	9	9
88267-00	Chromosome analys placenta	LCMS	Covered	188.57	188.57	9 XXX	9	9	9	9	9
88269-00	Chromosome analys amniotic	LCMS	Covered	173.66	173.66	9 XXX	9	9	9	9	9
88271-00	Cytogenetics dna probe	LCMS	Covered	21.42	21.42	9 XXX	9	9	9	9	9
88272-00	Cytogenetics 3-5	LCMS	Covered	40.70	40.70	9 XXX	9	9	9	9	9
88273-00	Cytogenetics 10-30	LCMS	Covered	34.81	34.81	9 XXX	9	9	9	9	9
88274-00	Cytogenetics 25-99	LCMS	Covered	42.38	42.38	9 XXX	9	9	9	9	9
88275-00	Cytogenetics 100-300	LCMS	Covered	51.19	51.19	9 XXX	9	9	9	9	9
88280-00	Chromosome karyotype study	LCMS	Covered	33.47	33.47	9 XXX	9	9	9	9	9
88283-00	Chromosome banding study	LCMS	Covered	68.60	68.60	9 XXX	9	9	9	9	9
88285-00	Chromosome count additional	LCMS	Covered	26.91	26.91	9 XXX	9	9	9	9	9
88289-00	Chromosome study additional	LCMS	Covered	34.43	34.43	9 XXX	9	9	9	9	9
88291-00	Cyto/molecular report	R26C	Covered	61.45	61.45	2 XXX	0	0	0	0	0
86923-00	Compatibility test electric	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
88300-00	Surgical path gross	R26C	Covered	30.18	30.18	1 XXX	0	0	0	0	0
88300-26	Surgical path gross	R26C	Covered	7.50	7.50	1 XXX	0	0	0	0	0
88300-TC	Surgical path gross	R26C	Covered	22.69	22.69	1 XXX	0	0	0	0	0
88302-00	Tissue exam by pathologist	R26C	Covered	62.97	62.97	1 XXX	0	0	0	0	0
88302-26	Tissue exam by pathologist	R26C	Covered	11.83	11.83	1 XXX	0	0	0	0	0
88302-TC	Tissue exam by pathologist	R26C	Covered	51.14	51.14	1 XXX	0	0	0	0	0
88304-00	Tissue exam by pathologist	R26C	Covered	81.38	81.38	1 XXX	0	0	0	0	0
88304-26	Tissue exam by pathologist	R26C	Covered	19.89	19.89	1 XXX	0	0	0	0	0
88304-TC	Tissue exam by pathologist	R26C	Covered	61.49	61.49	1 XXX	0	0	0	0	0
88305-00	Tissue exam by pathologist	R26C	Covered	134.94	134.94	1 XXX	0	0	0	0	0
88305-26	Tissue exam by pathologist	R26C	Covered	66.33	66.33	1 XXX	0	0	0	0	0
88305-TC	Tissue exam by pathologist	R26C	Covered	68.61	68.61	1 XXX	0	0	0	0	0
88307-00	Tissue exam by pathologist	R26C	Covered	548.44	548.44	1 XXX	0	0	0	0	0
88307-26	Tissue exam by pathologist	R26C	Covered	145.29	145.29	1 XXX	0	0	0	0	0

88307-TC	Tissue exam by pathologist	R26C	Covered	403.14	403.14	1 XXX	0	0	0	0	0
88309-00	Tissue exam by pathologist	R26C	Covered	823.23	823.23	1 XXX	0	0	0	0	0
88309-26	Tissue exam by pathologist	R26C	Covered	256.44	256.44	1 XXX	0	0	0	0	0
88309-TC	Tissue exam by pathologist	R26C	Covered	566.79	566.79	1 XXX	0	0	0	0	0
88311-00	Decalcify tissue	R26C	Covered	37.32	37.32	1 XXX	0	0	0	0	0
88311-26	Decalcify tissue	R26C	Covered	21.10	21.10	1 XXX	0	0	0	0	0
88311-TC	Decalcify tissue	R26C	Covered	16.22	16.22	1 XXX	0	0	0	0	0
88312-00	Special stains group 1	R26C	Covered	215.31	215.31	1 XXX	0	0	0	0	0
88312-26	Special stains group 1	R26C	Covered	47.10	47.10	1 XXX	0	0	0	0	0
88312-TC	Special stains group 1	R26C	Covered	168.22	168.22	1 XXX	0	0	0	0	0
88313-00	Special stains group 2	R26C	Covered	158.92	158.92	1 XXX	0	0	0	0	0
88313-26	Special stains group 2	R26C	Covered	21.10	21.10	1 XXX	0	0	0	0	0
88313-TC	Special stains group 2	R26C	Covered	137.82	137.82	1 XXX	0	0	0	0	0
88314-00	Histochemical stains add-on	R26C	Covered	168.49	168.49	1 XXX	0	0	0	0	0
88314-26	Histochemical stains add-on	R26C	Covered	35.81	35.81	1 XXX	0	0	0	0	0
88314-TC	Histochemical stains add-on	R26C	Covered	132.69	132.69	1 XXX	0	0	0	0	0
88319-00	Enzyme histochemistry	R26C	Covered	261.32	261.32	1 XXX	0	0	0	0	0
88319-26	Enzyme histochemistry	R26C	Covered	47.78	47.78	1 XXX	0	0	0	0	0
88319-TC	Enzyme histochemistry	R26C	Covered	213.54	213.54	1 XXX	0	0	0	0	0
88321-00	Consltj&reprt sld prep elswr	R26C	Covered	175.77	146.66	0 XXX	0	0	0	0	0
88323-00	Consltj&reprt matrl prep sld	R26C	Covered	214.21	214.21	1 XXX	0	0	0	0	0
88323-26	Consltj&reprt matrl prep sld	R26C	Covered	157.24	157.24	1 XXX	0	0	0	0	0
88323-TC	Consltj&reprt matrl prep sld	R26C	Covered	56.97	56.97	1 XXX	0	0	0	0	0
88325-00	Consltj compre rvw rec reprt	R26C	Covered	281.16	235.23	0 XXX	0	0	0	0	0
88329-00	Path consltj drg surg	R26C	Covered	101.71	61.61	0 XXX	0	0	0	0	0
88331-00	Path consltj surg 1 blk 1spc	R26C	Covered	189.54	189.54	1 XXX	0	0	0	0	0
88331-26	Path consltj surg 1 blk 1spc	R26C	Covered	109.94	109.94	1 XXX	0	0	0	0	0
88331-TC	Path consltj surg 1 blk 1spc	R26C	Covered	79.60	79.60	1 XXX	0	0	0	0	0
88332-00	Path consltj surg ea add blk	R26C	Covered	101.93	101.93	1 XXX	0	0	0	0	0
88332-26	Path consltj surg ea add blk	R26C	Covered	54.02	54.02	1 XXX	0	0	0	0	0
88332-TC	Path consltj surg ea add blk	R26C	Covered	47.91	47.91	1 XXX	0	0	0	0	0
88333-00	Path consltj surg cyto xm 1	R26C	Covered	170.74	170.74	1 XXX	0	0	0	0	0
88333-26	Path consltj surg cyto xm 1	R26C	Covered	109.25	109.25	1 XXX	0	0	0	0	0
88333-TC	Path consltj surg cyto xm 1	R26C	Covered	61.49	61.49	1 XXX	0	0	0	0	0
88334-00	Path consltj surg cyto xm ea	R26C	Covered	103.92	103.92	1 ZZZ	0	0	0	0	0
88334-26	Path consltj surg cyto xm ea	R26C	Covered	66.41	66.41	1 ZZZ	0	0	0	0	0
88334-TC	Path consltj surg cyto xm ea	R26C	Covered	37.51	37.51	1 ZZZ	0	0	0	0	0
88341-00	Imhchem/imcytchm ea add antb	R26C	Covered	173.15	173.15	1 ZZZ	0	0	0	0	0
88341-26	Imhchem/imcytchm ea add antb	R26C	Covered	49.61	49.61	1 ZZZ	0	0	0	0	0
88341-TC	Imhchem/imcytchm ea add antb	R26C	Covered	123.54	123.54	1 ZZZ	0	0	0	0	0
88342-00	Imhchem/imcytchm 1st antb	R26C	Covered	201.75	201.75	1 XXX	0	0	0	0	0
88342-26	Imhchem/imcytchm 1st antb	R26C	Covered	62.00	62.00	1 XXX	0	0	0	0	0
88342-TC	Imhchem/imcytchm 1st antb	R26C	Covered	139.76	139.76	1 XXX	0	0	0	0	0
88344-00	Imhchem/imcytchm ea mlt antb	R26C	Covered	331.49	331.49	1 XXX	0	0	0	0	0
88344-26	Imhchem/imcytchm ea mlt antb	R26C	Covered	68.19	68.19	1 XXX	0	0	0	0	0
88344-TC	Imhchem/imcytchm ea mlt antb	R26C	Covered	263.29	263.29	1 XXX	0	0	0	0	0
88346-00	Imflur 1st 1antb stain px	R26C	Covered	286.37	286.37	1 XXX	0	0	0	0	0
88346-26	Imflur 1st 1antb stain px	R26C	Covered	63.78	63.78	1 XXX	0	0	0	0	0
88346-TC	Imflur 1st 1antb stain px	R26C	Covered	222.59	222.59	1 XXX	0	0	0	0	0
88348-00	Electron microscopy dx	R26C	Covered	927.31	927.31	1 XXX	0	0	0	0	0
88348-26	Electron microscopy dx	R26C	Covered	137.15	137.15	1 XXX	0	0	0	0	0
88348-TC	Electron microscopy dx	R26C	Covered	790.17	790.17	1 XXX	0	0	0	0	0
88350-00	Imflur ea addl 1antb stn px	R26C	Covered	217.71	217.71	1 ZZZ	0	0	0	0	0
88350-26	Imflur ea addl 1antb stn px	R26C	Covered	51.43	51.43	1 ZZZ	0	0	0	0	0

88350-TC	Imflour ea addl 1antb stn px	R26C	Covered	166.27	166.27	1 ZZZ	0	0	0	0	0
88355-00	M/phmtrc alys skeletal musc	R26C	Covered	236.12	236.12	1 XXX	0	0	0	0	0
88355-26	M/phmtrc alys skeletal musc	R26C	Covered	135.13	135.13	1 XXX	0	0	0	0	0
88355-TC	M/phmtrc alys skeletal musc	R26C	Covered	101.00	101.00	1 XXX	0	0	0	0	0
88356-00	Analysis nerve	R26C	Covered	440.92	440.92	1 XXX	0	0	0	0	0
88356-26	Analysis nerve	R26C	Covered	217.49	217.49	1 XXX	0	0	0	0	0
88356-TC	Analysis nerve	R26C	Covered	223.43	223.43	1 XXX	0	0	0	0	0
88358-00	Analysis tumor	R26C	Covered	259.68	259.68	1 XXX	0	0	0	0	0
88358-26	Analysis tumor	R26C	Covered	87.59	87.59	1 XXX	0	0	0	0	0
88358-TC	Analysis tumor	R26C	Covered	172.10	172.10	1 XXX	0	0	0	0	0
88360-00	Tumor immunohistochem/manual	R26C	Covered	228.98	228.98	1 XXX	0	0	0	0	0
88360-26	Tumor immunohistochem/manual	R26C	Covered	73.70	73.70	1 XXX	0	0	0	0	0
88360-TC	Tumor immunohistochem/manual	R26C	Covered	155.28	155.28	1 XXX	0	0	0	0	0
88361-00	Tumor immunohistochem/comput	R26C	Covered	226.65	226.65	1 XXX	0	0	0	0	0
88361-26	Tumor immunohistochem/comput	R26C	Covered	77.19	77.19	1 XXX	0	0	0	0	0
88361-TC	Tumor immunohistochem/comput	R26C	Covered	149.46	149.46	1 XXX	0	0	0	0	0
88362-00	Nerve teasing preparations	R26C	Covered	431.09	431.09	1 XXX	0	0	0	0	0
88362-26	Nerve teasing preparations	R26C	Covered	196.81	196.81	1 XXX	0	0	0	0	0
88362-TC	Nerve teasing preparations	R26C	Covered	234.28	234.28	1 XXX	0	0	0	0	0
17360-00	Skin peel therapy	NCOV	Not Covered	Code not covered	Code not co	0 010	2	0	1	0	0
88364-00	Insitu hybridization (fish)	R26C	Covered	254.79	254.79	1 ZZZ	0	0	0	0	0
88364-26	Insitu hybridization (fish)	R26C	Covered	60.06	60.06	1 ZZZ	0	0	0	0	0
88364-TC	Insitu hybridization (fish)	R26C	Covered	194.73	194.73	1 ZZZ	0	0	0	0	0
88365-00	Insitu hybridization (fish)	R26C	Covered	338.87	338.87	1 XXX	0	0	0	0	0
88365-26	Insitu hybridization (fish)	R26C	Covered	76.17	76.17	1 XXX	0	0	0	0	0
88365-TC	Insitu hybridization (fish)	R26C	Covered	262.70	262.70	1 XXX	0	0	0	0	0
88366-00	Insitu hybridization (fish)	R26C	Covered	519.91	519.91	1 XXX	0	0	0	0	0
88366-26	Insitu hybridization (fish)	R26C	Covered	109.10	109.10	1 XXX	0	0	0	0	0
88366-TC	Insitu hybridization (fish)	R26C	Covered	410.81	410.81	1 XXX	0	0	0	0	0
88367-00	Insitu hybridization auto	R26C	Covered	212.63	212.63	1 XXX	0	0	0	0	0
88367-26	Insitu hybridization auto	R26C	Covered	58.65	58.65	1 XXX	0	0	0	0	0
88367-TC	Insitu hybridization auto	R26C	Covered	153.99	153.99	1 XXX	0	0	0	0	0
88368-00	Insitu hybridization manual	R26C	Covered	281.95	281.95	1 XXX	0	0	0	0	0
88368-26	Insitu hybridization manual	R26C	Covered	74.88	74.88	1 XXX	0	0	0	0	0
88368-TC	Insitu hybridization manual	R26C	Covered	207.07	207.07	1 XXX	0	0	0	0	0
88369-00	M/phmtrc alyshquant/semiq	R26C	Covered	245.09	245.09	1 ZZZ	0	0	0	0	0
88369-26	M/phmtrc alyshquant/semiq	R26C	Covered	59.41	59.41	1 ZZZ	0	0	0	0	0
88369-TC	M/phmtrc alyshquant/semiq	R26C	Covered	185.68	185.68	1 ZZZ	0	0	0	0	0
88371-00	Protein western blot tissue	LCMS	Covered	22.23	22.23	9 XXX	9	9	9	9	9
88371-26	Protein western blot tissue	RCMS	Covered	34.18	34.18	6 XXX	0	0	0	0	0
88372-00	Protein analysis w/probe	LCMS	Covered	26.22	26.22	9 XXX	9	9	9	9	9
88372-26	Protein analysis w/probe	RCMS	Covered	31.59	31.59	6 XXX	0	0	0	0	0
88373-00	M/phmtrc alys ishquant/semiq	R26C	Covered	128.44	128.44	1 ZZZ	0	0	0	0	0
88373-26	M/phmtrc alys ishquant/semiq	R26C	Covered	44.95	44.95	1 ZZZ	0	0	0	0	0
88373-TC	M/phmtrc alys ishquant/semiq	R26C	Covered	83.48	83.48	1 ZZZ	0	0	0	0	0
88374-00	M/phmtrc alys ishquant/semiq	R26C	Covered	553.36	553.36	1 XXX	0	0	0	0	0
88374-26	M/phmtrc alys ishquant/semiq	R26C	Covered	74.68	74.68	1 XXX	0	0	0	0	0
88374-TC	M/phmtrc alys ishquant/semiq	R26C	Covered	478.68	478.68	1 XXX	0	0	0	0	0
96934-00	Rcm celulr subcelulr img skn	NCOV	Not Covered	Code not covered	Code not co	4 ZZZ	0	0	0	0	0
88377-00	M/phmtrc alys ishquant/semiq	R26C	Covered	759.25	759.25	1 XXX	0	0	0	0	0
88377-26	M/phmtrc alys ishquant/semiq	R26C	Covered	113.60	113.60	1 XXX	0	0	0	0	0
88377-TC	M/phmtrc alys ishquant/semiq	R26C	Covered	645.65	645.65	1 XXX	0	0	0	0	0
88380-00	Microdissection laser	R26C	Covered	234.41	234.41	1 XXX	0	0	0	0	0
88380-26	Microdissection laser	R26C	Covered	93.27	93.27	1 XXX	0	0	0	0	0

88380-TC	Microdissection laser	R26C	Covered	141.14	141.14	1 XXX	0	0	0	0	0
88381-00	Microdissection manual	R26C	Covered	385.60	385.60	1 XXX	0	0	0	0	0
88381-26	Microdissection manual	R26C	Covered	41.32	41.32	1 XXX	0	0	0	0	0
88381-TC	Microdissection manual	R26C	Covered	344.29	344.29	1 XXX	0	0	0	0	0
88387-00	Tiss exam molecular study	R26C	Covered	60.42	60.42	1 XXX	0	0	0	0	0
88387-26	Tiss exam molecular study	R26C	Covered	46.79	46.79	1 XXX	0	0	0	0	0
88387-TC	Tiss exam molecular study	R26C	Covered	13.63	13.63	1 XXX	0	0	0	0	0
88388-00	Tiss ex molecu study add-on	R26C	Covered	66.90	66.90	1 XXX	0	0	0	0	0
88388-26	Tiss ex molecu study add-on	R26C	Covered	41.63	41.63	1 XXX	0	0	0	0	0
88388-TC	Tiss ex molecu study add-on	R26C	Covered	25.27	25.27	1 XXX	0	0	0	0	0
86927-00	Plasma fresh frozen	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
86930-00	Frozen blood prep	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
86931-00	Frozen blood thaw	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
88720-00	Bilirubin total transcut	LCMS	Covered	5.02	5.02	9 XXX	9	9	9	9	9
88738-00	Hgb quant transcutaneous	LCMS	Covered	5.02	5.02	9 XXX	9	9	9	9	9
88740-00	Transcutaneous carboxyhb	LCMS	Covered	9.37	9.37	9 XXX	9	9	9	9	9
88741-00	Transcutaneous methb	LCMS	Covered	9.37	9.37	9 XXX	9	9	9	9	9
95782-26	Polysom <6 yrs 4/> paramtrs	NCOV	Not Covered	Code not covered	Code not covered	1 XXX	0	0	0	0	0
89049-00	Chct for mal hyperthermia	R26C	Covered	538.65	102.06	0 XXX	0	0	0	0	0
89050-00	Body fluid cell count	LCMS	Covered	4.72	4.72	9 XXX	9	9	9	9	9
89051-00	Body fluid cell count	LCMS	Covered	5.60	5.60	9 XXX	9	9	9	9	9
89055-00	Leukocyte assessment fecal	LCMS	Covered	4.27	4.27	9 XXX	9	9	9	9	9
89060-00	Exam synovial fluid crystals	LCMS	Covered	7.33	7.33	9 XXX	9	9	9	9	9
89060-26	Exam synovial fluid crystals	RCMS	Covered	31.59	31.59	6 XXX	0	0	0	0	0
89125-00	Specimen fat stain	LCMS	Covered	5.88	5.88	9 XXX	9	9	9	9	9
89160-00	Exam feces for meat fibers	LCMS	Covered	4.85	4.85	9 XXX	9	9	9	9	9
89190-00	Nasal smear for eosinophils	LCMS	Covered	5.79	5.79	9 XXX	9	9	9	9	9
89220-00	Sputum specimen collection	R26C	Covered	36.91	36.91	3 XXX	0	0	0	0	0
89230-00	Collect sweat for test	R26C	Covered	5.22	5.22	3 XXX	0	0	0	0	0
90838-00	Psytx w pt w e/m 60 min	NCOV	Not Covered	Code not covered	Code not covered	0 ZZZ	0	0	9	0	0
99383-00	Prev visit new age 5-11	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
54250-00	Penis study	NCOV	Not Covered	Code not covered	Code not covered	1 000	0	0	0	0	0
99395-00	Prev visit est age 18-39	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
74262-26	Ct colonography dx w/dye	NCOV	Not Covered	Code not covered	Code not covered	1 XXX	4	0	0	0	0
99382-00	Init pm e/m new pat 1-4 yrs	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
99394-00	Prev visit est age 12-17	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
99467-00	Ped crit care transport addl	NCOV	Not Covered	Code not covered	Code not covered	0 ZZZ	0	0	0	0	0
74261-26	Ct colonography dx	NCOV	Not Covered	Code not covered	Code not covered	1 XXX	4	0	0	0	0
99381-00	Init pm e/m new pat infant	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
0086U-00	FISH identification of organisms in blood culture	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
99404-00	Prev med cnsi indiv apprx 60	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
74263-26	Ct colonography screening	NCOV	Not Covered	Code not covered	Code not covered	1 XXX	9	9	9	9	9
54240-00	Penis study	NCOV	Not Covered	Code not covered	Code not covered	1 000	0	0	0	0	0
36455-00	Bld exchange truj oth thn nb	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	2	0	1	0	0
0051U-00	Testing for presence of 31 prescription drugs in	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
11951-00	Tx contour defects 1.1-5.0cc	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	0	0	0	0
96001-00	Motion test w/ft press meas	NCOV	Not Covered	Code not covered	Code not covered	7 XXX	0	2	0	0	0
99392-00	Prev visit est age 1-4	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
99393-00	Prev visit est age 5-11	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
99463-00	Same day nb discharge	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
89321-00	Semen anal sperm detection	LCMS	Covered	12.05	12.05	9 XXX	9	9	9	9	9
96004-00	Phys review of motion tests	NCOV	Not Covered	Code not covered	Code not covered	2 XXX	0	2	0	0	0
90834-00	Psytx w pt 45 minutes	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	9	0	0
90880-00	Hypnotherapy	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0

54250-26	Penis study	NCOV	Not Covered	Code not covered	Code not covered	1 000	0	0	0	0	0
0181U-00	Red blood cell antigen genotyping, Colton blood	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0183U-00	Red blood cell antigen genotyping, solute carrier	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0184U-00	Red blood cell antigen genotyping, ADP-ribosyltransferase 4 [Dombrock blood	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0185U-00	Red blood cell antigen genotyping, fucosyltransferase 1 [H blood group] exon 4	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0186U-00	Red blood cell antigen genotyping, fucosyltransferase 2 [H blood group] exon 2	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0194U-00	Red blood cell antigen genotyping, Kell metallo-	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0196U-00	Red blood cell antigen genotyping, basal cell adhesion molecule [Lutheran blood	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0197U-00	Red blood cell antigen genotyping, intercellular	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0201U-00	Red blood cell antigen genotyping,	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
90876-00	Psychophysiological therapy	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
90847-00	Family psytx w/pt 50 min	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
0447T-00	Rmvl impltbl glucose sensor	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	0	1	0	0
99375-00	Home health care supervision	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
99378-00	Hospice care supervision	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
90460-00	Im admin 1st/only component	R26C	Covered	42.49	42.49	0 XXX	0	0	0	0	0
90461-00	Im admin each addl component	R26C	Covered	15.52	15.52	0 ZZZ	0	0	0	0	0
90471-00	Immunization admin	R26C	Covered	38.84	38.84	5 XXX	0	0	0	0	0
90472-00	Immunization admin each add	R26C	Covered	27.27	27.27	5 ZZZ	0	0	0	0	0
90473-00	Immune admin oral/nasal	R26C	Covered	31.08	31.08	0 XXX	0	0	0	0	0
90474-00	Immune admin oral/nasal addl	R26C	Covered	22.10	22.10	0 ZZZ	0	0	0	0	0
99380-00	Nursing fac care supervision	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
99391-00	Per pm reeval est pat infant	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
96156-00	Hlth bhv asmt/reevaluation	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
90845-00	Psychoanalysis	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
90630-00	Flu vacc iiv4 no preserv id	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
90678-00	Rsv vacc pref bivalent im	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
90689-00	Vacc iiv4 no prsrv 0.25ml im	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
90846-00	Family psytx w/o pt 50 min	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
0031U-00	Gene analysis (cytochrome P450 family 1, subfamily A, member 2) for common	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0032U-00	Gene analysis (catechol-O-methyltransferase) for c.472G>A (rs4680) variant	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0228U-00	Detection test by photometric technique for macromolecules in urine to evaluate	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
11200-00	Rmvl skin tags up to&inc 15	NCOV	Not Covered	Code not covered	Code not covered	0 010	2	0	1	0	0
11980-00	Implant hormone pellet(s)	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	0	1	0	0
36456-00	Prtl exchange transfuse nb	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	2	0	0	0	0
99461-00	Init nb em per day non-fac	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
99442-00	Phone e/m phys/qhp 11-20 min	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
90836-00	Psytx w pt w e/m 45 min	NCOV	Not Covered	Code not covered	Code not covered	0 ZZZ	0	0	9	0	0
0016U-00	RNA test for detecting gene abnormality associated with blood and lymphatic	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
94005-00	Home vent mgmt supervision	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
58322-00	Artificial insemination	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	0	0	0	0
99460-00	Init nb em per day hosp	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
36510-00	Insertion of catheter vein	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	0	0	0	0
0140U-00	Amplified DNA probe detection of fungus in blood	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0141U-00	Amplified DNA probe detection of 20 gram-positive	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0142U-00	Amplified DNA probe detection of 20 gram-positive	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9

99403-00	Prev med cnsl indiv aprpx 45	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
90867-00	Tcranial magn stim tx plan	RMCD	Covered	218.67	127.54	0 000	0	0	1	0	0
90868-00	Tcranial magn stim tx deli	RMCD	Covered	117.33	26.21	0 000	0	0	1	0	0
90869-00	Tcran magn stim redetemine	RMCD	Covered	203.68	112.56	0 000	0	0	1	0	0
90870-00	Electroconvulsive therapy	R26C	Covered	319.30	186.05	0 000	0	0	0	0	0
90887-00	Consultation with family	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
96935-00	Rcm celulr subcelulr img skn	NCOV	Not Covered	Code not covered	Code not covered	3 ZZZ	0	0	0	0	0
0054U-00	Measurement of 14 or more drug classes in capillary	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
92596-00	Ear protector evaluation	NCOV	Not Covered	Code not covered	Code not covered	3 XXX	0	2	0	0	0
96000-00	Motion analysis video/3d	NCOV	Not Covered	Code not covered	Code not covered	7 XXX	0	2	0	0	0
58321-00	Artificial insemination	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	0	0	0	0
11950-00	Tx contour defects 1 cc/<	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	0	0	0	0
0068U-00	Detection of Candida species by amplified probe	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0109U-00	DNA test for detection of 4 Aspergillus species	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
90912-00	Bfb training 1st 15 min	R26C	Covered	150.02	74.99	0 000	0	0	0	0	0
90913-00	Bfb training ea addl 15 min	R26C	Covered	58.34	42.17	0 ZZZ	0	0	0	0	0
90935-00	Hemodialysis one evaluation	R26C	Covered	124.66	124.66	0 000	0	0	0	0	0
90937-00	Hemodialysis repeated eval	R26C	Covered	179.31	179.31	0 000	0	0	0	0	0
86932-00	Frozen blood freeze/thaw	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
90945-00	Dialysis one evaluation	R26C	Covered	152.21	152.21	0 000	0	0	0	0	0
90947-00	Dialysis repeated eval	R26C	Covered	213.52	213.52	0 000	0	0	0	0	0
90951-00	Esrdr serv 4 visits p mo <2yr	R26C	Covered	2055.34	2055.34	0 XXX	0	0	0	0	0
86945-00	Blood product/irradiation	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
86960-00	Vol reduction of blood/prod	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
90954-00	Esrdr serv 4 vsts p mo 2-11	R26C	Covered	1763.86	1763.86	0 XXX	0	0	0	0	0
90955-00	Esrdr srv 2-3 vsts p mo 2-11	R26C	Covered	920.87	920.87	0 XXX	0	0	0	0	0
90956-00	Esrdr srv 1 visit p mo 2-11	R26C	Covered	618.26	618.26	0 XXX	0	0	0	0	0
90957-00	Esrdr srv 4 vsts p mo 12-19	R26C	Covered	1355.04	1355.04	0 XXX	0	0	0	0	0
90958-00	Esrdr srv 2-3 vsts p mo 12-19	R26C	Covered	884.18	884.18	0 XXX	0	0	0	0	0
90959-00	Esrdr serv 1 vst p mo 12-19	R26C	Covered	577.97	577.97	0 XXX	0	0	0	0	0
90960-00	Esrdr srv 4 visits p mo 20+	R26C	Covered	628.15	628.15	0 XXX	0	0	0	0	0
90961-00	Esrdr srv 2-3 vsts p mo 20+	R26C	Covered	522.09	522.09	0 XXX	0	0	0	0	0
90962-00	Esrdr serv 1 visit p mo 20+	R26C	Covered	362.26	362.26	0 XXX	0	0	0	0	0
90963-00	Esrdr home pt serv p mo <2yrs	R26C	Covered	1070.91	1070.91	0 XXX	0	0	0	0	0
90964-00	Esrdr home pt serv p mo 2-11	R26C	Covered	918.46	918.46	0 XXX	0	0	0	0	0
90965-00	Esrdr home pt serv p mo 12-19	R26C	Covered	882.51	882.51	0 XXX	0	0	0	0	0
90966-00	Esrdr home pt serv p mo 20+	R26C	Covered	522.09	522.09	0 XXX	0	0	0	0	0
90967-00	Esrdr svc pr day pt <2	R26C	Covered	31.07	31.07	0 XXX	0	0	0	0	0
90968-00	Esrdr svc pr day pt 2-11	R26C	Covered	30.46	30.46	0 XXX	0	0	0	0	0
90969-00	Esrdr svc pr day pt 12-19	R26C	Covered	29.85	29.85	0 XXX	0	0	0	0	0
90970-00	Esrdr svc pr day pt 20+	R26C	Covered	16.81	16.81	0 XXX	0	0	0	0	0
0240U-00	Respiratory infectious agent detection by RNA for severe acute respiratory	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0241U-00	Respiratory infectious agent detection by RNA for severe acute respiratory	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
90997-00	Hemoperfusion	R26C	Covered	154.40	154.40	0 000	0	0	0	0	0
86965-00	Pooling blood platelets	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
91010-00	Esophagus motility study	R26C	Covered	419.04	419.04	1 000	0	0	0	0	0
91010-26	Esophagus motility study	R26C	Covered	114.30	114.30	1 000	0	0	0	0	0
91010-TC	Esophagus motility study	R26C	Covered	304.74	304.74	1 000	0	0	0	0	0
91013-00	Esophgl motil w/stim/perfus	R26C	Covered	47.86	47.86	1 ZZZ	0	0	0	0	0
91013-26	Esophgl motil w/stim/perfus	R26C	Covered	16.16	16.16	1 ZZZ	0	0	0	0	0
91013-TC	Esophgl motil w/stim/perfus	R26C	Covered	31.69	31.69	1 ZZZ	0	0	0	0	0
91020-00	Gastric motility studies	R26C	Covered	525.78	525.78	1 000	0	0	0	0	0

91020-26	Gastric motility studies	R26C	Covered	129.15	129.15	1 000	0	0	0	0	0
91020-TC	Gastric motility studies	R26C	Covered	396.63	396.63	1 000	0	0	0	0	0
91022-00	Duodenal motility study	R26C	Covered	327.17	327.17	1 000	0	0	0	0	0
91022-26	Duodenal motility study	R26C	Covered	129.15	129.15	1 000	0	0	0	0	0
91022-TC	Duodenal motility study	R26C	Covered	198.02	198.02	1 000	0	0	0	0	0
91030-00	Acid perfusion of esophagus	R26C	Covered	275.46	275.46	1 000	0	0	0	0	0
91030-26	Acid perfusion of esophagus	R26C	Covered	81.97	81.97	1 000	0	0	0	0	0
91030-TC	Acid perfusion of esophagus	R26C	Covered	193.49	193.49	1 000	0	0	0	0	0
91034-00	Gastroesophageal reflux test	R26C	Covered	362.68	362.68	1 000	0	0	0	0	0
91034-26	Gastroesophageal reflux test	R26C	Covered	87.05	87.05	1 000	0	0	0	0	0
91034-TC	Gastroesophageal reflux test	R26C	Covered	275.63	275.63	1 000	0	0	0	0	0
91035-00	G-esoph reflx tst w/electrod	R26C	Covered	867.64	867.64	1 000	0	0	0	0	0
91035-26	G-esoph reflx tst w/electrod	R26C	Covered	141.19	141.19	1 000	0	0	0	0	0
91035-TC	G-esoph reflx tst w/electrod	R26C	Covered	726.45	726.45	1 000	0	0	0	0	0
91037-00	Esoph imped function test	R26C	Covered	319.90	319.90	1 000	0	0	0	0	0
91037-26	Esoph imped function test	R26C	Covered	86.31	86.31	1 000	0	0	0	0	0
91037-TC	Esoph imped function test	R26C	Covered	233.59	233.59	1 000	0	0	0	0	0
91038-00	Esoph imped funct test > 1hr	R26C	Covered	772.85	772.85	1 000	0	0	0	0	0
91038-26	Esoph imped funct test > 1hr	R26C	Covered	98.14	98.14	1 000	0	0	0	0	0
91038-TC	Esoph imped funct test > 1hr	R26C	Covered	674.71	674.71	1 000	0	0	0	0	0
91040-00	Esoph balloon distension tst	R26C	Covered	993.31	993.31	1 000	0	0	0	0	0
91040-26	Esoph balloon distension tst	R26C	Covered	85.81	85.81	1 000	0	0	0	0	0
91040-TC	Esoph balloon distension tst	R26C	Covered	907.51	907.51	1 000	0	0	0	0	0
91065-00	Breath hydrogen/methane test	R26C	Covered	141.61	141.61	1 000	0	0	0	0	0
91065-26	Breath hydrogen/methane test	R26C	Covered	17.38	17.38	1 000	0	0	0	0	0
91065-TC	Breath hydrogen/methane test	R26C	Covered	124.23	124.23	1 000	0	0	0	0	0
91110-00	Gi trc img intral esoph-ile	R26C	Covered	1402.96	1402.96	1 XXX	0	0	0	0	0
91110-26	Gi trc img intral esoph-ile	R26C	Covered	200.51	200.51	1 XXX	0	0	0	0	0
91110-TC	Gi trc img intral esoph-ile	R26C	Covered	1202.45	1202.45	1 XXX	0	0	0	0	0
91111-00	Gi trc img intral esophagus	R26C	Covered	1691.29	1691.29	1 XXX	0	0	0	0	0
91111-26	Gi trc img intral esophagus	R26C	Covered	80.72	80.72	1 XXX	0	0	0	0	0
91111-TC	Gi trc img intral esophagus	R26C	Covered	1610.58	1610.58	1 XXX	0	0	0	0	0
91112-00	Gi wireless capsule measure	R26C	Covered	3108.52	3108.52	1 XXX	0	0	0	0	0
91112-26	Gi wireless capsule measure	R26C	Covered	188.12	188.12	1 XXX	0	0	0	0	0
91112-TC	Gi wireless capsule measure	R26C	Covered	2920.40	2920.40	1 XXX	0	0	0	0	0
91113-00	Gi trc img intral colon i&r	R26C	Covered	1718.67	1718.67	1 XXX	0	0	0	0	0
91113-26	Gi trc img intral colon i&r	R26C	Covered	216.06	216.06	1 XXX	0	0	0	0	0
91113-TC	Gi trc img intral colon i&r	R26C	Covered	1502.61	1502.61	1 XXX	0	0	0	0	0
91117-00	Colon motility 6 hr study	R26C	Covered	240.26	240.26	0 000	0	0	0	0	0
91120-00	Rectal sensation test	R26C	Covered	962.82	962.82	1 XXX	0	0	0	0	0
91120-26	Rectal sensation test	R26C	Covered	85.06	85.06	1 XXX	0	0	0	0	0
91120-TC	Rectal sensation test	R26C	Covered	877.75	877.75	1 XXX	0	0	0	0	0
91122-00	Anal pressure record	R26C	Covered	521.45	521.45	1 000	0	0	0	0	0
91122-26	Anal pressure record	R26C	Covered	154.57	154.57	1 000	0	0	0	0	0
91122-TC	Anal pressure record	R26C	Covered	366.88	366.88	1 000	0	0	0	0	0
91132-00	Electrogastrography	R26C	Covered	844.77	844.77	1 XXX	0	0	0	0	0
91132-26	Electrogastrography	R26C	Covered	46.58	46.58	1 XXX	0	0	0	0	0
91132-TC	Electrogastrography	R26C	Covered	798.20	798.20	1 XXX	0	0	0	0	0
91133-00	Electrogastrography w/test	R26C	Covered	887.56	887.56	1 XXX	0	0	0	0	0
91133-26	Electrogastrography w/test	R26C	Covered	58.97	58.97	1 XXX	0	0	0	0	0
91133-TC	Electrogastrography w/test	R26C	Covered	828.60	828.60	1 XXX	0	0	0	0	0
91200-00	Liver elastography	R26C	Covered	57.49	57.49	1 XXX	0	0	0	0	0
91200-26	Liver elastography	R26C	Covered	18.63	18.63	1 XXX	0	0	0	0	0
91200-TC	Liver elastography	R26C	Covered	38.86	38.86	1 XXX	0	0	0	0	0

86970-00	Rbc pretx incubatj w/chemicl	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
86971-00	Rbc pretx incubatj w/enzymes	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
86972-00	Rbc pretx incubatj w/density	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
92575-00	Sensorineural acuity test	NCOV	Not Covered	Code not covered	Code not cov	3 XXX	0	2	0	0	0
92002-00	Intrm oph exam new patient	R26C	Covered	159.66	82.04	0 XXX	0	2	0	0	0
92004-00	Compre oph exam new pt 1/>	R26C	Covered	278.38	169.07	0 XXX	0	2	0	0	0
92012-00	Intrm oph exam est patient	R26C	Covered	167.31	90.34	0 XXX	0	2	0	0	0
92014-00	Compre oph exam est pt 1/>	R26C	Covered	235.91	136.30	0 XXX	0	2	0	0	0
92015-00	Determine refractive state	RCMS	Covered	34.19	32.89	9 XXX	9	9	9	9	9
92018-00	Compl oph exam general anes	R26C	Covered	250.09	250.09	0 XXX	0	0	0	0	0
92019-00	Lmtd oph exam general anes	R26C	Covered	130.35	130.35	0 XXX	0	0	0	0	0
92020-00	Gonioscopy	R26C	Covered	50.99	36.77	0 XXX	0	2	0	0	0
92025-00	Cptrized corneal topography	R26C	Covered	67.94	67.94	1 XXX	7	2	0	0	0
92025-26	Cptrized corneal topography	R26C	Covered	34.90	34.90	1 XXX	7	2	0	0	0
92025-TC	Cptrized corneal topography	R26C	Covered	33.03	33.03	1 XXX	7	2	0	0	0
92060-00	Sensorimotor examination	R26C	Covered	119.65	119.65	1 XXX	7	2	0	0	0
92060-26	Sensorimotor examination	R26C	Covered	67.21	67.21	1 XXX	7	2	0	0	0
92060-TC	Sensorimotor examination	R26C	Covered	52.44	52.44	1 XXX	7	2	0	0	0
92065-00	Orthop traing pfrmd phys/qhp	R26C	Covered	73.60	60.66	0 XXX	0	2	0	0	0
92066-00	Orthop traing supvj phys/qhp	R26C	Covered	50.50	50.50	3 XXX	0	2	0	0	0
92071-00	Contact lens fitting for tx	R26C	Covered	66.28	57.87	0 XXX	0	1	0	0	0
92072-00	Fitg c-lens keratoconus 1st	R26C	Covered	232.37	168.99	0 XXX	0	2	0	0	0
92081-00	Limited visual field xm	R26C	Covered	62.31	62.31	1 XXX	7	2	0	0	0
92081-26	Limited visual field xm	R26C	Covered	28.63	28.63	1 XXX	7	2	0	0	0
92081-TC	Limited visual field xm	R26C	Covered	33.68	33.68	1 XXX	7	2	0	0	0
92082-00	Intermediate visual field xm	R26C	Covered	88.44	88.44	1 XXX	7	2	0	0	0
92082-26	Intermediate visual field xm	R26C	Covered	37.30	37.30	1 XXX	7	2	0	0	0
92082-TC	Intermediate visual field xm	R26C	Covered	51.14	51.14	1 XXX	7	2	0	0	0
92083-00	Extended visual field xm	R26C	Covered	119.74	119.74	1 XXX	7	2	0	0	0
92083-26	Extended visual field xm	R26C	Covered	48.55	48.55	1 XXX	7	2	0	0	0
92083-TC	Extended visual field xm	R26C	Covered	71.20	71.20	1 XXX	7	2	0	0	0
92100-00	Serial tonometry	R26C	Covered	161.36	57.87	0 XXX	0	2	0	0	0
92132-00	Cmptr ophth dx img ant segmt	R26C	Covered	58.43	58.43	1 XXX	7	2	0	0	0
92132-26	Cmptr ophth dx img ant segmt	R26C	Covered	29.28	29.28	1 XXX	7	2	0	0	0
92132-TC	Cmptr ophth dx img ant segmt	R26C	Covered	29.15	29.15	1 XXX	7	2	0	0	0
92133-00	Cmptr ophth img optic nerve	R26C	Covered	67.74	67.74	1 XXX	7	2	0	0	0
92133-26	Cmptr ophth img optic nerve	R26C	Covered	38.59	38.59	1 XXX	7	2	0	0	0
92133-TC	Cmptr ophth img optic nerve	R26C	Covered	29.15	29.15	1 XXX	7	2	0	0	0
92134-00	Cptr ophth dx img post segmt	R26C	Covered	75.31	75.31	1 XXX	7	2	0	0	0
92134-26	Cptr ophth dx img post segmt	R26C	Covered	44.86	44.86	1 XXX	7	2	0	0	0
92134-TC	Cptr ophth dx img post segmt	R26C	Covered	30.45	30.45	1 XXX	7	2	0	0	0
92136-00	Ophthalmic biometry	R26C	Covered	87.89	87.89	1 XXX	7	2	0	0	0
92136-26	Ophthalmic biometry	R26C	Covered	54.86	54.86	1 XXX	7	3	0	0	0
92136-TC	Ophthalmic biometry	R26C	Covered	33.03	33.03	1 XXX	7	2	0	0	0
92145-00	Corneal hysteresis deter	R26C	Covered	23.64	23.64	1 XXX	7	2	0	0	0
92145-26	Corneal hysteresis deter	R26C	Covered	9.36	9.36	1 XXX	7	2	0	0	0
92145-TC	Corneal hysteresis deter	R26C	Covered	14.28	14.28	1 XXX	7	2	0	0	0
92201-00	Opscopy extnd rta draw uni/bi	R26C	Covered	45.10	40.58	0 XXX	0	2	0	0	0
92202-00	Opscopy extnd on/mac draw	R26C	Covered	28.14	26.20	0 XXX	0	2	0	0	0
92227-00	Img rta detcj/mntr ds staff	R26C	Covered	33.68	33.68	3 XXX	0	2	0	0	0
92228-00	Img rta detc/mntr ds phy/qhp	R26C	Covered	55.12	55.12	1 XXX	7	2	0	0	0
92228-26	Img rta detc/mntr ds phy/qhp	R26C	Covered	29.85	29.85	1 XXX	7	2	0	0	0
92228-TC	Img rta detc/mntr ds phy/qhp	R26C	Covered	25.27	25.27	1 XXX	7	2	0	0	0
92229-00	Img rta detc/mntr ds poc aly	R26C	Covered	78.96	78.96	3 XXX	7	2	0	0	0

