LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	C9257	INJECTION BEVACIZUMAB 0.25 MG	HCPCS - C CODES - OUTPATIENT PP	NON-COV	04/19/2020	12/31/2024	Other		
MMAI-Medicare/Medicaid	J7999	COMPOUNDED DRUG NOC	HCPCS - DRUGS (NOT ORAL)	NO	04/19/2020	12/31/2024	Other		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J2430	INJ PAMIDRONATE DISODIUM PER 30 MG	HCPCS - DRUGS (NOT ORAL)	NO	04/19/2020	12/31/2024	Other		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J3489	INJECTION ZOLEDRONIC ACID 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	04/19/2020	12/31/2024	Other		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	Q5101	INJ FILGRASTIM BIOSIMILAR 1 MCG	HCPCS - TEMP CODES	NO	04/19/2020	12/31/2024	Other		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9305	INJECTION PEMETREXED NOS10 MG	HCPCS - CHEMO DRUGS	NO	04/19/2020	12/31/2024	Other		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9267	INJECTION PACLITAXEL 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	04/19/2020	12/31/2024	Other		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	J9171	INJECTION DOCETAXEL 1 MG	HCPCS - CHEMO DRUGS	NO	04/19/2020	12/31/2024	Other		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9297	INJ SANDOZ NOT THR EQ J9305 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	04/01/2023	12/31/2024	Other		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9294	INJ PEMETREXED HOSPIRA 10MG	HCPCS - DRUGS (NOT ORAL)	NO	04/01/2023	12/31/2024	Other		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9296	INJ PEMETREXED ACCORD 10MG	HCPCS - DRUGS (NOT ORAL)	NO	04/01/2023	12/31/2024	Other		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9314	INJ PEMETREXED TEVA 10MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2023	12/31/2024	Other		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	D9914	ADMINISTRATION OF DERMAL FILLERS	HCPCS - DENTAL	NON-COV	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	D6193	REPLACEMENT OF AN IMPLANT SCREW	HCPCS - DENTAL	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	D6180	IMPL MNT FL AR FXD HYB PROS NOT REM	HCPCS - DENTAL	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	98016	BRIEF COMUNICAJ TECH-BSD SVC	MEDICINE - ACUPUNCTURE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	98015	SYNCH AUDIO-ONLY EST HIGH 40	MEDICINE - ACUPUNCTURE	NO	01/01/2025	01/01/2025			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	98014	SYNCH AUDIO-ONLY EST MOD 30	MEDICINE - ACUPUNCTURE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	98013	SYNCH AUDIO-ONLY EST LOW 20	MEDICINE - ACUPUNCTURE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	98012	SYNCH AUDIO-ONLY EST SF 10	MEDICINE - ACUPUNCTURE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	98011	SYNCH AUDIO-ONLY NEW HIGH 60	MEDICINE - ACUPUNCTURE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	98010	SYNCH AUDIO-ONLY NEW MOD 45	MEDICINE - ACUPUNCTURE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	98009	SYNCH AUDIO-ONLY NEW LOW 30	MEDICINE - ACUPUNCTURE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	98008	SYNCH AUDIO-ONLY NEW SF 15	MEDICINE - ACUPUNCTURE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	98007	SYNCH AUDIO-VIDEO EST HI 40	MEDICINE - ACUPUNCTURE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	98006	SYNCH AUDIO-VIDEO EST MOD 30	MEDICINE - ACUPUNCTURE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	98005	SYNCH AUDIO-VIDEO EST LOW 20	MEDICINE - ACUPUNCTURE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	98004	SYNCH AUDIO-VIDEO EST SF 10	MEDICINE - ACUPUNCTURE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	98003	SYNCH AUDIO-VIDEO NEW HI 60	MEDICINE - ACUPUNCTURE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	98002	SYNCH AUDIO-VIDEO NEW MOD 45	MEDICINE - ACUPUNCTURE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	98001	SYNCH AUDIO-VIDEO NEW LOW 30	MEDICINE - ACUPUNCTURE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	98000	SYNCH AUDIO-VIDEO NEW SF 15	MEDICINE - ACUPUNCTURE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	96041	GENETIC COUNSELING SVC EA 30	MEDICINE - GENETIC COUNSELING	NO	01/01/2025	01/01/2025			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	93898	VEN-ARTL SHUNT DET MBUBB NJX	MEDICINE - NON-INVASIVE VASCUL	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	93897	EMBOLI DETCJ WO IV MBUBB NJX	MEDICINE - NON-INVASIVE VASCUL	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	93896	VSRCTV STD TCD ICR ART COMPL	MEDICINE - NON-INVASIVE VASCUL	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	87626	HPV SEP HI-RSK TYP&POOL RSLT	PATH & LAB - IMMUNOLOGY	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	87564	MTB RIFAMPIN RST AMP PRB TQ	PATH & LAB - IMMUNOLOGY	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	86581	STRPTCS PNEUM ANTB SEROT IA	PATH & LAB - IMMUNOLOGY	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	81515	NFCT DS BV&VAGINITIS DNA ALG	PATH & LAB-MULTIANALYTE ASSAYS	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	76019	MR SAFETY IMPLT POS&/IMMOBLJ	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	76018	MR SAFETY IMPLANT ELEC PREPJ	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	76017	MR SFTY MED PHYSICS XM CSTMZ	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	76016	MR SAFETY DETER PHYS/QHP	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	76015	MR SFTY MPLT&/FB ASMT STF EA	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	76014	MR SFTY IMPLT&/FB ASMT STF 1	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	60661	ABLTJ 1/+THYR NDUL ADDL PRQ	SURGERY - ENDOCRINE SYSTEM	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	53866	CATHJ RMVL DEV ISCHMC RMDLG	SURGERY - URINARY SYSTEM	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	53865	CYSTO INSJ DEV ISCHMC RMDLG	SURGERY - URINARY SYSTEM	NO	01/01/2025	01/01/2025			

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MMAI-Medicare/Medicaid	49190	OPN EXC/DSTR NTRA-ABD GT 30 CM	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	49189	OPN EXC/DST NTRA-ABD 20.1-30	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	49188	OPN EXC/DST NTRA-ABD 10.1-20	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	49187	OPN EXC/DSTR NTRA-ABD 5.1-10	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	49186	OPN EXC/DSTR NTRA-ABD 5 CM/LT	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	25448	ARTHRP NTRCRPL/CRP/MTCRP SSP	SURGERY - MUSCULOSKELETAL SYST	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	15018	APP SKN CLL SSP F/N/G/HF EA	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	15017	APP SKN CLL SSP F/N/G/HF 1ST	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	15016	APP SKN CL SSP AGRF T/A/L EA	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	15015	APP SKN CL SSP AGRFT T/A/L 1	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	15014	PREPJ SKN CLL SSP AGRFT EA	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	15013	PREPJ SKN CLL SSP AGRFT 1ST	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	15012	HRV SKN CLL SSP AGRFT EA ADD	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	15011	HRV SKN CLL SSP AGRFT 1ST 25	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	0945T	INTRAOP ASSMT ABNL TUM TISS	CATEGORY III CODES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	0914T	PRQ TCAT THR RX NTRC BAL SEP	CATEGORY III CODES	NO	01/01/2025	01/01/2025			

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MMAI-Medicare/Medicaid	0912T	ELEC ALYS NSTIM SYS VGS SMPL	CATEGORY III CODES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	0911T	ELEC ALY NSTM SYS VGS NRV WO	CATEGORY III CODES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	0907T	COMS THER EA ADDLLT EQU 50 SQ CM	CATEGORY III CODES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	0905T	ECG ALG 12 LD RDCD I&R ONLY	CATEGORY III CODES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	0904T	ECG ALG 12 LD RDCD TRCG ONLY	CATEGORY III CODES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	0903T	ECG ALG 12 LEAD REDUCED I&R	CATEGORY III CODES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	0902T	QTC NTRVL AUGMNT ALG ALY ECG	CATEGORY III CODES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	0901T	PLMT BONE MARROW SMPLG PORT	CATEGORY III CODES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	Q0521	SUPPLY FEE HIV PREP FDA APPR	HCPCS - TEMP CODES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	Q0155	DRONABINOL SYNDROS 0.1 MG	HCPCS - TEMP CODES	NO	01/01/2025	01/01/2025	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	M1425	SURGICAL CARE MVP	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1424	PULMONOLOGY CARE MVP	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1423	OPT CARE UROLOGIC CND MVP	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1422	GASTROENTEROLOGY CARE MVP	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1421	DERMATOLOGICAL CARE MVP	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	M1420	COMPLETE OPHTHALMOLOGIC MVP	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1419	PT NOT UP TO DATE COV	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1418	MED RSN NOT UP TO DATE COV	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1417	PT UP TO DATE COV	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1416	PT REC HOSP	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1415	NO POS PDL1 BEF ICI THER	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1414	MED RSN NO PDL1 BEF 1ST THER	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1413	POS PDL1 BEF INIT ICI TX	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1412	MET NSCLC W/ EGFR ALK OTH AB	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1411	1ST LN ICI NO CHEMO	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1410	NO GMLN BRCA1/BRCA2 COUNS	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1409	RECD GMLN BRCA1/BRCA2 COUNS	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1408	GMLN BRCA BEF DX CA	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1407	PT DIED DUR PERF PD	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1406	PT LVE PRAC	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1405	PT W/ RECUR/PROG	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	M1404	PT THER CLIN TRIAL	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1403	BSLNE AND FU PROMIS DOC	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1402	INIT CHEMO W/DEF DUR EC GRP	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1401	STG I-III BR CA	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1400	PT DIED DUR PERF PD	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1399	PT LVE PRAC	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1398	BSLNE AND FU PROMIS DOC	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1397	PT W/ RECUR/PROG	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1396	PT THER CLIN TRIAL	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1395	INIT CHEMO W/DEF DUR EC GRP	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1394	STG I-III BR CA	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1393	PR NO DX REC MLNM	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1392	PT RSN NO EXM OR LST TO FU	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1391	ALL PT DX W/ REC MLNM	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1390	PT NO DOC EXM FOR REC	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1389	PT RSN NO EXM	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	M1388	PT DOC EXM REC MELMN	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1387	PT DIED DUR PERF PD	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1386	EXC SX MELMN OR MLNM IS	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1385	PT RSN NOT SEEN 2ND PAM	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1384	PT DIED DUR PERF PD	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1383	ACUTE PVD	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1382	ENC DUR PERF PD POS 11	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1381	PT SEC STRK WTHIN 5 DAYS	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1380	2 RX IN PERF PD ANY COM MEDS	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1379	10 YR FU NO REC RSN NOT GIV	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1378	MED RSN NO 10 YR FU COLSCOPE	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1377	FU COLSCOP 10 YR DOC W/ DISC	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1376	RA DX ENC 90 DAYS DUR PER PD	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1375	RA DX ENC 90 DAYS DUR PER PD	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1374	RA DX ENC 90 DAYS DUR PER PD	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1373	MST REC GSA GT EQU 8 AND LT EQU 9	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	M1372	MST REC GSA GT EQU 7 ANDLT 8	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	M1371	MST REC GSALT 7	HCPCS - MEDICAL SERVICES	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	J7514	MYCOPHENOL MYHIBBIN 100 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	J2290	INJ NAFCILLIN SODIUM 20 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	J0666	INJ BUPIVACAINE LIPOSOME	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	J0615	CALCIUM ACETATE ORAL 23 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	J0603	SEVELAMER HYDROCHLORIDE 20MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	J0602	SEVELAMER CARBONATE PDR 20MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	J0601	SEVELAMER CARBONATE 20 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	H0053	HT MENTAL HEALTH AND CARE	HCPCS - ALCOHOL/DRUG ABUSE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	H0052	MMIP MENTAL HEALTH AND CARE	HCPCS - ALCOHOL/DRUG ABUSE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	G0565	REM/INS GLU SNSR 365 DIF SIT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	G0562	COMPLEX SIMULATION W/PET-CT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	G0560	SAFETY PLAN INTERVEN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	G0559	UNRELAT PRAC FOLLOW UP VISIT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	G0558	ADV PRIM CARE MGMT LVL 3	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G0557	ADV PRIM CARE MGMT LVL 2	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	G0556	ADV PRIM CARE MGMT LVL 1	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	G0551	PHN/INTR SVS FR DX TREAT 30M	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	G0550	PHONE/INTER FOR DX/TREAT GT 5M	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	G0549	PHONE/INTER FOR TREATGT 31M	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	G0548	PHONE/INTER SVS 21-30 M	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	G0547	PHONE/INTERNET SVS 11-20 M	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	G0546	PHONE/INTERNET EHR ASSESS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	G0545	INHERENT VISIT TO INPT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	G0544	POST D/C PHONE FOLLOW UP	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	G0543	GROUP TRAIN W/O PATIENT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	G0542	NO PT PRSNT TRAIN ADD 15	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	G0541	NO PT PRSNT TRAIN INITIAL 30	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	G0540	TRAIN FOR CAREGIVER ADD 15	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	G0539	INITIAL CARE TRAINING 30 M	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	G0538	ASCVD RSK MNG CLIN STF PR MO	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G0537	RISK ASCVD TST ONCE PR 12 MO	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	G0536	PEER RECOVER SUPPORT SVS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	G0535	PT NAVIGAT SVS DIRECT/REF	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	G0534	COORDINATED CARE/OR REFERRAL	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	G0533	BUPRENORPHONE INJ WEEKLY	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	G0532	TAKE HOME SUPP NASAL SPRAY	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	C9610	CATH CORONARY DRUG-DELIVERY	HCPCS-C CODES-OUTPATIENT PP	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	C7565	RPR AA HRN LT 3 RDC W/ RMVL	HCPCS-C CODES-OUTPATIENT PP	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	C7564	VEIN MECH THROM W/INTRVAS US	HCPCS-C CODES-OUTPATIENT PP	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	C1739	TISSUE MARKER DETECTABLE	HCPCS-C CODES-OUTPATIENT PP	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	C1738	POWER ENDO US-GUID BX DEV	HCPCS-C CODES-OUTPATIENT PP	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	C1736	CATH RENAL DENERV ULTRASND	HCPCS-C CODES-OUTPATIENT PP	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	C1735	CATH RENAL DENERV RADIOFREQ	HCPCS-C CODES-OUTPATIENT PP	NO	01/01/2025	01/01/2025			
MMAI-Medicare/Medicaid	Q5146	INJ HERCESSI 10 MG	HCPCS - TEMP CODES	YES	01/01/2025	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	90695	H5N8 VACC DRV CLL CUL ADJ IM	MEDICINE - VACCINES, TOXOIDS	NON-COV	07/19/2024	12/31/2078			

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MMAI-Medicare/Medicaid	Q5145	INJ ABRILADA 1 MG	HCPCS - TEMP CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	Q5141	INJ ADALIMUMAB-AATY 1 MG	HCPCS - TEMP CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	G0554	ADD 20 M OF MONTHLY TX	HCPCS - PROC/PROF SERVICES (TE	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	E1828	ADJUST TOE EXTENSION DEVICE	HCPCS - DME	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	E1823	ADJUST ANKLE FLEXION DEVICE	HCPCS - DME	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	E1813	ADJUST KNEE EXTENSION DEVICE	HCPCS - DME	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0947T	MRGFUS STRTCTC BL-BR DISRPJ	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0943T	CYSTO FLX RMVL URTL SCAFFOLD	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0939T	XTRNL ECG RECGT 15DLT 30D SCAN	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0935T	CYSTO W/RNL PEL SYMP DNRVTJ	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0931T	EPHYS EVAL CCM-D LD SEPARATE	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0927T	INTERROG DEV EVAL CCM-D IP	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0923T	RMVL&RPLCMT PERM CCM-D PG	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0919T	RMVL PERM CCM-D SYS PG ONLY	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0529U	HEM VTE SNP F2&F5 GEN LEIDEN	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0526U	NEFRO RNL TRNSPL QUAN CXCL10	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2025	12/31/2078			

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MMAI-Medicare/Medicaid	90593	CHIKUNGUNYA VACC RECOMB IM	MEDICINE - VACCINES, TOXOIDS	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0915T	INSJ PERM CCM-D SYS PG&ELTRD	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	C9807	NERVE STIM NON-OPIOID DEV	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	C8003	IMP EXTAR KNEE SHCK ABSRB	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	84393	TAU PHOSPHORYLATED EA	PATH & LAB -CHEMISTRY	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	83884	ASSAY NEURFLMNT LIGHT CHAIN	PATH & LAB -CHEMISTRY	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	82233	BETA-AMYLOID 1-40 (ABETA 40)	PATH & LAB -CHEMISTRY	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	Q4350	PALISADE DM MATRIX PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	Q4346	SHELTER DM MATRIX PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	38225	CAR-T HRV BLD-DRV T LYMPHCYT	SURGERY - HEMIC AND LYMPHATIC	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	Q9998	USTEKINUMAB-AEKN INJ	HCPCS - TEMP CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	J9026	INJ TARLATAMAB-DLLE 1 MG	HCPCS - CHEMO DRUGS	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	J0607	LANTHANUM CARBONATE ORAL 5MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	81558	TRNSPL REJ KDN MRNA QPCR 139	PATH & LAB-MULTIANALYTE ASSAYS	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	E1807	ADJUST WRIST EXTENSION DEV	HCPCS - DME	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	E1803	ADJUST ELBOW EXTENSION DEV	HCPCS - DME	YES	01/01/2025	12/31/2078			

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MMAI-Medicare/Medicaid	J3392	INJ EXAGAMGLOGENE AUTOTEM	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0525U	ONC SPHRD CELL CUL 11-RX PNL	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	64468	THRC FASCIAL PLN BLK BI NJX	SURGERY - ENDOCRINE SYSTEM	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	D9913	ADMINISTRATION OF NEUROMODULATORS	HCPCS - DENTAL	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	J1414	INJ BEQVEZ PER TX DOSE	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	J0901	VADADUSTAT ORAL 1MG FOR ESRD	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	Q5142	INJ ADALIMUMAB-RYVK 1 MG	HCPCS - TEMP CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	G0563	SBRT W/POSITRON EMISSION DEL	HCPCS - PROC/PROF SERVICES (TE	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	G0555	REPLACMENT PT ELECTRONIC SYS	HCPCS - PROC/PROF SERVICES (TE	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	E1829	ADJUST TOE FLEXION DEVICE	HCPCS - DME	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	E1814	ADJUST KNEE FLEXION DEVICE	HCPCS - DME	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0944T	3D CNTR SIMULA TRGT LVR LES	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0940T	XTRNL ECG RECGT 15DLT 30D R&I	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0936T	PHOTOBIOMODULATION THER RTA	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0932T	N-INVS DET HRT FAIL AUG ECHO	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0928T	REM INTERROG DEV CCM-D PHYS	CATEGORY III CODES	YES	01/01/2025	12/31/2078			

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MMAI-Medicare/Medicaid	0924T	RPOS PRV CCM-D TRNSVNS ELTRD	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0920T	RMVL PERM CCM-D SYS 1 PAC LD	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0528U	LRT IAD 18BCT/8VIR&7ARG RNA	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0916T	INSJ PERM CCM-D SYS PG ONLY	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0908T	OPN IMP INT NSTM SYS VGS NRV	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	C9808	CRYO PROBE NON-OPIOID DEV	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	C7562	R&L HRT ANGIO W/FFR & 3D MAP	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	84394	TOTAL TAU	PATH & LAB -CHEMISTRY	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	92137	CPTRZ OPH IMG PST SG RTA OCT	MEDICINE - OPHTHALMOLOGY	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	82234	BETA-AMYLOID 1-42 (ABETA 42)	PATH & LAB -CHEMISTRY	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	Q4351	ENCLOSE TL MATRIX PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	Q4347	RAMPART DL MATRIX PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	38226	CAR-T PREP T LYMPHCYT F/TRNS	SURGERY - HEMIC AND LYMPHATIC	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	J0870	INJECTION IMETELSTAT 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	81195	CYTOG GENOM-WID ALYS HEM MAL	PATH & LAB - CYTOGENETIC STUDI	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	J0608	LANTHANUM CARBONATE PWDR 5MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2025	12/31/2078			

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MMAI-Medicare/Medicaid	E1808	ADJUST WRIST FLEXION DEVICE	HCPCS - DME	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	E1804	ADJUST ELBOW FLEXION DEV	HCPCS - DME	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	J2802	INJ ROMIPLOSTIM 1 MICROGRAM	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	D7252	PARTIAL EXTN FOR IMM IMPLNT PLCMNT	HCPCS - DENTAL	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0524U	OB PE SFLT-1/PLGF IA SRM/PLS	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0522U	CA VI PSP&SP1 ANTB CL SEMIQL	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	64469	THRC FASCIAL PLN BLK BI NFS	SURGERY - ENDOCRINE SYSTEM	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	D9959	UNSPEC SLEEP APNEA SVCS PROC BY RPT	HCPCS - DENTAL	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	51721	INS TRURL ABLT TRNSDC THR US	SURGERY - URINARY SYSTEM	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	J9292	INJ PEMETREXED AVYXA 10MG	HCPCS - CHEMO DRUGS	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	66683	IMPLANTATION IRIS PROSTHESIS	SURGERY - EYE AND OCULAR ADNEX	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	Q5143	INJ ADALIMUMAB-ADBM 1 MG	HCPCS - TEMP CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	G0564	365 D IMPLANT GLUCOSE SENSOR	HCPCS - PROC/PROF SERVICES (TE	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	G0552	SUPPLY OF DIGITAL DEVICE	HCPCS - PROC/PROF SERVICES (TE	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	E1826	ADJUST FINGER EXTENSION DEV	HCPCS - DME	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0941T	CYSTO FLX INS&XPNS URTL SCAF	CATEGORY III CODES	YES	01/01/2025	12/31/2078			

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MMAI-Medicare/Medicaid	0937T	XTRNL ECG RECGT 15DLT 30D	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0933T	TCAT IMPL WRLS L ATR PRS SNR	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0929T	REM INTERROG DEV CCM-D TECH	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0925T	RLCJ SKIN POCKET CCM-D PG	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0921T	RMVL PERM CCM-D SYS 1 DFB LD	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0530U	ONC PAN-SOL TUM CTDNA 77 GEN	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0527U	HSV 1&2 VZV AMP PRB TQ PTHGN	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	J2472	INJ PANTOPRAZOLE SODIUM CHL	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0917T	INSJ PERM CCM-D SYS 1 LEAD	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0913T	PRQ TCAT THER RX NTRAC BALO1	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0909T	RPLCMT INT NSTIM SYS VGS NRV	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	C9809	CRYO NEEDLE NON-OPIOID DEV	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	C9804	PUMP ELASTOMC NON-OPIOID DEV	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	C8001	3D ANAT SEG IMAGING PREOP	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	C7563	TRLUML BALLO ANGIOP ALL ART	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	C1737	SI&PELVIS FUSN&FIXN DEV	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2025	12/31/2078			

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MMAI-Medicare/Medicaid	Q4352	OVERLAY SL MATRIX PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	Q4348	SENTRY SL MATRIX PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	38227	CAR-T RECEIPT&PREPJ ADMN	SURGERY - HEMIC AND LYMPHATIC	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	J7601	ENSIFENTRINE INH 3 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	Q9996	USTEKINUMAB-TTWE SUB CU INJ	HCPCS - TEMP CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	Q5139	INJ ECULIZUMAB-AEEB 10 MG	HCPCS - TEMP CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	J1307	INJ CROVALIMAB-AKKZ 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	J9028	INJ NOGAPENDEKIN PMLN 1MCG	HCPCS - CHEMO DRUGS	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	J0609	FERRIC CITRATE ORL 3 MG IRON	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	J0605	SUCROFERRIC OXYHYDROXIDE 5MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	D7259	NERVE DISSECTION	HCPCS - DENTAL	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	64473	LWR XTR FSCL PLN BLK UNI NJX	SURGERY - ENDOCRINE SYSTEM	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	64466	THRC FASCIAL PLN BLK UNI NJX	SURGERY - ENDOCRINE SYSTEM	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	55881	ABLT TRURL PRST8 TIS THRM US	SURGERY - URINARY SYSTEM	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	D8091	COMPREHENSIVE ORTHODONTIC TX OGS	HCPCS - DENTAL	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	95860	NEEDLE EMG 1 EXTREMITY	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	61321	CRNEC/CRNOT DRG ICR ABS ITTL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	56800	PLASTIC REPAIR INTROITUS	SURGERY - FEMALE GENITAL SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	54230	NJX CORPORA CAVERNOSOGRAPY	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52007	CYSTO URTRL CATHJ BRUSH BX	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52005	CYSTO W/URTRL CATHJ	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0428U	ONC BRST CTDNA ALYS 56/GT GEN	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	58957	RESECT RECURRENT GYN MAL	SURGERY - FEMALE GENITAL SYSTE	EXPIRED	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	Q5144	INJ IDACIO 1 MG	HCPCS - TEMP CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	Q5140	INJ ADALIMUMAB-FKJP 1 MG	HCPCS - TEMP CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	G0561	TEMP TUBE DELIVERY UNIL	HCPCS - PROC/PROF SERVICES (TE	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	G0553	MONTHLY TX FOR DMHT 20MINS	HCPCS - PROC/PROF SERVICES (TE	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	E1827	ADJUST FINGER FLEXION DEVICE	HCPCS - DME	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	E1822	ADJUST ANKLE EXTENSION DEV	HCPCS - DME	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0946T	ORTHO IMPL MVMT ALYS PAIR CT	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0942T	CYSTO FLX RMV&RPLC URTL SCAF	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0938T	XTRNL ECG RECGT 15DLT 30D REC	CATEGORY III CODES	YES	01/01/2025	12/31/2078			

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MMAI-Medicare/Medicaid	0934T	REM MNTR WRLS L ATR PRS SNR	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0930T	EPHYS EVAL CCM-D LD 1ST IMPL	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0926T	PRGRMG DEV EVAL CCM-D IP	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0922T	RMVL PERM CCM-D SYS DUAL LD	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0918T	INSJ PERM CCM-D SYS DUAL LD	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0910T	RMVL INT NSTIM SYS VAGUS NRV	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0906T	COMS THER 1ST APPLLT EQU 50 SQ CM	CATEGORY III CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	C9806	PUMP PERIST NON-OPIOID DEV	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	C9173	INJ NYPOZI 1 MCG	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	C8002	PREP SKIN CELL SUSP AUTOMTD	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	Q4353	XCEED TL MATRIX PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	Q4349	MANTLE DL MATRIX PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	38228	CAR-T ADMN AUTOLOGOUS	SURGERY - HEMIC AND LYMPHATIC	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	J0139	INJ ADALIMUMAB 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	Q9997	USTEKINUMAB-TTWE IV INJ 1 MG	HCPCS - TEMP CODES	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	87594	PNEUMCYSTS JIROVECII AMP PRB	PATH & LAB - IMMUNOLOGY	YES	01/01/2025	12/31/2078			

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MMAI-Medicare/Medicaid	A9615	INJ PEGULICIANINE 1 MG	HCPCS - ADMIN MISC & INVEST	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	87513	H PYLRI CLRTHMCN RST AMP PRB	PATH & LAB - IMMUNOLOGY	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	J1552	INJ ALYGLO 500 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	J9076	INJ CYCLOPHOS BAXTER 5MG	HCPCS - CHEMO DRUGS	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0523U	ONC SOLTUM DNA NGS SNV 22GEN	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	0521U	RF IGA&IGM CCP ANTB SR-A IA	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	64474	LWR XTR FSCL PLN BLK UNI NFS	SURGERY - ENDOCRINE SYSTEM	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	64467	THRC FASCIAL PLN BLK UNI NFS	SURGERY - ENDOCRINE SYSTEM	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	61715	MRGFUS STRTCTC ABLT TRGT ICR	SURGERY - ENDOCRINE SYSTEM	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	60660	ABLTJ 1/+THYR NDUL 1LOBE PRQ	SURGERY - ENDOCRINE SYSTEM	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	55882	ABLT TRURL PRST8 TIS TRNSDCR	SURGERY - URINARY SYSTEM	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	D2956	REMOVAL OF IND RESTOR ON NATL TOOTH	HCPCS - DENTAL	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	D8671	PERIODIC ORTHO TX VISIT ASSOC OGS	HCPCS - DENTAL	YES	01/01/2025	12/31/2078			
MMAI-Medicare/Medicaid	95870	NDL EMG LMTD STD MUSC 1 XTR	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95028	IQ TSTS ALLERGY DELAYED RXN	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61210	BURR HOLE IMPLT VENTR CATH	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	33777	RPR TGA BFL RPR SBPULM OBSTR	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95872	NDL EMG SINGLE FIBER ELTRD	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95865	NEEDLE EMG LARYNX	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61253	BURR HOLE TREPH ITTL UNI/BI	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61105	TDH SDRL/VENTR PNXR	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33803	DIV ABERRANT VSL W/REANAST	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	56440	MRSPLZATN BRTHLNS GLND CST	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55605	VESICULOTOMY COMPLICATED	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57022	I&D VAGINAL HEMATOMA OB/PP	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87624	HPV HI-RISK TYP POOLED RSLT	PATH & LAB - MICROBIOLOGY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	31420	EPIGLOTTIDECTOMY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0106	COLOREC CANCR SCR; SIGMOIDSCOPY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57110	VAGNC COMPL RMVL VAG WALL	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57105	BIOPSY VAGINAL MUCOSA XTNSV	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	56820	COLPOSCOPY VULVA	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54220	IRRG CRPRA CAVRNOSA PRIAPISM	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G9975	DOC MED RSN NOT PERF DIL MACULAR EX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	C9769	CS INSERTION TEMP PROS IMPL/STENT	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	92133	CPTRZD OPH DX IMG PST SGM ON	MEDICINE - OPHTHALMOLOGY	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	0540T	CAR-T CLL ADMN AUTOLOGOUS	CATEGORY III CODES	EXPIRED	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	G2069	MED ASSIST TX INJECT	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	20103	EXPL PENTRG WOUND EXTREMITY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15221	FTH/GFT FR S/A/L EACH ADDL	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9459	CURRENTLY A TOBACCO NON-USER	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	65760	KERATOMILEUSIS	SURGERY - EYE AND OCULAR ADNEX	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	27712	OSTEOT MLT RELIGNMT IMED ROD	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	0615T	AUTO ALYS BINOCULAR EYE MVMT	CATEGORY III CODES	YES	06/30/2020	12/31/2078			
MMAI-Medicare/Medicaid	M0004	QUAL CARE NEUROLOGIC CND MVP	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	G2091	PT 66+ FRAILTY AND ADV ILL	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	97814	ACUP 1/GT W/ESTIM EA ADDL 15	MEDICINE - ACUPUNCTURE	NO	06/24/2020	06/24/2020	Regulatory Compliance		
MMAI-Medicare/Medicaid	68130	EXC LES CONJUNCTIVA ADJ SCL	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21462	OPTX MNDBLR FX W/NTRDNTL	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	21139	RDCTJ FOREHEAD CNTRG&SETBACK	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21121	GENIOP SLDG OSTEOT 1	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	68135	DESTRUCTION LES CONJUNCTIVA	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41872	GINGIVOPLASTY EACH QUADRANT	SURGERY - DIGESTIVE SYSTEM	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	47010	HEPATOT OPN DRG ABSC/CST 1/2	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35271	RPR BLVS GR OT/TH VN NTRTH W	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93644	EP EVAL SUBQ IMPL DFB	MEDICINE - CARDIOVASCULAR	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	92508	TX SP LANG VOICE COMM GROUP	MEDICINE - SPECIAL OTORHINOLAR	NON-COV	12/01/2013	12/31/2023			
MMAI-Medicare/Medicaid	30150	RHINECTOMY PARTIAL	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8842	AHI RDI REI DOC WIN 2MO	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68110	EXC LES CONJUNCTIVA LT 1 CM	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21433	OPTX CRANFCL SEP COMP MLT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77620	HYPERTHERMIA GEN INTRCV PRB	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0616T	INSERTION OF IRIS PROSTHESIS	CATEGORY III CODES	EXPIRED	06/30/2020	12/31/2078			
MMAI-Medicare/Medicaid	25622	CLTX CARPL SCPHD FX W/O MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15825	RHYTDCT NCK PLTYSML TGHTG	SURGERY - INTEGUMENTARY SYSTEM	NON-COV	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	C9290	INJECTION BUPIVACAINE LIPOSOME 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8484	FLU IMMUN NOT ADM REASON NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G2099	PT 66+ FRAILTY AND ADV ILL	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	15931	EXC SACRAL PR ULC PRIM SUTR	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	15838	EXC EXCSV SUBMENTAL FAT PAD	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15953	EXC TRCHNTR PR ULC FLP OSTC	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	15819	PLASTIC SURGERY NECK	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G2012	BRIEF COM TBS; 5-10 MIN MED DISCUSS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	15951	EXC TRCHNTR PR ULC OSTC	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	86490	COCCIDIOIDOMYCOSIS SKIN TEST	PATH & LAB - IMMUNOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65770	KERATOPROSTHESIS	SURGERY - EYE AND OCULAR ADNEX	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	64821	SYMPATHECTOMY RADIAL ARTERY	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	64809	SYMPATHECTOMY THORACOLUMBAR	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	33681	CLOSURE 1 VSD W/WO PATCH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33130	RESCJ EXTERNAL CARDIAC TUMOR	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31755	TRACHPLSTY TRCHPHRYNGL FSTLJ	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	M1176	NO 2 HZV ON/AFT AGE 50	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	19316	MASTOPEXY	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C9170	INJ TARLATAMAB-DLLE 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	10/01/2024	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	M1272	PTS KID TRANSPLT WTLST	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	98961	EDU&TRN PT SLF-MGMT NQHP 2-4	MEDICINE - SELF MANAGEMENT TRA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25652	OPTX ULNAR STYLOID FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9403	CLN DOC RSN PT NO 30 D F/U INPT D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	59856	INDUCED AB 1+VAG SUPP D&C	SURGERY - MATERNITY CARE AND D	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0456U	AI RA NGS 19 GENES ANTI-CCP	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	G9990	PT NO PCV/PSV O/A 60 BD&B4 E/O MSR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	D2941	INTRIM TX RESTORATION-PRIM DENTITN	HCPCS - DENTAL	EXPIRED	12/08/2015	12/08/2015			
MMAI-Medicare/Medicaid	M1264	PT AGE 75/GT ON INIT DIALYSIS DATE	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	33802	DIVISION ABERRANT VESSEL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61315	CRNEC/CRNOT ITTL NTRACEREBLR	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61460	CRNEC SOPL SCTJ 1+CRNL NRV	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	21079	IMPRES&PREP INTRM OBT PROSTH	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	36410	VNPNXR 3YR/GT PHY/QHP DX/THER	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35221	RPR BLD VSL DIR INTRA-ABDL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21431	CLTX CRANIOFACIAL SEPARATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93798	PHYS/QHP OP CAR RHAB W/ECG	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/31/2023			
MMAI-Medicare/Medicaid	93650	ICAR CATH ABLTJ AV NODE FUNC	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61320	CRNEC/CRNOT DRG ICR ABS STTL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	58974	EMBRYO TRANSFER INTRAUTERINE	SURGERY - FEMALE GENITAL SYSTE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	61343	CRNEC SOPL CRV LAM DCMPRN	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49203	EXC ABD TUM 5 CM OR LESS	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37609	LIGATION/BX TEMPORAL ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35207	RPR BLD VSL DIR HAND FINGER	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33852	RPR HYPOPL A-ARCH WO BYP	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33840	EXC COA W/DIRECT ANASTOMOSIS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33775	RPR TGA ATR BFL RMVL PLM BND	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57107	VAGNC COMPL RMVL PARAVAG TIS	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	0553T	PERQ TCAT ILIAC ANAST IMPLT	CATEGORY III CODES	EXPIRED	07/01/2019	07/01/2019			
MMAI-Medicare/Medicaid	37605	LIGATION INT/COM CAROTID ART	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9660	DOC MED RSN COLO PT GT EQU 86Y	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	15157	TIS CLT AGRFT F/S/N/H/F/G EA	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15121	SPLT AGRFT F/S/N/H/F/G/M EA	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G2076	INTAKE ACT W/MED EXAM	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	92576	SYNTHETIC SENTENCE ID TEST	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92507	TX SP LANG VOICE COMM INDIV	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/31/2023			
MMAI-Medicare/Medicaid	61517	IMPLT BRN INTRCV CHEMOTX AGT	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35211	RPR BLVSL DIR NTRATHRC W/BYP	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33771	RPR TGA W/SURG ENLGMNT VSD	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94690	O2 UPTK EXP GAS ALYS REST	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21480	CLTX TMPRMAND DISLC 1ST/SBSQ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61323	CRNEC/CRNOT DCMPRV W/LOBEC	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35246	RPR BLVSL VN GRF NTRTHRC W/O	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33778	RPR TGA AORTIC PULM ART RCNS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	61150	BUR HOL/TRPH DRG BRN ABS/CST	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93613	INTRACARDIAC EPHYS 3D MAPG	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93320	DOPPLER ECHO COMPLETE	MEDICINE - CARDIOVASCULAR	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	54240	PENILE PLETHYSMOGRAPHY	SURGERY - MALE GENITAL SYSTEM	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27889	ANKLE DISARTICULATION	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27715	OSTPL TIBFIB LNGTH/SHRT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27707	OSTEOTOMY FIBULA	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	77290	THER RAD SIMULAJ FIELD CPLX	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77086	VRT FRACTURE ASSMT VIA DXA	RADIOLOGY - RADIOLOGIC GUIDANC	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	25651	PERQ SKEL FIX ULNAR STYLD FX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25500	CLTX RDL SHFT FX W/O MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26550	POLLICIZATION DIGIT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	59857	INDUCED AB 1+VAG SUPP HYST	SURGERY - MATERNITY CARE AND D	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	57106	VAGNC PRTL RMVL VAG WALL	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57020	COLPOCENTESIS SEP PX	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	56633	VULVECTOMY RADICAL COMPLETE	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	J9072	INJ CYCLOPHOS AVYXA 5MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9033	INJ, BENDAMUSTINE HCL, 1MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	G9322	NO CNT CT NUC MED DOC 12MO	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	33697	COMPL RPR TOF W/PULM ATRESIA	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78216	LVR&SPLEEN IMG W/VASC FLOW	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74190	PERITONEOGRAM RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50010	RENAL EXPLORATION	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43810	GASTRODUODENOSTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25660	CLTX RDCRPL/NTRCRPL DISLC 1+	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77085	DXA BONE DENSITY AXL VRT FX	RADIOLOGY - RADIOLOGIC GUIDANC	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	25675	CLTX DSTL RAD/ULN DISLC MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25671	PERQ SKEL FIX RAD/ULN DISLC	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25600	CLTX DST RDL FX/EPHYS SEP WO	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15946	EXC ISCH PR ULC PREP MUS FLP	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	G8934	LVEF LT EQU 40PCT OR DEP LV SYS FCN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15935	EXC SAC PR ULC SKN FLP OSTC	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	15933	EXC SAC PR ULC PRIM STR OSTC	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	15830	EXC EXCESSIVE SKIN ABDOMEN	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15111	EPIDRM AGRFT T/A/L EA ADDL	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15100	SPLT AGRFT T/A/L 1ST 100SQCM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69550	EXC AURL GLOMUS TUM TRNSCANL	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21123	GENIOP SLDG AUGMENTATION	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	98962	EDU&TRN PT SLF-MGMT NQHP 5-8	MEDICINE - SELF MANAGEMENT TRA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20101	EXPL PENTRG WOUND CHEST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	97811	ACUP 1/GT W/O ESTIM EA ADD 15	MEDICINE - ACUPUNCTURE	NO	06/24/2020	06/24/2020	Regulatory Compliance		
MMAI-Medicare/Medicaid	96900	ACTINOTHERAPY UV LIGHT	MEDICINE - SPECIAL DERMATOLOGI	YES	11/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	35189	RPR ACQ AV FISTULA THRX&ABD	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33768	ANAST CAVOPULM SEC SUP V/C	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43045	ESOPHAGOTOMY THRC RMVL FB	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33764	SHUNT CENTRAL W/PROSTC GRAFT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	0568T	INTRO MIX SALINE&AIR F/SSG	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0567T	PERM FLP TUBE OCCLS W/IMPLT	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	95027	IQ TSTS SEQL&INCRL AIRBORNE	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	56821	COLPOSCOPY VULVA W/BIOPSY	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J9058	INJ BENDAMUSTINE HCL APOTEX 1 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	07/01/2023	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	25825	ARTHRD WRIST WITH AUTOGRAFT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	57000	COLPOTOMY W/EXPLORATION	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87164	DARK FIELD EXAM SPEC COLLJ	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9404	PT DID NOT RCV F/U WI 30DAY AFT D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	25676	OPTX RAD/ULN DISLC AQT/CHRNC	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25609	OPTX DST RD XART FX/EP SEP3+	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25492	PROPHYLACTIC TX RADIUS&ULNA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J9059	INJ BENDAMUSTINE HCL BAXTER 1 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	07/01/2023	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	21453	CLTX MNDBLR FX NTRDNTL FIXJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	21083	IMPRES&PREP PALTL LFT PROSTH	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	77600	HYPERTHERMIA EXT GEN SUPFC	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	G8923	LVEF LT EQU 40PCT OR LVSD	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8577	REOP REQ BLD GRFT OTH	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	98975	REM THER MNTR 1ST SET-UP&EDU	MEDICINE-NON-FACE-TO-FACE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	93621	COMP EP EVL L PAC&REC C SINS	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93616	ESOPHAGEAL RECORDING W/PACG	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77401	RADIATION TX DELIVERY SUPFC	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	37722	LIG DIV&STRPG LONG SAPH VEIN	SURGERY - CARDIOVASCULAR SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	37607	LIG/BANDING ANGIOACS AV FSTL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21127	AUGMENTATION MNDBLR B1 GRF	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21080	IMPRES&PREP DEF OBT PROSTH	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	17360	CHEMICAL EXFOLIATION ACNE	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15952	EXC TRCHNTR PR ULC FLP CLSR	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	15836	EXC EXCESSIVE SKIN ARM	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15834	EXC EXCESSIVE SKIN HIP	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15823	BLEPHARP UPR EYELID XCSV SKN	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15821	BLEPHARP LWR EYELID FAT PAD	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	77417	THER RADIOLOGY PORT IMAGE (S)	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	25628	OPTX CARPL SCPHD FX INT FIXJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1259	PT STAT DOC LT EQU 1 YR DIALYSIS	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	99442	PHONE E/M PHYS/QHP 11-20 MIN	E & M - SPECIAL E/M SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	98971	NQHP OL DIG ASSMT&MGMT 11-20	MEDICINE-NON-FACE-TO-FACE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	69020	DRG XTRNL AUD CANAL ABSCESS	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15835	EXC EXCESSIVE SKIN BUTTOCK	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	92134	CPTRZ OPH DX IMG PST SGM RTA	MEDICINE - OPHTHALMOLOGY	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	69554	EXC AURL GLOMUS TUM EXTENDED	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D0160	DETAIL & EXT ORAL EVAL PROB FOC BR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	35180	RPR CGEN AV FISTULA HEAD&NCK	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	93224	XTRNL ECG REC UP TO 48 HRS	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0564T	ONC CHEMO RX CYTOTOX CSC 14	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	21125	AUGMENTATION MNDBLR PROSTC	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15833	EXC EXCESSIVE SKIN LEG	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	77263	THER RADIOLOGY TX PLNG CPLX	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15828	RHYTIDECTOMY CHEEK CHN & NCK	SURGERY - INTEGUMENTARY SYSTEM	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15155	TIS CLTR AGRFT F/S/N/H/F/G 1	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69604	REVJ MSTDC RSLTG TYMPANPLSTY	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15220	FTH/GFT FR S/A/L 20 SQ CM/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8843	DOC REAS NO AHI RDI REI	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69552	EXC AURL GLOMUS TUM TRNSMSTD	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15922	EXC COCCYGL PR ULC FLAP CLSR	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	69601	REVJ MSTDC RSLTG COMPL MSTDC	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15820	BLEPHAROPLASTY LOWER EYELID	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15792	CHEM PEEL NONFACIAL EPIDRM	SURGERY - INTEGUMENTARY SYSTEM	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	M1150	LVEF LT EQU 40PCT OR MOD/SEV L VSF	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	61512	CRNEC TREPH EXC MNGIOMA STTL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90630	FLU VACC IIV4 NO PRESERV ID	MEDICINE - VACCINES, TOXOIDS	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	33781	RPR TGA RCNSTJ RPR SBPL OBST	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95869	NDL EMG THRC PARASPINAL MUSC	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92593	HEARING AID CHECK BINAURAL	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25680	CLTX TRNS-SCPHPRLNR FX MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25575	OPTX RDL&ULN SHFT FX RDS&ULN	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25491	PROPHYLACTIC TX ULNA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25335	CENTRALIZATION WRIST ON ULNA	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23125	CLAVICULECTOMY TOTAL	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	93325	DOPPLER ECHO COLOR FLOW MAPG	MEDICINE - CARDIOVASCULAR	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	68420	I&D LACRIMAL SAC	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1345	PT BSLN PAM, 2ND SCR 4-12 MO	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	59855	INDUCED ABORTION 1+VAG SUPP	SURGERY - MATERNITY CARE AND D	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	31611	CONSTJ TRACHESOPHGL FSTL	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78201	LIVER IMAGING STATIC ONLY	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	50280	EXC/UNROOFING CYST KIDNEY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77402	RADIATION TX DELIVERY SIMPLE	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	77285	THER RAD SIMULAJ FIELD INTRM	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77071	MNL APPL STRS JT RADIOGRAPHY	RADIOLOGY-DIAGNOSTIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54200	INJECTION PX PEYRONIE DS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52000	CYSTOURETHROSCOPY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9407	PT NOT RECV F/U WI 7 DAYS AFTER D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	57023	I&D VAGINAL HEMATOMA NON-OB	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9169	INJ NOGAPENDEKIN PMLN 1 MCG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	10/01/2024	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	50365	RNL ALTRNSPLJ W/RCP NFRCT	SURGERY - URINARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	61500	CRNEC EXC TUM/BONE LES SKULL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9893	DILATED MACULAR EX NOT PERF RSN NOS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	95868	NDL EMG CRANIAL NRV MUSC BI	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78122	WHL BLD VOLUME DETERMINATION	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	50380	RNL AUTOTRNSPLJ RIMPLTJ KDN	SURGERY - URINARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	M1349	NO PAM INC 3 PTS 4-12 MO	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	33737	REVISION OF HEART CHAMBER	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47001	NDL BIOPSY LVR TM OTH MAJ PX	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45108	ANORECTAL MYOMECTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25635	CLTX CARPL FX W/MNPJ EA B1	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E1825	ADJUST FINGER EXT & FLEX DEV	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	88388	TISS EX MOLECUL STUDY ADD-ON	PATH & LAB - SURGICAL PATHOLOG	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28705	ARTHRODESIS PANTALAR	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	69603	REVJ MSTDC RSLTG RAD MSTDC	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	17380	ELECTROLYSIS EPILATION EA 30	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G8483	FLU IMMUN NOT ADMIN RSN DOC CLIN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15156	TIS CLT AGRFT F/S/N/H/F/GAD	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35281	RPR BLVSL GR OT/TH VN NTR-AB	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25805	ARTHRD WRIST W/SLIDING GRAFT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25545	OPTX ULNAR SHFT FX INT FIXJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	25447	ARTHRP NTRCRP/CRP/MTCR NTRPS	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	92592	HEARING AID CHECK MONAURAL	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92590	HEARING AID XM&SLCTN MONAURL	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	98967	PH1 ASSMT&MGMT NQHP 11-20	MEDICINE - SPECIAL SERVICES, P	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81433	HRDTRY BRST CA-RLATD DSORDRS	PATH & LAB - MICROBIOLOGY	EXPIRED	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	67715	CANTHOTOMY	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21501	I&D DP ABSC/HMTMA SFT TS NCK	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15956	EXC TRCHNTR PR ULC PREP FLAP	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	25810	ARTHRD WRST ILIAC/OTH AGRFT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25565	CLTX RDL&ULN SHFT FX W/MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93641	EP EVL 1/2CHMB PAC CVDFB TST	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G2077	PERIODIC ASSESSMENT	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	98966	PH1 ASSMT&MGMT NQHP 5-10	MEDICINE - SPECIAL SERVICES, P	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37660	LIGATION COMMON ILIAC VEIN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36835	INSERTION THOMAS SHUNT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21490	OPTX TMPRMAND DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	15958	EXC TRCHNTR PR ULC PREP OSTC	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	61450	CRNEC STPL SCTJ CMPRN/DCMPRN	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81436	HEREDITARY COLON CA DSORDRS	PATH & LAB - MICROBIOLOGY	EXPIRED	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	91122	ANORECTAL MANOMETRY	MEDICINE - GASTROENTEROLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D0801	3D INTRAORAL SURFACE SCAN-DIRECT	HCPCS - DENTAL-Radiographs	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	95017	ALL TSTG PERQ&IQ W/VENOMS	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	98960	EDU&TRN PT SELF-MGMT NQHP 1	MEDICINE - SELF MANAGEMENT TRA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33780	RPR TGA RCNSTJ CLSR VSD	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33767	SHUNT SUPR V/C P-ART BTH LNG	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65850	TRABECULOTOMY AB EXTERNO	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68100	BIOPSY CONJUNCTIVA	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37718	LIG DIV&STRPG SHORT SAPH VN	SURGERY - CARDIOVASCULAR SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	37616	LIGATION MAJOR ARTERY CHEST	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0657T	ANT LMBR VRT BDY TETH 8+ SEG	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	67810	INCAL BX EYELID SKN LID MRGN	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81437	HERED NEUROEND TUM-RLT DO 5+	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			

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MMAI-Medicare/Medicaid	56740	EXC BARTHOLINS GLAND/CYST	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	56441	LYSIS OF LABIAL ADHESIONS	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54438	REPLANTATION OF PENIS	SURGERY - URINARY SYSTEM	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	E1810	ADJUST KNEE EXT & FLEX DEV	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	33690	BANDING PULMONARY ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31750	TRACHEOPLASTY CERVICAL	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C7558	CATH PL CA CAG IP INJ FOR CA R&L HC	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	74174	CTA ABD&PLVS W/CONTRAST	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	74170	CT ABD WO CNTRST FLWD CNTRST	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	23120	CLAVICULECTOMY PARTIAL	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	0380U	RX METB ADVRS TRGT SQ ALY 20	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	25670	OPTX RDCRPL/NTRCRPL DISLC 1+	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93893	TCD STD ICR ART VEN-ART SHNT	MEDICINE - NON-INVASIVE VASCUL	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	93770	DETERMINATION VENOUS PRESS	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93724	ELEC ALYS ANTITCHYCAR PM SYS	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65820	GONIOTOMY	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	81438	HEREDTRY NURONDCRN TUM DSRDR	PATH & LAB - MICROBIOLOGY	EXPIRED	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	G0122	COLOREC CANCER SCREENING; BA ENEMA	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E1830	ADJUST TOE EXT & FLEX DEVICE	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	Q5132	INJ ADALIMUMAB-AFZB BIOSIMILR 10 MG	HCPCS - TEMP CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0135	INJECTION ADALIMUMAB 20 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G9892	DOC PT RSN NOT PERF DIL MACULAR EX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	52001	CYSTO W/IRRG&EVAC MLT CLOTS	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9458	PT DOC TOB USER & RECV TOB CESS INT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	59841	INDUCED ABORTION DILAT&EVAC	SURGERY - MATERNITY CARE AND D	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G9460	TOB ASMT/CESS INT NOT PRFR NO RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9659	GT EQU 86Y SCR COLO NOMED RSN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	C9795	STEREOTACT BDY RAD THR TX FRC 1LT LES	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	25624	CLTX CARPL SCPHD FX W/MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25515	OPTX RADIAL SHAFT FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77262	THER RADIOLOGY TX PLNG INTRM	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	74182	MRI ABDOMEN W/CONTRAST	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	G8966	CARD STRESS IMAG SX/GT LW CHD RSK PT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21422	OPTX PALATAL/MAX FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99441	PHONE E/M PHYS/QHP 5-10 MIN	E & M - SPECIAL E/M SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25645	OPTX CRPL FX OTH/THN SCPH EA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28725	ARTHRODESIS SUBTALAR	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	37565	LIGATION INT JUGULAR VEIN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68440	SNIP INC LACRIMAL PUNCTUM	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37606	LIG INT/COM CAROTID ART OCCL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69610	TYMPANIC MEMBRANE REPAIR	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95867	NDL EMG CRANIAL NRV MUSC UNI	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93619	COMPREHENSIVE EP EVALUATION	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15829	RHYTIDECTOMY SMAS FLAP	SURGERY - INTEGUMENTARY SYSTEM	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15261	FTH/GFT FR N/E/E/L EACH ADDL	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15824	RHYTIDECTOMY FOREHEAD	SURGERY - INTEGUMENTARY SYSTEM	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G9707	PT RCV HOSPC SRVC ANY TM DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	25820	ARTHRD WRIST LMTD W/O B1 GRF	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	0617T	INSJ IRIS PROSTH W/RMVL&INSJ	CATEGORY III CODES	EXPIRED	06/30/2020	12/31/2078			
MMAI-Medicare/Medicaid	43030	CRICOPHARYNGEAL MYOTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21510	INC DEEP OPNG B1 CRTX THORAX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68115	EXC LES CONJUNCTIVA GT 1 CM	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36405	VNPNXRLT 3YRS PHY/QHP SCALP VN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00906	ANES VULVECTOMY	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21470	OPTX COMPLICATED MNDBLR FX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21436	OPTX CRNFCL SEP COMP MLT INT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54235	NJX CORPORA CAVERNOSA RX AGT	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9405	PT RECV F/U WITHIN 7 DAYS AFTER D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9255	PT DC HOME 2ND PO DAY	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	77610	HYPERTHERMIA NTRSTL PRB 5/LT	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	77261	THER RADIOLOGY TX PLNG SMPL	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67700	BLEPHAROTOMY DRG ABSC EYELID	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	37650	LIGATION OF FEMORAL VEIN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8965	CARD STRESS IMAG PRIM LW CHD RSK PT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57061	DESTRUCTION VAG LESIONS SMPL	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	56620	VULVECTOMY SIMPLE PARTIAL	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27709	OSTEOTOMY TIBIA & FIBULA	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	G9760	PT USE HSPC SVC ANY TIME DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	74183	MRI ABD W/O CNTR FLWD CNTR	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	43825	GASTROJEJUNOSTOMY W/VAGOTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25574	OPTX RDL&ULN SHFT FX RDS/ULN	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25520	CLTX RDL SHFT FX&DISLC	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26580	REPAIR CLEFT HAND	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69650	STAPES MOBILIZATION	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96040	GENETIC COUNSELING 30 MIN	MEDICINE - GENETIC COUNSELING	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93890	TCD VASOREACTIVITY STUDY	MEDICINE - NON-INVASIVE VASCUL	EXPIRED	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	80081	OBSTETRIC PANEL INC HIV TSTG	PATH & LAB - ORGAN OR DISEASE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	61120	BURR HOLE FOR VENTR PUNCTURE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	51030	INCISE & TREAT BLADDER	SURGERY - URINARY SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21138	RDCTJ FOREHEAD CNTRG&PROSTC	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	15131	DRM AGRFT T/A/L EA ADDL	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01951	ANES 2&3 BURN LESS 4 PCT TBSA	ANESTH - BURN EXCISIONS OR DEB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1348	PAM INCR 6 PT 4-12 MO	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	65767	EPIKERATOPLASTY	SURGERY - EYE AND OCULAR ADNEX	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	33820	REPAIR PDA BY LIGATION	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20150	EXCISION EPIPHYSEAL BAR	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31760	TRACHEOPLASTY INTRATHORACIC	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69540	EXCISION AURAL POLYP	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0095U	EE 2 PRTN BMRK MBSP ELISA EST	PATH & LAB - CHEMISTRY	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	93227	XTRNL ECG RECLT 48 HR R&I	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1219	ANAPHYL D/T VACC ON/B4 DATE OF ENC	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	G2107	PT 66+ FRAILTY AND ADV ILL	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2071	MAT BUPRENORPHINE IMPL REMV;WKLY BD	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	D6081	SC&DEB 1 IMPL MUCOS;NO FLP ENT&CLS	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	61312	CRNEC/CRNOT STTL XDRL/SDRL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61151	BURR HOLE/TREPH SBSQ TAPPING	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50290	EXCISION PERINEPHRIC CYST	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50020	DRG PERIRNL/RENAL ABSC OPEN	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47000	NEEDLE BIOPSY OF LIVER PERQ	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15936	EXC SAC PR ULC PREP MUS FLAP	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	78191	PLATELET SURVIVAL STUDY	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61156	BURR HOL ASPIR HMTM/CST ICER	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21280	MEDIAL CANTHOPEXY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	15200	FTH/GFT FR TRNK 20 SQ CM/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65765	KERATOPHAKIA	SURGERY - EYE AND OCULAR ADNEX	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	61501	CRANIECTOMY F/OSTEOMYELITIS	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15241	FTH/GFT F/C/C/M/N/A/G/H/FEA	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35206	REPAIR BLOOD VESSEL DIR UXTR	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81432	HRDTRY BRST CA-RLATD DO 5+	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	D6051	PLACEMENT INTERIM IMPLANT ABUTMENT	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	61314	CRNEC/CRNOT ITTL XDRL/SDRL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61304	CRNEC/CRNOT EXPL SUPRATNTORL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50360	RNL ALTRNSPLJ W/O RCP NFRCT	SURGERY - URINARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21087	IMPRES&PREP NASAL PROSTH	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	15944	EXC ISCH PR ULC SKN FLP CLSR	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	Q0519	SUPPLY FEE HIV PREP INJ 30	HCPCS - TEMP CODES	EXPIRED	10/01/2024	10/01/2024			
MMAI-Medicare/Medicaid	Q0518	SUPPLY FEE HIV PREP ORAL 90	HCPCS - TEMP CODES	EXPIRED	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	Q0517	SUPPLY FEE HIV PREP ORAL 60	HCPCS - TEMP CODES	EXPIRED	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	G0120	COLOREC CANCR SCR;COLNSCPY BA ENEMA	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E1800	ADJUST ELBOW EXT & FLEX DEV	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	64804	SYMPATHECTOMY CERVICOTHORAC	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	35226	REPAIR BLOOD VESSEL DIR LXTR	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	97813	ACUP 1/GT W/ESTIM 1ST 15 MIN	MEDICINE - ACUPUNCTURE	NO	06/24/2020	06/24/2020	Regulatory Compliance		
MMAI-Medicare/Medicaid	36400	VNPNXRLT 3YRS PHY/QHP FEM/JUG	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81435	HERED COLON CA-RLATD DO 5+	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	98972	NQHP OL DIG ASSMT&MGMT 21+	MEDICINE-NON-FACE-TO-FACE	NO	01/01/2020	01/01/2020			

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MMAI-Medicare/Medicaid	G8482	INFLUENZA IMMUN ADMIN/PREV RECV	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55600	VESICULOTOMY	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9247	2 ENC ENC/VIR LD 90D	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	C9734	FOCUSED U/S ABL/TX INT OTH THAN UL	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	77615	HYPERTHERMIA NTRSTL PRBGT 5	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	43830	GSTRST OPEN WO CONSTJ TUBE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25446	ARTHRP W/PROSTC DST RDS&CRPS	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	0365U	ONC BLDR 10 UR HRBR URTHL CA	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	25695	OPTX LUNATE DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57109	VAGNC BI TOTAL PEL LYMPHADEC	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	56625	VULVECTOMY SIMPLE COMPLETE	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54205	NJX PX PEYRONIE DS EXPS PLAQ	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	30160	RHINECTOMY TOTAL	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9321	PREV CT NUC MED CNT DOC 12MO	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	74150	CT ABDOMEN W/O CONTRAST	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862

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MMAI-Medicare/Medicaid	77412	RADIATION TX DELIVERY COMPLX	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	77081	DXA BONE DENSITY APPENDICULR	RADIOLOGY-DIAGNOSTIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43820	GASTROJEJUNOSTOMY WO VAGOTMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78262	GASTROESOPHAGEAL REFLUX STD	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49205	EXC ABD TUM OVER 10 CM	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21282	LATERAL CANTHOPEXY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21086	IMPRES&PREP AURICULAR PROSTH	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21081	IMPRES&PREP MNDBL RES PROSTH	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	15950	EXC TRCHNTR PR ULC PRIM SUTR	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	M1346	NO PAM INC 6 PTS 4-12 MO	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	33776	RPR TGA ATR BFL CLSR VSD	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31601	PLANNED TRACHEOSTOMYLT 2 YRS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15945	EXC ISCH PR ULC SKN FLP OSTC	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	31612	PERQ TRCHL PNXR TTRACH ASPIR	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69090	EAR PIERCING	SURGERY - AUDITORY SYSTEM	NON-COV	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	95065	DIR NSL MUCOUS MEMBRANE TEST	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93624	EP F-UP STUDY PACG&REC	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15837	EXC EXCSV SKIN FOREARM/HAND	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15135	DRM AGRFT F/S/N/H/F/G/M 1ST	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15130	DRM AGRFT T/A/L 1ST 100 SQCM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35231	REPAIR BLVSL VN GRF NECK	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33845	EXCISION COA W/GRAFT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33824	REPAIR PDA DIV 18 YRS&OLDER	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33762	SHUNT DESC AORTA TO PULM ART	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33120	EXC ICAR TUM RESC W/CARD BYP	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0656T	ANT LMBR VRT BDY TETH LT 7 SEG	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	M1260	PT NOT DOC LT EQU 1 YR DIALYSIS	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	21497	INTERDENTAL WIRG OTH/THN FX	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21454	OPTX MNDBLR FX XTRNL FIXJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21450	CLTX MNDBLR FX W/O MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21461	OPTX MNDBLR FX WO NTRDNTL	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	68400	I&D LACRIMAL GLAND	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37735	LIG&DIV&COMPL STRPG SAPH VN	SURGERY - CARDIOVASCULAR SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	57065	DESTRUCTION VAG LESION XTNSV	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99443	PHONE E/M PHYS/QHP 21-30 MIN	E & M - SPECIAL E/M SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9172	INJ BEQVEZ PER TX DOSE	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	10/01/2024	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	77280	THER RAD SIMULAJ FIELD SMPL	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77084	MRI BONE MARROW BLOOD SUPPLY	RADIOLOGY-DIAGNOSTIC	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	74185	MRA ABD W OR W/O CNTRST	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	25605	CLTX DST RDL FX/EPHYS SEP W/	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25560	CLTX RDL&ULN SHFT FX WO MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25530	CLTX ULNAR SHFT FX W/O MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25443	ARTHRP PROSTC DSTL SCPH CRPL	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	C9171	INJ PEGULICIANINE 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	10/01/2024	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	0346U	BETA AMYL AB40&AB42 LC-MS/MS	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	10/01/2022	12/31/2078			

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MMAI-Medicare/Medicaid	59851	INDUCED ABORTION 1+NJX D&C	SURGERY - MATERNITY CARE AND D	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	57120	COLPOCLEISIS LE FORT TYPE	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57100	BIOPSY VAGINAL MUCOSA SIMPLE	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77076	RADEX OSSEOUS SURVEY INFANT	RADIOLOGY-DIAGNOSTIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74021	RADEX ABDOMEN 3+ VIEWS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	25440	REPAIR NONU SCPHD CARPL B1	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43800	PYLOROPLASTY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81434	HERED RTA DO GEN SEQ 15	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	93631	NTRAOP EPICAR&ENDCAR PAC&MAP	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93505	ENDOMYOCARDIAL BIOPSY	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93226	XTRNL ECG RECLT 48 HR SCAN A/R	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95044	PATCH/APPLICATION TESTS	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0539T	RECEIPT&PREP CAR-T CLL ADMN	CATEGORY III CODES	EXPIRED	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	78232	SALIVARY GLAND FUNCTION STD	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78231	SALIVARY GLND IMG SERIAL IMG	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61322	CRNEC/CRNOT DCMPRV W/O LOBEC	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	50240	NEPHRECTOMY PARTIAL	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21120	GENIOPLASTY AUGMENTATION	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21084	IMPRES&PREP SP AID PROSTH	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	20102	EXPL PENTRG WND ABD/FLNK/BK	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15240	FTH/GFT F/C/C/M/N/AX/G/H/F20	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90654	FLU VACC IIV3 NO PRESERV ID	MEDICINE - VACCINES, TOXOIDS	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61333	EXPL ORBIT W/REMOVAL LESION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35256	REPAIR BLVSL VN GRF LXTR	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33822	REPAIR PDA DIVLT 18 YEARS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33779	RPR TGA RCNSTJ RMVL PLM BND	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9919	SCREENING PERF & POS & PROV REC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	96003	DYNAMIC FINE WIRE EMG	MEDICINE - NEUROLOGY AND NEURO	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	95861	NEEDLE EMG 2 EXTREMITIES	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95052	PHOTO PATCH TESTS	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1155	PT ANA DT PNC VAC DUR/BFR MSMT PER	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	50135	PYELOTOMY COMPLICATED	SURGERY - URINARY SYSTEM	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	19300	MASTECTOMY FOR GYNECOMASTIA	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15788	CHEMICAL PEEL FACIAL EPIDRM	SURGERY - INTEGUMENTARY SYSTEM	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	M1344	NO BSLN/2ND PAM SCORE 4-12MO	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	64818	SYMPATHECTOMY LUMBAR	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	61514	CRNEC TREPH EXC BRN ABS STTL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61330	DCMPRN ORBIT ONLY TRANSCRNL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35266	RPR BLVSL GRF OTH/TH VN UXTR	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33471	VLVT PV CLSD HRT VIA P-ART	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31613	TRACHEOSTOMA REVJ SIMPLE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41870	PERIODONTAL MUCOSAL GRAFTING	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	M1267	PT NO ACT KID TRANSPLT WTLST	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	21432	OPTX CRANFCL SEP W/WIRING	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	98970	NQHP OL DIG ASSMT&MGMT 5-10	MEDICINE-NON-FACE-TO-FACE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	37760	LIG PRFRATR VN RADICAL 1 LEG	SURGERY - CARDIOVASCULAR SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	37617	LIGATION MAJOR ARTERY ABD	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57130	EXCISION VAGINAL SEPTUM	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	56630	VULVECTOMY RADICAL PARTIAL	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29200	STRAPPING THORAX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77072	BONE AGE STUDIES	RADIOLOGY-DIAGNOSTIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74018	RADEX ABDOMEN 1 VIEW	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9751	PT DIED ANY TIME DUR 24-MO MSR PRD	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	59850	INDUCED ABORTION 1+ NJX	SURGERY - MATERNITY CARE AND D	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	56631	VLVCTMY RAD PRTL UNI LYMPHAD	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27705	OSTEOTOMY TIBIA	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	77075	RADEX OSSEOUS SURVEY COMPL	RADIOLOGY-DIAGNOSTIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74181	MRI ABDOMEN W/O CONTRAST	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	25607	OPTX DST RD XARTC FX/EPI SEP	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69602	REV MSTDC RSLT MOD RAD MSTDC	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69005	DRG XTRNL EAR ABSC/HEM COMP	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9999	DOC SYS RSN LT 3 COLON	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	96902	MCRSCP XM HAIR PLUCK/CLIPPED	MEDICINE - SPECIAL DERMATOLOGI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95863	NEEDLE EMG 3 EXTREMITIES	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	93640	EP EVAL 1/2CHMBR PACG CVDFB	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93241	XTRNL ECG RECGT 48HRLT 7D	MEDICINE - CARDIOVASCULAR	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	0538T	BLD DRV T LYMPHCYT PREP TRNS	CATEGORY III CODES	EXPIRED	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	0500T	HPV 5+ HI RISK HPV TYPES	CATEGORY III CODES	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	M1212	MISSING GSA NOT PERF	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1211	GSA LEVELGT 9.0PCT	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M0003	OPT CAR PT EP NEURO CN MIPS VAL PTH	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	G2101	PT 66+ FRAILTY AND ADV ILL	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1154	HS SVCS PROV PT ANY TM DUR MSMT PER	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	47802	FUSE LIVER DUCT & INTESTINE	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46070	INCISION ANAL SEPTUM INFANT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21088	IMPRES&PREP FACIAL PROSTH	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21085	IMPRES&PREP ORAL SURG SPLINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	15937	EXC SAC PR ULC PREP MUS OSTC	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	15839	EXC EXCESSIVE SKN OTHER AREA	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15120	SPLT AGRFT F/S/N/H/F/G/M 1ST	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	M1347	PT PAM INCR 3 PT 4-12 MO	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1343	PT PAM LVL 4 BASE OR SRT LIN	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	J2806	INJ SINCALIDE MAIA 5 MCG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	07/01/2023	07/01/2023			
MMAI-Medicare/Medicaid	35276	RPR BLVS GR OT/T VN NTRTH WO	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61458	CRNEC SOPL XPL/DCMPR CRL NRV	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82009	KETONE BODYS QUAL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94681	O2 UPTK EXP GAS ALYS W/CO2	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93321	DOPPLER ECHO F-UP/LMTD STD	MEDICINE - CARDIOVASCULAR	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93618	INDCTJ ARRHYTHMIA ELEC PACG	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93225	XTRNL ECG RECLT 48 HRS REC	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78215	LVR&SPLEEN IMG STATIC ONLY	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50370	RMVL TRANSPLANTED RNL ALGRFT	SURGERY - URINARY SYSTEM	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	21122	GENIOP SLDG OSTEOT 2/GT	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15920	EXC COCCYGL PR ULC PRIM SUTR	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	E1805	ADJUST WRIST EXT & FLEX DEV	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	35188	RPR ACQ AV FISTULA HEAD&NECK	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	31610	TRACHEOSTOMY FENEST SKIN FLP	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31603	EMER TRACHEOSTOMY TTRACH	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21452	PERQ TX MNDBLR FX XTRNL FIXJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21632	EXTENSIVE STERNUM SURGERY	SURGERY - MUSCULOSKELETAL SYST	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36415	COLL VENOUS BLD VENIPUNCTURE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93024	ERGONOVINE PROVOCATION TEST	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92571	FILTERED SPEECH TEST	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21435	OPTX CRNFC SEP COMP INT&/XTR	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21421	CLTX PALATAL/MAX FX WIRE FIX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57135	EXCISION VAGINAL CYST/TUMOR	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	56810	PERINEOPLASTY RPR PER NONOB	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74178	CT ABD&PLV WO CNTR FLWD CNTR	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	25455	EPIPHYSL ARRST DSTL RDS&ULNA	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	37618	LIGATION MAJOR ARTERY XTR	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	58958	RESC RECR OVR TBL PP UTR MAL	SURGERY - FEMALE GENITAL SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28715	ARTHRODESIS TRIPLE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	25800	ARTHRD WRIST COMPLETE WO GRF	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25606	PERQ SKEL FIXJ DSTL RDL FX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25450	EPIPHYSL ARRST DSTL RDS/ULNA	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25444	ARTHRP W/PROSTC LUNATE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77373	STRTCTC BDY RAD THER TX DLVR	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	0398T	MRGFUS STRTCTC LES ABLTJ	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	96912	PHOTOCHEMOTHERAPY PUVA	MEDICINE - SPECIAL DERMATOLOGI	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	95070	INHLJ BRNCL CHALLENGE TSTG	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95004	PERQ TESTS W/ALRGNC XTRCS	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93797	PHYS/QHP OP CAR RHAB WO ECG	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/31/2023			
MMAI-Medicare/Medicaid	61313	CRNEC/CRNOT STTL ICERE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61250	BURR HOLE/TREPH STTL EXPL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61107	TDH PNXR IMPLT VENTR CATH	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50760	URETEROURETEROSTOMY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61140	BURR HOLE/TREPH BX BRAIN/LES	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	15826	RHYTIDECTOMY GLBLR FRN LINES	SURGERY - INTEGUMENTARY SYSTEM	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1815	ADJUST ANKLE EXT & FLEX DEV	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	35190	REPAIR ACQ AV FISTULA XTR	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33814	OBLTRJ A-PULM SEP DEF W/BYP	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33774	RPR TGA ATRIAL BAFFLE PX	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33750	SHUNT SUBCLAVIAN TO PULM ART	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33684	CLSR 1 VSD W/WO PATCH W/VLVT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82010	KETONE BODYS QUAN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9991	PT PCV/PSV O/A 19BD&B4 E/O MSR PD	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G9920	SCREENING PERFORMED AND NEGATIVE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	95864	NEEDLE EMG 4 EXTREMITIES	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93609	INTRA-VNTR MAPG TCHYCAR SITE	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50340	RECIPIENT NEPHRECTOMY	SURGERY - URINARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	47605	CHOLECYSTECTOMY W/CHOLANG	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19350	NIPPLE/AREOLA RECONSTRUCTION	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	15941	EXC ISCH PR ULC PRM SUT OSTC	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	15793	CHEMICAL PEEL NONFACIAL DRM	SURGERY - INTEGUMENTARY SYSTEM	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15789	CHEMICAL PEEL FACIAL DERMAL	SURGERY - INTEGUMENTARY SYSTEM	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	35261	RPR BLVSL GRF OTH/THN VN NCK	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1177	PT RECD PCV ON/AFT 19	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	D2940	PLACEMENT INTERIM DIR RESTORATION	HCPCS-DENTAL-Restoration Oth	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	15150	TIS CLTR SKN AGRFT T/A/L 1ST	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15101	SPLT AGRFT T/A/L EA ADDL 100	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01952	ANES 2&3 BURN 4-9PCT TBSA	ANESTH - BURN EXCISIONS OR DEB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0516	SUPPLY FEE HIV PREP ORAL 30	HCPCS - TEMP CODES	EXPIRED	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1292	PT 66+ FRAIL INPT ADV ILL	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	J2796	INJECTION ROMIPLOSTIM 10 MCG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	92132	CPTRZD OPH DX IMG ANT SGM	MEDICINE - OPHTHALMOLOGY	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	90661	CCIIV3 VAC ABX FR 0.5 ML IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61510	CRNEC TREPH EXC BRN TUM STTL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33853	RPR HYPOPL A-ARCH W/BYP	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	33692	COMP RPR TOF WO PULM ATRESIA	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31600	PLANNED TRACHEOSTOMY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21451	CLTX MNDBLR FX W/MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42890	LIMITED PHARYNGECTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21485	CLTX TMPRMAND DISLC COMP	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8844	NO AHI RDI REI INI DX NO RSN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	97810	ACUP 1/GT WO ESTIM 1ST 15 MIN	MEDICINE - ACUPUNCTURE	NO	06/24/2020	06/24/2020	Regulatory Compliance		
MMAI-Medicare/Medicaid	21630	RADICAL RESECTION STERNUM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59030	FETAL SCALP BLOOD SAMPLING	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	56637	VLVCTMY RAD COMP BI LYMPHAD	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	56634	VLVCTMY RAD COMP UNI LYMPHAD	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43832	GSTRST OPEN W/CONSTJ TUBE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25442	ARTHRP W/PROSTC DSTL ULNA	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	G9406	CLN DOC RSN PT NO 7 DA F/U INPT D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9246	NO ENC OR ENC/VIR LD 90DAYS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	74177	CT ABD & PELVIS W/CONTRAST	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862

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MMAI-Medicare/Medicaid	74160	CT ABDOMEN W/CONTRAST	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	54250	NCTRNL PEN TMSCN&/RGDITY TST	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29580	STRAPPING UNNA BOOT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25690	CLTX LUNATE DISLC W/MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25505	CLTX RDL SHFT FX W/MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25490	PROPHYLACTIC TX RADIUS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0352U	NFCT DS BV&VAGINITIS AMP PRB	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	10/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	43831	GASTROSTOMY OPEN NEONATAL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25535	CLTX ULNAR SHFT FX W/MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J9259	PACLITAXEL AMERICAN REGENT	HCPCS - CHEMO DRUGS	EXPIRED	07/01/2023	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	23130	ACROMP/ACROMIONECTOMY PRTL	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	96910	PHOTCHMTX TAR&UVB/PTRLTM&UVB	MEDICINE - SPECIAL DERMATOLOGI	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	61108	TDH PNXR EVAC&/DRG SDRL HMTA	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15152	TIS CLTR SKN AGRFT T/A/L EA	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15115	EPDRM AGRFT F/S/N/H/F/G/M 1	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	01953	ANES 2&3 BURN EA ADD 9PCT TBSA	ANESTH - BURN EXCISIONS OR DEB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35216	RPR BLVSL DIR NTRTHRC WO BYP	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35184	RPR CGEN AV FISTULA XTR	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31605	EMER TRACHEOSTOMY CTHYR MEM	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69000	DRG XTRNL EAR ABSC/HEM SMPL	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95060	OPH MUCOUS MEMBRANE TESTS	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95056	PHOTO TESTS	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q5131	INJECTION ADALIMUMAB-AACF BS 20 MG	HCPCS - TEMP CODES	EXPIRED	07/01/2023	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	G2072	MAT BUPRENORPHINE IMPL I&R;WKLY BD	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	D6095	REPAIR IMPLANT ABUTMENT BY REPORT	HCPCS - DENTAL	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	61154	BURR HOLE W/EVAC&/DRG HMTMA	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47600	CHOLECYSTECTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21137	RDCTJ FOREHEAD CNTRG ONLY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21076	IMPRES&PREP SURG OBT PROSTH	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	20100	EXPL PENTRG WOUND NECK	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	35251	RPR BLVSL VN GRF INTRA-ABDL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35201	REPAIR BLOOD VESSEL DIR NECK	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33851	EXC COA RPR L SUBCL ART/PRST	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31766	CARINAL RECONSTRUCTION	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15116	EPDRM AGRFT F/S/N/H/F/G/MEA	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0520	SUPPLY FEE HIV PREP INJ 60	HCPCS - TEMP CODES	EXPIRED	10/01/2024	10/01/2024			
MMAI-Medicare/Medicaid	92575	SENSORINEURAL ACUITY LVL TST	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21465	OPTX MNDBLR CNDYLR FX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21445	OPTX MNDBLR/MAX ALV RIDGE FX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1268	PT AC STAT KID TRNSPLT WTLST	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	36406	VNPNXRLT 3YRS PHY/QHP OTHER VN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21502	I&D DP ABS/HMTM NCK RIB OSTC	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8694	LVEF LT EQU 40PCT	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57111	VAGNC COMPL RMVL PARAVAGTIS	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	56632	VLVCTMY RAD PRTL BI LYMPHAD	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87166	DARK FIELD EXAM W/O COLLJ	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	25650	CLTX ULNAR STYLOID FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9254	DOC PT DISCHG GT 2D	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	74022	RADEX COMPL AQT ABD SERIES	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25445	ARTHRP W/PROSTC TRAPEZIUM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67710	SEVERING TARSORRHAPHY	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37615	LIGATION MAJOR ARTERY NECK	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37700	LIGATION&DIV LONG SAPH VEIN	SURGERY - CARDIOVASCULAR SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	57010	COLPOTOMY DRG PEL ABSCESS	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9402	PT RECEIVED F/U W/I 30 DAYS AFTER D	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	C9786	ECHO IMAGE POST PROC FOR CAD OF HF	HCPCS - C CODES-OUTPATIENT PP	EXPIRED	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	77605	HYPERTHERMIA EXT GEN DEEP	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	25525	OPTX RDL SHFT FX&CLTX RAD/UL	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77073	BONE LENGTH STUDIES	RADIOLOGY-DIAGNOSTIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69620	MYRINGOPLASTY	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0537T	BLD DRV T LYMPHCYT CAR-T CLL	CATEGORY III CODES	EXPIRED	01/01/2019	12/31/2078			

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MMAI-Medicare/Medicaid	G2116	PT 66-80 FRAILTY AND ADV ILL	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	D6080	IMPL MNT FL AR F HYB PROS RM&REINSR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	61316	INC&SUBQ PLMT CRNL BONE GRF	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61305	CRNEC/CRNOT EXPL INFRATNTORL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21077	IMPRES&PREP ORBITAL PROSTH	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	15822	BLEPHAROPLASTY UPPER EYELID	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15136	DRM AGRFT F/S/N/H/F/G/M EA	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61516	CRNEC TREPH EXC CYST STTL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61345	OTH CRANIAL DCMPRN PST FOSSA	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35236	REPAIR BLVSL VN GRF UXTR	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33770	RPR TGA W/O SURG ENLGMNT VSD	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33755	SHUNT AS-AORT TO PULM ART	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33688	CLSR 1VSD W/WO PTCH RMVL BND	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9974	DILATED MACULAR EXAM PERFORMED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9921	NO SCR P PR SCR P/POS NO REC&RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	95866	NEEDLE EMG HEMIDIAPHRAGM	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	0618T	INSJ IRIS PROSTH SEC IO LENS	CATEGORY III CODES	EXPIRED	06/30/2020	12/31/2078			
MMAI-Medicare/Medicaid	G2126	PT 66-80 FRAILTY AND ADV ILL	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2070	MAT BUPRENORPHNE IMPL INSRT;WKLY BD	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	78202	LIVER IMAGING WITH VASC FLOW	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61215	INS SUBQ RSVR PMP/NFS SYS	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50250	OPN ABLTJ 1/GT RNL MAS CRYSRG	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15934	EXC SACRAL PR ULC SKN FLAP	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	61340	SUBTEMPORAL CRANIAL DCMPRN	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35241	RPR BLVSL VN GRF NTRTHRC W/B	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33813	REPAIR SEPTAL DEFECT	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33766	SHUNT SUPR V/C P-ART 1 LUNG	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15260	FTH/GFT FR N/E/E/L 20 SQCM/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88387	MACROSCOPIC XM DSJ&PREP TISS	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64822	SYMPATHECTOMY ULNAR ARTERY	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	15151	TIS CLTR SKN AGRFT T/A/L ADD	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8578	NO REOP REQ BLD GRFT OTH	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	77074	RADEX OSSEOUS SURVEY LMTD	RADIOLOGY-DIAGNOSTIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77407	RADIATION TX DELIVERY INTRM	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J0570	BUPRENORPHINE IMPLANT 74.2 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	17340	CRYOTHERAPY FOR ACNE	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15940	EXC ISCHIAL PR ULC PRIM SUTR	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	15832	EXC EXCESSIVE SKIN THIGH	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15201	FTH/GFT FR TRNK EACH ADDL	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15110	EPIDRM AGRFT T/A/L 1ST 100	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31614	TRACHEOSTOMA REVJ COMPLEX	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65860	SEVERING ADS ANT SGM LASER	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78258	ESOPHAGEAL MOTILITY	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33694	CMP RPR TOF WO PLM ATRS PTCH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31615	TRCHEOBRNCHSC EST TRACHS INC	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1179	NO PCV RECD	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	74175	CTA ABDOMEN W/CONTRAST	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862

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MMAI-Medicare/Medicaid	41874	ALVEOLOPLASTY EACH QUADRANT	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21082	IMPRES&PREP PALTL AUG PROSTH	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	46030	REMOVAL ANAL SETON OTH MRK	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2468	INJ, PALONOSETRON (POSFREA)	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2024	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	98968	PH1 ASSMT&MGMT NQHP 21-30	MEDICINE - SPECIAL SERVICES, P	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96913	PHOTOCHEMOTX SEV DERMATOSES	MEDICINE - SPECIAL DERMATOLOGI	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	25449	REVJ ARTHRP WRIST JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93642	EP EVL 1/2CHMB TRNSVNS CVDFB	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93622	COMP EP EVAL L VENTR PAC&REC	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25526	OPTX RDL SHFT FX&DSTL RAD/UL	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21423	OPTX PALATAL/MAX FX COMP	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92591	HEARING AID XM&SLCTN BINAURL	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59840	INDUCED ABORTION D&C	SURGERY - MATERNITY CARE AND D	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	56805	CLITOROPLASTY INTERSEX STATE	SURGERY - FEMALE GENITAL SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	56700	PRTL HYMNCTMY/REVJ HYMNL RNG	SURGERY - FEMALE GENITAL SYSTE	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	51020	CYSTOTOMY/CYSTOSTOMY W/FULG	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74019	RADEX ABDOMEN 2 VIEWS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	37600	LIGATION XTRNL CAROTID ART	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25685	OPTX TRNS-SCPHPRLNR FX DISLC	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25441	ARTHRP W/PROSTC DSTL RDS	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	95012	NITRIC OXIDE EXP GAS DETER	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0448U	ONC LNG&CLN CA DNA QUAL NGS	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	35286	RPR BLVSL GRF OTH/TH VN LXTR	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25830	ARTHRD DST RAD/UL JT SGM RSC	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	49204	EXC ABD TUM OVER 5 CM	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47015	LAPT ASPIR&/NJX HEP PRST CST	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35182	RPR CGEN AV FISTULA THRX&ABD	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25630	CLTX CARPL FX W/O MNPJ EA B1	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25608	OPTX DST RD XART FX/EPI SEP2	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21440	CLTX MNDBLR/MAX ALV RIDGE FX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D6090	REPAIR OF IMPL/ABUTMENT SPTD PROS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	C9794	THERAP RAD SIM-AID FLD CMPLX PET&CT	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	95018	ALL TSTG PERQ&IQ DRUGS/BIOL	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93623	PRGRMD STIMJ&PACG IV RX NFS	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93620	COMP EP EVL R AT VEN PAC&REC	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59852	INDUCED ABORTION 1+NJX HYST	SURGERY - MATERNITY CARE AND D	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	56640	VLVCTMY RAD COMP W/LYMPHADEC	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D5640	RPLC BKN TEETH PRTL DENTUR Q TOOTH	HCPCS-DENTAL-Denture Repair	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	81514	NFCT DS BV&VAGINITIS DNA ALG	PATH & LAB - CYTOGENETIC STUDI	NO	01/01/2021	11/30/2024			
MMAI-Medicare/Medicaid	81513	NFCT DS BV RNA VAG FLU ALG	PATH & LAB - CYTOGENETIC STUDI	NO	01/01/2021	11/30/2024			
MMAI-Medicare/Medicaid	E0469	LUNG EXPANS HIGH OSCIL NEB	HCPCS - DME	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0484U	NFCT DS MGEN 23S RRNA PT MUT	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0486U	ONC PAN SOL TUM NGS CFCTDNA	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0488U	OB FETAL AG NIPT CFDNA ALYS	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0490U	ONC CUTAN/UVEAL MLNMA CD146	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0492U	ONC SOL TUM CTC SLCTN PD-L1	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0508U	TRNSPLJ MED DD-CFDNA 40 SNPS	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			

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MMAI-Medicare/Medicaid	0513U	ONC PRST8 ALG ALYS MSI&HRD	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0516U	RX METAB RXGENOMIC GNOTYP 40	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	L8721	RECEPTOR SOLE L8720 REPLACE	HCPCS - ORTHOTIC PROCEDURES	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0493U	TRNSPL MED QUAN DD-CFDNA NGS	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0495U	ONC PRST8 ALYS CRCG PLSM PRT	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0497U	ONC PRST8 MRNA RT-PCR 6GENES	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0499U	ONC CLRCT&LNG DNA NGS 8GENES	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0503U	NEURO ALZ DS BAMYL&TAU PRTN	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0519U	THER RX MNTR MEDS P/D/A 110+	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	E0716	SUPP AND ACCES INTRAVAG PELV	HCPCS - DME	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4334	AMNIOPLAST 1 PER SQ CM	HCPCS - TEMP CODES	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4338	ARTACENT VELOS PER SQ CM	HCPCS - TEMP CODES	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4342	THERAMEND PER SQ CM	HCPCS - TEMP CODES	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q5136	INJ DENOSUMAB-BBDZ 1 MG	HCPCS - TEMP CODES	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	A2028	MICROMATRIX FLEX PER MG	HCPCS - MED-SURG SUPPLIES	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	A4543	SUPPLY TRANS ELEC NERVE STIM	HCPCS - MED-SURG SUPPLIES	YES	10/01/2024	12/31/2078			

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MMAI-Medicare/Medicaid	C8000	SUPRT DEV A-V FISTULA IMP	HCPCS - C CODES - OUTPATIENT PP	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0483U	NFCT DS NG GYRA S91F PT MUT	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0485U	ONC SOL TUM CFDNA&RNA NGS GM	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0487U	ONC SOL TUM CFCDNA TGSAP 84	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0489U	OB SGNIPT CFDNA SEQ ALYS 1+	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0491U	ONC SOL TUM CTC SLCT ER PRTN	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0504U	NFCT DS UTI ID 17 PATH ORGS	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0507U	ONC OVR DNA WHOLE GEN W/5HMC	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	E3200	GAIT MOD SYSTM RHYM AUDITORY	HCPCS - DME	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0494U	RBC AG FTL RHD GENE ALYS NGS	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0496U	ONC CLRCT CFDNA 8/7 GENES	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0498U	ONC CLRCT NGS MUT DETC 43GEN	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0501U	ONC CLRC BLD QUAN MEAS CFDNA	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0517U	THER RX MNTR 80+ PSYACTIV RX	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	E0721	TRANS ELEC STIM AURICULAR	HCPCS - DME	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	E0737	TRANSCUT TIBIAL STIM BY APP	HCPCS - DME	YES	10/01/2024	12/31/2078			

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MMAI-Medicare/Medicaid	Q4336	ARTECENT C PER SQ CM	HCPCS - TEMP CODES	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4340	SIMPLIGRAFT PER SQ CM	HCPCS - TEMP CODES	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4344	TRI MEMBRANE WRAP PER SQ CM	HCPCS - TEMP CODES	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	A9610	XE129 XENON DIAGNOSTIC	HCPCS - MED-SURG SUPPLIES	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	A4545	SUPPL ACCESSOR TIBIAL STIM	HCPCS - MED-SURG SUPPLIES	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0505U	NFCT DS VAG INFCTJ ID 32ORGS	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0510U	ONC PNCRTC CA ALG ALYS 16GEN	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0512U	ONC PRST8 ALYS DGTZ IMG MSI	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0515U	GI IBD IA QUAN DETER IFX LVL	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0502U	HPV E6/E7 MRK HI-RSK TYP CRV	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0518U	THER RX MNTR 90+ PN&MTL HLTH	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	J0138	INJECTION ACETAMINOPH 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	E0683	NON PNEU PERISTALIC COMP PMP	HCPCS - MED-SURG SUPPLIES	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4335	AMNIOPLAST 2 PER SQ CM	HCPCS - TEMP CODES	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4339	ARTACENT VERICLEN PER SQ CM	HCPCS - TEMP CODES	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4343	DERMACYTE AC MATRX PER SQ CM	HCPCS - TEMP CODES	YES	10/01/2024	12/31/2078			

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MMAI-Medicare/Medicaid	A2029	MIROTRACT MATRIX SHEET	HCPCS - MED-SURG SUPPLIES	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	A7021	SUPPL AND ACCESS LUNG EXPAN	HCPCS - MED-SURG SUPPLIES	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	A4544	ELECTRO NERVE STIMULATOR RLS	HCPCS - MED-SURG SUPPLIES	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	J1749	INJ ILOPROST 0.1 MCG	HCPCS - DRUGS (NOT ORAL)	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0476U	RX METAB PSYC 14GEN&CYP2D6	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0478U	ONC NSCLC DNA&RNA DPCR 9GENS	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0480U	NFCT DS CSF METAG NGS ALYS	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0482U	OB PE BIOCHEM ASY SFLT1&PLGF	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	E0767	INTRABUC AM RF EMF CANCER TX	HCPCS - DME	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0506U	GI BARRETTS ESOPHGL CELL 89	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0509U	TRNSPLJ MED DD-CFDNALT 12 SNPS	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0511U	ONC SOL TUM 3DMICROENVIR 36+	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0514U	GI IBD IA QUAN DETER ADL LVL	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	E2513	SGD ACCESSORY EMG SENSOR	HCPCS - DME	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	L8720	EXT LOW EXT SENS PROSTHE MEC	HCPCS - ORTHOTIC PROCEDURES	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0500U	AUTOINFLAM DS VEXAS SYND DNA	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			

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MMAI-Medicare/Medicaid	0520U	THER RX MNTR 200+ RX/SBSTS	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	E0715	INTRAVAG PELVIC FLOOR KEGEL	HCPCS - DME	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4337	ARTECENT TRIDENT PER SQ CM	HCPCS - TEMP CODES	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4341	SIMPLIMAX PER SQ CM	HCPCS - TEMP CODES	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4345	MATRIX HD ALLOGRFT PER SQ CM	HCPCS - TEMP CODES	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q5135	INJ TYENNE 1 MG	HCPCS - TEMP CODES	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	A2027	MATRIDERM PER SQ CM	HCPCS - MED-SURG SUPPLIES	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0477U	RX METAB PSY 14&CYP2D6 GN-RX	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0479U	TAU PHOSPHORYLATED PTAU217	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0481U	IDH1 IDH2&TERT PROMOTER NGS	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	E0743	EXT LOW EXT NERVE STIMU RLS	HCPCS - DME	YES	10/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	J8522	CAPECITABINE ORAL 50 MG	HCPCS - DRUGS (NOT ORAL)	YES	10/01/2024	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9329	INJ TISLELIZUMAB-JSGR	HCPCS - DRUGS (NOT ORAL)	YES	10/01/2024	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J0175	INJ DONANEMAB-AZBT 2 MG	HCPCS - DRUGS (NOT ORAL)	YES	07/02/2024	12/31/2078			

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MMAI-Medicare/Medicaid	Q5105	INJ EPO ALFA-EPBX BIOSIMILAR 100 U	HCPCS - TEMP CODES	NO	04/19/2020	10/10/2024	Regulatory Compliance		
MMAI-Medicare/Medicaid	J9218	LEUPROLIDE ACETATE PER 1 MG	HCPCS - CHEMO DRUGS	NO	04/19/2020	10/10/2024	Regulatory Compliance		
MMAI-Medicare/Medicaid	J9217	LEUPROLIDE ACETATE 7.5 MG	HCPCS - CHEMO DRUGS	NO	04/19/2020	10/10/2024	Regulatory Compliance		
MMAI-Medicare/Medicaid	J9155	INJECTION DEGARELIX 1 MG	HCPCS - CHEMO DRUGS	NO	04/19/2020	10/10/2024	Regulatory Compliance		
MMAI-Medicare/Medicaid	J7325	HYALURONAN/DERIV SYNVISC INJ 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	10/10/2024	Other		
MMAI-Medicare/Medicaid	J7323	HYALURONAN/DERIV EUFLEXXA IA INJ PD	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	10/10/2024	Other		
MMAI-Medicare/Medicaid	J7318	HYALN/DERIV DUROLANE IA INJ 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2019	10/10/2024	Other		
MMAI-Medicare/Medicaid	90683	RSV VACC MRNA LIPID NANO IM	MEDICINE - VACCINES, TOXOIDS	NO	06/01/2024	06/01/2024			
MMAI-Medicare/Medicaid	90624	MENB-4C&MENACWY VACC IM	MEDICINE - VACCINES, TOXOIDS	NO	10/01/2024	10/01/2024			
MMAI-Medicare/Medicaid	P9027	RBC O2 CO2 REDUCED	HCPCS - PATH & LAB	NO	10/01/2024	10/01/2024			
MMAI-Medicare/Medicaid	L1821	KO ELAS W/CONDYLE PADS OTF	HCPCS - ORTHOTIC PROCEDURES	NO	10/01/2024	10/01/2024			
MMAI-Medicare/Medicaid	L1653	HO ABDUCTION STATIC OTS	HCPCS - ORTHOTIC PROCEDURES	NO	10/01/2024	10/01/2024			
MMAI-Medicare/Medicaid	L1006	SCOLIOSIS ORTH SAG/COR	HCPCS - ORTHOTIC PROCEDURES	NO	10/01/2024	10/01/2024			
MMAI-Medicare/Medicaid	J8541	ORAL HEMADY 0.25 MG	HCPCS - DRUGS (NOT ORAL)	NO	10/01/2024	10/01/2024			
MMAI-Medicare/Medicaid	J2601	INJ VASOPRESSIN BAXTER	HCPCS - DRUGS (NOT ORAL)	NO	10/01/2024	10/01/2024			
MMAI-Medicare/Medicaid	J2253	INJ MIDAZOLAM SEIZALAM	HCPCS - DRUGS (NOT ORAL)	NO	10/01/2024	10/01/2024			

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MMAI-Medicare/Medicaid	J2252	INJ MIDAZOLAM IN 0.8PCT NACL	HCPCS - DRUGS (NOT ORAL)	NO	10/01/2024	10/01/2024			
MMAI-Medicare/Medicaid	J2004	INJ LIDOCAINE W EPINEPHRINE	HCPCS - DRUGS (NOT ORAL)	NO	10/01/2024	10/01/2024			
MMAI-Medicare/Medicaid	J2003	INJ LIDOCAINE HCL 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	10/01/2024	10/01/2024			
MMAI-Medicare/Medicaid	J2002	INJ LIDOCAINE IN D5W 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	10/01/2024	10/01/2024			
MMAI-Medicare/Medicaid	J1171	INJ HYDROMORPHONE 0.1 MG	HCPCS - DRUGS (NOT ORAL)	NO	10/01/2024	10/01/2024			
MMAI-Medicare/Medicaid	V5212	HEARING AID BINAURAL ITE/ITC	HCPCS - HEARING SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	L1820	KO ELAS W/ CONDYLE PADS & JO	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5673	SOCKET INSERT W LOCK MECH	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G2202	NO RSN NO BRIEF COUNS	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	J2251	INJ MIDAZOLAM IN 0.9PCT NACL	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	E2311	ELECTRO CONNECT BTW 2 SYS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0822	PWC GP 2 STD SEAT/BACK	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0167U	CHORNC GONADOTROPIN HCG IA	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	03/11/2020	03/11/2020			
MMAI-Medicare/Medicaid	V5211	HEARING AID BINAURAL ITE/ITE	HCPCS - HEARING SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	L1025	ADD CTLSO/SCO ORTHOS KYPHO PAD FLTG	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5718	ADD EXO KN-SHIN PC FRICT SWG CNTRL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	J8520	CAPECITABINE ORAL 150 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	G0011	HIV PREP COUNSEL, MD 15-30M	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	E0739	REHAB SYS ACTIVE ASSIST RT	HCPCS - DME	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	A6444	CONFORM BAND N/S WGT EQU 5"/YD	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6442	CONFORM BAND N/S WLT 3"/YD	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1944	ARIPIRAZOLE LAUROXIL 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	J1459	INJ IVIG PRIVIGEN 500 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	L5679	SOCKET INSERT W/O LOCK MECH	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A2024	RESOLVE OR XENOPATCH SQ CM	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J7297	LILETTA 52 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	J1557	GAMMAPLEX INJECTION	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	E0984	ADD PWR TILLER	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	A6445	CONFORM BAND S W LT 3"/YD	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	K0820	PWC GP 2 STD PORT SEAT/BACK	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0472	RAD BACKUP INV INTRFC TRACH TUBE	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	J2001	INJECTION LIDO HCL IV INFUS 10 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1284	PT 66/GT INST SNP/RSD LTC GT 90 DA MSR	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	Q4136	EZ DERM PER SQUARE CENTIMETER	HCPCS - TEMP CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7668	METAPROTERENOL NON-COMP CON	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0983	ADD PWR JOYSTICK	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	A6447	CONFORM BAND S W GT EQU 5"/YD	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5712	ADD EXO KN-SHIN SA FRICT SWG CNTRL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0282	AMIODARONE HCL	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E2310	ELECTRO CONNECT BTW CONTROL	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0078U	PAIN MGT OPI USE GNOTYP PNL	CATEGORY III CODES	EXPIRED	09/25/2018	12/31/2078			
MMAI-Medicare/Medicaid	G2204	PT 45-85 W/SCOPE	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	M1129	ONGO CR NOT PS PT D/C ERLY DT ME EV	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	C9150	XENON XE-129 HP GAS DX Q STUDY DOS	HCPCS - C CODES-OUTPATIENT PP	EXPIRED	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J1170	INJECTION HYDROMORPHONE UP TO 4 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A0430	FIXED WING AIR TRANSPORT	HCPCS - TRANSPORTATION (INCL A	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0816	PWC GP 1 STD CAP CHAIR	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	A6446	CONFORM BAND S WGT EQU 3" LT 5"/YD	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	K0814	PWC GP 1 STD PORT CAP CHAIR	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J9172	DOCETAXEL DOCIVYX 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	L1652	HO BI THIGHCUFFS W SPRDR BAR	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7298	MIRENA 52 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	J1943	INJ ARISTADA INITIO 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	0396U	OB PREIMPLTJ TST 300000 DNA	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	M1124	ONGO CR NOT PS PT D/C ERLY DT ME EV	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1133	ONGO CR NOT PS PT D/C ERLY DT ME EV	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	E0471	RAD BU NON INV INTRFC NSL/FAC MASK	HCPCS - DME	NO	12/01/2013	05/09/2024	Other		
MMAI-Medicare/Medicaid	E0470	RAD W/O BACKUP NON-INV INTFC	HCPCS - DME	NO	12/01/2013	05/09/2024	Other		
MMAI-Medicare/Medicaid	0403U	ONC PRST8 MRNA 18 GEN 1ST UR	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	J8521	CAPECITABINE ORAL 500 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J1572	FLEBOGAMMA INJECTION	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J0283	INJ AMIODARONE NEXTERONE	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	L8695	EXTERNAL RECHARG SYS EXTERNAL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J9258	PACLITAXEL TEVA	HCPCS - DRUGS (NOT ORAL)	EXPIRED	01/01/2010	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	A0431	ROTARY WING AIR TRANSPORT	HCPCS - TRANSPORTATION (INCL A	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	M1114	ONGO CR NOT PS PT D/C ERLY DT ME EV	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1109	ONGO CR NOT PS PT D/C ERLY DT ME EV	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	L8689	EXTERNAL RECHARG SYS INTERNAL	HCPCS - PROSTHETIC PROCED	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	J7669	METAPROTERENOL NON-COMP UNIT DOSE	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6443	CONFORM BAND N/S WGT EQU 3"LT 5"/YD	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0248U	ONC SPHRD CELL CUL 12 RX PNL	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	S9485	CRISIS INTERVENT MENTAL HEALTH SERV	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	S9083	GLOBAL FEE URGENT CARE CENTERS	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H2033	MULTISYS THERAPY JUVS PER 15 MIN	HCPCS - ALCOHOL/DRUG ABUSE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H2024	SUPPORTED EMPLOYMENT PER DIEM	HCPCS - ALCOHOL/DRUG ABUSE	YES	09/02/2014	12/31/2078			
MMAI-Medicare/Medicaid	H0048	ALC &/OTH RX TST: CLCT&HNDL NOT BLD	HCPCS - ALCOHOL/DRUG ABUSE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H0043	SUPPORTED HOUSING PER DIEM	HCPCS - ALCOHOL/DRUG ABUSE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	H0038	SELF-HELP/PEER SERVICES PER 15 MIN	HCPCS - ALCOHOL/DRUG ABUSE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H0037	CMTY PSYC SUPPORTIVE TX PROGM-DIEM	HCPCS - ALCOHOL/DRUG ABUSE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H0020	ALCOHL&/RX SRVC;METHDONE ADMN&/SRVC	HCPCS - ALCOHOL/DRUG ABUSE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75573	CT HRT C+ STRUX CGEN HRT DS	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	62287	DCMPRN PX PERQ 1/MLT LUMBAR	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	71270	CT THORAX DX C-/C+	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	71260	CT THORAX DX C+	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	71250	CT THORAX DX C-	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	64484	NJX AA&/STRD TFRM EPI L/S EA	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	64483	NJX AA&/STRD TFRM EPI L/S 1	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	64480	NJX AA&/STRD TFRM EPI C/T EA	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862

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MMAI-Medicare/Medicaid	64479	NJX AA&/STRD TFRM EPI C/T 1	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	L8688	IMPL NEUROSTIM 2 ARRAY NON-RECHARGE	HCPCS - PROSTHETIC PROCED	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	L8687	IMPL NEUROSTIM 2 ARRAY RECHARGEABLE	HCPCS - PROSTHETIC PROCED	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	L8686	IMPL NEUROSTIM 1 ARRAY NON-RECHARGE	HCPCS - PROSTHETIC PROCED	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	L8685	IMPL NEUROSTIM 1 ARRAY RECHARGEABLE	HCPCS - PROSTHETIC PROCED	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	L8681	PT PROG IMPL NEUROSTM PLSE GEN REPL	HCPCS - PROSTHETIC PROCED	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	G0260	INJ SI JNT; ANES &/TX AGT &ARTHROG	HCPCS - PROC/PROF SERVICES (TE	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	C1820	GEN NEUROSTIM RECHRG BATT&CHARG SYS	HCPCS - C CODES - OUTPATIENT PP	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	C1767	GENERATOR NEUROSTIM NONRECHARGEABLE	HCPCS - C CODES - OUTPATIENT PP	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	95972	ALYS CPLX SP/PN NPGT W/PRGRM	MEDICINE - NEUROLOGY AND NEURO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	95971	ALYS SMPL SP/PN NPGT W/PRGRM	MEDICINE - NEUROLOGY AND NEURO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93461	R&L HRT ART/VENTRICLE ANGIO	MEDICINE - CARDIOVASCULAR	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93460	R&L HRT ART/VENTRICLE ANGIO	MEDICINE - CARDIOVASCULAR	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93459	L HRT ART/GRFT ANGIO	MEDICINE - CARDIOVASCULAR	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93458	L HRT ARTERY/VENTRICLE ANGIO	MEDICINE - CARDIOVASCULAR	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93457	R HRT ART/GRFT ANGIO	MEDICINE - CARDIOVASCULAR	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862

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MMAI-Medicare/Medicaid	93456	R HRT CORONARY ARTERY ANGIO	MEDICINE - CARDIOVASCULAR	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93455	CORONARY ART/GRFT ANGIO S&I	MEDICINE - CARDIOVASCULAR	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93454	CORONARY ARTERY ANGIO S&I	MEDICINE - CARDIOVASCULAR	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93453	R&L HRT CATH W/VENTRICLGRPHY	MEDICINE - CARDIOVASCULAR	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93452	LEFT HRT CATH W/VENTRCLGRPHY	MEDICINE - CARDIOVASCULAR	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93451	RIGHT HEART CATH	MEDICINE - CARDIOVASCULAR	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93356	MYOCRD STRAIN IMG SPCKL TRCK	MEDICINE-CARDIOVASCULAR	YES	12/09/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93350	STRESS TTE ONLY	MEDICINE - CARDIOVASCULAR	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93318	ECHO TRANSESOPHAGEAL INTRAOP	MEDICINE - CARDIOVASCULAR	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93317	ECHO TRANSESOPHAGEAL	MEDICINE - CARDIOVASCULAR	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93316	ECHO TRANSESOPHAGEAL	MEDICINE - CARDIOVASCULAR	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93315	ECHO TRANSESOPHAGEAL	MEDICINE - CARDIOVASCULAR	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93314	ECHO TRANSESOPHAGEAL	MEDICINE - CARDIOVASCULAR	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93313	ECHO TRANSESOPHAGEAL	MEDICINE - CARDIOVASCULAR	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93312	ECHO TRANSESOPHAGEAL	MEDICINE - CARDIOVASCULAR	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93308	TTE F-UP OR LMTD	MEDICINE - CARDIOVASCULAR	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862

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MMAI-Medicare/Medicaid	93307	TTE W/O DOPPLER COMPLETE	MEDICINE - CARDIOVASCULAR	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93306	TTE W/DOPPLER COMPLETE	MEDICINE - CARDIOVASCULAR	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93304	ECHO TRANSTHORACIC	MEDICINE - CARDIOVASCULAR	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93303	ECHO TRANSTHORACIC	MEDICINE - CARDIOVASCULAR	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78816	PET IMAGE W/CT FULL BODY	RADIOLOGY - NUCLEAR MEDICINE	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78815	PET IMAGE W/CT SKULL-THIGH	RADIOLOGY - NUCLEAR MEDICINE	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78814	PET IMAGE W/CT LMTD	RADIOLOGY - NUCLEAR MEDICINE	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78813	PET IMAGE FULL BODY	RADIOLOGY - NUCLEAR MEDICINE	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78812	PET IMAGE SKULL-THIGH	RADIOLOGY - NUCLEAR MEDICINE	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78811	PET IMAGE LTD AREA	RADIOLOGY - NUCLEAR MEDICINE	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78609	BRAIN IMAGING (PET)	RADIOLOGY - NUCLEAR MEDICINE	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78608	BRAIN IMAGING (PET)	RADIOLOGY - NUCLEAR MEDICINE	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78496	HEART FIRST PASS ADD-ON	RADIOLOGY - NUCLEAR MEDICINE	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78494	HEART IMAGE SPECT	RADIOLOGY - NUCLEAR MEDICINE	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78492	MYOCRD IMG PET MLT RST&STRS	RADIOLOGY - NUCLEAR MEDICINE	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78491	MYOCRD IMG PET 1STD RST/STRS	RADIOLOGY - NUCLEAR MEDICINE	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862

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MMAI-Medicare/Medicaid	78483	HEART FIRST PASS MULTIPLE	RADIOLOGY - NUCLEAR MEDICINE	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78481	HEART FIRST PASS SINGLE	RADIOLOGY - NUCLEAR MEDICINE	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78473	GATED HEART MULTIPLE	RADIOLOGY - NUCLEAR MEDICINE	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78472	GATED HEART PLANAR SINGLE	RADIOLOGY - NUCLEAR MEDICINE	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78469	HEART INFARCT IMAGE (3D)	RADIOLOGY - NUCLEAR MEDICINE	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78468	HEART INFARCT IMAGE (EF)	RADIOLOGY - NUCLEAR MEDICINE	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78466	HEART INFARCT IMAGE	RADIOLOGY - NUCLEAR MEDICINE	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78459	MYOCRD IMG PET SINGLE STUDY	RADIOLOGY - NUCLEAR MEDICINE	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78454	HT MUSC IMAGE PLANAR MULT	RADIOLOGY - NUCLEAR MEDICINE	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78453	HT MUSCLE IMAGE PLANAR SING	RADIOLOGY - NUCLEAR MEDICINE	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78452	HT MUSCLE IMAGE SPECT MULT	RADIOLOGY - NUCLEAR MEDICINE	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78451	HT MUSCLE IMAGE SPECT SING	RADIOLOGY - NUCLEAR MEDICINE	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78434	AQMBF PET REST & RX STRESS	RADIOLOGY-NUCLEAR MEDICINE	YES	12/09/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78433	MYOCRD IMG PET 2RTRACER CT	RADIOLOGY-NUCLEAR MEDICINE	YES	12/09/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78432	MYOCRD IMG PET 2RTRACER	RADIOLOGY-NUCLEAR MEDICINE	YES	12/09/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78431	MYOCRD IMG PET RST&STRS CT	RADIOLOGY-NUCLEAR MEDICINE	YES	12/09/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862

