Cigna Commercial

Comprehensive CPT Code Reference for Prior Authorization Across All Programs

***An asterisk indicates that the code may be managed under more than one program.**

1511

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
Other Services	Outpatient Surgery	43889	Gastric restrictive procedure, transoral, endoscopic sleeve gastroplasty (ESG), including argon plasma coagulation, when performed	Yes	CareCore National	
Other Services	Experimental / Investigational	64567	Percutaneous electrical nerve field stimulation, cranial nerves, without implantation	Yes	CareCore National	
Other Services	Experimental / Investigational	64654	Initial open implantation of baroreflex activation therapy (BAT) modulation system, including lead placement onto the carotid sinus, lead tunnelling, connection to a pulse generator placed in a distant subcutaneous pocket (ie, total system), and intraoperative interrogation and programming	Yes	CareCore National	
Other Services	Experimental / Investigational	64910	Nerve repair; with synthetic conduit or vein allograft (eg, nerve tube), each nerve	Yes	CareCore National	
Other Services	Experimental / Investigational	0990T	Transcervical instillation of biodegradable hydrogel materials, intrauterine	Yes	CareCore National	
Other Services	Experimental / Investigational	0991T	Cystourethroscopy, with low-energy lithotripsy and acoustically actuated microspheres, including imaging	Yes	CareCore National	
Other Services	Experimental / Investigational	0994T	Endovascular delivery of aortic wall stabilization drug therapy through a sheath positioned within an abdominal aortic aneurysm, with aortic roadmapping, balloon occlusion, imaging guidance, and radiological supervision and interpretation; percutaneous	Yes	CareCore National	
Other Services	Experimental / Investigational	0995T	Endovascular delivery of aortic wall stabilization drug therapy through a sheath positioned within an abdominal aortic aneurysm, with aortic roadmapping, balloon occlusion, imaging guidance, and radiological supervision and interpretation; open	Yes	CareCore National	
Other Services	Outpatient Surgery	0999T	Autologous muscle cell therapy, harvesting of muscle progenitor cells, including ultrasound guidance, when performed	Yes	CareCore National	
Other Services	Outpatient Surgery	1000T	Autologous muscle cell therapy, administration of muscle progenitor cells into the urethral sphincter, including cystoscopy and post-void residual ultrasound, when performed	Yes	CareCore National	
Other Services	Outpatient Surgery	1001T	Autologous muscle cell therapy, injection of muscle progenitor cells into the external anal sphincter, including ultrasound guidance, when performed	Yes	CareCore National	
Other Services	Experimental / Investigational	1003T	Arthroplasty, first carpometacarpal joint, with distal trapezial and proximal first metacarpal prosthetic replacement (eg, first carpometacarpal total joint)	Yes	CareCore National	
Other Services	Experimental / Investigational	1008T	Remote monitoring of sub-scalp implanted continuous bilateral electroencephalography monitoring system, device fitting, initial set-up, and patient education in wearing of system and use of equipment	Yes	CareCore National	
Other Services	Experimental / Investigational	1009T	Remote monitoring of a sub-scalp implanted continuous bilateral electroencephalography monitoring system, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, interpretation, and report, up to 30 days of recording without video	Yes	CareCore National	
Other Services	Outpatient Surgery	1019T	Lymphovenous bypass, including robotic assistance, when performed, per extremity	Yes	CareCore National	
Other Services	Experimental / Investigational	1025T	Alternating electric fields dosimetry and delivery-simulation modeling, creation and selection of patient-specific array layouts, and placement verification	Yes	CareCore National	
Other Services	Outpatient Surgery	C1607	Neurostimulator, integrated (implantable), rechargeable with all implantable and external components including charging system	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4398	Summit ac, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4399	Summit fx, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4400	Polygon3 membrane, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4401	Absolv3 membrane, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4410	Amchomatrixdl, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4411	Amniomatrixf4x, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4413	Cygnus solo, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4420	Nuform, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4422	A/c wrap, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	

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Other Services	Experimental / Investigational	Q4423	Biolab tri-membrane wrap flow, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4424	Revive ft, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4436	Renati ac membrane, per square centimeter (add-on, list separately in addition to primary procedure)"	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4437	Revival ac, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4438	Pretect, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4440	Curamatrix, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Crossover Code for: • **Primary Program:** Other Services • **Companion Program: Musculoskeletal** - Joint / Spine Surgery *(See External Notation column for more details.)*	Joint Surgery	64999*	Unlisted procedure, nervous system	Yes	MedSolutions	This is a crossover code that can be requested under three programs: **MSK Joint**, **MSK Spine Surgery** or **Other Services**. • If your request is intended to be used for **Other Services**, please submit your request under the **Other Services program** through the **CareCoreNational platform**. • If your request is intended to be used for **MSK Spine Surgery**, please submit your request under the **MSK Spine program** through the **CareCoreNational platform**. • If your request is intended to be used for **MSK Joint Surgery**, please submit your request under the **Other Services program** through the **Medsolutions platform**.
Crossover Code for: • **Primary Program:** Musculoskeletal - Pain Management • **Companion Program**: Other Services *(See External Notation column for more details.)*	Other Services	C9807*	Nerve stimulator, percutaneous, peripheral (e.g., sprint peripheral nerve stimulation system), including electrode and all disposable system components, non-opioid medical device (must be a qualifying medicare non-opioid medical device for post-surgical pain relief in accordance with section 4135 of the caa, 2023)	Yes	CareCore National	This is a crossover code that can be requested under two programs: **MSK Pain Management** or **Other Services**. • If your request is intended to be used for **Other Services**, please submit your request under the **Other Services program** through the **CareCoreNational platform**. • If your request is intended to be used for **MSK Pain Management**, please submit your request under the **MSK program** through the **MedSolutions platform**.
Crossover Code for: • **Primary Program:** Other Services • **Companion Program:** Musculoskeletal (MSK) - Spine Surgery *(See External Notation column for more details.)*	Outpatient Surgery	64714*	Neuroplasty, major peripheral nerve, arm or leg, open; lumbar plexus	Yes	CareCore National	This is a crossover code that can be requested under two programs: **MSK Spine Surgery** or **Other Services.** • If your request is intended to be used in conjunction with **MSK Spine Surgery**, please submit your request under the **MSK Spine program** through the **CareCoreNational platform.**
Other Services	Outpatient Surgery	60661	Ablation of 1 or more thyroid nodule(s), additional lobe, percutaneous, including imaging guidance, radiofrequency (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	60660	Ablation of 1 or more thyroid nodule(s), one lobe or the isthmus, percutaneous, including imaging guidance, radiofrequency	Yes	CareCore National	
Other Services	Outpatient Surgery	0950T	Ablation of benign prostate tissue, transrectal, with high intensity–focused ultrasound (HIFU), including ultrasound guidance	Yes	CareCore National	
Other Services	Outpatient Surgery	55880	Ablation of malignant prostate tissue, transrectal, with high intensity-focused ultrasound (HIFU), including ultrasound guidance	Yes	CareCore National	
Other Services	Experimental / Investigational	55881	Ablation of prostate tissue, transurethral, using thermal ultrasound, including magnetic resonance imaging guidance for, and monitoring of, tissue ablation	Yes	CareCore National	
Other Services	Experimental / Investigational	55882	Ablation of prostate tissue, transurethral, using thermal ultrasound, including magnetic resonance imaging guidance for, and monitoring of, tissue ablation; with insertion of transurethral ultrasound transducer for delivery of thermal ultrasound, including suprapubic tube placement and placement of an endorectal cooling device, when performed	Yes	CareCore National	
Other Services	Experimental / Investigational	0601T	Ablation, irreversible electroporation; 1 or more tumors per organ, including fluoroscopic and ultrasound guidance, when performed, open	Yes	CareCore National	
Other Services	Experimental / Investigational	0600T	Ablation, irreversible electroporation; 1 or more tumors per organ, other than liver or prostate, including imaging guidance, when performed, percutaneous	Yes	CareCore National	
Other Services	Potentially Cosmetic	15787	Abrasion; each additional 4 lesions or less (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Potentially Cosmetic	15786	Abrasion; single lesion (eg, keratosis, scar)	Yes	CareCore National	

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Other Services	Experimental / Investigational	A2020	Ac5 advanced wound system (ac5)	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4395	Acelagraft, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4386	Acesso trifaca, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4159	Affinity, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4150	Allowrap ds or dry, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	41874	Alveoloplasty, each quadrant (specify)	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4250	Amnioamp-mp, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	Q4151	Amnioband or guardian, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4168	Amnioband, 1 mg	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4227	Amniocore, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4137	Amnioexcel, amnioexcel plus or biodexcel, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4139	Amniomatrix or biodmatrix, injectable, 1 cc	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4239	Amnio-maxx or amnio-maxx lite, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4235	Amniorepair or altiply, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	54125	Amputation of penis; complete	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4385	Apollo ft, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	21110	Application of interdental fixation device for conditions other than fracture or dislocation, includes removal	Yes	CareCore National	
Other Services	Experimental / Investigational	15018	Application of skin cell suspension autograft to wound and donor sites, including application of primary dressing, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; each additional 480 sq cm or part thereof (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	15017	Application of skin cell suspension autograft to wound and donor sites, including application of primary dressing, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; first 480 sq cm or less	Yes	CareCore National	
Other Services	Experimental / Investigational	15016	Application of skin cell suspension autograft to wound and donor sites, including application of primary dressing, trunk, arms, legs; each additional 480 sq cm or part thereof (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	15015	Application of skin cell suspension autograft to wound and donor sites, including application of primary dressing, trunk, arms, legs; first 480 sq cm or less	Yes	CareCore National	
Other Services	Experimental / Investigational	15278	Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area greater than or equal to 100 sq cm; each additional 100 sq cm wound surface area, or part thereof, or each additional 1% of body area of infants and children, or part thereof (List separately in addition to code for primary procedure)	- Add On	CareCore National	
Other Services	Experimental / Investigational	15277	Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area greater than or equal to 100 sq cm; first 100 sq cm wound surface area, or 1% of body area of infants and children	Yes	CareCore National	
Other Services	Experimental / Investigational	15276	Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area up to 100 sq cm; each additional 25 sq cm wound surface area, or part thereof (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	15275	Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area up to 100 sq cm; first 25 sq cm or less wound surface area	Yes	CareCore National	
Other Services	Experimental / Investigational	15274	Application of skin substitute graft to trunk, arms, legs, total wound surface area greater than or equal to 100 sq cm; each additional 100 sq cm wound surface area, or part thereof, or each additional 1% of body area of infants and children, or part thereof (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	15273	Application of skin substitute graft to trunk, arms, legs, total wound surface area greater than or equal to 100 sq cm; first 100 sq cm wound surface area, or 1% of body area of infants and children	Yes	CareCore National	
Other Services	Experimental / Investigational	15272	Application of skin substitute graft to trunk, arms, legs, total wound surface area up to 100 sq cm; each additional 25 sq cm wound surface area, or part thereof (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	15271	Application of skin substitute graft to trunk, arms, legs, total wound surface area up to 100 sq cm; first 25 sq cm or less wound surface area	Yes	CareCore National	
Other Services	Outpatient Surgery	66179	Aqueous shunt to extraocular equatorial plate reservoir, external approach; without graft	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4189	Artacent ac, 1 mg	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4125	Arthroflex, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	21240	Arthroplasty, temporomandibular joint, with or without autograft (includes obtaining graft)	Yes	CareCore National	
Other Services	Outpatient Surgery	21243	Arthroplasty, temporomandibular joint, with prosthetic joint replacement	Yes	CareCore National	
Other Services	Outpatient Surgery	29804	Arthroscopy, temporomandibular joint, surgical	Yes	CareCore National	
Other Services	Potentially Cosmetic	21125	Augmentation, mandibular body or angle; prosthetic material	Yes	CareCore National	
Other Services	Potentially Cosmetic	21127	Augmentation, mandibular body or angle; with bone graft, onlay or interpositional (includes obtaining autograft)	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4215	Axolotl ambient or axolotl cryo, 0.1 mg	Yes	CareCore National	

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Other Services	Experimental / Investigational	Q4332	Axolotl dualgraft, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4383	Axolotl graft ultra, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4331	Axolotl graft, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4138	Biodfence dryflex, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4140	Biodfence, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Potentially Cosmetic	15820	Blepharoplasty, lower eyelid;	Yes	CareCore National	
Other Services	Potentially Cosmetic	15821	Blepharoplasty, lower eyelid; with extensive herniated fat pad	Yes	CareCore National	
Other Services	Potentially Cosmetic	15822	Blepharoplasty, upper eyelid;	Yes	CareCore National	
Other Services	Potentially Cosmetic	15823	Blepharoplasty, upper eyelid; with excessive skin weighting down lid	Yes	CareCore National	
Other Services	Potentially Cosmetic	19325	Breast augmentation with implant	Yes	CareCore National	
Other Services	Potentially Cosmetic	19318	Breast reduction	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4236	Carepatch, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Potentially Cosmetic	20910	Cartilage graft; costochondral	Yes	CareCore National	
Other Services	Potentially Cosmetic	20912	Cartilage graft; nasal septum	Yes	CareCore National	
Other Services	Potentially Cosmetic	54161	Circumcision, surgical excision other than clamp, device, or dorsal slit; older than 28 days of age	Yes	CareCore National	
Other Services	Potentially Cosmetic	56805	Clitoroplasty for intersex state	Yes	CareCore National	
Other Services	Outpatient Surgery	69930	Cochlear device implantation, with or without mastoidectomy	Yes	CareCore National	
Other Services	Outpatient Surgery	L8614	Cochlear device, includes all internal and external components	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4264	Cocoon membrane, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4229	Cogenex amniotic membrane, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4193	Coll-e-derm, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4271	Complete ft, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4270	Complete sl, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	21050	Condylectomy, temporomandibular joint	Yes	CareCore National	
Other Services	Outpatient Surgery	57292	Construction of artificial vagina; with graft	Yes	CareCore National	
Other Services	Outpatient Surgery	57291	Construction of artificial vagina; without graft	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4246	Coretext or protext, per cc	Yes	CareCore National	
Other Services	Potentially Cosmetic	65772	Corneal relaxing incision for correction of surgically induced astigmatism	Yes	CareCore National	
Other Services	Potentially Cosmetic	19355	Correction of inverted nipples	Yes	CareCore National	
Other Services	Potentially Cosmetic	67911	Correction of lid retraction	Yes	CareCore National	
Other Services	Experimental / Investigational	C9809	Cryoablation needle (e.g., iovera system), including needle/tip and all disposable system components, non-opioid medical device (must be a qualifying medicare non-opioid medical device for post-surgical pain relief in accordance with section 4135 of the caa, 2023)	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4170	Cygnus, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	53865	Cystourethroscopy with insertion of temporary device for ischemic remodeling (ie, pressure necrosis) of bladder neck and prostate	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4166	Cytal, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	Q4122	Dermacell, dermacell awm or dermacell awm porous, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	C9358	Dermal substitute, native, non-denatured collagen, fetal bovine origin (surgimend collagen matrix), per 0.5 square centimeters	Yes	CareCore National	
Other Services	Experimental / Investigational	C9360	Dermal substitute, native, non-denatured collagen, neonatal bovine origin (surgimend collagen matrix), per 0.5 square centimeters	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4152	Dermapure, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Potentially Cosmetic	17107	Destruction of cutaneous vascular proliferative lesions (eg, laser technique); 10.0 to 50.0 sq cm	Yes	CareCore National	
Other Services	Potentially Cosmetic	17106	Destruction of cutaneous vascular proliferative lesions (eg, laser technique); less than 10 sq cm	Yes	CareCore National	
Other Services	Potentially Cosmetic	17108	Destruction of cutaneous vascular proliferative lesions (eg, laser technique); over 50.0 sq cm	Yes	CareCore National	
Other Services	Experimental / Investigational	42160	Destruction of lesion, palate or uvula (thermal, cryo or chemical)	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4262	Dual layer impax membrane, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	C9785	Endoscopic outlet reduction, gastric pouch application, with endoscopy and intraluminal tube insertion, if performed, including all system and tissue anchoring components	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4187	Epicord, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4361	Epixpress, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	Q4186	Epifix, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	

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Other Services	Experimental / Investigational	Q4272	Esano a, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4273	Esano aaa, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4274	Esano ac, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4275	Esano aca, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	0813T	Esophagogastroduodenoscopy, flexible, transoral, with volume adjustment of intragastric bariatric balloon	Yes	CareCore National	
Other Services	Experimental / Investigational	43257	Esophagogastroduodenoscopy, flexible, transoral; with delivery of thermal energy to the muscle of lower esophageal sphincter and/or gastric cardia, for treatment of gastroesophageal reflux disease	Yes	CareCore National	
Other Services	Experimental / Investigational	43290	Esophagogastroduodenoscopy, flexible, transoral; with deployment of intragastric bariatric balloon	Yes	CareCore National	
Other Services	Experimental / Investigational	43210	Esophagogastroduodenoscopy, flexible, transoral; with esophagogastric fundoplasty, partial or complete, includes duodenoscopy when performed	Yes	CareCore National	
Other Services	Potentially Cosmetic	96921	Excimer laser treatment for psoriasis; 250 sq cm to 500 sq cm	Yes	CareCore National	
Other Services	Potentially Cosmetic	96922	Excimer laser treatment for psoriasis; over 500 sq cm	Yes	CareCore National	
Other Services	Potentially Cosmetic	96920	Excimer laser treatment for psoriasis; total area less than 250 sq cm	Yes	CareCore National	
Other Services	Outpatient Surgery	21025	Excision of bone (eg, for osteomyelitis or bone abscess); mandible	Yes	CareCore National	
Other Services	Potentially Cosmetic	15847	Excision, excessive skin and subcutaneous tissue (includes lipectomy), abdomen (eg, abdominoplasty) (includes umbilical transposition and fascial plication) (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Potentially Cosmetic	15830	Excision, excessive skin and subcutaneous tissue (includes lipectomy); abdomen, infraumbilical panniculectomy	Yes	CareCore National	
Other Services	Potentially Cosmetic	15836	Excision, excessive skin and subcutaneous tissue (includes lipectomy); arm	Yes	CareCore National	
Other Services	Potentially Cosmetic	15835	Excision, excessive skin and subcutaneous tissue (includes lipectomy); buttock	Yes	CareCore National	
Other Services	Potentially Cosmetic	15837	Excision, excessive skin and subcutaneous tissue (includes lipectomy); forearm or hand	Yes	CareCore National	
Other Services	Potentially Cosmetic	15834	Excision, excessive skin and subcutaneous tissue (includes lipectomy); hip	Yes	CareCore National	
Other Services	Potentially Cosmetic	15833	Excision, excessive skin and subcutaneous tissue (includes lipectomy); leg	Yes	CareCore National	
Other Services	Potentially Cosmetic	15839	Excision, excessive skin and subcutaneous tissue (includes lipectomy); other area	Yes	CareCore National	
Other Services	Potentially Cosmetic	15838	Excision, excessive skin and subcutaneous tissue (includes lipectomy); submental fat pad	Yes	CareCore National	
Other Services	Potentially Cosmetic	15832	Excision, excessive skin and subcutaneous tissue (includes lipectomy); thigh	Yes	CareCore National	
Other Services	Outpatient Surgery	G0166	External counterpulsation, per treatment session	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4128	Flex hd, or allopatch hd, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	C9734	Focused ultrasound ablation/therapeutic intervention, other than uterine leiomyomata, with magnetic resonance (mr) guidance	Yes	CareCore National	
Other Services	Outpatient Surgery	0479T	Fractional ablative laser fenestration of burn and traumatic scars for functional improvement; first 100 cm2 or part thereof, or 1% of body surface area of infants and children	Yes	CareCore National	
Other Services	Outpatient Surgery	0480T	Fractional ablative laser fenestration of burn and traumatic scars for functional improvement; each additional 100 cm2, or each additional 1% of body surface area of infants and children, or part thereof (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	43888	Gastric restrictive procedure, open; removal and replacement of subcutaneous port component only	Yes	CareCore National	
Other Services	Outpatient Surgery	43886	Gastric restrictive procedure, open; revision of subcutaneous port component only	Yes	CareCore National	
Other Services	Potentially Cosmetic	21120	Genioplasty; augmentation (autograft, allograft, prosthetic material)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21122	Genioplasty; sliding osteotomies, 2 or more osteotomies (eg, wedge excision or bone wedge reversal for asymmetrical chin)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21121	Genioplasty; sliding osteotomy, single piece	Yes	CareCore National	
Other Services	Potentially Cosmetic	21123	Genioplasty; sliding, augmentation with interpositional bone grafts (includes obtaining autografts)	Yes	CareCore National	
Other Services	Outpatient Surgery	Q4132	Grafix core and grafixpl core, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	Q4392	Grafix duo, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4133	Grafix prime, grafixpl prime, stravix and stravixpl, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Potentially Cosmetic	21215	Graft, bone; mandible (includes obtaining graft)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21210	Graft, bone; nasal, maxillary or malar areas (includes obtaining graft)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21235	Graft; ear cartilage, autogenous, to nose or ear (includes obtaining graft)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21230	Graft; rib cartilage, autogenous, to face, chin, nose or ear (includes obtaining graft)	Yes	CareCore National	
Other Services	Potentially Cosmetic	15773	Grafting of autologous fat harvested by liposuction technique to face, eyelids, mouth, neck, ears, orbits, genitalia, hands, and/or feet; 25 cc or less injectate	Yes	CareCore National	
Other Services	Potentially Cosmetic	15774	Grafting of autologous fat harvested by liposuction technique to face, eyelids, mouth, neck, ears, orbits, genitalia, hands, and/or feet; each additional 25 cc injectate, or part thereof (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Potentially Cosmetic	15771	Grafting of autologous fat harvested by liposuction technique to trunk, breasts, scalp, arms, and/or legs; 50 cc or less injectate	Yes	CareCore National	
Other Services	Potentially Cosmetic	15772	Grafting of autologous fat harvested by liposuction technique to trunk, breasts, scalp, arms, and/or legs; each additional 50 cc injectate, or part thereof (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Potentially Cosmetic	15769	Grafting of autologous soft tissue, other, harvested by direct excision (eg, fat, dermis, fascia)	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4113	Graftjacket xpress, injectable, 1 cc	Yes	CareCore National	
Other Services	Outpatient Surgery	28291	Hallux rigidus correction with cheilectomy, debridement and capsular release of the first metatarsophalangeal joint; with implant	Yes	CareCore National	
Other Services	Experimental / Investigational	15012	Harvest of skin for skin cell suspension autograft; each additional 25 sq cm or part thereof (List separately in addition to code for primary procedure)	Add On	CareCore National	

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Other Services	Experimental / Investigational	15011	Harvest of skin for skin cell suspension autograft; first 25 sq cm or less	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4164	Helicoll, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	21685	Hyoid myotomy and suspension	Yes	CareCore National	
Other Services	Experimental / Investigational	C2624	Implantable wireless pulmonary artery pressure sensor with delivery catheter, including all system components	Yes	CareCore National	
Other Services	Experimental / Investigational	C1889	Implantable/insertable device, not otherwise classified	Yes	CareCore National	
Other Services	Outpatient Surgery	15778	Implantation of absorbable mesh or other prosthesis for delayed closure of defect(s) (ie, external genitalia, perineum, abdominal wall) due to soft tissue infection or trauma	Yes	CareCore National	
Other Services	Potentially Cosmetic	15777	Implantation of biologic implant (eg, acellular dermal matrix) for soft tissue reinforcement (ie, breast, trunk) (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	65785	Implantation of intrastromal corneal ring segments	Yes	CareCore National	
Other Services	Experimental / Investigational	66683	Implantation of iris prosthesis, including suture fixation and repair or removal of iris, when performed	Yes	CareCore National	
Other Services	Outpatient Surgery	43881	Implantation or replacement of gastric neurostimulator electrodes, antrum, open	Yes	CareCore National	
Other Services	Outpatient Surgery	69716	Implantation, osseointegrated implant, skull; with magnetic transcutaneous attachment to external speech processor, within the mastoid and/or resulting in removal of less than 100 sq mm surface area of bone deep to the outer cranial cortex	Yes	CareCore National	
Other Services	Potentially Cosmetic	69714	Implantation, osseointegrated implant, skull; with percutaneous attachment to external speech processor	Yes	CareCore National	
Other Services	Outpatient Surgery	21088	Impression and custom preparation; facial prosthesis	Yes	CareCore National	
Other Services	Outpatient Surgery	21085	Impression and custom preparation; oral surgical splint	Yes	CareCore National	
Other Services	Experimental / Investigational	0232T	Injection(s), platelet rich plasma, any site, including image guidance, harvesting and preparation when performed	Yes	CareCore National	
Other Services	Experimental / Investigational	Q2026	Injection, radiesse, 0.1 ml	Yes	CareCore National	
Other Services	Potentially Cosmetic	Q2028	Injection, sculptra, 0.5 mg	Yes	CareCore National	
Other Services	Outpatient Surgery	0671T	Insertion of anterior segment aqueous drainage device into the trabecular meshwork, without external reservoir, and without concomitant cataract removal, one or more	Yes	CareCore National	
Other Services	Outpatient Surgery	66183	Insertion of anterior segment aqueous drainage device, without extraocular reservoir, external approach	Yes	CareCore National	
Other Services	Outpatient Surgery	0449T	Insertion of aqueous drainage device, without extraocular reservoir, internal approach, into the subconjunctival space; initial device	Yes	CareCore National	
Other Services	Potentially Cosmetic	19340	Insertion of breast implant on same day of mastectomy (ie, immediate)	Yes	CareCore National	
Other Services	Experimental / Investigational	C9727	Insertion of implants into the soft palate; minimum of three implants	Yes	CareCore National	
Other Services	Outpatient Surgery	54405	Insertion of multi-component, inflatable penile prosthesis, including placement of pump, cylinders, and reservoir	Yes	CareCore National	
Other Services	Outpatient Surgery	54401	Insertion of penile prosthesis; inflatable (self-contained)	Yes	CareCore National	
Other Services	Outpatient Surgery	54400	Insertion of penile prosthesis; non-inflatable (semi-rigid)	Yes	CareCore National	
Other Services	Outpatient Surgery	61889	Insertion of skull-mounted cranial neurostimulator pulse generator or receiver, including craniectomy or craniotomy, when performed, with direct or inductive coupling, with connection to depth and/or cortical strip electrode array(s)	Yes	CareCore National	
Other Services	Experimental / Investigational	51721	Insertion of transurethral ablation transducer for delivery of thermal ultrasound for prostate tissue ablation, including suprapubic tube placement during the same session and placement of an endorectal cooling device, when performed	Yes	CareCore National	
Other Services	Potentially Cosmetic	19342	Insertion or replacement of breast implant on separate day from mastectomy	Yes	CareCore National	
Other Services	Experimental / Investigational	61886	Insertion or replacement of cranial neurostimulator pulse generator or receiver, direct or inductive coupling; with connection to 2 or more electrode arrays	Yes	CareCore National	
Other Services	Experimental / Investigational	0968T	Insertion or replacement of epicranial neurostimulator system, including electrode array and pulse generator, with connection to electrode array	Yes	CareCore National	
Other Services	Experimental / Investigational	0571T	Insertion or replacement of implantable cardioverter-defibrillator system with substernal electrode(s), including all imaging guidance and electrophysiological evaluation (includes defibrillation threshold evaluation, induction of arrhythmia, evaluation of sensing for arrhythmia termination, and programming or reprogramming of sensing or therapeutic parameters), when performed	Yes	CareCore National	
Other Services	Experimental / Investigational	64590	Insertion or replacement of peripheral, sacral, or gastric neurostimulator pulse generator or receiver, requiring pocket creation and connection between electrode array and pulse generator or receiver	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4114	Integra flowable wound matrix, injectable, 1 cc	Yes	CareCore National	
Other Services	Outpatient Surgery	G0422	Intensive cardiac rehabilitation; with or without continuous ecg monitoring with exercise, per session	Yes	CareCore National	
Other Services	Outpatient Surgery	G0423	Intensive cardiac rehabilitation; with or without continuous ecg monitoring; without exercise, per session	Yes	CareCore National	
Other Services	Outpatient Surgery	21497	Interdental wiring, for condition other than fracture	Yes	CareCore National	
Other Services	Outpatient Surgery	55980	Intersex surgery; female to male	Yes	CareCore National	
Other Services	Outpatient Surgery	55970	Intersex surgery; male to female	Yes	CareCore National	
Other Services	Experimental / Investigational	C1839	Iris prosthesis	Yes	CareCore National	
Other Services	Experimental / Investigational	65760	Keratomileusis	Yes	CareCore National	
Other Services	Experimental / Investigational	65710	Keratoplasty (corneal transplant); anterior lamellar	Yes	CareCore National	
Other Services	Outpatient Surgery	A2019	Kerecis omega3 marigen shield, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	Q4158	Kerecis omega3, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	

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Other Services	Experimental / Investigational	43284	Laparoscopy, surgical, esophageal sphincter augmentation procedure, placement of sphincter augmentation device (ie, magnetic band), including cruroplasty when performed	Yes	CareCore National	
Other Services	Outpatient Surgery	43775	Laparoscopy, surgical, gastric restrictive procedure; longitudinal gastrectomy (ie, sleeve gastrectomy)	Yes	CareCore National	
Other Services	Outpatient Surgery	43770	Laparoscopy, surgical, gastric restrictive procedure; placement of adjustable gastric restrictive device (eg, gastric band and subcutaneous port components)	Yes	CareCore National	
Other Services	Outpatient Surgery	43773	Laparoscopy, surgical, gastric restrictive procedure; removal and replacement of adjustable gastric restrictive device component only	Yes	CareCore National	
Other Services	Outpatient Surgery	43774	Laparoscopy, surgical, gastric restrictive procedure; removal of adjustable gastric restrictive device and subcutaneous port components	Yes	CareCore National	
Other Services	Outpatient Surgery	43772	Laparoscopy, surgical, gastric restrictive procedure; removal of adjustable gastric restrictive device component only	Yes	CareCore National	
Other Services	Outpatient Surgery	43771	Laparoscopy, surgical, gastric restrictive procedure; revision of adjustable gastric restrictive device component only	Yes	CareCore National	
Other Services	Outpatient Surgery	43644	Laparoscopy, surgical, gastric restrictive procedure; with gastric bypass and Roux-en-Y gastroenterostomy (roux limb 150 cm or less)	Yes	CareCore National	
Other Services	Outpatient Surgery	43645	Laparoscopy, surgical, gastric restrictive procedure; with gastric bypass and small intestine reconstruction to limit absorption	Yes	CareCore National	
Other Services	Outpatient Surgery	61737	Laser interstitial thermal therapy (LITT) of lesion, intracranial, including burr hole(s), with magnetic resonance imaging guidance, when performed; multiple trajectories for multiple or complex lesion(s)	Yes	CareCore National	
Other Services	Outpatient Surgery	61736	Laser interstitial thermal therapy (LITT) of lesion, intracranial, including burr hole(s), with magnetic resonance imaging guidance, when performed; single trajectory for 1 simple lesion	Yes	CareCore National	
Other Services	Experimental / Investigational	0947T	Magnetic resonance image guided low intensity focused ultrasound (MRgFUS), stereotactic blood-brain barrier disruption using microbubble resonators to increase the concentration of blood-based biomarkers of target, intracranial, including stereotactic navigation and frame placement, when performed	Yes	CareCore National	
Other Services	Potentially Cosmetic	21270	Malar augmentation, prosthetic material	Yes	CareCore National	
Other Services	Experimental / Investigational	21073	Manipulation of temporomandibular joint(s) (TMJ), therapeutic, requiring an anesthesia service (ie, general or monitored anesthesia care)	Yes	CareCore National	
Other Services	Potentially Cosmetic	19300	Mastectomy for gynecomastia	Yes	CareCore National	
Other Services	Potentially Cosmetic	19316	Mastopexy	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4118	Matristem micromatrix, 1 mg	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4345	Matrix hd allograft dermis, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4126	Memoderm, dermaspan, tranzgraft or integuply, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	21060	Meniscectomy, partial or complete, temporomandibular joint	Yes	CareCore National	
Other Services	Experimental / Investigational	A2005	Microlyte matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	C9353	Microporous collagen implantable slit tube (neurawrap nerve protector), per centimeter length	Yes	CareCore National	
Other Services	Experimental / Investigational	C9352	Microporous collagen implantable tube (neuragen nerve guide), per centimeter length	Yes	CareCore National	
Other Services	Outpatient Surgery	31298	Nasal/sinus endoscopy, surgical, with dilation (eg, balloon dilation); frontal and sphenoid sinus ostia	Yes	CareCore National	
Other Services	Outpatient Surgery	31296	Nasal/sinus endoscopy, surgical, with dilation (eg, balloon dilation); frontal sinus ostium	Yes	CareCore National	
Other Services	Outpatient Surgery	31295	Nasal/sinus endoscopy, surgical, with dilation (eg, balloon dilation); maxillary sinus ostium, transnasal or via canine fossa	Yes	CareCore National	
Other Services	Outpatient Surgery	31297	Nasal/sinus endoscopy, surgical, with dilation (eg, balloon dilation); sphenoid sinus ostium	Yes	CareCore National	
Other Services	Outpatient Surgery	69706	Nasopharyngoscopy, surgical, with dilation of eustachian tube (ie, balloon dilation); bilateral	Yes	CareCore National	
Other Services	Outpatient Surgery	69705	Nasopharyngoscopy, surgical, with dilation of eustachian tube (ie, balloon dilation); unilateral	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4396	Natalin, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	A2021	Neomatrix, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4267	Neostim dl, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4266	Neostim membrane, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4265	Neostim tl, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4389	Neothelium 4l+, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4388	Neothelium 4l, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4156	Neox 100 or clarix 100, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4148	Neox cord 1k, neox cord rt, or clarix cord 1k, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4155	Neoxflo or clarixflo, 1 mg	Yes	CareCore National	
Other Services	Experimental / Investigational	C9808	Nerve cryoablation probe (e.g., cryoice, cryosphere, cryosphere max, cryoice cryosphere, cryoice cryo2), including probe and all disposable system components, non-opioid medical device (must be a qualifying medicare non-opioid medical device for post-surgical pain relief in accordance with section 4135 of the caa, 2023)	Yes	CareCore National	
Other Services	Potentially Cosmetic	19350	Nipple/areola reconstruction	Yes	CareCore National	