92230-00	Fluorescein angiography i&r	R26C	Covered	261.70	61.83	0 XXX	0	3	0	0	0
92235-00	Fluorescein angrph mltiframe	R26C	Covered	310.87	310.87	1 XXX	7	2	0	0	0
92235-26	Fluorescein angrph mltiframe	R26C	Covered	76.68	76.68	1 XXX	7	2	0	0	0
92235-TC	Fluorescein angrph mltiframe	R26C	Covered	234.19	234.19	1 XXX	7	2	0	0	0
92240-00	Icg angiography i&r uni/bi	R26C	Covered	356.88	356.88	1 XXX	7	2	0	0	0
92240-26	Icg angiography i&r uni/bi	R26C	Covered	81.94	81.94	1 XXX	7	2	0	0	0
92240-TC	Icg angiography i&r uni/bi	R26C	Covered	274.94	274.94	1 XXX	7	2	0	0	0
92242-00	Fluorescein&icg angiography	R26C	Covered	539.15	539.15	1 XXX	7	2	0	0	0
92242-26	Fluorescein&icg angiography	R26C	Covered	97.34	97.34	1 XXX	7	2	0	0	0
92242-TC	Fluorescein&icg angiography	R26C	Covered	441.81	441.81	1 XXX	7	2	0	0	0
92250-00	Fundus photography w/i&r	R26C	Covered	69.04	69.04	1 XXX	7	2	0	0	0
92250-26	Fundus photography w/i&r	R26C	Covered	37.30	37.30	1 XXX	7	2	0	0	0
92250-TC	Fundus photography w/i&r	R26C	Covered	31.74	31.74	1 XXX	7	2	0	0	0
92260-00	Ophthalmodynamometry	R26C	Covered	36.13	19.32	0 XXX	0	2	0	0	0
92265-00	Ndl oculoelectromyography 1+	R26C	Covered	164.46	164.46	1 XXX	7	2	0	0	0
92265-26	Ndl oculoelectromyography 1+	R26C	Covered	82.91	82.91	1 XXX	7	2	0	0	0
92265-TC	Ndl oculoelectromyography 1+	R26C	Covered	81.54	81.54	1 XXX	7	2	0	0	0
92270-00	Electro-oculography w/i&r	R26C	Covered	222.72	222.72	1 XXX	7	2	0	0	0
92270-26	Electro-oculography w/i&r	R26C	Covered	76.44	76.44	1 XXX	7	2	0	0	0
92270-TC	Electro-oculography w/i&r	R26C	Covered	146.27	146.27	1 XXX	7	2	0	0	0
92273-00	Full field erg w/i&r	R26C	Covered	240.00	240.00	1 XXX	7	2	0	0	0
92273-26	Full field erg w/i&r	R26C	Covered	65.27	65.27	1 XXX	7	2	0	0	0
92273-TC	Full field erg w/i&r	R26C	Covered	174.73	174.73	1 XXX	7	2	0	0	0
92274-00	Multifocal erg w/i&r	R26C	Covered	169.76	169.76	1 XXX	7	2	0	0	0
92274-26	Multifocal erg w/i&r	R26C	Covered	59.76	59.76	1 XXX	7	2	0	0	0
92274-TC	Multifocal erg w/i&r	R26C	Covered	110.00	110.00	1 XXX	7	2	0	0	0
92283-00	Extnd color vision xm	R26C	Covered	103.57	103.57	1 XXX	7	2	0	0	0
92283-26	Extnd color vision xm	R26C	Covered	14.91	14.91	1 XXX	7	2	0	0	0
92283-TC	Extnd color vision xm	R26C	Covered	88.66	88.66	1 XXX	7	2	0	0	0
92284-00	Dx dark adaptation exam i&r	R26C	Covered	71.84	71.84	3 XXX	7	2	0	0	0
92285-00	External ocular photography	R26C	Covered	43.88	43.88	1 XXX	7	2	0	0	0
92285-26	External ocular photography	R26C	Covered	5.03	5.03	1 XXX	7	2	0	0	0
92285-TC	External ocular photography	R26C	Covered	38.86	38.86	1 XXX	7	2	0	0	0
92286-00	Ant sgm img i&r speclr mic	R26C	Covered	72.92	72.92	1 XXX	7	2	0	0	0
92286-26	Ant sgm img i&r speclr mic	R26C	Covered	38.59	38.59	1 XXX	7	2	0	0	0
92286-TC	Ant sgm img i&r speclr mic	R26C	Covered	34.33	34.33	1 XXX	7	2	0	0	0
92287-00	Ant sgm img ir flrscn angrph	R26C	Covered	274.07	274.07	1 XXX	0	2	0	0	0
92287-26	Ant sgm img ir flrscn angrph	R26C	Covered	54.11	54.11	1 XXX	0	2	0	0	0
92287-TC	Ant sgm img ir flrscn angrph	R26C	Covered	219.96	219.96	1 XXX	0	2	0	0	0
92310-00	Contact lens fitting ou	RCMS	Covered	184.63	100.55	9 XXX	9	9	9	9	9
92311-00	Contact lens fitg aphakia 1	R26C	Covered	195.05	92.86	0 XXX	0	0	0	0	0
92312-00	Contact lens fitg aphakia ou	R26C	Covered	232.56	110.31	0 XXX	0	2	0	0	0
92313-00	C-lens fitg corneoscrl lens	R26C	Covered	185.97	77.31	0 XXX	0	0	0	0	0
92314-00	C-lens fitg tech ou	RCMS	Covered	163.08	59.59	9 XXX	9	9	9	9	9
92315-00	C-lens fitg tech aphakia 1	R26C	Covered	156.11	37.10	0 XXX	0	0	0	0	0
92316-00	C-lens fitg tech aphakia ou	R26C	Covered	192.73	56.25	0 XXX	0	2	0	0	0
92317-00	C-lens fitg tech corneoscrl	R26C	Covered	165.17	37.10	0 XXX	0	0	0	0	0
92325-00	Modification of contact lens	RCMS	Covered	78.96	78.96	5 XXX	0	0	0	0	0
92326-00	Replacement of contact lens	RCMS	Covered	75.72	75.72	5 XXX	0	0	0	0	0
92340-00	Fit spectacles monofocal	RCMS	Covered	64.62	31.64	9 XXX	9	9	9	9	9
92341-00	Fit spectacles bifocal	RCMS	Covered	73.34	40.35	9 XXX	9	9	9	9	9
92342-00	Fit spectacles multifocal	RCMS	Covered	78.28	45.94	9 XXX	9	9	9	9	9
92352-00	Fit aphakia spectcl monofocl	RCMS	Covered	81.44	31.64	9 XXX	9	9	9	9	9
92353-00	Fit aphakia spectcl multifoc	RCMS	Covered	92.62	42.82	9 XXX	9	9	9	9	9

92354-00	Fitg spect low vis 1system	RCMS	Covered	26.57	26.57	9 XXX	9	9	9	9	9
92355-00	Fitg spect lw vis cmpnd lens	RCMS	Covered	41.44	41.44	9 XXX	9	9	9	9	9
92358-00	Aphakia prosth service temp	RCMS	Covered	22.04	22.04	9 XXX	9	9	9	9	9
92370-00	Rpr&refitg spect xcp aphakia	RCMS	Covered	56.41	27.31	9 XXX	9	9	9	9	9
92371-00	Rpr&refit spct prsth aphakia	RCMS	Covered	22.69	22.69	9 XXX	9	9	9	9	9
86975-00	Rbc serum pretx incubj drugs	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
86976-00	Rbc serum pretx id dilution	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
86977-00	Rbc serum pretx incubj/inhib	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
92502-00	Ear and throat examination	R26C	Covered	172.45	172.45	0 000	0	0	0	0	0
92504-00	Ear microscopy examination	R26C	Covered	54.97	16.16	0 XXX	0	0	0	0	0
92507-00	Speech/hearing therapy	R26C	Covered	141.25	141.25	7 XXX	5	0	0	0	0
92508-00	Speech/hearing therapy	R26C	Covered	45.33	45.33	7 XXX	5	0	0	0	0
92511-00	Nasopharyngoscopy	R26C	Covered	222.90	68.31	0 000	0	0	0	0	0
92512-00	Nasal function studies	R26C	Covered	120.29	47.85	0 XXX	0	0	0	0	0
92516-00	Facial nerve function test	R26C	Covered	136.88	39.86	0 XXX	0	0	0	0	0
92517-00	Vemp test i&r cervical	R26C	Covered	144.49	75.93	0 XXX	0	2	0	0	0
92518-00	Vemp test i&r ocular	R26C	Covered	145.23	76.03	0 XXX	0	2	0	0	0
92519-00	Vemp tst i&r cervical&ocular	R26C	Covered	240.00	114.52	0 XXX	0	2	0	0	0
92520-00	Laryngeal function studies	R26C	Covered	165.38	71.60	0 XXX	0	0	0	0	0
92521-00	Evaluation of speech fluency	R26C	Covered	245.74	245.74	7 XXX	5	0	0	0	0
92522-00	Evaluate speech production	R26C	Covered	204.35	204.35	7 XXX	5	0	0	0	0
92523-00	Speech sound lang comprehen	R26C	Covered	421.44	421.44	7 XXX	5	0	0	0	0
92524-00	Behavral qualit analys voice	R26C	Covered	201.11	201.11	7 XXX	5	0	0	0	0
92526-00	Oral function therapy	R26C	Covered	157.26	157.26	7 XXX	5	0	0	0	0
92531-00	Spontaneous nystagmus study	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
92532-00	Positional nystagmus test	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
92533-00	Caloric vestibular test	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
92534-00	Optokinetic nystagmus test	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
92537-00	Caloric vstblr test w/rec	R26C	Covered	73.43	73.43	1 XXX	0	2	0	0	0
92537-26	Caloric vstblr test w/rec	R26C	Covered	55.92	55.92	1 XXX	0	2	0	0	0
92537-TC	Caloric vstblr test w/rec	R26C	Covered	17.51	17.51	1 XXX	0	2	0	0	0
92538-00	Caloric vstblr test w/rec	R26C	Covered	40.97	40.97	1 XXX	0	2	0	0	0
92538-26	Caloric vstblr test w/rec	R26C	Covered	28.63	28.63	1 XXX	0	2	0	0	0
92538-TC	Caloric vstblr test w/rec	R26C	Covered	12.34	12.34	1 XXX	0	2	0	0	0
92540-00	Basic vestibular evaluation	R26C	Covered	199.33	199.33	1 XXX	0	0	0	0	0
92540-26	Basic vestibular evaluation	R26C	Covered	139.77	139.77	1 XXX	0	0	0	0	0
92540-TC	Basic vestibular evaluation	R26C	Covered	59.55	59.55	1 XXX	0	0	0	0	0
92541-00	Spontaneous nystagmus test	R26C	Covered	45.75	45.75	1 XXX	0	0	0	0	0
92541-26	Spontaneous nystagmus test	R26C	Covered	37.94	37.94	1 XXX	0	0	0	0	0
92541-TC	Spontaneous nystagmus test	R26C	Covered	7.81	7.81	1 XXX	0	0	0	0	0
92542-00	Positional nystagmus test	R26C	Covered	52.55	52.55	1 XXX	0	0	0	0	0
92542-26	Positional nystagmus test	R26C	Covered	44.74	44.74	1 XXX	0	0	0	0	0
92542-TC	Positional nystagmus test	R26C	Covered	7.81	7.81	1 XXX	0	0	0	0	0
92544-00	Optokinetic nystagmus test	R26C	Covered	32.03	32.03	1 XXX	0	0	0	0	0
92544-26	Optokinetic nystagmus test	R26C	Covered	25.51	25.51	1 XXX	0	0	0	0	0
92544-TC	Optokinetic nystagmus test	R26C	Covered	6.52	6.52	1 XXX	0	0	0	0	0
92545-00	Oscillating tracking test	R26C	Covered	30.17	30.17	1 XXX	0	0	0	0	0
92545-26	Oscillating tracking test	R26C	Covered	23.65	23.65	1 XXX	0	0	0	0	0
92545-TC	Oscillating tracking test	R26C	Covered	6.52	6.52	1 XXX	0	0	0	0	0
92546-00	Sinusoidal rotational test	R26C	Covered	254.50	254.50	1 XXX	0	0	0	0	0
92546-26	Sinusoidal rotational test	R26C	Covered	26.73	26.73	1 XXX	0	0	0	0	0
92546-TC	Sinusoidal rotational test	R26C	Covered	227.77	227.77	1 XXX	0	0	0	0	0
92547-00	Supplemental electrical test	R26C	Covered	20.70	20.70	3 ZZZ	0	0	0	0	0
92548-00	Cdp-sot 6 cond w/i&r	R26C	Covered	86.79	86.79	1 XXX	0	0	0	0	0

92548-26	Cdp-sot 6 cond w/i&r	R26C	Covered	60.22	60.22	1 XXX	0	0	0	0	0
92548-TC	Cdp-sot 6 cond w/i&r	R26C	Covered	26.57	26.57	1 XXX	0	0	0	0	0
92549-00	Cdp-sot 6 cond w/i&r mct&adt	R26C	Covered	120.24	120.24	1 XXX	0	0	0	0	0
92549-26	Cdp-sot 6 cond w/i&r mct&adt	R26C	Covered	81.38	81.38	1 XXX	0	0	0	0	0
92549-TC	Cdp-sot 6 cond w/i&r mct&adt	R26C	Covered	38.86	38.86	1 XXX	0	0	0	0	0
92550-00	Tympanometry & reflex thresh	R26C	Covered	40.08	40.08	7 XXX	0	2	0	0	0
92551-00	Pure tone hearing test air	RCMS	Covered	23.98	23.98	9 XXX	9	9	9	9	9
92552-00	Pure tone audiometry air	R26C	Covered	73.14	73.14	3 XXX	0	2	0	0	0
92553-00	Audiometry air & bone	R26C	Covered	88.66	88.66	3 XXX	0	2	0	0	0
92555-00	Speech threshold audiometry	R26C	Covered	55.67	55.67	3 XXX	0	2	0	0	0
92556-00	Speech audiometry complete	R26C	Covered	86.72	86.72	3 XXX	0	2	0	0	0
92557-00	Comprehensive hearing test	R26C	Covered	66.96	57.26	7 XXX	0	2	0	0	0
92558-00	Evoked auditory test qual	RCMS	Covered	16.85	14.91	9 XXX	9	9	9	9	9
90832-00	Psytx w pt 30 minutes	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	9	0	0
99342-00	Home/res vst new low mdm 30	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	0	0	0
92565-00	Stenger test pure tone	R26C	Covered	40.15	40.15	3 XXX	0	2	0	0	0
92567-00	Tympanometry	R26C	Covered	30.31	19.32	7 XXX	0	2	0	0	0
92568-00	Acoustic refl threshold tst	R26C	Covered	27.38	26.73	7 XXX	0	2	0	0	0
92570-00	Acoustic immitance testing	R26C	Covered	58.75	52.28	7 XXX	0	2	0	0	0
96170-00	Hlth bhv ivntj fam wo pt 1st	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
99348-00	Home/res vst est low mdm 30	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	0	0	0
93792-00	Pt/caregiver traing home inr	NCOV	Not Covered	Code not covered	Code not co	3 XXX	0	0	0	0	0
0030U-00	Gene analysis of targeted sequences for warfarin	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0286U-00	Gene analysis of centrosomal protein, 72-Kda	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
92579-00	Visual audiometry (vra)	R26C	Covered	81.45	66.57	7 XXX	0	2	0	0	0
92582-00	Conditioning play audiometry	R26C	Covered	167.57	167.57	3 XXX	0	2	0	0	0
96904-00	Whole body photography	NCOV	Not Covered	Code not covered	Code not co	5 XXX	0	0	0	0	0
92584-00	Electrocochleography	R26C	Covered	208.44	208.44	0 XXX	0	2	0	0	0
92587-00	Evoked auditory test limited	R26C	Covered	38.83	38.83	1 XXX	0	2	0	0	0
92587-26	Evoked auditory test limited	R26C	Covered	32.32	32.32	1 XXX	0	2	0	0	0
92587-TC	Evoked auditory test limited	R26C	Covered	6.52	6.52	1 XXX	0	2	0	0	0
92588-00	Evoked auditory tst complete	R26C	Covered	60.69	60.69	1 XXX	0	2	0	0	0
92588-26	Evoked auditory tst complete	R26C	Covered	51.59	51.59	1 XXX	0	2	0	0	0
92588-TC	Evoked auditory tst complete	R26C	Covered	9.10	9.10	1 XXX	0	2	0	0	0
77768-26	Hdr rdnc skn surf brachytx	NCOV	Not Covered	Code not covered	Code not co	1 XXX	0	0	0	0	0
90840-00	Psytx crisis ea addl 30 min	NCOV	Not Covered	Code not covered	Code not co	0 ZZZ	0	0	0	0	0
90833-00	Psytx w pt w e/m 30 min	NCOV	Not Covered	Code not covered	Code not co	0 ZZZ	0	0	9	0	0
99485-00	Suprv interfacility transport	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
96167-00	Hlth bhv ivntj fam 1st 30	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	0	0	0
99464-00	Attendance at delivery	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	0	0	0
99449-00	Ntrprof ph1/ntrnet/ehr 31/>	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	0	0	0
92597-00	Oral speech device eval	R26C	Covered	133.04	133.04	7 XXX	5	0	0	0	0
92601-00	Cochlear implt f/up exam <7	R26C	Covered	293.37	221.57	7 XXX	0	0	0	0	0
92602-00	Reprogram cochlear implt <7	R26C	Covered	185.88	125.08	7 XXX	0	0	0	0	0
92603-00	Cochlear implt f/up exam 7/>	R26C	Covered	275.45	215.30	7 XXX	0	0	0	0	0
92604-00	Reprogram cochlear implt 7/>	R26C	Covered	166.67	119.45	7 XXX	0	0	0	0	0
92605-00	Ex for nonspeech device rx	RCMS	Covered	161.86	150.87	9 XXX	9	9	9	9	9
92606-00	Non-speech device service	RCMS	Covered	141.74	120.40	9 XXX	9	9	9	9	9
92607-00	Ex for speech device rx 1hr	R26C	Covered	230.40	230.40	7 XXX	5	0	0	0	0
92608-00	Ex for speech device rx addl	R26C	Covered	90.50	90.50	7 ZZZ	0	0	0	0	0
92609-00	Use of speech device service	R26C	Covered	192.26	192.26	7 XXX	5	0	0	0	0
92610-00	Evaluate swallowing function	R26C	Covered	158.11	128.36	7 XXX	0	0	0	0	0
92611-00	Motion fluoroscopy/swallow	R26C	Covered	169.09	169.09	7 XXX	0	0	0	0	0
92612-00	Endoscopy swallow (fees) vid	R26C	Covered	376.94	118.87	0 XXX	0	0	0	0	0

92613-00	Endoscopy swallow (fees) i&r	R26C	Covered	64.69	64.69	0 XXX	0	0	0	0	0
92614-00	Laryngoscopic sensory vid	R26C	Covered	280.62	116.33	0 XXX	0	0	0	0	0
92615-00	Laryngoscopic sensory i&r	R26C	Covered	57.88	57.88	0 XXX	0	0	0	0	0
92616-00	Fees w/laryngeal sense test	R26C	Covered	430.38	177.48	0 XXX	0	0	0	0	0
92617-00	Fees w/laryngeal sense i&r	R26C	Covered	72.18	72.18	0 XXX	0	0	0	0	0
92618-00	Ex for nonspeech dev rx add	RCMS	Covered	56.51	55.87	9 ZZZ	9	9	9	9	9
92620-00	Auditory function 60 min	R26C	Covered	161.91	142.50	9 XXX	0	2	0	0	0
92621-00	Auditory function + 15 min	R26C	Covered	40.08	33.61	9 ZZZ	0	0	0	0	0
92625-00	Tinnitus assessment	R26C	Covered	123.12	109.54	9 XXX	0	2	0	0	0
92626-00	Eval aud funcj 1st hour	R26C	Covered	159.02	134.44	0 XXX	0	2	0	0	0
92627-00	Eval aud funcj ea addl 15	R26C	Covered	37.57	31.75	0 ZZZ	0	0	0	0	0
99374-00	Home health care supervision	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
99377-00	Hospice care supervision	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
92640-00	Aud brainstem implt program	R26C	Covered	200.30	169.25	9 XXX	0	2	0	0	0
92650-00	Aep scr auditory potential	RCMS	Covered	50.22	50.22	0 XXX	0	2	0	0	0
92651-00	Aep hearing status deter i&r	R26C	Covered	153.51	153.51	0 XXX	0	2	0	0	0
92652-00	Aep thrshld est mlt freq i&r	R26C	Covered	206.68	206.68	0 XXX	0	2	0	0	0
92653-00	Aep neurodiagnostic i&r	R26C	Covered	153.36	153.36	0 XXX	0	2	0	0	0
86978-00	Rbc pretreatment serum	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
92920-00	Prq cardiac angioplast 1 art	R26C	Covered	827.16	827.16	0 000	2	0	0	0	0
92921-00	Prq cardiac angio addl art	BSVC	Covered	Bundled	Bundled	9 ZZZ	9	9	9	9	9
92924-00	Prq card angio/athrect 1 art	R26C	Covered	986.15	986.15	0 000	2	0	0	0	0
92925-00	Prq card angio/athrect addl	BSVC	Covered	Bundled	Bundled	9 ZZZ	9	9	9	9	9
92928-00	Prq card stent w/angio 1 vsl	R26C	Covered	920.38	920.38	0 000	2	0	0	0	0
92929-00	Prq card stent w/angio addl	BSVC	Covered	Bundled	Bundled	9 ZZZ	9	9	9	9	9
92933-00	Prq card stent/ath/angio	R26C	Covered	1031.78	1031.78	0 000	2	0	0	0	0
92934-00	Prq card stent/ath/angio	BSVC	Covered	Bundled	Bundled	9 ZZZ	9	9	9	9	9
92937-00	Prq revasc byp graft 1 vsl	R26C	Covered	919.82	919.82	0 000	2	0	0	0	0
92938-00	Prq revasc byp graft addl	BSVC	Covered	Bundled	Bundled	9 ZZZ	9	9	9	9	9
92941-00	Prq card revasc mi 1 vsl	R26C	Covered	1033.60	1033.60	0 000	2	0	0	0	0
92943-00	Prq card revasc chronic 1vsl	R26C	Covered	1033.00	1033.00	0 000	2	0	0	0	0
92944-00	Prq card revasc chronic addl	BSVC	Covered	Bundled	Bundled	9 ZZZ	9	9	9	9	9
92950-00	Heart/lung resuscitation cpr	R26C	Covered	588.45	310.33	0 000	0	0	0	0	0
92953-00	Temporary external pacing	R26C	Covered	1.30	1.30	0 000	0	0	0	0	0
92960-00	Cardioversion electric ext	R26C	Covered	280.09	188.89	0 000	0	0	0	0	0
92961-00	Cardioversion electric int	R26C	Covered	388.61	388.61	0 000	9	9	9	9	9
92970-00	Cardioassist internal	R26C	Covered	294.72	294.72	0 000	0	0	0	0	0
92971-00	Cardioassist external	R26C	Covered	158.62	158.62	0 000	0	0	0	0	0
92973-00	Prq coronary mech thrombect	R26C	Covered	275.93	275.93	0 ZZZ	0	0	0	0	0
92974-00	Cath place cardio brachytx	R26C	Covered	252.81	252.81	0 ZZZ	0	0	0	0	0
92975-00	Dissolve clot heart vessel	R26C	Covered	586.37	586.37	0 000	2	0	0	0	0
92977-00	Dissolve clot heart vessel	R26C	Covered	98.97	98.97	5 XXX	0	0	0	0	0
92978-00	Endoluminl ivus oct c 1st	RMCD	Covered	99.76	99.76	1 ZZZ	0	0	0	0	0
92978-26	Endoluminl ivus oct c 1st	RMCD	Covered	151.11	151.11	1 ZZZ	0	0	0	0	0
92978-TC	Endoluminl ivus oct c 1st	RMCD	Covered	48.86	48.86	1 ZZZ	0	0	0	0	0
92979-00	Endoluminl ivus oct c ea	RMCD	Covered	77.55	77.55	1 ZZZ	0	0	0	0	0
92979-26	Endoluminl ivus oct c ea	RMCD	Covered	120.44	120.44	1 ZZZ	0	0	0	0	0
92979-TC	Endoluminl ivus oct c ea	RMCD	Covered	36.96	36.96	1 ZZZ	0	0	0	0	0
92986-00	Revision of aortic valve	R26C	Covered	2123.64	2123.64	0 090	2	0	0	0	0
92987-00	Revision of mitral valve	R26C	Covered	2189.17	2189.17	0 090	2	0	0	0	0
92990-00	Revision of pulmonary valve	R26C	Covered	1756.43	1756.43	0 090	2	0	0	0	0
92997-00	Pul art balloon repr percut	R26C	Covered	1012.07	1012.07	0 000	2	0	0	0	0
92998-00	Pul art balloon repr percut	R26C	Covered	500.20	500.20	0 ZZZ	0	0	0	0	0
93000-00	Electrocardiogram complete	R26C	Covered	25.95	25.95	4 XXX	6	0	0	0	0

93005-00	Electrocardiogram tracing	R26C	Covered	11.69	11.69	3 XXX	6	0	0	0	0
93010-00	Electrocardiogram report	R26C	Covered	14.26	14.26	2 XXX	0	0	0	0	0
93015-00	Cardiovascular stress test	R26C	Covered	134.39	134.39	4 XXX	6	0	0	0	0
93016-00	Cardiovascular stress test	R26C	Covered	37.75	37.75	2 XXX	0	0	0	0	0
93017-00	Cardiovascular stress test	R26C	Covered	71.89	71.89	3 XXX	6	0	0	0	0
93018-00	Cardiovascular stress test	R26C	Covered	24.75	24.75	2 XXX	0	0	0	0	0
93024-00	Cardiac drug stress test	R26C	Covered	207.92	207.92	1 XXX	6	0	0	0	0
93024-26	Cardiac drug stress test	R26C	Covered	97.17	97.17	1 XXX	6	0	0	0	0
93024-TC	Cardiac drug stress test	R26C	Covered	110.74	110.74	1 XXX	6	0	0	0	0
93025-00	Microvolt t-wave assess	R26C	Covered	237.23	237.23	1 XXX	6	0	0	0	0
93025-26	Microvolt t-wave assess	R26C	Covered	66.38	66.38	1 XXX	6	0	0	0	0
93025-TC	Microvolt t-wave assess	R26C	Covered	170.85	170.85	1 XXX	6	0	0	0	0
93040-00	Rhythm ecg with report	R26C	Covered	23.44	23.44	4 XXX	6	0	0	0	0
93041-00	Rhythm ecg tracing	R26C	Covered	11.69	11.69	3 XXX	6	0	0	0	0
93042-00	Rhythm ecg report	R26C	Covered	11.75	11.75	2 XXX	0	0	0	0	0
93050-00	Art pressure waveform analys	R26C	Covered	29.18	29.18	1 XXX	6	2	0	0	0
93050-26	Art pressure waveform analys	R26C	Covered	14.26	14.26	1 XXX	6	2	0	0	0
93050-TC	Art pressure waveform analys	R26C	Covered	14.92	14.92	1 XXX	6	2	0	0	0
93224-00	Ecg monit/reprt up to 48 hrs	R26C	Covered	136.39	136.39	4 XXX	6	0	0	0	0
93225-00	Ecg monit/reprt up to 48 hrs	R26C	Covered	34.97	34.97	3 XXX	6	0	0	0	0
93226-00	Ecg monit/reprt up to 48 hrs	R26C	Covered	68.61	68.61	3 XXX	6	0	0	0	0
93227-00	Ecg monit/reprt up to 48 hrs	R26C	Covered	32.81	32.81	2 XXX	0	0	0	0	0
93228-00	Remote 30 day ecg rev/report	R26C	Covered	44.19	44.19	2 XXX	0	0	0	0	0
93229-00	Remote 30 day ecg tech supp	R26C	Covered	1574.09	1574.09	3 XXX	6	0	0	0	0
93241-00	Ext ecg>48hr<7d rec scan a/r	R26C	Covered	496.92	496.92	4 XXX	6	0	0	0	0
93242-00	Ext ecg>48hr<7d recording	R26C	Covered	22.69	22.69	3 XXX	6	0	0	0	0
93243-00	Ext ecg>48hr<7d scan a/r	R26C	Covered	433.40	433.40	3 XXX	6	0	0	0	0
93244-00	Ext ecg>48hr<7d rev&interpj	R26C	Covered	40.83	40.83	2 XXX	0	0	0	0	0
93245-00	Ext ecg>7d<15d rec scan a/r	R26C	Covered	522.60	522.60	4 XXX	6	0	0	0	0
93246-00	Ext ecg>7d<15d recording	R26C	Covered	22.69	22.69	3 XXX	6	0	0	0	0
93247-00	Ext ecg>7d<15d scan a/r	R26C	Covered	454.75	454.75	3 XXX	6	0	0	0	0
93248-00	Ext ecg>7d<15d rev&interpj	R26C	Covered	45.17	45.17	2 XXX	0	0	0	0	0
93260-00	Prgrmg dev eval impltbl sys	R26C	Covered	140.46	140.46	1 XXX	6	0	0	0	0
93260-26	Prgrmg dev eval impltbl sys	R26C	Covered	73.15	73.15	1 XXX	6	0	0	0	0
93260-TC	Prgrmg dev eval impltbl sys	R26C	Covered	67.31	67.31	1 XXX	6	0	0	0	0
93261-00	Interrogate subq defib	R26C	Covered	129.85	129.85	1 XXX	6	0	0	0	0
93261-26	Interrogate subq defib	R26C	Covered	63.18	63.18	1 XXX	6	0	0	0	0
93261-TC	Interrogate subq defib	R26C	Covered	66.67	66.67	1 XXX	6	0	0	0	0
99379-00	Nursing fac care supervision	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
93268-00	Ecg record/review	R26C	Covered	335.14	335.14	4 XXX	6	0	0	0	0
93270-00	Remote 30 day ecg rev/report	R26C	Covered	15.57	15.57	3 XXX	6	0	0	0	0
93271-00	Ecg/monitoring and analysis	R26C	Covered	276.88	276.88	3 XXX	6	0	0	0	0
93272-00	Ecg/review interpret only	R26C	Covered	42.70	42.70	2 XXX	0	0	0	0	0
93278-00	Ecg/signal-averaged	R26C	Covered	59.27	59.27	1 XXX	6	0	0	0	0
93278-26	Ecg/signal-averaged	R26C	Covered	22.36	22.36	1 XXX	6	0	0	0	0
93278-TC	Ecg/signal-averaged	R26C	Covered	36.91	36.91	1 XXX	6	0	0	0	0
93279-00	Prgrmg dev eval pm/ldls pm	R26C	Covered	125.67	125.67	1 XXX	6	0	0	0	0
93279-26	Prgrmg dev eval pm/ldls pm	R26C	Covered	55.12	55.12	1 XXX	6	0	0	0	0
93279-TC	Prgrmg dev eval pm/ldls pm	R26C	Covered	70.55	70.55	1 XXX	6	0	0	0	0
93280-00	Pm device progr eval dual	R26C	Covered	147.20	147.20	1 XXX	6	0	0	0	0
93280-26	Pm device progr eval dual	R26C	Covered	65.65	65.65	1 XXX	6	0	0	0	0
93280-TC	Pm device progr eval dual	R26C	Covered	81.54	81.54	1 XXX	6	0	0	0	0
93281-00	Pm device progr eval multi	R26C	Covered	155.99	155.99	1 XXX	6	0	0	0	0
93281-26	Pm device progr eval multi	R26C	Covered	73.15	73.15	1 XXX	6	0	0	0	0

93281-TC	Pm device progr eval multi	R26C	Covered	82.84	82.84	1 XXX	6	0	0	0	0
93282-00	Prgrmg eval implantable dfb	R26C	Covered	147.58	147.58	1 XXX	6	0	0	0	0
93282-26	Prgrmg eval implantable dfb	R26C	Covered	72.50	72.50	1 XXX	6	0	0	0	0
93282-TC	Prgrmg eval implantable dfb	R26C	Covered	75.08	75.08	1 XXX	6	0	0	0	0
93283-00	Prgrmg eval implantable dfb	R26C	Covered	180.74	180.74	1 XXX	6	0	0	0	0
93283-26	Prgrmg eval implantable dfb	R26C	Covered	98.54	98.54	1 XXX	6	0	0	0	0
93283-TC	Prgrmg eval implantable dfb	R26C	Covered	82.19	82.19	1 XXX	6	0	0	0	0
93284-00	Prgrmg eval implantable dfb	R26C	Covered	195.22	195.22	1 XXX	6	0	0	0	0
93284-26	Prgrmg eval implantable dfb	R26C	Covered	107.21	107.21	1 XXX	6	0	0	0	0
93284-TC	Prgrmg eval implantable dfb	R26C	Covered	88.01	88.01	1 XXX	6	0	0	0	0
93285-00	Prgrmg dev eval scrms ip	R26C	Covered	111.95	111.95	1 XXX	6	0	0	0	0
93285-26	Prgrmg dev eval scrms ip	R26C	Covered	44.64	44.64	1 XXX	6	0	0	0	0
93285-TC	Prgrmg dev eval scrms ip	R26C	Covered	67.31	67.31	1 XXX	6	0	0	0	0
93286-00	Peri-px eval pm/ldls pm ip	R26C	Covered	84.95	84.95	1 XXX	6	0	0	0	0
93286-26	Peri-px eval pm/ldls pm ip	R26C	Covered	26.04	26.04	1 XXX	6	0	0	0	0
93286-TC	Peri-px eval pm/ldls pm ip	R26C	Covered	58.91	58.91	1 XXX	6	0	0	0	0
93287-00	Peri-px device eval & prgr	R26C	Covered	97.95	97.95	1 XXX	6	0	0	0	0
93287-26	Peri-px device eval & prgr	R26C	Covered	38.39	38.39	1 XXX	6	0	0	0	0
93287-TC	Peri-px device eval & prgr	R26C	Covered	59.55	59.55	1 XXX	6	0	0	0	0
93288-00	Interrog evl pm/ldls pm ip	R26C	Covered	105.79	105.79	1 XXX	6	0	0	0	0
93288-26	Interrog evl pm/ldls pm ip	R26C	Covered	36.53	36.53	1 XXX	6	0	0	0	0
93288-TC	Interrog evl pm/ldls pm ip	R26C	Covered	69.25	69.25	1 XXX	6	0	0	0	0
93289-00	Interrog device eval heart	R26C	Covered	133.74	133.74	1 XXX	6	0	0	0	0
93289-26	Interrog device eval heart	R26C	Covered	63.84	63.84	1 XXX	6	0	0	0	0
93289-TC	Interrog device eval heart	R26C	Covered	69.90	69.90	1 XXX	6	0	0	0	0
93290-00	Interrog dev eval icpms ip	R26C	Covered	99.37	99.37	1 XXX	6	0	0	0	0
93290-26	Interrog dev eval icpms ip	R26C	Covered	36.58	36.58	1 XXX	6	0	0	0	0
93290-TC	Interrog dev eval icpms ip	R26C	Covered	62.79	62.79	1 XXX	6	0	0	0	0
93291-00	Interrog dev eval scrms ip	R26C	Covered	91.79	91.79	1 XXX	6	0	0	0	0
93291-26	Interrog dev eval scrms ip	R26C	Covered	31.59	31.59	1 XXX	6	0	0	0	0
93291-TC	Interrog dev eval scrms ip	R26C	Covered	60.20	60.20	1 XXX	6	0	0	0	0
93292-00	Wcd device interrogate	R26C	Covered	95.48	95.48	1 XXX	6	0	0	0	0
93292-26	Wcd device interrogate	R26C	Covered	36.58	36.58	1 XXX	6	0	0	0	0
93292-TC	Wcd device interrogate	R26C	Covered	58.91	58.91	1 XXX	6	0	0	0	0
93293-00	Pm phone r-strip device eval	R26C	Covered	82.97	82.97	1 XXX	0	0	0	0	0
93293-26	Pm phone r-strip device eval	R26C	Covered	25.36	25.36	1 XXX	0	0	0	0	0
93293-TC	Pm phone r-strip device eval	R26C	Covered	57.61	57.61	1 XXX	0	0	0	0	0
93294-00	Rem interrog evl pm/ldls pm	R26C	Covered	51.53	51.53	2 XXX	0	0	0	0	0
93295-00	Dev interrog remote 1/2/mlt	R26C	Covered	63.97	63.97	2 XXX	0	0	0	0	0
93296-00	Rem interrog evl pm/ids	R26C	Covered	40.80	40.80	3 XXX	0	0	0	0	0
93297-00	Rem interrog dev eval icpms	R26C	Covered	113.24	113.24	1 XXX	0	0	0	0	0
93297-26	Rem interrog dev eval icpms	R26C	Covered	43.99	43.99	1 XXX	0	0	0	0	0
93297-TC	Rem interrog dev eval icpms	R26C	Covered	69.25	69.25	1 XXX	0	0	0	0	0
93298-00	Rem interrog dev eval scrms	R26C	Covered	192.85	192.85	1 XXX	0	0	0	0	0
93298-26	Rem interrog dev eval scrms	R26C	Covered	43.99	43.99	1 XXX	0	0	0	0	0
93298-TC	Rem interrog dev eval scrms	R26C	Covered	148.86	148.86	1 XXX	0	0	0	0	0
93303-00	Echo transthoracic	R26C	Covered	416.33	416.33	1 XXX	6	0	0	0	0
93303-26	Echo transthoracic	R26C	Covered	108.96	108.96	1 XXX	6	0	0	0	0
93303-TC	Echo transthoracic	R26C	Covered	307.37	307.37	1 XXX	6	0	0	0	0
93304-00	Echo transthoracic	R26C	Covered	295.49	295.49	1 XXX	6	0	0	0	0
93304-26	Echo transthoracic	R26C	Covered	63.19	63.19	1 XXX	6	0	0	0	0
93304-TC	Echo transthoracic	R26C	Covered	232.30	232.30	1 XXX	6	0	0	0	0
93306-00	Tte w/doppler complete	R26C	Covered	370.47	370.47	1 XXX	6	0	0	0	0
93306-26	Tte w/doppler complete	R26C	Covered	121.96	121.96	1 XXX	6	0	0	0	0

93306-TC	Tte w/doppler complete	R26C	Covered	248.51	248.51	1 XXX	6	0	0	0	0
93307-00	Tte w/o doppler complete	R26C	Covered	257.95	257.95	1 XXX	6	0	0	0	0
93307-26	Tte w/o doppler complete	R26C	Covered	76.76	76.76	1 XXX	6	0	0	0	0
93307-TC	Tte w/o doppler complete	R26C	Covered	181.20	181.20	1 XXX	6	0	0	0	0
93308-00	Tte f-up or lmtd	R26C	Covered	186.99	186.99	1 XXX	6	0	0	0	0
93308-26	Tte f-up or lmtd	R26C	Covered	43.95	43.95	1 XXX	6	0	0	0	0
93308-TC	Tte f-up or lmtd	R26C	Covered	143.04	143.04	1 XXX	6	0	0	0	0
93312-00	Echo transesophageal	R26C	Covered	441.07	441.07	1 XXX	6	0	0	0	0
93312-26	Echo transesophageal	R26C	Covered	187.39	187.39	1 XXX	6	0	0	0	0
93312-TC	Echo transesophageal	R26C	Covered	253.69	253.69	1 XXX	6	0	0	0	0
93313-00	Echo transesophageal	R26C	Covered	19.13	19.13	0 XXX	0	0	0	0	0
93314-00	Echo transesophageal	R26C	Covered	419.27	419.27	1 XXX	6	0	0	0	0
93314-26	Echo transesophageal	R26C	Covered	151.36	151.36	1 XXX	6	0	0	0	0
93314-TC	Echo transesophageal	R26C	Covered	267.92	267.92	1 XXX	6	0	0	0	0
93315-00	Echo transesophageal	RMCD	Covered	343.48	343.48	1 XXX	0	0	0	0	0
93315-26	Echo transesophageal	RMCD	Covered	222.78	222.78	1 XXX	0	0	0	0	0
93315-TC	Echo transesophageal	RMCD	Covered	273.35	273.35	1 XXX	0	0	0	0	0
93316-00	Echo transesophageal	R26C	Covered	43.82	43.82	0 XXX	0	0	0	0	0
86985-00	Split blood or products	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
86999-00	Unlisted transfusion med px	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
87999-00	Unlisted microbiology px	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
88199-00	Unlisted cytopathology px	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
88199-26	Unlisted cytopathology px	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
88199-TC	Unlisted cytopathology px	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
93319-00	3d echo img cgen car anomal	R26C	Covered	103.02	40.28	0 ZZZ	0	0	0	0	0
93320-00	Doppler echo exam heart	R26C	Covered	95.63	95.63	1 ZZZ	0	0	0	0	0
93320-26	Doppler echo exam heart	R26C	Covered	31.55	31.55	1 ZZZ	0	0	0	0	0
93320-TC	Doppler echo exam heart	R26C	Covered	64.08	64.08	1 ZZZ	0	0	0	0	0
93321-00	Doppler echo exam heart	R26C	Covered	47.33	47.33	1 ZZZ	0	0	0	0	0
93321-26	Doppler echo exam heart	R26C	Covered	12.40	12.40	1 ZZZ	0	0	0	0	0
93321-TC	Doppler echo exam heart	R26C	Covered	34.93	34.93	1 ZZZ	0	0	0	0	0
93325-00	Doppler color flow add-on	R26C	Covered	45.00	45.00	1 ZZZ	0	0	0	0	0
93325-26	Doppler color flow add-on	R26C	Covered	5.55	5.55	1 ZZZ	0	0	0	0	0
93325-TC	Doppler color flow add-on	R26C	Covered	39.45	39.45	1 ZZZ	0	0	0	0	0
93350-00	Stress tte only	R26C	Covered	349.73	349.73	1 XXX	6	0	0	0	0
93350-26	Stress tte only	R26C	Covered	121.96	121.96	1 XXX	6	0	0	0	0
93350-TC	Stress tte only	R26C	Covered	227.77	227.77	1 XXX	6	0	0	0	0
93351-00	Stress tte complete	R26C	Covered	437.35	437.35	1 XXX	6	0	9	9	9
93351-26	Stress tte complete	R26C	Covered	146.10	146.10	1 XXX	6	0	9	9	9
93351-TC	Stress tte complete	R26C	Covered	291.25	291.25	1 XXX	6	0	9	9	9
93352-00	Admin ecg contrast agent	R26C	Covered	65.33	65.33	0 ZZZ	0	0	0	0	0
93355-00	Echo transesophageal (tee)	R26C	Covered	387.63	387.63	0 XXX	0	0	0	0	0
96158-00	Hlth bhv ivntj indiv 1st 30	NCOV	Not Covered	Code not covered	Code not cov	0 XXX	0	0	0	0	0
93451-00	Right heart cath	R26C	Covered	1612.12	1612.12	1 000	2	0	0	0	0
93451-26	Right heart cath	R26C	Covered	211.01	211.01	1 000	2	0	0	0	0
93451-TC	Right heart cath	R26C	Covered	1401.11	1401.11	1 000	0	0	0	0	0
93452-00	Left hrt cath w/ventrclgrphy	R26C	Covered	1643.79	1643.79	1 000	2	0	0	0	0
93452-26	Left hrt cath w/ventrclgrphy	R26C	Covered	377.12	377.12	1 000	2	0	0	0	0
93452-TC	Left hrt cath w/ventrclgrphy	R26C	Covered	1266.67	1266.67	1 000	0	0	0	0	0
93453-00	R&l hrt cath w/ventriclgrphy	R26C	Covered	2094.05	2094.05	1 000	2	0	0	0	0
93453-26	R&l hrt cath w/ventriclgrphy	R26C	Covered	503.33	503.33	1 000	2	0	0	0	0
93453-TC	R&l hrt cath w/ventriclgrphy	R26C	Covered	1590.72	1590.72	1 000	0	0	0	0	0
93454-00	Coronary artery angio s&i	R26C	Covered	1657.26	1657.26	1 000	2	0	0	0	0
93454-26	Coronary artery angio s&i	R26C	Covered	380.89	380.89	1 000	2	0	0	0	0