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MMAI-Medicare/Medicaid	78430	MYOCRD IMG PET RST/STRS W/CT	RADIOLOGY-NUCLEAR MEDICINE	YES	12/09/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78429	MYOCRD IMG PET 1 STD W/CT	RADIOLOGY-NUCLEAR MEDICINE	YES	12/09/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	77078	CT BONE DENSITY AXIAL	RADIOLOGY-DIAGNOSTIC	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	77022	MRI GDN PARNCHYMA TISS ABLTJ	RADIOLOGY-IMAGING GUIDANCE	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	77021	MRI GUIDANCE NDL PLMT RS&I	RADIOLOGY-IMAGING GUIDANCE	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	77013	CT GUIDE FOR TISSUE ABLATION	RADIOLOGY-IMAGING GUIDANCE	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	77012	CT SCAN FOR NEEDLE BIOPSY	RADIOLOGY-IMAGING GUIDANCE	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	77011	CT SCAN FOR LOCALIZATION	RADIOLOGY-IMAGING GUIDANCE	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	76390	MR SPECTROSCOPY	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	76380	CAT SCAN FOLLOW-UP STUDY	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	75635	CT ANGIO ABDOMINAL ARTERIES	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	75574	CT ANGIO HRT W/3D IMAGE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	75572	CT HRT W/3D IMAGE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	75571	CT HRT W/O DYE W/CA TEST	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	75565	CARD MRI VELOC FLOW MAPPING	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	75563	CARD MRI W/STRESS IMG & DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862

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MMAI-Medicare/Medicaid	75561	CARDIAC MRI FOR MORPH W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	75559	CARDIAC MRI W/STRESS IMG	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	75557	CARDIAC MRI FOR MORPH	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	74262	CT COLONOGRAPHY DX W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	74261	CT COLONOGRAPHY DX	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	73725	MR ANG LWR EXT W OR W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	73723	MRI JOINT LWR EXTR W/O&W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	73722	MRI JOINT OF LWR EXTR W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	73721	MRI JNT OF LWR EXTRE W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	73720	MRI LWR EXTREMITY W/O&W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	73719	MRI LOWER EXTREMITY W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	73718	MRI LOWER EXTREMITY W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	73706	CT ANGIO LWR EXTR W/O&W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	73702	CT LWR EXTREMITY W/O&W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	73701	CT LOWER EXTREMITY W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	73700	CT LOWER EXTREMITY W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862

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MMAI-Medicare/Medicaid	73225	MR ANGIO UPR EXTR W/O&W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	73223	MRI JOINT UPR EXTR W/O&W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	73222	MRI JOINT UPR EXTREM W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	73221	MRI JOINT UPR EXTREM W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	73220	MRI UPPR EXTREMITY W/O&W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	73219	MRI UPPER EXTREMITY W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	73218	MRI UPPER EXTREMITY W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	73206	CT ANGIO UPR EXTRM W/O&W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	73202	CT UPPR EXTREMITY W/O&W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	73201	CT UPPER EXTREMITY W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	73200	CT UPPER EXTREMITY W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72295	X-RAY OF LOWER SPINE DISK	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72285	DISCOGRAPHY CERV/THOR SPINE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72198	MR ANGIO PELVIS W/O & W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72197	MRI PELVIS W/O & W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72196	MRI PELVIS W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862

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MMAI-Medicare/Medicaid	72195	MRI PELVIS W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72194	CT PELVIS W/O & W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72193	CT PELVIS W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72192	CT PELVIS W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72191	CT ANGIOGRAPH PELV W/O&W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72159	MR ANGIO SPINE W/O&W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72158	MRI LUMBAR SPINE W/O & W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72157	MRI CHEST SPINE W/O & W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72156	MRI NECK SPINE W/O & W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72149	MRI LUMBAR SPINE W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72148	MRI LUMBAR SPINE W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72147	MRI CHEST SPINE W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72146	MRI CHEST SPINE W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72142	MRI NECK SPINE W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72141	MRI NECK SPINE W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72133	CT LUMBAR SPINE W/O & W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862

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MMAI-Medicare/Medicaid	72132	CT LUMBAR SPINE W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72131	CT LUMBAR SPINE W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72130	CT CHEST SPINE W/O & W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72129	CT CHEST SPINE W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72128	CT CHEST SPINE W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72127	CT NECK SPINE W/O & W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72126	CT NECK SPINE W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	72125	CT NECK SPINE W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	71555	MRI ANGIO CHEST W OR W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	71552	MRI CHEST W/O & W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	71551	MRI CHEST W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	71550	MRI CHEST W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	71275	CT ANGIOGRAPHY CHEST	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70555	FMRI BRAIN BY PHYS/PSYCH	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70554	FMRI BRAIN BY TECH	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70553	MRI BRAIN STEM W/O & W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862

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MMAI-Medicare/Medicaid	70552	MRI BRAIN STEM W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70551	MRI BRAIN STEM W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70549	MR ANGIOGRAPH NECK W/O&W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70548	MR ANGIOGRAPHY NECK W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70547	MR ANGIOGRAPHY NECK W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70546	MR ANGIOGRAPH HEAD W/O&W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70545	MR ANGIOGRAPHY HEAD W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70544	MR ANGIOGRAPHY HEAD W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70543	MRI ORBT/FAC/NCK W/O &W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70542	MRI ORBIT/FACE/NECK W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70540	MRI ORBIT/FACE/NECK W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70498	CT ANGIOGRAPHY NECK	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70496	CT ANGIOGRAPHY HEAD	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70492	CT SFT TSUE NCK W/O & W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70491	CT SOFT TISSUE NECK W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70490	CT SOFT TISSUE NECK W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862

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MMAI-Medicare/Medicaid	70488	CT MAXILLOFACIAL W/O & W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70487	CT MAXILLOFACIAL W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70486	CT MAXILLOFACIAL W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70482	CT ORBIT/EAR/FOSSA W/O&W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70481	CT ORBIT/EAR/FOSSA W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70480	CT ORBIT/EAR/FOSSA W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70470	CT HEAD/BRAIN W/O & W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70460	CT HEAD/BRAIN W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70450	CT HEAD/BRAIN W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	70336	MAGNETIC IMAGE JAW JOINT	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	64640	INJECTION TREATMENT OF NERVE	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	64636	DESTROY L/S FACET JNT ADDL	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	64635	DESTROY LUMB/SAC FACET JNT	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	64634	DESTROY C/TH FACET JNT ADDL	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	64633	DESTROY CERV/THOR FACET JNT	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	64625	RF ABLTJ NRV NRVTG SI JT	SURGERY-NERVOUS SYSTEM	YES	12/09/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862

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MMAI-Medicare/Medicaid	64520	N BLOCK LUMBAR/THORACIC	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	64510	N BLOCK STELLATE GANGLION	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	64495	INJ PARAVERT F JNT L/S 3 LEV	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	64494	INJ PARAVERT F JNT L/S 2 LEV	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	64493	INJ PARAVERT F JNT L/S 1 LEV	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	64492	INJ PARAVERT F JNT C/T 3 LEV	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	64491	INJ PARAVERT F JNT C/T 2 LEV	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	64490	INJ PARAVERT F JNT C/T 1 LEV	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	64451	NJX AA&/STRD NRV NRVTG SI JT	SURGERY-NERVOUS SYSTEM	YES	12/09/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	64405	NJX AA&/STRD GR OCPL NRV	SURGERY - NERVOUS SYSTEM	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	63664	REVISE SPINE ELTRD PLATE	SURGERY - NERVOUS SYSTEM	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	63663	REVISE SPINE ELTRD PERQ ARAY	SURGERY - NERVOUS SYSTEM	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	63655	IMPLANT NEUROELECTRODES	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	63650	IMPLANT NEUROELECTRODES	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	62368	ANALYZE SP INF PUMP W/REPROG	SURGERY - NERVOUS SYSTEM	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	62367	ANALYZE SPINE INFUS PUMP	SURGERY - NERVOUS SYSTEM	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862

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MMAI-Medicare/Medicaid	62360	INSERT SPINE INFUSION DEVICE	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	62351	IMPLANT SPINAL CANAL CATH	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	62350	IMPLANT SPINAL CANAL CATH	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	62327	NJX INTERLAMINAR LMBR/SAC	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	62325	NJX INTERLAMINAR CRV/THRC	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	62324	NJX INTERLAMINAR CRV/THRC	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	62323	NJX INTERLAMINAR LMBR/SAC	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	62322	NJX INTERLAMINAR LMBR/SAC	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	62321	NJX INTERLAMINAR CRV/THRC	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	62320	NJX INTERLAMINAR CRV/THRC	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	62292	INJECTION CHEMONUCLEOLYSIS LMBR	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	62291	NJX PX DISCOGRAPHY CRV/THRC	SURGERY - NERVOUS SYSTEM	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	62290	NJX PX DISCOGRAPHY LUMBAR	SURGERY - NERVOUS SYSTEM	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	62282	TREAT SPINAL CANAL LESION	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	62281	TREAT SPINAL CORD LESION	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	62280	TREAT SPINAL CORD LESION	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862

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MMAI-Medicare/Medicaid	62264	EPIDURAL LYSIS ON SINGLE DAY	SURGERY - NERVOUS SYSTEM	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	62263	EPIDURAL LYSIS MULT SESSIONS	SURGERY - NERVOUS SYSTEM	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	27096	INJECT SACROILIAC JOINT	SURGERY - MUSCULOSKELETAL SYST	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	22515	PERQ VERTEBRAL AUGMENTATION	SURGERY - MUSCULOSKELETAL SYST	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	22514	PERQ VERTEBRAL AUGMENTATION	SURGERY - MUSCULOSKELETAL SYST	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	22513	PERQ VERTEBRAL AUGMENTATION	SURGERY - MUSCULOSKELETAL SYST	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	22512	VERTEBROPLASTY ADDL INJECT	SURGERY - MUSCULOSKELETAL SYST	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	22511	PERQ LUMBOSACRAL INJECTION	SURGERY - MUSKULOSKELETAL SYST	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	22510	PERQ CERVICOTHORACIC INJECT	SURGERY - MUSKULOSKELETAL SYST	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	20553	INJECT TRIGGER POINTS 3/GT	SURGERY - MUSCULOSKELETAL SYST	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	20552	INJ TRIGGER POINT 1/2 MUSCL	SURGERY - MUSCULOSKELETAL SYST	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0218T	NJX PARAVERT W/US LUMB/SAC	CATEGORY III CODES	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0217T	NJX PARAVERT W/US LUMB/SAC	CATEGORY III CODES	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0216T	NJX PARAVERT W/US LUMB/SAC	CATEGORY III CODES	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0215T	NJX PARAVERT W/US CER/THOR	CATEGORY III CODES	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0214T	NJX PARAVERT W/US CER/THOR	CATEGORY III CODES	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862

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MMAI-Medicare/Medicaid	0213T	NJX PARAVERT W/US CER/THOR	CATEGORY III CODES	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0201T	PERQ SACRAL AUGMT BILAT INJ	CATEGORY III CODES	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0200T	PERQ SACRAL AUGMT UNILAT INJ	CATEGORY III CODES	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0042T	CT PERFUSION W/CONTRAST CBF	CATEGORY III CODES	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93351	STRESS TTE COMPLETE	MEDICINE - CARDIOVASCULAR	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	76377	3D RENDER W/INTRP POSTPROCES	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	76376	3D RENDER W/INTRP POSTPROCES	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	74176	CT ABD & PELVIS W/O CONTRAST	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	62370	ANL SP INF PMP W/MDREPRG&FIL	SURGERY - NERVOUS SYSTEM	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0742T	AQMBF SPECT XERS/STRS & REST	CATEGORY III CODES	YES	01/01/2023	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	S8042	MAGNETIC RESONANCE IMAG LOW-FIELD	HCPCS - TEMP NATIONAL CODES	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	62326	NJX INTERLAMINAR LMBR/SAC	SURGERY - NERVOUS SYSTEM	YES	01/01/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	62361	IMPLANT SPINE INFUSION PUMP	SURGERY - NERVOUS SYSTEM	YES	01/01/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	62362	IMPLANT SPINE INFUSION PUMP	SURGERY - NERVOUS SYSTEM	YES	01/01/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	76391	MR ELASTOGRAPHY	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	01/01/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	77046	MRI BREAST C- UNILATERAL	RADIOLOGY-IMAGING GUIDANCE	YES	01/01/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862

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MMAI-Medicare/Medicaid	77047	MRI BREAST C- BILATERAL	RADIOLOGY-IMAGING GUIDANCE	YES	01/01/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	77048	MRI BREAST C-+ W/CAD UNI	RADIOLOGY-IMAGING GUIDANCE	YES	01/01/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	77049	MRI BREAST C-+ W/CAD BI	RADIOLOGY-IMAGING GUIDANCE	YES	01/01/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93319	3D ECHO IMG CGEN CAR ANOMAL	MEDICINE - CARDIOVASCULAR	YES	01/01/2010	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93593	R HRT CATH CHD NML NT CNJ	MEDICINE - CARDIOVASCULAR	YES	01/01/2010	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93594	R HRT CATH CHD ABNL NT CNJ	MEDICINE - CARDIOVASCULAR	YES	01/01/2010	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93595	L HRT CATH CHD NM/ABN NT CNJ	MEDICINE - CARDIOVASCULAR	YES	01/01/2010	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93596	R&L HRT CATH CHD NML NT CNJ	MEDICINE - CARDIOVASCULAR	YES	01/01/2010	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	93597	R&L HRT CATH CHD ABNL NT CNJ	MEDICINE - CARDIOVASCULAR	YES	01/01/2010	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0609T	MRS DISC PAIN ACQUISJ DATA	CATEGORY III CODES	YES	01/01/2001	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0610T	MRS DISC PAIN TRANSMIS DATA	CATEGORY III CODES	YES	01/01/2001	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0611T	MRS DISC PAIN ALG ALYS DATA	CATEGORY III CODES	YES	01/01/2001	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0612T	MRS DISCOGENIC PAIN I&R	CATEGORY III CODES	YES	01/01/2001	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0627T	PERQ NJX ALGC FLUOR LMBR 1ST	CATEGORY III CODES	YES	01/01/2021	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0628T	PERQ NJX ALGC FLUOR LMBR EA	CATEGORY III CODES	YES	01/01/2021	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0629T	PERQ NJX ALGC CT LMBR 1ST	CATEGORY III CODES	YES	01/01/2021	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862

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MMAI-Medicare/Medicaid	0630T	PERQ NJX ALGC CT LMBR EA	CATEGORY III CODES	YES	01/01/2021	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0633T	CT BREAST W/3D UNI C-	CATEGORY III CODES	YES	01/01/2021	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0634T	CT BREAST W/3D UNI C+	CATEGORY III CODES	YES	01/01/2021	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0635T	CT BREAST W/3D UNI C-/C+	CATEGORY III CODES	YES	01/01/2021	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0636T	CT BREAST W/3D BI C-	CATEGORY III CODES	YES	01/01/2021	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0637T	CT BREAST W/3D BI C+	CATEGORY III CODES	YES	01/01/2021	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0638T	CT BREAST W/3D BI C-/C+	CATEGORY III CODES	YES	01/01/2021	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0697T	QUAN MR TIS WO MRI MLT ORGN	CATEGORY III CODES	YES	01/01/2010	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0698T	QUAN MR TISS W/MRI MLT ORGN	CATEGORY III CODES	YES	01/01/2010	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0710T	N-INVAS ARTL PLAQ ALYS	CATEGORY III CODES	YES	01/01/2022	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0711T	N-NVS ARTL PLAQ ALYS DAT PRP	CATEGORY III CODES	YES	01/01/2010	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0712T	N-NVS ARTL PLAQ ALYS QUAN	CATEGORY III CODES	YES	01/01/2010	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0713T	N-NVS ARTL PLAQ ALYS RVW I&R	CATEGORY III CODES	YES	01/01/2010	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	C8923	TTE R-T DOC 2D INCL M-MODE REC CMPL	HCPCS - C CODES - OUTPATIENT PP	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	C8930	TTE CMPL DUR REST&CVST I&R PHYS SUP	HCPCS - C CODES - OUTPATIENT PP	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	C9762	CMRI MRPHOL&FNC Q SEG DYSF;STR IMAG	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2001	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862

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MMAI-Medicare/Medicaid	C9763	CMRI MRPHOL&FNC Q SEG DYSF;STS IMAG	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2001	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0648T	QUAN MR TIS WO MRI 1ORGN	CATEGORY III CODES	YES	01/01/2010	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0649T	QUAN MR TISS W/MRI 1ORGN	CATEGORY III CODES	YES	01/01/2010	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0625T	AUTO QUAN C PLAQ CPTR ALYS	CATEGORY III CODES	YES	01/01/2021	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0623T	AUTO QUANTIFICATION C PLAQUE	CATEGORY III CODES	YES	01/01/2021	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0624T	AUTO QUAN C PLAQ DATA PREP	CATEGORY III CODES	YES	01/01/2021	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0626T	AUTO QUAN C PLAQ I&R	CATEGORY III CODES	YES	01/01/2021	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	S8037	MR CHOLANGIOPANCREATOGRAPHY	HCPCS - TEMP NATIONAL CODES	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	L8683	RF TRNSMT W/IMPL NEUROSTIM RF RECV	HCPCS - PROSTHETIC PROCED	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	L8682	IMPL NEUROSTIMULATOR RADIOFREQ RECV	HCPCS - PROSTHETIC PROCED	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	L8680	IMPL NEUROSTIMULATOR ELECTRODE EA	HCPCS - PROSTHETIC PROCED	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	S8092	ELECTRON BEAM COMPUTED TOMOGRAPHY	HCPCS - TEMP NATIONAL CODES	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	S8035	MAGNETIC SOURCE IMAGING	HCPCS - TEMP NATIONAL CODES	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	C8929	TTE CMPL SPC & COLR FLOW DPPLR ECHO	HCPCS - C CODES - OUTPATIENT PP	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	C8928	TTE M-MODE REC REST & CV ST W/I&R	HCPCS - C CODES - OUTPATIENT PP	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	C8924	TTE R-T 2D INCL M-MODE REC FU/LTD	HCPCS - C CODES - OUTPATIENT PP	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862

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MMAI-Medicare/Medicaid	C8922	TTE CONG CARDIAC ANOMAL; LIMITED	HCPCS - C CODES - OUTPATIENT PP	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	C8921	TTE CONG CARDIAC ANOMAL; COMPLETE	HCPCS - C CODES - OUTPATIENT PP	YES	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	C1816	RECV &OR TRANSMITTER NEUROSTIM	HCPCS - C CODES - OUTPATIENT PP	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	C1787	PATIENT PROGRAMMER NEUROSTIMULATOR	HCPCS - C CODES - OUTPATIENT PP	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	74263	CT COLONOGRAPHY SCREENING	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	22527	IDET 1 OR MORE LEVELS	SURGERY - MUSCULOSKELETAL SYST	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	22526	IDET SINGLE LEVEL	SURGERY - MUSCULOSKELETAL SYST	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	74713	MRI FETAL EA ADDL GESTATION	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	74712	MRI FETAL SNGL/1ST GESTATION	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	63688	REV/RMV IMP SP NPG/R DTCH CN	SURGERY - NERVOUS SYSTEM	YES	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	63685	INS/RPLC SPI NPG/RCVR POCKET	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	C9791	MRI WITH INH HPX CONTRAST AGT CHEST	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2010	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0865T	QUAN MRI ALYS BRN W/O DX MRI	CATEGORY III CODES	YES	01/01/2010	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0785T	REVJ/RMVL NEA SPI W/NSTIM	CATEGORY III CODES	YES	01/01/2010	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	0784T	INS/RPLMT ELTRD RA SPI NSTIM	CATEGORY III CODES	YES	01/01/2010	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	75580	N-INVAS EST C FFR SW ALY CTA	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	01/01/2010	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	A0428	AMB SERVICE BLS NONEMERG TRANSPORT	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/31/2023	Other		If you need to arrange transportation for a member, please call our transportation vendor Access2Care, at 888-513-1612; hours of operation of provider lines 8:00a.m. to 8:00 p.m. (EST)
MMAI-Medicare/Medicaid	A0426	AMB SRVC ALS NONEMERG TRNSPRT LVL 1	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/31/2023	Other		If you need to arrange transportation for a member, please call our transportation vendor Access2Care, at 888-513-1612; hours of operation of provider lines 8:00a.m. to 8:00 p.m. (EST)
MMAI-Medicare/Medicaid	A0210	NONEMERG TRNSPRT: MEALS-ESCORT	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/31/2023	Other		If you need to arrange transportation for a member, please call our transportation vendor Access2Care, at 888-513-1612; hours of operation of provider lines 8:00a.m. to 8:00 p.m. (EST)
MMAI-Medicare/Medicaid	A0200	NONEMERG TRNSPRT: LODGING-ESCORT	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/31/2023	Other		If you need to arrange transportation for a member, please call our transportation vendor Access2Care, at 888-513-1612; hours of operation of provider lines 8:00a.m. to 8:00 p.m. (EST)
MMAI-Medicare/Medicaid	A0190	NONEMERG TRNSPRT: MEALS-RECIP	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/31/2023	Other		If you need to arrange transportation for a member, please call our transportation vendor Access2Care, at 888-513-1612; hours of operation of provider lines 8:00a.m. to 8:00 p.m. (EST)
MMAI-Medicare/Medicaid	A0180	NONEMERG TRNSPRT: LODGING-RECIP	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/31/2023	Other		If you need to arrange transportation for a member, please call our transportation vendor Access2Care, at 888-513-1612; hours of operation of provider lines 8:00a.m. to 8:00 p.m. (EST)
MMAI-Medicare/Medicaid	A0170	TRNSPRT ANCILLRY: PARK FEE TOLL OTH	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/31/2023	Other		If you need to arrange transportation for a member, please call our transportation vendor Access2Care, at 888-513-1612; hours of operation of provider lines 8:00a.m. to 8:00 p.m. (EST)
MMAI-Medicare/Medicaid	A0130	NONEMERG TRNSPRT: WHEELCHAIR VAN	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/31/2023	Other		If you need to arrange transportation for a member, please call our transportation vendor Access2Care, at 888-513-1612; hours of operation of provider lines 8:00a.m. to 8:00 p.m. (EST)
MMAI-Medicare/Medicaid	A0110	NONEMERG TRNSPRT&BUS INTERSTATE	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/31/2023	Other		If you need to arrange transportation for a member, please call our transportation vendor Access2Care, at 888-513-1612; hours of operation of provider lines 8:00a.m. to 8:00 p.m. (EST)
MMAI-Medicare/Medicaid	A0100	NONEMERGENCY TRANSPORTATION; TAXI	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/31/2023	Other		If you need to arrange transportation for a member, please call our transportation vendor Access2Care, at 888-513-1612; hours of operation of provider lines 8:00a.m. to 8:00 p.m. (EST)

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	A0090	NONEMERG TRNSPRT IND W/VESTED INT	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/31/2023	Other		If you need to arrange transportation for a member, please call our transportation vendor Access2Care, at 888-513-1612; hours of operation of provider lines 8:00a.m. to 8:00 p.m. (EST)
MMAI-Medicare/Medicaid	J0687	INJ CEFAZOLIN	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	J7171	INJ ADAMTS13 10 IU	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	J2183	INJ MEROPENEM	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0459U	ABETA42 & TTAU ECLIA CSF	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0461U	ONC RXGENOM ALYS RTPCR 24GEN	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0463U	ONC CRVX MRNA GENXPRSN 14BMK	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0465U	ONC URTHL CARC DNA QMSP 2GEN	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0467U	ONC BLDR DNA NGS 60GEN&ANEUP	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0469U	RARE DS WHL GEN SEQ FTL SAMP	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0471U	ONC CLRC CA 35 VRN KRAS&NRAS	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4311	ACESSO PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4315	REGENELINK AMNIOTIC MEM ALLO	HCPCS - TEMP CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4321	RENOGRAFT PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4325	ACAPATCH PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2024	12/31/2078			

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MMAI-Medicare/Medicaid	Q4329	SINGLAY PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4333	ARDEOGRAFT PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q5137	INJECTION WEZLANA SUB CU 1 MG	HCPCS - TEMP CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	G0519	NEW PT-CG DYAD DEM LOW CMPLX	HCPCS - PROC/PROF SERVICES (TE	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	G0523	MGT NW PT DEM MOD-HIGH CMPLX	HCPCS - PROC/PROF SERVICES (TE	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	G0527	MGT EST PT DMENTIA LOW CMPLX	HCPCS - PROC/PROF SERVICES (TE	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	G0531	FCLTY-BASED RESPITE 24 HR U	HCPCS - PROC/PROF SERVICES (TE	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0869T	NJX B1 SUB MTRL HW FIXJ AUG	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0873T	REVJ SUBQ PRTL ASCT PMP SYS	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0880T	AUGMNT ALYS CH CT ILD I&R	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0884T	ESPHGSC FLX 1ST TNDSC DILAT	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0888T	HISTOTRIPSY MAL RENAL TISSUE	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0892T	ARHFCMRIGTBS SBSQ PER TX DAY	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0896T	CONNJ LVR ALGRFT PRFU DEV EA	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0900T	N-INVAS EST AQMBF ASSTV CMR	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	90637	VACC QIRV MRNA 30MCG/.5ML IM	MEDICINE - VACCINES, TOXOIDS	YES	07/01/2024	12/31/2078			

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MMAI-Medicare/Medicaid	J2471	INJ PANTOPRAZOLE HIKMA 40MG	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	J0911	INST TAURO 1.35MG/HEP 100U	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0020M	ONC CNS ALYS 30000 DNA LOCI	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	G9037	INTRPRO REQ FR REC PHYS/QHCP	HCPCS - PROC/PROF SERVICES (TE	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	J0872	DAPTOMYCIN UNREFRIG	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	J1597	INJ GLYCOPYRROLATE GLYRX-PF	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	J3393	INJ BETIBEGLOGENE AUTOTEMCE	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	J2246	INJ MICAFUNGIN	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	J8611	METHOTREXATE JYLAMVO ORAL 2.5 MG	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2024	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	0460U	ONC WHL BLD/BUCC RTPCR 24GEN	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0462U	MELATONIN LVL TST SLP STD7/9	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0464U	ONC CLRCT SCR QRTSA DNA MRK	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0466U	CRD CAD DNA GWAS 564856 SNP	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0468U	HEP NASH MIR-34A5P A2M YKL40	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0470U	ONC OROP DETCJ MRD 8 DNA HPV	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			

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MMAI-Medicare/Medicaid	0472U	CA VI PSP&SP1 ANTB SJOGREN	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4313	DERMABIND FM PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4317	VITOGRAFT PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4319	SANOGRAFT PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4323	ALLOPLY PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4327	DUOAMNION PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4331	AXOLOTL GRAFT PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	G0521	NEW PT-CG DYAD DEM HIG CMPLX	HCPCS - PROC/PROF SERVICES (TE	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	G0525	EST PT-CG DYAD DEM MOD CMPLX	HCPCS - PROC/PROF SERVICES (TE	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	G0529	IN HOME RESPITE CARE 4 HR U	HCPCS - PROC/PROF SERVICES (TE	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	A9506	TC-99M GRAPHITE CRUCIBLE	HCPCS - ADMIN MISC & INVEST	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	C1605	PACEMAKER DUAL LEADLESS	HCPCS - C CODES - OUTPATIENT PP	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0867T	TPLA B9 PRST8 HYPRPLSAGT EQU 50ML	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0871T	RPLCMT SUBQ PRTL ASCITES PMP	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0875T	PRGRM SUBQ PRTL ASCT PMP SYS	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0878T	AUGMNT ALYS CH CT ILD W/CT	CATEGORY III CODES	YES	07/01/2024	12/31/2078			

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MMAI-Medicare/Medicaid	0882T	INTRAOP THER ESTIM PN UE 1ST	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0886T	SGMDSC FLX 1ST TNDSC DILAT	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0890T	ARHFCMRIGTBS 1ST TX DAY	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0894T	CANNULATION LIVER ALLOGRAFT	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0898T	N-INVAS PRST8 CANCER EST MAP	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	J2267	INJ MIRIKIZUMAB-MRKZ 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	G9038	CO-MANAGEMENT SERVICES	HCPCS - PROC/PROF SERVICES (TE	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	J0211	INJ NITHIODOTE 3MG/125MG	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	J1598	INJ GLYCOPYRROLATE FRES KABI	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	J1748	INJ ZYMFENTRA 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	J3247	INJ SECUKINUMAB INTRAV 1MG	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	J3263	INJ TORIPALIMAB-TPZI 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2024	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J3394	INJ LOVOTIBEGLOGENE AUTOTEM	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	J7355	INJ TRAVOPROST INTRA IMPLANT 1 MCG	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2024	12/31/2078			

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MMAI-Medicare/Medicaid	J8612	METHOTREXATE XATMEP ORAL 2.5 MG	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2024	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	Q4314	REEVA FT PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4320	PELLOGRAFT PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4324	AMNIOTX PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4328	MOST PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4332	AXOLOTL DUALGRAFT PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	G0522	MGT NW PT DEMENTIA LOW CMPLX	HCPCS - PROC/PROF SERVICES (TE	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	G0526	EST PT-CG DYAD DEM HIG CMPLX	HCPCS - PROC/PROF SERVICES (TE	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	G0530	ADULT DAYCARE CENTER 8 HR U	HCPCS - PROC/PROF SERVICES (TE	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	C1606	ADAPTER US TO ENDOSCOPE	HCPCS - C CODES - OUTPATIENT PP	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0451U	ONC MM LC-MS/MS PEP ION QUAN	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0453U	ONC CLRCT CA CFDNA QPCR ASY	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0455U	NFCT AGT STI MULT AMP PRB UR	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0457U	PFAS 9 CMPND LC-MS/MS PLS/SR	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0868T	HI-RES GASTRIC EP MAPPING	CATEGORY III CODES	YES	07/01/2024	12/31/2078			

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MMAI-Medicare/Medicaid	0872T	RPLCMT NDWLLG BLDR&PRTL CATH	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0876T	DUPLEX SCAN HEMO FSTL LMTD	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0473U	ONC SLD TUM BLD/SLV 648 GENE	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0475U	HERED PRST8 CA GSAP 23 GENES	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0879T	AUGMNT ALYS CH CT ILD PREP	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0883T	INTRAOP THER ESTIM PN UE EA	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0887T	END-TIDAL CTRL INHALED ANES	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0891T	ARHFCMRIGTBS SBSQ TX DAY	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0895T	CONNJ LVR ALGRFT PRFU DEV 1	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0899T	N-INVAS DETER AQMBF AUG CMR	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	J2470	INJECTION PANTOPRAZOLE SODIUM 40 MG	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	J9361	INJ EFBEMALENOGRASTIM ALFA-VUXW	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2024	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J2373	INJ IMMPHENTIV 20 MCG	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4312	ACESSO AC PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4316	AMCHOPLAST PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2024	12/31/2078			

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MMAI-Medicare/Medicaid	Q4318	E-GRAFT PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4322	CAREGRAFT PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4326	WOUNDPLUS PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q4330	TOTAL PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q5138	INJECTION WEZLANA IV 1 MG	HCPCS - TEMP CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	G0520	NEW PT-CG DYAD DEM MOD CMPLX	HCPCS - PROC/PROF SERVICES (TE	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	G0524	EST PT-CG DYAD DEM LOW CMPLX	HCPCS - PROC/PROF SERVICES (TE	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	G0528	MGT EST PT DEM MOD-HI CMPLX	HCPCS - PROC/PROF SERVICES (TE	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0450U	ONC MM LC-MS/MS MONOC P-PRTN	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0452U	ONC BLDR MTHYL PENK LTE-QMSP	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0454U	RARE DS ID OPT GENOME MAPG	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0458U	ONC BRST CA S100 A8&A9 ELISA	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0870T	IMP SUBQ PRTL ASCTS PMP SYS	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0874T	RMVL PERTL ASCITES PMP SYS	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	C9901	ENDO DEFECT CLOSURE GI TRACT	HCPCS - C CODES - OUTPATIENT PP	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0474U	HERED PAN CA GSAP 88GENE NGS	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2024	12/31/2078			

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MMAI-Medicare/Medicaid	0877T	AUGMNT ALYS CH CT ILD W/O CT	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0881T	CRYOTHERAPY ORAL CAVITY	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0885T	COLSC FLX 1ST TNDSC DILAT	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0889T	PRSNLZ TRGT DVL ARHFCMRIGTBS	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0893T	N-INVAS ASSMT BLD OXYGNATION	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	0897T	N-INVAS AUGMNT ARRHYT ALYS	CATEGORY III CODES	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	90638	VACC QIRV MRNA 60MCG/.5ML IM	MEDICINE - VACCINES, TOXOIDS	YES	07/01/2024	12/31/2078			
MMAI-Medicare/Medicaid	90684	PCV21 VACCINE IM	MEDICINE - VACCINES, TOXOIDS	YES	06/17/2024	12/31/2078			
MMAI-Medicare/Medicaid	Q2055	IDECABTAGENE VICLEUCEL CAR	HCPCS - TEMP CODES	YES	01/01/2022	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	C9166	INJECTION SECUKINUMAB	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J1574	INJ GANCICLOVIR EXELA	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	J0893	INJ DECITABINE SUN PHARMA	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2023	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J0873	INJ DAPTOMYCIN (XELLIA)	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J1921	INJ LABETALOL HCL HIKMA 5MG	HCPCS - DRUGS (NOT ORAL)	NO	07/01/2023	07/01/2023			

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MMAI-Medicare/Medicaid	0204U	ONC THYR MRNA XPRSN ALYS 593	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	J0137	INJ ACETAMINOPHEN HIKMA	HCPCS - DRUGS (NOT ORAL)	NO	07/01/2023	07/01/2023			
MMAI-Medicare/Medicaid	J9046	INJ BORTEZOMIB DR REDDYS	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2023	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	C9113	INJECTION PANTOPRAZOLE SODIUM-VIAL	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0714T	TPLA B9 PRST8 HYPRPLSALT 50ML	CATEGORY III CODES	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	J0134	INJ ACETAMINOPHEN - FRESENIUS	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	Q4277	WOUNDPLUS MEMBRANE/E-GRFT PER SQ CM	HCPCS - TEMP CODES	EXPIRED	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J3371	INJ VANCOMYCIN HCL MYLAN	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	J2599	INJ VASOPRESSIN AM REG 1 U	HCPCS - DRUGS (NOT ORAL)	NO	07/01/2023	07/01/2023			
MMAI-Medicare/Medicaid	J2272	INJ MORPHINE FRESENIUS	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	J2780	INJ RANITIDINE HYDROCHLORIDE 25 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	J3372	INJ VANCOMYCIN HCL XELLIA	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	G9879	2 MDPP C MS ACHV AL 5PC WL MO 10-12	HCPCS - PROC/PROF SERVICES (TE	NO	04/01/2018	12/31/2023			
MMAI-Medicare/Medicaid	C9787	GASTRIC EPS MAPPING SIM PT SX PROF	HCPCS - C CODES-OUTPATIENT PP	EXPIRED	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	C9168	INJECTION MIRIKIZUMAB-MRKZ	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	G9877	2 MDPP CR MS MO 10-12 NOT AL 5PC WL	HCPCS - PROC/PROF SERVICES (TE	NO	04/01/2018	12/31/2023			
MMAI-Medicare/Medicaid	Q4210	AXOLOTL GFT/AXOLOTL DUALGFT P SQ CM	HCPCS - TEMP CODES	EXPIRED	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	J0401	INJ ABILIFY MAINTENA 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	J0173	INJ EPINEPHRINE BELCHER	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	J9393	INJ FULVESTRANT TEVA	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2023	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J0136	INJ ACETAMINOPHEN B BRAUN	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	G9876	2 MDPP CORE MS MO 7-9 NOT AL 5PC WL	HCPCS - PROC/PROF SERVICES (TE	NO	04/01/2018	12/31/2023			
MMAI-Medicare/Medicaid	J2184	INJ MEROPENEM B BRAUN	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	J2021	INJ LINEZOLID HOSPIRA	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0353U	IADNA CHLMYD&GONORR AMP PRB	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	10/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	G9878	2 MDPP C MS ACHV AL 5PC WL MO 7-9	HCPCS - PROC/PROF SERVICES (TE	NO	04/01/2018	12/31/2023			
MMAI-Medicare/Medicaid	J2281	INJ MOXIFLOXACIN FRES KABI	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	J3244	INJ TIGECYCLINE ACCORD	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	J1806	INJ ESMOLOL HCL WG CRIT CARE	HCPCS - DRUGS (NOT ORAL)	NO	07/01/2023	07/01/2023			
MMAI-Medicare/Medicaid	C9167	INJ ADAMTS13 RECOMBINANT-KRHN 10 IU	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	C9790	HISTOTRIPSY M RNL TISS INCL IMG GD	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	S0164	INJECTION PANTOPRAZOLE SODIUM 40 MG	HCPCS - TEMP NATIONAL CODES	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J9371	INJ VINCRISTINE SULF LIPOSOME 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9322	INJ PEMETREXED BLUEPOINT	HCPCS - CHEMO DRUGS	YES	07/01/2023	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	81479	UNLISTED MOLECULAR PATHOLOGY	PATH & LAB - CYTOGENETIC STUDI	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	E1392	PORTABLE OXYGEN CONCENTRATOR RENTAL	HCPCS - DME	NO	02/15/2018	05/09/2024	Other		
MMAI-Medicare/Medicaid	E0424	STATION COMPRS GASOUS O2 SYS RENT;	HCPCS - DME	NO	02/15/2018	05/09/2024	Other		
MMAI-Medicare/Medicaid	E1391	02 CONC 2 DEL 85PCT /GT 02 CONC FLW RATE	HCPCS - DME	NO	02/15/2018	05/09/2024	Other		
MMAI-Medicare/Medicaid	E0431	PRTBLE GASEOUS O2 SYS RENTAL;	HCPCS - DME	NO	12/01/2013	05/09/2024	Other		
MMAI-Medicare/Medicaid	E0434	PRTBLE LIQUID O2 SYS RENTAL;	HCPCS - DME	NO	12/01/2013	05/09/2024	Other		
MMAI-Medicare/Medicaid	E0601	CONTINUOUS POS AIRWAY PRESSURE DEVC	HCPCS - DME	NO	12/01/2013	05/09/2024	Other		
MMAI-Medicare/Medicaid	E0466	HOME VENT TYPE USED NON-INVASV INTF	HCPCS - DME	NO	01/01/2010	05/09/2024	Other		
MMAI-Medicare/Medicaid	E0465	HOME VENT ANY TYPE USED INVASV INTF	HCPCS - DME	NO	01/01/2010	05/09/2024	Other		
MMAI-Medicare/Medicaid	Q0224	INJECTION PEMIVIBART PRE-EP ONLY	HCPCS - TEMP CODES	NO	03/22/2024	03/22/2024			

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MMAI-Medicare/Medicaid	M0224	IV INFUSION PEMIVIBART PRE-EP ONLY	HCPCS - MEDICAL SERVICES	NO	03/22/2024	03/22/2024			
MMAI-Medicare/Medicaid	33281	REPOSG PHRNC NRV STIM TRNSVN	SURGERY - RESPIRATORY SYSTEM	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0799	FDA-APV RX USE HIV PRE-EXP PPX NOC	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	E0682	NONPNEUM SEQ COMPRES GRMNT FULL ARM	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	E0735	NONINVASIVE VAGUS NERVE STIMULATOR	HCPCS - DME	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4289	REVOSHIELD+ AMNIOTIC BARR PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4297	EMERGE MATRIX PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0426U	GENOME ULTRA-RAPID SEQ ALYS	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0430U	GI MALABS AAT CALPRO PNCRTC	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0434U	RX METAB ADVRS VRNT ALYS 25	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0438U	RX METAB ADVRS VRNT ALYS 33	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0817T	OPN INSJ/RPLCMT INS PTN SUBF	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0825T	TCAT RMV&RPL1CHMB LDLS PM RA	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J2508	INJ PEGUNIGALSIDASE ALFA-IWXJ 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J9333	INJECTION ROZANOLIXIZUMAB-NOLI 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	81458	SO GSAP DNA CPY NMBR&MCRSTL	PATH & LAB - MICROBIOLOGY	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	97037	APPL MODALITY 1+LLLT PO PAIN	MEDICINE - PHYSICAL MEDICINE A	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C1600	CATH TRANSL INTRAVASC LES DV BLD SH	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0423U	PSYC GENOMIC ALYS PNL 26 GEN	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	61889	INS SK-MNT CRNL NSTM PG/RCVR	SURGERY - NERVOUS SYSTEM	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D9938	FBR CSTM RMV CLR PLST TEMP AE APPL	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D9954	FBR & DEL OAT MRNG REPOS DEV	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	22837	ANT THRC VRT BODY TETHRG 8+	SURGERY-MUSCULOSKELETAL SYST	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4291	LAMELLAS XT PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4299	AMNICORE PRO+ PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0431U	GLY RCPTR ALPHA1 IGG SRM/CSF	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0435U	ONC CHEMO RX CYTOX CSC 14 RX	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0811T	REM MLT DAY UROFLOW SETUP	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0819T	REVJ/RMVL INS PTN SUBF	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0859T	NCNTC IFR SPCTRSC O/T PAD EA	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C1602	ORT/DV/DG MTRX/AB BON VOID FL AM-EL	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0420U	ONC URTHL MRNA XPRSN 6 SNP	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	0424U	ONC PRST8 XOM ALYS 53 SNCRNA	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	E0530	ELEC POSIT OSA TX W/SENSOR COMP ACC	HCPCS - DME	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	64596	INS/RPLCMT PRQ ELTRD RA PN 1	SURGERY - NERVOUS SYSTEM	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	E0681	NONPNEUM CMPR CNTRL WO CALIBR GRD P	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	E0734	EXT UP LMB TRMR STIM PERIP NRV WRST	HCPCS - DME	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0184	INJECTION AMISULPRIDE 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4288	DERMABIND CH PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4296	REBOUND MATRIX PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4304	GRAFIX PLUS PER SQ CM	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0787T	REVJ/RMVL NEA SAC W/NSTIM	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0816T	OPN INSJ/RPLCMT INS PTN SUBQ	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0824T	TCAT RMV 1CHMBR LDLS PM RA	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	81457	SO NEO GSAP DNA MCRSTL INS	PATH & LAB - MICROBIOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	82166	ASSAY ANTI-MULLERIAN HORM	PATH & LAB - CHEMISTRY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0864T	LOW NTSTY ESWT CORPUS CVRNSM	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	33288	RMV&RPLCMT PHRNC NRV STIM LD	SURGERY - RESPIRATORY SYSTEM	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	L5615	ADD ENDOSKL K-SHN 4 BAR LINK/MXAXL	HCPCS - PROSTHETIC PROCED	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	61891	REV/RPLCMT SK-MNT CRNL NSTM	SURGERY - NERVOUS SYSTEM	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	33276	INSJ PHRNC NRV STIM SYS	SURGERY - RESPIRATORY SYSTEM	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D9955	ORAL APPLIANCE TX TITRATION VISIT	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	52284	CYSTO RX BALO CATH URTL STRX	SURGERY - URINARY SYSTEM	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	81517	LIVER DS ALYS 3 BMRK SRM ALG	PATH & LAB - CYTOGENETIC STUDI	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	22838	REV RPLC/RMV THRC VRT TETHRG	SURGERY-MUSCULOSKELETAL SYST	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	86041	ACETYLCHOLN RCPTR BNDNG ANTB	PATH & LAB - IMMUNOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J1412	INJ VALOCTOCGN ROXAPRVOVC-RVOX Q ML	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4292	LAMELLAS PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4300	ACESSO TL PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0812T	REM MLT DAY UROFLOW DEV SPLY	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J2799	INJECTION RISPERIDONE 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C9793	3D PRDCT MOD GEN PPLN CRD PRC CT AG	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	E3000	SPEECH VOL MOD SYS INC ALL COMP&ACC	HCPCS - DME	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	G0012	INJ PREP DRG HIV PREV UNDER SKN/MSC	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	81462	SO GSAP CLL FR DNA/DNA&RNA	PATH & LAB - MICROBIOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0860T	NCNTC IFR SPCTRSC SCR PAD	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	L5926	ADD LE PRSTH ENDOSKL KD AK HD ROT U	HCPCS - PROSTHETIC PROCED	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	22836	ANT THRC VRT BODY TETHRG LT 7	SURGERY-MUSCULOSKELETAL SYST	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0391	INJECTION ARTESUNATE 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	64598	REVJ/RMVL NEA PN W/INT NSTIM	SURGERY - NERVOUS SYSTEM	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4298	AMNICORE PRO PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0818T	REVJ/RMVL INS PTN SUBQ	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0826T	PRGRMG EVL LDLS PM 1CHMBR IP	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D0396	3D PRINT OF 3D DENTAL SURFACE SCAN	HCPCS-DENTAL-Radiographs	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J9334	INJ EFGARTIGIMD AL 2 MG & HYAL-QVFC	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	81459	SO NEO GSAP DNA/DNA&RNA	PATH & LAB - MICROBIOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C7557	CTH PL CA CAG INJ CAG LT HC LT VNT	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0858T	EXT TRNSCRANL MAG STIMJ MEAS	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C1601	ENDO SING-USE PULM IMAGING/ILLUM DV	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	33278	RMVL PHRNC NRV STIM SYS	SURGERY - RESPIRATORY SYSTEM	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	D9957	SCREENING SLEEP RELATED BREATH D/O	HCPCS-DENTAL-Tests and Lab	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	E0492	PWR SRC&CTRL ELC ORL D NEUR ELC TNG	HCPCS - DME	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	86043	ACETYLCHOLN RCPTR MODLG ANTB	PATH & LAB - IMMUNOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	58580	TRANSCRV ABLTJ UTRN FIBRD RF	SURGERY - FEMALE GENITAL SYSTE	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0402	INJECTION ARIPIPRAZOLE 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	31243	NSL/SINUS NDSC CRYOABLTJ PNN	SURGERY - RESPIRATORY SYSTEM	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	E0679	NONPNEUM SEQ COMPRES GRMNT HALF LEG	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	E0732	CRANIAL ELECTROTH STM SYST ANY TYPE	HCPCS - DME	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	E1301	WHIRLPOOL TUB WALK-IN PORTABLE	HCPCS - DME	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4294	AMNIO QUAD-CORE PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4302	COMPLETE ACA PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0814T	PRQ NJX BIOD OSTEO MATRL FEM	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D7939	IDX OT USING DYN ROB ASST/DYN NAV	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	81464	SO GSAP CLL FR MCRSTL INS	PATH & LAB - MICROBIOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	96548	NTRAOP HIPEC PX EA ADD 30MIN	MEDICINE - INJECTION	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0862T	RLCJ PG WCS LV BATTERY ONLY	CATEGORY III CODES	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	A7023	MEC ALLRG PRT BAR/INH FILT CR NAS T	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	61892	RMV SK-MNT CRNL NSTM PG/RCVR	SURGERY - NERVOUS SYSTEM	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	33277	INSJ PHRNC NRV STIM TRANSVNS	SURGERY - RESPIRATORY SYSTEM	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D9956	ADM OF HOME SLEEP APNEA TEST	HCPCS-DENTAL-Tests and Lab	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	86042	ACETYLCHOLN RCPTR BLCKG ANTB	PATH & LAB - IMMUNOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J1304	INJECTION TOFERSEN 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J1413	INJ DLNDSTRGN MOXPRVVC-ROKL Q THR D	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	31242	NSL/SINUS NDSC RF ABLTJ PNN	SURGERY - RESPIRATORY SYSTEM	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	E0678	NONPNEUM SEQ COMPRES GRMNT FULL LEG	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4293	ACESSO DL PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4301	ACTIVATE MATRIX PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0432U	KLHL11 ANTB SR/CSF ASY QUAL	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0436U	ONC LNG PLSM ALYS 388 PRTN	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0813T	EGD VOL ADJMT BARIATRIC BALO	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	E0493	ORAL DVC NM ELC STIM TONGUE MUSC 90	HCPCS - DME	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J3401	BEREMAGENE GEPERPAVEC-SVDT TOP ADM	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	81463	SO GSAP CL FR CPY NMBR&MCRST	PATH & LAB - MICROBIOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	A4468	EXSUFFLATION BELT INCL ALL SUPL&ACC	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	96547	INTRAOP HIPEC PX 1ST 60 MIN	MEDICINE - INJECTION	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C1604	GFT TRANSM TV ART BYP W/ALL SYS CMP	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0421U	ONC CLRCT SCR SGL AMP 8 RNA	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	67516	SPRCHOROIDAL SPC NJX RX AGT	SURGERY - EYE AND OCULAR ADNEX	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	27278	ARTHRD SI JT PRQ WO TFXJ DEV	SURGERY-MUSCULOSKELETAL SYST	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0217	INJECTION VELMANASE ALFA-TYCV 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	E0680	NONPNEUM COMPR CNTRL W/CALIBR GRD P	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	E0733	TRANSQ ELEC NRV STM ELEC TRIGEM NRV	HCPCS - DME	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	86366	MUSCLE-SPECIFIC KINASE ANTB	PATH & LAB - IMMUNOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4279	VENDAJE AC PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4287	DERMABIND DL PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4295	AMNIO TRI-CORE AMNIOTIC PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4303	COMPLETE AA PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0425U	GENOM RPD SEQ ALYS EA CMPRTR	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	0429U	HPV OROP SWAB 14 HI-RISK TYP	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0433U	ONC PRST8 5 DNA REG MRK PCR	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0437U	PSYC ANXIETY DO MRNA 15 BMRK	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0815T	US REMS B1 DNS HIPS PLVS/SPI	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0823T	TCAT INS 1CHMBR LDLS PM RA	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	A4540	DISTAL TRANSCUT ELECTRICAL NRV STIM	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0790T	REVJ RPLCMT/RMVL VRT TETHRG	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0863T	RLCJ PG WCS LV TRNSMTR ONLY	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	33287	RMV&RPLCMT PHRNC NRV STIM PG	SURGERY - RESPIRATORY SYSTEM	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0422U	ONC PAN SOLID TUM ALYS DNA	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	90589	CHIKUNGUNYA VACCINE LIVE IM	MEDICINE - VACCINES, TOXOIDS	NON-COV	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J9052	INJ CAR NOT THR EQV TO J9050 100 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9286	INJECTION GLOFITAMAB-GXBM 2.5 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J9321	INJECTION EPCORITAMAB-BYSP 0.16 MG	HCPCS - CHEMO DRUGS	YES	01/01/2010	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9324	INJECTION PEMETREXED 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J2801	INJ RYKINDO 0.5 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J9376	INJ POZELIMAB-BBFG 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	L1320	PECTUS CARINATUM ORTHO CUST FAB	HCPCS - ORTHOTIC PROCEDURES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0441U	NFCT DS BCT FNGL/VIRAL SEMIQ	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0445U	ABETA42 & PTAU181 ECLIA CSF	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0449U	CAR SCR SEV INH COND 5 GENES	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4310	PROCENTA PER 100 MG	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0589	INJ DAXIBOTULINUMTOXINA-LANM	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q5134	INJ TYRUKO 1 MG	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4305	AMER AMNION AC TRI-LAY PER SQ CM	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	E2298	PWR SEAT ELEV SYS FOR CRT	HCPCS - DME	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J7165	INJ HUMAN-LANS PER I.U	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	J1202	MIGLUSTAT ORAL 65 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C9796	RPR INTST EXCL ANRECT FISTULA	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	A9293	FERTILITY CYCLE TRACKING SOFTWARE	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	K1037	DOCKING STATION FOR ORAL DEV/APPL	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J7354	CANTHARIDIN TOP APPLICATOR	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	E0738	UPPER EXTREMITY REHAB	HCPCS - DME	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0439U	CRD CHD DNA ALYS 5 SNP 3 DNA	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0440U	CRD CHD DNA ALYS 10 SNP 6DNA	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0444U	ONC SLD ORGN NEO TGSAP 361	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0177	INJ AFLIBERCEPT HD 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4308	SANOPELLIS PER SQ CM	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	A2026	RESTRATA MINIMATRIX 5 MG	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	A4594	NEUROMOD ADJ REHAB MOUTHPIECE	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	E0468	HOME VENT DUAL FNCT INCL ALL ACCESS	HCPCS - DME	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0578	INJ BRIXADI MORE THAN 7 DAY	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J2782	INJ AVACINCAPTAD PEGOL 0.1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	J1203	INJ CIPAGLUCOSIDASE 5 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q5133	INJ TOFIDENCE 1 MG	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	S9002	INTRA-VAG MOTION SENS BIOFEEDBACK	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0442U	NFCT DS RESPIR NFCTJ MXA&CRP	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0446U	AI DS SLE ALYS 10 CYTOKINE	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	S4988	PENILE CONTRACTUR DEVICE MANUAL	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0209	INJ SODIUM THIOSULFATE	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	E0736	TRANSCUT TIBIAL NERVE STIMULATOR	HCPCS - DME	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4307	AMERICAN AMNION PER SQ CM	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	A4593	NEUROMOD STIM SYS ADJ REHAB CTRL	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4290	MEMBRANE WRAP-HYDRO TM PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J3425	HYDROXOCOBALAMIN IM 10 MCG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	E2001	SUCTION PUMP EXT MGMT SYS	HCPCS - DME	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J9255	INJ MTX NOT THER EQV J9260 50 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	E0152	WALKER BATTERY POWER WHEELS	HCPCS - DME	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	L5783	ADD LOW EXT MEC LIMB VOL MGMT SYS	HCPCS - PROSTHETIC PROCED	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	L5841	ADDITION ENDOSKLETAL KNEE-SHIN	HCPCS - PROSTHETIC PROCED	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	H0051	TRADITIONAL HEALING SERVICE	HCPCS - PROC/PROF SERVICES (TE	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0577	INJ BRIXADI 7 DAYS OR LESS	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0443U	NEURFLMNT LT CHN ULTRSENSIA	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0447U	AI DS SLE ALYS 11 CYTOKINE	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4306	AMERIC AMNION AC PER SQ CM	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4309	VIA MATRIX PER SQ CM	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J1323	INJ ELRANATAMAB-BCMM 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J1434	INJ FOCINVEZ 1MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J2277	INJ MOTIXAFORTIDE 0.25 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	J3055	INJ TALQUETAMAB-TGVS 0.25 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9073	INJ CYCLOPHOSPHAMD INGENUS	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9074	INJ CYCLOPHOSPHAMD SANDOZ	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9075	INJ CYCLOPHOSPHAMIDE NOS	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9248	INJ MELPHALAN HEPZATO 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9249	INJ MELPHALAN APOTEX 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J3424	INJ HYDROXOCOBALAMIN IV 25MG	HCPCS - DRUGS (NOT ORAL)	NO	04/01/2024	04/01/2024			
MMAI-Medicare/Medicaid	J2919	INJ METHYLPRED SOD SUCC 5MG	HCPCS - DRUGS (NOT ORAL)	NO	04/01/2024	04/01/2024			
MMAI-Medicare/Medicaid	J1010	INJ METHYLPREDNISOLONE ACETATE 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	04/01/2024	04/01/2024			

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MMAI-Medicare/Medicaid	J0652	INJ LEVOTHYROXINE HIKMA	HCPCS - DRUGS (NOT ORAL)	NO	04/01/2024	04/01/2024			
MMAI-Medicare/Medicaid	J0651	INJ LEVOTHYROXINE FRESKABI	HCPCS - DRUGS (NOT ORAL)	NO	04/01/2024	04/01/2024			
MMAI-Medicare/Medicaid	J0650	INJ LEVOTHYROXINE NOS 10MCG	HCPCS - DRUGS (NOT ORAL)	NO	04/01/2024	04/01/2024			
MMAI-Medicare/Medicaid	G0138	IV INFUS CIPAGLUCOSIDASE ALFA-ATGA	HCPCS - PROC/PROF SERVICES (TE	NO	04/01/2024	04/01/2024			
MMAI-Medicare/Medicaid	E2104	GLUCOSE MONITOR W CARTRIDGE	HCPCS - DME	NO	04/01/2024	04/01/2024			
MMAI-Medicare/Medicaid	C9797	VASC EMB/OCC W/PRS-GEN CATH	HCPCS - C CODES - OUTPATIENT PP	NO	04/01/2024	04/01/2024			
MMAI-Medicare/Medicaid	A4564	PESSARY DISPOSABLE ANY TYPE	HCPCS - MED-SURG SUPPLIES	NO	04/01/2024	04/01/2024			
MMAI-Medicare/Medicaid	A4438	ADHESIVE CLIP EXT ENS CONTROL	HCPCS - MED-SURG SUPPLIES	NO	04/01/2024	04/01/2024			
MMAI-Medicare/Medicaid	A4271	HOME LANCING/TEST CARTRIDGES	HCPCS - MED-SURG SUPPLIES	NO	04/01/2024	04/01/2024			
MMAI-Medicare/Medicaid	J2920	INJ METHYLPRDNISOLON SODIM TO 40 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	0416U	IADNA GU PTHGN 20BCT&FNG ORG	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C9161	INJECTION AFLIBERCEPT HD 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	0354U	HPV HI RSK QUAL MRNA E6/E7	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	10/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	C9162	INJECTION AVACINCAPTAD PEGOL 0.1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9164	CANTHARIDIN TOP ADM 0.7PCT , SGL UN DS	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9159	INJ PRO CPLX C BALFAXAR P/IU FCT IX	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			

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MMAI-Medicare/Medicaid	C9163	INJECTION TALQUETAMAB-TGVS 0.25 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9250	METHOTREXATE SODIUM 5 MG	HCPCS - CHEMO DRUGS	EXPIRED	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	E2300	WC ACC PWR SEAT ELEV SYS ANY TYPE	HCPCS - DME	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	A4562	PESSARY REUSABLE NON RUBBER	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J9260	INJ METHOTREXATE SODIUM 50 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9070	CYCLOPHOSPHAMIDE 100 MG	HCPCS - CHEMO DRUGS	EXPIRED	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J0612	INJ CALCIUM GLUCONATE NOS	HCPCS - DRUGS (NOT ORAL)	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J0208	INJ PEDMARK 100 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/01/2023	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J3380	INJ VEDOLIZUMAB IV 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	06/24/2020	12/31/2078	Regulatory Compliance		
MMAI-Medicare/Medicaid	C9160	INJEC DAXIBOTULINUMTOXINA-LANM 1 UN	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			

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MMAI-Medicare/Medicaid	J1040	INJ METHYLPRDNISOLONE ACTAT 80 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	J9071	INJ CYCLOPHOSPHAMD AUROMEDICS 5 MG	HCPCS - CHEMO DRUGS	YES	01/01/2010	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9029	INSTILL ADSTILADRIN TX DOSE	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2023	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J1030	INJ METHYLPRDNISOLONE ACTAT 40 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	J1850	INJ KANAMYCIN SULFATE TO 75 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4561	PESSARY REUSABLE RUB ANY TYPE	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0613	CALCIUM GLUCON WG CRITICAL	HCPCS - DRUGS (NOT ORAL)	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J2930	INJ METHYLPRDNISLN SODIM TO 125 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	J0576	INJ BUPRENORPHINE EXT-RELEASE 1 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	J1020	INJ METHYLPRDNISOLONE ACTAT 20 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	95024	IQ TESTS W/ALLERGENIC XTRCS	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9165	INJECTION ELRANATAMAB-BCMM 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J7516	INJ CYCLOSPORINE 250 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2020	12/04/2020			

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MMAI-Medicare/Medicaid	Q4244	PROCENTA PER 200 MG	HCPCS - TEMP CODES	EXPIRED	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	J1840	INJ KANAMYCIN SULFATE TO 500 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H2019	THERAPEUTIC BEHAVIORAL SRVC 15 MIN	HCPCS - ALCOHOL/DRUG ABUSE	NO	09/02/2014	02/18/2024	Regulatory Compliance		
MMAI-Medicare/Medicaid	G9885	2 MDPP OM S ATD BNF MO 22-24 U EM	HCPCS - PROC/PROF SERVICES (TE	NO	04/01/2018	12/31/2023			
MMAI-Medicare/Medicaid	G9875	9 T MDPP COR SESS ATD MDPP B UND EM	HCPCS - PROC/PROF SERVICES (TE	NO	04/01/2018	12/31/2023			
MMAI-Medicare/Medicaid	G9881	MDPP BNF ACHV AL 9PCT WL MO 1-24 U EM	HCPCS - PROC/PROF SERVICES (TE	YES	04/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	G9882	2 MDPP O MS ATD BNF MO 13-15 U EM	HCPCS - PROC/PROF SERVICES (TE	NO	04/01/2018	12/31/2023			
MMAI-Medicare/Medicaid	G9884	2 MDPP OM S ATD BNF MO 19-21 U EM	HCPCS - PROC/PROF SERVICES (TE	NO	04/01/2018	12/31/2023			
MMAI-Medicare/Medicaid	G9880	MDPP BNF ACHV AL 5PCT WL MO 1-12 U EM	HCPCS - PROC/PROF SERVICES (TE	YES	04/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	G9873	1ST MDPP COR SESS ATD MDPP B UND EM	HCPCS - PROC/PROF SERVICES (TE	NO	04/01/2018	12/31/2023			
MMAI-Medicare/Medicaid	G9890	BRDG PMT:1ST MDPP SPL BNF M 1-24 EM	HCPCS - PROC/PROF SERVICES (TE	NO	04/01/2018	12/31/2023			
MMAI-Medicare/Medicaid	G9874	4 T MDPP COR SESS ATD MDPP B UND EM	HCPCS - PROC/PROF SERVICES (TE	NO	04/01/2018	12/31/2023			
MMAI-Medicare/Medicaid	G9891	MDPP S RPT LN-I CLM PAYABL MDPP EM	HCPCS - PROC/PROF SERVICES (TE	YES	04/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	G9883	2 MDPP OM S ATD BNF MO 16-18 U EM	HCPCS - PROC/PROF SERVICES (TE	NO	04/01/2018	12/31/2023			
MMAI-Medicare/Medicaid	93462	L HRT CATH TRNSPTL PUNCTURE	MEDICINE - CARDIOVASCULAR	NO	10/03/2016	10/29/2023			
MMAI-Medicare/Medicaid	81528	ONCOLOGY COLORECTAL SCR	PATH & LAB - MICROBIOLOGY	NO	01/01/2010	01/01/2016			

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MMAI-Medicare/Medicaid	81163	BRCA1&2 GENE FULL SEQ ALYS	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023	Other		
MMAI-Medicare/Medicaid	G9888	MAINTENANCE 5PCT WL FRM BL WT MO 7-12	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	G9887	BEHAVIORAL CNSLG DIA PREV DL 60 MIN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	G9886	BEHAV CNSLG DIA PREV IP GRP 60 MIN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	D9939	PLCMT CSTM RMV CLR PLST TEMP AE APP	HCPCS - DENTAL	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	D7284	EXCISIONAL BX OF MINOR SALIVARY GLD	HCPCS - DENTAL	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	D6089	ACC & RETORQ LOOSE IMPL SCR-PER SCR	HCPCS - DENTAL	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	D2991	APPL HAP REGEN MEDICAMENT PER TOOTH	HCPCS - DENTAL	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	D2989	EXC TT RSLT DETERM NON-RSTRBILITY	HCPCS - DENTAL	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	D2976	BAND STABILIZATION-PER TOOTH	HCPCS-DENTAL-Orthodontic	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	D1301	IMMUNIZATION COUNSELING	HCPCS-DENTAL-Office Visits	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1370	REHAB SPT MSK CARE MIPS VALUE PATH	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1369	QC MH & SUBST USE D/O MIPS VAL PATH	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1368	PREV&TX INF D/O HEPC & HIV MIPS VAL	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1367	QC FOR TX OF ENT D/O MIPS VAL PATH	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1366	FOCUSING ON WH MIPS VALUE PATHWAY	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	M1365	PT ENC DUR PERF PER HPC SP CODE 17	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1364	CALC 10-YR ASCVD RS EQU 20PCT PERF PER	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1363	PT NO F/U ASSMT WI 120 DA IDX ASSMT	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1362	PATIENTS WHO DIED DURING MMT PRD	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1361	SR BSD ON CLIN EVAL/CLIN-RATED TOOL	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1360	S/I A/O BEHAV SX BSD ON C-SSRS	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1359	IDX ASMT DNM PD SI A/O BX SX/INC SR	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1358	PT NO RD S/I A/O BX F/U ASMT 120 DA	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1357	PT RED S/I A/O BX F/U ASMT WI 120 D	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1356	PATIENTS WHO DIED DURING MMT PRD	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1355	SR BSD ON CLIN EVAL/CLIN-RATED TOOL	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1354	PT NO SUI SP INIT REV/UPD/REV & UPD	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1353	PTS NO CMPL SUI SP INIT REV/UPD	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1352	SI A/O BX SX BSD ON C-SSRS/EQ AX	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1351	PTS SUI SP INIT REV/UPD & REV & UP	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1350	PT CMPL SUI SP INIT REV/UPD BY CLIN	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	M1342	PATIENTS WHO DIED DURING PERF PRD	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1341	PT NO F/U ASMT/NO ASMT I 30 -180 D	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1340	IDX ASMT CMPL USE 12-ITM WHODAS 2.0	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1339	PT F/U ASMT 30-180 D AFT ASMT POS	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1338	PT F/U ASMT 30-180 DA P ASMT NO POS	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1337	ACUTE PVD	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1336	PT APP EV INI EX&RE-EV NO LTR 2 WK	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1335	DOCUMENTATION PT RSN NO F/U EXAM	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1334	PT PO ENC E AC PVD 2 WK B4/2 WK AFT	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1333	ACUTE VITREOUS HEMORRHAGE	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1332	PT NO EV INI EX A/O NO RE-EV I 2 WK	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1331	PT EV INI EX&RE-EV NLT 8 WKS INI EX	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1330	DOC PATIENT REASON FOR NO F/U EXAM	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1329	PTS PO ENC E AC PVD 2 WKS B4/8 WKS	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1328	PATIENTS WITH DX ACUTE VITREOUS HEM	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1327	PT NO EV INI EX A/O NO RE-EV I 8 WK	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	M1326	PATIENTS WITH DIAGNOSIS OF HYPOTONY	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1325	PT NOT SN RSN DOC CLIN PT/MED RSN	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1324	PATIENTS HAD IVTA/PERIOCULR CS INJ	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1323	PTS SN I 7 WKS FLW INJ&SCR&POC DOC	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1322	PT SN I 7 WKS FLW INJ&SCR DOC INJ E	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1321	PTS NOT SN I 7 WKS FLW INJ IOP ND	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1320	PT WHO SCR POS FOR AL 1 OF 5 HRSNS	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1319	PT DOC CONT W/CSP 1 SCR POS HRSNS	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1318	PT NO DOC CTC CSP 1 SCR POS HRSNS	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1317	PT CN ON CON CSP & EXPLCTLY OPT OUT	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1316	CURRENT TOBACCO NON-USER	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1315	CRC SCR RSLT NOT DOC & REV; RSN NOS	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1314	BMI NOT DOCUMENTED & NO REASON GVN	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1313	TOB SCR NOT PERF/TC INT NOT PRVD	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1312	PATIENT NOT SCRN FOR TOBACCO USE	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1311	ANAPHYL D/T VACC ON/B4 DATE OF ENC	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	M1310	PT SCR TU & RCVD TC INT IF TOB USER	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1309	PC SVCS PRVD PT ANY TM DUR MSMT PRD	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1308	INFLUENZA IMMUN WAS NOT ADM NO RSN	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1307	DOC PT RCVD/CURR RCVG PALLIATIVE/HC	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1306	PT ANA D/T PV ANY T DUR/B4 MSMT PRD	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1305	PT RCVD PCV/PS VACC ON/AFT 19TH BD	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1304	PT NOT RCV PV/PS VACC ON/AFT 19 BD	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1303	HS SRVC PRVD PT ANY T DUR MSMT PRD	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1302	SCR DX 3D MAMMO RSLT DOC & REV	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1301	PT ID TU REC TC INT MMT PD/6 MO PRI	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1300	INFLUENZA IMMUN NOT ADMIN RSNS DOC	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1299	INFLUENZA IMMUN ADMIN/PREV RECVD	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1298	DOC PT PREG MSMT PRD PRI & CURR ENC	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1297	BMI NOT DOC MED RSN/PT REFUS HT/WT	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1296	BMI DOC I NML PARMS&NO F/U PLN REQD	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1295	PT DX/PAST HX TOTAL COLECTOMY/CRC	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	M1294	NORMAL BP READING DOC F/U NOT REQD	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1293	BMI DOC AN PARAMETERS & F/U PLN DOC	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1291	PT 66 YOA&GT 1 CLM FRLTY&DEMNTIA MED	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1290	PT NOT ELIGIBLE D/T ACT DX OF HTN	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1289	PT ID TU NO TC INT MSMT PRD/6 M PRI	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1288	DOC RSN NOT SCR/RECOM F/U FOR HI BP	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1287	BMI DOC BELOW NML PRAM&F/U PLAN DOC	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1286	BMI DOC OS NML PRM F/U NOT CMPL MR	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1285	SCR DX 3D MAMMO RSLT NO DOC RSN NOS	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1283	PT SCR FOR TU & ID AS TOBACCO USER	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1282	PT SCR TU & ID AS TOBACCO NON-USER	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1281	BLOOD PRESS RDG NO DOC RSN NOT GVN	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1280	WOMEN WHO HAD BIL MAST/HX BIL MAST	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1279	ELEV/HYP BP DOC INDC F/U NOT DOC NR	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1278	ELEV/HYP BP RDG DOC & INDIC F/U DOC	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1277	COLORECTAL CA SCR RSLT DOC & REV	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	M1276	BMI DOC OS NML PRM NO F/U DOC NO R	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1275	PT DET HS EXCL MO EV&REM REPRT PRD	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1274	PTS ADM SNF M EVAL EXCL FRM THAT MO	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1273	PT ADM SNF 1 Y DI INIT CMS-2728 FRM	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1271	PT W/DEMENTIA ANY TM PRI TO/DUR MO	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1270	PTS NO K/ K/P TWL AO LD Q M MMT PD	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1269	RECV ESRD MCP DI SRVC PROV LD REP M	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1266	PATIENTS ADMITTED TO A SNF	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1265	CMS ME FRM 2728 DLYS PTS:FORM CMPL	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1263	PT IN HS ON INI DLYS DT/DUR MO EVAL	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1262	PT HAD TPLNT PRI TO INIT DIALYSIS	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1261	PT ON K OR K/P WL PRI TO INIT DYLS	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1258	CVD RISK ASSMT PERF HAVE DOC CR SC	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1257	CVD RISK ASSMT NOT PERF/INC RSN NOS	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1256	PRIOR HISTORY OF KNOWN CVD	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1255	PT RSN VST CLIN NOT PG&POS PT NO OB	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	M1254	PT DECD WHEN HU SURV REACHED THEM	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1253	PT RESP ON PT HU SURV NOT RECV CARE	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1252	PT NOT CMPL 1 OF 4 PT EXP SURV ITM	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1251	PT PRXY CMPL SURV ON BEHALF ANY RSN	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1250	PT RP TRU PT FLT HRD&UNDRSTD BY PRV	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1249	PT RP TRE PT FLT PRV UNDSTD IMP IMF	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1248	PT RP TRUE PT SAW ME NOT MED PRB	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1247	PT RP TRUE PT FLT PROV PUT MY BI MC	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1246	PT RSP NOT TRU PROV UNDRSTD IMP IML	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1245	PT RSP NOT TRU PRV SAW ME NO MED PR	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1244	PT RSP NOT TRUE PT FLT PRV MY BI MC	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1243	PT RSP NOT TRUE PT FELT HRD&UNDRSTD	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1242	PT NOT RP PT FLT PRV UNDSTD IMP IML	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1241	PT NOT RP PRV SAW ME NOT MED PROB	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1240	PT NOT RP PT FELT PROV PUT MY BI MC	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1239	PT DID NOT RSP PT FELT HRD BY PROV	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	M1238	DOC NO 2ND RZV D/T REC 2-6 MO B/W D	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1237	PT RSN NO SCR FOOD INSEC HSG INSTAB	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1236	BASELINE MRS GT 2	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1235	DOC/PT REP HCV AB/HCV RNA B4 PER PD	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1234	PT REAC HCV AB&F/U VT NO HCV VRMIA	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1233	PT NO HCV AB/RECV HCV RSLT DOC NR	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1232	PT RECEIV HCV AB TEST W/REACT RSLT	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1231	PATIENT RECEIV HCV AB TST W/NR RSLT	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1230	PT RCTV HCV AB&NO F/U VT/RCTV AB	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1229	PT RCTV HCV AB & F/U VT DE VREMIA	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1228	PT RCTV HCV AB&F/U VT VRMIA HCV TX	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1227	EVIDENCE-BASED TX WAS PRESCRIBED	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1226	IOP MEASUREMENT NOT DOC REASON NOS	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1225	IOP RED BY VAL GT /EQU 20PCT PRE-INT LVL	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1224	IOP REDUCED BY LT 20PCT PRE-INT LEVEL	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1223	GLAUCOMA PLAN OF CARE DOCUMENTED	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	M1222	GLAUCOMA POC NOT DOC RSN NOS	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1221	DRE INT OPH/OPTM/AI INT DOC;NO RET	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1220	DRE EX INT OPH/OPTM/AI INT DOC;RET	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1218	PATIENT HAS COPD SYMPTOMS	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1217	DOC SYS RSN NOT DOC & REV SP RSLTS	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1216	NO SP RSLT CFM AFO DOC A/O NO SP PR	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1215	DOC MED RSN NOT DOC & REV SP RSLT	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1214	SP RSLT CONF AIRFLOW OBS DOC & REV	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	M1213	NO HX SP RESULTS WITH CONFD AF OBS	HCPCS - MEDICAL SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	L3161	FOOT ADDUCTUS POSITIONING DEVC ADJ	HCPCS - ORTHOTIC PROCEDURES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	J2679	INJECTION FLUPHENAZINE HCL 1.25 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	J2404	INJECTION NICARDIPINE 0.1 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	J1939	INJECTION BUMETANIDE 0.5 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	J1596	INJECTION GLYCOPYRROLATE 0.1 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	J1105	DEXMEDETOMIDINE ORAL 1 MCG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	J0751	EMT 200MG AND TFV AF 25MG ORAL	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2024	01/01/2024			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	J0750	EMT 200MG AND TFV DF 300MG ORAL	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	J0688	INJ CEZ NOT THR EQV TO J0690 500 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	G0146	PRINC ILL NAV-PEER SUP ADD 30MN/MON	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	G0140	PRINC ILLNESS NV-PEER SUP 60MIN/MON	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	G0137	INT OP SERV WK BUND MIN 9SRV OVR 7D	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	G0136	ADM STD EVD-BAS SOC DET RISK 5-15MI	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	G0024	PRINC ILLNESS NAV SRV ADD 30MIN/MON	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	G0023	PRINC ILLNESS NAV SRV 60MIN CAL MTH	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	G0022	COMM HLTH INTEG SRV E ADD 30MIN MTH	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	G0019	COM HEALTH INTEGR SRV 60MIN PER MTH	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	G0018	PSYCHO CRISIS FURN APP ADDL 30 MIN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	G0017	PSYCHTH CRISIS APP SITE SRV 1ST 60M	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	G0013	IND COU PREP STAFF PRV HIV/HIV RISK	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	C7903	GRP PSY DX EV/TX MH/SUBST USE DISOR	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	C7560	ERCP REM FB/ST BIL/PD CN PAP PC/CBD	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	C7556	BRONC RIFL W/BAL&TRN EBUS DX/TX FLR	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2024	01/01/2024			

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MMAI-Medicare/Medicaid	C1603	RETRIEVAL DEVICE INSERTABLE LASER	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A9609	FLUDEOXYGLUCOSE F18 UP TO 15 MCI	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A9608	FLOTUFOLASTAT F18 DIAGNOSTIC 1 MCI	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6610	GD CMP STK B KNEE 18-30MM HG CUST E	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6609	GRADIENT COMPRESSION BANDAG SUP NOS	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6608	GD CMP BD TUB PRO AB PD LY P/Y A WI	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6607	GD CMP BDG TUB PRO ABS LY P/Y ANY W	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6606	GD CMP BDG SUP PD TXT P/YD ANY W EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6605	GD CMP BDG SUP PAD FM P/YD ANY W EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6604	GD CMP BDG LW DNS FLT FM P/250SQ CM	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6603	GD CMP BDG LW DENS CH FM P/250SQ CM	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6602	GD CMP BDG HI DNS FM ROLL P/Y ANY W	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6601	GD CMP BDG HI DNS FM PD ANY SZ/SH E	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6600	GD CMP BDG HI DNS FM S P/250SQ CM E	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6599	GD CMP BG ROLL INEL SHT STR P/Y W E	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6598	GD CMP BG ROLL EL MD STR P/LN Y W E	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			

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MMAI-Medicare/Medicaid	A6597	GD CMP BG ROLL EL LNG STR LIN Y W E	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6596	GD CMP BDG CONF GZ P/LIN YD ANY W E	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6595	GD CMP BDG SP LNR UP EXT ANY SZ/L E	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6594	GD CMP BDG SP LNR LW EXT ANY SZ/L E	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6593	ACC GRD CPRSN GMT/WRP ADJ STRAP NOS	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6589	GRADIENT PRES WRAP ADJ STRAP BRA EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6588	GRADIENT PRES WRAP ADJ STRAP ARM EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6587	GRADIENT PRES WRAP ADJ STRP FOOT EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6586	GRAD PRS WRP ADJ STRAPS FULL LEG EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6585	GRAD PRES WRP ADJ STRAP ABV KNEE EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6584	GRADIENT COMPRS WRAP ADJ STRAPS NOS	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6583	GD CP WP ADJ STR B KNEE 30-50MMHG E	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6582	GRADIENT COMPRESSION GAUNTLET EACH	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6581	GRADIENT COMPRESSION GLOVE EACH	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6580	GRADIENT COMPR GLOVE CUST HVY WT EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6579	GRADIENT COMPR GLOVE CUST MED WT EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			

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MMAI-Medicare/Medicaid	A6578	GRADIENT COMPRESSION ARM SLEEVE EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6577	GRAD COMP ARM SLEEVE CUST HVY WT EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6576	GRAD CMP ARM SLV CUST MED WEIGHT EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6575	GRAD COMPR ARM SLEEVE&GLOVE COMB EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6574	GRAD CMP ARM SLEEVE&GLV CMB CUST EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6573	GRAD COMPR GARMENT TOE CAPS CUST EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6572	GRADIENT COMPRESS GRMNT TOE CAPS EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6571	GRAD COMPR GRMT GENITAL REG CUST EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6570	GRADIENT COMPR GRMNT GENITAL REG EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6569	GRAD COMPR GMT TORSO/SHLDR CUSTM EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6568	GRADIENT COMPR GRMNT TORSO&SHLDR EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6567	GRAD COMPR GARMNT NECK/HEAD CUST EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6566	GRADIENT COMPR GARMENT NECK/HEAD EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6565	GRADIENT COMPR GAUNTLET CUSTOM EACH	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6564	GD CMP STK WAIST L 40MMHG ORLT CST E	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6563	GD CMPR STK WAIST L 30-40MMHG CST E	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			

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MMAI-Medicare/Medicaid	A6562	GD CMPR STK WAIST L 18-30MMHG CST E	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6561	GD CP ST FULL L/CP ST 40MMHG ORLT C E	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6560	GD CMP STK FULL L/CHP 30-40MMHG C E	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6559	GD CMP STK FULL L/CHP 18-30MMHG C E	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6558	GD CMP STCK TH LEN 40MMHG ORLT CST E	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6557	GD CMP STCK THIGH L 30-40MMHG CST E	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6556	GD CMP STCK THIGH L 18-30MMHG CST E	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6555	GD CMP STCK B KNEE 40MMHG ORLT CST EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6554	GRD CMP STCK B KNEE 40 MMHG ORLT EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6553	GD CMP STCK B KNEE 30-40MMHG CST EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6552	GRD CMP STCK BLW KNEE 30-40MM HG EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6529	GRAD CMPR GRMT BRA NIGHT USE CST EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6528	GRADNT COMPR GRMNT BRA NIGHT USE EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6527	GRAD CMPR GMT F LG&FT PAD NT CST EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6526	GRAD CMPR GMT F LG&FT PAD NT USE EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6525	GD CMPR GMT LW LG&FT PAD NOT CST EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			

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MMAI-Medicare/Medicaid	A6524	GD CMPR GMT LWR LG&FT PAD NT USE EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6523	GD COMPR GMT ARM PAD NT USE CUST EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6522	GRAD CMPR GMT ARM PAD FOR NT USE EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6521	GD COMPR GMT GLV PAD NT USE CUST EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A6520	GRAD COMPR GMT GLV PADDED NT USE EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A4542	SUPPL&ACC EXT UPPR LIMB TREMOR STIM	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A4541	MONTHLY SUPPLIES USE DVC CODE E0733	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A4457	ENEM TUBE W/WO ADPT ANY RPL ONLY EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	A4287	DSP COL&STG BG BRST MK ANY SZ/TY EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0866T	QUAN MRI ALYS BRN W/DX MRI	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0857T	OPTO-ACOUSTIC IMG BREAST UNI	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0856T	DGTZ GLS MCRSCP ELECTRON MIC	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0855T	DGTZ GLS MCRSCP B1 MAROW SMR	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0854T	DGTZ GLS MCRSCP BLD SMR PRPH	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0853T	DGTZ GLS MCRSCP MPHMTRC EA M	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0852T	DGTZ GLS MCRSCP MPHMTRC EA 1	CATEGORY III CODES	NO	01/01/2024	01/01/2024			

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MMAI-Medicare/Medicaid	0851T	DGTZ GLS MCRSCP MPHMTRC 1ST	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0850T	DGTZ GLS MCRSCP ISH EA MULT	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0849T	DGTZ GLS MCRSCP ISH EA ADL 1	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0848T	DGTZ GLS MCRSCP ISH 1ST	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0847T	DGTZ GLS MCRSCP XM ARCH TISS	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0846T	DGTZ GLS MCRSCP IMFLUOR EA	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0845T	DGTZ GLS MCRSCP IMFLUOR 1ST	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0844T	DGTZ GLS MCRSCP CSLT CYT EA	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0843T	DGTZ GLS MCRSCP CSLT CYT 1ST	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0842T	DGTZ GLS MCRSCP PTH CSLT EA	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0861T	RMVL PG WCS LV BOTH COMPNT	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0841T	DGTZ GLS MCRSCP PTH CSLT 1ST	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0840T	DGTZ GLS MCRSCP CSLT COMPRE	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0839T	DGTZ GLS MCRSCP CSLT MAT PRP	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0838T	DGTZ GLS MCRSCP CSLT SLD ELS	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0837T	DGTZ GLS MCRSCP FNA I&R	CATEGORY III CODES	NO	01/01/2024	01/01/2024			

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MMAI-Medicare/Medicaid	0836T	DGTZ GLS MCRSCP FNA EA ADDL	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0835T	DGTZ GLS MCRSCP FNA 1ST EA	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0834T	DGTZ GLS MCRSCP CYTP OTH XTN	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0833T	DGTZ GLS MCRSCP CYTP OTH PRP	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0832T	DGTZ GLS MCRSCP CYTP OTH SCR	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0831T	DGTZ GLS MCRSCP CYTP C/V	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0830T	DGTZ GLS MCRSCP CYTP SLCTV	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0829T	DGTZ GLS MCRSCP CYTP CONCTRJ	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0828T	DGTZ GLS MCRSCP CYTP SMPL FL	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0827T	DGTZ GLS MCRSCP CYTP SMEARS	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0822T	MNTR PSYCHDLC MED CLN STAFF	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0821T	MNTR PSYCHDLC MED 2NDPHY/QHP	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0820T	MNTR PSYCHDLC MED 1STPHY/QHP	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0789T	ELEC ALY CPX IINS SP/SAC NRV	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0788T	ELEC ALY SMP IINS SP/SAC NRV	CATEGORY III CODES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	0786T	INSJ/RPLCMT PRQ RA SAC NSTIM	CATEGORY III CODES	NO	01/01/2024	01/01/2024			

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MMAI-Medicare/Medicaid	0427U	MONOCYTE DSTRBJ WDTH WHL BLD	PATH & LAB-PROPRIETARY LAB ANA	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	99459	PELVIC EXAMINATION	E & M-SPECIAL E/M SERVICES	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	97552	GROUP CAREGIVER TRAINING	MEDICINE - PHYSICAL MEDICINE A	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	97551	CAREGIVER TRAING EA ADDL 15	MEDICINE - PHYSICAL MEDICINE A	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	97550	CAREGIVER TRAING 1ST 30 MIN	MEDICINE - PHYSICAL MEDICINE A	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	93588	VNGRPH CHD VNVN CLTRL BELOW	MEDICINE - CARDIOVASCULAR	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	93587	VNGRPH CHD VNVN CLTRL AT/ABV	MEDICINE - CARDIOVASCULAR	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	93586	VNGRPH CHD CORONARY SINUS	MEDICINE - CARDIOVASCULAR	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	93585	VNGRPH CHD AZYGS/HEMIAZYGS	MEDICINE - CARDIOVASCULAR	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	93584	VNGRPH CHD ANOM/PERSIST SVC	MEDICINE - CARDIOVASCULAR	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	93153	INTERROG W/O PRGRMG IPNSS	MEDICINE - CARDIOVASCULAR	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	93152	INTERROG&PRGRMG IPNSS POLYSM	MEDICINE - CARDIOVASCULAR	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	93151	INTERROG&PRGRMG IPNSS	MEDICINE - CARDIOVASCULAR	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	93150	THERAPY ACTIVATION IPNSS	MEDICINE - CARDIOVASCULAR	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	92972	PERQ TRLUML CORONRY LITHOTRP	MEDICINE - CARDIOVASCULAR	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	92623	DX ALY AUD OI SND PRCSR EACH	MEDICINE - SPECIAL OTORHINOLAR	NO	01/01/2024	01/01/2024			

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MMAI-Medicare/Medicaid	92622	DX ALY AUD OI SND PRCSR 1ST	MEDICINE - SPECIAL OTORHINOLAR	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	90623	MENACWY-TT MENB-FHBP VACC IM	MEDICINE - VACCINES, TOXOIDS	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	87523	HEPATITIS D QUANTIFICATION	PATH & LAB - MICROBIOLOGY	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	76989	DX INTRAOP EPCAR US CHD I&R	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	76988	DX NTROP EPCR US CHD IMG ACQ	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	76987	DX INTRAOP EPICAR CAR US CHD	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	76984	DX INTRAOP THORACIC AORTA US	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	64597	INS/RPLCM PRQ ELTRD RA PN EA	SURGERY - NERVOUS SYSTEM	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	33280	RMVL PHRNC NRV STIM PG ONLY	SURGERY - RESPIRATORY SYSTEM	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	33279	RMVL PHRNC NRV STIM TRANSVNS	SURGERY - RESPIRATORY SYSTEM	NO	01/01/2024	01/01/2024			
MMAI-Medicare/Medicaid	40650	RPR LIP FTH VERMILION ONLY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G2110	PT 66 &GT CLM FRLTY&1 AC IP ADV IL MP	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	28299	COR HLX VLGS DOUBLE OSTEOT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	M1205	ITCH SEV ASM RED 3/M INIT SC F/U SC	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	00756	ANES HRNA RPR DIPHRG HRNA	ANESTH - UPPER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0499T	CYSTO F/URTL STRIX/STENOSIS	CATEGORY III CODES	EXPIRED	01/01/2018	01/01/2018			

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MMAI-Medicare/Medicaid	0465T	SUPCHRDL NJX RX W/O SUPPLY	CATEGORY III CODES	EXPIRED	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	0434T	INTERRO EVAL NPGS APNEA	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	K1033	NONPNEU SEQ COMP GARMENT HALF LEG	HCPCS-K CODES-DMERCS ONLY	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	A6549	GRADIENT COMPRESSION GARMENT NOS	HCPCS - MED-SURG SUPPLIES	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	M0201	ADM PV FLU HB A/O COVID-19 VAC H;	HCPCS - MEDICAL SERVICES	NO	06/08/2021	06/08/2021			
MMAI-Medicare/Medicaid	0533T	CONT REC MVMT DO 6-10 DAYS	CATEGORY III CODES	EXPIRED	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	11004	DBRDMT SKIN XTRNL GENT&PER	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76810	OB US GT EQU 14 WKS ADDL FETUS	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	08/02/2021	08/02/2021			
MMAI-Medicare/Medicaid	01968	ANES/ANALG CS DLVR NEURAXIAL	ANESTH - OBSTETRIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01967	NEURAXL LBR ANES VAG DLVR	ANESTH - OBSTETRIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01962	ANES URGENT HYSTERECTOMY	ANESTH - OBSTETRIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8601	IV TT NOT INT 4.5 H LKW RSN DOC CLN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92004	COMPRE OPH EXAM NEW PT 1/GT	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92317	C-LENS FITG TECH CORNEOSCLRL	MEDICINE - OPHTHALMOLOGY	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9453	DOC PT RSN NOT RECV 1-T SCR HCV INF	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	17271	DSTR MAL LES S/N/H/F/G 0.6-1	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	30545	RPR CHOANAL ATRESIA TRSNPLTN	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36450	BLD EXCHANGE TRUJ NEWBORN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3284F	IOP RED GT EQU 15PCT PRE-NTRV LVL	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	88331	PATH CONSLTJ SURG 1 BLK 1SPC	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1158	PT HX IC COND PT/DUR MSMT PERIOD	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	88355	M/PHMTRC ALYS SKELETAL MUSC	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88346	IMFLUOR 1ST 1ANTB STAIN PX	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99401	PREV MED CNSL INDIV APPRX 15	E & M - PREVENTIVE MEDICINE SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	97036	APP MDLTY 1+HUBBRD TNK EA 15	MEDICINE - PHYSICAL MEDICINE A	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	97033	APP MDLTY 1+IONTPHRSIS EA 15	MEDICINE - PHYSICAL MEDICINE A	NO	12/01/2013	12/31/2023			
MMAI-Medicare/Medicaid	96440	CHMOTX ADMN PLRL CAV THRCNTS	MEDICINE - CHEMOTHERAPY ADMINI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	K1018	EXT UL TREMOR STIM PERIPH N WRIST	HCPCS-K CODES-DMERCS ONLY	EXPIRED	04/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	K1009	SPCH VOL MOD SYS INCL ALL CMP & ACC	HCPCS-K CODES-DMERCS ONLY	EXPIRED	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	3455F	TB SCR PFRMD&INTERPD 6 MO	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	0426T	INSJ/RPLC NSTIM APNEA STM LD	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	81451	HL NEO GSAP 5-50 RNA ALYS	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			

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MMAI-Medicare/Medicaid	J0800	INJECTION CORTICOTROPIN UP 40 UNITS	HCPCS - DRUGS (NOT ORAL)	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	10036	PLMT SFT TISS LOCLZJ DEV EA	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	0536T	CONT REC MVMT DO DL W/I&R	CATEGORY III CODES	EXPIRED	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	0508T	PLS ECHO US B1 DNS MEAS TIB	CATEGORY III CODES	EXPIRED	07/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	01965	ANES INCOMPL/MISSED AB PX	ANESTH - OBSTETRIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92260	OPHTHALMODYNAMOMETRY	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92018	COMPL OPH EXAM GENERAL ANES	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9715	PT USE HOSPC SRVC ANY TM DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9452	DOC MED RS NOT RECV HCV AB D/T LEX	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G8942	FUNC O ASMT TL DOC PREV 30D&CP 2D	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C7901	SV DX EV/TX MH/SUD 30-60 M PROV RMT	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	20665	RMVL TONGS/HALO ANTHR INDIV	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20220	BONE BIOPSY TROCAR/NDL SUPFC	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31237	NSL/SINS NDSC SURG BX POLYPC	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3279F	HGB LVL GT EQU 13 G/DL	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	K1013	EN T W OR W/O ADAPT AT RPLC ONLY EA	HCPCS-K CODES-DMERCS ONLY	EXPIRED	04/01/2021	04/01/2021			

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MMAI-Medicare/Medicaid	11042	DBRDMT SUBQ TIS 1ST 20SQCM/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9151	INJECTION PEGCETACOPLAN 1 MG	HCPCS - C CODES-OUTPATIENT PP	EXPIRED	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	20694	RMVL EXT FIXJ SYS UNDER ANES	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20662	APPLICATION HALO PELVIC	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67850	DSTRJ LESION LID MARGIN LT 1CM	SURGERY - EYE AND OCULAR ADNEX	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	20690	APPL UNIPLN UNI EXT FIXJ SYS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20206	BIOPSY MUSCLE PERQ NEEDLE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9614	PHOTODOC LT 2 CECAL LSMK EST COMP EXM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	01963	ANES CESAREAN HYSTERECTOMY	ANESTH - OBSTETRIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	97605	NEG PRS WND THER DMELT EQU 50SQCM	MEDICINE - PHYSICAL MEDICINE A	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	17284	DSTR MAL LS F/E/E/N/L/M3.1-4	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	17280	DSTR MAL LS F/E/E/N/L/M .5/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	17273	DSTR MAL LES S/N/H/F/G 2.1-3	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15050	PINCH GRAFT UP TO 2 CM DIAM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G2109	PT 66 &GT CLM FRLTY&1 AC IP ADV IL MP	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	3042F	FEV GT EQU 40PCT PREDICTED VALUE	CATEGORY II CODES	NO	04/01/2010	04/01/2010			

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MMAI-Medicare/Medicaid	89290	BIOPSY OOCYTE POLAR BODY LT EQU 5	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	M1198	ITCH SEV NT RD 3PTS INT F/U NOT CMP	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	92311	CONTACT LENS FITG APHAKIA 1	MEDICINE - OPHTHALMOLOGY	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92287	ANT SGM IMG IR FLRSCN ANGRPH	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40654	RPR LIP FTHGT 1HALF VER HT/CPX	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36425	VENIPUNCTURE CUTDOWN 1 YR/GT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28296	COR HLX VLGS DSTL MTAR OSTEO	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28292	COR HLX VLGS RSC PRX PHLX BS	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	3027F	SPIROM FEV/FVCGT EQU 70PCT /W/OCOPD	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	99214	OFFICE O/P EST MOD 30 MIN	E & M - OTHER E/M SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	97608	NEG PRS WND THER NDMEGT 50SQCM	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	97598	DBRDMT OPN WND ADDL 20CM/LT	MEDICINE - PHYSICAL MEDICINE A	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M0005	VALUE IN PRIM CARE MIPS VALUE PATH	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	10160	PNXR ASPIR ABSC HMTMA BULLA	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	10121	INC&RMVL FB SUBQ TISS COMP	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0766T	TC MAG STIMJ PN 1ST NERVE	CATEGORY III CODES	YES	01/01/2023	12/31/2078			

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MMAI-Medicare/Medicaid	92355	FITG SPECT LW VIS CMPND LENS	MEDICINE - OPHTHALMOLOGY	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92230	FLUORESCEIN ANGIOSCOPY I&R	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92072	FITG C-LENS KERATOCONUS 1ST	MEDICINE - OPHTHALMOLOGY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T1026	MXDISCPLIN SRVC CHD CMPLX IMPAIR HR	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C9788	OA IMG BREAST UNI DOC A&R US EX	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C9157	INJECTION TOFERSEN 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	20225	BONE BIOPSY TROCAR/NDL DEEP	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	13160	SEC CLSR SURG WND/DEHSN XTN	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11471	EXC SKN H/P/P/U COMPLEX	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0436T	PRGRMG EVAL NPGS APNEA STUDY	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0433T	REPOS NSTIM APNEA SENSING LD	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	G8825	PT NOT D/C TO HOME BY POSTOP DAY 7	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G2108	PT 66/GT INST SNP/RES LTC GT 90 D MSR	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	62141	CRNOP SKULL DEFECTGT 5 CM DIAM	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99212	OFFICE O/P EST SF 10 MIN	E & M - OTHER E/M SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99204	OFFICE O/P NEW MOD 45 MIN	E & M - OTHER E/M SERVICES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	99116	ANES COMP TOT BDY HYPTHRM	MEDICINE - QUALIFYING CIRCUMST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8854	DOC RSN NO OBJ RP ADH EVID-BSD TX	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9155	INJECTION EPCORITAMAB-BYSP 0.16 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	17282	DSTR MAL LS F/E/E/N/L/M1.1-2	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	17261	DSTRJ MAL LES T/A/L .6-1.0CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	17264	DSTRJ MAL LES T/A/L 3.1-4.0	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	K1021	EXSUFFLATION BELT INC ALL SUP&ACCES	HCPCS-K CODES-DMERCS ONLY	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	K1001	ELEC POSIT OBS SLEEP APNEA TX SENS	HCPCS-K CODES-DMERCS ONLY	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D2335	RESIN-BASED COMP-4/GT SURFACES ANT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D1354	APPL CARIES ARR MDICMNT-PER TOOTH	HCPCS- DENTAL-S	NO	03/04/2016	03/04/2016			
MMAI-Medicare/Medicaid	81244	FMR1 GEN ALYS CHARAC ALLELES	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	64890	NRV GRF 1STRND HND/FOOT LT 4CM	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9927	DOC SY RSN NO RX WF/ANR FDA-APVD AC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9914	PATIENT INITIATED AN ANTI-TNF AGENT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	64898	NRV GRF MLTST ARM/LEG GT 4 CM	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	64885	NERVE GRAFT HEAD/NECK LT 4 CM	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	10180	I&D COMPLEX PO WOUND INFCTJ	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	10061	I&D ABSCESS COMP/MULTIPLE	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0809T	ARTHRD SI JT PRQ TFX&IMPLT	CATEGORY III CODES	EXPIRED	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	11056	PARNG/CUTG B9 HYPRKR LES 2 -4	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0768T	TC MAG STIMJ PN SBSQ TX 1NRV	CATEGORY III CODES	EXPIRED	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0641T	NCNTC NR IFR SPCTRSC WND IMG	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	G9717	DOC STAT PT HAD DX OF BIPOLAR D/O	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9697	DOC PT RSN NOT PRSC LA INHALED BD	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9613	DOCUMENTATION OF POST-SURG ANATOMY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	0432T	REPOS NSTIM APNEA STIMJ LD	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	99601	HOME NFS VISIT LT 2 HRS	MEDICINE - HOME INFUSION PROCE	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	99308	SBSQ NF CARE LOW MDM 20	E & M - NURSING FACILITY SERVI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62142	RMVL B1 FLP/PROSTC PLATE SKL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36460	INTRAUTERINE TRANSFUSION FTL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88341	IMHCHEM/IMCYTCHM EA ADD ANTB	PATH & LAB - IMMUNOLOGY	NO	06/13/2016	06/13/2016			

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MMAI-Medicare/Medicaid	88332	PATH CONSLTJ SURG EA ADD BLK	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88321	CONSLTJ&REPRT SLD PREP ELSWR	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28297	COR HLX VLGS JT ARTHRD	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	00752	ANES HRNA RPR LMBR&VNT&/DEHS	ANESTH - UPPER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96446	CHEMOTX ADMN PERTL CAV IMPL	MEDICINE - CHEMOTHERAPY ADMINI	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	97607	NEG PRS WND THR NDMELT EQU 50SQCM	MEDICINE - PHYSICAL MEDICINE	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	K1015	FOOT ADDUCTUS POSITIONING DEVC ADJ	HCPCS-K CODES-DMERCS ONLY	EXPIRED	04/01/2021	04/01/2021			
MMAI-Medicare/Medicaid	0431T	RMVL/RPLC NSTIM APNEA PLS GN	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	88350	IMFLUOR EA ADDL 1ANTB STN PX	PATH & LAB - SURGICAL PATHOLOG	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	0404T	TRNSCRV UTERIN FIBROID ABLTJ	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	81450	HL NEO GSAP 5-50DNA/DNA&RNA	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	64585	REV/RMV PERPH NSTIM ELTRD RA	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078			
MMAI-Medicare/Medicaid	11008	RMV PRSTC MTRL/MESH ABD WALL	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	10080	I&D PILONIDAL CYST SIMPLE	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0767T	TC MAG STIMJ PN EA ADDL NRV	CATEGORY III CODES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0503T	COR FFR ALYS GNRJ FFR MDL	CATEGORY III CODES	EXPIRED	01/01/2018	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862

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MMAI-Medicare/Medicaid	81490	AUTOIMMUNE RA ALYS 12 BMRK	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	92283	EXTND COLOR VISION XM	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92020	GONIOSCOPY	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92012	INTRM OPH EXAM EST PATIENT	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92242	FLUORESCEIN&ICG ANGIOGRAPHY	MEDICINE - OPHTHALMOLOGY	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	S0171	INJECTION BUMETANIDE 0.5 MG	HCPCS - TEMP NATIONAL CODES	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8855	ADH TX NOT ASSD ANNU OBJ INFO N RSN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27284	ARTHRODESIS HIP JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	74710	X-RAY MEASUREMENT OF PELVIS	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31241	NSL/SNS NDSC LIG SPHNPTN ART	SURGERY - RESPIRATORY SYSTEM	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G0056	OPTIM CHRON DISEASE MGT MIPS VAL PW	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	00792	ANES IPER UPR ABD PRTL HPTC	ANESTH - UPPER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00750	ANES HRNA RPR UPR ABD NOS	ANESTH - UPPER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99402	PREV MED CNSL INDIV APPRX 30	E & M - PREVENTIVE MEDICINE SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99205	OFFICE O/P NEW HI 60 MIN	E & M - OTHER E/M SERVICES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	J9160	INJ DENILEUKIN DIFTITOX 300 MCG	HCPCS - CHEMO DRUGS	EXPIRED	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	0435T	PRGRMG EVAL NPGS APNEA 1 SES	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	K1029	ORAL DVC/APPL NM ELEC STIM TNG MSC	HCPCS-K CODES-DMERCS ONLY	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	A6535	GRD COMP STK THIGH LENG 40MM HGLT EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D9450	CASE PRES SUBS DTL&EXTSV TX PLN	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	J0739	INJ CABOTEGRAVIR 1 MG FDA-APPD PRSC	HCPCS-DRUGS (NOT ORAL)	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	64892	NRV GRF 1STRND ARM/LEG LT 4CM	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	10030	IMG GID FLU COLL DRG SFT TIS	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	0535T	CONT REC MVMT DO REPRT CNFIG	CATEGORY III CODES	EXPIRED	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	0518T	RMVL PG WCS LV BATTERY ONLY	CATEGORY III CODES	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	99602	HOME NFS VISIT EACH ADDL HR	MEDICINE - HOME INFUSION PROCE	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	G8506	PATIENT RECV ACE INHIBITOR/ARB TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92371	RPR&REFIT SPCT PRSTH APHAKIA	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	92083	EXTENDED VISUAL FIELD XM	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92060	SENSORIMOTOR EXAMINATION	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G9852	PATIENTS WHO DIED FROM CANCER	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9853	PTT ADM TO ICU IN LST 30 DA OF LIFE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G8936	CLN DOC PT NOT ELIG CAND ACE/ARB TX	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9153	INJECTION AMISULPRIDE 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	20693	ADJMT/REVJ EXT FIXJ SYS ANES	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20664	APPL HALO CRANIAL 6+PINS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	17270	DSTR MAL LES S/N/H/F/G .5 /LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31239	NSL/SINUS ENDOSCOPY SURG DCR	SURGERY - RESPIRATORY SYSTEM	YES	07/11/2022	12/31/2078			
MMAI-Medicare/Medicaid	40652	RPR LIP FTHLT HALF VER HEIGHT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36455	BLD EXCHANGE TRUJ OTH THN NB	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36420	VENIPUNCTURE CUTDOWN LT 1 YR	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88334	PATH CONSLTJ SURG CYTO XM EA	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93655	ICAR CATH ABLTJ DSCRT ARRHYT	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99215	OFFICE O/P EST HI 40 MIN	E & M - OTHER E/M SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99140	ANES COMP EMERGENCY COND	MEDICINE - QUALIFYING CIRCUMST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	K1031	NONPNEU CPRSN CTR WO CALIB GRAD PRS	HCPCS-K CODES-DMERCS ONLY	EXPIRED	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	K1025	NONPNEUM SEQUN CMPRS GRMNT FULL ARM	HCPCS-K CODES-DMERCS ONLY	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	K1022	ADD LE PROS ENDOSK KN DISART AK HD	HCPCS-K CODES-DMERCS ONLY	EXPIRED	10/01/2021	10/01/2021			
MMAI-Medicare/Medicaid	A6532	GRD CMP STK BLW KNEE 40-50MM HG SRG	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81455	SO/HL 51/GT GSAP DNA/DNA&RNA	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	G9995	PT WHO USE PALLIAT SVC DUR MEAS PER	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	11047	DBRDMT BONE EACH ADDL	SURGERY - INTEGUMENTARY SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	62140	CRNOP SKULL DEFECTLT 5 CM DIAM	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1066F	ISCHM STROKE SX ONSETGT EQU 3HR	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	10060	I&D ABSCESS SIMPLE/SINGLE	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9229	CHLAMYD GON & SYP SCR RSLT NOT DOC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	C9156	FLOTUFOLASTAT F-18 DIAGNOSTIC 1 MCI	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	10/01/2023	10/01/2023			
MMAI-Medicare/Medicaid	17281	DSTR MAL LS F/E/E/N/L/M .6-1	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	17274	DSTR MAL LES S/N/H/F/G 3.1-4	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20663	APPLICATION HALO FEMORAL	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20661	APPLICATION HALO CRANIAL	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31238	NSL/SINS NDSC SRG NSL HEMRRG	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	28295	COR HLX VLGS PRX MTAR OSTEOT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	99202	OFFICE O/P NEW SF 15 MIN	E & M - OTHER E/M SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0501T	COR FFR DERIVED COR CTA DATA	CATEGORY III CODES	EXPIRED	01/01/2018	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	K1020	NONINVASIVE VAGUS NERVE STIMULATOR	HCPCS-K CODES-DMERCS ONLY	EXPIRED	04/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	A6538	GRD COMP STK FULL /CHAP 40MM HGLT EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6531	GRD CMP STK BLW KNEE 30-40MM HG SRG	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11057	PARNG/CUTG B9 HYPRKR LES GT 4	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11055	PARING/CUTG B9 HYPRKER LES 1	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11043	DBRDMT MUSC&/FSCA 1ST 20/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92025	CPTRIZED CORNEAL TOPOGRAPHY	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92286	ANT SGM IMG I&R SPECLR MIC	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9454	1-T SCR HCV NOT RECV 12 MO NO RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9451	PATIENT RECV ONE-TIME SCR HCV INF	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	C9803	H OC SP CLCT SARS-COV-2 COVD-19 ANY	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	03/01/2020	03/01/2020			
MMAI-Medicare/Medicaid	20250	BIOPSY VRT BDY OPEN THORACIC	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19020	MASTOTOMY EXPL DRG ABSC DP	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	17286	DSTR MAL LS F/E/E/N/L/MGT 4.0	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12021	TX SUPFC WND DEHSN W/PACKING	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12020	TX SUPFC WND DEHSN SMPL CLSR	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0072T	FCSD US ABLTJ LEIOMYOMGT EQU 200	CATEGORY III CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0519T	RMV&RPLCMT PG WCS LV BOTH	CATEGORY III CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	0429T	RMVL NSTIM APNEA SEN LD	CATEGORY III CODES	EXPIRED	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	99404	PREV MED CNSL INDIV APPRX 60	E & M - PREVENTIVE MEDICINE SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99403	PREV MED CNSL INDIV APPRX 45	E & M - PREVENTIVE MEDICINE SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99306	1ST NF CARE HIGH MDM 50	E & M - NURSING FACILITY SERVI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01961	ANES CESAREAN DELIVERY ONLY	ANESTH - OBSTETRIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01999	UNLISTED ANES PROCEDURE	ANESTH - OTHER PROCEDURES	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	62143	RPL B1 FLP/PROSTC PLATE SKL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0129	OCCUP TX REQ QUAL THER H/OP PER SES	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	81171	AFF2 GEN ALY DETC ABNL ALLEL	PATH & LAB - CYTOGENETIC STUDI	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	31240	NSL/SNS NDSC CNCH BULL RESCJ	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3050F	LDL-C GT EQU 130 MG/DL	CATEGORY II CODES	NO	04/01/2010	04/01/2010			

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MMAI-Medicare/Medicaid	Q2052	SVCS SUP & ACC USED HM FOR ADM IVIG	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	M1197	ITCH SEV RED 3/M PT INI ASMT SC F/U	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	96921	EXCIMER LSR PSRIASIS 250-500	MEDICINE - SPECIAL DERMATOLOGI	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0502T	COR FFR DATA PREP & TRANSMIS	CATEGORY III CODES	EXPIRED	01/01/2018	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	K1032	NONPNEU SEQ COMP GARMENT FULL LEG	HCPCS-K CODES-DMERCS ONLY	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	K1017	MONTHLY SPL USE DEVC CODED K1016	HCPCS-K CODES-DMERCS ONLY	EXPIRED	04/01/2021	04/01/2021			
MMAI-Medicare/Medicaid	K1003	WHIRLPOOL TUB WALK IN PORTABLE	HCPCS-K CODES-DMERCS ONLY	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	K1006	SP HOME MODEL ELEC USE EXT URINE MS	HCPCS-K CODES-DMERCS ONLY	EXPIRED	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	0428T	RMVL NSTIM APNEA PLS GEN	CATEGORY III CODES	EXPIRED	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	81243	FMR1 GEN ALY DETC ABNL ALLEL	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	10081	I&D PILONIDAL CYST COMP	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11200	RMVL SKIN TAGS UP TO&INC 15	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8818	PT D/C HOME NO LATR THN POSTOP DA 7	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92002	INTRM OPH EXAM NEW PATIENT	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9771	AT LST 1 BODY TEMP MSREQU /GT 35.5 DEG C	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	C9771	NASAL/SINUS ENDO CRYO NSL TISS&/NRV	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	01/01/2021	12/31/2078			