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Other Services	Experimental / Investigational	Q4254	Novafix dl, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4160	Nushield, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4103	Oasis burn matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	Q4124	Oasis ultra tri-layer wound matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	Q4102	Oasis wound matrix, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	0908T	Open implantation of integrated neurostimulation system, vagus nerve, including analysis and programming, when performed	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4276	Orion, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Potentially Cosmetic	21208	Osteoplasty, facial bones; augmentation (autograft, allograft, or prosthetic implant)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21209	Osteoplasty, facial bones; reduction	Yes	CareCore National	
Other Services	Potentially Cosmetic	21198	Osteotomy, mandible, segmental;	Yes	CareCore National	
Other Services	Potentially Cosmetic	21199	Osteotomy, mandible, segmental; with genioglossus advancement	Yes	CareCore National	
Other Services	Potentially Cosmetic	21206	Osteotomy, maxilla, segmental (eg, Wassmund or Schuchard)	Yes	CareCore National	
Other Services	Potentially Cosmetic	69300	Otoplasty, protruding ear, with or without size reduction	Yes	CareCore National	
Other Services	Outpatient Surgery	42145	Palatopharyngoplasty (eg, uvulopalatopharyngoplasty, uvulopharyngoplasty)	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4173	Palingen or palingen xplus, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4174	Palingen or promatrx, 0.36 mg per 0.25 cc	Yes	CareCore National	
Other Services	Experimental / Investigational	0956T	Partial craniectomy, channel creation, and tunneling of electrode for sub-scalp implantation of an electrode array, receiver, and telemetry unit for continuous bilateral electroencephalography monitoring system, including imaging guidance	Yes	CareCore National	
Other Services	Outpatient Surgery	64553	Percutaneous implantation of neurostimulator electrode array; cranial nerve	Yes	CareCore National	
Other Services	Potentially Cosmetic	19371	Peri-implant capsulectomy, breast, complete, including removal of all intracapsular contents	Yes	CareCore National	
Other Services	Experimental / Investigational	53451	Periurethral transperineal adjustable balloon continence device; bilateral insertion, including cystourethroscopy and imaging guidance	Yes	CareCore National	
Other Services	Experimental / Investigational	53452	Periurethral transperineal adjustable balloon continence device; unilateral insertion, including cystourethroscopy and imaging guidance	Yes	CareCore National	
Other Services	Experimental / Investigational	99183	Physician or other qualified health care professional attendance and supervision of hyperbaric oxygen therapy, per session	Yes	CareCore National	
Other Services	Experimental / Investigational	C9364	Porcine implant, permacol, per square centimeter	Yes	CareCore National	
Other Services	Experimental / Investigational	C8002	Preparation of skin cell suspension autograft, automated, including all enzymatic processing and device components (do not report with manual suspension preparation)	Yes	CareCore National	
Other Services	Experimental / Investigational	15014	Preparation of skin cell suspension autograft, requiring enzymatic processing, manual mechanical disaggregation of skin cells, and filtration; each additional 25 sq cm of harvested skin or part thereof (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	15013	Preparation of skin cell suspension autograft, requiring enzymatic processing, manual mechanical disaggregation of skin cells, and filtration; first 25 sq cm or less of harvested skin	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4222	Progenamatrix, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	G0555	Provision of replacement patient electronics system (e.g., system pillow, handheld reader) for home pulmonary artery pressure monitoring	Yes	CareCore National	
Other Services	Experimental / Investigational	0808T	Pulmonary tissue ventilation analysis using software-based processing of data from separately captured cinefluorograph images; in combination with computed tomography (CT) images taken for the purpose of pulmonary tissue ventilation analysis, including data preparation and transmission, quantification of pulmonary tissue ventilation, data review, interpretation and report	Yes	CareCore National	
Other Services	Experimental / Investigational	0807T	Pulmonary tissue ventilation analysis using software-based processing of data from separately captured cinefluorograph images; in combination with previously acquired computed tomography (CT) images, including data preparation and transmission, quantification of pulmonary tissue ventilation, data review, interpretation and report	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4196	Puraply am, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4195	Puraply, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Potentially Cosmetic	21146	Reconstruction midface, LeFort I; 2 pieces, segment movement in any direction, requiring bone grafts (includes obtaining autografts) (eg, ungrafted unilateral alveolar cleft)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21142	Reconstruction midface, LeFort I; 2 pieces, segment movement in any direction, without bone graft	Yes	CareCore National	
Other Services	Potentially Cosmetic	21147	Reconstruction midface, LeFort I; 3 or more pieces, segment movement in any direction, requiring bone grafts (includes obtaining autografts) (eg, ungrafted bilateral alveolar cleft or multiple osteotomies)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21143	Reconstruction midface, LeFort I; 3 or more pieces, segment movement in any direction, without bone graft	Yes	CareCore National	
Other Services	Potentially Cosmetic	21141	Reconstruction midface, LeFort I; single piece, segment movement in any direction (eg, for Long Face Syndrome), without bone graft	Yes	CareCore National	
Other Services	Potentially Cosmetic	21145	Reconstruction midface, LeFort I; single piece, segment movement in any direction, requiring bone grafts (includes obtaining autografts)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21150	Reconstruction midface, LeFort II; anterior intrusion (eg, Treacher-Collins Syndrome)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21151	Reconstruction midface, LeFort II; any direction, requiring bone grafts (includes obtaining autografts)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21160	Reconstruction midface, LeFort III (extra and intracranial) with forehead advancement (eg, mono bloc), requiring bone grafts (includes obtaining autografts); with LeFort I	Yes	CareCore National	

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Other Services	Potentially Cosmetic	21159	Reconstruction midface, LeFort III (extra and intracranial) with forehead advancement (eg, mono bloc), requiring bone grafts (includes obtaining autografts); without LeFort I	Yes	CareCore National	
Other Services	Potentially Cosmetic	21155	Reconstruction midface, LeFort III (extracranial), any type, requiring bone grafts (includes obtaining autografts); with LeFort I	Yes	CareCore National	
Other Services	Potentially Cosmetic	21154	Reconstruction midface, LeFort III (extracranial), any type, requiring bone grafts (includes obtaining autografts); without LeFort I	Yes	CareCore National	
Other Services	Potentially Cosmetic	21188	Reconstruction midface, osteotomies (other than LeFort type) and bone grafts (includes obtaining autografts)	Yes	CareCore National	
Other Services	Outpatient Surgery	21249	Reconstruction of mandible or maxilla, endosteal implant (eg, blade, cylinder); complete	Yes	CareCore National	
Other Services	Outpatient Surgery	21248	Reconstruction of mandible or maxilla, endosteal implant (eg, blade, cylinder); partial	Yes	CareCore National	
Other Services	Outpatient Surgery	21246	Reconstruction of mandible or maxilla, subperiosteal implant; complete	Yes	CareCore National	
Other Services	Outpatient Surgery	21245	Reconstruction of mandible or maxilla, subperiosteal implant; partial	Yes	CareCore National	
Other Services	Potentially Cosmetic	21244	Reconstruction of mandible, extraoral, with transosteal bone plate (eg, mandibular staple bone plate)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21196	Reconstruction of mandibular rami and/or body, sagittal split; with internal rigid fixation	Yes	CareCore National	
Other Services	Potentially Cosmetic	21195	Reconstruction of mandibular rami and/or body, sagittal split; without internal rigid fixation	Yes	CareCore National	
Other Services	Potentially Cosmetic	21194	Reconstruction of mandibular rami, horizontal, vertical, C, or L osteotomy; with bone graft (includes obtaining graft)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21193	Reconstruction of mandibular rami, horizontal, vertical, C, or L osteotomy; without bone graft	Yes	CareCore National	
Other Services	Potentially Cosmetic	21172	Reconstruction superior-lateral orbital rim and lower forehead, advancement or alteration, with or without grafts (includes obtaining autografts)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21180	Reconstruction, entire or majority of forehead and/or supraorbital rims; with autograft (includes obtaining grafts)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21179	Reconstruction, entire or majority of forehead and/or supraorbital rims; with grafts (allograft or prosthetic material)	Yes	CareCore National	
Other Services	Experimental / Investigational	21743	Reconstructive repair of pectus excavatum or carinatum; minimally invasive approach (Nuss procedure), with thoracoscopy	Yes	CareCore National	
Other Services	Potentially Cosmetic	21742	Reconstructive repair of pectus excavatum or carinatum; minimally invasive approach (Nuss procedure), without thoracoscopy	Yes	CareCore National	
Other Services	Potentially Cosmetic	21740	Reconstructive repair of pectus excavatum or carinatum; open	Yes	CareCore National	
Other Services	Potentially Cosmetic	21138	Reduction forehead; contouring and application of prosthetic material or bone graft (includes obtaining autograft)	Yes	CareCore National	
Other Services	Potentially Cosmetic	21139	Reduction forehead; contouring and setback of anterior frontal sinus wall	Yes	CareCore National	
Other Services	Potentially Cosmetic	21137	Reduction forehead; contouring only	Yes	CareCore National	
Other Services	Potentially Cosmetic	19328	Removal of intact breast implant	Yes	CareCore National	
Other Services	Potentially Cosmetic	19330	Removal of ruptured breast implant, including implant contents (eg, saline, silicone gel)	Yes	CareCore National	
Other Services	Experimental / Investigational	0959T	Removal or replacement of magnet from coil assembly that is connected to continuous bilateral electroencephalography monitoring system, including imaging guidance	Yes	CareCore National	
Other Services	Experimental / Investigational	46707	Repair of anorectal fistula with plug (eg, porcine small intestine submucosa [SIS])	Yes	CareCore National	
Other Services	Potentially Cosmetic	67904	Repair of blepharoptosis; (tarso) levator resection or advancement, external approach	Yes	CareCore National	
Other Services	Potentially Cosmetic	67903	Repair of blepharoptosis; (tarso) levator resection or advancement, internal approach	Yes	CareCore National	
Other Services	Potentially Cosmetic	67908	Repair of blepharoptosis; conjunctivo-tarso-Muller's muscle-levator resection (eg, Fasanella-Servat type)	Yes	CareCore National	
Other Services	Potentially Cosmetic	67902	Repair of blepharoptosis; frontalis muscle technique with autologous fascial sling (includes obtaining fascia)	Yes	CareCore National	
Other Services	Potentially Cosmetic	67901	Repair of blepharoptosis; frontalis muscle technique with suture or other material (eg, banked fascia)	Yes	CareCore National	
Other Services	Potentially Cosmetic	67906	Repair of blepharoptosis; superior rectus technique with fascial sling (includes obtaining fascia)	Yes	CareCore National	
Other Services	Potentially Cosmetic	67900	Repair of brow ptosis (supraciliary, mid-forehead or coronal approach)	Yes	CareCore National	
Other Services	Experimental / Investigational	30469	Repair of nasal valve collapse with low energy, temperature-controlled (ie, radiofrequency) subcutaneous/submucosal remodeling	Yes	CareCore National	
Other Services	Experimental / Investigational	30468	Repair of nasal valve collapse with subcutaneous/submucosal lateral wall implant(s)	Yes	CareCore National	
Other Services	Potentially Cosmetic	30465	Repair of nasal vestibular stenosis (eg, spreader grafting, lateral nasal wall reconstruction)	Yes	CareCore National	
Other Services	Experimental / Investigational	0960T	Replacement of sub-scalp implanted electrode array, receiver, and telemetry unit with tunneling of electrode for continuous bilateral electroencephalography monitoring system, including imaging guidance	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4192	Restorigin, 1 cc	Yes	CareCore National	
Other Services	Potentially Cosmetic	19370	Revision of peri-implant capsule, breast, including capsulotomy, capsulorrhaphy, and/or partial capsulectomy	Yes	CareCore National	
Other Services	Potentially Cosmetic	19380	Revision of reconstructed breast (eg, significant removal of tissue, re-advancement and/or re-inset of flaps in autologous reconstruction or significant capsular revision combined with soft tissue excision in implant-based reconstruction)	Yes	CareCore National	
Other Services	Experimental / Investigational	0957T	Revision of sub-scalp implanted electrode array, receiver, and telemetry unit for electrode, when required, including imaging guidance	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4180	Revita, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Potentially Cosmetic	30150	Rhinectomy; partial	Yes	CareCore National	
Other Services	Potentially Cosmetic	30460	Rhinoplasty for nasal deformity secondary to congenital cleft lip and/or palate, including columellar lengthening; tip only	Yes	CareCore National	
Other Services	Potentially Cosmetic	30462	Rhinoplasty for nasal deformity secondary to congenital cleft lip and/or palate, including columellar lengthening; tip, septum, osteotomies	Yes	CareCore National	
Other Services	Potentially Cosmetic	30410	Rhinoplasty, primary; complete, external parts including bony pyramid, lateral and alar cartilages, and/or elevation of nasal tip	Yes	CareCore National	
Other Services	Potentially Cosmetic	30420	Rhinoplasty, primary; including major septal repair	Yes	CareCore National	
Other Services	Potentially Cosmetic	30400	Rhinoplasty, primary; lateral and alar cartilages and/or elevation of nasal tip	Yes	CareCore National	
Other Services	Potentially Cosmetic	30435	Rhinoplasty, secondary; intermediate revision (bony work with osteotomies)	Yes	CareCore National	
Other Services	Potentially Cosmetic	30450	Rhinoplasty, secondary; major revision (nasal tip work and osteotomies)	Yes	CareCore National	
Other Services	Potentially Cosmetic	30430	Rhinoplasty, secondary; minor revision (small amount of nasal tip work)	Yes	CareCore National	
Other Services	Potentially Cosmetic	15828	Rhytidectomy; cheek, chin, and neck	Yes	CareCore National	
Other Services	Potentially Cosmetic	15824	Rhytidectomy; forehead	Yes	CareCore National	

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Other Services	Potentially Cosmetic	15825	Rhytidectomy; neck with platysmal tightening (platysmal flap, P-flap)	Yes	CareCore National	
Other Services	Potentially Cosmetic	15829	Rhytidectomy; superficial musculoaponeurotic system (SMAS) flap	Yes	CareCore National	
Other Services	Outpatient Surgery	30620	Septal or other intranasal dermatoplasty (does not include obtaining graft)	Yes	CareCore National	
Other Services	Outpatient Surgery	30520	Septoplasty or submucous resection, with or without cartilage scoring, contouring or replacement with graft	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4130	Strattice tm, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Potentially Cosmetic	11950	Subcutaneous injection of filling material (eg, collagen); 1 cc or less	Yes	CareCore National	
Other Services	Potentially Cosmetic	11951	Subcutaneous injection of filling material (eg, collagen); 1.1 to 5.0 cc	Yes	CareCore National	
Other Services	Potentially Cosmetic	11952	Subcutaneous injection of filling material (eg, collagen); 5.1 to 10.0 cc	Yes	CareCore National	
Other Services	Potentially Cosmetic	11954	Subcutaneous injection of filling material (eg, collagen); over 10.0 cc	Yes	CareCore National	
Other Services	Experimental / Investigational	0980T	Submucosal cryolysis therapy; base of tongue and lingual tonsil only	Yes	CareCore National	
Other Services	Experimental / Investigational	0979T	Submucosal cryolysis therapy; soft palate only	Yes	CareCore National	
Other Services	Experimental / Investigational	0978T	Submucosal cryolysis therapy; soft palate, base of tongue, and lingual tonsil	Yes	CareCore National	
Other Services	Potentially Cosmetic	15876	Suction assisted lipectomy; head and neck	Yes	CareCore National	
Other Services	Potentially Cosmetic	15879	Suction assisted lipectomy; lower extremity	Yes	CareCore National	
Other Services	Potentially Cosmetic	15877	Suction assisted lipectomy; trunk	Yes	CareCore National	
Other Services	Potentially Cosmetic	15878	Suction assisted lipectomy; upper extremity	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4397	Summit aaa, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4393	Surgraft ac, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4394	Surgraft aca, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4268	Surgraft ft, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4263	Surgraft tl, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4269	Surgraft xt, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	36514	Therapeutic apheresis; for plasma pheresis	Yes	CareCore National	
Other Services	Outpatient Surgery	32664	Thoracoscopy, surgical; with thoracic sympathectomy	Yes	CareCore National	
Other Services	Outpatient Surgery	15156	Tissue cultured skin autograft, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; additional 1 sq cm to 75 sq cm (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	15157	Tissue cultured skin autograft, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; each additional 100 sq cm, or each additional 1% of body area of infants and children, or part thereof (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	15155	Tissue cultured skin autograft, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; first 25 sq cm or less	Yes	CareCore National	
Other Services	Outpatient Surgery	15151	Tissue cultured skin autograft, trunk, arms, legs; additional 1 sq cm to 75 sq cm (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	15152	Tissue cultured skin autograft, trunk, arms, legs; each additional 100 sq cm, or each additional 1% of body area of infants and children, or part thereof (List separately in addition to code for primary procedure)	Add On	CareCore National	
Other Services	Outpatient Surgery	15150	Tissue cultured skin autograft, trunk, arms, legs; first 25 sq cm or less	Yes	CareCore National	
Other Services	Potentially Cosmetic	19357	Tissue expander placement in breast reconstruction, including subsequent expansion(s)	Yes	CareCore National	
Other Services	Experimental / Investigational	41512	Tongue base suspension, permanent suture technique	Yes	CareCore National	
Other Services	Experimental / Investigational	0951T	Totally implantable active middle ear hearing implant; initial placement, including mastoidectomy, placement of and attachment to sound processor	Yes	CareCore National	
Other Services	Experimental / Investigational	0967T	Transanal insertion of endoluminal temporary colorectal anastomosis protection device, including vacuum anchoring component and flexible sheath connected to external vacuum source and monitoring system	Yes	CareCore National	
Other Services	Experimental / Investigational	0981T	Transcatheter implantation of wireless inferior vena cava sensor for long-term hemodynamic monitoring, including deployment of the sensor, radiological supervision and interpretation, right heart catheterization, and inferior vena cava venography, when performed	Yes	CareCore National	
Other Services	Experimental / Investigational	0933T	Transcatheter implantation of wireless left atrial pressure sensor for long-term left atrial pressure monitoring, including sensor calibration and deployment, right heart catheterization, transseptal puncture, imaging guidance, and radiological supervision and interpretation	Yes	CareCore National	
Other Services	Experimental / Investigational	33289	Transcatheter implantation of wireless pulmonary artery pressure sensor for long-term hemodynamic monitoring, including deployment and calibration of the sensor, right heart catheterization, selective pulmonary catheterization, radiological supervision and interpretation, and pulmonary artery angiography, when performed	Yes	CareCore National	
Other Services	Outpatient Surgery	66175	Transluminal dilation of aqueous outflow canal (eg, canaloplasty); with retention of device or stent	Yes	CareCore National	
Other Services	Outpatient Surgery	66174	Transluminal dilation of aqueous outflow canal (eg, canaloplasty); without retention of device or stent	Yes	CareCore National	
Other Services	Experimental / Investigational	93799	Unlisted cardiovascular service or procedure	Yes	CareCore National	
Other Services	Experimental / Investigational	21299	Unlisted craniofacial and maxillofacial procedure	Yes	CareCore National	
Other Services	Unlisted Procedure	91299	Unlisted diagnostic gastroenterology procedure	Yes	CareCore National	
Other Services	Unlisted Procedure	59897	Unlisted fetal invasive procedure, including ultrasound guidance, when performed	Yes	CareCore National	
Other Services	Experimental / Investigational	58579	Unlisted hysteroscopy procedure, uterus	Yes	CareCore National	
Other Services	Unlisted Procedure	47379	Unlisted laparoscopic procedure, liver	Yes	CareCore National	

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Other Services	Unlisted Procedure	49329	Unlisted laparoscopy procedure, abdomen, peritoneum and omentum	Yes	CareCore National	
Other Services	Unlisted Procedure	44979	Unlisted laparoscopy procedure, appendix	Yes	CareCore National	
Other Services	Unlisted Procedure	47579	Unlisted laparoscopy procedure, biliary tract	Yes	CareCore National	
Other Services	Experimental / Investigational	43289	Unlisted laparoscopy procedure, esophagus	Yes	CareCore National	
Other Services	Experimental / Investigational	49659	Unlisted laparoscopy procedure, hernioplasty, herniorrhaphy, herniotomy	Yes	CareCore National	
Other Services	Experimental / Investigational	44238	Unlisted laparoscopy procedure, intestine (except rectum)	Yes	CareCore National	
Other Services	Experimental / Investigational	38589	Unlisted laparoscopy procedure, lymphatic system	Yes	CareCore National	
Other Services	Unlisted Procedure	58679	Unlisted laparoscopy procedure, oviduct, ovary	Yes	CareCore National	
Other Services	Unlisted Procedure	38129	Unlisted laparoscopy procedure, spleen	Yes	CareCore National	
Other Services	Experimental / Investigational	43659	Unlisted laparoscopy procedure, stomach	Yes	CareCore National	
Other Services	Unlisted Procedure	50949	Unlisted laparoscopy procedure, ureter	Yes	CareCore National	
Other Services	Experimental / Investigational	58578	Unlisted laparoscopy procedure, uterus	Yes	CareCore National	
Other Services	Unlisted Procedure	21089	Unlisted maxillofacial prosthetic procedure	Yes	CareCore National	
Other Services	Experimental / Investigational	21499	Unlisted musculoskeletal procedure, head	Yes	CareCore National	
Other Services	Potentially Cosmetic	22999	Unlisted procedure, abdomen, musculoskeletal system	Yes	CareCore National	
Other Services	Experimental / Investigational	49999	Unlisted procedure, abdomen, peritoneum and omentum	Yes	CareCore National	
Other Services	Experimental / Investigational	31299	Unlisted procedure, accessory sinuses	Yes	CareCore National	
Other Services	Experimental / Investigational	66999	Unlisted procedure, anterior segment of eye	Yes	CareCore National	
Other Services	Experimental / Investigational	46999	Unlisted procedure, anus	Yes	CareCore National	
Other Services	Unlisted Procedure	47999	Unlisted procedure, biliary tract	Yes	CareCore National	
Other Services	Experimental / Investigational	19499	Unlisted procedure, breast	Yes	CareCore National	
Other Services	Unlisted Procedure	45399	Unlisted procedure, colon	Yes	CareCore National	
Other Services	Unlisted Procedure	39599	Unlisted procedure, diaphragm	Yes	CareCore National	
Other Services	Unlisted Procedure	60699	Unlisted procedure, endocrine system	Yes	CareCore National	
Other Services	Experimental / Investigational	43499	Unlisted procedure, esophagus	Yes	CareCore National	
Other Services	Potentially Cosmetic	69399	Unlisted procedure, external ear	Yes	CareCore National	
Other Services	Unlisted Procedure	67999	Unlisted procedure, eyelids	Yes	CareCore National	
Other Services	Experimental / Investigational	58999	Unlisted procedure, female genital system (nonobstetrical)	Yes	CareCore National	
Other Services	Experimental / Investigational	38999	Unlisted procedure, hemic or lymphatic system	Yes	CareCore National	
Other Services	Unlisted Procedure	69949	Unlisted procedure, inner ear	Yes	CareCore National	
Other Services	Unlisted Procedure	68899	Unlisted procedure, lacrimal system	Yes	CareCore National	
Other Services	Unlisted Procedure	31599	Unlisted procedure, larynx	Yes	CareCore National	
Other Services	Unlisted Procedure	40799	Unlisted procedure, lips	Yes	CareCore National	
Other Services	Unlisted Procedure	47399	Unlisted procedure, liver	Yes	CareCore National	
Other Services	Unlisted Procedure	32999	Unlisted procedure, lungs and pleura	Yes	CareCore National	
Other Services	Experimental / Investigational	55899	Unlisted procedure, male genital system	Yes	CareCore National	
Other Services	Experimental / Investigational	69799	Unlisted procedure, middle ear	Yes	CareCore National	
Other Services	Unlisted Procedure	21899	Unlisted procedure, neck or thorax	Yes	CareCore National	
Other Services	Experimental / Investigational	30999	Unlisted procedure, nose	Yes	CareCore National	
Other Services	Experimental / Investigational	42299	Unlisted procedure, palate, uvula	Yes	CareCore National	
Other Services	Experimental / Investigational	48999	Unlisted procedure, pancreas	Yes	CareCore National	
Other Services	Unlisted Procedure	42999	Unlisted procedure, pharynx, adenoids, or tonsils	Yes	CareCore National	
Other Services	Unlisted Procedure	67299	Unlisted procedure, posterior segment	Yes	CareCore National	
Other Services	Unlisted Procedure	45999	Unlisted procedure, rectum	Yes	CareCore National	
Other Services	Unlisted Procedure	42699	Unlisted procedure, salivary glands or ducts	Yes	CareCore National	
Other Services	Potentially Cosmetic	17999	Unlisted procedure, skin, mucous membrane and subcutaneous tissue	Yes	CareCore National	
Other Services	Unlisted Procedure	44799	Unlisted procedure, small intestine	Yes	CareCore National	
Other Services	Experimental / Investigational	43999	Unlisted procedure, stomach	Yes	CareCore National	
Other Services	Experimental / Investigational	41599	Unlisted procedure, tongue, floor of mouth	Yes	CareCore National	
Other Services	Unlisted Procedure	31899	Unlisted procedure, trachea, bronchi	Yes	CareCore National	
Other Services	Unlisted Procedure	53899	Unlisted procedure, urinary system	Yes	CareCore National	

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Other Services	Unlisted Procedure	94799	Unlisted pulmonary service or procedure	Yes	CareCore National	
Other Services	Unlisted Procedure	99199	Unlisted special service, procedure or report	Yes	CareCore National	
Other Services	Experimental / Investigational	42140	Uvulectomy, excision of uvula	Yes	CareCore National	
Other Services	Potentially Cosmetic	57110	Vaginectomy, complete removal of vaginal wall;	Yes	CareCore National	
Other Services	Outpatient Surgery	57335	Vaginoplasty for intersex state	Yes	CareCore National	
Other Services	Potentially Cosmetic	56620	Vulvectomy simple; partial	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4162	Woundex flow, bioskin flow, 0.5 cc	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4163	Woundex, bioskin, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	Q4234	Xcellerate, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Other Services	Experimental / Investigational	A2004	Xcellistem, 1 mg	Yes	CareCore National	
Other Services	Experimental / Investigational	Q4253	Zenith amniotic membrane, per square centimeter (add-on, list separately in addition to primary procedure)	Add On	CareCore National	
Cardiology	CCTA	75577	Quantification and characterization of coronary atherosclerotic plaque to assess severity of coronary disease, derived from augmentative software analysis of the data set from a coronary computed tomographic angiography, with interpretation and report by a physician or other qualified health care professional	Yes	MedSolutions	
Cardiology	CCTA	C9793	3D predictive model generation for pre-planning of a cardiac procedure, using data from cardiac computed tomographic angiography and/or magnetic resonance imaging with report	Yes	MedSolutions	
Cardiology	Cardiac Electrophysiology	93657	Additional linear or focal intracardiac catheter ablation of the left or right atrium for treatment of atrial fibrillation remaining after completion of pulmonary vein isolation (List separately in addition to code for primary procedure)	Add On	CareCore National	
Cardiology	MR	C9762	Cardiac magnetic resonance imaging for morphology and function, quantification of segmental dysfunction; with strain imaging	Yes	MedSolutions	
Cardiology	MR	C9763	Cardiac magnetic resonance imaging for morphology and function, quantification of segmental dysfunction; with stress imaging	Yes	MedSolutions	
Cardiology	Cardiac Catheterization	93454	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation	Yes	MedSolutions	
Cardiology	Cardiac Catheterization	C7557	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation with left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed and intraprocedural coronary fractional flow reserve (FFR) with 3D functional mapping of color-coded FFR values for the coronary tree, derived from coronary angiogram data, for real-time review and interpretation of possible atherosclerotic stenosis(es) intervention	Yes	MedSolutions	
Cardiology	Cardiac Catheterization	93455	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with catheter placement(s) in bypass graft(s) (internal mammary, free arterial venous grafts) including intraprocedural injection(s) for bypass graft angiography	Yes	MedSolutions	
Cardiology	Cardiac Catheterization	93457	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) including intraprocedural injection(s) for bypass graft angiography and right heart catheterization	Yes	MedSolutions	
Cardiology	Cardiac Catheterization	93458	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed	Yes	MedSolutions	
Cardiology	Cardiac Catheterization	93459	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography	Yes	MedSolutions	
Cardiology	Cardiac Catheterization	93460	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right and left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed	Yes	MedSolutions	
Cardiology	Cardiac Catheterization	93461	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right and left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography	Yes	MedSolutions	
Cardiology	Cardiac Catheterization	93456	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right heart catheterization	Yes	MedSolutions	
Cardiology	Cardiac Catheterization	93453	Combined right and left heart catheterization including intraprocedural injection(s) for left ventriculography, imaging supervision and interpretation, when performed	Yes	MedSolutions	
Cardiology	Cardiac Electrophysiology	93621	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of arrhythmia; with left atrial pacing and recording from coronary sinus or left atrium (List separately in addition to code for primary procedure)	Add On	CareCore National	
Cardiology	Cardiac Electrophysiology	93622	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of arrhythmia; with left ventricular pacing and recording (List separately in addition to code for primary procedure)	Add On	CareCore National	
Cardiology	Cardiac Electrophysiology	93620	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of arrhythmia; with right atrial pacing and recording, right ventricular pacing and recording, His bundle recording	Yes	CareCore National	

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Cardiology	Cardiac Electrophysiology	93653	Comprehensive electrophysiologic evaluation with insertion and repositioning of multiple electrode catheters, induction or attempted induction of an arrhythmia with right atrial pacing and recording and catheter ablation of arrhythmogenic focus, including intracardiac electrophysiologic 3-dimensional mapping, right ventricular pacing and recording, left atrial pacing and recording from coronary sinus or left atrium, and His bundle recording, when performed; with treatment of supraventricular tachycardia by ablation of fast or slow atrioventricular pathway, accessory atrioventricular connection, cavo-tricuspid isthmus or other single atrial focus or source of atrial re-entry	Yes	CareCore National	
Cardiology	Cardiac Electrophysiology	93654	Comprehensive electrophysiologic evaluation with insertion and repositioning of multiple electrode catheters, induction or attempted induction of an arrhythmia with right atrial pacing and recording and catheter ablation of arrhythmogenic focus, including intracardiac electrophysiologic 3-dimensional mapping, right ventricular pacing and recording, left atrial pacing and recording from coronary sinus or left atrium, and His bundle recording, when performed; with treatment of ventricular tachycardia or focus of ventricular ectopy including left ventricular pacing and recording, when performed	Yes	CareCore National	
Cardiology	Cardiac Electrophysiology	93619	Comprehensive electrophysiologic evaluation with right atrial pacing and recording, right ventricular pacing and recording, His bundle recording, including insertion and repositioning of multiple electrode catheters, without induction or attempted induction of arrhythmia	Yes	CareCore National	
Cardiology	Cardiac Electrophysiology	93656	Comprehensive electrophysiologic evaluation with transseptal catheterizations, insertion and repositioning of multiple electrode catheters, induction or attempted induction of an arrhythmia including left or right atrial pacing/recording, and intracardiac catheter ablation of atrial fibrillation by pulmonary vein isolation, including intracardiac electrophysiologic 3-dimensional mapping, intracardiac echocardiography with imaging supervision and interpretation, right ventricular pacing/recording, and His bundle recording, when performed	Yes	CareCore National	
Cardiology	Cardiac Surgery	33266	Endoscopy, surgical; operative tissue ablation and reconstruction of atria, extensive (eg, maze procedure), without cardiopulmonary bypass	Yes	CareCore National	
Cardiology	Cardiac Surgery	33265	Endoscopy, surgical; operative tissue ablation and reconstruction of atria, limited (eg, modified maze procedure), without cardiopulmonary bypass	Yes	CareCore National	
Cardiology	CID	C1764	Event recorder, cardiac (implantable)	Yes	MedSolutions	
Cardiology	Cardiac Surgery	33267	Exclusion of left atrial appendage, open, any method (eg, excision, isolation via stapling, oversewing, ligation, plication, clip)	Yes	CareCore National	
Cardiology	Cardiac Surgery	33269	Exclusion of left atrial appendage, thoracoscopic, any method (eg, excision, isolation via stapling, oversewing, ligation, plication, clip)	Yes	CareCore National	
Cardiology	CID	33225	Insertion of pacing electrode, cardiac venous system, for left ventricular pacing, at time of insertion of implantable defibrillator or pacemaker pulse generator (eg, for upgrade to dual chamber system) (List separately in addition to code for primary procedure)	Add On	MedSolutions	
Cardiology	CID	33224	Insertion of pacing electrode, cardiac venous system, for left ventricular pacing, with attachment to previously placed pacemaker or implantable defibrillator pulse generator (including revision of pocket, removal, insertion, and/or replacement of existing generator)	Yes	MedSolutions	
Cardiology	Cardiac Surgery	33990	Insertion of ventricular assist device, percutaneous, including radiological supervision and interpretation; left heart, arterial access only	Yes	CareCore National	
Cardiology	Cardiac Surgery	33991	Insertion of ventricular assist device, percutaneous, including radiological supervision and interpretation; left heart, both arterial and venous access, with transseptal puncture	Yes	CareCore National	
Cardiology	CID	33249	Insertion or replacement of permanent implantable defibrillator system, with transvenous lead(s), single or dual chamber	Yes	MedSolutions	
Cardiology	CID	33270	Insertion or replacement of permanent subcutaneous implantable defibrillator system, with subcutaneous electrode, including defibrillation threshold evaluation, induction of arrhythmia, evaluation of sensing for arrhythmia termination, and programming or reprogramming of sensing or therapeutic parameters, when performed	Yes	MedSolutions	
Cardiology	CID	33285	Insertion, subcutaneous cardiac rhythm monitor, including programming	Yes	MedSolutions	
Cardiology	Cardiac Electrophysiology	93655	Intracardiac catheter ablation of a discrete mechanism of arrhythmia which is distinct from the primary ablated mechanism, including repeat diagnostic maneuvers, to treat a spontaneous or induced arrhythmia (List separately in addition to code for primary procedure)	Add On	CareCore National	
Cardiology	Cardiac Catheterization	93452	Left heart catheterization including intraprocedural injection(s) for left ventriculography, imaging supervision and interpretation, when performed	Yes	MedSolutions	
Cardiology	Nuclear Cardiology	0331T	Myocardial sympathetic innervation imaging, planar qualitative and quantitative assessment;	Yes	MedSolutions	
Cardiology	Nuclear Cardiology	0332T	Myocardial sympathetic innervation imaging, planar qualitative and quantitative assessment; with tomographic SPECT	Yes	MedSolutions	
Cardiology	MRI CARDIAC	0899T	Noninvasive determination of absolute quantitation of myocardial blood flow (AQMBF), derived from augmentative algorithmic analysis of the dataset acquired via contrast cardiac magnetic resonance (CMR), pharmacologic stress, with interpretation and report by a physician or other qualified health care professional (List separately in addition to code for primary procedure)	- Add On	MedSolutions	
Cardiology	MRI CARDIAC	0900T	Noninvasive estimate of absolute quantitation of myocardial blood flow (AQMBF), derived from assistive algorithmic analysis of the dataset acquired via contrast cardiac magnetic resonance (CMR), pharmacologic stress, with interpretation and report by a physician or other qualified health care professional (List separately in addition to code for primary procedure)	- Add On	MedSolutions	
Cardiology	Cardiac Surgery	33255	Operative tissue ablation and reconstruction of atria, extensive (eg, maze procedure); without cardiopulmonary bypass	Yes	CareCore National	
Cardiology	Cardiac Surgery	33254	Operative tissue ablation and reconstruction of atria, limited (eg, modified maze procedure)	Yes	CareCore National	
Cardiology	Cardiac Surgery	33258	Operative tissue ablation and reconstruction of atria, performed at the time of other cardiac procedure(s), extensive (eg, maze procedure), without cardiopulmonary bypass (List separately in addition to code for primary procedure)	Add On	CareCore National	
Cardiology	Cardiac Surgery	93581	Percutaneous transcatheter closure of a congenital ventricular septal defect with implant	Yes	CareCore National	
Cardiology	Cardiac Surgery	93580	Percutaneous transcatheter closure of congenital interatrial communication (ie, Fontan fenestration, atrial septal defect) with implant	Yes	CareCore National	
Cardiology	Cardiac Surgery	93582	Percutaneous transcatheter closure of patent ductus arteriosus	Yes	CareCore National	