93454-TC	Coronary artery angio s&i	R26C	Covered	1276.37	1276.37	1 000	0	0	0	0	0
93455-00	Coronary art/grft angio s&i	R26C	Covered	1842.62	1842.62	1 000	2	0	0	0	0
93455-26	Coronary art/grft angio s&i	R26C	Covered	443.35	443.35	1 000	2	0	0	0	0
93455-TC	Coronary art/grft angio s&i	R26C	Covered	1399.26	1399.26	1 000	0	0	0	0	0
93456-00	R hrt coronary artery angio	R26C	Covered	2058.13	2058.13	1 000	2	0	0	0	0
93456-26	R hrt coronary artery angio	R26C	Covered	495.87	495.87	1 000	2	0	0	0	0
93456-TC	R hrt coronary artery angio	R26C	Covered	1562.26	1562.26	1 000	0	0	0	0	0
93457-00	R hrt art/grft angio	R26C	Covered	2240.84	2240.84	1 000	2	0	0	0	0
93457-26	R hrt art/grft angio	R26C	Covered	557.58	557.58	1 000	2	0	0	0	0
93457-TC	R hrt art/grft angio	R26C	Covered	1683.26	1683.26	1 000	0	0	0	0	0
93458-00	L hrt artery/ventricle angio	R26C	Covered	1900.55	1900.55	1 000	2	0	0	0	0
93458-26	L hrt artery/ventricle angio	R26C	Covered	469.59	469.59	1 000	2	0	0	0	0
93458-TC	L hrt artery/ventricle angio	R26C	Covered	1430.96	1430.96	1 000	0	0	0	0	0
93459-00	L hrt art/grft angio	R26C	Covered	2039.33	2039.33	1 000	2	0	0	0	0
93459-26	L hrt art/grft angio	R26C	Covered	532.01	532.01	1 000	2	0	0	0	0
93459-TC	L hrt art/grft angio	R26C	Covered	1507.33	1507.33	1 000	0	0	0	0	0
93460-00	R&l hrt art/ventricle angio	R26C	Covered	2262.75	2262.75	1 000	2	0	0	0	0
93460-26	R&l hrt art/ventricle angio	R26C	Covered	595.67	595.67	1 000	2	0	0	0	0
93460-TC	R&l hrt art/ventricle angio	R26C	Covered	1667.09	1667.09	1 000	0	0	0	0	0
93461-00	R&l hrt art/ventricle angio	R26C	Covered	2495.37	2495.37	1 000	2	0	0	0	0
93461-26	R&l hrt art/ventricle angio	R26C	Covered	658.13	658.13	1 000	2	0	0	0	0
93461-TC	R&l hrt art/ventricle angio	R26C	Covered	1837.24	1837.24	1 000	0	0	0	0	0
93462-00	L hrt cath trnsptl puncture	R26C	Covered	326.44	326.44	0 ZZZ	0	0	0	0	0
93463-00	Drug admin & hemodynmc meas	R26C	Covered	167.59	167.59	0 ZZZ	0	0	0	0	0
93464-00	Exercise w/hemodynamic meas	R26C	Covered	408.14	408.14	1 ZZZ	0	0	0	0	0
93464-26	Exercise w/hemodynamic meas	R26C	Covered	153.90	153.90	1 ZZZ	0	0	0	0	0
93464-TC	Exercise w/hemodynamic meas	R26C	Covered	254.24	254.24	1 ZZZ	0	0	0	0	0
93503-00	Insert/place heart catheter	R26C	Covered	147.63	147.63	0 000	0	0	0	0	0
93505-00	Biopsy of heart lining	R26C	Covered	1173.24	1173.24	1 000	2	0	0	0	0
93505-26	Biopsy of heart lining	R26C	Covered	366.58	366.58	1 000	2	0	0	0	0
93505-TC	Biopsy of heart lining	R26C	Covered	806.65	806.65	1 000	0	0	0	0	0
93563-00	Njx cgen car cth slctv c ang	R26C	Covered	84.17	84.17	0 ZZZ	0	0	0	0	0
93564-00	Njx cgen car cath slctv opac	R26C	Covered	86.37	86.37	0 ZZZ	0	0	0	0	0
93565-00	Njx car cth slctv lv/la ang	R26C	Covered	41.95	41.95	0 ZZZ	0	0	0	0	0
93566-00	Njx car cth slctv rv/ra ang	R26C	Covered	41.81	41.81	0 ZZZ	0	0	0	0	0
93567-00	Njx car cth sprlv aortgrphy	R26C	Covered	58.82	58.82	0 ZZZ	0	0	0	0	0
93568-00	Njx car cth nslc p-art angrp	R26C	Covered	73.74	73.74	0 ZZZ	0	0	0	0	0
93569-00	Njx cth slct p-art angrp uni	R26C	Covered	65.15	65.15	0 ZZZ	0	0	0	0	0
93571-00	Heart flow reserve measure	RMCD	Covered	266.02	266.02	1 ZZZ	0	0	0	0	0
93571-26	Heart flow reserve measure	RMCD	Covered	115.45	115.45	1 ZZZ	0	0	0	0	0
93571-TC	Heart flow reserve measure	RMCD	Covered	226.85	226.85	1 ZZZ	0	0	0	0	0
88299-00	Unlisted cytogenetic study	NBYR	Covered	By Report	By Report	0 XXX	0	0	0	0	0
88399-00	Unlisted surgical path px	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
88399-26	Unlisted surgical path px	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
93573-00	Njx cath slct p-art angrp bi	R26C	Covered	108.54	108.54	0 ZZZ	0	0	0	0	0
93574-00	Njx cath slct pulm vn angrp	R26C	Covered	120.38	120.38	0 ZZZ	0	0	0	0	0
93575-00	Njx cath slct p angrp mapca	R26C	Covered	160.05	160.05	0 ZZZ	0	0	0	0	0
93580-00	Transcath closure of asd	R26C	Covered	1532.31	1532.31	0 000	2	0	0	0	0
93581-00	Transcath closure of vsd	R26C	Covered	2069.76	2069.76	0 000	2	0	0	0	0
93582-00	Perq transcath closure pda	R26C	Covered	1031.89	1031.89	0 000	2	0	0	0	0
93583-00	Perq transcath septal reduxn	R26C	Covered	1159.13	1159.13	0 000	2	0	0	0	0
93584-00	Vngrph chd anom/persist svc	RCMS	Covered	101.22	101.22	0 ZZZ	0	0	0	0	0
93585-00	Vngrph chd azygs/hemiazygs	RCMS	Covered	95.02	95.02	0 ZZZ	0	0	0	0	0
93586-00	Vngrph chd coronary sinus	RCMS	Covered	120.47	120.47	0 ZZZ	0	0	0	0	0

93587-00	Vngrph chd vnv n cltr at/abv	RCMS	Covered		177.60	177.60	0 ZZZ	0	0	0	0	0
93588-00	Vngrph chd vnv n cltr below	RCMS	Covered		179.47	179.47	0 ZZZ	0	0	0	0	0
93590-00	Perq transcath cls mitral	R26C	Covered		1831.72	1831.72	0 000	2	0	2	1	0
93591-00	Perq transcath cls aortic	R26C	Covered		1511.83	1511.83	0 000	2	0	0	2	1
93592-00	Perq transcath closure each	R26C	Covered		664.71	664.71	0 ZZZ	0	0	2	1	0
88399-TC	Unlisted surgical path px	NBYR	Covered	By Report			1 XXX	0	0	0	0	0
90940-00	Hemodialysis access study	NBYR	Covered	By Report			9 XXX	9	9	9	9	9
90952-00	Esrd serv 2-3 vsts p mo <2yr	NBYR	Covered	By Report			0 XXX	0	0	0	0	0
90953-00	Esrd serv 1 visit p mo <2yrs	NBYR	Covered	By Report			0 XXX	0	0	0	0	0
90999-00	Unlisted dialysis procedure	NBYR	Covered	By Report			0 XXX	0	0	0	0	0
91299-00	Unlisted dx gi procedure	NBYR	Covered	By Report			1 XXX	0	0	0	0	0
91299-26	Unlisted dx gi procedure	NBYR	Covered	By Report			1 XXX	0	0	0	0	0
91299-TC	Unlisted dx gi procedure	NBYR	Covered	By Report			1 XXX	0	0	0	0	0
92499-00	Unlisted oph svc/procedure	NBYR	Covered	By Report			1 XXX	0	0	0	0	0
92499-26	Unlisted oph svc/procedure	NBYR	Covered	By Report			1 XXX	0	0	0	0	0
92499-TC	Unlisted oph svc/procedure	NBYR	Covered	By Report			1 XXX	0	0	0	0	0
92700-00	Unlisted orl service/px	NBYR	Covered	By Report			0 XXX	0	0	0	0	0
93317-00	Echo transesophageal	NBYR	Covered	By Report			1 XXX	0	0	0	0	0
93317-TC	Echo transesophageal	NBYR	Covered	By Report			1 XXX	0	0	0	0	0
93318-00	Echo transesophageal intraop	NBYR	Covered	By Report			1 XXX	6	0	0	0	0
93318-TC	Echo transesophageal intraop	NBYR	Covered	By Report			1 XXX	6	0	0	0	0
93572-00	Heart flow reserve measure	NBYR	Covered	By Report			1 ZZZ	0	0	0	0	0
93572-TC	Heart flow reserve measure	NBYR	Covered	By Report			1 ZZZ	0	0	0	0	0
93600-00	Bundle of his recording	RMCD	Covered		118.94	118.94	1 000	0	0	0	0	0
93600-26	Bundle of his recording	RMCD	Covered		186.36	186.36	1 000	0	0	0	0	0
93600-TC	Bundle of his recording	RMCD	Covered		55.21	55.21	1 000	0	0	0	0	0
93602-00	Intra-atrial recording	RMCD	Covered		114.05	114.05	1 000	0	0	0	0	0
93602-26	Intra-atrial recording	RMCD	Covered		183.68	183.68	1 000	0	0	0	0	0
93602-TC	Intra-atrial recording	RMCD	Covered		52.95	52.95	1 000	0	0	0	0	0
93603-00	Right ventricular recording	RMCD	Covered		115.43	115.43	1 000	0	0	0	0	0
93603-26	Right ventricular recording	RMCD	Covered		183.68	183.68	1 000	0	0	0	0	0
93603-TC	Right ventricular recording	RMCD	Covered		52.65	52.65	1 000	0	0	0	0	0
93609-00	Map tachycardia add-on	RMCD	Covered		273.33	273.33	1 ZZZ	0	0	0	0	0
93609-26	Map tachycardia add-on	RMCD	Covered		437.08	437.08	1 ZZZ	0	0	0	0	0
93609-TC	Map tachycardia add-on	RMCD	Covered		125.44	125.44	1 ZZZ	0	0	0	0	0
93610-00	Intra-atrial pacing	RMCD	Covered		161.26	161.26	1 000	0	0	0	0	0
93610-26	Intra-atrial pacing	RMCD	Covered		259.19	259.19	1 000	0	0	0	0	0
93610-TC	Intra-atrial pacing	RMCD	Covered		74.70	74.70	1 000	0	0	0	0	0
93612-00	Intraventricular pacing	RMCD	Covered		159.08	159.08	1 000	0	0	0	0	0
93612-26	Intraventricular pacing	RMCD	Covered		256.46	256.46	1 000	0	0	0	0	0
93612-TC	Intraventricular pacing	RMCD	Covered		75.26	75.26	1 000	0	0	0	0	0
93613-00	Electrophys map 3d add-on	R26C	Covered		458.11	458.11	0 ZZZ	0	0	0	0	0
93615-00	Esophageal recording	RMCD	Covered		37.46	37.46	1 000	0	0	0	0	0
93615-26	Esophageal recording	RMCD	Covered		63.83	63.83	1 000	0	0	0	0	0
93615-TC	Esophageal recording	RMCD	Covered		17.28	17.28	1 000	0	0	0	0	0
93593-00	R hrt cath chd nml nt cnj	NBYR	Covered	By Report			1 000	2	0	0	0	0
93593-TC	R hrt cath chd nml nt cnj	NBYR	Covered	By Report			1 000	0	0	0	0	0
93594-00	R hrt cath chd abnl nt cnj	NBYR	Covered	By Report			1 000	2	0	0	0	0
93618-00	Heart rhythm pacing	RMCD	Covered		220.34	220.34	1 000	0	0	0	0	0
93618-26	Heart rhythm pacing	RMCD	Covered		345.57	345.57	1 000	0	0	0	0	0
93618-TC	Heart rhythm pacing	RMCD	Covered		102.52	102.52	1 000	0	0	0	0	0
93619-00	Electrophysiology evaluation	RMCD	Covered		392.02	392.02	1 000	2	0	0	0	0
93619-26	Electrophysiology evaluation	RMCD	Covered		617.12	617.12	1 000	2	0	0	0	0
93619-TC	Electrophysiology evaluation	RMCD	Covered		184.36	184.36	1 000	0	0	0	0	0

93594-TC	R hrt cath chd abnl nt cnj	NBYR	Covered	By Report	By Report	1 000	0	0	0	0	0
93595-00	L hrt cath chd nm/abn nt cnj	NBYR	Covered	By Report	By Report	1 000	2	0	0	0	0
93595-TC	L hrt cath chd nm/abn nt cnj	NBYR	Covered	By Report	By Report	1 000	0	0	0	0	0
93596-00	R&I hrt cath chd nml nt cnj	NBYR	Covered	By Report	By Report	1 000	2	0	0	0	0
93596-TC	R&I hrt cath chd nml nt cnj	NBYR	Covered	By Report	By Report	1 000	0	0	0	0	0
93597-00	R&I hrt cath chd abnl nt cnj	NBYR	Covered	By Report	By Report	1 000	2	0	0	0	0
93597-TC	R&I hrt cath chd abnl nt cnj	NBYR	Covered	By Report	By Report	1 000	0	0	0	0	0
93598-00	Car outp meas drg cath chd	NBYR	Covered	By Report	By Report	1 ZZZ	0	0	0	0	0
93598-TC	Car outp meas drg cath chd	NBYR	Covered	By Report	By Report	1 ZZZ	0	0	0	0	0
93616-00	Esophageal recording	NBYR	Covered	By Report	By Report	1 000	0	0	0	0	0
93616-TC	Esophageal recording	NBYR	Covered	By Report	By Report	1 000	0	0	0	0	0
93620-00	Electrophysiology evaluation	NBYR	Covered	By Report	By Report	1 000	2	0	0	0	0
93620-TC	Electrophysiology evaluation	NBYR	Covered	By Report	By Report	1 000	0	0	0	0	0
93621-00	Electrophysiology evaluation	NBYR	Covered	By Report	By Report	1 ZZZ	0	0	0	0	0
93621-TC	Electrophysiology evaluation	NBYR	Covered	By Report	By Report	1 ZZZ	0	0	0	0	0
93622-00	Electrophysiology evaluation	NBYR	Covered	By Report	By Report	1 ZZZ	0	0	0	0	0
93622-TC	Electrophysiology evaluation	NBYR	Covered	By Report	By Report	1 ZZZ	0	0	0	0	0
93623-00	Stimulation pacing heart	NBYR	Covered	By Report	By Report	1 ZZZ	0	0	0	0	0
93640-00	Evaluation heart device	RMCD	Covered	186.03	186.03	1 000	2	0	0	0	0
93640-26	Evaluation heart device	RMCD	Covered	282.51	282.51	1 000	2	0	0	0	0
93640-TC	Evaluation heart device	RMCD	Covered	91.66	91.66	1 000	0	0	0	0	0
93641-00	Electrophysiology evaluation	RMCD	Covered	315.40	315.40	1 000	2	0	0	0	0
93641-26	Electrophysiology evaluation	RMCD	Covered	492.10	492.10	1 000	2	0	0	0	0
93641-TC	Electrophysiology evaluation	RMCD	Covered	148.23	148.23	1 000	0	0	0	0	0
93642-00	Electrophysiology evaluation	R26C	Covered	558.69	558.69	1 000	2	0	0	0	0
93642-26	Electrophysiology evaluation	R26C	Covered	402.03	402.03	1 000	2	0	0	0	0
93642-TC	Electrophysiology evaluation	R26C	Covered	156.67	156.67	1 000	0	0	0	0	0
93644-00	Electrophysiology evaluation	R26C	Covered	350.18	350.18	1 000	2	0	0	0	0
93644-26	Electrophysiology evaluation	R26C	Covered	252.46	252.46	1 000	2	0	0	0	0
93644-TC	Electrophysiology evaluation	R26C	Covered	97.71	97.71	1 000	0	0	0	0	0
93650-00	Ablate heart dysrhythm focus	R26C	Covered	920.49	920.49	0 000	2	0	0	0	0
93653-00	Compre ep eval tx svt	R26C	Covered	1315.89	1315.89	0 000	2	0	0	0	0
93654-00	Compre ep eval tx vt	R26C	Covered	1585.22	1585.22	0 000	2	0	0	0	0
93655-00	Icar cath abltj dscrt arrhyt	R26C	Covered	482.47	482.47	0 ZZZ	0	0	0	0	0
93656-00	Compre ep eval abltj atr fib	R26C	Covered	1492.61	1492.61	0 000	2	0	0	0	0
93657-00	Tx l/r atrial fib addl	R26C	Covered	483.12	483.12	0 ZZZ	0	0	0	0	0
93660-00	Tilt table evaluation	R26C	Covered	301.58	301.58	1 000	2	0	0	0	0
93660-26	Tilt table evaluation	R26C	Covered	161.73	161.73	1 000	2	0	0	0	0
93660-TC	Tilt table evaluation	R26C	Covered	139.85	139.85	1 000	0	0	0	0	0
93623-TC	Stimulation pacing heart	NBYR	Covered	By Report	By Report	1 ZZZ	0	0	0	0	0
93624-00	Electrophysiologic study	NBYR	Covered	By Report	By Report	1 000	2	0	0	0	0
93624-TC	Electrophysiologic study	NBYR	Covered	By Report	By Report	1 000	0	0	0	0	0
93668-00	Peripheral vascular rehab	R26C	Covered	27.86	27.86	3 XXX	0	0	0	0	0
93701-00	Bioimpedance cv analysis	R26C	Covered	51.79	51.79	3 XXX	6	0	0	0	0
93702-00	Bis xtracell fluid analysis	R26C	Covered	236.18	236.18	3 XXX	6	0	0	0	0
93724-00	Analyze pacemaker system	R26C	Covered	506.92	506.92	1 000	6	0	0	0	0
93724-26	Analyze pacemaker system	R26C	Covered	417.62	417.62	1 000	6	0	0	0	0
93724-TC	Analyze pacemaker system	R26C	Covered	89.31	89.31	1 000	6	0	0	0	0
93740-00	Temperature gradient studies	RCMS	Covered	13.65	13.65	9 XXX	9	9	9	9	9
93745-00	Set-up cardiovert-defibrill	RMCD	Covered	57.39	57.39	1 XXX	0	0	0	0	0
93745-26	Set-up cardiovert-defibrill	RMCD	Covered	38.10	38.10	1 XXX	0	0	0	0	0
93745-TC	Set-up cardiovert-defibrill	RMCD	Covered	19.29	19.29	1 XXX	0	0	0	0	0
93750-00	Interrogation vad in person	R26C	Covered	88.19	66.20	0 XXX	0	0	0	0	0
93770-00	Measure venous pressure	RCMS	Covered	13.65	13.65	9 XXX	9	9	9	9	9

93784-00	Ambl bp mntr w/software	R26C	Covered	85.98	85.98	4 XXX	6	0	0	0	0
93786-00	Ambl bp mntr w/sw rec only	R26C	Covered	43.38	43.38	3 XXX	6	0	0	0	0
93788-00	Ambl bp mntr w/sw a/r	R26C	Covered	10.40	10.40	3 XXX	6	0	0	0	0
93790-00	Ambl bp mntr w/sw i&r	R26C	Covered	32.20	32.20	2 XXX	0	0	0	0	0
36660-00	Insertion catheter artery	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	0	0	0	0
99409-00	Audit/dast over 30 min	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
93797-00	Cardiac rehab	R26C	Covered	31.69	15.52	0 000	0	0	0	0	0
93798-00	Cardiac rehab/monitor	R26C	Covered	47.51	23.58	0 000	0	0	0	0	0
93631-00	Heart pacing mapping	NBYR	Covered	By Report	By Report	1 000	0	0	0	0	0
93631-TC	Heart pacing mapping	NBYR	Covered	By Report	By Report	1 000	0	0	0	0	0
93662-00	Intracardiac ecg (ice)	NBYR	Covered	By Report	By Report	1 ZZZ	0	0	0	0	0
93880-00	Extracranial bilat study	R26C	Covered	359.56	359.56	1 XXX	6	2	0	0	0
93880-26	Extracranial bilat study	R26C	Covered	65.12	65.12	1 XXX	6	2	0	0	0
93880-TC	Extracranial bilat study	R26C	Covered	294.44	294.44	1 XXX	6	2	0	0	0
93882-00	Extracranial uni/ltd study	R26C	Covered	235.16	235.16	1 XXX	6	0	0	0	0
93882-26	Extracranial uni/ltd study	R26C	Covered	39.73	39.73	1 XXX	6	0	0	0	0
93882-TC	Extracranial uni/ltd study	R26C	Covered	195.43	195.43	1 XXX	6	0	0	0	0
93886-00	Intracranial complete study	R26C	Covered	523.97	523.97	1 XXX	6	0	0	0	0
93886-26	Intracranial complete study	R26C	Covered	81.42	81.42	1 XXX	6	0	0	0	0
93886-TC	Intracranial complete study	R26C	Covered	442.55	442.55	1 XXX	6	0	0	0	0
93888-00	Intracranial limited study	R26C	Covered	304.87	304.87	1 XXX	6	0	0	0	0
93888-26	Intracranial limited study	R26C	Covered	43.47	43.47	1 XXX	6	0	0	0	0
93888-TC	Intracranial limited study	R26C	Covered	261.40	261.40	1 XXX	6	0	0	0	0
93890-00	Tcd vasoreactivity study	R26C	Covered	542.38	542.38	1 XXX	6	0	0	0	0
93890-26	Tcd vasoreactivity study	R26C	Covered	90.12	90.12	1 XXX	6	0	0	0	0
93890-TC	Tcd vasoreactivity study	R26C	Covered	452.25	452.25	1 XXX	6	0	0	0	0
93892-00	Tcd emboli detect w/o inj	R26C	Covered	624.68	624.68	1 XXX	6	0	0	0	0
93892-26	Tcd emboli detect w/o inj	R26C	Covered	104.46	104.46	1 XXX	6	0	0	0	0
93892-TC	Tcd emboli detect w/o inj	R26C	Covered	520.22	520.22	1 XXX	6	0	0	0	0
93893-00	Tcd emboli detect w/inj	R26C	Covered	770.30	770.30	1 XXX	6	0	0	0	0
93893-26	Tcd emboli detect w/inj	R26C	Covered	104.55	104.55	1 XXX	6	0	0	0	0
93893-TC	Tcd emboli detect w/inj	R26C	Covered	665.75	665.75	1 XXX	6	0	0	0	0
0011U-00	Prescription drug monitoring in oral fluid	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
	Definitive drug testing for 120 or more drugs and										
0328U-00	metabolites in urine specimen	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
99151-00	Mod sed same phys/qhp <5 yrs	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
93922-00	Upr/l xtremity art 2 levels	R26C	Covered	155.79	155.79	1 XXX	6	2	0	0	0
93922-26	Upr/l xtremity art 2 levels	R26C	Covered	19.86	19.86	1 XXX	6	2	0	0	0
93922-TC	Upr/l xtremity art 2 levels	R26C	Covered	135.92	135.92	1 XXX	6	2	0	0	0
93923-00	Upr/lxtr art stdy 3+ lvls	R26C	Covered	245.75	245.75	1 XXX	6	2	0	0	0
93923-26	Upr/lxtr art stdy 3+ lvls	R26C	Covered	36.04	36.04	1 XXX	6	2	0	0	0
93923-TC	Upr/lxtr art stdy 3+ lvls	R26C	Covered	209.70	209.70	1 XXX	6	2	0	0	0
93924-00	Lwr xtr vasc stdy bilat	R26C	Covered	303.12	303.12	1 XXX	6	2	0	0	0
93924-26	Lwr xtr vasc stdy bilat	R26C	Covered	39.73	39.73	1 XXX	6	2	0	0	0
93924-TC	Lwr xtr vasc stdy bilat	R26C	Covered	263.39	263.39	1 XXX	6	2	0	0	0
93925-00	Lower extremity study	R26C	Covered	456.63	456.63	1 XXX	6	2	0	0	0
93925-26	Lower extremity study	R26C	Covered	64.48	64.48	1 XXX	6	2	0	0	0
93925-TC	Lower extremity study	R26C	Covered	392.15	392.15	1 XXX	6	2	0	0	0
93926-00	Lower extremity study	R26C	Covered	272.67	272.67	1 XXX	6	0	0	0	0
93926-26	Lower extremity study	R26C	Covered	39.03	39.03	1 XXX	6	0	0	0	0
93926-TC	Lower extremity study	R26C	Covered	233.64	233.64	1 XXX	6	0	0	0	0
93930-00	Upper extremity study	R26C	Covered	374.48	374.48	1 XXX	6	2	0	0	0
93930-26	Upper extremity study	R26C	Covered	64.52	64.52	1 XXX	6	2	0	0	0
93930-TC	Upper extremity study	R26C	Covered	309.96	309.96	1 XXX	6	2	0	0	0

93931-00	Upper extremity study	R26C	Covered	233.81	233.81	1 XXX	6	0	0	0	0
93931-26	Upper extremity study	R26C	Covered	39.68	39.68	1 XXX	6	0	0	0	0
93931-TC	Upper extremity study	R26C	Covered	194.13	194.13	1 XXX	6	0	0	0	0
93970-00	Extremity study	R26C	Covered	354.73	354.73	1 XXX	6	2	0	0	0
93970-26	Extremity study	R26C	Covered	56.41	56.41	1 XXX	6	2	0	0	0
93970-TC	Extremity study	R26C	Covered	298.32	298.32	1 XXX	6	2	0	0	0
93971-00	Extremity study	R26C	Covered	226.15	226.15	1 XXX	6	0	0	0	0
93971-26	Extremity study	R26C	Covered	36.55	36.55	1 XXX	6	0	0	0	0
93971-TC	Extremity study	R26C	Covered	189.61	189.61	1 XXX	6	0	0	0	0
93975-00	Vascular study	R26C	Covered	500.59	500.59	1 XXX	6	0	0	0	0
93975-26	Vascular study	R26C	Covered	94.86	94.86	1 XXX	6	0	0	0	0
93975-TC	Vascular study	R26C	Covered	405.73	405.73	1 XXX	6	0	0	0	0
93976-00	Vascular study	R26C	Covered	300.56	300.56	1 XXX	6	0	0	0	0
93976-26	Vascular study	R26C	Covered	66.32	66.32	1 XXX	6	0	0	0	0
93976-TC	Vascular study	R26C	Covered	234.24	234.24	1 XXX	6	0	0	0	0
93978-00	Vascular study	R26C	Covered	339.00	339.00	1 XXX	6	0	0	0	0
93978-26	Vascular study	R26C	Covered	63.32	63.32	1 XXX	6	0	0	0	0
93978-TC	Vascular study	R26C	Covered	275.68	275.68	1 XXX	6	0	0	0	0
93979-00	Vascular study	R26C	Covered	222.22	222.22	1 XXX	6	0	0	0	0
93979-26	Vascular study	R26C	Covered	39.73	39.73	1 XXX	6	0	0	0	0
93979-TC	Vascular study	R26C	Covered	182.49	182.49	1 XXX	6	0	0	0	0
93980-00	Penile vascular study	R26C	Covered	218.55	218.55	1 XXX	6	0	0	0	0
93980-26	Penile vascular study	R26C	Covered	105.96	105.96	1 XXX	6	0	0	0	0
93980-TC	Penile vascular study	R26C	Covered	112.59	112.59	1 XXX	6	0	0	0	0
93981-00	Penile vascular study	R26C	Covered	133.01	133.01	1 XXX	6	0	0	0	0
93981-26	Penile vascular study	R26C	Covered	36.59	36.59	1 XXX	6	0	0	0	0
93981-TC	Penile vascular study	R26C	Covered	96.42	96.42	1 XXX	6	0	0	0	0
93985-00	Dup-scan hemo compl bi std	R26C	Covered	467.86	467.86	1 XXX	6	2	0	0	0
93985-26	Dup-scan hemo compl bi std	R26C	Covered	61.48	61.48	1 XXX	6	2	0	0	0
93985-TC	Dup-scan hemo compl bi std	R26C	Covered	406.38	406.38	1 XXX	6	2	0	0	0
93986-00	Dup-scan hemo compl uni std	R26C	Covered	274.70	274.70	1 XXX	6	0	0	0	0
93986-26	Dup-scan hemo compl uni std	R26C	Covered	38.48	38.48	1 XXX	6	0	0	0	0
93986-TC	Dup-scan hemo compl uni std	R26C	Covered	236.22	236.22	1 XXX	6	0	0	0	0
93990-00	Doppler flow testing	R26C	Covered	276.69	276.69	1 XXX	6	0	0	0	0
93990-26	Doppler flow testing	R26C	Covered	37.88	37.88	1 XXX	6	0	0	0	0
93990-TC	Doppler flow testing	R26C	Covered	238.81	238.81	1 XXX	6	0	0	0	0
99402-00	Prev med cnsi indiv apprx 30	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
94002-00	Vent mgmt inpat init day	R26C	Covered	157.28	157.28	0 XXX	0	0	0	0	0
94003-00	Vent mgmt inpat subq day	R26C	Covered	110.95	110.95	0 XXX	0	0	0	0	0
94004-00	Vent mgmt nf per day	R26C	Covered	82.50	82.50	0 XXX	0	0	0	0	0
	Test for detection of antibodies associated with										
0164U-00	irritable bowel syndrome in	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
94010-00	Breathing capacity test	R26C	Covered	51.18	51.18	1 XXX	0	0	0	0	0
94010-26	Breathing capacity test	R26C	Covered	14.26	14.26	1 XXX	0	0	0	0	0
94010-TC	Breathing capacity test	R26C	Covered	36.91	36.91	1 XXX	0	0	0	0	0
94011-00	Spirometry up to 2 yrs old	R26C	Covered	148.33	148.33	0 XXX	0	0	0	0	0
94012-00	Spirmetry w/brnchdil inf-2 yr	R26C	Covered	242.08	242.08	0 XXX	0	0	0	0	0
94013-00	Meas lung vol thru 2 yrs	R26C	Covered	32.18	32.18	0 XXX	0	0	0	0	0
94014-00	Patient recorded spirometry	R26C	Covered	104.84	104.84	4 XXX	0	0	0	0	0
94015-00	Patient recorded spirometry	R26C	Covered	61.49	61.49	3 XXX	0	0	0	0	0
94016-00	Review patient spirometry	R26C	Covered	43.34	43.34	2 XXX	0	0	0	0	0
94060-00	Evaluation of wheezing	R26C	Covered	73.62	73.62	1 XXX	0	0	0	0	0
94060-26	Evaluation of wheezing	R26C	Covered	17.95	17.95	1 XXX	0	0	0	0	0
94060-TC	Evaluation of wheezing	R26C	Covered	55.67	55.67	1 XXX	0	0	0	0	0

94070-00	Evaluation of wheezing	R26C	Covered	117.51	117.51	1 XXX	0	0	0	0	0
94070-26	Evaluation of wheezing	R26C	Covered	48.85	48.85	1 XXX	0	0	0	0	0
94070-TC	Evaluation of wheezing	R26C	Covered	68.66	68.66	1 XXX	0	0	0	0	0
94150-00	Vital capacity test	RCMS	Covered	47.68	47.68	1 XXX	9	9	9	9	9
94150-26	Vital capacity test	RCMS	Covered	6.24	6.24	1 XXX	9	9	9	9	9
94150-TC	Vital capacity test	RCMS	Covered	41.44	41.44	1 XXX	9	9	9	9	9
94200-00	Lung function test (mbc/mvv)	R26C	Covered	27.71	27.71	1 XXX	0	0	0	0	0
94200-26	Lung function test (mbc/mvv)	R26C	Covered	4.38	4.38	1 XXX	0	0	0	0	0
94200-TC	Lung function test (mbc/mvv)	R26C	Covered	23.33	23.33	1 XXX	0	0	0	0	0
94375-00	Respiratory flow volume loop	R26C	Covered	73.27	73.27	1 XXX	0	0	0	0	0
94375-26	Respiratory flow volume loop	R26C	Covered	25.36	25.36	1 XXX	0	0	0	0	0
94375-TC	Respiratory flow volume loop	R26C	Covered	47.91	47.91	1 XXX	0	0	0	0	0
94450-00	Hypoxia response curve	R26C	Covered	151.23	151.23	1 XXX	0	0	0	0	0
94450-26	Hypoxia response curve	R26C	Covered	34.71	34.71	1 XXX	0	0	0	0	0
94450-TC	Hypoxia response curve	R26C	Covered	116.52	116.52	1 XXX	0	0	0	0	0
94452-00	Hast w/report	R26C	Covered	95.26	95.26	1 XXX	0	0	0	0	0
94452-26	Hast w/report	R26C	Covered	24.71	24.71	1 XXX	0	0	0	0	0
94452-TC	Hast w/report	R26C	Covered	70.55	70.55	1 XXX	0	0	0	0	0
94453-00	Hast w/oxygen titrate	R26C	Covered	126.05	126.05	1 XXX	0	0	0	0	0
94453-26	Hast w/oxygen titrate	R26C	Covered	32.17	32.17	1 XXX	0	0	0	0	0
94453-TC	Hast w/oxygen titrate	R26C	Covered	93.88	93.88	1 XXX	0	0	0	0	0
94610-00	Surfactant admin thru tube	R26C	Covered	98.69	98.69	0 XXX	0	0	0	0	0
94617-00	Exercise tst brncspsm w/ecg	R26C	Covered	167.57	167.57	1 XXX	0	0	0	0	0
94617-26	Exercise tst brncspsm w/ecg	R26C	Covered	56.82	56.82	1 XXX	0	0	0	0	0
94617-TC	Exercise tst brncspsm w/ecg	R26C	Covered	110.74	110.74	1 XXX	0	0	0	0	0
94618-00	Pulmonary stress testing	R26C	Covered	62.30	62.30	1 XXX	0	0	0	0	0
94618-26	Pulmonary stress testing	R26C	Covered	38.97	38.97	1 XXX	0	0	0	0	0
94618-TC	Pulmonary stress testing	R26C	Covered	23.33	23.33	1 XXX	0	0	0	0	0
94619-00	Exercise tst brncspsm wo ecg	R26C	Covered	122.42	122.42	1 XXX	0	0	0	0	0
94619-26	Exercise tst brncspsm wo ecg	R26C	Covered	38.24	38.24	1 XXX	0	0	0	0	0
94619-TC	Exercise tst brncspsm wo ecg	R26C	Covered	84.18	84.18	1 XXX	0	0	0	0	0
94621-00	Cardiopulm exercise testing	R26C	Covered	287.98	287.98	1 XXX	0	0	0	0	0
94621-26	Cardiopulm exercise testing	R26C	Covered	118.38	118.38	1 XXX	0	0	0	0	0
94621-TC	Cardiopulm exercise testing	R26C	Covered	169.60	169.60	1 XXX	0	0	0	0	0
94625-00	Phy/qhp op pulm rhb w/o mntr	R26C	Covered	139.79	31.77	0 XXX	0	0	0	0	0
94626-00	Phy/qhp op pulm rhb w/mntr	R26C	Covered	150.70	47.21	0 XXX	0	0	0	0	0
94640-00	Airway inhalation treatment	R26C	Covered	14.92	14.92	5 XXX	0	0	0	0	0
94642-00	Aerosol inhalation treatment	RMCD	Covered	34.79	34.79	5 XXX	0	0	0	0	0
94644-00	Cbt 1st hour	R26C	Covered	114.58	114.58	5 XXX	0	0	0	0	0
94645-00	Cbt each addl hour	R26C	Covered	31.09	31.09	5 XXX	0	0	0	0	0
94660-00	Pos airway pressure cpap	R26C	Covered	118.92	64.59	0 XXX	0	0	0	0	0
94662-00	Neg press ventilation cnp	R26C	Covered	60.06	60.06	0 XXX	0	0	0	0	0
94664-00	Evaluate pt use of inhaler	R26C	Covered	33.73	33.73	5 XXX	0	0	0	0	0
94667-00	Chest wall manipulation	R26C	Covered	47.31	47.31	5 XXX	0	0	0	0	0
94668-00	Chest wall manipulation	R26C	Covered	74.52	74.52	5 XXX	0	0	0	0	0
94669-00	Mechanical chest wall oscill	R26C	Covered	38.90	38.90	5 XXX	0	0	0	0	0
94680-00	Exhaled air analysis o2	R26C	Covered	101.37	101.37	1 XXX	0	0	0	0	0
94680-26	Exhaled air analysis o2	R26C	Covered	21.72	21.72	1 XXX	0	0	0	0	0
94680-TC	Exhaled air analysis o2	R26C	Covered	79.65	79.65	1 XXX	0	0	0	0	0
94681-00	Exhaled air analysis o2/co2	R26C	Covered	90.56	90.56	1 XXX	0	0	0	0	0
94681-26	Exhaled air analysis o2/co2	R26C	Covered	16.73	16.73	1 XXX	0	0	0	0	0
94681-TC	Exhaled air analysis o2/co2	R26C	Covered	73.83	73.83	1 XXX	0	0	0	0	0
94690-00	Exhaled air analysis	R26C	Covered	92.96	92.96	1 XXX	0	0	0	0	0
94690-26	Exhaled air analysis	R26C	Covered	6.24	6.24	1 XXX	0	0	0	0	0

94690-TC	Exhaled air analysis	R26C	Covered	86.72	86.72	1 XXX	0	0	0	0	0
94726-00	Pulm funct tst plethysmograp	R26C	Covered	105.85	105.85	1 XXX	0	0	0	0	0
94726-26	Pulm funct tst plethysmograp	R26C	Covered	21.02	21.02	1 XXX	0	0	0	0	0
94726-TC	Pulm funct tst plethysmograp	R26C	Covered	84.83	84.83	1 XXX	0	0	0	0	0
94727-00	Pulm function test by gas	R26C	Covered	84.46	84.46	1 XXX	0	0	0	0	0
94727-26	Pulm function test by gas	R26C	Covered	21.02	21.02	1 XXX	0	0	0	0	0
94727-TC	Pulm function test by gas	R26C	Covered	63.43	63.43	1 XXX	0	0	0	0	0
94728-00	Airwy resist by oscillometry	R26C	Covered	83.81	83.81	1 XXX	0	0	0	0	0
94728-26	Airwy resist by oscillometry	R26C	Covered	21.67	21.67	1 XXX	0	0	0	0	0
94728-TC	Airwy resist by oscillometry	R26C	Covered	62.14	62.14	1 XXX	0	0	0	0	0
94729-00	Co/membane diffuse capacity	R26C	Covered	108.02	108.02	1 ZZZ	0	0	0	0	0
94729-26	Co/membane diffuse capacity	R26C	Covered	15.48	15.48	1 ZZZ	0	0	0	0	0
94729-TC	Co/membane diffuse capacity	R26C	Covered	92.54	92.54	1 ZZZ	0	0	0	0	0
94760-00	Measure blood oxygen level	R26C	Covered	4.57	4.57	3 XXX	0	0	0	0	0
94761-00	Measure blood oxygen level	R26C	Covered	7.16	7.16	3 XXX	0	0	0	0	0
94762-00	Measure blood oxygen level	R26C	Covered	48.56	48.56	3 XXX	0	0	0	0	0
99486-00	Suprv interfac trnsport addl	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
11922-00	Correct skin color ea 20.0cm	NCOV	Not Covered	Code not covered	Code not cov	0 ZZZ	0	0	0	0	0
92583-00	Select picture audiometry	NCOV	Not Covered	Code not covered	Code not cov	3 XXX	0	2	0	0	0
54240-26	Penis study	NCOV	Not Covered	Code not covered	Code not cov	1 000	0	0	0	0	0
90875-00	Psychophysiological therapy	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
99441-00	Phone e/m phys/qhp 5-10 min	NCOV	Not Covered	Code not covered	Code not cov	0 XXX	0	0	0	0	0
92572-00	Staggered spondaic word test	NCOV	Not Covered	Code not covered	Code not cov	3 XXX	0	2	0	0	0
88120-26	Cytp urne 3-5 probes ea spec	NCOV	Not Covered	Code not covered	Code not cov	1 XXX	0	0	0	0	0
94780-00	Cars/bd tst infnt-12mo 60 min	NCOV	Not Covered	Code not covered	Code not cov	0 XXX	0	0	1	0	0
93662-TC	Intracardiac ecg (ice)	NBYR	Covered	By Report	By Report	1 ZZZ	0	0	0	0	0
93799-00	Unlisted cv svc/procedure	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
93799-26	Unlisted cv svc/procedure	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
95004-00	Percut allergy skin tests	R26C	Covered	6.48	6.48	0 XXX	0	0	0	0	0
95012-00	Exhaled nitric oxide meas	R26C	Covered	36.27	36.27	5 XXX	0	0	0	0	0
95017-00	Perq & icut allg test venoms	R26C	Covered	15.94	6.24	0 XXX	0	0	0	0	0
95018-00	Perq&ic allg test drugs/biol	R26C	Covered	37.66	12.44	0 XXX	0	0	0	0	0
95024-00	Icut allergy test drug/bug	R26C	Covered	14.88	1.30	0 XXX	0	0	0	0	0
95027-00	Icut allergy titrate-airborn	R26C	Covered	9.06	9.06	0 XXX	0	0	0	0	0
95028-00	Icut allergy test-delayed	R26C	Covered	23.98	23.98	3 XXX	0	0	0	0	0
95044-00	Allergy patch tests	R26C	Covered	9.10	9.10	5 XXX	0	0	0	0	0
95052-00	Photo patch test	R26C	Covered	11.69	11.69	5 XXX	0	0	0	0	0
95056-00	Photosensitivity tests	R26C	Covered	100.35	100.35	5 XXX	0	0	0	0	0
95060-00	Eye allergy tests	R26C	Covered	75.72	75.72	3 XXX	0	0	0	0	0
95065-00	Nose allergy test	R26C	Covered	55.67	55.67	3 XXX	0	0	0	0	0
95070-00	Bronchial allergy tests	R26C	Covered	66.71	66.71	3 XXX	0	0	0	0	0
95076-00	Ingest challenge ini 120 min	R26C	Covered	229.87	131.55	0 XXX	0	0	0	0	0
95079-00	Ingest challenge addl 60 min	R26C	Covered	156.60	121.03	0 ZZZ	0	0	0	0	0
95115-00	Immunotherapy one injection	R26C	Covered	19.45	19.45	5 XXX	0	0	0	0	0
95117-00	Immunotherapy injections	R26C	Covered	23.33	23.33	5 XXX	0	0	0	0	0
77767-26	Hdr rdncl skn surf brachytx	NCOV	Not Covered	Code not covered	Code not cov	1 XXX	0	0	0	0	0
99484-00	Care mgmt svc bhvl hlth cond	NCOV	Not Covered	Code not covered	Code not cov	0 XXX	0	0	0	0	0
57465-00	Cam cervix uteri drg colp	NCOV	Not Covered	Code not covered	Code not cov	0 ZZZ	0	0	0	0	0
99448-00	Ntrprof ph1/ntrnet/ehr 21-30	NCOV	Not Covered	Code not covered	Code not cov	0 XXX	0	0	0	0	0
92562-00	Loudness balance test	NCOV	Not Covered	Code not covered	Code not cov	3 XXX	0	2	0	0	0
76391-26	Mr elastography	NCOV	Not Covered	Code not covered	Code not cov	1 XXX	4	0	0	0	0
93264-00	Rem mntr wrls p-art prs snr	NCOV	Not Covered	Code not covered	Code not cov	0 XXX	0	0	0	0	0
95144-00	Antigen therapy services	R26C	Covered	31.51	5.63	0 XXX	0	0	0	0	0
95145-00	Antigen therapy services	R26C	Covered	69.67	4.99	0 XXX	0	0	0	0	0

95146-00	Antigen therapy services	R26C	Covered	130.47	4.99	0 XXX	0	0	0	0	0
95147-00	Antigen therapy services	R26C	Covered	125.29	4.99	0 XXX	0	0	0	0	0
95148-00	Antigen therapy services	R26C	Covered	186.74	4.99	0 XXX	0	0	0	0	0
95149-00	Antigen therapy services	R26C	Covered	248.83	4.99	0 XXX	0	0	0	0	0
95165-00	Antigen therapy services	R26C	Covered	27.63	5.63	0 XXX	0	0	0	0	0
95170-00	Antigen therapy services	R26C	Covered	20.51	4.99	0 XXX	0	0	0	0	0
95180-00	Rapid desensitization	R26C	Covered	255.79	183.34	0 XXX	0	0	0	0	0
93799-TC	Unlisted cv svc/procedure	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
95249-00	Cont gluc mntr pt prov eqp	R26C	Covered	124.37	124.37	3 XXX	0	0	0	0	0
95250-00	Cont gluc mntr phys/qhp eqp	R26C	Covered	284.13	284.13	3 XXX	0	0	0	0	0
95251-00	Cont gluc mntr analysis i&r	R26C	Covered	61.49	61.49	2 XXX	0	0	0	0	0
95700-00	Eeg cont rec w/vid eeg tech	RMCD	Covered	264.83	264.83	0 XXX	0	0	0	0	0
95705-00	Eeg w/o vid 2-12 hr unmntr	RMCD	Covered	238.34	238.34	0 XXX	0	0	0	0	0
95706-00	Eeg wo vid 2-12hr intmt mntr	RMCD	Covered	387.72	387.72	0 XXX	0	0	0	0	0
95707-00	Eeg w/o vid 2-12hr cont mntr	RMCD	Covered	405.75	405.75	0 XXX	0	0	0	0	0
95708-00	Eeg wo vid ea 12-26hr unmntr	RMCD	Covered	298.07	298.07	0 XXX	0	0	0	0	0
95709-00	Eeg w/o vid ea 12-26hr intmt	RMCD	Covered	745.54	745.54	0 XXX	0	0	0	0	0
95710-00	Eeg w/o vid ea 12-26hr cont	RMCD	Covered	946.95	946.95	0 XXX	0	0	0	0	0
95711-00	Veeg 2-12 hr unmonitored	RMCD	Covered	238.34	238.34	0 XXX	0	0	0	0	0
95712-00	Veeg 2-12 hr intmt mntr	RMCD	Covered	447.46	447.46	0 XXX	0	0	0	0	0
95713-00	Veeg 2-12 hr cont mntr	RMCD	Covered	541.13	541.13	0 XXX	0	0	0	0	0
95714-00	Veeg ea 12-26 hr unmntr	RMCD	Covered	298.07	298.07	0 XXX	0	0	0	0	0
95715-00	Veeg ea 12-26hr intmt mntr	RMCD	Covered	834.49	834.49	0 XXX	0	0	0	0	0
95716-00	Veeg ea 12-26hr cont mntr	RMCD	Covered	1149.65	1149.65	0 XXX	0	0	0	0	0
95717-00	Eeg phys/qhp 2-12 hr w/o vid	R26C	Covered	188.29	185.05	0 XXX	0	0	0	0	0
95718-00	Eeg phys/qhp 2-12 hr w/veeg	R26C	Covered	238.96	234.44	0 XXX	0	0	0	0	0
95719-00	Eeg phys/qhp ea incr w/o vid	R26C	Covered	285.66	280.49	0 XXX	0	0	0	0	0
95720-00	Eeg phy/qhp ea incr w/veeg	R26C	Covered	368.07	360.95	0 XXX	0	0	0	0	0
95721-00	Eeg phy/qhp>36<60 hr w/o vid	R26C	Covered	368.66	360.90	0 XXX	0	0	0	0	0
95722-00	Eeg phy/qhp>36<60 hr w/veeg	R26C	Covered	445.97	436.91	0 XXX	0	0	0	0	0
95723-00	Eeg phy/qhp>60<84 hr w/o vid	R26C	Covered	447.57	438.52	0 XXX	0	0	0	0	0
95724-00	Eeg phy/qhp>60<84 hr w/veeg	R26C	Covered	562.78	551.78	0 XXX	0	0	0	0	0
95725-00	Eeg phy/qhp>84 hr w/o vid	R26C	Covered	519.10	505.52	0 XXX	0	0	0	0	0
95726-00	Eeg phy/qhp>84 hr w/veeg	R26C	Covered	721.61	706.09	0 XXX	0	0	0	0	0
0017U-00	JAK2 mutation test for detecting gene abnormality associated with blood and	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
99341-00	Home/res vst new sf mdm 15	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	0	0	0
99439-00	Chrcnc care mgmt staf ea addl	NCOV	Not Covered	Code not covered	Code not co	0 ZZZ	0	0	0	0	0
88121-26	Cytp urine 3-5 probes cmptr	NCOV	Not Covered	Code not covered	Code not co	1 XXX	0	0	0	0	0
54240-TC	Penis study	NCOV	Not Covered	Code not covered	Code not co	1 000	0	0	0	0	0
88375-00	Optical endomicroscopy interp	NCOV	Not Covered	Code not covered	Code not co	2 XXX	0	0	0	0	0
95800-00	Slp stdy unattended	R26C	Covered	257.58	257.58	1 XXX	0	0	0	0	0
95800-26	Slp stdy unattended	R26C	Covered	69.91	69.91	1 XXX	0	0	0	0	0
95800-TC	Slp stdy unattended	R26C	Covered	187.67	187.67	1 XXX	0	0	0	0	0
95801-00	Slp stdy unatnd w/anal	R26C	Covered	182.55	182.55	1 XXX	0	0	0	0	0
95801-26	Slp stdy unatnd w/anal	R26C	Covered	72.50	72.50	1 XXX	0	0	0	0	0
95801-TC	Slp stdy unatnd w/anal	R26C	Covered	110.05	110.05	1 XXX	0	0	0	0	0
95803-00	Actigraphy testing	R26C	Covered	257.29	257.29	1 XXX	0	0	0	0	0
95803-26	Actigraphy testing	R26C	Covered	74.85	74.85	1 XXX	0	0	0	0	0
95803-TC	Actigraphy testing	R26C	Covered	182.44	182.44	1 XXX	0	0	0	0	0
95805-00	Multiple sleep latency test	R26C	Covered	823.98	823.98	1 XXX	0	0	0	0	0
95805-26	Multiple sleep latency test	R26C	Covered	101.58	101.58	1 XXX	0	0	0	0	0
95805-TC	Multiple sleep latency test	R26C	Covered	722.39	722.39	1 XXX	0	0	0	0	0
95806-00	Sleep study unatt&resp efft	R26C	Covered	176.42	176.42	1 XXX	0	0	0	0	0