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MMAI-Medicare/Medicaid	2060F	PT INTRVWD ON/BEFORE DX MDD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19030	NJX PX ONLY MAM DUCTO/GLCTO	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	17260	DSTRJ MAL LES T/A/L 0.5 CM/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	17266	DSTRJ MAL LES T/A/L GT 4.0 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96380	ADMN RSV MONOC ANTB IM CNSL	MEDICINE - INJECTION	NO	10/06/2023	10/06/2023			
MMAI-Medicare/Medicaid	K1024	NONPN CMPR CNTL W/SQ CLBR GRDNT PRS	HCPCS-K CODES-DMERCS ONLY	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	K1014	ADD ENDOSK K-SHN S 4 B L/MXAX FL SW	HCPCS-K CODES-DMERCS ONLY	EXPIRED	04/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	64895	NRV GRF MLTST HND/FOOT LT 4 CM	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64897	NRV GRF MLTST ARM/LEG LT 4 CM	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11044	DBRDMT BONE 1ST 20 SQ CM/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11006	DBRDMT SKIN XTRNL GENT PER	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8941	ELD MAL SCR POS F/U NOT DOC NOT ELG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9154	INJECTION BUPRENORPHINE ER 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C9152	INJECTION ARIPIPRAZOLE 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	20251	BIOPSY VRT BDY OPEN LMBR/CRV	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99100	ANES PT EXTEME AGELT 1 YR&GT 70	MEDICINE - QUALIFYING CIRCUMST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	17272	DSTR MAL LES S/N/H/F/G 1.1-2	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	17263	DSTRJ MAL LES T/A/L 2.1-3.0	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3080F	DIAST BP GT EQU 90 MM HG	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	3077F	SYST BP GT EQU 140 MM HG	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	30560	LYSIS INTRANASAL SYNECHIA	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	30540	RPR CHOANAL ATRESIA NTRANASL	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92315	C-LENS FITG TECH APHAKIA 1	MEDICINE - OPHTHALMOLOGY	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92314	C-LENS FITG TECH OU	MEDICINE - OPHTHALMOLOGY	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92312	CONTACT LENS FITG APHAKIA OU	MEDICINE - OPHTHALMOLOGY	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92265	NDL OCULOELECTROMYOGRAPHY 1+	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92082	INTERMEDIATE VISUAL FIELD XM	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81456	SO/HL 51/GT GSAP RNA ALYS	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81449	SO NEO GSAP 5-50 RNA ALYS	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	0066U	PAMG-1 IA CERVICO-VAG FLUID	CATEGORY III CODES	EXPIRED	09/25/2018	12/31/2078			
MMAI-Medicare/Medicaid	01969	ANES C HYST FLWG NEURAXIAL	ANESTH - OBSTETRIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8535	EM SCR NO D-D PT NOT ELG EM SCR ENC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G2174	URI EPI PT ANTIB IN 30D PRI EPIS DT	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2137	BACK PN MSR VAS 3MO POGT 3.0 POLT 5 PTS	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	76805	OB US GT EQU 14 WKS SNGL FETUS	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	08/02/2021	08/02/2021			
MMAI-Medicare/Medicaid	27286	ARTHRD HIP JT SBTRCHC OSTEOT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	G0410	GRP PSYCHTX NOT GP HSP/OP 45-50 MIN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88329	PATH CONSLTJ DRG SURG	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88325	CONSLTJ COMPRE RVW REC REPRT	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3035F	O2 SATURATIONLT EQU 88PCT /PAOLT EQU 55	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	3022F	LVEF GT EQU 40PCT SYSTOLIC	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	M1174	PT 2 HZ VAC O/A PT 50BD B4/DUR MSR	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	88348	ELECTRON MICROSCOPY DX	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99135	ANES COMP CTRLD HYPOTENSION	MEDICINE - QUALIFYING CIRCUMST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	97606	NEG PRS WND THER DMEGT 50 SQCM	MEDICINE - PHYSICAL MEDICINE A	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	96922	EXCIMER LSR PSRIASISGT 500SQCM	MEDICINE - SPECIAL DERMATOLOGI	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0356U	ONC OROP/ANAL 17 DNA DDPCR	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0427T	INSJ/RPLC NSTIM APNEA PLS GN	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	0425T	INSJ/RPLC NSTIM APNEA SEN LD	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	64590	INS/RPL PRPH SAC/GSTR NPG/R	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078			
MMAI-Medicare/Medicaid	11450	EXC SKN HDRDNT AX SMPL/NTRM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11001	DBRDMT ECZ/INFCT SKN EA ADDL	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	10140	I&D HMTMA SEROMA/FLUID COLLJ	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0534T	CONT REC MVMT DO SETUP&TRAIN	CATEGORY III CODES	EXPIRED	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	0520T	RMV&RPLCMT PG WCS LV BATTERY	CATEGORY III CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	0517T	INSJ WCS LV BOTH COMPNT PG	CATEGORY III CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	0504T	COR FFR DATA REVIEW I&R	CATEGORY III CODES	EXPIRED	01/01/2018	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	11045	DBRDMT SUBQ TISS EACH ADDL	SURGERY - INTEGUMENTARY SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	92316	C-LENS FITG TECH APHAKIA OU	MEDICINE - OPHTHALMOLOGY	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	91300	SARSCOV2 VAC 30MCG/0.3ML IM	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	92354	FITG SPECT LOW VIS 1SYSTEM	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9725	PT USE HOSPC SRVC ANY TM DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9612	PHDOC 2/MORE CECAL LDMK EST CMPL EX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9192	DOC SYS RSN NOT PRSC BETA-BLOCKR TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			

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MMAI-Medicare/Medicaid	20692	APPL MLTPLN UNI EXT FIXJ SYS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20680	REMOVAL OF IMPLANT DEEP	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19000	PUNCTURE ASPIR CYST BREAST	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3084F	KT/V GT EQU 1.7	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	36440	BLD PUSH TFUJ 2 YR/LT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0411	INTRCTV GRP PSYCHTX HSP/OP 45-50MIN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88342	IMHCHEM/IMCYTCHM 1ST ANTB	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88333	PATH CONSLTJ SURG CYTO XM 1	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88323	CONSLTJ&REPRT MATRL PREP SLD	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28298	COR HLX VLGS PRX PHLX OSTEOT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	00796	ANES IPER UPR ABD LVR TRNSPL	ANESTH - UPPER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00790	ANES IPER UPR ABD NOS	ANESTH - UPPER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99213	OFFICE O/P EST LOW 20 MIN	E & M - OTHER E/M SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	97597	DBRDMT OPN WND 1ST 20 CM/LT	MEDICINE - PHYSICAL MEDICINE A	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	97034	APP MDLTY 1+CNTRST BTH EA 15	MEDICINE - PHYSICAL MEDICINE A	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	99203	OFFICE O/P NEW LOW 30 MIN	E & M - OTHER E/M SERVICES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	K1028	PS&CEU NMS ES TNG MUSC CON PH APP	HCPCS-K CODES-DMERCS ONLY	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	K1016	TRANSCUT ELEC N STIM ELEC STIM TG N	HCPCS-K CODES-DMERCS ONLY	EXPIRED	04/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	0430T	RMVL NSTIM APNEA STIMJ LD	CATEGORY III CODES	EXPIRED	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	64595	REV/RMV PRPH SAC/GSTR NPG/R	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078			
MMAI-Medicare/Medicaid	62147	CRNOP W/AUTOGRAFTGT 5 CM DIAM	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11451	EXC SKN HDRDNT AX COMPLEX	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11046	DBRDMT MUSC&/FSCA EA ADDL	SURGERY - INTEGUMENTARY SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	0769T	TC MAG STIMJ PN SBSQ TX EA	CATEGORY III CODES	EXPIRED	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	11463	EXC SKN HDRDNT ING COMPLEX	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01958	ANES XTRNL CEPHALIC VERSION	ANESTH - BURN EXCISIONS OR DEB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92370	RPR&REFITG SPECT XCP APHAKIA	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	92285	EXTERNAL OCULAR PHOTOGRAPHY	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92081	LIMITED VISUAL FIELD XM	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8964	CARD SS IMAG NOT MON ASX PCI 2 YRS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20696	APP MLTPLN UNI XTRNL FIX 1ST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20670	REMOVAL IMPLANT SUPERFICIAL	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	11470	EXC SKN H/P/P/U SMPL/NTRM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11462	EXC SKN HDRDNT ING SMPL/NTRM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11201	RMVL SKIN TAGS EA ADDL 10	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11000	DBRDMT ECZ/INFECTED SKINLT 10PCT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	10120	INC&RMVL FB SUBQ TISS SMPL	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0775T	ARTHRD SI JT PRQ IARTIC IMPL	CATEGORY III CODES	EXPIRED	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	00797	ANES IPER UPR ABD GSTR PX MO	ANESTH - UPPER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00770	ANES PX MAJ ABD BLOOD VESSEL	ANESTH - UPPER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00754	ANES HRNA RPR OMPHALOCELE	ANESTH - UPPER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01966	ANES INDUCED ABORTION PX	ANESTH - OBSTETRIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	97035	APP MDLTY 1+ULTRASOUND EA 15	MEDICINE - PHYSICAL MEDICINE A	NO	12/01/2013	12/31/2023			
MMAI-Medicare/Medicaid	20200	MUSCLE BIOPSY SUPERFICIAL	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	10035	PLMT SFT TISS LOCLZJ DEV 1ST	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	20697	APP MLTPLN UNI XTRNL FIX XCH	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	K1026	MCH ALLRG PRTC BR/INH FL CRM NSL TP	HCPCS-K CODES-DMERCS ONLY	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	K1019	SUP & ACC EXT UL TR STIM PN WRIST	HCPCS-K CODES-DMERCS ONLY	EXPIRED	04/01/2021	04/01/2021			

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MMAI-Medicare/Medicaid	C9158	INJECTION RISPERIDONE 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	G8884	CLIN DOC RSN PT BX RESLT NOT REVIEW	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9770	VT MC PP APP SR IJ PHRMACL/BIOL AGT	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	17283	DSTR MAL LS F/E/E/N/L/M2.1-3	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8963	CARD STRSS IMAG MON ASX PT PCI 2 YR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0323	CM SRVC BH COND AL 20 MIN Q CAL MO	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	88344	IMHCHEM/IMCYTCHM EA MLT ANTB	PATH & LAB - IMMUNOLOGY	NO	06/13/2016	06/13/2016			
MMAI-Medicare/Medicaid	92313	C-LENS FITG CORNEOSCLRL LENS	MEDICINE - OPHTHALMOLOGY	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92310	CONTACT LENS FITTING OU	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	M1156	PT RECD ACTIVE CHEMO DUR MSMT PER	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	3750F	PTNOTRCVNGSTEROIDGT EQU 10MG/DAY	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1207	PT SCR FD/HS INST TRNS UTL INT SFTY	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1208	PT NT SCR FD/HS INST TRNS UTL INT S	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	00794	ANES IPER UPR ABD PNCRTECT	ANESTH - UPPER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96920	EXCIMER LSR PSRIASISLT 250SQCM	MEDICINE - SPECIAL DERMATOLOGI	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	96381	ADMN RSV MONOC ANTB IM NJX	MEDICINE - INJECTION	NO	10/06/2023	10/06/2023			

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MMAI-Medicare/Medicaid	K1005	DISP COLL & STRG BAG BM ANY SZ T EA	HCPCS-K CODES-DMERCS ONLY	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	0424T	INSJ/RPLC NSTIM APNEA COMPL	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	A6541	GRD COMP STK WAIST LENG 40MM HGLT EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81445	SO NEO GSAP 5-50DNA/DNA&RNA	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	64891	NRV GRF 1STRND HND/FOOT GT 4CM	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64896	NRV GRF MLTST HND/FOOT GT 4 CM	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64893	NRV GRF 1STRND ARM/LEG GT 4 CM	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0640T	NCNTC IFR SPCTRSC O/T PAD 1	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	01960	ANES VAGINAL DELIVERY ONLY	ANESTH - OBSTETRIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D5876	ADD MTL SUBSTR ACR FULL D PER ARCH	Denture-Other	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	92270	ELECTRO-OCULOGRAPHY W/I&R	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92240	ICG ANGIOGRAPHY I&R UNI/BI	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92100	SERIAL TONOMETRY	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92019	LMTD OPH EXAM GENERAL ANES	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92014	COMPRE OPH EXAM EST PT 1/GT	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9854	PT NOT ADM TO ICU IN LST 30 DA LIFE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			

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MMAI-Medicare/Medicaid	G8924	SPIROMETRY RSLTS DOC FEV1/FVC LT 70PCT	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8885	BX RESULTS NOT REVIEWED TRACKED/DOC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8851	ADH TX ASSD ANNULY THU OBJ INFO/SR	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9380	PT OFR ASST EOL ISS/XP REV/UPD MSR	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	36430	TRANSFUSION BLD/BLD COMPNT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36416	COLLJ CAPILLARY BLOOD SPEC	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G2066	INTG DVC E R 30 D;REC TRANS & TR	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1206	ITCH SEV NOT REDGT 3PT INT FU NOT CMP	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1157	PT RECD BMT ANY TIME DUR MSMT PER	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	42180	REPAIR LAC PALATELT 2 CM	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	97032	APPL MODALITY 1+ESTIM EA 15	MEDICINE - PHYSICAL MEDICINE A	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K1002	CES SYSTEM ANY TYPE	HCPCS-K CODES-DMERCS ONLY	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	K1023	DSTL TRNSCT ELC NV STM PR NV UP ARM	HCPCS-K CODES-DMERCS ONLY	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4225	AMNIOBIND/DERMABIND TL PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	A6545	GRD CMP WR NONELS BK 30-50MM SRG EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81172	AFF2 GEN ALYS CHARAC ALLELES	PATH & LAB - CYTOGENETIC STUDI	NO	06/30/2020	06/30/2020			

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MMAI-Medicare/Medicaid	62146	CRNOP W/AUTOGRAFTLT 5 CM DIAM	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0715T	PERQ TRLUML CORONRY LITHOTRP	CATEGORY III CODES	EXPIRED	07/01/2022	07/01/2022			
MMAI-Medicare/Medicaid	0642T	NCNTC NR IFR SPCTRSC WND I&R	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	11005	DBRDMT SKIN ABDOMINAL WALL	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8807	TAS/TVS U/S NOT PERF RSN DOC CLIN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92250	FUNDUS PHOTOGRAPHY W/I&R	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92235	FLUORESCEIN ANGRPH MLTIFRAME	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0166	INJECTION OLANZAPINE 2.5 MG	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	G9596	PEDIAC HD CT TR ORD OTH ECP OTH RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G8883	BX RSLT REV COMMUNICATED TRACKD&DOC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9382	PT NOT OFR ASST EOL ISS/XP REV MSR	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G8852	POSITIVE AIRWAY PRES TX WAS PRESCRB	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0014M	LIVER DS ALYS 3 BMRK SRM ALG	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	03/16/2020	12/31/2078			
MMAI-Medicare/Medicaid	C7900	SV DX EV/TX MH/SUD 15-29 M PROV RMT	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	17276	DSTR MAL LES S/N/H/F/G GT 4.0	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	17262	DSTRJ MAL LES T/A/L 1.1-2.0	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19001	PUNCTURE ASPIR CYST BRST EA	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0394	BLOOD OCCULT TEST 1 DETERM COLORECTAL NEOPLASM	2007 Code Set	EXPIRED	12/14/2023	12/14/2023	Other		
MMAI-Medicare/Medicaid	90678	RSV VACC PREF BIVALENT IM	MEDICINE - VACCINES, TOXOIDS	NO	11/13/2023	11/13/2023			
MMAI-Medicare/Medicaid	90999	UNLISTED DIALYSIS PROCEDURE	MEDICINE - DIALYSIS	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	0102T	ESW PHY ANES LAT HMRL EPCNDL	CATEGORY III CODES	NO	12/01/2013	12/01/2013	Other		
MMAI-Medicare/Medicaid	0101T	ESW MUSCSKEL SYS NOS	CATEGORY III CODES	NO	12/01/2013	12/01/2013	Other		
MMAI-Medicare/Medicaid	0100T	PROSTH RETINA RECEIVE&GEN	CATEGORY III CODES	NO	12/01/2013	12/01/2013	Other		
MMAI-Medicare/Medicaid	0071T	US LEIOMYOMATA ABLATE LT 200	CATEGORY III CODES	NO	12/01/2013	12/01/2013	Other		
MMAI-Medicare/Medicaid	93352	ADMIN ECG CONTRAST AGENT	MEDICINE - CARDIOVASCULAR	NO	09/01/2023	10/29/2023			
MMAI-Medicare/Medicaid	81448	HRDTRY PERPH NEURPHY PANEL	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81441	IBMFS SEQ ALYS PNL 30 GENES	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81439	HRDTRY CARDMYPY GENE PANEL	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81431	HEARING LOSS DUP/DEL ANALYS	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81427	GENOME RE-EVALUATION	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81426	GENOME SEQUENCE ANALYSIS	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			

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MMAI-Medicare/Medicaid	81425	GENOME SEQUENCE ANALYSIS	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81419	EPILEPSY GEN SEQ ALYS PANEL	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81418	RX METAB GEN SEQ ALYS PNL 6	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81417	EXOME RE-EVALUATION	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81416	EXOME SEQUENCE ANALYSIS	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81415	EXOME SEQUENCE ANALYSIS	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81414	CAR ION CHNNLPATH INC 2 GNS	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81413	CAR ION CHNNLPATH INC 10 GNS	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81412	ASHKENAZI JEWISH ASSOC DIS	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81403	MOPATH PROCEDURE LEVEL 4	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81402	MOPATH PROCEDURE LEVEL 3	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81363	HBB GENE DUP/DEL VARIANTS	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81362	HBB GENE KNOWN FAM VARIANT	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81360	ZRSR2 GENE COMMON VARIANTS	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81357	U2AF1 GENE COMMON VARIANTS	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81353	TP53 GENE KNOWN FAMIL VRNT	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			

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MMAI-Medicare/Medicaid	81352	TP53 GENE TRGT SEQUENCE ALYS	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81351	TP53 GENE FULL GENE SEQUENCE	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81349	CYTOG ALYS CHRML ABNR LW-PS	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81348	SRSF2 GENE COMMON VARIANTS	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81347	SF3B1 GENE COMMON VARIANTS	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81346	TYMS GENE COM VARIANTS	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81345	TERT GENE TARGETED SEQ ALYS	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81344	TBP GENE DETC ABNOR ALLELES	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81343	PPP2R2B GEN DETC ABNOR ALLEL	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81341	TRB GENE REARRANGE DIRPROBE	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81339	MPL GENE SEQ ALYS EXON 10	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81338	MPL GENE COMMON VARIANTS	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81337	SMN1 GEN NOWN FAMIL SEQ VRNT	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81336	SMN1 GENE FULL GENE SEQUENCE	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81334	RUNX1 GENE TARGETED SEQ ALYS	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81333	TGFBI GENE COMMON VARIANTS	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			

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MMAI-Medicare/Medicaid	81326	PMP22 GENE KNOWN FAM VARIANT	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81325	PMP22 GENE FULL SEQUENCE	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81324	PMP22 GENE DUP/DELET	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81322	PTEN GENE KNOWN FAM VARIANT	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81320	PLCG2 GENE COMMON VARIANTS	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81318	PMS2 KNOWN FAMILIAL VARIANTS	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81316	PML/RARALPHA 1 BREAKPOINT	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81315	PML/RARALPHA COM BREAKPOINTS	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81313	PCA3/KLK3 ANTIGEN	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81312	PABPN1 GENE DETC ABNOR ALLEL	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81310	NPM1 GENE	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81309	PIK3CA GENE TRGT SEQ ALYS	PATH & LAB-MOLECULAR PATHOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81308	PALB2 GENE KNOWN FAMIL VRNT	PATH & LAB-MOLECULAR PATHOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81307	PALB2 GENE FULL GENE SEQ	PATH & LAB-MOLECULAR PATHOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81306	NUDT15 GENE COMMON VARIANTS	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81305	MYD88 GENE P.LEU265PRO VRNT	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	81303	MECP2 GENE KNOWN VARIANT	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81299	MSH6 GENE KNOWN VARIANTS	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81296	MSH2 GENE KNOWN VARIANTS	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81289	FXN GENE KNOWN FAMIL VARIANT	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81286	FXN GENE FULL GENE SEQUENCE	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81285	FXN GENE CHARAC ALLELES	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81284	FXN GENE DETC ABNOR ALLELES	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81282	LONG QT SYNDROME GENE ANAL DUP/DEL VARIANTS	PATH & LAB - CHEMISTRY	EXPIRED	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81281	LONG QT SYNDROME ANAL KNOWN FAMILIAL SEQUENCE	PATH & LAB - CHEMISTRY	EXPIRED	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81280	LONG QT SYNDROME FULL SEQUENCE ANALYSIS	PATH & LAB - CHEMISTRY	EXPIRED	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81279	JAK2 GENE TRGT SEQUENCE ALYS	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81278	IGH /BCL2 TRANSLOCATION ALYS	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81277	CYTOGENOMIC NEO MICRORA ALYS	PATH & LAB-MOLECULAR PATHOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81274	HTT GENE CHARAC ALLELES	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81273	KIT GENE ANALYS D816 VARIANT	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81271	HTT GENE DETC ABNOR ALLELES	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	81268	CHIMERISM ANAL W/CELL SELECT	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81266	STR MARKERS SPEC ANAL ADDL	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81264	IGK REARRANGEABN CLONAL POP	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81263	IGH VARI REGIONAL MUTATION	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81262	IGH GENE REARRANG DIR PROBE	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81261	IGH GENE REARRANGE AMP METH	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81258	HBA1/HBA2 GENE FAM VRNT	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81254	GJB6 GENE COM VARIANTS	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81253	GJB2 GENE KNOWN FAM VARIANTS	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81250	G6PC GENE	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81249	G6PD FULL GENE SEQUENCE	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81248	G6PD KNOWN FAMILIAL VARIANT	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81247	G6PD GENE ALYS CMN VARIANT	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81246	FLT3 GENE ANALYSIS	PATH & LAB - MICROBIOLOGY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81239	DMPK GENE CHARAC ALLELES	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81238	F9 FULL GENE SEQUENCE	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			

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MMAI-Medicare/Medicaid	81237	EZH2 GENE COMMON VARIANTS	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81233	BTK GENE COMMON VARIANTS	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81228	CYTOG ALYS CHRML ABNR CGH	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81224	CFTR GENE INTRON POLY T	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81222	CFTR GENE DUP/DELET VARIANTS	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81218	CEBPA GENE FULL SEQUENCE	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81217	BRCA2 GENE KNOWN FAMIL VRNT	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81216	BRCA2 GENE FULL SEQ ALYS	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81215	BRCA1 GENE KNOWN FAMIL VRNT	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81214	BRCA1 FULL SEQ ANAL&COMMON DUP/DEL VARIANTS	PATH & LAB - CHEMISTRY	EXPIRED	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81213	BRCA1&BRCA2 ANAL UNCOMMON DUP/DEL VARIANTS	PATH & LAB - CHEMISTRY	EXPIRED	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81212	BRCA1&2 185&5385&6174 VRNT	PATH & LAB - CHEMISTRY	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81211	BRCA1&BRCA2 FULL SEQ ANALYS/COMM DUP/DEL BRCA	PATH & LAB - CHEMISTRY	EXPIRED	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81204	AR GENE CHARAC ALLELES	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81194	NTRK TRANSLOCATION ANALYSIS	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81193	NTRK3 TRANSLOCATION ANALYSIS	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			

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MMAI-Medicare/Medicaid	81192	NTRK2 TRANSLOCATION ANALYSIS	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81191	NTRK1 TRANSLOCATION ANALYSIS	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81190	CSTB GENE KNOWN FAMIL VRNT	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81188	CSTB GENE DETC ABNOR ALLELE	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81187	CNBP GENE DETC ABNOR ALLELE	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81186	CACNA1A GEN KNOWN FAMIL VRNT	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81185	CACNA1A GENE FULL GENE SEQ	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81184	CACNA1A GEN DETC ABNOR ALLEL	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81183	ATXN10 GENE DETC ABNOR ALLEL	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81182	ATXN8OS GEN DETC ABNOR ALLEL	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81181	ATXN7 GENE DETC ABNOR ALLELE	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81180	ATXN3 GENE DETC ABNOR ALLELE	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81179	ATXN2 GENE DETC ABNOR ALLELE	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81178	ATXN1 GENE DETC ABNOR ALLELE	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81177	ATN1 GENE DETC ABNOR ALLELES	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81176	ASXL1 GENE TARGET SEQ ALYS	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			

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MMAI-Medicare/Medicaid	81175	ASXL1 FULL GENE SEQUENCE	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81174	AR GENE KNOWN FAMIL VARIANT	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81168	CCND1/IGH TRANSLOCATION ALYS	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81167	BRCA2 GENE FULL DUP/DEL ALYS	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81166	BRCA1 GENE FULL DUP/DEL ALYS	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81165	BRCA1 GENE FULL SEQ ALYS	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	81164	BRCA1&2 GEN FUL DUP/DEL ALYS	PATH & LAB - CYTOGENETIC STUDI	NO	11/10/2023	11/10/2023			
MMAI-Medicare/Medicaid	V2025	DELUXE FRAME	HCPCS - VISION SERVICES	NO	12/01/2013	12/31/2023			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2020	FRAMES PURCHASES	HCPCS - VISION SERVICES	NO	12/01/2013	12/31/2023			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	S9126	HOSPICE CARE IN THE HOME PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2023			
MMAI-Medicare/Medicaid	S0390	ROUTINE FOOT CARE; PER VISIT	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2023			
MMAI-Medicare/Medicaid	A9586	FLORBETAPR F18 DX-STDY DS TO 10 MCI	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/31/2023			
MMAI-Medicare/Medicaid	A0021	AMB SRVC OTSD STATE-MILE TRANSPORT	HCPCS - TRANSPORTATION (INCL A	NON-COV	12/01/2013	12/31/2023			
MMAI-Medicare/Medicaid	A0080	NONEMERG TRNSPRT VOLUN NOT VESTED	HCPCS - TRANSPORTATION (INCL A	NON-COV	12/01/2013	12/31/2023			
MMAI-Medicare/Medicaid	A0120	NONEMERG TRNSPRT: MINI-BUS MTN/OTH	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/31/2023			
MMAI-Medicare/Medicaid	A0140	NONEMERG TRNSPRT & AIR TRAVEL	HCPCS - TRANSPORTATION (INCL A	NON-COV	12/01/2013	12/31/2023			

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MMAI-Medicare/Medicaid	A0160	NONEMERG TRNSPRT:MILE-CASE/SOCL WRK	HCPCS - TRANSPORTATION (INCL A	NON-COV	12/01/2013	12/31/2023			
MMAI-Medicare/Medicaid	A4575	TOPICAL HYPRBR OXYGEN CHAMB DISPBL	HCPCS - MED-SURG SUPPLIES	NON-COV	12/01/2013	12/31/2023			
MMAI-Medicare/Medicaid	A4870	PLUMB &/ ELEC WRK HOM HEMODIAL EQP	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/31/2023			
MMAI-Medicare/Medicaid	A4890	CONTRACTS REPR&MAINT HEMODIAL EQP	HCPCS - MED-SURG SUPPLIES	NON-COV	12/01/2013	12/31/2023			
MMAI-Medicare/Medicaid	A6550	WND CARE SET NEG PRSS WND TX PUMP	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/31/2023			
MMAI-Medicare/Medicaid	A7025	HI FREQ CHST WALL OSCILAT VEST REPL	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/31/2023			
MMAI-Medicare/Medicaid	A7026	HI FREQ CHST WALL OSCILAT HOSE REPL	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/31/2023			
MMAI-Medicare/Medicaid	A8002	HELMET PROTECTIVE SOFT CUSTOM FAB	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/31/2023			
MMAI-Medicare/Medicaid	G0422	INTENS CARD REHAB; W/WO ECG W/EXER	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/31/2023			
MMAI-Medicare/Medicaid	G0423	INTENS CARD REHAB; W/WO ECG W/O EX	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/31/2023			
MMAI-Medicare/Medicaid	S8930	E-STIM AUR ACP PNT;EA 15 MIN 1-1 PT	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/31/2023			
MMAI-Medicare/Medicaid	S9214	HOME MGMT GESTATIONAL DIABETES;DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2023			
MMAI-Medicare/Medicaid	0339U	ONC PRST8 MRNA HOXC6 & DLX1	PATH & LAB-PROPRIETARY LAB ANA	NO	10/01/2022	12/31/2023			
MMAI-Medicare/Medicaid	A2014	OMEZA COLLAGEN MATRIX PER 100 MG	HCPCS - MED-SURG SUPPLIES	NO	10/01/2022	12/31/2023			
MMAI-Medicare/Medicaid	A2015	PHOENIX WOUND MATRIX PER SQ CM	HCPCS - MED-SURG SUPPLIES	NO	10/01/2022	12/31/2023			
MMAI-Medicare/Medicaid	A2016	PERMEADERM B PER SQ CM	HCPCS - MED-SURG SUPPLIES	NO	10/01/2022	12/31/2023			

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MMAI-Medicare/Medicaid	A2017	PERMEADERM GLOVE EACH	HCPCS - MED-SURG SUPPLIES	NO	10/01/2022	12/31/2023			
MMAI-Medicare/Medicaid	A2018	PERMEADERM C PER SQ CM	HCPCS - MED-SURG SUPPLIES	NO	10/01/2022	12/31/2023			
MMAI-Medicare/Medicaid	A4596	CES SYS SUP & ACCESSORIES PER MONTH	HCPCS - MED-SURG SUPPLIES	NO	10/01/2022	12/31/2023			
MMAI-Medicare/Medicaid	A9602	FLUORODOPA F-18 DIAGNOSTIC PER MCI	HCPCS - MED-SURG SUPPLIES	NO	10/01/2022	12/31/2023			
MMAI-Medicare/Medicaid	A9800	GALLIUM GA-68 GOZETOTIDE DX 1 MCI	HCPCS - MED-SURG SUPPLIES	NO	10/01/2022	12/31/2023			
MMAI-Medicare/Medicaid	A9607	LU 177 VPIVOTID TETRAXETN THR 1 MCI	HCPCS - MED-SURG SUPPLIES	NO	10/01/2022	12/31/2023			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	A4253	BLD GLU TST/REAGT STRIPS HOM MON-50	HCPCS - MED-SURG SUPPLIES	NO	10/01/2016	12/31/2023	Regulatory Compliance	The requested benefit is covered through our Pharmacy Benefit; the requested item can be filled at one of our network pharmacies. Please validate coverage rules through the online search tool located on our website at www.aetnabetterhealth.com/illinois/pharmacy	
MMAI-Medicare/Medicaid	A6591	EXT UC; NON-DISP SUCT PUMP PER MO	HCPCS - MED-SURG SUPPLIES	NO	04/01/2023	12/31/2023			
MMAI-Medicare/Medicaid	A6590	EXT UI CATH; DISP MATL SP PER MO	HCPCS - MED-SURG SUPPLIES	NO	04/01/2023	12/31/2023			
MMAI-Medicare/Medicaid	A2020	AC5 ADVANCED WOUND SYSTEM	HCPCS - MED-SURG SUPPLIES	NO	04/01/2023	12/31/2023			
MMAI-Medicare/Medicaid	A7049	EXPIRATORY PAP INTRANASAL R VLV	HCPCS - MED-SURG SUPPLIES	NO	04/01/2023	12/31/2023			
MMAI-Medicare/Medicaid	A2021	NEOMATRIX PER SQ CM	HCPCS - MED-SURG SUPPLIES	NO	04/01/2023	12/31/2023			
MMAI-Medicare/Medicaid	A4560	NMES DISP REPLC ONLY	HCPCS - MED-SURG SUPPLIES	NO	04/01/2023	12/31/2023			

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MMAI-Medicare/Medicaid	A2019	KERECIS OMEGA3 MARIGEN SHLD PER CM2	HCPCS - MED-SURG SUPPLIES	NO	04/01/2023	12/31/2023			
MMAI-Medicare/Medicaid	G2168	SRVC PRFRM PT ASST HH SET EA 15 MIN	HCPCS-PROC/PROF SERVICES (TE	NO	04/01/2020	12/31/2023			
MMAI-Medicare/Medicaid	G2169	SRVC PRFRM OT ASST HH SET EA 15 MIN	HCPCS-PROC/PROF SERVICES (TE	NO	04/01/2020	12/31/2023			
MMAI-Medicare/Medicaid	0464T	VISUAL EP TEST FOR GLAUCOMA	CATEGORY III CODES	NO	01/27/2017	12/31/2023			
MMAI-Medicare/Medicaid	97168	OT RE-EVAL EST PLAN CARE	MEDICINE - PHYSICAL MEDICINE A	NO	01/27/2017	12/31/2023			
MMAI-Medicare/Medicaid	97169	ATHLETIC TRN EVAL LOW CMPLX	MEDICINE - PHYSICAL MEDICINE A	NO	01/27/2017	12/31/2023			
MMAI-Medicare/Medicaid	97170	ATHLETIC TRN EVAL MOD CMPLX	MEDICINE - PHYSICAL MEDICINE A	NO	01/27/2017	12/31/2023			
MMAI-Medicare/Medicaid	97171	ATHLETIC TRN EVAL HIGH CMPLX	MEDICINE - PHYSICAL MEDICINE A	NO	01/27/2017	12/31/2023			
MMAI-Medicare/Medicaid	97172	ATHLETIC TRN RE-EVAL PLAN CR	MEDICINE - PHYSICAL MEDICINE A	NO	01/27/2017	12/31/2023			
MMAI-Medicare/Medicaid	A9285	INVERSION/EVERSION CORRECTION DEVC	HCPCS - MED-SURG SUPPLIES	NO	01/27/2017	12/31/2023			
MMAI-Medicare/Medicaid	A9286	HYG I/DVC DISPBL/NON-DISPBL ANY T E	HCPCS - MED-SURG SUPPLIES	NO	01/27/2017	12/31/2023			
MMAI-Medicare/Medicaid	A2007	RESTRATA PER SQ CM	HCPCS - MED-SURG SUPPLIES	NO	01/01/2022	12/31/2023			
MMAI-Medicare/Medicaid	A2006	NOVOSORB SYNPATH DERML MATRIX SQ CM	HCPCS - MED-SURG SUPPLIES	NO	01/01/2022	12/31/2023			
MMAI-Medicare/Medicaid	A2004	XCELLISTEM PER SQ CM	HCPCS - MED-SURG SUPPLIES	NO	01/01/2022	12/31/2023			
MMAI-Medicare/Medicaid	A2008	THERAGENESIS PER SQ CM	HCPCS - MED-SURG SUPPLIES	NO	01/01/2022	12/31/2023			
MMAI-Medicare/Medicaid	A2002	MIRRAGEN ADVANCE WOUND MATRIX SQ CM	HCPCS - MED-SURG SUPPLIES	NO	01/01/2022	12/31/2023			

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MMAI-Medicare/Medicaid	A2009	SYMPHONY PER SQ CM	HCPCS - MED-SURG SUPPLIES	NO	01/01/2022	12/31/2023			
MMAI-Medicare/Medicaid	A2005	MICROLYTE MATRIX PER SQ CM	HCPCS - MED-SURG SUPPLIES	NO	01/01/2022	12/31/2023			
MMAI-Medicare/Medicaid	A2010	APIS PER SQ CM	HCPCS - MED-SURG SUPPLIES	NO	01/01/2022	12/31/2023			
MMAI-Medicare/Medicaid	A2001	INNOVAMATRIX AC PER SQ CM	HCPCS - MED-SURG SUPPLIES	NO	01/01/2022	12/31/2023			
MMAI-Medicare/Medicaid	A4563	RCTL CNTRL SYS VAG INSRT LT U ANY E	HCPCS - MED-SURG SUPPLIES	NO	01/01/2019	12/31/2023			
MMAI-Medicare/Medicaid	A6460	SYN RSRB W DR STRL P 16 SI/LT NO A E	HCPCS - MED-SURG SUPPLIES	NO	01/01/2019	12/31/2023			
MMAI-Medicare/Medicaid	A6461	S RSRB ST PD SZ GT 16 SI LT /EQU 48 SI E	HCPCS - MED-SURG SUPPLIES	NO	01/01/2019	12/31/2023			
MMAI-Medicare/Medicaid	A2012	SUPRATHEL PER SQ CM	HCPCS - MED-SURG SUPPLIES	NO	04/01/2022	12/31/2023			
MMAI-Medicare/Medicaid	A2011	SUPRA SDRM PER SQ CM	HCPCS - MED-SURG SUPPLIES	NO	04/01/2022	12/31/2023			
MMAI-Medicare/Medicaid	A4100	SKIN SUB FDA CLEARED AS DVC NOS	HCPCS - MED-SURG SUPPLIES	NO	04/01/2022	12/31/2023			
MMAI-Medicare/Medicaid	A2013	INNOVAMATRIX FS PER SQ CM	HCPCS - MED-SURG SUPPLIES	NO	04/01/2022	12/31/2023			
MMAI-Medicare/Medicaid	A9291	RX DIG COG&/BT FDA-CLRD PER CRS TX	HCPCS - MED-SURG SUPPLIES	NO	04/01/2022	12/31/2023			
MMAI-Medicare/Medicaid	V2526	CONTACT LENS HPI W/BV FLTR PER LENS	HCPCS - VISION SERVICES	NO	10/01/2023	10/01/2023			
MMAI-Medicare/Medicaid	L1681	HO BIL HIP JOINTS & THIGH CUFFS	HCPCS - Orthotic Devices & Pro	NO	10/01/2023	10/01/2023			
MMAI-Medicare/Medicaid	J7519	INJECTN MYCOPHENOLATE MOFETIL 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	10/01/2023	10/01/2023			
MMAI-Medicare/Medicaid	H2041	COORD SC TM-BSD FST EP PSY PER ENC	HCPCS - MEDICAL SERVICES	NO	10/01/2023	10/01/2023			

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MMAI-Medicare/Medicaid	H2040	COORDINATED SC TM-BSD FST EP PSY PM	HCPCS - MEDICAL SERVICES	NO	10/01/2023	10/01/2023			
MMAI-Medicare/Medicaid	C9789	IT ANTNEOPLST PHARM/BIOL AGT RP ANY	HCPCS - C CODES - OUTPATIENT PP	NO	10/01/2023	10/01/2023			
MMAI-Medicare/Medicaid	B4148	EEF SPLY KIT; ELAST CTRL FED PD	HCPCS - MED-SURG SUPPLIES	NO	10/01/2023	10/01/2023			
MMAI-Medicare/Medicaid	A9697	INJ CARBOXYDEXTRN-CTD SPM IO Q ST D	HCPCS - MED-SURG SUPPLIES	NO	10/01/2023	10/01/2023			
MMAI-Medicare/Medicaid	A9603	INJECTION PAFOLACIANINE 0.1 MG	HCPCS - MED-SURG SUPPLIES	NO	10/01/2023	10/01/2023			
MMAI-Medicare/Medicaid	A9573	INJECTION GADOPICLENOL 1 ML	HCPCS - MED-SURG SUPPLIES	NO	10/01/2023	10/01/2023			
MMAI-Medicare/Medicaid	A9156	ORAL MUCOADHESIVE ANY TYPE PER 1 ML	HCPCS - MED-SURG SUPPLIES	NO	10/01/2023	10/01/2023			
MMAI-Medicare/Medicaid	90480	ADMN SARSCOV2 VACC 1 DOSE	MEDICINE - VACCINES, TOXOIDS	NO	09/11/2023	09/11/2023			
MMAI-Medicare/Medicaid	91322	SARSCOV2 VAC 50 MCG/0.5ML IM	MEDICINE - VACCINES, TOXOIDS	NO	09/11/2023	09/11/2023			
MMAI-Medicare/Medicaid	91321	SARSCOV2 VAC 25 MCG/.25ML IM	MEDICINE - VACCINES, TOXOIDS	NO	09/11/2023	09/11/2023			
MMAI-Medicare/Medicaid	91320	SARSCV2 VAC 30MCG TRS-SUC IM	MEDICINE - VACCINES, TOXOIDS	NO	09/11/2023	09/11/2023			
MMAI-Medicare/Medicaid	91319	SARSCV2 VAC 10MCG TRS-SUC IM	MEDICINE - VACCINES, TOXOIDS	NO	09/11/2023	09/11/2023			
MMAI-Medicare/Medicaid	91318	SARSCOV2 VAC 3MCG TRS-SUC IM	MEDICINE - VACCINES, TOXOIDS	NO	09/11/2023	09/11/2023			
MMAI-Medicare/Medicaid	J1440	FECAL MICROBIOTA LIVE - JSLM 1 ML	HCPCS - MEDICAL SERVICES	YES	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J9350	INJECTION MOSUNETUZUMAB-AXGB 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/01/2010	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J0801	INJECTION COR ACTHAR GEL UP TO 40 U	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4285	NUDYN DL OR NUDYN DL MESH PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0408U	IAAD BLK AC WV BSNSR SARSCV2	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0412U	BETA AMYLOID AB42/40 IMPRCIP	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J9345	INJECTION RETIFANLIMAB-DLWR 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J0874	INJECTION DAP NOT TE TO J0878 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	A9292	RX D VIS TX SW-ONLY FDA CL Q CRS TX	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J9051	INJECTN BTZ NOT TE TO J9041 0.1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J0802	INJECTION COR ANI UP TO 40 UNITS	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J2359	INJECTION OLANZAPINE 0.5 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4286	NUDYN SL OR NUDYN SLW PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0404U	ONC BRST SEMIQ MEAS THYM KN	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J7214	INJ FVIII/VWD FA CMPLX R Q FVIII IU	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	A2022	INNOVABURN/INNOVAMTRX XL PER SQ CM	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	E0491	O DVC/APPL NM ELECT STIM TNG MUSC	HCPCS - DME	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0889	DAPRODUSTAT ORAL 1 MG ESRD ON DLYS	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	A2025	MIRO3D PER CU CM	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	A9268	PROGRAMMER TRANSIENT ORALLY ING CAP	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0406U	ONC LUNG FLOW CYTMTRY 5 MRK	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0410U	ONC PNCRTC DNA WHL GN SEQ 5-	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0414U	ONC LNG AUG ALG ALY WHL SLD8	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0418U	ONC BRST AUG ALG ALY WHL SL8	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J7353	ANACAULASE-BCDB 8.8PCT GEL 1 GM	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	E0490	PS&CEU O DVC/APP NM EL ST TNG MUSC	HCPCS - DME	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J9064	INJECTION CABA NOT TE TO J9043 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	0405U	ONC PNCRTC 59 MTHLTN BLK MRK	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0349	INJECTION REZAFUNGIN 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	A2023	INNOVAMATRIX PD 1 MG	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0409U	ONC SLD TUM DNA 80 & RNA 36	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	0413U	ONC HL NEO OPT GEN MAPG DNA	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0417U	RARE DS ALYS 335 NUC GENES	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0019M	CV DS PLASMA ALYS PRTN BMRK	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	K1036	SUPPLIES & ACC LF US DIA TX DVC PM	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J2781	INJECTION PEGCETACOPLAN IVT MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0407U	NEPH DBTC CKD MULT ECLIA ALG	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0411U	PSYC GENOM ALYS PNL 15 GEN	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0415U	CV DS ACS BLD ALG 5 YR SCORE	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0419U	NRPSYC GEN SEQ VRNT ALY 13	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	L5991	ADD LE PROSTHES OI EXTRNL PROS CONN	HCPCS - Orthotic Devices & Pro	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C9792	BL/NONBL PD NYHA CL II III IVA HF;	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0402U	NFCT AGT STI MULT AMP PRB TQ	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	A9269	PROG TR PO ING CAP USE EXT PROG PM	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	90381	RSV MONOC ANTB SEASN 1 ML IM	MEDICINE - VACCINES, TOXOIDS	NO	07/17/2023	07/17/2023			
MMAI-Medicare/Medicaid	90380	RSV MONOC ANTB SEASN .5ML IM	MEDICINE - VACCINES, TOXOIDS	NO	07/17/2023	07/17/2023			
MMAI-Medicare/Medicaid	0063A	Fee covid-19 vac 7 booster		YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	0032A	Fee covid-19 vac 4 dose 2		YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0062A	Fee covid-19 vac 7 dose 2		YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0043A	Fee covid-19 vac 5 booster		YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0024A	Fee covid-19 vac 3 res		YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0084A	Fee covid-19 vac 9 res		YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0101A	Fee covid-19 vac 11 dose 1		YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0103A	Fee covid-19 vac 11 booster		YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0014A	Fee covid-19 vac 2 res		YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0061A	Fee covid-19 vac 7 dose 1		YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0023A	Fee covid-19 vac 3 booster		YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0033A	Fee covid-19 vac 4 booster		YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0102A	Fee covid-19 vac 11 dose 2		YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0144A	ADM SRSCV2 BVL 25MCG/.25ML A	MEDICINE - VACCINES, TOXOIDS	EXPIRED	08/31/2022	08/31/2022			
MMAI-Medicare/Medicaid	0111A	ADM SARSCOV2 25MCG/0.25ML1ST	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	0104A	ADM SARSCOV2 5MCG/.5ML AS03B	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/26/2022	04/26/2022			
MMAI-Medicare/Medicaid	0003A	ADM SARSCOV2 30MCG/0.3ML 3RD	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	

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MMAI-Medicare/Medicaid	91313	SARSCOV2 VAC BVL 50MCG/0.5ML	MEDICINE - VACCINES, TOXOIDS	EXPIRED	08/31/2022	08/31/2022			
MMAI-Medicare/Medicaid	0171A	ADM SARSCV2 BVL 3MCG/0.2ML 1	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	04/18/2023			
MMAI-Medicare/Medicaid	0112A	ADM SARSCOV2 25MCG/0.25ML2ND	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	0073A	ADM SARSCV2 10MCG TRS-SUCR 3	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	0002A	ADM SARSCOV2 30MCG/0.3ML 2ND	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	0051A	ADM SARSCV2 30MCG TRS-SUCR 1	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	0031A	ADM SARSCOV2 VAC AD26 .5ML	MEDICINE - VACCINES, TOXOIDS	EXPIRED	01/18/2021	01/18/2021			
MMAI-Medicare/Medicaid	91308	SARSCOV2 VAC 3 MCG TRS-SUCR	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	91317	SARSCOV2 VAC BVL 3MCG/0.2ML	MEDICINE - VACCINES, TOXOIDS	EXPIRED	12/08/2022	12/08/2022			
MMAI-Medicare/Medicaid	91303	SARSCOV2 VAC AD26 .5ML IM	MEDICINE - VACCINES, TOXOIDS	EXPIRED	01/18/2021	01/18/2021			
MMAI-Medicare/Medicaid	0172A	ADM SARSCV2 BVL 3MCG/0.2ML 2	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	04/18/2023			
MMAI-Medicare/Medicaid	0124A	ADM SARSCV2 BVL 30MCG/.3ML A	MEDICINE - VACCINES, TOXOIDS	EXPIRED	08/31/2022	08/31/2022			
MMAI-Medicare/Medicaid	91307	SARSCOV2 VAC 10 MCG TRS-SUCR	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	91305	SARSCOV2 VAC 30 MCG TRS-SUCR	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	0151A	ADM SARSCV2 BVL 10MCG/.2ML 1	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	04/18/2023			
MMAI-Medicare/Medicaid	0011A	ADM SARSCOV2 100MCG/0.5ML1ST	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	

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MMAI-Medicare/Medicaid	91310	SARSCOV2 VAC 5MCG/0.5ML AS03	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/26/2022	04/26/2022			
MMAI-Medicare/Medicaid	91309	SARSCOV2 VAC 50MCG/0.5ML IM	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	0094A	ADM SARSCOV2 50 MCG/.5 MLBST	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	0082A	ADM SARSCV2 3MCG TRS-SUCR 2	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	0074A	ADM SARSCV2 10MCG TRS-SUCR B	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	0004A	ADM SARSCOV2 30MCG/0.3ML BST	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	0083A	ADM SARSCV2 3MCG TRS-SUCR 3	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	91316	SARSCOV2 VAC BVL 10MCG/0.2ML	MEDICINE - VACCINES, TOXOIDS	EXPIRED	12/08/2022	12/08/2022			
MMAI-Medicare/Medicaid	0173A	ADM SARSCV2 BVL 3MCG/0.2ML 3	MEDICINE - VACCINES, TOXOIDS	EXPIRED	12/08/2022	12/08/2022			
MMAI-Medicare/Medicaid	0081A	ADM SARSCV2 3MCG TRS-SUCR 1	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	0072A	ADM SARSCV2 10MCG TRS-SUCR 2	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	0041A	ADM SARSCOV2 5MCG/0.5ML 1ST	MEDICINE - VACCINES, TOXOIDS	EXPIRED	05/04/2021	05/04/2021			
MMAI-Medicare/Medicaid	91306	SARSCOV2 VAC 50MCG/0.25ML IM	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	91301	SARSCOV2 VAC 100MCG/0.5ML IM	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	91315	SARSCOV2 VAC BVL 10MCG/0.2ML	MEDICINE - VACCINES, TOXOIDS	EXPIRED	08/31/2022	08/31/2022			
MMAI-Medicare/Medicaid	91312	SARSCOV2 VAC BVL 30MCG/0.3ML	MEDICINE - VACCINES, TOXOIDS	EXPIRED	08/31/2022	08/31/2022			

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MMAI-Medicare/Medicaid	0141A	ADM SRSCV2 BVL 25MCG/.25ML 1	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	04/18/2023			
MMAI-Medicare/Medicaid	0053A	ADM SARSCV2 30MCG TRS-SUCR 3	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	0052A	ADM SARSCV2 30MCG TRS-SUCR 2	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	0021A	ADM SARSCOV2 5X1010VP/.5ML 1	MEDICINE - VACCINES, TOXOIDS	EXPIRED	12/16/2020	12/16/2020			
MMAI-Medicare/Medicaid	0071A	ADM SARSCV2 10MCG TRS-SUCR 1	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	0054A	ADM SARSCV2 30MCG TRS-SUCR B	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	91302	SARSCOV2 VAC 5X1010VP/.5MLIM	MEDICINE - VACCINES, TOXOIDS	EXPIRED	12/16/2020	12/16/2020			
MMAI-Medicare/Medicaid	0174A	ADM SARSCV2 BVL 3MCG/0.2ML A	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/01/2023	04/01/2023			
MMAI-Medicare/Medicaid	0134A	ADM SARSCV2 BVL 50MCG/.5ML A	MEDICINE - VACCINES, TOXOIDS	EXPIRED	08/31/2022	08/31/2022			
MMAI-Medicare/Medicaid	0121A	ADM SARSCV2 BVL 30MCG/.3ML 1	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	04/18/2023			
MMAI-Medicare/Medicaid	0064A	ADM SARSCOV2 50MCG/0.25MLBST	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	0042A	ADM SARSCOV2 5MCG/0.5ML 2ND	MEDICINE - VACCINES, TOXOIDS	EXPIRED	05/04/2021	05/04/2021			
MMAI-Medicare/Medicaid	91314	SARSCOV2 VAC BVL 25MCG/.25ML	MEDICINE - VACCINES, TOXOIDS	EXPIRED	08/31/2022	08/31/2022			
MMAI-Medicare/Medicaid	0022A	ADM SARSCOV2 5X1010VP/.5ML 2	MEDICINE - VACCINES, TOXOIDS	EXPIRED	12/16/2020	12/16/2020			
MMAI-Medicare/Medicaid	0001A	ADM SARSCOV2 30MCG/0.3ML 1ST	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	91311	SARSCOV2 VAC 25MCG/0.25ML IM	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	

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MMAI-Medicare/Medicaid	0164A	ADM SRSCV2 BVL 10MCG/0.2ML A	MEDICINE - VACCINES, TOXOIDS	EXPIRED	12/08/2022	12/08/2022			
MMAI-Medicare/Medicaid	0154A	ADM SARSCV2 BVL 10MCG/.2ML A	MEDICINE - VACCINES, TOXOIDS	EXPIRED	08/31/2022	08/31/2022			
MMAI-Medicare/Medicaid	0142A	ADM SRSCV2 BVL 25MCG/.25ML 2	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	04/18/2023			
MMAI-Medicare/Medicaid	0044A	ADM SARSCOV2 5MCG/0.5ML BST	MEDICINE - VACCINES, TOXOIDS	EXPIRED	10/10/2022	10/10/2022			
MMAI-Medicare/Medicaid	0012A	ADM SARSCOV2 100MCG/0.5ML2ND	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	43401	ESOPHAGUS SURGERY FOR VEINS	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95831	LIMB MUSCLE TESTING MANUAL	MEDICINE - NEUROLOGY AND NEURO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19271	REVISION OF CHEST WALL	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0014U	HEM HMTLMF NEO GENE REARGMT	PATH & LAB - CHEMISTRY	EXPIRED	08/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	0013U	ONC SLD ORG NEO GENE REARGMT	PATH & LAB - CHEMISTRY	EXPIRED	08/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	G9389	UNPLN RUPT PC RQR VITRCT DUR CC SUR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9260	DOC PATIENT DEATH FOLLOWING CEA	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G2160	PT LST 1DS HRP ZOST LIV OR 2DS EQU GT 50	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	U0003	IA DET DNA/RNA; COVID-19 AMP P T	HCPCS - PATH & LAB	EXPIRED	03/18/2020	03/18/2020			
MMAI-Medicare/Medicaid	G9615	PREOPERATIVE ASSESSMENT DOCUMENTED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9583	PT PRSC OPIATES FOR LNGR THAN 6 WKS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			

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MMAI-Medicare/Medicaid	95833	BODY MUSCLE TESTING MANUAL	MEDICINE - NEUROLOGY AND NEURO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78594	PULM VI GASEOUS RBRTHING&WSHOT MLT PRJCJ	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	78587	PULM VI AERSL MLT PRJCJ	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	78011	THYROID IMAGING W/VASCULAR FLOW	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	77785	REMOTE AFTLD RADIONUCLIDE BRACHYTX 1 CHANNEL	RADIOLOGY - RADIATION ONCOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99339	DOMICIL/R-HOME CARE SUPERVIS	E & M - HOME SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49657	LAP INC HERN RECUR COMP	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99226	SUBSEQUENT OBSERVATION CARE	E & M - HOSPITAL INPATIENT SER	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	94720	CARBON MONOXIDE DIFFW/CAP	MEDICINE - PULMONARY	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	11101	BIOPSY SKIN SUBQ&/MUCOUS MEMBRANE EA ADDL LESN	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9753	DSTRC IO BASIVA N EA ADD VA BDY L/S	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	C9752	DESTRC IO BASIVA N 1ST 2 VERT B L/S	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	0514T	INTRAOP VIS AXIS ID PT FIXJ	CATEGORY III CODES	EXPIRED	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	01682	ANES SHOULDER SPICA APPLICATION REMOVAL/REPAIR	ANESTH - SHOULDER AND AXILLA	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9759	HISTORY PREOP POS CAPSULE RUPTURE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9678	OCM MEOS PMT ENHNCD CARE MGMT SRVC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2016	04/01/2016			

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MMAI-Medicare/Medicaid	G9601	PT D/C HOME NO LTR THN POST-OP D 7	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	0147U	DRUG ASSAY 85+ RX/METABLT	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	G9799	PT MED DISPENS EVNT INDIC HX ASTHMA	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	99335	DOMICIL/R-HOME VISIT EST PAT	E & M - HOME SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1065	SHINGRIX VACC NOT ADM RSN DOC CLIN	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	99328	DOMICIL/R-HOME VISIT NEW PAT	E & M - HOME SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99324	DOMICIL/R-HOME VISIT NEW PAT	E & M - HOME SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77052	COMPUTER-AIDED DETECTION SCREENING MAMMOGRAPHY	RADIOLOGY-BREAST	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8574	NO STROKE FLW ISOLATED CABG SURGERY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5180	HEARING AID CROS BEHIND THE EAR	HCPCS - HEARING SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9634	H-REL QOL ASSESS 2 VST&QOL SME/IMPR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	88385	RA-BASED EVL MLT MOLEC PROBES 51 THRU 250 PROBES	PATH & LAB - SURGICAL PATHOLOG	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	0191T	INSERT ANT SEGMENT DRAIN INT	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93299	INTERROG EVAL ICPMS/SCRMS	MEDICINE - CARDIOVASCULAR	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92559	GROUP AUDIOMETRIC TESTING	MEDICINE - SPECIAL OTORHINOLAR	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8572	NO DEEP STRNL WND INF/MEDIASTINITIS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A4466	GARMENT BELT SLEEVE OR OTH COVERING ELASTIC EACH	HCPCS - MED-SURG SUPPLIES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96152	INTERVENE HLTH/BEHAVE INDIV	MEDICINE - HEALTH AND BEHAVIOR	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95827	EEG ALL NIGHT RECORDING	MEDICINE - NEUROLOGY AND NEURO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9600	SYM AAAS THAT RQR URG/EMERGENT REPR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9942	PT ADD SP PROC SD LUMB DISCECT/LAM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9850	PT HAD GT 1 ED VST LST 30 DA OF LIFE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9828	HER2-TRG THER ADM DUR INIT CRS TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	D4321	PROVISIONAL SPLINTING EXTRACORONAL	HCPCS-DENTAL-Perio - Adjunct	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	C9754	CREATION AV FIST PERQ; DIR ANY SITE	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	93531	R & L HEART CATH CONGENITAL	MEDICINE - CARDIOVASCULAR	EXPIRED	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	92560	BEKESY AUDIOMETRY SCREEN	MEDICINE - SPECIAL OTORHINOLAR	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87515	IADNA HEPATITIS B VIRUS DIRECT PROBE TECHNIQUE	PATH & LAB - MICROBIOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62319	NJX INFUS/BOLUS DX/SBST EDRL/SUBARACH LUM/SACRAL	SURGERY - NERVOUS SYSTEM	EXPIRED	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	A4344	IDC FOLEY TYP TWO-WAY ALL SIL/PU EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94240	FUNCTIONAL RESIDUAL CAPACITY OR RESIDUAL VOLUME	MEDICINE - PULMONARY	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G9632	PT NOT ELG E.G. GYN/OTH PLV MAL DOC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			

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MMAI-Medicare/Medicaid	10022	FINE NEEDLE ASPIRATION WITH IMAGING GUIDANCE	SURGERY - GENERAL	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8974	HGB LEVEL MSR NOT DOC RSN NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80500	LAB PATHOLOGY CONSULTATION	PATH & LAB - CONSULTATIONS (CL	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0464	PRSSURE SUPP VENT W/VOL CNTRL NONINVASV INTERFCE	HCPCS - DME	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	49580	RPR UMBIL HERN REDUC LT 5 YR	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33015	INCISION OF HEART SAC	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78647	CEREBROSPINAL FLUID SCAN	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99327	DOMICIL/R-HOME VISIT NEW PAT	E & M - HOME SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99251	INPATIENT CONSULTATION	E & M - CONSULTATIONS	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99201	OFFICE/OUTPATIENT VISIT NEW	E & M - OTHER E/M SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0356T	INSRT DRUG DEVICE FOR IOP	CATEGORY III CODES	EXPIRED	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0231T	NJX TFRML EPRL W/US LUMB/SAC	CATEGORY III CODES	EXPIRED	12/31/2020	12/31/2020	Carve Out		
MMAI-Medicare/Medicaid	82543	COL-CHR/MS STABLE ISOTOPE DIL 1 ANALYTE NES	PATH & LAB - CHEMISTRY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49568	HERNIA REPAIR W/MESH	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77051	COMPUTER-AIDED DETECTION DX MAMMOGRAPHY	RADIOLOGY-BREAST	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73520	RADEX HIPS BILATERAL 2 VIEWS ANTEROPOST PELVIS	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	50392	INTRO INTRACATH/CATH IN RNL PELVIS DRG&/NJX PRQ	SURGERY - URINARY SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99334	DOMICIL/R-HOME VISIT EST PAT	E & M - HOME SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0467T	REVJ/RPLMNT CH RESPIR ELTRD	CATEGORY III CODES	EXPIRED	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	0423T	ASSAY SECRETORY TYPE II PLA2	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0296T	EXT ECG RECORDING	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9666	PT H F/D LDL-C LT RSLT 70/189 MG/DL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	78206	LIVER IMAGE (3D) WITH FLOW	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78591	PULM VI GASEOUS 1 PRJCJ	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	77032	MAMMOGRAPHIC GID NEEDLE PLACEMENTT BREAST	RADIOLOGY-BREAST	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G9469	PT RECV CSGT /EQU 10 MG/D PDN EQ 90/GT D	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9390	NO UNPLN RUP PC RQR VITRECT CC SURG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9268	DOC PT 1/GT COMPLICATION W/I 90 DAYS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9264	DOC PT RCV MNT HDGT /EQU 90 D CTH DC RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G2154	PT REC 1TD VAC OR/1TDAP BTW 9YR MEA	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G9349	CT SCAN PARANSL SIN ORD DX/RCV 28 D	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9258	DOC OF PATIENT STROKE FOLLOWING CEA	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			

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MMAI-Medicare/Medicaid	G9241	PT VA NOT CATH TM MAINT HD INITIAT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G2165	PT NOT RECV IV 7/1 YR PRI&6/30 MSR;	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2158	PT PRIOR PNEUM VAC ADV REAC B4 MEAS	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2131	PATIENTS 81 YEARS & OLDR DX FRAILTY	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2061	Q NPH HP ONL A&M EST PT 7 D;5-10 M	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2024	SP CLCT SARS-COV2 COVID19 SNF/L ANY	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	03/30/2020	03/30/2020			
MMAI-Medicare/Medicaid	75966	TRLUML BALO ANGIOPLASTY RENAL/OTH VISC ART RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	K0734	SKIN PROTECTION WC SEAT CUSH ADJ WIDTH LESS THAN 22 INCH	HCPCS - K CODES -DMERCS ONLY	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	95953	EEG MONITORING/COMPUTER	MEDICINE - NEUROLOGY AND NEURO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9365	ONE HIGH-RISK MEDICATION ORDERED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G8959	CLINCIAN TX MDD COM CLINCIAN TX CC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9827	HER2-TRG THER NOT ADM DUR INIT TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	0297T	EXT ECG SCAN W/REPORT	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01935	ANESTH PERC IMG DX SP PROC	ANESTH - RADIOLOGICAL PROCEDUR	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9816	D OCR AFT D/C HOSP W/I 30 D P PCR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	94620	PULMONARY STRESS TESTING SIMPLE	MEDICINE - PULMONARY	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G9966	CHLDRN SCR RISK DVLP BEHA & SOC DLA	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	83913	MOLECULAR DIAGNOSTICS RNA STABILIZATION	PATH & LAB - CHEMISTRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	78807	NUCLEAR LOCALIZATION/ABSCESS	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	K0903	FOR DIAB ONLY MX DEN INSRT DIR CARV CSTM FAB EA	HCPCS - DME	EXPIRED	03/31/2018	03/31/2018			
MMAI-Medicare/Medicaid	99354	PROLNG SVC O/P 1ST HOUR	E & M - PROLONGED SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9948	PT ADD SP PROC SD LUMB DISCECT/LAM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9933	ADENOMA/CRC DETECTED DUR SCR COLO	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9904	DOC MED RSN FOR NOT SCR TOBACCO USE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	36870	THRMBC PRQ ARVEN FSTL AUTOG/NONAUTOG GRF	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9855	PATIENTS WHO DIED FROM CANCER	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	82491	CHROMATOGRAPHY QUAN COLUMN 1 ANALYTE NES	PATH & LAB - CHEMISTRY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92226	SPECIAL EYE EXAM SUBSEQUENT	MEDICINE - OPHTHALMOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	72090	RADEX SPINE SCOLIOS STUDY W/SUPINE & ERECT STUDY	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28290	CORRJ HALLUX VALGUS W/WO SESMDC SMPL EXOSTECTOMY	SURGERY - MUSCULOSKELETAL SYST	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0053U	ONC PRST8 CA FISH ALYS 4 GEN	CATEGORY III CODES	EXPIRED	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	M1064	SHINGRIX VACC DOC AS ADM/PREV RCVD	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			

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MMAI-Medicare/Medicaid	G9739	PT UN CMPL G ORTH FS PROM I EVL&/DC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9633	PT DID NOT SUSTN URETER INJ 30D PS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	78000	THYROID UPTAKE SINGLE DETERMINATION	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	G9834	PATIENT HAS METASTATIC DZ AT DX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	0397U	ONC NONSM CLL LNG CA 109	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0168U	FTL ANEUPLOIDY DNA SEQ ALYS	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	03/11/2020	12/31/2078			
MMAI-Medicare/Medicaid	92993	REVISION OF HEART CHAMBER	MEDICINE - CARDIOVASCULAR	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0314T	LAPS RMVL VGL ARRY&PLS GEN	CATEGORY III CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0230T	NJX TFRML EPRL W/US LUMB/SAC	CATEGORY III CODES	EXPIRED	12/31/2020	12/31/2020	Carve Out		
MMAI-Medicare/Medicaid	0229T	NJX TFRML EPRL W/US CER/THOR	CATEGORY III CODES	EXPIRED	12/31/2020	12/31/2020	Carve Out		
MMAI-Medicare/Medicaid	0387T	TRANSCATH INSERT OR REPLACE LEADLESS PM VENTR	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	94350	DETER MALDISTRIBJ OF INSPIRED GAS N WSHOT CURVE	MEDICINE - PULMONARY	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	94400	CO2 BREATHING RESPONSE CURVE	MEDICINE - PULMONARY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9745	NASAL ENDO SURG; BALLN DILAT EUST T	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	06/15/2017	12/31/2078			
MMAI-Medicare/Medicaid	G9836	REASON FOR NOT ADM TRASTUZUMAB DOC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	19272	EXTENSIVE CHEST WALL SURGERY	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	87277	IAADI LEGIONELLA MICDADEI	PATH & LAB - MICROBIOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1071	PT ADD SP PROC PERF SD L DSKC/LAMNT	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	99355	PROLNG SVC O/P EA ADDL 30	E & M - PROLONGED SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D4320	PROVISIONAL SPLINTING-INTRACORONAL	HCPCS-DENTAL-Perio - Adjunct	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	M1025	PT IN HOSPICE ANY TIME DUR PERF PRD	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1015	D/C/DISCONT EP OF CARE DOC MED REC	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	0034A	ADM SARSCOV2 VAC AD26 .5ML B	MEDICINE - VACCINES, TOXOIDS	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0098U	RESPIR PATHOGEN 14 TARGETS	PATH & LAB - CHEMISTRY	EXPIRED	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	G9256	DOC PATIENT DEATH FOLLOWING CAS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	58293	VAG HYST W/URO REPAIR COMPL	SURGERY - FEMALE GENITAL SYSTE	EXPIRED	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	G8926	SPIRO TST NOT PRFRM/DOC RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76102	COMPLEX BODY SECTION X-RAYS	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G2124	PT 66-80 & 1 CL FRLTY MP&D DMNT MED	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	C9132	PRT CC KCENTRA PER I.U. FCT IX ACTV	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	10/01/2013	10/01/2013			
MMAI-Medicare/Medicaid	87470	IADNA BARTONELLA DIRECT PROBE TECHNIQUE	PATH & LAB - MICROBIOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64560	PRQ IMPLTJ NSTIM ELTRDS AUTONOMIC NRV	SURGERY - NERVOUS SYSTEM	EXPIRED	04/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	0390T	PERI-PROC DEVICE EVAL IN PERS LEADLESS PM SYSTEM	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	G9817	D NOT OCR AFT DC HOS W/I 30 D P PCR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	33722	REPAIR OF HEART DEFECT	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0487T	TRVG BIOMCHN MAPG W/REPRT	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0478T	REC FTL CAR 3 CH REV I&R	Category III Codes	EXPIRED	06/15/2017	12/31/2078			
MMAI-Medicare/Medicaid	92992	REVISION OF HEART CHAMBER	MEDICINE - CARDIOVASCULAR	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0272U	HEM GENETIC BLD DO 60 GENES	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	G9559	DOC MED RSN NOT PRSC BETA-LACTM ABX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9526	PT NOT REF HOSPICE CARE RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9301	PT HAD P ABX INFUS PRIOR INFLAT TQ	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	83914	MUTATION ID ENZYMATIC LIG/PRIMER XTN 1 SGM EA	PATH & LAB - CHEMISTRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	83788	MASS SPECT&TANDEM MASS SPECT ANAL QUAL EA SPEC	PATH & LAB - CHEMISTRY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	63194	INCISE SPINE & CORD CERVICAL	SURGERY - NERVOUS SYSTEM	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	83891	MOLEC ISOL/XTRJ HP NUCLEIC ACID EA TYPE	PATH & LAB - CHEMISTRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	G9578	DOC SGND OPIOID TX AGRMNT 1 DUR TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9261	DOC PT SURV & ABSNCE STROKE FLW CEA	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			

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MMAI-Medicare/Medicaid	G9250	DOC PAIN TO CMFRT 48 HRS INIT ASMT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	90862	PHARMACOLOGIC MGMT MIN MEDICAL PSYCHOTHERAPY	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	83904	MOLEC MUTATION ID SEQUENCING 1 SGM EA SGM	PATH & LAB - CHEMISTRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	36148	INTRO NDL/CATH AV SHUNT ADDL ACCESS THER IVNTJ	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9857	PATIENT ADMITTED TO HOSPICE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9738	PATIENT REFUSED TO PARTICIPATE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	74245	X-RAY UPPER GI&SMALL INTEST	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	63196	INCISE SPINE&CORD 2 TRX CRVL	SURGERY - NERVOUS SYSTEM	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G9198	ORD 1ST/2ND CEPH NOT DOC R NOT GVN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	C9054	INJECTION LEFAMULIN XENLETA 1 MG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	83901	MOLECULAR DX AMP TARGET MULTIPLEX EA ADDL SEQ	PATH & LAB - CHEMISTRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	82486	CHROMATOGRAPHY QUAL COLUMN ANALYTE NES	PATH & LAB - CHEMISTRY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19366	BREAST RECONSTRUCTION	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	01180	ANESTHESIA OBTURATOR NEURECTOMY EXTRAPELVIC	ANESTH - PELVIS (EXCEPT HIP)	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9718	HSPC SRVC PT PROV ANY TM DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	0150U	DRUG ASSAY 120+ RX/METABLT	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	0139U	NEURO AUSTM MEAS 6 C METABLT	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	64410	N BLOCK INJ PHRENIC	SURGERY - NERVOUS SYSTEM	EXPIRED	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	64402	N BLOCK INJ FACIAL	SURGERY - NERVOUS SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78223	HEPATBL DUX SYS IMG GLBLDR	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0163T	TOT DISC ARTHRP EA ADDL LMBR	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9810	PT ACHV PDC AL 75PCT ASTHMA CONTR MED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9800	PTS ID HAV INTOLERNCE/ALLERGY BB TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G8810	RHOGAM NOT ORDERED REASONS DOC CLIN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77056	MAMMOGRAPHY BILATERAL	RADIOLOGY-BREAST	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8730	PAIN ASSESS POS TOOL F/U PLAN DOC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9400	DOC MED/PT RSN NOT DISC TX OPTIONS;	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9303	OP RPT NOT ID PROS SPEC RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G2159	PT NOT REC 13-VAL CONJ & 23 -VAL GT 60	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2123	PT 66-80 YR/&AL 1 CLM FRLTY DUR MSR	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	69605	MASTOID SURGERY REVISION	SURGERY - AUDITORY SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9360	NO DOC NEG/MANAGED POS TB SCREEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			

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MMAI-Medicare/Medicaid	G9300	DOC RSN NOT INFUS P ABX PRI PROX TQ	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	63182	REVISE SPINAL CORD LIGAMENTS	SURGERY - NERVOUS SYSTEM	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G2162	PT NOT REC 1DS HRP ZOST OR 2DS EQU GT 50	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2155	PT HX 1+ CNTR ANAPH TDAP ANAP TD EN	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G8509	PN ASMT DOC POS F/U PLN NO DOC NO R	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33011	REPEAT DRAINAGE OF HEART SAC	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96119	NEUROPSYC TSTG W/PROF I&R ADMN BY TECH PR HR	MEDICINE - CENTRAL NERVOUS SYS	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C9055	INJECTION BREXANOLONE 1 MG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0012U	GERMLN DO GENE REARGMT DETCJ	PATH & LAB - CHEMISTRY	EXPIRED	08/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	0001M	NFCT DS CHRNC HCV 6 BIOCHEM ASSAY SRM ALG LVR	PATH & LAB - CHEMISTRY	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G9584	PT EVAL RISK MISUSE OPI VAL INSTRM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9506	BIOLOGIC IMMUNE RESPONSE MOD PRSC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9262	DOC PT DEATH HOSPITAL FOLLOW EVAR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G8809	RH IMMUNE GLOBULIN RHOGAM ORDERED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83908	MOLECULAR DX AMPLIFICATION SIGNAL EACH SEQUENCE	PATH & LAB - CHEMISTRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	75791	ANGIOGRPHY AV SHUNT COMPLETE EVAL FLUOR RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	73510	RADEX HIP UNILATERAL COMPLETE MINIMUM 2 VIEWS	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0610	INJ CALC GLUCONATE/FRESEN PER 10 ML	HCPCS - DRUGS (NOT ORAL)	EXPIRED	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	U0005	IA DET NA; SARS-COV-2 COVID-19	HCPCS - PATH & LAB	EXPIRED	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2156	PT NOT REC 1TD VAC OR/1TDAP BTW 9YR	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2117	PT 66-80 CLM FRLTY&1 AC IP AD IL MP	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2102	DIL RET EYE EX OPH/OPTOM DOC & REV	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	59135	TREAT ECTOPIC PREGNANCY	SURGERY - MATERNITY CARE AND D	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92225	SPECIAL EYE EXAM INITIAL	MEDICINE - OPHTHALMOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37202	TCAT THER INFUSION OTH/THN THROMBOLYSIS ANY TYPE	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	72275	EPIDUROGRAPHY	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	05/01/2017	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	G9851	PT HAD 1/LT ED VST LAST 30 DA LIFE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9803	PT PRSC 180-D MSR BB PST D/C AMI	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9909	D M R NOT PROV T CESS INT IF ID T U	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9747	PT IS UNDRGO PALLIAT DIALYSIS CATH	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9450	HISTORY OF INJECTION DRUG USE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9340	FINAL RPT DOC DICOM DATA 12 -MO AFTR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			

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MMAI-Medicare/Medicaid	K0553	SPL ALLOW TX CGM1 MO SPL EQU 1 U SRVC	HCPCS - K CODES -DMERCS ONLY	EXPIRED	06/15/2017	06/15/2017			
MMAI-Medicare/Medicaid	G9523	PT DXD HEMODIAL/PERITONEAL DIALYSIS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9251	DOC PAIN NOT CMFRT 48 HR INIT ASMT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	S0073	INJECTION AZTREONAM 500 MG	HCPCS - TEMP NATIONAL CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43760	CHANGE GASTROSTOMY TUBE PERCUTANEOUS W/O GDNCE	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8973	MOST RECENT HGB LEVEL LT 10 G/DL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G2133	PT 66-80 CLM FRLTY&1 AC IP ADV I MP	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2132	PT 66-80 CLM FRLTY&DIS MED DMNT MP	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	37251	IV US NON-C VSL DX EVAL&/THER IVNTJ EA VSL	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93532	R & L HEART CATH CONGENITAL	MEDICINE - CARDIOVASCULAR	EXPIRED	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	G2023	SPEC CLCT SARS-COV2 COVID19 ANY SRC	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	03/30/2020	03/30/2020			
MMAI-Medicare/Medicaid	94725	MEMB DIFFUSION CAP	MEDICINE - PULMONARY	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G2120	W/I PST 2 Y CA&/VITD OPT NO ORD/PER	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	A4397	IRRIGATION SUPPLY; SLEEVE EACH	HCPCS - MED-SURG SUPPLIES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95956	EEG MONITOR TECHNOL ATTENDED	MEDICINE - NEUROLOGY AND NEURO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83909	MOLEC SEP&ID HI RESOLU TQ EACH NUCLEIC ACID PREP	PATH & LAB - CHEMISTRY	EXPIRED	04/01/2010	12/31/2012			

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MMAI-Medicare/Medicaid	82489	CHROMATOGRAPHY QUAL THIN LAYER ANALYTE NES	PATH & LAB - CHEMISTRY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82488	CHROMATOGRAPHY QUAL PAPR 2-DIMENSIONAL ANAL NES	PATH & LAB - CHEMISTRY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49656	LAP INC HERNIA REPAIR RECUR	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49570	RPR EPIGASTRIC HERN REDUCE	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0492T	ABL LSR OPN WND ADDL 20 SQCM	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	75978	TRANSLUMINAL BALLOON ANGIOPLASTY VENOUS RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75968	TRLUML BALO ANGIOPLASTY EA VISCERAL ART RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99420	ADMN & INTERPJ HEALTH RISK ASSESSMENT INSTRUMENT	E & M - PREVENTIVE MEDICINE SE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99357	PROLNG SVC I/P/OBS EA ADDL	E & M - PROLONGED SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99336	DOMICIL/R-HOME VISIT EST PAT	E & M - HOME SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0462T	PRGRMG EVL AORTIC VENTR SYS	CATEGORY III CODES	EXPIRED	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	0396T	INTRAOP KINETIC BALNCE SENSR	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	93561	CARDIAC OUTPUT MEASUREMENT	MEDICINE - CARDIOVASCULAR	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62318	NJXS INFUS/BOLUS DX/SBST EDRL/SUBARACH CRV/THRC	SURGERY - NERVOUS SYSTEM	EXPIRED	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	V5170	HEARING AID CROS IN THE EAR	HCPCS - HEARING SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11100	BX SKIN SUBCUTANEOUS&/MUCOUS MEMBRANE 1 LESION	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	0460T	REPOS AORTIC VENTR DEV ELTRD	CATEGORY III CODES	EXPIRED	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	0400T	MLTISPECTRL DIGITAL LES ALYS	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	S0030	INJECTION METRONIDAZOLE 500 MG	HCPCS - TEMP NATIONAL CODES	EXPIRED	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	G9937	DIAGNOSTIC COLONOSCOPY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	00740	ANES UPPER GI ENDOSCOPY PROXIMAL TO DUODENUM	ANESTH - UPPER ABDOMEN	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1842	RET PROS ALL I&EX CMPNT;AO TO C1841	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	71030	RADEX CHEST COMPLETE MINIMUM 4 VIEWS	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	71021	RADEX CH 2 VIEWS FRNT & LAT APICAL LORDOTIC PX	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0313T	LAPS RMVL NSTIM ARRAY VAGUS	CATEGORY III CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	83896	MOLECULAR DX NUCLEIC ACID PROBE EACH	PATH & LAB - CHEMISTRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	G9558	PT TX W/BETA-LACTAM ABX DEFINITV TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	92543	CALORIC VESTIBULAR TEST EA IRRIGATION W/RECORD	MEDICINE - SPECIAL OTORHINOLAR	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90911	BIOFEEDBACK PERI/URO/RECTAL	MEDICINE - BIOFEEDBACK	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	90804	INDIV PSYCTX OFFICE/OUTPATIENT 20-30 MIN	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	75964	TRLUML BALOON ANGIOP PERIPHER EA ADDL ART RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74020	RADEX ABDOMEN COMPL W/DCBTS&/ERC VIEWS	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G2157	PT REC 13-VAL PNEUM CONJ& 23-VALGT 60	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2130	PT 66/GT INST SNP/RES LTC GT 90 DA MSR	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	80502	LAB PATHOLOGY CONSULTATION	PATH & LAB - CONSULTATIONS (CL	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82541	COL-CHR/MS QUAL 1 STATIONARY&MOBILE PHASE NES	PATH & LAB - CHEMISTRY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95834	BODY MUSCLE TESTING MANUAL	MEDICINE - NEUROLOGY AND NEURO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9750	PT APV QUAL TP PROG & SCH LD KID TP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9631	PT URETR INJ SRG/DISC 30 D POSTSURG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	0151U	NFCT BCT/VIR RESP NFCTJ 33	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	78220	LVR FUNCJ STD HEPATBL AGT SRL IMAGES	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	78003	PLASMA VOL RADIOPHARM VOL DILUTION SPX 1 SAMPLE	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	77776	INTERSTITIAL RADIATION SOURCE APPLIC SIMPLE	RADIOLOGY - RADIATION ONCOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77777	INTERSTITIAL RADIATION SOURCE APPLIC INTERMED	RADIOLOGY - RADIATION ONCOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49590	REPAIR SPIGELIAN HERNIA	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1066	SHINGRIX VACC NOT DOC AS ADM NO RSN	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	0126U	FTL CGEN ABNOR PRNT COMP 5 Y	PATH & LAB - CHEMISTRY	EXPIRED	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	0097U	GI PATHOGEN 22 TARGETS	PATH & LAB - CHEMISTRY	EXPIRED	05/01/2022	05/31/2022			

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MMAI-Medicare/Medicaid	33870	TRANSVERSE AORTIC ARCH GRAFT	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1062	PATIENT IMMUNOCOMPROMISED	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	35476	TRLUML BALLOON ANGIOPLASTY PERCUTANEOUS VENOUS	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8674	RSK-A ST CH R SC N CR M TS RB N RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G9574	18/OLDR MD/DYSTH NO REMS 6M PHQ NO	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G2103	7 STD FLD STREO PH OPH/OPTM DOC&REV	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	79000	Nuclear therapy, hyperthyroidism	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	G9269	DOC PT W/O 1/GT COMP NO M W/I 30 DAY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	36147	INTRO NDL/CATH AV SHUNT IST ACCESS W/ RAD EVAL	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	22851	APPLICATION INTERVERTEBRAL BIOMECHANICAL DEVICE	SURGERY - MUSCULOSKELETAL SYST	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C1841	RETINAL PROSTH INCL INTRL&EXT CMPNT	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	10/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G2089	MOST RECENT HBA1C LVL 7.0PCT TO 9.0PCT	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2134	PT 66/GT 1+ FRAILTY MED DEMENTIA YR	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G9640	DOC OF PLANNED HYBRID/STAGED PROC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	83903	MOLEC MUTATION SCANNING PROPERTIES 1 SGM EACH	PATH & LAB - CHEMISTRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	82487	CHROMATOGRAPHY QUAL PAPR 1-DIMENSNL ANALYTE NES	PATH & LAB - CHEMISTRY	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	50394	INJECTION PROCEDURE PYELOGRAPHY VIA TUBE/CATH	SURGERY - URINARY SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	97261	Manipulation, performed by physician; each addtnl area	MEDICINE - PHYSICAL MEDICINE A	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	G9829	BREAST ADJUVANT CHEMOTHERAPY ADM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9814	DEATH OCR DUR INDEX ACUTE CARE HOSP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	62163	ZNEUROENDOSCOPY W/FB REMOVAL	SURGERY - NERVOUS SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0551T	TPRNL BALO CNTNC DEV ADJMT	CATEGORY III CODES	EXPIRED	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	0376T	INSERT ANT SEGMENT DRAIN INT	CATEGORY III CODES	EXPIRED	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	62311	NJX DX/THER SBST EPIDURAL/SUBARACH LUMBAR/SACRAL	SURGERY - NERVOUS SYSTEM	EXPIRED	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	S0077	INJ CLINDAMYCIN PHOSPHATE 300 MG	HCPCS - TEMP NATIONAL CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9826	PT TRANS TO PRACTICE AFT INIT CHEMO	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	0548T	TPRNL BALO CNTNC DEV BI	CATEGORY III CODES	EXPIRED	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	0497T	XTRNL PT ACT ECG IN-OFF CONN	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0453T	INSJ/RPLCMT MECH-ELEC NTRFCE	CATEGORY III CODES	EXPIRED	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	0315T	RMVL VAGUS NERVE PLS GEN	CATEGORY III CODES	EXPIRED	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	0325U	ONC OVAR SPHRD CELL PARP	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	G9617	PREOP ASSESS NOT DOC RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			

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MMAI-Medicare/Medicaid	35761	EXPLORATION OF ARTERY/VEIN	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00810	ANES LOWER INTESTINE ENDOSCOPY DISTAL DUODENUM	ANESTH - LOWER ABDOMEN	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83902	MOLECULAR DIAGNOSTICS REVERSE TRANSCRIPTION	PATH & LAB - CHEMISTRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	82492	CHROMATOGRAPHY QUAN COLUMN MULTIPLE ANALYTES	PATH & LAB - CHEMISTRY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73500	RADEX HIP UNILATERAL 1 VIEW	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J9315	INJECTION ROMIDEPSIN 1 MG	HCPCS - CHEMO DRUGS	EXPIRED	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	G9935	ADENOMA/CRC NOT DETECTED DUR SCR CO	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9924	DOC MED NO R SAF CNCRN/REC POS SCR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9932	DOC PT RSN NO REC N/MNG POS TB SCR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	78806	ABSCESS IMAGING WHOLE BODY	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1061	PATIENT PREGNANCY	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	35741	EXPLORATION POPLITEAL ARTERY	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1022	PT IN HOSPICE ANY TIME DUR PERF PRD	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	J9044	INJECTION BORTEZOMIB NOS 0.1 MG	HCPCS - CHEMO DRUGS	EXPIRED	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	33010	DRAINAGE OF HEART SAC	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0295T	EXT ECG COMPLETE	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0271U	HEM CGEN NEUTROPENIA 24 GEN	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	95951	EEG MONITORING/VIDEORECORD	MEDICINE - NEUROLOGY AND NEURO	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	86729	ANTIBODY LYMPHOGRANULOMA VENEREUM	PATH & LAB - IMMUNOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86185	CNTERIMMUNOELECTROPHORESIS EACH ANTIGEN	PATH & LAB - IMMUNOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86243	FC RECEPTOR	PATH & LAB - IMMUNOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19304	MAST SUBQ	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1138	ONGOING CARE NOT INDICAT SEEN 1-2 V	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	88386	RA-BASED EVAL MLT MOLEC PROBES 251 THRU 500 PRBS	PATH & LAB - SURGICAL PATHOLOG	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	87477	IADNA BORRELIA BURGDORFERI QUANTIFICATION	PATH & LAB - MICROBIOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33470	REVISION OF PULMONARY VALVE	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1140	ONGO C N I DC 1-2 V DT MD EVNT DOC	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1033	PT FOR OUD INIT AFT JUNE 30 PERF PR	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	D8060	INTRCPTV ORTHODONT TX TRNSITNL DENT	HCPCS - DENTAL	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	57112	VAGINECTOMY W/NODES COMPL	SURGERY - FEMALE GENITAL SYSTE	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	83912	MOLECULAR DIAGNOSTICS INTERPRETATION & REPORT	PATH & LAB - CHEMISTRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	92506	SPEECH/HEARING EVALUATION	MEDICINE - SPECIAL OTORHINOLAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	84061	PHOSPHATASE ACID FORENSIC EXAMINATION	PATH & LAB - CHEMISTRY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76970	ULTRASOUND EXAM FOLLOW-UP	RADIOLOGY - DIAGNOSTIC ULTRASO	EXPIRED	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	82544	COL-CHR/MS STABLE ISOTOPE DIL MLT ANALYTES NES	PATH & LAB - CHEMISTRY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95832	HAND MUSCLE TESTING MANUAL	MEDICINE - NEUROLOGY AND NEURO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94250	EXPIRED GAS COLLECTION	MEDICINE - PULMONARY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78135	RED CELL SURVIVAL KINETICS	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01190	ANESTHESIA OBTURATOR NEURECTOMY INTRAPELVIC	ANESTH - PELVIS (EXCEPT HIP)	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0249T	LIGATION HEMORRHOID W/US	CATEGORY III CODES	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	C9053	INJECTION CRIZANLIZUMAB-TMCA 1 MG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	03/11/2020	12/31/2078			
MMAI-Medicare/Medicaid	C9041	INJ COAG FACTR XA INACTIVATED 10 MG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	03/01/2019	03/01/2019			
MMAI-Medicare/Medicaid	0228T	NJX TFRML EPRL W/US CER/THOR	CATEGORY III CODES	EXPIRED	12/31/2020	12/31/2020	Carve Out		
MMAI-Medicare/Medicaid	01936	ANESTH PERC IMG TX SP PROC	ANESTH - RADIOLOGICAL PROCEDUR	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0174	INJECTION, LECANEMAB-IRMB, 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	07/06/2023	12/31/2078			
MMAI-Medicare/Medicaid	83894	MOLEC SEP GEL ELECTROPHORESIS EACH PREPJ	PATH & LAB - CHEMISTRY	EXPIRED	04/01/2010	12/31/2012			

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MMAI-Medicare/Medicaid	74249	CONTRST X-RAY UPPR GI TRACT	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73530	RADEX HIP OPERATIVE PROCEDURE	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99356	PROLNG SVC I/P/OBS 1ST HOUR	E & M - PROLONGED SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99224	SUBSEQUENT OBSERVATION CARE	E & M - HOSPITAL INPATIENT SER	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	0386T	EX H RATE SZ 30+ DAY RI ONLY	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0382T	EXT H RATE SZ 14 DAY RI ONLY	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0317T	ELEC ALYS VAGUS NRV PLS GEN	CATEGORY III CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0145U	DRUG ASSAY 65+ RX/METABLT	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0405T	OVRSGHT XTRCORP LIV ASST PAT	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	G9749	PT IS UNDRGO PALLIAT DIALYSIS CATH	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G2135	PT 66/GT W/1+ ENC FRAILTY ADV ILNS YR	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2104	EYE IMG V 7SD FLD STEREO P RSL D&R	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G9783	DOC P DIA LDL-C RLT 70 MG/DL&NO STATN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9815	D DID NOT OCR DUR IDX AC CARE HOSP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9641	MAJOR AMPUTATION/OPEN SURG BYPS RQR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	D8050	INTRCPTV ORTHODONT TX PRIM DENTITN	HCPCS - DENTAL	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	0085T	BREATH TEST HEART REJECT	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0006U	DETC IA MEDS 120+ ANALYTES	PATH & LAB - CHEMISTRY	EXPIRED	08/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	15732	MUSC MYOCUTANEOUS/FASCIOCUTANEOUS FLAP HEAD&NC	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	72010	RADEX SPINE ENTIRE SURVEY STD ANTEROPOST & LAT	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	71010	RADIOLOGIC EXAMINATION CHEST SINGLE VIEW FRONTAL	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8872	EXCSD TISS EVAL IMAG IO CNF TGT LES	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8731	PN ASMT TOOL DOC NEG NO F/U PLN RQR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94770	EXHALED CARBON DIOXIDE TEST	MEDICINE - PULMONARY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9267	DOC PT 1/GT COMP/MORTALITY IN 30 DAY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	J7506	PREDNISONE ORAL PER 5 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8975	DOC MED RSN PT HGB LEVL LT 10 G/DL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93562	CARD OUTPUT MEASURE SUBSQ	MEDICINE - CARDIOVASCULAR	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9265	PT MAINT HD GT /EQU 90 DAY CATH AS VA	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	83900	MOLECULAR DX AMP TARGET MULTIPLEX 1ST 2 SEQ	PATH & LAB - CHEMISTRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	78584	PULM PI PART VNTJ 1 BRTH	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	99241	OFFICE CONSULTATION	E & M - CONSULTATIONS	EXPIRED	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	69715	TEMPLE BNE IMPLNT W/STIMULAT	SURGERY - AUDITORY SYSTEM	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	32405	PERCUT BX LUNG/MEDIASTINUM	SURGERY - RESPIRATORY SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0401T	MLTISPECTRL DIGITAL LES ALYS	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	83898	MOLECULAR DX AMPLIFICATION TARGET EA SEQUENCE	PATH & LAB - CHEMISTRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	49653	LAP VENT/ABD HERN PROC COMP	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77083	RADIOGRAPHIC ABSORPTIOMETRY 1+ SITS	RADIOLOGY-DIAGNOSTIC	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	78007	THYROID IMAGING W/UPTAKE MULT DETERMINATIONS	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	31588	LARYNGOPLASTY NOT OTHERWISE SPECIFIED	SURGERY - RESPIRATORY SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99218	INITIAL OBSERVATION CARE	E & M - HOSPITAL OBSERVATION S	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	63180	REVISE SPINAL CORD LIGAMENTS	SURGERY - NERVOUS SYSTEM	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0455T	REMVL AORTIC VENTR CMPL SYS	CATEGORY III CODES	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G0204	DIAGNOSTIC MAMMOGRAPHY INCL CAD WHEN PERF; BILAT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P2028	CEPHALIN FLOCCULATION BLOOD	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0470T	OCT SKN IMG ACQUISJ I&R 1ST	Category III Codes	EXPIRED	06/15/2017	12/31/2078			
MMAI-Medicare/Medicaid	G9835	TRASTUZUMAB ADM W/I 12 MO OF DX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	0454T	INSJ/RPLCMT SUBQ ELECTRODE	CATEGORY III CODES	EXPIRED	01/27/2017	12/31/2078			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	0386U	GI BARRETT ESOPH MTHYLTN ALY	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0355T	GI TRACT CAPSULE ENDOSCOPY	CATEGORY III CODES	EXPIRED	03/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	94370	DETER AIRWY CLOSING VOL 1 BRTH TSTS	MEDICINE - PULMONARY	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G9635	HLTH-REL QOL NOT ASSESS TL DOC RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9620	PT NOT SCR UTERN MALG/NO U/S NO RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9560	PT NOT TX BETA-LCTM ABX RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	88154	CYTP SLIDES C/V MNL SCR&CPTR-RESCR CELL S&I	PATH & LAB - CYTOPATHOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8960	CLN TX MDD NOT C CLN CC RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0549T	TPRNL BALO CNTNC DEV UNI	CATEGORY III CODES	EXPIRED	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	93533	R & L HEART CATH CONGENITAL	MEDICINE - CARDIOVASCULAR	EXPIRED	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	G9907	DOC MED RSN NOT PROV TOB CESS INTVN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9701	CHLDN TAKNG ABX 30 DA PRI DATE ENC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	0144U	DRUG ASSAY 160+ RX/METABLT	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	78586	PULM VI AERSL 1 PROJECTION	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G9804	NO PRS LST 135 180-D BB PST DC AMI	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	J7303	CNTRACEPTVE SPL HORMONE VAG RING EA	HCPCS - DRUGS (NOT ORAL)	EXPIRED	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	78320	BONE IMAGING (3D)	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9532	DOC SYS RSN FOR OBTG IMAG OF HEAD	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9448	PT BORN IN THE YEARS 1945 TO 1965	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9401	NO DOC PT RCRD DISC BTW PHYS & PT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G1009	CDSM SAGE HMS DEFINED MCR AUC PROG	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	J9199	INJ GEMCITABINE HCL INFUGEM 200 MG	HCPCS-CHEMO DRUGS	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0491T	ABL LSR OPN WND 1ST 20 SQCM	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0463T	INTERROG AORTIC VENTR SYS	CATEGORY III CODES	EXPIRED	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	0476T	REC FTL CAR SGL ELEC TR DATA	Category III Codes	EXPIRED	06/15/2017	12/31/2078			
MMAI-Medicare/Medicaid	96153	INTERVENE HLTH/BEHAVE GROUP	MEDICINE - HEALTH AND BEHAVIOR	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50398	CHANGE NEPHROSTOMY/PYELOSTOMY TUBE	SURGERY - URINARY SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9833	PATIENT TRAN TO PRAC AFT INI CHEMO	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9825	HER2/NEU NEG OR UNDOCUMENTD/UNKNOWN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	0550T	TPRNL BALO CNTNC DEV RMVL EA	CATEGORY III CODES	EXPIRED	07/01/2019	07/01/2019			
MMAI-Medicare/Medicaid	0466T	INSJ CH WAL RESPIR ELTRD/RA	CATEGORY III CODES	EXPIRED	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	19260	REMOVAL OF CHEST WALL LESION	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G9647	PT MRS SCORE NOT OBTAINED 90 DA F/U	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9967	CHDRN NOT SCR RSK DVLP BEHA&SOC DLA	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	73540	RADEX PELVIS&HIPS INFT/CHLD MINIMUM 2 VIEWS	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49654	LAP INC HERNIA REPAIR	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0100U	RESPIR PATHOGEN 21 TARGETS	PATH & LAB - CHEMISTRY	EXPIRED	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	99225	SUBSEQUENT OBSERVATION CARE	E & M - HOSPITAL INPATIENT SER	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G9636	H-REL QOL NOT ASSES 2 VST/QOL DCLND	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	M1144	ONGO CAR NO INDC PT SN ONLY 1-2 VST	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G9266	PT MAINT HD GT /EQU 90 DAY NO CATH AS VA	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9263	DOC PT D/C ALIVE FLW EVAR AAA REPR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9257	DOC PATIENT STROKE FOLLOWING CAS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	0389T	PROG DEVICE EVAL IN PERSON LEADLESS PM SYSTEM	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J9310	INJECTION RITUXIMAB 100 MG	HCPCS - CHEMO DRUGS	EXPIRED	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	G8938	BMI O/S NOR PARAM F/U PT NOT ELIG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G2163	PT RC INFLUENZA ON/BTW JUL1 YR JN30	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	93530	RT HEART CATH CONGENITAL	MEDICINE - CARDIOVASCULAR	EXPIRED	05/22/2019	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	C9749	REPAIR NAS VEST LAT WALL STEN IMPL	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	19324	ENLARGE BREAST	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	78588	PULM PI PART VNTJ IMG AERSL 1/MLT PRJCJ	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	20926	REMOVAL OF TISSUE FOR GRAFT	SURGERY - MUSCULOSKELETAL SYST	EXPIRED	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	0385T	EX H RATE FOR SZ OVR 30 DAY	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0357U	ONC MLNMA AI QUAN ALYS 142	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	G9798	D/C AMI BTW 7/1 YR PRI MSR-6/30 MSR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9585	PT NOT EVL RSK MSUSE OPI VAL INSTRM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9562	PT F/U EVAL EV 3 MOS DUR OPIOID TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9302	P ABX NOT CMPL PRIOR TQ RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	77058	MRI BREAST UNILATERAL	RADIOLOGY-BREAST	EXPIRED	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	78010	THYROID IMAGING ONLY	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	77786	REMOTE AFTLD RADIONUCLIDE BRACHYTX 2-12 CHANNEL	RADIOLOGY - RADIATION ONCOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0128U	OB PE 3 ANALYTES Y CHRMSM	PATH & LAB - CHEMISTRY	EXPIRED	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	78205	LIVER IMAGING (3D)	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	J2505	INJECTION PEGFILGRASTIM 6 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	D0351	3D PHOTOGRAPHIC IMAGE	HCPCS- DENTAL-Radiographs	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0493T	CNTC NEAR IFR SPECTRSC WOUND	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	92561	BEKESY AUDIOMETRY DIAGNOSIS	MEDICINE - SPECIAL OTORHINOLAR	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49561	RPR VENTRAL HERN INIT BLOCK	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9579	NO DOC SGND OPIOID TX AGRMNT DUR TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G8573	STROKE FLW ISOLATED CABG SURGERY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8398	DILAT MACULAR/FUNDUS EXAM NOT PRFRM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49587	RPR UMBIL HERN BLOCK GT 5 YR	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49572	RPR EPIGASTRIC HERN BLOCKED	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99337	DOMICIL/R-HOME VISIT EST PAT	E & M - HOME SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49560	RPR VENTRAL HERN INIT REDUC	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9449	HX RECV BLOOD TRANSFUSIONS PRI 1992	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9359	DOC NG/MN P TB SCR E TB NOT AC 1Y V	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9326	CT NOT RPT RD INDX REG RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	78805	ABSCESS IMAGING LTD AREA	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	U0004	2019-NCOV CRONAVIRUS/COVID-19 ANY T	HCPCS - PATH & LAB	EXPIRED	03/18/2020	03/18/2020			
MMAI-Medicare/Medicaid	K0736	SKIN PROTCT/PSTN WC CUSHN ADJ WDTH LSS THN 22 IN DEPTH	HCPCS - K CODES -DMERCS ONLY	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	96150	ASSESS HLTH/BEHAVE INIT	MEDICINE - HEALTH AND BEHAVIOR	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83499	ASSAY OF HYDROXYPROGESTERONE 20-	PATH & LAB - CHEMISTRY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0169	CALCITRIOL 0.25 MICROGRAM	HCPCS - TEMP NATIONAL CODES	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	D5994	PERIODONTAL MED CARRIER LAB PROCESS	HCPCS - DENTAL	EXPIRED	10/05/2015	12/31/2078			
MMAI-Medicare/Medicaid	0452T	INSJ/RPLCMT DEV VASC SEAL	CATEGORY III CODES	EXPIRED	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	88318	DETERMINATIVE HISTOCHEMISTRY ID CHEM COMPONENTS	PATH & LAB - SURGICAL PATHOLOG	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	88107	CYTP FLU BR/WA XCPT C/V SMRS&FILTER INTERPJ	PATH & LAB - CYTOPATHOLOGY	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	83897	MOLEC NUCLEIC ACID TR EA NUCLEIC ACID PREPJ	PATH & LAB - CHEMISTRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	83890	MOLEC DIAG ISOL/XTRJ EA NUCLEIC ACID TYPE	PATH & LAB - CHEMISTRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	0392U	RX METAB GEN-RX IA 16 GENES	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	94750	PULMONARY COMPLIANCE STUDY	MEDICINE - PULMONARY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43855	REVISE STOMACH-BOWEL FUSION	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43850	REVISE STOMACH-BOWEL FUSION	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	M1063	PATIENTS RECEIVING HIGH DOSES IS TX	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1017	PATIENT ADM TO PALLIATIVE CARE SRVC	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	67112	RPR RETINAL DTCHMNT SCLERAL BUCKLING/VITRECTOMY	SURGERY - EYE AND OCULAR ADNEX	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78607	BRAIN IMAGING (3D)	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G2062	Q N-P HP ONL A&M EST PT 7 D;11-20 M	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2058	CCM SRVC EA A 20 M CS TM DIR CA MO	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G8873	PT NDLE LOC SPEC VERFD IO INSP/PATH	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8671	RSK-A ST CH R SC N CR M TS RBSEQU 0/GT 0	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G2095	DC SYS RSN N PRSC ACE INHB/ARB/ARNI	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G9811	PT NO ACHV PDC 75PCT ASTHMA CNTRL MED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9808	ANY PT NO AS CTR MED DISP DUR MSR Y	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9802	PT USE HOSPC SVC ANY TM DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9778	PT WHO HAVE A DX OF PREG DUR MSMNT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9774	PATIENTS WHO HAVE HAD HYSTERECTOMY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	74260	X-RAY EXAM OF SMALL BOWEL	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35721	EXPLORATION FEMORAL ARTERY	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	K1004	LOW FREQ US DIA TX DVC FOR HOME USE	HCPCS-K CODES-DMERCS ONLY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	G9399	DOC PT RCRD DISC BTW PHYS/CLIN & PT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9639	MAJOR AMP/OPEN SURG BYPS NOT RQR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	49652	LAP VENT/ABD HERNIA REPAIR	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0461T	REPOS AORTIC CONTRPULSJ DEV	CATEGORY III CODES	EXPIRED	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	0456T	REMVL AORTIC DEV VASC SEAL	CATEGORY III CODES	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	0277U	HEM GEN PLTLT FUNCJ DO 40	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0381T	EXT H RATE EPI SZ 14 DAYS	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0324U	ONC OVAR SPHRD CELL 4 RX PNL	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	J9037	INJ BELANTAMB MAFODOTIN-BLMF 0.5 MG	HCPCS - CHEMO DRUGS	YES	04/01/2021	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	33860	ASCENDING AORTIC GRAFT	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83905	MOLEC MUTATION ALLELE TRANSCRIPTION 1 SGM EA	PATH & LAB - CHEMISTRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	G9849	PATIENTS WHO DIED FROM CANCER	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9524	PATIENT WAS REF TO HOSPICE CARE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	D6052	SEMI-PRECISION ATTACHMENT ABUTMENT	HCPCS - DENTAL	EXPIRED	10/05/2015	12/31/2078			

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MMAI-Medicare/Medicaid	C9755	CREATION OF ARTERIOVENOUS FISR PERQ	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	76101	COMPLEX BODY SECTION X-RAY	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1139	ONGO CARE NO IND PT SD ER&SN 1-2 V	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G9196	DOC MED RSN NOT ORD 1/2 GEN CPH AMP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	15850	REMOVE SUTURES SAME SURGEON	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9856	PATIENT WAS NOT ADMITTED TO HOSPICE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9616	DOC RSN NOT DOC A PREOP ASSESSMENT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	M1137	DOC PT DX DEG NEURO COND DX EOC	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G9329	DICOM AVAIL 12-MO NOT DOC NO RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9327	CT RPT RD INDX REG ALL DATA ELEMENT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G8627	SURG PROC 30 DAY FLW CAT SURG COMP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8571	DVLP DP STRNL WND I/MDSTNT 30 D PO	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0020	INJ BUPIVICAINE HYDROCHLORIDE 30 ML	HCPCS - TEMP NATIONAL CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9747	ABLATION PROS TR HIFU INCL I GUID	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	06/15/2017	12/31/2078			
MMAI-Medicare/Medicaid	74480	INTRO URETERAL CATH/STENT PRQ RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0316T	REPLC VAGUS NERVE PLS GEN	CATEGORY III CODES	EXPIRED	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	G2119	W/ PST 2 Y CA &/ VITD OPT ORD/PERF	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	88347	IMMUNOFLUORESCENT STUDY EA ANTIBODY INDIR METHOD	PATH & LAB - SURGICAL PATHOLOG	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96151	ASSESS HLTH/BEHAVE SUBSEQ	MEDICINE - HEALTH AND BEHAVIOR	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0058T	CRYOPRESERVATION OVARY TISS	CATEGORY III CODES	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	M1024	12-17Y MD/D NR 6M PHQ-9/9M NA/GT /EQU 5	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	92564	SISI HEARING TEST	MEDICINE - SPECIAL OTORHINOLAR	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94360	DETER RESIST TO AIRFLO OSCILLATORY/PLETHYSMOGRAP	MEDICINE - PULMONARY	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	74241	X-RAY UPPER GI DELAY W/KUB	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q9995	INJECTION EMICIZUMAB-KXWH 0.5 MG	HCPCS - TEMP CODES	EXPIRED	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	G2164	PT PRIOR INFLU ADVS REACT ANY TIME	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2153	IN HOSPICE/USNG HOSPICE DUR MSR PER	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	99343	HOME VISIT NEW PATIENT	E & M - HOME SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99318	ANNUAL NURSING FAC ASSESSMNT	E & M - NURSING FACILITY SERVI	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99217	OBSERVATION CARE DISCHARGE	E & M - HOSPITAL OBSERVATION S	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77787	REMOTE AFTLD RADIONUCLIDE BRACHYTX GT 12 CHANNEL	RADIOLOGY - RADIATION ONCOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G2065	CCM 1 HOUR DZ SRVC PCM AL 30 MIN CM	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			

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MMAI-Medicare/Medicaid	0126T	CHD RISK IMT STUDY	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G1005	CDSM NIA DEFINED MCR AUC PROG	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G0202	SCREENING MAMMOGRAPHY BIL INCL CAD WHEN PERFORMD	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9240	PT VA CATH TIME MAINT HD INITIAT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9239	DOC RSN PT I MNT HD CTH MO VASC ACC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	92585	AUDITOR EVOKE POTENT COMPRE	MEDICINE - SPECIAL OTORHINOLAR	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61870	IMPLANT NEUROELECTRODES	SURGERY - NERVOUS SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	71035	RADEX CHEST SPECIAL VIEWS	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78001	THYROID UPTAKE MULTIPLE DETERMINATIONS	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	74010	RADEX ABD ANTEROPOST&ADDL OBLQ&CONE VIEWS	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94260	THRC GAS VOL	MEDICINE - PULMONARY	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93875	N-INVAS PHYSIOLOGIC STD XTRC ART COMPL BI STD	MEDICINE - NON-INVASIVE VASCUL	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	J2400	INJ CHLOROPROCAINE HCL PER 30 ML	HCPCS - DRUGS (NOT ORAL)	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64413	N BLOCK INJ CERVICAL PLEXUS	SURGERY - NERVOUS SYSTEM	EXPIRED	07/17/2015	07/17/2015			
MMAI-Medicare/Medicaid	D3427	PERIRADICULAR SURG W/O APICOECTOMY	Apicoectomy	EXPIRED	10/05/2015	12/31/2078			
MMAI-Medicare/Medicaid	J9031	BCG PER INSTILLATION	HCPCS - CHEMO DRUGS	EXPIRED	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	G9801	HOS PT TRANS DIR TO NON-ACF ANY DX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9618	DOC SCR UTEN MALIG/US&/ENDOMET SAMP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G8925	SP TR FEV1 GT EQU 60PCT FEV1/FVC GT EQU 70PCT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9623	DOC MED RSN NO SCR UNHLTHY AL USE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9837	TRASTUZUMAB NOT ADM W/I 12 MO OF DX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9748	PT APV QUAL TP PROG & SCH LD KID TP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9602	PT NOT D/C HOME BY POST-OP DAY 7	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9350	CT PARANSL SINUS NOT ORD DX/IN 28 D	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G0297	LOW DOSE CT SCAN FOR LUNG CANCR SCR	2004 Codeset	EXPIRED	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	21310	CLOSED TX NOSE FX W/O MANJ	SURGERY - MUSCULOSKELETAL SYST	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0125U	FTL CGEN ABNOR PRNT COMP 5	PATH & LAB - CHEMISTRY	EXPIRED	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	0124U	FTL CGEN ABNOR 3 ANALYTES	PATH & LAB - CHEMISTRY	EXPIRED	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	0111T	RBC MEMBRANES FATTY ACIDS	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0611	INJECT CALCIUM GLUCONATE PER 10 ML	HCPCS - DRUGS (NOT ORAL)	EXPIRED	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	95950	AMBULATORY EEG MONITORING	MEDICINE - NEUROLOGY AND NEURO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81545	ONCOLOGY THYROID	PATH & LAB - MICROBIOLOGY	EXPIRED	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	49655	LAP INC HERN REPAIR COMP	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49220	MULTIPLE SURGERY ABDOMEN	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0833	INJ COSYNTROPIN NOT OTHERWISE SPECIFIED 0.25 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77031	STRTCTC LOCLZJ GID BREAST BX/NEEDLE PLACEMENT	RADIOLOGY-BREAST	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	50393	INTRO URETER CATH/STNT RENAL PELVIS DRG&/NJX	SURGERY - URINARY SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69718	REVISE TEMPLE BONE IMPLANT	SURGERY - AUDITORY SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1023	PT 12-17Y MD/DYSTH NO R 6M PHQ-9/PH	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	G0206	DIAGNOSTIC MAMMOGRAPHY INCL CAD WHEN PERF; UNI	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1031	PATIENTS NO CLINICAL INDIC FOR IMAG	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	C9056	INJECTION GIVOSIRAN 0.5 MG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	03/11/2020	12/31/2078			
MMAI-Medicare/Medicaid	75962	TRANSLUMINAL BALLOON ANGIOP PERIPHERAL ART RSI	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74475	INTRO CATH IN RENAL PELVIS DRG&/NJX PRQ RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77055	MAMMOGRAPHY UNILATERAL	RADIOLOGY-BREAST	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0280	INJECTION AMINOPHYLLINE TO 250 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78585	PULM PI PART VNTJ RBRTHING&WSHOT +-1 BRTH	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	99219	INITIAL OBSERVATION CARE	E & M - HOSPITAL OBSERVATION S	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	95943	PARASYMP&SYMP HRT RATE TEST	MEDICINE - NEUROLOGY AND NEURO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1026	PT IN HOSPICE ANY TIME DUR PERF PRD	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	0384T	EX H RATE SZ 15-30 DAY RI	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0290T	LASER INC FOR PKP/LKP RECIP	CATEGORY III CODES	EXPIRED	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	0149U	DRUG ASSAY 60+ RX/METABLT	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0143U	DRUG ASSAY 120+ RX/METABLT	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	63199	INCISE SPIN&CORD 2 STGS THRC	SURGERY - NERVOUS SYSTEM	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	M1136	THE START OF AN EOC DOC MED RECORD	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	C9058	INJ PEGFLGRASTM-BMEZ BIOSMLR 0.5 MG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	03/11/2020	12/31/2078			
MMAI-Medicare/Medicaid	G9304	OP RPT IDS PROSTHETIC IMPLANT SPEC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9270	DOC PT W/O 1/MORE COMP W/I 90 DAYS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9259	DOC PT SURV & ABSNCE STROKE FLW CAS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G8422	BMI NOT DOC DOC PT NOT ELG BMI CALC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7401	MOMETASONE FUROATE SIN IMPL 10 MCG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	0146U	DRUG ASSAY 80+ RX/METABLT	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0127U	OB PE 3 ANALYTES	PATH & LAB - CHEMISTRY	EXPIRED	09/13/2019	12/31/2078			