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Cardiology	Cardiac Surgery	33340	Percutaneous transcatheter closure of the left atrial appendage with endocardial implant, including fluoroscopy, transseptal puncture, catheter placement(s), left atrial angiography, left atrial appendage angiography, when performed, and radiological supervision and interpretation	Yes	CareCore National	
Cardiology	Cardiac Surgery	33993	Repositioning of percutaneous right or left heart ventricular assist device with imaging guidance at separate and distinct session from insertion	Yes	CareCore National	
Cardiology	Cardiac Catheterization	93451	Right Heart Catheterization Including Measurement(S) Of Oxygen Saturation And Cardiac Output, When Performed	Yes	MedSolutions	
Cardiology	Cardiac Surgery	33363	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; open axillary artery approach	Yes	CareCore National	
Cardiology	Cardiac Surgery	33362	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; open femoral artery approach	Yes	CareCore National	
Cardiology	Cardiac Surgery	33364	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; open iliac artery approach	Yes	CareCore National	
Cardiology	Cardiac Surgery	33361	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; percutaneous femoral artery approach	Yes	CareCore National	
Cardiology	Cardiac Surgery	33365	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; transaortic approach (eg, median sternotomy, mediastinotomy)	Yes	CareCore National	
Cardiology	Cardiac Surgery	33366	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; transapical exposure (eg, left thoracotomy)	Yes	CareCore National	
Cardiology	Cardiac Surgery	0483T	Transcatheter mitral valve implantation/replacement (TMVI) with prosthetic valve; percutaneous approach, including transseptal puncture, when performed	Yes	CareCore National	
Cardiology	Cardiac Surgery	33418	Transcatheter mitral valve repair, percutaneous approach, including transseptal puncture when performed; initial prosthesis	Yes	CareCore National	
Cardiology	Cardiac Surgery	33477	Transcatheter pulmonary valve implantation, percutaneous approach, including pre-stenting of the valve delivery site, when performed	Yes	CareCore National	
Cardiology	Cardiac Surgery	0806T	Transcatheter superior and/or inferior vena cava prosthetic valve implantation (ie, caval valve implantation [CAVI]); open femoral vein approach	Yes	CareCore National	
Cardiology	Cardiac Surgery	0805T	Transcatheter superior and/or inferior vena cava prosthetic valve implantation (ie, caval valve implantation [CAVI]); percutaneous femoral vein approach	Yes	CareCore National	
Cardiology	Cardiac Surgery	33999	Unlisted procedure, cardiac surgery	Yes	CareCore National	
Radiology	MRI	0648T	Quantitative magnetic resonance for analysis of tissue composition (eg, fat, iron, water content), including multiparametric data acquisition, data preparation and transmission, interpretation and report, obtained without diagnostic MRI examination of the same anatomy (eg, organ, gland, tissue, target structure) during the same session; single organ	Experimental / Investigational - Yes	MedSolutions	
Radiology	MRI	0649T	Quantitative magnetic resonance for analysis of tissue composition (eg, fat, iron, water content), including multiparametric data acquisition, data preparation and transmission, interpretation and report, obtained with diagnostic MRI examination of the same anatomy (eg, organ, gland, tissue, target structure); single organ (List separately in addition to code for primary procedure)	- Add On	MedSolutions	
Radiology	CPET	78434	Absolute quantitation of myocardial blood flow (AQMBF), positron emission tomography (PET), rest and pharmacologic stress (List separately in addition to code for primary procedure)	Add On	MedSolutions	
Radiology	MRI	0697T	Quantitative magnetic resonance for analysis of tissue composition (eg, fat, iron, water content), including multiparametric data acquisition, data preparation and transmission, interpretation and report, obtained without diagnostic MRI examination of the same anatomy (eg, organ, gland, tissue, target structure) during the same session; multiple organs	Experimental / Investigational - Yes	MedSolutions	
Radiology	MRI	0698T	Quantitative magnetic resonance for analysis of tissue composition (eg, fat, iron, water content), including multiparametric data acquisition, data preparation and transmission, interpretation and report, obtained with diagnostic MRI examination of the same anatomy (eg, organ, gland, tissue, target structure); multiple organs (List separately in addition to code for primary procedure)	- Add On	MedSolutions	
Radiology	MR	70336	Magnetic resonance (eg, proton) imaging, temporomandibular joint(s)	Yes	MedSolutions	
Radiology	CT	70471	Computed tomographic angiography (CTA), head and neck, with contrast material(s), including noncontrast images, when performed, and image postprocessing	Yes	MedSolutions	
Radiology	CT	70491	Computed tomography, soft tissue neck; with contrast material(s)	Yes	MedSolutions	
Radiology	CT	70490	Computed tomography, soft tissue neck; without contrast material	Yes	MedSolutions	
Radiology	CT	70492	Computed tomography, soft tissue neck; without contrast material followed by contrast material(s) and further sections	Yes	MedSolutions	
Radiology	CT	70498	Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes	MedSolutions	
Radiology	MR	70540	Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Yes	MedSolutions	
Radiology	MR	70542	Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; with contrast material(s)	Yes	MedSolutions	
Radiology	MR	70543	Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s), followed by contrast material(s) and further sequences	Yes	MedSolutions	
Radiology	MRA	70547	Magnetic resonance angiography, neck; without contrast material(s)	Yes	MedSolutions	
Radiology	MRA	70548	Magnetic resonance angiography, neck; with contrast material(s)	Yes	MedSolutions	
Radiology	MRA	70549	Magnetic resonance angiography, neck; without contrast material(s), followed by contrast material(s) and further sequences	Yes	MedSolutions	
Radiology	CT	71250	Computed tomography, thorax, diagnostic; without contrast material	Yes	MedSolutions	
Radiology	CT	71260	Computed tomography, thorax, diagnostic; with contrast material(s)	Yes	MedSolutions	
Radiology	CT	71270	Computed tomography, thorax, diagnostic; without contrast material, followed by contrast material(s) and further sections	Yes	MedSolutions	
Radiology	CT	71275	Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes	MedSolutions	
Radiology	MR	71550	Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s)	Yes	MedSolutions	
Radiology	MR	71551	Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); with contrast material(s)	Yes	MedSolutions	

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Radiology	MR	71552	Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s), followed by contrast material(s) and further sequences	Yes	MedSolutions	
Radiology	MRA	71555	Magnetic resonance angiography, chest (excluding myocardium), with or without contrast material(s)	Yes	MedSolutions	
Radiology	CT	72125	Computed tomography, cervical spine; without contrast material	Yes	MedSolutions	
Radiology	CT	72126	Computed tomography, cervical spine; with contrast material	Yes	MedSolutions	
Radiology	CT	72127	Computed tomography, cervical spine; without contrast material, followed by contrast material(s) and further sections	Yes	MedSolutions	
Radiology	CT	72128	Computed tomography, thoracic spine; without contrast material	Yes	MedSolutions	
Radiology	CT	72129	Computed tomography, thoracic spine; with contrast material	Yes	MedSolutions	
Radiology	CT	72130	Computed tomography, thoracic spine; without contrast material, followed by contrast material(s) and further sections	Yes	MedSolutions	
Radiology	CT	72131	Computed tomography, lumbar spine; without contrast material	Yes	MedSolutions	
Radiology	CT	72132	Computed tomography, lumbar spine; with contrast material	Yes	MedSolutions	
Radiology	CT	72133	Computed tomography, lumbar spine; without contrast material, followed by contrast material(s) and further sections	Yes	MedSolutions	
Radiology	MR	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Yes	MedSolutions	
Radiology	MR	72142	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; with contrast material(s)	Yes	MedSolutions	
Radiology	MR	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Yes	MedSolutions	
Radiology	MR	72147	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; with contrast material(s)	Yes	MedSolutions	
Radiology	MR	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Yes	MedSolutions	
Radiology	MR	72149	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; with contrast material(s)	Yes	MedSolutions	
Radiology	MR	72156	Magnetic resonance (eg, proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; cervical	Yes	MedSolutions	
Radiology	MR	72157	Magnetic resonance (eg, proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; thoracic	Yes	MedSolutions	
Radiology	MR	72158	Magnetic resonance (eg, proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; lumbar	Yes	MedSolutions	
Radiology	MRA	72159	Magnetic resonance angiography, spinal canal and contents, with or without contrast material(s)	Yes	MedSolutions	
Radiology	CT	72191	Computed tomographic angiography, pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes	MedSolutions	
Radiology	CT	72192	Computed tomography, pelvis; without contrast material	Yes	MedSolutions	
Radiology	CT	72193	Computed tomography, pelvis; with contrast material(s)	Yes	MedSolutions	
Radiology	CT	72194	Computed tomography, pelvis; without contrast material, followed by contrast material(s) and further sections	Yes	MedSolutions	
Radiology	MR	72195	Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s)	Yes	MedSolutions	
Radiology	MR	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Yes	MedSolutions	
Radiology	MR	72197	Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s), followed by contrast material(s) and further sequences	Yes	MedSolutions	
Radiology	MRA	72198	Magnetic resonance angiography, pelvis, with or without contrast material(s)	Yes	MedSolutions	
Radiology	CT	73200	Computed tomography, upper extremity; without contrast material	Yes	MedSolutions	
Radiology	CT	73201	Computed tomography, upper extremity; with contrast material(s)	Yes	MedSolutions	
Radiology	CT	73202	Computed tomography, upper extremity; without contrast material, followed by contrast material(s) and further sections	Yes	MedSolutions	
Radiology	CT	73206	Computed tomographic angiography, upper extremity, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes	MedSolutions	
Radiology	MR	73218	Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s)	Yes	MedSolutions	
Radiology	MR	73219	Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; with contrast material(s)	Yes	MedSolutions	
Radiology	MR	73220	Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Yes	MedSolutions	
Radiology	MR	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Yes	MedSolutions	
Radiology	MR	73222	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; with contrast material(s)	Yes	MedSolutions	
Radiology	MR	73223	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s), followed by contrast material(s) and further sequences	Yes	MedSolutions	
Radiology	MRA	73225	Magnetic resonance angiography, upper extremity, with or without contrast material(s)	Yes	MedSolutions	
Radiology	CT	73700	Computed tomography, lower extremity; without contrast material	Yes	MedSolutions	
Radiology	CT	73701	Computed tomography, lower extremity; with contrast material(s)	Yes	MedSolutions	
Radiology	CT	73702	Computed tomography, lower extremity; without contrast material, followed by contrast material(s) and further sections	Yes	MedSolutions	
Radiology	CT	73706	Computed tomographic angiography, lower extremity, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes	MedSolutions	
Radiology	MR	73718	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s)	Yes	MedSolutions	
Radiology	MR	73719	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; with contrast material(s)	Yes	MedSolutions	
Radiology	MR	73720	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Yes	MedSolutions	
Radiology	MR	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Yes	MedSolutions	
Radiology	MR	73722	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; with contrast material(s)	Yes	MedSolutions	
Radiology	MR	73723	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material(s), followed by contrast material(s) and further sequences	Yes	MedSolutions	
Radiology	MRA	73725	Magnetic resonance angiography, lower extremity, with or without contrast material(s)	Yes	MedSolutions	
Radiology	CT	74150	Computed tomography, abdomen; without contrast material	Yes	MedSolutions	
Radiology	CT	74160	Computed tomography, abdomen; with contrast material(s)	Yes	MedSolutions	
Radiology	CT	74170	Computed tomography, abdomen; without contrast material, followed by contrast material(s) and further sections	Yes	MedSolutions	

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Radiology	CT	74174	Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes	MedSolutions	
Radiology	CT	74175	Computed tomographic angiography, abdomen, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes	MedSolutions	
Radiology	CT	74176	Computed tomography, abdomen and pelvis; without contrast material	Yes	MedSolutions	
Radiology	CT	74177	Computed tomography, abdomen and pelvis; with contrast material(s)	Yes	MedSolutions	
Radiology	CT	74178	Computed Tomography, Abdomen And Pelvis; Without Contrast Material In One Or Both Body Regions, Followed By Contrast Material(S) And Further Sections In One Or Both Body Regions	Yes	MedSolutions	
Radiology	MR	74181	Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Yes	MedSolutions	
Radiology	MR	74182	Magnetic resonance (eg, proton) imaging, abdomen; with contrast material(s)	Yes	MedSolutions	
Radiology	MR	74183	Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s), followed by with contrast material(s) and further sequences	Yes	MedSolutions	
Radiology	MRA	74185	Magnetic resonance angiography, abdomen, with or without contrast material(s)	Yes	MedSolutions	
Radiology	CT	75635	Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes	MedSolutions	
Radiology	MR	76390	Magnetic resonance spectroscopy	Yes	MedSolutions	
Radiology	MRI	76391	Magnetic resonance (eg, vibration) elastography	Yes	MedSolutions	
Radiology	CT	76497	Unlisted computed tomography procedure (eg, diagnostic, interventional)	Yes	MedSolutions	
Radiology	MR	76498	Unlisted magnetic resonance procedure (eg, diagnostic, interventional)	Yes	MedSolutions	
Radiology	BMRI	77046	Magnetic resonance imaging, breast, without contrast material; unilateral	Yes	MedSolutions	
Radiology	BMRI	77047	Magnetic resonance imaging, breast, without contrast material; bilateral	Yes	MedSolutions	
Radiology	BMRI	77048	Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral	Yes	MedSolutions	
Radiology	BMRI	77049	Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; bilateral	Yes	MedSolutions	
Radiology	MR	77084	Magnetic resonance (eg, proton) imaging, bone marrow blood supply	Yes	MedSolutions	
Radiology	CPET	78429	Myocardial imaging, positron emission tomography (PET), metabolic evaluation study (including ventricular wall motion[s] and/or ejection fraction[s], when performed), single study; with concurrently acquired computed tomography transmission scan	Yes	MedSolutions	
Radiology	CPET	78430	Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion[s] and/or ejection fraction[s], when performed); single study, at rest or stress (exercise or pharmacologic), with concurrently acquired computed tomography transmission scan	Yes	MedSolutions	
Radiology	CPET	78431	Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion[s] and/or ejection fraction[s], when performed); multiple studies at rest and stress (exercise or pharmacologic), with concurrently acquired computed tomography transmission scan	Yes	MedSolutions	
Radiology	CPET	78432	Myocardial imaging, positron emission tomography (PET), combined perfusion with metabolic evaluation study (including ventricular wall motion[s] and/or ejection fraction[s], when performed), dual radiotracer (eg, myocardial viability);	Yes	MedSolutions	
Radiology	CPET	78433	Myocardial imaging, positron emission tomography (PET), combined perfusion with metabolic evaluation study (including ventricular wall motion[s] and/or ejection fraction[s], when performed), dual radiotracer (eg, myocardial viability); with concurrently acquired computed tomography transmission scan	Yes	MedSolutions	
Radiology	PET	78459	Myocardial imaging, positron emission tomography (PET), metabolic evaluation study (including ventricular wall motion[s] and/or ejection fraction[s], when performed), single study;	Yes	MedSolutions	
Radiology	PET	78491	Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion[s] and/or ejection fraction[s], when performed); single study, at rest or stress (exercise or pharmacologic)	Yes	MedSolutions	
Radiology	PET	78492	Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion[s] and/or ejection fraction[s], when performed); multiple studies at rest and stress (exercise or pharmacologic)	Yes	MedSolutions	
Radiology	PET	78608	Brain imaging, positron emission tomography (PET); metabolic evaluation	Yes	MedSolutions	
Radiology	PET	78609	Brain imaging, positron emission tomography (PET); perfusion evaluation	Yes	MedSolutions	
Radiology	PET	78811	Positron emission tomography (PET) imaging; limited area (eg, chest, head/neck)	Yes	MedSolutions	
Radiology	PET	78812	Positron emission tomography (PET) imaging; skull base to mid-thigh	Yes	MedSolutions	
Radiology	PET	78813	Positron emission tomography (PET) imaging; whole body	Yes	MedSolutions	
Radiology	PET	78814	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; limited area (eg, chest, head/neck)	Yes	MedSolutions	
Radiology	PET	78815	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; skull base to mid-thigh	Yes	MedSolutions	
Radiology	PET	78816	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Yes	MedSolutions	
Radiology	MR	0609T	Magnetic resonance spectroscopy, determination and localization of discogenic pain (cervical, thoracic, or lumbar); acquisition of single voxel data, per disc, on biomarkers (ie, lactic acid, carbohydrate, alanine, laal, propionic acid, proteoglycan, and collagen) in at least 3 discs	Yes	MedSolutions	
Radiology	MR	0610T	Magnetic resonance spectroscopy, determination and localization of discogenic pain (cervical, thoracic, or lumbar); transmission of biomarker data for software analysis	Yes	MedSolutions	
Radiology	MR	0611T	Magnetic resonance spectroscopy, determination and localization of discogenic pain (cervical, thoracic, or lumbar); postprocessing for algorithmic analysis of biomarker data for determination of relative chemical differences between discs	Yes	MedSolutions	
Radiology	MR	0612T	Magnetic resonance spectroscopy, determination and localization of discogenic pain (cervical, thoracic, or lumbar); interpretation and report	Yes	MedSolutions	
Radiology	CT	0633T	Computed tomography, breast, including 3D rendering, when performed, unilateral; without contrast material	Yes	MedSolutions	
Radiology	CT	0634T	Computed tomography, breast, including 3D rendering, when performed, unilateral; with contrast material(s)	Yes	MedSolutions	
Radiology	CT	0635T	Computed tomography, breast, including 3D rendering, when performed, unilateral; without contrast, followed by contrast material(s)	Yes	MedSolutions	
Radiology	CT	0636T	Computed tomography, breast, including 3D rendering, when performed, bilateral; without contrast material(s)	Yes	MedSolutions	

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Radiology	CT	0637T	Computed tomography, breast, including 3D rendering, when performed, bilateral; with contrast material(s)	Yes	MedSolutions	
Radiology	CT	0638T	Computed tomography, breast, including 3D rendering, when performed, bilateral; without contrast, followed by contrast material(s)	Yes	MedSolutions	
Radiology	CT	0710T	Noninvasive arterial plaque analysis using software processing of data from non-coronary computerized tomography angiography; including data preparation and transmission, quantification of the structure and composition of the vessel wall and assessment for lipid-rich necrotic core plaque to assess atherosclerotic plaque stability, data review, interpretation and report	Yes	MedSolutions	
Radiology	CT	0711T	Noninvasive arterial plaque analysis using software processing of data from non-coronary computerized tomography angiography; data preparation and transmission	Yes	MedSolutions	
Radiology	CT	0712T	Noninvasive arterial plaque analysis using software processing of data from non-coronary computerized tomography angiography; quantification of the structure and composition of the vessel wall and assessment for lipid-rich necrotic core plaque to assess atherosclerotic plaque stability	Yes	MedSolutions	
Radiology	CT	0713T	Noninvasive arterial plaque analysis using software processing of data from non-coronary computerized tomography angiography; data review, interpretation and report	Yes	MedSolutions	
Radiology	MRI	0865T	Quantitative magnetic resonance image (MRI) analysis of the brain with comparison to prior magnetic resonance (MR) study(ies), including lesion identification, characterization, and quantification, with brain volume(s) quantification and/or severity score, when performed, data preparation and transmission, interpretation and report, obtained without diagnostic MRI examination of the brain during the same session	Yes	MedSolutions	
Radiology	MRI	0866T	Quantitative magnetic resonance image (MRI) analysis of the brain with comparison to prior magnetic resonance (MR) study(ies), including lesion detection, characterization, and quantification, with brain volume(s) quantification and/or severity score, when performed, data preparation and transmission, interpretation and report, obtained with diagnostic MRI examination of the brain (List separately in addition to code for primary procedure)	- Add On	MedSolutions	
Radiology	MRA	C8900	Magnetic resonance angiography with contrast, abdomen	Yes	MedSolutions	
Radiology	MRA	C8901	Magnetic resonance angiography without contrast, abdomen	Yes	MedSolutions	
Radiology	MRA	C8902	Magnetic resonance angiography without contrast followed by with contrast, abdomen	Yes	MedSolutions	
Radiology	MR	C8903	Magnetic resonance imaging with contrast, breast; unilateral	Yes	MedSolutions	
Radiology	MR	C8905	Magnetic resonance imaging without contrast followed by with contrast, breast; unilateral	Yes	MedSolutions	
Radiology	MR	C8906	Magnetic resonance imaging with contrast, breast; bilateral	Yes	MedSolutions	
Radiology	MR	C8908	Magnetic resonance imaging without contrast followed by with contrast, breast; bilateral	Yes	MedSolutions	
Radiology	MRA	C8909	Magnetic resonance angiography with contrast, chest (excluding myocardium)	Yes	MedSolutions	
Radiology	MRA	C8910	Magnetic resonance angiography without contrast, chest (excluding myocardium)	Yes	MedSolutions	
Radiology	MRA	C8911	Magnetic resonance angiography without contrast followed by with contrast, chest (excluding myocardium)	Yes	MedSolutions	
Radiology	MRA	C8912	Magnetic resonance angiography with contrast, lower extremity	Yes	MedSolutions	
Radiology	MRA	C8913	Magnetic resonance angiography without contrast, lower extremity	Yes	MedSolutions	
Radiology	MRA	C8914	Magnetic resonance angiography without contrast followed by with contrast, lower extremity	Yes	MedSolutions	
Radiology	MRA	C8918	Magnetic resonance angiography with contrast, pelvis	Yes	MedSolutions	
Radiology	MRA	C8919	Magnetic resonance angiography without contrast, pelvis	Yes	MedSolutions	
Radiology	MRA	C8920	Magnetic resonance angiography without contrast followed by with contrast, pelvis	Yes	MedSolutions	
Radiology	MRA	C8935	Magnetic resonance angiography without contrast, upper extremity	Yes	MedSolutions	
Radiology	MRA	C8936	Magnetic resonance angiography without contrast followed by with contrast, upper extremity	Yes	MedSolutions	
Radiology	BMRI	C8937	Computer-aided detection, including computer algorithm analysis of breast mri image data for lesion detection/characterization, pharmacokinetic analysis, with further physician review for interpretation (list separately in addition to code for primary procedure)	Add On	MedSolutions	
Radiology	PET	G0219	PET Imaging Whole Body; Melanoma For Non-Covered Indications	Yes	MedSolutions	
Radiology	PET	G0235	PET Imaging, Any Site, Not Otherwise Specified	Yes	MedSolutions	
Radiology	PET	G0252	Pet imaging, full and partial-ring pet scanners only, for initial diagnosis of breast cancer and/or surgical planning for breast cancer (e.g., initial staging of axillary lymph nodes)	Yes	MedSolutions	
Radiology	MR	S8037	Magnetic resonance cholangiopancreatography (mrcp)	Yes	MedSolutions	
Radiology	CT	S8092	Electron beam computed tomography (also known as ultrafast ct, cine ct)	Yes	MedSolutions	
Radiology	MRA	C8931	Magnetic resonance angiography with contrast, spinal canal and contents	Yes	MedSolutions	
Radiology	MRA	C8932	Magnetic resonance angiography without contrast, spinal canal and contents	Yes	MedSolutions	
Radiology	MRA	C8933	Magnetic resonance angiography without contrast followed by with contrast, spinal canal and contents	Yes	MedSolutions	
Radiology	MRA	C8934	Magnetic resonance angiography with contrast, upper extremity	Yes	MedSolutions	
Radiology	MRI	C9791	Magnetic resonance imaging with inhaled hyperpolarized xenon-129 contrast agent, chest, including preparation and administration of agent	Yes	MedSolutions	
Musculoskeletal	Spine Surgery	62287	Decompression, percutaneous, of nucleus pulposus of intervertebral disc, any method utilizing needle-based technique to remove disc material under fluoroscopic imaging or other form of indirect visualization, with discography and/or epidural injection(s) at the treated level(s), when performed, single or multiple levels, lumbar	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22527	Percutaneous intradiscal electrothermal annuloplasty, unilateral or bilateral including fluoroscopic guidance; 1 or more additional levels (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	0201T	Percutaneous sacral augmentation (sacroplasty), bilateral injections, including the use of a balloon or mechanical device, when used, 2 or more needles, includes imaging guidance and bone biopsy, when performed	Yes	CareCore National	
Musculoskeletal	Spine Surgery	0200T	Percutaneous sacral augmentation (sacroplasty), unilateral injection(s), including the use of a balloon or mechanical device, when used, 1 or more needles, includes imaging guidance and bone biopsy, when performed	Yes	CareCore National	

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Crossover Code for: • **Primary Program:** Other Services • **Companion Program:** **Musculoskeletal** - Joint / Spine Surgery *(See External Notation column for more details.)*	Spine Surgery	64999*	Unlisted procedure, nervous system	Yes	CareCore National	This is a crossover code that can be requested under three programs: **MSK Joint**, **MSK Spine Surgery** or **Other Services**. • If your request is intended to be used for **Other Services**, please submit your request under the **Other Services program** through the **CareCoreNational platform**. • If your request is intended to be used for **MSK Spine Surgery**, please submit your request under the **MSK Spine program** through the **CareCoreNational platform**. • If your request is intended to be used for **MSK Joint Surgery**, please submit your request under the **Other Services program** through the **Medsolutions platform**.
Musculoskeletal	Spine Surgery	22850	Removal of posterior nonsegmental instrumentation (eg, Harrington rod)	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22855	Removal of anterior instrumentation	Yes	CareCore National	
Musculoskeletal	Spine Surgery	0657T	Anterior lumbar or thoracolumbar vertebral body tethering; 8 or more vertebral segments	Yes	CareCore National	
Musculoskeletal	Spine Surgery	C2614	Probe, percutaneous lumbar discectomy	Yes	CareCore National	
Musculoskeletal	Spine Surgery	20930	Allograft, morselized, or placement of osteopromotive material, for spine surgery only (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	20931	Allograft, structural, for spine surgery only (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	22845	Anterior instrumentation; 2 to 3 vertebral segments (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	22846	Anterior instrumentation; 4 to 7 vertebral segments (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	22847	Anterior instrumentation; 8 or more vertebral segments (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	22554	Arthrodesis, Anterior Interbody Technique, Including Minimal Discectomy To Prepare Interspace (Other Than For Decompression); Cervical Below C2	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22585	Arthrodesis, anterior interbody technique, including minimal discectomy to prepare interspace (other than for decompression); each additional interspace (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	22558	Arthrodesis, Anterior Interbody Technique, Including Minimal Discectomy To Prepare Interspace (Other Than For Decompression); Lumbar	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22556	Arthrodesis, anterior interbody technique, including minimal discectomy to prepare interspace (other than for decompression); thoracic	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22551	Arthrodesis, Anterior Interbody, Including Disc Space Preparation, Discectomy, Osteophytectomy And Decompression Of Spinal Cord And/Or Nerve Roots; Cervical Below C2	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22552	Arthrodesis, anterior interbody, including disc space preparation, discectomy, osteophytectomy and decompression of spinal cord and/or nerve roots; cervical below C2, each additional interspace (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	22808	Arthrodesis, anterior, for spinal deformity, with or without cast; 2 to 3 vertebral segments	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22810	Arthrodesis, anterior, for spinal deformity, with or without cast; 4 to 7 vertebral segments	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22812	Arthrodesis, anterior, for spinal deformity, with or without cast; 8 or more vertebral segments	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22634	Arthrodesis, combined posterior or posterolateral technique with posterior interbody technique including laminectomy and/or discectomy sufficient to prepare interspace (other than for decompression), single interspace, lumbar; each additional interspace (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	22633	Arthrodesis, combined posterior or posterolateral technique with posterior interbody technique including laminectomy and/or discectomy sufficient to prepare interspace (other than for decompression), single interspace, lumbar;	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22533	Arthrodesis, Lateral Extracavitary Technique, Including Minimal Discectomy To Prepare Interspace (Other Than For Decompression); Lumbar	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22534	Arthrodesis, lateral extracavitary technique, including minimal discectomy to prepare interspace (other than for decompression); thoracic or lumbar, each additional vertebral segment (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	22632	Arthrodesis, posterior interbody technique, including laminectomy and/or discectomy to prepare interspace (other than for decompression), single interspace, lumbar; each additional interspace (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	22630	Arthrodesis, posterior interbody technique, including laminectomy and/or discectomy to prepare interspace (other than for decompression), single interspace, lumbar;	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22600	Arthrodesis, Posterior Or Posterolateral Technique, Single interspace, Cervical Below C2 Segment	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22614	Arthrodesis, posterior or posterolateral technique, single interspace; each additional interspace (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	22612	Arthrodesis, Posterior Or Posterolateral Technique, Single Interspace; Lumbar (With Lateral Transverse Technique, When Performed)	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22610	Arthrodesis, posterior or posterolateral technique, single interspace; thoracic (with lateral transverse technique, when performed)	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22595	Arthrodesis, posterior technique, atlas-axis (C1-C2)	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22804	Arthrodesis, posterior, for spinal deformity, with or without cast; 13 or more vertebral segments	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22802	Arthrodesis, posterior, for spinal deformity, with or without cast; 7 to 12 vertebral segments	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22800	Arthrodesis, posterior, for spinal deformity, with or without cast; up to 6 vertebral segments	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22586	Arthrodesis, pre-sacral interbody technique, including disc space preparation, discectomy, with posterior instrumentation, with image guidance, includes bone graft when performed, L5-S1 interspace	Yes	CareCore National	