95806-26	Sleep study unatt&resp efft	R26C	Covered	78.01	78.01	1 XXX	0	0	0	0	0
95806-TC	Sleep study unatt&resp efft	R26C	Covered	98.41	98.41	1 XXX	0	0	0	0	0
95807-00	Sleep study attended	R26C	Covered	780.98	780.98	1 XXX	0	0	0	0	0
95807-26	Sleep study attended	R26C	Covered	104.55	104.55	1 XXX	0	0	0	0	0
95807-TC	Sleep study attended	R26C	Covered	676.42	676.42	1 XXX	0	0	0	0	0
95808-00	Polysom any age 1-3> param	R26C	Covered	975.95	975.95	1 XXX	0	0	0	0	0
95808-26	Polysom any age 1-3> param	R26C	Covered	147.44	147.44	1 XXX	0	0	0	0	0
95808-TC	Polysom any age 1-3> param	R26C	Covered	828.52	828.52	1 XXX	0	0	0	0	0
95810-00	Polysom 6/> yrs 4/> param	R26C	Covered	1186.67	1186.67	1 XXX	0	0	0	0	0
95810-26	Polysom 6/> yrs 4/> param	R26C	Covered	209.29	209.29	1 XXX	0	0	0	0	0
95810-TC	Polysom 6/> yrs 4/> param	R26C	Covered	977.37	977.37	1 XXX	0	0	0	0	0
95811-00	Polysom 6/>yrs cpap 4/> parm	R26C	Covered	1240.06	1240.06	1 XXX	0	0	0	0	0
95811-26	Polysom 6/>yrs cpap 4/> parm	R26C	Covered	217.36	217.36	1 XXX	0	0	0	0	0
95811-TC	Polysom 6/>yrs cpap 4/> parm	R26C	Covered	1022.70	1022.70	1 XXX	0	0	0	0	0
95812-00	Eeg 41-60 minutes	R26C	Covered	670.82	670.82	1 XXX	0	0	0	0	0
95812-26	Eeg 41-60 minutes	R26C	Covered	100.81	100.81	1 XXX	0	0	0	0	0
95812-TC	Eeg 41-60 minutes	R26C	Covered	570.02	570.02	1 XXX	0	0	0	0	0
95813-00	Eeg extnd mntr 61-119 min	R26C	Covered	846.69	846.69	1 XXX	0	0	0	0	0
95813-26	Eeg extnd mntr 61-119 min	R26C	Covered	152.44	152.44	1 XXX	0	0	0	0	0
95813-TC	Eeg extnd mntr 61-119 min	R26C	Covered	694.25	694.25	1 XXX	0	0	0	0	0
95816-00	Eeg awake and drowsy	R26C	Covered	756.25	756.25	1 XXX	0	0	0	0	0
95816-26	Eeg awake and drowsy	R26C	Covered	100.81	100.81	1 XXX	0	0	0	0	0
95816-TC	Eeg awake and drowsy	R26C	Covered	655.44	655.44	1 XXX	0	0	0	0	0
95819-00	Eeg awake and asleep	R26C	Covered	872.07	872.07	1 XXX	0	0	0	0	0
95819-26	Eeg awake and asleep	R26C	Covered	100.81	100.81	1 XXX	0	0	0	0	0
95819-TC	Eeg awake and asleep	R26C	Covered	771.27	771.27	1 XXX	0	0	0	0	0
95822-00	Eeg coma or sleep only	R26C	Covered	791.82	791.82	1 XXX	0	0	0	0	0
95822-26	Eeg coma or sleep only	R26C	Covered	100.81	100.81	1 XXX	0	0	0	0	0
95822-TC	Eeg coma or sleep only	R26C	Covered	691.02	691.02	1 XXX	0	0	0	0	0
94799-00	Unlisted pulmonary svc/px	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
94799-26	Unlisted pulmonary svc/px	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
94799-TC	Unlisted pulmonary svc/px	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
95829-00	Surgery electrocorticogram	R26C	Covered	3382.10	3382.10	1 XXX	0	0	0	0	0
95829-26	Surgery electrocorticogram	R26C	Covered	579.69	579.69	1 XXX	0	0	0	0	0
95829-TC	Surgery electrocorticogram	R26C	Covered	2802.41	2802.41	1 XXX	0	0	0	0	0
95830-00	Insert electrodes for eeg	R26C	Covered	1318.68	160.26	0 XXX	0	0	0	0	0
95836-00	Ecog impltd brn npgt <30 d	R26C	Covered	185.13	185.13	0 XXX	0	0	0	0	0
95851-00	Range of motion measurements	R26C	Covered	40.82	13.65	0 XXX	0	0	0	0	0
95852-00	Range of motion measurements	R26C	Covered	33.90	9.32	0 XXX	0	0	0	0	0
95857-00	Cholinesterase challenge	R26C	Covered	119.07	49.87	0 XXX	0	0	0	0	0
95860-00	Muscle test one limb	R26C	Covered	211.23	211.23	1 XXX	0	0	0	0	0
95860-26	Muscle test one limb	R26C	Covered	90.23	90.23	1 XXX	0	0	0	0	0
95860-TC	Muscle test one limb	R26C	Covered	121.00	121.00	1 XXX	0	0	0	0	0
95861-00	Muscle test 2 limbs	R26C	Covered	298.37	298.37	1 XXX	0	0	0	0	0
95861-26	Muscle test 2 limbs	R26C	Covered	143.73	143.73	1 XXX	0	0	0	0	0
95861-TC	Muscle test 2 limbs	R26C	Covered	154.63	154.63	1 XXX	0	0	0	0	0
95863-00	Muscle test 3 limbs	R26C	Covered	388.97	388.97	1 XXX	0	0	0	0	0
95863-26	Muscle test 3 limbs	R26C	Covered	175.48	175.48	1 XXX	0	0	0	0	0
95863-TC	Muscle test 3 limbs	R26C	Covered	213.49	213.49	1 XXX	0	0	0	0	0
95864-00	Muscle test 4 limbs	R26C	Covered	434.52	434.52	1 XXX	0	0	0	0	0
95864-26	Muscle test 4 limbs	R26C	Covered	186.70	186.70	1 XXX	0	0	0	0	0
95864-TC	Muscle test 4 limbs	R26C	Covered	247.82	247.82	1 XXX	0	0	0	0	0
95865-00	Muscle test larynx	R26C	Covered	278.15	278.15	1 XXX	0	2	0	0	0
95865-26	Muscle test larynx	R26C	Covered	146.80	146.80	1 XXX	0	2	0	0	0

95865-TC	Muscle test larynx	R26C	Covered	131.35	131.35	1 XXX	0	2	0	0	0
95866-00	Muscle test hemidiaphragm	R26C	Covered	228.90	228.90	1 XXX	0	3	0	0	0
95866-26	Muscle test hemidiaphragm	R26C	Covered	112.43	112.43	1 XXX	0	3	0	0	0
95866-TC	Muscle test hemidiaphragm	R26C	Covered	116.47	116.47	1 XXX	0	3	0	0	0
95867-00	Muscle test cran nerv unilat	R26C	Covered	200.25	200.25	1 XXX	0	0	0	0	0
95867-26	Muscle test cran nerv unilat	R26C	Covered	73.43	73.43	1 XXX	0	0	0	0	0
95867-TC	Muscle test cran nerv unilat	R26C	Covered	126.82	126.82	1 XXX	0	0	0	0	0
95868-00	Muscle test cran nerve bilat	R26C	Covered	260.22	260.22	1 XXX	0	2	0	0	0
95868-26	Muscle test cran nerve bilat	R26C	Covered	110.76	110.76	1 XXX	0	2	0	0	0
95868-TC	Muscle test cran nerve bilat	R26C	Covered	149.46	149.46	1 XXX	0	2	0	0	0
95869-00	Muscle test thor paraspinal	R26C	Covered	181.10	181.10	1 XXX	0	0	0	0	0
95869-26	Muscle test thor paraspinal	R26C	Covered	34.87	34.87	1 XXX	0	0	0	0	0
95869-TC	Muscle test thor paraspinal	R26C	Covered	146.22	146.22	1 XXX	0	0	0	0	0
95870-00	Muscle test nonparaspinal	R26C	Covered	157.81	157.81	1 XXX	0	0	0	0	0
95870-26	Muscle test nonparaspinal	R26C	Covered	34.87	34.87	1 XXX	0	0	0	0	0
95870-TC	Muscle test nonparaspinal	R26C	Covered	122.94	122.94	1 XXX	0	0	0	0	0
95872-00	Muscle test one fiber	R26C	Covered	343.92	343.92	1 XXX	0	0	0	0	0
95872-26	Muscle test one fiber	R26C	Covered	262.38	262.38	1 XXX	0	0	0	0	0
95872-TC	Muscle test one fiber	R26C	Covered	81.54	81.54	1 XXX	0	0	0	0	0
95873-00	Guide nerv destr elec stim	R26C	Covered	134.43	134.43	1 ZZZ	0	0	0	0	0
95873-26	Guide nerv destr elec stim	R26C	Covered	34.82	34.82	1 ZZZ	0	0	0	0	0
95873-TC	Guide nerv destr elec stim	R26C	Covered	99.61	99.61	1 ZZZ	0	0	0	0	0
95874-00	Guide nerv destr needle emg	R26C	Covered	145.43	145.43	1 ZZZ	0	0	0	0	0
95874-26	Guide nerv destr needle emg	R26C	Covered	34.82	34.82	1 ZZZ	0	0	0	0	0
95874-TC	Guide nerv destr needle emg	R26C	Covered	110.60	110.60	1 ZZZ	0	0	0	0	0
95875-00	Limb exercise test	R26C	Covered	228.84	228.84	1 XXX	0	0	0	0	0
95875-26	Limb exercise test	R26C	Covered	103.96	103.96	1 XXX	0	0	0	0	0
95875-TC	Limb exercise test	R26C	Covered	124.88	124.88	1 XXX	0	0	0	0	0
95885-00	Musc tst done w/nerv tst lim	R26C	Covered	117.69	117.69	1 ZZZ	0	3	0	0	0
95885-26	Musc tst done w/nerv tst lim	R26C	Covered	32.96	32.96	1 ZZZ	0	3	0	0	0
95885-TC	Musc tst done w/nerv tst lim	R26C	Covered	84.73	84.73	1 ZZZ	0	3	0	0	0
95886-00	Musc test done w/n test comp	R26C	Covered	181.13	181.13	1 ZZZ	0	3	0	0	0
95886-26	Musc test done w/n test comp	R26C	Covered	80.22	80.22	1 ZZZ	0	3	0	0	0
95886-TC	Musc test done w/n test comp	R26C	Covered	100.90	100.90	1 ZZZ	0	3	0	0	0
95887-00	Musc tst done w/n tst nonext	R26C	Covered	155.84	155.84	1 ZZZ	0	3	0	0	0
95887-26	Musc tst done w/n tst nonext	R26C	Covered	65.29	65.29	1 ZZZ	0	3	0	0	0
95887-TC	Musc tst done w/n tst nonext	R26C	Covered	90.55	90.55	1 ZZZ	0	3	0	0	0
95905-00	Motor &/ sens nrve cndj test	R26C	Covered	63.93	63.93	1 XXX	0	0	0	0	0
95905-26	Motor &/ sens nrve cndj test	R26C	Covered	4.38	4.38	1 XXX	0	0	0	0	0
95905-TC	Motor &/ sens nrve cndj test	R26C	Covered	59.55	59.55	1 XXX	0	0	0	0	0
95907-00	Nvr cndj tst 1-2 studies	R26C	Covered	167.74	167.74	1 XXX	0	0	0	0	0
95907-26	Nvr cndj tst 1-2 studies	R26C	Covered	93.96	93.96	1 XXX	0	0	0	0	0
95907-TC	Nvr cndj tst 1-2 studies	R26C	Covered	73.78	73.78	1 XXX	0	0	0	0	0
95908-00	Nrv cndj tst 3-4 studies	R26C	Covered	208.20	208.20	1 XXX	0	0	0	0	0
95908-26	Nrv cndj tst 3-4 studies	R26C	Covered	117.61	117.61	1 XXX	0	0	0	0	0
95908-TC	Nrv cndj tst 3-4 studies	R26C	Covered	90.60	90.60	1 XXX	0	0	0	0	0
95909-00	Nrv cndj tst 5-6 studies	R26C	Covered	249.97	249.97	1 XXX	0	0	0	0	0
95909-26	Nrv cndj tst 5-6 studies	R26C	Covered	140.61	140.61	1 XXX	0	0	0	0	0
95909-TC	Nrv cndj tst 5-6 studies	R26C	Covered	109.36	109.36	1 XXX	0	0	0	0	0
95910-00	Nrv cndj test 7-8 studies	R26C	Covered	326.37	326.37	1 XXX	0	0	0	0	0
95910-26	Nrv cndj test 7-8 studies	R26C	Covered	187.26	187.26	1 XXX	0	0	0	0	0
95910-TC	Nrv cndj test 7-8 studies	R26C	Covered	139.11	139.11	1 XXX	0	0	0	0	0
95911-00	Nrv cndj test 9-10 studies	R26C	Covered	393.08	393.08	1 XXX	0	0	0	0	0
95911-26	Nrv cndj test 9-10 studies	R26C	Covered	233.92	233.92	1 XXX	0	0	0	0	0

95911-TC	Nrv cndj test 9-10 studies	R26C	Covered	159.16	159.16	1 XXX	0	0	0	0	0
95912-00	Nrv cndj test 11-12 studies	R26C	Covered	458.54	458.54	1 XXX	0	0	0	0	0
95912-26	Nrv cndj test 11-12 studies	R26C	Covered	279.28	279.28	1 XXX	0	0	0	0	0
95912-TC	Nrv cndj test 11-12 studies	R26C	Covered	179.26	179.26	1 XXX	0	0	0	0	0
95913-00	Nrv cndj test 13/> studies	R26C	Covered	528.89	528.89	1 XXX	0	0	0	0	0
95913-26	Nrv cndj test 13/> studies	R26C	Covered	330.23	330.23	1 XXX	0	0	0	0	0
95913-TC	Nrv cndj test 13/> studies	R26C	Covered	198.66	198.66	1 XXX	0	0	0	0	0
95919-00	Quan puplmtry phy/qhp uni/bi	R26C	Covered	28.50	28.50	1 XXX	0	0	0	0	0
95919-26	Quan puplmtry phy/qhp uni/bi	R26C	Covered	17.46	17.46	1 XXX	0	0	0	0	0
95919-TC	Quan puplmtry phy/qhp uni/bi	R26C	Covered	11.04	11.04	1 XXX	0	0	0	0	0
95921-00	Autonomic nrv parasym inervj	R26C	Covered	164.20	164.20	1 XXX	0	0	0	0	0
95921-26	Autonomic nrv parasym inervj	R26C	Covered	78.77	78.77	1 XXX	0	0	0	0	0
95921-TC	Autonomic nrv parasym inervj	R26C	Covered	85.42	85.42	1 XXX	0	0	0	0	0
95922-00	Autonomic nrv adrenrg inervj	R26C	Covered	176.95	176.95	1 XXX	0	0	0	0	0
95922-26	Autonomic nrv adrenrg inervj	R26C	Covered	81.77	81.77	1 XXX	0	0	0	0	0
95922-TC	Autonomic nrv adrenrg inervj	R26C	Covered	95.17	95.17	1 XXX	0	0	0	0	0
95923-00	Autonomic nrv syst funj test	R26C	Covered	230.22	230.22	1 XXX	0	0	0	0	0
95923-26	Autonomic nrv syst funj test	R26C	Covered	78.82	78.82	1 XXX	0	0	0	0	0
95923-TC	Autonomic nrv syst funj test	R26C	Covered	151.40	151.40	1 XXX	0	0	0	0	0
95924-00	Ans parasymp & symp w/tilt	R26C	Covered	279.66	279.66	1 XXX	0	0	0	0	0
95924-26	Ans parasymp & symp w/tilt	R26C	Covered	152.79	152.79	1 XXX	0	0	0	0	0
95924-TC	Ans parasymp & symp w/tilt	R26C	Covered	126.87	126.87	1 XXX	0	0	0	0	0
95925-00	Somatosensory testing	R26C	Covered	335.81	335.81	1 XXX	0	2	0	0	0
95925-26	Somatosensory testing	R26C	Covered	49.13	49.13	1 XXX	0	2	0	0	0
95925-TC	Somatosensory testing	R26C	Covered	286.67	286.67	1 XXX	0	2	0	0	0
95926-00	Somatosensory testing	R26C	Covered	300.83	300.83	1 XXX	0	2	0	0	0
95926-26	Somatosensory testing	R26C	Covered	48.44	48.44	1 XXX	0	2	0	0	0
95926-TC	Somatosensory testing	R26C	Covered	252.39	252.39	1 XXX	0	2	0	0	0
95927-00	Somatosensory testing	R26C	Covered	348.10	348.10	1 XXX	0	0	0	0	0
95927-26	Somatosensory testing	R26C	Covered	48.44	48.44	1 XXX	0	0	0	0	0
95927-TC	Somatosensory testing	R26C	Covered	299.66	299.66	1 XXX	0	0	0	0	0
95928-00	C motor evoked uppr limbs	R26C	Covered	455.74	455.74	1 XXX	0	2	0	0	0
95928-26	C motor evoked uppr limbs	R26C	Covered	140.01	140.01	1 XXX	0	2	0	0	0
95928-TC	C motor evoked uppr limbs	R26C	Covered	315.73	315.73	1 XXX	0	2	0	0	0
95929-00	C motor evoked lwr limbs	R26C	Covered	461.52	461.52	1 XXX	0	2	0	0	0
95929-26	C motor evoked lwr limbs	R26C	Covered	139.96	139.96	1 XXX	0	2	0	0	0
95929-TC	C motor evoked lwr limbs	R26C	Covered	321.55	321.55	1 XXX	0	2	0	0	0
95930-00	Visual ep test cns w/i&r	R26C	Covered	128.09	128.09	1 XXX	0	2	0	0	0
95930-26	Visual ep test cns w/i&r	R26C	Covered	32.96	32.96	1 XXX	0	2	0	0	0
95930-TC	Visual ep test cns w/i&r	R26C	Covered	95.13	95.13	1 XXX	0	2	0	0	0
95933-00	Blink reflex test	R26C	Covered	155.06	155.06	1 XXX	0	0	0	0	0
95933-26	Blink reflex test	R26C	Covered	55.41	55.41	1 XXX	0	0	0	0	0
95933-TC	Blink reflex test	R26C	Covered	99.65	99.65	1 XXX	0	0	0	0	0
95937-00	Neuromuscular junction test	R26C	Covered	196.87	196.87	1 XXX	0	0	0	0	0
95937-26	Neuromuscular junction test	R26C	Covered	60.99	60.99	1 XXX	0	0	0	0	0
95937-TC	Neuromuscular junction test	R26C	Covered	135.88	135.88	1 XXX	0	0	0	0	0
95938-00	Somatosensory testing	R26C	Covered	718.90	718.90	1 XXX	0	2	0	0	0
95938-26	Somatosensory testing	R26C	Covered	80.27	80.27	1 XXX	0	2	0	0	0
95938-TC	Somatosensory testing	R26C	Covered	638.63	638.63	1 XXX	0	2	0	0	0
95939-00	C motor evoked upr&lwr limbs	R26C	Covered	1064.37	1064.37	1 XXX	0	2	0	0	0
95939-26	C motor evoked upr&lwr limbs	R26C	Covered	209.67	209.67	1 XXX	0	2	0	0	0
95939-TC	C motor evoked upr&lwr limbs	R26C	Covered	854.71	854.71	1 XXX	0	2	0	0	0
90885-00	Psy evaluation of records	NCOV	Not Covered	Code not covered	Code not covered	1 XXX	9	9	9	9	9
0119U-00	Measurement of ceramides for assessment of heart	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9

95954-00	Eeg monitoring/giving drugs	R26C	Covered	742.92	742.92	1 XXX	0	0	0	0	0
95954-26	Eeg monitoring/giving drugs	R26C	Covered	197.29	197.29	1 XXX	0	0	0	0	0
95954-TC	Eeg monitoring/giving drugs	R26C	Covered	545.63	545.63	1 XXX	0	0	0	0	0
95955-00	Eeg during surgery	R26C	Covered	362.39	362.39	1 XXX	0	0	0	0	0
95955-26	Eeg during surgery	R26C	Covered	94.56	94.56	1 XXX	0	0	0	0	0
95955-TC	Eeg during surgery	R26C	Covered	267.82	267.82	1 XXX	0	0	0	0	0
95957-00	Eeg digital analysis	R26C	Covered	554.27	554.27	1 XXX	0	0	0	0	0
95957-26	Eeg digital analysis	R26C	Covered	180.87	180.87	1 XXX	0	0	0	0	0
95957-TC	Eeg digital analysis	R26C	Covered	373.39	373.39	1 XXX	0	0	0	0	0
95958-00	Eeg monitoring/function test	R26C	Covered	1325.60	1325.60	1 XXX	0	0	0	0	0
95958-26	Eeg monitoring/function test	R26C	Covered	397.66	397.66	1 XXX	0	0	0	0	0
95958-TC	Eeg monitoring/function test	R26C	Covered	927.94	927.94	1 XXX	0	0	0	0	0
95961-00	Electrode stimulation brain	R26C	Covered	605.13	605.13	1 XXX	0	0	0	0	0
95961-26	Electrode stimulation brain	R26C	Covered	277.10	277.10	1 XXX	0	0	0	0	0
95961-TC	Electrode stimulation brain	R26C	Covered	328.02	328.02	1 XXX	0	0	0	0	0
95962-00	Electrode stim brain add-on	R26C	Covered	511.97	511.97	1 ZZZ	0	0	0	0	0
95962-26	Electrode stim brain add-on	R26C	Covered	301.02	301.02	1 ZZZ	0	0	0	0	0
95962-TC	Electrode stim brain add-on	R26C	Covered	210.95	210.95	1 ZZZ	0	0	0	0	0
95199-00	Unlisted all/immlg svc/px	NBYR	Covered	By Report	By Report	0 XXX	0	0	0	0	0
95824-00	Eeg cerebral death only	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
95824-TC	Eeg cerebral death only	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
95965-00	Meg spontaneous	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
95965-TC	Meg spontaneous	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
95966-00	Meg evoked single	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
95966-TC	Meg evoked single	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
95967-00	Meg evoked each addl	NBYR	Covered	By Report	By Report	1 ZZZ	0	0	0	0	0
95967-TC	Meg evoked each addl	NBYR	Covered	By Report	By Report	1 ZZZ	0	0	0	0	0
95970-00	Alys npgt w/o prgrmg	R26C	Covered	33.06	31.76	0 XXX	0	0	0	0	0
95971-00	Alys smpl sp/pn npgt w/prgrm	R26C	Covered	85.90	67.14	0 XXX	0	0	0	0	0
95972-00	Alys cplx sp/pn npgt w/prgrm	R26C	Covered	102.04	69.05	0 XXX	0	0	0	0	0
95976-00	Alys smpl cn npgt prgrmg	R26C	Covered	68.63	67.34	0 XXX	0	0	0	0	0
95977-00	Alys cplx cn npgt prgrmg	R26C	Covered	91.12	89.18	0 XXX	0	0	0	0	0
95980-00	Io anal gast n-stim init	R26C	Covered	72.16	72.16	0 XXX	0	0	0	0	0
95981-00	Io anal gast n-stim subsq	R26C	Covered	70.91	29.51	0 XXX	0	0	0	0	0
95982-00	Io ga n-stim subsq w/reprog	R26C	Covered	105.40	60.12	0 XXX	0	0	0	0	0
95983-00	Alys brn npgt prgrmg 15 min	R26C	Covered	87.43	85.49	0 XXX	0	0	0	0	0
95984-00	Alys brn npgt prgrmg addl 15	R26C	Covered	76.17	74.87	0 ZZZ	0	0	0	0	0
95990-00	Spin/brain pump refill & main	R26C	Covered	172.28	172.28	5 XXX	0	0	0	0	0
95991-00	Spin/brain pump refill & main	R26C	Covered	206.34	67.92	0 XXX	0	0	0	0	0
95992-00	Canalith repositioning proc	R26C	Covered	77.42	63.84	0 XXX	0	0	0	0	0
95999-00	Unlisted neurological dx px	NBYR	Covered	By Report	By Report	0 XXX	0	0	0	0	0
97813-00	Acupunct w/stimul 15 min	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	1	0	0
92576-00	Synthetic sentence test	NCOV	Not Covered	Code not covered	Code not co	3 XXX	0	2	0	0	0
99347-00	Home/res vst est sf mdm 20	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	0	0	0
0004M-00	Molecular pathology test for genetic analysis of	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
96933-00	Rcm celulr subcelulr img skn	NCOV	Not Covered	Code not covered	Code not co	2 XXX	0	0	0	0	0
90901-00	Biofeedback train any meth	NCOV	Not Covered	Code not covered	Code not co	0 000	0	0	0	0	0
96936-00	Rcm celulr subcelulr img skn	NCOV	Not Covered	Code not covered	Code not co	2 ZZZ	0	0	0	0	0
99458-00	Rem physiol mntr ea addl 20	NCOV	Not Covered	Code not covered	Code not co	0 ZZZ	0	0	0	0	0
96040-00	Genetic counseling 30 min	RCMS	Covered	97.86	97.86	9 XXX	9	9	9	9	9
96105-00	Assessment of aphasia	R26C	Covered	175.26	175.26	0 XXX	0	0	0	0	0
96110-00	Developmental screen w/score	RCMS	Covered	22.04	22.04	9 XXX	9	9	9	9	9
96112-00	Devel tst phys/qhp 1st hr	R26C	Covered	221.63	219.69	0 XXX	0	0	0	0	0
96113-00	Devel tst phys/qhp ea addl	R26C	Covered	107.70	100.59	0 ZZZ	0	0	0	0	0

96116-00	Nubhvl xm phys/qhp 1st hr	R26C	Covered	166.47	141.24	0 XXX	0	0	0	0	0
96121-00	Nubhvl xm phy/qhp ea addl hr	R26C	Covered	136.46	118.35	0 ZZZ	0	0	0	0	0
96125-00	Cognitive test by hc pro	R26C	Covered	188.34	188.34	7 XXX	5	0	0	0	0
96127-00	Brief emotional/behav asmt	R26C	Covered	8.46	8.46	3 XXX	0	0	0	0	0
96130-00	Psycl tst eval phys/qhp 1st	R26C	Covered	215.67	193.03	0 XXX	0	0	0	0	0
96131-00	Psycl tst eval phys/qhp ea	R26C	Covered	155.59	134.89	0 ZZZ	0	0	0	0	0
96132-00	Nrpsyc tst eval phys/qhp 1st	R26C	Covered	233.64	187.71	0 XXX	0	0	0	0	0
96133-00	Nrpsyc tst eval phys/qhp ea	R26C	Covered	178.22	135.53	0 ZZZ	0	0	0	0	0
96136-00	Psycl/nrpsyc tst phy/qhp 1st	R26C	Covered	77.51	41.28	0 XXX	0	0	0	0	0
96137-00	Psycl/nrpsyc tst phy/qhp ea	R26C	Covered	70.69	31.89	0 ZZZ	0	0	0	0	0
96138-00	Psycl/nrpsyc tech 1st	R26C	Covered	66.02	66.02	0 XXX	0	0	0	0	0
96139-00	Psycl/nrpsyc tst tech ea	R26C	Covered	67.96	67.96	0 ZZZ	0	0	0	0	0
96146-00	Psycl/nrpsyc tst auto result	R26C	Covered	3.93	3.93	0 XXX	0	0	0	0	0
99462-00	Sbsq nb em per day hosp	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	0	0	0
99401-00	Prev med cnsi indiv apprx 15	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
93356-00	Myocrd strain img spckl trck	NCOV	Not Covered	Code not covered	Code not co	0 ZZZ	0	0	0	0	0
96160-00	Pt-focused hlth risk asmt	R26C	Covered	5.82	5.82	5 ZZZ	9	9	9	9	9
96161-00	Caregiver health risk asmt	R26C	Covered	5.82	5.82	5 ZZZ	9	9	9	9	9
97810-00	Acupunct w/o stimul 15 min	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	1	0	0
90849-00	Multiple family group psytx	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	0	0	0
92563-00	Tone decay hearing test	NCOV	Not Covered	Code not covered	Code not co	3 XXX	0	2	0	0	0
97814-00	Acupunct w/stimul addl 15m	NCOV	Not Covered	Code not covered	Code not co	0 ZZZ	0	0	1	0	0
0243U-00	Time-resolved fluorescence immunoassay of placental-growth factor in maternal	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0176U-00	Test for detection of IgG antibodies associated with irritable bowel syndrome	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
99447-00	Ntrprof ph1/ntrnet/ehr 11-20	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	0	0	0
0093U-00	Prescription drug monitoring for 65 common drugs	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
96360-00	Hydration iv infusion init	R26C	Covered	61.48	61.48	5 XXX	0	0	0	0	0
96361-00	Hydrate iv infusion add-on	R26C	Covered	22.98	22.98	5 ZZZ	0	0	0	0	0
96365-00	Ther/proph/diag iv inf init	R26C	Covered	118.38	118.38	5 XXX	0	0	0	0	0
96366-00	Ther/proph/diag iv inf addon	R26C	Covered	38.15	38.15	5 ZZZ	0	0	0	0	0
96367-00	Tx/proph/dg addl seq iv inf	R26C	Covered	53.64	53.64	5 ZZZ	0	0	0	0	0
96368-00	Ther/diag concurrent inf	R26C	Covered	36.90	36.90	5 ZZZ	0	0	0	0	0
96369-00	Sc ther infusion up to 1 hr	R26C	Covered	271.63	271.63	5 XXX	0	0	0	0	0
96370-00	Sc ther infusion addl hr	R26C	Covered	29.74	29.74	5 ZZZ	0	0	0	0	0
96371-00	Sc ther infusion reset pump	R26C	Covered	116.47	116.47	5 ZZZ	0	0	0	0	0
96372-00	Ther/proph/diag inj sc/im	R26C	Covered	26.55	26.55	5 XXX	0	0	0	0	0
96373-00	Ther/proph/diag inj ia	R26C	Covered	34.96	34.96	5 XXX	0	0	0	0	0
96374-00	Ther/proph/diag inj iv push	R26C	Covered	69.25	69.25	5 XXX	0	0	0	0	0
96375-00	Tx/pro/dx inj new drug addon	R26C	Covered	28.76	28.76	5 ZZZ	0	0	0	0	0
96376-00	Tx/pro/dx inj same drug adon	BSVC	Covered	Bundled	Bundled	9 ZZZ	9	9	9	9	9
96377-00	Applicaton on-body injector	R26C	Covered	34.31	34.31	5 XXX	0	0	0	0	0
96379-00	Unl ther/prop/diag inj/inf	NBYR	Covered	By Report	By Report	0 XXX	0	0	0	0	0
96401-00	Chemo anti-neopl sq/im	R26C	Covered	135.84	135.84	5 XXX	0	0	0	0	0
96402-00	Chemo hormon antineopl sq/im	R26C	Covered	66.62	66.62	5 XXX	0	0	0	0	0
96405-00	Chemo intralesional up to 7	R26C	Covered	157.23	51.15	0 000	2	0	1	0	0
96406-00	Chemo intralesional over 7	R26C	Covered	244.89	78.66	0 000	2	0	1	0	0
96409-00	Chemo iv push sngl drug	R26C	Covered	189.51	189.51	5 XXX	0	0	0	0	0
96411-00	Chemo iv push addl drug	R26C	Covered	102.85	102.85	5 ZZZ	0	0	0	0	0
96413-00	Chemo iv infusion 1 hr	R26C	Covered	245.67	245.67	5 XXX	0	0	0	0	0
96415-00	Chemo iv infusion addl hr	R26C	Covered	51.74	51.74	5 ZZZ	0	0	0	0	0
96416-00	Chemo prolong infuse w/pump	R26C	Covered	242.06	242.06	5 XXX	0	0	0	0	0
96417-00	Chemo iv infus each addl seq	R26C	Covered	120.32	120.32	5 ZZZ	0	0	0	0	0

96420-00	Chemo ia push technique	R26C	Covered	193.66	193.66	5 XXX	0	0	0	0	0
96422-00	Chemo ia infusion up to 1 hr	R26C	Covered	296.64	296.64	5 XXX	0	0	0	0	0
96423-00	Chemo ia infuse each addl hr	R26C	Covered	137.34	137.34	5 ZZZ	0	0	0	0	0
96425-00	Chemotherapy infusion method	R26C	Covered	319.37	319.37	5 XXX	0	0	0	0	0
96440-00	Chmotx admn prl cav thrcnts	R26C	Covered	1430.87	242.70	0 000	0	0	0	0	0
96446-00	Chemotx admn pertl cav impl	R26C	Covered	302.98	32.61	5 XXX	0	0	0	0	0
96450-00	Chemotherapy into cns	R26C	Covered	299.34	131.81	0 000	0	0	0	0	0
96521-00	Refill/maint portable pump	R26C	Covered	235.59	235.59	5 XXX	0	0	0	0	0
96522-00	Refill/maint pump/resvr syst	R26C	Covered	223.30	223.30	5 XXX	0	0	0	0	0
96523-00	Irrig drug delivery device	R26C	Covered	47.75	47.75	5 XXX	0	0	0	0	0
96542-00	Chemotherapy injection	R26C	Covered	247.02	74.33	0 XXX	0	0	0	0	0
96549-00	Unlisted chemotherapy px	NBYR	Covered	By Report	By Report	0 XXX	0	0	0	0	0
96567-00	Pdt dstr prmlg les skn	R26C	Covered	265.24	265.24	5 XXX	0	0	0	0	0
96570-00	Photodynmc tx 30 min add-on	R26C	Covered	86.69	86.69	0 ZZZ	0	0	1	0	0
96571-00	Photodynamic tx addl 15 min	R26C	Covered	43.32	43.32	0 ZZZ	0	0	1	0	0
96573-00	Pdt dstr prmlg les phys/ghp	R26C	Covered	436.75	436.75	0 000	0	0	0	0	0
96574-00	Dbrdmt prmlg les w/pdt	R26C	Covered	531.85	531.85	0 000	0	0	0	0	0
96900-00	Ultraviolet light therapy	R26C	Covered	47.91	47.91	5 XXX	0	0	0	0	0
96902-00	Trichogram	RCMS	Covered	39.24	35.36	9 XXX	9	9	9	9	9
0227U-00	Presumptive drug testing for 30 or more drugs in	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
96910-00	Photochemotherapy with uv-b	R26C	Covered	229.06	229.06	5 XXX	0	0	0	0	0
96912-00	Photochemotherapy with uv-a	R26C	Covered	194.78	194.78	5 XXX	0	0	0	0	0
96913-00	Photochemotherapy uv-a or b	R26C	Covered	295.08	295.08	5 XXX	0	0	0	0	0
96920-00	Excimer lsr psriasis<250sqcm	R26C	Covered	294.57	114.11	0 000	2	0	1	0	0
96921-00	Excimer lsr psriasis 250-500	R26C	Covered	322.49	129.10	0 000	2	0	1	0	0
96922-00	Excimer lsr psriasis>500sqcm	R26C	Covered	437.23	208.27	0 000	2	0	1	0	0
99451-00	Ntrprof ph1/ntrnet/ehr 5/>	RCMS	Covered	61.54	61.54	0 XXX	0	0	0	0	0
99408-00	Audit/dast 15-30 min	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
99452-00	Ntrprof ph1/ntrnet/ehr rfrl	RCMS	Covered	60.20	60.20	0 XXX	0	0	0	0	0
98968-00	Hc pro phone call 21-30 min	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	0	0	0
92571-00	Filtered speech hearing test	NCOV	Not Covered	Code not covered	Code not co	3 XXX	0	2	0	0	0
98960-00	Self-mgmt educ & train 1 pt	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
96999-00	Unlisted spec derm svc/px	NBYR	Covered	By Report	By Report	0 XXX	0	0	0	0	0
97010-00	Hot or cold packs therapy	RCMS	Covered	11.46	11.46	9 XXX	9	9	9	9	9
97012-00	Mechanical traction therapy	R26C	Covered	25.59	25.59	7 XXX	5	0	0	0	0
97014-00	Electric stimulation therapy	RCMS	Covered	22.63	22.63	9 XXX	9	9	9	9	9
97016-00	Vasopneumatic device therapy	R26C	Covered	21.34	21.34	7 XXX	5	0	0	0	0
97018-00	Paraffin bath therapy	R26C	Covered	10.16	10.16	7 XXX	5	0	0	0	0
97022-00	Whirlpool therapy	R26C	Covered	31.72	31.72	7 XXX	5	0	0	0	0
97024-00	Diathermy eg microwave	R26C	Covered	13.40	13.40	7 XXX	5	0	0	0	0
97026-00	Infrared therapy	R26C	Covered	12.10	12.10	7 XXX	5	0	0	0	0
97028-00	Ultraviolet therapy	R26C	Covered	15.26	15.26	7 XXX	5	0	0	0	0
97032-00	Appl modality 1+estim ea 15	R26C	Covered	26.24	26.24	7 XXX	5	0	0	0	0
97033-00	App mdlty 1+iontphrsis ea 15	R26C	Covered	35.90	35.90	7 XXX	5	0	0	0	0
97034-00	App mdlty 1+cntrst bth ea 15	R26C	Covered	25.75	25.75	7 XXX	5	0	0	0	0
97035-00	App mdlty 1+ultrasound ea 15	R26C	Covered	25.75	25.75	7 XXX	5	0	0	0	0
97036-00	App mdlty 1+hubbrd tnk ea 15	R26C	Covered	66.22	66.22	7 XXX	5	0	0	0	0
97039-00	Unlisted modality	RMCD	Covered	6.07	6.07	7 XXX	0	0	0	0	0
97110-00	Therapeutic exercises	R26C	Covered	54.56	54.56	7 XXX	5	0	0	0	0
97112-00	Neuromuscular reeducation	R26C	Covered	62.78	62.78	7 XXX	5	0	0	0	0
97113-00	Aquatic therapy/exercises	R26C	Covered	68.68	68.68	7 XXX	5	0	0	0	0
97116-00	Gait training therapy	R26C	Covered	54.56	54.56	7 XXX	5	0	0	0	0
97124-00	Massage therapy	R26C	Covered	56.89	56.89	7 XXX	5	0	0	0	0
95940-00	lonm in operatng room 15 min	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	0	0	0

98972-00	Qnhp ol dig asst&mgmt 21+	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
97139-00	Unlisted therapeutic px	RMCD	Covered	8.35	8.35	7 XXX	0	0	0	0	0
97140-00	Manual therapy 1/> regions	R26C	Covered	50.11	50.11	7 XXX	5	0	0	0	0
97150-00	Group therapeutic procedures	R26C	Covered	33.20	33.20	7 XXX	5	0	0	0	0
88177-00	Cytp fna eval ea addl	NCOV	Not Covered	Code not covered	Code not covered	1 ZZZ	0	0	0	0	0
97811-00	Acupunct w/o stimul addl 15m	NCOV	Not Covered	Code not covered	Code not covered	0 ZZZ	0	0	1	0	0
90853-00	Group psychotherapy	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
96171-00	Hlth bhv ivntj fam w/o pt ea	NCOV	Not Covered	Code not covered	Code not covered	9 ZZZ	9	9	9	9	9
99407-00	Behav chng smoking > 10 min	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
	Gene analysis for detection of variants in 3 genes in										
0205U-00	cheek swab specimen for	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
99412-00	Preventive counseling group	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
96168-00	Hlth bhv ivntj fam ea addl	NCOV	Not Covered	Code not covered	Code not covered	0 ZZZ	0	0	0	0	0
97161-00	Pt eval low complex 20 min	R26C	Covered	186.28	186.28	7 XXX	5	0	0	0	0
97162-00	Pt eval mod complex 30 min	R26C	Covered	186.28	186.28	7 XXX	5	0	0	0	0
97163-00	Pt eval high complex 45 min	R26C	Covered	186.28	186.28	7 XXX	5	0	0	0	0
97164-00	Pt re-eval est plan care	R26C	Covered	129.64	129.64	7 XXX	5	0	0	0	0
97165-00	Ot eval low complex 30 min	R26C	Covered	188.22	188.22	7 XXX	5	0	0	0	0
97166-00	Ot eval mod complex 45 min	R26C	Covered	188.22	188.22	7 XXX	5	0	0	0	0
97167-00	Ot eval high complex 60 min	R26C	Covered	188.22	188.22	7 XXX	5	0	0	0	0
97168-00	Ot re-eval est plan care	R26C	Covered	130.28	130.28	7 XXX	5	0	0	0	0
98943-00	Chiropract manj xtrspinl 1/>	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
90863-00	Pharmacologic mgmt w/psytx	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
96202-00	Mlt fam grp bhv train 1st 60	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
0077U-00	Detection of Immunoglobulin paraprotein (M-	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
97530-00	Therapeutic activities	R26C	Covered	68.83	68.83	7 XXX	5	0	0	0	0
97533-00	Sensory integration	R26C	Covered	118.48	118.48	7 XXX	5	0	0	0	0
97535-00	Self care mngment training	R26C	Covered	61.03	61.03	7 XXX	5	0	0	0	0
97537-00	Community/work reintegration	R26C	Covered	58.97	58.97	7 XXX	5	0	0	0	0
97542-00	Wheelchair mngment training	R26C	Covered	58.97	58.97	7 XXX	5	0	0	0	0
98967-00	Hc pro phone call 11-20 min	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
92577-00	Stenger test speech	NCOV	Not Covered	Code not covered	Code not covered	3 XXX	0	2	0	0	0
97597-00	Dbrdmt opn wnd 1st 20 cm/<	R26C	Covered	189.38	61.31	0 000	0	0	0	0	0
97598-00	Dbrdmt opn wnd addl 20cm/<	R26C	Covered	81.77	41.67	0 ZZZ	0	0	0	0	0
97602-00	Wound(s) care non-selective	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
97605-00	Neg prs wnd ther dme<=50sqcm	R26C	Covered	80.69	43.82	0 XXX	0	0	0	0	0
97606-00	Neg prs wnd ther dme>50 sqcm	R26C	Covered	96.02	48.16	0 XXX	0	0	0	0	0
97607-00	Neg prs wnd thr ndme<=50sqcm	R26C	Covered	670.71	35.55	0 XXX	0	0	0	0	0
97608-00	Neg prs wnd ther ndme>50sqcm	R26C	Covered	692.00	40.67	0 XXX	0	0	0	0	0
88363-00	Xm archive tissue molec anal	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
97750-00	Physical performance test	R26C	Covered	63.62	63.62	7 XXX	5	0	0	0	0
97755-00	Assistive technology assess	R26C	Covered	70.76	70.76	7 XXX	5	0	0	0	0
97760-00	Orthotic mgmt&traing 1st enc	R26C	Covered	89.94	89.94	7 XXX	5	0	0	0	0
97761-00	Prosthetic traing 1st enc	R26C	Covered	78.30	78.30	7 XXX	5	0	0	0	0
97763-00	Orthc/prostc mgmt sbsq enc	R26C	Covered	99.08	99.08	7 XXX	5	0	0	0	0
97799-00	Unlisted physcl med/rehab px	NBYR	Covered	By Report	By Report	7 XXX	0	0	0	0	0
97802-00	Medical nutrition indiv in	R26C	Covered	67.83	58.78	0 XXX	0	0	0	0	0
97803-00	Med nutrition indiv subseq	R26C	Covered	59.09	50.04	0 XXX	0	0	0	0	0
97804-00	Medical nutrition group	R26C	Covered	30.77	28.18	0 XXX	0	0	0	0	0
96159-00	Hlth bhv ivntj indiv ea addl	NCOV	Not Covered	Code not covered	Code not covered	0 ZZZ	0	0	0	0	0
97129-00	Ther ivntj 1st 15 min	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
94781-00	Cars/bd tst infnt-12mo +30min	NCOV	Not Covered	Code not covered	Code not covered	0 ZZZ	0	0	1	0	0
97130-00	Ther ivntj ea addl 15 min	NCOV	Not Covered	Code not covered	Code not covered	0 ZZZ	0	0	0	0	0
98925-00	Osteopath manj 1-2 regions	R26C	Covered	57.21	40.39	0 000	0	0	0	0	0