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MMAI-Medicare/Medicaid	G9809	PT USE HOSPC SRVC ANY TM DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	78593	PULM VI GASEOUS RBRTHING&WSHOT 1 PRJCJ	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G9366	ONE HIGH-RISK MEDICATION NOT ORDERD	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	78710	KIDNEY IMAGING (3D)	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G2063	Q N-P HP ONL A&MGT EST TO 7 D;21/GT M	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2114	PT 66-80 1 CL FRLTY&DIS MED DMNT MP	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	C9057	INJECTION CETIRIZINE HCL 1 MG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	03/11/2020	12/31/2078			
MMAI-Medicare/Medicaid	0457T	REMVL MECH-ELEC SKIN NTRFCE	CATEGORY III CODES	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	0274U	HEM GEN PLTLT DO 62 GENES	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0269U	HEM AUT DM CGEN TRMBCTPNA 22	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0459T	RELOCAJ RPLCMT AORTIC VENTR	CATEGORY III CODES	EXPIRED	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	0451T	INSJ/RPLCMT AORTIC VENTR SYS	CATEGORY III CODES	EXPIRED	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	0383T	EXT H RATE SZ 15-30 DAYS	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0298T	EXT ECG REVIEW AND INTERP	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92586	AUDITOR EVOKE POTENT LIMIT	MEDICINE - SPECIAL OTORHINOLAR	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0468T	RMVL CH WAL RESPIR ELTRD/RA	CATEGORY III CODES	EXPIRED	06/30/2020	06/30/2020			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G0365	VESSEL MAPPING HEMODIALYSIS ACSS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31620	ENDOBRNCL US BRONCHOSCOPIC DX/THER IVNTJ	SURGERY - RESPIRATORY SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	K0554	RECEIVER DEDICATED TX GCM SYS	HCPCS - K CODES -DMERCS ONLY	EXPIRED	06/15/2017	06/15/2017			
MMAI-Medicare/Medicaid	49566	REREPAIR VENTRL HERN BLOCK	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87450	AG DETECT NOS IA SINGLE	PATH & LAB - MICROBIOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99340	DOMICIL/R-HOME CARE SUPERVIS	E & M - HOME SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99325	DOMICIL/R-HOME VISIT NEW PAT	E & M - HOME SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0056U	HEM AML DNA GENE REARGMT	ANESTH - INTRATHORACIC	EXPIRED	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	D7960	FRENULECTOMY SEP PROC NOT INCIDENTL	HCPCS - DENTAL	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	0099U	RESPIR PATHOGEN 20 TARGETS	PATH & LAB - CHEMISTRY	EXPIRED	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	83893	MOLEC DOT/SLOT BLOT EA NUCLEIC ACID PREPJ	PATH & LAB - CHEMISTRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	0312T	LAPS IMPLTJ NSTIM VAGUS	CATEGORY III CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	71020	RADIOLOGIC EXAM CHEST 2 VIEWS FRONTAL&LATERAL	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9561	PT PRSC OPIATES FOR LNGR THAN 6 WKS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G8874	EXC TISS NOT EVAL IMAG IO TARG LES	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8732	NO DOC PAIN ASMT REASON NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8628	SURG PROC NOT IN 30 DA FLW CAT SURG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76930	ECHO GUIDE CARDIOCENTESIS	RADIOLOGY - DIAGNOSTIC ULTRASO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5210	HEARING AID BICROS IN THE EAR	HCPCS - HEARING SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9563	PT NO F/U EVL EV 3 MOS DR OPIOID TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	83907	MOLEC DX LYSIS CELLS PRIOR NUCLEIC ACID EXTRTJ	PATH & LAB - CHEMISTRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	83906	MOLEC MUTATION ALLELE SPEC TRANSLATION 1 SGM EA	PATH & LAB - CHEMISTRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	83892	MOLEC ENZYMATIC DIGESTION EA ENZYME TX	PATH & LAB - CHEMISTRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	J0886	INJ EPOETIN ALFA 1000 UNITS FOR ESRD DIALYSIS	HCPCS - DRUGS (NOT ORAL)	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99220	INITIAL OBSERVATION CARE	E & M - HOSPITAL OBSERVATION S	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9503	PT TAKING TAMSULOSIN HYDROCHLORIDE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	86378	MIGRATION INHIBITORY FACTOR TEST MIF	PATH & LAB - IMMUNOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8672	RSK-A ST CH R SC N CR M TS RIB SCLT 0	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J2370	INJECTION PHENYLEPHRINE HCL TO 1 ML	HCPCS - DRUGS (NOT ORAL)	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95071	BRONCHIAL ALLERGY TESTS	MEDICINE - ALLERGY AND CLINICA	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B9000	ENTERAL NUTRITION INFUSION PUMP - WITHOUT ALARM	HCPCS - ENTERAL & PARENTERAL	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G8976	MOST RECENT HCB LEVEL GT EQU 10 G/DL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	90669	PCV7 VACCINE IM	MEDICINE - VACCINES, TOXOIDS	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8939	PA D P FU PL NOT D D PT NOT ELG ENC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8811	DOCUMENT RHOGRAM NOT ORDERED RSN NS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D8690	ORTHODONTIC TREATMENT	HCPCS - DENTAL	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	G1006	CDSM TEST APPROP DEFINED MCR AUC	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2166	PT REFUSED PARTICIPATE ADM &/ D/C;	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G9573	AD GT 18 YR MD/DYSTHYM REMISS 6 M PHQ	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9348	CT SCAN PNS ORDERED TIME DX DOC RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	72069	RADEX SPINE THORACOLMBR STANDING SCOLIOSIS	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G2161	PT PRIOR ADVS REACT ZOSTER ANY TIME	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G9197	DOC ORD FOR 1ST/2ND GEN CEPH AMP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9232	CLIN TREAT MDD NOT COM CLIN TRT CC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G2064	CCM 1 HR DZ AL 30 M PHYS T CA MO	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	62310	NJX DX/THER SBST EPIDURAL/SUBRACH CERV/THORACIC	SURGERY - NERVOUS SYSTEM	EXPIRED	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	G8442	PA NO DOC PRF DOC PT NOT ELG PA ENC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86822	HLA TYPING LYMPHOCYTE CULTURE PRIMED	PATH & LAB - IMMUNOLOGY	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G9577	PT PRSC OPIATES FOR LNGR THAN 6 WKS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9936	SRV CC-PH CLNC PLYP CC/O MN R RSJ&A	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9934	DOC NEO D ONLY DX TD SA SS PLYP/SSA	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	V5220	HEARING AID BICROS BEHIND THE EAR	HCPCS - HEARING SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9525	DOC PT RSN FOR NOT REF HOSPICE CARE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	96154	INTERV HLTH/BEHAV FAM W/PT	MEDICINE - HEALTH AND BEHAVIOR	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96118	NUROPSYC TESTING PR HR W/PT & INTERPJ TIME	MEDICINE - NEUROLOGY AND NEURO	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	77059	MRI BREAST BILATERAL	RADIOLOGY-BREAST	EXPIRED	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	77057	SCREENING MAMMOGRAPHY BILATERAL	RADIOLOGY-BREAST	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74247	CONTRST X-RAY UPPR GI TRACT	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78006	THYROID IMAGING W/UPTAKE SINGLE DETERMINATION	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	Q9993	INJECTION TAA PF EXT-RELEASE MS FORMULATION 1 MG	HCPCS - TEMP CODES	EXPIRED	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	0475T	REC FTL CAR SGL 3 CH I&R	Category III Codes	EXPIRED	06/15/2017	12/31/2078			
MMAI-Medicare/Medicaid	0458T	REMVL SUBQ ELECTRODE	CATEGORY III CODES	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	0148U	DRUG ASSAY 100+ RX/METABLT	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	63195	INCISE SPINE & CORD THORACIC	SURGERY - NERVOUS SYSTEM	EXPIRED	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	J0693	INJECTION CEFIDEROCOL 5 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	49582	RPR UMBIL HERN BLOCK LT 5 YR	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96111	DEVELOPMENTAL TESTING W/INTERP & REPORT	MEDICINE - CENTRAL NERVOUS SYS	EXPIRED	07/25/2016	12/31/2078			
MMAI-Medicare/Medicaid	49585	RPR UMBIL HERN REDUC GT 5 YR	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49565	REREPAIR VENTRL HERN REDUCE	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0498T	XTRNL PT ACT ECG R&I PR 30 D	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	77079	CT BONE MINERAL DENSITY STUDY 1+ SITS APPND	RADIOLOGY-DIAGNOSTIC	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	74000	RADEX ABDOMEN 1 ANTEROPOSTERIOR VIEW	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73550	RADIOLOGIC EXAMINATION FEMUR 2 VIEWS	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78596	PULM QUAN DIFFIAL FUNCJ VNTJ/PRFUJ STD	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0391T	INTERROG DEVICE EVAL IN PERSON LEADLESS PM SYST	CATEGORY III CODES	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	99326	DOMICIL/R-HOME VISIT NEW PAT	E & M - HOME SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0477T	REC FTL CAR SGL XRTJ ALYS	Category III Codes	EXPIRED	06/15/2017	12/31/2078			
MMAI-Medicare/Medicaid	0471T	OCT SKN IMG ACQUISJ I&R ADDL	Category III Codes	EXPIRED	06/15/2017	12/31/2078			
MMAI-Medicare/Medicaid	0278U	HEM GEN THROMBOSIS 14 GENES	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	G0431	RX SCR MX; RX CLASS HI CMPLX TST METH PER PT ENC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	63198	INCISE SPIN&CORD 2 STGS CRVL	SURGERY - NERVOUS SYSTEM	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J9380	INJECTION TECLISTAMAB-CQYV 0.5 MG	HCPCS - DRUGS (NOT ORAL)	NO	04/01/2010	04/01/2010	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9347	INJECTION TREMELIMUMAB-ACTL 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2023	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9323	INJ PEMETREXED DITROMETHAMINE 10 MG	HCPCS - CHEMO DRUGS	YES	07/01/2023	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9063	INJ MRVETUXIMB SORAVTANSN-GYNX 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2023	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9056	INJ BENDAMUSTINE HCL VIVIMUSTA 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2023	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J2329	INJECTION UBLITUXIMAB-XIIY 1MG	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2023	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	0806T	TCAT S&IVC PRSTC VL IMPL OPN	CATEGORY III CODES	YES	07/01/2023	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	0805T	TCAT S&IVC PRSTC VL IMPL PRQ	CATEGORY III CODES	YES	07/01/2023	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	0804T	PRGRMG EVL LDLS PM 2CHMBR IP	CATEGORY III CODES	YES	07/01/2023	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	0803T	TCAT RMV&RPL2CHMB LDLS PM RV	CATEGORY III CODES	YES	07/01/2023	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	0802T	TCAT RMV&RPL2CHMB LDLS PM RA	CATEGORY III CODES	YES	07/01/2023	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	0801T	TCAT RMV&RPL 2CHMBR LDLS PM	CATEGORY III CODES	YES	07/01/2023	12/31/2078	Carve Out		For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	90868	TCRANIAL MAGN STIM TX DELI	MEDICINE - PSYCHIATRY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	90867	TCRANIAL MAGN STIM TX PLAN	MEDICINE - PSYCHIATRY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C9149	INJECTION TEPLIZUMAB-MZWV 5 MCG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0013A	ADM SARSCOV2 100MCG/0.5ML3RD	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	

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MMAI-Medicare/Medicaid	C9147	INJECTION TREMELIMUMAB-ACTL 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2023	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	C9148	INJECTION TECLISTAMAB-CQYV 0.5 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2023	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	C9146	INJ MRVETUXIMB SORAVTANSN-GYNX 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2023	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	92229	IMG RTA DETC/MNTR DS POC ALY	MEDICINE - OPHTHALMOLOGY	NO	01/01/2021	07/30/2023			
MMAI-Medicare/Medicaid	J0598	INJ C1 ESTERASE INHIB CINRYZE 10 U	HCPCS - DRUGS (NOT ORAL)	YES	07/31/2023	12/31/2078			
MMAI-Medicare/Medicaid	0113A	ADM SARSCOV2 25MCG/0.25ML3RD	MEDICINE - VACCINES, TOXOIDS	NON-COV	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	0093A	ADM SARSCOV2 50 MCG/.5 ML3RD	MEDICINE - VACCINES, TOXOIDS	NON-COV	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	0092A	ADM SARSCOV2 50 MCG/.5 ML2ND	MEDICINE - VACCINES, TOXOIDS	NON-COV	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	0091A	ADM SARSCOV2 50 MCG/.5 ML1ST	MEDICINE - VACCINES, TOXOIDS	NON-COV	04/18/2023	12/31/2078		Non-Covered due to Non-FDA approved	
MMAI-Medicare/Medicaid	0795T	TCAT INS 2CHMBR LDLS PM CMPL	CATEGORY III CODES	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0399U	NEURO CERE FOLATE DEFNCY SRM	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0395U	ONC LNG MULTIOMICS PLSM ALG	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0391U	ONC SLD TUM DNA&RNA 437 GEN	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2023	12/31/2078			

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MMAI-Medicare/Medicaid	0387U	ONC MLNMA AMBRA1&AMLO	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J2371	INJECTION PHENYLEPHRINE HCL 20 MCG	HCPCS - DRUGS (NOT ORAL)	NO	07/01/2023	07/01/2023			
MMAI-Medicare/Medicaid	0807T	PULM TISS VNTJ ALYS PREV CT	CATEGORY III CODES	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0799T	TCAT RMVL 2CHMBR LDLS PM RA	CATEGORY III CODES	NO	07/01/2023	07/01/2023			
MMAI-Medicare/Medicaid	0791T	MOTR COG VR GAIT TRAIN EA 15	CATEGORY III CODES	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0401U	CRD C HRT DS 9 GEN 12 VRNTS	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0393U	NEU PRKSN MSFL A-SYNCLN PRTN	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0389U	PED FBRL KD IFI27&MCEMP1 RNA	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J1961	INJECTION LENACAPAVIR 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J1813	INSL LYUMJEV ADM THRU DME PER 50 U	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J1576	INJECTION IG IV NON-LYOPH 500 MG	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	Q4282	CYGNUS DUAL PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	Q4273	ESANO AAA PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	C9785	ENDO OUT RD GP APPL ENDO & IL T INS	HCPCS - C CODES-OUTPATIENT PP	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0308U	CRD CAD ALYS 3 PRTN 3 PARAM	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0797T	TCAT INS 2CHMBR LDLS PM RV	CATEGORY III CODES	YES	07/01/2023	12/31/2078			

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MMAI-Medicare/Medicaid	0400U	OB XPND CAR SCR 145 GENES	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0388U	ONC NONSM CLL LNG CA 37 GEN	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J2561	INJECTION PHENOBARBITAL SODIUM 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	07/01/2023	07/01/2023			
MMAI-Medicare/Medicaid	J1811	INSL FIASP ADM THRU DME PER 50 U	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	Q4280	XCELL AMNIO MATRIX PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J2372	INJECTION PE HCL BIORPHEN 20 MCG	HCPCS - DRUGS (NOT ORAL)	NO	07/01/2023	07/01/2023			
MMAI-Medicare/Medicaid	0808T	PULM TISS VNTJ ALYS W/CT	CATEGORY III CODES	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0800T	TCAT RMVL 2CHMBR LDLS PM RV	CATEGORY III CODES	NO	07/01/2023	07/01/2023			
MMAI-Medicare/Medicaid	0792T	APPL SLVR DIAMN FLUORIDE 38PCT	CATEGORY III CODES	NO	07/01/2023	07/01/2023			
MMAI-Medicare/Medicaid	J2427	INJECTION PAL PALMITATE ER 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J1814	INSULIN LYUMJEV PER 5 UNITS	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J0665	INJECTION BUPIVICAINE NOS 0.5 MG	HCPCS - DRUGS (NOT ORAL)	NO	07/01/2023	07/01/2023			
MMAI-Medicare/Medicaid	Q4283	BIOVNC TRI-LYR/BIOVNC 3L PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	Q4274	ESANO AC PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0796T	TCAT INS 2CHMBR LDLS PM RA	CATEGORY III CODES	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J0457	INJECTION AZTREONAM 100 MG	HCPCS - DRUGS (NOT ORAL)	NO	07/01/2023	07/01/2023			

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MMAI-Medicare/Medicaid	J2249	INJECTION REMIMAZOLAM 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J1920	INJECTION LABETALOL HCL 5 MG	HCPCS - DRUGS (NOT ORAL)	NO	07/01/2023	07/01/2023			
MMAI-Medicare/Medicaid	J7213	INJECTN COAG FACTOR IX IXINITY 1 IU	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	Q4278	EPIEFFECT PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J2426	INJ PP LAI EXT RLS INVGA SUSTNA 1MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G2170	PC AVF DIR TISS APP TR E&SEC RDR BF	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	G0460	AUTO PRP/OTH B-DERIV PD ND CW Q TX	HCPCS - PROC/PROF SERVICES (TE	YES	07/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0798T	TCAT RMV 2CHMBR LDLS PM CMPL	CATEGORY III CODES	NO	07/01/2023	07/01/2023			
MMAI-Medicare/Medicaid	J0216	INJECTION ALFENTANIL HCL 500 MCG	HCPCS - DRUGS (NOT ORAL)	NO	07/01/2023	07/01/2023			
MMAI-Medicare/Medicaid	J1812	INSULIN FIASP PER 5 UNITS	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	Q4281	BARRERA SL OR BARRERA DL PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	Q4272	ESANO A PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J9381	INJECTION TEPLIZUMAB-MZWV 5 MCG	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	C9784	GR PROC END SLV GP EGD & IL T INS	HCPCS - C CODES-OUTPATIENT PP	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	G0465	AUTO PRP/OT B-D PD DB CW FDA-CL DVC	HCPCS - PROC/PROF SERVICES (TE	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0793T	PRQ TCAT THRM ABLT NRV P-ART	CATEGORY III CODES	YES	07/01/2023	12/31/2078			

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MMAI-Medicare/Medicaid	J1836	INJECTION METRONIDAZOLE 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	07/01/2023	07/01/2023			
MMAI-Medicare/Medicaid	0398U	GI BARET ESPH DNA MTHYLN ALY	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0394U	PFAS 16 PFAS COMPND LC MS/MS	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0390U	OB PE KDR ENG&RBP4 IA ALG	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J2598	INJECTION VASOPRESSIN 1 UNIT	HCPCS - DRUGS (NOT ORAL)	NO	07/01/2023	07/01/2023			
MMAI-Medicare/Medicaid	J0736	INJECTION CLINDAMYCIN PHOS 300 MG	HCPCS - DRUGS (NOT ORAL)	NO	07/01/2023	07/01/2023			
MMAI-Medicare/Medicaid	Q4284	DERMABIND SL PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	Q4275	ESANO ACA PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0810T	SUBRTA NJX RX AGT W/VTRC	CATEGORY III CODES	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0794T	PT SPEC ALG RX-ONC TX OPTION	CATEGORY III CODES	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J0206	INJECTION ALLOPURINOL SODIUM 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J2305	INJECTION NITROGLYCERIN 5 MG	HCPCS - DRUGS (NOT ORAL)	NO	07/01/2023	07/01/2023			
MMAI-Medicare/Medicaid	J1941	INJECTION FUROSEMIDE 20 MG	HCPCS - DRUGS (NOT ORAL)	YES	07/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J1805	INJECTION ESMOLOL HCL 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	07/01/2023	07/01/2023			
MMAI-Medicare/Medicaid	J0737	INJ CP BXTR NOT THR EQ J0736 300 MG	HCPCS - DRUGS (NOT ORAL)	NO	07/01/2023	07/01/2023			
MMAI-Medicare/Medicaid	Q4276	ORION PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2023	12/31/2078			

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MMAI-Medicare/Medicaid	90679	RSV VACC PREF RECOMB ADJT IM	MEDICINE - VACCINES, TOXOIDS	NO	05/03/2023	05/03/2023			
MMAI-Medicare/Medicaid	J2215	UNKNOWN DESCRIPTION	UNKNOWN	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	J2213	UNKNOWN DESCRIPTION	UNKNOWN	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	J0197	UNKNOWN DESCRIPTION	UNKNOWN	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	J2211	UNKNOWN DESCRIPTION	UNKNOWN	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	65625	UNKNOWN DESCRIPTION	UNKNOWN	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	J2214	UNKNOWN DESCRIPTION	UNKNOWN	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	99111	UNKNOWN DESCRIPTION	UNKNOWN	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	G0424	PULM REHAB EXER 1 HR SESS 2 PER DAY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	Q5130	INJ PEG-PBBK FYLNETRA BS 0.5 MG	HCPCS - TEMP CODES	YES	04/01/2023	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	Q5129	INJ BEVACIZUMAB-ADCD BS 10 MG	HCPCS - TEMP CODES	YES	04/01/2023	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	Q5127	INJ PEG-FPGK STIMUFEND BS0.5 MG	HCPCS - TEMP CODES	YES	04/01/2023	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J9196	INJ GEM HCI NOT THR EQ J9201 200 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/01/2023	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J1449	INJECTION EFLAPEGRASTIM-XNST 0.1 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/01/2023	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	C9145	INJECTION APREPITANT APONVIE 1 MG	HCPCS - C CODES - OUTPATIENT PP	YES	04/01/2023	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	A4342	ACC PT INS ID IU DRN DVC V REPLC EA	HCPCS - MED-SURG SUPPLIES	NO	04/01/2023	04/01/2023			
MMAI-Medicare/Medicaid	A4341	INDWLL IU D DVC V PT INS REPLC EA	HCPCS - MED-SURG SUPPLIES	NO	04/01/2023	04/01/2023			
MMAI-Medicare/Medicaid	M0010	EOM MEOS PMT EOM ENHANCED SERVICES	HCPCS - MEDICAL SERVICES	NO	04/01/2023	04/01/2023			
MMAI-Medicare/Medicaid	J2403	CHLOROPROCAINE HCL OPHT 3PCT GEL 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	04/01/2023	04/01/2023			
MMAI-Medicare/Medicaid	L8678	ELEC STM SUP EXT IMPLNT NEUROSTM PM	HCPCS - DME	NO	04/01/2023	04/01/2023			
MMAI-Medicare/Medicaid	0369U	IADNA GI PTHGN 31 ORG&21 ARG	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	Q4265	NEOSTIM TL, PER SQ CM	HCPCS - TEMP CODES	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0382U	HYPRPHENYLALNINMIA MNTR QUAN	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0378U	RFC1 REPEAT XPNSJ VRNT ALYS	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0374U	IADNA GU PTHGN 21 ORG&21ARG	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2023	12/31/2078			

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MMAI-Medicare/Medicaid	0368U	ONC CLRCT CA MUT&MTHYLTN MRK	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0364U	ONC HL NEO GEN SEQ ALYS ALG	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J1747	INJECTION SPESOLIMAB-SBZO 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	E1905	VR REAL CBT INCL PP TX SOFTWARE	HCPCS - DME	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	Q4271	COMPLETE FT PER SQ CM	HCPCS - TEMP CODES	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0385U	NEPH CKD ALG RSK DBTC KDN DS	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0381U	MAPLE SYRUP UR DS MNTR QUAN	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0377U	CV DS QUAN ADVSRM/PLSM LPRTN	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0373U	IADNA RSP TR NFCT 17 8 13&16	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	Q5120	INJECTION PEG-BMEZ BIOSIMILR 0.5 MG	HCPCS - TEMP CODES	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	J1954	INJECTION LA FOR DEPOT SUSP 7.5 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2023	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	A4628	ORAL &/OR OP SUCTION CATHETER EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9142	INJ BEVACIZUMAB-MALY BS 10 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	10/01/2022	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	0370U	IADNA SURG WND PTHGN 34&21	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2023	12/31/2078			

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MMAI-Medicare/Medicaid	0366U	ONC BLDR 10 PRB RECR BLDR CA	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	K1035	MOL DT RDR NONRX SA&SC USE FDA APRV	HCPCS-K CODES-DMERCS ONLY	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	Q4267	NEOSTIM DL PER SQ CM	HCPCS - TEMP CODES	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0383U	TYROSINEMIA TYP I MNTR QUAN	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0379U	TGSAP SL OR NEO DNA523&RNA55	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0375U	ONC OVRN BCHM ASY 7 PRTN ALG	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0371U	IADNA GU PTHGN SEMIQ DNA16&1	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	Q5122	INJECTION PEG-APGF BIOSIMILR 0.5 MG	HCPCS - TEMP CODES	YES	01/01/2021	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	0022U	TGSAP NSM LUNG NEO DNA&RNA23	PATH & LAB - CHEMISTRY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q5111	INJECTION PEG-CBQV BIOSIMILR 0.5 MG	HCPCS - TEMP CODES	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	M1209	GT 2ORD HIGH RSK MED SM DG CLS W/O DX	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	G2171	PRQ AVF DR ANY MG-GD ART&V CTH&RF E	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	Q5128	INJ RANIBIZUMAB-EQRN BS 0.1 MG	HCPCS - TEMP CODES	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	Q4266	NEOSTIM MEMBRANE PER SQ CM	HCPCS - TEMP CODES	YES	04/01/2023	12/31/2078			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	S9563	HOME INJ TX IMMUNOTHERAPY PER DIEM	HCPCS - TEMP NATIONAL CODES	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	E0711	UE MED TUBING/LINE DVC RSTR ELB ROM	HCPCS - DME	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	E0677	NONPNEU SEQUENTIAL COMP GMT TRUNK	HCPCS - DME	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J0218	INJECTION OLIPUDASE ALFA-RPCP 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J1411	INJ ETRNCOGN DZAPRVOVC-DRLB Q THR D	HCPCS - DRUGS (NOT ORAL)	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	Q4268	SURGRAFT FT PER SQ CM	HCPCS - TEMP CODES	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0367U	ONC BLDR 10 FLWG TRURL RESCJ	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	Q4269	SURGRAFT XT PER SQ CM	HCPCS - TEMP CODES	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0384U	NEPH CKD RSK HI STG KDN DS	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0376U	ONC PRST8 CA IMG ALYS 128	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0372U	NFCT DS GU PTHGN ARG DETCJ	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	Q4270	COMPLETE SL PER SQ CM	HCPCS - TEMP CODES	YES	04/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	C1834	PRESS SNSR SYS IM EXCL MOB SW APP	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	10/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	Q5108	INJECTION PEG-JMDB BIOSIMILR 0.5 MG	HCPCS - TEMP CODES	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	S9562	HOME INJ TX PLV/OTH MAB FOR RSV PD	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	G2088	OFF-B TX OUD;EA ADD 30M BYD 1ST120M	HCPCS-PROC/PROF SERVICES (TE	NO	01/10/2023	01/10/2023			
MMAI-Medicare/Medicaid	G2087	OFF-BSD TX OUD;AL 60 M SUBSEQ CA MO	HCPCS-PROC/PROF SERVICES (TE	NO	01/10/2023	01/10/2023			
MMAI-Medicare/Medicaid	G2086	OFF-BASED TX ODU;AL 70 M 1ST CA MO	HCPCS-PROC/PROF SERVICES (TE	NO	01/10/2023	01/10/2023			
MMAI-Medicare/Medicaid	S9996	MEALS CLIN TRIAL PRTCP&ONE CAREGIVR	HCPCS - TEMP NATIONAL CODES	NO	01/01/2023	01/01/2023	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9991	SRVC PROV PART PHASE III CLIN TRIAL	HCPCS - TEMP NATIONAL CODES	NO	01/01/2023	01/01/2023	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9990	SRVC PROV PART PHASE II CLIN TRIAL	HCPCS - TEMP NATIONAL CODES	NO	01/01/2023	01/01/2023	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9988	SERV PART OF PHASE 1 CLINICAL TRIAL	HCPCS - TEMP NATIONAL CODES	NO	01/01/2023	01/01/2023	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9994	LODG COST CLIN TRIAL PRTCP&CAREGVR	HCPCS - TEMP NATIONAL CODES	NO	01/01/2023	01/01/2023	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9992	TRNSPRT COSTS CLIN TRIAL PRTCP&COMP	HCPCS - TEMP NATIONAL CODES	NO	01/01/2023	01/01/2023	Regulatory Compliance		
MMAI-Medicare/Medicaid	15778	IMPL ABSRB MSH/PRSTH DLY CLS	SURGERY - INTEGUMENTARY SYSTEM	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q2056	CLTA CL TO 100 M AUT BCMA CR-P TC D	HCPCS - TEMP CODES	YES	10/01/2022	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	Q5126	INJ BEVACIZUMAB-MALY BIOSIMIL 10 MG	HCPCS - TEMP CODES	YES	01/01/2023	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9394	I FUL FRSNS KB NO TX EQ J9395 25MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2023	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J9049	INJ BZ HOSPIRA NO TX EQ J9041 0.1MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2023	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9048	I BZ FRSNS KB NO TX EQ J9041 0.1MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2023	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J1456	INJ FOSAPREPITANT NOT THR J1453 1MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2023	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	Q5125	INJ FILGRASTIM-AYOW BIOSIMILR 1 MCG	HCPCS - TEMP CODES	YES	10/01/2022	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9298	INJ NIV & RELATLIMAB-RMBW 3 MG/1 MG	HCPCS - CHEMO DRUGS	YES	10/01/2022	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9274	INJECTION TEBENTAFUSP-TEBN 1 MCG	HCPCS - CHEMO DRUGS	YES	10/01/2022	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J1932	INJECTION LANREOTIDE 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	10/01/2022	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J9331	INJ SIROLIMUS PRT-BOUND PSL 1 MG	HCPCS-DRUGS (NOT ORAL)	YES	07/01/2022	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	M1210	GT 2ORD HIGH RSK MED SM DG CLS NT ORD	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1202	DOC NOT RX ACE INHB/ARB THR DUR MST	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7514	DLYS CIRC ATL C DLYS SEG&TC PL IVAS	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7506	ARTHRODESIS IPJS INTERNAL FIXATION	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C1826	GEN NS RC BATT & CHRG SYS	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	M1194	DOC RPT NOT MMR IHC MSI DNA NOT INC	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1186	PT ORD/RECEIVE HOSPICE/PALLITV CARE	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1178	DOC MED RSN NOT ADM PNEUMOCOCCAL VC	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1170	PT NOT REC INFLUZ BTW 7/1YR PR 6/30	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1162	PT EAE DT TD/PV ON/BFR PT 13TH BD	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	49615	RPR AA HRN RCR 3-10 RDC	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0778T	SMMG CNCRNT APPL IMU SNR	CATEGORY III CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0770T	VR TECHNOLOGY ASSIST THERAPY	CATEGORY III CODES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0360U	ONC LUNG ELISA 7 AUTOANT ALG	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2023	12/31/2078			

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MMAI-Medicare/Medicaid	M0002	OPTIMAL CARE KID HLTH MIPS VAL PATH	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	55867	LAPS SURG PRST8ECT SMPL STOT	SURGERY - INTERSEX SURGERY	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	33900	PERQ P-ART REVSC 1 NM NT UNI	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	92066	ORTHOP TRAING SUPVJ PHYS/QHP	MEDICINE - OPHTHALMOLOGY	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0761T	DGTZ GLS MCRSCP SL IMM EA 1	CATEGORY III CODES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0753T	DGTZ GLS MCRSCP SLD LEVEL IV	CATEGORY III CODES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0745T	CAR ABLT RAD ARR N-INVAS LOC	CATEGORY III CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	D7509	MARSUPIALIZATION ODONTOGENIC CYST	HCPCS - DENTAL	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	C7553	CATH PLCMT COR A;RT & LT HEART CATH	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	C7545	PC EX BD CT REM CALCULI/DEB BD&/GB	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7537	INS NU/REPLC PP ATRIAL TV ELECTRD	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7528	CT PL COR A CA RT&LHC IV DV&/P DERV	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	C7520	CT PL COR A CR PL BPG AG IL&/FA AG	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	49594	RPR AA HRN 1ST 3-10 NCR/STRN	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	76883	US NRV&ACC STRUX 1XTR COMPRE	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	E2103	NONADJUNCTIVE NONIMPLANTED CGM/RECV	HCPCS - DME	NO	01/01/2023	01/01/2023			

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MMAI-Medicare/Medicaid	J1643	INJ HEPARIN SODI NOT TX J1644/1000U	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	15853	REMOVAL SUTR/STAPL XREQ ANES	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	D6106	GUID TISS REGEN-RESORB BR PER IMPL	HCPCS - DENTAL	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	96203	MLT FAM GRP BHV TRAIN EA ADD	MEDICINE - NEUROLOGY AND NEURO	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	87467	HEPATITIS B SURFACE AG QUAN	PATH & LAB - MICROBIOLOGY	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	Q4264	COCOON MEMBRANE PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	D1782	VACC ADM-HMN PAPILLOMAVIRUS-DOSE 2	HCPCS - DENTAL	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	G8666	RESID SC SHLDR IMPR NOT MSR NO RSN	HCPCS - PROC/PROF SERVICES (TE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8660	RS LOW BACK IMPR SUC CALC & SC LT 0	HCPCS - PROC/PROF SERVICES (TE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8656	RS LW LEG FT/ANK IMPR SUC CALC&SCLT 0	HCPCS - PROC/PROF SERVICES (TE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8659	RS LW BACK IMPR SUC CALC & SC EQU 0/GT 0	HCPCS - PROC/PROF SERVICES (TE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	58579	UNLISTED HYSTSC PX UTERUS	SURGERY - FEMALE GENITAL SYSTE	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	99281	EMR DPT VST MAYX REQ PHY/QHP	E & M - EMERGENCY DEPARTMENT S	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D7251	CORONECT-INTEN PRTL TT RMV IMP TH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	C9094	INJ SUTIMLIMAB-JOME 10 MG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	15999	UNLISTED PX EXC PRESSURE ULC	SURGERY - INTEGUMENTARY SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	

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MMAI-Medicare/Medicaid	92700	UNLISTED ORL SERVICE/PX	MEDICINE - SPECIAL OTORHINOLAR	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	92065	ORTHOP TRAING PFRMD PHYS/QHP	MEDICINE - OPHTHALMOLOGY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	50949	UNLISTED LAPS PX URETER	SURGERY - URINARY SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	G2198	DOC MD RSN NO S UH ALC USE SYS S ME	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	87901	NFCT AGT GNTYP ALYS HIV1 REV	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78099	UNLISTED ENDOCRINE PX DX NUC	RADIOLOGY - NUCLEAR MEDICINE	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	83037	HB GLYCOSYLATED A1C HOME DEV	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23800	ARTHRODESIS GLENOHUMERAL JT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23655	CLTX SHO DSLC W/MNPJ W/ANES	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23550	OPTX ACROMCLV DISLC AQT/CHRN	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1200	ACE INHIBITOR/ARB THERP RX DUR MSMT	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	99418	PROLNG IP/OBS E/M EA 15 MIN	E & M - PREVENTIVE MEDICINE SE	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7512	BRONCHO TRANSENDO EBUS DUR BRONCHO	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7504	PERQ VTP 1ST CT & ANY ADD CT/LS VB	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	M1192	PT W DX SQUAMOUS CELL CA ESOPHAGUS	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1184	DOC MED REAS NT RX/AD CCS OR IMS TX	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			

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MMAI-Medicare/Medicaid	M1168	PT RC INFLUZ VACBTW 7/1YR PR6/30 MS	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1160	PT ANA DT MCV ON/BFR PT 13TH BD	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	49623	RMVL NINFCT MESH HERNIA RPR	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	49613	RPR AA HRN RCR LT 3 RDC	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0776T	THER INDCTJ NTRABRN HYPTHRM	CATEGORY III CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0363U	ONC URTHL MRNA 5 GEN ALG	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0359U	ONC PRST8 CA ALYS ALL PSA	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0355U	APOL1 RISK VARIANTS	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	G3002	CPM&TX MO BDL FTF AL 30 M;1ST 30 M	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0759T	DGTZ GLS MCRSCP SL SP GRPIII	CATEGORY III CODES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0751T	DGTZ GLS MCRSCP SLD LEVEL II	CATEGORY III CODES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0743T	B1 STR & FX RSK VRT FX ASSMT	CATEGORY III CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	95919	QUAN PUPLMTRY PHY/QHP UNI/BI	MEDICINE - NEUROLOGY AND NEURO	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	D7957	GTR EDENT AREA-NON-RESORBL BR/SITE	HCPCS - DENTAL	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	C7551	EX MAJ PN NROMA NO SC IMP NE TO B/M	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7543	ERCP SE/PAPILLOT ENDO CANNULATN PAP	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			

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MMAI-Medicare/Medicaid	C7534	REVASC EVAR FEMRAL PA UNI ATH	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7526	CT PL CR A CA LHC CT PL BPG BPG AG	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	C7518	CATH PLCMNT COR ART CATH PLCMNT BPG	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	49592	RPR AA HRN 1ST LT 3 NCR/STRN	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	30469	RPR NSL VLV COLLAPSE W/RMDLG	SURGERY - RESPIRATORY SYSTEM	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	G0322	COL PHYSIOL DATA DIG STR&/T PT-HHA	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1153	PT DX OSTEOPOROSIS DATE OF ENCNTR	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	J1611	INJ GLUC HYDRC NOT TX EQV J1610/1MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	J0892	INJ ARGATROBAN NOT TX EQV J0884 1MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J0225	INJECTION VUTRISIRAN 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	93573	NJX CATH SLCT P-ART ANGRP BI	MEDICINE - CARDIOVASCULAR	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	98978	REM THER MNTR DEV SPLY CBT	MEDICINE-NON-FACE-TO-FACE	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	Q4262	DUAL LAYER IMPAX MEMBRANE PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	D0802	3D DENTAL SURFACE SCAN-INDIRECT	HCPCS - DENTAL-Radiographs	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	C7509	BRONCHOSCOPY DX CW PERF CA IG NAV	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7501	PERQ BREAST BX PLCMT BRST LOC DEV	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			

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MMAI-Medicare/Medicaid	M1189	DOC KIDNEY HLTH EVL EGFR & UACR PER	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1181	GR2/ABV DIARRHEA+/OR GR2/AV COLITIS	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1173	PT NT REC 1TD OR 1TDAP BTW 9Y PRIOR	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1165	PT USE HOSPICE SVC ANY DUR MSMT PER	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	J2402	INJ CHLOROPROCAINE HYDROCH CLOR/1MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	49618	RPR AA HRN RCR GT 10 NCR/STRN	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0781T	BRNCHSC RF DSTRJ PULM NRV BI	CATEGORY III CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0773T	VR PX DISSOC SVC OTH PHY 1ST	CATEGORY III CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J2311	INJECT NALOXONE HYDROCHLOZIMHI 1MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	J2247	INJ MICAFUNG SD NOT TX EQ J2248/1MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	84433	ASY THIOPURIN S-MTHYLTRNSFRS	PATH & LAB - CHEMISTRY	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	33903	PERQ P-ART REVSC 1 ABNOR BI	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0764T	ASSTV ALG ECG RSK ASMT CNCRT	CATEGORY III CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0756T	DGTZ GLS MCRSCP SLD SPC GRPI	CATEGORY III CODES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0748T	NJX STM CL PRDCT ANL SFT TIS	CATEGORY III CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0740T	REM AUTON ALG NSLN CAL SETUP	CATEGORY III CODES	YES	01/01/2023	12/31/2078			

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MMAI-Medicare/Medicaid	D0388	INTRAORL TS-BW RAD IMG-IMG CAP ONLY	HCPCS - DENTAL-Radiographs	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	C7548	EXCH NPHROST CATH PC UE STX BLN DIL	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7540	RMVL PP P GEN REPL PM PG D LEAD SYS	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7531	REVASC EVR FEMORAL POP ART UNI TA	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7523	CT PL COR A LHC EL IMG INIT COR V/G	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	C7515	DI CIRC PT EVAR EMB/O MAIN CIRC/AV	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	G0318	PRLNG HM EM BYD TT PR SRVC;EA 15 M	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	69728	RMV NTR OI IMP SK TCGT EQU 100	SURGERY - AUDITORY SYSTEM	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	93569	NJX CTH SLCT P-ART ANGRP UNI	MEDICINE - CARDIOVASCULAR	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	22860	TOT DISC ARTHRP 2NTRSPC LMBR	SURGERY - MUSCULOSKELETAL SYST	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	D0372	INTRAORAL TS-COMP SERIES RAD IMGS	HCPCS - DENTAL-Radiographs	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	22864	RMVL TOT ARTHRP 1NTRSPC CRV	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4238	SPL ALW ADJ NI CGM 1 MO SPL EQU 1 UOS	HCPCS - MED-SURG SUPPLIES	NO	03/31/2022	03/31/2022			
MMAI-Medicare/Medicaid	24220	INJECTION PX FOR ELBOW ARTHG	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24200	RMVL FB UPPER ARM/ELBW SUBQ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24126	EXC/CRTG B1 CST/TUM RDS ALGR	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	86486	SKIN TEST UNLISTED ANTIGN EA	PATH & LAB - IMMUNOLOGY	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	42999	UNLISTED PX PHRNX ADND/TNSL	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	41599	UNLISTED PX TONGUE FLR MOUTH	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	27899	UNLISTED PX LEG/ANKLE	SURGERY - MUSCULOSKELETAL SYST	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	G9943	BP NOT MSR VAS/NUM PS 3 MO POSTOP	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	37799	UNLISTED PX VASCULAR SURGERY	SURGERY - CARDIOVASCULAR SYSTE	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	D4240	GING F PROC-4/GT CNTG TH/TT BND SPS/Q	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	G8600	IV TT INIT WI 4.5 HRSLT EQU 270 MINS LKW	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G2201	DOC MED RSN FOR NOT PROV BRF CNSLG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2139	BP MSR VAS 1 YR PO GT 3.0 IMP LT 5.0 PT	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G0442	ANNUAL ALCOHL MISUSE SCR 5 TO 15 MN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G2203	DOC MED RSN NO CNSLG ID UH ALC USER	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2138	BP MSR VAS 1 YR POLT /EQU 3.0 IMP 5.0/GT	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	Q4236	CAREPATCH PER SQ CM	HCPCS - TEMP CODES	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	M1052	LEG PAIN NOT MSR VAS/NPS 1 YR PO	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	99347	HOME/RES VST EST SF MDM 20	E & M - HOME SERVICES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	99234	HOSP IP/OBS SM DT SF/LOW 45	E & M - HOSPITAL INPATIENT SER	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99231	SBSQ HOSP IP/OBS SF/LOW 25	E & M - HOSPITAL INPATIENT SER	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	97799	UNLISTED PHYSCL MED/REHAB PX	MEDICINE - PHYSICAL MEDICINE A	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	C9096	INJ FILGRASTIM-AYOW BS RLEUKO 1 MCG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	C1831	INTERBODY CAGE ANT LATL/POST PRSNL	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	A9278	RECEIVR; EXT NONDME INTRSTL SYS CGM	HCPCS - ADMIN MISC & INVEST	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	50080	PERQ NL/PL LITHOTRP SMPLLT 2CM	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49999	UNLISTED PX ABD PERTM&OMN	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	50549	UNLISTED LAPS PX RENAL	SURGERY - URINARY SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	50040	NFROS NFROT W/DRG	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1201	DOC REAS NOT RX ACE INH/ARB TX MSMT	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7513	DLYS CIRC TBA CENTR DLYS SEG	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7505	PERQ VTP 1ST LS & ANY ADD CT/LS VB	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	M1193	SURG PATH IMPR MMR IHC MSI DNA TEST	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1185	DOC IMM CP INH TX NT CCS/IMS RX NOT	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1169	DOC MED REAS NOT ADM INFLUENZA VACC	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			

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MMAI-Medicare/Medicaid	M1161	PT ANA DT TD/PA ON/BFR PT 13TH BD	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	J2327	INJCT RISANKIZUMAB-RZAA INTRAV 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	87484	EHRLICHA CHAFFEENSIS AMP PRB	PATH & LAB - MICROBIOLOGY	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	49614	RPR AA HRN RCR LT 3 NCR/STRN	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0777T	R-T PRS SENSING EDRL GDN SYS	CATEGORY III CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	G3003	EACH ADD 15 MIN CPM & TX PER CM	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M0001	ADVANCING CANCER CARE MIPS VAL PATH	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0760T	DGTZ GLS MCRSCP SL IMM 1ST	CATEGORY III CODES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0752T	DGTZ GLS MCRSCP SLD LVL III	CATEGORY III CODES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0744T	INSJ BIOPROSTC VLV FEM VN	CATEGORY III CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	C7552	CATH PLCMNT COR A CA;CR PLCMNT BPG	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	C7544	ERCP REM CALCULI/DEB FRM BILIARY/PD	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7535	REVASC EVAR FEMORAL PA UNI TL SP	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7527	CT PL COR A CA RL HC DX EV&/TX INT	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	C7519	CATH PL COR ART CATH PL BPG DUR CA	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	93575	NJX CATH SLCT P ANGRPH MAPCA	MEDICINE - CARDIOVASCULAR	NO	01/01/2023	01/01/2023			

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MMAI-Medicare/Medicaid	49593	RPR AA HRN 1ST 3-10 RDC	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	J0703	I CP HCI B BRN NO TX EQV MXPM 500MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	93574	NJX CATH SLCT PULM VN ANGRPH	MEDICINE - CARDIOVASCULAR	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	D6105	RMV IMPL BDY NOT RQR BR/FLAP ELEV	HCPCS - DENTAL	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	96202	MLT FAM GRP BHV TRAIN 1ST 60	MEDICINE - NEUROLOGY AND NEURO	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	Q4263	SURGRAFT TL PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	D1781	VACC ADM-HMN PAPILLOMAVIRUS-DOSE 1	HCPCS - DENTAL	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	D0803	3D FACIAL SURFACE SCAN-DIRECT	HCPCS - DENTAL-Radiographs	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	79999	RP THERAPY UNLISTED PX	RADIOLOGY - NUCLEAR MEDICINE	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	G0308	CREAT SUB PKT INSRT 180 D I INT GS	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	50081	PERQ NL/PL LITHOTRP CPLXGT 2CM	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50070	NL COMP CGEN KDN ABNORMALITY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24120	EXC/CRTG B1 CST/B9 TUM RDS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23505	CLTX CLAVICULAR FX W/MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24310	TNOT OPN ELBW TO SHO EA TDN	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	21499	UNLISTED MUSCSKEL PX HEAD	SURGERY - MUSCULOSKELETAL SYST	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	

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MMAI-Medicare/Medicaid	77399	UNLISTED PX MED RADJ PHYSICS	RADIOLOGY - RADIATION ONCOLOGY	NO	09/01/2017	09/01/2017		Submit claims with medical records	
MMAI-Medicare/Medicaid	24340	TENODESIS BICEPS TDN AT ELBW	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	24110	EXC/CURTG B1 CST/B9 TUM HUM	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23630	OPTX GR HMRL TBRS FX INT FIX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47399	UNLISTED PROCEDURE LIVER	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	G8658	RS LW LEG FT/ANK IMPR NO MSR NO RSN	HCPCS - PROC/PROF SERVICES (TE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8652	RS HIP IMPR SUC CALC & SCORE LT 0	HCPCS - PROC/PROF SERVICES (TE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J0131	INJECTION ACETAMINOPHEN NOS 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	G9908	PT ID TOB U NT RECV T CESS INT DURG	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	94799	UNLISTED PULMONARY SVC/PX	MEDICINE - PULMONARY	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	95999	UNLISTED NEUROLOGICAL DX PX	MEDICINE - NEUROLOGY AND NEURO	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	86999	UNLISTED TRANSFUSION MED PX	PATH & LAB - TRANSFUSION MEDIC	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	35883	REVJ FEM ANAST NONAUTOG GRF	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38589	UNLISTED LAPS PX LYMPHTC SYS	SURGERY - HEMIC AND LYMPHATIC	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	99252	IP/OBS CONSLTJ NEW/EST SF 35	E & M - CONSULTATIONS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44979	UNLISTED LAPS PX APPENDIX	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	

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MMAI-Medicare/Medicaid	41899	UNLISTED PX DENTALVLR STRUX	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	39499	UNLISTED PX MEDIASTINUM	SURGERY - MEDIASTINUM AND DIAP	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	C9144	INJECTION BUPIVACAINE 1 MG	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7511	BRONCHOSCOPY CA IMAGE-GUIDED NAV	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7503	OPN BX/EXC DEEP CERV NODE IO ID SLN	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1199	PATIENTS RECEIVING RRT	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1191	HOSPICE SVC PROV PT ANYTIME DUR PER	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1183	DOC IMM CP INHB TX HD&CCS/IMS RX/AD	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1175	DOCUM MED RSN NOT ADMIN ZOSTER VACC	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1167	IN HOSPICE/HOSPICE SVC DUR MSMT PER	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	49622	RPR PARASTOMAL HRNA NCR/STRN	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0783T	TC AURICULR NEUROSTIMULATION	CATEGORY III CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0758T	DGTZ GLS MCRSCP SL SPC HCHEM	CATEGORY III CODES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0750T	B1 STR&FX RSK ASMT DXRBMD1VW	CATEGORY III CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	D7956	GTR EDENT AREA-RESORBABL BR/SITE	HCPCS - DENTAL	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	C7902	SRVC DX EV/TX MH/SUD Q 15 M REM HS	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			

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MMAI-Medicare/Medicaid	C7550	CS BX ADJ BLU LGT CYSTO FLUO IM AGT	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7542	ERCP BX SGL/MX ENDO CANNULATION PAP	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7533	PERQ TL COR ATL SGL MAJ COR ART/BR	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	C7525	CATH PL COR A CA LHC DX EVAL &/ TI	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	C7517	CATH PL COR ART ILIAC&/FA ANGIO	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	49591	RPR AA HRN 1ST LT 3 CM RDC	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	G0321	HH SRVC TMED TEL/OTH RT AUD-ONLY TS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1152	PT HX HEART TRANSPLANT/WITH A LVAD	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	69730	RPLC OI IMPLT SK TC ESPGT EQU 100	SURGERY - AUDITORY SYSTEM	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	J0899	INJ ARGATROBAN NOT TX EQV J0884 1MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J0891	INJ ARG NOT THER EQV TO J0883 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J0701	I CP HCI BAXTR NO TX EQV MXPM 500MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	36837	PRQ AV FSTL CRT UXTR SEP ACS	SURGERY - CARDIOVASCULAR SYSTE	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	43291	EGD FLX TRNSORL RMVL BALO	SURGERY - DIGESTIVE SYSTEM	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	D0374	INTRAORAL TS-PERIAPICAL RAD IMAGE	HCPCS - DENTAL-Radiographs	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	M1203	ACE INH/ARB NOT PRESC MST RSN NT GV	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			

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MMAI-Medicare/Medicaid	C7507	PERQ VA AUG 1ST T & ANY ADD T/L VB	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	C1827	GEN NS NON-RC ST LD&EXT PRD ST CTRL	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	M1195	SRG P CNCL MMR IMHISTCH MSI DNA NOT	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1187	PT WITH DX END STAGE RENAL DISEASE	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1171	PT LEAST 1TD OR 1TDAP BTW 9Y PR ENC	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1163	PT ANA DT HPV VAC ON/BFR PT 13TH BD	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	49616	RPR AA HRN RCR 3-10 NCR/STRN	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0779T	GI MYOELECTRICAL ACTV STUDY	CATEGORY III CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0771T	VR PX DISSOC SVC SM PHY 1ST	CATEGORY III CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	33901	PERQ P-ART REVSC 1 NM NT BI	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0762T	DGTZ GLS MCRSCP SL IMM EA M	CATEGORY III CODES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0754T	DGTZ GLS MCRSCP SLD LEVEL V	CATEGORY III CODES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0746T	CAR ABLT RAD ARR CNV LOC MAP	CATEGORY III CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0738T	TX PLN MAG FLD ABLTJ PRST8	CATEGORY III CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	C7554	CS ADJ BLU LGT CYSTO FLUOR IMG AGT	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7546	R&R EXT ACC NEPHROURETERAL CATH	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			

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MMAI-Medicare/Medicaid	C7538	INS NU/REPLC PP VENT TV ELECTRODE	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7529	CT PL COR A CA RT&LHC PLC BPG ANGIO	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	C7521	CT PL COR A RHC EL IMG INIT CA V/GR	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	49595	RPR AA HRN 1ST GT 10 RDC	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	G0316	PRLNG HI/OBS CARE EM BYD TT;EA 15 M	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	J0877	INJ DAP NOT THER EQV TO J0878 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	15854	REMOVAL SUTR&STAPL XREQ ANES	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	D6107	GUID TISS REGEN-NON-RESORB BR/IMPL	HCPCS - DENTAL	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	87478	BORRELIA MIYAMOTOI AMP PRB	PATH & LAB - MICROBIOLOGY	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	87468	ANAPLSMA PHGCYTOPHLM AMP PRB	PATH & LAB - MICROBIOLOGY	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	D1783	VACC ADM-HMN PAPILLOMAVIRUS-DOSE 3	HCPCS - DENTAL	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	55899	UNLISTED PX MALE GENITAL SYS	SURGERY - MALE GENITAL SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	78499	UNLISTED CV PX DX NUC MED	RADIOLOGY - NUCLEAR MEDICINE	NO	09/01/2017	09/01/2017			
MMAI-Medicare/Medicaid	49329	UNLSTD LAPS PX ABD PERTM&OMN	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	G8648	RS KNEE IMPR SUC CAL & SCR LT 0	HCPCS - PROC/PROF SERVICES (TE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	69799	UNLISTED PX MIDDLE EAR	SURGERY - AUDITORY SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	

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MMAI-Medicare/Medicaid	G8655	RS LOW LEG FT/ANK IMPR CALC&SC EQU /GT 0	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0030	PT SC TU RECV TC INV 6 MO PT MSR PD	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0029	TOB SCR NOT PR/TC INV NO PRV MSR PD	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	37501	UNLISTED VASC ENDOSCOPY PX	SURGERY - CARDIOVASCULAR SYSTE	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	38999	UNLISTD PX HEMIC/LYMPHTC SYS	SURGERY - HEMIC AND LYMPHATIC	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	42299	UNLISTED PX PALATE UVULA	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	G2136	BP MSR VAS 3 M POLT ./EQU 3.0 IMP 5.0/GT	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	99238	HOSP IP/OBS DSCHRG MGMT 30/LT	E & M - HOSPITAL INPATIENT SER	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99199	UNLISTED SPECIAL SVC PX/RPRT	MEDICINE - OTHER SERVICES AND	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	97039	UNLISTED MODALITY	MEDICINE - PHYSICAL MEDICINE A	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	99496	TRANSJ CARE MGMT HIGH F2F 7D	E & M - CARE PLAN OVERSIGHT SE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	83498	ASY HYDROXYPROGESTERONE 17-D	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83030	HEMOGLOBIN F FETAL CHEMICAL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	58999	UNLISTED PX FML GENITAL SYS	SURGERY - FEMALE GENITAL SYSTE	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	G2140	LP MSR VAS 3 MO PO LT /EQU 3.0IMPLT 5.0 PT	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	C9143	COCAINE HYDROCHLORIDE NASL SOL 1 MG	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			

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MMAI-Medicare/Medicaid	C7510	BRONCHOSCOPY BRON ALV LAV CA IG NAV	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7502	PC BBX MR GUID PLCMT BREAST LOC DEV	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1190	DOC KIDNEY EVL NT PF/DEF EGFR &UACR	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1182	PT NOT ELIG DUE TO PRE-EXISTING IBD	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1166	PTH RP TS SPC PRO WDE LC EXC/RE-EXC	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	49621	RPR PARASTOMAL HERNIA RDC	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0782T	BRNCHSC RF DSTRJ PLM NRV UNI	CATEGORY III CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0774T	VR PX DISSOC SVC OTH PHY EA	CATEGORY III CODES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0362U	ONC PAP THYR CA RNA 82&10	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0358U	NEURO ALYS B-AMYL 1-42&1-40	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	33904	PERQ P-ART REVSC EACH ADDL	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0765T	ASSTV ALG ECG RSK ASMT PREV	CATEGORY III CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0757T	DGTZ GLS MCRSCP SL SPC GRPII	CATEGORY III CODES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0749T	B1 STR&FX RSK ASSMT DXR-BMD	CATEGORY III CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0741T	REM AUTON ALG NSLN DATA COLL	CATEGORY III CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	D0804	3D FACIAL SURFACE SCAN-INDIRECT	HCPCS - DENTAL-Radiographs	YES	01/01/2023	12/31/2078			

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MMAI-Medicare/Medicaid	D0389	INTRAORL TS-PERIAP RAD IMG-IMG CAP	HCPCS - DENTAL-Radiographs	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	C7549	CHNG URETEROSTOMY TUBE/EXT ACC URS	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7541	DX ERCP INCL COLL SPEC BY BR/W	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7532	TRANSLUM BALLN ANGIOPLASTY INI ART	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7524	CT PL COR A LHC IV DV&/P DRVD CFR M	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	C7516	CT PL COR A EL IMG INIT COR VES/GR	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	D4286	REMOVAL OF NON-RESORBABLE BARRIER	HCPCS - DENTAL	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	G0320	HH SRVC TMED REND RT TW AUD & VITS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1159	HS SVCS PROV PT DUR MSMT PERIOD	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1151	PT HX HEART TRANSPLANT/WITH A LVAD	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	69729	IMPL OI IMPLT SK TC ESPGT EQU 100	SURGERY - AUDITORY SYSTEM	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	J0898	INJ ARGATROBAN NOT TX EQV J0883 1MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	36836	PRQ AV FSTL CRTJ UXTR 1 ACS	SURGERY - CARDIOVASCULAR SYSTE	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	43290	EGD FLX TRNSORL DPLMNT BALO	SURGERY - DIGESTIVE SYSTEM	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	D0373	INTRAORAL TS-BITEWING RAD IMAGE	HCPCS - DENTAL-Radiographs	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	M1204	INIT NRS VRS/ITCHYQUNT ASMT SCORGT EQU 4	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			

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MMAI-Medicare/Medicaid	C7508	PERQ VA 1ST LMB & ANY ADD THOR/L VB	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	C7500	DEBR BONE 1ST 20 SQ CM/LT M PREP	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C1747	ENDOSCOPE SGL-USE UT IMG/ILLUM DEV	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1196	INIT NRS/VRS OR ITCHYQUANT SCORGT EQU 4	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1188	PT W/DX CHRONIC KIDNEY DISEASE STG5	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1180	PT ON IMMUNE CHECKPOINT INHIBITR TX	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1172	DOC MED REASON NOT ADM TD/ TDAP VAC	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	M1164	PT W/DEME TIME DUR PT HIST-END MSMT	HCPCS - MEDICAL SERVICES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	J2401	INJ CHLOROPROCAINE HYDROCHL PER 1MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	49617	RPR AA HRN RCR GT 10 RDC	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0780T	INSTLJ FECAL MICROBIOTA SSP	CATEGORY III CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0772T	VR PX DISSOC SVC SM PHY EA	CATEGORY III CODES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0361U	NEURFLMNT LT CHN DIG IA QUAN	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	D6197	RPL RSTR MTL CL OPN SR I PROS/IMPL	HCPCS-DENTAL-Implant Svcs	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	D9953	RELINE CUSTOM SLEEP APNEA APPLIANCE	HCPCS - DENTAL	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	33902	PERQ P-ART REVSC 1 ABNOR UNI	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2023	01/01/2023			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	0763T	DGTZ GLS MCRSCP MPHMTRC ALYS	CATEGORY III CODES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0755T	DGTZ GLS MCRSCP SLD LEVEL VI	CATEGORY III CODES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	0747T	CAR ABLT RAD ARRHYT DLVR RAD	CATEGORY III CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	0739T	ABLTJ MAL PRST8 MAG FLD NDCT	CATEGORY III CODES	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	A4239	SPLY ALW NONIMPL CGM 1 MO SPEQU 1 UOS	HCPCS - MED-SURG SUPPLIES	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	D0387	INTRAORL TS-CMP SE RAD IMGS-IMG CAP	HCPCS - DENTAL-Radiographs	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	C7555	THYROIDECTOMY TOTAL/COMP PTH AT	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7547	CVT NEPHROSTMY CATH TO NU CATH PERQ	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7539	INS NU/REPLC PP ATRL & V TV ELECTRD	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7530	DLYS CIRC I TBS PERIPHERAL DLYS SEG	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	C7522	CATH PLCMNT CORONARY ART RHC IV DV	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	49596	RPR AA HRN 1ST GT 10 NCR/STRN	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	G0317	PRLNG NF EM BYD TT SRVC; EA 15 MIN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	J0689	INJ CEZ NOT THER EQV J0690 500 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2023	01/01/2023			
MMAI-Medicare/Medicaid	23545	CLTX ACROMCLAV DISLC W/MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87469	BABESIA MICROTI AMP PRB	PATH & LAB - MICROBIOLOGY	NO	01/01/2023	01/01/2023			

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MMAI-Medicare/Medicaid	83069	HEMOGLOBIN URINE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83065	HEMOGLOBIN THERMOLABILE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83060	HGB SULFHEMOGLOBIN QUAN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76499	UNLISTED DX RADIOGRAPHIC PX	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	23540	CLTX ACROMCLAV DISLC WO MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23500	CLTX CLAVICULAR FX W/O MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23930	I&D UPR A/E DP ABSC/HMTMA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24130	EXCISION RADIAL HEAD	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	64447	NJX AA&/STRD FEMORAL NRV IMG	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64415	NJX AA&/STRD BRCH PLXS IMG	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96999	UNLISTED SPEC DERM SVC/PX	MEDICINE - SPECIAL DERMATOLOGI	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	93799	UNLISTED CV SVC/PROCEDURE	MEDICINE - CARDIOVASCULAR	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	93567	NJX CAR CTH SPRVLV AORTGRPHY	MEDICINE - CARDIOVASCULAR	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G9848	PT DID NOT REC CA TX LST 14 DA LIFE	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	40799	UNLISTED PROCEDURE LIPS	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	99342	HOME/RES VST NEW LOW MDM 30	E & M - HOME SERVICES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	99253	IP/OBS CNSLTJ NEW/EST LOW 45	E & M - CONSULTATIONS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99233	SBSQ HOSP IP/OBS HIGH 50	E & M - HOSPITAL INPATIENT SER	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99221	1ST HOSP IP/OBS SF/LOW 40	E & M - HOSPITAL INPATIENT SER	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D3333	INTERNAL ROOT REPAIR PERF DEFECTS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	15851	REMOVAL SUTR/STAPLE REQ ANES	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88399	UNLISTED SURGICAL PATH PX	PATH & LAB - SURGICAL PATHOLOG	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	49659	UNLSTD LAPS PX HRNAP HRNRPHY	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	50205	RENAL BX SURG EXPOSURE KDN	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69399	UNLISTED PX EXTERNAL EAR	SURGERY - AUDITORY SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	67999	UNLISTED PROCEDURE EYELIDS	SURGERY - EYE AND OCULAR ADNEX	NO	10/14/2017	10/14/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	64999	UNLISTED PX NERVOUS SYSTEM	SURGERY - NERVOUS SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	G9663	ANY LDL-C LAB RESULT GT EQU 190 MG/DL	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	76497	UNLISTED CT PROCEDURE	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	09/01/2017	09/01/2017			
MMAI-Medicare/Medicaid	39599	UNLISTED PX DIAPHRAGM	SURGERY - MEDIASTINUM AND DIAP	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	D4921	GINGIVAL IRRIG MEDICINAL AGT-/QUAD	HCPCS - DENTAL	YES	10/05/2015	12/31/2078			
MMAI-Medicare/Medicaid	G0028	DOC MED RSN NOT SCREEN TOBACCO USE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2022	01/01/2022			

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MMAI-Medicare/Medicaid	G9662	PRV DX/HV CLIN ASCVD INCL ASCVD PRC	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	27599	UNLISTED PX FEMUR/KNEE	SURGERY - MUSCULOSKELETAL SYST	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	C9095	INJ TEBENTAFUSP-TEBN 1 MCG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	95199	UNLISTED ALL/IMMLG SVC/PX	MEDICINE - ALLERGY AND CLINICA	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	33999	UNLISTED PX CARDIAC SURGERY	SURGERY - CARDIOVASCULAR SYSTE	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	25999	UNLISTED PX FOREARM/WRIST	SURGERY - MUSCULOSKELETAL SYST	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	99282	EMERGENCY DEPT VISIT SF MDM	E & M - EMERGENCY DEPARTMENT S	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99236	HOSP IP/OBS SAME DATE HI 85	E & M - HOSPITAL INPATIENT SER	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23605	CLTX PRX HMRL FX MNPJ+-TRACT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47379	UNLISTED LAPS PX LIVER	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	23680	OPTX SHO DISLC NECK FX FIXJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23660	OPTX ACUTE SHOULDER DISLC	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23575	CLTX SCAP FX W/MNPJ +-TRACTJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99345	HOME/RES VST NEW HIGH MDM 75	E & M - HOME SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99232	SBSQ HOSP IP/OBS MODERATE 35	E & M - HOSPITAL INPATIENT SER	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99222	1ST HOSP IP/OBS MODERATE 55	E & M - HOSPITAL INPATIENT SER	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	99305	1ST NF CARE MODERATE MDM 35	E & M - NURSING FACILITY SERVI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9277	TRANSMITTER; EXT NONDME INTRSTL CGM	HCPCS - ADMIN MISC & INVEST	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G8670	RESID SCOR E W H IMPR NO MSR NO RSN	HCPCS - PROC/PROF SERVICES (TE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	69714	IMPL OI IMPLT SKULL PERQ ESP	SURGERY - AUDITORY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	24999	UNLISTED PX HUMERUS/ELBOW	SURGERY - MUSCULOSKELETAL SYST	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	22865	RMVL TOT ARTHRP 1NTRSPC LMBR	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1849	SKIN SUBST SYNTH RESORB PER SQ CM	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	G8647	RS KNEE IMPR SUC CALC & SC EQU 0/GT 0	HCPCS - PROC/PROF SERVICES (TE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	69727	RMV NTR OI IMP SK TC ESPLT 100	SURGERY - AUDITORY SYSTEM	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	85999	UNLISTED HEMATOLOGY&COAGJ PX	PATH & LAB - HEMATOLOGY AND CO	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	30999	UNLISTED PROCEDURE NOSE	SURGERY - RESPIRATORY SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	D0709	INTRAORL-COMP SER RAD IMG-IMG CAPTR	HCPCS- DENTAL-Radiographs	NO	12/31/2020	12/31/2020			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	59898	UNLSTD LAPS PX MAT CARE&DLVR	SURGERY - MATERNITY CARE AND D	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	G2146	LP MSR VAS 1 YR PO GT EQU 3.0 IMP 5 PT/GT	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	24105	EXCISION OLECRANON BURSA	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	29799	UNLISTED PX CASTING/STRPG	SURGERY - MUSCULOSKELETAL SYST	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	

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MMAI-Medicare/Medicaid	24000	ARTHRT ELBW EXPL DRG/RMVL FB	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99600	UNLISTED HOME VISIT SVC/PX	MEDICINE - HOME INFUSION PROCE	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	46999	UNLISTED PROCEDURE ANUS	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	24201	RMVL FB UPPER ARM/ELBW DEEP	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87999	UNLISTED MICROBIOLOGY PX	PATH & LAB - MICROBIOLOGY	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	28899	UNLISTED PX FOOT/TOES	SURGERY - MUSCULOSKELETAL SYST	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	89240	UNLISTED MISC PATH TEST	PATH & LAB - OTHER PROCEDURES	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	83068	HEMOGLOBIN UNSTABLE SCREEN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83050	HGB METHEMOGLOBIN QUAN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99341	HOME/RES VST NEW SF MDM 15	E & M - HOME SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99310	SBSQ NF CARE HIGH MDM 45	E & M - NURSING FACILITY SERVI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8662	RS LOW BACK IMPR NOT MSR NO RSN GVN	HCPCS - PROC/PROF SERVICES (TE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8654	RS HIP IMPR NOT MSR RSN NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8539	FO ASMT POS CP BSD ID DEF DOC WI 2D	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21299	UNLISTED CRANFCL&MAXLFCL PX	SURGERY - MUSCULOSKELETAL SYST	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	21089	UNLISTED MAXLFCL PROSTH PX	SURGERY - MUSCULOSKELETAL SYST	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	

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MMAI-Medicare/Medicaid	G0330	FS DNTL REHAB PROC PT RQRS MON ANES	HCPCS - PROC/PROF SERVICES (TE	YES	01/01/2023	12/31/2078			
MMAI-Medicare/Medicaid	83045	HGB METHEMOGLOBIN QUAL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D4266	GUIDED TISS REG NAT TH-RESORB BR/SI	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	E2102	ADJUNCTIVE NONIMPLANTED CGM/RECEIVR	HCPCS - DME	NO	03/31/2022	03/31/2022			
MMAI-Medicare/Medicaid	0733T	REM R-T MTN NREHAB THER SPLY	CATEGORY III CODES	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	84999	UNLISTED CHEMISTRY PROCEDURE	PATH & LAB - CHEMISTRY	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	27279	ARTHRD SI JT PERQ/MIN NVAS	SURGERY - MUSKULOSKELETAL SYST	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	64446	NJX AA&/STRD SC NRV NFS IMG	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9949	LEG PAIN NOT MSR VAS/NPS 3MO POSTOP	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	93998	UNLISTD NONINVAS VASC DX STD	MEDICINE - NON-INVASIVE VASCUL	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	54699	UNLISTED LAPS PX TESTIS	SURGERY - MALE GENITAL SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	77799	UNLISTED PX CLIN BRACHYTX	RADIOLOGY - RADIATION ONCOLOGY	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	47999	UNLISTED PX BILIARY TRACT	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	G8650	RS KNEE IMPR NOT MSR NO RSN GIVEN	HCPCS - PROC/PROF SERVICES (TE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23675	CLTX SHO DISLC NECK FX MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	22999	UNLISTED PX ABDOMEN MUSCSKEL	SURGERY - MUSCULOSKELETAL SYST	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	

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MMAI-Medicare/Medicaid	19499	UNLISTED PROCEDURE BREAST	SURGERY - INTEGUMENTARY SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	68899	UNLISTED PX LACRIMAL SYSTEM	SURGERY - EYE AND OCULAR ADNEX	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	24101	ARTHRT ELBW JT EXPL BX RMVL	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23929	UNLISTED PROCEDURE SHOULDER	SURGERY - MUSCULOSKELETAL SYST	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	23515	OPTX CLAVICULAR FX W/INT FIX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88299	UNLISTED CYTOGENETIC STUDY	PATH & LAB - CYTOGENETIC STUDI	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	87912	NFCT AGT GNTYP ALYS HEP B	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77499	UNLISTED PX THER RAD TX MGMT	RADIOLOGY - RADIATION ONCOLOGY	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	99350	HOME/RES VST EST HIGH MDM 60	E & M - HOME SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99348	HOME/RES VST EST LOW MDM 30	E & M - HOME SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99242	OFF/OP CONSLTJ NEW/EST SF 20	E & M - CONSULTATIONS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99223	1ST HOSP IP/OBS HIGH 75	E & M - HOSPITAL INPATIENT SER	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50060	NL REMOVAL CALCULUS	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50045	NEPHROTOMY W/EXPLORATION	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8734	ELDER MALTX SCR DOC NEG F/U NOT RQR	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87906	NFCT AGT GNTYP ALYS HIV1	PATH & LAB - MICROBIOLOGY	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	24301	MUSC/TDN TRANSFER UPR A/E 1	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	78299	UNLISTED GI PX DX NUC MED	RADIOLOGY - NUCLEAR MEDICINE	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	77299	UNLISTED PX THER RAD TX PLNG	RADIOLOGY - RADIATION ONCOLOGY	NO	09/01/2017	09/01/2017		Submit claims with medical records	
MMAI-Medicare/Medicaid	69949	UNLISTED PX INNER EAR	SURGERY - AUDITORY SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	66999	UNLISTED PX ANT SEGMENT EYE	SURGERY - EYE AND OCULAR ADNEX	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	88199	UNLISTED CYTOPATHOLOGY PX	PATH & LAB - CYTOPATHOLOGY	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	88099	UNLISTED NECROPSY (AUTOPSY)	PATH & LAB - ANATOMIC PATHOLOG	NO	09/01/2017	09/01/2017		Submit claims with medical records	
MMAI-Medicare/Medicaid	88749	UNLISTED IN VIVO LAB SERVICE	PATH & LAB - TRANSCUTANEOUS PR	NO	09/01/2017	09/01/2017		Submit claims with medical records	
MMAI-Medicare/Medicaid	36299	UNLISTED PX VASCULAR NJX	SURGERY - CARDIOVASCULAR SYSTE	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	24164	REMOVAL PROSTH RADIAL HEAD	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9969	CLIN REF PT ANTH CLN RECD RPT PT RF	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9789	BLD PRESSR RCD DUR INPT ER UC VISIT	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	83080	ASSAY OF B HEXOSAMINIDASE EA	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83033	HEMOGLOBIN FTL F ASSAY QUAL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24341	RPR TDN/MUSC UPR A/E EACH	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	24150	RAD RESCJ TUM DSTL/SHFT HUM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	24100	ARTHRT ELBW SYNOVIAL BX ONLY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24077	RAD RESCJ TUM TISS A/E LT 5CM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24320	TENOPLASTY ELBOW TO SHO 1	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23585	OPTX SCAPULAR FX W/INT FIXJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	22861	REV RPLCM ARTHRP 1NTRSPC CRV	SURGERY - MUSCULOSKELETAL SYST	YES	09/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	31599	UNLISTED PROCEDURE LARYNX	SURGERY - RESPIRATORY SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	78599	UNLISTED RESP PX DX NUC MED	RADIOLOGY - NUCLEAR MEDICINE	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	G2152	RS NCK IMPR SUC CALC & SC EQU 0/GT 0	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G8664	RS SHOULDER IMPR SUC CALC & SC LT 0	HCPCS - PROC/PROF SERVICES (TE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	99304	1ST NF CARE SF/LOW MDM 25	E & M - NURSING FACILITY SERVI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99316	NF DSCHRG MGMT 30 MIN+	E & M - NURSING FACILITY SERVI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99243	OFF/OP CNSLTJ NEW/EST LOW 30	E & M - CONSULTATIONS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	17999	UNLISTD PX SKN MUC MEMB SUBQ	SURGERY - INTEGUMENTARY SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	50130	PYELOTOMY W/REMOVAL CALCULUS	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	48999	UNLISTED PROCEDURE PANCREAS	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	44238	UNLISTED LAPS PX INTESTINE	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	

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MMAI-Medicare/Medicaid	78199	UNLSTD HEMATOP RET/ENDO LYMP	RADIOLOGY - NUCLEAR MEDICINE	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	24300	MNPJ ELBOW UNDER ANES	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23625	CLTX GR HMRL TBRS FX W/MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24138	SEQUESTRECTOMY OLECRN PROCES	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0004M	SCOLIOSIS DNA ALYS	PATH & LAB - CHEMISTRY	NON-COV	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	24136	SEQUESTRECTOMY RADIAL H/N	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23620	CLTX GR HMRL TBRS FX WO MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87902	NFCT AGT GNTYP ALYS HEP C	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31299	UNLISTED PX ACCESSORY SINUS	SURGERY - RESPIRATORY SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	29999	UNLISTED PX ARTHROSCOPY	SURGERY - MUSCULOSKELETAL SYST	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	90899	UNLISTED PSYC SVC/THERAPY	MEDICINE - PSYCHIATRY	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	G8710	PATIENT PRESCRIBED ANTIBIOTIC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60659	UNLISTED LAPS PX ENDOC SYS	SURGERY - ENDOCRINE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	58679	UNLISTED LAPS PX OVIDCT OVRY	SURGERY - FEMALE GENITAL SYSTE	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	99309	SBSQ NF CARE MODERATE MDM 30	E & M - NURSING FACILITY SERVI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99307	SBSQ NF CARE SF MDM 10	E & M - NURSING FACILITY SERVI	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	97139	UNLISTED THERAPEUTIC PX	MEDICINE - PHYSICAL MEDICINE A	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	99255	IP/OBS CONSLTJ NEW/EST HI 80	E & M - CONSULTATIONS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55559	UNLSTD LAPS PX SPRMATIC CORD	SURGERY - MALE GENITAL SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	69719	RPLCM OI IMPLT SK TC ESPLT 100	SURGERY - AUDITORY SYSTEM	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	91299	UNLISTED DX GI PROCEDURE	MEDICINE - GASTROENTEROLOGY	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	D0393	VIRTUAL TX SIM 3D IMG VOL/SURF SCAN	HCPCS - DENTAL	YES	10/05/2015	12/31/2078			
MMAI-Medicare/Medicaid	53899	UNLISTED PX URINARY SYSTEM	SURGERY - URINARY SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	50100	TRNSXJ/REPOS ABRRNT RNL VSLS	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9097	INJ FARICIMAB-SVOA 0.1 MG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	96549	UNLISTED CHEMOTHERAPY PX	MEDICINE - CHEMOTHERAPY ADMINI	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	42699	UNLISTED PX SALIVRY GLND/DUX	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	40899	UNLISTED PX VESTIBULE MOUTH	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	G8651	RS HIP IMPR SUC CALC & SCORE EQU 0/GT 0	HCPCS - PROC/PROF SERVICES (TE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8451	BB TX LVEFLT EQU 40PCT NO RX RSN DOC CLIN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G2210	RS NCK IMPR NO MSR PT NO NFS PROM	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2167	RS NCK IMPR SUC CALC & SCORE LT 0	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			

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MMAI-Medicare/Medicaid	G0917	PATIENT CARE SURVEY NOT CMPL PT	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76496	UNLISTED FLUOROSCOPIC PX	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	24155	RESECTION OF ELBOW JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	24152	RAD RESECTION TUM RADIAL H/N	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24125	EXC/CRTG B1 CST/TUM RDS AGRF	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23802	ARTHRD GLENOHUMERAL JT W/GRF	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23520	CLTX STRNCLAV DISLC W/O MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D4241	GN F PROC-1-3 CNTG TH/TT BND SPS/Q	HCPCS-DENTAL-Perio Surgical	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	60699	UNLISTED PX ENDOCRINE SYSTEM	SURGERY - ENDOCRINE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	G2199	PT NOT SCR UH ALC USE SYS SCR METH	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	99244	OFF/OP CNSLTJ NEW/EST MOD 40	E & M - CONSULTATIONS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76498	UNLISTED MR PROCEDURE	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	09/01/2017	09/01/2017			
MMAI-Medicare/Medicaid	45999	UNLISTED PROCEDURE RECTUM	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	27299	UNLISTED PX PELVIS/HIP JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	27282	ARTHRODESIS SYMPHYSIS PUBIS	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	24331	FLEXOR-PLASTY ELBW W/ADVMNT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	24147	PRTL EXC BONE OLECRN PROCESS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24134	SEQUESTRECTOMY SHFT/DSTL HUM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32999	UNLISTED PX LUNGS & PLEURA	SURGERY - RESPIRATORY SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	59899	UNLISTED PX MAT CARE&DLVR	SURGERY - MATERNITY CARE AND D	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	23532	OPTX STRCLV DSLC AQ/CHRN GRF	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9781	DOC MED RSN NOT CUR USER/RCV STATIN	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	D4267	GTR REGEN NAT TT-NON-RESORB BR/SI	HCPCS-DENTAL-Perio Surgical	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	0703T	REM THER MNTR OL COG BHV	CATEGORY III CODES	EXPIRED	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	A9276	SNSR; I DISP NONDME INT CGM 1UEQU 1D	HCPCS - ADMIN MISC & INVEST	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24145	PRTL EXC BONE RADIAL H/N	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G4013	MENTAL/BEHAV & PSYCH MIPS SPLTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	24116	EXC/CRTG B1 CST/TUM HUM ALGR	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23670	OPTX SHO DISLC FX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	22858	TOT DISC ARTHRP 2ND LVL CRV	SURGERY - MUSCULOSKELETAL SYST	YES	09/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	G8663	RS SHLDR IMPR SUC CALCU & SC EQU 0/GT 0	HCPCS - PROC/PROF SERVICES (TE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	99495	TRANSJ CARE MGMT MOD F2F 14D	E & M - CARE PLAN OVERSIGHT SE	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	99349	HOME/RES VST EST MOD MDM 40	E & M - HOME SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99235	HOSP IP/OBS SAME DATE MOD 70	E & M - HOSPITAL INPATIENT SER	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87910	NFCT AGT GNTYP ALYS CMV	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64448	NJX AA&/STRD FEM NRV NFS	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	64445	NJX AA&/STRD SCIATIC NRV IMG	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64417	NJX AA&/STRD AX NERVE IMG	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9913	HBV ASSESS INTRP PR ANTI-TNF NO SPC	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9847	PT RECVD CA DIR TX LAST 14 DAY LIFE	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	96379	UNL THER/PROP/DIAG INJ/INF	MEDICINE - INJECTION	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	92499	UNLISTED OPH SVC/PROCEDURE	MEDICINE - OPHTHALMOLOGY	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	35884	REVJ FEM ANAST AUTOG VN GRF	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43999	UNLISTED PROCEDURE STOMACH	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	43289	UNLISTED LAPS PX ESOPH	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	76882	US LMTD JT/FCL EVL NVASC XTR	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	81099	UNLISTED URINALYSIS PX	PATH & LAB - URINALYSIS	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	83491	ASY HYDROXYCORTICOSTEROIDS17	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	78399	UNLISTED MUSCSKEL PX DX NUC	RADIOLOGY - NUCLEAR MEDICINE	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	47579	UNLISTED LAPS PX BILIARY TRC	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	24140	PARTIAL EXC BONE HUMERUS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24115	EXC/CRTG B1 CST/TUM HUM AGRF	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	24330	FLEXOR-PLASTY ELBOW	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	22862	REV RPLCM RTHRP 1NTRSPC LMBR	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8711	PRESCR ANTIBIOTIC ON W/I 3D EPISODE	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8668	RESID SCORE ELB WR HND IMPR SC LT 0	HCPCS - PROC/PROF SERVICES (TE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	43659	UNLISTED LAPS PX STOMACH	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	93563	NJX CGEN CAR CTH SLCTV C ANG	MEDICINE - CARDIOVASCULAR	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	93566	NJX CAR CTH SLCTV RV/RA ANG	MEDICINE - CARDIOVASCULAR	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	93564	NJX CGEN CAR CATH SLCTV OPAC	MEDICINE - CARDIOVASCULAR	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	21899	UNLISTED PX NECK/THORAX	SURGERY - MUSCULOSKELETAL SYST	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	19294	PREPJ TUM CAV IORT PRTL MAST	SURGERY - INTEGUMENTARY SYSTEM	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	92284	DX DARK ADAPTATION EXAM I&R	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55866	LAPS SURG PRST8ECT RPBIC RAD	SURGERY - MALE GENITAL SYSTEM	YES	07/11/2022	12/31/2078			

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MMAI-Medicare/Medicaid	90399	UNLISTED IMMUNE GLOBULIN	MEDICINE - IMMUNE GLOBULINS	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	51999	UNLISTED LAPS PX BLADDER	SURGERY - URINARY SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	50075	NL RMVL LG STAGHORN CALCULUS	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G4020	OPHTHALMOL/OPTOMETRY MIPS SPEC SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	69726	RMV NTR OI IMPLT SKL PRQ ESP	SURGERY - AUDITORY SYSTEM	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	66175	TRLUML DIL AQ O/F CAN W/ST	SURGERY - EYE AND OCULAR ADNEX	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	69717	RPLCMT OI IMPLT SKL PRQ ESP	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69716	IMPL OI IMPLT SK TC ESPLT 100	SURGERY - AUDITORY SYSTEM	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	43499	UNLISTED PROCEDURE ESOPHAGUS	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	26989	UNLISTED PX HANDS/FINGERS	SURGERY - MUSCULOSKELETAL SYST	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	22856	TOT DISC ARTHRP 1NTRSPC CRV	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G9968	PT REF ANR CLIN/SPEC DUR PRFRM PER	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	31899	UNLISTED PX TRACHEA BRONCHI	SURGERY - RESPIRATORY SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	24006	ARTHRT ELBW CAPSL EXC RLS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44899	UNLISTED PX MECKEL'S DVRTCLM	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	24305	TENDON LNGTH UPR A/E EA TDN	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	23616	OPTX PRX HMRL FX FIX RPR RPL	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83036	HEMOGLOBIN GLYCOSYLATED A1C	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23921	DISARTICULATION SHO SEC CLSR	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	23615	OPTX PROX HUMRL FX W/INT FIX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D9110	PALLIATIVE TX DENTAL PAIN-PER VISIT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	G9500	RE INDCS DOC FNL RPT PRC USG FLUORO	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	20999	UNLISTED PX MUSCSKEL GENERAL	SURGERY - MUSCULOSKELETAL SYST	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	G8667	RS ELB WRST/HND IMP CALC & SCEQU 0/GT 0	HCPCS - PROC/PROF SERVICES (TE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G2147	LEG PN MSR VAS 1YR POGT 3.0 IMP LT 5 PT	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G8968	DOC MED RSN NOT RX FDA APV ANTICOAG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G2141	LP MSR VAS 3 MOS PO GT 3.0 IMP LT 5 PT	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	99283	EMERGENCY DEPT VISIT LOW MDM	E & M - EMERGENCY DEPARTMENT S	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93568	NJX CAR CTH NSLC P-ART ANGRP	MEDICINE - CARDIOVASCULAR	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	99285	EMERGENCY DEPT VISIT HI MDM	E & M - EMERGENCY DEPARTMENT S	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99239	HOSP IP/OBS DSCHRG MGMT GT 30	E & M - HOSPITAL INPATIENT SER	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93565	NJX CAR CTH SLCTV LV/LA ANG	MEDICINE - CARDIOVASCULAR	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	D0210	INTRAORAL - COMP SERIES RAD IMAGES	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	50065	NL SEC SURG OPERJ CALCULUS	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9315	AMOX W/WO CLAV 1ST LINE ABX TIME DX	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	27280	ARTHR SI JT OPN B1GRF INSTRM	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	24102	ARTHRT ELBOW W/SYNOVECTOMY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23552	OPTX ACRCLV DSLC AQ/CHRN GRF	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9970	CLIN REF PT AN CLN NO REC RPT PT RF	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	78999	UNLISTED MISC PX DX NUC MED	RADIOLOGY - NUCLEAR MEDICINE	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	64416	NJX AA&/STRD BRCH PL NFS IMG	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83051	HEMOGLOBIN PLASMA	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D4355	FM DEB ENBL COMP PDL EVAL&DX SUBS V	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	G0309	RMVL IMP INT GS INS 180 D IMPL SNSR	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	24079	RAD RESCJ TUM TISS A/E 5 CM+	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23920	DISARTICULATION SHOULDER	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	23650	CLTX SHO DSLC W/MNPJ WO ANES	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	23600	CLTX PROX HUMRL FX W/O MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23570	CLTX SCAPULAR FX W/O MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23530	OPTX STRNCLAV DISLC AQT/CHRN	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	22857	TOT DISC ARTHRP 1NTRSPC LMBR	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	67599	UNLISTED PROCEDURE ORBIT	SURGERY - EYE AND OCULAR ADNEX	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	67299	UNLISTED PX POSTERIOR SEGMNT	SURGERY - EYE AND OCULAR ADNEX	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	66174	TRLUML DIL AQ O/F CAN W/O ST	SURGERY - EYE AND OCULAR ADNEX	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23935	INC DP OPN B1 CRTX HUM/ELBW	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23931	I&D UPR A/E BURSA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50120	PYELOTOMY W/EXPLORATION	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9501	RE INDCS NOT DOC F RPT FLUORO NT GV	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	23665	CLTX SHO DSLC FX GR HMRL TBR	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	22899	UNLISTED PROCEDURE SPINE	SURGERY - MUSCULOSKELETAL SYST	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	G8708	PATIENT NOT PRESCRIBED ANTIBIOTIC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D0704	3-D PHOTO IMG - IMG CAPTURE ONLY	HCPCS- DENTAL-Radiographs	EXPIRED	01/01/2021	12/31/2078			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	G9989	DOC RSN NOT ADM PNEUMOCOCCAL VACC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2022	01/01/2022			

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MMAI-Medicare/Medicaid	G9905	PATIENT NOT SCREEN FOR TOBACCO USE	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	99315	NF DSCHRG MGMT 30 MIN/LESS	E & M - NURSING FACILITY SERVI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99254	IP/OBS CNSLTJ NEW/EST MOD 60	E & M - CONSULTATIONS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50125	PYELOTOMY W/DRG PYELOSTOMY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69979	UNLISTED PX TEMPORAL BONE	SURGERY - AUDITORY SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	68399	UNLISTED PX CONJUNCTIVA	SURGERY - EYE AND OCULAR ADNEX	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	23900	INTERTHORACOSCPLR AMPUTATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23525	CLTX STRNCLAV DISLC W/MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G2182	PT RECV FT BIOL &/IMM RSP MOD TX	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G0444	ANNUAL DEPRESSION SCR 5 TO 15 MN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24160	RMVL PROSTHHUMRL&ULNAR CMPNT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23700	MNPJ ANES SHO JT FIXJ APRATS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90749	UNLISTED VACCINE/TOXOID	MEDICINE - VACCINES, TOXOIDS	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	58578	UNLISTED LAPS PX UTERUS	SURGERY - FEMALE GENITAL SYSTE	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	59897	UNLISTED FETAL INVAS PX W/US	SURGERY - MATERNITY CARE AND D	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	G8543	DOC POS FO ASMT;CP NO DM WI 2D NO R	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	78799	UNLISTED GU PX DX NUC MED	RADIOLOGY - NUCLEAR MEDICINE	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	78699	UNLISTED NRVS SYS PX DX NUC	RADIOLOGY - NUCLEAR MEDICINE	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	G8602	IV TT NOT INIT WI 4.5 HR LKW NO RSN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	22855	REMOVAL ANTERIOR INSTRMJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0734T	REM R-T MTN NREHAB TX MGMT	CATEGORY III CODES	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0702T	REM THER MNTR OL TECH SPRT	CATEGORY III CODES	EXPIRED	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	38129	UNLISTED LAPS PX SPLEEN	SURGERY - HEMIC AND LYMPHATIC	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	99417	PROLNG OP E/M EACH 15 MIN	E & M - PREVENTIVE MEDICINE SE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	99284	EMERGENCY DEPT VISIT MOD MDM	E & M - EMERGENCY DEPARTMENT S	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99344	HOME/RES VST NEW MOD MDM 60	E & M - HOME SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99245	OFF/OP CONSLTJ NEW/EST HI 55	E & M - CONSULTATIONS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	T1033	SVCS PRFRM DOULA B WORKER PER DIEM	HCPCS - STATE MEDICAID AGENCY	NO	10/01/2022	10/01/2022			
MMAI-Medicare/Medicaid	T1032	SVCS PRFRM DOULA B WKR PER 15 MIN	HCPCS - STATE MEDICAID AGENCY	NO	10/01/2022	10/01/2022			
MMAI-Medicare/Medicaid	J2777	INJECTION FARICIMAB-SVOA 0.1 MG	HCPCS - DRUGS (NOT ORAL)	YES	10/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	J1302	INJECTION SUTIMLIMAB-JOME 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	10/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	E0183	PWR PRESS RDUC UNDRLAY/PAD ALT PUMP	HCPCS - DME	YES	10/01/2022	12/31/2078			

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MMAI-Medicare/Medicaid	C9101	INJECTION OLICERIDINE 0.1 MG	HCPCS - C CODES - OUTPATIENT PP	YES	10/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0351U	NFCT DS BCT/VIRAL TRAIL IP10	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0350U	RX METAB/PCX DNA 27 GEN ALYS	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0349U	RX METAB/PCX DNA 27GEN RX IA	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0348U	RX METAB/PCX DNA 25 GEN ALYS	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0347U	RX METAB/PCX DNA 16 GEN ALYS	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0345U	PSYC GENOM ALYS PNL 15 GEN	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0344U	HEP NAFLD SEMIQ EVL 28 LIPID	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0343U	ONC PRST8 XOM ALY 442 SNCRNA	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0342U	ONC PNCRTC CA MULT IA ECLIA	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0341U	FTL ANEUP DNA SEQ CMPR ALYS	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0340U	ONC PAN CA ALYS MRD PLASMA	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0338U	ONC SLD TUM CRCG TUM CL SLCT	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0337U	ONC PLSM CELL DO&MYELOMA ID	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0336U	RARE DS WHL GEN SEQ BLD/SLV	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0335U	RARE DS WHL GEN SEQ FETAL	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2022	12/31/2078			