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
Musculoskeletal	Spine Surgery	27280	Arthrodesis, sacroiliac joint, open, includes obtaining bone graft, including instrumentation, when performed	Yes	CareCore National	
Musculoskeletal	Spine Surgery	27278	Arthrodesis, sacroiliac joint, percutaneous or minimally invasive, with image guidance, includes obtaining bone graft when performed, unilateral; placement of intra-articular device(s), without cortical piercing	Yes	CareCore National	
Musculoskeletal	Spine Surgery	27279	Arthrodesis, sacroiliac joint, percutaneous or minimally invasive, with image guidance, includes obtaining bone graft when performed, unilateral; placement of transarticular device(s) and/or intra-articular device(s) piercing the lateral or medial cortices of the ilium and the lateral cortex of the sacrum	Yes	CareCore National	
Musculoskeletal	Spine Surgery	20936	Autograft for spine surgery only (includes harvesting the graft); local (eg, ribs, spinous process, or laminar fragments) obtained from same incision (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	20937	Autograft for spine surgery only (includes harvesting the graft); morselized (through separate skin or fascial incision) (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	20938	Autograft for spine surgery only (includes harvesting the graft); structural, bicortical or tricortical (through separate skin or fascial incision) (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	63078	Discectomy, anterior, with decompression of spinal cord and/or nerve root(s), including osteophytectomy; thoracic, each additional interspace (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	63077	Discectomy, anterior, with decompression of spinal cord and/or nerve root(s), including osteophytectomy; thoracic, single interspace	Yes	CareCore National	
Musculoskeletal	Spine Surgery	20975	Electrical Stimulation To Aid Bone Healing; Invasive (Operative)	Yes	CareCore National	
Musculoskeletal	Spine Surgery	62380	Endoscopic Decompression Of Spinal Cord, Nerve Root(S), Including Laminotomy, Partial Facetectomy, Foraminotomy, Discectomy And/Or Excision Of Herniated Intervertebral Disc, 1 Interspace, Lumbar	Yes	CareCore National	
Musculoskeletal	Spine Surgery	62290	Injection procedure for discography, each level; lumbar	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22853	Insertion of interbody biomechanical device(s) (eg, synthetic cage, mesh) with integral anterior instrumentation for device anchoring (eg, screws, flanges), when performed, to intervertebral disc space in conjunction with interbody arthrodesis, each interspace (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	22867	Insertion Of Interlaminar/Interspinous Process Stabilization/Distraction Device, Without Fusion, Including Image Guidance When Performed, With Open Decompression, Lumbar; Single Level	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22868	Insertion of interlaminar/interspinous process stabilization/distraction device, without fusion, including image guidance when performed, with open decompression, lumbar; second level (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	22869	Insertion Of Interlaminar/Interspinous Process Stabilization/Distraction Device, Without Open Decompression Or Fusion, Including Image Guidance When Performed, Lumbar; Single Level	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22870	Insertion of interlaminar/interspinous process stabilization/distraction device, without open decompression or fusion, including image guidance when performed, lumbar; second level (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	22854	Insertion of intervertebral biomechanical device(s) (eg, synthetic cage, mesh) with integral anterior instrumentation for device anchoring (eg, screws, flanges), when performed, to vertebral corpectomy(ies) (vertebral body resection, partial or complete) defect, in conjunction with interbody arthrodesis, each contiguous defect (List separately in addition to code for primary procedure)	- Add On	CareCore National	
Musculoskeletal	Spine Surgery	22859	Insertion of intervertebral biomechanical device(s) (eg, synthetic cage, mesh, methylmethacrylate) to intervertebral disc space or vertebral body defect without interbody arthrodesis, each contiguous defect (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	22841	Internal spinal fixation by wiring of spinous processes (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	C1821	Interspinous process distraction device (implantable)	Yes	CareCore National	
Musculoskeletal	Spine Surgery	63001	Laminectomy With Exploration And/Or Decompression Of Spinal Cord And/Or Cauda Equina, Without Facetectomy, Foraminotomy Or Discectomy (Eg, Spinal Stenosis), 1 Or 2 Vertebral Segments; Cervical	Yes	CareCore National	
Musculoskeletal	Spine Surgery	63005	Laminectomy with exploration and/or decompression of spinal cord and/or cauda equina, without facetectomy, foraminotomy or discectomy (eg, spinal stenosis), 1 or 2 vertebral segments; lumbar, except for spondylolisthesis	Yes	CareCore National	
Musculoskeletal	Spine Surgery	63015	Laminectomy With Exploration And/Or Decompression Of Spinal Cord And/Or Cauda Equina, Without Facetectomy, Foraminotomy Or Discectomy (Eg, Spinal Stenosis), More Than 2 Vertebral Segments; Cervical	Yes	CareCore National	
Musculoskeletal	Spine Surgery	63017	Laminectomy With Exploration And/Or Decompression Of Spinal Cord And/Or Cauda Equina, Without Facetectomy, Foraminotomy Or Discectomy (Eg, Spinal Stenosis), More Than 2 Vertebral Segments; Lumbar	Yes	CareCore National	
Musculoskeletal	Spine Surgery	63016	Laminectomy with exploration and/or decompression of spinal cord and/or cauda equina, without facetectomy, foraminotomy or discectomy (eg, spinal stenosis), more than 2 vertebral segments; thoracic	Yes	CareCore National	
Musculoskeletal	Spine Surgery	63012	Laminectomy with removal of abnormal facets and/or pars inter-articularis with decompression of cauda equina and nerve roots for spondylolisthesis, lumbar (Gill type procedure)	Yes	CareCore National	
Musculoskeletal	Spine Surgery	63047	Laminectomy, facetectomy and foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s], [eg, spinal or lateral recess stenosis]), single vertebral segment; lumbar	Yes	CareCore National	
Musculoskeletal	Spine Surgery	63048	Laminectomy, facetectomy and foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s], [eg, spinal or lateral recess stenosis]), single vertebral segment; each additional vertebral segment, cervical, thoracic, or lumbar (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	63045	Laminectomy, facetectomy and foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s], [eg, spinal or lateral recess stenosis]), single vertebral segment; cervical	Yes	CareCore National	
Musculoskeletal	Spine Surgery	63044	Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc, reexploration, single interspace; each additional lumbar interspace (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	63042	Laminotomy (Hemilaminectomy), With Decompression Of Nerve Root(S), Including Partial Facetectomy, Foraminotomy And/Or Excision Of Herniated Intervertebral Disc, Reexploration, Single Interspace; Lumbar	Yes	CareCore National	
Musculoskeletal	Spine Surgery	63020	Laminotomy (Hemilaminectomy), With Decompression Of Nerve Root(S), Including Partial Facetectomy, Foraminotomy And/Or Excision Of Herniated Intervertebral Disc; 1 Interspace, Cervical	Yes	CareCore National	
Musculoskeletal	Spine Surgery	63030	Laminotomy (Hemilaminectomy), With Decompression Of Nerve Root(S), Including Partial Facetectomy, Foraminotomy And/Or Excision Of Herniated Intervertebral Disc; 1 Interspace, Lumbar	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22505	Manipulation of spine requiring anesthesia, any region	Experimental / Investigational - Yes	CareCore National	

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
Crossover Code for: • **Primary Program:** DME / O&P • **Companion Program:** Musculoskeletal (MSK) - Spine Surgery *(See External Notation column for more details.)*	Spine Surgery	E0748*	Osteogenesis stimulator, electrical, non-invasive, spinal applications	Yes	CareCore National	This is a crossover code that can be requested under two programs: **MSK Spine Surgery** and **DME** • If your request is intended to be used in conjuction with **MSK Spine Surgery**, please submit your request under the **MSK Spine program** through the **CareCoreNational platform**. • If your request is intended to be **DME**, please submit your request under the **DME program** through the **CareCoreNational platform**.
Musculoskeletal	Spine Surgery	22220	Osteotomy of spine, including discectomy, anterior approach, single vertebral segment, cervical	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22226	Osteotomy of spine, including discectomy, anterior approach, single vertebral segment; each additional vertebral segment (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	22224	Osteotomy of spine, including discectomy, anterior approach, single vertebral segment; lumbar	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22210	Osteotomy of spine, posterior or posterolateral approach, 1 vertebral segment; cervical	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22216	Osteotomy of spine, posterior or posterolateral approach, 1 vertebral segment; each additional vertebral segment (List separately in addition to primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	22214	Osteotomy of spine, posterior or posterolateral approach, 1 vertebral segment; lumbar	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22208	Osteotomy of spine, posterior or posterolateral approach, 3 columns, 1 vertebral segment (eg, pedicle/vertebral body subtraction); each additional vertebral segment (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	22207	Osteotomy of spine, posterior or posterolateral approach, 3 columns, 1 vertebral segment (eg. Pedicle/vertebral body subtraction); lumbar	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22848	Pelvic fixation (attachment of caudal end of instrumentation to pelvic bony structures) other than sacrum (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	0629T	Percutaneous injection of allogeneic cellular and/or tissue-based product, intervertebral disc, unilateral or bilateral injection, with CT guidance, lumbar; first level	Yes	CareCore National	
Musculoskeletal	Spine Surgery	0628T	Percutaneous injection of allogeneic cellular and/or tissue-based product, intervertebral disc, unilateral or bilateral injection, with fluoroscopic guidance, lumbar; each additional level (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	0627T	Percutaneous injection of allogeneic cellular and/or tissue-based product, intervertebral disc, unilateral or bilateral injection, with fluoroscopic guidance, lumbar; first level	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22526	Percutaneous intradiscal electrothermal annuloplasty, unilateral or bilateral including fluoroscopic guidance; single level	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22513	Percutaneous Vertebral Augmenation, Including Cavity Creation(Fracture Reduction And Bone Biopsy Included When Performed) Using Mechanical Device (Eg, Kyphoplasty), 1 Vertebral Body, Unilateral Or Bilateral Cannulation, Inclusive Of All Imgaing Guidance; Thoracic	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22515	Percutaneous vertebral augmentation, including cavity creation (fracture reduction and bone biopsy included when performed) using mechanical device (eg, kyphoplasty), 1 vertebral body, unilateral or bilateral cannulation, inclusive of all imaging guidance; each additional thoracic or lumbar vertebral body (List separately in addition to code for primary procedure)	- Add On	CareCore National	
Musculoskeletal	Spine Surgery	22514	Percutaneous Vertebral Augmentation, Including Cavity Creation (Fracture Reduction And Bone Biopsy Included When Performed) Using Mechanical Device (Eg, Kyphoplasty), 1 Vertebral Body, Unilateral, Or Bilateral Cannulation, Inclusive Of All Imaging Guidance; Lumbar	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22510	Percutaneous Vertebroplasty(Bone Biopsy Included When Performed), 1 Vertebral Body, Unilateral Or Bilateral Injection, Inclusive Of All Imaging Guidance; Cervicothoracic	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22512	Percutaneous vertebroplasty (bone biopsy included when performed), 1 vertebral body, unilateral or bilateral injection, inclusive of all imaging guidance; each additional cervicothoracic or lumbosacral vertebral body (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	22511	Percutaneous Vertebroplasty(Bone Biopsy Included When Performed), 1 Vertebral Body, Unilateral Or Bilateral Injection, Inclusive Of All Imaging Guidance; Lumbosacral	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22840	Posterior non-segmental instrumentation (eg, Harrington rod technique, pedicle fixation across 1 interspace, atlantoaxial transarticular screw fixation, sublaminar wiring at C1, facet screw fixation) (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	22844	Posterior segmental instrumentation (eg, pedicle fixation, dual rods with multiple hooks and sublaminar wires); 13 or more vertebral segments (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	22842	Posterior segmental instrumentation (eg, pedicle fixation, dual rods with multiple hooks and sublaminar wires); 3 to 6 vertebral segments (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	22843	Posterior segmental instrumentation (eg, pedicle fixation, dual rods with multiple hooks and sublaminar wires); 7 to 12 vertebral segments (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	22852	Removal of posterior segmental instrumentation	Yes	CareCore National	
Musculoskeletal	Spine Surgery	0098T	Revision including replacement of total disc arthroplasty (artificial disc), anterior approach, each additional interspace, cervical (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	22861	Revision Including Replacement Of Total Disc Arthroplasty (Artificial Disc), Anterior Approach, Single Interspace; Cervical	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22862	Revision Including Replacement Of Total Disc Arthroplasty (Artificial Disc), Anterior Approach, Single Interspace; Lumbar	Yes	CareCore National	
Musculoskeletal	Spine Surgery	64629	Thermal destruction of intraosseous basivertebral nerve, including all imaging guidance; each additional vertebral body, lumbar or sacral (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	64628	Thermal destruction of intraosseous basivertebral nerve, including all imaging guidance; first 2 vertebral bodies, lumbar or sacral	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22857	Total Disc Arthroplasty (Artificial Disc), Anterior Approach, Including Discectomy To Prepare Interspace (Other Than For Decompression), Single Interspace, Lumbar	Yes	CareCore National	

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
Musculoskeletal	Spine Surgery	22860	Total disc arthroplasty (artificial disc), anterior approach, including discectomy to prepare interspace (other than for decompression); second interspace, lumbar (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	22856	Total Disc Arthroplasty (Artificial Disc), Anterior Approach, Including Discectomy With End Plate Preparation (Includes Osteophytectomy For Nerve Root Or Spinal Cord Decompression And Microdissection), Single Interspace, Cervical	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22858	Total disc arthroplasty (artificial disc), anterior approach, including discectomy with end plate preparation (includes osteophytectomy for nerve root or spinal cord decompression and microdissection); second level, cervical (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	63057	Transpedicular approach with decompression of spinal cord, equina and/or nerve root(s) (eg, herniated intervertebral disc), single segment; each additional segment, thoracic or lumbar (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	63056	Transpedicular Approach With Decompression Of Spinal Cord, Equina And/Or Nerve Root(S) (Eg, Herniated Intervertebral Disc), Single Segment; Lumbar (Including Transfacet, Or Lateral Extraforaminal Approach) (Eg, Far Lateral Herniated Intervertebral Disc)	Yes	CareCore National	
Musculoskeletal	Spine Surgery	63091	Vertebral corpectomy (vertebral body resection), partial or complete, transperitoneal or retroperitoneal approach with decompression of spinal cord, cauda equina or nerve root(s), lower thoracic, lumbar, or sacral; each additional segment (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	63090	Vertebral corpectomy (vertebral body resection), partial or complete, transperitoneal or retroperitoneal approach with decompression of spinal cord, cauda equina or nerve root(s), lower thoracic, lumbar, or sacral; single segment	Yes	CareCore National	
Musculoskeletal	Spine Surgery	63082	Vertebral corpectomy (vertebral body resection), partial or complete, anterior approach with decompression of spinal cord and/or nerve root(s); cervical, each additional segment (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	63081	Vertebral Corpectomy (Vertebral Body Resection), Partial Or Complete, Anterior Approach With Decompression Of Spinal Cord And/Or Nerve Root(S); Cervical, Single Segment	Yes	CareCore National	
Musculoskeletal	Spine Surgery	63088	Vertebral corpectomy (vertebral body resection), partial or complete, combined thoracolumbar approach with decompression of spinal cord, cauda equina or nerve root(s), lower thoracic or lumbar; each additional segment (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	63087	Vertebral corpectomy (vertebral body resection), partial or complete, combined thoracolumbar approach with decompression of spinal cord, cauda equina or nerve root(s), lower thoracic or lumbar; single segment	Yes	CareCore National	
Crossover Code for: • **Primary Program:** Other Services • **Companion Program:** Musculoskeletal (MSK) - Spine Surgery *(See External Notation column for more details.)*	Spine Surgery	64714*	Neuroplasty, major peripheral nerve, arm or leg, open; lumbar plexus	Yes	CareCore National	This is a crossover code that can be requested under two programs: **MSK Spine Surgery** or **Other Services**. • If your request is intended to be used in conjunction with **MSK Spine Surgery**, please submit your request under the **MSK Spine program** through the **CareCoreNational platform.** • If your request is intended to be used for **Other Services only**, please submit your request under the **Other Services program** through the **CareCoreNational platform**.
Crossover Code for: • **Primary Program:** Musculoskeletal (MSK) - Spine Surgery • **Companion Program:** Sleep Management *(See External Notation column for more details.)*	Sleep Management	64568*	Open implantation of cranial nerve (eg, vagus nerve) neurostimulator electrode array and pulse generator	Yes	CareCore National	This is a crossover code that can be requested under two programs: **MSK Spine Surgery** or **Sleep Management**. • If your request is intended to be used in conjunction with **MSK Spine Surgery**, please submit your request under the **MSK Spine program** through the **CareCoreNational platform.** • If your request is intended to be used for **Sleep Managmen**t **only**, please submit your request under the **Sleep Management** program through the **CareCoreNational platform**.
Crossover Code for: • **Primary Program:** Musculoskeletal (MSK) - Spine Surgery • **Companion Program:** Sleep Management *(See External Notation column for more details.)*	Spine Surgery	64568*	Open implantation of cranial nerve (eg, vagus nerve) neurostimulator electrode array and pulse generator	Yes	CareCore National	This is a crossover code that can be requested under two programs: **MSK Spine Surgery** or **Sleep Management**. • If your request is intended to be used in conjunction with **MSK Spine Surgery**, please submit your request under the **MSK Spine program** through the **CareCoreNational platform.** • If your request is intended to be used for **Sleep Managmen**t **only**, please submit your request under the **Sleep Management** program through the **CareCoreNational platform**.

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
Musculoskeletal	Spine Surgery	0869T	Injection(s), bone-substitute material for bone and/or soft tissue hardware fixation augmentation, including intraoperative imaging guidance, when performed	Experimental / Investigational - Yes	CareCore National	
Musculoskeletal	Spine Surgery	20939	Bone marrow aspiration for bone grafting, spine surgery only, through separate skin or fascial incision (List separately in addition to code for primary procedure)	Add On	CareCore National	
Musculoskeletal	Spine Surgery	22836	Anterior thoracic vertebral body tethering, including thoracoscopy, when performed; up to 7 vertebral segments	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22837	Anterior thoracic vertebral body tethering, including thoracoscopy, when performed; 8 or more vertebral segments	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22838	Revision (eg, augmentation, division of tether), replacement, or removal of thoracic vertebral body tethering, including thoracoscopy, when performed	Yes	CareCore National	
Musculoskeletal	Spine Surgery	22849	Reinsertion of spinal fixation device	Yes	CareCore National	
Musculoskeletal	Spine Surgery	63267	Laminectomy for excision or evacuation of intraspinal lesion other than neoplasm, extradural; lumbar	Yes	CareCore National	
Musculoskeletal	Spine Surgery	0656T	Anterior lumbar or thoracolumbar vertebral body tethering; up to 7 vertebral segments	Yes	CareCore National	
Musculoskeletal	Spine Surgery	C1062	Intravertebral body fracture augmentation with implant (e.g., metal, polymer)	Yes	CareCore National	
Musculoskeletal	Joint Surgery	J7330	Autologous cultured chondrocytes, implant	Yes	MedSolutions	
Crossover Code for: • **Primary Program:** Other Services • **Companion Program:** **Musculoskeletal** - Joint / Spine Surgery *(See External Notation column for more details.)*	Other Services	64999*	Unlisted procedure, nervous system	Yes	CareCore National	This is a crossover code that can be requested under three programs: **MSK Joint**, **MSK Spine Surgery** or **Other Services**. • If your request is intended to be used for **Other Services**, please submit your request under the **Other Services program** through the **CareCoreNational platform**. • If your request is intended to be used for **MSK Spine Surgery**, please submit your request under the **MSK Spine program** through the **CareCoreNational platform**. • If your request is intended to be used for **MSK Joint Surgery**, please submit your request under the **Other Services program** through the **Medsolutions platform**.
Musculoskeletal	Joint Surgery	27570	Manipulation of knee joint under general anesthesia (includes application of traction or other fixation devices)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	23700	Manipulation under anesthesia, shoulder joint, including application of fixation apparatus (dislocation excluded)	Yes	MedSolutions	
Musculoskeletal	Spine Surgery	22899	Unlisted procedure, spine	Yes	CareCore National	
Musculoskeletal	Joint Surgery	23130	Acromioplasty or acromionectomy, partial, with or without coracoacromial ligament release	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27418	Anterior tibial tubercleplasty (eg, Maquet type procedure)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	S2117	Arthroereisis, subtalar	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27130	Arthroplasty, acetabular and proximal femoral prosthetic replacement (total hip arthroplasty), with or without autograft or allograft	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27703	Arthroplasty, ankle; revision, total ankle	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27702	Arthroplasty, ankle; with implant (total ankle)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27442	Arthroplasty, femoral condyles or tibial plateau(s), knee;	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27443	Arthroplasty, femoral condyles or tibial plateau(s), knee; with debridement and partial synovectomy	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	23470	Arthroplasty, glenohumeral joint; hemiarthroplasty	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	23472	Arthroplasty, Glenohumeral Joint; Total Shoulder [Glenoid And Proximal Humeral Replacement (E.G., Total Shoulder)]	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27447	Arthroplasty, knee, condyle and plateau; medial AND lateral compartments with or without patella resurfacing (total knee arthroplasty)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27446	Arthroplasty, knee, condyle and plateau; medial OR lateral compartment	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27440	Arthroplasty, knee, tibial plateau	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27441	Arthroplasty, knee, tibial plateau; with debridement and partial synovectomy	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27438	Arthroplasty, patella; with prosthesis	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29888	Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29889	Arthroscopically aided posterior cruciate ligament repair/augmentation or reconstruction	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29851	Arthroscopically aided treatment of intercondylar spine(s) and/or tuberosity fracture(s) of the knee, with or without manipulation; with internal or external fixation (includes arthroscopy)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29850	Arthroscopically aided treatment of intercondylar spine(s) and/or tuberosity fracture(s) of the knee, with or without manipulation; without internal or external fixation (includes arthroscopy)	Yes	MedSolutions	

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
Musculoskeletal	Joint Surgery	29856	Arthroscopically aided treatment of tibial fracture, proximal (plateau); bicondylar, includes internal fixation, when performed (includes arthroscopy)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29855	Arthroscopically aided treatment of tibial fracture, proximal (plateau); unicondylar, includes internal fixation, when performed (includes arthroscopy)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29860	Arthroscopy, hip, diagnostic with or without synovial biopsy (separate procedure)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29915	Arthroscopy, Hip, Surgical; With Acetabuloplasty (Ie, Treatment Of Pincer Lesion)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29862	Arthroscopy, hip, surgical; with debridement/shaving of articular cartilage (chondroplasty), abrasion arthroplasty, and/or resection of labrum	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29914	Arthroscopy, hip, surgical; with femoroplasty (ie, treatment of cam lesion)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29916	Arthroscopy, hip, surgical; with labral repair	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29861	Arthroscopy, hip, surgical; with removal of loose body or foreign body	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29863	Arthroscopy, hip, surgical; with synovectomy	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29870	Arthroscopy, knee, diagnostic, with or without synovial biopsy (separate procedure)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29879	Arthroscopy, knee, surgical; abrasion arthroplasty (includes chondroplasty where necessary) or multiple drilling or microfracture	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29877	Arthroscopy, knee, surgical; debridement/shaving of articular cartilage (chondroplasty)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29886	Arthroscopy, knee, surgical; drilling for intact osteochondritis dissecans lesion	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29887	Arthroscopy, knee, surgical; drilling for intact osteochondritis dissecans lesion with internal fixation	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29885	Arthroscopy, knee, surgical; drilling for osteochondritis dissecans with bone grafting, with or without internal fixation (including debridement of base of lesion)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29871	Arthroscopy, knee, surgical; for infection, lavage and drainage	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29874	Arthroscopy, Knee, Surgical; For Removal Of Loose Body Or Foreign Body (Eg Osteochondritis Dissecans Fragmentation, Chondral Fragmentation)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29868	Arthroscopy, knee, surgical; meniscal transplantation (includes arthrotomy for meniscal insertion), medial or lateral	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29867	Arthroscopy, knee, surgical; osteochondral allograft (eg, mosaicplasty)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29866	Arthroscopy, knee, surgical; osteochondral autograft(s) (eg, mosaicplasty) (includes harvesting of the autograft[s])	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29875	Arthroscopy, knee, surgical; synovectomy, limited (eg, plica or shelf resection) (separate procedure)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29876	Arthroscopy, knee, surgical; synovectomy, major, 2 or more compartments (eg, medial or lateral)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29873	Arthroscopy, knee, surgical; with lateral release	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29884	Arthroscopy, knee, surgical; with lysis of adhesions, with or without manipulation (separate procedure)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29883	Arthroscopy, knee, surgical; with meniscus repair (medial AND lateral)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29882	Arthroscopy, knee, surgical; with meniscus repair (medial OR lateral)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29880	Arthroscopy, Knee, Surgical; With Meniscectomy (Medial And Lateral, Including Any Meniscal Shaving) Including Debridement/Shaving Of Articular Cartilage (Chondroplasty), Same Or Separate Compartment (S) When Performed	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29881	Arthroscopy, Knee, Surgical; With Meniscectomy (Medial Or Lateral, Including Any Meniscal Shaving) Including Debridement/Shaving Of Articular Cartilage (Chondroplasty), Same Or Separate Compartment (S) When Performed	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29828	Arthroscopy, shoulder, surgical; biceps tenodesis	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29805	Arthroscopy, shoulder, diagnostic, with or without synovial biopsy (separate procedure)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29807	Arthroscopy, shoulder, surgical; repair of SLAP lesion	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29806	Arthroscopy, shoulder, surgical; capsulorrhaphy	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29823	Arthroscopy, shoulder, surgical; debridement, extensive, 3 or more discrete structures	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29822	Arthroscopy, shoulder, surgical; debridement, limited, 1 or 2 discrete structures	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29826	Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with coracoacromial ligament (ie, arch) release, when performed (List separately in addition to code for primary procedure)	Add On	MedSolutions	

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
Musculoskeletal	Joint Surgery	29824	Arthroscopy, shoulder, surgical; distal claviculectomy including distal articular surface (Mumford procedure)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29821	Arthroscopy, shoulder, surgical; synovectomy, complete	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29820	Arthroscopy, shoulder, surgical; synovectomy, partial	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29825	Arthroscopy, Shoulder, Surgical; With Lysis And Resection Of Adhesions, With Our Without Manipulation	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29819	Arthroscopy, shoulder, surgical; with removal of loose body or foreign body	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29827	Arthroscopy, shoulder, surgical; with rotator cuff repair	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27403	Arthrotomy with meniscus repair, knee	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27333	Arthrotomy, with excision of semilunar cartilage (meniscectomy) knee; medial AND lateral	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27332	Arthrotomy, with excision of semilunar cartilage (meniscectomy) knee; medial OR lateral	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27334	Arthrotomy, with synovectomy, knee; anterior OR posterior	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27335	Arthrotomy, With Synovectomy, Knee;Anterior AND Posterior Including Popliteal Area	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	0717T	Autologous adipose-derived regenerative cell (ADRC) therapy for partial thickness rotator cuff tear; adipose tissue harvesting, isolation and preparation of harvested cells, including incubation with cell dissociation enzymes, filtration, washing, and concentration of ADRCs	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	0718T	Autologous adipose-derived regenerative cell (ADRC) therapy for partial thickness rotator cuff tear; injection into supraspinatus tendon including ultrasound guidance, unilateral	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27412	Autologous chondrocyte implantation, knee	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	23020	Capsular contracture release (eg, Sever type procedure)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	23460	Capsulorrhaphy, anterior, any type; with bone block	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	23462	Capsulorrhaphy, Anterior, Any Type;With Coracoid Process Transfer	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	23450	Capsulorrhaphy, anterior; Putti-Platt procedure or Magnuson type operation	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	23455	Capsulorrhaphy, Anterior;With Labral Repair (Eg, Bankart Procedure)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	23466	Capsulorrhaphy, glenohumeral joint, any type multi-directional instability	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	23465	Capsulorrhaphy, glenohumeral joint, posterior, with or without bone block	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	23120	Claviculectomy; partial	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27198	Closed treatment of posterior pelvic ring fracture(s), dislocation(s), diastasis or subluxation of the ilium, sacroiliac joint, and/or sacrum, with or without anterior pelvic ring fracture(s) and/or dislocation(s) of the pubic symphysis and/or superior/inferior rami, unilateral or bilateral; with manipulation, requiring more than local anesthesia (ie, general anesthesia, moderate sedation, spinal/epidural)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27132	Conversion of previous hip surgery to total hip arthroplasty, with or without autograft or allograft	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	23415	Coracoacromial ligament release, with or without acromioplasty	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	23145	Excision or curettage of bone cyst or benign tumor of clavicle or scapula; with autograft (includes obtaining graft)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27355	Excision or curettage of bone cyst or benign tumor of femur;	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27356	Excision or curettage of bone cyst or benign tumor of femur; with allograft	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27357	Excision or curettage of bone cyst or benign tumor of femur; with autograft (includes obtaining graft)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27358	Excision or curettage of bone cyst or benign tumor of femur; with internal fixation (List in addition to code for primary procedure)	Add On	MedSolutions	
Musculoskeletal	Joint Surgery	23155	Excision or curettage of bone cyst or benign tumor of proximal humerus; with autograft (includes obtaining graft)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	28890	Extracorporeal shock wave, high energy, performed by a physician or other qualified health care professional, requiring anesthesia other than local, including ultrasound guidance, involving the plantar fascia	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	L8642	Hallux implant	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27125	Hemiarthroplasty, Hip, Partial (E.G., Femoral Stem Prosthesis, Bipolar Arthroplasty)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	C8003	Implantation of medial knee extraarticular implantable shock absorber spanning the knee joint from distal femur to proximal tibia, open, includes measurements, positioning and adjustments, with imaging guidance (eg, fluoroscopy)	Yes	MedSolutions	

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
Musculoskeletal	Joint Surgery	0707T	Injection(s), bone-substitute material (eg, calcium phosphate) into subchondral bone defect (ie, bone marrow lesion, bone bruise, stress injury, microtrabecular fracture), including imaging guidance and arthroscopic assistance for joint visualization	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	0335T	Insertion of sinus tarsi implant	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27425	Lateral retinacular release, open	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27427	Ligamentous reconstruction (augmentation), knee; extra-articular	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27428	Ligamentous Reconstruction (Augmentation), Knee;Intra-Articular (Open)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27429	Ligamentous Reconstruction (Augmentation), Knee;Intra-Articular (Open) And Extra-Articular	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27860	Manipulation of ankle under general anesthesia (includes application of traction or other fixation apparatus)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	24300	Manipulation, elbow, under anesthesia	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27275	Manipulation, hip joint, requiring general anesthesia	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	25259	Manipulation, wrist, under anesthesia	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	L8641	Metatarsal joint implant	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	64913	Nerve repair; with nerve allograft, each additional strand (List separately in addition to code for primary procedure)	Add On	MedSolutions	
Musculoskeletal	Joint Surgery	64912	Nerve repair; with nerve allograft, each nerve, first strand (cable)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27415	Osteochondral allograft, knee, open	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27416	Osteochondral autograft(s), knee, open (eg, mosaicplasty) (includes harvesting of autograft[s])	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27360	Partial excision (craterization, saucerization, or diaphysectomy) bone, femur, proximal tibia and/or fibula (eg, osteomyelitis or bone abscess)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	23420	Reconstruction of complete shoulder (rotator) cuff avulsion, chronic (includes acromioplasty)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27420	Reconstruction of dislocating patella; (eg, Hauser type procedure)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27422	Reconstruction Of Dislocating Patella;With Extensor Realignment And/Or Muscle Advancement Or Release (Eg, Campbell, Goldwaite Type Procedure)	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27424	Reconstruction Of Dislocating Patella;With Patellectomy	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	23000	Removal of subdeltoid calcareous deposits, open	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	23410	Repair of ruptured musculotendinous cuff (eg, rotator cuff) open; acute	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	23412	Repair Of Ruptured Musculotendinous Cuff (Eg, Rotator Cuff) Open;Chronic	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27405	Repair, primary, torn ligament and/or capsule, knee; collateral	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	23440	Resection or transplantation of long tendon of biceps	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27137	Revision of total hip arthroplasty; acetabular component only, with or without autograft or allograft	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27134	Revision of total hip arthroplasty; both components, with or without autograft or allograft	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27138	Revision Of Total Hip Arthroplasty; Femoral Component Only, With Or Without Autograft Or Allograft	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27486	Revision Of Total Knee Arthroplasty, With Or Without Allograft; 1 Component	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27487	Revision of total knee arthroplasty, with or without allograft; femoral and entire tibial component	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	23474	Revision of total shoulder arthroplasty, including allograft when performed; humeral and glenoid component	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	23473	Revision of total shoulder arthroplasty, including allograft when performed; humeral or glenoid component	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	23174	Sequestrectomy (eg, for osteomyelitis or bone abscess), humeral head to surgical neck	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	23172	Sequestrectomy (eg, for osteomyelitis or bone abscess), scapula	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	23430	Tenodesis of long tendon of biceps	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27175	Treatment of slipped femoral epiphysis; by traction, without reduction	Yes	MedSolutions	

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
Musculoskeletal	Joint Surgery	27299	Unlisted procedure, pelvis or hip joint	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	23929	Unlisted procedure, shoulder	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	29999	Unlisted procedure, arthroscopy	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27599	Unlisted procedure, femur or knee	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	27899	Unlisted procedure, leg or ankle	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	28899	Unlisted procedure, foot or toes	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	25999	Unlisted procedure, forearm or wrist	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	26989	Unlisted procedure, hands or fingers	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	24999	Unlisted procedure, humerus or elbow	Yes	MedSolutions	
Musculoskeletal	Joint Surgery	20999	Unlisted procedure, musculoskeletal system, general	Yes	MedSolutions	
Crossover Code for: • **Primary Program:** Musculoskeletal - Pain Management • **Companion Program**: Other Services *(See External Notation column for more details.)*	Interventional Pain Management	C9807*	Nerve stimulator, percutaneous, peripheral (e.g., sprint peripheral nerve stimulation system), including electrode and all disposable system components, non-opioid medical device (must be a qualifying medicare non-opioid medical device for post-surgical pain relief in accordance with section 4135 of the caa, 2023)	Yes	MedSolutions	This is a crossover code that can be requested under two programs: **MSK Pain Management** or **Other Services**. • If your request is intended to be used for **Other Services**, please submit your request under the **Other Services program** through the **CareCoreNational platform**. • If your request is intended to be used for **MSK Pain Management**, please submit your request under the **MSK program** through the **MedSolutions platform**.
Crossover Code for: • **Primary Program:** Musculoskeletal (MSK) - Pain Management • **Companion Program:** Sleep Management *(See External Notation column for more details.)*	Interventional Pain Management	L8688*	Implantable neurostimulator pulse generator, dual array, non-rechargeable, includes extension	Yes	MedSolutions	This is a crossover code that can be requested under two programs: **MSK Pain Management** or **Sleep Management**. • If your request is intended to be used for **Sleep Management only**, please submit your request under the **Sleep Management program** through the **CareCoreNational platform**. •If your request is intended to be used for **MSK Pain,** please submit your request under the **MSK Pain Management program** through the **MedSolutions platform**.
Crossover Code for: • **Primary Program:** Musculoskeletal (MSK) - Pain Management • **Companion Program:** Sleep Management *(See External Notation column for more details.)*	Sleep Management	L8688*	Implantable neurostimulator pulse generator, dual array, non-rechargeable, includes extension	Yes	CareCore National	This is a crossover code that can be requested under two programs: **MSK Pain Management** or **Sleep Management**. • If your request is intended to be used for **Sleep Management only**, please submit your request under the **Sleep Management program** through the **CareCoreNational platform**. •If your request is intended to be used for **MSK Pain,** please submit your request under the **MSK Pain Management program** through the **MedSolutions platform**.
Crossover Code for: • **Primary Program:** Musculoskeletal (MSK) - Pain Management • **Companion Program:** Sleep Management *(See External Notation column for more details.)*	Interventional Pain Management	C1767*	Generator, neurostimulator (implantable), non-rechargeable	Yes	MedSolutions	This is a crossover code that can be requested under two programs: **MSK Pain Management** or **Sleep Management**. • If your request is intended to be used for **Sleep Management only**, please submit your request under the **Sleep Management program** through the **CareCoreNational platform**. •If your request is intended to be used for **MSK Pain,** please submit your request under the **MSK Pain Management program** through the **MedSolutions platform**.