98926-00	Osteopath manj 3-4 regions	R26C	Covered	82.15	61.45	0 000	0	0	0	0	0
98927-00	Osteopath manj 5-6 regions	R26C	Covered	107.09	81.87	0 000	0	0	0	0	0
98928-00	Osteopath manj 7-8 regions	R26C	Covered	130.15	102.98	0 000	0	0	0	0	0
98929-00	Osteopath manj 9-10 regions	R26C	Covered	153.15	123.40	0 000	0	0	0	0	0
98940-00	Chiropract manj 1-2 regions	R26C	Covered	50.64	39.65	0 000	0	0	0	0	0
98941-00	Chiropract manj 3-4 regions	R26C	Covered	72.95	61.31	0 000	0	0	0	0	0
98942-00	Chiropractic manj 5 regions	R26C	Covered	93.97	82.33	0 000	0	0	0	0	0
99415-00	Prolng clin staff svc 1st hr	NCOV	Not Covered	Code not covered	Code not co	3 ZZZ	0	0	0	0	0
88177-26	Cytp fna eval ea addl	NCOV	Not Covered	Code not covered	Code not co	1 ZZZ	0	0	0	0	0
99411-00	Preventive counseling group	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
96002-00	Dynamic surface emg	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	2	0	0	0
98971-00	Qnhp ol dig asmt&mgmt 11-20	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	0	0	0
0096U-00	Test for detection of high-risk human papillomavirus	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0052U-00	Measurement of all five major lipoprotein classes	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
11201-00	Rmvl skin tags ea addl 10	NCOV	Not Covered	Code not covered	Code not co	0 ZZZ	0	0	1	0	0
0255U-00	Evaluation of sperm using fluorescence microscopic evaluation of ganglioside	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0064U-00	Antibody testing for syphilis	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
98975-00	Rem ther mntr 1st setup&edu	R26C	Covered	37.61	37.61	0 XXX	0	0	0	0	0
98976-00	Rem ther mntr dev sply resp	R26C	Covered	91.25	91.25	0 XXX	0	0	0	0	0
98977-00	Rem ther mntr dv sply mscskl	R26C	Covered	91.25	91.25	0 XXX	0	0	0	0	0
99446-00	Ntrprof ph1/ntrnet/ehr 5-10	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	0	0	0
98980-00	Rem ther mntr 1st 20 min	R26C	Covered	93.50	54.04	0 XXX	0	0	0	0	0
98981-00	Rem ther mntr ea addl 20 min	R26C	Covered	72.84	53.43	0 ZZZ	0	0	0	0	0
99000-00	Specimen handling office-lab	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
99001-00	Specimen handling pt-lab	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
99002-00	Device handling phys/qhp	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
99024-00	Postop follow-up visit	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
99474-00	Self-meas bp 2 readg bid 30d	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	0	0	0
96003-00	Dynamic fine wire emg	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	2	0	0	0
99050-00	Medical services after hrs	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
99051-00	Med serv eve/wkend/holiday	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
99053-00	Med serv 10pm-8am 24 hr fac	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
99056-00	Med service out of office	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
99058-00	Office emergency care	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
99060-00	Out of office emerg med serv	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
99070-00	Special supplies phys/qhp	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
99071-00	Patient education materials	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
0038U-00	Measurement of vitamin D in serum	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
99075-00	Medical testimony	RMCD	Covered	10.00	10.00	9 XXX	9	9	9	9	9
54250-TC	Penis study	NCOV	Not Covered	Code not covered	Code not co	1 000	0	0	0	0	0
99080-00	Special reports or forms	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
99082-00	Unusual physician travel	RMCD	Covered	5.60	5.60	0 XXX	0	0	0	0	0
99091-00	Collj & interpj data ea 30 d	R26C	Covered	95.05	95.05	0 XXX	0	0	0	0	0
99100-00	Anes pt exteme age<1 yr&>70	BSVC	Covered	Bundled	Bundled	9 ZZZ	9	9	9	9	9
99116-00	Anes comp tot bdy hypthrm	BSVC	Covered	Bundled	Bundled	9 ZZZ	9	9	9	9	9
99135-00	Anes comp ctrlld hypotension	BSVC	Covered	Bundled	Bundled	9 ZZZ	9	9	9	9	9
99140-00	Anes comp emergency cond	BSVC	Covered	Bundled	Bundled	9 ZZZ	9	9	9	9	9
98961-00	Self-mgmt educ/train 2-4 pt	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
99152-00	Mod sed same phys/qhp 5/>yrs	R26C	Covered	94.89	20.51	9 XXX	9	9	9	9	9
99153-00	Mod sed same phys/qhp ea	R26C	Covered	21.44	21.44	3 ZZZ	9	9	9	9	9
99155-00	Mod sed oth phys/qhp <5 yrs	R26C	Covered	138.46	138.46	9 XXX	9	9	9	9	9
99156-00	Mod sed oth phys/qhp 5/>yrs	R26C	Covered	126.96	126.96	9 XXX	9	9	9	9	9
99157-00	Mod sed other phys/qhp ea	R26C	Covered	102.37	102.37	9 ZZZ	9	9	9	9	9

99170-00	Anogenital exam child w imag	R26C	Covered	306.14	148.33	0 000	2	0	1	0	0
99473-00	Self-meas bp pt educaj/train	NCOV	Not Covered	Code not covered	Code not cov	0 XXX	0	0	0	0	0
99173-00	Visual acuity screen	RCMS	Covered	5.87	5.87	9 XXX	9	9	9	9	9
99174-00	Ocular instrumnt screen bil	RCMS	Covered	11.69	11.69	9 XXX	9	9	9	9	9
99175-00	Induction of vomiting	R26C	Covered	57.61	57.61	5 XXX	0	0	0	0	0
99177-00	Ocular instrumnt screen bil	RCMS	Covered	9.10	9.10	9 XXX	9	9	9	9	9
99183-00	Hyperbaric oxygen therapy	R26C	Covered	179.27	179.27	2 XXX	0	0	0	0	0
0110U-00	Monitoring of anti-cancer drugs in patient blood,	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
90785-00	Psytx complex interactive	NCOV	Not Covered	Code not covered	Code not cov	0 ZZZ	0	0	9	0	0
99190-00	Special pump services	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
99191-00	Special pump services	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
99192-00	Special pump services	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
99195-00	Phlebotomy	R26C	Covered	182.03	182.03	5 XXX	0	0	0	0	0
99406-00	Behav chng smoking 3-10 min	NCOV	Not Covered	Code not covered	Code not cov	0 XXX	0	0	0	0	0
99202-00	Office o/p new sf 15 min	R26C	Covered	131.93	82.77	0 XXX	0	0	0	0	0
99203-00	Office o/p new low 30 min	R26C	Covered	200.84	141.98	0 XXX	0	0	0	0	0
99204-00	Office o/p new mod 45 min	R26C	Covered	300.16	232.25	0 XXX	0	0	0	0	0
99205-00	Office o/p new hi 60 min	R26C	Covered	394.74	315.83	0 XXX	0	0	0	0	0
99211-00	Off/op est may x req phy/qhp	R26C	Covered	43.97	15.52	0 XXX	0	0	0	0	0
99212-00	Office o/p est sf 10 min	R26C	Covered	103.63	61.59	0 XXX	0	0	0	0	0
99213-00	Office o/p est low 20 min	R26C	Covered	165.51	115.71	0 XXX	0	0	0	0	0
99214-00	Office o/p est mod 30 min	R26C	Covered	233.13	171.04	0 XXX	0	0	0	0	0
99215-00	Office o/p est hi 40 min	R26C	Covered	326.45	253.36	0 XXX	0	0	0	0	0
99221-00	1st hosp ip/obs sf/low 40	R26C	Covered	141.96	141.96	0 XXX	0	0	0	0	0
99222-00	1st hosp ip/obs moderate 55	R26C	Covered	227.03	227.03	0 XXX	0	0	0	0	0
99223-00	1st hosp ip/obs high 75	R26C	Covered	303.21	303.21	0 XXX	0	0	0	0	0
99231-00	Sbsq hosp ip/obs sf/low 25	R26C	Covered	85.78	85.78	0 XXX	0	0	0	0	0
99232-00	Sbsq hosp ip/obs moderate 35	R26C	Covered	137.95	137.95	0 XXX	0	0	0	0	0
99233-00	Sbsq hosp ip/obs high 50	R26C	Covered	207.52	207.52	0 XXX	0	0	0	0	0
99234-00	Hosp ip/obs sm dt sf/low 45	R26C	Covered	169.58	169.58	0 XXX	0	0	0	0	0
99235-00	Hosp ip/obs same date mod 70	R26C	Covered	278.91	278.91	0 XXX	0	0	0	0	0
99236-00	Hosp ip/obs same date hi 85	R26C	Covered	363.76	363.76	0 XXX	0	0	0	0	0
99238-00	Hosp ip/obs dschrg mgmt 30/<	R26C	Covered	143.43	143.43	0 XXX	0	0	0	0	0
99239-00	Hosp ip/obs dschrg mgmt >30	R26C	Covered	202.53	202.53	0 XXX	0	0	0	0	0
99242-00	Off/op consltj new/est sf 20	RCMS	Covered	137.12	98.96	9 XXX	9	9	9	9	9
99243-00	Off/op consltj new/est low 30	RCMS	Covered	204.35	155.84	9 XXX	9	9	9	9	9
99244-00	Off/op consltj new/est mod 40	RCMS	Covered	291.02	237.99	9 XXX	9	9	9	9	9
99245-00	Off/op consltj new/est hi 55	RCMS	Covered	377.77	318.27	9 XXX	9	9	9	9	9
99252-00	lp/obs consltj new/est sf 35	RCMS	Covered	125.23	125.23	9 XXX	9	9	9	9	9
99253-00	lp/obs consltj new/est low 45	RCMS	Covered	176.46	176.46	9 XXX	9	9	9	9	9
99254-00	lp/obs consltj new/est mod 60	RCMS	Covered	245.63	245.63	9 XXX	9	9	9	9	9
99255-00	lp/obs consltj new/est hi 80	RCMS	Covered	328.83	328.83	9 XXX	9	9	9	9	9
99281-00	Emr dpt vst mayx req phy/qhp	R26C	Covered	19.22	19.22	0 XXX	0	0	0	0	0
99282-00	Emergency dept visit sf mdm	R26C	Covered	70.58	70.58	0 XXX	0	0	0	0	0
99283-00	Emergency dept visit low mdm	R26C	Covered	120.04	120.04	0 XXX	0	0	0	0	0
99284-00	Emergency dept visit mod mdm	R26C	Covered	204.12	204.12	0 XXX	0	0	0	0	0
99285-00	Emergency dept visit hi mdm	R26C	Covered	295.55	295.55	0 XXX	0	0	0	0	0
99288-00	Direct advanced life support	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
99291-00	Critical care first hour	R26C	Covered	486.35	365.39	0 XXX	0	0	0	0	0
99292-00	Critical care addl 30 min	R26C	Covered	208.99	183.11	0 ZZZ	0	0	0	0	0
99304-00	1st nf care sf/low mdm 25	R26C	Covered	142.14	142.14	0 XXX	0	0	0	0	0
99305-00	1st nf care moderate mdm 35	R26C	Covered	236.83	236.83	0 XXX	0	0	0	0	0
99306-00	1st nf care high mdm 50	R26C	Covered	323.12	323.12	0 XXX	0	0	0	0	0
99307-00	Sbsq nf care sf mdm 10	R26C	Covered	71.89	71.89	0 XXX	0	0	0	0	0

99308-00	Sbsq nf care low mdm 20	R26C	Covered	133.12	133.12	0 XXX	0	0	0	0	0
99309-00	Sbsq nf care moderate mdm 30	R26C	Covered	192.34	192.34	0 XXX	0	0	0	0	0
99310-00	Sbsq nf care high mdm 45	R26C	Covered	273.32	273.32	0 XXX	0	0	0	0	0
99315-00	Nf dschrg mgmt 30 min/less	R26C	Covered	145.33	145.33	0 XXX	0	0	0	0	0
99316-00	Nf dschrg mgmt 30 min+	R26C	Covered	232.31	232.31	0 XXX	0	0	0	0	0
58323-00	Sperm washing	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	0	0	0	0
0061U-00	Spatial frequency domain imaging of skin	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
98966-00	Hc pro phone call 5-10 min	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
99188-00	App topical fluoride varnish	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
98970-00	Qnhp ol dig asmt&mgmt 5-10	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
98962-00	Self-mgmt educ/train 5-8 pt	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
93793-00	Anticoag mgmt pt warfarin	NCOV	Not Covered	Code not covered	Code not covered	2 XXX	0	0	0	0	0
96164-00	Hlth bhv ivntj grp 1st 30	NCOV	Not Covered	Code not covered	Code not covered	0 XXX	0	0	0	0	0
99358-00	Prolong service w/o contact	RCMS	Covered	157.79	155.20	0 XXX	0	0	0	0	0
99359-00	Prolong serv w/o contact add	RCMS	Covered	67.16	64.58	0 ZZZ	0	0	0	0	0
99360-00	Physician standby services	RCMS	Covered	103.67	103.67	9 XXX	9	9	9	9	9
99366-00	Team conf w/pat by hc prof	RCMS	Covered	72.71	70.77	9 XXX	9	9	9	9	9
99367-00	Team conf w/o pat by phys	RCMS	Covered	95.00	95.00	9 XXX	9	9	9	9	9
99368-00	Team conf w/o pat by hc pro	RCMS	Covered	62.06	62.06	9 XXX	9	9	9	9	9
99416-00	Prolng clin staff svc ea add	NCOV	Not Covered	Code not covered	Code not covered	3 ZZZ	0	0	0	0	0
0065U-00	Non-antibody testing for syphilis	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0251U-00	ELISA assay for hepacidin-25 in serum or plasma	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0041U-00	IgM antibody detection test for Borrelia burgdorferi	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0042U-00	IgG antibody detection test for Borrelia burgdorferi	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
88177-TC	Cytp fna eval ea addl	NCOV	Not Covered	Code not covered	Code not covered	1 ZZZ	0	0	0	0	0
0107U-00	Antigen test for detection of Clostridium difficile	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0066U-00	Measurement of placental alpha-micro globulin-1 (PAMG-1) in cervical/vaginal	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0043U-00	IgM antibody detection test for Tick-Borne Relapsing Fever Borrelia group (IgM)	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0044U-00	IgM antibody detection test for Tick-Borne Relapsing Fever Borrelia group (IgG)	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
99385-00	Prev visit new age 18-39	RCMS	Covered	235.63	165.13	9 XXX	9	9	9	9	9
0039U-00	Testing for anti-DNA antibody	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
96203-00	Mlt fam grp bhv train ea add	NCOV	Not Covered	Code not covered	Code not covered	0 ZZZ	0	0	0	0	0
96165-00	Hlth bhv ivntj grp ea addl	NCOV	Not Covered	Code not covered	Code not covered	0 ZZZ	0	0	0	0	0
0167U-00	Test for detection of human chorionic gonadotropin (pregnancy hormone) in blood	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
15824-00	Removal of forehead wrinkles	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	1	0	0	0
15825-00	Removal of neck wrinkles	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	1	0	0	0
15826-00	Removal of brow wrinkles	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	1	0	0	0
15828-00	Removal of face wrinkles	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	1	0	0	0
15829-00	Removal of skin wrinkles	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	1	0	0	0
15847-00	Exc skin abd add-on	NCOV	Not Covered	Code not covered	Code not covered	0 YYY	0	0	2	1	0
15876-00	Suction lipectomy head&neck	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	0	0	0	0
15879-00	Suction lipectomy lwr extrem	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	1	0	0	0
36468-00	Njx sclrsnt spider veins	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	0	0	0	0
58974-00	Transfer of embryo	NCOV	Not Covered	Code not covered	Code not covered	0 000	2	0	2	1	0
59899-00	Unlisted px mat care&dlvr	NCOV	Not Covered	Code not covered	Code not covered	0 YYY	2	0	2	1	1
65760-00	Revision of cornea	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
65765-00	Revision of cornea	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
65767-00	Corneal tissue transplant	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
65771-00	Radial keratotomy	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
69090-00	Pierce earlobes	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9

76140-00	X-ray consultation	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
99417-00	Prolng op e/m each 15 min	RCMS	Covered	54.73	52.79	9 ZZZ	9	9	9	9	9
99418-00	Prolng ip/obs e/m ea 15 min	RCMS	Covered	69.52	69.52	9 ZZZ	9	9	9	9	9
99421-00	Ol dig e/m svc 5-10 min	RCMS	Covered	26.93	22.40	0 XXX	0	0	0	0	0
99422-00	Ol dig e/m svc 11-20 min	RCMS	Covered	52.57	44.16	0 XXX	0	0	0	0	0
99423-00	Ol dig e/m svc 21+ min	RCMS	Covered	83.83	70.90	0 XXX	0	0	0	0	0
99424-00	Prin care mgmt phys 1st 30	R26C	Covered	148.15	130.69	0 XXX	0	0	0	0	0
99425-00	Prin care mgmt phys ea addl	R26C	Covered	108.33	90.22	0 ZZZ	0	0	0	0	0
99426-00	Prin care mgmt staff 1st 30	R26C	Covered	111.61	86.38	0 XXX	0	0	0	0	0
99427-00	Prin care mgmt staff ea addl	R26C	Covered	86.08	60.85	0 ZZZ	0	0	0	0	0
77385-00	Ntsty modul rad tx dlvr smpl	NCOV	Not Covered	Code not covered	Code not cov	3 XXX	0	0	0	0	0
99437-00	Chrnc care mgmt phys ea addl	R26C	Covered	107.68	88.92	0 ZZZ	0	0	0	0	0
77386-00	Ntsty modul rad tx dlvr cplx	NCOV	Not Covered	Code not covered	Code not cov	3 XXX	0	0	0	0	0
80163-00	Assay of digoxin free	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80165-00	Dipropylacetic acid free	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80320-00	Drug screen quantalcohols	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80321-00	Alcohols biomarkers 1or 2	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80322-00	Alcohols biomarkers 3/more	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80323-00	Alkaloids nos	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80324-00	Drug screen amphetamines 1/2	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80325-00	Amphetamines 3or 4	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80326-00	Amphetamines 5 or more	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80327-00	Anabolic steroid 1 or 2	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
99453-00	Rem mntr physiol param setup	R26C	Covered	37.61	37.61	0 XXX	0	0	0	0	0
99454-00	Rem mntr physiol param dev	R26C	Covered	91.25	91.25	0 XXX	0	0	0	0	0
80328-00	Anabolic steroid 3 or more	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80329-00	Analgesics non-opioid 1 or 2	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
99457-00	Rem physiol mntr 1st 20 min	R26C	Covered	90.30	52.79	0 XXX	0	0	0	0	0
80330-00	Analgesics non-opioid 3-5	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80331-00	Analgesics non-opioid 6/more	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80332-00	Antidepressants class 1 or 2	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80333-00	Antidepressants class 3-5	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80334-00	Antidepressants class 6/more	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80335-00	Antidepressant tricyclic 1/2	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80336-00	Antidepressant tricyclic 3-5	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80337-00	Tricyclic & cyclical 6/more	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80338-00	Antidepressant not specified	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80339-00	Antiepileptics nos 1-3	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80340-00	Antiepileptics nos 4-6	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80341-00	Antiepileptics nos 7/more	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80342-00	Antipsychotics nos 1-3	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80343-00	Antipsychotics nos 4-6	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80344-00	Antipsychotics nos 7/more	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80345-00	Drug screening barbiturates	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80346-00	Benzodiazepines1-12	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80347-00	Benzodiazepines 13 or more	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
99478-00	Ic lbw inf < 1500 gm subsq	R26C	Covered	233.37	233.37	0 XXX	0	0	0	0	0
99479-00	Ic lbw inf 1500-2500 g subsq	R26C	Covered	212.26	212.26	0 XXX	0	0	0	0	0
99480-00	Ic inf pbw 2501-5000 g subsq	R26C	Covered	203.59	203.59	0 XXX	0	0	0	0	0
99483-00	Assmt & care pln pt cog imp	R26C	Covered	499.16	340.70	0 XXX	0	0	0	0	0
80348-00	Drug screening buprenorphine	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80349-00	Cannabinoids natural	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
80350-00	Cannabinoids synthetic 1-3	NCOV	Not Covered	Code not covered	Code not cov	9 XXX	9	9	9	9	9
99487-00	Cplx chrnc care 1st 60 min	R26C	Covered	246.41	159.09	0 XXX	0	0	0	0	0

99489-00	Cplx chrnc care ea addl 30	R26C	Covered	132.26	88.28	0 ZZZ	0	0	0	0	0
99490-00	Chrnc care mgmt staff 1st 20	R26C	Covered	113.50	88.28	0 XXX	0	0	0	0	0
99491-00	Chrnc care mgmt phys 1st 30	R26C	Covered	152.44	133.04	0 XXX	0	0	0	0	0
99492-00	1st psyc collab care mgmt	R26C	Covered	283.00	165.93	0 XXX	0	0	0	0	0
99493-00	Sbsq psyc collab care mgmt	R26C	Covered	255.27	180.88	0 XXX	0	0	0	0	0
99494-00	1st/sbsq psyc collab care	R26C	Covered	108.93	72.71	0 ZZZ	0	0	0	0	0
99495-00	Transj care mgmt mod f2f 14d	R26C	Covered	380.03	247.43	0 XXX	0	0	0	0	0
99496-00	Transj care mgmt high f2f 7d	R26C	Covered	514.14	336.27	0 XXX	0	0	0	0	0
99497-00	Advncd care plan 30 min	R26C	Covered	147.27	133.04	0 XXX	0	0	0	0	0
99498-00	Advncd care plan addl 30 min	R26C	Covered	126.31	125.02	0 ZZZ	0	0	0	0	0
99499-00	Unlisted e&m service	NBYR	Covered	By Report	By Report	0 XXX	0	0	0	0	0
80351-00	Cannabinoids synthetic 4-6	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
80352-00	Cannabinoid synthetic 7/more	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
80353-00	Drug screening cocaine	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
80354-00	Drug screening fentanyl	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
80355-00	Gabapentin non-blood	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
80356-00	Heroin metabolite	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
80357-00	Ketamine and norketamine	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
80358-00	Drug screening methadone	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
80359-00	Methylenedioxyamphetamines	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
80360-00	Methylphenidate	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
80361-00	Opiates 1 or more	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
80362-00	Opioids & opiate analogs 1/2	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
80363-00	Opioids & opiate analogs 3/4	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
80364-00	Opioid & opiate analog 5/more	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
80365-00	Drug screening oxycodone	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
80366-00	Drug screening pregabalin	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
80367-00	Drug screening propoxyphene	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
80368-00	Sedative hypnotics	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
0001F-00	Heart failure composite	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
0005F-00	Osteoarthritis composite	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
0012F-00	Cap bacterial assess	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
0014F-00	Comp preop assess cat surg	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
0015F-00	Melan follow-up complete	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
80369-00	Skeletal muscle relaxant 1/2	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
80370-00	Skel musc relaxant 3 or more	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
80371-00	Stimulants synthetic	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
80372-00	Drug screening tapentadol	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
80373-00	Drug screening tramadol	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
0075T-00	Perq stent/chest vert art	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
0075T-26	Perq stent/chest vert art	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
0075T-TC	Perq stent/chest vert art	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
0076T-00	S&i stent/chest vert art	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
0076T-26	S&i stent/chest vert art	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
0076T-TC	S&i stent/chest vert art	NBYR	Covered	By Report	By Report	1 XXX	0	0	0	0	0
80374-00	Stereoisomer analysis	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
80375-00	Drug/substance nos 1-3	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
80376-00	Drug/substance nos 4-6	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
80377-00	Drug/substance nos 7/more	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
81219-00	Calr gene com variants	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
81230-00	Cyp3a4 gene common variants	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
81231-00	Cyp3a5 gene common variants	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
81232-00	Dpyd gene common variants	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
81266-00	Str markers spec anal addl	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9

81267-00	Chimerism anal no cell selec	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81268-00	Chimerism anal w/cell select	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81273-00	Kit gene analys d816 variant	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81276-00	Kras gene addl variants	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81287-00	Mgmt gene prmtr mthyltn alys	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81301-00	Microsatellite instability	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81314-00	Pdgfra gene	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81327-00	Sept9 gen prmtr mthyltn alys	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81328-00	Slco1b1 gene com variants	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81330-00	Smpd1 gene common variants	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81332-00	Serpina1 gene	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81340-00	Trb@ gene rearrange amplify	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81341-00	Trb@ gene rearrange dirprobe	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81342-00	Trg gene rearrangement anal	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81346-00	Tyms gene com variants	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81351-00	Tp53 gene full gene sequence	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81352-00	Tp53 gene trgt sequence alys	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81353-00	Tp53 gene known famil vrnt	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81355-00	Vkorc1 gene	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81370-00	Hla i & ii typing lr	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81372-00	Hla i typing complete lr	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81374-00	Hla i typing 1 antigen lr	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81375-00	Hla ii typing ag equiv lr	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81377-00	Hla ii type 1 ag equiv lr	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81378-00	Hla i & ii typing hr	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81383-00	Hla ii typing 1 allele hr	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81400-00	Mopath procedure level 1	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0234T-00	Trluml perip athrc renal art	NBYR	Covered	By Report By Report	0 YYY	0	0	0	0	0
0235T-00	Trluml perip athrc visceral	NBYR	Covered	By Report By Report	0 YYY	0	0	0	0	0
0236T-00	Trluml perip athrc abd aorta	NBYR	Covered	By Report By Report	0 YYY	0	0	0	0	0
0237T-00	Trluml perip athrc brchiocph	NBYR	Covered	By Report By Report	0 YYY	0	0	0	0	0
0238T-00	Trluml perip athrc iliac art	NBYR	Covered	By Report By Report	0 YYY	0	0	0	0	0
81419-00	Epilepsy gen seq alys panel	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81432-00	Hrdtry brst ca-rlatd dsordrs	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81433-00	Hrdtry brst ca-rlatd dsordrs	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81434-00	Hereditary retinal disorders	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81437-00	Heredtry nurondcrn tum dsrdr	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81438-00	Heredtry nurondcrn tum dsrdr	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81442-00	Noonan spectrum disorders	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81471-00	X-linked intellectual dblt	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81490-00	Autoimmune ra alys 12 bmrk	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81493-00	Cor artery disease mrna	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81500-00	Onco (ovar) two proteins	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81503-00	Onco (ovar) five proteins	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81504-00	Oncology tissue of origin	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81506-00	Endo assay seven anal	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81508-00	Ftl cgen abnor two proteins	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81509-00	Ftl cgen abnor 3 proteins	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81510-00	Ftl cgen abnor three anal	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81511-00	Ftl cgen abnor four anal	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81512-00	Ftl cgen abnor five anal	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81513-00	Nfct ds bv rna vag flu alg	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0333T-00	Visual ep scr acuity auto	NBYR	Covered	By Report By Report	9 YYY	9	9	9	9	9
81514-00	Nfct ds bv&vaginitis dna alg	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9

81525-00	Oncology colon mrna	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81528-00	Oncology colorectal scr	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81529-00	Onc cutan mlmna mrna 31 gene	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81535-00	Oncology gynecologic	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81536-00	Oncology gynecologic	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81538-00	Oncology lung	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81540-00	Oncology tum unknown origin	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81551-00	Onc prostate 3 genes	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81554-00	Pulm ds ipf mrna 190 gen alg	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81595-00	Cardiology hrt trnsp l mrna	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
81599-00	Unlisted maaa	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
82642-00	Dihydrotestosterone	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
82777-00	Galectin-3	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
83861-00	Microfluid analy tears	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
83876-00	Assay myeloperoxidase	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
83951-00	Oncoprotein dcp	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
85397-00	Clotting funct activity	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
85598-00	Hexagnal phosph pltit neutr l	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
86152-00	Cell enumeration & id	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
86386-00	Nuclear matrix protein 22	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
86825-00	Hla x-math non-cytotoxic	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
86826-00	Hla x-match noncytotoxc addl	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
86910-00	Blood typing paternity test	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
86911-00	Blood typing antigen system	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
87150-00	Dna/rna amplified probe	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
87153-00	Dna/rna sequencing	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
87428-00	Sarscov & inf vir a&b ag ia	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
87593-00	Orthopoxvirus amp prb each	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
87623-00	Hpv low-risk types	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
87636-00	Sarscov2 & inf a&b amp prb	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
87637-00	Sarscov2&inf a&b&rsv amp prb	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
87806-00	Hiv ag w/hiv1&2 antb w/optic	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
87905-00	Sialidase enzyme assay	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
88000-00	Autopsy (necropsy) gross	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
88005-00	Autopsy (necropsy) gross	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
88007-00	Autopsy (necropsy) gross	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
88012-00	Autopsy (necropsy) gross	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
88014-00	Autopsy (necropsy) gross	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
88016-00	Autopsy (necropsy) gross	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
88020-00	Autopsy (necropsy) complete	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
88025-00	Autopsy (necropsy) complete	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
88027-00	Autopsy (necropsy) complete	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
88028-00	Autopsy (necropsy) complete	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
88029-00	Autopsy (necropsy) complete	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
88036-00	Limited autopsy	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
88037-00	Limited autopsy	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
88040-00	Forensic autopsy (necropsy)	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
88045-00	Coroners autopsy (necropsy)	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
88099-00	Unlisted necropsy (autopsy)	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
88240-00	Cell cryopreserve/storage	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
88241-00	Frozen cell preparation	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
88749-00	Unlisted in vivo lab service	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89240-00	Unlisted misc path test	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
89250-00	Cultr oocyte/embryo <4 days	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9

89251-00	Cultr oocyte/embryo <4 days	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89253-00	Embryo hatching	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89254-00	Oocyte identification	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89255-00	Prepare embryo for transfer	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89257-00	Sperm identification	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89258-00	Cryopreservation embryo(s)	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89259-00	Cryopreservation sperm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89260-00	Sperm isolation simple	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89261-00	Sperm isolation complex	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89264-00	Identify sperm tissue	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89268-00	Insemination of oocytes	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89272-00	Extended culture of oocytes	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89280-00	Assist oocyte fertilization	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89281-00	Assist oocyte fertilization	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89290-00	Biopsy oocyte polar body <=5	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89291-00	Biopsy oocyte polar body	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89300-00	Semen analysis w/huhner	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89310-00	Semen analysis w/count	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89320-00	Semen anal vol/count/mot	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89322-00	Semen anal strict criteria	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89325-00	Sperm antibody test	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89329-00	Sperm evaluation test	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89330-00	Evaluation cervical mucus	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0501F-00	Prenatal flow sheet	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
0502F-00	Subsequent prenatal care	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
0503F-00	Postpartum care visit	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
0505F-00	Hemodialysis plan docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
89331-00	Retrograde ejaculation anal	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89335-00	Cryopreserve testicular tiss	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89337-00	Cryopreservation oocyte(s)	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89342-00	Storage/year embryo(s)	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0507F-00	Periton dialysis plan docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
89343-00	Storage/year sperm/semen	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89344-00	Storage/year reprod tissue	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89346-00	Storage/year oocyte(s)	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0509F-00	Urine incon plan docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
0509T-00	Pattern erg w/i&r	R26C	Covered	144.71 144.71	1 XXX	7	2	0	0	0
0509T-26	Pattern erg w/i&r	R26C	Covered	37.94 37.94	1 XXX	7	2	0	0	0
0509T-TC	Pattern erg w/i&r	R26C	Covered	106.77 106.77	1 XXX	7	2	0	0	0
89352-00	Thawing cryopresrvd embryo	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89353-00	Thawing cryopresrvd sperm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
89354-00	Thaw cryoprsrvd reprod tiss	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0513F-00	Elev bp plan of care docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
89356-00	Thawing cryopresrvd oocyte	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0514F-00	Care plan hgb docd esa pt	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
89398-00	Unlisted reprod med lab proc	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0516F-00	Anemia plan of care docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
90281-00	Human ig im	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0517F-00	Glaucoma plan of care docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
90283-00	Human ig iv	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0518F-00	Fall plan of care docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
90584-00	Dengue vacc quad 2 dose subq	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0519F-00	Pland chemo docd b/4 txmnt	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
90619-00	Menacwy-tt vaccine im	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9

0520F-00	Rad dos limits b/4 3d rad	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
90626-00	Tic-brn enceph vac 0.25ml im	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
0521F-00	Plan of care 4 pain docd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
90627-00	Tic-brn enceph vac 0.5ml im	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
90758-00	Zaire ebolavirus vac live im	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
90882-00	Environmental manipulation	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
90889-00	Preparation of report	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
90899-00	Unlisted psyc svc/therapy	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	0	0	0
90989-00	Dialysis training complete	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
90993-00	Dialysis training incompl	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
91304-00	Sarscov2 vac 5mcg/0.5ml im	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
0525F-00	Initial visit for episode	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
92590-00	Hearing aid exam one ear	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
0526F-00	Subs visit for episode	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
92591-00	Hearing aid exam both ears	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
92592-00	Hearing aid check one ear	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
0528F-00	Rcmnd flw-up 10 yrs docd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
92593-00	Hearing aid check both ears	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
92594-00	Electro hearing aid test one	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
92595-00	Electro hearng aid tst both	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
0529F-00	Intrvl 3/>yr pts clnscp docd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
92630-00	Aud rehab pre-ling hear loss	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
92633-00	Aud rehab postling hear loss	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
93895-00	Carotid intima atheroma eval	NCOV	Not Covered	Code not covered	Code not co	1 XXX	6	0	0	0	0
93895-26	Carotid intima atheroma eval	NCOV	Not Covered	Code not covered	Code not co	1 XXX	6	0	0	0	0
93895-TC	Carotid intima atheroma eval	NCOV	Not Covered	Code not covered	Code not co	1 XXX	6	0	0	0	0
93998-00	Unlistd noninvas vasc dx std	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	0	1	1
0535F-00	Dyspnea mngmnt plan docd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
0537T-00	Bld drv t lymphcyt car-t cll	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
0538T-00	Bld drv t lymphcyt prep trns	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
0539T-00	Receipt&prep car-t cll admn	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
0540F-00	Gluco mngmnt plan docd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
94772-00	Breath recording infant	NCOV	Not Covered	Code not covered	Code not co	1 XXX	0	0	0	0	0
94772-26	Breath recording infant	NCOV	Not Covered	Code not covered	Code not co	1 XXX	0	0	0	0	0
94772-TC	Breath recording infant	NCOV	Not Covered	Code not covered	Code not co	1 XXX	0	0	0	0	0
94774-00	Ped home apnea rec compl	NCOV	Not Covered	Code not covered	Code not co	4 YYY	0	0	0	0	0
94775-00	Ped home apnea rec hk-up	NCOV	Not Covered	Code not covered	Code not co	3 YYY	0	0	0	0	0
0545F-00	Follow up care plan mdd docd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
94776-00	Ped home apnea rec downld	NCOV	Not Covered	Code not covered	Code not co	3 YYY	0	0	0	0	0
94777-00	Ped home apnea rec report	NCOV	Not Covered	Code not covered	Code not co	2 YYY	0	0	0	0	0
95120-00	Immunotherapy one injection	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
0550F-00	Cytopath report nongyn spcmn	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
0551F-00	Cytopath report non routine	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
95125-00	Immunotherapy 2/> injections	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
95130-00	Immmtx 1 sting insect	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
95131-00	Immmtx 2 sting insects	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
0555F-00	Symptom mngmnt plan care docd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
95132-00	Immmtx 3 sting insects	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
0556F-00	Plan care lipid control docd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
95133-00	Immmtx 4 sting insects	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
0557F-00	Plan caremng angnl symptdocd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
95134-00	Immmtx 5 sting insects	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
95941-00	Ionm remote/>1 pt or per hr	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
96020-00	Functional brain mapping	NCOV	Not Covered	Code not covered	Code not co	1 XXX	0	0	0	0	0

96020-TC	Functional brain mapping	NCOV	Not Covered	Code not covered Code not co	1 XXX	0	0	0	0	0
97151-00	Bhv id assmt by phys/qhp	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
97152-00	Bhv id suprt assmt by 1 tech	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
97153-00	Adaptive behavior tx by tech	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
97154-00	Grp adapt bhv tx by tech	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
97155-00	Adapt behavior tx phys/qhp	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
97156-00	Fam adapt bhv tx gdn phy/qhp	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
97157-00	Mult fam adapt bhv tx gdn	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
97158-00	Grp adapt bhv tx by phy/qhp	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
97169-00	Athletic trn eval low cmplx	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
97170-00	Athletic trn eval mod cmplx	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
97171-00	Athletic trn eval high cmplx	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
97172-00	Athletic trn re-eval plan cr	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0575F-00	Hiv rna plan care docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
97545-00	Work hardening	NCOV	Not Covered	Code not covered Code not co	7 XXX	0	0	0	0	0
97546-00	Work hardening add-on	NCOV	Not Covered	Code not covered Code not co	7 ZZZ	0	0	0	0	0
98978-00	Rem ther mntr dev sply cbt	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
99026-00	In-hospital on call service	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
99027-00	Out-of-hosp on call service	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0580F-00	Multidisciplinary care plan	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
99072-00	Addl suppl matrl&staf tm phe	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0581F-00	Pt trnsfrd from anesth to cc	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
99078-00	Group health education	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0582F-00	No trnsfr from anesth to cc	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
99172-00	Ocular function screen	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0583F-00	Transfer care checklist used	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
99199-00	Unlisted special svc px/rprt	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0584F-00	No transferecare chklist used	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
99429-00	Unlisted preventive service	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
99450-00	Basic life disability exam	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
99455-00	Work related disability exam	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
99456-00	Disability examination	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
99500-00	Home visit prenatal	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
99501-00	Home visit postnatal	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
99502-00	Home visit nb care	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
99503-00	Home visit resp therapy	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
99504-00	Home visit mech ventilator	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
99505-00	Home visit stoma care	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
99506-00	Home visit im injection	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
99507-00	Home visit cath maintain	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
99509-00	Home visit day life activity	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
99510-00	Home visit sing/m/fam couns	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
99511-00	Home visit fecal/enema mgmt	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
99512-00	Home visit for hemodialysis	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
99600-00	Unlisted home visit svc/px	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
99601-00	Home nfs visit <2 hrs	Other	Covered	178.91 178.91	9 XXX	9	9	9	9	9
99602-00	Home nfs visit each addl hr	Other	Covered	75.24 75.24	9 XXX	9	9	9	9	9
99605-00	Mtms by pharm np 15 min	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
99606-00	Mtms by pharm est 15 min	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
99607-00	Mtms by pharm addl 15 min	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0042T-00	Ct perfusion w/contrast cbf	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0054T-00	Bone srgrly cmptr fluor image	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0055T-00	Bone srgrly cmptr ct/mri imag	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0071T-00	Us leiomyomata ablate <200	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0

0072T-00	Fcsd us abltj leiomyom>=200	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0095T-00	Rmvl artific disc addl crvcl	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0098T-00	Rev artific disc addl	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0100T-00	Prosth retina receive&gen	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0101T-00	Esw muscskel sys nos	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0102T-00	Esw phy anes lat hmrl epcndl	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0106T-00	Touch quant sensory test	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0107T-00	Vibrate quant sensory test	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0108T-00	Cool quant sensory test	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0109T-00	Heat quant sensory test	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0110T-00	Nos quant sensory test	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0164T-00	Remove lumb artif disc addl	NCOV	Not Covered	Code not covered Code not co	0 YYY	0	0	0	0	0
0165T-00	Revise lumb artif disc addl	NCOV	Not Covered	Code not covered Code not co	0 YYY	0	0	0	0	0
0174T-00	Cad cxr with interp	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0175T-00	Cad cxr remote	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0184T-00	Exc rectal tumor endoscopic	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0198T-00	Ocular blood flow measure	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0200T-00	Perq sacral augmt unilat inj	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	1	0	0	0
0201T-00	Perq sacral augmt bilat inj	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	2	0	0	0
0202T-00	Post vert arthrplst 1 lumbar	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0207T-00	Clear eyelid gland w/heat	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0208T-00	Audiometry air only	NCOV	Not Covered	Code not covered Code not co	3 XXX	0	0	0	0	0
0209T-00	Audiometry air & bone	NCOV	Not Covered	Code not covered Code not co	3 XXX	0	0	0	0	0
0210T-00	Speech audiometry threshold	NCOV	Not Covered	Code not covered Code not co	3 XXX	0	0	0	0	0
0211T-00	Speech audiom thresh & recog	NCOV	Not Covered	Code not covered Code not co	3 XXX	0	0	0	0	0
0212T-00	Compre audiometry evaluation	NCOV	Not Covered	Code not covered Code not co	3 XXX	0	0	0	0	0
0213T-00	Njx paravert w/us cer/thor	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	1	0	0	0
0214T-00	Njx paravert w/us cer/thor	NCOV	Not Covered	Code not covered Code not co	0 ZZZ	0	1	0	0	0
0215T-00	Njx paravert w/us cer/thor	NCOV	Not Covered	Code not covered Code not co	0 ZZZ	0	1	0	0	0
0216T-00	Njx paravert w/us lumb/sac	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	1	0	0	0
0217T-00	Njx paravert w/us lumb/sac	NCOV	Not Covered	Code not covered Code not co	0 ZZZ	0	1	0	0	0
0218T-00	Njx paravert w/us lumb/sac	NCOV	Not Covered	Code not covered Code not co	0 ZZZ	0	1	0	0	0
0219T-00	Plmt post facet implt cerv	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0220T-00	Plmt post facet implt thor	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0221T-00	Plmt post facet implt lumb	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0222T-00	Plmt post facet implt addl	NCOV	Not Covered	Code not covered Code not co	0 ZZZ	0	0	0	0	0
0232T-00	Njx platelet plasma	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	1	0	0
0253T-00	Insert aqueous drain device	NCOV	Not Covered	Code not covered Code not co	0 YYY	0	0	0	0	0
0263T-00	Im b1 mrw cel ther cmpl	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0264T-00	Im b1 mrw cel ther xcl hrvt	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0265T-00	Im b1 mrw cel ther hrvt onl	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0266T-00	Implt/rpl crtd sns dev total	NCOV	Not Covered	Code not covered Code not co	0 YYY	0	0	0	0	0
0267T-00	Implt/rpl crtd sns dev lead	NCOV	Not Covered	Code not covered Code not co	0 YYY	0	0	0	0	0
0268T-00	Implt/rpl crtd sns dev gen	NCOV	Not Covered	Code not covered Code not co	0 YYY	0	0	0	0	0
0269T-00	Rev/remvl crtd sns dev total	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0270T-00	Rev/remvl crtd sns dev lead	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0271T-00	Rev/remvl crtd sns dev gen	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0272T-00	Interrogate crtd sns dev	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0273T-00	Interrogate crtd sns w/pgrmg	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0274T-00	Perq lamot/lam crv/thrc	NCOV	Not Covered	Code not covered Code not co	0 YYY	0	0	0	0	0
0275T-00	Perq lamot/lam lumbar	NCOV	Not Covered	Code not covered Code not co	0 YYY	0	0	0	0	0
0278T-00	Temp	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0308T-00	Insj ocular telescope prosth	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	1	1	0	0
0329T-00	Mntr io press 24hrs/> uni/bi	NCOV	Not Covered	Code not covered Code not co	9 YYY	9	9	9	9	9