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MMAI-Medicare/Medicaid	0334U	ONC SLD ORGN TGSA DNA 84/+	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0333U	ONC LVR SURVEILANC HCC CFDNA	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0332U	ONC PAN TUM GEN PRFLG 8 DNA	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	90622	VACCINIA VRS VAC 0.3 ML PERQ	MEDICINE - VACCINES, TOXOIDS	NO	07/26/2022	07/26/2022			
MMAI-Medicare/Medicaid	87593	ORTHOPOXVIRUS AMP PRB EACH	PATH & LAB - MICROBIOLOGY	NO	07/26/2022	07/26/2022			
MMAI-Medicare/Medicaid	90611	SMALLPOX&MONKEYPOX VAC 0.5ML	MEDICINE - VACCINES, TOXOIDS	NO	07/26/2022	07/26/2022			
MMAI-Medicare/Medicaid	Q9003	COUNSELING GROUP BY CHAPLAIN SRVC	HCPCS - TEMP CODES	NO	10/01/2020	10/01/2020			
MMAI-Medicare/Medicaid	Q9002	COUNSELING INDIVIDUAL CHAPLAIN SRVC	HCPCS - TEMP CODES	NO	10/01/2020	10/01/2020			
MMAI-Medicare/Medicaid	Q9001	ASSESSMENT BY CHAPLAIN SERVICES	HCPCS - TEMP CODES	NO	10/01/2020	10/01/2020			
MMAI-Medicare/Medicaid	Q4128	FLEXHD OR ALLOPATCHHD PER SQ CM	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0483	HF CW OS SYS TH REG REC SIM EX OS Q	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C9098	CLTACABTAGN AUTOLCL 100 M BCMA/TX D	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	C9093	INJ RBZ SS RLS IVT I SUSVIMO 0.1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C9092	INJ TAC ACT SUPRACHORDL XIPERE 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C9091	INJ SIROLIMUS PROTEIN-BND PTCL 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	C9090	INJ PLASMINOGEN HUMAN-TVMH 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	91304	SARSCOV2 VAC 5MCG/0.5ML IM	MEDICINE - VACCINES, TOXOIDS	NO	05/04/2021	05/04/2021			
MMAI-Medicare/Medicaid	0276U	HEM INH THROMBOCYTOPENIA 42	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q5119	INJ RITUXIMAB-PVVR BIOSIMILAR 10 MG	HCPCS - TEMP CODES	YES	06/04/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	Q5115	INJ RITUXIMAB-ABBS BIOSIMILAR 10 MG	HCPCS - TEMP CODES	YES	06/09/2019	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	71271	CT THORAX LUNG CANCER SCR C-	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2021	09/30/2022			
MMAI-Medicare/Medicaid	D7294	PLACEMENT TEMP ANC DEVC W/O FLAP	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7293	PLACEMENT TEMP ANCH DEVC RQR FLAP	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7292	PL TMP ANC DVC SCR RTN PLT RQR FLP	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6793	INTRM RET CR-TX/CMPL DX B4 FNL IMP	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6253	INTRM PONTC-TX/CMPL DX NEC B4 F IMP	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6100	SURGICAL REMOVAL OF IMPLANT BODY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	D5867	REPL PRT SEMI-PRCISN/PRCISN PER ATT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D4276	COMB CNCTIV TISS&PED GRFT PER TOOTH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D4265	BIOL MATL AID SFT&OSS TISS REG-SITE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2971	ADD PRC CSTMZ CR UND XST PRT D FRWK	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2799	INTRM CR-TX/CMPL DX NES PRI FNL IMP	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7994	SURGICAL PLACEMENT: ZYGOMATIC IMPL	HCPCS- DENTAL-Procedure-Other	YES	01/01/2021	12/31/2078			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7993	SURG PLCMT OF CF IMPL - EXTRA ORAL	HCPCS- DENTAL-Procedure-Other	YES	01/01/2021	12/31/2078			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7962	LINGUAL FRENECTOMY FRENULECTOMY	HCPCS- DENTAL-Procedure-Other	YES	01/01/2021	12/31/2078			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7961	BUCCAL/LABIAL FRENECTOMY FRENULECT	HCPCS- DENTAL-Procedure-Other	YES	01/01/2021	12/31/2078			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6192	SEMI-PRECISION ATTACHMENT - PLCMT	HCPCS-DENTAL-Implant Svcs	YES	01/01/2021	12/31/2078			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6191	SEMI-PRECISION ABUTMENT - PLACEMENT	HCPCS-DENTAL-Implant Svcs	YES	01/01/2021	12/31/2078			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5996	PDL MED CAR PRIPH SL-LAB PROCD-MAND	HCPCS-DENTAL-Maxillofacial	YES	01/01/2021	12/31/2078			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D5995	PDL MED CAR PRIPH SL-LAB PROCD-MAX	HCPCS-DENTAL-Maxillofacial	YES	01/01/2021	12/31/2078			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3503	SUR EXP RS NO APICOECT/RPR RR - MOL	HCPCS- DENTAL-Apicoectomy	YES	01/01/2021	12/31/2078			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3502	SURG EXP RS NO APCECTOMY/REPR RR-PM	HCPCS- DENTAL-Apicoectomy	YES	01/01/2021	12/31/2078			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3501	SURG EXP RS NO APCECTMY/REPR RR-ANT	HCPCS- DENTAL-Apicoectomy	YES	01/01/2021	12/31/2078			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3473	SURG REPR OF ROOT RESORPTN - MOLAR	HCPCS- DENTAL-Apicoectomy	YES	01/01/2021	12/31/2078			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3472	SURG REPR OF ROOT RESORPTION - PM	HCPCS- DENTAL-Apicoectomy	YES	01/01/2021	12/31/2078			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3471	SURG REPR OF ROOT RESORPTION - ANT	HCPCS- DENTAL-Apicoectomy	YES	01/01/2021	12/31/2078			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2928	PREFAB PORC/CER CROWN - PERM TOOTH	HCPCS-DENTAL-Crowns - Single	YES	01/01/2021	12/31/2078			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D1558	REMOVAL FIX BIL SPACE MNTNR - MAND	Space Maint	YES	01/01/2010	12/31/2078			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D1557	REMOVAL FIXED BIL SPACE MNTNR - MAX	Space Maint	YES	01/01/2010	12/31/2078			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D1355	CARIES PREV MED APPLIC - PER TOOTH	HCPCS- DENTAL-Preventive Oth	NO	12/31/2020	12/31/2020			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D1321	CNSL ORAL BEHAV & SYS HLTH EFF HI-R	HCPCS- DENTAL-Preventive Oth	NO	12/31/2020	12/31/2020			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D0708	INTRAORAL - BW RAD IMG-IMG CAP ONLY	HCPCS- DENTAL-Radiographs	NO	12/31/2020	12/31/2020			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0707	INTRAOR - PA RAD IMG - IMG CAP ONLY	HCPCS- DENTAL-Radiographs	NO	12/31/2020	12/31/2020			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0706	INTRAOR - OCCL X-RAY - IMG CAP ONLY	HCPCS- DENTAL-Radiographs	NO	12/31/2020	12/31/2020			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0705	EO POST DENT RAD IMG - IMG CAP ONLY	HCPCS- DENTAL-Radiographs	NO	12/31/2020	12/31/2020			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0703	2-D ORL/FAC PH IMG - IMG CAP ONLY	HCPCS- DENTAL-Radiographs	YES	01/01/2021	12/31/2078			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0702	2-D CR IMAGE - IMAGE CAPTURE ONLY	HCPCS- DENTAL-Radiographs	YES	01/01/2021	12/31/2078			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0701	PANORAMIC RAD IMG - IMG CAP ONLY	HCPCS- DENTAL-Radiographs	NO	12/31/2020	12/31/2020			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0605	ANTI-D TST FOR PH REL PATH INCL COV	HCPCS-DENTAL-Tests and Labs	NO	12/31/2020	12/31/2020			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0604	ANTIG TST FOR PH REL PATH INCL COV	HCPCS-DENTAL-Tests and Labs	NO	12/31/2020	12/31/2020			Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9971	ODONTOPLASTY - PER TOOTH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6091	REPL RP ATT IMPL/ABUT S PROS PER	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5761	RELINE MANDIBULAR PART DENTUR INDIR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	D5760	RELINE MAXILLARY PART DENTURE INDIR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5751	RELINE CMPL MANDIBULAR DENTUR INDIR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5750	RELINE COMPL MAXILLARY DENTUR INDIR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5741	RELINE MANDIBULAR PART DENTURE DIR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5740	RELINE MAXILLARY PART DENTURE DIR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5731	RELINE COMPL MANDIBULAR DENTURE DIR	HCPCS-DENTAL-Denture Reline	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5730	RELINE COMPL MAXILLARY DENTURE DIR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5226	MANDIBULAR PART DENTURE - FLEX BASE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5225	MAXILLARY PART DENTURE - FLEX BASE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2962	LABIAL VNR PORCELAIN LAM - INDIRECT	HCPCS-DENTAL-Veneers	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2961	LABIAL VENEER RESIN LAM - INDIRECT	HCPCS-DENTAL-Veneers	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2960	LABIAL VENEER - DIRECT	HCPCS-DENTAL-Veneers	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D9999	UNS ADJUNCTIVE PROCEDURE REPORT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9972	EXTERNAL BLEACH-PER ARCH-PRFRM OFF	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9942	REPAIR &/ RELINE OF OCCLUSAL GUARD	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9930	TX COMPS - UNUSUL CIRCUMSTANCES RPT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9911	APPLIC DESENZT RSN CERV&/ROOT-TOOTH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9910	APPLICATION DESENZT MEDICAMENT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9630	DRUGS/MEDICAMNTS DISP OFFC HOME USE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9612	TX PARENTERAL RX 2/GT ADMIN DIFF MED	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9610	TX PARENTRAL DRUG 1 ADMINISTRATION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9440	OV-AFTER REGULARLY SCHEDULED HOURS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9430	OV OBS - NO OTH SERVICES PERFORMED	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9420	HOSPITAL OR AMB SURG CENTER CALL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D9310	CNSLT DX DENT/PHY NOT REQ DENT/PHY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9230	INHAL NITROUS OXID/ANALG ANXIOLYSIS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9215	LOCAL ANESTH CONJUNCT OP/SURG PROC	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9212	TRIGEMINAL DIVISION BLOCK ANES	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9210	LOC ANES-NOT CONJUNC W/OP/SURG PROC	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D8999	UNS ORTHODONTIC PROCEDURE BY REPORT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D8670	PERIODIC ORTHODONTIC TX VISIT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D8660	PREORTHODONTIC TREATMENT VISIT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D8090	COMP ORTHODONTIC TX ADULT DENTITION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D8080	COMP ORTHODONT TX ADOLES DENTITION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D8070	COMP ORTHODONT TX TRNSITNL DENTITN	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D8040	LTD ORTHODONTIC TX ADULT DENTITION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D8030	LTD ORTHODONTIC TX ADOLES DENTITION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D8020	LTD ORTHODONT TX TRNSITIONL DENTITN	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D8010	LTD ORTHODONT TX PRIMARY DENTITION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7999	UNS ORAL SURG PROC BY REPORT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7998	INTRAORAL PLCMT FIX DEVC NOT W/FX	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7997	APPLIANCE REMV INCL REMV ARCHBAR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7996	IMPLNT-MANDIB-AUGMENTATION BR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7995	SYNTH GFT-MAND/FACE BONES BY RPT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7981	EXCISION SALIVARY GLAND BY REPORT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7980	SURGICAL SIALOLITHOTOMY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7972	SURGICAL RDUC FIBROUS TUBEROSITY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7970	EXC HYPERPLASTIC TISSUE-PER ARCH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D7955	REPR MAXLOFACL SOFT&/HARD TISS DFCT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7953	BONE REPLCMT GRAFT RIDGE PRES -SITE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7951	SINUS AUG BONE/BONE SUBST LAT OPN	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7950	OSS OSTEOPERIOSTL CART GFT MAND/MAX	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7948	LEFORT II/LEFORT III - W/O BONE GFT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7946	LEFORT I MAXILLA TOTAL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7943	OSTEOT-MAND RAMI BN GFT; OBTAIN GFT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7940	OSTEOPLASTY - ORTHOGNATHIC DEFORM	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7912	COMPLICATED SUTURE GT 5 CM	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7911	COMPLICATED SUTURE UP TO 5CM	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7910	SUTURE RECENT SMALL WOUNDS UP 5 CM	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7880	OCCLUSAL ORTHOTIC DEVICE BY REPORT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D7877	ARTHROSCOPY: DEBRIDEMENT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7876	ARTHROSCOPY: DISCECTOMY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7875	ARTHROSCOPY: SYNOVECTOMY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7874	ARTHROSCOPY: DISC REPOS & STBL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7873	ARTHROSCOPY: LAVAGE & LYSIS OF ADH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7872	ARTHROSCOPY DIAGNOSIS W/WO BIOPSY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7850	SURGICAL DISCECTOMY W/WO IMPLANT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7780	FCE BNS-COMP RDUC FIX & MX APPRCHES	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7771	ALVEOL CLOS RDUC STBL TEETH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7770	ALVEOL - OPEN RDUC STBL TEETH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7760	MALAR&/ZYGO ARCH CLOSED REDUCTION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7750	MALR&/ZYGOMATIC ARCH-OPEN RDUC	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D7740	MANDIBLE CLOSED REDUCTION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7730	MANDIBLE OPEN REDUCTION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7720	MAXILLA CLOSED REDUCTION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7710	MAXILLA OPEN REDUCTION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7680	FCE BNS-COMP RDUC FIX&MX APPRCH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7671	ALVEOLUS-OPN RDUC INCL STABIL TEETH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7670	ALVEOLUS-CLS RDUC INC STABIL TEETH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7660	MALAR&/ZYGO ARCH-CLOSED REDUCTION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7650	MALAR&/ZYGO ARCH-OPEN REDUCTION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7560	MAXIL SINUSOT REMV TOOTH FRAG/FB	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7550	PART OSTEC/SEQECT REMV NON-VITAL BN	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7540	REMV REACT-PRODUC FB MUSCLOSKEL SYS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D7530	REMV FB MUCOS SKN/SUBQ ALVEOL TISS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7521	I & D ABSC XTRAORAL SOFT TISS COMP	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7520	I&D ABSC EXTRAORAL SOFT TISS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7511	I & D ABSC INTRAORAL SOFT TISS COMP	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7510	I&D ABSCESS-INTRAORAL SOFT TISS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7490	RADICAL RESECTION MAXLA OR MANDIBLE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7485	REDUCTION OF OSSEOUS TUBEROSITY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7465	DESTRUCT LES PHYS/CHEM METH BY RPRT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7461	REMV BEN NONODONTOGNIC TUMRGT 1.25 CM	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7460	REMV BEN NONODONTGN TUMR-TO 1.25 CM	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7451	REMV BEN ODONTOGNIC TUMR GT 1.25 CM	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7450	REMV BEN ODONTOGNIC TUMR-T0 1.25 CM	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D7441	EXC MALIG TUMOR/LES GT 1.25CM	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7440	EXC MALIG TUMR - UP 1.25 CM SEE CPT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7415	EXCISION MALIG LESION COMPLICATED	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7414	EXCISION MALIGNANT LESION GT 1.25 CM	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7413	EXCISION MALIG LESION UP 1.25 CM	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7412	EXCISION BENIGN LESION COMPLICATED	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7411	EXCISION OF BENIGN LESION GT 1.25 CM	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7410	EXCISION BENIGN LESION TO 1.25 CM	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7350	VESTBULPLSTY RIDGE EXT SFT TISS GFT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7340	VESTIBULOPLASTY RIDGE EXT SEC EPITH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7321	ALVEOLOPLSTY NOT W/XTRCT 1-3 TEETH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7320	ALVEOLOPLASTY NO EXT 4/GT TEETH/SPAC	HCPCS- DENTAL-Alveoplasty	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D7311	ALVEOLOPLSTY CONJNC XTRCT 1-3 TEETH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7310	ALVEOLOPLASTY W/EXT 4/GT TEETH/SPACE	HCPCS- DENTAL-Alveoplasty	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7295	HARVEST BONE USE AUTOGEN GRAFT PROC	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7291	TRNSSEPTL/SUPRA CRESTAL FIBEROT BR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7288	BRUSH BX TRANSEPITH SAMPLE CLCTION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7287	EXFOLIATIVE CYTOLOG SAMPLE CLCTION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7283	PLCMT DEVC FACL ERUPT IMPACT TOOTH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7282	MOBILZ ERUPT/MALPSTN TOOTH AID ERUP	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7280	EXPOSURE OF AN UNERUPTED TOOTH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7270	TOOTH REIMPL&/STBL ACC DISPLCD	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7261	PRIMARY CLOSURE SINUS PERFORATION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7260	OROANTRAL FISTULA CLOSURE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D7250	REMOVAL OF RESIDUAL TOOTH ROOTS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7241	REMV IMP TOOTH-CMPL BNY W/SURG COMP	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7240	REMOVAL IMPACTED TOOTH - CMPL BONY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7230	REMOVAL IMPACT TOOTH - PARTLY BONY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7220	REMOVAL IMPACT TOOTH - SOFT TISSUE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7210	EXTN ERU TT RQR REMV BONE &/SECT TT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7140	EXTRAC ERUPTED TOOTH/EXPOSED ROOT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7111	EXTRACT CORONAL RMNNTS-PRIM TOOTH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6999	UNSPEC FIX PROSTHODONTIC PROC BR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6980	FXD PRT DNTR REPR NEC RSTRTV MTL FL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6930	RECEMENT FIXED PARTIAL DENTURE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6794	RETAINER CROWN - TI & TI ALLOYS	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	D6792	RETAINER CROWN-FULL CAST NOBLE METL	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6791	RETNR CRWN-FULL CAST PDMT BASE METL	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6790	RETNR CRWN-FULL CAST HI NOBLE METAL	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6783	RETAINER CROWN-3/4 PORCELAIN/CERAMC	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6782	RETAINER CROWN-3/4 CAST NOBLE METAL	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6781	RETNR CRWN-3/4 CAST PDMT BASE METAL	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6780	RETNER CROWN-3/4 CAST HI NOBLE METL	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6752	RETNR CRWN-PORCELN FUSD NOBLE METAL	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6751	RET CROWN-PORC FUSED PDMT BASE METL	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6750	RET CROWN-PORC FUSED HI NOBLE METL	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6740	RETAINER CROWN - PORCELAIN/CERAMIC	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6722	RETAINER CROWN-RESIN W/NOBLE METAL	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	D6721	RETAINER CROWN-RESIN PDMT BASE METL	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6720	RETAINER CROWN-RESIN HI NOBLE METAL	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6710	RET CROWN-INDIR RESIN BASED COMPOS	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6634	RETAINER ONLAY - TITANIUM	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6624	RETAINER INLAY - TITANIUM	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6615	RET ONLAY-CST NOBLE METL 3/MORE SRF	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6614	RET ONLAY-CAST NOBLE METAL 2 SURF	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6613	RET ON-CST PDMT BSE METL 3/MORE SRF	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6612	ONLAY-CAST PREDOM BASE METL 2 SURF	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6611	RET ON-CST HI NOBLE METL 3/MORE SRF	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6610	RET ONLAY-CAST HI NOBLE METL 2 SURF	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6609	RETAINR ONLAY-PORC/CERAM 3/MORE SRF	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	D6608	RETAINER ONLAY-PORCELN/CERAM 2 SURF	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6607	RET INLAY-CAST NOBLE METL 3/MRE SRF	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6606	RETAIN INLAY-CAST NOBLE METL 2 SURF	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6605	RET INLA-CST PDMT BSE MTL 3/MOR SRF	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6604	RET INLAY-CAST PDMT BASE METL 2 SRF	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6603	RET INLA-CST HI NOBL MTL 3/MORE SRF	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6602	RET INLAY-CAST HI NOBLE METL 2 SURF	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6601	RETAINER INLAY-PORC/CERAM 3/MOR SRF	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6600	RETAINER INLAY-PORCELN/CERAM 2 SURF	HCPCS-DENTAL-Bridge-Abuts	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6548	RETN-PORCELN/CERAM RSN BOND PROSTH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6545	RETN-CAST METL RSN BOND FIX PROSTH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6252	PONTIC RESIN W/NOBLE METAL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	D6251	PONTIC RESIN W/PREDOM BASE METAL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6250	PONTIC - RESIN W/HIGH NOBLE METAL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6242	PONTIC - PORCELN FUSED NOBLE METAL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6241	PONTIC-PORCLN FUSD PREDOM BASE METL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6240	PONTIC-PORCELN FUSED HI NOBLE METL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6214	PONTIC - TITANIUM & TITANIUM ALLOYS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6211	PONTIC - CAST PREDOM BASE METAL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6205	PONTIC INDIRECT RESIN BASED COMPOS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6199	UNSPEC IMPLANT PROCEDURE BY REPORT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6194	ABUT SUP RET CRWN FPD TIT & TIT ALY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6190	RADIOGRAPHIC/SURG IMPLANT INDX RPT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6094	ABUTMENT SUPP CROWN - TI & TI ALLOY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D6093	RECEMENT IMPL/ABUT FIX PART DENTURE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6092	RECEMENT IMPL/ABUT SUPPORTED CROWN	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6077	IMPL SUPP RET METAL FPD-HI NBL ALY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6076	IMPL SUP RET FPD-PRCLN F HI NBL ALY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6075	IMPLANT SUPP RETAIN CERAMIC FPD	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6074	ABUT RETN CAST METL FPD NOBL METL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6073	ABUT RETN CAST METL FPD BASE METL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6072	ABUT SUPP RETAIN CAST METAL FPD	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6071	ABUT SUPP RETN PORCLN FUSD METL FPD	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6070	ABUT RETN PORCLN METL FPD BASE METL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6069	ABUT RETN PORCLN MTL FPD HI NOBL MT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6068	ABUT SUPP RETAIN PORCELN/CERAM FPD	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	D6067	IMPLANT SUPP CROWN-HI NOBLE ALLOYS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6066	IMPL SUPP CR-PORCELN FU HI NBL ALY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6065	IMPLANT SUPP PORCELN/CERAMIC CROWN	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6064	ABUT SUPP CAST METL CROWN NOBL METL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6063	ABUT SUPP CAST METL CROWN BASE METL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6062	ABUT SUPP CAST MTL CRWN HI NOBL MTL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6061	ABUT PORCLN TO MTL CROWN NOBLE MTL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6060	ABUT PORCLN TO METL CROWN BASE METL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6059	ABUT PORCLN TO MTL CRWN HI NOBL MTL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6058	ABUT SUPP PORCELN/CERAMIC CROWN	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6057	CUSTOM FAB ABUTMENT-INCL PLACEMENT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6056	PREFAB ABUTMENT-INCL MOD & PLCMNT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	D6055	CONNECTING BAR IMPLANT/ABUT SUPPORT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6050	SURG PLACEMENT: TRANSOSTEAL IMPLANT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6040	SURG PLACEMENT: EPOSTEAL IMPLANT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6012	SURG PLCMT INTERIM IMPL PROS: ENDOS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6010	SURG PLCMT IMPL BODY: ENDOSTEAL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5999	UNS MAXILLOFACIAL PROSTH BY REPORT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5993	MAINT CLEAN MFP OTH THAN REQ ADJ	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5992	ADJ MAXILLOFACIAL PROSTH APPL BR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5991	VESICULOBULLOUS DZ MEDICAMENT CARR	HCPCS-DENTAL-Misc Svcs	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5959	PALATAL LIFT PROSTH MODIFICATION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5937	TRISMUS APPLIANCE NOT FOR TMD TX	HCPCS-DENTAL-Maxillofacial	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5936	OBTURATOR/PROSTHESIS INTERIM	HCPCS-DENTAL-Maxillofacial	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D5935	MANDIB RES PROSTH W/O GUIDE FLANGE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5934	MANDIB RESECT PROSTH W/GUIDE FLANGE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5925	FACIAL AUGMENTATION IMPLANT PROSTH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5899	UNS REMV PROSTHODONTIC PROC RPT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5875	MOD REMV PROSTH FOLLOW IMPL SURG	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5671	REPL ALL TEETH&ACRYLC FRMEWRK MAND	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5670	REPL ALL TEETH&ACRYLC FRMEWRK MAX	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5660	ADD CLASP XST PRT DENTURE-PER TOOTH	HCPCS-DENTAL-Denture Repair	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5650	ADD TOOTH EXISTING PARTIAL DENTURE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5630	REPR/REPLCE BROKEN CLASP-PER TOOTH	HCPCS-DENTAL-Denture Repair	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5520	REPL MISS/BROKEN TEETH-CMPL DENTUR	HCPCS-DENTAL-Denture Repair	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5411	ADJUST COMPLETE DENTUR - MANDIBULAR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D5214	MAND PRTL DENTURE - CAST METAL FW	HCPCS-DENTAL-Denture-Partial	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5213	MAX PRTL DENTURE- CAST METAL FW	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5212	MANDIB PARTIAL DENTURE RESIN BASE	HCPCS-DENTAL-Denture-Partial	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5211	MAXILLARY PARTIAL DENTUR RESIN BASE	HCPCS-DENTAL-Denture-Partial	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D4999	UNSPEC PERIODONTAL PROCEDURE REPORT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D4920	UNSCHEDULED DRESSING CHANGE	HCPCS-DENTAL-Perio - Other	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D4381	LOC DEL ANTIM DZ CRVICUL TISS-TOOTH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D4342	PRDONTAL SCAL&ROOT PLAN 1 -3 TEETH	HCPCS-DENTAL-Perio - Adjunct	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D4341	PRDNTL SCAL&ROOT PLAN 4/GT TEETH-QUAD	HCPCS-DENTAL-Perio - Adjunct	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D4275	NON-AUTOGENOUS CONNECTIVE TISS GRFT	HCPCS-DENTAL-Perio Surgical	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D4274	MESIAL/DISTAL WEDGE PROC 1 TOOTH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D4273	AUTOGEN CONNECTIVE TISS GRAFT PROC	HCPCS-DENTAL-Perio Surgical	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D4268	SURGICAL REVISION PROC PER TOOTH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D4264	BRG-RET NAT TOOTH-EA ADD SITE QUAD	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D4263	BN REPL GR-RET NAT TT-1ST SITE QUAD	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D4261	OSSEOUS SURG 1-3 CNTIG TEETH QUAD	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D4260	OSSEOUS SURG 4/GT CNTIG TEETH QUAD	HCPCS- DENTAL-Perio Surgical	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D4249	CLIN CROWN LEN - HARD TISSUE	HCPCS-DENTAL-Perio Surgical	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D4231	ANAT CRN EXP 1-3 T/BND TT SP QUAD	HCPCS-DENTAL-Perio Surgical	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D4230	ANAT CRN EXP-4/GT CONT/BND TT SP QUAD	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D4211	GINGIVECT/PLSTY 1-3CNTIG TEETH QUAD	HCPCS-DENTAL-Perio Surgical	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D4210	GINGIVECT/PLSTY 4/GT CNTIG TEETH QUAD	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3999	UNSPEC ENDODONTIC PROCEDURE REPORT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3950	CANAL PREP&FIT PREFORMED DOWEL/POST	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D3920	HEMISECTION NOT INCL RC THERAPY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3910	SURG PROC ISOLAT TOOTH W/RUBBER DAM	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3470	INTENTIONAL REIMPLANTATION	HCPCS-DENTAL-Apicoectomy	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3450	ROOT AMPUTATION - PER ROOT	HCPCS-DENTAL-Apicoectomy	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3430	RETROGRADE FILLING - PER ROOT	HCPCS-DENTAL-Apicoectomy	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3426	APICOECTOMY	HCPCS-DENTAL-Apicoectomy	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3425	APICOECTOMY - MOLAR FIRST ROOT	HCPCS-DENTAL-Apicoectomy	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3421	APICOECTOMY - PREMOLAR	HCPCS-DENTAL-Apicoectomy	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3410	APICOECTOMY - ANTERIOR	HCPCS-DENTAL-Apicoectomy	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3353	APEXIFICAT/RECALCIFICAT-FINAL VISIT	HCPCS-DENTAL-Apexification	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3352	APEX/RECALCIFICATN INTRM MED REPLAC	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3351	APEX/RECALCIFICATION INITIAL VISIT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D3348	RETX PREVIOUS RC THERAPY - MOLAR	HCPCS-DENTAL-Endo-RCT	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3347	RETREATMENT PREVIOUS RC TX-PREMOLAR	HCPCS-DENTAL-Endo-RCT	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3346	RETX PREVIOUS RC THERAPY - ANTERIOR	HCPCS-DENTAL-Endo-RCT	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3332	INCMPL ENDO TX;INOP UNRSTR/FX TOOTH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3331	TX RC OBSTRUCTION; NON-SURG ACCESS	HCPCS-DENTAL-Endo-RCT	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3330	ENDODONTIC THERAPY MOLAR TOOTH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3320	ENDODONTIC THERAPY PREMOLAR TOOTH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3240	PULPAL THERAPY - POST PRIMARY TOOTH	HCPCS-DENTAL-Endo-Primary	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3230	PULPAL THERAPY - ANT PRIMARY TOOTH	HCPCS-DENTAL-Endo-Primary	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3222	PART PULPOTMY APEXOGNEIS PERM TOOTH	HCPCS-DENTAL-Pulpotomy	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3221	PULPAL DEBRID PRIMARY&PERM TEETH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3220	TX PULPOT-CORONL DENTNOCEMENTL JUNC	HCPCS-DENTAL-Pulpotomy	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D3120	PULP CAP - INDIRECT	HCPCS-DENTAL-Pulp capping	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3110	PULP CAP - DIRECT	HCPCS-DENTAL-Pulp capping	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2999	UNSPEC RESTORATIVE PROC BY REPORT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2980	CROWN REPR NEC RESTORATV MATL FAIL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2957	EA ADD PREFABR POST - SAME TOOTH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2954	PREFABR POST&CORE ADDITION CROWN	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2953	EA ADD INDIRECT FAB POST SAME TOOTH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2952	POST & CORE ADD CROWN INDIRECT FAB	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2951	PIN RETN - PER TOOTH ADDITION REST	HCPCS-DENTAL-Restoration Oth	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2950	CORE BUILDUP INCL PINS WHEN REQUIRE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2934	PREFB ESTHET COAT STNLSS STEEL CRWN	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2933	PRFABR STNLSS STEEL CROWN RSN WNDOW	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	D2931	PRFABR STAINLESS STEEL CROWN-PERM	HCPCS-DENTAL-Restoration Oth	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2930	PRFABR STAINLESS STEEL CROWN-PRIM	HCPCS-DENTAL-Restoration Oth	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2915	RECEMENT CAST/PREFAB POST & CORE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2910	RECEMENT INLAY ONLAY/PART COV REST	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2794	CROWN - TITANIUM AND TITANIUM ALY	HCPCS-DENTAL-Crowns - Single	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2792	CROWN - FULL CAST NOBLE METAL	HCPCS-DENTAL-Crowns - Single	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2791	CROWN - FULL CAST PREDOM BASE METL	HCPCS-DENTAL-Crowns - Single	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2790	CROWN - FULL CAST HIGH NOBLE METAL	HCPCS-DENTAL-Crowns - Single	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2781	CROWN - 3/4 CAST PREDOM BASE METL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2752	CROWN - PORCELAIN FUSED NOBLE METAL	HCPCS-DENTAL-Crowns - Single	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2751	CROWN-PORCELN FUSD PREDOM BASE METL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2750	CROWN - PORCELN FUSED HI NOBLE METL	HCPCS-DENTAL-Crowns - Single	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	D2740	CROWN - PORCELAIN/CERAMIC	HCPCS-DENTAL-Crowns - Single	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2722	CROWN - RESIN WITH NOBLE METAL	HCPCS-DENTAL-Crowns - Single	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2721	CROWN - RESIN PREDOM BASE METAL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2720	CROWN - RESIN WITH HIGH NOBLE METAL	HCPCS-DENTAL-Crowns - Single	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2712	CROWN - 3/4 RESIN-BASED COMPOSITE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2710	CROWN - RESIN-BASED COMPOSITE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2664	ONLAY RESIN COMPOSITE 4/GT SURFACES	HCPCS-DENTAL-Inlay/Onlay	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2663	ONLAY-RSN COMPOS COMPOS/RSN-3 SURF	HCPCS-DENTAL-Inlay/Onlay	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2662	ONLAY-RSN COMPOS COMPOS/RSN-2 SURF	HCPCS-DENTAL-Inlay/Onlay	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2652	INLAY RESIN COMPOSITE 3/GT SURFACES	HCPCS-DENTAL-Inlay/Onlay	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2651	INLAY RESIN COMPOSITE TWO SURFACES	HCPCS-DENTAL-Inlay/Onlay	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2650	INLAY RESIN COMPOSITE ONE SURFACE	HCPCS-DENTAL-Inlay/Onlay	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D2644	ONLAY - PORCELN/CERAM - 4/MORE SURF	HCPCS-DENTAL-Inlay/Onlay	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2643	ONLAY - PORCELN/CERAMIC - 3 SURF	HCPCS-DENTAL-Inlay/Onlay	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2642	ONLAY - PORCELN/CERAMIC - 2 SURF	HCPCS-DENTAL-Inlay/Onlay	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2630	INLAY - PORCELN/CERAM - 3/MORE SURF	HCPCS-DENTAL-Inlay/Onlay	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2620	INLAY - PORCELN/CERAMIC - 2 SURF	HCPCS-DENTAL-Inlay/Onlay	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2610	INLAY - PORCELN/CERAMIC - 1 SURFACE	HCPCS-DENTAL-Inlay/Onlay	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2544	ONLAY METALLIC FOUR OR MORE SURF	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2530	INLAY - METALLIC - 3/MORE SURFACES	HCPCS-DENTAL-Inlay/Onlay	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2520	INLAY - METALLIC - TWO SURFACES	HCPCS-DENTAL-Inlay/Onlay	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2510	INLAY - METALLIC - ONE SURFACE	HCPCS-DENTAL-Inlay/Onlay	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2430	GOLD FOIL - THREE SURFACES	HCPCS-DENTAL-Gold Foil	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2420	GOLD FOIL - TWO SURFACES	HCPCS-DENTAL-Gold Foil	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	D2410	GOLD FOIL - ONE SURFACE	HCPCS-DENTAL-Gold Foil	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2394	RESIN COMPOS - 4/MORE SURFACES POST	HCPCS-DENTAL-Composites	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2393	RESIN COMPOS - 3 SURFACES POSTERIOR	HCPCS-DENTAL-Composites	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2392	RESIN COMPOS - 2 SURFACES POSTERIOR	HCPCS-DENTAL-Composites	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2391	RESIN COMPOS - 1 SURFACE POSTERIOR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2390	RESIN COMPOS CROWN ANTERIOR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2332	RESIN-BASED COMPOSITE 3 SURFACE ANT	HCPCS-DENTAL-Composites	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2331	RESIN-BASED COMPOSITE 2 SURFACE ANT	HCPCS-DENTAL-Composites	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2330	RESIN-BASED COMPOSITE ONE SURF ANT	HCPCS-DENTAL-Composites	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2161	AMALGAM-FOUR/MORE SURF PRIM/PERM	HCPCS-DENTAL-Amalgam	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2160	AMALGAM-3 SURFACES PRIMARY/PERM	HCPCS-DENTAL-Amalgam	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2150	AMALGAM-TWO SURFACES PRIMARY/PERM	HCPCS-DENTAL-Amalgam	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D2140	AMALGAM-ONE SURFACE PRIMARY/PERM	HCPCS-DENTAL-Amalgam	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D1520	SPACE MNTNR - REMOV UNI - PER QUAD	HCPCS-DENTAL-Space Maint.	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D1510	SPACE MNTNR - FIXED UNI - PER QUAD	HCPCS-DENTAL-Space Maint.	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D1352	PREV RSN REST MOD HIGH CARIES RISK	HCPCS-DENTAL-Sealants	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D1351	SEALANT - PER TOOTH	HCPCS-DENTAL-Sealants	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D1330	ORAL HYGIENE INSTRUCTIONS	HCPCS-DENTAL-Preventive Oth	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D1320	TOBACCO CNSL CNTRL&PREVION ORL DZ	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D1310	NUTRITION COUNSEL CONTROL DENTAL DZ	HCPCS-DENTAL-Preventive Oth	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D1206	TOPICAL APPLICATN FLUORIDE VARNISH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D1120	PROPHYLAXIS - CHILD	HCPCS-DENTAL-Prophylaxis	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D1110	PROPHYLAXIS - ADULT	HCPCS-DENTAL-Prophylaxis	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0999	UNSPEC DIAGNOSTIC PROCEDURE REPORT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D0502	OTHER ORAL PATHOLOGY PROC REPORT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0486	LAB ACCSS TRNSEPI CYTL SMP MICRO EX	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0485	CNSLT W/PREP SLIDES BX SPL REF SRC	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0484	CONSULTATION SLIDES PREPARED ELSW	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0480	ACESS EXFOLIATIVE CYT SMER MIC EXAM	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0479	TISS INSITU HYBRIDIZATION W/INTEPR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0477	SPECIAL STAINS NOT MICROORGANISMS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0474	ACSS TISS GR&MIC SURG MARG PREP/RPT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0473	ACCESS TISS-GROSS/MICRO-PREP/REPRT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0472	ACCESS TISS-GROSS EXAM-PREP & REPRT	HCPCS-DENTAL-Tests and Lab	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0431	ADJUNCT PREDX TST NO CYTOL/BX PROC	HCPCS-DENTAL-Tests and Lab	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0417	CLCT & PREP SALIV SAMP LAB DX TEST	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D0415	COLLECT MICROORAGNISMS CULT & SENS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0350	ORAL/FACIAL PHOTOGRAPH IMAGES IO/EO	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0340	2D CEPHALOMET X-RAY-ACQN MSR&ANALY	HCPCS-DENTAL-Radiographs	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0330	PANORAMIC RADIOGRAPHIC IMAGE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0321	OTH TMJ FILMS BY REPORT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0320	TMJ ARTHROGRAM INCLUDING INJ	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0277	VERT BITEWNGS - 7-8 RADIOGRAPH IMAG	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0274	BITEWINGS - FOUR RADIOGRAPHC IMAGES	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0273	BITEWINGS-THREE RADIOGRAPHIC IMAGES	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0272	BITEWINGS - TWO RADIOGRAPHIC IMAGES	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0270	BITEWING - SINGLE RADIOGRAPHC IMAGE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0250	EXTRA-ORAL - 2D PROJECTION X-RAY	HCPCS-DENTAL-Radiographs	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	D0240	INTRAORAL-OCCLUSAL RADIOGRAPH IMAGE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0230	IO-PERIAPICAL EA ADD RADIOGRPH IMAG	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0220	IO-PERIAPICAL 1ST RADIOGRAPHC IMAGE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0180	COMP PERIODONTAL EVAL - NEW/EST PT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0170	RE-EVALUATION - LTD PROBLEM FOCUSED	HCPCS-DENTAL-Exams	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0150	COMP ORAL EVALUATION - NEW/EST PT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0145	ORL EVAL PTLT 3 YR CNSL PRIM CAREGIVR	HCPCS-DENTAL-Exams	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0140	LTD ORAL EVALUATION - PROBLEM FOCUS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0120	PERIODIC ORAL EVALUATION EST PT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9952	OCCLUSAL ADJUSTMENT - COMPLETE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9951	OCCLUSAL ADJUSTMENT - LIMITED	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9950	OCCLUSION ANALYSIS - MOUNTED CASE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	D7949	LEFORT II/LEFORT III - W/BONE GRAFT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7947	LEFORT I MAXILLA SEGMENTED	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7286	BIOPSY OF ORAL TISSUE SOFT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7285	BIOPSY OF ORAL TISSUE HARD	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6210	PONTIC - CAST HIGH NOBLE METAL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9248	NON-INTRAVENOUS CONSCIOUS SEDATION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7945	OSTEOTOMY-BODY OF MANDIBLE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7944	OSTEOTOMY SEGMENTED OR SUBAPICAL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7920	SKIN GRAFT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7871	NON-ARTHROSCOPIC LYSIS AND LAVAGE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2955	POST REMOVAL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2920	RECEMENT CROWN	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D7640	MANDIBLE-CLOSED REDUCTION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7630	MANDIBLE-OPEN REDUCTION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7620	MAXILLA-CLOSED REDUCTION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7610	MAXILLA-OPEN REDUCTION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6212	PONTIC - CAST NOBLE METAL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2543	ONLAY METALLIC THREE SURFACES	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2542	ONLAY - METALLIC - TWO SURFACES	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0481	ELECTRON MICROSCOPY DIAGNOSTIC	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9974	INTERNAL BLEACHING - PER TOOTH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9973	EXTERNAL BLEACHING - PER TOOTH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9970	ENAMEL MICROABRASION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9941	FABRICATION OF ATHLETIC MOUTHGUARD	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D9920	BEHAVIOR MANAGEMENT BY REPORT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9410	HOUSE/EXTENDED CARE FACILITY CALL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9211	REGIONAL BLOCK ANESTHESIA	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D9120	FIXED PARTIAL DENTURE SECTIONING	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D8680	ORTHODONTIC RETENTION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D8220	FIXED APPLIANCE THERAPY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D8210	REMOVABLE APPLIANCE THERAPY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7991	CORONOIDECTOMY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7990	EMERGENCY TRACHEOTOMY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7983	CLOSURE OF SALIVARY FISTULA	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7982	SIALODOCHOPLASTY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7971	EXCISION OF PERICORONAL GINGIVA	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D7963	FRENULOPLASTY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7941	OSTEOTOMY - MANDIBULAR RAMI	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7899	UNSPECIFIED TMD THERAPY BY REPORT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7870	ARTHROCENTESIS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7865	ARTHROPLASTY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7860	ARTHROTOMY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7858	JOINT RECONSTRUCTION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7856	MYOTOMY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7854	SYNOVECTOMY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7852	DISC REPAIR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7840	CONDYLECTOMY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7830	MANIPULATION UNDER ANESTHESIA	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D7820	CLOSED REDUCTION OF DISLOCATION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7810	OPEN REDUCTION OF DISLOCATION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7473	REMOVAL OF TORUS MANDIBULARIS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7472	REMOVAL OF TORUS PALATINUS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7471	REMOVAL OF LATERAL EXOSTOSIS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7290	SURGICAL REPOSITIONING OF TEETH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D7272	TOOTH TRANSPLANTATION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6985	PEDIATRIC PARTIAL DENTURE FIXED	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6950	PRECISION ATTACHMENT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6940	STRESS BREAKER	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6920	CONNECTOR BAR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D6245	PONTIC - PORCELAIN/CERAMIC	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D5988	SURGICAL SPLINT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5987	COMMISSURE SPLINT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5986	FLUORIDE GEL CARRIER	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5985	RADIATION CONE LOCATOR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5984	RADIATION SHIELD	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5983	RADIATION CARRIER	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5982	SURGICAL STENT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5960	SPEECH AID PROSTHESIS MODIFICATION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5958	PALATAL LIFT PROSTHESIS INTERIM	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5955	PALATAL LIFT PROSTHESIS DEFINITIVE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5954	PALATAL AUGMENTATION PROSTHESIS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5953	SPEECH AID PROSTHESIS ADULT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	D5952	SPEECH AID PROSTHESIS PEDIATRIC	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5951	FEEDING AID	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5933	OBTURATOR PROSTHESIS MODIFICATION	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5932	OBTURATOR PROSTHESIS DEFINITIVE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5931	OBTURATOR PROSTHESIS SURGICAL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5929	FACIAL PROSTHESIS REPLACEMENT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5928	ORBITAL PROSTHESIS REPLACEMENT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5927	AURICULAR PROSTHESIS REPLACEMENT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5926	NASAL PROSTHESIS REPLACEMENT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5924	CRANIAL PROSTHESIS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5923	OCULAR PROSTHESIS INTERIM	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5922	NASAL SEPTAL PROSTHESIS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D5919	FACIAL PROSTHESIS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5916	OCULAR PROSTHESIS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5915	ORBITAL PROSTHESIS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5914	AURICULAR PROSTHESIS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5913	NASAL PROSTHESIS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5912	FACIAL MOULAGE COMPLETE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5911	FACIAL MOULAGE SECTIONAL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5862	PRECISION ATTACHMENT BY REPORT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5851	TISSUE CONDITIONING MANDIBULAR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5850	TISSUE CONDITIONING MAXILLARY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5821	INTERIM PARTIAL DENTURE MANDIBULAR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5820	INTERIM PARTIAL DENTURE MAXILLARY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D5811	INTERIM COMPLETE DENTURE MANDIBULAR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5810	INTERIM COMPLETE DENTURE MAXILLARY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5721	REBASE MANDIBULAR PARTIAL DENTURE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5720	REBASE MAXILLARY PARTIAL DENTURE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5711	REBASE COMPLETE MANDIBULAR DENTURE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5710	REBASE COMPLETE MAXILLARY DENTURE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5422	ADJUST PARTIAL DENTURE - MANDIBULAR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5421	ADJUST PARTIAL DENTURE - MAXILLARY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5410	ADJUST COMPLETE DENTURE - MAXILLARY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5140	IMMEDIATE DENTURE - MANDIBULAR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5130	IMMEDIATE DENTURE - MAXILLARY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D5120	COMPLETE DENTURE - MANDIBULAR	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D5110	COMPLETE DENTURE - MAXILLARY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D4910	PERIODONTAL MAINTENANCE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D4270	PEDICLE SOFT TISSUE GRAFT PROCEDURE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D4245	APICALLY POSITIONED FLAP	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3460	ENDODONTIC ENDOSSEOUS IMPLANT	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D3310	ENDODONTIC THERAPY ANTERIOR TOOTH	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2975	COPING	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2932	PREFABRICATED RESIN CROWN	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2783	CROWN - 3/4 PORCELAIN/CERAMIC	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2782	CROWN - 3/4 CAST NOBLE METAL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D2780	CROWN - 3/4 CAST HIGH NOBLE METAL	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0483	INDIRECT IMMUNOFLUORESCENCE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.

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MMAI-Medicare/Medicaid	D0482	DIRECT IMMUNOFLUORESCENCE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0478	IMMUNOHISTOCHEMICAL STAINS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0476	SPECIAL STAINS FOR MICROORGANISMS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0475	DECALCIFICATION PROCEDURE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0470	DIAGNOSTIC CASTS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0460	PULP VITALITY TESTS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0425	CARIES SUSCEPTIBILITY TESTS	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0418	ANALYSIS OF SALIVA SAMPLE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0416	VIRAL CULTURE	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0322	TOMOGRAPHIC SURVEY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	D0310	SIALOGRAPHY	HCPCS - DENTAL	YES	05/01/2017	12/31/2078	Carve Out		Dental services are provided by Dentaquest. Please contact Dentaquest at 1-800-508-6780 to determine benefits or prior authorization requirements.
MMAI-Medicare/Medicaid	S0117	TRETINOIN TOPICAL 5 GRAMS	HCPCS - TEMP NATIONAL CODES	NON-COV	04/19/2020	12/31/2078			
MMAI-Medicare/Medicaid	S0170	ANASTROZOLE ORAL 1 MG	HCPCS - TEMP NATIONAL CODES	NON-COV	04/19/2020	12/31/2078			

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MMAI-Medicare/Medicaid	S0174	DOLASETRON MESYLATE ORAL 50 MG	HCPCS - TEMP NATIONAL CODES	NON-COV	04/19/2020	12/31/2078			
MMAI-Medicare/Medicaid	S0187	TAMOXIFEN CITRATE ORAL 10 MG	HCPCS - TEMP NATIONAL CODES	NON-COV	04/19/2020	12/31/2078			
MMAI-Medicare/Medicaid	64647	CHEMODENERV TRUNK MUSC 6/GT	SURGERY - NERVOUS SYSTEM	YES	07/17/2015	12/31/2078			
MMAI-Medicare/Medicaid	64646	CHEMODENERV TRUNK MUSC 1-5	SURGERY - NERVOUS SYSTEM	YES	07/17/2015	12/31/2078			
MMAI-Medicare/Medicaid	64561	IMPLANT NEUROELECTRODES	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078			
MMAI-Medicare/Medicaid	E0785	IMPLANT INTRASPINL CATH PUMP-REPL	HCPCS - DME	YES	10/03/2016	12/31/2078			
MMAI-Medicare/Medicaid	E0782	INFUS PUMP IMPL NON-PROGMMABLE	HCPCS - DME	YES	10/03/2016	12/31/2078			
MMAI-Medicare/Medicaid	64553	IMPLANT NEUROELECTRODES	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078			
MMAI-Medicare/Medicaid	64555	IMPLANT NEUROELECTRODES	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078			
MMAI-Medicare/Medicaid	64570	REMOVE VAGUS N ELTRD	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078			
MMAI-Medicare/Medicaid	64569	REVISE/REPL VAGUS N ELTRD	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078			
MMAI-Medicare/Medicaid	E0783	INFUS PUMP SYSTEM IMPL PROGMMABLE	HCPCS - DME	YES	10/03/2016	12/31/2078			
MMAI-Medicare/Medicaid	64650	CHEMODENERV ECCRINE GLANDS	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078			
MMAI-Medicare/Medicaid	E0786	IMPLNT PROGRAM INFUSION PUMP-REPL	HCPCS - DME	YES	10/03/2016	12/31/2078			
MMAI-Medicare/Medicaid	22523	PERCUTANEOUS VERTEBRAL AUGMENTATION THORACIC	SURGERY - MUSCULOSKELETAL SYST	YES	10/03/2016	12/31/2078			
MMAI-Medicare/Medicaid	64568	OPN IMPLTJ CRNL NRV NEA&PG	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078			

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MMAI-Medicare/Medicaid	64575	OPN IMPLTJ NEA PERPH NERVE	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078			
MMAI-Medicare/Medicaid	64580	OPN IMPLTJ NEA NEUROMUSCULAR	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078			
MMAI-Medicare/Medicaid	H0047	ALCOHOL &OR OTH DRUG ABS SRVC NOS	HCPCS - ALCOHOL/DRUG ABUSE	YES	09/01/2022	12/31/2078	Regulatory Compliance	Submit claims with Medical Records	
MMAI-Medicare/Medicaid	J1952	LEUPROLIDE INJECTABLE CAMCEVI, 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2022	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J2506	INJ PEGFILGRASTIM EXC BIOSIM 0.5 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2022	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9021	INJ ASPARAGINASE RECOMBINANT 0.1 MG	HCPCS - CHEMO DRUGS	YES	01/01/2022	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9061	INJECTION, AMIVANTAMAB-VMJW 2 MG	HCPCS - CHEMO DRUGS	YES	01/01/2022	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9272	INJECTION, DOSTARLIMAB-GXLY 10 MG	HCPCS - CHEMO DRUGS	YES	01/01/2022	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	Q2053	BREXUCABTAGENE CAR POS V T CELL	HCPCS - TEMP CODES	YES	04/01/2021	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J9349	INJECTION TAFASITAMAB-CXIX 2 MG	HCPCS - CHEMO DRUGS	YES	04/01/2021	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	Q2054	LMGT EQU 110M AT ANTICD19 CAR-P VIBL TC	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9247	INJECTION MELPHALAN FLUFENAMIDE 1MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J1448	INJECTION TRILACICLIB 1MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	Q5123	INJ RITUXIMAB-ARRX BIOSIMILAR 10 MG	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9353	INJECTION MARGETUXIMAB-CMKB 5 MG	HCPCS - CHEMO DRUGS	YES	01/01/2010	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9348	INJECTION NAXITAMAB-GQGK 1 MG	HCPCS - CHEMO DRUGS	YES	01/01/2010	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J9317	INJ SACITUZUMB GOVITECN-HZIY 2.5 MG	HCPCS - CHEMO DRUGS	YES	01/01/2021	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9144	INJ DARA 10 MG & HYALURONIDASE-FIHJ	HCPCS - CHEMO DRUGS	YES	01/01/2021	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9316	INJ PER TMAB & HYAL-ZZXF PER 10 MG	HCPCS - CHEMO DRUGS	YES	01/01/2021	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9281	MITOMYCN PYELOCALYCEAL INSTILL 1 MG	HCPCS - CHEMO DRUGS	YES	01/01/2021	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9223	INJECTION LURBINECTEDIN 0.1 MG	HCPCS - CHEMO DRUGS	YES	01/01/2021	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J0894	INJECTION DECITABINE 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J1260	INJECTION DOLASETRON MESYLATE 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J2783	INJECTION RASBURICASE 0.5 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J8560	ETOPOSIDE ORAL 50 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J8610	METHOTREXATE ORAL 2.5 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9000	INJECTION DOXORUBICIN HCL 10 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9017	INJECTION ARSENIC TRIOXIDE 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9025	INJECTION AZACITIDINE 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9027	INJECTION CLOFARABINE 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J9039	INJECTION BLINATUMOMAB 1 MICROGRAM	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9045	INJECTION CARBOPLATIN 50 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9050	INJECTION CARMUSTINE 100 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9065	INJECTION CLADRIBINE PER 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9098	INJECTION CYTARABINE LIPOSOME 10 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9100	INJECTION CYTARABINE 100 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9120	INJECTION DACTINOMYCIN 0.5 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J9130	DACARBAZINE 100 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9150	INJECTION DAUNORUBICIN 10 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9178	INJECTION EPIRUBICIN HCL 2 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9181	INJECTION ETOPOSIDE 10 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9190	INJECTION FLUOROURACIL 500 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9200	INJECTION FLOXURIDINE 500 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9206	INJECTION IRINOTECAN 20 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J9208	INJECTION IFOSFAMIDE 1 G	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9211	INJECTION IDARUBICIN HCL 5 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9219	LEUPROLIDE ACETATE IMPLANT 65 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9230	INJECTION MECHLORETHAMINE HCL 10 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9263	INJECTION OXALIPLATIN 0.5 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9268	INJECTION PENTOSTATIN 10 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9293	INJECTION MITOXANTRONE HCL PER 5 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J9302	INJECTION OFATUMUMAB 10 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9308	INJECTION RAMUCIRUMAB 5 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9320	INJECTION STREPTOZOCIN 1 G	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9330	INJECTION TEMSIROLIMUS 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9340	INJECTION THIOTEPA 15 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9351	INJECTION TOPOTECAN 0.1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9360	INJECTION VINBLASTINE SULFATE 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J9370	VINCRISTINE SULFATE 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	S0088	IMATINIB 100 MG	HCPCS - TEMP NATIONAL CODES	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J1447	INJECTION TBO-FILGRASTIM 1 MICROG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J2860	INJECTION SILTUXIMAB 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J7527	EVEROLIMUS ORAL 0. 25 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J8565	GEFITINIB ORAL 250 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J8700	TEMOZOLOMIDE ORAL 5 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J8705	TOPOTECAN ORAL 0.25 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9022	INJECTION ATEZOLIZUMAB 10 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9023	INJECTION AVELUMAB 10 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9032	INJECTION BELINOSTAT 10 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9035	INJECTION BEVACIZUMAB 10 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9041	INJECTION BORTEZOMIB 0.1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9042	INJECTION BRENTUXIMAB VEDOTIN 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J9043	INJECTION CABAZITAXEL 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9055	INJECTION CETUXIMAB 10 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9119	INJECTION CEMIPLIMAB-RWLC 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9179	INJECTION ERIBULIN MESYLATE 0.1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9204	INJECTION MOGAMULIZUMAB-KPKC 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9207	INJECTION IXABEPILONE 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9228	INJECTION IPILIMUMAB 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J9261	INJECTION NELARABINE 50 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9269	INJECTION TAGRAXOFUSP-ERZS 10 MCG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9271	INJECTION PEMBROLIZUMAB 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9285	INJECTION OLARATUMAB 10 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9299	INJECTION NIVOLUMAB 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9301	INJECTION OBINUTUZUMAB 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9303	INJECTION PANITUMUMAB 10 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J9307	INJECTION PRALATREXATE 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9328	INJECTION TEMOZOLOMIDE 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9395	INJECTION FULVESTRANT 25 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	A9513	LUTETIUM LU 177 DOTATATE THER 1 MCI	HCPCS - ADMIN MISC & INVEST	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	A9543	Y-90 IBRITUMOMB TIUXTN TX TO 40 MCI	HCPCS - ADMIN MISC & INVEST	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	A9600	STRONTIUM SR-89 CHLORID TX PER MCI	HCPCS - ADMIN MISC & INVEST	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	A9606	RADIUM RA-223 DICHLORIDE TX PER UCI	HCPCS - Radiopharmaceuticals &	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J0640	INJ LEUCOVORIN CALCIUM PER 50 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J0641	INJECTION LEVOLEUCOVORIN NOS 0.5 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J0642	INJECTION LEVOLEUCOVORIN 0.5 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J7504	LYMPHCYT GLOB EQUINE PARNTRAL 250MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J8530	CYCLOPHOSHAMIDE ORAL 25 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J8600	MELPHALAN ORAL 2 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J8999	PRSC DRUG ORAL CHEMOTHAPEUTIC NOS	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J9015	INJ ALDESLEUKIN PER SINGLE USE VIAL	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9030	BCG LIVE INTRAVESICAL INSTL 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9034	INJ BENDAMUSTINE HCL BENDEKA 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9036	INJ BENDAMUSTINE HYDROCHLORIDE 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9040	INJECTION BLEOMYCIN SULFATE 15 UNIT	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9047	INJECTION CARFILZOMIB 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9057	INJECTION COPANLISIB 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J9060	INJ CISPLATIN POWDER/SOLUTION 10 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9145	INJECTION DARATUMUMAB 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9151	INJ DAUNORUBICIN CITRATE LIP 10 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9153	INJ LIPOSOMAL 1 MG DNR & 2.27 MG CA	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9173	INJECTION DURVALUMAB 10 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9176	INJECTION ELOTUZUMAB 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9185	INJ FLUDARABINE PHOSPHATE 50 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J9201	INJ GEMCITABINE HCL NOS 200 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9202	GOSERELIN ACETATE IMPLANT 3.6 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9203	INJ GEMTUZUMAB OZOGAMICIN 0.1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9205	INJECTION IRINOTECAN LIPOSOME 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9212	INJ INTRFERN ALFACON-1 RECOMB 1 MCG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9213	INJ INTERFERON ALFA-2A RECOM 3 M U	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9214	INJ INTERFERON ALFA-2B RECOMB 1 M U	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J9215	INJ INTERFERON ALFA-N3 250,000 IU	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9229	INJECT INOTUZUMAB OZOGAMICIN 0.1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9245	INJECTION MELPHALAN HCI NOS 50 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9262	INJ OMACETAXINE MEPESUCCINAT .01 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9264	INJ PACLITAXEL PROTBND PARTICL 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9266	INJ PEGASPARGASE SINGLE DOSE VIAL	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9295	INJECTION NECITUMUMAB 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J9306	INJECTION PERTUZUMAB 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9311	INJ RITUXIMAB 10 MG & HYALURONIDASE	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9312	INJECTION RITUXIMAB 10 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9313	INJ MOXTUMOMB PASUDOTX-TDFK 0.01 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9325	INJ T-VEC PER 1 M PLAQUE FORM UNITS	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9352	INJECTION TRABECTEDIN 0.1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9354	INJ ADO-TRASTUZUMAB EMTANSINE 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J9355	INJ TRASTUZUMAB EXCLD BIOSIM 10 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9356	INJ TRA 10 MG & HYALURONIDASE-OYSK	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9357	INJ VALRUBICIN INTRAVESICAL 200 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9390	INJ VINORELBINE TARTRATE 10 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9400	INJECTION ZIV-AFLIBERCEPT 1 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	Q2041	KTE-C19 TO 200 M A ANTI-CD19 CAR P	HCPCS - TEMP CODES	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	Q2042	CTIL019 TO 600 M CAR-+ VI T CE P TD	HCPCS - TEMP CODES	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	Q2043	SIPULEUCEL-T AUTO CD54+	HCPCS - C CODES - OUTPATIENT PP	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	Q2049	INJ DOX HCI LIP IMPRT LIPODOX 10 MG	HCPCS - TEMP CODES	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	Q2050	INJ DOXORUBICIN HCL LIPO NOS 10 MG	HCPCS - TEMP CODES	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	Q5107	INJ BEVACIZUMAB-AWWB BIOSIMLR 10 MG	HCPCS - TEMP CODES	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	Q5110	INJ FILGRASTIM-AAFI BIOSIMILR 1 MCG	HCPCS - TEMP CODES	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	Q5106	INJ EPO ALFA-EPBX BIOSIMILAR 1000 U	HCPCS - TEMP CODES	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	Q4081	INJ EPOETIN ALFA 100 UNITS	HCPCS - TEMP CODES	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	Q0180	DOLASETRON MESYLATE 100 MG ORAL	HCPCS - TEMP CODES	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9999	NOT OTHWISE CLASS ANTINEOPLSTC DRUG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9280	INJECTION MITOMYCIN 5 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9226	HISTRELIN IMPL SUPPRELIN LA 50 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9216	INJ INTERFERON GAMMA-1B 3 MILLION U	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9118	INJECT CALASPARGASE PEGOL-MKNL 10 U	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9020	INJECTION ASPARAGINASE 10000 UNITS	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J8670	ROLAPITANT ORAL 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J8655	NETUPT 300 MG & PALONOST 0.5 MG ORL	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J8510	BUSULFAN ORAL 2 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J8499	PRSC RX ORAL NONCHEMOTHAPEUTIC NOS	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J3315	INJ TRIPTORELIN PAMOATE 3.75 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J2354	INJ OCTREOTDE NO-DPOT SUBQ/IV 25MCG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J2353	INJ OCTREOTIDE DEPOT FORM IM 1MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J1950	INJ LEUPROLIDE ACETATE PER 3.75 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J1675	INJ HISTRELIN ACTAT 10 MICROGMS	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J1627	INJ GRANISETRON EXT-RLSE 0.1 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J1626	INJ GRANISETRN HYDROCHLORID 100 MCG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J1599	INJ IG IV NONLYOPHILIZED NOS 500 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J1568	INJ IG OCTOGAM IV NONLYO 500MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J1566	INJ IG IV LYPHILIZED NOS 500 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/ Medicaid	J1556	INJ IMMUNE GLOBULIN BIVIGAM 500 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/ Medicaid	J1454	INJ FOSNETPT 235 MG & PLNST 0.25 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/ Medicaid	J1442	INJ FILGRASTIM EXCL BIOSIMLRS 1 MIC	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/ Medicaid	J0885	INJ EPOETIN ALFA NON-ESRD 1000 UNIT	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/ Medicaid	J0882	INJ DARBEPOETIN ALFA 1 MCG FOR ESRD	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/ Medicaid	J0881	INJ DARBEPOETIN ALFA 1 MCG NON-ESRD	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/ Medicaid	J0594	INJECTION BUSULFAN 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J0185	INJECTION APREPITANT 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	G6017	INTRA-F LOC&TRCK TRGT/PT M EA F TX	HCPCS - PROC/PROF SERVICES (TE	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	G6016	CMP-B BM MD TX DEL I PLND TX P TX S	HCPCS - PROC/PROF SERVICES (TE	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	G6015	INTENS MOD TX DEL 1/MX FLDS TX SESS	HCPCS - PROC/PROF SERVICES (TE	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	G6014	RT D 3/GT S TX AR CSTM BLK;20 MEV/GT	HCPCS - PROC/PROF SERVICES (TE	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	G6013	RT D 3/GT S TX AR CSTM BLK;11-19 MEV	HCPCS - PROC/PROF SERVICES (TE	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	G6012	RT D 3/GT S TX AR CSTM BLK;6-10 MEV	HCPCS - PROC/PROF SERVICES (TE	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	G6011	RT D 3/GT S TX AR CSTM BLK;TO 5 MEV	HCPCS - PROC/PROF SERVICES (TE	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	G6010	RT DEL 2 SEP AR 3/GT PT 1 AR:20 MEV/GT	HCPCS - PROC/PROF SERVICES (TE	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	G6009	RT DEL 2 S AR 3/GT PT 1 AR:11-19 MEV	HCPCS - PROC/PROF SERVICES (TE	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	G6008	RT DEL 2 SEP AR 3/GT PT 1 AR:6-10 MEV	HCPCS - PROC/PROF SERVICES (TE	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	G6007	RT DEL 2 SEP 3/GT PT 1 TX AR:TO 5 MEV	HCPCS - PROC/PROF SERVICES (TE	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	G6006	RT D 1 TX AR PT/PL OPP PT:20 MEV/GT	HCPCS - PROC/PROF SERVICES (TE	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	G6005	RT D 1 TX AR PT/PL OPP PT:11-19 MEV	HCPCS - PROC/PROF SERVICES (TE	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G6004	RT D 1 TX AR PT/PL OPP PT: 6-10 MEV	HCPCS - PROC/PROF SERVICES (TE	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	G6003	RT D 2 TX AR PT/PL OPP PT:TO 5 MEV	HCPCS - PROC/PROF SERVICES (TE	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	G6002	STEREO X-R GUID LOC TRG VOL DEL RT	HCPCS - PROC/PROF SERVICES (TE	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	G6001	U/S GUID PLCMT RADIATION TX FIELDS	HCPCS - PROC/PROF SERVICES (TE	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	A9564	CHROMIC PHOSHATE P-32 SUSP TX MCI	HCPCS - ADMIN MISC & INVEST	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	A9563	SODIUM PHOSHATE P-32 TX PER MCI	HCPCS - ADMIN MISC & INVEST	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	A9542	IN-111 IBRITUMAB TIUXTN DX TO 5 MCI	HCPCS - ADMIN MISC & INVEST	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	A9530	I-131 SODIUM IODIDE SOL TX PER MCI	HCPCS - ADMIN MISC & INVEST	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	A9527	IODINE I-125 NA IODIDE SOL TX MCI	HCPCS - ADMIN MISC & INVEST	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	A9517	I-131 SODIM IODIDE CAPS TX MCI	HCPCS - ADMIN MISC & INVEST	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	77789	APPLY SURF LDR RADIONUCLIDE	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	77778	APPLY INTERSTIT RADIAT COMPL	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	77763	APPLY INTRCAV RADIAT COMPL	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	77762	APPLY INTRCAV RADIAT INTERM	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	77761	APPLY INTRCAV RADIAT SIMPLE	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	77750	INFUSE RADIOACTIVE MATERIALS	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	77525	PROTON TREATMENT COMPLEX	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	77523	PROTON TRMT INTERMEDIATE	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	77522	PROTON TRMT SIMPLE W/COMP	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	77520	PROTON TRMT SIMPLE W/O COMP	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	77425	IO RAD TX DELIVER BY ELCTRNS	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	77424	IO RAD TX DELIVERY BY X-RAY	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	77423	NEUTRON BEAM TX COMPLEX	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	77387	GUIDANCE FOR RADJ TX DLVR	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	77386	NTSTY MODUL RAD TX DLVR CPLX	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	77385	NTSTY MODUL RAD TX DLVR SMPL	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	77372	SRS LINEAR BASED	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	77371	SRS MULTISOURCE	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	77014	CT SCAN FOR THERAPY GUIDE	RADIOLOGY-IMAGING GUIDANCE	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9600	INJECTION PORFIMER SODIUM 75 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9270	INJECTION PLICAMYCIN 2.5 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	77772	HDR RDNCL NTRSTL/ICAV BRCHTX	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	77771	HDR RDNCL NTRSTL/ICAV BRCHTX	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	77770	HDR RDNCL NTRSTL/ICAV BRCHTX	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	77768	HDR RDNCL SKN SURF BRACHYTX	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	77767	HDR RDNCL SKN SURF BRACHYTX	RADIOLOGY - RADIATION ONCOLOGY	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	0395T	HDR ELCTR NTRST/NTRCV BRCHTX	CATEGORY III CODES	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	0394T	HDR ELCTRNC SKN SURF BRCHYTX	CATEGORY III CODES	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9225	HISTRELIN IMPLANT VANTAS 50 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J8501	APREPITANT ORAL 5 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J3590	UNCLASSIFIED BIOLOGICS	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J3490	UNCLASSIFIED DRUGS	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J3262	INJECTION TOCILIZUMAB 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J2820	INJECTION SARGRAMOSTIM 50 MCG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J2562	INJECTION PLERIXAFOR 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J0897	INJECTION DENOSUMAB 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J0207	INJECTION AMIFOSTINE 500 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J0202	INJECTION ALEMTUZUMAB 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9019	INJ ASPARAGINASE ERWINAZE 1000 IU	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J9209	INJECTION MESNA 200 MG	HCPCS - CHEMO DRUGS	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J7509	METHYLPREDNISOLONE ORAL PER 4 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J3243	INJECTION TIGECYCLINE 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J1930	INJECTION LANREOTIDE 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J1453	INJECTION FOSAPREPITANT 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J0300	INJECTION AMOBARBITAL UP TO 125 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	J9273	INJ TISOTUMAB VEDOTIN-TFTV 1 MG	HCPCS - CHEMO DRUGS	YES	01/01/2010	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.

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MMAI-Medicare/Medicaid	J9359	INJ LNCSTUXMB TESIRIN-LPYL 0.075 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	Q5117	INJ TRASTUZUMAB-ANNS BIOSIMLR 10 MG	HCPCS - TEMP CODES	YES	04/19/2020	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	Q5118	INJ BEVACIZUMAB-BVZR BIOSIMLR 10 MG	HCPCS - TEMP CODES	YES	10/12/2021	12/31/2078			For oncology prior auth requests, contact NantHealth: https://connect.eviti.com or 1-888-482-8057. This will expedite clinical review for chemo, radiation therapy or oncology medications. For non-cancer requests, follow the Aetna Prior Auth process.
MMAI-Medicare/Medicaid	H2015	COMP CMTY SUPPORT SRVC PER 15 MIN	HCPCS - ALCOHOL/DRUG ABUSE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0315	IM CNSL PHYS/HCP COV-19 ALT 21 5-15 M	HCPCS-PROC/PROF SERVICES (TE	NO	05/11/2022	05/11/2022			
MMAI-Medicare/Medicaid	G0314	IM CNSL PHYS/HCP COV-19 ALT 21 16-30M	HCPCS-PROC/PROF SERVICES (TE	NO	05/11/2022	05/11/2022			
MMAI-Medicare/Medicaid	G0313	IM CNSL PH V NA S DOS ALT 21 16-30 M	HCPCS-PROC/PROF SERVICES (TE	NO	05/11/2022	05/11/2022			
MMAI-Medicare/Medicaid	G0312	IM CNSL PHYS V NA S DOS ALT 21 5-15 M	HCPCS-PROC/PROF SERVICES (TE	NO	05/11/2022	05/11/2022			
MMAI-Medicare/Medicaid	G0311	IM CNSL PHYS VAC NA SME DOS 16-30 M	HCPCS-PROC/PROF SERVICES (TE	NO	05/11/2022	05/11/2022			
MMAI-Medicare/Medicaid	G0310	IM CNSL PHYS VAC NA SME DOS 5-15 M	HCPCS-PROC/PROF SERVICES (TE	NO	05/11/2022	05/11/2022			
MMAI-Medicare/Medicaid	Q4159	AFFINITY PER SQUARE CENTIMETER	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4157	REVITALON PER SQUARE CENTIMETER	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4154	BIOVANCE PER SQUARE CENTIMETER	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	Q4152	DERMAPURE PER SQUARE CENTIMETER	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J7200	INJECTION FACTOR IX RIXUBIS PER IU	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J7182	INJECTION FACTOR VIII PER IU	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J1322	INJECTION ELOSULFASE ALFA 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0888	INJECTION EPOETIN BETA 1 MICROGRAM	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0887	INJECTION EPOETIN BETA 1 MICROGRAM	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0875	INJECTION DALBAVANCIN 5MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J2547	INJECTION PERAMIVIR 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J1833	INJECTION ISAVUCONAZONIUM 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4160	NUSHIELD PER SQUARE CENTIMETER	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4155	NEOXFLO OR CLARIXFLO 1 MG	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4164	HELICOLL PER SQUARE CENTIMETER	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J2326	INJECTION NUSINERSEN 0.1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4180	REVITA PER SQUARE CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D7979	NON - SURGICAL SIALOLITHOTOMY	HCPCS-DENTAL-Procedure-Other	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4179	FLOWERDERM PER SQUARE CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	Q4182	TRANSCYTE PER SQUARE CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0606	INJECTION ETELCALCETIDE 0.1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4178	FLOWERAMNIOPATCH PER SQUARE CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J2350	INJECTION OCRELIZUMAB 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0565	INJECTION BEZLOTOXUMAB 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J1555	INJECTION IMMUNE GLOBULIN 100 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4181	AMNIO WOUND PER SQUARE CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0604	CINACALCET ORAL 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4177	FLOWERAMNIOFLO 0.1 CC	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J1428	INJECTION ETEPLIRSEN 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C9462	INJECTION DELAFLOXACIN 1 MG	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0018U	ONC THYR 10 MICRORNA SEQ ALG	PATH & LAB - CHEMISTRY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0019U	ONC RNA TISS PREDICT ALG	PATH & LAB - CHEMISTRY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0021U	ONC PRST8 DETCJ 8 AUTOANTB	PATH & LAB - CHEMISTRY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0023U	ONC AML DNA DETCJ/NONDETCJ	PATH & LAB - CHEMISTRY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0397T	ERCP W/OPTICAL ENDOMICROSCPY	CATEGORY III CODES	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	0403T	DIABETES PREV STANDARD CURR	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0408T	INSJ/RPLC CARDIAC MODULJ SYS	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0410T	INSJ/RPLC CAR MODULJ ATR ELT	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0411T	INSJ/RPLC CAR MODULJ VNT ELT	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0414T	RMVL & RPL CAR MODULJ PLS GN	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0415T	REPOS CAR MODULJ TRANVNS ELT	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0416T	RELOC SKIN POCKET PLS GEN	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0417T	PRGRMG EVAL CARDIAC MODULJ	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0418T	INTERRO EVAL CARDIAC MODULJ	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0421T	WATERJET PROSTATE ABLTJ CMPL	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0422T	TACTILE BREAST IMG UNI/BI	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	43210	EGD ESOPHAGOGASTRC FNDOPLSTY	SURGERY - DIGESTIVE SYSTEM	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	65785	IMPLTJ NTRSTRML CRNL RNG SEG	SURGERY - NERVOUS SYSTEM	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	81493	COR ARTERY DISEASE MRNA	PATH & LAB - CYTOGENETIC STUDI	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	81525	ONCOLOGY COLON MRNA	PATH & LAB - MICROBIOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	81535	ONCOLOGY GYNECOLOGIC	PATH & LAB - MICROBIOLOGY	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	81536	ONCOLOGY GYNECOLOGIC	PATH & LAB - MICROBIOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	81538	ONCOLOGY LUNG	PATH & LAB - MICROBIOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	90625	CHOLERA VACCINE LIVE ORAL	MEDICINE - VACCINES, TOXOIDS	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	92537	CALORIC VSTBLR TEST W/REC	MEDICINE - SPECIAL OTORHINOLAR	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	92538	CALORIC VSTBLR TEST W/REC	MEDICINE - SPECIAL OTORHINOLAR	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	96931	RCM CELULR SUBCELULR IMG SKN	MEDICINE - SPECIAL DERMATOLOGI	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	96932	RCM CELULR SUBCELULR IMG SKN	MEDICINE - SPECIAL DERMATOLOGI	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	96933	RCM CELULR SUBCELULR IMG SKN	MEDICINE - SPECIAL DERMATOLOGI	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	96934	RCM CELULR SUBCELULR IMG SKN	MEDICINE - SPECIAL DERMATOLOGI	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	96935	RCM CELULR SUBCELULR IMG SKN	MEDICINE - SPECIAL DERMATOLOGI	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	96936	RCM CELULR SUBCELULR IMG SKN	MEDICINE - SPECIAL DERMATOLOGI	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	E1012	WC ACCESS PWR SEAT SYS CNTR MNT EA	HCPCS - DME	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0596	INJ C1 ESTERASE INHIB RUCONEST 10 U	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J1575	INJ IG/HYALURONIDASE 100 MG IG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J2502	INJ PASIREOTIDE LONG ACTING 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J7205	INJ FACTOR VIII FC FUS PROTEIN IU	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	Q4161	BIO-CONNEKT WOUND MATRIX PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D0412	BLOOD GLUCOSE LEV TST IN-OFF METER	HCPCS-DENTAL-Office Visits	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0593	INJECTION LANADELUMAB-FLYO 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6784	RETAINER CROWN 3/4 - TI & TI ALLOYS	HCPCS-DENTAL-Bridge-Abuts	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0586T	OPEN ISLET CELL TRANSPLANT	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0001U	RBC DNA HEA 35 AG 11 BLD GRP	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0002U	ONC CLRCT 3 UR METAB ALG PLP	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0003U	ONC OVAR 5 PRTN SER ALG SCOR	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0007M	ONC GASTRO 51 GENE NOMOGRAM	PATH & LAB - CHEMISTRY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0140U	NFCT DS FUNGI DNA 15 TRGT	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0141U	NFCT DS BACT&FNG GRAM POS	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0142U	NFCT DS BACT&FNG GRAM NEG	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0153U	ONC BREAST MRNA 101 GENES	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0154U	ONC URTHL CA RNA FGFR3 GENE	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0155U	ONC BRST CA DNA PIK3CA GENE	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0156U	COPY NUMBER SEQUENCE ALYS	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	0157U	APC MRNA SEQ ALYS	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0158U	MLH1 MRNA SEQ ALYS	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0159U	MSH2 MRNA SEQ ALYS	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0160U	MSH6 MRNA SEQ ALYS	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0161U	PMS2 MRNA SEQ ALYS	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0162U	HERED COLON CA TRGT MRNA PNL	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0409T	INSJ/RPLC CAR MODULJ PLS GN	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0419T	DSTRJ NEUROFIBROMAS XTNSV	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0420T	DSTRJ NEUROFIBROMAS XTNSV	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0479T	FXJL ABL LSR 1ST 100 SQ CM	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0480T	FXJL ABL LSR EA ADDL 100SQCM	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0481T	NJX AUTOL WBC CONCENTRATE	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0483T	TMVI PERCUTANEOUS APPROACH	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0484T	TMVI TRANSTHORACIC APPROACH	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0485T	OCT MID EAR I&R UNILATERAL	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0486T	OCT MID EAR I&R BILATERAL	CATEGORY III CODES	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	0488T	DIABETES PREV ONLINE/ELEC	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0489T	REGN CELL TX SCLDR HANDS	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0490T	REGN CELL TX SCLDR H MLT INJ	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0494T	PREP & CANNULJ CDVR DON LUNG	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0495T	MNTR CDVR DON LNG 1ST 2 HRS	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0496T	MNTR CDVR DON LNG EA ADDL HR	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0563T	EVAC MEIBOMIAN GLND HEAT BI	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0565T	AUTOL CELL IMPLT ADPS HRVG	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0566T	AUTOL CELL IMPLT ADPS NJX	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0569T	TTVR PERQ APPR 1ST PROSTH	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0570T	TTVR PERQ EA ADDL PROSTH	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0571T	INSJ/RPLCMT ICDS SS ELTRD	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0572T	INSERTION SS DFB ELECTRODE	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0581T	ABLTJ MAL BRST TUM PERQ CRTX	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0582T	TRURL ABLTJ MAL PRST8 TISS	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0583T	TMPST AUTO TUBE DLVR SYS	CATEGORY III CODES	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	0584T	PERQ ISLET CELL TRANSPLANT	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0585T	LAPS ISLET CELL TRANSPLANT	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0587T	PERQ IMPLTJ/RPLCMT ISDNS PTN	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0588T	REVISION/REMOVAL ISDNS PTN	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0589T	ELEC ALYS SMPL PRGRMG IINS	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0590T	ELEC ALYS CPLX PRGRMG IINS	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0591T	HLTH&WB COACHING INDIV 1ST	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0592T	HLTH&WB COACHING INDIV F-UP	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0593T	HLTH&WB COACHING GROUP	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	20939	BONE MARROW ASPIR BONE GRFG	SURGERY - MUSCULOSKELETAL SYST	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	20983	ABLATE BONE TUMOR(S) PERQ	SURGERY - MUSKULOSKELETAL SYST	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	33272	RMVL OF SUBQ DEFIBRILLATOR	SURGERY - CARDIOVASCULAR	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	33273	REPOS PREV IMPLTBL SUBQ DFB	SURGERY - CARDIOVASCULAR	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	33927	IMPLTJ TOT RPLCMT HRT SYS	SURGERY - CARDIOVASCULAR SYSTE	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	33928	RMVL & RPLCMT TOT HRT SYS	SURGERY - CARDIOVASCULAR SYSTE	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	33929	RMVL RPLCMT HRT SYS F/TRNSPL	SURGERY - CARDIOVASCULAR SYSTE	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	36465	NJX NONCMPND SCLRSNT 1 VEIN	SURGERY - CARDIOVASCULAR SYSTE	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	36466	NJX NONCMPND SCLRSNT MLT VN	SURGERY - CARDIOVASCULAR SYSTE	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	36482	ENDOVEN THER CHEM ADHES 1ST	SURGERY - CARDIOVASCULAR SYSTE	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	36483	ENDOVEN THER CHEM ADHES SBSQ	SURGERY - CARDIOVASCULAR SYSTE	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	77316	BRACHYTX ISODOSE PLAN SIMPLE	RADIOLOGY - RADIATION ONCOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	77317	BRACHYTX ISODOSE INTERMED	RADIOLOGY - RADIATION ONCOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	81105	HPA-1 GENOTYPING	PATH & LAB - CYTOGENETIC STUDI	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	81106	HPA-2 GENOTYPING	PATH & LAB - CYTOGENETIC STUDI	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	81107	HPA-3 GENOTYPING	PATH & LAB - CYTOGENETIC STUDI	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	81108	HPA-4 GENOTYPING	PATH & LAB - CYTOGENETIC STUDI	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	81109	HPA-5 GENOTYPING	PATH & LAB - CYTOGENETIC STUDI	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	81110	HPA-6 GENOTYPING	PATH & LAB - CYTOGENETIC STUDI	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	81111	HPA-9 GENOTYPING	PATH & LAB - CYTOGENETIC STUDI	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	81112	HPA-15 GENOTYPING	PATH & LAB - CYTOGENETIC STUDI	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	81162	BRCA1&2 GEN FULL SEQ DUP/DEL	PATH & LAB - CYTOGENETIC STUDI	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	81519	ONCOLOGY BREAST MRNA	PATH & LAB - MICROBIOLOGY	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	81520	ONC BREAST MRNA 58 GENES	PATH & LAB - MICROBIOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	81521	ONC BREAST MRNA 70 GENES	PATH & LAB - MICROBIOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	81551	ONC PROSTATE 3 GENES	PATH & LAB - MICROBIOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	83006	GROWTH STIMULATION GENE 2	PATH & LAB - MICROBIOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	87505	NFCT AGENT DETECTION GI	PATH & LAB - MICROBIOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	87506	IADNA-DNA/RNA PROBE TQ 6-11	PATH & LAB - MICROBIOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	87662	ZIKA VIRUS DNA/RNA AMP PROBE	PATH & LAB - MICROBIOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	88366	INSITU HYBRIDIZATION (FISH)	PATH & LAB - IMMUNOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	88369	M/PHMTRC ALYSISHQUANT/SEMIQ	PATH & LAB - IMMUNOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	88373	M/PHMTRC ALYS ISHQUANT/SEMIQ	PATH & LAB - IMMUNOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	88374	M/PHMTRC ALYS ISHQUANT/SEMIQ	PATH & LAB - IMMUNOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	89337	CRYOPRESERVATION OOCYTE (S)	PATH & LAB - IMMUNOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	92145	CORNEAL HYSTERESIS DETER	MEDICINE - SPECIAL PROCEDURES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	93702	BIS XTRACELL FLUID ANALYSIS	MEDICINE - CARDIOVASCULAR	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	93895	CAROTID INTIMA ATHEROMA EVAL	MEDICINE - CARDIOVASCULAR	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	99483	ASSMT & CARE PLN PT COG IMP	E & M - CARE PLAN OVERSIGHT	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	C1734	ORTHO/DEVC/DX MX OPP BTB/SFT T-TO B	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C1824	GENERATOR CARDIAC CONTRACTILITY MOD	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C1839	IRIS PROSTHESIS	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C2596	PROBE IMAG GUID ROBOTC WATERJET ABL	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C9740	CYSTOSCPY INSRT TRNSPRSTAT IMPL;4/GT	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C9757	LAMINOTOMY DECOMP NRV RT;1 ISP LUMB	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C9758	BI PRC NYHA 3/4 HF;TRNSCTH I IAS/PC	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D0411	HBA1C IN OFFICE POS TESTING	HCPCS-DENTAL-Office Visits	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D0419	ASSESSMENT SALIVARY FLOW MEASUREMNT	HCPCS-DENTAL-Tests and Lab	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D0600	NON-IONIZ DX P CPBL QUANTIF MON & R	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D1551	RE-CEM/RE-BOND BIL SPACE MNTNR-MAX	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D1552	RE-CEM/RE-BOND BIL SPC MNTNR - MAND	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D1553	RE-CEM/RE-BOND UNI SPACE MNTNR-QUAD	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D1556	REMV FIX UNI SPACE MNTNR - PER QUAD	HCPCS-DENTAL-Space Maint.	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D1575	DIST SHOE SPC MNTNR - FIX UNI-QUAD	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D2753	CRWN - PORCLN FUSD TO TIT & TIT ALY	HCPCS-DENTAL-Crowns - Single	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	D4346	SCALING PRES GEN MOD/SEV GING INF	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D5511	REPAIR BKN CMPL DENTURE BASE MAND	HCPCS-DENTAL-Denture Repair	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D5512	REPAIR BKN CMPL DENTURE BASE MAX	HCPCS-DENTAL-Denture Repair	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D5611	REPAIR RESIN PRTL DENTURE BASE MAND	HCPCS-DENTAL-Denture Repair	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D5612	REPAIR RESIN PRTL DENTURE BASE MAX	HCPCS-DENTAL-Denture Repair	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D5621	REPAIR CAST PARTIAL FRAMEWORK MAND	HCPCS-DENTAL-Denture Repair	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D5622	REPAIR CAST PARTIAL FRAMEWORK MAX	HCPCS-DENTAL-Denture Repair	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6082	IMPL SUP CR-PRCLN FU PREDM BASE ALY	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6083	IMPLANT SUPP CRWN - PORCELN FU NBL	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6084	IMPLANT SUPPORTED CROWN - PORCELN F	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6086	IMPLANT SUPP CRWN - PREDOM BASE ALY	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6087	IMPLANT SUPP CROWN - NOBLE ALLOYS	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6088	IMPLANT SUPP CROWN - TI & TI ALLOYS	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6096	REMOVE BROKEN IMPL RETAINING SCREW	HCPCS-DENTAL-Implant Svcs	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6097	ABUT SUPP CR-PORCELN FU TI & TI ALY	HCPCS-DENTAL-Implant Svcs	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6099	IMPL SUP RTN FPD-PORCELN FU NBL ALY	HCPCS-DENTAL-Implant Svcs	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	D6110	IMPL/ABUT SUPP RMV D EDENT ARCH-MAX	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6111	IMPL/ABUT SUPP RMV D EDENT ARCH-MND	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6112	IMPL/ABUT SUP RMV D PR EDNT ARCH-MX	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6113	IMPL/ABUT SP RMV D PR EDNT ARCH-MND	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6114	IMPL/ABUT SP FIXED D EDENT ARCH-MAX	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6115	IMPL/ABUT SUP FIXD D EDENT ARCH-MND	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6116	IMPL/ABUT SUP F D PR EDENT ARCH-MAX	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6117	IMPL/ABUT SP FIXD D PR EDENT ARCH-M	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6118	IMP/ABUT SPTD INT D EDENT ARCH-M	HCPCS-DENTAL-Implant Svcs	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6119	IMPL/ABUT SPT INT F D EDNT ARCH-MAX	HCPCS-DENTAL-Implant Svcs	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6120	IMPL SUP RET PRCLN FU TIT & TIT ALY	HCPCS-DENTAL-Implant Svcs	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6121	IMPL SUP RET MTL FPD PREDM BASE ALY	HCPCS-DENTAL-Implant Svcs	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6122	IMPL SUP RET METAL FPD - NOBLE AL	HCPCS-DENTAL-Implant Svcs	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6123	IMPL SUP RET MTL FPD TIT & TIT ALY	HCPCS-DENTAL-Implant Svcs	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6195	ABUT SUP RET-PRCLN FU TIT & TIT ALY	HCPCS-DENTAL-Implant Svcs	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6243	PONTIC - PORCELN FU TIT & TIT ALY	HCPCS-DENTAL-Bridge-Pontic	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	D6549	RETAINER - RESIN BONDED FIXED PROS	HCPCS- DENTAL-Bridge-Abuts	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6753	RET CRWN - PORCELN FU TIT & TIT ALY	HCPCS-DENTAL-Bridge-Abuts	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D7296	CORTICOTOMY-1-3 TEETH/TOOTH SP QUAD	HCPCS-DENTAL-Oral Surg-Other	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D7297	CORTICOTOMY-4/GT TEETH/TOOTH SP QUAD	HCPCS-DENTAL-Oral Surg-Other	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D7922	PLCMT INTRA-SOC BIOL DRSG AID HEMO	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D8695	REMV F ORTHO APPL RSN OTH THAN C TX	HCPCS-DENTAL-Orthodontic	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D8696	REPAIR ORTHODONTIC APPLIANCE - MAX	HCPCS-DENTAL-Orthodontic	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D8697	REPAIR ORTHODONTIC APPLIANCE - MAND	HCPCS-DENTAL-Orthodontic	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D8698	RE-CEMENT/RE-BOND FIX RETAIN - MAX	HCPCS-DENTAL-Orthodontic	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D8699	RE-CEMENT/RE-BOND FIX RETAIN - MAND	HCPCS-DENTAL-Orthodontic	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D8701	REPR FIX RETAIN INCL REATTACH - MAX	HCPCS-DENTAL-Orthodontic	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D8702	REPR FIX RETAIN INCL REATTCH - MAND	HCPCS-DENTAL-Orthodontic	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D8703	REPL LOST/BROKEN RETAINER - MAX	HCPCS-DENTAL-Orthodontic	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D8704	REPL LOST/BROKEN RETAINER - MAND	HCPCS-DENTAL-Orthodontic	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D9219	EVAL MOD/DEEP SEDAT/GEN ANESTHESIA	HCPCS- DENTAL-Anesthesia	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D9991	DENTAL CASE MGMT - ADR APPT CA BARR	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	D9992	DENTAL CASE MGMT - CARE COORDINATN	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D9993	DENTAL CASE MGMT - MOTIVATIONL INTV	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D9994	D CASE MGMT-PT ED IMP OR H LITERACY	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D9995	TELEDENTISTRY - SYNCHRONOUS; RT ENC	HCPCS-DENTAL-Misc Svcs	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D9996	TELEDNT-ASYNC;I STD&FWD DNT SUB REV	HCPCS-DENTAL-Misc Svcs	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D9997	DENTAL CASE MGMT-PTS SPCL HC NEEDS	HCPCS-DENTAL-UNKNOWN	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	E0787	EXT AMB INFUS PUMP INSULIN D R ADJ	HCPCS-DME	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	E0953	WC AC LAT THIGH/KNEE SUPP ANY TY EA	HCPCS - DME	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	E0954	WHEELCHAIR AC FOOT BOX ANY TY EA FT	HCPCS - DME	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	E2398	WHEELCHAIR AC DYN POS HARDWARE BACK	HCPCS-DME	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	G0276	PILD/PLACEBO CONTROL CLIN TR	HCPCS - PROC/PROF SERVICES (TE	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	G0277	HPO UND PRSS FULL B CHMBR PER 30 MN	HCPCS - PROC/PROF SERVICES (TE	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	G2082	OFF/OT OP E&M E PT 56MG ESKTMN N SA	HCPCS-PROC/PROF SERVICES (TE	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	G2083	OFF/OT OP E&M E PTGT 56MG ESKTMN N SA	HCPCS-PROC/PROF SERVICES (TE	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0179	INJECTION BROLUCIZUMAB-DBLL 1 MG	HCPCS-DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J1726	INJECTION HPC 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	J1729	INJECTION HPC NOS 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J3358	USTEKINUMAB INTRAVENOUS INJ 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J7181	INJ FACTOR XIII A-SUBUNIT PER IU	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J7188	INJ FA VIII ANTIHM FA RCMB OBZUR IU	2006 Code Set	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J7201	INJ FACTOR IX FC FUS PROTEIN PER IU	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J7210	INJ FACTOR VIII AFSTYLA 1 I.U.	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J7211	INJ FACTOR VIII KOVALTRY 1 I.U.	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J7327	HYLAN/DERV MONOVISC IA INJ PER DOSE	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J7328	HYAL/DERIV GELSYN-3 IA INJ 0.1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J7336	CAPSAICIN 8PCT PATCH PER SQ CM	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J7345	ALA HCL TOP ADMIN 10PCT GEL 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J9309	INJ POLATUZUMAB VEDOTIN-PIIQ 1 MG	HCPCS-CHEMO DRUGS	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	L2006	KAF DVC ANY MATERIAL ADJ CUSTOM FAB	HCPCS-ORTHOTIC PROCEDURES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	L8696	ANT FOR IMPL DIA/PN ST DEV REPL EA	HCPCS - PROSTHETIC PROCED	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4150	ALLOWRAP DS/DRY PER SQ CENTIMETER	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4151	AMNIOBAND/GUARDIAN PER SQ CENTIMETR	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	Q4153	DERMAVEST AND PLURIVEST PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4156	NEOX 100 OR CLARIX 100-SQUARE CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4158	KERECIS OMEGA3 PER SQUARE CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4162	WOUNDEX FLOW BIOSKIN FLOW 0.5 CC	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4163	WOUNDEX BIOSKIN PER SQUARE CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4165	KERAMATRIX OR KERASORB PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4176	NEOPATCH OR THERION 1 SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	S9901	SERVICES JNL-LISTED CS NURSE PER HR	HCPCS - TEMP NATIONAL CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	87842	Infectious agent antigen detection by immunoassay technique,	PATH & LAB - MICROBIOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0152U	NFCT DS DNA UNTRGT NGNRJ SEQ	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D5284	REMV UNI PD-1 PECE FLEX BS-PER QUAD	HCPCS-DENTAL-Denture-Partial	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D5286	REMV UNI PD - 1 PECE RESIN-PER QUAD	HCPCS-DENTAL-Denture-Partial	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6098	IMPL SUPP RETN - PORC FU PDMT B ALY	HCPCS-DENTAL-Implant Svcs	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0017M	ONC DLBCL MRNA 20 GENES ALG	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0172U	ONC SLD TUM ALYS BRCA1 BRCA2	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0173U	PSYC GEN ALYS PANEL 14 GENES	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	0174U	ONC SOLID TUMOR 30 PRTN TRGT	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0175U	PSYC GEN ALYS PANEL 15 GENES	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0176U	CDTB&VINCULIN IGG ANTB IA	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0177U	ONC BRST CA DNA PIK3CA 11	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0178U	PEANUT ALLG ASMT EPI CLIN RX	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0179U	ONC NONSM CLL LNG CA ALYS 23	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0180U	ABO GNOTYP ABO 7 EXONS	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0181U	CO GNOTYP AQP1 EXON 1	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0182U	CROM GNOTYP CD55 EXONS 1-10	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0183U	DI GNOTYP SLC4A1 EXON 19	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0184U	DO GNOTYP ART4 EXON 2	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0185U	FUT1 GNOTYP FUT1 EXON 4	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0186U	FUT2 GNOTYP FUT2 EXON 2	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0187U	FY GNOTYP ACKR1 EXONS 1-2	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0188U	GE GNOTYP GYPC EXONS 1-4	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0189U	GYPA GNOTYP NTRNS 1 5 EXON 2	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	0190U	GYPB GNOTYP NTRNS 1 5 SEUX 3	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0191U	IN GNOTYP CD44 EXONS 2 3 6	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0192U	JK GNOTYP SLC14A1 EXON 9	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0193U	JR GNOTYP ABCG2 EXONS 2-26	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0194U	KEL GNOTYP KEL EXON 8	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0195U	KLF1 TARGETED SEQUENCING	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0196U	LU GNOTYP BCAM EXON 3	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0197U	LW GNOTYP ICAM4 EXON 1	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0198U	RHD&RHCE GNTYP RHD1-10&RHCE5	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0199U	SC GNOTYP ERMAP EXONS 4 12	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0200U	XK GNOTYP XK EXONS 1-3	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0201U	YT GNOTYP ACHE EXON 2	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0203U	AI IBD MRNA XPRSN PRFL 17	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0660T	IMPLT ANT SGM IO NBIO RX SYS	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C1761	CATHETER TRANSLUM IVASC LITHOTR COR	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0650T	PRGRMG DEV EVAL SCRMS REMOTE	CATEGORY III CODES	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	0250U	ONC SLD ORG NEO DNA 505 GENE	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0667T	DON HYSTERECTOMY RCP UTER	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0655T	TPRNL FOCAL ABLTJ MAL PRST8	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0645T	TCAT IMPLTJ C SINS RDCTJ DEV	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0664T	DON HYSTERECTOMY OPEN CDVR	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J1951	INJ LEU AC FOR DEP SUSP 0.25 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0652T	EGD FLX TRANSNASAL DX BR/WA	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0252U	FTL ANEUPLOIDY STR ALYS DNA	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	A9594	GALLIUM GA-68 PSMA-11 DX UCLA 1 MCI	HCPCS-ADMIN MISC & INVEST	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0669T	BKBENCH RCNSTJ DON UTER VEN	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0647T	INSJ GTUBE PERQ MAG GASTRPXY	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0251U	HEPCIDIN-25 ELISA SERUM/PLSM	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	A9593	GALLIUM GA-68 PSMA-11 DX UCSF 1 MCI	HCPCS-ADMIN MISC & INVEST	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0668T	BKBENCH PREP DON UTER ALGRFT	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0661T	RMVL&RIMPLTJ ANT SGM IMPLT	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0646T	TTVI/RPLCMT W/PRSTC VLV PERQ	CATEGORY III CODES	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	G0327	CRC SCR; BLOOD-BASED BIOMARKER	HCPCS - PROC/PROF SERVICES (TE	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0651T	MAG CTRLD CAPSULE ENDOSCOPY	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0653T	EGD FLX TRANSNASAL BX 1/MLT	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0665T	DON HYSTERECTOMY OPEN LIV	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0643T	TCAT L VENTR RSTRJ DEV IMPLT	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J7168	PRT CMPLX CONC KCNTRA PR IU FIX ACT	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0249U	ONC BRST ALYS 32 PHSPRTN ALG	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0666T	DON HYSTERECTOMY LAPS LIV	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0654T	EGD FLX TRANSNASAL TUBE/CATH	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0644T	TCAT RMVL/DBLK ICAR MAS PERQ	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0254U	REPRDTVE MED ALYS 24 CHRMSM	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0659T	TCAT INTRA-C NFS SUPERSAT O2	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C9778	COLPOPEXY VAGINAL; MI EXP APPRCH	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0253U	RPRDTVE MED RNA GEN PRFL 238	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0658T	ELEC IMPD SPECTRSC 1+SKN LES	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0224	INJECTION LUMASIRAN 0.5 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	0670T	BKBENCH RCNSTJ DON UTER ARTL	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	S9432	MEDICAL FOOD NONINBORN ERRORS METAB	HCPCS - TEMP NATIONAL CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	P9026	CRYOPRECP FIBRNGN CMPL PTHGN RDC EA	HCPCS - PATH & LAB	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0257U	VLCAD LEUK NZM ACTV WHL BLD	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0281U	HEM VWD PROPEPTIDE AG LVL	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0255U	ANDROLOGY INFERTILITY ASSMT	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0267U	RARE DO ID OPT GEN MAPG&SEQ	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0279U	HEM VW FACTOR&CLGN III BNDG	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J9319	INJECT ROMIDEPSIN LYOPHILIZED 0.1MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0261U	ONC CLRCT CA IMG ALYS W/AI	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4251	VIM PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J2406	INJECTION ORITAVANCIN KIMYRSA 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0699	INJECTION CEFIDEROCOL 10 MG	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0258U	AI PSOR MRNA 50-100 GEN ALG	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0270U	HEM CGEN COAGJ DO 20 GENES	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0282U	RBC DNA GNTYP 12 BLD GRP GEN	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	0263U	NEURO ASD MEAS 16 C METBLT	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0275U	HEM HEPRN NDUC TRMBCTPNA SRM	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J1445	INJ FERRIC PYROPHO CITR 0.1 MG IRON	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4253	ZENITH AMNIOTIC MEMBRANE PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q9004	DPT VETERAN AF WHOLE HLTH PRTNR SRV	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C9779	ESD INCL ENDOSC/COLON MUCOSAL CLOSR	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0265U	RAR DO WHL GN&MTCDRL DNA ALS	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0256U	TMA/TMAO PRFL MS/MS UR ALG	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0268U	HEM AHUS GEN SEQ ALYS 15 GEN	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0280U	HEM VW FACTOR&CLGN IV BNDG	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	K1027	ORAL DEV/APPL RED U AW COL CSTM FAB	HCPCS-K CODES-DMERCS ONLY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0262U	ONC SLD TUM RT-PCR 7 GEN	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4252	VENDAJE PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0018M	TRNSPLJ RNL MEAS CD154+CLL	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0264U	RARE DS ID OPT GENOME MAPG	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0741	INJ CABOTEGRAVIR&RILPIVIRINE 2M/3MG	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	0259U	NEPH CKD NUC MRS MEAS GFR	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0283U	VW FACTOR TYPE 2B EVAL PLSM	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C9780	INS CVC THRU CVO VIA I-S APP INC IG	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0266U	UNXPL CNST HRTBL DO GN XPRSN	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J9318	INJ ROMIDEPSIN NONLYOPHILIZED 0.1MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0260U	RARE DS ID OPT GENOME MAPG	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0284U	VW FACTOR TYPE 2N EVAL PLSM	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J1305	INJECTION EVINACUMAB-DGNB 5MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J1426	INJECTION CASIMERSEN 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	D6085	INTERIM IMPLANT CROWN	HCPCS - DENTAL	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	86037	ANCA TITER EACH ANTIBODY	PATH & LAB - IMMUNOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	86596	VOLTAGE-GTD CA CHNL ANTB EA	PATH & LAB - IMMUNOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	53451	TPRNL BALO CNTNC DEV BI	SURGERY - URINARY SYSTEM	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0294U	LNGVTY&MRTLTY RSK MRNA 18GEN	HCPCS - PATH & LAB	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	86036	ANCA SCREEN EACH ANTIBODY	PATH & LAB - IMMUNOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	86258	DGP ANTIBODY EACH IG CLASS	PATH & LAB - IMMUNOLOGY	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	64628	TRML DSTRJ IOS BVN 1ST 2 L/S	SURGERY - NERVOUS SYSTEM	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0292U	PSYC STRS DO MRNA 72 GENES	HCPCS - PATH & LAB	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0304U	HEM RBC ADS WHL BLD NORMOXIC	HCPCS - PATH & LAB	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	77092	TBS I&R FX RSK QHP	RADIOLOGY - RADIOLOGIC GUIDANC	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	83521	IG LIGHT CHAINS FREE EACH	PATH & LAB - CHEMISTRY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	86364	TISS TRNSGLTMNASE EA IG CLAS	PATH & LAB - IMMUNOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	81523	ONC BRST MRNA 70 CNT 31 GENE	PATH & LAB-MULTIANALYTE ASSAYS	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	A9595	PIFLUFOLASTAT F-18 DIAGNOSTIC 1 MCI	HCPCS-ADMIN MISC & INVEST	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	66989	XCPSL CTRC RMVL CPLX INSJ 1+	SURGERY - NERVOUS SYSTEM	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	53452	TPRNL BALO CNTNC DEV UNI	SURGERY - URINARY SYSTEM	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0291U	PSYC MOOD DO MRNA 144 GENES	HCPCS - PATH & LAB	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0303U	HEM RBC ADS WHL BLD HYPOXIC	HCPCS - PATH & LAB	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	77091	TBS TECHL CALCULATION ONLY	RADIOLOGY - RADIOLOGIC GUIDANC	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0300U	ONC PAN TUM WHL GEN SEQ&OPT	HCPCS - PATH & LAB	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	83529	ASAY OF INTERLEUKIN-6 (IL-6)	PATH & LAB - CHEMISTRY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	86381	MITOCHONDRIAL ANTIBODY EACH	PATH & LAB - IMMUNOLOGY	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	68841	INSJ RX ELUT IMPLT LAC CANAL	SURGERY - EYE AND OCULAR ADNEX	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0290U	PAIN MGMT MRNA GEN XPRSN 36	HCPCS - PATH & LAB	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0302U	IADNA BRTNLA DDPCR FLWG LIQ	HCPCS - PATH & LAB	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	77090	TBS TECHL PREP&TRANSMIS DATA	RADIOLOGY - RADIOLOGIC GUIDANC	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	64582	OPN MPLTJ HPGLSL NSTM ARY PG	SURGERY - NERVOUS SYSTEM	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	53453	TPRNL BALO CNTNC DEV RMVL EA	SURGERY - URINARY SYSTEM	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0299U	ONC PAN TUM WHL GEN OPT MAPG	HCPCS - PATH & LAB	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	66991	XCAPSL CTRC RMVL INSJ 1+	SURGERY - EYE AND OCULAR ADNEX	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	91113	GI TRC IMG INTRAL COLON I&R	MEDICINE - GASTROENTEROLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	43497	TRANSORL LWR ESOPHGL MYOTOMY	SURGERY - DIGESTIVE SYSTEM	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0293U	PSYC SUICIDAL IDEA MRNA 54	HCPCS - PATH & LAB	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0305U	HEM RBC FNCLTY&DFRM SHR STRS	HCPCS - PATH & LAB	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0286U	CEP72 NUDT15&TPMT GENE ALYS	HCPCS - PATH & LAB	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	64583	REV/RPLCT HPGLSL NSTM ARY PG	SURGERY - NERVOUS SYSTEM	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	53454	TPRNL BALO CNTNC DEV ADJMT	SURGERY - URINARY SYSTEM	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	42975	DISE EVAL SLP DO BRTH FLX DX	SURGERY - DIGESTIVE SYSTEM	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	0301U	IADNA BARTONELLA DDPCR	HCPCS - PATH & LAB	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0289U	NEURO ALZHEIMER MRNA 24 GEN	HCPCS - PATH & LAB	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	86231	EMA EACH IG CLASS	PATH & LAB - IMMUNOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	81560	TRNSPLJ PD LVR&BWL CD154+CLL	PATH & LAB - MICROBIOLOGY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	77089	TBS DXA CAL W/I&R FX RISK	RADIOLOGY - RADIOLOGIC GUIDANC	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0273U	HEM GEN HYPRFIBRNLYSIS 9 GEN	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0315U	ONC CUTAN SQ CLL CA MRNA 40	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0310U	PED VSCLTS KD ALYS 3 BMRKS	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0320U	NEPH RNA PSTTRNSPL PERPH BLD	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0314U	ONC CUTAN MLNMA MRNA 35 GENE	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0319U	NEPH RNA PRETRNSPL PERPH BLD	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0879	INJ DIFELIKEFALIN 0.1 MICROGRAM	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	H2038	SKILLS TRAINING & DVLPMT PER DIEM	HCPCS - PROC/PROF SERVICES (TE	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	T2050	FINANCIAL MGMT SELF-DIR WAIVER; PD	HCPCS - STATE MEDICAID AGENCY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C9782	BL P NYHA II/III HF/CCS III/IV CRA	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0307U	ONC MRD NXT-GNRJ ALYS SBSQ	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	0322U	NEURO ASD MEAS 14 ACYL CARN	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0312U	AI DS SLE ALYS 8 IGG AUTOANT	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0317U	ONC LUNG CA 4-PRB FISH ASSAY	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	T2051	SUPPORTS BROKG SELF-DIR WAIVER; PD	HCPCS - STATE MEDICAID AGENCY	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C9783	BLD PROC TC IMP CS RD DVC/PLB CTRL	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0318U	PED WHL GEN MTHYLTN ALYS 50+	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0313U	ONC PNCRS DNA&MRNA SEQ 74	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	A9574	AIR POLY-TYPE A INTRAUT FOAM 0.1 ML	HCPCS - MED-SURG SUPPLIES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0219	INJ AVALGLUCOSIDASE ALFA-NGPT 4 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0306U	ONC MRD NXT-GNRJ ALYS 1ST	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	V2525	CONTACT LENS HPHI DUAL FOC PER LENS	HCPCS - VISION SERVICES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0321U	IADNA GU PTHGN 20BCT&FNG ORG	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0311U	NFCT DS BCT QUAN ANTMCRB SC	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J0491	INJECTION ANIFROLUMAB-FNIA 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0316U	B BRGDRFERI LYME DS OSPA EVL	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C9781	ARTHROSC SHLDR SX; W/IMP SA SPACER	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	0309U	CRD CV DS ALY 4 PRTN PLM ALG	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0672T	NDOVAG CRYG RF REMDL TISS	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0687T	TX AMBLYOPIA DEV SETUP 1ST	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0688T	TX AMBLYOPIA ASSMT W/REPORT	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0691T	AUTO ALYS XST CT STD VRT FX	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0692T	THERAPEUTIC ULTRAFILTRATION	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0693T	COMPRE FUL BDY 3D MTN ALYS	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0694T	3D VOL IMG&RCNSTJ BRST/AX	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0701T	MOLEC FLUOR IMG SUS NEV EA	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0704T	REM TX AMBLYOPIA SETUP&EDU	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0705T	REM TX AMBLYOPIA TECH SPRT	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0706T	REM TX AMBLYOPIA I&R PHY/QHP	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0707T	NJX B1 SUB MTRL SBCHDRL DFCT	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4224	HHF10-P PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4256	MLG-COMPLETE PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q4257	RELESE PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			

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MMAI-Medicare/Medicaid	Q4258	ENVERSE PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	Q5124	INJ RBZ-NUNA BIOSIM BYOOVIZ 0.1 MG	HCPCS - TEMP CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0402T	COLGN CRS-LINK CRN&PACHYMTRY	CATEGORY III CODES	YES	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C1821	INTERSPINOUS PRC DISTRACT DEVC IMPL	HCPCS - C CODES - OUTPATIENT PP	NON-COV	09/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	63012	REMOVE LAMINA/FACETS LUMBAR	SURGERY - NERVOUS SYSTEM	YES	09/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	22848	INSERT PELV FIXATION DEVICE	SURGERY - MUSCULOSKELETAL SYST	YES	09/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	22847	INSERT SPINE FIXATION DEVICE	SURGERY - MUSCULOSKELETAL SYST	YES	09/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	22846	INSERT SPINE FIXATION DEVICE	SURGERY - MUSCULOSKELETAL SYST	YES	09/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	22845	INSERT SPINE FIXATION DEVICE	SURGERY - MUSCULOSKELETAL SYST	YES	09/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	22844	INSERT SPINE FIXATION DEVICE	SURGERY - MUSCULOSKELETAL SYST	YES	09/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	22843	INSERT SPINE FIXATION DEVICE	SURGERY - MUSCULOSKELETAL SYST	YES	09/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	22842	INSERT SPINE FIXATION DEVICE	SURGERY - MUSCULOSKELETAL SYST	YES	09/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	22841	INSERT SPINE FIXATION DEVICE	SURGERY - MUSCULOSKELETAL SYST	YES	09/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	22840	INSERT SPINE FIXATION DEVICE	SURGERY - MUSCULOSKELETAL SYST	YES	09/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	52649	PROSTATE LASER ENUCLEATION	SURGERY - URINARY SYSTEM	YES	07/11/2022	12/31/2078			
MMAI-Medicare/Medicaid	54410	REMOVE/REPLACE PENIS PROSTH	SURGERY - MALE GENITAL SYSTEM	YES	07/11/2022	12/31/2078			

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MMAI-Medicare/Medicaid	54405	INSERT MULTI-COMP PENIS PROS	SURGERY - MALE GENITAL SYSTEM	YES	07/11/2022	12/31/2078			
MMAI-Medicare/Medicaid	54401	INSERT SELF-CONTD PROSTHESIS	SURGERY - MALE GENITAL SYSTEM	YES	07/11/2022	12/31/2078			
MMAI-Medicare/Medicaid	11970	RPLCMT TISS XPNDR PERM IMPLT	SURGERY - INTEGUMENTARY SYSTEM	YES	07/11/2022	12/31/2078			
MMAI-Medicare/Medicaid	Q4116	ALLODERM PER SQ CM	HCPCS - TEMP CODES	YES	07/11/2022	12/31/2078			
MMAI-Medicare/Medicaid	Q4105	INTGRA DRT/OMNIGR DERM RGN MTX P SC	HCPCS - TEMP CODES	YES	07/11/2022	12/31/2078			
MMAI-Medicare/Medicaid	Q4104	INTEGRA BMWD PER SQ CM	HCPCS - TEMP CODES	YES	07/11/2022	12/31/2078			
MMAI-Medicare/Medicaid	C9363	SKIN SUB INTEGRA BILAYER PER SQ CM	HCPCS - C CODES - OUTPATIENT PP	NON-COV	07/11/2022	12/31/2078			
MMAI-Medicare/Medicaid	L5987	ALL LW EXTRM PROSTH SHANK FOOT SYS	HCPCS - PROSTHETIC PROCED	YES	07/11/2022	12/31/2078			
MMAI-Medicare/Medicaid	C9354	ACCELLULR PERICARDIAL TISS NH SQ CM	HCPCS - C CODES - OUTPATIENT PP	NON-COV	07/11/2022	12/31/2078			
MMAI-Medicare/Medicaid	C9352	MICROPOROUS COLL IMPLANTBLE TUBE CM	HCPCS - C CODES - OUTPATIENT PP	NON-COV	07/11/2022	12/31/2078			
MMAI-Medicare/Medicaid	27437	REVISE KNEECAP	SURGERY - MUSCULOSKELETAL SYST	YES	07/11/2022	12/31/2078			
MMAI-Medicare/Medicaid	27330	BIOPSY KNEE JOINT LINING	SURGERY - MUSCULOSKELETAL SYST	YES	07/11/2022	12/31/2078			
MMAI-Medicare/Medicaid	69637	REBUILD EARDRUM STRUCTURES	SURGERY - AUDITORY SYSTEM	YES	07/11/2022	12/31/2078			
MMAI-Medicare/Medicaid	69636	REBUILD EARDRUM STRUCTURES	SURGERY - AUDITORY SYSTEM	YES	07/11/2022	12/31/2078			
MMAI-Medicare/Medicaid	69633	REBUILD EARDRUM STRUCTURES	SURGERY - AUDITORY SYSTEM	YES	07/11/2022	12/31/2078			
MMAI-Medicare/Medicaid	21230	RIB CARTILAGE GRAFT	SURGERY - MUSCULOSKELETAL SYST	YES	07/11/2022	12/31/2078			

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MMAI-Medicare/Medicaid	21175	RECONSTRUCT ORBIT/FOREHEAD	SURGERY - MUSCULOSKELETAL SYST	YES	07/11/2022	12/31/2078			
MMAI-Medicare/Medicaid	21235	EAR CARTILAGE GRAFT	SURGERY - MUSCULOSKELETAL SYST	YES	07/11/2022	12/31/2078			
MMAI-Medicare/Medicaid	0327U	FTL ANEUPLOIDY TRSMY DNA SEQ	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0725T	VESTIBULAR DEV IMPLTJ UNI	CATEGORY III CODES	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0720T	PRQ ELC NRV STIM CN WO IMPLT	CATEGORY III CODES	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	J2779	INJ RBZ VIA IVT I SUSVIMO 0.1 MG	HCPCS-DRUGS (NOT ORAL)	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	J2998	INJECT PLASMINOGEN HUMAN-TVMH 1 MG	HCPCS-DRUGS (NOT ORAL)	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	Q4259	CELERA D L/CELERA D MEMB PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0323U	IADNA CNS PTHGN NEXT GEN SEQ	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0328U	DRUG ASSAY 120+ RX&METABLT	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0722T	QUAN CT TISS CHARAC W/CT	CATEGORY III CODES	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0727T	RMVL&RPLCMT IMPLT VSTBLR DEV	CATEGORY III CODES	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0717T	ADRC THER PRTL RC TEAR	CATEGORY III CODES	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0736T	COLONIC LAVAGE 35+L WATER	CATEGORY III CODES	NO	07/01/2022	07/01/2022			
MMAI-Medicare/Medicaid	0731T	AUGMNT AI-BASED FCL PHNT A/R	CATEGORY III CODES	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	J3299	INJ TRIAMCINOLONE ACT XIPERE 1 MG	HCPCS-DRUGS (NOT ORAL)	YES	07/01/2022	12/31/2078			

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MMAI-Medicare/Medicaid	0326U	TRGT GEN SEQ ALYS PNL 83+	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0331U	ONC HL NEO OPT GEN MAPPING	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0728T	DX ALYS VSTBLR IMPLT UNI 1ST	CATEGORY III CODES	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	Q4261	TAG PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0718T	ADRC THER PRTL RC TEAR NJX	CATEGORY III CODES	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0723T	QMRCP W/O DX MRI SM ANAT SES	CATEGORY III CODES	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0732T	IMMNTX ADMN ELECTROPORATN IM	CATEGORY III CODES	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0737T	XENOGRAFT IMPLTJ ARTCLR SURF	CATEGORY III CODES	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	J1551	INJ IMMUNE GLOBULIN CUTAQUIG 100 MG	HCPCS-DRUGS (NOT ORAL)	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0329U	ONC NEO XOME&TRNS SEQ ALYS	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0729T	DX ALYS VSTBLR IMPLT UNI SBQ	CATEGORY III CODES	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	90584	DENGUE VACC QUAD 2 DOSE SUBQ	MEDICINE - VACCINES, TOXOIDS	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0719T	PST VRT JT RPLCMT LMBR 1 SGM	CATEGORY III CODES	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0724T	QMRCP W/DX MRI SAME ANATOMY	CATEGORY III CODES	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	J2356	INJECTION TEZEPELUMAB-EKKO 1 MG	HCPCS-DRUGS (NOT ORAL)	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	J9332	INJ EFGARTIGIMOD ALFA-FCAB 2MG	HCPCS-DRUGS (NOT ORAL)	YES	07/01/2022	12/31/2078			

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MMAI-Medicare/Medicaid	0330U	IADNA VAG PTHGN PANEL 27 ORG	PATH & LAB-PROPRIETARY LAB ANA	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0721T	QUAN CT TISS CHARAC W/O CT	CATEGORY III CODES	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0726T	RMVL IMPLT VSTIBULAR DEV UNI	CATEGORY III CODES	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0716T	CAR ACOUS WAVFRM REC CAD RSK	CATEGORY III CODES	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0735T	PREP TUM CAV IORT PRIM CRNOT	CATEGORY III CODES	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0730T	TRABECULOTOMY LSR W/OCT GDN	CATEGORY III CODES	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	A9596	GA GA-68 GOZETOTD DX ILLUCCIX 1 MCI	HCPCS-ADMIN MISC & INVEST	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	A9601	FLORTAUCIPIR F 18 INJ DIAG 1 MCI	HCPCS-ADMIN MISC & INVEST	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	Q4260	SIGNATURE APATCH PER SQ CM	HCPCS - TEMP CODES	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	G0211	PET IMAGING WHOLE BODY; INITIAL STAGING; LUNG CANCER; NON-SM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	J1306	INJECTION INCLISIRAN 1 MG	HCPCS-DRUGS (NOT ORAL)	YES	07/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	C9087	INJ CYCLOPHOSPHAMIDE AUROMEDC 10 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	C9086	INJECTION ANIFROLUMAB-FNIA 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	C9085	INJ AVALGLUCOSIDASE ALFA-NGPT 4 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2022	12/31/2078			

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MMAI-Medicare/Medicaid	C9084	INJ LONCASTUXIM TESIRIN LPYL 0.1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			For oncology treatment, please contact NantHealth via their web portal, Eviti Connect, which will expedite clinical review of any chemotherapy, radiation therapy, or supportive medications that require prior-authorization at https://connect.eviti.com, 1-888-482-8057. For non-cancer treatment, please follow Aetna Prior Authorization Process.
MMAI-Medicare/Medicaid	90739	HEPB VACC 2/4 DOSE ADULT IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0229U	BCAT1&IKZF1 PRMTR MTHLN ALYS	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	0016M	ONC BLADDER MRNA 219 GEN ALG	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	V5282	ALD PERS FM/DM SYS BINAURL ANY TYPE	HCPCS - HEARING SERVICES	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	V2520	CNTC LENS HYDROPHIL SPHERICAL LENS	HCPCS - VISION SERVICES	NO	05/01/2022	05/31/2022			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	T2025	WAIVER SERVICES; NOS	HCPCS - STATE MEDICAID AGENCY	NON-COV	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	S9590	HOM TX IRRIG TX; W/ADMN-PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	S9504	HIT ABX ANTIVIRL/ANTIFUNGAL; Q4 HRS	HCPCS - TEMP NATIONAL CODES	NON-COV	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	S9490	HIT CORTICOSTEROID INFUS; ADMN SRVC	HCPCS - TEMP NATIONAL CODES	NON-COV	05/01/2022	05/31/2022	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9475	AMB SET SBSTNC ABS TX/DTOX SRVC DAY	HCPCS - TEMP NATIONAL CODES	NON-COV	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	S9377	HIT HYDRATION TX; GT 3 LITERS DAY	HCPCS - TEMP NATIONAL CODES	NON-COV	05/01/2022	05/31/2022	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9376	HIT HYDRAT; GT 2 LITR NOGT 3 LITR DAY	HCPCS - TEMP NATIONAL CODES	NON-COV	05/01/2022	05/31/2022	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9365	HIT TPN; 1 LITER PER DAY PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	05/01/2022	05/31/2022	Regulatory Compliance		

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MMAI-Medicare/Medicaid	S9363	HIT ANTI-SPASMOTIC TX; PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	05/01/2022	05/31/2022	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9361	HIT DIURETIC IV TX; PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	05/01/2022	05/31/2022	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9359	HIT ANTI-TUMR NECROS FACTOR IV TX;	HCPCS - TEMP NATIONAL CODES	NON-COV	05/01/2022	05/31/2022	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9348	HIT SYMPATHOMIMETIC/INOTROPIC DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	05/01/2022	05/31/2022	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9341	HT; ENTERL NUTRIT VIA GRAVITY; DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	05/01/2022	05/31/2022	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9331	HIT INTERMIT CHEMOTHAPY INFUS; DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	05/01/2022	05/31/2022	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9328	HIT IMPLANTED PUMP PAIN MGMT; DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	05/01/2022	05/31/2022	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9326	HIT CONT PAIN MGMT INFUS; PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	05/01/2022	05/31/2022	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9213	HOME MANAGEMENT PREECLAMPSIA; DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	S9211	HOME MGMT GESTATIONAL HTN; DIEM	HCPCS - TEMP NATIONAL CODES	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	S9127	SOCIAL WORK VISIT THE HOME PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	S5517	HIT SPL RESTOR CATH PATENCY/DECLOT	HCPCS - TEMP NATIONAL CODES	NON-COV	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	S5502	HIT CATH CARE IMPL ACSS DEVC PD	HCPCS - TEMP NATIONAL CODES	NON-COV	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	S2411	FETOSCOPIC LASER THERAPY TX OF TTTS	HCPCS - TEMP NATIONAL CODES	NON-COV	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	Q5004	HOSPICE CARE PROVIDED IN SNF	HCPCS - TEMP CODES	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	Q5002	HOSPICE/HHC PROV ASSTD LIVING FACL	HCPCS - TEMP CODES	NO	05/01/2022	05/31/2022			

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MMAI-Medicare/Medicaid	L8694	AUD OI DVC TRNSDUCR/ACTUATR REPL EA	HCPCS - PROSTHETIC PROCED	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	L8613	OSSICULA IMPLANT	HCPCS - PROSTHETIC PROCED	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	L8604	INJ BULKING AGT URINARY TRACT 1 ML	HCPCS - PROSTHETIC PROCED	NON-COV	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	L6687	UP EXT ADD FRME TYPE SCKT BELW ELB	HCPCS - PROSTHETIC PROCED	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	L5973	ENDO ANK FOOT MICROPROCSS CNTRL PWR	HCPCS - PROSTHETIC PROCED	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	K0071	FRT C ASM COMPL PN TIRE REPL ONLY E	HCPCS - K CODES -DMERCS ONLY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	K0070	RW ASM CMP PN T SPKS/MLD RPL ONLY E	HCPCS - K CODES -DMERCS ONLY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	K0056	SEAT HTLT 17/EQU GT 21 IN LTWT/ULTRLT WC	HCPCS - K CODES -DMERCS ONLY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	K0051	CAM RLS ASSM FTRST/LGRST RPL ONLY E	HCPCS - K CODES -DMERCS ONLY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	K0044	FOOTREST UPR HGR BRKT REPL ONLY EA	HCPCS - K CODES -DMERCS ONLY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	K0041	LARGE SIZE FOOTPLATE EACH	HCPCS - K CODES -DMERCS ONLY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	K0039	LEG STRAP H STYLE EACH	HCPCS - K CODES -DMERCS ONLY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	K0018	DTACH ADJ HT ARMRST UP PRTN REPL EA	HCPCS - K CODES -DMERCS ONLY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	H0026	ALCOHL&/RX PREV PRC SRVC CMTY-BASED	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	H0024	BHVAL HLTH PRV INFORM DISSEMIN SRVC	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	H0023	BEHAVIORAL HEALTH OUTREACH SERVICE	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	05/01/2022	05/31/2022			

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MMAI-Medicare/Medicaid	G0270	MED NUT TX; REASSESS W/PT EA 15 MIN	HCPCS - PROC/PROF SERVICES (TE	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	G0177	TRN&ED PTS DISABL MENTL HLTH-SESS	HCPCS - PROC/PROF SERVICES (TE	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E8002	GAIT TRAINER PED SZ ANT SUPP	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E2606	PSTN WC SEAT CSHN WDTH 22IN/GT DPTH	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E2390	PWR WC SOLID WHEEL TIRE REPL EACH	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E2389	PWR WC FORM CASTER TIRE REPL EACH	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E2381	PWR WC PNEUMATIC WHEEL TIRE REPL EA	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E2378	POWER WC CMPNT ACTUATOR REPL ONLY	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E2375	PWR WC NONEXPANDBLE CONTROLLER REPL	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E2373	PWR WC MINI COMPACT REMOTE JOYSTICK	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E2221	MNL WC AC SLD C TIR SZ REPL ONLY EA	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E2220	MNL WC AC SLD PROP T SZ RPL ONLY EA	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E2217	MNL WC ACCSS FOAM FILL CASTER TIRE	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E2216	MNL WC ACSS FOAM FILL PROPULSN TIRE	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E2212	MNL WC TUBE PNEUMAT PROPULSION TIRE	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E1801	STATIC PROGRESSV STRETCH ELBOW DEVC	HCPCS - DME	NO	05/01/2022	05/31/2022			

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MMAI-Medicare/Medicaid	E1297	SPECIAL WHLCHAIR SEAT DEPTH UPHLSTR	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E1240	LGHTWT WHLCHAIR; DTACH ARMS LEGRSTS	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E1222	WHEELCHAIR W/FIX ARM ELEV LEGRESTS	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E1160	WHLCHAIR; FIX ARMS DTACHBL LEGRESTS	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E1130	STD WHLCHAIR; FIX ARM DTACH FOOTRST	HCPCS - DME	NON-COV	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E1100	SEMI-RECLN WHLCHR;FIX ARM DTACH LEG	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E1035	MX-PSTN PT TRNSF SYS PT LT /EQU 300 LBS	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E0982	WC ACSS BACK UPHLSTER REPL ONLY EA	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E0959	MNL WC ACCSS ADAPTER FOR AMPUTEE EA	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E0660	NONSEG PNEUMAT APPLINC FULL LEG	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E0656	SEG PNEUMAT APPLINC W/COMPRS TRUNK	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E0642	STAND FRAME/TABLE SYS MOBILE ANY SZ	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E0480	PERCUSSOR ELEC/PNEUMAT HOME MODEL	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E0444	PORTBL O2 CONTENT LIQ 1 MO SPLEQU 1 U	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	E0316	SFTY ENCLOS FRME/CANOPY W/HOSP BED	HCPCS - DME	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	D9239	IV MOD SEDAT/ANALGESIA-1ST 15 MINS	HCPCS-DENTAL-Anesthesia	NO	05/01/2022	05/31/2022			