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
Crossover Code for: • **Primary Program:** Musculoskeletal (MSK) - Pain Management • **Companion Program:** Sleep Management *(See External Notation column for more details.)*	Sleep Management	C1767*	Generator, neurostimulator (implantable), non-rechargeable	Yes	CareCore National	This is a crossover code that can be requested under two programs: **MSK Pain Management** or **Sleep Management.** • If your request is intended to be used for **Sleep Management** only, please submit your request under the **Sleep Management program** through the **CareCoreNational platform.** • If your request is intended to be used for **MSK Pain**, please submit your request under the **MSK Pain program** through the **MedSolutions platform**.
Crossover Code for: • **Primary Program:** Musculoskeletal (MSK) - Pain Management • **Companion Program:** Sleep Management *(See External Notation column for more details.)*	Sleep Management	C1778*	Lead, neurostimulator (implantable)	Yes	CareCore National	This is a crossover code that can be requested under two programs: **MSK Pain Management** or **Sleep Management**. • If your request is intended to be used for **Sleep Management only**, please submit your request under the **Sleep Management program** through the **CareCoreNational platform**. •If your request is intended to be used for **MSK Pain**, please submit your request under the **MSK Pain Management program** through the **MedSolutions platform**.
Crossover Code for: • **Primary Program:** Musculoskeletal (MSK) - Pain Management • **Companion Program:** Sleep Management *(See External Notation column for more details.)*	Interventional Pain Management	C1778*	Lead, neurostimulator (implantable)	Yes	MedSolutions	This is a crossover code that can be requested under two programs: **MSK Pain Management** or **Sleep Management.** • If your request is intended to be used for **Sleep Management** only, please submit your request under the **Sleep Management program** through the **CareCoreNational platform.** • If your request is intended to be used for **MSK Pain**, please submit your request under the **MSK Pain** program through the **MedSolutions platform.**
Crossover Code for: • **Primary Program:** Musculoskeletal (MSK) - Pain Management • **Companion Program:** Sleep Management *(See External Notation column for more details.)*	Interventional Pain Management	C1787*	Patient programmer, neurostimulator	Yes	MedSolutions	This is a crossover code that can be requested under two programs: **MSK Pain Management** or **Sleep Management.** • If your request is intended to be used for **Sleep Management** only, please submit your request under the **Sleep Management program** through the **CareCoreNational platform.** • If your request is intended to be used for **MSK Pain**, please submit your request under the **MSK Pain program** through the **MedSolutions platform**.
Crossover Code for: • **Primary Program:** Musculoskeletal (MSK) - Pain Management • **Companion Program:** Sleep Management *(See External Notation column for more details.)*	Sleep Management	C1787*	Patient programmer, neurostimulator	Yes	CareCore National	This is a crossover code that can be requested under two programs: **MSK Pain Management** or **Sleep Management**. • If your request is intended to be used for **Sleep Management only**, please submit your request under the **Sleep Management program** through the **CareCoreNational platform**. •If your request is intended to be used for **MSK Pain**, please submit your request under the **MSK Pain Management program** through the **MedSolutions platform**.

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
Crossover Code for: • **Primary Program:** Musculoskeletal (MSK) - Pain Management • **Companion Program:** Sleep Management *(See External Notation column for more details.)*	Interventional Pain Management	L8680*	Implantable neurostimulator electrode, each	Yes	MedSolutions	This is a crossover code that can be requested under two programs: **MSK Pain Management** or **Sleep Management.** • If your request is intended to be used for **Sleep Management** only, please submit your request under the **Sleep Management program** through the **CareCoreNational platform.** • If your request is intended to be used for **MSK Pain**, please submit your request under the **MSK Pain program** through the **MedSolutions platform**.
Crossover Code for: • **Primary Program:** Musculoskeletal (MSK) - Pain Management • **Companion Program:** Sleep Management *(See External Notation column for more details.)*	Interventional Pain Management	L8681*	Patient programmer (external) for use with implantable programmable neurostimulator pulse generator, replacement only	Yes	MedSolutions	This is a crossover code that can be requested under two programs: **MSK Pain Management** or **Sleep Management**. • If your request is intended to be used for **Sleep Management only**, please submit your request under the **Sleep Management program** through the **CareCoreNational platform**. •If your request is intended to be used for **MSK Pain**, please submit your request under the **MSK Pain Management program** through the **MedSolutions platform**.
Musculoskeletal	Interventional Pain Management	C1772	Infusion pump, programmable (implantable)	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	C1816	Receiver and/or transmitter, neurostimulator (implantable)	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	C1820	Generator, neurostimulator (implantable), with rechargeable battery and charging system	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	C1822	Generator, neurostimulator (implantable), high frequency, with rechargeable battery and charging system	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	C1883	Adapter/extension, pacing lead or neurostimulator lead (implantable)	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	C1897	Lead, neurostimulator test kit (implantable)	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	L8679	Implantable neurostimulator, pulse generator, any type	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	L8682	Implantable neurostimulator radiofrequency receiver	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	L8685	Implantable neurostimulator pulse generator, single array, rechargeable, includes extension	Yes	MedSolutions	
Crossover Code for: • **Primary Program:** Musculoskeletal (MSK) - Pain Management • **Companion Program:** Sleep Management *(See External Notation column for more details.)*	Interventional Pain Management	L8686*	Implantable neurostimulator pulse generator, dual array, non-rechargeable, includes extension	Yes	MedSolutions	This is a crossover code that can be requested under two programs: **MSK Pain Management** or **Sleep Management**. • If your request is intended to be used for **Sleep Management only**, please submit your request under the **Sleep Management program** through the **CareCoreNational platform**. •If your request is intended to be used for **MSK Pain**, please submit your request under the **MSK Pain Management program** through the **MedSolutions platform**.
Musculoskeletal	Interventional Pain Management	L8687	Implantable neurostimulator pulse generator, dual array, rechargeable, includes extension	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	L8683	Radiofrequency transmitter (external) for use with implantable neurostimulator radiofrequency receiver	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	L8689	External recharging system for battery (internal) for use with implantable neurostimulator, replacement only	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	L8695	External recharging system for battery (external) for use with implantable neurostimulator, replacement only	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	62320	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, cervical or thoracic; without imaging guidance	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	62321	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, cervical or thoracic; with imaging guidance (ie, fluoroscopy or CT)	Yes	MedSolutions	

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
Musculoskeletal	Interventional Pain Management	62322	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); without imaging guidance	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	62323	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); with imaging guidance (ie, fluoroscopy or CT)	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	62324	Injection(s), including indwelling catheter placement, continuous infusion or intermittent bolus, of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, interlaminar epidural or subarachnoid, cervical or thoracic; without imaging guidance	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	62325	Injection(s), including indwelling catheter placement, continuous infusion or intermittent bolus, of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, interlaminar epidural or subarachnoid, cervical or thoracic; with imaging guidance (ie, fluoroscopy or CT)	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	62327	Injection(s), including indwelling catheter placement, continuous infusion or intermittent bolus, of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); with imaging guidance (ie, fluoroscopy or CT)	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	27096	Injection procedure for sacroiliac joint, anesthetic/steroid, with image guidance (fluoroscopy or CT) including arthrography when performed	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	62263	Percutaneous Lysis Of Epidural Adhesions Using Solution Injection (E.G., Hypertonic Saline, Enzyme) Or Mechanical Means (E.G., Catheter) Including Radiologic Localization (Includes Contrast When Administered), Multiple Adhesiolysis Sessions; 2 Or More Days	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	62264	Percutaneous Lysis Of Epidural Adhesions Using Solution Injection (E.G., Hypertonic Saline, Enzyme) Or Mechanical Means (E.G., Catheter) Including Radiologic Localization (Includes Contrast When Administered), Multiple Adhesiolysis Sessions; 1 Day	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	62280	Injection/Infusion Of Neurolytic Substance (Eg, Alcohol, Phenol, Iced Saline Solutions), With Or Without Other Therapeutic Substance; Subarachnoid	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	62281	Injection/Infusion Of Neurolytic Substance (Eg, Alcohol, Phenol, Iced Saline Solutions), With Or Without Other Therapeutic Substance; Epidural, Cervical Or Thoracic	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	62282	Injection/infusion of neurolytic substance (eg, alcohol, phenol, iced saline solutions), with or without other therapeutic substance; epidural, lumbar, sacral (caudal)	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	62350	Implantation, revision or repositioning of tunneled intrathecal or epidural catheter, for long-term medication administration via an external pump or implantable reservoir/infusion pump; without laminectomy	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	62351	Implantation, revision or repositioning of tunneled intrathecal or epidural catheter, for long-term medication administration via an external pump or implantable reservoir/infusion pump; with laminectomy	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	62360	Implantation or replacement of device for intrathecal or epidural drug infusion; subcutaneous reservoir	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	62361	Implantation or replacement of device for intrathecal or epidural drug infusion; nonprogrammable pump	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	62362	Implantation or replacement of device for intrathecal or epidural drug infusion; programmable pump, including preparation of pump, with or without programming	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	63650	Percutaneous implantation of neurostimulator electrode array, epidural	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	63655	Laminectomy for implantation of neurostimulator electrodes, plate/paddle, epidural	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	63685	Insertion or replacement of spinal neurostimulator pulse generator or receiver, requiring pocket creation and connection between electrode array and pulse generator or receiver	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	64451	Injection(s), anesthetic agent(s) and/or steroid; nerves innervating the sacroiliac joint, with image guidance (ie, fluoroscopy or computed tomography)	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	64479	Injection, Anesthetic Agent And/Or Steroid; Transforaminal Epidural, With Imaging Guidance (Fluoroscopy Or CT), Cervical Or Thoracic, Single Level	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	64480	Injection(s), anesthetic agent(s) and/or steroid; transforaminal epidural, with imaging guidance (fluoroscopy or CT), cervical or thoracic, each additional level (List separately in addition to code for primary procedure)	Add On	MedSolutions	
Musculoskeletal	Interventional Pain Management	64483	Injection, Anesthetic Agent And/Or Steroid; Transforaminal Epidural, With Imaging Guidance (Fluoroscopy Or CT), Lumbar Or Sacral, Single Level	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	64484	Injection, Anesthetic Agent And/Or Steroid; Transforaminal Epidural, With Imaging Guidance (Fluoroscopy Or CT), Lumbar Or Sacral, Each Additional Level (List Separately In Addition To Code For Primary Procedure)	Add On	MedSolutions	
Musculoskeletal	Interventional Pain Management	64490	Injection(S), Diagnostic Or Therapeutic Agent, Paravertebral Facet (Zygapophyseal) Joint (Or Nerves Innervating That Joint) With Image Guidance (Fluoroscopy Or Ct), Cervical Or Thoracic; Single Level	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	64491	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; second level (List separately in addition to code for primary procedure)	Add On	MedSolutions	
Musculoskeletal	Interventional Pain Management	64492	Injection(S), Diagnostic Or Therapeutic Agent, Paravertebral Facet (Zygapophyseal) Joint (Or Nerves Innervating That Joint) With Image Guidance (Fluoroscopy Or Ct), Cervical Or Thoracic; Third And Any Additional Level(S) (List Separately In Addition To Code For Primary Procedure)	Add On	MedSolutions	
Musculoskeletal	Interventional Pain Management	64493	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	64494	Injection(S), Diagnostic Or Therapeutic Agent, Paravertebral Facet (Zygapophyseal) Joint (Or Nerves Innervating That Joint) With Image Guidance (Fluoroscopy Or Ct), Lumbar Or Sacral; Second Level (List Separately In Addition To Code For Primary Procedure)	Add On	MedSolutions	

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Musculoskeletal	Interventional Pain Management	64495	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; third and any additional level(s) (List separately in addition to code for primary procedure)	Add On	MedSolutions	
Musculoskeletal	Interventional Pain Management	64510	Injection, Anesthetic Agent; Stellate Ganglion (Cervical Sympathetic)	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	64520	Injection, Anesthetic Agent; Lumbar Or Thoracic (Paravertebral Sympathetic)	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	64555	Percutaneous implantation of neurostimulator electrode array; peripheral nerve (excludes sacral nerve)	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	64575	Open implantation of neurostimulator electrode array; peripheral nerve (excludes sacral nerve)	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	64596	Insertion or replacement of percutaneous electrode array, peripheral nerve, with integrated neurostimulator, including imaging guidance, when performed; initial electrode array	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	64597	Insertion or replacement of percutaneous electrode array, peripheral nerve, with integrated neurostimulator, including imaging guidance, when performed; each additional electrode array (List separately in addition to code for primary procedure)	Add On	MedSolutions	
Musculoskeletal	Interventional Pain Management	64625	Radiofrequency ablation, nerves innervating the sacroiliac joint, with image guidance (ie, fluoroscopy or computed tomography)	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	64633	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, single facet joint	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	64634	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, each additional facet joint (List separately in addition to code for primary procedure)	Add On	MedSolutions	
Musculoskeletal	Interventional Pain Management	64635	Destruction By Neurolytic Agent, Paravertebral Facet Joint Nerve(S), With Imaging Guidance (Fluroscopy Or Ct); Lumbar Or Sacral, Single Facet Joint	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	64636	Destruction By Neurolytic Agent, Paravertebral Facet Joint Nerve(S), With Imaging Guidance (Fluroscopy Or Ct); Lumbar Or Sacral, Each Additional Facet Joint (List Separately In Addition To Code For Primary Procedure)	Add On	MedSolutions	
Musculoskeletal	Interventional Pain Management	0213T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, cervical or thoracic; single level	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	0214T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, cervical or thoracic; second level (List separately in addition to code for primary procedure)	Add On	MedSolutions	
Musculoskeletal	Interventional Pain Management	0215T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, cervical or thoracic; third and any additional level(s) (List separately in addition to code for primary procedure)	Add On	MedSolutions	
Musculoskeletal	Interventional Pain Management	0216T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, lumbar or sacral; single level	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	0217T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, lumbar or sacral; second level (List separately in addition to code for primary procedure)	Add On	MedSolutions	
Musculoskeletal	Interventional Pain Management	0218T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, lumbar or sacral; third and any additional level(s) (List separately in addition to code for primary procedure)	Add On	MedSolutions	
Musculoskeletal	Interventional Pain Management	G0260	Injection procedure for sacroiliac joint; provision of anesthetic, steroid and/or other therapeutic agent, with or without arthrography	Yes	MedSolutions	
GI	EGD	43252	Esophagogastroduodenoscopy, flexible, transoral; with optical endomicroscopy	Yes	CareCore National	
GI	EGD	43233	Esophagogastroduodenoscopy, flexible, transoral; with dilation of esophagus with balloon (30 mm diameter or larger) (includes fluoroscopic guidance, when performed)	Yes	CareCore National	
GI	EGD	43235	Esophagogastroduodenoscopy, flexible, transoral; diagnostic, including collection of specimen(s) by brushing or washing, when performed (separate procedure)	Yes	CareCore National	
GI	EGD	43236	Esophagogastroduodenoscopy, flexible, transoral; with directed submucosal injection(s), any substance	Yes	CareCore National	
GI	EGD	43239	Esophagogastroduodenoscopy, flexible, transoral; with biopsy, single or multiple	Yes	CareCore National	
GI	EGD	43241	Esophagogastroduodenoscopy, flexible, transoral; with insertion of intraluminal tube or catheter	Yes	CareCore National	
GI	EGD	43243	Esophagogastroduodenoscopy, flexible, transoral; with injection sclerosis of esophageal/gastric varices	Yes	CareCore National	
GI	EGD	43244	Esophagogastroduodenoscopy, flexible, transoral; with band ligation of esophageal/gastric varices	Yes	CareCore National	
GI	EGD	43245	Esophagogastroduodenoscopy, flexible, transoral; with dilation of gastric/duodenal stricture(s) (eg, balloon, bougie)	Yes	CareCore National	
GI	EGD	43247	Esophagogastroduodenoscopy, flexible, transoral; with removal of foreign body(s)	Yes	CareCore National	
GI	EGD	43248	Esophagogastroduodenoscopy, flexible, transoral; with insertion of guide wire followed by passage of dilator(s) through esophagus over guide wire	Yes	CareCore National	
GI	EGD	43249	Esophagogastroduodenoscopy, flexible, transoral; with transendoscopic balloon dilation of esophagus (less than 30 mm diameter)	Yes	CareCore National	
GI	EGD	43250	Esophagogastroduodenoscopy, flexible, transoral; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps	Yes	CareCore National	
GI	EGD	43251	Esophagogastroduodenoscopy, flexible, transoral; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	Yes	CareCore National	
GI	EGD	43254	Esophagogastroduodenoscopy, flexible, transoral; with endoscopic mucosal resection	Yes	CareCore National	
GI	EGD	43255	Esophagogastroduodenoscopy, flexible, transoral; with control of bleeding, any method	Yes	CareCore National	
GI	EGD	43266	Esophagogastroduodenoscopy, flexible, transoral; with placement of endoscopic stent (includes pre- and post-dilation and guide wire passage, when performed)	Yes	CareCore National	
GI	EGD	43270	Esophagogastroduodenoscopy, flexible, transoral; with ablation of tumor(s), polyp(s), or other lesion(s) (includes pre- and post-dilation and guide wire passage, when performed)	Yes	CareCore National	
GI	AVEGD	43497	Lower esophageal myotomy, transoral (ie, peroral endoscopic myotomy [POEM])	Yes	CareCore National	

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Vascular Interventions	Iliac artery angioplasty/stent	37254	Revascularization, endovascular, open or percutaneous, iliac vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; straightforward lesion, initial vessel	Yes	CareCore National	
Vascular Interventions	Iliac artery angioplasty/stent	37255	Revascularization, endovascular, open or percutaneous, iliac vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; straightforward lesion, each additional vessel (List separately in addition to code for primary procedure)	- Add On	CareCore National	
Vascular Interventions	Iliac artery angioplasty/stent	37256	Revascularization, endovascular, open or percutaneous, iliac vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; complex lesion, initial vessel	Yes	CareCore National	
Vascular Interventions	Iliac artery angioplasty/stent	37257	Revascularization, endovascular, open or percutaneous, iliac vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; complex lesion, each additional vessel (List separately in addition to code for primary procedure)	- Add On	CareCore National	
Vascular Interventions	Iliac artery angioplasty/stent	37258	Revascularization, endovascular, open or percutaneous, iliac vascular territory, with transluminal stent placement, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement and angioplasty when performed, within the same artery, unilateral; straightforward lesion, initial vessel	Yes	CareCore National	
Vascular Interventions	Iliac artery angioplasty/stent	37259	Revascularization, endovascular, open or percutaneous, iliac vascular territory, with transluminal stent placement, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement and angioplasty when performed, within the same artery, unilateral; straightforward lesion, each additional vessel (List separately in addition to code for primary procedure)	- Add On	CareCore National	
Vascular Interventions	Iliac artery angioplasty/stent	37260	Revascularization, endovascular, open or percutaneous, iliac vascular territory, with transluminal stent placement, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement and angioplasty when performed, within the same artery, unilateral; complex lesion, initial vessel	Yes	CareCore National	
Vascular Interventions	Iliac artery angioplasty/stent	37261	Revascularization, endovascular, open or percutaneous, iliac vascular territory, with transluminal stent placement, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement and angioplasty when performed, within the same artery, unilateral; complex lesion, each additional vessel (List separately in addition to code for primary procedure)	- Add On	CareCore National	
Vascular Interventions	Intravascular Lithotripsy - Iliac	37262	Intravascular lithotripsy(ies), iliac vascular territory, including all imaging guidance and radiological supervision and interpretation necessary to perform the intravascular lithotripsy(ies) within the same artery (List separately in addition to code for primary procedure)	Add On	CareCore National	
Vascular Interventions	Femoral-popliteal artery angioplasty/stent	37263	Revascularization, endovascular, open or percutaneous, femoral and popliteal vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; straightforward lesion, initial vessel	Yes	CareCore National	
Vascular Interventions	Femoral-popliteal artery angioplasty/stent	37264	Revascularization, endovascular, open or percutaneous, femoral and popliteal vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; straightforward lesion, each additional vessel (List separately in addition to code for primary procedure)	- Add On	CareCore National	
Vascular Interventions	Femoral-popliteal artery angioplasty/stent	37265	Revascularization, endovascular, open or percutaneous, femoral and popliteal vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; complex lesion, initial vessel	Yes	CareCore National	
Vascular Interventions	Femoral-popliteal artery angioplasty/stent	37266	Revascularization, endovascular, open or percutaneous, femoral and popliteal vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; complex lesion, each additional vessel (List separately in addition to code for primary procedure)	- Add On	CareCore National	
Vascular Interventions	Femoral-popliteal artery angioplasty/stent	37267	Revascularization, endovascular, open or percutaneous, femoral and popliteal vascular territory, with transluminal stent placement, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement and angioplasty when performed, within the same artery, unilateral; straightforward lesion, initial vessel	Yes	CareCore National	
Vascular Interventions	Femoral-popliteal artery angioplasty/stent	37268	Revascularization, endovascular, open or percutaneous, femoral and popliteal vascular territory, with transluminal stent placement, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement and angioplasty when performed, within the same artery, unilateral; straightforward lesion, each additional vessel (List separately in addition to code for primary procedure)	- Add On	CareCore National	

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
Vascular Interventions	Femoral-popliteal artery angioplasty/stent	37269	Revascularization, endovascular, open or percutaneous, femoral and popliteal vascular territory, with transluminal stent placement, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement and angioplasty when performed, within the same artery, unilateral; complex lesion, initial vessel	Yes	CareCore National	
Vascular Interventions	Femoral-popliteal artery angioplasty/stent	37270	Revascularization, endovascular, open or percutaneous, femoral and popliteal vascular territory, with transluminal stent placement, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement and angioplasty when performed, within the same artery, unilateral; complex lesion, each additional vessel (List separately in addition to code for primary procedure)	- Add On	CareCore National	
Vascular Interventions	Atherectomy	37271	Revascularization, endovascular, open or percutaneous, femoral and popliteal vascular territory, with transluminal atherectomy, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the atherectomy and angioplasty when performed, within the same artery, unilateral; straightforward lesion, initial vessel	Yes	CareCore National	
Vascular Interventions	Atherectomy	37272	Revascularization, endovascular, open or percutaneous, femoral and popliteal vascular territory, with transluminal atherectomy, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the atherectomy and angioplasty when performed, within the same artery, unilateral; straightforward lesion, each additional vessel (List separately in addition to code for primary procedure)	- Add On	CareCore National	
Vascular Interventions	Atherectomy	37273	Revascularization, endovascular, open or percutaneous, femoral and popliteal vascular territory, with transluminal atherectomy, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the atherectomy and angioplasty when performed, within the same artery, unilateral; complex lesion, initial vessel	Yes	CareCore National	
Vascular Interventions	Atherectomy	37274	Revascularization, endovascular, open or percutaneous, femoral and popliteal vascular territory, with transluminal atherectomy, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the atherectomy and angioplasty when performed, within the same artery, unilateral; complex lesion, each additional vessel (List separately in addition to code for primary procedure)	- Add On	CareCore National	
Vascular Interventions	Atherectomy	37275	Revascularization, endovascular, open or percutaneous, femoral and popliteal vascular territory, with transluminal stent placement, with transluminal atherectomy, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement, atherectomy, and angioplasty when performed, within the same artery, unilateral; straightforward lesion, initial vessel	Yes	CareCore National	
Vascular Interventions	Atherectomy	37276	Revascularization, endovascular, open or percutaneous, femoral and popliteal vascular territory, with transluminal stent placement, with transluminal atherectomy, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement, atherectomy, and angioplasty when performed, within the same artery, unilateral; straightforward lesion, each additional vessel (List separately in addition to code for primary procedure)	- Add On	CareCore National	
Vascular Interventions	Atherectomy	37277	Revascularization, endovascular, open or percutaneous, femoral and popliteal vascular territory, with transluminal stent placement, with transluminal atherectomy, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement, atherectomy, and angioplasty when performed, within the same artery, unilateral; complex lesion, initial vessel	Yes	CareCore National	
Vascular Interventions	Atherectomy	37278	Revascularization, endovascular, open or percutaneous, femoral and popliteal vascular territory, with transluminal stent placement, with transluminal atherectomy, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement, atherectomy, and angioplasty when performed, within the same artery, unilateral; complex lesion, each additional vessel (List separately in addition to code for primary procedure)	- Add On	CareCore National	
Vascular Interventions	Intravascular Lithotripsy - Femoral and Popliteal	37279	Intravascular lithotripsy(ies), femoral and popliteal vascular territory, including all imaging guidance and radiological supervision and interpretation necessary to perform the intravascular lithotripsy(ies) within the same artery (List separately in addition to code for primary procedure)	Add On	CareCore National	
Vascular Interventions	Tibial Arterial Interventions (LE)	37280	Revascularization, endovascular, open or percutaneous, tibial and peroneal vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; straightforward lesion, initial vessel	Yes	CareCore National	
Vascular Interventions	Tibial Arterial Interventions (LE)	37281	Revascularization, endovascular, open or percutaneous, tibial and peroneal vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; straightforward lesion, each additional vessel (List separately in addition to code for primary procedure)	- Add On	CareCore National	
Vascular Interventions	Tibial Arterial Interventions (LE)	37282	Revascularization, endovascular, open or percutaneous, tibial and peroneal vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; complex lesion, initial vessel	Yes	CareCore National	

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Vascular Interventions	Tibial Arterial Interventions (LE)	37283	Revascularization, endovascular, open or percutaneous, tibial and peroneal vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; complex lesion, each additional vessel (List separately in addition to code for primary procedure)	- Add On	CareCore National	
Vascular Interventions	Tibial Arterial Interventions (LE)	37284	Revascularization, endovascular, open or percutaneous, tibial and peroneal vascular territory, with transluminal stent placement, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement and angioplasty when performed, within the same artery, unilateral; straightforward lesion, initial vessel	Yes	CareCore National	
Vascular Interventions	Tibial Arterial Interventions (LE)	37285	Revascularization, endovascular, open or percutaneous, tibial and peroneal vascular territory, with transluminal stent placement, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement and angioplasty when performed, within the same artery, unilateral; straightforward lesion, each additional vessel (List separately in addition to code for primary procedure)	- Add On	CareCore National	
Vascular Interventions	Tibial Arterial Interventions (LE)	37286	Revascularization, endovascular, open or percutaneous, tibial and peroneal vascular territory, with transluminal stent placement, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement and angioplasty when performed, within the same artery, unilateral; complex lesion, initial vessel	Yes	CareCore National	
Vascular Interventions	Tibial Arterial Interventions (LE)	37287	Revascularization, endovascular, open or percutaneous, tibial and peroneal vascular territory, with transluminal stent placement, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement and angioplasty when performed, within the same artery, unilateral; complex lesion, each additional vessel (List separately in addition to code for primary procedure)	- Add On	CareCore National	
Vascular Interventions	Tibial Arterial Interventions (LE)	37288	Revascularization, endovascular, open or percutaneous, tibial and peroneal vascular territory, with transluminal atherectomy, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the atherectomy and angioplasty when performed, within the same artery, unilateral; straightforward lesion, initial vessel	Yes	CareCore National	
Vascular Interventions	Tibial Arterial Interventions (LE)	37289	Revascularization, endovascular, open or percutaneous, tibial and peroneal vascular territory, with transluminal atherectomy, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the atherectomy and angioplasty when performed, within the same artery, unilateral; straightforward lesion, each additional vessel (List separately in addition to code for primary procedure)	- Add On	CareCore National	
Vascular Interventions	Tibial Arterial Interventions (LE)	37290	Revascularization, endovascular, open or percutaneous, tibial and peroneal vascular territory, with transluminal atherectomy, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the atherectomy and angioplasty when performed, within the same artery, unilateral; complex lesion, initial vessel	Yes	CareCore National	
Vascular Interventions	Tibial Arterial Interventions (LE)	37291	Revascularization, endovascular, open or percutaneous, tibial and peroneal vascular territory, with transluminal atherectomy, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the atherectomy and angioplasty when performed, within the same artery, unilateral; complex lesion, each additional vessel (List separately in addition to code for primary procedure)	- Add On	CareCore National	
Vascular Interventions	Tibial Arterial Interventions (LE)	37292	Revascularization, endovascular, open or percutaneous, tibial and peroneal vascular territory, with transluminal stent placement, with transluminal atherectomy, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement, atherectomy, and angioplasty when performed, within the same artery, unilateral; straightforward lesion, initial vessel	Yes	CareCore National	
Vascular Interventions	Tibial Arterial Interventions (LE)	37293	Revascularization, endovascular, open or percutaneous, tibial and peroneal vascular territory, with transluminal stent placement, with transluminal atherectomy, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement, atherectomy, and angioplasty when performed, within the same artery, unilateral; straightforward lesion, each additional vessel (List separately in addition to code for primary procedure)	- Add On	CareCore National	
Vascular Interventions	Tibial Arterial Interventions (LE)	37294	Revascularization, endovascular, open or percutaneous, tibial and peroneal vascular territory, with transluminal stent placement, with transluminal atherectomy, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement, atherectomy, and angioplasty when performed, within the same artery, unilateral; complex lesion, initial vessel	Yes	CareCore National	
Vascular Interventions	Tibial Arterial Interventions (LE)	37295	Revascularization, endovascular, open or percutaneous, tibial and peroneal vascular territory, with transluminal stent placement, with transluminal atherectomy, including transluminal angioplasty when performed, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the stent placement, atherectomy, and angioplasty when performed, within the same artery, unilateral; complex lesion, each additional vessel (List separately in addition to code for primary procedure)	- Add On	CareCore National	

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
Vascular Interventions	Lower Extremity Interventions	37296	Revascularization, endovascular, open or percutaneous, inframalleolar vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; straightforward lesion, initial vessel	Yes	CareCore National	
Vascular Interventions	Lower Extremity Interventions	37297	Revascularization, endovascular, open or percutaneous, inframalleolar vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; straightforward lesion, each additional vessel (List separately in addition to code for primary procedure)	Yes	CareCore National	
Vascular Interventions	Lower Extremity Interventions	37298	Revascularization, endovascular, open or percutaneous, inframalleolar vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; complex lesion, initial vessel	Yes	CareCore National	
Vascular Interventions	Lower Extremity Interventions	37299	Revascularization, endovascular, open or percutaneous, inframalleolar vascular territory, with transluminal angioplasty, including all maneuvers necessary for accessing and selectively catheterizing the artery and crossing the lesion, including all imaging guidance and radiological supervision and interpretation necessary to perform the angioplasty within the same artery, unilateral; complex lesion, each additional vessel (List separately in addition to code for primary procedure)	Yes	CareCore National	
Vascular Interventions	Cerebrovascular Interventions	61624	Transcatheter permanent occlusion or embolization (eg, for tumor destruction, to achieve hemostasis, to occlude a vascular malformation), including all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary to complete the intervention, percutaneous, any method; central nervous system (intracranial, spinal cord)	Yes	CareCore National	
Vascular Interventions	Cerebrovascular Interventions	61630	Balloon angioplasty, intracranial (eg, atherosclerotic stenosis), percutaneous	Experimental / Investigational - Yes	CareCore National	
Vascular Interventions	Cerebrovascular Interventions	61635	Transcatheter placement of intravascular stent(s), intracranial (eg, atherosclerotic stenosis), including balloon angioplasty, if performed	Yes	CareCore National	
Vascular Interventions	Cerebrovascular Interventions	37215	Transcatheter placement of intravascular stent(s), cervical carotid artery, open or percutaneous, including angioplasty, when performed, and radiological supervision and interpretation; with distal embolic protection	Yes	CareCore National	
Vascular Interventions	Cerebrovascular Interventions	37216	Transcatheter placement of intravascular stent(s), cervical carotid artery, open or percutaneous, including angioplasty, when performed, and radiological supervision and interpretation; without distal embolic protection	Yes	CareCore National	
Vascular Interventions	Cerebrovascular Interventions	37218	Transcatheter placement of intravascular stent(s), intrathoracic common carotid artery or innominate artery, open or percutaneous antegrade approach, including angioplasty, when performed, and radiological supervision and interpretation	Yes	CareCore National	
Vascular Interventions	Cerebrovascular Interventions	0075T	Transcatheter placement of extracranial vertebral artery stent(s), including radiologic supervision and interpretation, open or percutaneous; initial vessel	Yes	CareCore National	
Vascular Interventions	Venous Interventions	36473	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, mechanochemical; first vein treated	Yes	CareCore National	
Vascular Interventions	Venous Interventions	36474	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, mechanochemical; subsequent vein(s) treated in a single extremity, each through separate access sites (List separately in addition to code for primary procedure)	Add On	CareCore National	
Vascular Interventions	Venous Interventions	36475	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, radiofrequency; first vein treated	Yes	CareCore National	
Vascular Interventions	Venous Interventions	36476	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, radiofrequency; subsequent vein(s) treated in a single extremity, each through separate access sites (List separately in addition to code for primary procedure)	Add On	CareCore National	
Vascular Interventions	Venous Interventions	36478	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, laser; first vein treated	Yes	CareCore National	
Vascular Interventions	Venous Interventions	36479	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, laser; subsequent vein(s) treated in a single extremity, each through separate access sites (List separately in addition to code for primary procedure)	Add On	CareCore National	
Vascular Interventions	Venous Interventions	36482	Endovenous ablation therapy of incompetent vein, extremity, by transcatheter delivery of a chemical adhesive (eg, cyanoacrylate) remote from the access site, inclusive of all imaging guidance and monitoring, percutaneous; first vein treated	Yes	CareCore National	