0330T-00	Tear film img uni/bi w/i&r	NCOV	Not Covered	Code not covered Code not co	9	YYY	9	9	9	9	9
0331T-00	Heart symp image plnr	NCOV	Not Covered	Code not covered Code not co	9	YYY	9	9	9	9	9
0332T-00	Heart symp image plnr spect	NCOV	Not Covered	Code not covered Code not co	9	YYY	9	9	9	9	9
0335T-00	Insj sinus tarsi implant	NCOV	Not Covered	Code not covered Code not co	9	YYY	9	9	9	9	9
0338T-00	Trnscth renal symp denrv unl	NCOV	Not Covered	Code not covered Code not co	9	YYY	9	9	9	9	9
0339T-00	Trnscth renal symp denrv bil	NCOV	Not Covered	Code not covered Code not co	9	YYY	9	9	9	9	9
0342T-00	Thxp apheresis w/hdl delip	NCOV	Not Covered	Code not covered Code not co	9	YYY	9	9	9	9	9
0345T-00	Transcath mtral vlve repair	NCOV	Not Covered	Code not covered Code not co	9	YYY	9	9	9	9	9
0347T-00	Ins bone device for rsa	NCOV	Not Covered	Code not covered Code not co	9	YYY	9	9	9	9	9
0348T-00	Rsa spine exam	NCOV	Not Covered	Code not covered Code not co	9	YYY	9	9	9	9	9
0349T-00	Rsa upper extr exam	NCOV	Not Covered	Code not covered Code not co	9	YYY	9	9	9	9	9
0350T-00	Rsa lower extr exam	NCOV	Not Covered	Code not covered Code not co	9	YYY	9	9	9	9	9
0351T-00	Intraop oct brst/node spec	NCOV	Not Covered	Code not covered Code not co	9	YYY	9	9	9	9	9
0352T-00	Oct brst/node i&r per spec	NCOV	Not Covered	Code not covered Code not co	9	YYY	9	9	9	9	9
0353T-00	Intraop oct breast cavity	NCOV	Not Covered	Code not covered Code not co	9	YYY	9	9	9	9	9
0354T-00	Oct breast surg cavity i&r	NCOV	Not Covered	Code not covered Code not co	9	YYY	9	9	9	9	9
0358T-00	Bia whole body	NCOV	Not Covered	Code not covered Code not co	9	YYY	9	9	9	9	9
0362T-00	Bhv id suprnt assmt ea 15 min	NCOV	Not Covered	Code not covered Code not co	9	YYY	9	9	9	9	9
0373T-00	Adapt bhv tx ea 15 min	NCOV	Not Covered	Code not covered Code not co	9	YYY	9	9	9	9	9
0378T-00	Visual field assmnt rev/rprt	NCOV	Not Covered	Code not covered Code not co	0	XXX	0	0	0	0	0
0379T-00	Vis field assmnt tech suppt	NCOV	Not Covered	Code not covered Code not co	0	XXX	0	0	0	0	0
0394T-00	Hdr elctrcn skn surf brchyt	NCOV	Not Covered	Code not covered Code not co	0	XXX	0	0	0	0	0
0395T-00	Hdr elctr ntrst/ntrcv brchtx	NCOV	Not Covered	Code not covered Code not co	0	XXX	0	0	0	0	0
0397T-00	Ercp w/optical endomicroscopy	NCOV	Not Covered	Code not covered Code not co	0	XXX	0	0	0	0	0
0398T-00	Mrgfus strtctc les abltj	NCOV	Not Covered	Code not covered Code not co	1	XXX	4	0	0	0	0
0398T-26	Mrgfus strtctc les abltj	NCOV	Not Covered	Code not covered Code not co	1	XXX	4	0	0	0	0
0398T-TC	Mrgfus strtctc les abltj	NCOV	Not Covered	Code not covered Code not co	1	XXX	4	0	0	0	0
0402T-00	Colgn crs-link crn&pachymtry	NCOV	Not Covered	Code not covered Code not co	0	XXX	0	0	0	0	0
0403T-00	Diabetes prev standard curr	NCOV	Not Covered	Code not covered Code not co	0	XXX	0	0	0	0	0
0408T-00	Insj/rplc cardiac modulj sys	NCOV	Not Covered	Code not covered Code not co	0	XXX	0	0	0	0	0
0409T-00	Insj/rplc car modulj pls gn	NCOV	Not Covered	Code not covered Code not co	0	XXX	0	0	0	0	0
0410T-00	Insj/rplc car modulj atr elt	NCOV	Not Covered	Code not covered Code not co	0	XXX	0	0	0	0	0
0411T-00	Insj/rplc car modulj vnt elt	NCOV	Not Covered	Code not covered Code not co	0	XXX	0	0	0	0	0
0412T-00	Rmvl cardiac modulj pls gen	NCOV	Not Covered	Code not covered Code not co	0	XXX	0	0	0	0	0
0413T-00	Rmvl car modulj tranvns elt	NCOV	Not Covered	Code not covered Code not co	0	XXX	0	0	0	0	0
0414T-00	Rmvl & rpl car modulj pls gn	NCOV	Not Covered	Code not covered Code not co	0	XXX	0	0	0	0	0
0415T-00	Repos car modulj tranvns elt	NCOV	Not Covered	Code not covered Code not co	0	XXX	0	0	0	0	0
0416T-00	Reloc skin pocket pls gen	NCOV	Not Covered	Code not covered Code not co	0	XXX	0	0	0	0	0
0417T-00	Prgmng eval cardiac modulj	NCOV	Not Covered	Code not covered Code not co	0	XXX	0	0	0	0	0
0418T-00	Interro eval cardiac modulj	NCOV	Not Covered	Code not covered Code not co	0	XXX	0	0	0	0	0
0419T-00	Dstrj neurofibroma xtmsv	NCOV	Not Covered	Code not covered Code not co	0	XXX	0	0	0	0	0
0420T-00	Dstrj neurofibroma xtmsv	NCOV	Not Covered	Code not covered Code not co	0	XXX	0	0	0	0	0
0421T-00	Waterjet prostate abltj cml	NCOV	Not Covered	Code not covered Code not co	0	XXX	0	0	0	0	0
0422T-00	Tactile breast img uni/bi	NCOV	Not Covered	Code not covered Code not co	0	XXX	0	0	0	0	0
0437T-00	Impltj synth rnfcmnt abdl wal	NCOV	Not Covered	Code not covered Code not co	0	ZZZ	0	0	0	0	0
0439T-00	Myocrd contrast prfuj echo	NCOV	Not Covered	Code not covered Code not co	0	ZZZ	0	0	0	0	0
0440T-00	Abltj perc uxtr/perph nrv	NCOV	Not Covered	Code not covered Code not co	0	YYY	0	0	0	0	0
0441T-00	Abltj perc lxtr/perph nrv	NCOV	Not Covered	Code not covered Code not co	0	YYY	0	0	0	0	0
0442T-00	Abltj perc plex/trncl nrv	NCOV	Not Covered	Code not covered Code not co	0	YYY	0	0	0	0	0
0443T-00	R-t spctrl alys prst8 tiss	NCOV	Not Covered	Code not covered Code not co	0	ZZZ	0	0	0	0	0
0444T-00	1st plmt drug elut oc ins	NCOV	Not Covered	Code not covered Code not co	0	YYY	0	0	0	0	0
0445T-00	Sbsqt plmt drug elut oc ins	NCOV	Not Covered	Code not covered Code not co	0	YYY	0	0	0	0	0
0449T-00	Insj aqueous drain dev 1st	NCOV	Not Covered	Code not covered Code not co	9	YYY	9	9	9	9	9
0450T-00	Insj aqueous drain dev each	NCOV	Not Covered	Code not covered Code not co	9	YYY	9	9	9	9	9

0464T-00	Visual ep test for glaucoma	NCOV	Not Covered	Code not covered Code not co	9 YYY	9	9	9	9	9
0469T-00	Rta polarize scan oc scr bi	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0472T-00	Prgrmg io rta eltrd ra	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0473T-00	Reprgrmg io rta eltrd ra	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0474T-00	Insj aqueous drg dev io rsvr	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0479T-00	Fxjl abl lsr 1st 100 sq cm	NCOV	Not Covered	Code not covered Code not co	0 000	2	0	1	0	0
0480T-00	Fxjl abl lsr ea addl 100sqcm	NCOV	Not Covered	Code not covered Code not co	9 ZZZ	0	9	9	9	9
0481T-00	Njx autol wbc concentrate	NCOV	Not Covered	Code not covered Code not co	9 000	9	9	9	9	9
0483T-00	Tmvi percutaneous approach	NCOV	Not Covered	Code not covered Code not co	0 000	2	0	2	2	1
0484T-00	Tmvi transthoracic exposure	NCOV	Not Covered	Code not covered Code not co	0 000	2	0	0	2	1
0485T-00	Oct mid ear i&r unilateral	NCOV	Not Covered	Code not covered Code not co	1 XXX	9	1	9	9	9
0485T-26	Oct mid ear i&r unilateral	NCOV	Not Covered	Code not covered Code not co	1 XXX	9	1	9	9	9
0485T-TC	Oct mid ear i&r unilateral	NCOV	Not Covered	Code not covered Code not co	1 XXX	9	1	9	9	9
0486T-00	Oct mid ear i&r bilateral	NCOV	Not Covered	Code not covered Code not co	1 XXX	9	2	9	9	9
0486T-26	Oct mid ear i&r bilateral	NCOV	Not Covered	Code not covered Code not co	1 XXX	9	2	9	9	9
0486T-TC	Oct mid ear i&r bilateral	NCOV	Not Covered	Code not covered Code not co	1 XXX	9	2	9	9	9
0488T-00	Diabetes prev online/elec	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0489T-00	Regn cell tx scldr hands	NCOV	Not Covered	Code not covered Code not co	9 000	9	9	9	9	9
0490T-00	Regn cell tx scldr h mlt inj	NCOV	Not Covered	Code not covered Code not co	9 000	9	9	9	9	9
0494T-00	Prep & cannulj cdvr don lung	NCOV	Not Covered	Code not covered Code not co	0 XXX	2	2	2	1	0
0495T-00	Mntr cdvr don lng 1st 2 hrs	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0496T-00	Mntr cdvr don lng ea addl hr	NCOV	Not Covered	Code not covered Code not co	9 ZZZ	0	9	9	9	9
0500F-00	Initial prenatal care visit	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0500T-00	Hpv 5+ hi risk hpv types	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0505T-00	Ev fempop artl revsc	NCOV	Not Covered	Code not covered Code not co	0 YYY	0	0	0	0	0
0506T-00	Mac pgmt opt dns meas hfp	NCOV	Not Covered	Code not covered Code not co	1 XXX	7	0	0	0	0
0506T-26	Mac pgmt opt dns meas hfp	NCOV	Not Covered	Code not covered Code not co	1 XXX	7	0	0	0	0
0506T-TC	Mac pgmt opt dns meas hfp	NCOV	Not Covered	Code not covered Code not co	1 XXX	7	0	0	0	0
0507T-00	Near ifr 2img mibmn gland i&r	NCOV	Not Covered	Code not covered Code not co	1 XXX	7	0	0	0	0
0507T-26	Near ifr 2img mibmn gland i&r	NCOV	Not Covered	Code not covered Code not co	1 XXX	7	0	0	0	0
0507T-TC	Near ifr 2img mibmn gland i&r	NCOV	Not Covered	Code not covered Code not co	1 XXX	7	0	0	0	0
0510T-00	Rmvl sinus tarsi implant	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	1	1	0	0
0511T-00	Rmvl&rinsj sinus tarsi implt	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	1	1	0	0
0512T-00	Esw integ wnd hlg 1st wnd	NCOV	Not Covered	Code not covered Code not co	0 YYY	0	0	0	0	0
0513T-00	Esw integ wnd hlg ea addl	NCOV	Not Covered	Code not covered Code not co	0 ZZZ	0	0	0	0	0
0515T-00	Insj wcs lv compl sys	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	1	0	0
0516T-00	Insj wcs lv eltrd only	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	1	0	0
0517T-00	Insj wcs lv both compnt pg	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	1	0	0
0518T-00	Rmvl pg wcs lv battery only	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	1	0	0
0519T-00	Rmv&rplcmt pg wcs lv both	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	1	0	0
0520T-00	Rmv&rplcmt pg wcs lv battery	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	1	0	0
0521T-00	Interrog dev eval wcs ip	NCOV	Not Covered	Code not covered Code not co	1 XXX	9	9	9	9	9
0521T-26	Interrog dev eval wcs ip	NCOV	Not Covered	Code not covered Code not co	1 XXX	9	9	9	9	9
0521T-TC	Interrog dev eval wcs ip	NCOV	Not Covered	Code not covered Code not co	1 XXX	9	9	9	9	9
0522T-00	Prgrmg dev eval wcs ip	NCOV	Not Covered	Code not covered Code not co	1 XXX	9	9	9	9	9
0522T-26	Prgrmg dev eval wcs ip	NCOV	Not Covered	Code not covered Code not co	1 XXX	9	9	9	9	9
0522T-TC	Prgrmg dev eval wcs ip	NCOV	Not Covered	Code not covered Code not co	1 XXX	9	9	9	9	9
0523T-00	Ntrapx c ffr w/3d funcjl map	NCOV	Not Covered	Code not covered Code not co	0 ZZZ	0	0	0	0	0
0524T-00	Ev cath dir chem abltj w/img	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	1	1	0	0
0525T-00	Insj/rplcmt compl iims	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	1	0	0
0526T-00	Insj/rplcmt iims eltrd only	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	1	0	0
0527T-00	Insj/rplcmt iims implt mntr	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	1	0	0
0528T-00	Prgrmg dev eval iims ip	NCOV	Not Covered	Code not covered Code not co	1 XXX	9	9	9	9	9
0528T-26	Prgrmg dev eval iims ip	NCOV	Not Covered	Code not covered Code not co	1 XXX	9	9	9	9	9

0528T-TC	Prgmrg dev eval iims ip	NCOV	Not Covered	Code not covered Code not co	1 XXX	9	9	9	9	9
0529T-00	Interrog dev eval iims ip	NCOV	Not Covered	Code not covered Code not co	1 XXX	9	9	9	9	9
0529T-26	Interrog dev eval iims ip	NCOV	Not Covered	Code not covered Code not co	1 XXX	9	9	9	9	9
0529T-TC	Interrog dev eval iims ip	NCOV	Not Covered	Code not covered Code not co	1 XXX	9	9	9	9	9
0530T-00	Removal complete iims	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	1	0	0
0531T-00	Removal iims electrode only	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	1	0	0
0532T-00	Removal iims implt mntr only	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	1	0	0
0540T-00	Car-t cll admn autologous	NCOV	Not Covered	Code not covered Code not co	9 YYY	9	9	9	9	9
0541T-00	Myocardial imaging mcg	NCOV	Not Covered	Code not covered Code not co	3 XXX	9	9	9	9	9
0542T-00	Myocardial imaging mcg i&r	NCOV	Not Covered	Code not covered Code not co	2 XXX	9	9	9	9	9
0543T-00	Ta mv rpr w/artif chord tend	NCOV	Not Covered	Code not covered Code not co	0 YYY	0	0	0	0	0
0544T-00	Tcat mv annulus rcnstj	NCOV	Not Covered	Code not covered Code not co	0 YYY	0	0	2	1	0
0545T-00	Tcat tv annulus rcnstj	NCOV	Not Covered	Code not covered Code not co	0 YYY	0	0	2	1	0
0546T-00	Rf spectrsc ntraop mrgn asmt	NCOV	Not Covered	Code not covered Code not co	0 YYY	0	0	0	0	0
0547T-00	B1 matr qual tst mcrind tib	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0552T-00	Low-level laser therapy	NCOV	Not Covered	Code not covered Code not co	0 YYY	0	0	0	0	0
0553T-00	Perq tcat iliac anast implt	NCOV	Not Covered	Code not covered Code not co	0 YYY	0	0	0	0	0
0554T-00	B1 str & fx rsk analysis	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0555T-00	B1 str&fx rsk transmis data	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0556T-00	B1 str & fx rsk assessment	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
1000F-00	Tobacco use assessed	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1002F-00	Assess anginal symptom/level	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1003F-00	Level of activity assess	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1004F-00	Clin symp vol ovrlld assess	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1005F-00	Asthma symptoms evaluate	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1006F-00	Osteoarthritis assess	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1007F-00	Anti-inflm/anlgsc otc assess	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1008F-00	Gi/renal risk assess	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1010F-00	Severity angina by actvty	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1011F-00	Angina present	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1012F-00	Angina absent	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1015F-00	Copd symptoms assess	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1018F-00	Assess dyspnea not present	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1019F-00	Assess dyspnea present	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1022F-00	Pneumo imm status assess	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1026F-00	Co-morbid condition assess	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1030F-00	Influenza imm status assess	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1031F-00	Smoking & 2nd hand assessed	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1032F-00	Smoker/exposed 2nd hnd smoke	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1033F-00	Tobacco nonsmoker nor 2ndhnd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1034F-00	Current tobacco smoker	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1035F-00	Smokeless tobacco user	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1036F-00	Tobacco non-user	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1038F-00	Persistent asthma	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1039F-00	Intermittent asthma	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1040F-00	Dsm-5 info mdd docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1050F-00	History of mole changes	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1052F-00	Type location activityassess	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1055F-00	Visual funct status assess	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1060F-00	Doc perm/cont/parox atr fib	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1061F-00	Doc lack perm&cont&parox fib	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1065F-00	Ischm stroke symp lt3 hrsb/4	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1066F-00	Ischm stroke symp ge3 hrsb/4	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
1070F-00	Alarm symp assessed-absent	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9

1071F-00	Alarm symp assessed-1+ prsnt	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1090F-00	Pres/absn urine incon assess	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1091F-00	Urine incon characterized	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1100F-00	Ptfalls assess-docd ge2>/yr	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1101F-00	Pt falls assess-docd le1/yr	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1110F-00	Pt lft inpt fac w/in 60 days	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1111F-00	Dschrg med/current med merge	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1116F-00	Auric/peri pain assessed	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1118F-00	Gerd symps assessed 12 month	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1119F-00	Init eval for condition	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1121F-00	Subs eval for condition	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1123F-00	Acp discuss/dscn mkr docd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1124F-00	Acp discuss-no dscnmkr docd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1125F-00	Amnt pain noted pain prsnt	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1126F-00	Amnt pain noted none prsnt	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1127F-00	New episode for condition	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1128F-00	Subs episode for condition	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1130F-00	Bk pain & fxn assessed	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1134F-00	Epsd bk pain for 6 wks/<	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1135F-00	Epsd bk pain for >6 wks	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1136F-00	Epsd bk pain for 12 wks/<	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1137F-00	Epsd bk pain for >12 wks	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1150F-00	Doc pt rsk death w/in 1yr	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1151F-00	Doc no pt rsk death w/in 1yr	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1152F-00	Doc advncd dis comfort 1st	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1153F-00	Doc advncd dis cmfirt not 1st	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1157F-00	Advnc care plan in rcrd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1158F-00	Advnc care plan tlk docd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1159F-00	Med list docd in rcrd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1160F-00	Rvw meds by rx/dr in rcrd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1170F-00	Fxn status assessed	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1175F-00	Function stat assessed rvwd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1180F-00	Thromboemb risk assessed	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1181F-00	Neuropsychia sympts assessed	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1182F-00	Neuropsychi sympt 1+present	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1183F-00	Neuropsychiatric symp absent	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1200F-00	Seizure type& frequ docd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1205F-00	Epi etiol synd rvwd and docd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1220F-00	Pt screened for depression	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1400F-00	Prkns diag rvieued	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1450F-00	Symptoms improved/consist	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1451F-00	Sympt show clin import drop	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1460F-00	Qual card diag prior 12 mons	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1461F-00	No qual card diag prior12mon	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1490F-00	Dem severity classified mild	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1491F-00	Dem severity classified mod	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1493F-00	Dem severity class severe	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1494F-00	Cognit assessed and reviewed	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1500F-00	Symptom&sign symm polyneuro	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1501F-00	Not initial eval for cond	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1502F-00	Pt queried pain fxn w/ instr	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1503F-00	Pt queried symp resp insuff	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1504F-00	Pt has resp insufficiency	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
1505F-00	Pt has no resp insufficiency	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9

2000F-00	Blood pressure measure	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
2001F-00	Weight record	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
2002F-00	Clin sign vol ovrlid assess	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
2004F-00	Initial exam involved joints	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
2010F-00	Vital signs recorded	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
2014F-00	Mental status assess	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
2015F-00	Asthma impairment assessed	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
2016F-00	Asthma risk assessed	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
2018F-00	Hydration status assess	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
2019F-00	Dilated macul exam done	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
2020F-00	Dilated fundus eval done	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
2021F-00	Dilat macular exam done	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
2022F-00	Dilat rta xm evc rtnophy	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
0557T-00	B1 str & fx rsk i&r	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
2024F-00	7 fld rta photo evc rtnophy	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
0559T-00	Antmc mdl 3d print 1st cmpnt	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
2026F-00	Eye img valid evc rtnophy	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
2027F-00	Optic nerve head eval done	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
2028F-00	Foot exam performed	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
2029F-00	Complete phys skin exam done	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
2030F-00	H2o stat docd normal	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
2031F-00	H2o stat docd dehydrated	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
0560T-00	Antmc mdl 3d print ea addl	NCOV	Not Covered	Code not covered Code not co	0 ZZZ	0	0	0	0	0
2035F-00	Tymp memb motion examd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
2040F-00	Bk pn xm on init visit date	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
2044F-00	Doc mntl tst b/4 bk trxmnt	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
2050F-00	Wound char size etc docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
2060F-00	Pt talk eval hlthwkr re mdd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3006F-00	Cxr doc rev	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3008F-00	Body mass index docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3011F-00	Lipid panel doc rev	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3014F-00	Screen mammo doc rev	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3015F-00	Cerv cancer screen docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3016F-00	Pt scrnd unhlthy oh use	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3017F-00	Colorectal ca screen doc rev	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3018F-00	Pre-prxd rsk et al docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3019F-00	Lvef assess planpost dschrge	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3020F-00	Lvf assess	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3021F-00	Lvef mod/sever deprs syst	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3022F-00	Lvef >=40% systolic	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3023F-00	Spirom doc rev	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3025F-00	Spirom fev/fvc <70% w/copd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3027F-00	Spirom fev/fvc>=70%/w/ocopd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3028F-00	O2 saturation doc rev	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3035F-00	O2 saturation<=88%/pao<=55	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3037F-00	O2 saturation >88%/pao>55 hg	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3038F-00	Pulm fx w/in 12 mon b/4 surg	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3040F-00	Fev <40% predicted value	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3042F-00	Fev >=40% predicted value	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3044F-00	Hg a1c level lt 7.0%	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3046F-00	Hemoglobin a1c level >9.0%	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3048F-00	Ldl-c <100 mg/dl	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3049F-00	Ldl-c 100-129 mg/dl	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3050F-00	Ldl-c >= 130 mg/dl	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9

0561T-00	Antmc guide 3d print 1st gd	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0562T-00	Antmc guide 3d print ea addl	NCOV	Not Covered	Code not covered Code not co	0 ZZZ	0	0	0	0	0
3055F-00	Lvef less than/equal to 35%	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3056F-00	Lvef greater than 35%	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3060F-00	Pos microalbuminuria rev	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3061F-00	Neg microalbuminuria rev	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3062F-00	Pos macroalbuminuria rev	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3066F-00	Nephropathy doc tx	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3072F-00	Low risk for retinopathy	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3073F-00	Pre-surg eye measures docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3074F-00	Syst bp lt 130 mm hg	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3075F-00	Syst bp ge 130 - 139mm hg	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3077F-00	Syst bp >= 140 mm hg	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3078F-00	Diast bp <80 mm hg	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3079F-00	Diast bp 80-89 mm hg	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3080F-00	Diast bp >= 90 mm hg	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3082F-00	Kt/v <1.2	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3083F-00	Kt/v =/> 1.2 & <1.7	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3084F-00	Kt/v >= 1.7	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3085F-00	Suicide risk assessed	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3088F-00	Mdd mild	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3089F-00	Mdd moderate	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3090F-00	Mdd severe w/o psych	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3091F-00	Mdd severe w/psych	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3092F-00	Mdd in remission	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3093F-00	Doc new diag 1st/addl mdd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3095F-00	Central dexa results docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3096F-00	Central dexa ordered	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3100F-00	Image test ref carot diam	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3110F-00	Pres/absn hmrhg/lesion docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3111F-00	Ct/mri brain done w/in 24hrs	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3112F-00	Ct/mri brain done 24 hrs	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3115F-00	Quant results activity &symp	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3117F-00	Hf assessment tool completed	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3118F-00	Ny heart assoc class docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3119F-00	No eval activity clin symp	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3120F-00	12-lead ecg performed	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3126F-00	Esoph bx rprrt w/dyspl info	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3130F-00	Upper gi endoscopy performed	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3132F-00	Doc ref upper gi endoscopy	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3140F-00	Upper gi endo shows barrtts	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3141F-00	Upper gi endo not barrtts	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3142F-00	Barium swallow test ordered	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3150F-00	Forceps esoph biopsy done	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3155F-00	Cytogen test marrow b/4 tx	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3160F-00	Doc fe+ stores b/4 epo thx	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3170F-00	Baselin flo cytometry b/4 tx	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3200F-00	Barium swallow test not req	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3210F-00	Grp a strep test performed	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3215F-00	Pt immunity to hep a docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3216F-00	Pt immunity to hep b docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3218F-00	Rna tstng hep c docd done	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3220F-00	Hep c quant rna tstng docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3230F-00	Note hring tst w/in 6 mon	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9

3250F-00	Nonprim loc anat bx site tum	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3260F-00	Pt cat/pn cat/hist grd docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3265F-00	Rna tstng hepc vir ord/docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3266F-00	Hepc gn tstng docd b/4txmnt	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3267F-00	Path rpt w/ pt pn cat et al	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3268F-00	Psa/t/glsc docd b/4 txmnt	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3269F-00	Bone scn b/4 txmnt/aftr dx	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3270F-00	No bone scn b/4 txmnt/aftrdx	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3271F-00	Low risk prostate cancer	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3272F-00	Med risk prostate cancer	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3273F-00	High risk prostate cancer	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3274F-00	Prost cncr rsk not lw/md/hgh	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3278F-00	Serum lvls ca/ipth/lpd ord	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3279F-00	Hgb lvl >= 13 g/dl	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3280F-00	Hgb lvl 11-12.9 g/dl	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3281F-00	Hgb lvl <11 g/dl	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3284F-00	lop red >=15% pre-ntrv lvl	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3285F-00	lop down <15% of pre-svc lvl	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3288F-00	Fall risk assessment docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3290F-00	Pt=d(rh)- and unsensitized	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3291F-00	Pt=d(rh)+ or sensitized	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3292F-00	Hiv tstng asked/docd/revwd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3293F-00	Abo rh blood typing docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3294F-00	Grp b strep screening docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3300F-00	Ajcc stage docd b/4 thxpy	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3301F-00	Cancer stage docd metast	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3315F-00	Er+ or pr+ breast cancer	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3316F-00	Er- or pr- breast cancer	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3317F-00	Path rpt malig cancer docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3318F-00	Path rpt malig cancer docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3319F-00	X-ray/ct/ultrsnd et al ord	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3320F-00	No xray/ct/ et al ordd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3321F-00	Ajcc cncr 0/ia melan docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3322F-00	Melanomaajcc stage 0 or ia	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3323F-00	Clin node stgng docdb/4 surg	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3324F-00	Mri ct scan ord rvwd rqstd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3325F-00	Preop asses 4 cataract surg	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3328F-00	Prfrmnc docd 2 wks b/4 surg	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3330F-00	Imaging study ordered (bkp)	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3331F-00	Bk imaging tst not ordered	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3340F-00	Mammo assess inc xray docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3341F-00	Mammo assess negative docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3342F-00	Mammo assess bengn docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3343F-00	Mammo probably bengn docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3344F-00	Mammo assess susp docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3345F-00	Mammo assess hghlymalig doc	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3350F-00	Mammo bx proven malig docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3351F-00	Neg scrn dep symp by deptool	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3352F-00	No sig dep symp by dep tool	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3353F-00	Mild-mod dep symp by deptool	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3354F-00	Clin sig dep sym by dep tool	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3370F-00	Ajcc brst cncr stage 0 docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3372F-00	Ajcc brst cncr stage 1 docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3374F-00	Ajcc brst cncr stage 1 docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9

3376F-00	Ajcc brstcncr stage 2 docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3378F-00	Ajcc brstcncr stage 3 docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3380F-00	Ajcc brstcncr stage 4 docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3382F-00	Ajcc cln cncr stage 0 docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3384F-00	Ajcc cln cncr stage 1 docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3386F-00	Ajcc cln cncr stage 2 docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3388F-00	Ajcc cln cncr stage 3 docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3390F-00	Ajcc cln cncr stage 4 docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3394F-00	Quant her2 ihc eval brst cx	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3395F-00	Quant nonher2 ihc brst cx	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3450F-00	Dyspnea scrnd no-mild dysp	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3451F-00	Dyspnea scrnd mod-high dysp	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3452F-00	Dyspnea not screened	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3455F-00	Tb scrng done-interpd 6mon	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3470F-00	Ra disease activity low	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3471F-00	Ra disease activity mod	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3472F-00	Ra disease activity high	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3475F-00	Disease progn ra poor docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3476F-00	Disease progn ra good docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3490F-00	History aids-defining cond	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3491F-00	Hiv unsure baby of hiv+moms	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3492F-00	History cd4+ cell count <350	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3493F-00	No hist cd4+ cell count <350	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3494F-00	Cd4+cell count <200cells/mm3	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3495F-00	Cd4+cell cnt 200-499 cells	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3496F-00	Cd4+ cell count >= 500 cells	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3497F-00	Cd4+ cell percentage <15%	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3498F-00	Cd4+ cell >=15% (hiv)	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3500F-00	Cd4+cell cnt/% docd as done	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3502F-00	Hiv rna vrl ld <lmts quantif	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3503F-00	Hiv rna vrl ldnot<lmts quntf	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3510F-00	Doc tb scrng-rsits interpd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3511F-00	Chlmyd/gonrh tsts docd done	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3512F-00	Syph scrng docd as done	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3513F-00	Hep b scrng docd as done	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3514F-00	Hep c scrng docd as done	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3515F-00	Pt has docd immun to hep c	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3517F-00	Hbv assess&results intrp 1yr	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3520F-00	Cdifficile testing performed	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3550F-00	Low rsk thromboembolism	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3551F-00	Intrmed rsk thromboembolism	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3552F-00	Hgh risk for thromboembolism	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3555F-00	Pt inr measurement performed	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3570F-00	Rprt bone scint xref w xray	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3572F-00	Pt consid poss risk fx	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3573F-00	Pt not consid poss risk fx	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3650F-00	Eeg ordered rvwd reqstd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3700F-00	Psych disorders assessed	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3720F-00	Cognit impairment assessed	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3725F-00	Screen depression performed	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3750F-00	Ptnotrcvngsteroid>=10mg/day	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3751F-00	Electrodiag polyneuro 6 mn	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3752F-00	No electrodiag polyneuro 6mn	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
3753F-00	Pt has symp&signs neuropathy	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9

3754F-00	Screening tests dm done	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
3755F-00	Cog&behav imprmnt scrng done	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
3756F-00	Pt w/pseudobulb affect/als	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
3757F-00	Pt w/o pseudobulb affect/als	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
3758F-00	Pt ref pulm fx test/peakflow	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
3759F-00	Pt scrn dysphag/wt loss/nutr	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
3760F-00	Pt w/dysphag/wt loss/nutr	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
3761F-00	Pt w/o dysphag/wt loss/nutr	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
3762F-00	Patient is dysarthric	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
3763F-00	Patient is not dysarthric	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
3775F-00	Adenoma detected screening	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
3776F-00	Adenoma not detect screening	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4000F-00	Tobacco use txmnt counseling	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4001F-00	Tobacco use txmnt pharmacol	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4003F-00	Pt ed write/oral pts w/ hf	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4004F-00	Pt tobacco screen rcvd tlk	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4005F-00	Pharm thx for op rxd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4008F-00	Beta-blocker therapy rxd/tkn	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4010F-00	Ace/arb therapy rxd/taken	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4011F-00	Oral antiplatelet therapy rx	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4012F-00	Warfarin therapy rx	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4013F-00	Statin therapy/currently tkn	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4014F-00	Written discharge instr prvd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4015F-00	Persist asthma medicine ctrl	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4016F-00	Anti-inflm/anlgsc agent rx	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4017F-00	Gi prophylaxis for nsaid rx	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4018F-00	Therapy exercise joint rx	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4019F-00	Doc reapt counsl vit d/calc+	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4025F-00	Inhaled bronchodilator rx	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4030F-00	Oxygen therapy rx	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4033F-00	Pulmonary rehab rec	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4035F-00	Influenza imm rec	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4037F-00	Influenza imm order/admin	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4040F-00	Pneumoc vac/admin/rcvd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4041F-00	Doc order cefazolin/cefurox	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4042F-00	Doc antibio not given	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4043F-00	Doc order given stop antibio	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4044F-00	Doc order given vte prophylx	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4045F-00	Empiric antibiotic rx	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4046F-00	Doc antibio given b/4 surg	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4047F-00	Doc antibio given b/4 surg	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4048F-00	Doc antibio given b/4 surg	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4049F-00	Doc order given stop antibio	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4050F-00	Ht care plan doc	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4051F-00	Referred for an av fistula	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4052F-00	Hemodialysis via av fistula	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4053F-00	Hemodialysis via av graft	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4054F-00	Hemodialysis via catheter	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4055F-00	Pt rcvng periton dialysis	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4056F-00	Approp oral rehyd recommd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4058F-00	Ped gastro ed given caregvr	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4060F-00	Psych svcs provided	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4062F-00	Pt referral psych docd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4063F-00	Antidepress rxthxpy not rxd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9

4064F-00	Antidepressant rx	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4065F-00	Antipsychotic rx	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4066F-00	Ect provided	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4067F-00	Pt referral for ect docd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4069F-00	Vte prophylaxis rcvd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4070F-00	Dvt prophylx rcvd day 2	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4073F-00	Oral antiplat thx rx dischr	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4075F-00	Anticoag thx rx at dischr	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4077F-00	Doc t-pa admin considered	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4079F-00	Doc rehab svcs considered	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4084F-00	Aspirin rcvd w/in 24 hrs	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4086F-00	Aspirin/clopidogrel rxd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4090F-00	Pt rcvng epo thxpy	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4095F-00	Pt not rcvng epo thxpy	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4100F-00	Biphos thxpy vein ord/rcvd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4110F-00	Int mam art used for cabg	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4115F-00	Beta blkcr admin w/in 24 hrs	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4120F-00	Antibiot rxd/given	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4124F-00	Antibiot not rxd/given	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4130F-00	Topical prep rx aoe	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4131F-00	Syst antimicrobial thx rx	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4132F-00	No syst antimicrobial thx rx	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4133F-00	Antihist/decong rx/recom	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4134F-00	No antihist/decong rx/recom	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4135F-00	Systemic corticosteroids rx	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4136F-00	Syst corticosteroids not rx	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4140F-00	Inhaled corticosteroids rxd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4142F-00	Corticoster sparing thrpy rxd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4144F-00	Alt long-term cntrl med rxd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4145F-00	2+ anti-hyptrnsv agents tkn	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4148F-00	Hep a vac injxn admin/rcvd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4149F-00	Hep b vac injxn admin/rcvd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4150F-00	Pt rcvng antivir txmnt hepc	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4151F-00	Pt not rcvng antiv hep c	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4153F-00	Combo pegintf/rib rx	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4155F-00	Hep a vac series prev rcvd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4157F-00	Hep b vac series prev rcvd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4158F-00	Pt edu re alcoh drnkng done	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4159F-00	Contrcp talk b/4 antiv txmnt	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4163F-00	Pt couns 4 txmnt opt prost	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4164F-00	Adjv hrmln thxpy rxd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4165F-00	3d-crt/imrt received	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4167F-00	Hd bed tilted 1st day vent	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4168F-00	Pt care icu&vent w/in 24hrs	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4169F-00	No pt care icu/vent in 24hrs	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4171F-00	Pt rcvng esa thxpy	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4172F-00	Pt not rcvng esa thxpy	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4174F-00	Couns potent glauc impct	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4175F-00	Vis 20/40/> w/in 90 days	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4176F-00	Talk re uv light pt/crgvr	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4177F-00	Talk pt/crgvr re areds prev	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4178F-00	Antid gbln rcvd w/in 26wks	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4179F-00	Tamoxifen/ai prescribed	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4180F-00	Adjv thxpyrxd/rcvd colon ca	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9

4181F-00	Conformal radn thxpy rcvd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4182F-00	No conformal radn thxpy	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4185F-00	Continuous ppi or h2ra rcvd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4186F-00	No cont ppi or h2ra rcvd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4187F-00	Anti rheum drughxpyrd/gvn	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4188F-00	Approp ace/arb tstng done	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4189F-00	Approp digoxin tstng done	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4190F-00	Approp diuretic tstng done	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4191F-00	Approp anticonvuls tstng	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4192F-00	Pt not rcvng glucoco thxpy	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4193F-00	Pt rcv <10mg daily predniso	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4194F-00	Pt rcv >=10mg daily predniso	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4195F-00	Pt rcvng anti-rheum thxpy ra	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4196F-00	Ptnot rcvng anti-rhm thxpyra	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4200F-00	External beam to prost only	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4201F-00	Extrnl beam other than prost	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4210F-00	Ace/arb thxpy for mos/>	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4220F-00	Digoxin thxpy for 6 mos/>	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4221F-00	Diuretic thxpy for 6 mos/>	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4230F-00	Anticonv thxpy for 6 mos/>	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4240F-00	Instr xrcz back pain 12 wks	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4242F-00	Sprvds xrcz back pn >12 wks	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4245F-00	Pt instr nrml activities	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4248F-00	Pt instr no bd rest 4 days/>	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4250F-00	Wrmng 4 surg normothermia	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4255F-00	Anesth 60 min/> as docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4256F-00	Anesthe <60 min as docd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4260F-00	Wound srfc culturetech used	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4261F-00	Tech other than surfc cultr	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4265F-00	Wet-dry dressings rx recmd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4266F-00	No wet-dry drssings rx recmd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4267F-00	Comprssion thxpy prescribed	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4268F-00	Pt ed re comp thxpy rcvd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4269F-00	Appropos mthd offloading rxd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4270F-00	Pt rcvng anti r-viral thxpy	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4271F-00	Pt rcvng anti r-viral thxpy	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4274F-00	Flu immuno admind rcvd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4276F-00	Potent antivir thxpy rxd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4279F-00	Pcp prophylaxis rxd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4280F-00	Pcp prophylax rxd 3mon low %	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4290F-00	Pt scrdnd for inj drug use	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4293F-00	Pt scrdnd hgh-risk sex behav	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4300F-00	Pt rcvng warf thxpy	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4301F-00	Pt not rcvng warf thxpy	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4305F-00	Pt ed re ft care inspct rcvd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4306F-00	Pt tlk psych & rx opd addic	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4320F-00	Pt talk psychsoc&rx oh dpnd	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4322F-00	Crgvr prov w/ ed addl rsrcs	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4324F-00	Pt queried prkns complic	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4325F-00	Med txmnt options rvwd w/pt	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4326F-00	Pt asked re symp auto dysfxn	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4328F-00	Pt asked re sleep disturb	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4330F-00	Cnslng epi spec sfty issues	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9
4340F-00	Cnslng chldbrng women epi	TRAC	Covered	For Tracking Purp For Tracking	9 XXX	9	9	9	9	9

4350F-00	Cnslng provided symp mngmnt	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4400F-00	Rehab thxpy options w/pt	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4450F-00	Self-care ed provided to pt	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4470F-00	lcd counseling provided	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4480F-00	Pt rcvng ace/arb b-blockertx	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4481F-00	Pt rcvng ace/arb blkcr <3mos	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4500F-00	Ref to outpt card rehab prog	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4510F-00	Prev cardrehab qualcardevent	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4525F-00	Neuropsychia interven order	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4526F-00	Neuropsychia interven rcvd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4540F-00	Disease modif pharmacothxpy	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4541F-00	Pt offered tx for pseudobulb	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4550F-00	Noninvas resp support talk	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4551F-00	Nutritional support offered	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4552F-00	Pt ref for speech lang path	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4553F-00	Pt asst re end life issues	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4554F-00	Pt recvd inhal anesthetic	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4555F-00	Pt recvd no inhal anesthetic	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4556F-00	Pt w/3+ post-op nausea&vom	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4557F-00	Pt w/o 3+ post-opnausea&vom	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4558F-00	Pt recvd 2 rx anti-emet agt	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4559F-00	1 bodytemp >=35.5cw/in 30min	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4560F-00	Anesth w/o gen/neurax anesth	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4561F-00	Pt w/ coronary artery stent	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4562F-00	Pt w/o coronary artery stent	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
4563F-00	Pt recvd aspirin w/in 24 hrs	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
5005F-00	Pt counsl on exam for moles	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
5010F-00	Macul result phy/qhp mng dm	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
5015F-00	Doc fx & test/txmnt for op	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
5020F-00	Txmnts 2 phys/qhp by 1 mon	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
5050F-00	Plan 2 main dr by 1 month	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
5060F-00	Fndngs mammo 2pt w/in 3 days	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
5062F-00	Mammo result com to pt 5 day	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
5100F-00	Rsk fx ref w/n 24 hrs xray	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
5200F-00	Eval appros surg thxpy epi	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
5250F-00	Asthma discharge plan presnt	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
6005F-00	Care level rationale doc	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
6010F-00	Dysphag test done b/4 eating	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
6015F-00	Dysphag test done b/4 eating	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
6020F-00	Npo (nothing-mouth) ordered	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
6030F-00	Max sterile barriers flwd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
6040F-00	Appro rad ds dvcs techs docd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
6045F-00	Radxps in end rpt4fluro pxd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
6070F-00	Pt asked/cnsl aed effects	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
6080F-00	Pt/caregiver queried falls	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
6090F-00	Pt/caregiver counsel safety	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
6100F-00	Verify pt site pxd docd	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
6101F-00	Safety counseling dementia	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
6102F-00	Safety counseling dem order	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
6110F-00	Counsel prov driving risks	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
6150F-00	Pt notrcvng1st antitnf txmnt	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
7010F-00	Pt info into recall system	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
7020F-00	Mammo assess cat in dbase	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
7025F-00	Pt infosys alarm 4 nxt mammo	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9

9001F-00	Aortic aneurysm<5cm diam ct	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
9002F-00	Aortic aneurysm 5-5.4cm diam	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
9003F-00	Aortic anrysm5.5-5.9cm diam	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
9004F-00	Aortic anrysm 6/> cm diam	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
9005F-00	Asympt carot/vrtbrbs sten	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
9006F-00	Sympt sten-tia/strk<120days	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
9007F-00	Other carot sten 120 days/>	TRAC	Covered	For Tracking Purp	For Tracking	9 XXX	9	9	9	9	9
A2001-00	Innovamatrix ac, per sq cm	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
A2002-00	Mirragen adv wnd mat per sq	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
A2004-00	Xcellistem, 1 mg	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
A2005-00	Microlyte matrix, per sq cm	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
A2006-00	Novosorb synpath per sq cm	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
A2007-00	Restrata, per sq cm	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
A2008-00	Theragenesis, per sq cm	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
A2009-00	Symphony, per sq cm	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
A2010-00	Apis, per square centimeter	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
A2011-00	Supra sdrm, per sq cm	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
A2012-00	Suprathel, per sq cm	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
A2013-00	Innovamatrix fs, per sq cm	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
A2014-00	Omeza collag per 100 mg	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
A2015-00	Phoenix wnd mtrx, per sq cm	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
A2016-00	Permeaderm b, per sq cm	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
A2017-00	Permeaderm glove, each	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
A2018-00	Permeaderm c, per sq cm	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
0563T-00	Evac meibomian gland heat bi	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0564T-00	Onc chemo rx cytotox csc 14	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0565T-00	Autol cell implt adps hrvg	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0567T-00	Perm flp tube occls w/implt	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0568T-00	Intro mix saline&air f/ssg	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0569T-00	Ttvr perq appr 1st prosth	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	2	1	0
0570T-00	Ttvr perq ea addl prosth	NCOV	Not Covered	Code not covered	Code not co	0 ZZZ	0	0	2	1	0
A4100-00	Skin sub fda clrd as dev nos	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
A4206-00	1 cc sterile syringe&needle	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4207-00	2 cc sterile syringe&needle	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4208-00	3 cc sterile syringe&needle	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4209-00	5+ cc sterile syringe&needle	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4211-00	Supp for self-adm injections	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4212-00	Non coring needle or stylet	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4213-00	20+ cc syringe only	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4215-00	Sterile needle	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4220-00	Infusion pump refill kit	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4244-00	Alcohol or peroxide per pint	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4245-00	Alcohol wipes per box	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4246-00	Betadine/phisohex solution	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4247-00	Betadine/iodine swabs/wipes	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4250-00	Urine reagent strips/tablets	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
A4252-00	Blood ketone test or strip	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4253-00	Blood glucose/reagent strips	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
0571T-00	Insj/rplcmt icds ss eltrd	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
A4262-00	Temporary tear duct plug	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4263-00	Permanent tear duct plug	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
0572T-00	Insertion ss dfb electrode	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
A4270-00	Disposable endoscope sheath	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4287-00	Disp col sto bag breast milk	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9