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MMAI-Medicare/Medicaid	D9223	DS/GEN ANES-EA SUBSQT 15 MIN INCR	HCPCS-DENTAL-UNKNOWN	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	D9222	DEEP SEDATION/GEN ANES-1ST 15 MINS	HCPCS-DENTAL-Anesthesia	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	C9739	CYSTOSCPY INSRT TRNSPRSTAT IMPL;1-3	HCPCS - C CODES - OUTPATIENT PP	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	C8908	MR NO CONTRST FLW CNTRST BRST; BIL	HCPCS - C CODES - OUTPATIENT PP	NON-COV	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	B4104	ADDITIVE FOR ENTERAL FORMULA	HCPCS - ENTERAL & PARENTERAL	NON-COV	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	A8003	HELMET PROTECTIVE HARD CUSTOM FAB	HCPCS - MED-SURG SUPPLIES	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	0511T	RMVL&RINSJ SINUS TARSI IMPLT	CATEGORY III CODES	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	0335T	INSJ SINUS TARSI IMPLANT	CATEGORY III CODES	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	0075T	PERQ STENT/CHEST VERT ART	CATEGORY III CODES	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	0037U	TRGT GEN SEQ DNA 324 GENES	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	0032U	COMT GENE	Pathology & Laboratory	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	0031U	CYP1A2 GENE	Pathology & Laboratory	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	99502	HOME VISIT NB CARE	MEDICINE - HOME HEALTH PROCEDU	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	99501	HOME VISIT POSTNATAL	MEDICINE - HOME HEALTH PROCEDU	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	99500	HOME VISIT PRENATAL	MEDICINE - HOME HEALTH PROCEDU	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	93355	ECHO TRANSESOPHAGEAL (TEE)	MEDICINE - CARDIOVASCULAR	NO	05/01/2022	05/31/2022			

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MMAI-Medicare/Medicaid	92633	AUD REHAB POSTLING HEAR LOSS	MEDICINE - SPECIAL OTORHINOLAR	NON-COV	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	92630	AUD REHAB PRE-LING HEAR LOSS	MEDICINE - SPECIAL OTORHINOLAR	NON-COV	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	90876	PSYCHOPHYSIOLOGICAL THERAPY	MEDICINE - PSYCHIATRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	88377	M/PHMTRC ALYS ISHQUANT/SEMIQ	PATH & LAB - IMMUNOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	88291	CYTO/MOLECULAR REPORT	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	88289	CHROMOSOME STUDY ADDITIONAL	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	88285	CHROMOSOME COUNT ADDITIONAL	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	88280	CHROMOSOME KARYOTYPE STUDY	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	88275	CYTOGENETICS 100-300	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	88274	CYTOGENETICS 25-99	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	88273	CYTOGENETICS 10-30	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	88271	CYTOGENETICS DNA PROBE	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	88269	CHROMOSOME ANALYS AMNIOTIC	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	88262	CHROMOSOME ANALYSIS 15-20	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	87634	RSV DNA/RNA AMP PROBE	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	87507	IADNA-DNA/RNA PROBE TQ 12-25	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			

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MMAI-Medicare/Medicaid	86794	ZIKA VIRUS IGM ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81596	NFCT DS CHRNC HCV 6 ASSAYS	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81595	CARDIOLOGY HRT TRNSPL MRNA	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81541	ONC PROSTATE MRNA 46 GENES	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81540	ONCOLOGY TUM UNKNOWN ORIGIN	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81471	X-LINKED INTELLECTUAL DBLT	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81470	X-LINKED INTELLECTUAL DBLT	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81465	WHOLE MITOCHONDRIAL GENOME	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81460	WHOLE MITOCHONDRIAL GENOME	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81443	GENETIC TSTG SEVERE INH COND	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81442	NOONAN SPECTRUM DISORDERS	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81440	MITOCHONDRIAL GENE	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81430	HEARING LOSS SEQUENCE ANALYS	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81422	FETAL CHRMOML MICRODELTJ	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81411	AORTIC DYSFUNCTION/DILATION	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81410	AORTIC DYSFUNCTION/DILATION	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			

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MMAI-Medicare/Medicaid	81408	MOPATH PROCEDURE LEVEL 9	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81407	MOPATH PROCEDURE LEVEL 8	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81406	MOPATH PROCEDURE LEVEL 7	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81405	MOPATH PROCEDURE LEVEL 6	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81404	MOPATH PROCEDURE LEVEL 5	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81401	MOPATH PROCEDURE LEVEL 2	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81400	MOPATH PROCEDURE LEVEL 1	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81364	HBB FULL GENE SEQUENCE	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81361	HBB GENE COM VARIANTS	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81355	VKORC1 GENE	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81350	UGT1A1 GENE COMMON VARIANTS	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81342	TRG GENE REARRANGEMENT ANAL	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81340	TRB GENE REARRANGE AMPLIFY	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81335	TPMT GENE COM VARIANTS	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81332	SERPINA1 GENE	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81331	SNRPN/UBE3A GENE	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			

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MMAI-Medicare/Medicaid	81330	SMPD1 GENE COMMON VARIANTS	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81329	SMN1 GENE DOS/DELETION ALYS	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022		Once per lifetime benefit.	
MMAI-Medicare/Medicaid	81328	SLCO1B1 GENE COM VARIANTS	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81323	PTEN GENE DUP/DELET VARIANT	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81321	PTEN GENE FULL SEQUENCE	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81319	PMS2 GENE DUP/DELET VARIANTS	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81317	PMS2 GENE FULL SEQ ANALYSIS	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81314	PDGFRA GENE	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81311	NRAS GENE VARIANTS EXON 2&3	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81304	MECP2 GENE DUP/DELET VARIANT	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81302	MECP2 GENE FULL SEQ	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81301	MICROSATELLITE INSTABILITY	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81300	MSH6 GENE DUP/DELETE VARIANT	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81298	MSH6 GENE FULL SEQ	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81297	MSH2 GENE DUP/DELETE VARIANT	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81295	MSH2 GENE FULL SEQ	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			

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MMAI-Medicare/Medicaid	81294	MLH1 GENE DUP/DELETE VARIANT	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81293	MLH1 GENE KNOWN VARIANTS	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81292	MLH1 GENE FULL SEQ	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81291	MTHFR GENE	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81290	MCOLN1 GENE	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81288	MLH1 GENE	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81283	IFNL3 GENE	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81276	KRAS GENE ADDL VARIANTS	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81275	KRAS GENE VARIANTS EXON 2	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81272	KIT GENE TARGETED SEQ ANALYS	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81270	JAK2 GENE	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81269	HBA1/HBA2 GENE DUP/DEL VRNTS	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81267	CHIMERISM ANAL NO CELL SELEC	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81265	STR MARKERS SPECIMEN ANAL	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81260	IKBKAP GENE	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81259	HBA1/HBA2 FULL GENE SEQUENCE	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			

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MMAI-Medicare/Medicaid	81257	HBA1/HBA2 GENE	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81256	HFE GENE	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81255	HEXA GENE	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81252	GJB2 GENE FULL SEQUENCE	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81251	GBA GENE	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81245	FLT3 GENE	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81242	FANCC GENE	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81241	F5 GENE	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81240	F2 GENE	PATH & LAB - MICROBIOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81236	EZH2 GENE FULL GENE SEQUENCE	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81235	EGFR GENE COM VARIANTS	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81234	DMPK GENE DETC ABNOR ALLELE	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81232	DPYD GENE COMMON VARIANTS	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81231	CYP3A5 GENE COMMON VARIANTS	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81230	CYP3A4 GENE COMMON VARIANTS	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81229	CYTOG ALYS CHRML ABNR SNPCGH	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			

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MMAI-Medicare/Medicaid	81227	CYP2C9 GENE COM VARIANTS	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81226	CYP2D6 GENE COM VARIANTS	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81225	CYP2C19 GENE COM VARIANTS	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81223	CFTR GENE FULL SEQUENCE	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81219	CALR GENE COM VARIANTS	PATH & LAB - CHEMISTRY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81203	APC GENE DUP/DELET VARIANTS	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81202	APC GENE KNOWN FAM VARIANTS	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81201	APC GENE FULL SEQUENCE	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81189	CSTB GENE FULL GENE SEQUENCE	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81173	AR GENE FULL GENE SEQUENCE	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81170	ABL1 GENE	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81161	DMD DUP/DELET ANALYSIS	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81121	IDH2 COMMON VARIANTS	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	81120	IDH1 COMMON VARIANTS	PATH & LAB - CYTOGENETIC STUDI	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	77318	BRACHYTX ISODOSE COMPLEX	RADIOLOGY - RADIATION ONCOLOGY	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	67916	REPAIR EYELID DEFECT	SURGERY - EYE AND OCULAR ADNEX	NO	05/01/2022	05/31/2022			

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MMAI-Medicare/Medicaid	67911	REVISE EYELID DEFECT	SURGERY - EYE AND OCULAR ADNEX	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	65782	OCULAR RECONST TRANSPLANT	SURGERY - EYE AND OCULAR ADNEX	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	65780	OCULAR RECONST TRANSPLANT	SURGERY - EYE AND OCULAR ADNEX	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	65779	COVER EYE W/MEMBRANE SUTURE	SURGERY - EYE AND OCULAR ADNEX	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	65757	PREP CORNEAL ENDO ALLOGRAFT	SURGERY - EYE AND OCULAR ADNEX	NON-COV	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	65756	CORNEAL TRNSPL ENDOTHELIAL	SURGERY - EYE AND OCULAR ADNEX	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	65730	CORNEAL TRANSPLANT	SURGERY - EYE AND OCULAR ADNEX	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	65710	CORNEAL TRANSPLANT	SURGERY - EYE AND OCULAR ADNEX	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	43881	IMPL/REDO ELECTRD ANTRUM	SURGERY - DIGESTIVE SYSTEM	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	41830	REMOVAL OF GUM TISSUE	SURGERY - DIGESTIVE SYSTEM	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	41828	EXCISION OF GUM LESION	SURGERY - DIGESTIVE SYSTEM	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	41826	EXCISION OF GUM LESION	SURGERY - DIGESTIVE SYSTEM	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	41825	EXCISION OF GUM LESION	SURGERY - DIGESTIVE SYSTEM	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	41823	EXCISION OF GUM LESION	SURGERY - DIGESTIVE SYSTEM	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	36516	APHERESIS IMMUNOADS SLCTV	SURGERY - CARDIOVASCULAR SYSTE	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	33274	TCAT INSJ/RPL PERM LDLS PM	SURGERY - CARDIOVASCULAR	NO	05/01/2022	05/31/2022			

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MMAI-Medicare/Medicaid	33270	INS/REP SUBQ DEFIBRILLATOR	SURGERY - CARDIOVASCULAR SYSTE	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	29126	APPLY FOREARM SPLINT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	21743	REPAIR STERNUM/NUSS W/SCOPE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	21740	RECONSTRUCTION OF STERNUM	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	10010	FNA BX W/CT GDN EA ADDL	SURGERY - INTEGUMENTARY SYSTEM	NO	05/01/2022	05/31/2022			
MMAI-Medicare/Medicaid	D1714	PFIZR-BIONTCH COV-19 VA TS PD-2ND D	HCPCS - DENTAL	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	D1713	PFIZR-BIONTCH COV-19 VA TS PD-1ST D	HCPCS - DENTAL	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	D1712	JANSSEN COVID-19 VAC ADM-BSTR DOSE	HCPCS - DENTAL	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	D1711	MODERNA COVID-19 VAC ADM-BSTR DOSE	HCPCS - DENTAL	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	D1710	MODERNA COVID-19 VACCINE ADM-3RD D	HCPCS - DENTAL	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	D1709	PFIZR-BIONTECH COVD-19 V ADM-BSTR D	HCPCS - DENTAL	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	D1708	PFIZER-BIONTECH COVID-19 VA-3RD D	HCPCS - DENTAL	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	D1707	JANSSEN COVID-19 VACCINE ADMIN	HCPCS - DENTAL	NO	01/01/2021	01/01/2021			
MMAI-Medicare/Medicaid	D1706	ASTRAZENECA COV-19 VAC ADM - 2ND D	HCPCS - DENTAL	NO	01/01/2021	01/01/2021			
MMAI-Medicare/Medicaid	D1705	ASTRAZENECA COVID-19 VAC ADM - FD	HCPCS - DENTAL	NO	01/01/2021	01/01/2021			
MMAI-Medicare/Medicaid	D1704	MODERNA COVID-19 VAC ADM - 2ND DOSE	HCPCS - DENTAL	NO	01/01/2021	01/01/2021			

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MMAI-Medicare/Medicaid	D1703	MODERNA COVID-19 VAC ADM - 1ST DOSE	HCPCS - DENTAL	NO	01/01/2021	01/01/2021			
MMAI-Medicare/Medicaid	D1702	PFIZER-BIONTCH COV-19 VAC ADM-2ND D	HCPCS - DENTAL	NO	01/01/2021	01/01/2021			
MMAI-Medicare/Medicaid	D1701	PFIZER-BIONTECH COVID-19 VAC ADM-FD	HCPCS - DENTAL	NO	01/01/2021	01/01/2021			
MMAI-Medicare/Medicaid	K1034	PROV COVID-19 TST NP 1 TST CNT	PATH & LAB - MICROBIOLOGY	NO	04/04/2022	04/04/2022			
MMAI-Medicare/Medicaid	Q5116	INJ TRASTUZUMAB-QYYP BIOSIMLR 10 MG	HCPCS - TEMP CODES	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4226	MYOWN SK INCL HARV & PREP PROC P SC	HCPCS - TEMP CODES	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4222	PROGENAMATRIX PER SQ CM	HCPCS - TEMP CODES	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4221	AMNIO WRAP2 PER SQ CM	HCPCS - TEMP CODES	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4220	BELLACELL HD OR SUREDERM PER SQ CM	HCPCS - TEMP CODES	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4219	SURGIGRAFT-DUAL PER SQ CM	HCPCS - TEMP CODES	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4218	SURGICORD PER SQ CM	HCPCS - TEMP CODES	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4217	WNDFIX BIOWND WNDFIX + X + /X+ P SC	HCPCS - TEMP CODES	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4216	ARTACENT CORD PER SQ CM	HCPCS - TEMP CODES	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4215	AXOLOTL AMBIENT/AXOLOTL CRYO 0.1 MG	HCPCS - TEMP CODES	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4214	CELLESTA CORD PER SQ CM	HCPCS - TEMP CODES	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4213	ASCENT 0.5 MG	HCPCS - TEMP CODES	YES	09/13/2019	12/31/2078			

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MMAI-Medicare/Medicaid	Q4212	ALLOGEN PER CC	HCPCS - TEMP CODES	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4211	AMNION BIO/AXOBIOMEMBRANE PER SQ CM	HCPCS - TEMP CODES	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4209	SURGRAFT PER SQ CM	HCPCS - TEMP CODES	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4208	NOVAFIX PER SQ CM	HCPCS - TEMP CODES	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4206	FLUID FLOW OR FLUID GF 1 CC	HCPCS - TEMP CODES	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4205	MEMBRANE GFT/MEMBRANE WRAP P SQ CM	HCPCS - TEMP CODES	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	K1030	EXT RCHG SYS BAT IM CRD CCM GR ONLY	HCPCS-K CODES-DMERCS ONLY	NO	03/31/2022	03/31/2022			
MMAI-Medicare/Medicaid	0709T	ID CA IMMNTX EACH ADDL NJX	CATEGORY III CODES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	0708T	ID CA IMMNTX PREP & 1ST NJX	CATEGORY III CODES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	0700T	MOLEC FLUOR IMG SUS NEV 1ST	CATEGORY III CODES	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0699T	NJX PST CHMBR EYE MEDICATION	CATEGORY III CODES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	0696T	BDY SURF MAPG PM/CVDFB F/UP	CATEGORY III CODES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	0695T	BDY SRF MPG PM/CVDFB TM IMPL	CATEGORY III CODES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	0690T	QUAN US TIS CHARAC W/DX US	CATEGORY III CODES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	0689T	QUAN US TIS CHARAC W/O DX US	CATEGORY III CODES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	0686T	HISTOTRIPSY MAL HEPATCEL TIS	CATEGORY III CODES	YES	01/01/2022	12/31/2078			

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MMAI-Medicare/Medicaid	0685T	INTERROG DEV EVAL ISDSS IP	CATEGORY III CODES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	0684T	PERI-PX DEV EVAL ISDSS IP	CATEGORY III CODES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	0683T	PRGRMG DEV EVAL ISDSS IP	CATEGORY III CODES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	0682T	REMOVAL PULSE GEN ONLY ISDSS	CATEGORY III CODES	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0681T	RLCJ PULSE GEN ONLY ISDSS	CATEGORY III CODES	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0680T	INSJ/RPLCMT PG ONLY ISDSS	CATEGORY III CODES	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0679T	LAPS RMVL LEAD ISDSS	CATEGORY III CODES	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0678T	LAPS REPOS LEAD ISDSS EA ADD	CATEGORY III CODES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	0677T	LAPS REPOS LEAD ISDSS 1ST LD	CATEGORY III CODES	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0676T	LAPS INSJ NW/RPCMT ISDSS EA	CATEGORY III CODES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	0675T	LAPS INSJ NW/RPCMT ISDSS 1LD	CATEGORY III CODES	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0674T	LAPS INSJ NW/RPCMT PRM ISDSS	CATEGORY III CODES	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0673T	ABLTJ B9 THYR NDUL PERQ LASR	CATEGORY III CODES	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0671T	INSJ ANT SGM AQ DRG DEV 1+	CATEGORY III CODES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1145	MFN MODEL DRUG ADD-ON AMNT PER DOSE	HCPCS - MEDICAL SERVICES	EXPIRED	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	37183	REVISION TIPS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	Q0221	INJ TIXAGVMB&CILGVMB ADT&PED 600 MG	HCPCS - TEMP CODES	NO	02/24/2022	02/24/2022			
MMAI-Medicare/Medicaid	87913	NFCT AGT GNTYP ALYS SARSCOV2	PATH & LAB-CHEMISTRY	NO	02/21/2022	02/21/2022			
MMAI-Medicare/Medicaid	90759	HEP B VAC 3AG 10MCG 3 DOS IM	MEDICINE - VACCINES, TOXOIDS	NO	03/08/2022	03/08/2022			
MMAI-Medicare/Medicaid	M0222	IV INJ BEBTELOVIMAB INC INJ&PA MON	HCPCS - MEDICAL SERVICES	NO	02/11/2022	02/11/2022			
MMAI-Medicare/Medicaid	M0223	IV INJ BEBTLOVMB INJ&PA MON H/RES;	HCPCS - MEDICAL SERVICES	NO	02/11/2022	02/11/2022			
MMAI-Medicare/Medicaid	Q0222	INJECTION BEBTELOVIMAB 175 MG	HCPCS - TEMP CODES	NO	02/11/2022	02/11/2022			
MMAI-Medicare/Medicaid	C9507	FFP HT COV-19 CONV FRZ 8 H CLL EA U	HCPCS - C CODES - OUTPATIENT PP	NO	12/28/2021	12/28/2021			
MMAI-Medicare/Medicaid	22520	PERCUTANEOUS VERTEBROPLSTY THORACIC W/WO BONE BX	SURGERY - MUSCULOSKELETAL SYST	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	22521	PERCUTANEOUS VERTEBROPLASTY LUMBAR W/WO BNE BX	SURGERY - MUSCULOSKELETAL SYST	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	22522	PERCUTANEOUS VERTEBROPLASTY EA ADDL THRC/LMBR	SURGERY - MUSCULOSKELETAL SYST	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	22524	PERCUTANEOUS VERTEBRAL AUGMENTATION LUMBAR	SURGERY - MUSCULOSKELETAL SYST	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	22525	PERQ VERTEBRAL AUGMENTATION EA ADDL THRC/LMBR	SURGERY - MUSCULOSKELETAL SYST	YES	10/03/2016	12/31/2078	Carve Out		For Prior Auth please contact eviCore: WWW.EVICORE.COM, phone 888-693-3211 or Fax 844-822-3862
MMAI-Medicare/Medicaid	M0221	INJ TIXAGVMB&CILGVMB INJ&PA MON HO;	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M0220	INJ TIXAGVMB&CILGVMB INC INJ&PA MON	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	J0248	INJECTION REMDESIVIR 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/23/2021	12/23/2021			
MMAI-Medicare/Medicaid	Q0220	INJ TIXAGVMB&CILGVMB ADT&PED 300 MG	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			

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MMAI-Medicare/Medicaid	M1149	PT UN CMPL NCK FS PROM INIT EV&/D/C	HCPCS - MEDICAL SERVICES	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	M1148	ONGNG CARE NOT POSS PT SLF-D/C ERLY	HCPCS - MEDICAL SERVICES	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	M1147	ONG CRE NOT MED PSS PT D/C E DOC MR	HCPCS - MEDICAL SERVICES	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	M1146	ONGNG CARE NOT INDC PT ND HP DOC MR	HCPCS - MEDICAL SERVICES	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	M1143	INIT EPI RH TH MED/CHIRO CR NK IMPR	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1142	EMERGENT CASES	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1141	FUNC ST NOT MSR OKS/KOOS JR 1 YR PO	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1135	THE START OF AN EOC DOC MED RECORD	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1134	ONGO C NO P D/C 1-2 V D/T SPC MD EV	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1132	ONGO CARE NOT IND PT ND REF OTH PRV	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1131	DOC STAT DX DEG NEURO CND DX TM EOC	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1130	ONGOING CARE NOT POSS SLF-D/C EARLY	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1128	ONGO CAR NOT IND PT ND REF OTH PROV	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1127	DOC PT DX DEG NEURO COND DX TM EOC	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1126	THE START OF AN EOC DOC MED RECORD	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1125	ONGO CARE NOT POSS PT SLF D/C EARLY	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			

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MMAI-Medicare/Medicaid	M1123	ONGO CR NOT IND PT NEED HM PROG REF	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1122	DOC PT DX DEGEN NEURO CND DX TM EOC	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1121	THE START OF AN EOC DOC MED RECORD	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1120	ONGO CARE NOT POSS PT SLF-D/C EARLY	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1119	ONGO CR NOT PS PT D/C ERLY DT ME EV	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1118	ONGOING CARE NO INDICAT PT ND HM PR	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1117	DOC PT DX DEGEN NEURO COND DX EOC	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1116	THE START OF AN EOC DOC MED RECORD	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1115	ONGOING CAR NOT PS PT SLF D/C EARLY	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1113	ONGOING CAR NOT CLNC INDIC PT ND HM	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1112	DOC PT DX DEG NEURO COND DX TM EOC	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1111	START OF EP OF CARE DOC MED RECRD	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1110	ONGO CAR NOT POSS BC PT SLF-DC ERLY	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1108	ONGO CR NOT CL IND PT ND HM PRG ONL	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1107	DOC PT DX DEG NEURO COND DX TM EOC	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	M1106	START EPISODE OF CARE DOC MED RECRD	HCPCS - MEDICAL SERVICES	NO	01/01/2020	01/01/2020			

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MMAI-Medicare/Medicaid	M0243	IVI/SCI CASIRIVIMAB & IMDEVIMAB	HCPCS - MEDICAL SERVICES	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	01942	ANES NEUROMD/NTRVRT LMBR/SAC	ANESTH - RADIOLOGICAL PROCEDUR	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	01941	ANES NEUROMD/NTRVRT CRV/THRC	ANESTH - RADIOLOGICAL PROCEDUR	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	01940	ANES NULYT AGT LMBR/SAC	ANESTH - RADIOLOGICAL PROCEDUR	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	01939	ANES NULYT AGT CRV/THRC	ANESTH - RADIOLOGICAL PROCEDUR	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	01938	ANES DRG/ASPIR LMBR/SAC	ANESTH - RADIOLOGICAL PROCEDUR	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	01937	ANES DRG/ASPIR CRV/THRC	ANESTH - RADIOLOGICAL PROCEDUR	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	D9948	ADJUSTMENT CUSTOM SLEEP APNEA APPL	HCPCS-DENTAL-Misc Svcs	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	D9912	PRE-VISIT PATIENT SCREENING	HCPCS-DENTAL-Oral Surg-Other	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	D6198	REMOVE INTERIM IMPLANT COMPONENT	HCPCS-DENTAL-Implant Svcs	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	D9949	REPAIR OF CUSTOM SLEEP APNEA APPL	HCPCS-DENTAL-Misc Svcs	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	D3911	INTRAORIFICE BARRIER	HCPCS- DENTAL-UNKNOWN	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1105	RAD THER UTERINE CA RAD ONC 90D TCH	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1104	RAD THER UTERINE CA RAD ONC 90D PRF	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1102	RAD THER UPPER GI CA RAD ONC 90D PF	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1101	RAD THER PROST CA RAD ONC 90DY TECH	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			

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MMAI-Medicare/Medicaid	M1100	RAD THER PROST CA RAD ONC 90DY PROF	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1099	RAD THER PANCR CA RAD ONC 90 D TECH	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1098	RAD THER PANCR CA RAD ONC 90 D PROF	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1097	RAD THERAPY LYMPHOMA RAD ON 90D TCH	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1096	RAD THERAPY LYMPHOMA RAD ON 90D PRF	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1095	RAD THER LUNG CANCER RAD ON 90D TCH	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1094	RAD THER LUNG CANCER RAD ON 90D PRF	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1089	RAD THER HD&NCK CA RAD ONC 90D TECH	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1088	RAD THER HD&NCK CA RAD ONC 90D PROF	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1103	RAD THER UPPER GI CA RAD ONC 90D TC	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1086	RAD THER COLOREC CA RAD ONC 90D PRF	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1087	RAD THER COLOREC CA RAD ONC 90D TCH	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1085	RAD THER CNS TUMORS RAD ONC 90D TCH	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1084	RAD THER CNS TUMORS RAD ONC 90D PRF	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1083	RAD THER CERVICAL CA RAD ON 90D TCH	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1082	RAD THER CERVICAL CA RAD ON 90D PRF	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			

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MMAI-Medicare/Medicaid	M1081	RAD THER BREAST CA RAD ONC 90D TECH	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1080	RAD THER BREAST CA RAD ONC 90D PROF	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1079	RAD THER BRAIN META RAD ONC 90D TCH	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1077	RAD THER BONE META RAD ONC 90D TECH	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1078	RAD THER BRAIN META RAD ONC 90D PRF	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1076	RAD THER BONE META RAD ONCL 90D PRF	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1075	RAD THER BLAD CA RAD ONC 90D TCH CP	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1074	RAD THER BLAD CA RAD ONC 90D PF CMP	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1072	RAD THER ANAL CA RAD ONC 90D PF CMP	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	M1073	RAD THER ANAL CA RAD ONC 90D TCH CM	HCPCS - MEDICAL SERVICES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G9998	DOC MED REAS INTV LT 3 YR LST COLONSC	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G9997	DOC PG DUR MEAS PRI TO&INCL CUR ENC	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G9996	DOC PT REC/OR CURR REC PALL/HOSPICE	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G9994	PT USE PALLIAT CAR SRV DUR MEAS PER	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G9993	PT PROV PALLIAT CAR SRV TIM DUR MSR	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G9992	PALLIATIVE USD PT ANY TIME DUR MEAS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			

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MMAI-Medicare/Medicaid	G9988	PALLIAT SRVC PROV TIME DUR MEAS PER	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4038	VASCULAR SURGERY MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4037	UROLOGY MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4036	URGENT CARE MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4035	THORACIC SURGERY MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4034	SPEECH LANGUAGE PATH MIPS SPEC SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4033	SKILLED NURS FACILITY MIPS SPECIALT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4032	RHEUMATOLOGY MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4031	RADIATION ONCOLOGY MIPS SPECIALTY	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4030	PULMONOLOGY MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4029	PREVENTIVE MEDICINE MIPS SPECIALTY	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4028	PODIATRY MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4027	PLASTIC SURGERY MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4026	PHYSICAL/OCCUPAT THER MIPS SPECIALT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4025	PHYSICAL MEDICINE MIPS SPECIALT SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4024	PEDIATRICS MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			

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MMAI-Medicare/Medicaid	G4023	PATHOLOGY MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4022	OTOLARYNGOLOGY MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4021	ORTHOPEDIC SURGERY MIPS SPECIAL SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4019	ONCOLOGY/HEMATOLOGY MIPS SPECIALTY	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4018	OBSTETRICS/GYNEC MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4017	NUTRITION/DIETIC MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4016	NEUROSURGICAL MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4015	NEUROLOGY MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4014	NEPHROLOGY MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4012	INTERVENTIONAL RADIOL MIPS SPECIALT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4011	INTERNAL MEDICINE MIPS SPECIALT SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4010	INFECTIOUS DISEASE MIPS SPECIALTY	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4009	HOSPITALISTS MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4008	GERIATRICS MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4007	GENERAL SURGERY MIPSSPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4006	GASTROENTEROLOGY MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			

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MMAI-Medicare/Medicaid	G4005	FAMILY MEDICINE MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4004	ENDOCRINOLOGY MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4003	EMERGENCY MEDICINE MIPS SPECIAL SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4002	ELECTROPHY CARDIAC SPC MIPS SPEC ST	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4001	DIAGNOSTIC RADIOLOGY MIPS SPECL SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G4000	DERMATOLOGY MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0065	CHIROPRACTIC MEDICINE MIPS SPEC SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G1028	TK HM NAS NALOX 2PK 8MG/0.1 ML NASL	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G1027	NUM AD M DEN HD LST HD MO CATH LT 3MO	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G1026	NUM ADT M DEN HD CTH 3LT M PRC LST HD	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G1025	PT MONTH GT 1 MCP PROV LIST FOR MONTH	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G1024	CLIN DEC SUP MCH RADRITE DEF MC APP	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0067	DENTISTRY MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0066	CLINICAL SOCIAL WORK MIPS SPEC SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0064	CERTIF NURSE MIDWIFE MIPS SPEC SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0063	CARDIOLOGY MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			

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MMAI-Medicare/Medicaid	G0062	AUDIOLOGY MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0061	ANESTHESIOLOGY MIPS SPECIALTY SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0060	ALLERGY/IMMUNOLOGY MIPS SPECIAL SET	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0059	PT SAFETY SUP POS EXP ANES MIPS VAL	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0058	IMPROV CARE LW EXTR JNT REPAIR MIPS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0057	PROP ADPT PRCT PRM SFTY EM MED MIPS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0055	ADVNC CARE HEART DIS MIPS VAL PTHWY	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0054	COORD STROK PRV CULT +OUT MIPS PATH	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0053	ADVANC RHEUMAT PT MIPS VALUE PATHWY	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0052	PT PERITONEAL DIALY ANY PRT RPT MTH	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0051	PT HOSPICE CARE CURRENT REPORT MNTH	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0050	PT W/CATHETER HV LIMITD LIFE EXPECT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0049	W MAINT HEMODIALYSIS CMPL RPT MONTH	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0048	PT RC PALLIAT CR INTK PER END MS YR	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0047	PED BLNT HD TRMA &PECARN NOT ASSESS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0046	CLIN MRS SCR NOT AS 90D FLW EV STRK	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			

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MMAI-Medicare/Medicaid	G0045	CLIN FU MRS SCR 90DAY FLW EV STROKE	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0044	PT W/ MOD OR SEVERE MITRAL STENOSIS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0043	PT W/ MECHANICAL PROSTH HEART VALVE	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0042	REF PHYS OCCUP SPEECH/ RECREAT THER	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0041	PT AND/OR CARE PARTNER DECLINE REF	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0040	PT RECV PHYS/OCC/SP/REC THER DURING	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0039	PATIENT NOT REFERRED REASON NOS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0038	CLINICIAN DET PT DOES NOT REQ REFER	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0037	PT NOT ASSESS NVB DEL APH DV VIS/HR	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0036	PT OR CARE PARTNER DECLINE ASSESMNT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0035	PT ED ENC DUR PERF PR W/ POS IND 23	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0034	PT REC PALLIATIVE CARE DUR MEAS PER	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0033	2LT BENZOD SEIZ REM BNZ ETH GAD IPSD	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0032	2LT ANTIPSYCH RX SCZ BP 1/1 YR RX AP	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	G0031	PALLIAT CR SRV GVN PT TIME DUR MEAS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	C9089	BUPIVAC COLLAGEN-MATRIX IMPLNT 1 MG	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2022	01/01/2022			

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MMAI-Medicare/Medicaid	C9088	INSTL BUPIV &MELOXICAM 1 MG/0.03 MG	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	A4437	IRRIGATION SUPPLY SLV DISP PER MNTH	HCPCS - MED-SURG SUPPLIES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	A4436	IRRIGATION SUPPLY SLV REUSE PER MTH	HCPCS - MED-SURG SUPPLIES	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	93598	CAR OUTP MEAS DRG CATH CHD	MEDICINE - CARDIOVASCULAR	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	33268	EXCL LAA OPN OTH PX ANY METH	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	99437	CHRNC CARE MGMT PHYS EA ADDL	MEDICINE-NON-FACE-TO-FACE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	99427	PRIN CARE MGMT STAFF EA ADDL	E & M-PREVENTIVE MEDICINE SE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	99426	PRIN CARE MGMT STAFF 1ST 30	E & M-PREVENTIVE MEDICINE SE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	99425	PRIN CARE MGMT PHYS EA ADDL	E & M-PREVENTIVE MEDICINE SE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	99424	PRIN CARE MGMT PHYS 1ST 30	E & M-PREVENTIVE MEDICINE SE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	98981	REM THER MNTR EA ADDL 20 MIN	MEDICINE-NON-FACE-TO-FACE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	98980	REM THER MNTR 1ST 20 MIN	MEDICINE-NON-FACE-TO-FACE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	98977	REM THER MNTR DV SPLY MSCSKL	MEDICINE-NON-FACE-TO-FACE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	98976	REM THER MNTR DEV SPLY RESP	MEDICINE-NON-FACE-TO-FACE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	94626	PHY/QHP OP PULM RHB W/MNTR	MEDICINE - PULMONARY	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	94625	PHY/QHP OP PULM RHB W/O MNTR	MEDICINE - PULMONARY	NO	01/01/2022	01/01/2022			

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MMAI-Medicare/Medicaid	87154	CUL TYP ID BLD PTHGN 6+ TRGT	PATH & LAB - MICROBIOLOGY	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	86363	MOG-IGG1 ANTB FLO CYTMTRY EA	PATH & LAB - IMMUNOLOGY	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	86362	MOG-IGG1 ANTB CBA EACH	PATH & LAB - IMMUNOLOGY	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	86053	AQAPRN-4 ANTB FLO CYTMTRY EA	PATH & LAB - IMMUNOLOGY	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	86052	AQUAPORIN-4 ANTB CBA EACH	PATH & LAB - IMMUNOLOGY	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	86051	AQUAPORIN-4 ANTB ELISA	PATH & LAB - IMMUNOLOGY	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	86015	ACTIN ANTIBODY EACH	PATH & LAB - IMMUNOLOGY	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	82653	EL-1 FECAL QUANTITATIVE	PATH & LAB - CHEMISTRY	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	80506	PATH CLIN CONSLTJ PROLNG SVC	PATH & LAB - CONSULTATIONS (CL	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	80505	PATH CLIN CONSLTJ HIGH 41-60	PATH & LAB - CONSULTATIONS (CL	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	80504	PATH CLIN CONSLTJ MOD 21-40	PATH & LAB - CONSULTATIONS (CL	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	80503	PATH CLIN CONSLTJ SF 5-20	PATH & LAB - CONSULTATIONS (CL	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	80220	DRUG ASY HYDROXYCHLOROQUINE	PATH & LAB - CONSULTATIONS (CL	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	64629	TRML DSTRJ IOS BVN EA ADDL	SURGERY - NERVOUS SYSTEM	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	63053	LAM FACTC/FRMT ARTHRD LUM EA	SURGERY - NERVOUS SYSTEM	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	63052	LAM FACETC/FRMT ARTHRD LUM 1	SURGERY - NERVOUS SYSTEM	NO	01/01/2022	01/01/2022			

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MMAI-Medicare/Medicaid	33509	NDSC HRV UXTR ART 1 SGM CAB	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	33370	TCAT PLMT&RMVL CEPD PERQ	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	64584	RMVL HPGLSL NSTIM ARY PG	SURGERY - NERVOUS SYSTEM	NO	01/01/2022	01/01/2022			
MMAI-Medicare/Medicaid	C9083	INJECTION AMIVANTAMAB VMJW 10 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			For oncology treatment, please contact NantHealth via their web portal, Eviti Connect, which will expedite clinical review of any chemotherapy, radiation therapy, or supportive medications that require prior-authorization at https://connect.eviti.com, 1-888-482-8057. For non-cancer treatment, please follow Aetna Prior Authorization Process.
MMAI-Medicare/Medicaid	C9082	INJECTION DOSTARLIMAB GXLY 100 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			For oncology treatment, please contact NantHealth via their web portal, Eviti Connect, which will expedite clinical review of any chemotherapy, radiation therapy, or supportive medications that require prior-authorization at https://connect.eviti.com, 1-888-482-8057. For non-cancer treatment, please follow Aetna Prior Authorization Process.
MMAI-Medicare/Medicaid	D4322	SPLINT - INTRA-COR; NT/PROSTH CR	HCPCS- DENTAL-UNKNOWN	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	D5228	IMMED MAND PRTL DENTURE - FLEX BASE	HCPCS- DENTAL-Denture-Partial	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	61736	LITT ICR 1 TRAJ 1 SMPL LES	SURGERY - NERVOUS SYSTEM	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	33269	EXCL LAA THRSCP ANY METHOD	SURGERY - CARDIOVASCULAR SYSTE	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	33897	PERQ TRLUML ANGP NT/RECR COA	SURGERY - CARDIOVASCULAR SYSTE	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0298U	ONC PAN TUM WHL TRNS SEQ RNA	HCPCS - PATH & LAB	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	D7298	REMOVAL OF TEMP ANCH DEVC REQR FLAP	HCPCS-DENTAL-Oral Surg-Other	YES	01/01/2022	12/31/2078			

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MMAI-Medicare/Medicaid	D9947	CUSTOM SLEEP APNEA APPL FAB & PLCMT	HCPCS- DENTAL-Misc Svcs	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	C1833	MNTR CARD INC IC LEAD &ALL SYS COMP	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	61737	LITT ICR MLT TRJ MLT/CPLX LS	SURGERY - NERVOUS SYSTEM	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	D5765	SOFT LNR CMPL/PRTL REM DNTR - INDIR	HCPCS- DENTAL-Denture Reline	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0287U	ONC THYR DNA&MRNA 112 GENES	HCPCS - PATH & LAB	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	33895	EVASC ST RPR THRC/AA X CRSG	SURGERY - CARDIOVASCULAR SYSTE	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0297U	ONC PAN TUM WHL GEN SEQ DNA	HCPCS - PATH & LAB	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0285U	ONC RSPS RADJ CLL FR DNA TOX	HCPCS - PATH & LAB	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	D4323	SPLINT - EXTRA-COR; NT/PROSTH CR	HCPCS- DENTAL-UNKNOWN	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	D5725	REBASE HYBRID PROSTHESIS	HCPCS- DENTAL-Denture-Partial	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	J0172	INJECTION, ADUCANUMAB-AVWA 2 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	E1629	TABLO HEMO SYS BILLABLE DIALYSIS SV	HCPCS - DME	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	D3921	DECORONATION/SUBMG ERUPTED TOOTH	HCPCS- DENTAL-UNKNOWN	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	D5227	IMMED MAX PRTL DENTURE - FLEX BASE	HCPCS- DENTAL-Denture-Partial	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0288U	ONC LUNG MRNA QUAN PCR 11&3	HCPCS - PATH & LAB	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	A2003	BIO-CONNEKT WOUND MATRIX PER SQ CM	HCPCS - MED-SURG SUPPLIES	YES	01/01/2022	12/31/2078			

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MMAI-Medicare/Medicaid	33267	EXCL LAA OPEN ANY METHOD	SURGERY - CARDIOVASCULAR SYSTE	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	33894	EVASC ST RPR THRC/AA ACRS BR	SURGERY - CARDIOVASCULAR SYSTE	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0296U	ONC ORL&/OROP CA 20 MLC FEAT	HCPCS - PATH & LAB	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	C1832	AGRFT SUSP IN CELL PC &APPL SYS COM	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	Q4199	CYGNUS MATRIX PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	D7299	REMOVAL OF TEMP ANCH DEVC REQR FLAP	HCPCS-DENTAL-Oral Surg-Other	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	D7300	REMOVAL OF TEMP ANCH DEVC W/O FLAP	HCPCS-DENTAL-Oral Surg-Other	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	0295U	ONC BRST DUX CARC 7 PROTEINS	HCPCS - PATH & LAB	YES	01/01/2022	12/31/2078			
MMAI-Medicare/Medicaid	S0201	PART HOSPITALIZATN SRVCLT 24 HR-DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	09/02/2014	12/31/2078			
MMAI-Medicare/Medicaid	G9928	FDA APV ANTICG NOT PRSC RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9906	PT ID TOBAC USER RECV TOB CESS INTV	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9822	WOMEN HAD EA DUR 12 MO PRI INDEX DT	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9782	HX OF/ACTV DX FAMILIAL HYPERCHOLEST	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9780	PT HAVE DX RHABDOMYOLYSIS DUR MSRMT	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9779	PT WHO ARE BREASTFEEDING MSMNT PER	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9582	DOOR TO PUNC TIME GT 90 MIN NO RS GVN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			

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MMAI-Medicare/Medicaid	G9580	DOOR TO PUNC TIME OF 90 MIN OR LESS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9557	F RPT CT/A MRI C/NCK WO TH NDLT 1.0 C	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9556	F RT CT CTA MRI/A CH/N FU IMG NT RC	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9554	FNL RT CT CTA MRI/MRA CH/N FU IM RC	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9425	PRIM LUNG CA RSC DOES NOT DOC PT CT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9422	PRIM LUNG CA RESC RPT DOC PT CAT PN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9368	AT LST 2 ORD HIGH RSK MED SM NT ORD	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9367	AT LST 2 ORD HGH-RK MED SM DRUG CLS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9361	MED INDICAT DEL C/S OR INDUCT LABOR	HCPCS - PROC/PROF SERVICES (TE	NO	11/04/2014	11/04/2014			
MMAI-Medicare/Medicaid	G9356	ELEC DEL BY C/SECT /INDUC LABR PERF	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9355	ELEC DEL C-BIRTH/INDUC LBR NOT PERF	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G8969	DOC PT RSN NT RX ORL AC FDA APV TE	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8967	FDA APPR ORAL ANTICOAGULANT PRESCRB	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8952	ELVTD/HTN BP DOC F/U NOT RSN NOT GV	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8950	ELVATE/HTN BP DOC & INDICAT F/U DOC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8433	SCR DEPR NOT COMPLT DOCUMENTED RSN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G2215	TAKE H SPLY NSL NLX 2PK LST SEP ADD	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2175	EPIS PT COMORBID CND DUR 12M EPIS D	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2173	URI EP PT COMORBD CND DUR 12M EP DT	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2150	MULTIMODAL PAIN MGMNT WAS NOT USED	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2148	MULTIMODAL PAIN MANAGEMENT WAS USED	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2122	DEPRS ANX APATHY & PSYCH NOT ASSESS	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2121	DEPRESSION ANXT APATHY & PSY ASSESS	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2097	EP PT HAD COMPET DX 3 DAY AFT EP DT	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	D9613	INFIL SUSTAIN RLS TX DX PER QUAD	HCPCS - DENTAL	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	D0606	MOLECULAR TST PH REL PATH INCL COV	HCPCS- DENTAL-Tests and Lab	NO	01/01/2021	01/01/2021			
MMAI-Medicare/Medicaid	C9081	IDECABT VICLLT EQU 460MIL BCMA CAR+TC LK	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			For oncology treatment, please contact NantHealth via their web portal, Eviti Connect, which will expedite clinical review of any chemotherapy, radiation therapy, or supportive medications that require prior-authorization at https://connect.eviti.com, 1-888-482-8057. For non-cancer treatment, please follow Aetna Prior Authorization Process.
MMAI-Medicare/Medicaid	C9080	INJ MELPHALAN FLUFENAMIDE HCL 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			For oncology treatment, please contact NantHealth via their web portal, Eviti Connect, which will expedite clinical review of any chemotherapy, radiation therapy, or supportive medications that require prior-authorization at https://connect.eviti.com, 1-888-482-8057. For non-cancer treatment, please follow Aetna Prior Authorization Process.

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MMAI-Medicare/Medicaid	C9079	INJECTION EVINACUMAB-DGNB 5 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9078	INJECTION TRILACICLIB 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			For oncology treatment, please contact NantHealth via their web portal, Eviti Connect, which will expedite clinical review of any chemotherapy, radiation therapy, or supportive medications that require prior-authorization at https://connect.eviti.com, 1-888-482-8057. For non-cancer treatment, please follow Aetna Prior Authorization Process.
MMAI-Medicare/Medicaid	C9077	INJ CABOTEGRAVIR & RPV 2 MG/3 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9075	INJECTION CASIMERSEN 10 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9065	INJ ROMIDEPSIN NON-LYOPHILIZED 1MG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	99491	CHRNC CARE MGMT PHYS 1ST 30	E & M - PREVENTIVE MEDICINE SE	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	99490	CHRNC CARE MGMT STAFF 1ST 20	E & M - PREVENTIVE MEDICINE SE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	99439	CHRNC CARE MGMT STAF EA ADDL	E & M - PREVENTIVE MEDICINE SE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	99211	OFF/OP EST MAY X REQ PHY/QHP	E & M - OTHER E/M SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93656	COMPRE EP EVAL ABLTJ ATR FIB	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93654	COMPRE EP EVAL TX VT	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93653	COMPRE EP EVAL TX SVT	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	91111	GI TRC IMG INTRAL ESOPHAGUS	MEDICINE - GASTROENTEROLOGY	YES	03/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	91110	GI TRC IMG INTRAL ESOPH-ILE	MEDICINE - GASTROENTEROLOGY	YES	03/01/2016	12/31/2078			

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MMAI-Medicare/Medicaid	87810	CHLMYD TRACH ASSAY W/OPTIC	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82656	EL-1 FECAL QUAL/SEMIQ	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67145	PROPH RTA DTCHMNT PC	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67141	PROPH RTA DTCHMNT CRTX DTHRM	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64581	OPN IMPLTJ NEA SACRAL NERVE	SURGERY - NERVOUS SYSTEM	YES	10/03/2016	12/31/2078			
MMAI-Medicare/Medicaid	63197	LAM W/CORDOTOMY 1STG THRC	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63048	LAM FACETEC &FORAMOT EA ADDL	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63047	LAM FACETEC & FORAMOT LUMBAR	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63046	LAM FACETEC & FORAMOT THRC	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63045	LAM FACETEC & FORAMOT CRV	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	54352	REVJ PRIOR HYPSPAD REPAIR	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54348	RPR HYPSPAD COMP DSJ & URTP	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54344	RRP HYPSPAD COMP MOBLJ&URTP	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54340	RPR HYPSPAD COMP SIMPLE	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35600	OPEN HRV UXTR ART 1 SGM CAB	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29806	SHO ARTHRS SRG CAPSULORRAPHY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	22812	ARTHRD ANT DFRM 8+ VRT SGM	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22810	ARTHRD ANT DFRM 4-7 VRT SGM	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22808	ARTHRD ANT DFRM 2-3 VRT SGM	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22804	ARTHRD PST DFRM 13+ VRT SGM	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22802	ARTHRD PST DFRM 7-12 VRT SGM	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22800	ARTHRD PST DFRMLT 6 VRT SGM	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22634	ARTHRD CMBN 1NTRSPC EA ADDL	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22633	ARTHRD CMBN 1NTRSPC LUMBAR	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22632	ARTHRD PST TQ 1NTRSPC LM EA	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22630	ARTHRD PST TQ 1NTRSPC LUM	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22614	ARTHRD PST TQ 1NTRSPC EA ADD	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22612	ARTHRD PST TQ 1NTRSPC LUMBAR	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22610	ARTHRD PST TQ 1NTRSPC THRC	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22600	ARTHRD PST TQ 1NTRSPC CRV	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22595	ARTHRD PST TQ ATLAS-AXIS	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22590	ARTHRD PST TQ CRANIOCERVICAL	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	22586	ARTHRD PRE-SAC NTRBDY L5-S1	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22585	ARTHRD ANT NTRBD MIN DSC EA	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22558	ARTHRD ANT NTRBD MIN DSC LUM	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22556	ARTHRD ANT NTRBD MIN DSC THC	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22554	ARTHRD ANT NTRBD MIN DSC CRV	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22552	ARTHRD ANT NTRBD CERVICAL EA	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22551	ARTHRD ANT NTRBDY CERVICAL	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22548	ARTHRD ANT TORAL/XORAL C1-C2	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22534	ARTHRD LAT XTRCVTRY TQ EA AD	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22533	ARTHRD LAT XTRCVTRY TQ LMBR	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22532	ARTHRD LAT XTRCVTRY TQ THRC	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22226	OSTEOT DSC ANT 1VRT SGM EA	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	22224	OSTEOT DSC ANT 1VRT SGM LMBR	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	22222	OSTEOT DSC ANT 1VRT SGM THRC	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	22220	OSTEOT DSC ANT 1 VRT SGM CRV	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21320	CLSD TX NSL FX W/MNPJ&STABLJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	21315	CLSD TX NSL FX MNPJ WO STBLJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11981	INSERTION DRUG DLVR IMPLANT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0208U	ONC MTC MRNA XPRSN ALYS 108	PATH & LAB-PROPRIETARY LAB ANA	EXPIRED	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	90758	ZAIRE EBOLAVIRUS VAC LIVE IM	MEDICINE - VACCINES, TOXOIDS	NO	07/01/2021	07/01/2021			
MMAI-Medicare/Medicaid	90677	PCV20 VACCINE IM	MEDICINE - VACCINES, TOXOIDS	NO	07/01/2021	07/01/2021			
MMAI-Medicare/Medicaid	90671	PCV15 VACCINE IM	MEDICINE - VACCINES, TOXOIDS	NO	07/01/2021	07/01/2021			
MMAI-Medicare/Medicaid	90627	TIC-BRN ENCEPH VAC 0.5ML IM	MEDICINE - VACCINES, TOXOIDS	NO	07/01/2021	07/01/2021			
MMAI-Medicare/Medicaid	90626	TIC-BRN ENCEPH VAC 0.25ML IM	MEDICINE - VACCINES, TOXOIDS	NO	07/01/2021	07/01/2021			
MMAI-Medicare/Medicaid	0663T	SCALP COOL PLMT MNTR RMVL	CATEGORY III CODES	NO	07/01/2021	07/01/2021			
MMAI-Medicare/Medicaid	0662T	SCALP COOL 1ST MEAS&CALBRJ	CATEGORY III CODES	NO	07/01/2021	07/01/2021			
MMAI-Medicare/Medicaid	64617	CHEMODENER MUSCLE LARYNX EMG	SURGERY - NERVOUS SYSTEM	NO	11/15/2021	11/15/2021			
MMAI-Medicare/Medicaid	64616	CHEMODENERV MUSC NECK DYSTON	SURGERY - NERVOUS SYSTEM	NO	11/15/2021	11/15/2021			
MMAI-Medicare/Medicaid	64615	CHEMODENERV MUSC MIGRAINE	SURGERY - NERVOUS SYSTEM	NO	11/15/2021	11/15/2021			
MMAI-Medicare/Medicaid	64612	DESTROY NERVE FACE MUSCLE	SURGERY - NERVOUS SYSTEM	NO	11/15/2021	11/15/2021			
MMAI-Medicare/Medicaid	64611	CHEMODENERV SALIV GLANDS	SURGERY - NERVOUS SYSTEM	NO	11/15/2021	11/15/2021			
MMAI-Medicare/Medicaid	76828	ECHO EXAM OF FETAL HEART	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	08/02/2021	08/02/2021			

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MMAI-Medicare/Medicaid	76827	ECHO EXAM OF FETAL HEART	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	08/02/2021	08/02/2021			
MMAI-Medicare/Medicaid	76826	ECHO EXAM OF FETAL HEART	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	08/02/2021	08/02/2021			
MMAI-Medicare/Medicaid	76825	ECHO EXAM OF FETAL HEART	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	08/02/2021	08/02/2021			
MMAI-Medicare/Medicaid	76821	MIDDLE CEREBRAL ARTERY ECHO	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	08/02/2021	08/02/2021			
MMAI-Medicare/Medicaid	76820	UMBILICAL ARTERY ECHO	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	08/02/2021	08/02/2021			
MMAI-Medicare/Medicaid	76819	FETAL BIOPHYS PROFIL W/O NST	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	08/02/2021	08/02/2021			
MMAI-Medicare/Medicaid	76818	FETAL BIOPHYS PROFILE W/NST	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	08/02/2021	08/02/2021			
MMAI-Medicare/Medicaid	76817	TRANSVAGINAL US OBSTETRIC	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	08/02/2021	08/02/2021			
MMAI-Medicare/Medicaid	76816	OB US FOLLOW-UP PER FETUS	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	08/02/2021	08/02/2021			
MMAI-Medicare/Medicaid	76815	OB US LIMITED FETUS(S)	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	08/02/2021	08/02/2021			
MMAI-Medicare/Medicaid	76814	OB US NUCHAL MEAS ADD-ON	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	08/02/2021	08/02/2021			
MMAI-Medicare/Medicaid	76813	OB US NUCHAL MEAS 1 GEST	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	08/02/2021	08/02/2021			
MMAI-Medicare/Medicaid	76812	OB US DETAILED ADDL FETUS	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	08/02/2021	08/02/2021			
MMAI-Medicare/Medicaid	76811	OB US DETAILED SNGL FETUS	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	08/02/2021	08/02/2021			
MMAI-Medicare/Medicaid	76802	OB US LT 14 WKS ADDL FETUS	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	08/02/2021	08/02/2021			
MMAI-Medicare/Medicaid	76801	OB US LT 14 WKS SINGLE FETUS	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	08/02/2021	08/02/2021			

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MMAI-Medicare/Medicaid	P9025	PLSMA CRYOPRECIP RED PTH RED EA UN	HCPCS - PATH & LAB	NO	10/01/2021	10/01/2021			
MMAI-Medicare/Medicaid	J7295	ETHIN ESTR&ETON 0.015 0.12MG/24H VG	HCPCS - DRUGS (NOT ORAL)	NO	10/01/2021	10/01/2021			
MMAI-Medicare/Medicaid	J7294	SEGEST ACET ETH 0.15 0.013MG/24H VG	HCPCS - DRUGS (NOT ORAL)	NO	10/01/2021	10/01/2021			
MMAI-Medicare/Medicaid	A4453	RECT CTH W/MAN PUMP OPER ENEMA RPLC	HCPCS - MED-SURG SUPPLIES	NO	10/01/2021	10/01/2021			
MMAI-Medicare/Medicaid	Q4228	BIONEXTPATCH PER SQ CM	HCPCS - TEMP CODES	EXPIRED	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	Q0244	INJ CASIRIVIMAB & IMDEVIMAB 1200 MG	HCPCS - TEMP CODES	NO	06/03/2021	06/03/2021			
MMAI-Medicare/Medicaid	J2407	INJ ORITAVANCIN ORBACTIV 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	J1443	INJ FEPP CIT SOL TRIFERIC 0.1 MG FE	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	C9076	LISOCABTAGENE MARALEUCEL PER TX DOS	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9074	INJECTION LUMASIRAN 0.5 MG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	04/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	0051U	RX MNTR LC-MS/MS UR/BLD 31	CATEGORY III CODES	YES	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	Q0249	INJ TCZ HP PT 2&GT COVID-19 1 MG	HCPCS - TEMP CODES	NO	06/24/2021	06/24/2021			
MMAI-Medicare/Medicaid	M0250	IV TCZ HP 2&GT COVID-19 INF&MON 2ND D	HCPCS - MEDICAL SERVICES	NO	06/24/2021	06/24/2021			
MMAI-Medicare/Medicaid	M0249	IV TCZ HP PT 2&GT COVD-19 INF&MON FD	HCPCS - MEDICAL SERVICES	NO	06/24/2021	06/24/2021			
MMAI-Medicare/Medicaid	M0241	IVI/SCI CASIRIV&IMDEVIMB& P/AD H/RS	HCPCS - MEDICAL SERVICES	NO	07/30/2021	07/30/2021			
MMAI-Medicare/Medicaid	Q0240	INJ CASIRIVIMAB & IMDEVIMAB 600 MG	HCPCS - TEMP CODES	NO	07/30/2021	07/30/2021			

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MMAI-Medicare/Medicaid	M0240	IVI/SCI CASIRIV & IMDEVIMB & P/ADM	HCPCS - MEDICAL SERVICES	NO	07/30/2021	07/30/2021			
MMAI-Medicare/Medicaid	88364	INSITU HYBRIDIZATION (FISH)	PATH & LAB - IMMUNOLOGY	NO	09/13/2021	09/13/2021			
MMAI-Medicare/Medicaid	64645	CHEMODENERV 1 EXTREM 5/GT EA	SURGERY - NERVOUS SYSTEM	NO	09/13/2021	09/13/2021		Prior authorization not required when billed with when billed with botulinum toxin type A (J0585).	
MMAI-Medicare/Medicaid	64643	CHEMODENERV 1 EXTREM 1-4 EA	SURGERY - NERVOUS SYSTEM	NO	09/13/2021	09/13/2021		Prior authorization not required when billed with when billed with botulinum toxin type A (J0585).	
MMAI-Medicare/Medicaid	64642	CHEMODENERV 1 EXTREMITY 1-4	SURGERY - NERVOUS SYSTEM	NO	09/13/2021	09/13/2021		Prior authorization not required when billed with when billed with botulinum toxin type A (J0585).	
MMAI-Medicare/Medicaid	J1095	INJ DEXAMETHASONE 9PCT INEQU IOL 1 MCG	HCPCS - DRUGS (NOT ORAL)	NO	06/08/2021	06/08/2021			
MMAI-Medicare/Medicaid	3452F	DYSPNEA NOT SCREENED	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3016F	PT SCRND UNHLTHY OH USE	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3150F	FORCEPS ESOPH BIOPSY DONE	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3155F	CYTOGEN TEST MARROW B/4 TX	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3160F	DOC FE+ STORES B/4 EPO THX	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3200F	BARIUM SWALLOW TEST NOT REQ	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3210F	GRP A STREP TEST PERFORMED	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3215F	PT IMMUNITY TO HEP A DOCD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3218F	RNA TSTNG HEP C DOCD DONE	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3220F	HEP C QUANT RNA TSTNG DOCD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			

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MMAI-Medicare/Medicaid	3230F	NOTE HRING TST W/IN 6 MON	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3250F	NONPRIM LOC ANAT BX SITE TUM	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3260F	PT CAT/PN CAT/HIST GRD DOCD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3265F	RNA TSTNG HEPC VIR ORD/DOCD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3266F	HEPC GN TSTNG DOCD B/4TXMNT	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3268F	PSA/T/GLSC DOCD B/4 TXMNT	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3269F	BONE SCN B/4 TXMNT/AFTR DX	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3270F	NO BONE SCN B/4 TXMNT/AFTRDX	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3271F	LOW RISK PROSTATE CANCER	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3272F	MED RISK PROSTATE CANCER	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3273F	HIGH RISK PROSTATE CANCER	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3274F	PROST CNCR RSK NOT LW/MD/HGH	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3278F	SERUM LVLS CA/IPTH/LPD ORD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3280F	HGB LVL 11-12.9 G/DL	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3281F	HGB LVL LT 11 G/DL	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3285F	IOP DOWN LT 15PCT OF PRE-SVC LVL	CATEGORY II CODES	NO	09/01/2021	09/01/2021			

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MMAI-Medicare/Medicaid	3288F	FALL RISK ASSESSMENT DOCD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3290F	PTEQU D(RH)- AND UNSENSITIZED	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3291F	PTEQU D(RH)+ OR SENSITIZED	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3292F	HIV TSTNG ASKED/DOCD/REVWD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3300F	AJCC STAGE DOCD B/4 THXPY	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3301F	CANCER STAGE DOCD METAST	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3315F	ER+ OR PR+ BREAST CANCER	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3316F	ER- OR PR- BREAST CANCER	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3317F	PATH RPT MALIG CANCER DOCD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3318F	PATH RPT MALIG CANCER DOCD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3319F	X-RAY/CT/ULTRSND ET AL ORD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3320F	NO XRAY/CT/ ET AL ORDD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3321F	AJCC CNCR 0/IA MELAN DOCD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3322F	MELANOMAAJCC STAGE 0 OR IA	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3325F	PREOP ASSES 4 CATARACT SURG	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3330F	IMAGING STUDY ORDERED (BKP)	CATEGORY II CODES	NO	09/01/2021	09/01/2021			

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MMAI-Medicare/Medicaid	3331F	BK IMAGING TST NOT ORDERED	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3340F	MAMMO ASSESS INC XRAY DOCD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3341F	MAMMO ASSESS NEGATIVE DOCD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3342F	MAMMO ASSESS BENGN DOCD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3343F	MAMMO PROBABLY BENGN DOCD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3344F	MAMMO ASSESS SUSP DOCD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3345F	MAMMO ASSESS HGHLYMALIG DOC	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3370F	AJCC BRST CNCR STAGE 0 DOCD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3376F	AJCC BRSTCNCR STAGE 2 DOCD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3378F	AJCC BRSTCNCR STAGE 3 DOCD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3380F	AJCC BRSTCNCR STAGE 4 DOCD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3382F	AJCC CLN CNCR STAGE 0 DOCD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3384F	AJCC CLN CNCR STAGE 1 DOCD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3386F	AJCC CLN CNCR STAGE 2 DOCD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3388F	AJCC CLN CNCR STAGE 3 DOCD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3390F	AJCC CLN CNCR STAGE 4 DOCD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			

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MMAI-Medicare/Medicaid	3450F	DYSPNEA SCRND NO-MILD DYSP	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3451F	DYSPNEA SCRND MOD-HIGH DYSP	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3470F	RA DISEASE ACTIVITY LOW	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3471F	RA DISEASE ACTIVITY MOD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3472F	RA DISEASE ACTIVITY HIGH	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3475F	DISEASE PROGN RA POOR DOCD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3476F	DISEASE PROGN RA GOOD DOCD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3490F	HISTORY AIDS-DEFINING COND	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3491F	HIV UNSURE BABY OF HIV +MOMS	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3492F	HISTORY CD4+ CELL COUNT LT 350	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3493F	NO HIST CD4+ CELL COUNT LT 350	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3494F	CD4+CELL COUNT LT 200CELLS/MM3	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3495F	CD4+CELL CNT 200-499 CELLS	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3497F	CD4+ CELL PERCENTAGE LT 15PCT	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3500F	CD4+CELL CNT/PCT DOCD AS DONE	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3502F	HIV RNA VRL LD LT LMTS QUANTIF	CATEGORY II CODES	NO	09/01/2021	09/01/2021			

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MMAI-Medicare/Medicaid	3503F	HIV RNA VRL LDNOTLT LMTS QUNTF	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3510F	DOC TB SCRNG-RSLTS INTERPD	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3511F	CHLMYD/GONRH TSTS DOCD DONE	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3512F	SYPH SCRNG DOCD AS DONE	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3513F	HEP B SCRNG DOCD AS DONE	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3514F	HEP C SCRNG DOCD AS DONE	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3515F	PT HAS DOCD IMMUN TO HEP C	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3550F	LOW RSK THROMBOEMBOLISM	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3551F	INTRMED RSK THROMBOEMBOLISM	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3552F	HGH RISK FOR THROMBOEMBOLISM	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3555F	PT INR MEASUREMENT PERFORMED	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3570F	RPRT BONE SCINT XREF W XRAY	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3572F	PT CONSID POSS RISK FX	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3573F	PT NOT CONSID POSS RISK FX	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	5020F	TXMNTS 2 PHYS/QHP BY 1 MON	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	5050F	PLAN 2 MAIN DR BY 1 MONTH	CATEGORY II CODES	NO	09/01/2021	09/01/2021			

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MMAI-Medicare/Medicaid	5060F	FNDNGS MAMMO 2PT W/IN 3 DAYS	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	5062F	MAMMO RESULT COM TO PT 5 DAY	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	5100F	RSK FX REF W/N 24 HRS XRAY	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	3170F	BASELIN FLO CYTOMETRY B/4 TX	CATEGORY II CODES	NO	09/01/2021	09/01/2021			
MMAI-Medicare/Medicaid	M0244	IVI/SCI CASIRIVIMB&IMDEVIMB H/RES;	HCPCS - MEDICAL SERVICES	NO	05/06/2021	05/06/2021			
MMAI-Medicare/Medicaid	Q0239	INJECTION BAMLANIVIMAB-XXXX 700 MG	HCPCS - TEMP CODES	EXPIRED	11/09/2020	11/09/2020			
MMAI-Medicare/Medicaid	M0239	IV INF BAMLANIVIMAB-XXXX INF&PA MON	HCPCS - MEDICAL SERVICES	EXPIRED	11/09/2020	11/09/2020			
MMAI-Medicare/Medicaid	J7333	HYAL/DERIV VISCO-3 IA INJ PER DOSE	HCPCS - DRUGS (NOT ORAL)	EXPIRED	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	C9122	MF SINUS IMPLANT 10 MCG SINUVA	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	C9072	INJECTION IMMUNE GLOBULIN 500 MG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	01/01/2021	12/31/2078			For oncology treatment, please contact NantHealth via their web portal, Eviti Connect, which will expedite clinical review of any chemotherapy, radiation therapy, or supportive medications that require prior-authorization at https://connect.eviti.com, 1-888-482-8057. For non-cancer treatment, please follow Aetna Prior Authorization Process
MMAI-Medicare/Medicaid	C9071	INJECTION VILTOLARSEN 10 MG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	C9070	INJECTION TAFASITAMAB-CXIX 2 MG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	01/01/2021	12/31/2078			For oncology treatment, please contact NantHealth via their web portal, Eviti Connect, which will expedite clinical review of any chemotherapy, radiation therapy, or supportive medications that require prior-authorization at https://connect.eviti.com, 1-888-482-8057. For non-cancer treatment, please follow Aetna Prior Authorization Process

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MMAI-Medicare/Medicaid	C9069	INJ BELANTAMB MAFODONTN-BLMF 0.5 MG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	01/01/2021	12/31/2078			For oncology treatment, please contact NantHealth via their web portal, Eviti Connect, which will expedite clinical review of any chemotherapy, radiation therapy, or supportive medications that require prior-authorization at https://connect.eviti.com, 1-888-482-8057. For non-cancer treatment, please follow Aetna Prior Authorization Process
MMAI-Medicare/Medicaid	C9068	COPPER CU-64 DOTATATE DIAG 1 MCI	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	Q0247	INJECTION SOTROVIMAB 500 MG	HCPCS - TEMP CODES	NO	05/26/2021	05/26/2021			
MMAI-Medicare/Medicaid	M0248	IV INF SOTROVIMB INF&PA MON H/RES;	HCPCS - MEDICAL SERVICES	NO	05/26/2021	05/26/2021			
MMAI-Medicare/Medicaid	M0247	IV INF SOTROVIMAB INC INF & PA MON	HCPCS - MEDICAL SERVICES	NO	05/26/2021	05/26/2021			
MMAI-Medicare/Medicaid	X7106	Hosptial Bed cariable height hi-lo	X - Local Codes	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	X7096	UNKNOWN DESCRIPTION	X - Local Codes	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	X7094	UNKNOWN DESCRIPTION	X - Local Codes	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	M0246	IV INF BAMLANIVIMAB & ETESEVIMAB;	HCPCS - MEDICAL SERVICES	NO	05/06/2021	05/06/2021			
MMAI-Medicare/Medicaid	C9073	BREXUCABTAGNE AUTOLCL TO 200 M AUTO	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	01/01/2021	12/31/2078			For oncology treatment, please contact NantHealth via their web portal, Eviti Connect, which will expedite clinical review of any chemotherapy, radiation therapy, or supportive medications that require prior-authorization at https://connect.eviti.com, 1-888-482-8057. For non-cancer treatment, please follow Aetna Prior Authorization Process
MMAI-Medicare/Medicaid	J0717	INJECTION CERTOLIZUMAB PEGOL 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	C8902	MR ANGIO W/O CONTRST W/CONTRST ABD	HCPCS - C CODES - OUTPATIENT PP	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	H0006	ALCOHOL &OR DRUG SRVC; CASE MGMT	HCPCS - ALCOHOL/DRUG ABUSE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2524	CONTCT LENS HPI SPH PC ADD PER LENS	HCPCS - VISION SERVICES	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	T2047	HABIL PREVOC WAIVER; PER 15 MINS	HCPCS - STATE MEDICAID AGENCY	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	Q5121	INJ IFX-AXXQ BIOSIMILR AVSOLA 10 MG	HCPCS - TEMP CODES	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	Q4255	REGUARD TOPICAL USE ONLY PER SQ CM	HCPCS - TEMP CODES	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	Q4254	NOVAFIX DL PER SQ CM	HCPCS - TEMP CODES	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	Q4250	AMNIOAMP-MP PER SQ CM	HCPCS - TEMP CODES	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	Q4249	AMNIPLY TOPICAL USE ONLY PER SQ CM	HCPCS - TEMP CODES	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	Q4248	DERMACYTE AM ALLOGFT PER SQ CM	HCPCS - TEMP CODES	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	Q4247	AMNIOTEXT PATCH PER SQ CM	HCPCS - TEMP CODES	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	Q4246	CORETEXT OR PROTEXT PER CC	HCPCS - TEMP CODES	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	Q4245	AMNIOTEXT PER CC	HCPCS - TEMP CODES	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	Q4242	AMNIOCYTE PLUS PER 0.5 CC	HCPCS - TEMP CODES	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	Q4241	POLYCYTE TOP USE ONLY PER 0.5 CC	HCPCS - TEMP CODES	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	Q4240	CORECYTE TOP USE ONLY PER 0.5 CC	HCPCS - TEMP CODES	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	Q4239	AMNIO-MAXX/AMNIO-MAXX LITE P-SQ CM	HCPCS - TEMP CODES	YES	06/04/2020	12/31/2078			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	Q4238	DERM-MAXX PER SQ CM	HCPCS - TEMP CODES	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	Q4237	CRYO-CORD PER SQ CM	HCPCS - TEMP CODES	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	Q4235	AMNIOREPAIR OR ALTIPLY PER SQ CM	HCPCS - TEMP CODES	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	Q4234	XCELLERATE PER SQ CM	HCPCS - TEMP CODES	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	Q4233	SURFACTOR OR NUDYN PER 0.5 CC	HCPCS - TEMP CODES	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	Q4232	CORPLEX PER SQ CM	HCPCS - TEMP CODES	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	Q4231	CORPLEX P PER CC	HCPCS - TEMP CODES	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	Q4230	COGENEX FLOWABLE AMNION PER 0.5 CC	HCPCS - TEMP CODES	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	Q4229	COGENEX AMNIOTIC MEMBRANE PER SQ CM	HCPCS - TEMP CODES	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	Q4227	AMNIOCORETM PER SQ CM	HCPCS - TEMP CODES	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	K1012	CHGR & BASE STA IU ACTV DEVC REPLAC	HCPCS-K CODES-DMERCS ONLY	EXPIRED	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	K1011	ACTV DEVC IU DRNG DEVC VLV REPL EA	HCPCS-K CODES-DMERCS ONLY	EXPIRED	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	K1010	INDWLL IU DRNG D VLV PT INSR RPLC E	HCPCS-K CODES-DMERCS ONLY	EXPIRED	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	K1007	BIL HKAFO DEVC PWR PELV COMP UP KJ	HCPCS-K CODES-DMERCS ONLY	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	J9358	INJ FAM-TRSTUZUMB DRUXTCN-NXKI 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	J9304	INJECTION PEMETREXED PEMFEXY 10 MG	HCPCS - CHEMO DRUGS	YES	10/01/2020	12/31/2078			

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MMAI-Medicare/Medicaid	J9246	INJECTION MELPHALAN EVOMELA 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	J9227	INJECTION ISATUXIMAB-IRFC 10 MG	HCPCS - CHEMO DRUGS	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	J9198	INJ GEMCITABINE HYDROCHLORDE 100 MG	HCPCS - DRUGS (NOT ORAL)	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	J9177	INJ ENFORTUMAB VEDOTIN-EJFV 0.25 MG	HCPCS - DRUGS (NOT ORAL)	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	J7351	INJ BIMATOPROST IC IMPLANT 1 MCG	HCPCS - DRUGS (NOT ORAL)	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	J7204	INJ FVIII AHF GLYCOPGYLTD-EXEI P-IU	HCPCS - DRUGS (NOT ORAL)	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	J7169	INJ COAG FAC XA INACTV-ZHZO 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	J3399	INJ AVSX-101-XIOI P-TX TO 5X10^15VG	HCPCS - DRUGS (NOT ORAL)	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	J3241	INJECTION TEPROTUMUMAB-TRBW 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	J3032	INJECTION EPTINEZUMAB-JJMR 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	J1738	INJECTION MELOXICAM 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	J1632	INJECTION BREXANOLONE 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	J1558	INJ IMMUNE GLOBULIN XEMBIFY 100 MG	HCPCS - DRUGS (NOT ORAL)	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	J1437	INJ FERRIC DERISOMALTOSE 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	J1429	INJECTION GOLODIRSEN 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	J1201	INJ CETIRIZINE HYDROCHLORIDE 0.5 MG	HCPCS - DRUGS (NOT ORAL)	YES	06/04/2020	12/31/2078			

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MMAI-Medicare/Medicaid	J0896	INJECTION LUSPATERCEPT-AAMT 0.25 MG	HCPCS - DRUGS (NOT ORAL)	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	J0791	INJECTION CRIZANLIZUMAB-TMCA 5 MG	HCPCS - DRUGS (NOT ORAL)	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	J0742	INJ IMP-CLSTATN 4 MG & RLEBCTM 2 MG	HCPCS - DRUGS (NOT ORAL)	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	J0691	INJECTION LEFAMULIN 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	J0591	INJECTION DEOXYCHOLIC ACID 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	J0223	INJECTION GIVOSIRAN 0.5 MG	HCPCS - DRUGS (NOT ORAL)	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	G2025	PMT TH DSNT SITE FURN RHC/FQHC ONLY	HCPCS-PROC/PROF SERVICES (TE	NO	06/03/2020	06/03/2020			
MMAI-Medicare/Medicaid	G1023	CDS MECH PERSIVIA CLIN DECN SUP	HCPCS-PROC/PROF SERVICES (TE	NO	10/01/2020	10/01/2020			
MMAI-Medicare/Medicaid	G1022	CDS MECH INTRMTN CLIN DECN SUP MECH	HCPCS-PROC/PROF SERVICES (TE	NO	10/01/2020	10/01/2020			
MMAI-Medicare/Medicaid	G1021	CDS MECH EHEALTHLINE CDS MECH	HCPCS-PROC/PROF SERVICES (TE	NO	10/01/2020	10/01/2020			
MMAI-Medicare/Medicaid	G1020	CDS MECH CURBSIDE CLIN AUGMENTED WF	HCPCS-PROC/PROF SERVICES (TE	NO	10/01/2020	10/01/2020			
MMAI-Medicare/Medicaid	C9768	ENDO UG DIR MSR HEP PORTOSYS PSG	HCPCS-C CODES-OUTPATIENT PP	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	C9767	REV EVR LE AA; IV LITHO & TL ST&ATH	HCPCS-C CODES-OUTPATIENT PP	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	C9766	REV EVAR LE AA; IV LITHO & ATHERECT	HCPCS-C CODES-OUTPATIENT PP	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	C9765	REV EVR LE AA;IV LITH&TL STNT PLCMT	HCPCS-C CODES-OUTPATIENT PP	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	C9764	REV EVAR OPEN/PERQ LE AA; IV LITHO	HCPCS-C CODES-OUTPATIENT PP	YES	06/04/2020	12/31/2078			

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MMAI-Medicare/Medicaid	C9761	CS URS&/PYLSCPY LTH&ASPR K CLL SYS	HCPCS-C CODES-OUTPATIENT PP	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	C9759	TRANSCATH IO BLD VES MICROINFUS TX	HCPCS-C CODES-OUTPATIENT PP	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	C9067	GALLIUM GA-68 DOTATOC DIAG 0.01 MCI	HCPCS-C CODES-OUTPATIENT PP	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	C9066	INJ SACITUZUMB GOVITECN-HZIY 2.5 MG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	C9064	MITOMYCIN PYELOCALYCL INSTILL 1 MG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	C9063	INJECTION EPTINEZUMAB-JJMR 1 MG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	C9062	INJ DARATUMUMAB 10 MG AND HYAL-FIHJ	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	C9061	INJECTION TEPROTUMUMAB-TRBW 10 MG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	C9060	FLUOROESTRADIOL F18 DIAGNOSTC 1 MCI	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	C9059	INJECTION MELOXICAM 1 MG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	C1748	ENDO 1-USE UPPER GI IMAG/ILLUM DEVC	HCPCS-C CODES-OUTPATIENT PP	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	87811	SARS-COV-2 COVID19 W/OPTIC	PATH & LAB - CHEMISTRY	NO	10/06/2020	10/06/2020			
MMAI-Medicare/Medicaid	87637	SARSCOV2&INF A&B&RSV AMP PRB	PATH & LAB - CHEMISTRY	NO	10/06/2020	10/06/2020			
MMAI-Medicare/Medicaid	87636	SARSCOV2 & INF A&B AMP PRB	PATH & LAB - CHEMISTRY	NO	10/06/2020	10/06/2020			
MMAI-Medicare/Medicaid	87426	SARSCOV CORONAVIRUS AG IA	PATH & LAB - IMMUNOLOGY	NO	06/25/2020	06/25/2020			
MMAI-Medicare/Medicaid	86409	NEUTRLZG ANTB SARSCOV2 TITER	PATH & LAB -CHEMISTRY	NO	08/10/2020	08/10/2020			

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MMAI-Medicare/Medicaid	86408	NEUTRLZG ANTB SARSCOV2 SCR	PATH & LAB -CHEMISTRY	NO	08/10/2020	08/10/2020			
MMAI-Medicare/Medicaid	0619T	CYSTO W/PRST8 COMMISSUROTOMY	CATEGORY III CODES	YES	06/30/2020	12/31/2078			
MMAI-Medicare/Medicaid	0614T	RMVL&RPLCMT SS IMPL DFB PG	CATEGORY III CODES	YES	06/30/2020	12/31/2078			
MMAI-Medicare/Medicaid	0613T	PERQ TCAT INTRATRL SEPTL SHT	CATEGORY III CODES	YES	06/30/2020	12/31/2078			
MMAI-Medicare/Medicaid	0608T	REM MNTR PULM FLU MNTR ALYS	CATEGORY III CODES	YES	06/30/2020	12/31/2078			
MMAI-Medicare/Medicaid	0607T	REM MNTR PULM FLU MNTR SETUP	CATEGORY III CODES	YES	06/30/2020	12/31/2078			
MMAI-Medicare/Medicaid	0606T	REM OCT RTA PHYS/QHP EA 30D	CATEGORY III CODES	YES	06/30/2020	12/31/2078			
MMAI-Medicare/Medicaid	0605T	REM OCT RTA TECHL SPRT MIN 8	CATEGORY III CODES	YES	06/30/2020	12/31/2078			
MMAI-Medicare/Medicaid	0604T	REM OCT RTA DEV SETUP&EDUCAJ	CATEGORY III CODES	YES	06/30/2020	12/31/2078			
MMAI-Medicare/Medicaid	0603T	TRANSDERMAL GFR MONITORING	CATEGORY III CODES	YES	06/30/2020	12/31/2078			
MMAI-Medicare/Medicaid	0602T	TRANSDERMAL GFR MEASUREMENTS	CATEGORY III CODES	YES	06/30/2020	12/31/2078			
MMAI-Medicare/Medicaid	0601T	IRE ABLTJ 1+TUMORS OPEN	CATEGORY III CODES	YES	06/30/2020	12/31/2078			
MMAI-Medicare/Medicaid	0600T	IRE ABLTJ 1+TUM ORGAN PERQ	CATEGORY III CODES	YES	06/30/2020	12/31/2078			
MMAI-Medicare/Medicaid	0599T	NCNTC R-T FLUOR WND IMG EA	CATEGORY III CODES	YES	06/30/2020	12/31/2078			
MMAI-Medicare/Medicaid	0598T	NCNTC R-T FLUOR WND IMG 1ST	CATEGORY III CODES	YES	06/30/2020	12/31/2078			
MMAI-Medicare/Medicaid	0597T	TEMP FML IU VALVE-PMP RPLCMT	CATEGORY III CODES	YES	06/30/2020	12/31/2078			

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MMAI-Medicare/Medicaid	0596T	TEMP FML IU VLV-PMP 1ST INSJ	CATEGORY III CODES	YES	06/30/2020	12/31/2078			
MMAI-Medicare/Medicaid	0594T	OSTEOT HUM XTRNL LNGTH DEV	CATEGORY III CODES	YES	06/30/2020	12/31/2078			
MMAI-Medicare/Medicaid	0241U	NFCT DS VIR RESP RNA 4 TRGT	PATH & LAB-PROPRIETARY LAB ANA	NO	10/06/2020	10/06/2020			
MMAI-Medicare/Medicaid	0240U	NFCT DS VIR RESP RNA 3 TRGT	PATH & LAB-PROPRIETARY LAB ANA	NO	10/06/2020	10/06/2020			
MMAI-Medicare/Medicaid	0226U	SVNT SARSCOV2 ELISA PLSM SRM	PATH & LAB-PROPRIETARY LAB ANA	YES	08/10/2020	12/31/2078			
MMAI-Medicare/Medicaid	0225U	NFCT DS DNA&RNA 21 SARSCOV2	PATH & LAB-PROPRIETARY LAB ANA	NO	08/10/2020	08/10/2020			
MMAI-Medicare/Medicaid	0224U	ANTIBODY SARS-COV-2 TITER (S)	PATH & LAB-PROPRIETARY LAB ANA	NO	06/25/2020	06/25/2020			
MMAI-Medicare/Medicaid	0223U	NFCT DS 22 TRGT SARS-COV-2	PATH & LAB-PROPRIETARY LAB ANA	NO	06/25/2020	06/25/2020			
MMAI-Medicare/Medicaid	0222U	RHD&RHCE GNTYP NEXT GNRJ SEQ	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	0221U	ABO GNOTYP NEXT GNRJ SEQ ABO	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	0220U	ONC BRST CA AI ASSMT 12 FEAT	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	0219U	NFCT AGT HIV GNRJ SEQ ALYS	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	0218U	NEURO MUSC DYS DMD SEQ ALYS	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	0217U	NEURO INH ATAXIA DNA 51 GENE	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	0216U	NEURO INH ATAXIA DNA 12 COM	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	0215U	RARE DS XOM DNA ALYS EA COMP	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2020	12/31/2078			

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MMAI-Medicare/Medicaid	0214U	RARE DS XOM DNA ALYS PROBAND	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	0213U	RARE DS GEN DNA ALYS EA COMP	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	0212U	RARE DS GEN DNA ALYS PROBAND	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	0211U	ONC PAN-TUM DNA&RNA GNRJ SEQ	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	0210U	SYPHILIS TST ANTB IA QUAN	PATH & LAB-PROPRIETARY LAB ANA	NO	10/01/2020	10/01/2020			
MMAI-Medicare/Medicaid	0209U	CYTOG CONST ALYS INTERROG	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	0207U	NEURO ALZHEIMER QUAN IMAGING	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	0206U	NEURO ALZHEIMER CELL AGGREGJ	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	0205U	OPH AMD ALYS 3 GENE VARIANTS	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	0202U	NFCT DS 22 TRGT SARS-COV-2	PATH & LAB-PROPRIETARY LAB ANA	NO	05/20/2020	05/20/2020			
MMAI-Medicare/Medicaid	0015M	ADRNL CORTCL TUM BCHM ASY 25	PATH & LAB-PROPRIETARY LAB ANA	YES	10/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	J1427	INJECTION VILTOLARSEN 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	G2172	AI PMT SRVC REL HI COORD&INT OUD TX	HCPCS - PROC/PROF SERVICES (TE	NO	04/01/2021	04/01/2021			
MMAI-Medicare/Medicaid	J7402	MOMETASONE FUROATE SIN IMPL 10 MCG	HCPCS - DRUGS (NOT ORAL)	YES	04/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	0243U	OB PE BIOCHEM ASSAY PGF ALG	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	A9592	COPPER CU-64 DOTATATE DIAGNOSTIC 1	HCPCS-ADMIN MISC & INVEST	NO	04/01/2021	04/01/2021			

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MMAI-Medicare/Medicaid	J1554	INJECTION IMMUNE GLOBULIN 500 MG	HCPCS - DRUGS (NOT ORAL)	YES	04/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	G2020	SRVC FOR HI INTENS CLIN SRVC ASSOC	HCPCS - PROC/PROF SERVICES (TE	NO	04/01/2021	04/01/2021			
MMAI-Medicare/Medicaid	0242U	TRGT GEN SEQ ALYS PNL 55-74	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	0244U	ONC SOLID ORGN DNA 257 GENES	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	S1091	STENT NONCORONARY TEMPORARY DEL SYS	HCPCS - TEMP NATIONAL CODES	YES	04/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	C9776	IO NIR FLUOR IMAG MAJ EXTRA-HEP BD	HCPCS-C CODES-OUTPATIENT PP	YES	04/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	C9777	ESO MUCOSAL INTEGR TST ELEC IMPD TO	HCPCS-C CODES-OUTPATIENT PP	YES	04/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	0246U	RBC DNA GNOTYP 16 BLD GROUPS	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	0247U	OB PRTRM BRTH IBP4 SHBG MEAS	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	0245U	ONC THYR MUT ALYS 10 GEN&37	PATH & LAB-PROPRIETARY LAB ANA	YES	04/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	Q0245	INJ BAMLANIVIMB & ETESEVIMB 2100 MG	HCPCS - TEMP CODES	NO	02/08/2021	02/08/2021			
MMAI-Medicare/Medicaid	M0245	IV INF BAMLANIVIMAB & ETESEVIMAB	HCPCS - MEDICAL SERVICES	NO	02/08/2021	02/08/2021			
MMAI-Medicare/Medicaid	L8702	POWERED UE ROM ASST DEVICE EWHF UPR	HCPCS - PROSTHETIC PROCED	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	L8701	PWR UE ROM ASST D EWH SNGL/DBL UPR	HCPCS - PROSTHETIC PROCED	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	G2250	REM ASMT REC VID &/ IMAG SUB EST PT	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G0181	PH/A PRAC S PT RCV MC-CS PROV P HHA	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G0180	P/ALW PRAC CERT MCR-COV HHS UND POC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0179	P/A PRAC RE-CRT MCR-COV HHS UND POC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1062	INTRAVERTEBRAL BODY FX AUG IMPLANT	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	Q0243	INJ CASIRIVIMAB & IMDEVIMAB 2400 MG	HCPCS - TEMP CODES	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	63662	REMOVE SPINE ELTRD PLATE	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	C1897	LEAD NEUROSTIMULATOR TEST KIT	HCPCS - C CODES - OUTPATIENT PP	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	C1883	ADAPTR/EXT PACE LEAD/NEUROSTIM LEAD	HCPCS - C CODES - OUTPATIENT PP	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	C1778	LEAD NEUROSTIMULATOR	HCPCS - C CODES - OUTPATIENT PP	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	95991	SPIN/BRAIN PUMP REFIL & MAIN	MEDICINE - NEUROLOGY AND NEURO	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	62355	REMOVE SPINAL CANAL CATHETER	SURGERY - NERVOUS SYSTEM	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	63661	REMOVE SPINE ELTRD PERQ ARAY	SURGERY - NERVOUS SYSTEM	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	62365	REMOVE SPINE INFUSION DEVICE	SURGERY - NERVOUS SYSTEM	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	81546	ONC THYR MRNA 10,196 GEN ALG	PATH & LAB - MICROBIOLOGY	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	0622T	TRABECULOSTOMY INT LSR W/SCP	CATEGORY III CODES	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	82681	ASSAY DIR MEAS FR ESTRADIOL	PATH & LAB - CHEMISTRY	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	80161	ASY CARBAMAZEPIN 10,11-EPXID	PATH & LAB - THERAPEUTIC DRUG	NO	12/31/2020	12/31/2020			

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MMAI-Medicare/Medicaid	80179	DRUG ASSAY SALICYLATE	PATH & LAB - THERAPEUTIC DRUG	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2212	PROLNG OF/OP E&M BYND RT;EA AD 15 M	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	69705	NPS SURG DILAT EUST TUBE UNI	SURGERY - AUDITORY SYSTEM	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	G2176	OP ED/OBS VISITS RSLT IN IP ADM	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2188	PT CLN IND IMG HD:NW/CHG HA GT 50 YA	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2200	PT IDENT UH ALC USER RCV BRF CNSLG	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	90377	RABIES IG HT&SOL HUMAN IM/SC	MEDICINE - IMMUNE GLOBULINS	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	C9772	RVSC EVAR OPN/PERC TB/PA IVASC LITH	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	0228U	ONC PRST8 MA MOLEC PRFL ALG	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	0621T	TRABECULOSTOMY INTERNO LASER	CATEGORY III CODES	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	33997	RMVL PERQ RIGHT HEART VAD	SURGERY - CARDIOVASCULAR SYSTE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2211	VISIT CPLX INHERENT E&M ASSOC MCS	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2187	PT CLIN IND IMAG HEAD: HEAD TAURMA	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	0227U	RX ASY PRSMV 30+RX/METABLT	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	0239U	TRGT GEN SEQ ALYS PNL 311+	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	32408	CORE NDL BX LNG/MED PERQ	SURGERY - RESPIRATORY SYSTEM	NO	12/31/2020	12/31/2020			

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MMAI-Medicare/Medicaid	C1052	HEMOSTATIC AGT GASTROINTESTINAL TOP	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	0632T	PERQ TCAT US ABLTJ NRV P-ART	CATEGORY III CODES	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	0620T	EVASC VEN ARTLZ TIBL/PRNL VN	CATEGORY III CODES	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	33995	INSJ PERQ VAD R HRT VENOUS	SURGERY - CARDIOVASCULAR SYSTE	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	80193	DRUG ASSAY LEFLUNOMIDE	PATH & LAB - THERAPEUTIC DRUG	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2186	PT/CG DYAD RF APP RS & CON RES CNF	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	0237U	CAR ION CHNLPTHY GEN SEQ PNL	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	33745	TIS CGEN CAR ANOMAL 1ST SHNT	SURGERY - CARDIOVASCULAR SYSTE	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	81529	ONC CUTAN MLNMA MRNA 31 GENE	PATH & LAB - MICROBIOLOGY	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	80210	DRUG ASSAY RUFINAMIDE	PATH & LAB - THERAPEUTIC DRUG	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	92519	VEMP TST I&R CERVICAL&OCULAR	MEDICINE - SPECIAL OTORHINOLAR	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	93247	EXT ECGGT 7DLT 15D SCAN A/R	MEDICINE - CARDIOVASCULAR	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2208	PT DID NOT RECV ADJUVANT TX COURSE	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2196	PT IDENT UH ALC USR SCR UH ALC USE	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2184	PATIENT DOES NOT HAVE A CAREGIVER	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G0090	PROF ADM IV CT/COP INFS RX H EA 15M	HCPCS - PROC/PROF SERVICES (TE	YES	01/01/2021	12/31/2078			

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MMAI-Medicare/Medicaid	0232U	CSTB FULL GENE ANALYSIS	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	C1825	GN NROSTM NONRCHRGBL CR SN BR STM L	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	94619	EXERCISE TST BRNCSPSM WO ECG	MEDICINE - PULMONARY	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	93242	EXT ECGGT 48HRLT 7D RECORDING	MEDICINE - CARDIOVASCULAR	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	J7212	FACTOR VIIA-JNCW 1 MCG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	80143	DRUG ASSAY ACETAMINOPHEN	PATH & LAB - THERAPEUTIC DRUG	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2191	PT CLIN IND IMAG HEAD: POSIT HA	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2179	CLIN DOC PT MED RSN NO LE NEURO EX	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	C9775	RVSC EVAR O/P TB/PA; IVL & TSP & AT	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	82077	ASSAY SPEC XCP UR&BREATH IA	PATH & LAB - CHEMISTRY	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	0230U	AR FULL SEQUENCE ANALYSIS	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	57465	CAM CERVIX UTERI DRG COLP	SURGERY - FEMALE GENITAL SYSTE	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	80181	DRUG ASSAY FLECAINIDE	PATH & LAB - THERAPEUTIC DRUG	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2213	INIT MED TX OPIOID USE D/O ED SET	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	S0013	ESKETAMINE NASAL SPRAY 1 MG	HCPCS - TEMP NATIONAL CODES	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	69706	NPS SURG DILAT EUST TUBE BI	SURGERY - AUDITORY SYSTEM	YES	01/01/2021	12/31/2078			

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MMAI-Medicare/Medicaid	C9773	RVSC EVAR O/PC TB/PA;IVASC LTH&TSP	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	G2177	AC BR EP PT NU/RFL RX ABX 30 D EP D	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2189	PT CLIN IND IMAG HEAD: ABN NEURO EX	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	81554	PULM DS IPF MRNA 190 GEN ALG	PATH & LAB - MICROBIOLOGY	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	0231U	CACNA1A FULL GENE ANALYSIS	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	76145	MED PHYSIC DOS EVAL RAD EXPS	RADIOLOGY - RADIATION ONCOLOGY	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	G2214	INIT/SUB PSY CCM 1ST 30 M MO BH CAR	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	C9774	RVSC EVAR O/PC TIB/PA;IVASC LITH&AT	HCPCS-C CODES-OUTPATIENT PP	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	G2178	CLIN DC PT NO LE NEUR EX MSR B AMP;	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2190	PT CLIN IND IMAG HEAD: HA RAD NECK	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	0236U	SMN1&SMN2 FULL GENE ANALYSIS	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	33741	TAS CONGENITAL CAR ANOMAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	92518	VEMP TEST I&R OCULAR	MEDICINE - SPECIAL OTORHINOLAR	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	93246	EXT ECGGT 7DLT 15D RECORDING	MEDICINE - CARDIOVASCULAR	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	J7352	AFAMELANOTIDE IMPLANT 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	80204	DRUG ASSAY METHOTREXATE	PATH & LAB - THERAPEUTIC DRUG	NO	12/31/2020	12/31/2020			

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MMAI-Medicare/Medicaid	80189	DRUG ASSAY ITRACONAZOLE	PATH & LAB - THERAPEUTIC DRUG	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	92653	AEP NEURODIAGNOSTIC I&R	MEDICINE - SPECIAL OTORHINOLAR	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2183	DOC PT UNABL TO COM & INF NOT AVAIL	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2195	PT CLIN IND IMAG HEAD: OCC HA CHILD	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2207	RSN NOT ADM ADJ TX CRS CHMO&HER2-TT	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2252	BRF CM TCH-B SRVC VR C/I P/O Q HCP	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	0233U	FXN GENE ANALYSIS	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	G0089	PROF SVC INI V ADM SUB IMT/OTH INF	HCPCS - PROC/PROF SERVICES (TE	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	80167	DRUG ASSAY FELBAMATE	PATH & LAB - THERAPEUTIC DRUG	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	93243	EXT ECGGT 48HRLT 7D SCAN A/R	MEDICINE - CARDIOVASCULAR	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	92650	AEP SCR AUDITORY POTENTIAL	MEDICINE - SPECIAL OTORHINOLAR	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2192	PT CLN IND IMG HD:TMP HA PT O 55 YA	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2216	TAKE HM SPLY INJ NLXLIST SEP ADD CD	HCPCS - PROC/PROF SERVICES (TE	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	G2180	CLIN DOC PT NOT ELG EVAL FTWR B LEA	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	J1823	INJECTION INEBILIZUMAB-CDON 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	0235U	PTEN FULL GENE ANALYSIS	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2021	12/31/2078			

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MMAI-Medicare/Medicaid	92517	VEMP TEST I&R CERVICAL	MEDICINE - SPECIAL OTORHINOLAR	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	93245	EXT ECGGT 7DLT 15D REC SCAN A/R	MEDICINE - CARDIOVASCULAR	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	92652	AEP THRSHLD EST MLT FREQ I&R	MEDICINE - SPECIAL OTORHINOLAR	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2206	PT RCV ADJ TX CRS CHEMO&HER2-TGT TX	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2251	BRF COM TECH-B SRVC VR C/I Q HCP	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G0088	P SVC INI V ADM ANT-INF PM H EA 15M	HCPCS - PROC/PROF SERVICES (TE	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	G2194	PT CLN IND IMG HD;NU ON HA PD PT DB	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	0234U	MECP2 FULL GENE ANALYSIS	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	30468	RPR NSL VLV COLLAPSE W/IMPLT	SURGERY - RESPIRATORY SYSTEM	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	0639T	WRLS SKN SNR ANISOTROPY MEAS	CATEGORY III CODES	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	93244	EXT ECGGT 48HRLT 7D REV&INTERPJ	MEDICINE - CARDIOVASCULAR	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	55880	ABLTJ MAL PRST8 TISS HIFU	SURGERY - MALE GENITAL SYSTEM	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	80151	DRUG ASSAY AMIODARONE	PATH & LAB - THERAPEUTIC DRUG	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	92651	AEP HEARING STATUS DETER I&R	MEDICINE - SPECIAL OTORHINOLAR	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2181	BMI NOT DC MD RSN/PT REFS HT/WT MSR	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2193	PT CLIN IND IMG HD:NEW ON HA LT 6 YOA	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			

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MMAI-Medicare/Medicaid	G2205	PT WITH PREGNANCY DUR ADJ TX CRS	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	0238U	ONC LNCH SYN GEN DNA SEQ ALY	PATH & LAB-PROPRIETARY LAB ANA	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	A9591	FLUOROESTRADIOL F 18 DIAG 1 MCI	HCPCS-ADMIN MISC & INVEST	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	33746	TIS CGEN CAR ANOMAL EA ADDL	SURGERY - CARDIOVASCULAR SYSTE	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	0631T	TC VIS LIT HYPERSPECTRAL IMG	CATEGORY III CODES	YES	01/01/2021	12/31/2078			
MMAI-Medicare/Medicaid	93248	EXT ECGGT 7DLT 15D REV&INTERPJ	MEDICINE - CARDIOVASCULAR	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2209	PATIENT REFUSED TO PARTICIPATE	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2185	DOC CAREGIV IS TRN & CERT DEM CARE	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	G2197	PT SCR UH ALC USE NOT ID UH ALC USR	HCPCS - PROC/PROF SERVICES (TE	NO	12/31/2020	12/31/2020			
MMAI-Medicare/Medicaid	M1051	PT CA AC FX/INF RL LS/ LB SCOLIOSIS	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	J7189	FACTOR VIIA NOVOSEVEN RT1 MICROGRAM	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G9931	DOC CHA2DS2-VASC RS 0/1M; /0 1/ 2W	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9901	PT 66/GT INST SNP/RSD LTC GT 90 DA MSR	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9898	PT 66/GT INST SNP/RSD LTC GT 90 DA MSR	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9729	PT UN CMPL LEPF PROM INI EVL&/D/C	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9727	PT UN CMPL LEPF PROM INI EVL&/D/C	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			

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MMAI-Medicare/Medicaid	G9722	DOC HX RF/BSE S-CR GT EQU 4.0 MG/DL;	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9716	BMI DOC FU PLAN NOT CMPL DOC RSN	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9703	EPI PT TAK ABX 30 DAYS PRI EPI DATE	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9661	PT GT /EQU 86 YOA WHO RECV COLONOSCOPY	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9642	CURRENT SMOKER	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9550	FNL RPT IMG STS F/U IMG REC/FNL RPT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9537	IMAG PART CLIN TRL;/OTH CLIN ORD ST	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9415	PT NOT 1 D MENC VAC ON/B/T 11&13 BD	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G8709	URI EP COMPET DX ON/3 D AFT EP DT	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8430	DOC MED RSN NOT DOC REV PT CUR RX L	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G2151	DOC PT DX DGN NEU CND DX ANY TM EOC	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2127	PT 66-80 Y AL 1 CL FR D MP&D RX DEM	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2125	PT 81 Y&GT AL 1 CL FRLTY DUR MSR PRD	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2118	PT 81 Y &GT AL 1 CL FRLTY DUR MSR PRD	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2115	PT 66 -80 Y CLM FRLTY&D MED DMNT MP	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	D6011	SURGICAL ACCESS TO AN IMPLANT BODY	HCPCS - DENTAL	YES	10/05/2015	12/31/2078			

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MMAI-Medicare/Medicaid	D5283	REMV UNI PRT D - 1 PC C METL MAND	HCPCS-DENTAL-Denture-Partial	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	D5282	REMV UNI PRT D - 1 PC CAST METL MAX	HCPCS-DENTAL-Denture-Partial	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	C9760	NRND NBLD PD NYHA CLS II III IV HF;	HCPCS-C CODES-OUTPATIENT PP	YES	06/04/2020	12/31/2078			
MMAI-Medicare/Medicaid	99489	CPLX CHRNC CARE EA ADDL 30	E & M - CARE PLAN OVERSIGHT SE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	99487	CPLX CHRNC CARE 1ST 60 MIN	E & M - CARE PLAN OVERSIGHT SE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	99416	PROLNG CLIN STAFF SVC EA ADD	E & M - PREVENTIVE MEDICINE SE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	99415	PROLNG CLIN STAFF SVC 1ST HR	E & M - PREVENTIVE MEDICINE SE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	94617	EXERCISE TST BRNCSPSM W/ECG	MEDICINE - PULMONARY	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	92228	IMG RTA DETC/MNTR DS PHY/QHP	MEDICINE - OPHTHALMOLOGY	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	92227	IMG RTA DETCJ/MNTR DS STAFF	MEDICINE - OPHTHALMOLOGY	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	87428	SARSCOV & INF VIR A&B AG IA	PATH & LAB - MICROBIOLOGY	NO	11/09/2020	11/09/2020			
MMAI-Medicare/Medicaid	82670	ASSAY OF TOTAL ESTRADIOL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80415	TOT ESTRADIOL RESPONSE PANEL	PATH & LAB - EVOCATIVE/SUPPRES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80414	TESTOSTERONE RESPONSE PANEL	PATH & LAB - EVOCATIVE/SUPPRES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76513	OPH US DX ANT SGM US UNI/BI	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76512	OPH US DX B-SCAN	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	76511	OPH US DX QUAN A-SCAN ONLY	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76510	OPH US DX B-SCAN&QUAN A-SCAN	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74425	UROGRAPHY ANTEGRADE RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74420	UROGRAPHY RTRGR +-KUB	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74415	UROGRAPHY NFS DRIP&/BLS W/NF	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74410	UROGRAPHY NFS DRIP&/BOLUS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74400	UROGRAPHY IV +-KUB TOMOG	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64455	NJX AA&/STRD PLTR COM DG NRV	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	33993	REPOSG PERQ R/L HRT VAD	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33992	RMVL PERQ LEFT HEART VAD	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33991	INSJ PERQ VAD L HRT ARTL&VEN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33990	INSJ PERQ VAD L HRT ARTERIAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29828	SHO ARTHRS SRG BICP TENODSIS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	29827	SHO ARTHRS SRG RT8TR CUF RPR	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29826	SHO ARTHRS SRG DECOMPRESSION	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29825	SHO ARTHRS SRG LSS&RESCJ ADS	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	29824	SHO ARTHRS SRG DSTL CLAVICLC	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	29823	SHO ARTHRS SRG XTNSV DBRDMT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	29822	SHO ARTHRS SRG LMTD DBRDMT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	29821	SHO ARTHRS SRG COMPL SYNVCT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	29820	SHO ARTHRS SRG PRTL SYNVCT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	29819	SHO ARTHRS SRG RMVL LOOSE/FB	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	29807	SHO ARTHRS SRG RPR SLAP LES	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29805	SHO ARTHRS DX +- SYNOVIAL BX	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	19380	REVJ RECONSTRUCTED BREAST	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	19371	PERI-IMPLT CAPSLC BRST COMPL	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	19370	REVJ PERI-IMPLT CAPSULE BRST	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	19369	BRST RCNSTJ 2 PDCL TRAM FLAP	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19368	BRST RCNSTJ 1PDCL TRAM ANAST	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19367	BRST RCNSTJ 1 PDCL TRAM FLAP	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19364	BRST RCNSTJ FREE FLAP	SURGERY - INTEGUMENTARY SYSTEM	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	19361	BRST RCNSTJ LATSMS DRSI FLAP	SURGERY - INTEGUMENTARY SYSTEM	NO	06/30/2020	06/30/2020			

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MMAI-Medicare/Medicaid	19357	TISS XPNDR PLMT BRST RCNSTJ	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	19342	INSJ/RPLCMT BRST IMPLT SEP D	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	19340	INSJ BREAST IMPLT SM D MAST	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	19330	RMVL RUPTURED BREAST IMPLANT	SURGERY - INTEGUMENTARY SYSTEM	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	19328	RMVL INTACT BREAST IMPLANT	SURGERY - INTEGUMENTARY SYSTEM	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	19325	BREAST AUGMENTATION W/IMPLT	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	19318	BREAST REDUCTION	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	11971	RMVL TIS XPNDR WO INSJ IMPLT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E1390	O2 CONC 85PCT /GT 02 CONC PRSC FLW RATE	HCPCS - DME	NO	11/01/2020	11/01/2020		36 month rental cycle per 5 years; limit (1) per month, per provider	
MMAI-Medicare/Medicaid	J0461	INJECTION ATROPINE SULFATE 0.01 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	J0780	INJ PROCHLORPERAZINE TO 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	J1094	INJECTION DEXAMETHASONE ACTAT 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	J1100	INJ DEXMETHOSON SODIM PHOSHATE 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	J1200	INJ DIPHENHYDRAMINE HCL TO 50 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	J1720	INJ HYDROCORTSON SOD SUCC TO 100 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	J1741	INJECTION IBUPROFEN 100 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2020	12/04/2020			

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MMAI-Medicare/Medicaid	J1940	INJECTION FUROSEMIDE UP TO 20 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	J2060	INJECTION LORAZEPAM 2 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	J2150	INJECTION MANNITOL 25PCT IN 50 ML	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	J2175	INJECTION MEPERIDINE HCL PER 100 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	J2405	INJECTION ONDANSETRON HCL PER 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	J2765	INJ METOCLOPRAMIDE HCL TO 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	J3420	INJ VIT B-12 CYNOCOBLMN TO 1000 MCG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	J3475	INJ MAGNESIUM SULFATE PER 500 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	J3480	INJ POTASSIUM CHLORIDE PER 2 MEQ	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	J7510	PREDNISOLONE ORAL PER 5 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	J7512	PDN IMMED RLSE/DELAY RLSE ORAL 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	J7635	ATROPINE INHAL CP CONC FORM PER MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	J7636	ATROPINE INHAL CP UNIT DOSE PER MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	J8540	DEXAMETHASONE ORAL 0.25 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	Q0162	ONDAN 1 MG ORL NOT EXCEED 48 HR DOS	HCPCS - TEMP CODES	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	Q0163	DIPHENHYDRAMINE HCL 50 MG ORAL	HCPCS - TEMP CODES	NO	01/01/2020	12/04/2020			

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MMAI-Medicare/Medicaid	Q0164	PROCHLORPERAZINE MALEATE 5 MG ORAL	HCPCS - TEMP CODES	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	S0028	INJECTION FAMOTIDINE 20 MG	HCPCS - TEMP NATIONAL CODES	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	S0074	INJECTION CEFOTETAN DISODIUM 500 MG	HCPCS - TEMP NATIONAL CODES	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	S0119	ONDANSETRON ORAL 4 MG	HCPCS - TEMP NATIONAL CODES	NO	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	S0176	HYDROXYUREA ORAL 500 MG	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	S0179	MEGESTROL ACETATE ORAL 20 MG	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	S0183	PROCHLORPERAZINE MALEATE ORAL 5MG	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2020	12/04/2020			
MMAI-Medicare/Medicaid	99072	ADDL SUPL MATRL&STAF TM PHE	MEDICINE - SPECIAL SERVICES, P	YES	09/08/2020	12/31/2078			
MMAI-Medicare/Medicaid	86413	SARS-COV-2 ANTB QUANTITATIVE	PATH & LAB - IMMUNOLOGY	YES	09/08/2020	12/31/2078			
MMAI-Medicare/Medicaid	V5336	REPR/MOD AUGMENTATIV CMNCT SYS/DEVC	HCPCS - HEARING SERVICES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V5298	HEARING AID NOC	HCPCS - HEARING SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V5273	ASSTIVE LISTEN DEVC W/COCHLEAR IMPL	HCPCS - HEARING SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V5271	ASST LISTEN DEVC TV CAPTION DECODER	HCPCS - HEARING SERVICES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5270	ASST LISTENING DEVICE TV AMP TYPE	HCPCS - HEARING SERVICES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5269	ASST LISTENING DEVICE ALERTING TYPE	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5268	ASST LISTENING DEVICE TEL AMP TYPE	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	V5267	HA/ALD/SUPP/ACCESS NOT O/W SPEC	HCPCS - HEARING SERVICES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V5264	EAR MOLD/INSERT NOT DISPBL ANY TYPE	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5263	HEARING AID DISPBL TYPE BINAURAL	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5262	HEARING AID DISPBL TYPE MONAURAL	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5253	HEARING AID PROG BINAURAL BTE	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5252	HEARING AID PROG BINAURAL ITE	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5251	HEARING AID PROG ANALOG BINAURL ITC	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5250	HEARING AID PROG ANALOG BINAURL CIC	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5247	HEARING AID PROG ANALOG MONAURL BTE	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5246	HEARING AID PROG ANALOG MONAURL ITE	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5245	HEARING AID PROG ANALOG MONAURL ITC	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5244	HEARING AID PROG ANALOG MONAURL CIC	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5241	DISPNS FEE MONAURL HEARING AID TYPE	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5240	DISPNS FEE CONTRALAT RTE SYS BINAUR	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5230	HA CONTRALAT RTE SYS BINAUR GLASSES	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5221	HA CONTRA ROUT SYS BINAURAL ITC/BTE	HCPCS - HEARING SERVICES	NO	01/01/2019	01/01/2019			

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MMAI-Medicare/Medicaid	V5215	HA CONTRA ROUT SYS BINAURAL ITC/ITC	HCPCS - HEARING SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	V5214	HA CONTRA ROUT SYS BINAURAL ITE/BTE	HCPCS - HEARING SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	V5213	HA CONTRA RTE SYS BINAURAL ITE/ITC	HCPCS - HEARING SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	V5200	DISPENSING FEE CONTRALATERAL MONAUR	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5190	HA CONTRALAT RTE MONAURAL GLASSES	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5181	HA CONTRALAT RTE DVC MONAURAL BTE	HCPCS - HEARING SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	V5172	HA CONTRALAT RTE DVC MONAURAL ICT	HCPCS - HEARING SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	V5171	HA CONTRALAT RTE DVC MONAURAL ITE	HCPCS - HEARING SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	V5095	SEMI-IMPL MID EAR HEARING PROSTH	HCPCS - HEARING SERVICES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V5090	DISPENSING FEE UNSPEC HEARING AID	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5040	HEAR AID MONAURL BDY WORN BN CONDCT	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5030	HEAR AID MONAURL BDY WRN AIR CONDCT	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5014	REPAIR/MODIFICATION OF HEARING AID	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5011	FIT/ORIENTATION/CHECK HEARING AID	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V2799	VISION ITEM/SERVICE MISCELLANEOUS	HCPCS - VISION SERVICES	NO	09/01/2017	09/01/2017		Submit claims with medical records	
MMAI-Medicare/Medicaid	V2797	VISN SPL ACSS&/SRVC CMPNT OTH HCPCS	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements

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MMAI-Medicare/Medicaid	V2790	AMNIOTIC MEMBRANE SURG RECNSTR-PROC	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2788	PRESBYOPIA CORRECTING FUNCT IO LENS	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2787	ASTIGMATISM CORRECTING FUNCTION IOL	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2786	SPCLTY OCCUP MULTIFOCL LENS-LENS	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2785	PRC PRES&TRANSPORTING CORNL TISS	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2784	LENS POLYCARBATE/EQUL ANY INDX-LENS	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2783	LNS INDX GT /EQU 1.66 PLSTC/GT /EQU 1.80 GLA	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2782	LNS I 1.54-1.65 PLST/1.60-1.79 GLA	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2762	POLARIZATION ANY LENS MATERIAL-LENS	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2761	MIRROR COAT TYPE SOLID GRADENT/EQU LE	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2745	ADD LENS;TINT COLR EXC PHOTOCHRMATC	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2730	SPCL BASE CURVE GLASS/PLSTC-LENS	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2718	PRESS-ON LENS FRESNELL PRISM P LENS	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2710	SLAB OFF PRISM GLASS/PLSTC PER LENS	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2628	FABRICATION&FIT OCULAR CONFORMER	HCPCS - VISION SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V2624	POLISHING/RESURFACING OCULR PROSTH	HCPCS - VISION SERVICES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	V2615	TELESCOPIC & OTH COMPOUND LENS SYS	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2610	SNGL LENS SPECT MOUNT LW VISION AID	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2600	HAND HELD LW VISN&OTH NON SPEC AIDS	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2531	CNTC LENS SCLERAL GAS PERMEABLE PER	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2530	CNTC LENS SCLERAL GAS IMPERMEBL PER	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2523	CNTC LENS HYDROPHIL EXT WEAR LENS	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2522	CNTC LENS HYDROPHIL BIFOCAL LENS	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2521	CNTC LENS HYDROPHL/PRISM BLLST LENS	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2513	CNTC LENS GAS PRMEABL EXT WEAR LENS	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2512	CNTC LENS GAS PERMEABLE BIFOCL LENS	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2511	CNTC LENS GAS PRMEABL PRSM BLLST EA	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2510	CNTC LENS GAS PRMEABL SPHERICL LENS	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2503	CNTC LENS PMMA COLR VISN DEFIC LENS	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2501	CNTC LENS PMMA/PRISM BALLST LENS	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2500	CNTC LENS PMMA SPHERICAL PER LENS	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2430	VRIBL ASPHRC BIFOCL FULL FIELD-LENS	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	V2410	VARIBL ASPHRCITY 1 FULL FIELD-LENS	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2314	TRIFOCL SPHER GT +/-12.00D PER LENS	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V2313	TRIFCL +/-7.25-+/-12.00D 4.25 -6.00D	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V2312	TRIFCL +/-7.25-+/-12.00D 2.25 -4.00D	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V2311	TRIFCL +/-7.25-+/-12.00D 0.25 -2.25D	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V2310	TRIFOCL +/-4.25-+/-7.00D OVR 6.00D	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V2309	TRIFOCL +/-4.25-+/-7.00D 4.25 -6.00D	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V2308	TRIFOCL +/-4.25-+/-7.00D 2.12 -4.00D	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V2307	TRIFCL +/-4.25-+/-7.00D 0.12-2.00D	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V2306	TRIFOCL PLANO +/-4.00D OVR 6.00D	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V2305	TRIFOCL PLANO +/-4.00D 4.25-6.00	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V2304	TRIFOCL PLANO +/-4.00D 2.25-4.00D	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V2303	TRIFOCL PLANO +/-4.00D 0.12-2.00D	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V2302	SPHER TRIFOCL +/- 7.12-+/-20.00 LNS	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V2301	SPHERE TRIFOCL +/- 4.12-+/-7.00 LNS	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V2300	SPHERE TRIFOCL PLANO/+/-4.00D LENS	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	V2214	BIFOCL SPHER OVR +/-12.00D PER LENS	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2213	BIFOCL +/-7.25-+/-12.00D 4.25-6.00D	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2212	BIFOCL +/-7.25-+/-12.00D 2.25-4.00D	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2211	BIFOCL +/-7.25-+/-12.00D 0.25-2.25D	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2210	BIFOCL +/-4.25-+/-7.00D OVER 6.00D	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2209	BIFOCL +/-4.25-+/-7.00D 4.25-6.00D	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2208	BIFOCL +/-4.25-+/-7.00D 2.12-4.00D	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2207	BIFOCL +/-4.25-+/-7.00D 0.12-2.00D	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2206	BIFOCL PLANO +/-4.00D OVER 6.00D EA	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2205	BIFOCL PLANO +/-4.00D 4.25-6.00D EA	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2204	BIFOCL PLANO +/-4.00D 2.12-4.00D EA	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2203	BIFOCL PLANO +/-4.00D 0.12-2.00D EA	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2202	SPHERE BIFOCL +/-7.12-+/-20.00D EA	HCPCS - VISION SERVICES	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2201	SPHERE BIFOCL +/-4.12-+/-7.00D LENS	HCPCS - VISION SERVICES	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2200	SPHERE BIFOCL PLANO +/-4.00D LENS	HCPCS - VISION SERVICES	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2199	NOC SINGLE VISION LENS	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements

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MMAI-Medicare/Medicaid	V2114	1 VISN SPHERE GT +/-12.00D PER LENS	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2113	1 VISN +/-7.25-+/-12.00D 4.25-6.00D	HCPCS - VISION SERVICES	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2112	1 VSN +/-7.25-+/-12.00D 2.25D-400D	HCPCS - VISION SERVICES	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2111	1 VISN +/-7.25-+/-12.00D 0.25-2.25D	HCPCS - VISION SERVICES	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2110	1 VISN +/- 4.25-7.00D OVER 6.00D	HCPCS - VISION SERVICES	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2109	1 VISN+/- 4.25-+/- 7.00D 4.25-6.00D	HCPCS - VISION SERVICES	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2108	1 VSN +/-4.25D-+/-7.00D 2.12-4.00D	HCPCS - VISION SERVICES	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2107	1 VISN +/-4.25-+/-7.00 0.12-2.00D	HCPCS - VISION SERVICES	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2106	1 VISN PLANO-+/-4.00D OVR 6.00D EA	HCPCS - VISION SERVICES	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2105	1 VISN PLANO-+/-4.00D 4.25-6.00D EA	HCPCS - VISION SERVICES	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2104	1 VISN PLANO-+/-4.00D 2.12-4.00D EA	HCPCS - VISION SERVICES	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2103	1 VISN PLANO-+/-4.00D 0.12-2.00D EA	HCPCS - VISION SERVICES	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2102	SPHER 1 VISN +/- 7.12 +/-20.00D EA	HCPCS - VISION SERVICES	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2101	SPHER 1 VISN +/- 4.12 +/-7.00D EA	HCPCS - VISION SERVICES	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2100	SPHER 1 VISN PLANO +/- 4.00-LENS	HCPCS - VISION SERVICES	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	U0002	2019-NCOV COVID-19 SARS-COV-2/2019	HCPCS - PATH & LAB	NO	03/31/2020	03/31/2020			

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MMAI-Medicare/Medicaid	U0001	CDC 2019 NOVEL COV RT RT-PCR DX PNL	HCPCS - PATH & LAB	NO	03/31/2020	03/31/2020			
MMAI-Medicare/Medicaid	T5001	PSTN SEAT PERSON SPECL/ORTHO NEEDS	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T4545	INCONTIN PROD DISP PENILE WRAP EA	National T Codes	NO	06/30/2019	06/30/2019		Non-Covered services for members less than 4 years old. Only ONE of the following codes is payable within a rolling thirty day period: T4529, T4530, T4531, T4532, T4533, T4534, T4535, T4536, T4538, T4539, T4543, T4544, T4545, A4520	
MMAI-Medicare/Medicaid	T4544	ADULT SIZE DISPBL PULLUP ABVE XL EA	National T Codes	NO	06/30/2019	06/30/2019		Non-Covered services for members less than 4 years old. Only ONE of the following codes is payable within a rolling thirty day period: T4529, T4530, T4531, T4532, T4533, T4534, T4535, T4536, T4538, T4539, T4543, T4544, T4545, A4520	
MMAI-Medicare/Medicaid	T4543	ADULT DISP INCONTINENCE PROD ABV XL	HCPCS - STATE MEDICAID AGENCY	NO	06/30/2019	06/30/2019		Non-Covered services for members less than 4 years old. Only ONE of the following codes is payable within a rolling thirty day period: T4529, T4530, T4531, T4532, T4533, T4534, T4535, T4536, T4538, T4539, T4543, T4544, T4545, A4520	
MMAI-Medicare/Medicaid	T4542	INCONT PROD DISPBL UNDPAD SM SZ EA	HCPCS - STATE MEDICAID AGENCY	NO	06/30/2019	06/30/2019		Non-Covered services for members less than 4 years old. Only ONE of the following codes is payable within a rolling thirty day period: A4554, T4542	
MMAI-Medicare/Medicaid	T4541	INCONT PRODUCT DISPBL UNDPAD LG EA	HCPCS - STATE MEDICAID AGENCY	NO	06/30/2019	06/30/2019		Non-Covered services for members less than 4 years old. Only ONE of the following codes is payable within a rolling thirty day period: A4554, T4542	
MMAI-Medicare/Medicaid	T4540	INCONT PROD UNDPAD REUSBL CHAIR SZ	HCPCS - STATE MEDICAID AGENCY	NON-COV	06/30/2019	06/30/2019			
MMAI-Medicare/Medicaid	T4539	INCONT PROD DIAPER/BRF REUSBL SZ EA	HCPCS - STATE MEDICAID AGENCY	NON-COV	06/30/2019	06/30/2019			
MMAI-Medicare/Medicaid	T4538	DIAPER SRVC REUSBL DIAPER EA DIAPER	HCPCS - STATE MEDICAID AGENCY	NON-COV	06/30/2019	06/30/2019			
MMAI-Medicare/Medicaid	T4537	INCONT PROD UNDPAD REUSBL BED SZ EA	HCPCS - STATE MEDICAID AGENCY	NON-COV	06/30/2019	06/30/2019			
MMAI-Medicare/Medicaid	T4536	INCONT PROD UNDWEAR/PULLON REUSE SZ	HCPCS - STATE MEDICAID AGENCY	NON-COV	06/30/2019	06/30/2019			

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MMAI-Medicare/Medicaid	T4535	DISPBL LINER/PAD/UNDGRMNT INCONT EA	HCPCS - STATE MEDICAID AGENCY	NO	06/30/2019	06/30/2019		Non-Covered services for members less than 4 years old. Only ONE of the following codes is payable within a rolling thirty day period: T4529, T4530, T4531, T4532, T4533, T4534, T4535, T4536, T4538, T4539, T4543, T4544, T4545, A4520	
MMAI-Medicare/Medicaid	T4534	YOUTH SZD DISPBL INCONT UNDWEAR EA	HCPCS - STATE MEDICAID AGENCY	NO	06/30/2019	06/30/2019		Non-Covered services for members less than 4 years old. Only ONE of the following codes is payable within a rolling thirty day period: T4529, T4530, T4531, T4532, T4533, T4534, T4535, T4536, T4538, T4539, T4543, T4544, T4545, A4520	
MMAI-Medicare/Medicaid	T4533	YOUTH SZD DISPBL INCONT BRF/DIAPER	HCPCS - STATE MEDICAID AGENCY	NO	06/30/2019	06/30/2019		Non-Covered services for members less than 4 years old. Only ONE of the following codes is payable within a rolling thirty day period: T4529, T4530, T4531, T4532, T4533, T4534, T4535, T4536, T4538, T4539, T4543, T4544, T4545, A4520	
MMAI-Medicare/Medicaid	T4532	PED SZ DISPBL INCONT UNDWEAR LG EA	HCPCS - STATE MEDICAID AGENCY	NO	06/30/2019	06/30/2019		Non-Covered services for members less than 4 years old. Only ONE of the following codes is payable within a rolling thirty day period: T4529, T4530, T4531, T4532, T4533, T4534, T4535, T4536, T4538, T4539, T4543, T4544, T4545, A4520	
MMAI-Medicare/Medicaid	T4531	PED SZ DISPBL INCONT UNDWEAR SM/MED	HCPCS - STATE MEDICAID AGENCY	NO	06/30/2019	06/30/2019		Non-Covered services for members less than 4 years old. Only ONE of the following codes is payable within a rolling thirty day period: T4529, T4530, T4531, T4532, T4533, T4534, T4535, T4536, T4538, T4539, T4543, T4544, T4545, A4520	
MMAI-Medicare/Medicaid	T4530	PED SZ DISPBL INCONT BRF/DIAPER LG	HCPCS - STATE MEDICAID AGENCY	NO	06/30/2019	06/30/2019		Non-Covered services for members less than 4 years old. Only ONE of the following codes is payable within a rolling thirty day period: T4529, T4530, T4531, T4532, T4533, T4534, T4535, T4536, T4538, T4539, T4543, T4544, T4545, A4520	
MMAI-Medicare/Medicaid	T4529	PED SZ DISPBL INCONT BRF/DIAPER S/M	HCPCS - STATE MEDICAID AGENCY	NO	06/30/2019	06/30/2019		Non-Covered services for members less than 4 years old. Only ONE of the following codes is payable within a rolling thirty day period: T4529, T4530, T4531, T4532, T4533, T4534, T4535, T4536, T4538, T4539, T4543, T4544, T4545, A4520	
MMAI-Medicare/Medicaid	T4528	ADLT SZD DISPBL INCONT UNDWEAR X-LG	HCPCS - STATE MEDICAID AGENCY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	T4527	ADLT SZD DISPBL INCONT UNDWEAR LG	HCPCS - STATE MEDICAID AGENCY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	T4526	ADLT SZD DISPBL INCONT UNDWEAR MED	HCPCS - STATE MEDICAID AGENCY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	T4525	ADLT SZD DISPBL INCONT UNDWEAR SM	HCPCS - STATE MEDICAID AGENCY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	T4524	ADLT DISPBL INCONT BRF/DIAPER X-LG	HCPCS - STATE MEDICAID AGENCY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	T4523	ADLT SZ DISPBL INCONT BRF/DIAPER LG	HCPCS - STATE MEDICAID AGENCY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	T4522	ADLT SZ DISPBL INCONT BRF/DIAPER MD	HCPCS - STATE MEDICAID AGENCY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	T4521	ADLT SZ DISPBL INCONT BRF/DIAPER SM	HCPCS - STATE MEDICAID AGENCY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	T2101	HUMN BRST MILK PRC STOR&DSTRB ONLY	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2049	NON-EMERG TRNSPRT; VAN MILEAGE;MILE	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2048	BHVAL HLTH; LTC RES W/ROOM&BD-DIEM	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2046	HOSPICE LT CARE RM AND BD PER DIEM	HCPCS - STATE MEDICAID AGENCY	NON-COV	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	T2045	HOSPICE GENERAL INPAT CARE PER DIEM	HCPCS - STATE MEDICAID AGENCY	NON-COV	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	T2044	HOSPICE INPAT RESPITE CARE PER DIEM	HCPCS - STATE MEDICAID AGENCY	NON-COV	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	T2043	HOSPICE CONTINUOUS HOME CARE PER HR	HCPCS - STATE MEDICAID AGENCY	NON-COV	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	T2042	HOSPICE ROUTINE HOME CARE PER DIEM	HCPCS - STATE MEDICAID AGENCY	NON-COV	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	T2041	SUPP BROKER SLF-DIRED WAIVR; 15 MIN	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	T2040	FINANCIAL MGMT WAIVER; 15 MIN	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2039	VEHICLE MOD WAIVER; PER SERVICE	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2038	CMTY TRANSITION WAIVER; PER SERVICE	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2037	TX CAMPING DA WAIVER; EA SESS	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2036	TX CAMPING OVRNGT WAIVER; EA SESS	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2035	UTILITY SERVICES MED EQP WAIVER	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2034	CRISIS INTERVEN WAIVER; PER DIEM	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2033	RES CARE NOS WAIVER; PER DIEM	HCPCS - STATE MEDICAID AGENCY	NO	06/14/2019	06/14/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	T2032	RES CARE NOS WAIVER; PER MONTH	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2029	SPECIALIZED MEDICAL EQP NOS WAIVER	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2028	SPECIALIZED SUPPLY NOS WAIVER	HCPCS - STATE MEDICAID AGENCY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2027	SPCLIZED CHILDCARE WAIVER; 15 MIN	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2026	SPCLIZED CHILDCARE WAIVER; PER DIEM	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2024	SRVC ASSESS/PLAN CARE DVLP WAIVER	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2021	DAY HABILITATION WAIVER; PER 15 MIN	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2019	HABILTATN SUPP EMPLMNT WAIVR;15 MIN	HCPCS - STATE MEDICAID AGENCY	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	T2018	HABILITATN SUPP EMPLMNT WAIVR;DIEM	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2017	HABILITATION RES WAIVER; PER 15 MIN	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2016	HABILITATION RES WAIVER; PER DIEM	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2015	HABILITATION PREVOCATIONAL WAIVR;HR	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2014	HABILITATN PREVOCATIONL WAIVR;DIEM	HCPCS - STATE MEDICAID AGENCY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2013	HABILITATION ED WAIVER; HOUR	HCPCS - STATE MEDICAID AGENCY	NON-COV	07/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	T2012	HABILITATION ED WAIVER; DIEM	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2011	PASRR LEVEL II EVALUATION PER EVAL	HCPCS - STATE MEDICAID AGENCY	NON-COV	03/01/2016	03/01/2016			
MMAI-Medicare/Medicaid	T2010	PASRR LEVEL I ID SCREEN PER SCREEN	HCPCS - STATE MEDICAID AGENCY	NON-COV	03/01/2016	03/01/2016			
MMAI-Medicare/Medicaid	T2007	TRNSPRT WAIT TIME NON-ER VEH 1/2 HR	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2005	NONEMERGENCY TRNSPRT; STRETCHER VAN	HCPCS - STATE MEDICAID AGENCY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2004	N-EMERG TRNSPRT;COMMER CARR MX-PASS	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2003	NON-EMERG TRNSPRT; ENCOUNTER/TRIP	HCPCS - STATE MEDICAID AGENCY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2002	NON-EMERG TRANSPORTATION; PER DIEM	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2001	N-EMERG TRNSPRT; PT ATTENDNT/ESCORT	HCPCS - STATE MEDICAID AGENCY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T1999	MISC TX ITEMS&SPL RTAIL PURCHSE NOC	HCPCS - STATE MEDICAID AGENCY	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	

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MMAI-Medicare/Medicaid	T1505	ELECTRON MED COMPL MANAGE DEVC NOS	HCPCS - STATE MEDICAID AGENCY	NO	09/01/2017	09/01/2017		Submit claims with medical records	
MMAI-Medicare/Medicaid	T1503	ADMN MED NOT ORAL&/INJ AGENCY/PROF	HCPCS - STATE MEDICAID AGENCY	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	T1502	ADMN ORL IM&/SUBQ MED HLTH PROF	HCPCS - STATE MEDICAID AGENCY	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	T1041	MEDICAID CERT COM BH CLINIC SRVC PM	HCPCS - STATE MEDICAID AGENCY	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	T1040	MEDICAID CERT COM BH CLINIC SRVC PD	HCPCS - STATE MEDICAID AGENCY	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	T1031	NURSING CARE THE HOME LPN PER DIEM	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T1030	NRS CARE HOME REGISTERED NURSE-DIEM	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T1029	COMP ENVIR LEAD INVESTIGAT-DWELL	HCPCS - STATE MEDICAID AGENCY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T1028	ASSESS HOME PHYSICAL & FAMILY ENVIR	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T1027	FAM TRAIN & CNSL CHILD DVLP 15 MINS	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T1025	MXDISCPLIN CHILD CMPLX IMPAIR DIEM	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T1024	EVAL&TX TEAM MX/SEV HANDICAP CHILD	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T1023	SCR IND PARTICIP SPEC PROG PROJ/TX	HCPCS - STATE MEDICAID AGENCY	YES	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	T1022	CONTRACT HOME HEALTH AGCY SRVC DAY	HCPCS - STATE MEDICAID AGENCY	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	T1021	HOME HLTH AIDE/CERT NURSE ASST VST	HCPCS - STATE MEDICAID AGENCY	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	T1019	PERSONAL CARE SERVICES PER 15 MINS	HCPCS - STATE MEDICAID AGENCY	NO	01/01/2019	01/01/2019	Regulatory Compliance		

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MMAI-Medicare/Medicaid	T1018	SCHOOL-BASD IND ED PROG SERV BUNDLD	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T1017	TARGETED CASE MANAGEMENT EA 15 MINS	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T1015	CLINIC VST/ENCOUNTER ALL-INCLUSIVE	HCPCS - STATE MEDICAID AGENCY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	T1014	TELEHEALTH TRANS MIN PROF SRVC	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	11/03/2015			
MMAI-Medicare/Medicaid	T1013	SIGN LANGE/ORAL INTEPR SRVC-15 MIN	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	T1012	ALCOHOL&/SBSTNC ABS SRVC SKL DVLP	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	T1010	MEALS REC ALCOHL&/SUBSTNC ABS SRVC	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T1009	CHILD SIT IND ALC&/SUBSTNC ABS SRVC	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T1007	ALCOHOL&/SUBSTANCE ABUSE SERVICES	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	T1006	ALCOHL&/SBSTNC ABS FAM/COUPLE CNSL	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	T1005	RESPITE CARE SERVICES TO 15 MIN	HCPCS - STATE MEDICAID AGENCY	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	T1004	SRVC QUALIFIED NRS AIDE TO 15 MIN	HCPCS - STATE MEDICAID AGENCY	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	T1000	PRIV DUTY/INDEPENDENT NRS TO 15 MIN	HCPCS - STATE MEDICAID AGENCY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9989	SERVICES PROVIDED OUTSIDE USA	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9982	MEDICAL RECORDS COPYING FEE-PAGE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S9981	MEDICAL RECORDS COPYING FEE ADMIN	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	S9977	MEALS PER DIEM NOS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9976	LODGING PER DIEM NOS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9975	TPLNT REL LODG MEALS & TRNSPRT DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9961	AMB SERVC AIR NON-ER 1 WAY ROT WING	HCPCS - TEMP NATIONAL CODES	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	S9960	AMB SERVC AIR NON-ER 1 WAY FIX WING	HCPCS - TEMP NATIONAL CODES	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	S9900	SRVC JOUR-LISTED CS PRACT HEAL-DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9810	HOME THERAPY; NOC PER HOUR	HCPCS - TEMP NATIONAL CODES	NON-COV	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	S9560	HOME INJ TX; HORMONAL THERAPY DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9559	HOME INFUS TX INTERFERON PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9558	HOME INFUS TX GROWTH HORMONE-DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9542	HOME INJECTABLE THERAPY NOC-DIEM	HCPCS - TEMP NATIONAL CODES	NO	09/01/2017	09/01/2017		Submit claims with medical records	
MMAI-Medicare/Medicaid	S9538	HOME TRANSFUSION BLOOD PROD; DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9537	HOM TX HEMATOPOIETIC H INJ TX;-DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9529	HOME OR SNF PATIENT	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9503	HIT ABX ANTIVIRL/ANTIFUNGAL; Q6 HRS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9502	HIT ABX ANTIVIRL/ANTIFUNGAL; Q8 HRS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	S9501	HIT ANTIBIOTIC/ANTIFUNGAL; Q12 HRS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9500	HIT ANTIBIOTIC/ANTIFUNGAL; Q24 HRS	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9497	HIT ANTIBIOTIC/ANTIFUNGAL; Q3 HRS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9494	HIT ANTIBIOTIC/ANTIFUNGAL; DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9484	CRISIS INTERVEN MENTL HLTH SRVC-HR	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013		Notify Plan Case Management: Telephone# 866-600-2139	
MMAI-Medicare/Medicaid	S9482	FAMILY STABILIZATN SRVC PER 15 MIN	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9480	INTENSIVE OP PSYC SERVICES PER DIEM	HCPCS - TEMP NATIONAL CODES	NO	12/04/2014	12/04/2014	Market Competitiveness		
MMAI-Medicare/Medicaid	S9476	VESTIBULR REHAB NON-PHYS PROV-DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9474	ENTRSTML TX RN CERT ENTRSTML TX DAY	HCPCS - TEMP NATIONAL CODES	NON-COV	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	S9473	PULM REHAB PROGM NON-PHYS PROV DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S9472	CARD REHAB PROGM NON-PHYS PROV DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S9470	NUTRITIONAL CNSL DIETITIAN VISIT	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9465	DIABETIC MGMT PROGM DIETITIAN VISIT	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S9460	DIABETIC MGMT PROGM NURSE VISIT	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S9455	DIABETIC MGMT PROGM GROUP SESSION	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S9454	STRESS MGMT CLASS NON-PHYS PER SESS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	S9453	SMOKING CESSATION CLASS NON-MD SESS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9452	NUTRITION CLASSES NON-PHYS PER SESS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9451	EXERCISE CLASSES NON-PHYS PER SESS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9449	WEIGHT MGMT CLASS NON-PHYS PER SESS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9447	INFANT SAFETY CLASS NON-MD PER SESS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9446	PT ED NOC NON-MD PROV GROUP SESSION	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9445	PT ED NOC NON-MD PROV IND SESSION	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9444	PARENTING CLASSES NON-MD PER SESS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9443	LACTATION CLASS NON-PHYS PROV-SESS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S9442	BIRTHING CLASSES NON-PHYS PROV-SESS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S9441	ASTHMA ED NON-MD PROV PER SESSION	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S9439	VBAC CLASSES NON-MD PER SESSION	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S9438	CESAREAN BRTH CLASS NON-MD PER SESS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S9437	CHILDBIRTH REFRESH CLASS PER SESS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S9436	CHLDBRTH PREP/LAMAZE CLASS PER SESS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S9435	MEDICAL FOODS INBORN ERRORS METAB	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	S9434	MOD SOLID FOOD SUP INBORN ERR METAB	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9433	MED FOOD NUTR ORAL 100PCT NUTR INTAKE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9430	PHARM COMPOUNDING & DISPENSING SERV	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9401	ANTICOAGULAT CLIN NO LAB PER SESS	HCPCS - TEMP NATIONAL CODES	NON-COV	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	S9381	DEL/HI RISK REQ ESCRT/PROTECT VST	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9379	HOME INFUS TX INFUSION TX NOC; DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9375	HIT HYDRAT; GT 1 LITR NOGT 2 LITR DAY	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9374	HIT HYDRATION TX; 1 LITER DAY	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9373	HIT HYDRATION TX; PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9372	HT; INTERMIT ANTICOAGULANT INJ TX;	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9370	HT INTERMITTENT ANTI-EMETIC INJ TX;	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9368	HOM INFUS TX TPN; GT 3 L-DAY-DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9367	HIT TPN; GT 2 L BUT NOT GT 3 L-DAY-DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9366	HIT TPN; GT 1 L BUT NOT GT 2 L-DA-DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9364	HIT TPN; CARE COORDINATION DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9357	HIT ENZYME REPL IV TX; PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	05/01/2017	12/31/2078			

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MMAI-Medicare/Medicaid	S9355	HOME INFUS TX CHELATION; PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9353	HOME INFUS TX CONT INSULIN; DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9351	HIT CONT ANTI-EMETIC; PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9349	HOME INFUS TX TOCOLYTIC; PER DIEM	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9347	HIT UNINTRPED LNG-TERM IV/SUBQ;DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9346	HIT ALPHA-1-PROTENAS INHIBITR; DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9345	HIT ANTI-HEMOPHILIC AGENT; PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9343	HT; ENTERAL NUTRIT VIA BOLUS; DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9342	HT; ENTERAL NUTRIT VIA PUMP; DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9340	HOME TX; ENTERAL NUTRITION; DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9339	HOME TX; PERITONL DIALYSIS PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9338	HOME INFUS TX IMMUOTHAPY; PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9336	HIT CONT ANTICOAGULNT INFUS TX DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9335	HOM TX HD; ADMIN SPL & EQP PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9330	HIT CONT CHEMOTHAPY INFUS; PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9329	HIT CHEMOTHERAPY INFUSION; PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		

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MMAI-Medicare/Medicaid	S9327	HIT INTERMIT PAIN MGMT INFUS; DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9325	HIT PAIN MANAGEMENT INFUS; PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9212	HOME MANAGEMENT POSTPARTUM HTN DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9209	HOME MANGEMENT PPROM DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9208	HOME MGMT PRETERM LABOR PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9145	INSULIN PUMP INIT INSTRUCT USE PUMP	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S9141	DIAB MGMT PROGM F/U VISIT MD PROV	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S9140	DM MGMT PROGM F/U VST NON-MD PROV	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S9131	PHYSICAL THERAPY; HOME PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9129	OCCUPATIONAL THERAPY HOME PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9124	NURSING CARE THE HOME; LPN PER HOUR	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9123	NRS CARE HOM; REGISTERED NURSE-HOUR	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9122	HOM HLTH AIDE/CNA PROV CARE HOM; HR	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9098	HOME VISIT PHOTOTHERAPY SRVC DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9090	VERT AXIAL DECOMPRS PER SESSION	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9088	SERVICES PROV AN URGENT CARE CENTER	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	S9061	HOME ADMIN AEROSOLIZED DRUG TX DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9055	PROCUREN/OTH GROWTH FACTOR PREP	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9034	ESWL FOR GALL STONES	HCPCS - TEMP NATIONAL CODES	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	S9001	HOME UTERIN MON W/WO ASSOC NRS SRVC	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S8990	PHYS/MANIP TX MAINT NOT RESTORATION	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S8950	COMPLEX LYMPHEDEMA TX EA 15 MIN	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S8948	APPLIC MODAL 1/MORE AREAS; LW-LEVL	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S8430	PADDING COMPRESSION BANDAGE ROLL	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8428	GRADENT PRESS AID GAUNTLET RDY MADE	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8427	GRADENT PRESS AID GLOVE READY MADE	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8426	GRADENT PRESS AID GLOVE CSTM HVY WT	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8425	GRADENT PRESS AID GLOVE CSTM MED WT	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8424	GRADENT PRESS AID SLEEVE READY MADE	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8423	GRADENT PRESS AID SLEEV CSTM HVY WT	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8422	GRADENT PRESS AID SLEEV CSTM MED WT	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8421	GRADENT PRESS AID SLV&GLOV RDY MADE	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	S8420	GRADENT PRESS AID SLEEVE&GLOVE CSTM	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8415	SUPPLIES HOME DELIVERY OF INFANT	HCPCS - TEMP NATIONAL CODES	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	S8270	ENURESIS ALARM BUZZ&/VIBRATION DEVC	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8265	HABERMAN FEEDER CLEFT LIP/PALATE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8189	TRACHEOSTOMY SUPPLY NOC	HCPCS - TEMP NATIONAL CODES	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	S8131	INTERFERENTIAL CURR STIM 4 CHANNEL	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S8130	INTERFERENTIAL CURR STIM 2 CHANNEL	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S8121	O2 CONTENTS LQD 1 U EQUALS 1 POUND	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S8120	O2 CNTN GASEOUS 1 U EQU 1 CUBIC FOOT	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S8101	HOLD CHAMB W/INHAL/NEBULIZR; W/MASK	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8100	HOLD CHAMB W/INHAL/NEBULIZR;NO MASK	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8085	F-18 FDG IMAG 2-HD COINCDENC DETCT	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S8080	SCINTIMAMMO UNI W/SPL RADIOPHARM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S8055	US GUID MXIFETL PG RDUC TECH CMPNT	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S8030	SCLERAL APPLICATION TANTALUM RING	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S5571	INSULIN DISPOSABLE PEN; 3 ML SZ	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	S5570	INSULIN DISPOSABLE PEN; 1.5 ML SZ	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5566	INSULIN CARTRIDGE NOT PUMP; 300 U	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5565	INSULIN CARTRIDGE NOT PUMP; 150 U	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5561	INSULIN DEVC REUSABLE PEN; 3 ML SZ	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5560	INSULIN DEVC REUSABLE PEN;1.5 ML SZ	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5552	INSULIN INTERMED ACTING; 5 UNITS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S5523	HIT INSRT ML VEN CATH NRS SRVC ONLY	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5522	HIT INSRT PICC NURSE SRVC ONLY	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5521	HIT SPL NECES MIDLINE CATH INSERT	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5520	HIT ALL SPL NECES PICC LINE INSERT	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5518	HIT ALL SPL NECES FOR CATH REPAIR	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5501	HOME INFUS TX CATH CARE COMPLX DIEM	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5498	HOME INFUS TX CATH CARE SIMPLE DIEM	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5497	HOME INFUS TX CATH CARE NOC; DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5190	WELLNESS ASSESS PRFRM NON-PHYSICIAN	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S5185	MED REMINDR SRVC NON-FCE-TO-FCE; MO	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	S5181	HOME HEALTH RESP TX NOS PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5180	HOME HEALTH RESP TX INIT EVALUATION	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5175	LAUNDRY SERVICE EXT PROF; ORDER	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5170	HOME DEL MEALS INCL PREP; MEAL	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5162	EMERG RESPONSE SYS; PURCHASE ONLY	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5161	EMERG RESPONSE SYS; SRVC FEE-MONTH	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5160	EMERG RESPONSE SYSTEM; INSTL&TST	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5151	UNSKLD RESPITE CARE NOT HOSPICE;PER	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5150	UNSKLD RESPITE CARE NOT HOSPICE; 15	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5146	FOSTER CARE THERAPEUTIC CHLD; MONTH	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5145	FOSTER CARE THERAPEUTIC CHILD; DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5135	COMPANION CARE ADULT; PER 15 MIN	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5130	HOMEMAKER SERVICE NOS; PER 15 MIN	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5125	ATTENDANT CARE SERVICES; PER 15 MIN	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5116	HOME CARE TRN NON-FAM; PER SESSION	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5115	HOME CARE TRN NON-FAM; PER 15 MIN	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	S5111	HOME CARE TRAINING FAM; PER SESSION	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5110	HOME CARE TRAINING FAM; PER 15 MIN	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5109	HOME CARE TRN HOME CARE CLIENT SESS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5108	HOM CARE TRN HOM CARE CLIENT 15 MIN	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5105	DAY CARE CNTR-BASD; SRVC NOT W/FEE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5101	DAY CARE SRVC ADULT; PER HALF DAY	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5100	DAY CARE SERVICES ADULT; PER 15 MIN	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5036	HOME INFUS TX REPAIR INFUS DEVICE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5035	HOME INFUS TX ROUTINE INFUS DEVC	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5014	5PCT DXTRS/0.45PCT NS KCI&MGSO4 1500 ML	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S5013	5PCT DXTROS/0.45PCT S KCL&MGSO4 1000 ML	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S5012	5PCT DXTROS W/K+ CHLORID 1000 ML	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S5010	5PCT DXTROS & 0.45PCT NL SALINE 1000 ML	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S4993	CONTRACEPTIVE PILLS BIRTH CONTROL	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S4989	CONTRACEPT IUD INCL IMPL&SUPPLIES	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S4981	INSRT LEVONORGESTREL INTRAUTRN SYS	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	S4042	MGMT OVULATION INDUCTION PER CYCLE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S4040	MON & STOR CRYOPRESRV EMBRYOS 30 DA	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S4037	CRYOPRESERVD EMBRYO TRNSF CASE RATE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S4035	STIM INTRAUTERINE INSEMIN CASE RATE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S4031	SPERM PROCURE&CRYOPRES; SUBSQT VST	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S4030	SPERM PROCUREMENT&CRYOPRES; 1 VISIT	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S4028	MICSURG EPIDIDYMAL SPERM ASPIR	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S4027	STORAGE PREVIOUSLY FROZEN EMBRYOS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S4026	PROCUREMENT DONR SPERM SPERM BANK	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S4025	DONOR SRVC IN VITRO FERTILIZATION	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S4023	DONOR EGG CYCLE INCPL CASE RATE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S4022	ASSIST OOCYTE FERTILIZ CASE RATE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S4021	IVF PROC CANCL AFTR ASPIR CASE RATE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S4020	IVF PROC CANCL BEFR ASPIR CASE RATE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S4018	FRZN EMB TRANS CANCL CASE RATE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S4017	INCPL CYCL TX CANCELD PRIOR TO STIM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	S4016	FROZEN IVF CYCLE CASE RATE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S4015	COMPLETE IVF CYCLE CASE RATE NOS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S4014	COMPLETE CYCLE ZIFT CASE RATE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S4013	COMPLETE CYCLE GIFT CASE RATE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S3870	CGH MICROARRAY TEST DD ASD &/OR ID	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S3866	GENETIC ANALYSIS GENE MUTAT HCM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S3865	COMP GENE SEQUENCE ANALYSIS HCM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S3861	GENETIC TEST SCN5A&VARIANTS SPCT BS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S3854	GENE EXPRESSION PROFILING PANEL	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S3853	GENETIC TST MYOTONIC MUSC DYSTROPHY	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S3852	DNA ANALY APOE EPSILON 4 ALLELE ALZ	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S3850	GENETIC TESTING SICKLE CELL ANEMIA	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S3849	GENETIC TESTING NIEMANN-PICK DZ	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S3846	GENETIC TST HGB E BETA-THALASSEMIA	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S3845	GENETIC TESTING ALPHA-THALASSEMIA	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S3844	DNA ANALY GJB2 CONGN PFND DEAFNESS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	S3842	GENETIC TST VON HIPPEL-LINDAU DZ	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S3840	DNA ANALYSIS RET PROTO-ONCOGENE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S3800	GENETIC TESTING ALS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S3722	DOSE OPTIMIZATION AUC ANAL INF 5-FU	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S3708	GASTROINTESTINAL FAT ABSORB STUDY	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S3652	SLIVA TST HORMONE LEVL;PRTERM LABOR	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S3650	SALIVA TEST HORMONE LEVEL;MENOPAUSE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S3645	HIV-1 ANTIBOD TEST MUCOS TRANSUDATE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S3620	NEWBORN METABOLIC SCREENING PANEL	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S3601	EMERG STAT LAB CHRG PT HB/NRS FACL	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S3005	PRFRM MSR EVAL PT SELF ASSESS DPRSS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S3000	DIAB IND; RET EYE EX DILAT BIL	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S2900	SURG TECH RQR USE ROBOTIC SURG SYS	HCPCS - TEMP NATIONAL CODES	NON-COV	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	S2409	REP CONGN MALFORM FETUS-UTERO NOC	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2405	REPR SACROCOC TRATOMA FETUS IN UTRO	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2404	REPR MYELOMENINGO FETUS PROC-UTERO	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	S2403	REPAIR EPS IN THE FETUS IN UTERO	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2402	REPAIR CONGEN CYST MALF FETUS-UTERO	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2401	REPAIR URIN TRACT OBST FETUS-UTERO	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2400	REPAIR CONGEN HERNIA FETUS-UTERO	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2351	DSKCT ANT-OSTEOPHYT;LUMB ADD INTRSP	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2350	DISKECT ANT-OSTEOPHYT;LUMB 1 INTRSP	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2348	DECOMP PERQ DISC RF 1/MX LUMB	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2342	NASL ENDO POSTOP DEBRID UNI/BIL	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S2341	CHEMODENERVAT ADDUCT MUSC VOCAL CRD	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S2340	CHEMODNERVAT ABDUCTR MUSC VOCL CORD	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S2300	SCOPE SHLDR;W/THERML-INDUCD CPSLORR	HCPCS - TEMP NATIONAL CODES	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	S2267	INDUCED ABORTION 32 WEEKS/GREATER	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2260	INDUCD AB 17-24 WEEKS ANY SURG METH	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2235	IMPL AUDITRY BRAIN STEM IMPLANT	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2230	IMPL MAGNT CMPNT SEMI-IMPL HEAR DVC	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2209	MIN INVAS DIR CAB; 2 ART GFT&1 VG	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	S2208	MIN INVAS DIR CAB; 1 ART&VG 1 VG	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S2207	MIN INVAS DIR CAB; VEN ONLY 1 CVG	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S2206	MIN INVAS DIR CAB; ART GFT 2 CAG	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S2205	MIN INVAS DIR CAB; ART GFT 1 CAG	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S2152	SOLID ORGAN; TPLNT & RELATED COMP	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2150	BN MARRW/STEM CELL HARV TPLNT&COMP;	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2142	CORD BLOOD STEM-CELL TPLNT ALLOGEN	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2140	CORD BLD HARVEST TPLNT ALLOGENEIC	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2120	LDL APHERES HEPARN XTRCRP LDL PRECP	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S2118	MTL-ON-MTL TOT HIP RSRFC ACETAB&FEM	HCPCS - TEMP NATIONAL CODES	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	S2115	OSTEOT PERIACETABULAR W/INTRL FIX	HCPCS - TEMP NATIONAL CODES	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	S2112	ARTHROSCOPY KNEE SURG HARVEST CART	HCPCS - TEMP NATIONAL CODES	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	S2107	ADOPTIVE IMMUNOTX COURSE TREATMENT	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2102	ISLET CELL TISS TPLNT PANC; ALLOGEN	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2095	TRNSCATH OCCL/EMBOLIZ TUMR DESTRUC	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2083	ADJ GASTRIC BAND DIAM SUBQ PORT	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	S2070	CYSTO; LASER TX URETERAL CALC	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S2068	BREAST RECON DIEP/SIEA FLAP UNI	HCPCS - TEMP NATIONAL CODES	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	S2067	BRST RECN 1 BRST DIEP&/GAP FLP(S)	HCPCS - TEMP NATIONAL CODES	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	S2066	BREAST RECON W/GAP FLAP UNILATERAL	HCPCS - TEMP NATIONAL CODES	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	S2065	SIMULTANEOUS PANC KIDNEY TPLNT	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2061	DONOR LOBECT TPLNT LIVING DONOR	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2055	HARV DONR MX-VSCRL ORGN; CADVR DONR	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2054	TRANSPLANTATION MULTIVISCERAL ORGN	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2053	TPLNT SM INTESTINE&LIVER ALLOGFTS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S1040	CRANIAL REMOLD ORTHOT PED CUST FAB	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S1037	RECVER; EXT USE ARTIF PANC DEVC SYS	HCPCS - TEMP NATIONAL CODES	YES	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	S1036	TRANSMTTR;EXT USE ART PANC DEVC SYS	HCPCS - TEMP NATIONAL CODES	YES	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	S1035	SNSR;INVASV DSPBL ART PANC DEVC SYS	HCPCS - TEMP NATIONAL CODES	YES	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	S1034	ARTIF PANC DEVC SYS CMNCT ALL DEVC	HCPCS - TEMP NATIONAL CODES	YES	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	S1031	CONT NONINVAS GLU MON DEVC RENTAL	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S1030	CONT NONINVAS GLU MON DEVC PURCHASE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	S1016	NON-PVC IV ADMN SET RX NOT STABLE	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0630	REMV SUTURS; MD NOT MD WHO CLOS WND	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0622	PHYSICAL EXAM COLLEGE NEW/EST PT	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0621	ROUTINE OPHTH EX W/REFRAC; EST PT	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	S0620	ROUTINE OPHTH EX W/REFRAC; NEW PT	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	S0618	AUDIOMETRY FOR HEARING AID EVAL	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0613	ANNUAL GYN EX CLIN BRST EX NO PELV	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0612	ANNUAL GYN EXAMINATION EST PATIENT	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0610	ANNUAL GYN EXAMINATION NEW PATIENT	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0596	PHAKIC IOL CORRECT REFRACTIVE ERROR	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0595	DISPNS NEW SPCTCL LENS PT SPL FRME	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0592	COMP CONTACT LENS EVALUATION	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0590	INTEGRL LENS SRVC MISC REPORTED SEP	HCPCS - TEMP NATIONAL CODES	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	S0515	SCLERAL LENS LQD BANDGE DEVICE-LENS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0512	DAILY WEAR SPCLTY CNTC LENS-LENS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0508	TRIFOCAL VISION PRSC LENS PER LENS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	S0506	BIFOCAL VISION PRSC LENS PER LENS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0504	SINGLE VISION PRSC LENS PER LENS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0400	GLOBL FEE XTRACORP SHOCK WAVE LITH	HCPCS - TEMP NATIONAL CODES	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	S0395	IMPRESSION CAST FOOT-PRACTITIONER	HCPCS - TEMP NATIONAL CODES	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	S0354	TX PLAN CARE MGMT CA EST PT CHG REG	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0353	TX PLAN CARE COORD MGMT CA INIT TX	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0342	LIFESTYL MOD MGMT COR ART DZ; 4 QTR	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0341	LIFESTYL MOD MGMT CAD; 2ND/3RD QTR	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0340	LIFESTYL MOD MGMT COR ART DZ; 1 QTR	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0320	TEL CALLS RN DZ MGMT MEMB MONITR;MO	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0317	DISEASE MANAGEMENT PROGM; PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0316	DZ MGMT PROGM FOLLOW-UP/REASSESS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0315	DZ MGMT PROGM; INIT ASSESS&INIT PRO	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0311	COMP MGMT&CARE COORD ADV ILL CAL MO	HCPCS - TEMP NATIONAL CODES	NO	08/14/2018	08/14/2018			
MMAI-Medicare/Medicaid	S0302	CMPL EARLY PRD SCREEN DX&TX SRVC	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0285	COL CNSLT PRFRM PRIOR SCR COL PROC	HCPCS - TEMP NATIONAL CODES	NO	08/02/2016	08/02/2016			

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MMAI-Medicare/Medicaid	S0281	MED HOME PROGRAM CARE COORD MAINT	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0280	MED HOME PROG COMP CARE COORD INIT	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0274	NP VST MEMBR HOM OUTSIDE CAPITATION	HCPCS - TEMP NATIONAL CODES	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	S0273	PHYS VST MEMBER HOME OUT CAPITATION	HCPCS - TEMP NATIONAL CODES	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	S0272	PHYS MGT PT HM CARE EPISODC MO RATE	HCPCS - TEMP NATIONAL CODES	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	S0271	PHYS MGT PT HM CARE HOSPICE MO RATE	HCPCS - TEMP NATIONAL CODES	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	S0270	PHYS MGT PT HOME CARE STD MON RATE	HCPCS - TEMP NATIONAL CODES	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	S0265	GENETIC CNSL PHYS SUP EA 15 MINS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0260	HX & PHYS RELATED TO SURGICAL PROC	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0257	CNSL&DISCUSS AD/EOL PT&/SURROGATE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0255	BY NRS SOCL WRKER/OTH DESNATD STAFF	HCPCS - TEMP NATIONAL CODES	NON-COV	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	S0250	COMP GERIATRIC ASSESS&TX PLANNING	HCPCS - TEMP NATIONAL CODES	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	S0221	MED CONF MD W/TEAM HLTH PROF;60 MIN	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0220	MED CONF MD W/TEAM HLTH PROF;30 MIN	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0215	NON-EMERG TRANSPORTATION; PER MILE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0208	PARAMED INTRCPT ALS NON-TRNSPRT	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	S0207	PARAMED INTERCEPT NON-HOS-BASED ALS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0199	MED INDUCED AB ORAL INGEST MED	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0194	DIALYS/STRESS VIT SUPL ORAL 100 CAP	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0182	PROCARBAZINE HYDROCHLORD ORAL 50 MG	HCPCS - TEMP NATIONAL CODES	NON-COV	04/19/2020	12/31/2078			
MMAI-Medicare/Medicaid	S0157	BECAPLERMIN GEL 0.01PCT 0.5 GM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0155	STERILE DILUTANT EPOPROSTENOL 50 ML	HCPCS - TEMP NATIONAL CODES	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	S0148	INJ PEGYLATD INTRFER ALFA-2B 10 MCG	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0145	INJ PEGYLATD IFN ALFA-2A 180 MCG ML	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0142	COLISTMTHATE SODUIM INHAL CONC-MG	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0106	BUPROPION HCI SR TAB 150 MG 60 TABS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0092	INJ HYDMORPHONE HYDROCHLORID 250 MG	HCPCS - TEMP NATIONAL CODES	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	S0081	INJ PIPERACILLIN SODIUM 500 MG	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0080	INJ PENTAMIDINE ISETHIONATE 300 MG	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0078	INJ FOSPHENYTOIN SODIUM 750 MG	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0040	INJ TICARCLLN & CLAVULANAT K+3.1 GM	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0039	INJ SULFMETHOXAZL&TRIMETHOPRM 10 ML	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	S0023	INJ CIMETIDINE HYDROCHLORIDE 300 MG	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0021	INJ CEFOPERAZONE SODIUM 1 GM	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0012	BUTORPHANL TARTRAT NASL SPRAY 25 MG	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	R0076	TRANS PRTBLE EKG FACL/LOCATION-PT	HCPCS - DIAG. RADIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	R0075	TRANS PRTBL XRAY EQP&PERS-TRIPGT 1 PT	HCPCS - DIAG. RADIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	R0070	TRANS PRTBL XRAY EQP&PERS-TRIP 1 PT	HCPCS - DIAG. RADIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q9992	INJ BUPRENORPHINE EXT-RLSE GT 100 MG	HCPCS - TEMP CODES	YES	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	Q9991	INJECTION BU EXT-RLSE LT /EQU TO 100 MG	HCPCS - TEMP CODES	YES	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	Q9983	FLORBETABEN F18 DX P DO TO 8.1 MCI	HCPCS - TEMP CODES	NO	08/02/2016	08/02/2016			
MMAI-Medicare/Medicaid	Q9982	FLUTEMETAML F18 DX STDY DO TO 5 MCI	HCPCS - TEMP CODES	NO	08/02/2016	08/02/2016			
MMAI-Medicare/Medicaid	Q9968	INJ NONRA NONCNTRST VIZ ADJNCT 1 MG	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q9967	LOCM 300-399 MG/ML I CONC PER ML	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q9966	LOCM 200-299 MG/ML I CONC PER ML	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q9965	LOCM 100-199 MG/ML I CONC PER ML	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q9964	HOCM 400 OR GT MG/ML IODINE CONC ML	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q9963	HOCM 350-399 MG/ML IODINE CONC ML	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	Q9962	HOCM 300-349 MG/ML IODINE CONC ML	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q9961	HOCM 250-299 MG/ML IODINE CONC ML	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q9960	HOCM 200-249 MG/ML IODINE CONC ML	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q9959	HOCM 150-199 MG/ML IODINE CONC ML	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q9958	HOCM UP TO 149 MG/ML IODINE CONC ML	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q9957	INJ PERFLUTREN LIPID MICROSPHERS ML	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q9956	INJ OCTAFLUOROPROPANE MICROSPHRS ML	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q9955	INJ PERFLEXANE LIPID MICROSPHERS ML	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q9954	ORAL MR CONTRAST AGENT 100 ML	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q9953	INJ IRONBASED MR CONTRAST AGENT ML	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q9951	LOCM 400/GT MG/ML IODINE CONC ML	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q5114	INJ TRASTUZUMAB-DKST BIOSIM 10 MG	HCPCS - TEMP CODES	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q5113	INJ TRASTUZUMAB-PKRB BIOSIM 10 MG	HCPCS - TEMP CODES	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q5112	INJ TRASTUZUMAB-DTTB BIOSIM 10 MG	HCPCS - TEMP CODES	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q5109	INJ INFLIXIMAB-QBTX BIOSIMILR 10 MG	HCPCS - TEMP CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q5104	INJ INFLIXIMAB-ABDA BIOSIMILR 10 MG	HCPCS - TEMP CODES	YES	04/01/2018	12/31/2078			

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MMAI-Medicare/Medicaid	Q5103	INJ INFLIXIMAB-DYYB BIOSIMILR 10 MG	HCPCS - TEMP CODES	YES	04/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	Q5010	HOSPICE HOME CARE PROV HOSPICE FACL	HCPCS - TEMP CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	Q5009	HOSPICE/HOME HLTH CARE IN PLACE NOS	HCPCS - TEMP CODES	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	Q5008	HOSPICE CARE PROV IP PSYCH FACILITY	HCPCS - TEMP CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	Q5007	HOSPICE CARE PROV IN LTC FACL	HCPCS - TEMP CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	Q5006	HOSPICE CARE PROV IP HOSPICE FACL	HCPCS - TEMP CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	Q5005	HOSPICE CARE PROV IN IP HOSPITAL	HCPCS - TEMP CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	Q5003	HOSPICE CARE PRVO LTC/NON-SKILL NF	HCPCS - TEMP CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	Q5001	HOSPICE/HOME HLTH CARE PT HOME/RES	HCPCS - TEMP CODES	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	Q4204	XWRAP PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4203	DERMA-GIDE PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4202	KEROXX (2.5G/CC) 1CC	HCPCS - TEMP CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4201	MATRION PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4200	SKINTE PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4198	GENESIS AMNIOTIC MEMBRANE PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4197	PURAPLY XT PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2019	12/31/2078			

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MMAI-Medicare/Medicaid	Q4196	PURAPLY AM PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4195	PURAPLY PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4194	NOVACHOR PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4193	COLL-E-DERM PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4192	RESTORIGIN 1 CC	HCPCS - TEMP CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4191	RESTORIGIN PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4190	ARTACENT AC PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4189	ARTACENT AC 1 MG	HCPCS - TEMP CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4188	AMNIOARMOR PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4187	EPICORD PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4186	EPIFIX PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4185	CELLESTA FLOWABLE AMNION;PER 0.5 CC	HCPCS - TEMP CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4184	CELLESTA OR CELLESTA DUO PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4183	SURGIGRAFT PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	Q4175	MIRODERM PER SQ CM	HCPCS - TEMP CODES	YES	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	Q4174	PALINGEN/PROMATRX 0.36 MG P 0.25 CC	HCPCS - TEMP CODES	YES	01/27/2017	12/31/2078			

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MMAI-Medicare/Medicaid	Q4173	PALINGEN/PALINGEN XPLUS PER SQ CM	HCPCS - TEMP CODES	YES	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	Q4171	INTERFYL 1 MG	HCPCS - TEMP CODES	YES	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	Q4170	CYGNUS PER SQ CM	HCPCS - TEMP CODES	YES	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	Q4169	ARTACENT WOUND PER SQ CM	HCPCS - TEMP CODES	YES	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	Q4168	AMNIOBAND 1 MG	HCPCS - TEMP CODES	YES	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	Q4167	TRUSKIN PER SQ CM	HCPCS - TEMP CODES	YES	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	Q4166	CYTAL PER SQ CM	HCPCS - TEMP CODES	YES	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	Q4149	EXCELLAGEN 0.1 CC	HCPCS - TEMP CODES	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	Q4148	NEOX CORD 1K-RT/CLARIX CORD 1K-SC	HCPCS - TEMP CODES	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	Q4147	ARCHITECT EXTRACELLULAR MATRIX PER	HCPCS - TEMP CODES	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	Q4146	TENSIX PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	Q4145	EPIFIX INJECTABLE 1 MG	HCPCS - TEMP CODES	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	Q4143	REPRIZA PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	Q4142	XCM BIOLOGIC TISSUE MATRIX PER SQ C	HCPCS - TEMP CODES	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	Q4141	ALLOSKIN AC PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	Q4140	BIODFENCE PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2014	12/31/2078			

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MMAI-Medicare/Medicaid	Q4139	AMNIOMATRIX OR BIODMATRIX INJ 1 CC	HCPCS - TEMP CODES	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	Q4138	BIODFENCE DRYFLEX PER SQ CM	HCPCS - TEMP CODES	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	Q4137	AMNIOEXL AMNIOEL PLUS/BIODEXL P SC	HCPCS - TEMP CODES	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	Q4133	GRFX P GRFXPL P STRVX & STRVXPL SC	HCPCS - TEMP CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	Q4132	GRAFIX CORE & GRAFIXPL CORE-SQ CM	HCPCS - TEMP CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	Q4126	MEMODERM TRANZGRAFT/INTEGUPLY SQ CM	HCPCS - TEMP CODES	YES	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	Q4124	OASIS ULTRA TRI-LAY WND MATRX SQ CM	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4122	DERMACELL DERMACELL AWM/POROUS P SC	HCPCS - TEMP CODES	YES	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	Q4115	ALLOSKIN PER SQ CM	HCPCS - TEMP CODES	YES	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	Q4114	INTEGRA FLOWABL WND MATRIX INJ 1 CC	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4113	GRAFTJACKET XPRESS INJECTABLE 1CC	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4112	CYMETRA INJECTABLE 1 CC	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4111	GAMMAGRAFT PER SQ CM	HCPCS - TEMP CODES	YES	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	Q4110	PRIMATRIX PER SQ CM	HCPCS - TEMP CODES	YES	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	Q4108	INTEGRA MATRIX PER SQ CM	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4107	GRAFTJACKET PER SQ CM	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	Q4106	DERMAGRAFT PER SQ CM	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4103	OASIS BURN MATRIX PER SQ CM	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4102	OASIS WOUND MATRIX PER SQ CM	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4101	APLIGRAF PER SQ CM	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4100	SKIN SUBSTITUTE NOT OTHERWISE SPECI	HCPCS - TEMP CODES	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	Q4082	DRUG/BIOLOGICAL NOC PART B DRUG CAP	HCPCS - TEMP CODES	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	Q4074	ILOPROST INHAL UNIT DOSE TO 20 MCG	HCPCS - TEMP CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	Q4050	CAST SPL UNLIST TYPES&MATL CASTS	HCPCS - TEMP CODES	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	Q4048	CAST SPL SHRT LEG SPLNT PED FIBRGLS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4047	CAST SPL SHORT LEG SPLINT PED PLAST	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4046	CAST SPL SHRT LEG SPLNT ADLT F-GLSS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4045	CAST SPL SHRT LEG SPLINT ADLT PLAST	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4044	CAST SPL LNG LEG SPLINT PED FIBRGLS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4043	CAST SPL LNG LEG SPLINT PED PLASTR	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4042	CAST SPL LNG LEG SPLNT ADLT FIBRGLS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4041	CAST SPL LNG LEG SPLINT ADLT PLASTR	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	Q4040	CAST SPL SHORT LEG CAST PED FIBRGLS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4039	CAST SPL SHORT LEG CAST PED PLASTR	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4038	CAST SPL SHRT LEG CAST ADLT FIBRGLS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4037	CAST SPL SHORT LEG CAST ADLT PLASTR	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4036	CAST LNG LEG CYCLE CAST PED F-GLSS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4035	CAST LNG LEG CYCLE CAST PED PLAST	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4034	CAST LNG LEG CYCLE CAST ADLT F-GLSS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4033	CAST LNG LEG CYCLE CAST ADLT PLAST	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4032	CAST SPL LNG LEG CAST PED FIBRGLS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4031	CAST SPL LNG LEG CAST PED PLASTR	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4030	CAST SPL LONG LEG CAST ADLT FIBRGLS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4029	CAST SPL LONG LEG CAST ADULT PLASTR	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4028	CAST SPL HIP SPICA PED FIBRGLS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4027	CAST SPL HIP SPICA PEDIATRIC PLASTR	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4026	CAST SPL HIP SPICA ADULT FIBRGLS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4025	CAST SPL HIP SPICA ADULT PLASTR	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	Q4024	CAST SPL SHRT ARM SPLNT PED FIBRGLS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4023	CAST SPL SHORT ARM SPLINT PED PLAST	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4022	CAST SPL SHRT ARM SPLNT ADLT F-GLSS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4021	CAST SPL SHRT ARM SPLINT ADLT PLAST	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4020	CAST SPL LNG ARM SPLINT PED FIBRGLS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4019	CAST SPL LNG ARM SPLINT PED PLASTR	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4018	CAST SPL LNG ARM SPLNT ADLT FIBRGLS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4017	CAST SPL LNG ARM SPLINT ADLT PLASTR	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4016	CAST SPL GAUNTLET CAST PED F-GLASS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4015	CAST SPL GAUNTLT CAST PED PLASTR	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4014	CAST SPL GAUNTLET CAST ADLT F-GLASS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4013	CAST SPL GAUNTLT CAST ADULT PLASTR	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4012	CAST SPL SHORT ARM CAST PED FIBRGLS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4011	CAST SPL SHORT ARM CAST PED PLASTR	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4010	CAST SPL SHRT ARM CAST ADLT FIBRGLS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4009	CAST SPL SHORT ARM CAST ADLT PLASTR	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	Q4008	CAST SPL LNG ARM CAST PED FIBRGLS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4007	CAST SPL LNG ARM CAST PED PLASTR	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4006	CAST SPL LONG ARM CAST ADLT FIBRGLS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4005	CAST SPL LONG ARM CAST ADULT PLASTR	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4004	CAST SPL SHLDR CAST ADULT FIBRGLS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4003	CAST SPL SHLDR CAST ADULT PLASTR	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4002	CAST BDY CAST ADLT W/WO HEAD F-GLSS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4001	CAST BDY CAST ADLT W/WO HEAD PLAST	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q3028	INJ INTERFERON BETA-1A 1 MCG SUBQ	HCPCS - TEMP CODES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	Q3027	INJ INTERFERON BETA-1A 1 MCG IM USE	HCPCS - TEMP CODES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	Q3014	TELEHEALTH ORIG SITE FACILITY FEE	HCPCS - TEMP CODES	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	Q2039	INFLUENZA VIRUS VACCINE NOS	HCPCS - TEMP CODES	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	Q2038	FLU VACC SPLIT 3 YRS & GT IM FLUZONE	HCPCS - TEMP CODES	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	Q2037	FLU VACC SPLIT 3 YR & GT IM FLUVIRIN	HCPCS - TEMP CODES	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	Q2036	FLU VACC SPLIT 3 YR & GT IM FLULAVAL	HCPCS - TEMP CODES	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	Q2035	FLU VACC SPLIT 3 YRS & GT IM AFLURIA	HCPCS - TEMP CODES	NO	05/01/2017	05/01/2017			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	Q2034	FLU VIRUS VAC SPLIT VRS IM AGRIFLU	HCPCS - TEMP CODES	NO	07/01/2012	07/01/2012			
MMAI-Medicare/Medicaid	Q2028	INJECTION SCULPTRA 0.5 MG	HCPCS - TEMP CODES	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	Q2026	INJECTION RADIESSE 0.1ML	HCPCS - TEMP CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	Q2009	INJ FOSPHENYTOIN 50 MG PHENYTOIN EQ	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q2004	IRRIG SOL TX BLADDER CALCULI 500 ML	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q1005	NEW TECH IO LENS CATGY 5 FED REG	HCPCS - TEMP CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	Q1004	NEW TECH IO LENS CATGY 4 FED REG	HCPCS - TEMP CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	Q0515	INJ SERMORELIN ACTATE 1 MCG	HCPCS - TEMP CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	Q0514	PHRM DISPNS FEE INHAL RX;-90 DAYS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0513	PHRM DISPNS FEE INHAL RX;-30 DAYS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0512	PHRM FEE O ANTI-CA EMET/IS RX;SBSQT	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0511	PHRM FEE O ANTI-CA-EMET/IS RX;30-DA	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0510	PHRM SPL FEE IMS 1ST MO FLW TPLNT	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0509	MISC SPL IMPL VAD NO PAY MCR PRT A	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0508	MISC SUPL/ACCSSRY USE W/IMPLANT VAD	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0507	MISC SUPPLY/ACCESSORY USE W/EXT VAD	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	Q0506	BATT LITHIUM-ION ELEC VAD REPL	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0504	PWR ADPTR PNEUMAT VAD REPL VEH TYPE	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0503	BATT FOR PNEUMAT VAD REPL ONLY EA	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0502	MOBILITY CART FOR PNEUMAT VAD REPL	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0501	SHOWR COVR ELEC/ELEC-PNEUMT VAD RPL	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0500	FLTRS ELEC OR ELEC/PNEUMAT VAD REPL	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0499	BELT/VEST/BAG ANY TYPE VAD RPL ONLY	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0498	HOLSTR ELEC/ELEC-PNEUMAT VAD REPL	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0497	BATT CLPS ELEC/ELEC-PNEUMAT VAD RPL	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0496	BATT NOT LITHIUM-ION ELEC VAD REPL	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0495	BATT CHRG ELEC/ELEC-PNEUMAT VAD RPL	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0494	EMERGENCY HAND PUMP REPLACEMNT ONL	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0493	EMRG PWR CABL ELEC/PNEUMAT VAD REPL	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0492	EMERG PWR CABLE FOR ELEC VAD REPL	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0491	EMERG PWR SRC ELEC/PNEUMAT VAD RE	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0490	EMERGENCY PWR SRC FOR ELEC VAD RE	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	Q0489	PWR PACK BASE ELEC/PNEUMAT VAD RE	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0488	POWER PACK BASE FOR ELEC VAD REPL	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0487	LEADS FOR ANY ELEC/PNEUMAT VAD REPL	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0486	MON CABLE FOR ELEC/PNEUMAT VAD RE	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0485	MON CNTRL CABLE FOR ELEC VAD REPL	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0484	MON ELEC OR ELEC/PNEUMAT VAD REPL	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0483	MON/DISPLAY MODULE W/ELEC VAD REPL	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0482	MICRPROCSS CU ELEC/PNEUMAT VAD REPL	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0481	MICRPROCSS CU FOR ELEC VAD REPL	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0480	DRIVER FOR PNEUMATIC VAD REPL ONLY	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0479	POWER MODULE ELEC/PNEUMAT VAD REPL	HCPCS - TEMP CODES	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	Q0478	PWR ADAPTR ELEC/PNEUMAT VAD VEH TYP	HCPCS - TEMP CODES	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	Q0477	PWR MODULE PT CABL ELEC/PN VAD REPL	HCPCS - TEMP CODES	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	Q0181	UNS ORAL ANTI-EMETIC NOTGT 48 HR DOSE	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0177	HYDROXYZINE PAMOATE 25 MG ORAL	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0175	PERPHENZAINE 4 MG ORAL	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	Q0174	THIETHYLPERAZINE MALEATE 10 MG ORAL	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0173	TRIMETHOBENZAMIDE HCL 250 MG ORAL	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0169	PROMETHAZINE HCL 12.5 MG ORAL	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0167	DRONABINOL 2.5 MG ORAL	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0166	GRANISETRON HCL 1 MG ORAL	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0161	CHLORPROMAZINE HCL 5 MG ORAL	HCPCS - TEMP CODES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	Q0144	AZITHROMYCIN ORAL CAP/POWDER 1 GM	HCPCS - TEMP CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0139	INJ FERUMOXYTOL TX IDA 1 MG ESRD	HCPCS - TEMP CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	Q0138	INJ FERUMOXYTOL IDA 1 MG NON-ESRD	HCPCS - TEMP CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	Q0115	POST-COITAL DIRECT QUALATATIVE EX	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0112	ALL POTASSIUM HYDROXIDE PREPARATNS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0111	WET MOUNTS W/PREP VAG CERV/SKN SPEC	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0091	SCR PAP SMER; OBTAIN PREP&CONVY-LAB	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0085	CHEMO ADMIN INFUS&OTH TECH VISIT	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0084	CHEMO ADMIN INFUS TECH ONLY VISIT	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0083	CHEMO ADMIN NOT INFUS TECH ONLY VST	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	Q0081	INFUS TX OTH THAN CHEMO RX VISIT	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9615	CATHETERIZATION COLLECTION SPECIMEN	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9612	CATH CLCT SPEC 1 PT ALL PLACES SRVC	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9604	TRAVL 1 WAY NEC LAB SPEC; TRIP CHRG	HCPCS - PATH & LAB	YES	07/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	P9603	TRAVL 1 WAY NEC LAB SPEC; ACTL MILE	HCPCS - PATH & LAB	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	P9099	BLOOD COMPONENT OR PRODUCT NOC	HCPCS-PATH & LAB	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	P9073	PLATELETS PHERESIS PATHOGEN-REDUCED	HCPCS - PATH & LAB	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	P9060	FRESH FRZN PLSMA DONR RETESTED EA U	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9059	FRESH FRZN PLAS BETWN 8-24 HR CLCT	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9058	RBCS LEUKOCYTES RDUC CMV-NEG IRRADA	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9057	RBCS FRZN/DEGLYCEROLIZED/WASHED LEU	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9056	WHOLE BLD LEUKOCYTES RDUC IRRADATD	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9055	PLT LEUKOCYT RDUC CMV-NEG APH/PHERS	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9054	WHOLE BLD/RBCS LEUKOCYTES RDUC FRZN	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9053	PLT PHERES LEUKOCYT RDUC CMV-NEG EA	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9052	PLT HLA-MATCHD LEUKOCYTES RDUC EACH	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	P9051	WHOLE BLD/RBCS LEUKOCYTES RDUC CMV-	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9048	INFUS PLSMA PROT FRAC HU 5PCT 250 ML	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9047	INFUSION ALBUMIN HUMAN 25PCT 50 ML	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9046	INFUSION ALBUMIN HUMAN 25PCT 20 ML	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9045	INFUSION ALBUMIN HUMAN 5PCT 250 ML	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9044	PLSMA CRYOPRECIPITATE RDUC EA UNIT	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9043	INFUS PLSMA PROT FRAC HUMN 5PCT 50 ML	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9041	INFUSION ALBUMIN HUMAN 5PCT 50 ML	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9040	RBCS LEUKOCYTES RDUC IRRADATD EA U	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9039	RBCS DEGLYCEROLIZED EACH UNIT	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9038	RBCS IRRADIATED EACH UNIT	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9037	PLATLT PHERES LEUKOCYT RDUC IRRADTD	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9036	PLATELETS PHERESIS IRRADATD EA UNIT	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9035	PLATLTS PHERES LEUKOCYTES RDUC EA U	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9033	PLATLTS LEUKOCYTES RDUC IRRADATD EA	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9031	PLATLTS LEUKOCYTES REDUCED EA UNIT	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	P9023	PLASMA POOL MX DONOR FROZEN EA UNIT	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9017	FFP FRZN WITHIN 8 HRS CLCT EA UNIT	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9016	RBCS LEUKOCYTES REDUCED EACH UNIT	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P7001	CULT BACTERL URINE; QUAN SENS STUDY	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P3001	SCR PAP SMER UP TO 3 RQR INTEPR MD	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P3000	SCR PAP SMER UP TO 3 TECH W/MD SUPV	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1070	PT NOT SCR FUT FALL RISK NO RSN	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1069	PT SCREENED FOR FUTURE FALL RISK	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1067	HOSPICE SVC PT PROV AT DUR MSR PRD	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1060	PATIENT DIED PRIOR TO END PERF PRD	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1059	PT HSPC/RECV PALLIAT C AT DUR P PRD	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1058	PT PERM NH RESIDENT AT DUR PERF PRD	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1057	ASPIRIN/ANOTH AP TX NOT USED NO RSN	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1056	PSCR AC DUR P PRD HX GI BL HX IC BL	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1055	ASPIRIN/ANOTH ANTIPLATELET TX USED	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1054	PT HAD ONLY UC VISITS DUR PERF PER	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			

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MMAI-Medicare/Medicaid	M1049	FUNC STATUS NOT MSR ODI 3 MO POSTOP	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1046	FUNC STS MSR OKS AT 1 YR POSTOP LT 37	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1045	FUNC STS MSR OKS 1 YR POSTOP GT /EQU 37	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1043	FUNC STS NOT MSR ODI AT 1 YR POSTOP	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1041	PT CANCER FX/INF REL LSP/PT IDIO/CS	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1040	PATIENTS WITH DX OF LUMBAR IDIO/CS	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1039	PT W/DX OF LSP REG INF AT TIME PROC	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1038	PT W/DX OF LSP REG FX AT TIME PROC	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1037	PT W/DX LSP REG CANCER AT TT PROC	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1036	AD NOT AL 180 D CN PT OUD O GAPGT 7 D	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1035	AD DLB PH OUT MAT PRI 80 DA CONT TX	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1034	AD AL 180D CON PT PSCR OUD N GAPGT 7D	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1032	ADULTS CURRENTLY TAKING PT FOR OUD	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1029	IMAGING HEAD NOT OBTD RSN NOT GIVEN	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1028	DOC PT P HA DX&IMAG OTH THAN CT/MRI	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1027	IMAGING OF THE HEAD WAS OBTAINED	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			

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MMAI-Medicare/Medicaid	M1021	PT HAD ONLY UC VISITS DUR PERF PRD	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1020	12-17Y MD/D NR 12M PHQ-9/9M NA/GT /EQU 5	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1019	PT 12-17 YR MD/DYSTH R 12 MO SC GT 5	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1018	PT ACTV DX/HX CA PT HVY SMKR LC SCR	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1016	FEMALE PTS UNABLE TO BEAR CHILDREN	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1014	D/C/DISCONT EP OF CARE DOC MED REC	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1013	D/C/DISCONT EP OF CARE DOC MED REC	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1012	D/C/DISCONT EP OF CARE DOC MED REC	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1011	D/C/DISCONT EP OF CARE DOC MED REC	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1010	D/C/DISCONT EP OF CARE DOC MED REC	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1009	D/C/DISCONT EP OF CARE DOC MED REC	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1008	LT 50PCT TOT PT O/P RA ENC ASSESSED	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1007	GT EQU 50PCT TOT PT O/P RA ENC ASSESSED	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1006	DISEASE ACTV NOT ASSESSED NO RSN	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1005	TB SCR NOT PERF/RSLT NOT INT NO RSN	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1004	DOC MED RSN NOT SCR TB/INTPRET RSLT	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			

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MMAI-Medicare/Medicaid	M1003	TB SCR&RSLT WI 12 MO PRI 1ST BIO DZ	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M0301	FABRIC WRAPPING ABDOMINAL ANEURYSM	HCPCS - MEDICAL SERVICES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M0100	INTRAGASTR HYPOTHM USE GASTR FREEZ	HCPCS - MEDICAL SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L9900	ORTHO/PROSTH SUPP ACCES &/ SERV	HCPCS - PROSTHETIC PROCED	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	L8699	PROSTHETIC IMPLANT NOS	HCPCS - PROSTHETIC PROCED	NON-COV	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	L8698	MISC COMP SPL/ACS USE W/TOT AH SYS	HCPCS - PROSTHETIC PROCED	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	L8693	AUD OSSEOINTEGRATED DEVC ABUT REPL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8692	AUDITORY OSSEOINTEGRAT DEV BDY WORN	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L8691	AO D EXT SP EXCL TRNDCR/ACTR RPL EA	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8690	AUDITORY OSSEOINTEGRTD INT/EXT COMP	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L8684	RF TRNSMT BOWEL BLADDR MGMT REPL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8679	IMPL NEUROSTIMULATOR PULSE GEN ANY	HCPCS - PROSTHETIC PROCED	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	L8670	VASC GRAFT MATERIAL SYNTH IMPLANT	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L8659	IP FNGR JNT REPL TWO/GT PECES METAL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8658	IP JOINT SPACER SILICONE/EQU EA	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L8631	MPJ REPLCMT TWO/MORE PECES METL CER	HCPCS - PROSTHETIC PROCED	YES	07/01/2020	12/31/2078			

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MMAI-Medicare/Medicaid	L8629	TRANSMIT COIL CABLE COCHLR DEV RPL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8628	COCHLR IMPL EXT CONTRLLR CMPNT REPL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8627	COCHLEAR IMPL EXT PROCSSR CMPNT RPL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8625	EXT RECHRG BATT CI/AO DEVC REPL EA	HCPCS - PROSTHETIC PROCED	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	L8624	LIB CI/AO DVC SP EAR LEVEL REPL EA	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8623	LITH ION BATT NOT EAR LEVEL REPL EA	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8622	ALKALIN BATT COCHLR IMPL ANY SZ RPL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8621	ZUBC AIR BA CI & AUD SD PRC RPL E	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8619	COCHLR IMPL SPCH PRCSSR/CNTLR REPL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8618	TX CBL U CI/AUD OSSEOINTG DVC REPL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8617	TRNSMTTING COIL COCHLEAR IMPL REPL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8616	MICROPHONE COCHLEAR IMPL DEVC REPL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8615	HEADSET/HEADPIECE COCHLR IMPL REPL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8614	COCHLEAR DEVC INCL INT&EXT COMPNENT	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L8608	MISC EXT COMP SPL/ACCESS ARGUS II	HCPCS - PROSTHETIC PROCED	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	L8606	INJ SYNTH IMPL URIN TRACT 1 ML SYR	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	L8603	INJ COLL IMPL URIN TRACT 2.5 ML SYR	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L8600	IMPL BREAST PROSTH SILICONE/EQUAL	HCPCS - PROSTHETIC PROCED	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	L8515	GELATN CAP APPLC DEV TE VOICE PRSTH	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8514	TRACHEOESOPH PUNCT DILAT REPLCMT ON	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8513	CLEANING DEVC USED W/TRACHEOESOPH V	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8512	GELATIN CAPS/EQUVALNT W/TRACHEOESOP	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8511	INSRT INDWLL TRACHEOESOPH PROS W/WO	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8509	TRACHEO-ESOPH VOICE PROS INSRT PROV	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8507	TRACHEO-ESOPH VOICE PROSTH PT INSRT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8505	ARTFICL LARYNX REPLCMT BATTRY/ACSS	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8499	UNLISTED PROC MISC PROSTH SERVICES	HCPCS - PROSTHETIC PROCED	NO	09/01/2017	09/01/2017		Submit claims with medical records	
MMAI-Medicare/Medicaid	L8485	PROSTH SOCK 1 PLY FIT UPPER LIMB EA	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8480	PROSTH SOCK 1 PLY FIT ABOVE KNEE EA	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8470	PROSTH SOCK SINGLE PLY FIT BK EACH	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8435	PROSTH SOCK MX PLY UPPER LIMB EA	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8430	PROSTHETIC SOCK MX PLY ABVE KNEE EA	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L8420	PROSTHETIC SOCK MX PLY BELW KNEE EA	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8417	PROS SHEATH/SOCK-GEL CUSHN BK/AK EA	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8330	TRUSS ADD STANDARD PAD SCROTAL PAD	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8320	TRUSS ADDITION STANDARD PAD H2O PAD	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8049	REP MAXLOFCE PROS EA 15 MIN NON-MD	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8048	UNS MAXLOFCE PROSTH BR PROV NON-MD	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8047	NASL SEPTAL PROSTH PROV NON-PHYS	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8046	PART FCE PROSTH PROV NON-PHYSICIAN	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8045	AURICULAR PROSTH PROV NON-PHYSICIAN	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8044	HEMI-FCE PROSTH PROV NON-PHYSICIAN	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8043	UPPER FCE PROSTH PROV NON-PHYSICIAN	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8042	ORB PROSTH PROVIDED NON-PHYSICIAN	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8041	MIDFCE PROSTH PROV NON-PHYSICIAN	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8040	NASL PROSTH PROVIDED NON-PHYSICIAN	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8039	BREAST PROSTHESIS NOS	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8035	CSTM BRST PROSTH POST MASTECT MOLD	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L8033	NIP PRS CSTM FB RUSABL ANY MTL T EA	HCPCS-PROSTHETIC PROCEDURE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	L8032	NIPPLE PROS PREFAB REUSABL ANY T EA	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8031	BREAST PROS SILCON/EQU W/NTGRL ADHES	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8030	BREAST PROS SILCON/EQU NO INTGRL ADHES	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8015	EXT BREAST PROS GARMNT POST-MASTECT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8002	BREAST PROS MAST BRA INTEG FORM BIL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8001	BREAST PROS MAST BRA INTEG FORM UNI	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8000	BREAST PROS MAST BRA NO INTEG FORM	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L7700	GKT/SEAL USE PROS SOC INS ANY TY EA	HCPCS - PROSTHETIC PROCED	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	L7600	PROSETIC DONNING SLEEVE MATERIAL EA	HCPCS - PROSTHETIC PROCED	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L7520	REPR PROSTH DEVC LABR CMPNT-15 MIN	HCPCS - PROSTHETIC PROCED	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L7510	REP PROS DEVC REP/REPL MINOR PART	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L7405	ADD UP EXT PROS SD/INTERSCAP THOR	HCPCS - PROSTHETIC PROCED	YES	07/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	L7404	ADD UP EXT PROS ABVE ED ACRYLC MATL	HCPCS - PROSTHETIC PROCED	YES	07/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	L7403	ADD UP EXT PROS BE/WD ACRYLIC MATL	HCPCS - PROSTHETIC PROCED	YES	07/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	L7402	ADD UP EXT PROS SD/INTRSCAP THOR	HCPCS - PROSTHETIC PROCED	YES	07/01/2020	12/31/2078			

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MMAI-Medicare/Medicaid	L7401	ADD UP EXT PROS ABV ED ULTRALT MATL	HCPCS - PROSTHETIC PROCED	YES	07/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	L7400	ADD UP EXT PROS BE/WD ULTRALT MATL	HCPCS - PROSTHETIC PROCED	YES	07/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	L7368	LITHIUM ION BATT CHARGER REPL ONLY	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L7367	LITHIUM ION BATT RECHARGEABLE REPL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L7366	BATTERY CHARGER 12 VOLT EACH	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L7362	BATTERY CHARGER SIX VOLT EACH	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L7191	ELEC ELB CHLD VRITY VILL/EQU MYOELEC	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L7190	ELEC ELB ADOLES VRITY VILL/EQU MYOELC	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L7186	ELEC ELB CHLD VRITY VILL/EQU SWITCH	HCPCS - PROSTHETIC PROCED	YES	07/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	L7185	ELEC ELB ADOLES VRITY VILL/EQU SWITCH	HCPCS - PROSTHETIC PROCED	YES	07/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	L7181	ELEC ELB SIMULTAN CNTRL ELB&TRM DEV	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L7180	ELEC ELB SEQENTL CNTRL ELB&TRM DEV	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L7170	ELEC ELB HOSMER/EQUAL SWITCH CNTRL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L7045	ELEC HOOK SWITCH MYOELEC CONTRL PED	HCPCS - PROSTHETIC PROCED	YES	07/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	L7040	PREHENSILE ACTUATOR SWITCH CONTROL	HCPCS - PROSTHETIC PROCED	YES	07/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	L7009	ELEC HOOK SWITCH/MYOELC CNTRL ADULT	HCPCS - PROSTHETIC PROCED	YES	07/01/2020	12/31/2078			

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MMAI-Medicare/Medicaid	L7008	ELEC HAND SWITCH/MYOELEC CNTRL PED	HCPCS - PROSTHETIC PROCED	YES	07/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	L7007	ELEC HND SWTCH/MYOELEC CNTRL ADULT	HCPCS - PROSTHETIC PROCED	YES	07/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	L6975	INTERSCAP-THORAC OTTO BOCK/EQU MYOELEC	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L6970	INTERSCAPULR-THOR OTTO BOCK/EQU SWITCH	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L6965	SHLDR DSRTC OTTO BOCK/EQU MYOELC CNTRL	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L6960	SHLDR DSRTC OTTO BOCK/EQU SWTCH CNTRL	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L6955	ABVE ELBOW OTTO BOCK/EQU MYOELEC CNTRL	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L6950	ABOVE ELB OTTO BOCK/EQU SWITCH CONTROL	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L6945	ELB DISRTC OTTO BOCK/EQU MYOELC CNTRL	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L6940	ELB DISRTC OTTO BOCK/EQU SWITCH CNTRL	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L6935	BELW ELBOW OTTO BOCK/EQU MYOELEC CNTRL	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L6930	BELW ELBOW OTTO BOCK/EQU SWITCH CNTRL	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L6925	WRIST DSRTC OTTO BOCK/EQU MYOELC CNTRL	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L6920	WRST DISARTC OTTO BOCK/EQU SWTCH CNTRL	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L6915	HAND REST REPL GLOVE FOR ABOVE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6910	HND REST PART HND W/GLOV NO FNGR	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L6905	HND REST PART HND W/GLOV MX FNGR	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6900	HND REST PART W/GLOV THUMB/1 FNGR	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6895	ADD UP EXT PROSTH GLOV TERM CSTM	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6890	ADD UP EXT PROSTH GLOV TERM PRFAB	HCPCS - PROSTHETIC PROCED	YES	07/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	L6885	REPL SOCKT SD/INTRSCAP THOR MOLD PT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6884	REPL SOCKT ABOVE ELB DISART MOLD PT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6883	REPL SOCKET BE/WD MOLDED TO PT MDL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6882	MICRPROCSS CNTRL ADD UP LIMB PROSTH	HCPCS - PROSTHETIC PROCED	YES	07/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	L6881	AUTO GRASP ADD UPPER LIMB PROS DEVC	HCPCS - PROSTHETIC PROCED	YES	07/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	L6880	ELEC HAND SW/MYOELEC CNTRL ARTC DIG	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L6810	ADD TERM DEVC PRECISION PINCH DEVC	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6805	ADD TERM DEVICE MODIFIER WRIST UNIT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6722	TERM DEVC HOOK/HND HD MECH VOL CLOS	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6721	TERM DEVC HOOK/HAND HD MECH VOL OPN	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6715	TERM DEVC MX ARTC DIG INIT ISS/REPL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6714	TERM DEVC HAND MECH VOL CLOS PED	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L6713	TERM DVC HAND MECH VOL OPN PED	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6712	TERM DVC HOOK MECH VOL CLOS PED	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6711	TERM DVC HOOK MECH VOL OPN PED	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6709	TERMINAL DEVC HAND MECH VOL CLOSING	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6708	TERMINAL DEVC HAND MECH VOL OPENING	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6707	TERMINAL DEVC HOOK MECH VOL CLOSING	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6706	TERMINAL DEVC HOOK MECH VOL OPENING	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6704	TERMINAL DEVC SPORT/REC/WORK ATTACH	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6703	TERMINAL DEVICE PASSIVE HAND/MITT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6698	ADD UP EXT PROS LOCK MECH EXC INSRT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6697	ADD UP EXT PROS NOT CNGN/TRAUM AMP	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6696	ADD UP EXT PROS CNGN/TRAUMAT AMP	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6695	ADD UP EXT PROS CSTM W/O LOCK MECH	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6694	ADD UP EXT PROS CSTM W/LOCK MECH	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6693	UP EXT ADD LOCK ELB FORARM CNTRBAL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6692	UP EXTREM ADD SILCON GEL INSRT/EQU EA	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L6691	UPPER EXTREM ADD REMV INSERT EA	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6690	UP EXT ADD FRAME SCKT INTRSCAP-THOR	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6689	UP EXT ADD FRAME SCKT SHLDR DISARTC	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6688	UP EXT ADD FRME TYPE SOCKT ABVE ELB	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6686	UPPER EXTREM ADDITION SUCTION SOCKT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6684	UP EXTRM ADD TST SCKT SHLDR DISARTC	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6682	UP EXTRM ADD TST SOCKT ELB DISARTIC	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6680	UP EXTRM ADD TST SCKT WRIST DISARTC	HCPCS - PROSTHETIC PROCED	YES	07/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	L6677	UP EXT ADD HRNSS 3 CNTRL OP DVC&ELB	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6676	UP EXT ADD HARNESS 2 CABLE DESIGN	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6675	UP EXT ADD HARNESS 1 CABLE DESIGN	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6672	UP EXT ADD HRNSS CHST/SHLDR SADDLE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6670	UP EXTREM ADD HOOK HND CABLE ADAPTR	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6665	UP EXTREM ADD TEFLON/EQU CABLE LINING	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6660	UP EXTREM ADD HEVY DUTY CNTRL CABLE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6655	UP EXTREM ADD STD CNTRL CABLE XTRA	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L6650	UP EXTRM ADD SHLDR UNIVERSAL JNT EA	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6648	UP EXT ADD SHLDR LOCK MECH EXT PWR	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6647	UP EXT ADD SHLDR LOCK MECH BDY PWR	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6646	UP EXT ADD SHLDR JNT MX PSTN SYS	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6645	UP EXT ADD SHLDR FLX-ABDUCT JNT EA	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6642	UP EXTRM ADD EXCURSN AMPL LEVER	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6641	UP EXTRM ADD EXCURSN AMPL PULLEY	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6640	UP EXTREM ADD SHLDR ABDUCT JNT PAIR	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6638	UP EXT ADD PROS LOCK W/MNL PWR ELB	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6637	UP EXTREM ADD NUDGE CNTRL ELB LOCK	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6635	UPPER EXTREM ADD LIFT ASSIST ELB	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6632	UP EXTREM ADD LATX SUSP SLEEVE EA	HCPCS - PROSTHETIC PROCED	YES	07/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	L6630	UP EXTREM ADD STAINLESS STEEL WRIST	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6629	UP EXT ADD QUIK DSCNCT LAMNAT COLLR	HCPCS - PROSTHETIC PROCED	YES	07/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	L6628	UP EXTRM ADD QUICK DISCNCT HOOK	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6625	UP EXT ADD ROTAT WRST W/CABLE LOCK	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L6624	UP EXT ADD FLX/EXT ROT WRIST UNIT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6623	UP EXT ADD ROTATL WRST W/LATCH RLSE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6621	UP EXTREM PROS ADD FLEX/EXTEN WRIST	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6620	UP EXT ADD FLEX/EXT WRIST UNIT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6616	UP EXT ADD-DSCNCT INSRT LCK WRST EA	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6615	UP EXTREM ADD DISCNCT LOCK WRST U	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6611	ADD UP EXT PROS EXT PWR ADD SWITCH	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6610	UP EXT ADD FLEX METAL HINGE PAIR	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6605	UPPER EXTREM ADD 1 PIVOT HINGE PAIR	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6600	UP EXTREM ADD POLYCNTRC HINGE PAIR	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6590	PREP SHLDR DSRTC THOR SCKT DIR FORM	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6588	PREP SHLDR DISRTC THOR PLSTC SOCKT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6586	PREP ELB DISARTIC SOCKET DIR FORM	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6584	PREP ELB DISARTC PLASTIC SOCKT MOLD	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6582	PREP WRST DISARTC ELB SCKT DIR FORM	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6580	PREP WRST DISARTIC PLSTC SOCKT MOLD	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L6570	INTRSCAP THOR MOLD SOCKET ENDOSKEL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6550	SHLDR DISARTC MOLD SOCKET ENDOSKEL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6500	ABOVE ELBOW MOLD SOCKET ENDOSKEL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6450	ELB DISARTIC MOLD SOCKET ENDOSKEL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6400	BE MOLD SCKT ENDOSKEL-SFT PROS TISS	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6388	IMMED POSTSURG RIGID DRSG ONLY	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6386	IMMED POSTSURG EA ADD CAST CHANGE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6384	IMMED POSTSRG RIGD DRSG SHLDR DSRTC	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6382	IMMED POSTSURG RIGD DRSG ELB DISRTC	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6380	IMMED POSTSURG RIGD DRSG WRST DSRTC	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6370	INTERSCAPULAR THOR SHLDR CAP ONLY	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6360	INTERSCAPULAR THOR COMPLT PROSTH	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6350	INTRSCAP THOR INTRL LOCK ELB FORARM	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6320	SHLDR DISART PASS REST SHLDR CAP	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6310	SHLDR DISART PASS REST COMPL PROSTH	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6300	SHLDR DISARTC INTRL LOCK ELB FORARM	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L6250	ABOVE ELB INTERNAL LOCK ELB FOREARM	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6205	ELB DSRTC MOLD SCKT XPND INTRFC ARM	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6200	ELB DSRTC MOLD SCKT OTSD LCK FORARM	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6130	BELW ELB STMP ACTV LCK HNG 1/2 CUFF	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6120	BELW ELB STEP-UP HINGES HALF CUFF	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6100	BELW ELB MOLD SOCKT FLXIBLE ELB HNG	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6055	WRST DSRTC MOLD SCKT W/XPND INTRFCE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6050	WRST DSRTC MOLD SOCKET FLEX ELB HNG	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6026	TRANSCARPL/MC/PART HAND DISART PROS	HCPCS - PROSTHETIC PROCED	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	L6020	PARTIAL HAND NO FINGER REMAINING	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6010	PART HAND LITTLE &/ RING FINGER REM	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6000	PARTIAL HAND THUMB REMAINING	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5990	ADD LW EXTRM PROSTH USE ADJ HEEL HT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5988	ADD LW LMB PRSTH VERTCL SHOCK RDUC	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5986	ALL LW EXTRM PROSTH MX-AXIAL ROT U	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5985	ALL ENDOSKL LW XTRM PROSTH DYNAMIC	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L5984	ALL ENDOSKEL LW EXT PRSTH AXL ROTAT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5982	ALL EXOSKEL LW EXT PROS AXIAL ROTAT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5981	ALL LOW EXTRM PROSTH FLX-WALK SYS/EQU	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5980	ALL LOW EXTREM PROSTH FLX-FOOT SYS	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5979	ALL LW XTRM PRSTH MX-AXL ANK 1 PECE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5978	ALL LW EXTRM PRSTH FT MX-AXL ANK/FT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5976	ALL LW EXTRM PROSTH ENERGY STOR FT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5975	ALL LW EXTRM PROSTH COMB 1 AXIS ANK	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5974	ALL LW EXTRM PRSTH FT 1 AXIS ANK/FT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5972	ALL LOW EXT PROS FOOT FLEXIBLE KEEL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5971	ALL LW EXT PROS SACH FOOT REPL ONLY	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5970	ALL LW EXTRM PROSTH FOOT SACH FOOT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5969	ADD ENDOSKEL ANKL-FT/ANK PWR ASSIST	HCPCS - PROSTHETIC PROCED	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	L5968	ADD LW LIMB PROSTH MX-AXIAL ANKLE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5966	ADD ENDO HIP DISRTC FLX PROTVE COVR	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5964	ADD ENDO AK FLXBL PROTVE OUTR COVER	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	L5962	ADD ENDO BK FLEX PROTVE OUTER COVER	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5961	ADD ENDO SYS POLYCNTRC HIP JOINT	HCPCS - PROSTHETIC PROCED	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	L5960	ADD ENDOSKL HIP DISARTC ULTRA-LGHT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5950	ADD ENDOSKEL ABOVE KNEE ULTRA-LGHT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5940	ADD ENDOSKEL BELOW KNEE ULTRA-LGHT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5930	ADD ENDO HI ACTV KNEE CNTRL FRAME	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5925	ADD ENDO AK/HIP DISARTIC MNL LOCK	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5920	ADD ENDOSKEL AK/HIP DISRTC ALIGNBL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5910	ADD ENDOSKEL BELOW KNEE ALIGNBL SYS	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5858	ADD LW EXT PROS KNEE SHN SYS STANCE	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L5857	ADD LOW EXT PROS KN-SHN SWING ONLY	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L5856	ADD LOW EXT PROS KN-SHN SWING&STNCE	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L5855	ADD ENDO HIP DISARTIC MECH EXT ASST	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5850	ADD ENDO AK/HIP DSRTC KNEE EXT ASST	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5848	ADD ENDOSKEL KNEE-SHIN FLUID EXT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5845	ADD ENDOSKL KNEE-SHIN STANC FLX ADJ	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	L5840	ADD ENDO KNEE-SHIN 4-BAR LINK SWING	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5830	ADD ENDO KNEE-SHIN PNEUMAT/SWING	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5828	ADD ENDO KNEE-SHIN FL SWING&STANCE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5826	ADD ENDO KNEE-SHIN MIN HI ACTV FRME	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5824	ADD ENDO KNEE-SHIN FL SWING CNTRL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5822	ADD ENDO KNEE-SHIN PNEUMATIC FRICT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5818	ADD ENDO KNEE-SHIN FRICT SWNG&STANC	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5816	ADD ENDO KNEE-SHIN MECH STANCE LOCK	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5814	ADD ENDO KNEE-SHN HYDRAUL MECH LOCK	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5812	ADD ENDO KNEE-SHIN FRICT SWNG CNTRL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5811	ADD ENDO KNEE-SHIN MNL LCK ULTRA-LT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5810	ADD ENDOSKEL KNEE-SHIN MANUAL LOCK	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5795	ADD EXOSKEL HIP DISARTIC ULTRA-LGHT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5790	ADD EXOSKEL ABVE KNEE ULTRA-LT MATL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5785	ADD EXOSKEL BELW KNEE ULTRA-LT MATL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5782	ADD LW LIMB PROS LIMB MGMT HVY DUTY	HCPCS - PROSTHETIC PROCED	YES	07/01/2020	12/31/2078			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	L5781	ADD LW LIMB PROS LIMB MGMT SYS	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L5780	ADD EXO KNEE-SHIN PNEUMAT/HYDRA	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5728	ADD EXO KNEE-SHIN FL SWING&STANCE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5726	ADD EXO KNEE-SHIN EXT JNT FL SWING	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5724	ADD KNEE-SHIN 1 AXIS FL SWING PHASE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5722	ADD EXO KNEE-SHIN PNUMAT SWNG FRICT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5716	ADD EXO KNEE-SHIN MECH STANCE LOCK	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5714	ADD EXO KNEE-SHIN VARBL FRICT SWING	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5711	ADD EXO KNEE-SHIN MNL LOCK ULTRA-LT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5710	ADD EXOSKL KNEE-SHIN 1 AXS MNL LOCK	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5707	CUSTOM SHAPED COVER HIP DISARTIC	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5706	CUSTOM SHAPED COVER KNEE DISARTIC	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5705	CUSTOM SHAP PROTVE COVER ABOVE KNEE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5704	CUSTOM SHAP PROTVE COVER BELOW KNEE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5703	ANK SYMES MLD PT MDL SACH FT REPL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5702	REPL SCKT HIP DISRTC W/HIP JNT MOLD	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	L5701	REPL SCKT AK/DISARTIC W/ ATTCH PLAT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5700	REPL SOCKET BELOW KNEE MOLD PT MDL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5699	ALL LOW EXTREM PROSTH SHLDR HARNESS	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5698	ADD LW EXTRM AK/KD SILESIAN BANDAGE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5697	ADD LOW EXTRM AK/DISARTIC PELV BAND	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5696	ADD LOW EXTRM AK/DISARTIC PELV JNT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5695	ADD LW EXT AK PELV CNTRL SLV NEOPRN	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5694	ADD LW EXTRM AK PELV CNTRL BELT PAD	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5692	ADD LW EXTRM AK PELVIC CONTROL BELT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5690	ADD LOW EXTRMITY BK WAIST BELT PAD	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5688	ADD LOWER EXTRM BK WAIST BELT WEBNG	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5686	ADD LOW EXTREM BELW KNEE BACK CHECK	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5685	ADD LOW EXT PROS BELW KNEE SLEEVE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5684	ADD LOW EXTREM BELW KNEE FORK STRAP	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5683	ADD LOW EXT BK/AK NO CONGN/AMP INIT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5682	ADD LOW EXTREM BK THIGH LACER MOLD	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L5681	ADD LW EXT BK/AK CONGN/AMPUTEE INIT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5680	ADD LOW EXTRM BK THI LACER NONMOLD	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5678	ADD LW EXT BELW KNEE JNT COVRS PAIR	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5677	ADD LW EXT BK KNEE JNT POLYCNTRC PR	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5676	ADD LOW EXT BK KNEE JNT 1 AXIS PAIR	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5672	ADD LOW EXTRM BK REMV MED BRIM SUSP	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5671	ADD LOW EXTRM BK/AK SUSP LOCK MECH	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5670	ADD LW EXTRM BK MOLD SUPRACOND SUSP	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5668	ADD LW EXTRM BK MOLD DISTAL CUSHION	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5666	ADD LOW EXTREM BELOW KNEE CUFF SUSP	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5665	ADD LW EXT INSRT MXDROMTR BELW KNEE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5661	ADD LW EXT INSRT MXIDUROMETER SYMES	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5658	ADD LOW EXTRM SOCKT INSRT ABVE KNEE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5656	ADD LW EXT SOCKT INSRT KNEE DISARTC	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5655	ADD LOW EXTRM SOCKT INSRT BELW KNEE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5654	ADD LOW EXTREM SOCKT INSERT SYMES	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	L5653	ADD LW EXT KNEE DISRTC XPNDABL WALL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5652	ADD LOW EXTRM SUCTN SUSP AK/DISARTC	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5651	ADD LOW EXTRM AK FLX INNR EXT FRME	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5650	ADD LW EXTRM TOT CONTACT AK/DISARTC	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5649	ADD LW EXT ISCHIAL CONTAINMENT SCKT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5648	ADD LOW EXT ABOVE KNEE CUSHN SOCKET	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5647	ADD LOW EXTRM BELW KNEE SUCTN SOCKT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5646	ADD LOW EXT BELOW KNEE CUSHN SOCKT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5645	ADD LOW EXTRM BK FLX INNR EXT FRME	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5644	ADD LOW EXTREM ABVE KNEE WOOD SOCKT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5643	ADD LW EXT HIP DISRTC FLX EXT FRAME	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5642	ADD LW EXTRM ABVE KNEE LEATHR SOCKT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5640	ADD LW EXT KNEE DISARTC LEATHR SCKT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5639	ADD LOW EXTREM BELW KNEE WOOD SOCKT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5638	ADD LW EXTRM BELW KNEE LEATHR SOCKT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5637	ADD LOW EXTREM BELW KNEE TOTAL CNTC	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L5636	ADD LW EXT SYMS MED OPENING SOCKT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5634	ADD LW EXT SYMS POST OPENING SOCKT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5632	ADD LW EXT SYMS PTB BRIM DESN SOCKT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5631	ADD LW EXT ABVE KNEE/DISARTC ACRYLC	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5630	ADD LW EXT SYMS TYPE XPND WALL SCKT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5629	ADD LW EXTRM BELW KNEE ACRYLC SOCKT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5628	ADD LOW EXTRM TST SOCKT HEMIPELVECT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5626	ADD LW EXTRM TST SOCKT HIP DISARTIC	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5624	ADD LOW EXTREM TEST SOCKT ABVE KNEE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5622	ADD LW EXTRM TST SOCKT KNEE DISARTC	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5620	ADD LOW EXTREM TEST SOCKT BELW KNEE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5618	ADD LOW EXTREM TEST SOCKT SYMES	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5617	ADD LW EXTREM QUICK CHANGE AK/BK EA	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5616	ADD LOW EXT AK UNIVRSL MXPLX FRICT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5614	ADD LW EXT AK-DSRTC W/PNEUMAT CNTRL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5613	ADD LW EXT AK-DSRTC W/HYDRAUL CNTRL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L5611	ADD LW EXT AK-DISARTC W/FRICT CNTRL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5610	ADD LOW EXTRM ENDO AK HYDRACADENCE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5600	PREP HIP DISARTC LAMINATD SCKT MOLD	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5595	PREP HIP DISARTC THERMOPLSTC/EQU MOLD	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5590	PREP AK-DISARTC LAMINATD SCKT MOLD	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5585	PREP AK-DISARTIC PRFAB ADJ OPEN END	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5580	PREP AK-DISARTIC THERMOPLSTC/EQU MOLD	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5570	PREP AK-DISRTC THRMOPLSTC/EQU DIR FORM	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5560	PREP AK-DISARTIC PLASTER MOLD MODEL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5540	PREP BK PTB LAMINATED SCKT MOLD MDL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5535	PREP BK PTB PRFAB ADJ OPEN END SCKT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5530	PREP BK PTB THERMOPLSTC/EQU MOLD MODEL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5520	PREP BK PTB THERMOPLSTC/EQU DIR FORM	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5510	PREP BK PTB SCKT NON-ALIGN MOLD MDL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5505	INIT AK-DISRTC ISCH LEVL NON-ALIGN	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5500	INIT BK PTB SCKT NON-ALIGN DIR FORM	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L5460	IMMED POSTSURG NONWT BEAR RIGD AK	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5450	IMMED POSTSURG NONWT BEAR RIGD BK	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5430	IMMED POSTSURG RIGD DRSG AK EA CAST	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5420	IMMED POSTSURG RIGD DRSG 1 CHG AK	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5410	IMMED POSTSURG RIGD DRS BK-EA CAST	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5400	IMMED POSTSURG RIGD DRSG W/1 CHG BK	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5321	AK OPEN END SACH FT ENDO SYS 1 AXIS	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5312	KNEE DISART MOLD SOCKET 1 AXIS KNEE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5301	BK MOLD SCKT SHIN SACH FT ENDO SYS	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5280	HEMIPELVECT CANADIAN; MOLD SOCKT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5270	HIP DISRTC TLT TABL; MOLD SCKT LOCK	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5250	HIP DISRTC CANADIAN; MOLD SCKT HIP	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5230	AK PROX FEM FOCAL DEFIC SACH FOOT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5220	AK SHRT PROSTH W/ARTIC ANK/FOOT DYN	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5210	AK SHRT PROS NO KNEE JNT-ANK JNT EA	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5200	AK MOLD SOCKT 1 AXIS CONSTANT FRICT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L5160	KNEE DISARTIC MOLD SOCKT BENT KNEE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5150	KNEE DISRTC MOLD SCKT EXT KNEE JNT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5105	BK PLSTC SCKT JNT&THI LACER SACH FT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5100	BELW KNEE MOLD SOCKT SHIN SACH FOOT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5060	ANK SYMS METL FRME MOLD LEATHR SCKT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5020	PART FT MOLD SOCKET TIB TUBERCLE HT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5010	PART FT MOLD SOCKT ANK HT W/TOE FIL	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5000	PART FT SHOE INSRT W/LNGTUDNL ARCH	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L4631	AFO WALK BOOT TYP ROCKR BOTTOM CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	L4398	FOOT DROP SPLINT RECUMBNT POS PRFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L4397	STATIC/DYNAMIC AFO MIN ABM PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	L4396	STAT/DYN ANK FT ORTHOS PREFAB CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L4394	REPL SFT INTRFCE MATL FT DROP SPLNT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L4392	REPLCMT SFT INTERFCE MATL STAT AFO	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L4387	WALKING BOOT NON-PNEUMATIC PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	L4386	WALK BOOT NON-PNEUMATIC PREFAB CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L4370	PNEUMATIC FULL LEG SPLINT PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L4361	WALKING BOOT PNEUMATIC AND/OR VAC	HCPCS - ORTHOTIC PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	L4360	WALK BOOT PNEUMAT&/VAC PREFAB CUSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L4350	ANKLE CONTROL ORTHOS STIRRUP PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L4210	REP ORTHOT DEVC REP/REPL MINOR PART	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L4205	REPR ORTHOT DEVC LABR CMPNT 15 MIN	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L4110	REPL LEATHR CUFF KAFO-AFO CALF/THI	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L4100	REPLACE LEATHR CUFF KAFO PROX THIGH	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L4090	REPL METL BANDS KAFO-AFO CALF/THI	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L4080	REPLACE METAL BANDS KAFO PROX THIGH	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L4070	REPLACE PROXIMAL&DIST UPRIGHT KAFO	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L4055	REPL NONMOLD CALF LACER CSTM ONLY	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L4050	REPL MOLDED CALF LACER CSTM ONLY	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L4045	REPL NONMOLD THI LACER CSTM ONLY	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L4040	REPL MOLDED THI LACER CSTM ONLY	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L4030	REPL QUADRILAT SOCKT BRIM CSTM FIT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L4020	REPL QUADRILAT SOCKT BRIM MOLD PT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L4002	REPL STRAP ANY ORTHOSIS ALL CMPNTS	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3999	UPPER LIMB ORTHOSIS NOS	HCPCS - ORTHOTIC PROCEDURES	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	L3995	ADD UP EXTREM ORTHOS SOCK FX/EQU EA	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3984	UP EXTRM FX ORTHOSIS WRST PRFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3982	UP EXTRM FX ORTH RADUS/ULNAR PRFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3981	UE FX ORTHOSIS HUMERAL PREF STRAPS	HCPCS - Orthotic Devices & Pro	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	L3980	UP EXT FX ORTHOS HUM PRFAB-FIT&ADJ	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3978	SEWHFO ABDUCTION P0SITION CSTM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3976	SEWHFO ABDUCT PSTN W/O JNTS CUS FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3975	SEWHFO SHLDR CAP DESN NO JNTS CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3973	SEWHO ABDUCTION POSITION CSTM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3967	SEWHO ABDUCT PSTN W/O JNTS CSTM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3962	SEWHO ABDUCT PSTN ERBS PALS DESIGN	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3961	SEWHO SHLDR CAP DESN NO JNTS CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3960	SEWHO ABDUCT PSTN AIRPLANE DESIGN	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L3956	ADD JNT UP EXTREM ORTHOS MATL; JNT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3935	FO NONTORSION JOINT CUSTOM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3933	FINGER ORTHOSIS W/O JOINTS CSTM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3931	WHFO PREFAB INCL FITTING & ADJ	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3930	HF ORTHOS 1/GT NONTORSION JNT PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	L3929	HF ORTHOS 1/GT NONTRSN JNT PRFAB CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3927	FINGER ORTHOSIS W/O JOINT PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3925	FINGER ORTHOS NONTORSION JNT PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3924	HAND-FINGER ORTHOSIS W/O JOINTS	HCPCS - ORTHOTIC PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	L3923	HF ORTHOSIS NO JOINT PRFAB CSTM FIT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3921	HFO 1/GT NONTORSION JOINTS CSTM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3919	HAND ORTHOSIS W/O JOINTS CUSTOM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3918	HAND ORTHOSIS METACARPL FX ORTHOSIS	HCPCS - ORTHOTIC PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	L3917	HAND ORTHOSIS MC FX PREFAB CSTM FIT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3916	WH ORTHOS 1/GT NONTORSN JOINT PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	L3915	WH ORTHOS 1/GT NONTRSN PRFAB CSTM FIT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L3912	HAND FINGR ORTHOS FINGR CNTRL PRFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3908	WRST-HND ORTHOS CNTRL COCK-UP PRFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3906	WHO W/O JOINTS STRAPS CSTM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3905	WHO 1/GT NONTORSION JOINTS CSTM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3904	WHFO EXTERNAL POWER ELEC CSTM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3901	WHFO DYN FLX HNG CABLE DRIVEN CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3900	WHFO DYN FLX HNG WRST DRVN CSTM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3891	ADD UP EXT JNT WRIST/ELB CSTM EA	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3809	WHF ORTHO NO JOINTS PREFAB ANY TYPE	HCPCS - ORTHOTIC PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	L3808	WHF ORTHOSIS RIGID NO JNT; CUSTOM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3807	WHF ORTHOS NO JNT PRFAB CUSTOM FIT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3806	WHFO CUSTOM FAB INCL FIT & ADJUST	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3766	EWHFO 1/GT NONTORSION JNTS CSTM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3765	EWHFO RIGID W/O JOINTS CUSTOM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3764	EWHO 1/GT NONTORSION JNTS CSTM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3763	EWHO RIGID W/O JOINTS CUSTOM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	L3762	ELBOW ORTHOS RIGID W/O JOINT PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3761	EO ADJ POS LOCKING JOINT PREFAB OTS	HCPCS - ORTHOTIC PROCEDURES	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	L3760	EO ADJ POS LOCKING JNT PREFAB ITEM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3740	EO DBL UPRT W/CUFF ADJ LOCK CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3730	EO DBL UPRT-CUFF EXT/FLX ASST CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3720	EO DBL UPRT W/CUFF FREE MOT CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3710	ELB ORTHOS ELASTIC METL JNTS PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3702	EO W/O JOINTS CUSTOM FABRICATED	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3678	SHLDR ORTHOS JNT DSGN NO JNT PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	L3677	SHLDR ORTHOS JNT DSGN PREFAB CUSTOM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3675	SHLDR VEST ABDUCT RESTRAINR PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3674	SHOULDER ORTHOSIS ABDUCT PSTN CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	L3671	SO JOINT DESIGN W/O JOINTS CUSTOM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3670	SHOULDER ORTHOS ACROMIO/CLAV PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3660	SHOULDER ORTHOS FIG 8 CANVAS PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3650	SHOULDER ORTHOS FIG 8 ABDUCT PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	L3649	ORTHOPED SHOE MOD ADD/TRANSFER NOS	HCPCS - ORTHOTIC PROCEDURES	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	L3640	TRNS ORTHOS SHOE-SHOE DENNS BRWNE B	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3630	TRNS ORTHOS 1 SHOE-ANOTH SLD STIR N	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3620	TRF ORTHOS 1 SHOE-ANOTH SLD STIR EX	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3610	TX ORTHOS 1 SHOE-ANOTH CALIP PLT N	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3600	TRF ORTHOS 1 SHOE-ANR CALIP PL EXST	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3590	ORTHO SHOE ADD CONVERT FIRM TO SOFT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3580	ORTHO SHOE ADD CNVRT INSTP-VELC CLO	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3570	ORTHOPED SHOE ADD SPCL EXT INSTEP	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3560	ORTHOPED SHOE ADD TOE TAP HORSESHOE	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3550	ORTHOPED SHOE ADD TOE TAP STANDARD	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3520	ORTHO SHOE ADD INSOLE FELT W/LEATHR	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3510	ORTHOPED SHOE ADD INSOLE RUBBER	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3500	ORTHOPED SHOE ADD INSOLE LEATHR	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3420	FULL SOLE&HEEL WEDGE BETWEEN SOLE	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3332	LIFT ELEV IN SHOE TAPERED TO 1/2 IN	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L3320	LIFT ELEV HEEL&SOLE CORK PER INCH	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3310	LIFT ELEV HEEL&SOLE NEOPRENE-INCH	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3300	LIFT ELEV HEEL TAPERED MTS PER INCH	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3257	ORTHOPED FOOTWEAR ADD CHRG SPLIT SZ	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3253	FOOT MOLD SHOE PLASTAZOTE CSTM FIT	HCPCS - ORTHOTIC PROCEDURES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3252	FOOT SHOE MOLD PT PLASTAZOTE CSTM	HCPCS - ORTHOTIC PROCEDURES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3251	FOOT SHOE MOLD PT SILCON SHOE EA	HCPCS - ORTHOTIC PROCEDURES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3250	ORTHOPED FOOTWEAR CSTM MOLD PROSTH	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3230	ORTHO FTWEAR CSTM SHOE DEPTH INLAY	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3225	ORTHO FTWEAR MAN OXFRD PART BRACE	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3224	ORTHO FTWEAR WOMAN OXFRD PART BRACE	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3222	ORTHO FTWEAR MENS HITOP DPTH INLAY	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3221	ORTHOPD FTWEAR MENS SHOE DPTH INLAY	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3219	ORTHOPED FTWEAR MENS SHOE OXFORD EA	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3217	ORTHOPED FTWEAR LADIES HITOP INLAY	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3216	ORTHO FTWEAR LADIES SHOE DPTH INLAY	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L3215	ORTHOPED FTWEAR LADIES OXFORD EA	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3207	ORTHOPED SHOE HITOP W/SUPINATR JR	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3206	ORTHOPED SHOE HITOP W/SUPINATR CHLD	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3204	ORTHOPED SHOE HITOP SUPINATR INFNT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3203	ORTHOPED SHOE OXFRD W/SUPINATR JR	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3202	ORTHOPED SHOE OXFRD W/SUPINATR CHLD	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3201	ORTHOPED SHOE OXFRD SUPINATR INFNT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3170	FOOT PLASTC SIL HEEL STAB PREFAB EA	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3160	FOOT ADJUSTBL SHOE-STYLD PSTN DEVC	HCPCS - ORTHOTIC PROCEDURES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3150	FOOT ABDUCT ROTATION BAR W/O SHOES	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3140	FOOT ABDUCT ROTATION BAR INCL SHOES	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3100	HALLUS-VALGUS NIGHT DYN SPLNT PRFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3090	FT ARCH SUPP NONREMV LNGTUDNL/MT EA	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3080	FT ARCH SUPP NONREMV ATTCH SHOE MT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3070	FOOT ARCH SUPP NONREMV LNGTUDNL EA	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3060	FT ARCH SUPP PREMOLD LNGTUDNL/MT EA	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L3050	FOOT ARCH SUPP REMV PREMOLD MT EA	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3040	FOOT ARCH SUPP PREMOLD LNGTUDNL EA	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3031	FOOT INSRT/PLAT REMV ADD LW EXT ORS	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3030	FOOT INSERT REMV FORMED PT FT EA	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3020	FT INSRT REMV MOLD LNGTUDNL SUPP EA	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3010	FT INSRT MOLD LNGTUDNL ARCH SUPP EA	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3003	FOOT INSRT REMV MOLD SILCON GEL EA	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3002	FT INSRT REMV MOLD PLASTAZOTE/EQU EA	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3001	FOOT INSRT REMV MOLD PT SPENCO EA	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3000	FT INSRT MOLD UCB TYPE BERKLY SHELL	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2999	LOWER EXTREMITY ORTHOSES NOS	HCPCS - ORTHOTIC PROCEDURES	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	L2861	ADD LOW EXT JNT KNEE/ANK CSTM EA	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2850	ADD LW EXT ORTHO FEM LEN SOCK FX/EQU	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2840	ADD LW EXT ORTHOS TIB LEN SOCK FX/EQU	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2830	ADD LW EXT ORTH SFT INTRFC ABV KNEE	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2820	ADD LW EXT ORTH SFT INTRFC BLW KNEE	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	L2810	ADD LW EXT ORTH KNEE CNDYLR PAD	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2800	ADD LOW EXT ORTHOS KNEE CAP CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2795	ADD LW EXT ORTH KNEE CNTRL FULL CAP	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2785	ADD LW EXT ORTHOS DROP LOCK RETN EA	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2780	ADD LW EXT ORTH NONCORROSIVE BAR	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2768	ORTHOTIC SIDE BAR DISCNCT DEVC-BAR	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2760	ADD LOW EXTREM ORTHOSIS EXT-EXT-BAR	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2755	ADD LOW EXT ORTHOS PER SEG CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2750	ADD LW EXT ORTHOS PLAT CHROME/NICKL	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2680	ADD LW EXT THOR CNTRL LAT SUPP UPRT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2670	ADD LW EXTRM THOR CNTRL PARASP UPRT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2660	ADD LOW EXTREM THOR CNTRL THOR BAND	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2650	ADD LW EXTRM PELV&THOR GLUTL PAD EA	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2640	ADD LW EXTRM PELV BAND&BELT BIL	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2630	ADD LW EXTRM PELV BAND&BELT UNI	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2628	ADD LW EXT PELV METL FRME-CABLES	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	L2627	ADD LW EXT PELV PLSTC MOLD PT-CABLE	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2624	ADD LW EXTRM PELV HIP JNT FLX EXT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2622	ADD LW EXT PELV HIP JNT ADJ FLX EA	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2620	ADD LW EXT PLV HIP JNT HEVY-DUTY EA	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2610	ADD LW EXT PELV THRUST BEAR LOCK	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2600	ADD LW EXT PELV THRUST BEAR FREE	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2580	ADD LOW EXTRM PELV CNTRL PELV SLING	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2570	ADD LW EXT PELV HIP JNT CLEVIS	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2550	ADD LW EXT THI/WT BEAR HI ROLL CUFF	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2540	ADD LW EXT THI/WT BEAR LACR MOLD PT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2530	ADD LW EXT THI/WT BEAR LACR NONMOLD	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2525	ADD LW EXT ISCH M-L BRIM MOLD PT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2520	ADD LW EXTRM THI/WT BEAR CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2510	ADD LW EXTRM THI/WT BEAR MOLD PT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2500	ADD LW EXTRM THIGH/WT BEAR RING	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2492	ADD KNEE LIFT LOOP DROP LOCK RING	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	L2430	ADD KNEE JNT RATCHT LOCK EXT EA JNT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2425	ADD KNEE JNT DISC/DIAL LOCK EA JNT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2415	ADD KNEE LOCK-INTEGRATD RLSE EA JNT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2405	ADDITION KNEE JOINT DROP LOCK EACH	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2397	ADD LOW EXTREM ORTHOSIS SUSP SLEEVE	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2395	ADD LW EXT OFFSET KNEE JNT HD EA	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2390	ADD LW EXTRM OFFSET KNEE JNT EA JNT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2387	ADD LW EXT POLYCNTRC KNEE CSTM KAFO	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2385	ADD LW EXTREM STRAIT KNEE JNT HD EA	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2380	ADD LW EXT TORSN CNTRL STRAIT KNEE	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2375	ADD LW EXT TORSION CNTRL ANK JNT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2370	ADDITION LOWER EXTREM PATTEN BOTTOM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2360	ADDITION LOW EXTREM EXT STEEL SHANK	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2350	ADD LW EXT PROSTH TYPE SCKT MOLD PT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2340	ADD LW EXTRM PRETIBL SHELL MOLD PT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2335	ADDITION LOW EXTREM ANT SWING BAND	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	L2330	ADD LOW EXT LACER MOLD PT CSTM ONLY	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2320	ADD LOW EXT NONMOLD LACER CSTM ONLY	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2310	ADD LOW EXTREM ABDUCT BAR STRAIGHT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2300	ADD LW EXTRM ABDUCT BAR JNTED ADJ	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2280	ADD LOW EXTREM MOLDED INNR BOOT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2275	ADD LW EXT VARUS/VULGUS CORR PLSTC	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2270	ADD LW EXT VARUS/VALGUS CORR STRAP	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2265	ADD LOW EXTREM LONG TONGUE STIRUP	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2260	ADD LW EXT REINFORCED SOLID STIRUP	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2250	ADD LW EXT FT PLAT MOLD PT STIRUP	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2240	ADD LW EXT ROUND CALIPER&PLAT ATTCH	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2232	ADD LOW EXT ORTHOS ROCKR BOTTM CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2230	ADD LW EXT SPLIT FLAT CALIPR STIRUP	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2220	ADD LW EXT DRSFLX&PLNTR ASST EA JNT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2210	ADD LOW EXTREM DORSIFLX ASST EA JNT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2200	ADD LOW EXTRM LTD ANK MOTION EA JNT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	L2192	ADD LW EXT ORTH HIP JNT THI FLNGE	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2190	ADD LOW EXTREM FX ORTHOS WAIST BELT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2188	ADD LW EXT FX ORTHOS QUADRILAT BRIM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2186	ADD LW EXT ORTH ADJ MOT KNEE JNT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2184	ADD LW EXTRM ORTH LTD MOT KNEE JNT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2182	ADD LW EXT ORTH DROP LOCK KNEE JNT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2180	ADD LW EXTRM ORTH PLSTC SHOE INSRT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2136	KAFO FEM FX CAST ORTHOS RIGD PRFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2134	KAFO FEM FX CAST SEMI-RIGD PRFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2132	KAFO FEM FX CAST ORTHOS SFT PRFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2128	KAFO FEM FX CAST ORTHOS CSTM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2126	KAFO FEM FX CAST THERMOPLSTC CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2116	AFO TIB FX ORTHOS RIGD PRFAB FIT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2114	AFO TIBL FX ORTHOS SEMI-RIGD PRFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2112	AFO TIB FX ORTHOS SFT PRFAB FIT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2108	AFO TIB FX CAST ORTHS CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	L2106	AFO TIB FX CAST THERMOPLSTC CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2090	HKAFO UNI TORSN CABL BALL BEAR CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2080	HKAFO UNI TORSION CABLE CSTM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2070	HKAFO UNI ROTAT STRAPS CSTM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2060	HKAFO BIL TORSION BALL BEAR CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2050	HKAFO BIL TORSION CABLES CSTM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2040	HKAFO TORSN CNTRL BIL ROTAT STRAPS	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2038	KAFO FULL PLSTC MX-AXIS ANKLE CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2037	KAFO FULL PLSTC 1 UPRIGHT CSTM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2036	KAFO FULL PLSTC DBL UPRT CSTM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2035	KAFO FULL PLSTC STAT PED SZ PRFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2034	KAFO PLSTC MED LAT ROTAT CNTRL CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2030	KAFO DBL UPRT STIRUP NO KNEE JNT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2020	KAFO DBL UPRT STIRUP THI&CALF CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2010	KAFO 1 UPRT STIRUP NO KNEE JNT CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2005	KAFO ANY MATL AUTO RLS ANK JNT CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	L2000	KAFO 1 UPRT SOLID STIRUP CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1990	AFO DBL UPRT DORSIFLX STIRUP CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1980	AFO 1 UPRT DORSIFLX SLID STIRUP FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1971	ANK FT ORTHOS PLSTC/OTH MATL PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1970	AFO PLASTIC W/ANK JOINT CUSTOM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1960	AFO POST SOLID ANK PLSTC CSTM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1951	ANK FT ORTHOS SPIRAL PLSTC/OTH MATL	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1950	AFO SPIRAL PLASTIC CUSTOM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1945	AFO MOLD PLSTC RIGD ANT TIBL CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1940	ANK FT ORTHOS PLSTC/OTH MATL CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1932	AFO RIGD ANT TIBL CARB FIBR/EQU PRFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1930	AFO PLASTIC/OTH MATERIAL PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1920	AFO 1 UPRT W/STAT/ADJ STOP CSTM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1910	AFO POST 1 BAR CLASP ATTCH SHOE	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1907	ANKLE ORTHOS SUPRAMALLEOLAR CUSTOM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1906	AFO MX-LIGAMENT ANK SUPT PREFB OTS	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	L1904	ANK ORTH ANK GAUNTLT/SIM CUSTOM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1902	ANK ORTH ANK GAUNTLT/SIM PREFAB OTS	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1900	AFO SPRNG WIRE DORSIFLX ASST CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1860	KO MOD SUPRACNDYLR PROSTH SCKT CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1852	KNEE ORTHOS DBLE UPRT THIGH & CALF	HCPCS - ORTHOTIC PROCEDURES	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	L1851	KNEE ORTHOS SNG UPRT THIGH & CALF	HCPCS - ORTHOTIC PROCEDURES	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	L1850	KNEE ORTHOS SWEDISH TYPE PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1848	KNEE ORTHOS DBL UPRT AIR SUPP PRFAB	HCPCS - ORTHOTIC PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	L1847	KNEE ORTHOS DBL UPRT ADJ JNT PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1846	KNEE ORTHOS DBL UPRT THI&CALF CUSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1845	KNEE ORTHOS DBL UPRT THI&CALF PRFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1844	KNEE ORTHOS 1 UPRT THI&CALF CUSTOM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1843	KNEE ORTHOS 1 UPRT THI&CALF PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1840	KO DEROTATION MED-LAT ACL CSTM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1836	KNEE ORTHOSIS RIGD W/O JOINT PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1834	KO W/O KNEE JOINT RIGID CUSTOM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	L1833	KNEE ORTHOSIS ADJUST JNT RIGD SUPP	HCPCS - ORTHOTIC PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	L1832	KNEE ORTHOS IMMOBLZR ADJUST PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1831	KNEE ORTHS LOCK KNEE JNT PSTN ORTHT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1830	KNEE ORTHOSIS IMMOBLIZER PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1812	KNEE ORTHOSIS ELASTIC W/JNTS PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	L1810	KNEE ORTHOSIS ELASTIC JOINTS PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1755	LEGG PERTHES ORTHOS PATTEN BOTTOM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1730	LEGG PERTHES ORTHOSIS SCOTTISH RITE	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1720	LEGG PERTHES ORTHO TRILAT TACHDIJAN	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1710	LEGG PERTHES ORTHOS NEWINGTON CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1700	LEGG PERTHES ORTHOSIS TORONTO CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1690	COMB BIL LUMBO-SAC HIP FEM ORTHOS	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1686	HIP ORTHOS POSTOP HIP ABDCT PRFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1685	HIP ORTHOS POSTOP HIP ABDCT CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1680	HIP ORTHOS DYN PELV CNTRL THI CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1660	HIP ORTHOS ABDUCT CNTRL-STATC PLSTC	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	L1650	HIP ORTHOSIS ABDUCT CNTRL-STATC ADJ	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1640	HIP ORTHOSIS-PELV BAND/SPRDR BAR	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1630	HIP ORTHOSIS ABDUCT CONTRL/SEMI-FLX	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1620	HIP ORTHOS ABDUCT FLEX PAVLIK PRFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1610	HIP ORTHOS ABDUCT CNTRL FLEX PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1600	HIP ORTHOS ABDUCT FLX FREJKA PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1499	SPINAL ORTHOSIS NOS	HCPCS - ORTHOTIC PROCEDURES	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	L1310	OTH SCOLIOSIS PROC POSTOP BDY JACKT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1300	OTH SCOLIOS PROC BDY JACKT MOLD PT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1290	ADDITION TLSO LAT TROCHANTERIC PAD	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1260	ADD TLSO ANT THOR DEROTATION PAD	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1240	ADDITION TLSO LUMBAR DEROTATION PAD	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1230	ADD TLSO MLWAKEE TYPE SUPERSTRCT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1220	ADDITION TLSO ANT THORACIC EXT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1210	ADDITION TLSO LATERAL THORACIC EXT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1200	TLSO INCL FURNISH INIT ORTHOS ONLY	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	L1120	ADD CTLSO SCOLIO ORTHO COVR UPRT EA	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1110	ADD CTLSO/SCOLIOS RING MOLD PT MDL	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1100	ADD CTLSO/SCOLIOS RING PLSTC/LEATHR	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1090	ADD CTLSO/SCOLIOS ORTHOS LUMB SLING	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1085	ADD CTLSO/SCOLIO OUTRIG BIL-VRT EXT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1080	ADD CTLSO/SCOLIOSIS ORTHOSIS OUTRIG	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1070	ADD CTLSO/SCOLIO ORTHO TRPEZUS SLNG	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1060	ADD CTLSO/SCOLIOS ORTHOS THOR PAD	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1050	ADD CTLSO/SCOLIOS ORTHOS STERNL PAD	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1040	ADD CTLSO/SCOLIO ORTHO LUMB/RIB PAD	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1030	ADD CTLSO/SCOLIO ORTHOS LUMB PAD	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1020	ADD CTLSO/SCOLIO ORTHOS KYPHOS PAD	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1010	ADD CTLSO/SCOLIO ORTHOS AX SLING	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1005	TENSION BASED SCOLIOSIS ORTHOSIS	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1001	CTLS IMMOBILIZER INFANT SZ PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1000	CTLSO INCL FURNISH INIT ORTHOS-MDL	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L0999	ADDITION TO SPINAL ORTHOSIS NOS	HCPCS - ORTHOTIC PROCEDURES	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	L0984	PROTECTIVE BODY SOCK PREFAB EACH	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0982	STOCKING SUPPORT GRIPS PREFAB SET 4	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0980	PERONEAL STRAPS PREFAB PAIR	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0861	ADD HALO PROC REPLCMT LINER/INTERFC	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0859	RINGS&PINS	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0830	HALO PROC CERV HALO-MLWAKEE ORTHOS	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0820	HALO PROC CERV HALO-PLAST BDY JACKT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0810	HALO PROC CERV HALO IN JACKT VEST	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0710	CTLSO-MOLD PT-INTERFACE MATERIAL	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0700	CTLSO ANT-POST-LAT CNTRL MOLD PT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0651	LSO SAGIT-CORNL CNTRL RIGD SHLL/PNL	HCPCS - ORTHOTIC PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	L0650	LSO SAGIT-CORNL CNTRL ANT PST PANL	HCPCS - ORTHOTIC PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	L0649	LSO SAGIT-CORNL CNTRL RIGD PST PANL	HCPCS - ORTHOTIC PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	L0648	LSO SAGIT CNTRL RIGD ANT POST PANEL	HCPCS - ORTHOTIC PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	L0643	LSO SAGITTAL CNTRL RIGID POST PANEL	HCPCS - ORTHOTIC PROCEDURES	NO	01/01/2014	01/01/2014			