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Vascular Interventions	Venous Interventions	36483	Endovenous ablation therapy of incompetent vein, extremity, by transcatheter delivery of a chemical adhesive (eg, cyanoacrylate) remote from the access site, inclusive of all imaging guidance and monitoring, percutaneous; subsequent vein(s) treated in a single extremity, each through separate access sites (List separately in addition to code for primary procedure)	- Add On	CareCore National	
Vascular Interventions	Venous Interventions	36465	Injection of non-compounded foam sclerosant with ultrasound compression maneuvers to guide dispersion of the injectate, inclusive of all imaging guidance and monitoring; single incompetent extremity truncal vein (eg, great saphenous vein, accessory saphenous vein)	Yes	CareCore National	
Vascular Interventions	Venous Interventions	36466	Injection of non-compounded foam sclerosant with ultrasound compression maneuvers to guide dispersion of the injectate, inclusive of all imaging guidance and monitoring; multiple incompetent truncal veins (eg, great saphenous vein, accessory saphenous vein), same leg	Yes	CareCore National	
Vascular Interventions	Venous Interventions	36468	Injection(s) of sclerosant for spider veins (telangiectasia), limb or trunk	Yes	CareCore National	
Vascular Interventions	Venous Interventions	36471	Injection(s) of sclerosant; multiple incompetent veins (other than telangiectasia), same leg	Yes	CareCore National	
Vascular Interventions	Venous Interventions	37700	Ligation and division of long saphenous vein at saphenofemoral junction, or distal interruptions	Yes	CareCore National	
Vascular Interventions	Venous Interventions	37718	Ligation, division, and stripping, short saphenous vein	Yes	CareCore National	
Vascular Interventions	Venous Interventions	37722	Ligation, division, and stripping, long (greater) saphenous veins from saphenofemoral junction to knee or below	Yes	CareCore National	
Vascular Interventions	Venous Interventions	37735	Ligation and division and complete stripping of long or short saphenous veins with radical excision of ulcer and skin graft and/or interruption of communicating veins of lower leg with excision of deep fascia	Yes	CareCore National	
Vascular Interventions	Venous Interventions	37780	Ligation and division of short saphenous vein at saphenopopliteal junction (separate procedure)	Yes	CareCore National	
Vascular Interventions	Venous Interventions	37799	Unlisted procedure, vascular surgery	Yes	CareCore National	
Vascular Interventions	Venous Interventions	37765	Stab phlebectomy of varicose veins, 1 extremity; 10-20 stab incisions	Yes	CareCore National	
Vascular Interventions	Venous Interventions	37766	Stab phlebectomy of varicose veins, 1 extremity; more than 20 incisions	Yes	CareCore National	
Vascular Interventions	Venous Interventions	37785	Ligation, division, and/or excision of varicose vein cluster(s), 1 leg	Yes	CareCore National	
Vascular Interventions	Venous Interventions	37238	Transcatheter placement of an intravascular stent(s), open or percutaneous, including radiological supervision and interpretation and including angioplasty within the same vessel, when performed; initial vein	Yes	CareCore National	
Vascular Interventions	Venous Interventions	37239	Transcatheter placement of an intravascular stent(s), open or percutaneous, including radiological supervision and interpretation and including angioplasty within the same vessel, when performed; each additional vein (List separately in addition to code for primary procedure)	Add On	CareCore National	
Vascular Interventions	Venous Interventions	37248	Transluminal balloon angioplasty (except dialysis circuit), open or percutaneous, including all imaging and radiological supervision and interpretation necessary to perform the angioplasty within the same vein; initial vein	Yes	CareCore National	
Vascular Interventions	Venous Interventions	37249	Transluminal balloon angioplasty (except dialysis circuit), open or percutaneous, including all imaging and radiological supervision and interpretation necessary to perform the angioplasty within the same vein; each additional vein (List separately in addition to code for primary procedure)	Add On	CareCore National	
Vascular Interventions	Vascular Embolization	37241	Vascular embolization or occlusion, inclusive of all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary to complete the intervention; venous, other than hemorrhage (eg, congenital or acquired venous malformations, venous and capillary hemangiomas, varices, varicoceles)	Yes	CareCore National	
Vascular Interventions	Vascular Embolization	37242	Vascular embolization or occlusion, inclusive of all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary to complete the intervention; arterial, other than hemorrhage or tumor (eg, congenital or acquired arterial malformations, arteriovenous malformations, arteriovenous fistulas, aneurysms, pseudoaneurysms)	Yes	CareCore National	
Vascular Interventions	Vascular Embolization	37244	Vascular embolization or occlusion, inclusive of all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary to complete the intervention; for arterial or venous hemorrhage or lymphatic extravasation	Yes	CareCore National	
Vascular Interventions	Aortic Dissection/Aneurysm Repair	34718	Endovascular repair of iliac artery, not associated with placement of an aorto-iliac artery endograft at the same session, by deployment of an iliac branched endograft, including pre-procedure sizing and device selection, all ipsilateral selective iliac artery catheterization(s), all associated radiological supervision and interpretation, and all endograft extension(s) proximally to the aortic bifurcation and distally in the internal iliac, external iliac, and common femoral artery(ies), and treatment zone angioplasty/stenting, when performed, for other than rupture (eg, for aneurysm, pseudoaneurysm, dissection, arteriovenous malformation, penetrating ulcer), unilateral	Experimental / Investigational - Yes	CareCore National	
Vascular Interventions	Vascular Embolization	37243	Vascular embolization or occlusion, inclusive of all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary to complete the intervention; for tumors, organ ischemia, or infarction	Yes	CareCore National	
Vascular Interventions	Lower Extremity Interventions	C9764	Revascularization, endovascular, open or percutaneous, lower extremity artery(ies), except tibial/peroneal; with intravascular lithotripsy, includes angioplasty within the same vessel(s), when performed	Experimental / Investigational - Yes	CareCore National	
Vascular Interventions	Lower Extremity Interventions	C9767	Revascularization, endovascular, open or percutaneous, lower extremity artery(ies), except tibial/peroneal; with intravascular lithotripsy and transluminal stent placement(s), and atherectomy, includes angioplasty within the same vessel(s), when performed	Experimental / Investigational - Yes	CareCore National	
Vascular Interventions	Lower Extremity Interventions	C9772	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery(ies), with intravascular lithotripsy, includes angioplasty within the same vessel (s), when performed	Experimental / Investigational - Yes	CareCore National	
Radiation Oncology	01-Brachy	0395T	High dose rate electronic brachytherapy, interstitial or intracavitary treatment, per fraction, includes basic dosimetry, when performed	Yes	CareCore National	
Radiation Oncology	01-Brachy	77316	Brachytherapy isodose plan; simple (calculation[s] made from 1 to 4 sources, or remote afterloading brachytherapy, 1 channel), includes basic dosimetry calculation(s)	No - Claim Policies Apply	CareCore National	
Radiation Oncology	01-Brachy	77317	Brachytherapy isodose plan; intermediate (calculation[s] made from 5 to 10 sources, or remote afterloading brachytherapy, 2-12 channels), includes basic dosimetry calculation(s)	No - Claim Policies Apply	CareCore National	
Radiation Oncology	01-Brachy	77318	Brachytherapy isodose plan; complex (calculation[s] made from over 10 sources, or remote afterloading brachytherapy, over 12 channels), includes basic dosimetry calculation(s)	No - Claim Policies Apply	CareCore National	
Radiation Oncology	27-Associated	77436	Surface radiation therapy; superficial or orthovoltage, treatment planning and simulation-aided field setting	No - Claim Policies Apply	CareCore National	CMS Addition Effective 01/01/26

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Radiation Oncology	19-Delivery	77437	Surface radiation therapy; superficial, delivery, </=150 kV, per fraction (eg, electronic brachytherapy)	Yes	CareCore National	CMS Addition Effective 01/01/26
Radiation Oncology	19-Delivery	77438	Surface radiation therapy; orthovoltage, delivery, >150-500 kV, per fraction	Yes	CareCore National	CMS Addition Effective 01/01/26
Radiation Oncology	19-Delivery	77439	Surface radiation therapy; superficial or orthovoltage, image guidance, ultrasound for placement of radiation therapy fields for treatment of cutaneous tumors, per course of treatment (List separately in addition to code for primary procedure)	Add On	CareCore National	CMS Addition Effective 01/01/26
Radiation Oncology	01-Brachy	77761	Intracavitary radiation source application; simple	Yes	CareCore National	
Radiation Oncology	01-Brachy	77762	Intracavitary radiation source application; intermediate	Yes	CareCore National	
Radiation Oncology	01-Brachy	77763	Intracavitary radiation source application; complex	Yes	CareCore National	
Radiation Oncology	01-Brachy	77767	Remote afterloading high dose rate radionuclide skin surface brachytherapy, includes basic dosimetry, when performed; lesion diameter up to 2.0 cm or 1 channel	Yes	CareCore National	
Radiation Oncology	01-Brachy	77768	Remote afterloading high dose rate radionuclide skin surface brachytherapy, includes basic dosimetry, when performed; lesion diameter over 2.0 cm and 2 or more channels, or multiple lesions	Yes	CareCore National	
Radiation Oncology	01-Brachy	77770	Remote afterloading high dose rate radionuclide interstitial or intracavitary brachytherapy, includes basic dosimetry, when performed; 1 channel	Yes	CareCore National	
Radiation Oncology	01-Brachy	77771	Remote afterloading high dose rate radionuclide interstitial or intracavitary brachytherapy, includes basic dosimetry, when performed; 2-12 channels	Yes	CareCore National	
Radiation Oncology	01-Brachy	77772	Remote afterloading high dose rate radionuclide interstitial or intracavitary brachytherapy, includes basic dosimetry, when performed; over 12 channels	Yes	CareCore National	
Radiation Oncology	01-Brachy	77778	Interstitial radiation source application, complex, includes supervision, handling, loading of radiation source, when performed	Yes	CareCore National	
Radiation Oncology	01-Brachy	77789	Surface application of low dose rate radionuclide source	Yes	CareCore National	
Radiation Oncology	01-Brachy	77790	Supervision, handling, loading of radiation source	No - Claim Policies Apply	CareCore National	
Radiation Oncology	01-Brachy	77799	Unlisted procedure, clinical brachytherapy	No - Claim Policies Apply	CareCore National	
Radiation Oncology	01-Brachy	C9726	Placement and removal (if performed) of applicator into breast for intraoperative radiation therapy, add-on to primary breast procedure	No - Claim Policies Apply	CareCore National	EviCore Radiation Oncology Program Addition Effecitve 01/01/19
Radiation Oncology	01-Brachy	G0458	Low dose rate (ldr) prostate brachytherapy services, composite rate	Yes	CareCore National	EviCore Radiation Oncology Program Addition Effective 01/01/19
Radiation Oncology		0745T	Cardiac focal ablation utilizing radiation therapy for arrhythmia; noninvasive arrhythmia localization and mapping of arrhythmia site (nidus), derived from anatomical image data (eg, CT, MRI, or myocardial perfusion scan) and electrical data (eg, 12-lead ECG data), and identification of areas of avoidance	No - Claim Policies Apply	CareCore National	AMA Addition Effective 01/01/2023
Radiation Oncology		0746T	Cardiac focal ablation utilizing radiation therapy for arrhythmia; conversion of arrhythmia localization and mapping of arrhythmia site (nidus) into a multidimensional radiation treatment plan	No - Claim Policies Apply	CareCore National	AMA Addition Effective 01/01/2023
Radiation Oncology		0747T	Cardiac focal ablation utilizing radiation therapy for arrhythmia; delivery of radiation therapy, arrhythmia	Yes	CareCore National	AMA Addition Effective 01/01/2023
Radiation Oncology		63620	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); 1 spinal lesion	No - Claim Policies Apply	CareCore National	
Radiation Oncology		63621	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); each additional spinal lesion (List separately in addition to code for primary procedure)	No - Claim Policies Apply	CareCore National	
Radiation Oncology	03-Stereo	77371	Radiation treatment delivery, stereotactic radiosurgery (SRS), complete course of treatment of cranial lesion(s) consisting of 1 session; multi-source Cobalt 60 based	Yes	CareCore National	
Radiation Oncology	03-Stereo	77372	Radiation treatment delivery, stereotactic radiosurgery (SRS), complete course of treatment of cranial lesion(s) consisting of 1 session; linear accelerator based	Yes	CareCore National	
Radiation Oncology	03-Stereo	77373	Stereotactic body radiation therapy, treatment delivery, per fraction to 1 or more lesions, including image guidance, entire course not to exceed 5 fractions	Yes	CareCore National	
Radiation Oncology	03-Stereo	77432	Stereotactic radiation treatment management of cranial lesion(s) (complete course of treatment consisting of 1 session)	No - Claim Policies Apply	CareCore National	
Radiation Oncology	03-Stereo	77435	Stereotactic body radiation therapy, treatment management, per treatment course, to 1 or more lesions, including image guidance, entire course not to exceed 5 fractions	No - Claim Policies Apply	CareCore National	
Radiation Oncology	03-Stereo	G0339	Image-guided robotic linear accelerator-based stereotactic radiosurgery, complete course of therapy in one session or first session of fractionated treatment	Yes	CareCore National	
Radiation Oncology	03-Stereo	G0340	Image-guided robotic linear accelerator-based stereotactic radiosurgery, delivery including collimator changes and custom plugging, fractionated treatment, all lesions, per session, second through fifth sessions, maximum five sessions per course of treatment	Yes	CareCore National	
Radiation Oncology	05-IMRT	77301	Intensity modulated radiotherapy plan, including dose-volume histograms for target and critical structure partial tolerance specifications	No - Claim Policies Apply	CareCore National	
Radiation Oncology	05-IMRT	77338	Multi-leaf collimator (MLC) device(s) for intensity modulated radiation therapy (IMRT), design and construction per IMRT plan	No - Claim Policies Apply	CareCore National	
Radiation Oncology	07-Neutron	77423	High energy neutron radiation treatment delivery, 1 or more isocenter(s) with coplanar or non-coplanar geometry with blocking and/or wedge, and/or compensator(s)	Yes	CareCore National	
Radiation Oncology	09-IORT	19294	Preparation of tumor cavity, with placement of a radiation therapy applicator for intraoperative radiation therapy (IORT) concurrent with partial mastectomy (List separately in addition to code for primary procedure)	No - Claim Policies Apply	CareCore National	
Radiation Oncology	09-IORT	77424	Intraoperative radiation treatment delivery, x-ray, single treatment session	Yes	CareCore National	EviCore Radiation Oncology Program Addition Effective 01/01/19
Radiation Oncology	09-IORT	77425	Intraoperative radiation treatment delivery, electrons, single treatment session	Yes	CareCore National	
Radiation Oncology	09-IORT	77469	Intraoperative radiation treatment management	No - Claim Policies Apply	CareCore National	
Radiation Oncology	11-Proton	77520	Proton treatment delivery; simple, without compensation	Yes	CareCore National	
Radiation Oncology	11-Proton	77522	Proton treatment delivery; simple, with compensation	Yes	CareCore National	
Radiation Oncology	11-Proton	77523	Proton treatment delivery; intermediate	Yes	CareCore National	
Radiation Oncology	11-Proton	77525	Proton treatment delivery; complex	Yes	CareCore National	

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Radiation Oncology	11-Proton	S8030	Scleral application of tantalum ring(s) for localization of lesions for proton beam therapy	No - Claim Policies Apply	CareCore National	
Radiation Oncology	15-Management	77427	Radiation treatment management, 5 treatments	No - Claim Policies Apply	CareCore National	
Radiation Oncology	15-Management	77431	Radiation therapy management with complete course of therapy consisting of 1 or 2 fractions only	No - Claim Policies Apply	CareCore National	
Radiation Oncology	15-Management	77470	Special treatment procedure (eg, total body irradiation, hemibody radiation, per oral or endocavitary irradiation)	No - Claim Policies Apply	CareCore National	
Radiation Oncology	15-Management	77499	Unlisted procedure, therapeutic radiology treatment management	No - Claim Policies Apply	CareCore National	
Radiation Oncology	17-planning	77261	Therapeutic radiology treatment planning; simple	No - Claim Policies Apply	CareCore National	
Radiation Oncology	17-planning	77262	Therapeutic radiology treatment planning; intermediate	No - Claim Policies Apply	CareCore National	
Radiation Oncology	17-planning	77263	Therapeutic radiology treatment planning; complex	No - Claim Policies Apply	CareCore National	
Radiation Oncology	17-planning	77280	Therapeutic radiology simulation-aided field setting; simple	No - Claim Policies Apply	CareCore National	
Radiation Oncology	17-planning	77285	Therapeutic radiology simulation-aided field setting; intermediate	No - Claim Policies Apply	CareCore National	
Radiation Oncology	17-planning	77290	Therapeutic radiology simulation-aided field setting; complex	No - Claim Policies Apply	CareCore National	
Radiation Oncology	17-planning	77293	Respiratory motion management simulation (List separately in addition to code for primary procedure)	No - Claim Policies Apply	CareCore National	
Radiation Oncology	19-Delivery	77402	Radiation treatment delivery; Level 1 (eg, single-electron field, multiple-electron fields, or 2D photons), including imaging guidance, when performed	Yes	CareCore National	
Radiation Oncology	19-Delivery	77407	Radiation treatment delivery; Level 2, single-isocenter (eg, 3D or IMRT), photons, including imaging guidance, when performed	Yes	CareCore National	
Radiation Oncology	19-Delivery	77412	Radiation treatment delivery; Level 3, multiple isocenters with photon therapy (eg, 2D, 3D, or IMRT) or a single-isocenter photon therapy (eg, 3D or IMRT) with active motion management, or total skin electrons, or mixed-electron/photon field(s), including imaging guidance, when performed	Yes	CareCore National	
Radiation Oncology	19-Delivery	77417	Therapeutic radiology port image(s)	No - Claim Policies Apply	CareCore National	
Radiation Oncology	21-Guidance	77387	Guidance for localization of target volume for delivery of radiation treatment, includes intrafraction tracking, when performed	Yes	CareCore National	
Radiation Oncology	23-Devices	77295	3-dimensional radiotherapy plan, including dose-volume histograms	No - Claim Policies Apply	CareCore National	
Radiation Oncology	23-Devices	77300	Basic radiation dosimetry calculation, central axis depth dose calculation, TDF, NSD, gap calculation, off axis factor, tissue inhomogeneity factors, calculation of non-ionizing radiation surface and depth dose, as required during course of treatment, only when prescribed by the treating physician	No - Claim Policies Apply	CareCore National	
Radiation Oncology	23-Devices	77306	Teletherapy isodose plan; simple (1 or 2 unmodified ports directed to a single area of interest), includes basic dosimetry calculation(s)	No - Claim Policies Apply	CareCore National	
Radiation Oncology	23-Devices	77307	Teletherapy isodose plan; complex (multiple treatment areas, tangential ports, the use of wedges, blocking, rotational beam, or special beam considerations), includes basic dosimetry calculation(s)	No - Claim Policies Apply	CareCore National	
Radiation Oncology	23-Devices	77321	Special teletherapy port plan, particles, hemibody, total body	No - Claim Policies Apply	CareCore National	
Radiation Oncology	23-Devices	77331	Special dosimetry (eg, TLD, microdosimetry) (specify), only when prescribed by the treating physician	No - Claim Policies Apply	CareCore National	
Radiation Oncology	23-Devices	77332	Treatment devices, design and construction; simple (simple block, simple bolus)	No - Claim Policies Apply	CareCore National	
Radiation Oncology	23-Devices	77333	Treatment devices, design and construction; intermediate (multiple blocks, stents, bite blocks, special bolus)	No - Claim Policies Apply	CareCore National	
Radiation Oncology	23-Devices	77334	Treatment devices, design and construction; complex (irregular blocks, special shields, compensators, wedges, molds or casts)	No - Claim Policies Apply	CareCore National	
Radiation Oncology	23-Devices	77336	Continuing medical physics consultation, including assessment of treatment parameters, quality assurance of dose delivery, and review of patient treatment documentation in support of the radiation oncologist, reported per week of therapy	No - Claim Policies Apply	CareCore National	
Radiation Oncology	23-Devices	77370	Special medical radiation physics consultation	No - Claim Policies Apply	CareCore National	
Radiation Oncology	23-Devices	77399	Unlisted procedure, medical radiation physics, dosimetry and treatment devices, and special services	No - Claim Policies Apply	CareCore National	
Radiation Oncology	25-Radiopharm	79005	Radiopharmaceutical therapy, by oral administration	Yes	CareCore National	
Radiation Oncology	25-Radiopharm	79101	Radiopharmaceutical therapy, by intravenous administration	Yes	CareCore National	EviCore Radiation Oncology Program Effective 01/01/19 Addition
Radiation Oncology	25-Radiopharm	A9513	Lutetium lu 177, dotatate, therapeutic, 1 millicurie	Yes	CareCore National	EviCore Radiation Oncology Program Addition Effective 01/01/19

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Radiation Oncology	25-Radiopharm	A9606	Radium ra-223 dichloride, therapeutic, per microcurie	Yes	CareCore National	EviCore Radiation Oncology Program Addition Effective 01/01/19
Radiation Oncology	25-Radiopharm	A9607	Lutetium lu 177 vipivotide tetraxetan, therapeutic, 1 millicurie	Yes	CareCore National	
Radiation Oncology	25-Radiopharm	A9699	Radiopharmaceutical, therapeutic, not otherwise classified	Yes	CareCore National	
Radiation Oncology	25-Radiopharm	C2616	Brachytherapy source, non-stranded, yttrium-90, per source	Yes	CareCore National	
Radiation Oncology	25-Radiopharm	S2095	Transcatheter occlusion or embolization for tumor destruction, percutaneous, any method, using yttrium-90 microspheres	Yes	CareCore National	
Radiation Oncology	27-Associated	19296	Placement of radiotherapy afterloading expandable catheter (single or multichannel) into the breast for interstitial radioelement application following partial mastectomy, includes imaging guidance; on date separate from partial mastectomy	No - Claim Policies Apply	CareCore National	
Radiation Oncology	27-Associated	19297	Placement of radiotherapy afterloading expandable catheter (single or multichannel) into the breast for interstitial radioelement application following partial mastectomy, includes imaging guidance; concurrent with partial mastectomy (List separately in addition to code for primary procedure)	No - Claim Policies Apply	CareCore National	
Radiation Oncology	27-Associated	19298	Placement of radiotherapy after loading brachytherapy catheters (multiple tube and button type) into the breast for interstitial radioelement application following (at the time of or subsequent to) partial mastectomy, includes imaging guidance	No - Claim Policies Apply	CareCore National	
Radiation Oncology	27-Associated	32553	Placement of interstitial device(s) for radiation therapy guidance (eg, fiducial markers, dosimeter), percutaneous, intra-thoracic, single or multiple	No - Claim Policies Apply	CareCore National	
Radiation Oncology	27-Associated	41019	Placement of needles, catheters, or other device(s) into the head and/or neck region (percutaneous, transoral, or transnasal) for subsequent interstitial radioelement application	No - Claim Policies Apply	CareCore National	
Radiation Oncology	27-Associated	49411	Placement of interstitial device(s) for radiation therapy guidance (eg, fiducial markers, dosimeter), percutaneous, intra-abdominal, intra-pelvic (except prostate), and/or retroperitoneum, single or multiple	No - Claim Policies Apply	CareCore National	
Radiation Oncology	27-Associated	49412	Placement of interstitial device(s) for radiation therapy guidance (eg, fiducial markers, dosimeter), open, intra-abdominal, intrapelvic, and/or retroperitoneum, including image guidance, if performed, single or multiple (List separately in addition to code for primary procedure)	No - Claim Policies Apply	CareCore National	
Radiation Oncology	27-Associated	55875	Transperineal placement of needles or catheters into prostate for interstitial radioelement application, with or without cystoscopy	No - Claim Policies Apply	CareCore National	
Radiation Oncology	27-Associated	55876	Placement of interstitial device(s) for radiation therapy guidance (eg, fiducial markers, dosimeter), prostate (via needle, any approach), single or multiple	No - Claim Policies Apply	CareCore National	
Radiation Oncology	27-Associated	55920	Placement of needles or catheters into pelvic organs and/or genitalia (except prostate) for subsequent interstitial radioelement application	No - Claim Policies Apply	CareCore National	
Radiation Oncology	27-Associated	57155	Insertion of uterine tandem and/or vaginal ovoids for clinical brachytherapy	No - Claim Policies Apply	CareCore National	
Radiation Oncology	27-Associated	57156	Insertion of a vaginal radiation afterloading apparatus for clinical brachytherapy	No - Claim Policies Apply	CareCore National	
Radiation Oncology	27-Associated	58346	Insertion of Heyman capsules for clinical brachytherapy	No - Claim Policies Apply	CareCore National	
Radiation Oncology	27-Associated	76873	Ultrasound, transrectal; prostate volume study for brachytherapy treatment planning (separate procedure)	No - Claim Policies Apply	CareCore National	
Radiation Oncology	27-Associated	76965	Ultrasonic guidance for interstitial radioelement application	No - Claim Policies Apply	CareCore National	
Radiation Oncology	29-Neuro	61796	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); 1 simple cranial lesion	No - Claim Policies Apply	CareCore National	EviCore Radiation Oncology Program Addition Effective 01/01/19
Radiation Oncology	29-Neuro	61797	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); each additional cranial lesion, simple (List separately in addition to code for primary procedure)	No - Claim Policies Apply	CareCore National	EviCore Radiation Oncology Program Addition Effective 01/01/19
Radiation Oncology	29-Neuro	61798	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); 1 complex cranial lesion	No - Claim Policies Apply	CareCore National	EviCore Radiation Oncology Program Addition Effective 01/01/19
Radiation Oncology	29-Neuro	61799	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); each additional cranial lesion, complex (List separately in addition to code for primary procedure)	No - Claim Policies Apply	CareCore National	EviCore Radiation Oncology Program Addition Effective 01/01/19
Radiation Oncology	29-Neuro	61800	Application of stereotactic headframe for stereotactic radiosurgery (List separately in addition to code for primary procedure)	No - Claim Policies Apply	CareCore National	EviCore Radiation Oncology Program Addition Effective 01/01/19

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
Crossover Code for: • **Primary Program:** Musculoskeletal (MSK) - Pain Management • **Companion Program:** Sleep Management *(See External Notation column for more details.)*	Sleep Management	L8680*	Implantable neurostimulator electrode, each	Yes	CareCore National	This is a crossover code that can be requested under two programs: **MSK Pain Management** or **Sleep Management.** • If your request is intended to be used for **Sleep Management** only, please submit your request under the **Sleep Management program** through the **CareCoreNational platform.** •If your request is intended to be used for **MSK Pain**, please submit your request under the **MSK Pain Management program** through the **MedSolutions platform.**
Crossover Code for: • **Primary Program:** Musculoskeletal (MSK) - Pain Management • **Companion Program:** Sleep Management *(See External Notation column for more details.)*	Sleep Management	L8681*	Patient programmer (external) for use with implantable programmable neurostimulator pulse generator, replacement only	Yes	CareCore National	This is a crossover code that can be requested under two programs: **MSK Pain Management** or **Sleep Management**. • If your request is intended to be used for **Sleep Management only**, please submit your request under the **Sleep Management program** through the **CareCoreNational platform**. •If your request is intended to be used for **MSK Pain**, please submit your request under the **MSK Pain Management program** through the **MedSolutions platform**.
Sleep	Sleep Management	E0492	Power source and control electronics unit for oral device/appliance for neuromuscular electrical stimulation of the tongue muscle, controlled by phone application	Yes	CareCore National	
Sleep	Sleep Management	E0530	Electronic positional obstructive sleep apnea treatment, with sensor, includes all components and accessories, any type	Yes	CareCore National	
Sleep	Sleep Testing	95782	Polysomnography; younger than 6 years, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	Yes	CareCore National	
Sleep	Sleep Testing	95783	Polysomnography; younger than 6 years, sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bi-level ventilation, attended by a technologist	Yes	CareCore National	
Sleep	Sleep Testing	95805	Multiple sleep latency or maintenance of wakefulness testing, recording, analysis and interpretation of physiological measurements of sleep during multiple trials to assess sleepiness	Yes	CareCore National	
Sleep	Sleep Testing	95807	Sleep study, simultaneous recording of ventilation, respiratory effort, ECG or heart rate, and oxygen saturation, attended by a technologist	Yes	CareCore National	
Sleep	Sleep Testing	95808	Polysomnography; any age, sleep staging with 1-3 additional parameters of sleep, attended by a technologist	Yes	CareCore National	
Sleep	Sleep Testing	95810	Polysomnography; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	Yes	CareCore National	
Sleep	Sleep Testing	95811	Polysomnography; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bilevel ventilation, attended by a technologist	Yes	CareCore National	
Sleep	Experimental / Investigational	41530	Submucosal ablation of the tongue base, radiofrequency, 1 or more sites, per session	Yes	CareCore National	
Sleep	**Sleep Management**	42975	Drug-induced sleep endoscopy, with dynamic evaluation of velum, pharynx, tongue base, and larynx for evaluation of sleep-disordered breathing, flexible, diagnostic	Yes	CareCore National	
Sleep	Sleep Management	64582	Open implantation of hypoglossal nerve neurostimulator array, pulse generator, and distal respiratory sensor electrode or electrode array	Yes	CareCore National	
Durable Medical Equipment	Orthotics and Prosthetics	L1844	Knee orthosis, single upright, thigh and calf, with adjustable flexion and extension joint (unicentric or polycentric), medial-lateral and rotation control, with or without varus/valgus adjustment, custom fabricated	Yes	CareCore National	
Durable Medical Equipment	Orthotics and Prosthetics	L1846	Knee orthosis, double upright, thigh and calf, with adjustable flexion and extension joint (unicentric or polycentric), medial-lateral and rotation control, with or without varus/valgus adjustment, custom fabricated	Yes	CareCore National	
Durable Medical Equipment	Orthotics and Prosthetics	L5781	Addition to lower limb prosthesis, vacuum pump, residual limb volume management and moisture evacuation system	Yes	CareCore National	
Durable Medical Equipment	Orthotics and Prosthetics	L5828	Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control	Yes	CareCore National	
Durable Medical Equipment	Orthotics and Prosthetics	L5856	Addition to lower extremity prosthesis, endoskeletal knee-shin system, microprocessor control feature, swing and stance phase, includes electronic sensor(s), any type	Yes	CareCore National	
Durable Medical Equipment	Orthotics and Prosthetics	L5973	Endoskeletal ankle foot system, microprocessor controlled feature, dorsiflexion and/or plantar flexion control, includes power source	Yes	CareCore National	
Durable Medical Equipment	Orthotics and Prosthetics	L6880	Electric hand, switch or myoelectric controlled, independently articulating digits, any grasp pattern or combination of grasp patterns, includes motor(s)	Yes	CareCore National	
Durable Medical Equipment	Orthotics and Prosthetics	L6881	Automatic grasp feature, addition to upper limb electric prosthetic terminal device	Yes	CareCore National	
Durable Medical Equipment	Orthotics and Prosthetics	L6882	Microprocessor control feature, addition to upper limb prosthetic terminal device	Yes	CareCore National	
Durable Medical Equipment	Orthotics and Prosthetics	L6935	Below elbow, external power, self-suspended inner socket, removable forearm shell, otto bock or equal electrodes, cables, two batteries and one charger, myoelectronic control of terminal device	Yes	CareCore National	
Durable Medical Equipment	Orthotics and Prosthetics	L6955	Above elbow, external power, molded inner socket, removable humeral shell, internal locking elbow, forearm, otto bock or equal electrodes, cables, two batteries and one charger, myoelectronic control of terminal device	Yes	CareCore National	
Durable Medical Equipment	Orthotics and Prosthetics	L7007	Electric hand, switch or myoelectric controlled, adult	Yes	CareCore National	

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
Durable Medical Equipment	Orthotics and Prosthetics	L7259	Electronic wrist rotator, any type	Yes	CareCore National	
Durable Medical Equipment	Orthotics and Prosthetics	L8702	Powered upper extremity range of motion assist device, elbow, wrist, hand, finger, single or double upright(s), includes microprocessor, sensors, all components and accessories, custom fabricated	Experimental / Investigational - Yes	CareCore National	
Durable Medical Equipment	Orthotics and Prosthetics	S1040	Cranial remolding orthosis, pediatric, rigid, with soft interface material, custom fabricated, includes fitting and adjustment(s)	Yes	CareCore National	
Durable Medical Equipment	VENTILATORS	E0466	Home ventilator, any type, used with non-invasive interface, (e.g., mask, chest shell)	Yes	CareCore National	
Durable Medical Equipment	VENTILATORS	E0467	Home ventilator, multi-function respiratory device, also performs any or all of the additional functions of oxygen concentration, drug nebulization, aspiration, and cough stimulation, includes all accessories, components and supplies for all functions	Yes	CareCore National	
Durable Medical Equipment	VENTILATORS	E0468	Home ventilator, dual-function respiratory device, also performs additional function of cough stimulation, includes all accessories, components and supplies for all functions	Yes	CareCore National	
Durable Medical Equipment	OXYGEN AND RELATED RESPIRATORY EQUIPMENT	E0483	High frequency chest wall oscillation system, with full anterior and/or posterior thoracic region receiving simultaneous external oscillation, includes all accessories and supplies, each	Yes	CareCore National	
Durable Medical Equipment	PATIENT LIFTS	E0627	Seat lift mechanism, electric, any type	Yes	CareCore National	
Durable Medical Equipment	PATIENT LIFTS	E0637	Combination sit to stand frame/table system, any size including pediatric, with seat lift feature, with or without wheels	Yes	CareCore National	
Durable Medical Equipment	PATIENT LIFTS	E0638	Standing frame/table system, one position (e.g., upright, supine or prone stander), any size including pediatric, with or without wheels	Yes	CareCore National	
Durable Medical Equipment	PATIENT LIFTS	E0640	Patient lift, fixed system, includes all components/accessories	Yes	CareCore National	
Durable Medical Equipment	PATIENT LIFTS	E0641	Standing frame/table system, multi-position (e.g., three-way stander), any size including pediatric, with or without wheels	Yes	CareCore National	
Durable Medical Equipment	PATIENT LIFTS	E0642	Standing frame/table system, mobile (dynamic stander), any size including pediatric	Yes	CareCore National	
Durable Medical Equipment	NON-PNEUMATIC COMPRESSOR AND APPLIANCES	E0677	Non-pneumatic sequential compression garment, trunk	Experimental / Investigational - Yes	CareCore National	
Durable Medical Equipment	NON-PNEUMATIC COMPRESSOR AND APPLIANCES	E0683	Non-pneumatic, non-sequential, peristaltic wave compression pump	Experimental / Investigational - Yes	CareCore National	
Durable Medical Equipment	TRANSCUTANEOUS ELECTRICAL NERVE STIMULATORS - TENS	E0721	Transcutaneous electrical nerve stimulator for nerves in the auricular region	Experimental / Investigational - Yes	CareCore National	
Durable Medical Equipment	ORTHOSES & PROSTHESES	E0738	Upper extremity rehabilitation system providing active assistance to facilitate muscle re-education, include microprocessor, all components and accessories	Experimental / Investigational - Yes	CareCore National	
Durable Medical Equipment	ORTHOSES & PROSTHESES	E0739	Rehabilitation system with interactive interface providing active assistance in rehabilitation therapy, includes all components and accessories, motors, microprocessors, sensors	Experimental / Investigational - Yes	CareCore National	
Durable Medical Equipment	NEUROMUSCULAR ELECTRICAL STIMULATORS	E0767	Intrabuccal, systemic delivery of amplitude-modulated, radiofrequency electromagnetic field device, for cancer treatment, includes all accessories	Experimental / Investigational - Yes	CareCore National	
Durable Medical Equipment	OTHER ORTHOPEDIC DEVICES	E2508	Speech generating device, synthesized speech, requiring message formulation by spelling and access by physical contact with the device	Yes	CareCore National	
Durable Medical Equipment	OTHER ORTHOPEDIC DEVICES	E2510	Speech generating device, synthesized speech, permitting multiple methods of message formulation and multiple methods of device access	Yes	CareCore National	
Durable Medical Equipment	WHEELCHAIRS	K0899	Power mobility device, not coded by dme pdac or does not meet criteria	Yes	CareCore National	
Durable Medical Equipment	ORTHOSES & PROSTHESES	K1007	Bilateral hip, knee, ankle, foot device, powered, includes pelvic component, single or double upright(s), knee joints any type, with or without ankle joints any type, includes all components and accessories, motors, microprocessors, sensors	Experimental / Investigational - Yes	CareCore National	
Durable Medical Equipment	ORTHOSES & PROSTHESES	L5827	Endoskeletal knee-shin system, single axis, electromechanical swing and stance phase control, with or without shock absorption and stance extension damping	Yes	CareCore National	
Durable Medical Equipment	ORTHOSES & PROSTHESES	L5859	Addition to lower extremity prosthesis, endoskeletal knee-shin system, powered and programmable flexion/extension assist control, includes any type motor(s)	Yes	CareCore National	
Durable Medical Equipment	DME	E0678	Non-pneumatic sequential compression garment, full leg	Experimental / Investigational - Yes	CareCore National	
Durable Medical Equipment	DME	E0679	Non-pneumatic sequential compression garment, half leg	Experimental / Investigational - Yes	CareCore National	
Durable Medical Equipment	DME	E0680	Non-pneumatic compression controller with sequential calibrated gradient pressure	Experimental / Investigational - Yes	CareCore National	