A4335-00	Incontinence supply	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
0573T-00	Removal ss dfb electrode	NCOV	Not Covered	Code not covered	Code not cov	0 YYY	0	0	0	0	0
A4338-00	Indwelling catheter latex	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4340-00	Indwelling catheter special	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4344-00	Cath indw foley 2 way silicn	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4346-00	Cath indw foley 3 way	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4352-00	Coude tip urinary catheter	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4356-00	Ext ureth clmp or compr dvc	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4357-00	Bedside drainage bag	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4358-00	Urinary leg or abdomen bag	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4361-00	Ostomy face plate	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4362-00	Solid skin barrier	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4364-00	Adhesive, liquid or equal	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4367-00	Ostomy belt	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4368-00	Ostomy filter	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4398-00	Ostomy irrigation bag	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4399-00	Ostomy irrig cone/cath w brs	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4400-00	Ostomy irrigation set	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4402-00	Lubricant per ounce	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4404-00	Ostomy ring each	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4421-00	Ostomy supply misc	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4457-00	Enema tube any type repl	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4461-00	Surgicl dress hold non-reuse	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4463-00	Surgical dress holder reuse	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4468-00	Exsuff belt incl all sup acc	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4540-00	Trans elec nerv periph nerv	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4559-00	Coupling gel or paste	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4570-00	Splint	RMCD	Covered			9 XXX	13.45	9	9	9	9
A4627-00	Spacer bag/reservoir	RMCD	Covered			9 XXX	23.70	9	9	9	9
A4648-00	Implantable tissue marker	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
A4649-00	Surgical supplies	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A4650-00	Implant radiation dosimeter	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
A5051-00	Pouch clsd w barr attached	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A5052-00	Clsd ostomy pouch w/o barr	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A5053-00	Clsd ostomy pouch faceplate	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A5054-00	Clsd ostomy pouch w/flange	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A5055-00	Stoma cap	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A5061-00	Pouch drainable w barrier at	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A5062-00	Drnble ostomy pouch w/o barr	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A5063-00	Drain ostomy pouch w/flange	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A5071-00	Urinary pouch w/barrier	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A5072-00	Urinary pouch w/o barrier	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A5073-00	Urinary pouch on barr w/flng	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A5081-00	Stoma plug or seal, any type	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A5082-00	Continent stoma catheter	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A5083-00	Stoma absorptive cover	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A5093-00	Ostomy accessory convex inse	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A5102-00	Bedside drain btl w/wo tube	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A5105-00	Urinary suspensory	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A5112-00	Urinary leg bag	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A5113-00	Latex leg strap	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A5114-00	Foam/fabric leg strap	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A5121-00	Solid skin barrier 6x6	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A5122-00	Solid skin barrier 8x8	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9

A5126-00	Disk/foam pad +or- adhesive	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A5131-00	Appliance cleaner	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A6025-00	Silicone gel sheet, each	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A6412-00	Occlusive eye patch	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A6413-00	Adhesive bandage, first-aid	BSUP	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A7023-00	Mech allergen parti barrier	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
0574T-00	Repos prev ss impl dfb eltrd	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0575T-00	Prgrmg dev eval icds ss ip	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0576T-00	Interrog dev eval icds ss ip	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0577T-00	Ephys eval icds ss	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
A9156-00	Oral mucoadhesive per 1 ml	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
0578T-00	Rem interrog dev icds phys	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
A9268-00	Programmer orally ingest cap	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
A9269-00	Programable ingest capsule	BSVC	Covered	Bundled	Bundled	9 XXX	9	9	9	9	9
0579T-00	Rem interrog dev icds tech	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0580T-00	Rmvl ss impl dfb pg only	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0581T-00	Abltj mal brst tum perq crtx	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0582T-00	Trurl abltj mal prst8 tiss	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
A9500-00	Tc99m sestamibi	RMCD	Covered	121.58	121.58	0 XXX	0	0	0	0	0
A9501-00	Technetium tc-99m teboroxime	NBYR	Covered	By Report	By Report	0 XXX	0	0	0	0	0
0583T-00	Tmpst auto tube dlvr sys	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
A9503-00	Tc99m medronate	RMCD	Covered	14.82	14.82	0 XXX	0	0	0	0	0
A9504-00	Tc99m apcitide	RMCD	Covered	475.00	475.00	0 XXX	0	0	0	0	0
A9505-00	Tl201 thallium	RMCD	Covered	37.23	37.23	0 XXX	0	0	0	0	0
A9507-00	In111 capromab	RMCD	Covered	835.24	835.24	0 XXX	0	0	0	0	0
A9508-00	I131 iodobenguat, dx	RMCD	Covered	1325.25	1325.25	0 XXX	0	0	0	0	0
A9509-00	Iodine i-123 sod iodide mil	RMCD	Covered	204.90	204.90	0 XXX	0	0	0	0	0
A9510-00	Tc99m disofenin	RMCD	Covered	79.80	79.80	0 XXX	0	0	0	0	0
A9512-00	Tc99m pertechnetate	RMCD	Covered	1.78	1.78	0 XXX	0	0	0	0	0
A9516-00	Iodine i-123 sod iodide mic	RMCD	Covered	209.28	209.28	0 XXX	0	0	0	0	0
A9517-00	I131 iodide cap, rx	RMCD	Covered	40.70	40.70	0 XXX	0	0	0	0	0
A9521-00	Tc99m exametazime	RMCD	Covered	1742.79	1742.79	0 XXX	0	0	0	0	0
A9524-00	I131 serum albumin, dx	RMCD	Covered	118.09	118.09	0 XXX	0	0	0	0	0
A9526-00	Nitrogen n-13 ammonia	RMCD	Covered	751.26	751.26	0 XXX	0	0	0	0	0
A9527-00	Iodine i-125 sodium iodide	NBYR	Covered	By Report	By Report	0 XXX	0	0	0	0	0
A9528-00	Iodine i-131 iodide cap, dx	NBYR	Covered	By Report	By Report	0 XXX	0	0	0	0	0
A9529-00	I131 iodide sol, dx	NBYR	Covered	By Report	By Report	0 XXX	0	0	0	0	0
A9530-00	I131 iodide sol, rx	NBYR	Covered	By Report	By Report	0 XXX	0	0	0	0	0
A9531-00	I131 max 100Uci	NBYR	Covered	By Report	By Report	0 XXX	0	0	0	0	0
A9532-00	I125 serum albumin, dx	NBYR	Covered	By Report	By Report	0 XXX	0	0	0	0	0
A9536-00	Tc99m depreotide	RMCD	Covered	809.63	809.63	0 XXX	0	0	0	0	0
A9537-00	Tc99m mebrotfenin	RMCD	Covered	63.06	63.06	0 XXX	0	0	0	0	0
A9538-00	Tc99m pyrophosphate	RMCD	Covered	73.02	73.02	0 XXX	0	0	0	0	0
A9539-00	Tc99m pentetate	RMCD	Covered	35.72	35.72	0 XXX	0	0	0	0	0
A9540-00	Tc99m maa	RMCD	Covered	34.20	34.20	0 XXX	0	0	0	0	0
A9541-00	Tc99m sulfur colloid	RMCD	Covered	304.80	304.80	0 XXX	0	0	0	0	0
A9542-00	In111 ibritumomab, dx	RMCD	Covered	3990.00	3990.00	0 XXX	0	0	0	0	0
A9543-00	Y90 ibritumomab, rx	RMCD	Covered	70418.21	70418.21	0 XXX	0	0	0	0	0
A9546-00	Co57/58	NBYR	Covered	By Report	By Report	0 XXX	0	0	0	0	0
A9547-00	In111 oxyquinoline	RMCD	Covered	2221.93	2221.93	0 XXX	0	0	0	0	0
A9548-00	In111 pentetate	RMCD	Covered	890.19	890.19	0 XXX	0	0	0	0	0
A9550-00	Tc99m gluceptate	NBYR	Covered	By Report	By Report	0 XXX	0	0	0	0	0
A9551-00	Tc99m succimer	RMCD	Covered	683.33	683.33	0 XXX	0	0	0	0	0
A9552-00	F18 fdg	RMCD	Covered	250.00	250.00	0 XXX	0	0	0	0	0

A9553-00	Cr51 chromate	RMCD	Covered	455.42	455.42	0 XXX	0	0	0	0	0
A9554-00	I125 iothalamate, dx	RMCD	Covered	39.90	39.90	0 XXX	0	0	0	0	0
A9555-00	Rb82 rubidium	RMCD	Covered	520.75	520.75	0 XXX	0	0	0	0	0
A9556-00	Ga67 gallium	RMCD	Covered	153.92	153.92	0 XXX	0	0	0	0	0
A9557-00	Tc99m bicisate	RMCD	Covered	3722.82	3722.82	0 XXX	0	0	0	0	0
A9558-00	Xe133 xenon 10mci	RMCD	Covered	263.78	263.78	0 XXX	0	0	0	0	0
A9559-00	Co57 cyano	RMCD	Covered	88.97	88.97	0 XXX	0	0	0	0	0
A9560-00	Tc99m labeled rbc	RMCD	Covered	106.48	106.48	0 XXX	0	0	0	0	0
A9561-00	Tc99m oxidronate	RMCD	Covered	50.16	50.16	0 XXX	0	0	0	0	0
A9562-00	Tc99m mertiatide	RMCD	Covered	883.24	883.24	0 XXX	0	0	0	0	0
A9563-00	P32 na phosphate	RMCD	Covered	347.56	347.56	0 XXX	0	0	0	0	0
A9564-00	P32 chromic phosphate	RMCD	Covered	331.13	331.13	0 XXX	0	0	0	0	0
A9566-00	Tc99m fanolesomab	NBYR	Covered	By Report	By Report	0 XXX	0	0	0	0	0
A9567-00	Technetium tc-99m aerosol	NBYR	Covered	By Report	By Report	0 XXX	0	0	0	0	0
A9568-00	Technetium tc99m arcitumomab	RMCD	Covered	1235.00	1235.00	0 XXX	0	0	0	0	0
A9569-00	Technetium tc-99m auto wbc	RMCD	Covered	1742.79	1742.79	0 XXX	0	0	0	0	0
A9570-00	Indium in-111 auto wbc	RMCD	Covered	4443.84	4443.84	0 XXX	0	0	0	0	0
A9571-00	Indium in-111 auto platelet	RMCD	Covered	4443.84	4443.84	0 XXX	0	0	0	0	0
A9572-00	Indium in-111 pentetreotide	RMCD	Covered	6470.64	6470.64	0 XXX	0	0	0	0	0
A9573-00	Inj, gadopliclenol, 1 ml	Medicare Part B	Covered	12.59	12.59	9 XXX	9	9	9	9	9
0584T-00	Perq islet cell transplant	NCOV	Not Covered	Code not covered	Code not cov	0 YYY	0	0	0	0	0
A9587-00	Gallium ga-68	Medicare Part B	Covered	63.34	63.34	9 XXX	9	9	9	9	9
A9596-00	Gallium illucix 1 millicure	Medicare Part B	Covered	1121.76	1121.76	9 XXX	9	9	9	9	9
A9600-00	Sr89 strontium	RMCD	Covered	4275.00	4275.00	0 XXX	0	0	0	0	0
A9601-00	Flortaucipir inj 1 millicuri	DNB FS	Covered	DNB FS	DNB FS	9 XXX	9	9	9	9	9
A9602-00	Fluorodopa f-18 diag per mci	Medicare Part B	Covered	578.71	578.71	9 XXX	9	9	9	9	9
A9603-00	Inj, pafolacianine, 0.1 mg	DNB FS	Covered	DNB FS	DNB FS	9 XXX	9	9	9	9	9
A9607-00	Lutetium lu 177 vipivotide	Medicare Part B	Covered	259.45	259.45	9 XXX	9	9	9	9	9
A9608-00	Flotufolastat f18 diag 1 mci	Medicare Part B	Covered	700.85	700.85	9 XXX	9	9	9	9	9
A9609-00	F18 fdg, 15 millicuries	DNB FS	Covered	DNB FS	DNB FS	9 XXX	9	9	9	9	9
A9697-00	Inj, magtrace per study dose	DNB FS	Covered	DNB FS	DNB FS	9 XXX	9	9	9	9	9
A9698-00	Non-rad contrast materialnoc	Medicare Part B	Covered	11.51	11.51	9 XXX	9	9	9	9	9
0585T-00	Laps islet cell transplant	NCOV	Not Covered	Code not covered	Code not cov	0 YYY	0	0	0	0	0
A9700-00	Echocardiography contrast	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
A9800-00	Gallium locametz 1 millicuri	Medicare Part B	Covered	939.36	939.36	9 XXX	9	9	9	9	9
A9900-00	Supply/accessory/service	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
G0011-00	Hiv prep counsel, md 15-30m	RCMS	Covered	47.54	39.78	0 XXX	0	0	0	0	0
G0012-00	Injection of hiv prep drug	RCMS	Covered	26.55	26.55	5 XXX	0	0	0	0	0
G0013-00	Hiv prep counsel, clin staff	RCMS	Covered	43.97	15.52	0 XXX	0	0	0	0	0
G0017-00	Crisis psychotherapy 60m	RCMS	Covered	384.69	333.59	0 XXX	0	0	0	0	0
G0018-00	Crisis psychotherapy add 30m	RCMS	Covered	188.42	165.13	0 ZZZ	0	0	0	0	0
G0019-00	Comm hlth intg svcs doh 60mn	RCMS	Covered	148.43	88.28	0 XXX	0	0	0	0	0
G0022-00	Comm hlth intg svcs add 30 m	RCMS	Covered	91.94	61.54	0 ZZZ	0	0	0	0	0
G0023-00	Pin service 60m per month	RCMS	Covered	148.43	88.28	0 XXX	0	0	0	0	0
G0024-00	Pin srv add 30 min pr m	RCMS	Covered	91.94	61.54	0 ZZZ	0	0	0	0	0
G0105-00	Colorectal scrn; hi risk ind	RCMS	Covered	621.19	314.60	0 000	2	0	1	0	0
G0105-53	Colorectal scrn; hi risk ind	RCMS	Covered	310.27	157.63	0 000	2	0	1	0	0
G0108-00	Diab manage trn per indiv	RCMS	Covered	99.52	99.52	0 XXX	0	0	0	0	0
G0121-00	Colon ca scrn not hi rsk ind	RCMS	Covered	621.23	314.65	0 000	2	0	1	0	0
G0121-53	Colon ca scrn not hi rsk ind	RCMS	Covered	310.32	157.67	0 000	2	0	1	0	0
G0136-00	Adm of soc dtr assess 5-15 m	RCMS	Covered	35.57	16.16	0 XXX	0	0	0	0	0
0586T-00	Open islet cell transplant	NCOV	Not Covered	Code not covered	Code not cov	0 YYY	0	0	0	0	0
G0140-00	Nav srv peer sup 60 min pr m	RCMS	Covered	148.43	88.28	0 XXX	0	0	0	0	0
G0146-00	Nav srv peer sup add 30 pr m	RCMS	Covered	91.94	61.54	0 ZZZ	0	0	0	0	0

G0279-00	Tomosynthesis, mammo	RCMS	Covered	87.71	87.71	1 ZZZ	0	2	9	0	0
G0279-26	Tomosynthesis, mammo	RCMS	Covered	50.19	50.19	1 ZZZ	0	2	9	0	0
G0279-TC	Tomosynthesis, mammo	RCMS	Covered	37.51	37.51	1 ZZZ	0	2	9	0	0
G0316-00	Prolong inpt eval add15 m	RCMS	Covered	56.67	53.43	0 ZZZ	0	0	0	0	0
0589T-00	Elec alys smpl prgrmg iins	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
G0500-00	Mod sedat endo service >5yrs	R26C	Covered	109.06	8.81	9 XXX	9	9	9	9	9
G2212-00	Prolong outpt/office vis	RCMS	Covered	57.36	54.77	0 XXX	0	0	0	0	0
G6002-00	Stereoscopic x-ray guidance	RCMS	Covered	142.86	142.86	1 XXX	0	0	0	0	0
G6002-TC	Stereoscopic x-ray guidance	RCMS	Covered	106.12	106.12	1 XXX	0	0	0	0	0
G6002-26	Stereoscopic x-ray guidance	RCMS	Covered	36.73	36.73	1 XXX	0	0	0	0	0
G6003-00	Radiation treatment delivery	R26C	Covered	298.22	298.22	3 XXX	0	0	0	0	0
G6013-00	Radiation treatment delivery	R26C	Covered	446.39	446.39	3 XXX	0	0	0	0	0
G6014-00	Radiation treatment delivery	R26C	Covered	443.15	443.15	3 XXX	0	0	0	0	0
G6015-00	Radiation tx delivery imrt	R26C	Covered	687.18	687.18	3 XXX	0	0	0	0	0
J1440-00	Fecal microbiota jsml 1 ml	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
J1811-00	Fiasp for insulin pump use	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
J1813-00	Lyumjev for insulin pump use	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
0590T-00	Elec alys cplx prgrmg iins	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0591T-00	Hlth&wb coaching indiv 1st	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0592T-00	Hlth&wb coaching indiv f-up	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0593T-00	Hlth&wb coaching group	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0594T-00	Osteot hum xtrnl lngth dev	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
P3000-00	Screen pap by tech w md supv	LCMS	Covered	17.76	17.76	9 XXX	9	9	9	9	9
P3001-00	Screening pap smear by phys	R26C	Covered	44.96	44.96	0 XXX	0	0	0	0	0
0596T-00	Temp fml iu vlv-pmp 1st insj	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
P9010-00	Whole blood for transfusion	RMCD	Covered	55.11	55.11	9 XXX	9	9	9	9	9
P9011-00	Blood split unit	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
P9012-00	Cryoprecipitate each unit	RMCD	Covered	26.20	26.20	9 XXX	9	9	9	9	9
P9016-00	Rbc leukocytes reduced	RMCD	Covered	45.53	45.53	9 XXX	9	9	9	9	9
P9017-00	Plasma 1 donor frz w/in 8 hr	RMCD	Covered	47.82	47.82	9 XXX	9	9	9	9	9
P9019-00	Platelets, each unit	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
P9020-00	Plaelet rich plasma unit	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
P9021-00	Red blood cells unit	RMCD	Covered	66.64	66.64	9 XXX	9	9	9	9	9
P9022-00	Washed red blood cells unit	RMCD	Covered	20.50	20.50	9 XXX	9	9	9	9	9
P9023-00	Frozen plasma, pooled, sd	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
P9025-00	Plasma cryo redu path each	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
P9026-00	Cryo fib comp path redu each	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
P9031-00	Platelets leukocytes reduced	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
P9032-00	Platelets, irradiated	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
P9033-00	Platelets leukoreduced irrads	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
P9034-00	Platelets, pheresis	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
P9035-00	Platelet pheres leukoreduced	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
P9036-00	Platelet pheresis irradiated	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
P9037-00	Plate pheres leukoredu irrads	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
P9038-00	Rbc irradiated	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
P9039-00	Rbc deglycerolized	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
P9040-00	Rbc leukoreduced irradiated	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
P9050-00	Granulocytes, pheresis unit	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
P9073-00	Platelets pheresis path redu	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
P9099-00	Blood component/product noc	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
P9100-00	Pathogen test for platelets	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
0597T-00	Temp fml iu valve-pmp rplcmt	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0598T-00	Ncntc r-t fluor wnd img 1st	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
P9612-00	Catheterize for urine spec	LCMS	Covered	8.83	8.83	9 XXX	9	9	9	9	9

0599T-00	Ncntc r-t fluor wnd img ea	NCOV	Not Covered	Code not covered	Code not co	0 ZZZ	0	0	0	0	0
Q0035-00	Cardiokymography	R26C	Covered	32.42	32.42	1 XXX	0	0	0	0	0
Q0035-26	Cardiokymography	R26C	Covered	14.26	14.26	1 XXX	0	0	0	0	0
Q0035-TC	Cardiokymography	R26C	Covered	18.16	18.16	1 XXX	0	0	0	0	0
0600T-00	Ire abltj 1+tum organ perq	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0601T-00	Ire abltj 1+tumors open	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0602T-00	Transdermal gfr measurements	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0603T-00	Transdermal gfr monitoring	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
Q0091-00	Obtaining screen pap smear	R26C	Covered	83.38	32.28	0 XXX	0	0	0	0	0
Q0092-00	Set up port xray equipment	R26C	Covered	49.85	49.85	3 XXX	0	0	0	0	0
Q0111-00	Wet mounts/ w preparations	LCMS	Covered	17.76	17.76	9 XXX	9	9	9	9	9
Q0112-00	Potassium hydroxide preps	LCMS	Covered	5.83	5.83	9 XXX	9	9	9	9	9
Q0113-00	Pinworm examinations	LCMS	Covered	4.27	4.27	9 XXX	9	9	9	9	9
Q0114-00	Fern test	LCMS	Covered	9.74	9.74	9 XXX	9	9	9	9	9
Q0115-00	Post-coital mucous exam	LCMS	Covered	25.00	25.00	9 XXX	9	9	9	9	9
0604T-00	Rem oct rta dev setup&educaj	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0605T-00	Rem oct rta techl sprt min 8	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0606T-00	Rem oct rta phys/qhp ea 30d	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0607T-00	Rem mntr pulm flu mntr setup	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0608T-00	Rem mntr pulm flu mntr alys	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0609T-00	Mrs disc pain acquijs data	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0610T-00	Mrs disc pain transmis data	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0611T-00	Mrs disc pain alg alys data	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0612T-00	Mrs discogenic pain i&r	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
Q0507-00	Misc sup/acc ext vad	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
Q0508-00	Mis sup/acc imp vad	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
Q0509-00	Mis sup/ac imp vad nopay med	NBYR	Covered	By Report	By Report	9 XXX	9	9	9	9	9
0613T-00	Perq tcat intratrnl septl sht	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0614T-00	Rmvl&rplcmt ss impl dfb pg	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0615T-00	Eye mvmt alys w/o calbrj i&r	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0616T-00	Insertion of iris prosthesis	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0617T-00	Insj iris prosth w/rmvl&insj	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0618T-00	Insj iris prosth sec io lens	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0619T-00	Cysto w/prst8 commissurotomy	NCOV	Not Covered	Code not covered	Code not co	0 YYY	0	0	0	0	0
0621T-00	Trabeculectomy interno laser	NCOV	Not Covered	Code not covered	Code not co	0 YYY	2	1	0	0	0
Q3014-00	Telehealth facility fee	RMCD	Covered	24.63	24.63	9 XXX	9	9	9	9	9
0622T-00	Trabeculectomy int lsr w/scp	NCOV	Not Covered	Code not covered	Code not co	0 YYY	2	1	0	0	0
Q4001-00	Cast sup body cast plaster	RMCD	Covered	58.20	58.20	9 XXX	9	9	9	9	9
Q4002-00	Cast sup body cast fiberglas	RMCD	Covered	219.89	219.89	9 XXX	9	9	9	9	9
Q4003-00	Cast sup shoulder cast plstr	RMCD	Covered	41.78	41.78	9 XXX	9	9	9	9	9
Q4004-00	Cast sup shoulder cast fbrgl	RMCD	Covered	144.67	144.67	9 XXX	9	9	9	9	9
Q4005-00	Cast sup long arm adult plst	RMCD	Covered	15.41	15.41	9 XXX	9	9	9	9	9
Q4006-00	Cast sup long arm adult fbrg	RMCD	Covered	34.72	34.72	9 XXX	9	9	9	9	9
Q4007-00	Cast sup long arm ped plster	RMCD	Covered	7.70	7.70	9 XXX	9	9	9	9	9
Q4008-00	Cast sup long arm ped fbrgls	RMCD	Covered	17.35	17.35	9 XXX	9	9	9	9	9
Q4009-00	Cast sup sht arm adult plstr	RMCD	Covered	10.29	10.29	9 XXX	9	9	9	9	9
Q4010-00	Cast sup sht arm adult fbrgl	RMCD	Covered	23.14	23.14	9 XXX	9	9	9	9	9
Q4011-00	Cast sup sht arm ped plaster	RMCD	Covered	5.13	5.13	9 XXX	9	9	9	9	9
Q4012-00	Cast sup sht arm ped fbrglas	RMCD	Covered	11.60	11.60	9 XXX	9	9	9	9	9
Q4013-00	Cast sup gauntlet plaster	RMCD	Covered	18.73	18.73	9 XXX	9	9	9	9	9
Q4014-00	Cast sup gauntlet fiberglass	RMCD	Covered	31.58	31.58	9 XXX	9	9	9	9	9
Q4015-00	Cast sup gauntlet ped plster	RMCD	Covered	9.38	9.38	9 XXX	9	9	9	9	9
Q4016-00	Cast sup gauntlet ped fbrgls	RMCD	Covered	15.78	15.78	9 XXX	9	9	9	9	9
Q4017-00	Cast sup lng arm splint plst	RMCD	Covered	10.82	10.82	9 XXX	9	9	9	9	9

Q4018-00	Cast sup lng arm splint fbrg	RMCD	Covered	17.25	17.25	9 XXX	9	9	9	9	9
Q4019-00	Cast sup lng arm splnt ped p	RMCD	Covered	5.42	5.42	9 XXX	9	9	9	9	9
Q4020-00	Cast sup lng arm splnt ped f	RMCD	Covered	8.66	8.66	9 XXX	9	9	9	9	9
Q4021-00	Cast sup sht arm splint plst	RMCD	Covered	8.01	8.01	9 XXX	9	9	9	9	9
Q4022-00	Cast sup sht arm splint fbrg	RMCD	Covered	14.46	14.46	9 XXX	9	9	9	9	9
Q4023-00	Cast sup sht arm splnt ped p	RMCD	Covered	4.03	4.03	9 XXX	9	9	9	9	9
Q4024-00	Cast sup sht arm splnt ped f	RMCD	Covered	7.24	7.24	9 XXX	9	9	9	9	9
Q4025-00	Cast sup hip spica plaster	RMCD	Covered	44.90	44.90	9 XXX	9	9	9	9	9
Q4026-00	Cast sup hip spica fiberglas	RMCD	Covered	140.27	140.27	9 XXX	9	9	9	9	9
Q4027-00	Cast sup hip spica ped plstr	RMCD	Covered	22.48	22.48	9 XXX	9	9	9	9	9
Q4028-00	Cast sup hip spica ped fbrgl	RMCD	Covered	70.18	70.18	9 XXX	9	9	9	9	9
Q4029-00	Cast sup long leg plaster	RMCD	Covered	34.36	34.36	9 XXX	9	9	9	9	9
Q4030-00	Cast sup long leg fiberglass	RMCD	Covered	90.44	90.44	9 XXX	9	9	9	9	9
Q4031-00	Cast sup lng leg ped plaster	RMCD	Covered	17.16	17.16	9 XXX	9	9	9	9	9
Q4032-00	Cast sup lng leg ped fbrgls	RMCD	Covered	45.22	45.22	9 XXX	9	9	9	9	9
Q4033-00	Cast sup lng leg cylinder pl	RMCD	Covered	32.06	32.06	9 XXX	9	9	9	9	9
Q4034-00	Cast sup lng leg cylinder fb	RMCD	Covered	79.69	79.69	9 XXX	9	9	9	9	9
Q4035-00	Cast sup lngleg cylndr ped p	RMCD	Covered	16.02	16.02	9 XXX	9	9	9	9	9
Q4036-00	Cast sup lngleg cylndr ped f	RMCD	Covered	39.87	39.87	9 XXX	9	9	9	9	9
Q4037-00	Cast sup shrt leg plaster	RMCD	Covered	19.52	19.52	9 XXX	9	9	9	9	9
Q4038-00	Cast sup shrt leg fiberglass	RMCD	Covered	48.97	48.97	9 XXX	9	9	9	9	9
Q4039-00	Cast sup shrt leg ped plster	RMCD	Covered	9.80	9.80	9 XXX	9	9	9	9	9
Q4040-00	Cast sup shrt leg ped fbrgls	RMCD	Covered	24.48	24.48	9 XXX	9	9	9	9	9
Q4041-00	Cast sup lng leg splnt plstr	RMCD	Covered	23.77	23.77	9 XXX	9	9	9	9	9
Q4042-00	Cast sup lng leg splnt fbrgl	RMCD	Covered	40.58	40.58	9 XXX	9	9	9	9	9
Q4043-00	Cast sup lng leg splnt ped p	RMCD	Covered	11.89	11.89	9 XXX	9	9	9	9	9
Q4044-00	Cast sup lng leg splnt ped f	RMCD	Covered	20.32	20.32	9 XXX	9	9	9	9	9
Q4045-00	Cast sup sht leg splnt plstr	RMCD	Covered	13.80	13.80	9 XXX	9	9	9	9	9
Q4046-00	Cast sup sht leg splnt fbrgl	RMCD	Covered	22.19	22.19	9 XXX	9	9	9	9	9
Q4047-00	Cast sup sht leg splnt ped p	RMCD	Covered	6.87	6.87	9 XXX	9	9	9	9	9
Q4048-00	Cast sup sht leg splnt ped f	RMCD	Covered	11.11	11.11	9 XXX	9	9	9	9	9
Q4049-00	Finger splint, static	RMCD	Covered	2.50	2.50	9 XXX	9	9	9	9	9
Q4262-00	Dual layer impax, per sq cm	DNB FS	Covered	DNB FS	DNB FS	9 XXX	9	9	9	9	9
Q4263-00	Surgraft tl, per sq cm	DNB FS	Covered	DNB FS	DNB FS	9 XXX	9	9	9	9	9
Q4264-00	Cocoon membrane, per sq cm	DNB FS	Covered	DNB FS	DNB FS	9 XXX	9	9	9	9	9
0623T-00	Auto quantification c plaque	NCOV	Not Covered	Code not covered	Code not co	4 XXX	0	0	0	0	0
0624T-00	Auto quan c plaq data prep	NCOV	Not Covered	Code not covered	Code not co	3 XXX	0	0	0	0	0
0625T-00	Auto quan c plaq cptr alys	NCOV	Not Covered	Code not covered	Code not co	3 XXX	0	0	0	0	0
0626T-00	Auto quan c plaq i&r	NCOV	Not Covered	Code not covered	Code not co	2 XXX	0	0	0	0	0
0631T-00	Tc vis lit hyperspectral img	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	0	0	0
0632T-00	Perq tcat us abltj nrv p-art	NCOV	Not Covered	Code not covered	Code not co	0 YYY	2	0	0	0	0
0639T-00	Wrls skn snr anisotropy meas	NCOV	Not Covered	Code not covered	Code not co	0 XXX	0	0	0	0	0
0640T-00	Ncntc ifr spctrsc o/t pad 1	NCOV	Not Covered	Code not covered	Code not co	4 XXX	0	0	0	0	0
0643T-00	Tcat l ventr rstrj dev implt	NCOV	Not Covered	Code not covered	Code not co	0 YYY	2	0	0	0	0
0644T-00	Tcat rml/dblk icar mas perq	NCOV	Not Covered	Code not covered	Code not co	0 YYY	2	0	0	0	0
0645T-00	Tcat impltj c sins rdctj dev	NCOV	Not Covered	Code not covered	Code not co	0 YYY	2	0	0	0	0
0646T-00	Ttvi/rplcmt w/prstc vlv perq	NCOV	Not Covered	Code not covered	Code not co	0 YYY	2	0	2	2	1
0647T-00	Insj gtube perq mag gastrpxy	NCOV	Not Covered	Code not covered	Code not co	0 YYY	2	0	0	0	0
0648T-00	Quan mr tis wo mri 1orgn	NCOV	Not Covered	Code not covered	Code not co	1 XXX	4	3	0	0	0
0648T-26	Quan mr tis wo mri 1orgn	NCOV	Not Covered	Code not covered	Code not co	1 XXX	4	3	0	0	0
0648T-TC	Quan mr tis wo mri 1orgn	NCOV	Not Covered	Code not covered	Code not co	1 XXX	4	3	0	0	0
0649T-00	Quan mr tiss w/mri 1orgn	NCOV	Not Covered	Code not covered	Code not co	1 ZZZ	0	0	0	0	0
0649T-26	Quan mr tiss w/mri 1orgn	NCOV	Not Covered	Code not covered	Code not co	1 ZZZ	0	0	0	0	0
0649T-TC	Quan mr tiss w/mri 1orgn	NCOV	Not Covered	Code not covered	Code not co	1 ZZZ	0	0	0	0	0

0650T-00	Prgmrg dev eval scrms remote	NCOV	Not Covered	Code not covered Code not co	1 XXX	0	0	0	0	0
0650T-26	Prgmrg dev eval scrms remote	NCOV	Not Covered	Code not covered Code not co	1 XXX	0	0	0	0	0
0650T-TC	Prgmrg dev eval scrms remote	NCOV	Not Covered	Code not covered Code not co	1 XXX	0	0	0	0	0
0651T-00	Mag ctrlrd capsule endoscopy	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0652T-00	Egd flx transnasal dx br/wa	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	1	0	0
0653T-00	Egd flx transnasal bx 1/mlt	NCOV	Not Covered	Code not covered Code not co	0 YYY	3	0	1	0	0 0652T
0654T-00	Egd flx transnasal tube/cath	NCOV	Not Covered	Code not covered Code not co	0 YYY	3	0	1	0	0 0652T
0655T-00	Tprnl focal abltj mal prst8	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	1	0	0
0656T-00	Vrt bdy tethering ant <7 seg	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	2	0	0
0657T-00	Vrt bdy tethering ant 8+ seg	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	2	0	0
0658T-00	Elec impd spectrsc 1+skn les	NCOV	Not Covered	Code not covered Code not co	0 XXX	2	0	0	0	0
0659T-00	Tcat intra-c nfs supersat o2	NCOV	Not Covered	Code not covered Code not co	0 YYY	9	0	0	0	0
0660T-00	Implt ant sgm io nbio rx sys	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	1	1	0	0
0661T-00	Rmvl&rimpltj ant sgm implt	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	1	1	0	0
0662T-00	Scalp cool 1st meas&calbrj	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0663T-00	Scalp cool plmt mntr rmvl	NCOV	Not Covered	Code not covered Code not co	0 ZZZ	0	0	0	0	0
0664T-00	Don hysterectomy open cdvr	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0665T-00	Don hysterectomy open liv	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0666T-00	Don hysterectomy laps liv	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0667T-00	Don hysterectomy rcp uter	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0668T-00	Bkbench prep don uter algrft	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	2	1	0
0669T-00	Bkbench rcnstj don uter ven	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	2	1	0
0670T-00	Bkbench rcnstj don uter artl	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	2	1	0
0672T-00	Ndovag cryg rf remdl tiss	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	1	0	0
0674T-00	Laps insj nw/rpcmt prm isdss	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	1	0	0
0675T-00	Laps insj nw/rpcmt isdss 1ld	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	1	0	0
0676T-00	Laps insj nw/rpcmt isdss ea	NCOV	Not Covered	Code not covered Code not co	0 ZZZ	0	0	1	0	0
0677T-00	Laps repos lead isdss 1st ld	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	1	0	0
0678T-00	Laps repos lead isdss ea add	NCOV	Not Covered	Code not covered Code not co	0 ZZZ	0	0	1	0	0
0679T-00	Laps rmvl lead isdss	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	1	0	0
0680T-00	Insj/rplcmt pg only isdss	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	1	0	0
Q5131-00	Inj, idacio, 20 mg	DNB FS	Covered	DNB FS DNB FS	9 XXX	9	9	9	9	9
Q5132-00	Inj, abrilada, 10 mg	DNB FS	Covered	DNB FS DNB FS	9 XXX	9	9	9	9	9
0681T-00	Rlcj pulse gen only isdss	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	1	0	0
0682T-00	Removal pulse gen only isdss	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	1	0	0
0683T-00	Prgmrg dev eval isdss ip	NCOV	Not Covered	Code not covered Code not co	1 XXX	6	0	0	0	0
0683T-26	Prgmrg dev eval isdss ip	NCOV	Not Covered	Code not covered Code not co	1 XXX	6	0	0	0	0
R0070-00	Transport portable x-ray	RMCD	Covered	121.38 121.38	3 XXX	0	0	0	0	0
0683T-TC	Prgmrg dev eval isdss ip	NCOV	Not Covered	Code not covered Code not co	1 XXX	6	0	0	0	0
R0076-00	Transport portable ekg	BSVC	Covered	Bundled Bundled	9 XXX	9	9	9	9	9
0684T-00	Peri-px dev eval isdss ip	NCOV	Not Covered	Code not covered Code not co	1 XXX	6	0	0	0	0
0684T-26	Peri-px dev eval isdss ip	NCOV	Not Covered	Code not covered Code not co	1 XXX	6	0	0	0	0
0684T-TC	Peri-px dev eval isdss ip	NCOV	Not Covered	Code not covered Code not co	1 XXX	6	0	0	0	0
0685T-00	Interrog dev eval isdss ip	NCOV	Not Covered	Code not covered Code not co	1 XXX	6	0	0	0	0
0685T-26	Interrog dev eval isdss ip	NCOV	Not Covered	Code not covered Code not co	1 XXX	6	0	0	0	0
0685T-TC	Interrog dev eval isdss ip	NCOV	Not Covered	Code not covered Code not co	1 XXX	6	0	0	0	0
0687T-00	Tx amblyopia dev setup 1st	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0688T-00	Tx amblyopia assmt w/report	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0690T-00	Quan us tis charac w/dx us	NCOV	Not Covered	Code not covered Code not co	1 ZZZ	0	0	0	0	0
0690T-26	Quan us tis charac w/dx us	NCOV	Not Covered	Code not covered Code not co	1 ZZZ	0	0	0	0	0
0690T-TC	Quan us tis charac w/dx us	NCOV	Not Covered	Code not covered Code not co	1 ZZZ	0	0	0	0	0
0691T-00	Auto alys xst ct std vrt fx	NCOV	Not Covered	Code not covered Code not co	1 XXX	0	0	0	0	0
0691T-26	Auto alys xst ct std vrt fx	NCOV	Not Covered	Code not covered Code not co	1 XXX	0	0	0	0	0
0691T-TC	Auto alys xst ct std vrt fx	NCOV	Not Covered	Code not covered Code not co	1 XXX	0	0	0	0	0

0692T-00	Therapeutic ultrafiltration	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	1	0	0
0693T-00	Compre ful bdy 3d mtn alys	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0694T-00	3d vol img&rcnstj brst/ax	NCOV	Not Covered	Code not covered Code not co	1 XXX	0	0	0	0	0
0694T-26	3d vol img&rcnstj brst/ax	NCOV	Not Covered	Code not covered Code not co	1 XXX	0	0	0	0	0
0694T-TC	3d vol img&rcnstj brst/ax	NCOV	Not Covered	Code not covered Code not co	1 XXX	0	0	0	0	0
0695T-00	Bdy srf mpg pm/cvdfb tm impl	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0696T-00	Bdy surf mapg pm/cvdfb f/up	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0698T-00	Quan mr tiss w/mri mlt orgn	NCOV	Not Covered	Code not covered Code not co	1 ZZZ	0	0	0	0	0
0698T-26	Quan mr tiss w/mri mlt orgn	NCOV	Not Covered	Code not covered Code not co	1 ZZZ	0	0	0	0	0
0698T-TC	Quan mr tiss w/mri mlt orgn	NCOV	Not Covered	Code not covered Code not co	1 ZZZ	0	0	0	0	0
0700T-00	Molec fluor img sus nev 1st	NCOV	Not Covered	Code not covered Code not co	1 XXX	0	0	0	0	0
0700T-26	Molec fluor img sus nev 1st	NCOV	Not Covered	Code not covered Code not co	1 XXX	0	0	0	0	0
0700T-TC	Molec fluor img sus nev 1st	NCOV	Not Covered	Code not covered Code not co	1 XXX	0	0	0	0	0
0701T-00	Molec fluor img sus nev ea	NCOV	Not Covered	Code not covered Code not co	1 ZZZ	0	3	0	0	0
0701T-26	Molec fluor img sus nev ea	NCOV	Not Covered	Code not covered Code not co	1 ZZZ	0	3	0	0	0
0701T-TC	Molec fluor img sus nev ea	NCOV	Not Covered	Code not covered Code not co	1 ZZZ	0	3	0	0	0
0704T-00	Rem tx amblyopia setup&edu	NCOV	Not Covered	Code not covered Code not co	3 XXX	9	2	9	9	9
0705T-00	Rem tx amblyopia tech sprt	NCOV	Not Covered	Code not covered Code not co	3 XXX	9	2	9	9	9
0706T-00	Rem tx amblyopia i&r phy/qhp	NCOV	Not Covered	Code not covered Code not co	2 XXX	9	2	9	9	9
0708T-00	Id ca immntx prep & 1st njx	NCOV	Not Covered	Code not covered Code not co	0 XXX	2	0	1	0	0
0709T-00	Id ca immntx each addl njx	NCOV	Not Covered	Code not covered Code not co	0 ZZZ	0	0	1	0	0
0710T-00	N-invas artl plaq alys	NCOV	Not Covered	Code not covered Code not co	4 XXX	9	9	9	9	9
0711T-00	N-nvs artl plaq alys dat prp	NCOV	Not Covered	Code not covered Code not co	3 XXX	9	9	9	9	9
0712T-00	N-nvs artl plaq alys quan	NCOV	Not Covered	Code not covered Code not co	3 XXX	9	9	9	9	9
0713T-00	N-nvs artl plaq alys rvw i&r	NCOV	Not Covered	Code not covered Code not co	2 XXX	9	9	9	9	9
0714T-00	Tprnl lsr ablt b9 prst8 hyp	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	1	0	0
0716T-00	Car acous wavfrm rec cad rsk	NCOV	Not Covered	Code not covered Code not co	3 XXX	6	0	0	0	0
0717T-00	Adrc ther prtl rc tear	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	1	0	0	0
0718T-00	Adrc ther prtl rc tear njx	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	1	0	0	0
0719T-00	Pst vrt jt rplcmt lmr 1 sgm	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	2	0	0
0720T-00	Prq elc nrv stim cn wo implt	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	1	0	0
0721T-00	Quan ct tiss charac w/o ct	NCOV	Not Covered	Code not covered Code not co	1 XXX	4	3	0	0	0
0721T-26	Quan ct tiss charac w/o ct	NCOV	Not Covered	Code not covered Code not co	1 XXX	4	3	0	0	0
0721T-TC	Quan ct tiss charac w/o ct	NCOV	Not Covered	Code not covered Code not co	1 XXX	4	3	0	0	0
0722T-00	Quan ct tiss charac w/ct	NCOV	Not Covered	Code not covered Code not co	1 ZZZ	0	0	0	0	0
0722T-26	Quan ct tiss charac w/ct	NCOV	Not Covered	Code not covered Code not co	1 ZZZ	0	0	0	0	0
0722T-TC	Quan ct tiss charac w/ct	NCOV	Not Covered	Code not covered Code not co	1 ZZZ	0	0	0	0	0
0723T-00	Qmrpc w/o dx mri sm anat ses	NCOV	Not Covered	Code not covered Code not co	1 XXX	4	3	0	0	0
0723T-26	Qmrpc w/o dx mri sm anat ses	NCOV	Not Covered	Code not covered Code not co	1 XXX	4	3	0	0	0
0723T-TC	Qmrpc w/o dx mri sm anat ses	NCOV	Not Covered	Code not covered Code not co	1 XXX	4	3	0	0	0
0724T-00	Qmrpc w/dx mri same anatomy	NCOV	Not Covered	Code not covered Code not co	1 ZZZ	0	0	0	0	0
0724T-26	Qmrpc w/dx mri same anatomy	NCOV	Not Covered	Code not covered Code not co	1 ZZZ	0	0	0	0	0
0724T-TC	Qmrpc w/dx mri same anatomy	NCOV	Not Covered	Code not covered Code not co	1 ZZZ	0	0	0	0	0
0725T-00	Vestibular dev impltj uni	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	1	0	0	0
0726T-00	Rmvl implt vstibular dev uni	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	1	0	0	0
0727T-00	Rmvl&rplcmt implt vstblr dev	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	1	0	0	0
0728T-00	Dx alys vstblr implt uni 1st	NCOV	Not Covered	Code not covered Code not co	7 XXX	0	1	0	0	0
0729T-00	Dx alys vstblr implt uni sbq	NCOV	Not Covered	Code not covered Code not co	7 XXX	0	1	0	0	0
0730T-00	Trabeculotomy lsr w/oct gdn	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	1	1	0	0
0731T-00	Augmnt ai-based fcl phnt a/r	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0732T-00	Immntx admn electroporatrni	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0733T-00	Rem r-t mtn nrehab ther sply	NCOV	Not Covered	Code not covered Code not co	3 XXX	0	0	0	0	0
0734T-00	Rem r-t mtn nrehab tx mgmt	NCOV	Not Covered	Code not covered Code not co	2 XXX	0	0	0	0	0
0735T-00	Prep tum cav iort prim crnot	NCOV	Not Covered	Code not covered Code not co	0 ZZZ	0	0	2	1	0