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
Durable Medical Equipment	DME	E0682	Non-pneumatic sequential compression garment, full arm	Experimental / Investigational - Yes	CareCore National	
Crossover Code for: • **Primary Program:** DME / O&P • **Companion Program:** Musculoskeletal (MSK) - Spine Surgery *(See External Notation column for more details.)*	Osteogenesis stimulators	E0748*	Osteogenesis stimulator, electrical, non-invasive, spinal applications	Yes	CareCore National	This is a crossover code that can be requested under two programs: **MSK Spine Surgery** and **DME** • If your request is intended to be used in conjuction with **MSK Spine Surgery**, please submit your request under the **MSK Spine program** through the **CareCoreNational platform**. • If your request is intended to be **DME**, please submit your request under the **DME program** through the **CareCoreNational platform**.
Crossover Code for: • **Primary Program: Musculoskeletal - Joint Surgery** • **Companion Program**: Durable Medical Equipment, Spine Surgery (See External Notation column for more details.)	Spine Surgery	E0760*	Osteogenesis stimulator, low intensity ultrasound, non-invasive	Yes	CareCore National	This is a crossover code that can be requested under three programs: **Durable Medical Equipment**, **MSK Spine Surgery** or **MSK Joint Surgery**. • If your request is intended to be used for **Durable Medical Equipment**, please submit your request under the **Durable Medical Equipment program** through the **CareCoreNational platform**. • If your request is intended to be used for **MSK Spine Surgery**, please submit your request under the **MSK Spine program** through the **CareCoreNational platform**. • If your request is intended to be used for **MSK Joint Surgery**, please submit your request under the **MSK Joint** through the **Medsolutions platform**.
Crossover Code for: • **Primary Program: Musculoskeletal - Joint Surgery** • **Companion Program**: Durable Medical Equipment, Spine Surgery (See External Notation column for more details.)	Osteogenesis stimulators	E0760*	Osteogenesis stimulator, low intensity ultrasound, non-invasive	Yes	CareCore National	This is a crossover code that can be requested under three programs: **Durable Medical Equipment**, **MSK Spine Surgery** or **MSK Joint Surgery**. • If your request is intended to be used for **Durable Medical Equipment**, please submit your request under the **Durable Medical Equipment program** through the **CareCoreNational platform**. • If your request is intended to be used for **MSK Spine Surgery**, please submit your request under the **MSK Spine program** through the **CareCoreNational platform**. • If your request is intended to be used for **MSK Joint Surgery**, please submit your request under the **MSK Joint** through the **Medsolutions platform**.
Crossover Code for: • **Primary Program: Musculoskeletal - Joint Surgery** • **Companion Program**: Durable Medical Equipment, Spine Surgery (See External Notation column for more details.)	Joint Surgery	E0760*	Osteogenesis stimulator, low intensity ultrasound, non-invasive	Yes	CareCore National	This is a crossover code that can be requested under three programs: **Durable Medical Equipment**, **MSK Spine Surgery** or **MSK Joint Surgery**. • If your request is intended to be used for **Durable Medical Equipment**, please submit your request under the **Durable Medical Equipment program** through the **CareCoreNational platform**. • If your request is intended to be used for **MSK Spine Surgery**, please submit your request under the **MSK Spine program** through the **CareCoreNational platform**. • If your request is intended to be used for **MSK Joint Surgery**, please submit your request under the **MSK Joint** through the **Medsolutions platform**.
Durable Medical Equipment	VENTILATORS	E0481	Intrapulmonary percussive ventilation system and related accessories	Experimental / Investigational - Yes	CareCore National	
Durable Medical Equipment	MISCELLANEOUS DME SUPPLY	E1399	Durable medical equipment, miscellaneous	Experimental / Investigational - Yes	CareCore National	

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
Durable Medical Equipment	O&P Only	L2006	Knee ankle foot device, any material, single or double upright, swing and stance phase microprocessor control with adjustability, includes all components (e.g., sensors, batteries, charger), any type activation, with or without ankle joint(s), custom fabricated	Experimental / Investigational - Yes	CareCore National	
Durable Medical Equipment	Orthotics and Prosthetics	L2221	Addition to lower extremity orthosis, ankle system, microprocessor-controlled feature plantarflexion and/or dorsiflexion, includes power source	Yes	CareCore National	
Durable Medical Equipment	Unlisted Procedure	L5999	Lower extremity prosthesis, not otherwise specified	Yes	CareCore National	
Durable Medical Equipment	ORTHOSES & PROSTHESES	L6700	Upper extremity addition, external powered feature, myoelectronic control module, additional emg inputs, pattern-recognition decoding intent movement	Experimental / Investigational - Yes	CareCore National	
Durable Medical Equipment	Unlisted Procedure	L8499	Unlisted procedure for miscellaneous prosthetic services	Yes	CareCore National	
Home Health	Home Health	99512	Home visits for hemodialysis	Yes	CareCore National	Intake Only
Home Health	Home Health	H0045	Respite care services, not in the home, per diem	Yes	CareCore National	Intake Only
Home Health	Home Health	S5150	Unskilled respite care, not hospice, per 15 minutes	Yes	CareCore National	Intake Only
Home Health	Home Health	S5151	Unskilled respite care, not hospice, per diem	Yes	CareCore National	Intake Only
Home Health	Home Health	S9122	Home health aide or certified nurse assistant, providing care in the home, per hour	Yes	CareCore National	Intake Only
Home Health	Home Health	T1005	Respite care services, up to 15 minutes	Yes	CareCore National	Intake Only
Home Health	Home Health	T2044	Hospice inpatient respite care; per diem	Yes	CareCore National	Intake Only
Home Health	Home Health	S9123	Nursing care, in the home; by registered nurse, per hour (use for general nursing care only, not to be used when cpt codes 99500-99602 can be used)	Yes	CareCore National	Intake Only
Home Health	Home Health	S9124	Nursing care, in the home; by licensed practical nurse, per hour	Yes	CareCore National	Intake Only
Home Health	Home Health	T1000	Private duty / independent nursing service(s) - licensed, up to 15 minutes	Yes	CareCore National	Intake Only
Musculoskeletal	Interventional Pain Management	E0782	Infusion pump, implantable, nonprogrammable (includes all components, e.g., pump, catheter, connectors, etc.)	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	E0783	Infusion pump system, implantable, programmable (includes all components, e.g., pump, catheter, connectors, etc.)	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	E0785	Implantable intraspinal (epidural/intrathecal) catheter used with implantable infusion pump, replacement	Yes	MedSolutions	
Musculoskeletal	Interventional Pain Management	E0786	Implantable programmable infusion pump, replacement (excludes implantable intraspinal catheter)	Yes	MedSolutions	
Laboratory Management	Molecular Lab	0616U	TruD MDS Alzheimer's & MCI (Mild Cognitive Impairment), a lab test done to assess risks for Alzheimer's disease and MCI by looking at how certain genes are expressed	Yes	CareCore National	
Laboratory Management	Molecular Lab	0617U	TruD MDS ASCVD (Atherosclerotic Cardiovascular Disease), a lab test done to assess the risk of ASCVD by looking at how certain genes are expressed	Yes	CareCore National	
Laboratory Management	Molecular Lab	0618U	TruD MDS Bipolar, a lab test done to assess the risk of bipolar disorder by looking at how certain genes are expressed	Yes	CareCore National	
Laboratory Management	Molecular Lab	0619U	TruD MDS COPD (Chronic Obstructive Pulmonary Disease), a lab test done to assess the risk of COPD by looking at how certain genes are expressed	Yes	CareCore National	
Laboratory Management	Molecular Lab	0620U	TruD MDS Hepatocellular Carcinoma, a lab test done to assess the risk of HCC (hepatocellular carcinoma) by looking at how certain genes are expressed	Yes	CareCore National	
Laboratory Management	Molecular Lab	0621U	TruD MDS Lyme Disease, a lab test done to assess the risk of Lyme Disease by looking at how certain genes are expressed	Yes	CareCore National	
Laboratory Management	Molecular Lab	0622U	TruD MDS Major Depressive Disorder, a lab test done to assess the risk of depression by looking at how certain genes are expressed	Yes	CareCore National	
Laboratory Management	Molecular Lab	0623U	TruD MDS Multiple Sclerosis, a lab test done to assess the risk of MS (multiple sclerosis) by looking at how certain genes are expressed	Yes	CareCore National	
Laboratory Management	Molecular Lab	0624U	TruD MDS NASH (Nonalcoholic Steatohepatitis), a lab test done to assess the risk of NASH by looking at how certain genes are expressed	Yes	CareCore National	
Laboratory Management	Molecular Lab	0625U	TruD MDS Osteoporosis, a lab test done to assess the risk of osteoporosis by looking at how certain genes are expressed	Yes	CareCore National	
Laboratory Management	Molecular Lab	0626U	TruD MDS Parkinson's, a lab test done to assess the risk of Parkinson's disease by looking at how certain genes are expressed	Yes	CareCore National	
Laboratory Management	Molecular Lab	0627U	TruD MDS Schizophrenia, a lab test done to assess the risk of schizophrenia by looking at how certain genes are expressed	Yes	CareCore National	
Laboratory Management	Molecular Lab	0628U	RenaDx, a lab test done to look for gene errors that can cause issues with the kidneys	Yes	CareCore National	
Laboratory Management	Molecular Lab	0629U	CRISPR (Clustered Regularly Interspaced Short Palindromic Repeat) -TB (Tuberculosis) Blood Test, a lab test done to check for the presence of TB	Yes	CareCore National	
Laboratory Management	Molecular Lab	0630U	BluePrint Molecular Subtyping Test, a lab test done to see how certain genes are expressed in a tumor	Yes	CareCore National	
Laboratory Management	Molecular Lab	0631U	Northstar Select CH (Clonal Hematopoiesis), a lab test done to detect the presence of gene errors in the blood that are not caused by cancer	Yes	CareCore National	
Laboratory Management	Molecular Lab	0632U	UNITY Fetal RhD (Rhesus D) NIPT (Non-Invasive Prenatal Testing), a lab test done on a sample of the mother's blood during pregnancy to look for differences between the blood types of the mother and the baby	Yes	CareCore National	
Laboratory Management	Molecular Lab	0633U	Fetal Focus, a lab test done on a sample of the mother's blood during pregnancy to look for certain concerns with the baby's genes	Yes	CareCore National	
Laboratory Management	Molecular Lab	0634U	GeneStrat® ESR1, lab test done to look for errors in a gene that can be seen in certain cancers and can cause problems with how the body processes the hormone estrogen	Yes	CareCore National	
Laboratory Management	Molecular Lab	0635U	AdvanceAD-TX, a lab tests done to look for gene errors that may impact how the body responds to certain drugs	Yes	CareCore National	
Laboratory Management	Molecular Lab	0641U	PredicineBEACON Baseline, an initial lab test that looks for certain gene findings that can be linked to a cancer and can be used with other tests done later to see if a person still has signs of cancer after treatment	Yes	CareCore National	
Laboratory Management	Molecular Lab	0642U	PredicineBEACON MRD (Longitudinal), a lab test that looks for cancer cells in the blood to see if a person still has signs of cancer after treatment	Yes	CareCore National	
Laboratory Management	Molecular Lab	0643U	PredicineCARE Urine Assay, a lab test done on urine to look for gene errors in cancer cells	Yes	CareCore National	
Laboratory Management	Molecular Lab	0644U	FusionMRD™ Baseline, an initial lab test that looks for certain gene findings that can be linked to a cancer and can be used with other tests done later to see if a person still has signs of cancer after treatment	Yes	CareCore National	

Program	Category	CPT® Code	CPT® Code Description	Commercial Prior Authorization Required?	Commercial Case Build Platform	External Notation
Laboratory Management	Molecular Lab	0645U	FusionMRD™ Monitoring, a lab test that looks for cancer cells in the blood to see if a person still has signs of cancer after treatment	Yes	CareCore National	
Laboratory Management	Molecular Lab	0646U	Plasma Detect Genome MRD – Baseline, an initial lab test that looks for certain gene findings that can be linked to a cancer and can be used with other tests done later to see if a person still has signs of cancer after treatment	Yes	CareCore National	
Laboratory Management	Molecular Lab	0647U	Plasma Detect Genome MRD – Monitoring, a lab test that looks for cancer cells in the blood to see if a person still has signs of cancer after treatment	Yes	CareCore National	
Laboratory Management	Molecular Lab	0648U	Oncomine Dx Express Test, a lab test done to look for errors in genes that can predict how well a drug might work for treating certain lung cancers	Yes	CareCore National	
Laboratory Management	Molecular Lab	0649U	MAP-AD, a lab test done to look for certain markers linked to Alzheimer's disease	Yes	CareCore National	
Laboratory Management	Molecular Lab	0650U	CKM PGx™ Panel (Hypertension and Cardiovascular-kidney-metabolic pharmacogenetic panel), a lab tests done to look for gene errors that may impact how the body responds to certain drugs	Yes	CareCore National	
Laboratory Management	Molecular Lab	0651U	OncoDx™ (Hereditary Germline Cancer Genetics Panel), a lab test done to look for gene errors that can cause high risks for certain cancers	Yes	CareCore National	
Laboratory Management	Molecular Lab	0652U	RenaPGx™ (Renal Pharmacogenetic Test), a lab tests done to look for gene errors that may impact how the body responds to certain drugs	Yes	CareCore National	
Laboratory Management	Molecular Lab	0653U	RenaXome™ (Renal Disease Whole Exome Sequencing), a lab test done to look for errors in the parts of all the genes that make proteins and can cause kidney disease	Yes	CareCore National	
Laboratory Management	Molecular Lab	0657U	GenomeDx Rapid, Comparator, a lab test that compares genome results between family members and reports results faster than with standard testing	Yes	CareCore National	
Laboratory Management	Molecular Lab	0658U	GenomeDx Rapid, Proband, a lab test that looks for errors in the genome and reports results faster than with standard testing	Yes	CareCore National	
Laboratory Management	Molecular Lab	0659U	GenomeDx ultraRapid, Proband, a lab test that looks for errors in the genome and reports results much faster than with standard testing	Yes	CareCore National	
Laboratory Management	Molecular Lab	81162	BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis and full duplication/deletion analysis (ie, detection of large gene rearrangements)	Yes	CareCore National	
Laboratory Management	Molecular Lab	81163	BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis	Yes	CareCore National	
Laboratory Management	Molecular Lab	81164	BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full duplication/deletion analysis (ie, detection of large gene rearrangements)	Yes	CareCore National	
Laboratory Management	Molecular Lab	81165	BRCA1 (BRCA1, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis	Yes	CareCore National	
Laboratory Management	Molecular Lab	81166	BRCA1 (BRCA1, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full duplication/deletion analysis (ie, detection of large gene rearrangements)	Yes	CareCore National	
Laboratory Management	Molecular Lab	81167	BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full duplication/deletion analysis (ie, detection of large gene rearrangements)	Yes	CareCore National	
Laboratory Management	Molecular Lab	81195	Cytogenomic (genome-wide) analysis, hematologic malignancy, structural variants and copy number variants, optical genome mapping (OGM)	Yes	CareCore National	
Laboratory Management	Molecular Lab	81212	BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; 185delAG, 5385insC, 6174delT variants	Yes	CareCore National	
Laboratory Management	Molecular Lab	81215	BRCA1 (BRCA1, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; known familial variant	Yes	CareCore National	
Laboratory Management	Molecular Lab	81216	BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis	Yes	CareCore National	
Laboratory Management	Molecular Lab	81217	BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; known familial variant	Yes	CareCore National	
Laboratory Management	Molecular Lab	81223	CFTR (cystic fibrosis transmembrane conductance regulator) (eg, cystic fibrosis) gene analysis; full gene sequence	Yes	CareCore National	
Laboratory Management	Molecular Lab	81226	CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3, *4, *5, *6, *9, *10, *17, *19, *29, *35, *41, *1XN, *2XN, *4XN)	Yes	CareCore National	
Laboratory Management	Molecular Lab	81228	Cytogenomic (genome-wide) analysis for constitutional chromosomal abnormalities; interrogation of genomic regions for copy number variants, comparative genomic hybridization [CGH] microarray analysis	Yes	CareCore National	
Laboratory Management	Molecular Lab	81277	Cytogenomic neoplasia (genome-wide) microarray analysis, interrogation of genomic regions for copy number and loss-of-heterozygosity variants for chromosomal abnormalities	Yes	CareCore National	
Laboratory Management	Molecular Lab	81292	MLH1 (mutL homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; full sequence analysis	Yes	CareCore National	
Laboratory Management	Molecular Lab	81293	MLH1 (mutL homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; known familial variants	Yes	CareCore National	
Laboratory Management	Molecular Lab	81294	MLH1 (mutL homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; duplication/deletion variants	Yes	CareCore National	
Laboratory Management	Molecular Lab	81295	MSH2 (mutS homolog 2, colon cancer, nonpolyposis type 1) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; full sequence analysis	Yes	CareCore National	
Laboratory Management	Molecular Lab	81296	MSH2 (mutS homolog 2, colon cancer, nonpolyposis type 1) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; known familial variants	Yes	CareCore National	
Laboratory Management	Molecular Lab	81297	MSH2 (mutS homolog 2, colon cancer, nonpolyposis type 1) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; duplication/deletion variants	Yes	CareCore National	
Laboratory Management	Molecular Lab	81298	MSH6 (mutS homolog 6 [E. coli]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; full sequence analysis	Yes	CareCore National	
Laboratory Management	Molecular Lab	81299	MSH6 (mutS homolog 6 [E. coli]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; known familial variants	Yes	CareCore National	
Laboratory Management	Molecular Lab	81300	MSH6 (mutS homolog 6 [E. coli]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; duplication/deletion variants	Yes	CareCore National	
Laboratory Management	Molecular Lab	81307	PALB2 (partner and localizer of BRCA2) (eg, breast and pancreatic cancer) gene analysis; full gene sequence	Yes	CareCore National	
Laboratory Management	Molecular Lab	81308	PALB2 (partner and localizer of BRCA2) (eg, breast and pancreatic cancer) gene analysis; known familial variant	Yes	CareCore National	

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Laboratory Management	Molecular Lab	81313	PCA3/KLK3 (prostate cancer antigen 3 [non-protein coding]/kallikrein-related peptidase 3 [prostate specific antigen]) ratio (eg, prostate cancer)	Yes	CareCore National	
Laboratory Management	Molecular Lab	81317	PMS2 (postmeiotic segregation increased 2 [S. cerevisiae]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; full sequence analysis	Yes	CareCore National	
Laboratory Management	Molecular Lab	81318	PMS2 (postmeiotic segregation increased 2 [S. cerevisiae]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; known familial variants	Yes	CareCore National	
Laboratory Management	Molecular Lab	81319	PMS2 (postmeiotic segregation increased 2 [S. cerevisiae]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; duplication/deletion variants	Yes	CareCore National	
Laboratory Management	Molecular Lab	81321	PTEN (phosphatase and tensin homolog) (eg, Cowden syndrome, PTEN hamartoma tumor syndrome) gene analysis; full sequence analysis	Yes	CareCore National	
Laboratory Management	Molecular Lab	81322	PTEN (phosphatase and tensin homolog) (eg, Cowden syndrome, PTEN hamartoma tumor syndrome) gene analysis; known familial variant	Yes	CareCore National	
Laboratory Management	Molecular Lab	81323	PTEN (phosphatase and tensin homolog) (eg, Cowden syndrome, PTEN hamartoma tumor syndrome) gene analysis; duplication/deletion variant	Yes	CareCore National	
Laboratory Management	Molecular Lab	81349	Cytogenomic (genome-wide) analysis for constitutional chromosomal abnormalities; interrogation of genomic regions for copy number and loss-of-heterozygosity variants, low-pass sequencing analysis	Yes	CareCore National	
Laboratory Management	Molecular Lab	81354	Cytogenomic (genome-wide) analysis for constitutional chromosomal abnormalities; interrogation of structural and copy number variants, optical genome mapping (OGM)	Yes	CareCore National	
Laboratory Management	Molecular Lab	81400	Molecular pathology procedure, Level 1 (eg, identification of single germline variant [eg, SNP] by techniques such as restriction enzyme digestion or melt curve analysis) ACADM (acyl-CoA dehydrogenase, C-4 to C-12 straight chain, MCAD) (eg, medium chain acyl dehydrogenase deficiency), K304E variant ACE (angiotensin converting enzyme) (eg, hereditary blood pressure regulation), insertion/deletion variant AGTR1 (angiotensin II receptor, type 1) (eg, essential hypertension), 1166A>C variant BCKDHA (branched chain keto acid dehydrogenase E1, alpha polypeptide) (eg, maple syrup urine disease, type 1A), Y438N variant CCR5 (chemokine C-C motif receptor 5) (eg, HIV resistance), 32-bp deletion mutation/794 825del32 deletion CLRN1 (clarin 1) (eg, Usher syndrome, type 3), N48K variant F2 (coagulation factor 2) (eg, hereditary hypercoagulability), 1199G>A variant F5 (coagulation factor V) (eg, hereditary hypercoagulability), HR2 variant F7 (coagulation factor VII [serum prothrombin conversion acc	Yes	CareCore National	
Laboratory Management	Molecular Lab	81401	Molecular pathology procedure, Level 2 (eg, 2-10 SNPs, 1 methylated variant, or 1 somatic variant [typically using nonsequencing target variant analysis], or detection of a dynamic mutation disorder/triplet repeat) ABCC8 (ATP-binding cassette, sub-family C [CFTR/MRP], member 8) (eg, familial hyperinsulinism), common variants (eg, c.3898-9G>A [c.3992-9G>A], F1388del) ABL1 (ABL proto-oncogene 1, non-receptor tyrosine kinase) (eg, acquired imatinib resistance), T315I variant ACADM (acyl-CoA dehydrogenase, C-4 to C-12 straight chain, MCAD) (eg, medium chain acyl dehydrogenase deficiency), commons variants (eg, K304E, Y42H) ADRB2 (adrenergic beta-2 receptor surface) (eg, drug metabolism), common variants (eg, G16R, Q27E) APOB (apolipoprotein B) (eg, familial hypercholesterolemia type B), common variants (eg, R3500Q, R3500W) APOE (apolipoprotein E) (eg, hyperlipoproteinemia type III, cardiovascular disease, Alzheimer disease), common variants (eg, *2, *3, *4) CBFB/MYH11 (inv(16)) (eg, acute	Yes	CareCore National	
Laboratory Management	Molecular Lab	81402	Molecular pathology procedure, Level 3 (eg, >10 SNPs, 2-10 methylated variants, or 2-10 somatic variants [typically using non-sequencing target variant analysis], immunoglobulin and T-cell receptor gene rearrangements, duplication/deletion variants of 1 exon, loss of heterozygosity [LOH], uniparental disomy [UPD]) Chromosome 1p-/19q- (eg, glial tumors), deletion analysis Chromosome 18q- (eg, D18S55, D18S58, D18S61, D18S64, and D18S69) (eg, colon cancer), allelic imbalance assessment (ie, loss of heterozygosity) COL1A1/PDGFB (t(17;22)) (eg, dermatofibrosarcoma protuberans), translocation analysis, multiple breakpoints, qualitative, and quantitative, if performed CYP21A2 (cytochrome P450, family 21, subfamily A, polypeptide 2) (eg, congenital adrenal hyperplasia, 21-hydroxylase deficiency), common variants (eg, IVS2-13G, P30L, I172N, exon 6 mutation cluster [I235N, V236E, M238K], V281L, L307FfsX6, Q318X, R356W, P453S, G110VfsX21, 30-kb deletion variant) ESR1/PGR (receptor 1/progesterone	Yes	CareCore National	
Laboratory Management	Molecular Lab	81403	Molecular pathology procedure, Level 4 (eg, analysis of single exon by DNA sequence analysis, analysis of >10 amplicons using multiplex PCR in 2 or more independent reactions, mutation scanning or duplication/deletion variants of 2-5 exons) ANG (angiogenin, ribonuclease, RNase A family, 5) (eg, amyotrophic lateral sclerosis), full gene sequence ARX (aristaless-related homeobox) (eg, X-linked lissencephaly with ambiguous genitalia, X-linked intellectual disability), duplication/deletion analysis CEL (carboxyl ester lipase [bile salt-stimulated lipase]) (eg, maturity-onset diabetes of the young [MODY]), targeted sequence analysis of exon 11 (eg, c.1785delC, c.1686delT) CTNNB1 (catenin [cadherin-associated protein], beta 1, 88kDa) (eg, desmoid tumors), targeted sequence analysis (eg, exon 3) DAZ/SRY (deleted in azoospermia and sex determining region Y) (eg, male infertility), common deletions (eg, AZFa, AZFb, AZFc, AZFd) DNMT3A (DNA [cytosine-5-]-methyltransferase 3 alpha)	Yes	CareCore National	
Laboratory Management	Molecular Lab	81404	Molecular pathology procedure, Level 5 (eg, analysis of 2-5 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 6-10 exons, or characterization of a dynamic mutation disorder/triplet repeat by Southern blot analysis) ACADS (acyl-CoA dehydrogenase, C-2 to C-3 short chain) (eg, short chain acyl-CoA dehydrogenase deficiency), targeted sequence analysis (eg, exons 5 and 6) AQP2 (aquaporin 2 [collecting duct]) (eg, nephrogenic diabetes insipidus), full gene sequence ARX (aristaless related homeobox) (eg, X-linked lissencephaly with ambiguous genitalia, X-linked intellectual disability), full gene sequence AVPR2 (arginine vasopressin receptor 2) (eg, nephrogenic diabetes insipidus), full gene sequence BBS10 (Bardet-Biedl syndrome 10) (eg, Bardet-Biedl syndrome), full gene sequence BTD (biotinidase) (eg, biotinidase deficiency), full gene sequence C10orf2 (chromosome 10 open reading frame 2) (eg, mitochondrial DNA depletion syndrome)	Yes	CareCore National	

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Laboratory Management	Molecular Lab	81405	Molecular pathology procedure, Level 6 (eg, analysis of 6-10 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 11-25 exons, regionally targeted cytogenomic array analysis) ABCD1 (ATP-binding cassette, sub-family D [ALD], member 1) (eg, adrenoleukodystrophy), full gene sequence ACADS (acyl-CoA dehydrogenase, C-2 to C-3 short chain) (eg, short chain acyl-CoA dehydrogenase deficiency), full gene sequence ACTA2 (actin, alpha 2, smooth muscle, aorta) (eg, thoracic aortic aneurysms and aortic dissections), full gene sequence ACTC1 (actin, alpha, cardiac muscle 1)(eg, familial hypertrophic cardiomyopathy), full gene sequence ANKRD1 (ankyrin repeat domain 1) (eg, dilated cardiomyopathy), full gene sequence APTX (aprataxin) (eg, ataxia with oculomotor apraxia 1), full gene sequence ARSA (arylsulfatase A) (eg, arylsulfatase A deficiency), full gene sequence BCKDHA (branched chain keto acid dehydrogenase E1, alpha polypeptide) (eg, maple syrup urine disease,	Yes	CareCore National	
Laboratory Management	Molecular Lab	81406	Molecular pathology procedure, Level 7 (eg, analysis of 11-25 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 26-50 exons) ACADVL (acyl-CoA dehydrogenase, very long chain) (eg, very long chain acyl-coenzyme A dehydrogenase deficiency), full gene sequence ACTN4 (actinin, alpha 4) (eg, focal segmental glomerulosclerosis), full gene sequence AFG3L2 (AFG3 ATPase family gene 3-like 2 [S. cerevisiae]) (eg, spinocerebellar ataxia), full gene sequence AIRE (autoimmune regulator) (eg, autoimmune polyendocrinopathy syndrome type 1), full gene sequence ALDH7A1 (aldehyde dehydrogenase 7 family, member A1) (eg, pyridoxine-dependent epilepsy), full gene sequence ANO5 (anoctamin 5) (eg, limb-girdle muscular dystrophy), full gene sequence ANOS1 (anosmin-1) (eg, Kallmann syndrome 1), full gene sequence APP (amyloid beta [A4] precursor protein) (eg, Alzheimer disease), full gene sequence ASS1 (argininosuccinate synthase 1) (eg, citrullinemia type I), full gene sequ	Yes	CareCore National	
Laboratory Management	Molecular Lab	81407	Molecular pathology procedure, Level 8 (eg, analysis of 26-50 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of >50 exons, sequence analysis of multiple genes on one platform) ABCC8 (ATP-binding cassette, sub-family C [CFTR/MRP], member 8) (eg, familial hyperinsulinism), full gene sequence AGL (amylo-alpha-1, 6-glucosidase, 4-alpha-glucanotransferase) (eg, glycogen storage disease type III), full gene sequence AHI1 (Abelson helper integration site 1) (eg, Joubert syndrome), full gene sequence APOB (apolipoprotein B) (eg, familial hypercholesterolemia type B) full gene sequence ASPM (asp [abnormal spindle] homolog, microcephaly associated [Drosophila]) (eg, primary microcephaly), full gene sequence CHD7 (chromodomain helicase DNA binding protein 7) (eg, CHARGE syndrome), full gene sequence COL4A4 (collagen, type IV, alpha 4) (eg, Alport syndrome), full gene sequence COL4A5 (collagen, type IV, alpha 5) (eg, Alport syndrome), duplication/deletion analy	Yes	CareCore National	
Laboratory Management	Molecular Lab	81408	Molecular pathology procedure, Level 9 (eg, analysis of >50 exons in a single gene by DNA sequence analysis) ABCA4 (ATP-binding cassette, sub-family A [ABC1], member 4) (eg, Stargardt disease, age-related macular degeneration), full gene sequence ATM (ataxia telangiectasia mutated) (eg, ataxia telangiectasia), full gene sequence CDH23 (cadherin-related 23) (eg, Usher syndrome, type 1), full gene sequence CEP290 (centrosomal protein 290kDa) (eg, Joubert syndrome), full gene sequence COL1A1 (collagen, type I, alpha 1) (eg, osteogenesis imperfecta, type I), full gene sequence COL1A2 (collagen, type I, alpha 2) (eg, osteogenesis imperfecta, type I), full gene sequence COL4A1 (collagen, type IV, alpha 1) (eg, brain small-vessel disease with hemorrhage), full gene sequence COL4A3 (collagen, type IV, alpha 3 [Goodpasture antigen]) (eg, Alport syndrome), full gene sequence COL4A5 (collagen, type IV, alpha 5) (eg, Alport syndrome), full gene sequence DMD (dystrophin) (eg, Duchenne/Becker muscu	Yes	CareCore National	
Laboratory Management	Molecular Lab	81410	Aortic dysfunction or dilation (eg, Marfan syndrome, Loeys Dietz syndrome, Ehler Danlos syndrome type IV, arterial tortuosity syndrome); genomic sequence analysis panel, must include sequencing of at least 9 genes, including FBN1, TGFBR1, TGFBR2, COL3A1, MYH11, ACTA2, SLC2A10, SMAD3, and MYLK	Yes	CareCore National	
Laboratory Management	Molecular Lab	81411	Aortic dysfunction or dilation (eg, Marfan syndrome, Loeys Dietz syndrome, Ehler Danlos syndrome type IV, arterial tortuosity syndrome); duplication/deletion analysis panel, must include analyses for TGFBR1, TGFBR2, MYH11, and COL3A1	Yes	CareCore National	
Laboratory Management	Molecular Lab	81413	Cardiac ion channelopathies (eg, Brugada syndrome, long QT syndrome, short QT syndrome, catecholaminergic polymorphic ventricular tachycardia); genomic sequence analysis panel, must include sequencing of at least 10 genes, including ANK2, CASQ2, CAV3, KCNE1, KCNE2, KCNH2, KCNJ2, KCNQ1, RYR2, and SCN5A	Yes	CareCore National	
Laboratory Management	Molecular Lab	81414	Cardiac ion channelopathies (eg, Brugada syndrome, long QT syndrome, short QT syndrome, catecholaminergic polymorphic ventricular tachycardia); duplication/deletion gene analysis panel, must include analysis of at least 2 genes, including KCNH2 and KCNQ1	Yes	CareCore National	
Laboratory Management	Molecular Lab	81415	Exome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis	Yes	CareCore National	
Laboratory Management	Molecular Lab	81416	Exome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis, each comparator exome (eg, parents, siblings) (List separately in addition to code for primary procedure)	Yes	CareCore National	
Laboratory Management	Molecular Lab	81417	Exome (eg, unexplained constitutional or heritable disorder or syndrome); re-evaluation of previously obtained exome sequence (eg, updated knowledge or unrelated condition/syndrome)	Yes	CareCore National	
Laboratory Management	Molecular Lab	81425	Genome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis	Yes	CareCore National	
Laboratory Management	Molecular Lab	81426	Genome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis, each comparator genome (eg, parents, siblings) (List separately in addition to code for primary procedure)	Yes	CareCore National	
Laboratory Management	Molecular Lab	81430	Hearing loss (eg, nonsyndromic hearing loss, Usher syndrome, Pendred syndrome); genomic sequence analysis panel, must include sequencing of at least 60 genes, including CDH23, CLRN1, GJB2, GPR98, MTRNR1, MYO7A, MYO15A, PCDH15, OTOF, SLC26A4, TMC1, TMPRSS3, USH1C, USH1G, USH2A, and WFS1	Yes	CareCore National	
Laboratory Management	Molecular Lab	81431	Hearing loss (eg, nonsyndromic hearing loss, Usher syndrome, Pendred syndrome); duplication/deletion analysis panel, must include copy number analyses for STRC and DFNB1 deletions in GJB2 and GJB6 genes	Yes	CareCore National	
Laboratory Management	Molecular Lab	81434	Hereditary retinal disorders (eg, retinitis pigmentosa, Leber congenital amaurosis, cone-rod dystrophy), genomic sequence analysis panel, must include sequencing of at least 15 genes, including ABCA4, CNGA1, CRB1, EYS, PDE6A, PDE6B, PRPF31, PRPH2, RDH12, RHO, RP1, RP2, RPE65, RPGR, and USH2A	Yes	CareCore National	
Laboratory Management	Molecular Lab	81437	Hereditary neuroendocrine tumor-related disorders (eg, medullary thyroid carcinoma, parathyroid carcinoma, malignant pheochromocytoma or paraganglioma), genomic sequence analysis panel, 5 or more genes, interrogation for sequence variants and copy number variants	Yes	CareCore National	
Laboratory Management	Molecular Lab	81439	Hereditary cardiomyopathy (eg, hypertrophic cardiomyopathy, dilated cardiomyopathy, arrhythmogenic right ventricular cardiomyopathy), genomic sequence analysis panel, must include sequencing of at least 5 cardiomyopathy-related genes (eg, DSG2, MYBPC3, MYH7, PKP2, TTN)	Yes	CareCore National	