0736T-00	Colonic lavage 35+I water	NCOV	Not Covered	Code not covered Code not co	0 XXX	2	0	1	0	0
0737T-00	Xenograft impltj artclr surf	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	1	1	0	0
0741T-00	Rem auton alg nsln data coll	NCOV	Not Covered	Code not covered Code not co	3 XXX	0	0	0	0	0
0742T-00	Aqmbf spect xers/strs & rest	NCOV	Not Covered	Code not covered Code not co	1 ZZZ	0	0	0	0	0
0742T-26	Aqmbf spect xers/strs & rest	NCOV	Not Covered	Code not covered Code not co	1 ZZZ	0	0	0	0	0
0742T-TC	Aqmbf spect xers/strs & rest	NCOV	Not Covered	Code not covered Code not co	1 ZZZ	0	0	0	0	0
0743T-00	B1 str & fx rsk vrt fx assmt	NCOV	Not Covered	Code not covered Code not co	1 XXX	0	0	0	0	0
S1091-00	Stent non-coronary propel	NBYR	Covered	By Report By Report	9 XXX	9	9	9	9	9
0743T-26	B1 str & fx rsk vrt fx assmt	NCOV	Not Covered	Code not covered Code not co	1 XXX	0	0	0	0	0
0743T-TC	B1 str & fx rsk vrt fx assmt	NCOV	Not Covered	Code not covered Code not co	1 XXX	0	0	0	0	0
0744T-00	Insj bioprostc vlv fem vn	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	1	2	1	0
0745T-00	Car ablt rad arr n-invas loc	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	0	0	0
0746T-00	Car ablt rad arr cnv loc map	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0747T-00	Car ablt rad arrhyt dlvr rad	NCOV	Not Covered	Code not covered Code not co	3 XXX	0	0	0	0	0
S2066-00	Breast gap flap reconst	RMCD	Covered	1564.72 1564.72	9 XXX	9	9	9	9	9
S2067-00	Breast "stacked" diep/gap	RMCD	Covered	780.13 780.13	9 XXX	9	9	9	9	9
S2068-00	Breast diep or siea flap	NBYR	Covered	By Report By Report	9 XXX	9	9	9	9	9
0748T-00	Njx stm cl prdct anl sft tis	NCOV	Not Covered	Code not covered Code not co	0 YYY	2	0	0	0	0
0749T-00	B1 str&fx rsk assmt dxr-bmd	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0750T-00	B1 str&fx rsk asmt dxrbmd1vw	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0751T-00	Dgtz gls mcrcsc sld level ii	NCOV	Not Covered	Code not covered Code not co	3 ZZZ	0	0	0	0	0
0752T-00	Dgtz gls mcrcsc sld lvl iii	NCOV	Not Covered	Code not covered Code not co	3 ZZZ	0	0	0	0	0
0753T-00	Dgtz gls mcrcsc sld level iv	NCOV	Not Covered	Code not covered Code not co	3 ZZZ	0	0	0	0	0
0754T-00	Dgtz gls mcrcsc sld level v	NCOV	Not Covered	Code not covered Code not co	3 ZZZ	0	0	0	0	0
0755T-00	Dgtz gls mcrcsc sld level vi	NCOV	Not Covered	Code not covered Code not co	3 ZZZ	0	0	0	0	0
0756T-00	Dgtz gls mcrcsc sld spc grpi	NCOV	Not Covered	Code not covered Code not co	3 ZZZ	0	0	0	0	0
0757T-00	Dgtz gls mcrcsc sl spc grpii	NCOV	Not Covered	Code not covered Code not co	3 ZZZ	0	0	0	0	0
0758T-00	Dgtz gls mcrcsc sl spc hchem	NCOV	Not Covered	Code not covered Code not co	3 ZZZ	0	0	0	0	0
0759T-00	Dgtz gls mcrcsc sl sp grpiii	NCOV	Not Covered	Code not covered Code not co	3 ZZZ	0	0	0	0	0
0760T-00	Dgtz gls mcrcsc sl imm 1st	NCOV	Not Covered	Code not covered Code not co	3 ZZZ	0	0	0	0	0
0761T-00	Dgtz gls mcrcsc sl imm ea 1	NCOV	Not Covered	Code not covered Code not co	3 ZZZ	0	0	0	0	0
0762T-00	Dgtz gls mcrcsc sl imm ea m	NCOV	Not Covered	Code not covered Code not co	3 ZZZ	0	0	0	0	0
0763T-00	Dgtz gls mcrcsc mphmtrc alys	NCOV	Not Covered	Code not covered Code not co	3 ZZZ	0	0	0	0	0
0764T-00	Asstv alg ecg rsk asmt cnrct	NCOV	Not Covered	Code not covered Code not co	3 ZZZ	0	0	0	0	0
0765T-00	Asstv alg ecg rsk asmt prev	NCOV	Not Covered	Code not covered Code not co	3 XXX	0	0	0	0	0
0766T-00	Tc mag stimj pn 1st nerve	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0767T-00	Tc mag stimj pn ea addl nrv	NCOV	Not Covered	Code not covered Code not co	0 ZZZ	0	0	0	0	0
0770T-00	Vr technology assist therapy	NCOV	Not Covered	Code not covered Code not co	3 ZZZ	0	0	0	0	0
0771T-00	Vr px dissoc svc sm phy 1st	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0772T-00	Vr px dissoc svc sm phy ea	NCOV	Not Covered	Code not covered Code not co	0 ZZZ	0	0	0	0	0
0773T-00	Vr px dissoc svc oth phy 1st	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0774T-00	Vr px dissoc svc oth phy ea	NCOV	Not Covered	Code not covered Code not co	0 ZZZ	0	0	0	0	0
0776T-00	Ther indctj ntrabrn hypthrm	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
0777T-00	R-t prs sensing edrl gdn sys	NCOV	Not Covered	Code not covered Code not co	1 ZZZ	0	0	0	0	0
0777T-26	R-t prs sensing edrl gdn sys	NCOV	Not Covered	Code not covered Code not co	1 ZZZ	0	0	0	0	0
0777T-TC	R-t prs sensing edrl gdn sys	NCOV	Not Covered	Code not covered Code not co	1 ZZZ	0	0	0	0	0
0778T-00	Smmg cnrnt appl imu snr	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	2	0	0	0
0779T-00	Gi myoelectrical actv study	NCOV	Not Covered	Code not covered Code not co	1 XXX	0	0	0	0	0
S2325-00	Hip core decompression	NBYR	Covered	By Report By Report	9 XXX	9	9	9	9	9
0779T-26	Gi myoelectrical actv study	NCOV	Not Covered	Code not covered Code not co	1 XXX	0	0	0	0	0
0779T-TC	Gi myoelectrical actv study	NCOV	Not Covered	Code not covered Code not co	1 XXX	0	0	0	0	0
0780T-00	Instlj fecal microbiota ssp	NCOV	Not Covered	Code not covered Code not co	0 000	0	0	0	0	0
0781T-00	Brnchsc rf dstrj pulm nrv bi	NCOV	Not Covered	Code not covered Code not co	0 YYY	3	2	1	0	0
0782T-00	Brnchsc rf dstrj plm nrv uni	NCOV	Not Covered	Code not covered Code not co	0 YYY	3	0	1	0	0

31622

31622

0783T-00	Tc auriculr neurostimulation	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
2023F-00	Dilat rta xm w/o rtnophy	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
2025F-00	7 fld rta photo w/o rtnophy	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
2033F-00	Eye img valid w/o rtnophy	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
3051F-00	Hg a1c>equal 7.0%<8.0%	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
3052F-00	Hg a1c>equal 8.0%<equal 9.0%	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
A2019-00	Kerecis marigen shld sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
A2020-00	Ac5 wound system	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
A2021-00	Neomatrix per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
A2022-00	Innovabrn/innovamatx xl sqcm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
A2023-00	Innovamatrix pd, 1 mg	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
A2024-00	Resolve matrix per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
A2025-00	Miro3d per cubic cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
A4261-00	Cervical cap contraceptive	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
A4264-00	Intratubal occlusion device	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
A4337-00	Incontinent rectal insert	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
A9150-00	Misc/exper non-prescript dru	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
A9152-00	Single vitamin nos	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
A9153-00	Multi-vitamin nos	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
A9155-00	Artificial saliva	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
A9180-00	Lice treatment, topical	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
A9270-00	Non-covered item or service	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
A9291-00	Pres dig cog behav thera fda	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
A9292-00	Pres dig visual therapy fda	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
A9300-00	Exercise equipment	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
A9502-00	Tc99m tetrofosmin	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
A9580-00	Sodium fluoride f-18	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
A9699-00	Radiopharm rx agent noc	NCOV	Not Covered	Code not covered Code not co	0 XXX	0	0	0	0	0
G0137-00	Inten outpt svcs,min 9 pr 7 d	NCOV	Not Covered	Code not covered Code not co	9 ZZZ	9	9	9	9	9
P2028-00	Cephalin flocculation test	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
P2029-00	Congo red blood test	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
P2031-00	Hair analysis	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
P2033-00	Blood thymol turbidity	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3854-00	Gene profile panel breast	NBYR	Covered	By Report By Report	9 XXX	9	9	9	9	9
P2038-00	Blood mucoprotein	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
P7001-00	Culture bacterial urine	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
P9603-00	One-way allow prorated miles	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
P9604-00	One-way allow prorated trip	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
P9615-00	Urine specimen collect mult	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q0081-00	Infusion ther other than che	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q0083-00	Chemo by other than infusion	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q0084-00	Chemotherapy by infusion	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q0085-00	Chemo by both infusion and o	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q0220-00	Tixagev and cilgav, 300mg	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q0221-00	Tixagev and cilgav, 600mg	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q0222-00	Bebtelovimab 175 mg	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q0240-00	Casirivi and imdevi 600 mg	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q0243-00	Casirivimab and imdevimab	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q0244-00	Casirivi and imdevi 1200 mg	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q0245-00	Bamlanivimab and etesevima	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q0247-00	Sotrovimab	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q0249-00	Tocilizumab for covid-19	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q0510-00	Dispens fee immunosuppressive	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q0511-00	Sup fee antiem,antica,immuno	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9

Q0512-00	Px sup fee anti-can sub pres	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q0513-00	Disp fee inhal drugs/30 days	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q0514-00	Disp fee inhal drugs/90 days	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q0516-00	Supply fee hiv prep 30-days	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q0517-00	Supply fee hiv prep 60-days	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q0518-00	Supply fee hiv prep 90-days	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q3031-00	Collagen skin test	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4265-00	Neostim tl per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4266-00	Neostim per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4267-00	Neostim dl per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4268-00	Surgraft ft per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4269-00	Surgraft xt per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4270-00	Complete sl per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4271-00	Complete ft per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4272-00	Esano a, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4273-00	Esano aaa, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4274-00	Esano ac, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4275-00	Esano aca, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4276-00	Orion, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4277-00	Woundplus e-grat, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4278-00	Epieffect, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4279-00	Vendaje ac, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4280-00	Xcell amnio matrix per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4281-00	Barrera slor dl per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4282-00	Cygnus dual per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4283-00	Biovance tri or 3l, sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4284-00	Dermabind sl, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4285-00	Nudyn dl or dl mesh pr sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4286-00	Nudyn sl or slw, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4287-00	Dermabind dl, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4288-00	Dermabind ch, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4289-00	Revoshield+ amnio, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4290-00	Membrane wrap hydr per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4291-00	Lamellas xt, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4292-00	Lamellas, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4293-00	Acesso dl, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4294-00	Amnio quad-core, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4295-00	Amnio tri-core, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4296-00	Rebound matrix, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4297-00	Emerge matrix, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4298-00	Amnicore pro, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4299-00	Amnicore pro+, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4300-00	Acesso tl, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4301-00	Activate matrix, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4302-00	Complete aca, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4303-00	Complete aa, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q4304-00	Grafix plus, per sq cm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q5001-00	Hospice or home hlth in home	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q5002-00	Hospice/home hlth in asst lv	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q5003-00	Hospice in lt/non-skilled nf	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q5004-00	Hospice in snf	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q5005-00	Hospice, inpatient hospital	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q5006-00	Hospice in hospice facility	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q5007-00	Hospice in ltch	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9

Q5008-00	Hospice inpatient psych	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q5009-00	Hospice/home hlth, place nos	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q5010-00	Hospice home care in hospice	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q9001-00	Chaplain assessment	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q9002-00	Chaplain counsel individu	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q9003-00	Chaplain counsel group	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
Q9004-00	Va whole health partner serv	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
R0075-00	Transport port x-ray multipl	NCOV	Not Covered	Code not covered Code not co	3 XXX	0	0	0	0	0
S0199-00	Med abortion inc all ex drug	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0201-00	Partial hospitalization serv	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0207-00	Paramedicintercep nonhospals	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0208-00	Paramed intrcept nonvol	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0209-00	Wc van mileage per mi	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0215-00	Nonemerg transp mileage	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0220-00	Medical conference by physic	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0221-00	Medical conference, 60 min	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0250-00	Comp geriatr assmt team	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0255-00	Hospice refer visit nonmd	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0257-00	End of life counseling	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0260-00	H&p for surgery	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0265-00	Genetic counsel 15 mins	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0270-00	Home std case rate 30 days	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0271-00	Home hospice case 30 days	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0272-00	Home episodic case 30 days	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8030-00	Tantalum ring application	NBYR	Covered	By Report By Report	9 XXX	9	9	9	9	9
S0273-00	Md home visit outside cap	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0274-00	Nurse practr visit outs cap	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0280-00	Medical home, initial plan	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0281-00	Medical home, maintenance	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0285-00	Cnslt before screen colonosc	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0302-00	Completed epsdt	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0310-00	Hospitalist visit	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0311-00	Comp mgmt care coord adv ill	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0315-00	Disease management program	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0316-00	Follow-up/reassessment	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0317-00	Disease mgmt per diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0320-00	Rn telephone calls to dmp	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0340-00	Lifestyle mod 1st stage	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0341-00	Lifestyle mod 2 or 3 stage	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0342-00	Lifestyle mod 4th stage	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0353-00	Cancer treatmentplan initial	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0354-00	Cancer treatment plan change	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0390-00	Rout foot care per visit	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0395-00	Impression casting ft	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0400-00	Global eswl kidney	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0500-00	Dispos cont lens	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0504-00	Singl prscrp lens	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0506-00	Bifoc prscrp lens	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0508-00	Trifoc prscrp lens	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0510-00	Non-prscrp lens	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0512-00	Daily cont lens	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0514-00	Color cont lens	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0515-00	Scleral lens liquid bandage	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0516-00	Safety frames	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9

S0518-00	Sunglass frames	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0580-00	Polycarb lens	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0581-00	Nonstrnd lens	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0590-00	Misc integral lens serv	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0592-00	Comp cont lens eval	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0595-00	New lenses in pts old frame	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0596-00	Phakic iol refractive error	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0601-00	Screening proctoscopy	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0610-00	Annual gynecological examina	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0612-00	Annual gynecological examina	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0613-00	Ann breast exam	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0618-00	Audiometry for hearing aid	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0620-00	Routine ophthalmological exa	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0621-00	Routine ophthalmological exa	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0622-00	Phys exam for college	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0630-00	Removal of sutures	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0800-00	Laser in situ keratomileusis	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0810-00	Photorefractive keratectomy	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S0812-00	Phototherap keratect	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S1001-00	Deluxe item	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S1002-00	Custom item	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S1015-00	Iv tubing extension set	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S1016-00	Non-pvc intravenous administ	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S1030-00	Gluc monitor purchase	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S1031-00	Gluc monitor rental	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S1034-00	Art pancreas system	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S1035-00	Art pancreas inv disp sensor	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S1036-00	Art pancreas ext transmitter	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S1037-00	Art pancreas ext receiver	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S1040-00	Cranial remolding orthosis	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2053-00	Transplantation of small int	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2054-00	Transplantation of multivisc	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2055-00	Harvesting of donor multivis	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2060-00	Lobar lung transplantation	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2061-00	Donor lobectomy (lung)	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2065-00	Simult panc kidn trans	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2070-00	Cysto laser tx ureteral calc	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2079-00	Lap esophagomyotomy	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2080-00	Laup	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2083-00	Adjustment gastric band	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2095-00	Transcath emboliz microspher	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2102-00	Islet cell tissue transplant	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2103-00	Adrenal tissue transplant	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2107-00	Adoptive immunotherapy	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2112-00	Knee arthroscop harv	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2115-00	Periacetabular osteotomy	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2117-00	Arthroereisis, subtalar	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9152-00	Speech therapy, re-eval	RMCD	Covered	49.60 15.30	9 XXX	9	9	9	9	9
S2118-00	Total hip resurfacing	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2120-00	Low density lipoprotein(ldl)	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2140-00	Cord blood harvesting	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2142-00	Cord blood-derived stem-cell	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2150-00	Bmt harv/transpl 28d pkg	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2152-00	Solid organ transpl pkg	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9

S2202-00	Echosclerotherapy	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2205-00	Minimally invasive direct co	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2206-00	Minimally invasive direct co	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2207-00	Minimally invasive direct co	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2208-00	Minimally invasive direct co	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2209-00	Minimally invasive direct co	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2225-00	Myringotomy laser-assist	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2230-00	Implant semi-imp hear	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2235-00	Implant auditory brain imp	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2260-00	Induced abortion 17-24 weeks	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2265-00	Induced abortion 25-28 wks	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2266-00	Induced abortion 29-31 wks	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2267-00	Induced abortion 32 or more	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2300-00	Arthroscopy, shoulder, surgi	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2340-00	Chemodeneration of abductor	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2341-00	Chemodenerg adduct vocal	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2342-00	Nasal endoscop po debrid	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2348-00	Decompress disc rf lumbar	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2350-00	Diskectomy, anterior, with d	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2351-00	Diskectomy, anterior, with d	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2400-00	Fetal surg congen hernia	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2401-00	Fetal surg urin trac obstr	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2402-00	Fetal surg cong cyst malf	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2403-00	Fetal surg pulmon sequest	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2404-00	Fetal surg myelomeningo	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2405-00	Fetal surg sacrococ teratoma	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2409-00	Fetal surg noc	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2411-00	Fetoscop laser ther ttts	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S2900-00	Robotic surgical system	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3000-00	Bilat dil retinal exam	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3005-00	Eval self-assess depression	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3600-00	Stat lab	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3601-00	Stat lab home/nf	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3620-00	Newborn metabolic screening	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3630-00	Eosinophil blood count	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3645-00	Hiv-1 antibody testing of or	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3650-00	Saliva test, hormone level;	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3652-00	Saliva test, hormone level;	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3655-00	Antisperm antibodies test	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3708-00	Gastrointestinal fat absorpt	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3722-00	Dose optimization auc - 5fu	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3800-00	Genetic testing als	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3840-00	Dna analysis ret-oncogene	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3841-00	Gene test retinoblastoma	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3842-00	Gene test hippel-lindau	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3844-00	Dna analysis deafness	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3845-00	Gene test alpha-thalassemia	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3846-00	Gene test beta-thalassemia	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3849-00	Gene test niemann-pick	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3850-00	Gene test sickle cell	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3852-00	Dna analysis apoe alzheimer	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3853-00	Gene test myo musclr dyst	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3861-00	Genetic test brugada	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3865-00	Comp genet test hyp cardiomy	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9

S3866-00	Spec gene test hyp cardiomy	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3870-00	Cgh test developmental delay	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3900-00	Surface emg	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3902-00	Ballistocardiogram	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S3904-00	Masters two step	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4005-00	Interim labor facility globa	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4011-00	Ivf package	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4013-00	Compl gift case rate	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4014-00	Compl zift case rate	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4015-00	Complete ivf nos case rate	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4016-00	Frozen ivf case rate	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4017-00	Ivf canc a stim case rate	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4018-00	F emb trns canc case rate	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4020-00	Ivf canc a aspir case rate	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4021-00	Ivf canc p aspir case rate	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4022-00	Asst oocyte fert case rate	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4023-00	Incompl donor egg case rate	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4025-00	Donor serv ivf case rate	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4026-00	Procure donor sperm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4027-00	Store prev froz embryos	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4028-00	Microsurg epi sperm asp	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4030-00	Sperm procure init visit	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4031-00	Sperm procure subs visit	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4035-00	Stimulated iui case rate	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4037-00	Cryo embryo transf case rate	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4040-00	Monit store cryo embryo 30 d	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4042-00	Ovulation mgmt per cycle	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4981-00	Insert levonorgestrel ius	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4989-00	Contracept iud	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4990-00	Nicotine patch legend	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4991-00	Nicotine patch nonlegend	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4993-00	Contraceptive pills for bc	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S4995-00	Smoking cessation gum	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5000-00	Prescription drug, generic	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5001-00	Prescription drug,brand name	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5010-00	5% dextrose and 0.45% saline	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5012-00	5% dextrose with potassium	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5013-00	5%dextrose/0.45%saline1000ml	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5014-00	D5w/0.45ns w kcl and mgs04	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5035-00	Hit routine device maint	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5036-00	Hit device repair	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5100-00	Adult daycare services 15min	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5101-00	Adult day care per half day	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5102-00	Adult day care per diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5105-00	Centerbased day care perdiem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5108-00	Homecare train pt 15 min	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5109-00	Homecare train pt session	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5110-00	Family homecare training 15m	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5111-00	Family homecare train/session	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5115-00	Nonfamily homecare train/15m	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5116-00	Nonfamily hc train/session	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5120-00	Chore services per 15 min	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5121-00	Chore services per diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5125-00	Attendant care service /15m	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9

S5126-00	Attendant care service /diem	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
S5130-00	Homemaker service nos per 15m	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
S5131-00	Homemaker service nos /diem	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
S5135-00	Adult companioncare per 15m	NCOV	Not Covered	Code not covered	Code not co	9 XXX	9	9	9	9	9
0001U-00	Red blood cell typing	LCMS	Covered	720.00	720.00	XXX	9	9	9	9	9
0002M-00	Molecular pathology test for liver disease, including	LCMS	Covered	503.40	503.40	XXX	9	9	9	9	9
0002U-00	Measurement of substances in urine to predict	LCMS	Covered	25.00	25.00	XXX	9	9	9	9	9
0005U-00	Test for detecting genes associated with prostate	LCMS	Covered	760.00	760.00	XXX	9	9	9	9	9
0006M-00	Molecular pathology test for genetic analysis of liver	LCMS	Covered	150.00	150.00	XXX	9	9	9	9	9
0007M-00	Molecular pathology test for genetic analysis of tumors in the digestive system	LCMS	Covered	375.00	375.00	XXX	9	9	9	9	9
0007U-00	Testing for presence of drug in urine	LCMS	Covered	114.43	114.43	XXX	9	9	9	9	9
0008U-00	Test for detecting Helicobacter pylori genes	LCMS	Covered	597.91	597.91	XXX	9	9	9	9	9
0009U-00	Gene analysis of breast tumor tissue	LCMS	Covered	107.00	107.00	XXX	9	9	9	9	9
0010U-00	Typing of bacterial strain	LCMS	Covered	427.26	427.26	XXX	9	9	9	9	9
0011M-00	Molecular pathology test for genetic analysis of	LCMS	Covered	760.00	760.00	XXX	9	9	9	9	9
0012M-00	Molecular pathology test for genetic analysis of	LCMS	Covered	760.00	760.00	XXX	9	9	9	9	9
0013M-00	Molecular pathology test for genetic analysis of	LCMS	Covered	760.00	760.00	XXX	9	9	9	9	9
0015M-00	Molecular pathology test for genetic analysis of kidney gland tumor (Adrenal)	LCMS	Covered	1305.37	1305.37	XXX	9	9	9	9	9
0016M-00	Molecular pathology test for genetic analysis of mRNA gene expression profiling by fluorescent probe hybridization of 20 genes	LCMS	Covered	3489.63	3489.63	XXX	9	9	9	9	9
0017M-00	Measurement of kidney donor and third-party-induced CD154+T-cytotoxic memory	LCMS	Covered	2510.21	2510.21	XXX	9	9	9	9	9
0018M-00	Measurement of glycosylated acute phase proteins	LCMS	Covered	640.73	640.73	XXX	9	9	9	9	9
0024U-00	Measurement of glycosylated acute phase proteins	LCMS	Covered	34.19	34.19	XXX	9	9	9	9	9
0025U-00	Measurement of tenovir in urine	LCMS	Covered	85.77	85.77	XXX	9	9	9	9	9
0026U-00	DNA and microRNA gene analysis of thyroid nodule	LCMS	Covered	3600.00	3600.00	XXX	9	9	9	9	9
0027U-00	Gene analysis (Janus kinase 2) of targeted sequence	LCMS	Covered	121.91	121.91	XXX	9	9	9	9	9
0047U-00	mRNA gene analysis of 17 genes in prostate tumor	LCMS	Covered	3873.00	3873.00	XXX	9	9	9	9	9
0080U-00	Analysis of galectin-3-binding protein and scavenger	LCMS	Covered	3520.00	3520.00	XXX	9	9	9	9	9
0082U-00	Definitive drug testing for 90 or more drugs in urine	LCMS	Covered	246.92	246.92	XXX	9	9	9	9	9
0083U-00	Evaluation of response to chemotherapy drugs using motility contrast tomography	LCMS	Covered	167.35	167.35	XXX	9	9	9	9	9
0202U-00	Test for detection of respiratory disease-causing organisms from back of nose	LCMS	Covered	416.78	416.78	XXX	9	9	9	9	9
0204U-00	mRNA gene analysis of 539 genes in fine needle aspiration thyroid specimen, Cell aggregation testing of cultured skin cells for Alzheimer disease, reported	LCMS	Covered	2919.60	2919.60	XXX	9	9	9	9	9
0206U-00	Immunofluorescence testing of cultured skin cells	LCMS	Covered	2215.40	2215.40	XXX	9	9	9	9	9
0207U-00	Immunofluorescence testing of cultured skin cells	LCMS	Covered	511.20	511.20	XXX	9	9	9	9	9
0209U-00	Cytogenomic analysis of whole genome for	LCMS	Covered	787.15	787.15	XXX	9	9	9	9	9
0210U-00	Measurement of nontreponemal antibodies	LCMS	Covered	18.63	18.63	XXX	9	9	9	9	9
0211U-00	Next-generation sequencing of DNA and RNA in tumor tissue specimen with	LCMS	Covered	8455.00	8455.00	XXX	9	9	9	9	9
0220U-00	Image analysis of breast cancer cell specimen with	LCMS	Covered	706.25	706.25	XXX	9	9	9	9	9
0223U-00	Test for detection of respiratory disease-causing organisms from back of nose	LCMS	Covered	416.78	416.78	XXX	9	9	9	9	9
0224U-00	Measurement of antibody to severe acute respiratory syndrome coronavirus 2	LCMS	Covered	51.43	51.43	XXX	9	9	9	9	9
0225U-00	Test for detection of respiratory disease-causing	LCMS	Covered	416.78	416.78	XXX	9	9	9	9	9
0226U-00	Surrogate viral neutralization test (sVNT) for	LCMS	Covered	42.28	42.28	XXX	9	9	9	9	9
0256U-00	Tandem mass spectroscopy (MS/MS) profile of trimethylamine/trimethylamine	LCMS	Covered	159.95	159.95	XXX	9	9	9	9	9

0257U-00	Evaluation of very long chain acyl-coenzyme A (CoA) dehydrogenase (VLCAD) white	LCMS	Covered	712.47	712.47	XXX	9	9	9	9	9
0258U-00	mRNA gene expression profiling of 50-100 genes in Nuclear MR spectroscopy measurement of myo-	LCMS	Covered	3675.00	3675.00	XXX	9	9	9	9	9
0259U-00	inositol, valine, and creatinine,	LCMS	Covered	52.71	52.71	XXX	9	9	9	9	9
0275U-00	Flow cytometry detection of platelet antibody	LCMS	Covered	18.37	18.37	XXX	9	9	9	9	9
0279U-00	ELISA detection of von Willebrand factor (VWF) and	LCMS	Covered	11.53	11.53	XXX	9	9	9	9	9
0280U-00	ELISA detection of von Willebrand factor (VWF) and ELISA measurement of von Willebrand propeptide in	LCMS	Covered	17.27	17.27	XXX	9	9	9	9	9
0281U-00	plasma specimen, diagnostic	LCMS	Covered	17.27	17.27	XXX	9	9	9	9	9
0282U-00	Red blood cell antigen genotyping of 12 blood group system genes to predict 44	LCMS	Covered	720.00	720.00	XXX	9	9	9	9	9
0283U-00	Radioimmunoassay platelet-binding evaluation of von Willebrand factor (VWF),	LCMS	Covered	18.40	18.40	XXX	9	9	9	9	9
0284U-00	ELISA evaluation of von Willebrand factor (VWF), type 2N, factor VIII and VWF	LCMS	Covered	17.27	17.27	XXX	9	9	9	9	9
0301U-00	Droplet digital PCR (ddPCR) detection of Bartonella henselae and Bartonella	LCMS	Covered	262.72	262.72	XXX	9	9	9	9	9
0302U-00	Droplet digital PCR (ddPCR) detection of Bartonella henselae and Bartonella	LCMS	Covered	361.37	361.37	XXX	9	9	9	9	9
0303U-00	Functional assessment of red blood cell adhesion to endothelial/subendothelial	LCMS	Covered	2201.62	2201.62	XXX	9	9	9	9	9
0304U-00	Functional assessment of red blood cell adhesion to endothelial/subendothelial	LCMS	Covered	2075.80	2075.80	XXX	9	9	9	9	9
0305U-00	Evaluation of red blood cell functionality and deformability under shear stress	LCMS	Covered	662.58	662.58	XXX	9	9	9	9	9
0306U-00	Initial baseline gene analysis for minimum residual	LCMS	Covered	3878.45	3878.45	XXX	9	9	9	9	9
0307U-00	Subsequent gene analysis for minimum residual	LCMS	Covered	794.49	794.49	XXX	9	9	9	9	9
0308U-00	Analysis of 3 proteins in plasma specimen, algorithm reported as risk score for	LCMS	Covered	390.75	390.75	XXX	9	9	9	9	9
0309U-00	Analysis of 4 proteins (NT-proBNP, osteopontin, Analysis of 3 biomarkers (NT-proBNP, C-reactive	LCMS	Covered	390.75	390.75	XXX	9	9	9	9	9
0310U-00	protein, and T-uptake) for	LCMS	Covered	390.75	390.75	XXX	9	9	9	9	9
0311U-00	Measurement of bacterial susceptibility to antibiotics, reported as phenotypic	LCMS	Covered	8.08	8.08	XXX	9	9	9	9	9
0312U-00	Analysis of 8 IgG autoantibodies and 2 cell-bound DNA and mRNA next-generation sequencing analysis	LCMS	Covered	840.65	840.65	XXX	9	9	9	9	9
0313U-00	of 74 genes and analysis of	LCMS	Covered	3600.00	3600.00	XXX	9	9	9	9	9
0314U-00	mRNA gene expression profiling by real-time polymerase chain reaction (RT-PCR)	LCMS	Covered	1950.00	1950.00	XXX	9	9	9	9	9
0315U-00	mRNA gene expression profiling by real-time polymerase chain reaction (RT-PCR)	LCMS	Covered	8500.00	8500.00	XXX	9	9	9	9	9
0316U-00	Evaluation of outer surface protein A (OspA) of	LCMS	Covered	18.66	18.66	XXX	9	9	9	9	9
0317U-00	Four-probe fluorescence in situ hybridization (FISH) (3q29, 3p22.1, 10q22.3,	LCMS	Covered	2030.00	2030.00	XXX	9	9	9	9	9
0318U-00	Whole genome methylation analysis by microarray for 50 or more genes associated	LCMS	Covered	1770.48	1770.48	XXX	9	9	9	9	9
0319U-00	RNA gene expression profiling by select transcriptome sequencing in peripheral	LCMS	Covered	2650.00	2650.00	XXX	9	9	9	9	9
0320U-00	RNA gene expression profiling by select transcriptome sequencing in peripheral	LCMS	Covered	2650.00	2650.00	XXX	9	9	9	9	9
0321U-00	Detection test by nucleic acid (DNA or RNA) multiplex amplified probe technique	LCMS	Covered	634.84	634.84	XXX	9	9	9	9	9

0322U-00	Measurement of 14 acyl carnitines and microbiome-derived metabolites associated	LCMS	Covered	750.00	750.00	XXX	9	9	9	9	9
0323U-00	DNA and mRNA next-generation sequencing analysis	LCMS	Covered	2126.20	2126.20	XXX	9	9	9	9	9
0326U-00	Targeted genomic sequence analysis of 83 or more genes in cell free circulating	LCMS	Covered	5000.00	5000.00	XXX	9	9	9	9	9
0327U-00	DNA sequence analysis of selected regions for	LCMS	Covered	795.00	795.00	XXX	9	9	9	9	9
0329U-00	Exome and transcriptome sequence analysis of DNA and RNA from tumor with DNA	LCMS	Covered	3437.98	3437.98	XXX	9	9	9	9	9
0330U-00	Amplified nucleic acid probe for identification of 27 vaginal disease agents in	LCMS	Covered	416.78	416.78	XXX	9	9	9	9	9
0331U-00	Optical genome mapping of DNA from blood or bone marrow specimen, report of	LCMS	Covered	1863.22	1863.22	XXX	9	9	9	9	9
0337U-00	Evaluation of plasma cells for detection of	LCMS	Covered	2435.00	2435.00	XXX	9	9	9	9	9
0338U-00	Evaluation of circulating solid tumor cells in mRNA expression profiling of genes associated with	LCMS	Covered	2435.00	2435.00	XXX	9	9	9	9	9
0339U-00	high-grade prostate cancer	LCMS	Covered	760.00	760.00	XXX	9	9	9	9	9
0340U-00	DNA assays for detection of minimal residual disease	LCMS	Covered	3590.00	3590.00	XXX	9	9	9	9	9
0342U-00	Multiplex immunoassay for markers of pancreatic Exosome-based analysis of 442 small noncoding	LCMS	Covered	897.00	897.00	XXX	9	9	9	9	9
0343U-00	RNAs in urine to evaluate risk of	LCMS	Covered	760.00	760.00	XXX	9	9	9	9	9
0344U-00	Evaluation of 28 lipid markers for risk of	LCMS	Covered	792.17	792.17	XXX	9	9	9	9	9
0345U-00	Genomic analysis panel of 15 genes for detection of abnormalities associated	LCMS	Covered	1336.09	1336.09	XXX	9	9	9	9	9
0346U-00	Evaluation of Beta amyloid AB40 and AB42 ratio	LCMS	Covered	93.26	93.26	XXX	9	9	9	9	9
0347U-00	DNA analysis of 16 genes involved in drug	LCMS	Covered	1336.09	1336.09	XXX	9	9	9	9	9
0348U-00	DNA analysis of 25 genes involved in drug	LCMS	Covered	742.27	742.27	XXX	9	9	9	9	9
0349U-00	DNA analysis of 27 genes involved in drug metabolism or processing, report	LCMS	Covered	742.27	742.27	XXX	9	9	9	9	9
0350U-00	DNA analysis of 27 genes involved in drug metabolism or processing, analysis	LCMS	Covered	1336.09	1336.09	XXX	9	9	9	9	9
0351U-00	Biochemical assays for markers of bacterial infection	LCMS	Covered	260.50	260.50	XXX	9	9	9	9	9
0352U-00	Detection of bacteria causing vaginosis and vaginitis	LCMS	Covered	142.63	142.63	XXX	9	9	9	9	9
0353U-00	Detection of Chlamydia trachomatis and Neisseria gonorrhoeae by multiplex	LCMS	Covered	70.18	70.18	XXX	9	9	9	9	9
0354U-00	Human papilloma virus (HPV) by quantitative polymerase chain reaction (qPCR)	LCMS	Covered	35.09	35.09	XXX	9	9	9	9	9
0355U-00	Evaluation of apolipoprotein L1 risk variants	LCMS	Covered	137.00	137.00	XXX	9	9	9	9	9
0356U-00	Evaluation of 17 DNA biomarkers reported as a risk score for cancer recurrence	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0358U-00	Enzyme immunoassay analysis of beta-amyloid fragments in cerebral spinal fluid	LCMS	Covered	260.50	260.50	XXX	9	9	9	9	9
0359U-00	Phase separation and immunoassay evaluation of prostate-specific antigen (PSA)	LCMS	Covered	760.00	760.00	XXX	9	9	9	9	9
0360U-00	Enzyme-linked immunosorbent assay of autoantibodies in plasma to evaluate risk	LCMS	Covered	840.65	840.65	XXX	9	9	9	9	9
0361U-00	Digital immunoassay in plasma for neurofilament	NCOV	Not Covered	Code not covered	Code not covered	XXX	9	9	9	9	9
0362U-00	Gene-expression profiling--enrichment RNA sequencing of 82 content genes and 10	LCMS	Covered	3600.00	3600.00	XXX	9	9	9	9	9
0363U-00	Gene-expression profiling of 5 genes in urine	LCMS	Covered	760.00	760.00	XXX	9	9	9	9	9
U0001-00	Cdc 2019 novel coronavirus (2019-ncov) real-time rt-2019-ncov coronavirus, sars-cov-2/2019-ncov (covid-	LCMS	Covered	35.92	35.92	XXX	9	9	9	9	9
U0002-00	19), any technique, multiple	LCMS	Covered	51.31	51.31	XXX	9	9	9	9	9
S5136-00	Adult companioncare per diem	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9
S5140-00	Adult foster care per diem	NCOV	Not Covered	Code not covered	Code not covered	9 XXX	9	9	9	9	9

S5141-00	Adult foster care per month	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5145-00	Child fostercare th per diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5146-00	Ther fostercare child /month	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5150-00	Unskilled respite care /15m	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5151-00	Unskilled respitecare /diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5160-00	Emer response sys instal&st	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5161-00	Emer rspns sys serv permonth	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5162-00	Emer rspns system purchase	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5165-00	Home modifications per serv	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5170-00	Homedelivered prepared meal	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5175-00	Laundry serv,ext,prof,/order	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5180-00	Hh respiratory thrpy in eval	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5181-00	Hh respiratory thrpy nos/day	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5185-00	Med reminder serv per month	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5190-00	Wellness assessment by nonph	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5199-00	Personal care item nos each	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5497-00	Hit cath care noc	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5498-00	Hit simple cath care	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5501-00	Hit complex cath care	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5502-00	Hit interim cath care	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5517-00	Hit declotting kit	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5518-00	Hit cath repair kit	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5520-00	Hit picc insert kit	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5521-00	Hit midline cath insert kit	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5522-00	Hit picc insert no supp	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5523-00	Hip midline cath insert kit	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5550-00	Insulin rapid 5 u	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5551-00	Insulin most rapid 5 u	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5552-00	Insulin intermed 5 u	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5553-00	Insulin long acting 5 u	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5560-00	Insulin reuse pen 1.5 ml	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5561-00	Insulin reuse pen 3 ml	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5565-00	Insulin cartridge 150 u	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5566-00	Insulin cartridge 300 u	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5570-00	Insulin dispos pen 1.5 ml	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S5571-00	Insulin dispos pen 3 ml	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8035-00	Magnetic source imaging	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8037-00	Mrcp	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8040-00	Topographic brain mapping	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8042-00	Mri low field	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8055-00	Us guidance fetal reduct	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8080-00	Scintimammography	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8085-00	Fluorine-18 fluorodeoxygluco	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8092-00	Electron beam computed tomog	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8096-00	Portable peak flow meter	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8097-00	Asthma kit	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8100-00	Spacer without mask	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8101-00	Spacer with mask	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8110-00	Peak expiratory flow rate (p	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8120-00	O2 contents gas cubic ft	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8121-00	O2 contents liquid lb	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8130-00	Interferential stim 2 chan	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8131-00	Interferential stim 4 chan	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8185-00	Flutter device	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9

S8186-00	Swivel adaptor	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8189-00	Trach supply noc	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8210-00	Mucus trap	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8265-00	Haberman feeder	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8270-00	Enuresis alarm	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8301-00	Infect control supplies nos	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8415-00	Supplies for home delivery	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8420-00	Custom gradient sleeve/glov	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8421-00	Ready gradient sleeve/glov	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8422-00	Custom grad sleeve med	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8423-00	Custom grad sleeve heavy	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8424-00	Ready gradient sleeve	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8425-00	Custom grad glove med	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8426-00	Custom grad glove heavy	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8427-00	Ready gradient glove	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8428-00	Ready gradient gauntlet	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8429-00	Gradient pressure wrap	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8430-00	Padding for comprsn bdg	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8431-00	Compression bandage	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8450-00	Splint digit	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8451-00	Splint wrist or ankle	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8452-00	Splint elbow	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8460-00	Camisole post-mast	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8490-00	100 insulin syringes	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8930-00	Auricular electrostimulation	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8940-00	Hippotherapy per session	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8948-00	Low-level laser trmt 15 min	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8950-00	Complex lymphedema therapy,	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8990-00	Pt or manip for maint	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S8999-00	Resuscitation bag	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9001-00	Home uterine monitor with or	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9007-00	Ultrafiltration monitor	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9024-00	Paranasal sinus ultrasound	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9025-00	Omniscardiogram/cardiointegra	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9034-00	Eswl for gallstones	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9055-00	Procuren or other growth fac	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9056-00	Coma stimulation per diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9061-00	Medical supplies and equipme	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9083-00	Urgent care center global	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9088-00	Services provided in urgent	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9090-00	Vertebral axial decompressio	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9097-00	Home visit wound care	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9098-00	Home phototherapy visit	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9110-00	Telemonitoring/home per mnth	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9117-00	Back school visit	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9122-00	Home health aide or certifie	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9123-00	Nursing care in home rn	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9124-00	Nursing care, in the home; b	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9125-00	Respite care, in the home, p	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9126-00	Hospice care, in the home, p	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9127-00	Social work visit, in the ho	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9128-00	Speech therapy, in the home,	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9129-00	Occupational therapy, in the	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9131-00	Pt in the home per diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9

S9140-00	Diabetic management program,	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9141-00	Diabetic management program,	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9145-00	Insulin pump initiation	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9150-00	Evaluation by ophthalmologist	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9208-00	Home mgmt preterm labor	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9209-00	Home mgmt prom	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9211-00	Home mgmt gest hypertension	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9212-00	Hm postpar hyper per diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9213-00	Hm preeclamp per diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9214-00	Hm gest dm per diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9325-00	Hit pain mgmt per diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9326-00	Hit cont pain per diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9327-00	Hit int pain per diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9328-00	Hit pain imp pump diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9329-00	Hit chemo per diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9330-00	Hit cont chem diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9331-00	Hit intermit chemo diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9335-00	Ht hemodialysis diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9336-00	Hit cont anticoag diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9338-00	Hit immunotherapy diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9339-00	Hit periton dialysis diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9340-00	Hit enteral per diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9341-00	Hit enteral grav diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9342-00	Hit enteral pump diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9343-00	Hit enteral bolus nurs	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9345-00	Hit anti-hemophil diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9346-00	Hit alpha-1-proteinase diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9347-00	Hit longterm infusion diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9348-00	Hit sympathomim diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9349-00	Hit tocolysis diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9351-00	Hit cont antiemetic diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9353-00	Hit cont insulin diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9355-00	Hit chelation diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9357-00	Hit enzyme replace diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9359-00	Hit anti-tnf per diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9361-00	Hit diuretic infus diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9363-00	Hit anti-spasmodic diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9364-00	Hit tpn total diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9365-00	Hit tpn 1 liter diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9366-00	Hit tpn 2 liter diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9367-00	Hit tpn 3 liter diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9368-00	Hit tpn over 3l diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9370-00	Ht inj antiemetic diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9372-00	Ht inj anticoag diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9373-00	Hit hydra total diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9374-00	Hit hydra 1 liter diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9375-00	Hit hydra 2 liter diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9376-00	Hit hydra 3 liter diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9377-00	Hit hydra over 3l diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9379-00	Hit noc per diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9381-00	Hit high risk/escort	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9401-00	Anticoag clinic per session	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9430-00	Pharmacy comp/disp serv	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9433-00	Medical food oral 100% nutr	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9

S9434-00	Mod solid food suppl	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9435-00	Medical foods for inborn err	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9436-00	Lamaze class	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9437-00	Childbirth refresher class	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9438-00	Cesarean birth class	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9439-00	Vbac class	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9441-00	Asthma education	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9442-00	Birthing class	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9443-00	Lactation class	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9444-00	Parenting class	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9445-00	Pt education noc individ	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9446-00	Pt education noc group	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9447-00	Infant safety class	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9449-00	Weight mgmt class	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9451-00	Exercise class	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9452-00	Nutrition class	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9453-00	Smoking cessation class	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9454-00	Stress mgmt class	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9455-00	Diabetic management program,	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9460-00	Diabetic management program,	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9465-00	Diabetic management program,	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9470-00	Nutritional counseling, diet	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9472-00	Cardiac rehabilitation progr	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9473-00	Pulmonary rehabilitation pro	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9474-00	Enterostomal therapy by a re	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9475-00	Ambulatory setting substance	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9476-00	Vestibular rehab per diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9480-00	Intensive outpatient psychia	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9482-00	Family stabilization 15 min	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9484-00	Crisis intervention per hour	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9485-00	Crisis intervention mental h	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9490-00	Hit corticosteroid/diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9494-00	Hit antibiotic total diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9497-00	Hit antibiotic q3h diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9500-00	Hit antibiotic q24h diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9501-00	Hit antibiotic q12h diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9502-00	Hit antibiotic q8h diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9503-00	Hit antibiotic q6h diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9504-00	Hit antibiotic q4h diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9529-00	Venipuncture home/snf	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9537-00	Ht hem horm inj diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9538-00	Hit blood products diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9542-00	Ht inj noc per diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9558-00	Ht inj growth horm diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9559-00	Hit inj interferon diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9560-00	Ht inj hormone diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9562-00	Ht inj palivizumab/ab diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9590-00	Ht irrigation diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9810-00	Ht pharm per hour	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9900-00	Christian sci pract visit	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9901-00	Christian sci nurse visit	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9960-00	Air ambulanc nonemerg fixed	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9961-00	Air ambulanc nonemerg rotary	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9970-00	Health club membership yr	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9

S9975-00	Transplant related per diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9976-00	Lodging per diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9977-00	Meals per diem	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9981-00	Med record copy admin	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9982-00	Med record copy per page	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9986-00	Not medically necessary svc	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9988-00	Serv part of phase i trial	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9989-00	Services outside us	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9990-00	Services provided as part of	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9991-00	Services provided as part of	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9992-00	Transportation costs to and	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9994-00	Lodging costs (e.g. hotel ch	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9996-00	Meals for clinical trial par	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
S9999-00	Sales tax	NCOV	Not Covered	Code not covered Code not co	9 XXX	9	9	9	9	9
0079U-00	DNA analysis of urine and cheek swabs for specimen	NCOV	Not Covered	Code not covered Code not covered	XXX	9	9	9	9	9
0091U-00	Colorectal cancer screening by enumeration of	NCOV	Not Covered	Code not covered Code not covered	XXX	9	9	9	9	9
0334U-00	Targeted genomic sequence analysis of 84 or more	NCOV	Not Covered	Code not covered Code not covered	XXX	9	9	9	9	9