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Laboratory Management	Molecular Lab	81440	Nuclear encoded mitochondrial genes (eg, neurologic or myopathic phenotypes), genomic sequence panel, must include analysis of at least 100 genes, including BCS1L, C10orf2, COQ2, COX10, DGUOK, MPV17, OPA1, PDSS2, POLG, POLG2, RRM2B, SCO1, SCO2, SLC25A4, SUCLA2, SUCLG1, TAZ, TK2, and TYMP	Yes	CareCore National	
Laboratory Management	Molecular Lab	81442	Noonan spectrum disorders (eg, Noonan syndrome, cardio-facio-cutaneous syndrome, Costello syndrome, LEOPARD syndrome, Noonan-like syndrome), genomic sequence analysis panel, must include sequencing of at least 12 genes, including BRAF, CBL, HRAS, KRAS, MAP2K1, MAP2K2, NRAS, PTPN11, RAF1, RIT1, SHOC2, and SOS1	Yes	CareCore National	
Laboratory Management	Molecular Lab	81448	Hereditary peripheral neuropathies (eg, Charcot-Marie-Tooth, spastic paraplegia), genomic sequence analysis panel, must include sequencing of at least 5 peripheral neuropathy-related genes (eg, BSCL2, GJB1, MFN2, MPZ, REEP1, SPAST, SPG11, SPTLC1)	Yes	CareCore National	
Laboratory Management	Molecular Lab	81449	Solid organ neoplasm, genomic sequence analysis panel, 5-50 genes, interrogation for sequence variants and copy number variants or rearrangements, if performed; RNA analysis	Yes	CareCore National	
Laboratory Management	Molecular Lab	81451	Hematolymphoid neoplasm or disorder, genomic sequence analysis panel, 5-50 genes, interrogation for sequence variants, and copy number variants or rearrangements, or isoform expression or mRNA expression levels, if performed; RNA analysis	Yes	CareCore National	
Laboratory Management	Molecular Lab	81455	Solid organ or hematolymphoid neoplasm or disorder, 51 or greater genes, genomic sequence analysis panel, interrogation for sequence variants and copy number variants or rearrangements, or isoform expression or mRNA expression levels, if performed; DNA analysis or combined DNA and RNA analysis	Yes	CareCore National	
Laboratory Management	Molecular Lab	81456	Solid organ or hematolymphoid neoplasm or disorder, 51 or greater genes, genomic sequence analysis panel, interrogation for sequence variants and copy number variants or rearrangements, or isoform expression or mRNA expression levels, if performed; RNA analysis	Yes	CareCore National	
Laboratory Management	Molecular Lab	81457	Solid organ neoplasm, genomic sequence analysis panel, interrogation for sequence variants; DNA analysis, microsatellite instability	Yes	CareCore National	
Laboratory Management	Molecular Lab	81458	Solid organ neoplasm, genomic sequence analysis panel, interrogation for sequence variants; DNA analysis, copy number variants and microsatellite instability	Yes	CareCore National	
Laboratory Management	Molecular Lab	81459	Solid organ neoplasm, genomic sequence analysis panel, interrogation for sequence variants; DNA analysis or combined DNA and RNA analysis, copy number variants, microsatellite instability, tumor mutation burden, and rearrangements	Yes	CareCore National	
Laboratory Management	Molecular Lab	81460	Whole mitochondrial genome (eg, Leigh syndrome, mitochondrial encephalomyopathy, lactic acidosis, and stroke-like episodes [MELAS], myoclonic epilepsy with ragged-red fibers [MERFF], neuropathy, ataxia, and retinitis pigmentosa [NARP], Leber hereditary optic neuropathy [LHON]), genomic sequence, must include sequence analysis of entire mitochondrial genome with heteroplasmy detection	Yes	CareCore National	
Laboratory Management	Molecular Lab	81462	Solid organ neoplasm, genomic sequence analysis panel, cell-free nucleic acid (eg, plasma), interrogation for sequence variants; DNA analysis or combined DNA and RNA analysis, copy number variants and rearrangements	Yes	CareCore National	
Laboratory Management	Molecular Lab	81463	Solid organ neoplasm, genomic sequence analysis panel, cell-free nucleic acid (eg, plasma), interrogation for sequence variants; DNA analysis, copy number variants, and microsatellite instability	Yes	CareCore National	
Laboratory Management	Molecular Lab	81464	Solid organ neoplasm, genomic sequence analysis panel, cell-free nucleic acid (eg, plasma), interrogation for sequence variants; DNA analysis or combined DNA and RNA analysis, copy number variants, microsatellite instability, tumor mutation burden, and rearrangements	Yes	CareCore National	
Laboratory Management	Molecular Lab	81465	Whole mitochondrial genome large deletion analysis panel (eg, Kearns-Sayre syndrome, chronic progressive external ophthalmoplegia), including heteroplasmy detection, if performed	Yes	CareCore National	
Laboratory Management	Molecular Lab	81470	X-linked intellectual disability (XLID) (eg, syndromic and non-syndromic XLID); genomic sequence analysis panel, must include sequencing of at least 60 genes, including ARX, ATRX, CDKL5, FGD1, FMR1, HUWE1, IL1RAPL, KDM5C, L1CAM, MECP2, MED12, MID1, OCRL, RPS6KA3, and SLC16A2	Yes	CareCore National	
Laboratory Management	Molecular Lab	81471	X-linked intellectual disability (XLID) (eg, syndromic and non-syndromic XLID); duplication/deletion gene analysis, must include analysis of at least 60 genes, including ARX, ATRX, CDKL5, FGD1, FMR1, HUWE1, IL1RAPL, KDM5C, L1CAM, MECP2, MED12, MID1, OCRL, RPS6KA3, and SLC16A2	Yes	CareCore National	
Laboratory Management	Molecular Lab	81479	Unlisted molecular pathology procedure	Yes	CareCore National	
Laboratory Management	Molecular Lab	81518	Oncology (breast), mRNA, gene expression profiling by real-time RT-PCR of 11 genes (7 content and 4 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithms reported as percentage risk for metastatic recurrence and likelihood of benefit from extended endocrine therapy	Yes	CareCore National	
Laboratory Management	Molecular Lab	81524	Oncology (central nervous system tumor), DNA methylation analysis of at least 10,000 methylation sites, utilizing DNA extracted from formalin-fixed tumor tissue, algorithm(s) reported as probability of matching a reference tumor family and class, and MGMT (O-6-methylguanine-DNA methyltransferase) promoter methylation status, if performed	Yes	CareCore National	
Laboratory Management	Molecular Lab	81529	Oncology (cutaneous melanoma), mRNA, gene expression profiling by real-time RT-PCR of 31 genes (28 content and 3 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as recurrence risk, including likelihood of sentinel lymph node metastasis	Yes	CareCore National	
Laboratory Management	Molecular Lab	81538	Oncology (lung), mass spectrometric 8-protein signature, including amyloid A, utilizing serum, prognostic and predictive algorithm reported as good versus poor overall survival	Yes	CareCore National	
Laboratory Management	Molecular Lab	81541	Oncology (prostate), mRNA gene expression profiling by real-time RT-PCR of 46 genes (31 content and 15 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a disease-specific mortality risk score	Yes	CareCore National	
Laboratory Management	Molecular Lab	81542	Oncology (prostate), mRNA, microarray gene expression profiling of 22 content genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as metastasis risk score	Yes	CareCore National	
Laboratory Management	Molecular Lab	81552	Oncology (uveal melanoma), mRNA, gene expression profiling by real-time RT-PCR of 15 genes (12 content and 3 housekeeping), utilizing fine needle aspirate or formalin-fixed paraffin-embedded tissue, algorithm reported as risk of metastasis	Yes	CareCore National	
Laboratory Management	Molecular Lab	81554	Pulmonary disease (idiopathic pulmonary fibrosis [IPF]), mRNA, gene expression analysis of 190 genes, utilizing transbronchial biopsies, diagnostic algorithm reported as categorical result (eg, positive or negative for high probability of usual interstitial pneumonia [UIP])	Yes	CareCore National	
Laboratory Management	Molecular Lab	81599	Unlisted multianalyte assay with algorithmic analysis	Yes	CareCore National	
Laboratory Management	Molecular Lab	0020M	Oncology (central nervous system), analysis of 30,000 DNA methylation loci by methylation array, utilizing DNA extracted from tumor tissue, diagnostic algorithm reported as probability of matching a reference tumor subclass	Yes	CareCore National	

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Laboratory Management	Molecular Lab	0047U	Oncology (prostate), mRNA, gene expression profiling by real-time RT-PCR of 17 genes (12 content and 5 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a risk score	Yes	CareCore National	
Laboratory Management	Molecular Lab	0048U	Oncology (solid organ neoplasia), DNA, targeted sequencing of protein-coding exons of 468 cancer-associated genes, including interrogation for somatic mutations and microsatellite instability, matched with normal specimens, utilizing formalin-fixed paraffin-embedded tumor tissue, report of clinically significant mutation(s)	Yes	CareCore National	
Laboratory Management	Molecular Lab	0089U	Oncology (melanoma), gene expression profiling by RTqPCR, PRAME and LINC00518, superficial collection using adhesive patch(es)	Yes	CareCore National	
Laboratory Management	Molecular Lab	0102U	Hereditary breast cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer), genomic sequence analysis panel utilizing a combination of NGS, Sanger, MLPA, and array CGH, with mRNA analytics to resolve variants of unknown significance when indicated (17 genes [sequencing and deletion/duplication])	Yes	CareCore National	
Laboratory Management	Molecular Lab	0129U	Hereditary breast cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer), genomic sequence analysis and deletion/duplication analysis panel (ATM, BRCA1, BRCA2, CDH1, CHEK2, PALB2, PTEN, and TP53)	Yes	CareCore National	
Laboratory Management	Molecular Lab	0172U	Oncology (solid tumor as indicated by the label), somatic mutation analysis of BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) and analysis of homologous recombination deficiency pathways, DNA, formalin-fixed paraffin-embedded tissue, algorithm quantifying tumor genomic instability score	Yes	CareCore National	
Laboratory Management	Molecular Lab	0211U	Oncology (pan-tumor), DNA and RNA by next-generation sequencing, utilizing formalin-fixed paraffin-embedded tissue, interpretative report for single nucleotide variants, copy number alterations, tumor mutational burden, and microsatellite instability, with therapy association	Yes	CareCore National	
Laboratory Management	Molecular Lab	0239U	Targeted genomic sequence analysis panel, solid organ neoplasm, cell-free DNA, analysis of 311 or more genes, interrogation for sequence variants, including substitutions, insertions, deletions, select rearrangements, and copy number variations	Yes	CareCore National	
Laboratory Management	Molecular Lab	0242U	Targeted genomic sequence analysis panel, solid organ neoplasm, cell-free circulating DNA analysis of 55-74 genes, interrogation for sequence variants, gene copy number amplifications, and gene rearrangements	Yes	CareCore National	
Laboratory Management	Molecular Lab	0318U	Pediatrics (congenital epigenetic disorders), whole genome methylation analysis by microarray for 50 or more genes, blood	Yes	CareCore National	
Laboratory Management	Molecular Lab	0326U	Targeted genomic sequence analysis panel, solid organ neoplasm, cell-free circulating DNA analysis of 83 or more genes, interrogation for sequence variants, gene copy number amplifications, gene rearrangements, microsatellite instability and tumor mutational burden	Yes	CareCore National	
Laboratory Management	Molecular Lab	0329U	Oncology (neoplasia), exome and transcriptome sequence analysis for sequence variants, gene copy number amplifications and deletions, gene rearrangements, microsatellite instability and tumor mutational burden utilizing DNA and RNA from tumor with DNA from normal blood or saliva for subtraction, report of clinically significant mutation(s) with therapy associations	Yes	CareCore National	
Laboratory Management	Molecular Lab	0340U	Oncology (pan-cancer), analysis of minimal residual disease (MRD) from plasma, with assays personalized to each patient based on prior next-generation sequencing of the patient's tumor and germline DNA, reported as absence or presence of MRD, with disease-burden correlation, if appropriate	Yes	CareCore National	
Laboratory Management	Molecular Lab	0364U	Oncology (hematolymphoid neoplasm), genomic sequence analysis using multiplex (PCR) and next-generation sequencing with algorithm, quantification of dominant clonal sequence(s), reported as presence or absence of minimal residual disease (MRD) with quantitation of disease burden, when appropriate	Yes	CareCore National	
Laboratory Management	Molecular Lab	0388U	Oncology (non-small cell lung cancer), next-generation sequencing with identification of single nucleotide variants, copy number variants, insertions and deletions, and structural variants in 37 cancer-related genes, plasma, with report for alteration detection	Yes	CareCore National	
Laboratory Management	Molecular Lab	0425U	Genome (eg, unexplained constitutional or heritable disorder or syndrome), rapid sequence analysis, each comparator genome (eg, parents, siblings)	Yes	CareCore National	
Laboratory Management	Molecular Lab	0426U	Genome (eg, unexplained constitutional or heritable disorder or syndrome), ultra-rapid sequence analysis	Yes	CareCore National	
Laboratory Management	Molecular Lab	0452U	Oncology (bladder), methylated PENK DNA detection by linear target enrichment-quantitative methylation-specific real-time PCR (LTE-qMSP), urine, reported as likelihood of bladder cancer	Yes	CareCore National	
Laboratory Management	Molecular Lab	0453U	Oncology (colorectal cancer), cell-free DNA (cfDNA), methylation-based quantitative PCR assay (SEPTIN9, IKZF1, BCAT1, Septin9-2, VAV3, BCAN), plasma, reported as presence or absence of circulating tumor DNA (ctDNA)	Yes	CareCore National	
Laboratory Management	Molecular Lab	0454U	Rare diseases (constitutional/heritable disorders), identification of copy number variations, inversions, insertions, translocations, and other structural variants by optical genome mapping	Yes	CareCore National	
Laboratory Management	Molecular Lab	0465U	Oncology (urothelial carcinoma), DNA, quantitative methylation-specific PCR of 2 genes (ONECUT2, VIM), algorithmic analysis reported as positive or negative	Yes	CareCore National	
Laboratory Management	Molecular Lab	0466U	Cardiology (coronary artery disease [CAD]), DNA, genome-wide association studies (564856 single-nucleotide polymorphisms [SNPs], targeted variant genotyping), patient lifestyle and clinical data, buccal swab, algorithm reported as polygenic risk to acquired heart disease	Yes	CareCore National	
Laboratory Management	Molecular Lab	0467U	Oncology (bladder), DNA, next-generation sequencing (NGS) of 60 genes and whole genome aneuploidy, urine, algorithms reported as minimal residual disease (MRD) status positive or negative and quantitative disease burden	Yes	CareCore National	
Laboratory Management	Molecular Lab	0469U	Rare diseases (constitutional/heritable disorders), whole genome sequence analysis for chromosomal abnormalities, copy number variants, duplications/deletions, inversions, unbalanced translocations, regions of homozygosity (ROH), inheritance pattern that indicate uniparental disomy (UPD), and aneuploidy, fetal sample (amniotic fluid, chorionic villus sample, or products of conception), identification and categorization of genetic variants, diagnostic report of fetal results based on phenotype with maternal sample and paternal sample, if performed, as comparators and/or maternal cell contamination	Yes	CareCore National	
Laboratory Management	Molecular Lab	0471U	Oncology (colorectal cancer), qualitative real-time PCR of 35 variants of KRAS and NRAS genes (exons 2, 3, 4), formalin-fixed paraffin-embedded (FFPE), predictive, identification of detected mutations	Yes	CareCore National	
Laboratory Management	Molecular Lab	0473U	Oncology (solid tumor), next-generation sequencing (NGS) of DNA from formalin-fixed paraffin-embedded (FFPE) tissue with comparative sequence analysis from a matched normal specimen (blood or saliva), 648 genes, interrogation for sequence variants, insertion and deletion alterations, copy number variants, rearrangements, microsatellite instability, and tumor-mutation burden	Yes	CareCore National	

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Laboratory Management	Molecular Lab	0481U	IDH1 (isocitrate dehydrogenase 1 [NADP+]), IDH2 (isocitrate dehydrogenase 2 [NADP+]), and TERT (telomerase reverse transcriptase) promoter (eg, central nervous system [CNS] tumors), next-generation sequencing (single-nucleotide variants [SNV], deletions, and insertions)	Yes	CareCore National	
Laboratory Management	Molecular Lab	0485U	Oncology (solid tumor), cell-free DNA and RNA by next-generation sequencing, interpretative report for germline mutations, clonal hematopoiesis of indeterminate potential, and tumor-derived single-nucleotide variants, small insertions/deletions, copy number alterations, fusions, microsatellite instability, and tumor mutational burden	Yes	CareCore National	
Laboratory Management	Molecular Lab	0487U	Oncology (solid tumor), cell-free circulating DNA, targeted genomic sequence analysis panel of 84 genes, interrogation for sequence variants, aneuploidy-corrected gene copy number amplifications and losses, gene rearrangements, and microsatellite instability	Yes	CareCore National	
Laboratory Management	Molecular Lab	0488U	Obstetrics (fetal antigen noninvasive prenatal test), cell-free DNA sequence analysis for detection of fetal presence or absence of 1 or more of the Rh, C, c, D, E, Duffy (Fya), or Kell (K) antigen in alloimmunized pregnancies, reported as selected antigen(s) detected or not detected	Yes	CareCore National	
Laboratory Management	Molecular Lab	0496U	Oncology (colorectal), cell-free DNA, 8 genes for mutations, 7 genes for methylation by real-time RT-PCR, and 4 proteins by enzyme-linked immunosorbent assay, blood, reported positive or negative for colorectal cancer or advanced adenoma risk	Yes	CareCore National	
Laboratory Management	Molecular Lab	0499U	Oncology (colorectal and lung), DNA from formalin-fixed paraffin-embedded (FFPE) tissue, next-generation sequencing of 8 genes (NRAS, EGFR, CTNNB1, PIK3CA, APC, BRAF, KRAS, and TP53), mutation detection	Yes	CareCore National	
Laboratory Management	Molecular Lab	0500U	Autoinflammatory disease (VEXAS syndrome), DNA, UBA1 gene mutations, targeted variant analysis (M41T, M41V, M41L, c.118-2A>C, c.118-1G>C, c.118-9_118-2del, S56F, S621C)	Yes	CareCore National	
Laboratory Management	Molecular Lab	0501U	Oncology (colorectal), blood, quantitative measurement of cell-free DNA (cfDNA)	Yes	CareCore National	
Laboratory Management	Molecular Lab	0506U	Gastroenterology (Barrett's esophagus), esophageal cells, DNA methylation analysis by next-generation sequencing of at least 89 differentially methylated genomic regions, algorithm reported as likelihood for Barrett's esophagus	Yes	CareCore National	
Laboratory Management	Molecular Lab	0507U	Oncology (ovarian), DNA, whole-genome sequencing with 5-hydroxymethylcytosine (5hmC) enrichment, using whole blood or plasma, algorithm reported as cancer detected or not detected	Yes	CareCore National	
Laboratory Management	Molecular Lab	0523U	Oncology (solid tumor), DNA, qualitative, next-generation sequencing (NGS) of single-nucleotide variants (SNV) and insertion/deletions in 22 genes utilizing formalin-fixed paraffin-embedded tissue, reported as presence or absence of mutation(s), location of mutation(s), nucleotide change, and amino acid change	Yes	CareCore National	
Laboratory Management	Molecular Lab	0529U	Hematology (venous thromboembolism [VTE]), genome-wide single-nucleotide polymorphism variants, including F2 and F5 gene analysis, and Leiden variant, by microarray analysis, saliva, report as risk score for VTE	Yes	CareCore National	
Laboratory Management	Molecular Lab	0530U	Oncology (pan-solid tumor), ctDNA, utilizing plasma, next-generation sequencing (NGS) of 77 genes, 8 fusions, microsatellite instability, and tumor mutation burden, interpretative report for single-nucleotide variants, copy-number alterations, with therapy association	Yes	CareCore National	
Laboratory Management	Molecular Lab	0532U	Rare diseases (constitutional disease/hereditary disorders), rapid whole genome and mitochondrial DNA sequencing for single-nucleotide variants, insertions/deletions, copy number variations, peripheral blood, buffy coat, saliva, buccal or tissue sample, results reported as positive or negative	Yes	CareCore National	
Laboratory Management	Molecular Lab	0533U	Drug metabolism (adverse drug reactions and drug response), genotyping of 16 genes (ie, ABCG2, CYP2B6, CYP2C9, CYP2C19, CYP2C, CYP2D6, CYP3A5, CYP4F2, DPYD, G6PD, GGCX, NUDT15, SLCO1B1, TPMT, UGT1A1, VKORC1), reported as metabolizer status and transporter function	Yes	CareCore National	
Laboratory Management	Molecular Lab	0534U	Oncology (prostate), microRNA, single-nucleotide polymorphisms (SNPs) analysis by RT-PCR of 32 variants, using buccal swab, algorithm reported as a risk score	Yes	CareCore National	
Laboratory Management	Molecular Lab	0537U	Oncology (colorectal cancer), analysis of cell-free DNA for epigenomic patterns, next-generation sequencing, >2,500 differentially methylated regions (DMRs), plasma, algorithm reported as positive or negative	Yes	CareCore National	
Laboratory Management	Molecular Lab	0538U	Oncology (solid tumor), next-generation targeted sequencing analysis, formalin-fixed paraffin-embedded (FFPE) tumor tissue, DNA analysis of 600 genes, interrogation for single-nucleotide variants, insertions/deletions, gene rearrangements, and copy number alterations, microsatellite instability, tumor mutation burden, reported as actionable variant	Yes	CareCore National	
Laboratory Management	Molecular Lab	0539U	Oncology (solid tumor), cell-free circulating tumor DNA (ctDNA), 152 genes, next-generation sequencing, interrogation for single-nucleotide variants, insertions/deletions, gene rearrangements, copy number alterations, and microsatellite instability, using whole-blood samples, mutations with clinical actionability reported as actionable variant	Yes	CareCore National	
Laboratory Management	Molecular Lab	0543U	Oncology (solid tumor), next-generation sequencing of DNA from formalin-fixed paraffin-embedded (FFPE) tissue of 517 genes, interrogation for single- nucleotide variants, multi-nucleotide variants, insertions and deletions from DNA, fusions in 24 genes and splice variants in 1 gene from RNA, and tumor mutation burden	Yes	CareCore National	
Laboratory Management	Molecular Lab	0549U	Oncology (urothelial), DNA, quantitative methylated real-time PCR of TRNA-Cys, SIM2, and NKX1-1, using urine, diagnostic algorithm reported as a probability index for bladder cancer and/or upper tract urothelial carcinoma (UTUC)	Yes	CareCore National	
Laboratory Management	Molecular Lab	0552U	Reproductive medicine (preimplantation genetic assessment), analysis for known genetic disorders from trophectoderm biopsy, linkage analysis of disease-causing locus, and when possible, targeted mutation analysis for known familial variant, reported as low-risk or high-risk for familial genetic disorder	Yes	CareCore National	
Laboratory Management	Molecular Lab	0553U	Reproductive medicine (preimplantation genetic assessment), analysis of 24 chromosomes using DNA genomic sequence analysis from embryonic trophectoderm for structural rearrangements, aneuploidy, and a mitochondrial DNA score, results reported as normal/balanced (euploidy/balanced), unbalanced structural rearrangement, monosomy, trisomy, segmental aneuploidy, or mosaic, per embryo tested	Yes	CareCore National	
Laboratory Management	Molecular Lab	0554U	Reproductive medicine (preimplantation genetic assessment), analysis of 24 chromosomes using DNA genomic sequence analysis from trophectoderm biopsy for aneuploidy, ploidy, a mitochondrial DNA score, and embryo quality control, results reported as normal (euploidy), monosomy, trisomy, segmental aneuploidy, triploid, haploid, or mosaic, with quality control results reported as contamination detected or inconsistent cohort when applicable, per embryo tested	Yes	CareCore National	

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Laboratory Management	Molecular Lab	0555U	Reproductive medicine (preimplantation genetic assessment), analysis of 24 chromosomes using DNA genomic sequence analysis from embryonic trophectoderm for structural rearrangements, aneuploidy, ploidy, a mitochondrial DNA score, and embryo quality control, results reported as normal/balanced (euploidy/balanced), unbalanced structural rearrangement, monosomy, trisomy, segmental aneuploidy, triploid, haploid, or mosaic, with quality control results reported as contamination detected or inconsistent cohort when applicable, per embryo tested	Yes	CareCore National	
Laboratory Management	Molecular Lab	0560U	Oncology (minimal residual disease [MRD]), genomic sequence analysis, cell-free DNA, whole blood and tumor tissue, baseline assessment for design and construction of a personalized variant panel to evaluate current MRD and for comparison to subsequent MRD assessments	Yes	CareCore National	
Laboratory Management	Molecular Lab	0561U	Oncology (minimal residual disease [MRD]), genomic sequence analysis, cell-free DNA, whole blood, subsequent assessment with comparison to initial assessment to evaluate for MRD	Yes	CareCore National	
Laboratory Management	Molecular Lab	0562U	Oncology (solid tumor), targeted genomic sequence analysis, 33 genes, detection of single-nucleotide variants (SNVs), insertions and deletions, copy-number amplifications, and translocations in human genomic circulating cell-free DNA, plasma, reported as presence of actionable variants	Yes	CareCore National	
Laboratory Management	Molecular Lab	0565U	Oncology (hepatocellular carcinoma), next-generation sequencing methylation pattern assay to detect 6,626 epigenetic alterations, cell-free DNA, plasma, algorithm reported as cancer signal detected or not detected	Yes	CareCore National	
Laboratory Management	Molecular Lab	0566U	Oncology (lung), qPCR-based analysis of 13 differentially methylated regions (CCDC181, HOXA7, LRRC8A, MARCHF11, MIR129-2, NCOR2, PANTR1, PRKCB, SLC9A3, TBR1_2, TRAP1, VWC2, ZNF781), pleural fluid, algorithm reported as a qualitative result	Yes	CareCore National	
Laboratory Management	Molecular Lab	0567U	Rare diseases (constitutional/heritable disorders), whole-genome sequence analysis combination of short and long reads, for single-nucleotide variants, insertions/deletions and characterized intronic variants, copy-number variants, duplications/deletions, mobile element insertions, runs of homozygosity, aneuploidy, and inversions, mitochondrial DNA sequence and deletions, short tandem repeat genes, methylation status of selected regions, blood, saliva, amniocentesis, chorionic villus sample or tissue, identification and categorization of genetic variants	Yes	CareCore National	
Laboratory Management	Molecular Lab	0569U	Oncology (solid tumor), next-generation sequencing analysis of tumor methylation markers (>20,000 differentially methylated regions) present in cell-free circulating tumor DNA (ctDNA), whole blood, algorithm reported as presence or absence of ctDNA with tumor fraction, if appropriate	Yes	CareCore National	
Laboratory Management	Molecular Lab	0571U	Oncology (solid tumor), DNA (80 genes) and RNA (10 genes), by next-generation sequencing, plasma, including single-nucleotide variants, insertions/deletions, copy-number alterations, microsatellite instability, and fusions, reported as clinically actionable variants	Yes	CareCore National	
Laboratory Management	Molecular Lab	0572U	Oncology (prostate), high-throughput telomere length quantification by FISH, whole blood, diagnostic algorithm reported as risk of prostate cancer	Yes	CareCore National	
Laboratory Management	Molecular Lab	0578U	Oncology (cutaneous melanoma), RNA, gene expression profiling by real-time qPCR of 10 genes (8 content and 2 housekeeping), utilizing formalin-fixed paraffin-embedded (FFPE) tissue, algorithm reports a binary result, either low-risk or high-risk for sentinel lymph node metastasis and recurrence	Yes	CareCore National	
Laboratory Management	Molecular Lab	0582U	Rare diseases (constitutional disease/hereditary disorders), rapid whole genome DNA sequencing for single-nucleotide variants, insertions/deletions, copy number variations, blood, saliva, tissue sample, variants reported	Yes	CareCore National	
Laboratory Management	Molecular Lab	0583U	Rare diseases (constitutional disease/hereditary disorders), rapid whole genome comparator DNA sequencing for single-nucleotide variants, insertions/deletions, copy number variations, blood, saliva, tissue sample, variants reported with proband results (List separately in addition to code for primary procedure)	Yes	CareCore National	
Laboratory Management	Molecular Lab	0585U	Targeted genomic sequence analysis panel, solid organ neoplasm, circulating cell-free DNA (cfDNA) analysis from plasma of 521 genes, interrogation for sequence variants, gene copy number amplifications, gene rearrangements, and microsatellite instability, report shows identified mutations, including variants with clinical actionability	Yes	CareCore National	
Laboratory Management	Molecular Lab	0586U	Oncology, mRNA, gene expression profiling of 216 genes (204 targeted and 12 housekeeping genes), RNA expression analysis, formalin-fixed paraffin-embedded (FFPE) tissue, quantitative, reported as log2 ratio per gene	Yes	CareCore National	
Laboratory Management	Molecular Lab	0592U	Oncology (hematolymphoid neoplasms), DNA, targeted genomic sequence of 417 genes, interrogation for gene fusions, translocations, rearrangements, utilizing formalin-fixed paraffin-embedded (FFPE) tumor tissue, results report clinically significant variant(s)	Yes	CareCore National	
Laboratory Management	Molecular Lab	0597U	Oncology (breast), RNA expression profiling of 329 genes by targeted next-generation sequencing and 20 proteins by multiplex immunofluorescence, formalin-fixed paraffin-embedded (FFPE) tissue, algorithmic analyses to determine tumor-recurrence risk score	Yes	CareCore National	
Laboratory Management	Molecular Lab	0602U	Endocrinology (diabetes), insulin (INS) gene methylation using digital droplet PCR, insulin, and C-peptide immunoassay, serum, Hemoglobin A1c immunoassay, whole blood, algorithm reported as diabetes-risk score	Yes	CareCore National	
Laboratory Management	Molecular Lab	0611U	Oncology (liver), analysis of over 1,000 methylated regions, cell-free DNA from plasma, algorithm reported as a quantitative result	Yes	CareCore National	
Laboratory Management	Molecular Lab	0612U	Oncology (liver), analysis of over 1,000 methylated regions, cell-free DNA from plasma, algorithm reported as a quantitative result	Yes	CareCore National	
Laboratory Management	Molecular Lab	0613U	Oncology (urothelial carcinoma), DNA methylation and mutation analysis of 6 biomarkers (TWIST1, OTX1, ONECUT2, FGFR3, HRAS, TERT promoter region), methylation-specific PCR and targeted next-generation sequencing, urine, algorithm reported as a probability index for bladder cancer and upper tract urothelial carcinoma	Yes	CareCore National	
Laboratory Management	Molecular Lab	0036U	Exome (ie, somatic mutations), paired formalin-fixed paraffin-embedded tumor tissue and normal specimen, sequence analyses	Yes	CareCore National	
Laboratory Management	Molecular Lab	0037U	Targeted genomic sequence analysis, solid organ neoplasm, DNA analysis of 324 genes, interrogation for sequence variants, gene copy number amplifications, gene rearrangements, microsatellite instability and tumor mutational burden	Yes	CareCore National	
Laboratory Management	Molecular Lab	0244U	Oncology (solid organ), DNA, comprehensive genomic profiling, 257 genes, interrogation for single-nucleotide variants, insertions/deletions, copy number alterations, gene rearrangements, tumor-mutational burden and microsatellite instability, utilizing formalin-fixed paraffin-embedded tumor tissue	Yes	CareCore National	
Laboratory Management	Molecular Lab	0250U	Oncology (solid organ neoplasm), targeted genomic sequence DNA analysis of 505 genes, interrogation for somatic alterations (SNVs [single nucleotide variant], small insertions and deletions, one amplification, and four translocations), microsatellite instability and tumor-mutation burden	Yes	CareCore National	

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Laboratory Management	Molecular Lab	0334U	Oncology (solid organ), targeted genomic sequence analysis, formalin-fixed paraffin-embedded (FFPE) tumor tissue, DNA analysis, 84 or more genes, interrogation for sequence variants, gene copy number amplifications, gene rearrangements, microsatellite instability and tumor mutational burden	Yes	CareCore National	
Laboratory Management	Molecular Lab	0379U	Targeted genomic sequence analysis panel, solid organ neoplasm, DNA (523 genes) and RNA (55 genes) by next-generation sequencing, interrogation for sequence variants, gene copy number amplifications, gene rearrangements, microsatellite instability, and tumor mutational burden	Yes	CareCore National	
Laboratory Management	Molecular Lab	0444U	Oncology (solid organ neoplasia), targeted genomic sequence analysis panel of 361 genes, interrogation for gene fusions, translocations, or other rearrangements, using DNA from formalin-fixed paraffin-embedded (FFPE) tumor tissue, report of clinically significant variant(s)	Yes	CareCore National	
Laboratory Management	Molecular Lab	81445	Solid organ neoplasm, genomic sequence analysis panel, 5-50 genes, interrogation for sequence variants and copy number variants or rearrangements, if performed; DNA analysis or combined DNA and RNA analysis	Yes	CareCore National	
Laboratory Management	Molecular Lab	81450	Hematolymphoid neoplasm or disorder, genomic sequence analysis panel, 5-50 genes, interrogation for sequence variants, and copy number variants or rearrangements, or isoform expression or mRNA expression levels, if performed; DNA analysis or combined DNA and RNA analysis	Yes	CareCore National	

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