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MMAI-Medicare/Medicaid	L0642	LUMB ORTHOS SAGIT CTRL ANT POST PNL	HCPCS - ORTHOTIC PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	L0641	LUMB ORTHOS SAGIT CTRL RIGD PST PNL	HCPCS - ORTHOTIC PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	L0640	LSO SAG-COR CNTRL RIGD SHELL CUSTOM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0639	LSO SAG-COR CNTRL RIGD SHELL PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0638	LSO SAG-COR CNTRL RIGID A&P CUSTOM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0637	LSO SAG-COR CNTRL RIGID A&P PREFAB	HCPCS - ORTHOTIC PROCEDURES	YES	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	L0636	LSO SAG-COR CNTRL LUMB FLEX CUSTOM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0635	LSO SAG-COR CNTRL LUMB FLEX PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0634	LSO SAG-COR CNTRL RIGID POST CUSTOM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0633	LSO SAG-COR CNTRL RIGID POST PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0632	LSO SAGIT CNTRL RIGID A&P CUSTOM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0631	LSO SAGIT CNTRL RIGID POST CUSTOM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0630	LSO SAGIT CONTROL RIGID POST PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0629	LSO FLEXIBLE CUSTOM FABRICATED	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0628	LSO FLEXIBLE PREFAB OFF THE SHELF	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0627	LUMB ORTHOS RIGD A&P PNL PRFAB CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L0626	LUMB ORTHOS RIGID POST PREFAB CUSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0625	LUMBAR ORTHOSIS FLEXIBLE PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0624	SACROILIAC ORTHOSIS RIGID CUSTOM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0623	SACROILIAC ORTHOSIS RIGID PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0622	SACROILIAC ORTHOSIS FLEXIBLE CUSTOM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0621	SACROILIAC ORTHOSIS FLEXIBLE PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0492	TLSO 3 RIGID PLASTIC SHELLS PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0491	TLSO 2 RIGID PLASTIC SHELLS PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0490	TLSO SAGIT-CORONAL REINFORCE PRFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0488	TLSO TRIPLANR 1 PC W/INTERFCE PRFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0486	TLSO TRIPLANAR 2 PC W/INTERFCE CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0484	TLSO TRIPLANR 2 PC NO INTERFCE CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0482	TLSO TRIPLANAR 1 PC W/INTERFCE CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0480	TLSO TRIPLANR 1 PC NO INTERFCE CSTM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0472	TLSO TRIPLANAR HYPREXT RIGD FRME	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0470	TLSO TRIPLANAR FRME&APRON W/STRAP	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L0469	TLSO SAGITTAL-CORONAL CONTRL PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	L0468	TLSO SAGITTAL-CORONAL PREFAB CUSTOM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0467	TLSO SAGITTAL CONTROL RIGD PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	L0466	TLSO SAGITTAL CONTROL PREFAB CUSTOM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0464	TLSO TRIPLANR 4 SHELL ANT-STERNL	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0462	TLSO TRIPLANR 3 SHELL ANT-STERNL	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0460	TLSO TRIPLANR 2 SHELL ANT-STERNL	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0458	TLSO TRIPLANR 2 SHELL ANT-XIPHOID	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0457	TLSO FLX SC JUNC TRM INF SCAP SPINE	HCPCS - ORTHOTIC PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	L0456	TLSO FLEX SC SCAP SPN PRFAB CUSTOM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0455	TLSO FLEX SC JUNC TO T-9 PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	L0454	TLSO FLEX SC JUNC T-9 PRFAB CUSTOM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0452	TLSO FLEX TRUNK SUPP UP THOR CUSTOM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0450	TLSO FLEX TRUNK SUPP UP THOR PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0200	CERV COLLR ADJ CERV BARS&THOR EXT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0190	CERV MX POST COLLR ADJ CERV BARS	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L0180	CERV MX POST COLLR SUPPS ADJ	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0174	CERV COLLR SEMI-RGD THOR EXT PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0172	CERV COLLAR SEMI-RIGID FOAM PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0170	CERV COLLAR MOLDED PATIENT MODEL	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0160	CERV SEMI-RIGID OCCIP/MAND PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0150	CERV SEMI-RIGD ADJUST MOLD CHIN CUP	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0130	CERV FLXBL THRMOPLSTC COLLR MOLD PT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0120	CERVICAL FLEX NONADJUSTABLE PREFAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0113	CRANIL CERV ORTHOS TORTICOLLI PRFB	HCPCS - ORTHOTIC PROCEDURES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L0112	CRANIL CERV ORTHOS CONGN TORTICOLLI	HCPCS - ORTHOTIC PROCEDURES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0900	CUSTOMIZED DME OTH THAN WHEELCHAIR	HCPCS - K CODES -DMERCS ONLY	YES	07/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0899	PWR MOBILTY DEVC NOT CODED DME PDAC	HCPCS - K CODES -DMERCS ONLY	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	K0898	POWER WHEELCHAIR NOC	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0891	PWR WC 5 PED MX PWR SLING PT TO 125	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0890	PWR WC 5 PED 1 PWR SLING PT TO 125	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0886	PWR WC 4 MX PWR SLING PT 301-450	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	K0885	PWR WC 4 MX PWR CAP CHAIR PT TO 300	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0884	PWR WC 4 MX PWR SLNG SEAT PT TO 300	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0880	PWR WC 4 1 PWR SLNG SEAT PT 451-600	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0879	PWR WC 4 1 PWR SLNG SEAT PT 301-450	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0878	PWR WC 4 1 PWR CAPT CHAIR PT TO 300	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0877	PWR WC 4 1 PWR SLING SEAT PT TO 300	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0871	PWR WC GRP 4 SLING SEAT PT 451-600	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0870	PWR WC GRP 4 SLING SEAT PT 301-450	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0869	PWR WC GRP 4 CAPT CHAIR PT TO &EQU 300	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0868	PWR WC GRP 4 SLING SEAT PT TO &EQU 300	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0864	PWR WC 3 MX PWR SLNG SEAT PT 601/GT	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0863	PWR WC 3 MX PWR SLING PT 451-600	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0862	PWR WC 3 MX PWR SLING PT 301-450	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0861	PWR WC 3 MX PWR SLNG SEAT PT TO 300	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0860	PWR WC 3 1 PWR SLNG SEAT PT 451-600	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0859	PWR WC 3 1 CAP CHAIR PT 301 -450	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	K0858	PWR WC 3 1 PWR SLNG SEAT PT 301-450	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0857	PWR WC 3 1 PWR CAPT CHAIR PT TO 300	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0856	PWR WC 3 1 PWR SLING SEAT PT TO 300	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0855	PWR WC GRP 3 CAPT CHAIR PT 601 LB/GT	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0854	PWR WC GRP 3 SLING SEAT PT 601 LB/GT	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0853	PWR WC GRP 3 CAPT CHAIR PT 451-600	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0852	PWR WC GRP 3 SLING SEAT PT 451-600	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0851	PWR WC GRP 3 CAPT CHAIR PT 301-450	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0850	PWR WC GRP 3 SLING SEAT PT 301-450	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0849	PWR WC GRP 3 CAPT CHAIR PT TO &EQU 300	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0848	PWR WC GRP 3 SLING SEAT PT TO &EQU 300	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0843	PWR WC 2 MX PWR SLING PT 301-450	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0842	PWR WC 2 MX PWR CAPT CHR PT TO 300	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0841	PWR WC GRP 2 MX PWR SLING PT TO 300	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0840	PWR WC GRP 2 1 PWR SLING PT 601/GT	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0839	PWR WC 2 1 PWR SLNG SEAT PT 451-600	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	K0838	PWR WC 2 1 PWR CAPT CHR PT 301-450	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0837	PWR WC GRP 2 1 PWR SLING PT 301-450	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0836	PWR WC 2 1 PWR CAPT CHAIR PT TO 300	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0835	PWR WC GRP 2 1 PWR SLING PT TO 300	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0831	PWR WC 2 SEAT ELEV CAPT PT TO 300	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0830	PWR WC 2 SEAT ELEV SLING PT TO 300	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0829	PWR WC GRP 2X HVY DUTY CHR PT 601/GT	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0828	PWR WC GRP 2 SLING SEAT PT 601/GT	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0827	PWR WC GRP 2 CAPT CHAIR PT 451-600	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0826	PWR WC GRP 2 SLING SEAT PT 451-600	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0825	PWR WC GRP 2 CAPT CHAIR PT 301-450	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0824	PWR WC GRP 2 SLING SEAT PT 301-450	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0823	PWR WC GRP 2 CAPT CHAIR PT TO 300	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0821	PWR WC GRP 2 CAPT CHAIR TO 300	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0815	PWR WC GRP 1 SLING PT UP TO 300	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0813	PWR WC GRP 1 SLING SEAT PT TO 300	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	K0812	POWER OPERATED VEHICLE NOC	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0808	PWR OP VEH GRP 2 PT 451-600 LBS	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0807	PWR OP VEH GRP 2 HVY PT 301 -450 LBS	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0806	PWR OP VEH GRP 2 STD PT TO 300 LBS	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0802	PWR OP VEH GRP 1 HVY PT 451 -600 LBS	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0801	PWR OP VEH GRP 1 HVY PT 301 -450 LBS	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0800	PWR OP VEH GRP 1 STD PT TO 300 LBS	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0746	ABSRB WD DR H MDL PAD SZ GT 48 SQ IN	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0745	ABS WD DR PADGT 16 SQ INLT /EQU 48 SQ IN	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0744	ABSRB WD DR H MDL PAD 16 SQ IN/LESS	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0743	SX PUMP HOME MDL PORT FOR WOUNDS	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0740	REPR/SRVC O2 EQP TECH PER 15 MINS	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0739	REPR/SRVC DME NOT O2 PER 15 MINS	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0738	PORT GASEOUS O2 SYS RNTL;HOM COMPRS	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0733	PWR WC 12-24 AMP HR LEAD BATT EACH	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0730	CNTRL DOSE INHAL RX DEL ERY SYS	HCPCS - K CODES -DMERCS ONLY	NO	04/05/2016	04/05/2016			

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MMAI-Medicare/Medicaid	K0672	ADD LOW EXT ORTHOSIS REPL EACH	HCPCS - K CODES -DMERCS ONLY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	K0669	WC ACCSS SEAT/BK CUSHN NO DME PDAC	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0609	REPL ELECTRODE W/AUTO EXT DEFIB EA	HCPCS - K CODES -DMERCS ONLY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	K0608	REPL GARMNT W/AUTO EXT DEFIB EA	HCPCS - K CODES -DMERCS ONLY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	K0607	REPL BATTERY AUTO EXT DEFIB EA	HCPCS - K CODES -DMERCS ONLY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	K0606	AED W/INTGR ECG ANALY GARMNT TYPE	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0605	REPL BATTERY PUMP LITHIUM 4.5 V EA	HCPCS - K CODES -DMERCS ONLY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	K0604	REPL BATTERY PUMP LITHIUM 3.6 V EA	HCPCS - K CODES -DMERCS ONLY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	K0603	REPL BATTERY PUMP ALKALINE 1.5 V EA	HCPCS - K CODES -DMERCS ONLY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	K0602	REPL BATTERY SILVER OXIDE 3 V EA	HCPCS - K CODES -DMERCS ONLY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	K0601	REPL BATTERY SILVER OXIDE 1.5 V EA	HCPCS - K CODES -DMERCS ONLY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	K0552	SPL EX N-INS RX INF PMP SYR CRT S E	HCPCS - K CODES -DMERCS ONLY	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	K0462	TEMP REPL PT EQUIP REPR ANY TYPE	HCPCS - K CODES -DMERCS ONLY	NO	09/01/2017	09/01/2017		Submit claims with medical records	
MMAI-Medicare/Medicaid	K0455	INFUS PUMP UNINTRPT PARNTRAL MED	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0108	WC COMPONENT/ACCESSORY NOS	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0098	DRIVE BELT FOR POWER WC REPL ONLY	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	K0077	FRT C ASM CMPL SLD TIRE REPL ONLY E	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0072	FRT C ASM CMPL SEMIPN T RPL ONLY E	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0069	RW ASM CMPL SOLID T SPKE/MLD RPL EA	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0053	ELEVATING FOOTRESTS ARTICULATING EA	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0052	SWNGAWAY DTACHBLE FTRSTS RPL ONLY E	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0050	RATCHET ASSEMBLY REPLACEMENT ONLY	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0047	ELEVT LEGRST UP HGR BRKT RPL ONLY E	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0046	ELEVAT LEGRST L EXT TUBE RPL ONLY E	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0045	FOOTREST CMPL ASSEMBLY REPL ONLY EA	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0043	FOOTREST LWR EXT TUBE REPL ONLY EA	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0042	STANDARD SIZE FOOTPLTE REPL ONLY EA	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0020	FIXED ADJUSTBLE HEIGHT ARMREST PAIR	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0019	ARM PAD REPLACEMENT ONLY EACH	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0017	DTACHBLE ADJUST HT ARMREST REPL EA	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0015	DETACHBLE NONADJUSTBL HT ARMREST EA	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0014	OTH MOTORIZED/POWER WHEELCHAIR BASE	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	K0013	CUSTOM MOTORIZED/POWER WHEELCHAIR B	HCPCS - K CODES -DMERCS ONLY	YES	07/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0012	LGHTWT PRTBLE MOTRIZED/PWR WHLCHAIR	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0011	STD FRME MOTRIZD WHLCHAIR W/PROG	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0010	STD-WT FRME MOTRIZED/PWR WHLCHAIR	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0004	HIGH STRENGTH LIGHTWEIGHT WHLCHAIR	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J9175	INJECTION ELLIOTTS' B SOLUTION 1 ML	HCPCS - CHEMO DRUGS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J9165	INJ DIETHYLSTILBESTROL 250 MG	HCPCS - CHEMO DRUGS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J8597	ANTIEMETIC DRUG ORAL NOS	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J8498	ANTIEMETIC DRUG RECTAL/SUPP NOS	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7799	NOC RX NOT INHAL RX ADMNED THRU DME	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7699	NOC RX INHAL SOL ADMINED THRU DME	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7686	TREPROSTINIL INHAL UNIT DOS 1.74 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7685	TOBRAMYCIN INHAL CP THRU DME 300 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7684	TRIAMCINOLONE INHAL CP UNIT PER MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J7683	TRIAMCINOLONE INHAL CP CONC PER MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J7682	TOBRAMYCIN INHAL NON-CP UNIT 300 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	J7681	TERBUTALINE SULF INH COMP U DOSE MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J7680	TERBUTALINE SULFATE INH CP CONC MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J7677	REVEFENACIN I SOL NONCP DME 1 MCG	HCPCS - DRUGS (NOT ORAL)	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	J7676	PENTAMIDINE ISETHIONATE I SL 300 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7674	METHACHOLINE CHLORID INHAL PER 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7670	METAPROTERENOL SULFATE INHAL 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J7667	METAPROTERENOL SULF INHAL CP 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J7665	MANNITOL ADMIN THRU AN INHALER 5 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7660	ISOPROTERENOL HCI INHAL UNIT PER MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J7659	ISOPROTERENOL HCI INH NON-CP U MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7658	ISOPROTERNOL HCI INH NON-CP CONC MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7657	ISOPROTERENOL HCI INHAL CP DME MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J7650	ISOETHARINE HCI INHAL U DOSE PER MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7649	ISOETHARINE HCI NON-CP U DOS PER MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7648	ISOETHARINE HCI INH NON-CP CONC MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7647	ISOETHARINE HCL INHAL CP DME PER MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	J7645	IPRATROPIUM BROMIDE INHAL U PER MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J7644	IPRATROPIUM BROM INHAL NON-CP U MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7643	GLYCOPYRROLATE INHAL U DOSE PER MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J7642	GLYCOPYRROLATE INHAL CP CONC PER MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J7641	FLUNISOLIDE INHAL COMP UNIT PER MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J7640	FORMOTEROL INHAL CP U DOSE 12 MCG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7639	DORNASE ALFA I SOL NONCP U D-MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7638	DEXAMETHASONE INHAL CP UNIT PER MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J7637	DEXAMETHASONE INHAL CP CONC PER MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J7634	BUDESONIDE INHAL CP DME 0.25 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7633	BUDESONIDE INHAL NON-CP CNC 0.25 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7632	CROMOLYN NA I SOL CP PROD UD 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J7631	CROMOLYN NA I SOL NONCP UD P 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7629	BITOLTEROL MESYLATE INHAL CP U MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7628	BITOLTEROL MESYLAT INHAL CP CONC MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7627	BUDESONIDE INHAL CP UNIT TO 0.5 MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			

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MMAI-Medicare/Medicaid	J7626	BUDESONIDE INHAL NON-CP U TO 0.5 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7624	BETAMETHASONE INHAL CP UNIT PER MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J7622	BECLOMETHASONE INHAL CP UNIT PER MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J7620	ALBUTEROL TO 2.5 MG IPT TO 0.5 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7615	LEVALBUTEROL INHAL DME UNIT 0.5 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7614	LEVALBUTEROL INHAL NON-CP U 0.5 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7613	ALBUTEROL INHAL NON-CP U DOSE 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2010	07/14/2015			
MMAI-Medicare/Medicaid	J7612	LEVALBUTROL INHL NON-CP CONC 0.5 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7611	ALBUTEROL INHAL NON-CP CONC 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2010	07/14/2015			
MMAI-Medicare/Medicaid	J7610	ALBUTEROL INHAL ADMIN THRU DME 1MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J7609	ALBUTEROL INHAL CP THRU DME 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J7608	ACETYLCYSTEINE I SOL NONCP UD PER G	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7607	LEVALBUTERAL INHAL CP DME 0.5 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7606	FORMOTEROL FUMARATE IHAL U D 20 MCG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7605	ARFORMOTEROL I SOL NONCOMP UD 15 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7604	ACETYLCYSTEINE I SOL CP PROD UD P G	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			

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MMAI-Medicare/Medicaid	J7599	IMMUNOSUPPRESSIVE DRUG NOC	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7511	LYMPHCYT GLOB RABBIT PARNTRAL 25MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7508	TACROLIMUS EXT RELEASE ORAL 0.1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	J7507	TACROLIMUS IMMED RELEASE ORAL 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7501	AZATHIOPRINE PARENTERAL 100 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7342	INSTILLATION CIPRO OTIC SUSPN 6 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	J7340	CRBDPA 5 MG/LVDP 20 MG EN SU 100 ML	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	J7332	HYAL/DERIV TRILURON IA INJ 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	J7331	HYAL/DERIV SYNOJOYNT IA INJ 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	J7330	AUTOL CULTURD CHONDROCYTES IMPL	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7329	HYALN/DERIV TRIVISC FOR IA INJ 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	J7326	HYAL/DERIV GEL-1 INTRA-ARTC INJ-DOS	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7324	HYALURONAN/DRIV ORTHOVISC IA INJ PD	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7322	HYALURONAN/DRIV HYMOVIS IA INJ 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	J7321	HYAL/DERV HYLGN/SUPRTZ IA INJ PER D	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7320	HYALN/DERIV GENVISC 850 IA INJ 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/27/2017	12/31/2078			

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MMAI-Medicare/Medicaid	J7316	INJECTION OCRIPLASMIN 0.125 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	J7315	MITOMYCIN OPTHALMIC 0. 2 MG	HCPCS - CHEMO DRUGS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7314	INJECT FA INTRAVITREAL IMPL 0.01 MG	HCPCS - DRUGS (NOT ORAL)	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	J7313	INJ FA INTRAVTRL IMPL ILUVN 0.01 MG	HCPCS - DRUGS (NOT ORAL)	YES	07/25/2016	12/31/2078			
MMAI-Medicare/Medicaid	J7312	INJ DEXAMETH INTRAVIT IMPL 0.1 MG	HCPCS - DRUGS (NOT ORAL)	NO	03/01/2016	03/01/2016			
MMAI-Medicare/Medicaid	J7311	INJ FA INTRAVTRL IMPL RTSRT 0.01 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7310	GANCICLOVIR 4.5 MG LONG-ACT IMPLANT	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J7309	METHYL AMINOLEVULINATE TOP 16.8PCT 1G	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7308	AMINOLEVULINIC ACID HCL TOP 20PCT 1 U	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7307	ETONOGESTREL IMPL SYS INCL IMPL&SPL	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7306	LEVONORGESTREL CONTRACPTV IMPL SYS	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7304	CONTRACEPTIVE SPL HORMONE PATCH EA	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7301	LNG-RLS INTRAUTERNE COC SYS 13.5 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	J7296	LNG-RELEASING IU COC SYS 19.5 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	J7209	INJECTION FACTOR VIII 1 I.U.	HCPCS - DRUGS (NOT ORAL)	YES	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	J7208	INJ FACTOR VIII PEGYLATED-AUCL 1 IU	HCPCS - DRUGS (NOT ORAL)	YES	06/09/2019	12/31/2078			

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MMAI-Medicare/Medicaid	J7207	INJECTION FAC VIII PEGYLATED 1 I.U.	HCPCS - DRUGS (NOT ORAL)	YES	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	J7203	INJ FACTOR IX GLYCOPEGYLATED 1 IU	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	J7202	INJ FAC IX AB FUS PRT IDELVN 1 I.U.	HCPCS - DRUGS (NOT ORAL)	YES	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	J7196	INJ ANTITHROMBIN RECOMB 50 I.U.	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7195	INJECTION FACTOR IX PER IU NOS	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7193	FACTOR IX AHF PURIFIED NON-RECMB-IU	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7192	FACTOR VIII PER IU NOS	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7191	FACTOR VIII AHF PORCINE PER IU	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7190	FACTOR VIII AHF HUMAN PER IU	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7187	INJ VONWILLBRND FCT CMPLX HUMN IU	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7186	INJ AHF/ VWF CMPLX-FACTOR VIII IU	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7183	INJ VWF COMPLEX WILATE 1 I.U.:RCO	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7179	INJECTION VWF 1 I.U. VWF:RCO	HCPCS - DRUGS (NOT ORAL)	YES	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	J7178	INJ HUMAN FIBRINOGEN CONC NOS 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7177	INJ HUMAN FIBRINOGEN CONCENTR 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	J7175	INJECTION FACTOR X 1 I.U.	HCPCS - DRUGS (NOT ORAL)	YES	01/27/2017	12/31/2078			

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MMAI-Medicare/Medicaid	J7170	INJECTION EMICIZUMAB-KXWH 0.5 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	J7121	5PCT DEXTROSE LR INFUSION TO 1000 CC	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	J7120	RINGERS LACTATE INFUSION TO 1000 CC	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7110	INFUSION DEXTRAN 75 500 ML	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7100	INFUSION DEXTRAN 40 500 ML	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7060	5PCT DEXTROSE/WATER	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7050	INFUS NORMAL SALINE SOLUTION 250 CC	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7042	5PCT DEXTROSE/NORMAL SALINE	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7040	INFUS NORMAL SALINE SOL STERILE	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7030	INFUS NORMAL SALINE SOL 1000 CC	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3591	UNCLASS RX/BIO FOR ESRD ON DIALYSIS	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	J3535	DRUG ADMIN THRU METERED DOSE INHAL	HCPCS - DRUGS (NOT ORAL)	NON-COV	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J3486	INJ ZIPRASIDONE MESYLATE 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J3473	INJ HYALURONIDASE RECOMB 1 USP UNIT	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J3472	INJ HYALURONIDASE OVINE 1000 USP U	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J3471	INE HYALURONIDASE OVINE 1 USP U	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			

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MMAI-Medicare/Medicaid	J3470	INJ HYALURONIDASE TO 150 UNITS	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J3410	INJECTION HYDROXYZINE HCL TO 25 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3400	INJ TRIFLUPROMAZINE HCL TO 20 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3398	INJ VORETGN NEPARVVC-RZYL 1 B VEC G	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	J3397	INJECT VESTRONIDASE ALFA-VJBK 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	J3385	INJ VELAGLUCERASE ALFA 100 UNITS	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J3365	INJ IV UROKINASE 250000 IU VIAL	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3357	USTEKINUMAB FOR SUBQ INJECTION 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J3320	INJ SPCTNOMYCN DHYDROCHLORD TO 2 GM	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J3316	INJECTION TRIPTORELIN ER 3.75 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	J3305	INJ TRIMETREXATE GLUCORONATE 25 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J3304	INJ TAA PF ER MS FORMULATION 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	J3303	INJ TRIAMCINOLONE HEXACETONIDE 5 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3302	INJ TRIAMCINOLONE DIACTAT 5 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3301	INJ TRIAMCINOLON ACETONID NOS 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3300	INJ TRIAMCINOLONE ACETONIDE PF 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	J3280	INJ THIETHYLPRAZINE MALEAT TO 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J3260	INJ TOBRAMYCIN SULFATE TO 80 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3250	INJ TRIMETHOBENZAMIDE HCL TO 200 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3245	INJECTION TILDRAKIZUMAB 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	J3240	INJ THYROTROPIN .9 MG PROV 1.1 VIAL	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J3230	INJ CHLORPROMAZINE HCL TO 50 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3145	INJ TESTOSTERONE UNDECANOATE 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	02/03/2020	12/31/2078			
MMAI-Medicare/Medicaid	J3121	INJ TESTOSTERONE ENANTHATE 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	J3105	INJ TERBUTALINE SULFATE TO 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3060	INJECTION TALIGLUCERASE ALFA 10 U	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	J3030	INJECTION SUMATRIPTAN SUCCNAT 6 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2997	INJ ALTEPLASE RECOMBINANT 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2995	INJ STREPTOKINASE PER 250000 IU	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2916	INJ SODIM FERRIC GLUCONATE 12.5 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2910	INJECTION AUROTHIOGLUCOSE TO 50 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J2850	INJ SECRETIN SYNTH HUMN 1 MICROGM	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	J2840	INJECTION SEBELIPASE ALFA 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	J2797	INJECTION ROLAPITANT 0.5 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	J2795	INJ ROPIVACAINE HYDROCHLORID 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2794	INJECTION RISPERIDONE 0.5 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J2792	INJ RHO D IMMUE GLOB IV HUMN 100 IU	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2791	INJ RHO D IG HUMAN RHOPHYLAC 100 IU	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2790	INJ RHO D IG HUMN FULL DOSE 300 MCG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2788	INJ RHO D IG HUMAN MINIDOSE 50 MCG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2787	RIBOFLAVIN 5'-PHO OPHTH SOL TO 3 ML	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	J2786	INJECTION RESLIZUMAB 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	J2770	INJ QUINUPRISTIN/DALFOPRISTN 500 MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J2760	INJ PHENTOLAMINE MESYLATE TO 5 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2730	INJ PRALIDOXIME CHLORIDE TO 1 GM	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2724	INJ PROTEN C CONC IV HUMAN 10 IU	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2720	INJ PROTAMINE SULFATE PER 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2710	INJ NEOSTIGMINE METHYLSULFAT 0.5 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	J2700	INJ OXACILLIN SODIUM TO 250 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2690	INJ PROCAINAMIDE HCL TO 1 GM	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2680	INJ FLUPHENAZINE DECANOATE TO 25 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2670	INJECTION TOLAZOLINE HCL TO 25 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2650	INJ PREDNISOLONE ACETATE TO 1 ML	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2597	INJ DESMOPRESSIN ACETATE PER 1 MCG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2560	INJ PHENOBARBITAL SODIUM TO 120 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2550	INJECTION PROMETHAZINE HCL TO 50 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2545	PENTAMIDINE ISETHIONAT I SOL 300 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2543	INJ PIP SOD/TZ SOD 1 G/0.125 G	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2540	INJECTION PCN G K+ TO 600000 UNITS	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2515	INJ PENTOBARBITAL SODIUM PER 50 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2513	INJ PENTASTARCH 10PCT SOL 100 ML	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2510	INJ PCN G PROCAINE AQUEOUS 600000 U	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2460	INJ OXYTETRACYCLINE HCL TO 50 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2440	INJECTION PAPAVERINE HCL TO 60 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	J2410	INJECTION OXYMORPHONE HCL TO 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2360	INJ ORPHENADRINE CITRATE TO 60 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2358	INJ OLANZAPINE LONG-ACTING 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J2320	INJ NANDROLONE DECANOATE TO 50 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J2315	INJ NALTREXONE DEPOT FORM 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2274	INJ MS PRS-FREE EPID/INTH USE 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	J2270	INJ MORPHINE SULFATE UP TO 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2210	INJ METHYLRGONOVIN MALATE TO 0.2 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2186	INJ MEM VABORBACTAM 10 MG/10 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	J2182	INJECTION MEPOLIZUMAB 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	J2180	INJ MEPRIDIN&PROMTHZIN HCL TO 50 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2062	LOXAPINE FOR INHALATION 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	J2010	INJECTION LINCOMYCIN HCL TO 300 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1990	INJ CHLORDIAZEPOXIDE HCL TO 100 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1980	INJ HYOSCYAMINE SULFATE TO 0.25 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1960	INJ LEVORPHANOL TARTRATE TO 2 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	J1890	INJ CEPHALOTHIN SODIUM TO 1 GM	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1885	INJ KETOROLAC TROMETHAMINE 15 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1830	INJ INTERFERON BETA-1B 0.25 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J1817	INSULIN ADMIN THRU DME PER 50 UNITS	HCPCS - DRUGS (NOT ORAL)	YES	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	J1810	INJ DROPRIDL&FENTNYL CITRAT TO 2ML	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1800	INJECTION PROPRANOLOL HCL TO 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1746	INJECTION IBALIZUMAB-UIYK 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	J1745	INJ INFLIXIMAB EXCL BIOSIMILR 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J1710	INJ HYDROCORTISON SOD PHOS TO 50 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1700	INJ HYDROCORTISONE ACTAT TO 25 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1670	INJ TETNS IMMUN GLOB HUMN TO 250 U	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1652	INJ FONDAPARINUX SODIUM 0.5 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1645	INJ DALTEPARIN SODIUM PER 2500 IU	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1644	INJ HEPARIN SODIUM PER 1000 UNITS	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1642	INJECTION HEPARIN SODIUM 10 UNITS	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1631	INJ HALOPERIDOL DECANOATE PER 50 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	J1628	INJECTION GUSELKUMAB 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	J1620	INJ GONADORELN HYDROCHLORID 100 MCG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J1610	INJ GLUCAGON HYDROCHLORIDE PER 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1602	INJECTION GOLIMUMAB 1 MG FOR IV USE	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	J1600	INJ GOLD SODIUM THIOMALATE TO 50 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1580	INJ GARAMYCIN GENTAMICIN UP 80 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1573	INJ HEP B IG HEPAGAM B IV 0.5 ML	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J1571	INJ HEP B IG HEPAGAM B IM 0.5 ML	HCPCS - DRUGS (NOT ORAL)	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J1569	INJ IG GAMMAGARD IV NONLYO 500 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J1562	INJECTION IG VIVAGLOBIN 100 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J1561	INJ IG NONLYOPHILIZED 500 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J1560	INJECTION GAMMA GLOB IM OVER 10 CC	HCPCS - DRUGS (NOT ORAL)	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J1559	INJECTION IG HIZENTRA 100 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J1460	INJECTION GAMMA GLOB IM 1 CC	HCPCS - DRUGS (NOT ORAL)	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J1455	INJECTION FOSCARNET SODIUM 1000 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1452	INJ FOMIVIRSEN SODIUM IO 1.65 MG	HCPCS - DRUGS (NOT ORAL)	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	J1444	INJECTION FPC POWDER 0.1 MG IRON	HCPCS - DRUGS (NOT ORAL)	NO	07/01/2019	07/01/2019			
MMAI-Medicare/Medicaid	J1439	INJ FERRIC CARBOXYMALTOSE 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	J1436	INJ ETIDRONATE DISODIUM PER 300 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1430	INJ ETHANOLAMINE OLEATE 100 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1410	INJECTION ESTROGEN CONJUGATED 25 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1380	INJ ESTRADIOL VALERATE TO 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1364	INJECTION ERYTH LACTOBIONATE 500 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1330	INJ ERGONOVINE MALEATE UP TO 0.2 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1320	INJ AMITRIPTYLINE HCL TO 20 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1301	INJECTION EDARAVONE 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	J1240	INJECTION DIMENHYDRINATE TO 50 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1212	INJ DMSO DIMETHYL SULFOXID 50PCT 50ML	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1205	INJ CHLOROTHIAZIDE SODIUM 500 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1190	INJ DEXRAZOXANE HCL PER 250 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1165	INJ PHENYTOIN SODIUM PER 50 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1162	INJ DIGOXIN IMMUNE FAB OVINE VIAL	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	J1130	INJECTION DICLOFENAC SODIUM .5 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	J1120	INJ ACETAZOLAMIDE SODIUM TO 500 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1110	INJ DIHYDROERGOTAMINE MESYLATE 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1097	PHN 10.6&KET 2.88 MG/ML OPH IRR 1ML	HCPCS - DRUGS (NOT ORAL)	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	J1096	DXAMETHASONE LAC OPHTH INSRT 0.1 MG	HCPCS - DRUGS (NOT ORAL)	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	J1071	INJ TESTOSTERONE CYPIONATE 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	J1000	INJ DEPO-ESTRADIOL CYPIONATE TO 5MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0945	INJ BROMPHENIRAMINE MALEATE-10 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0895	INJ DEFEROXAMINE MESYLATE 500 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0884	INJ ARGATROBN 1 MG ESRD ON DIALYSIS	HCPCS - DRUGS (NOT ORAL)	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	J0883	INJ ARGATROBAN 1 MG NON-ESRD USE	HCPCS - DRUGS (NOT ORAL)	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	J0850	INJ CYTOMEGLOVRUS IMMU GLOB IV-VIAL	HCPCS - DRUGS (NOT ORAL)	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J0841	INJECTION CROTALIDAE IMMUNE F120 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	J0840	INJ CROTALIDAE POLYV IMM FAB UP 1 G	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0795	INJ CORTICORELN OVINE TRIFLUT 1 MCG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0775	INJ COLLAGENASE CHC 0.01 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	J0770	INJ COLISTIMETHATE SODIUM TO 150 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0745	INJ CODEINE PHOSPHATE PER 30 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0744	INJ CIPROFLOXACIN IV INFUS 200 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0743	INJ CILASTATIN SODIM IMIPENEM-250MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0735	INJ CLONIDINE HYDROCHLORID 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0725	INJ CHORIONIC GONADOTROPIN-1000 USP	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J0720	INJ CHLORMPHNICL SODIM SUCCNT TO 1G	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0715	INJ CEFTIZOXIME SODIUM PER 500 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0710	INJ CEPHAPIRIN SODIUM TO 1 GM	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0706	INJECTION CAFFEINE CITRATE 5MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0702	INJ BETAMETHASONE AC & PHOS 3 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0697	INJ STERL CEFUROXIME SODIUM 750 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0696	INJ CEFTRIAXONE SODIUM PER 250 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0694	INJ CEFOXITIN SODIUM 1 GM	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0692	INJ CEFEPIME HYDROCHLORID 500 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0630	INJ CALCITONIN SALMON TO 400 UNITS	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	J0620	INJ CALCM GLYCROPHSPHTE&LACTAT-10ML	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0600	INJ EDETATE CALCM DISODIM TO 1000MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0599	INJ C-1 ESTERASE INHIBITOR 10 UNITS	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	J0597	INJ C1 ESTERASE INHIB BERINERT 10 U	HCPCS - DRUGS (NOT ORAL)	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J0592	INJ BUPRENORPHINE HYDROCHLOR 0.1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0588	INJECTION INCOBOTULINUMTOXIN 1 UNIT	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J0587	INJ RIMABOTULINUMTOXINB 100 UNITS	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J0586	INJECTION ABOBOTULINUMTOXINA 5 UNIT	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J0584	INJECTION BUROSUMAB-TWZA 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	J0575	BPN/NALOXONE ORAL GT 10 MG BPN	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	J0574	BPN/NLX O GT 6 MG BUT LT /EQU TO 10 MG BPN	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	J0573	BPN/NLX ORAL GT 3 MG BUT LT /EQU 6 MG BPN	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	J0572	BPN/NALOXONE ORAL LT /EQU TO 3 MG BPN	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	J0567	INJECTION CERLIPONASE ALFA 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	J0561	INJECTION PCN G BENZ 100000 UNITS	HCPCS - DRUGS (NOT ORAL)	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J0558	INJ PCN G BENZ & PROCAINE 100000 U	HCPCS - DRUGS (NOT ORAL)	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	J0517	INJECTION BENRALIZUMAB 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	J0515	INJ BENZTROPINE MESYLATE PER 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0500	INJECTION DICYCLOMINE HCL UP 20 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0476	INJ BACLOFEN 50 MCG INTRATHEC TRIAL	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0400	INJ ARIPIPRAZOLE IM 0.25 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J0390	INJECTION CHLOROQUINE HCL UP 250 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0380	INJ METARAMINOL BITARTRATE 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0364	INJ APOMORPH HYDROCHLORID 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0360	INJECTION HYDRALAZINE HCL UP 20 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0330	INJ SUCCINYLCHOLINE CHLORID UP 20MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0295	INJ AMPCLLN SODIM/SULBACTAM-1.5 G	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0289	INJ AMPHOTERICIN B LIPOSOME 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J0288	INJ AMPHOTERICIN B CHOLESTRYL 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J0287	INJ AMPHOTERICN B LIPID CMPLX 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J0257	INJ ALPHA 1 PROTEINASE INH 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J0256	INJ ALPHA 1-PROTASE INHIB NOS 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	J0221	INJ ALGLUCOSIDASE ALFA 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J0220	INJ ALGLUCOSIDASE ALFA 10 MG NOS	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J0210	INJ METHYLDOPATE HCL TO 250 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0200	INJ ALATROFLOXACIN MESYLATE 100 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0190	INJECTION BIPERIDEN LACTAT PER 5 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J0171	INJ ADRENALIN EPINEPHRINE 0.1 MG	HCPCS - DRUGS (NOT ORAL)	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J0129	INJ ABATACEPT 10 MG MEDICR ADM PHYS	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	H2037	DVLPMNTL DLAY PREV ACTV CHLD 15 MIN	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H2036	ALCOHOL &OR OTH DRUG TX PROGM-DIEM	HCPCS - ALCOHOL/DRUG ABUSE	NO	12/04/2014	12/04/2014	Market Competitiveness		
MMAI-Medicare/Medicaid	H2035	ALCOHOL &OR OTH DRUG TX PROGM-HOUR	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	09/02/2014	12/31/2078			
MMAI-Medicare/Medicaid	H2034	ALC&/RX ABS HALFWAY HOUSE SRVC DIEM	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H2031	MENTAL HEALTH CLUBHOUSE SRVC DIEM	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	09/02/2014	12/31/2078			
MMAI-Medicare/Medicaid	H2030	MENTAL HEALTH CLUBHOUSE SRVC 15 MIN	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	07/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	H2029	SEXUAL OFFENDER TX SERVICE PER DIEM	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	09/02/2014	12/31/2078			
MMAI-Medicare/Medicaid	H2028	SEXLOFFENDER TX SERVICE PER 15 MIN	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	09/02/2014	12/31/2078			
MMAI-Medicare/Medicaid	H2027	PSYCHOEDUCATIONAL SERVICE 15 MIN	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	H2026	ONGOING SUPP MNTAIN EMPLOYMENT DIEM	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	09/02/2014	12/31/2078			
MMAI-Medicare/Medicaid	H2025	ONGOING SUPP MNTAIN EMPLOY 15 MIN	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H2022	CMTY-BASED WRAP-AROUND SRVC DIEM	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	09/02/2014	12/31/2078			
MMAI-Medicare/Medicaid	H2021	CMTY-BASED WRAP-AROUND SRVC 15 MIN	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	09/02/2014	12/31/2078			
MMAI-Medicare/Medicaid	H2020	THERAPEUTIC BEHAVIORAL SRVC DIEM	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	09/02/2014	12/31/2078			
MMAI-Medicare/Medicaid	H2018	PSYCHOSOCIAL REHAB SRVC PER DIEM	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H2017	PSYCHOSOCIAL REHAB SRVC 15 MINUTES	HCPCS - ALCOHOL/DRUG ABUSE	YES	01/01/2019	12/31/2078	Regulatory Compliance		
MMAI-Medicare/Medicaid	H2016	COMP CMTY SUPPORT SRVC PER DIEM	HCPCS - ALCOHOL/DRUG ABUSE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H2014	SKILLS TRAINING&DVLP PER 15 MINUTES	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H2013	PSYC HEALTH FACL SERVICE PER DIEM	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	03/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	H2012	BEHAVIORAL HEALTH DAY TX PER HOUR	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	09/02/2014	12/31/2078			
MMAI-Medicare/Medicaid	H2011	CRISIS INTERVEN SERVICE PER 15 MIN	HCPCS - ALCOHOL/DRUG ABUSE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H2010	COMP MEDICATION SERVICES PER 15 MIN	HCPCS - ALCOHOL/DRUG ABUSE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H2000	COMP MULTIDISCIPLINARY EVALUATION	HCPCS - ALCOHOL/DRUG ABUSE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H1011	FAM ASSESS LIC BHVAL HLTH STATE DEF	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H1010	NON-MEDICAL FAM PLANNING ED-SESSION	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	H1005	PRENATAL RISK ENHNCD SRVC PKG	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H1004	PRENATAL RISK ENHNCD SRVC; F/U HOM	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H1003	PRENATAL RISK ENHNCD SRVC; ED	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H1002	PRENATAL RISK ENHNCD SRVC; COORD	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H1001	PRENATAL RISK ENHNCD SRVC; ANTPRTM	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H0050	ALCOHOL &/ DRUG SRVC BRF PER 15 MIN	HCPCS - ALCOHOL/DRUG ABUSE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H0046	MENTAL HEALTH SERVICES NOS	HCPCS - ALCOHOL/DRUG ABUSE	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	H0045	RESPITE CARE SRVC NOT HOME PER DIEM	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	H0042	FOSTER CARE CHLD NON-TX-MONTH	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	H0041	FOSTER CARE CHLD NON-TX-DIEM	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	H0040	ASSERTIVE CMTY TX PROGM PER DIEM	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	H0039	ASSERTIVE CMTY TX FCE-TO-FCE-15 MIN	HCPCS - ALCOHOL/DRUG ABUSE	YES	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	H0036	CMTY PSYC SUPP TX FCE-TO-FCE-15 MIN	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H0035	MENTAL HEALTH PART HOSP TX LT 24 HR	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	H0034	MEDICATION TRN&SUPPORT PER 15 MIN	HCPCS - ALCOHOL/DRUG ABUSE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H0033	ORAL MEDADMIN DIR OBSERVATION	HCPCS - ALCOHOL/DRUG ABUSE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	H0032	MENTL HLTH SRVC PLAN DVLP NON-PHYS	HCPCS - ALCOHOL/DRUG ABUSE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H0031	MENTAL HEALTH ASSESS NON-PHYSICIAN	HCPCS - ALCOHOL/DRUG ABUSE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H0029	ALCOHL &OR RX PREVENTION ALT SRVC	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	H0028	ALCOHL&/RX PREV PROB ID&REF SRVC	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	H0027	ALCOHL &OR RX PREV ENVIR SERVICE	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	H0025	BHVAL HEALTH PREV EDUCATION SERVICE	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H0022	ALCOHOL &OR DRUG INTERVEN SERVICE	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	H0021	ALCOHOL &OR DRUG TRAINING SERVICE	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	H0019	BHVAL HLTH; LNG-TERM RES PER DIEM	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	H0018	BHVAL HLTH; SHRT-TERM RES PER DIEM	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	H0017	BHVAL HEALTH; RES W/O ROOM&BD-DIEM	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	H0016	ALCOHL &OR RX SRVC; MEDICAL/SOMATIC	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	H0015	ALCOHL&/RX SRVC; INTENSV OP; INTRVN	HCPCS - ALCOHOL/DRUG ABUSE	YES	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	H0014	ALCOHL &/ RX SRVC; AMB DTOXFICATION	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	H0013	ALCOHL&/RX SRVC;AC DTOX RES PROG OP	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	H0012	ALCOHL&/RX SRVC; SUB-AC DTOX RES OP	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	H0011	ALCOHL&/RX SRVC;AC DTOX RES PROG IP	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	H0010	ALCOHL&/RX SRVC; SUB-AC DTOX RES IP	HCPCS - ALCOHOL/DRUG ABUSE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	H0009	ALCOHL&/RX SRVC; ACUTE DTOX HOSP IP	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	H0008	ALCOHL&/RX SRVC;SUB-AC DTOX HOSP IP	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	H0007	ALCOHL &OR RX SRVC; CRISIS INTERVEN	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H0005	ALCOHL&/RX SRVC; GRP CNSL CLINICIAN	HCPCS - ALCOHOL/DRUG ABUSE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H0004	BEHAVIORAL HEALTH CNSL&TX-15 MIN	HCPCS - ALCOHOL/DRUG ABUSE	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	H0003	ALCOHL&/RX SCR;LAB ANALY ALCOHL&/RX	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H0002	BHVAL HLTH SCR DETRM ADMIS TX PROGM	HCPCS - ALCOHOL/DRUG ABUSE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9987	BPCI ADV H V PT ASMT PER CLIN STAFF	HCPCS - PROC/PROF SERVICES (TE	YES	09/17/2018	12/31/2078			
MMAI-Medicare/Medicaid	G9986	R IH V E/M EP MC-APVD BPCI ADV 40 M	HCPCS - PROC/PROF SERVICES (TE	YES	09/17/2018	12/31/2078			
MMAI-Medicare/Medicaid	G9985	R IH V E/M EP MC-APVD BPCI ADV 25 M	HCPCS - PROC/PROF SERVICES (TE	YES	09/17/2018	12/31/2078			
MMAI-Medicare/Medicaid	G9984	R IH V E/M EP MC-APVD BPCI ADV 15 M	HCPCS - PROC/PROF SERVICES (TE	YES	09/17/2018	12/31/2078			
MMAI-Medicare/Medicaid	G9983	R IH V E/M EP MC-APVD BPCI ADV 10 M	HCPCS - PROC/PROF SERVICES (TE	YES	09/17/2018	12/31/2078			
MMAI-Medicare/Medicaid	G9982	RMT IH VST E/M NP MCR BPCI ADV 60 M	HCPCS - PROC/PROF SERVICES (TE	YES	09/17/2018	12/31/2078			
MMAI-Medicare/Medicaid	G9981	RMT IH VST E/M NP MCR BPCI ADV 45 M	HCPCS - PROC/PROF SERVICES (TE	YES	09/17/2018	12/31/2078			

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MMAI-Medicare/Medicaid	G9980	RMT IH VST E/M NP MCR BPCI ADV 30 M	HCPCS - PROC/PROF SERVICES (TE	YES	09/17/2018	12/31/2078			
MMAI-Medicare/Medicaid	G9979	RMT IH VST E/M NP MCR BPCI ADV 20 M	HCPCS - PROC/PROF SERVICES (TE	YES	09/17/2018	12/31/2078			
MMAI-Medicare/Medicaid	G9978	RMT IH VST E/M NP MCR BPCI ADV 10 M	HCPCS - PROC/PROF SERVICES (TE	YES	09/17/2018	12/31/2078			
MMAI-Medicare/Medicaid	G9977	DILATED MACULAR EX NOT PERF RSN NOS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9976	DOC PT RSN NOT PRFRM DIL MACULAR EX	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9965	PT NOT RECV AT LEAST 1 WCV DUR PER	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9964	PT RCV AT LEAST 1 WCV PCP DUR PRF P	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9963	EMB EPT NOT DOC SEP VESS NOT PERF	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9962	EMB EPT D SEP EA EMBO VES&OA AG/EMB	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9960	DOC MED RSN PRSCR SYS ANTIMICROBLS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9959	SYSTEMIC ANTIMICROBIALS NOT PRSCR	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9958	PATIENT DID NOT RECV COMBINATION TX	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9957	DOC MEDICAL REASON NOT RECV COMB TX	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9956	PATIENT RECEIVED COMBINATION TX	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9955	CASES WHICH INO ANES U ONLY FOR IND	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9954	PT EXH 2/GT RISK FAC P/O VOMITING	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			

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MMAI-Medicare/Medicaid	G9946	BP NOT MSR VAS WI 3 M PRE&AT 1 Y PO	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9945	PT CA FX/INF REL LUMB SP/PT IDIO/CS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9940	DOC MEDICAL RSN FOR NOT ON A STATIN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9939	PATH/DERMATOPATH SAME CLIN PRFRM BX	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9938	PT 66/GT INST SNP/RSD LTC GT 90 D MSR	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9930	PTS WHO ARE RECV COMFORT CARE ONLY	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9929	PT TRANSIENT/REVERSIBLE CAUSE OF AF	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9926	SAF CNCRN SCR POS SCR NO PROV MIT R	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9925	SAFETY CONCRNS SCR NOT PROV RSN NOS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9923	SAFETY CONCERNS SCR PROVIDED & NEG	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9922	SAF CNCRNS SCR PRV&IF POS DOC MIT R	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9918	FUNCTIONAL STATUS NOT PERF RSN NOS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9917	DOC ADV STAGE DEMENT & CG KNWL LTD	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9916	FUNC STS PERF ONCE IN LAST 12 MOS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9912	HBV ASSESS INTRP PRI ANTI-TNF TX	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9911	CLIN NODE NEG IBC BEF/AFT NA SYS TX	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			

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MMAI-Medicare/Medicaid	G9910	PTS 66/GT INST SNP/RSD LTC GT 90 D MSR	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9903	PT SCR TOB USE & ID AS TOB NON-USER	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9902	PT SCR TOB USE & ID AS TOB USER	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9900	SCR DX MAMMO RESULT NOT DOC RSN NOS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9899	SCR DX F DGTL/DBT MAMMO RSLT D&REV	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9897	PT NO RX/ADM AD TX COM EBRT PR NO R	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9896	D PT R NO RX/ADMN AD TX COM EBRT PR	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9895	D M R NOT RX/ADM AD TX COM EBRT PR	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9894	AD TX RX/ADMN COMB EXT BEAM RT PROS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9870	RCPT & ANLYS RMT ASYNC IMG 20/GT MINS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9869	RCPT & ANLYS RMT ASYNC IMG 10-20 MN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9868	RCPT & ANLYS REMT ASYNC IMGLT 10 MINS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9862	DOC MED RSN NOT RCM AL 10 Y F/U INT	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9861	PT SPENT GT /EQU 3 DAYS IN HOSPICE CARE	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9860	PT SPENT LT 3 DAYS IN HOSPICE CARE	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9845	PATIENT RCVD ANTI-EGFR MAB TX	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			

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MMAI-Medicare/Medicaid	G9844	PT DID NOT RECV ANTI-EGFR MAB TX	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9843	RAS GENE MUTATION	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9842	PATIENT HAS METASTATIC DZ AT DX	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9841	RAS GENE MUT T NOT PRF B4 ANTI-EGFR	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9840	RAS G MUT T P B4 INT ANTI-EGFR MOAB	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9839	ANTI-EGFR MONOCLONAL ANTIBODY TX	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9838	PATIENT HAS METASTATC DISEASE AT DX	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9832	AJCC STG BC DXEQU I&T-ST NOEQU T1 T1A T1B	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9831	AJCC STG BREAST CANCR DX EQU II / III	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9824	ENDOMETRL SMP/HSC BX & RSLT NOT DOC	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9823	ENDOMTRL SMP/HYSTROSCPY BX&RSLT DOC	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9821	NO DOC CHLAMYDIA SCR TST PROPER F/U	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9820	DOC CHLAMYDIA SCR TEST PROPER F/U	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9819	PT USE HOSPC SVC ANY TM DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9813	PT NOT DIE W/I 30 DA PROC/DUR I HSP	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9812	PT DIED INC ALL D DUR HOS OP PER	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G9807	PT DID NOT RECV CERV CYTOL/HPV TEST	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9806	PT WHO RECV CERV CYTOLOGY/HPV TEST	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9805	PT USE HSPC SVC ANY TIME DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9796	PATIENT IS CURRENTLY ON A STATIN TX	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9795	PATIENT IS NOT ON DAILY ASP/OTH AP	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9794	DOC MED RSN NOT ON DAILY ASP/OTH AP	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9793	PT CUR ON DAILY ASP/OTH ANTIPLATELT	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9792	MOST RCNT TOBACCO STS NOT TOB FREE	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9791	MOST RECNT TOBACCO STS TOBACCO FREE	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9790	MST RE BP GT 140/90 MM HG/BR NOT DOC	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9788	MOST RECENT BP LT /EQU TO 140/90 MM HG	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9787	PT ALIVE AS OF LAST DAY OF MSR YEAR	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9786	PR CBC/CSC NOT SNT PA BX C R IN 7 D	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9785	PR CUT BCC/SCC RVW IN 7 D RECV PATH	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9784	PATH/DERMATOPATH PRVDG 2ND OP ON BX	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9777	PT NO 2 PRO PHRM ANTI-EMTC AG DF CL	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G9776	DOC M R NO 2 PRO P ANTI-EMTC DF CL	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9775	PT RCV 2 PRO PHRM ANTI-EMTC DIF CLS	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9773	AL 1 BT MSR EQU /GT 35.5 C NO ACHV AA ET	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9772	DC MD RSN NO ACHV 1 BT MSREQU TO/GT 35.5	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9770	PERIPHERAL NERVE BLOCK	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9769	PT BMDT P 2 YR/RCV OPO M/T P 12 MO	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9768	PT UTILZ HSPC SVC ANY TM DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9767	HOS PT NEWLY DX CVA EVAR STRK TX	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9766	PT TRNS FRM 1 INST TO ANR DX CVA	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9765	DOC PT DECLIN CHG MED/ALT TX UNAVBL	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9764	PT TREATED W SYSTEMIC MED PSORIASIS	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9763	PT DID NOT HAVE 2/3 HPV VACC ON/BTW	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9762	PT HAD 2/3 HPV VACC ON/BTWN 9&13 BD	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9761	PT USE HOSPC SRVC ANY TM DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9758	PT IN HOSPICE ANY TIME DUR MSR PER	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9757	SURGICAL PROC INCL USE SILICONE OIL	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G9756	SURGICAL PROC INCL USE SILICONE OIL	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9755	DOC RES NOT INC INTVL MOD FU OR NO	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9754	A FINDING OF INCIDENTAL PULM NODULE	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9753	DC MED RSN NOT S DICOM I W/I P 12 M	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9746	PT HAS MS/PROS HV/PT TSNT/R CAUS AF	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9745	DOC RSN FOR NOT SCREEN/REC F/U HBP	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9744	PATIENT NOT ELIG D/T ACTIVE DX HTN	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9741	PT USE HOSPC SRVC ANY TM DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9740	HOSPC SRVC GVN PT ANY TM DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9737	PT UN CMPL E/W/H FS PROM I EVL&/D/C	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9735	PT UN CMP SHLD FS PROM INT EVL&/D/C	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9733	PT UN CMPL LB FS PROM INT EVL&/D/C	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9731	PT UN CMPL ANK/FT FS PROM I EV&/D/C	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9724	PATIENTS DOC AC MED OVERLAP MSR YR	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9723	HSPC SRVC PT RECV ANY TM DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9721	PATIENT NOT AMBULATORY BED RIDDEN	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G9720	HSPC SRVC PT OCRD ANY TM DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9719	PATIENT IS NOT AMBULATORY BED RIDDN	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9714	PT IS USING HOSPC ANY TM DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9713	PT USE HOSPC SRVC ANY TM DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9712	DOC MED RSN FOR PRESCRIB/DISP ABX	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9711	PT W/DX PAST HX TOTAL COLECTOMY/CRC	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9710	PT PROV HSPC SRVC ANY TM DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9709	HOSPICE SRVC PT ANY TIME DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9708	WOMEN WHO HAD BIL MAST/HX BIL MAST	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9706	LOW RISK RECURRENCE PROSTATE CANCER	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9705	AJCC BREAST CANCER STAGE I T1B DOC	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9704	AJCC BRST CA STAGE I T1 MIC/T1A DOC	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9702	PT USE HOSPC SRVC ANY TM DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9700	PT USE HOSPC SRVC ANY TM DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9699	LONG-ACT INHAL BD NOT PRSC RSN NOS	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9698	DOC SYS RSN NOT PRSC LA INHALED BD	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G9696	DOC MED RSN NOT PRSC LA INHALED BD	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9695	LONG-ACTING INHALED BD PRESCRIBED	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9694	HOSPC SRVC U PT ANY TIME DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9693	PT HOSPICE SRVC ANY TIME DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9692	HSPC SRVC RECV PT ANY TM DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9691	PT HAD HOSPC SRVC ANY TM DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9690	PT RECV HSPC SRVC ANY TM DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9689	PT ADM PRFRM ELECT CAROTID INTERVNT	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9688	PT HOSPICE SRVC ANY TIME DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9687	HOSPC SVC PROV PT ANY TM DUR MSR PR	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9685	PHYS OTH PROF E&M BENEF CHG COND NF	HCPCS - PROC/PROF SERVICES (TE	NO	11/01/2016	11/01/2016			
MMAI-Medicare/Medicaid	G9684	ONSITE AC TX NF RES UTI BILL SID	HCPCS - PROC/PROF SERVICES (TE	NO	11/01/2016	11/01/2016			
MMAI-Medicare/Medicaid	G9683	FAC AC TX NSG FL/ELCT DO BILL SID	HCPCS - PROC/PROF SERVICES (TE	NO	11/01/2016	11/01/2016			
MMAI-Medicare/Medicaid	G9682	ONSITE AC T NF RES SKN INF BILL SID	HCPCS - PROC/PROF SERVICES (TE	NO	11/01/2016	11/01/2016			
MMAI-Medicare/Medicaid	G9681	ONSITE AC T NF RES COPD/AS BILL SID	HCPCS - PROC/PROF SERVICES (TE	NO	11/01/2016	11/01/2016			
MMAI-Medicare/Medicaid	G9680	ONSITE AC TX NF RES W/CHF BILL SID	HCPCS - PROC/PROF SERVICES (TE	NO	11/01/2016	11/01/2016			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G9679	ONSITE AC T N FAC RES PNE BILL SID	HCPCS - PROC/PROF SERVICES (TE	NO	11/01/2016	11/01/2016			
MMAI-Medicare/Medicaid	G9675	PT HAD F/DR LB RSLT LDL-CEQU 190 MG/DL	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9656	PT TR D F AA LOC TO PACE/OTH N-ICU	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9651	PSO TL DOC NOT ANY 1 SPEC BENCHMK	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9649	PSORIASIS DOC ANY 1 BNCHMK BSA SEV	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9648	PATIENTS WITH 90 DAY MRS SCORE GT 2	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9638	FINAL RPT W/O DOC 1/GT DOS RDUC TECH	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9637	FINAL RPT DOC 1/MORE DOSE RED TECH	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9630	PT DID NOT SUSTAIN BOWL INJ AT SURG	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9629	DOC MED RSN NOT REPORT BOWEL INJ	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9628	PT BOWEL INJ SURG/DISC SUBS 30D PST	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9627	DIDNT SUST BLAD INJ SRG/NOR 30D P S	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9626	DOC MED RSN NOT REPORT BLADDER INJ	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9625	PT SUST BLAD INJ SRG/DSCV SUBSQ GT 30	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9624	PT NOT SCR UHLTY AU USING SYS SCR M	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9611	ORD AP AG NOT DOC PT R RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G9610	DOC MED RSN PT REC NOT ORD AP AGT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9609	DOC ORDER FOR ANTIPLATELET AGENTS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9607	D M RSN NOT PRF IO CYSTO/CASE PT D	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9599	AA 6.0 CM/GT MX DIA CL CT/M DIA AX CT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9595	PT HAS DOC VT SHUNT BT/COAGULOPATHY	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9594	PT MINOR BLUNT HT & HEAD CT TR ECP	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9555	DOC MED RSN RECOMMEND F/U IMAGING	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9552	INCIDNTL THYRD NODUL LT 1.0 CM IN RPT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9551	F RPT IMAG STDY W/O INCDNTL LES NTD	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9549	DOC MED RSN F/U IMAGING INDICATED	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9548	F RPT IMG STDY STAT NO F/U IMG RECM	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9547	R LS LT /EQU 1.0 CM/GT 1.0 CM BUTLT /EQU 4.0 CM	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9531	PT DOC VENT SHNT MXSYS TR TAK AP RX	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9530	PT W/MIN BLUNT HD TRMA CT ORD ECP	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9522	TOT ED VST&IPEQU /GT 2 12 M/NO SCR NO R	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9521	TOT ED VSTS & IP HOSPGT 2 PAST 12 M	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G9520	PT NO FINAL REFR+/-1.0 DIO 90 D SRG	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9519	PT FINL RFR +/- 1.0 D RFR 90 D SURG	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9513	INDIV DID NOT HAVE A PDC OF 0.8/GT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9511	PHQ-9/9M SCGT 9 DOC DUR 12 M DNM ID P	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9510	ADLT 18/GT MD NO REM 12M PHQ-9 LT 5	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9509	ADULT 18 YR/O MD/DYSTHYMIA R 12 MO	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9504	DOC NOT ASSESS HBV PRI ANTI-TNF TX	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9497	RECV INSTR ANES/PRXY ABSTN SM DA SX	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9490	CMS IC MDL HV PA CLN;NOT BLL 30-D P	HCPCS - PROC/PROF SERVICES (TE	NO	04/01/2016	04/01/2016			
MMAI-Medicare/Medicaid	G9489	RMT IH VST FOR E/M EST PT;TYP 40 MN	HCPCS - PROC/PROF SERVICES (TE	NO	04/01/2016	04/01/2016			
MMAI-Medicare/Medicaid	G9488	RMT IH VST FOR E/M EST PT;TYP 25 MN	HCPCS - PROC/PROF SERVICES (TE	NO	04/01/2016	04/01/2016			
MMAI-Medicare/Medicaid	G9487	RMT IH VST FOR E/M EST PT;TYP 15 MN	HCPCS - PROC/PROF SERVICES (TE	NO	04/01/2016	04/01/2016			
MMAI-Medicare/Medicaid	G9486	RMT IH VST FOR E/M EST PT;TYP 10 MN	HCPCS - PROC/PROF SERVICES (TE	NO	04/01/2016	04/01/2016			
MMAI-Medicare/Medicaid	G9485	RMT IH VST FOR E/M NEW PT;TYP 60 MN	HCPCS - PROC/PROF SERVICES (TE	NO	04/01/2016	04/01/2016			
MMAI-Medicare/Medicaid	G9484	RMT IH VST FOR E/M NEW PT;TYP 45 MN	HCPCS - PROC/PROF SERVICES (TE	NO	04/01/2016	04/01/2016			
MMAI-Medicare/Medicaid	G9483	RMT IH VST FOR E/M NEW PT;TYP 30 MN	HCPCS - PROC/PROF SERVICES (TE	NO	04/01/2016	04/01/2016			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G9482	RMT IH VST FOR E/M NEW PT:TYP 20 MN	HCPCS - PROC/PROF SERVICES (TE	NO	04/01/2016	04/01/2016			
MMAI-Medicare/Medicaid	G9481	RMT IH VST FOR E/M NEW PT;TYP 10 MN	HCPCS - PROC/PROF SERVICES (TE	NO	04/01/2016	04/01/2016			
MMAI-Medicare/Medicaid	G9471	WI PAST 2 YRS CTR DXA NOT ORDR/DOC	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9470	PT NO CS GT /EQU 10 MG/D PDN EQ 60/GT D	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9468	PT NOT REC CSGT /EQU 10 MG/D PRD EQ 60 D	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9457	PT NO A I&NO DOC RSN NO A I SBMS P	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9456	DOC MED/PT RSN NO ORDR/PERF SCR HCC	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9455	PT ABD IMAG U/S CE CT/C MRI HCC	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9434	ASA NOT WC CTR TL NOT U RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9432	ASA WC ACT C-ACT ACQ/ATAQ RSLT DOC	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9431	PTH RPRT NO PT & STM THK ULCR & MR	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9430	SPECIMEN SITE OTH THAN ANAT CUT LOC	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9429	DOC MED RSN NO PT CAT&STM THK U&MR	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9428	PA RPRT PT CAT & STM THK ULCER & MR	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9427	IMP MN TM ED AR-I P MED NOT PRF ADM	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9426	IMP MED TM ED AR-INIT P MED PRF ADM	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G9424	SPEC SITE OTH THAN LOC L NOT NSCLC	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9423	DOC MED RSN NO RPRT H TYP/NSCLC-NOS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9421	P NSCLC BX&CY S NO DOC CL NSCLC-NOS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9420	SPEC S NOT LOC LUNG/NOT PRIM NSCLC	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9419	DOC M RSN NO H T/NSCLC-NOS CL EXPLN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9418	P NSCLC BX&CY SPEC DOC CL NSCLC-NOS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9417	PT NO 1 TET DT TDAP ON/BTW 10&13 BD	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9416	PT 1 TET DT TDAP ON/BTW 10 & 13 BD	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9414	PT 1 D MC VAC ON/BETWN PT 11&13 BD	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9413	PT NOT ADM WI 180 D POST CIED W/INF	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9412	PT ADM WI 180 D P CIED INF DVC RMV	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9411	PT NOT ADM WI 180 D PST CIED W/INF	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9410	PT ADM WI 180 DAYS POST CIED W/INF	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9409	PT WO CT &/PERICARDIOCENT WI 30 DA	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9408	PT CT &/PERICARDIOCENTESIS WI 30 DA	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9396	PT I PHQ-9 SC GT 9 NO ASSESS RM 12 MO	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G9395	PT INIT PHQ-9 SC GT 9 NO RM AT 12 MO	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9394	PT BPD/PD NH/HOSPCE/PALL DUR ASSESS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9393	PT I PHQ-9 SCGT 9 RM 12 MO PHQ-9 SCLT 5	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9386	SCR HCV NOT REC 12 M P RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9385	DOC PT RSN NOT RECV AN SCR HCV INF	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9384	DOC MED RSN NOT RECV AN SCR HCV INF	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9383	PT RECV SCR HCV INF W/I 12 MO PRD	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9364	SINUSITIS CAUS/PRES CAUS BACT INF	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9358	POST-PART SCREEN EVAL EDU NOT PERF	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9357	POST-PARTUM SCREEN EVAL EDU PERFORM	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9354	1/NO CT PARNSL SS NOT ORD 90 D DX	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9353	MORE 1 CT PARNSL SS 90 D DX DOC RSN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9352	MORE 1 CT PARNSL SS 90 D DX NO RSN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9351	MORE 1 CT PARNSL SINUS 90 D AFTR DX	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9347	F/U REC NOT DOC GLS PNS RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9345	F/U REC DOC INCIDENT DETECTED PNS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G9344	SRCH PRIOR DICOM NOT CMPL SYS RSN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9342	SRC NOT CD PRI I S PT CT S CPL NO R	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9341	SEARCH PRIOR CT EXT ENTITIES 12-MO	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9319	IMAG STDY NOT NOMEN RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9318	IMAGING STUDY NAMED STANDARD NOMEN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9317	DOC PT RSK ASMT CALC PT/FM NOT CMPL	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9316	DOC PT RSK ASSESS RSK CALC W/PT/FAM	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9314	AMOX NOT 1ST LINE TM DX RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9313	AMC NOT RX 1ST LN ABX TM DX DOC RSN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9310	UNPLANNED HOSP RDM 30 DAY PRIN PROC	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9309	NO UNPLAN HOSP RDM 30 DAY PRIN PROC	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9308	UNPLAN RTN OP ROOM 30 DAY PRIN PROC	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9307	NO RTN OP ROOM PROC 30 DA PRIN PROC	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9306	INT LEAK ENDOLUM CNT ANASTM REQ	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9305	INT LEAK ENDOLUM CNT ANASTM NOT REQ	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9299	PT NOT EVAL VTE CV RSK 30 D PRI PRC	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G9298	PT EVAL VTE CV RSK 30 DA PRIOR PROC	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9297	SDM CONSERV TX PRIOR PROC NOT DOC	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9296	PT DOC SDM CONSERV TX PRIOR PROC	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9295	SPEC SITE OTH THAN ANATOMIC CUT LOC	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9294	PATH RPT W/PT CAT THICK ULCR PT1 MR	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9293	PATH RPT NOT PT CAT ULCER PT1 MR	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9292	DOC RSN NOT RPT PT CAT ULCER PT1 MR	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9291	SP SITE NOT LNG NOT NSCLC/NSCLC-NOS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9290	NSCLC BX CY RPT NOT DOC H TYP/NOS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9289	NSCLC BX CY RPT DOC H TYP/NSCLC-NOS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9288	DOC MED RSN NOT RPT H TYP/NSCLC-NOS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9287	ABX NOT PRSCR 10 DA AFTR ONSET SX	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9286	ABX REG PRSC W/I 10 DA AFTR ONST SX	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9285	SPEC SITE OTH THAN LUNG/NOT NSCLC	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9284	NSCLC BX CYT RPT NOT DOC H TYP/NOS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9283	NSCLC BX CYT RPT DOC H TYP/NOS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G9282	DOC RSN NOT RPT HIST TYP/NSCLC-NOS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9281	SCREEN PERF VACC NOT IND/PT REFUSAL	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9280	PNC V NOT ADM PRI D/C RSN NOT SPEC	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9279	PNC SCRN DOC VACC RECV PRORI D/C	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9278	DOC PT NOT ON D ASP/ANTI-PLAT REGMN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9277	DOC PT D ASP/ANTI-PLATLET/DOC CNTRA	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9276	DOC PATIENT IS CURRENT TOBACCO USER	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9275	DOC PATIENT CURRNT NON-TOBACCO USER	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9274	BP SEQU 140 DEQU 90/SLT 140 DEQU 90/SEQU 140 DLT 90	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9273	BP SYSTOLIC LT 140 DIASTOLIC LT 90	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9243	DOC VIRAL LOAD LT 200 COPIES/ML	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9242	DOC VLEQU /GT 200 COPIES/ML/VL NOT PRFRM	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9231	DOC ESRD DIAL RNA TX/PREG MSR PR	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9230	CHLAMYDIA GON SYP NOT SCR NO RSN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9228	CHLAMYDIA GON SYP SCR RESULTS DOC	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9227	FUNC O/C ASMT CP NOT DOC PT NOT ELG	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G9226	FOOT EXAMINATION PERFORMED	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9225	FOOT EXAM WAS NOT PRFRM RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9223	PCP PRSC 3 MO CD4+ LT 500/CD4 PCT LT 15PCT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9213	DSM-IVTM CRIT MDD NOT DOC INIT EVAL	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9212	DSM-IVTM CRITERIA MDD DOC INIT EVAL	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9191	DOC PT RSN NOT PRSC BETA-BLOCKER TX	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9190	DOC MED RSN NOT PRSC BETA-BLOCKR TX	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9189	BETA-BLCKR TX PRSC/CURR BEING TAKEN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9188	BETA-BLCKR TX NOT PRSC RSN NOT GIVN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9187	BPCI HOME VST PT ASMT QUAL HC PROF	HCPCS - PROC/PROF SERVICES (TE	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	G9157	TRANSESOPHAGEAL DOPPLER CARDIAC MON	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9156	EVAL WC REQ FACE-FACE VISIT W/PHYS	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9153	MAPCP DEMO PHYSICIAN INCENTIVE POOL	HCPCS - PROC/PROF SERVICES (TE	NO	07/01/2012	07/01/2012			
MMAI-Medicare/Medicaid	G9152	MAPCP DEMO COMMUNITY HEALTH TEAMS	HCPCS - PROC/PROF SERVICES (TE	NO	07/01/2012	07/01/2012			
MMAI-Medicare/Medicaid	G9151	MAPCP DEMO STATE PROVIDED SERVICES	HCPCS - PROC/PROF SERVICES (TE	NO	07/01/2012	07/01/2012			
MMAI-Medicare/Medicaid	G9150	NAT COMMITTEE QA LEVEL 3 MED HOME	HCPCS - PROC/PROF SERVICES (TE	NO	07/01/2012	07/01/2012			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G9149	NAT COMMITTEE QA LEVEL 2 MED HOME	HCPCS - PROC/PROF SERVICES (TE	NO	07/01/2012	07/01/2012			
MMAI-Medicare/Medicaid	G9148	NAT COMMITTEE QA LEVEL 1 MED HOME	HCPCS - PROC/PROF SERVICES (TE	NO	07/01/2012	07/01/2012			
MMAI-Medicare/Medicaid	G9147	OIVIT MSR: RQ; &/UUN; &/GLU; &/K+	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9143	WARFARIN RSPN TEST GEN TECH ANY	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9140	FRONTIER EXTENDED STAY CLIN DEMO;	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9139	ONC;DZ STS;CML;STAGE NOT LISTED	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9138	ONC;DZ STS;NHL;STAGE NOT DETERM	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9137	ONC;DZ STS;NHL;RELAPSED/REFRACTORY	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9136	ONC;DZ STS;NHL TRNS 2ND CELLR CLSS	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9135	ONC;DIZ STS;NHL;STG 3 4 NOT RELAPS	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9134	ONC;DZ STS;NHL;STAGE 1 2 NOT RELPSD	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9133	ONC;DZ STS;PROS CA;CLIN METS/M1	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9132	ONC;DZ STS;PROS CA;CLIN METS	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9131	ONC;DZ STS;F BRST CA;STG NOT LISTED	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9130	ONC; MX MYELOMA SYS DZ EXTENT UNKN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9129	ONC; MX MYELOMA SYS DZ ST II/HIGHER	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G9128	ONC; MX MYELOMA SYS DZ; SMOLDR ST I	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9126	ONC; CML HEM CYTOGN/MOLECULR REMISS	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9125	ONC; CML BP NOT HEM CYT/MOL REMISS	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9124	ONC;CML; AP NO HEMA CYT/MOL REMISS	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9123	ONC; CML; CP NO HEM CYT/MOL REMISS	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9117	ONC; STATUS; OV CA; EXTENT UNKN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9116	ONC; OV CA; PROGRSSN&/PLATINM RSIST	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9115	ONC; OV CA; ST III-IV; NO PROG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9114	ONC; OV CA; ST IA-B; IC; II;NO PROG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9113	ONC DS STATUS OV CA ST IA-B NO PROG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9112	ONC; STATUS; H&N CA; EXTENT UNKN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9111	ONC; STATUS; H&N CA; M1 MET LOC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9110	ONC;H&N CA; T3-4&/N1-3 M0 NO PROG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9109	ONC; H&N CA; T1-T2&N0 M0 NO PROG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9108	ONC; STATUS; PAN CA; EXTENT DZ UNK	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9107	ONC; PAN CA; UNRESECTBL M1 MET	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G9106	ONC; PAN CA; R1/R2 RESECT NO PROG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9105	ONC; PAN CA; R0 RESECT NO PROG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9104	ONC; STATUS; GASTR CA ; EXTENT UNK	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9103	ONC; STATUS; GASTR CA; CLIN M1 MET	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9102	ONC; GASTR CA; M0 UNRESECT NO PROG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9101	ONC; GASTR CA; R1/R2 RESECT NO PROG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9100	ONC; GASTR CA; R0 RESECT NO PROG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9099	ONC; STATUS; ESOPH CA; EXTENT UNK	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9098	ONC; STATUS; ESOPH CA ; M1 METASTAT	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9097	ONC; ESOPH CA; T4 ANY N M0 NO PROG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9096	ONC;ESOPH CA;T1-T3 N0-N1/NX NO PROG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9095	ONC; STATUS; RECTAL CA; EXTENT UNK	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9094	ONC; STATUS; RECTAL CA; M1 MET	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9093	ONC; RECTAL CA; T4 ANY N M0 NO PROG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9092	ONC; RECTAL CA;T1-3 N1-2 M0 NO PROG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9091	ONC; RECTAL CA; T3 N0 M0 NO PROG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G9090	ONC; RECTAL CA; T1-2 N0 M0 NO PROG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9089	ONC; STATUS; COLON CA; EXTENT UNK	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9088	ONC; COLON CA; M1 MET NO CURR DZ	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9087	ONC; COLON CA; M1 MET W/CURR DZ	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9086	ONC; COLON CA; T1-4 N1-2 M0 NO PROG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9085	ONC; COLON CA; T4 N0 M0 NO PROG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9084	ONC; COLON CA; T1-3 N0 M0 NO PROG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9083	ONC; PROS CA ACA; EXTENT UNKN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9080	ONC; PROS CA; TX RISING PSA	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9079	ONC;PROS CA; T3B-T4 N; T N1 NO PROG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9078	ONC; PROS CA; T2/T3A/PSAGT 20 NO METS	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9077	ONC;PROS CA;T1-T2C& PSALT /EQU 20NO PROG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9075	ONC; STATUS; F BRST CA; ACA; M1 MET	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9074	ONC; BRST; ACA; ST III; NEG;NO PROG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9073	ONC; BRST; ACA; ST III; POS;NO PROG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9072	ONC; BRST; ACA; ST I/II;NEG;NO PROG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G9071	ONC; BRST; ACA;ST I/II;POS; NO PROG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9070	ONC;STATUS;SCLC SC&COMB;EXTENT UNKN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9069	ONC; STATUS; SCLC SC&COMB; EXT MET	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9068	ONC; STATUS; SC&COMB;LTD NO PROGRSN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9067	ONC; STATUS; NSCLC; EXTENT DZ UNKN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9066	ONC; STATUS; NSCLC; ST III B-4 MET	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9065	ONC;NSCLC; ST III A NO PROGRESSN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9064	ONC; STATUS; NSCLC;ST II NO PROGRSN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9063	ONC; STATUS; NSCLC; ST I NO PROGRSN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9062	ONC; PRAC; MGMT DIFFERS OTH REASON	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9061	ONC; PTS COND NOT ADDRESSED GUIDE	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9060	ONC; PRAC; MGMT DIFFER COMORBID ILL	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9059	ONC;PRAC;MGMT DIFFERS PT OPT ALT TX	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9058	ONC; MGMT DIFFR PHYS DISAGREE GUIDE	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9057	ONC; PRAC; MGMT DIFFER CLIN TRIAL	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9056	ONC;PRAC GUIDE;MGMT ADHERS TO GUIDE	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G9055	ONC;PRIM;OTH UNS NOT OTHERWISE LIST	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9054	ONC;PRIM;SUP PT TERM CA;PALLIATV TX	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9053	ONC; PRIM; EXPECT MGMT EVIDENCE CA;	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9052	ONC; PRIM; SURVEILLANCE RECUR;	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9051	ONC; PRIM FOCUS; TX DECISION OPTNS	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9050	ONC; PRIM FOCUS; WRKUP EVAL/STAG	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9016	SMOK CESSATN CNSL IND ABSNC/ADD E&M	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9014	ESRD DEMO EXPND BUNDLE W/VENUS ACSS	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9012	OTH SPEC CASE MGMT SERVICE NEC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9011	COORD CARE FEE RISK ADJ MAINT LVL 5	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9010	COORD CARE FEE RISK ADJ MAINT LVL 4	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9009	COORD CARE FEE RISK ADJ MAINT LVL 3	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9008	COORD CARE FEE PHYS OVRSIGHT SRVC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9007	COORD CARE FEE SCHEDULE TEAM CONF	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9006	COORD CARE FEE HOME MONITORING	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9005	COORD CARE FEE RISK ADJUSTED MAINT	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G9004	COORD CARE FEE RISK ADJUSTD LW INIT	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9003	COORD CARE FEE RISK ADJUSTD HI INIT	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9002	COORDINATED CARE FEE MAINT RATE	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8955	MOST RCNT ASMT ADEQUCY VOL MGMT DOC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8918	PT NO PREOP ORD IV ABX SSI PROPH	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8917	PT PREOP ORD IV ABP SSI NOT INIT TM	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8916	PT PREOP ORD IV ABP SSI ABX INIT TM	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8915	PT DOC NOT EXP HOSP TRF/ADM D/C ASC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8914	PT DOC EXP HOSP TRNSF/ADM D/C ASC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8913	PT DOC NO EXP WRG SITE S PT P/IMPL	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8912	PT DOC EXP WRG SITE S PT PRO/IMPL	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8911	PT DOC NOT EXPERIENCED FALL IN ASC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8910	PT DOC HAVE EXPERIENCED FALL IN ASC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8909	PT DOC NOT HAVE REC BURN PRIOR D/C	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8908	PT DOC HAVE RECEIVED BRN PRIOR D/C	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8907	PT DOC NO:BRN;WRG EVNT;/TRF/ADM D/C	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G8882	SENTINEL LN BX NOT PERF RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8881	STAGE BREAST CA GT T1N0M0/T2N0M0	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8880	DOC REASON SLN BIOPSY NOT PERFORMED	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8878	SENTINEL LYMPH NODE BX PROC PERFORM	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8877	CLN NOT DX BR CA PRE BX RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8876	DOC RSN NO MI BX DIAG BRST CA PREOP	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8875	CLIN DX BR CA PREOP MIN INV BX METH	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8869	PT HAS DOC IMM HB&INIT ANTI-TNF TX	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8867	PCV NOT ADM/PREV RECV RSN NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8866	DOC PT RSN NOT ADM/PREV RECV PN VAC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8865	DOC MED RSN NOT ADM/PREV REC PN VAC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8864	PNEUMOCOCCL VACC ADMIN/PREV RECEIVE	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8863	PTS NOT ASSESS RSK BL RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8858	REF PHYS OTOLOG EVAL NOT PRF N GVN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8857	PT NOT ELIG REF OTOLOGIC EVAL MSR	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8856	REFER PHYS OTOLOGIC EVAL PERFORMED	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G8850	PAP TX NOT PRSC REASON NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8849	DOC REASON NOT PRESCRIBED PAP TX	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8846	MOD/SEV OBSTRUCTIVE SLEEP APNEA	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8845	PAP THERAPY PRESCRIBED	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8841	SLP APNEA SX NOT ASSESS RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8840	DOC RSN NOT DOCUMENT ASMT SLEEP SYM	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8839	SLEEP APNEA SX ASSESS SNOR DAY SSS	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8838	PT NOT D/C HOME BY PO DAY 2 FLW CEA	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8834	PT D/C HOM NO LATR PO DA 2 FLW CEA	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8833	PT NOT D/C HOM POSTOP D 2 FLW EVAR	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8826	PT D/C HOM NO LATR PO DA 2 FLW EVAR	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8817	STATIN TX NOT PRSC D/C RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8816	STATIN MEDICATION PRESCRIBED AT D/C	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8815	DOC RSN MED REC STATIN TX NOT PRSC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8808	TRANS-ABD/VAG U/S NOT P RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8806	PERF TRNSABD/TRNSVAG U/S&PG LOC DOC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G8798	SPECIMEN SITE OTH THN ANAT LOC PROS	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8797	SPEC SITE OTH THAN ANAT LOC ESOPH	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8785	BP READING NOT DOC REASON NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8783	NORMAL BP READING DOC F/U NOT RQR	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8756	NO DOC BP MSR REASON NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8755	MOST RECENT DIASTOLIC BP GT EQU 90MM HG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8754	MOST RECENT DIASTOLIC BP LT 90MM HG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8753	MOST RECENT SYSTOLIC BP GT EQU 140MM HG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8752	MOST RECENT SYSTOLIC BP LT 140MM HG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8749	ABSENCE SIGNS MEL/ABSENCE SX MEL	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8735	ELDER MALTX POS F/U NOT DOC NOT GVN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8733	ELD MALTX SCR DOC POS & F/U PLN DOC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8724	PT PN CAT&HG NOT DOC PATH RP NO RSN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8723	SITE IS OTH THAN ANAT LOC PRIM TUMR	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8722	DOC MED RSN NO PT PN/HG PATH REPRT	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8721	PT CAT PN CAT&HIST GR DOC PATH RPRT	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8712	ANTIBIOTIC NOT PRESCRIBED/DISPENSED	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8661	RSK-AD F ST CH R S LB IMPR PT N APP	HCPCS - PROC/PROF SERVICES (TE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8635	PHARM TX OP NOT PRSC REASON NOT GVN	HCPCS - PROC/PROF SERVICES (TE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8633	PHARM TX FOR OSTEOPOROSIS PRESCRIB	HCPCS - PROC/PROF SERVICES (TE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8599	ASP/OTH ANTITHROMB NOT USED NO RSN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8598	ASPIRIN/ANOTHER ANTIPLATELT TX USED	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8576	NO PO RENAL FAIL/DIALYSIS NOT REQ	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8575	DEV POSTOP RENAL FAIL/REQ DIALYSIS	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8570	PROLONGED POSTOP INTUBATION NOT RQR	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8569	PROLONGED POSTOP INTUBATION RQR	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8568	PT WAS NOT REF PHYS OTO EVAL NO RSN	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8567	PT NO VERIFICATION SUDDEN HEAR LOSS	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8566	PT NOT ELIG REF OTO HEAR LOSS MSR	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8565	VEIFICATION & DOC SUDDEN HEAR LOSS	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8564	PT REF OTO EVAL REASON NOT SPEC	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8563	PT NOT REF PHYS OTO EVAL RSN NOT GV	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8562	PT NO HX DRAINGE EAR PREV 90 DAYS	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8561	PT NOT ELIG REF OTO EVAL HX DRAIN	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8560	PT HX ACTIVE DRAIN EAR PREV 90 DAYS	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8559	PT REF TO PHYS FOR OTOLOGIC EVAL	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8542	FCN OC ASMT; NO DEFICT PLN NOT RQR	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8541	FUNC OUTCOME ASSESS NOT DOC NO RSN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8540	FNC OC ASMT NO D P D PT NOT ELG ENC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8536	NO DOC ELDER MALTX SCR RSN NOT GIVN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8511	SCR DEP DOC POS F/U PLN NO DOC NO R	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8510	SCR DEPR DOC NEG A F/U PLAN NOT RQR	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8478	BP MSR NOT PERF/DOC RSN NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8477	MOST RECNT BP SYSTGT EQU 140 &/ DIASGT EQU 90	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8476	MOST RECENT BP SYST LT 140 & DIAS LT 90	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8475	ACE INH/ARB TX NOT PRSC RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8474	ACE I/ARB TX NOT PRSC RSNS DOC CLIN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8473	ACE INHIBITOR/ARB THERAPY PRESCRIBD	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8465	HIGH/VERY HIGH RISK RECURR PROS CA	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8452	BETA-BLOCKER THERAPY NOT PRESCRIBED	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8450	BETA-BLOCKER THERAPY PRESCRIBED	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8432	DEPRESSION SCR NOT DOC RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8431	SCR CLIN DEPR DOC POS & F/U PLN DOC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8428	CUR MEDS NO DOC ELG CLN RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8427	ELIG CLIN DOC M UPDTD REC PT MEDS	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8421	BMI NOT DOCUMENTED & NO REASON GVN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8420	BMI DOC NML PARAM & NO F/U PLAN RQR	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8419	BMI DOC OUT NL PARM NO F/U DOC NO R	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8418	BMI DOC BLW NML PARAM & F/U PLN DOC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8417	BMI DOC ABV NML PARAM & F/U PLN DOC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8416	CLIN DOC PT NOT ELIG FOOTWEAR EVAL	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8415	FOOTWEAR EVAL WAS NOT PERFORMED	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8410	FOOTWEAR EVAL PERFORMED AND DOC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8405	LOWER EXTREM NEURO EXAM NOT PRFRM	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8404	LOWER EXTREM NEURO EXAM PERFORM&DOC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8400	PT W/CNTRL DXA RSLTS NOT DOCUMENTED	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8399	PT DOC RSLT CENTRAL DXA EVER PERF	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8397	DILATED MACULAR/FUNDUS EXAM PERFORM	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8396	LVEF NOT PERFORMED OR DOCUMENTED	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8395	LVEF GT EQU 40PCT OR NORMAL/MILD DEPR LVS	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G2149	DOCUM MED REASON NOT USE MU	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2145	ODI 3MO PO GT 22 ODI 3 MN PREO PO 30GT	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2144	ODI 3MO POLT EQU 22 ODI 3 MN PREO PO 30GT	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2143	ODI 1YR PO GT 22 ODI 3 MN PREO PO 30GT	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2142	ODI 1YR POLT EQU 22 ODI 3 MN PREO PO 30GT	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2129	PROC REL BP'S NOT TAKEN DUR OP VST	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2128	DOC MED RSN NOT ON DAILY ASP/OTH AP	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2113	PT RCVGT 5MG D PRGT 6MO&IMP/NO CHG D AC	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2112	PT RCVLT EQU 5 MG D PR/RA AC WRS/GCLT 6 MO	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2106	PT 66 Y&GT 1 CLM FRLTY&D MED DMNT MP	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			

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MMAI-Medicare/Medicaid	G2105	PT 66/GT INST SNP/RSD LTCGT 90 D DR MSR	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2100	PT 66 Y&GT 1 CLM FRLTY&D MED DMNT MP	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2098	PT 66 Y&GT 1 CLM FRLTY&D MED DMNT MP	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2096	ACE INHB/ARB/ARNI TH NO PRSC NO RSN	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2094	DOC PT RSN N PRSC ACE INHB/ARB/ARNI	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2093	DC MD RSN N PRSC ACE INHB/ARB/ARNIX	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2092	ACE I/ARB/ARNI TH PRSC/CUR BNG TKN	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2090	PT 66 Y&GT 1 CLM FRLTY&D MED DMNT MP	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2081	PT 66 &GT INST SNP/RES LTC GT 90 D MSR	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2080	EA ADD 30 MIN CNSL WK MED ASST TX;	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2079	TH SUP BPN ORAL;TO 7 ADD D SUP;	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2078	TH SUP METHADONE;TO 7 ADD D SUP;	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2075	MAT MEDICATION NOS; WEEKLY BUNDLE	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2074	MED ASST WKLY BUNDLE NOT INCL DRUG	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2073	MED ASST TX NALTREXONE;WKLY BUNDLE	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2068	MAT BUPRENORPHINE ORAL; WKLY BUNDLE	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G2067	MED ASST TX METHADONE;WEEKLY BUNDLE	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2022	MDL PRTCP BNEF RFS SRVC CVR UND MDL	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2021	HEALTH CARE PRACTITION RENDRING TIP	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G2015	COMP 60 MINS HOME CARE PLAN OVRSGHT	HCPCS-PROC/PROF SERVICES (TE	NO	04/01/2019	04/01/2019			
MMAI-Medicare/Medicaid	G2014	LIMITED 30 MINS CARE PLAN OVERSIGHT	HCPCS-PROC/PROF SERVICES (TE	NO	04/01/2019	04/01/2019			
MMAI-Medicare/Medicaid	G2013	EXTSV 75 MINS IH VST XST PT PST-D/C	HCPCS-PROC/PROF SERVICES (TE	NO	04/01/2019	04/01/2019			
MMAI-Medicare/Medicaid	G2011	ALC&/SBST MISUSE ST ASMT&INT 5-14 M	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	G2010	RMT EVAL REC VIDEO &/ IMG SB EST PT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	G2009	COMP 60 MINS IH VST XST PT POST-D/C	HCPCS-PROC/PROF SERVICES (TE	NO	04/01/2019	04/01/2019			
MMAI-Medicare/Medicaid	G2008	MOD 45 MINS IH VISIT XST PT PST-D/C	HCPCS-PROC/PROF SERVICES (TE	NO	04/01/2019	04/01/2019			
MMAI-Medicare/Medicaid	G2007	LTD 30 MINS IH VISIT XST PT PST-D/C	HCPCS-PROC/PROF SERVICES (TE	NO	04/01/2019	04/01/2019			
MMAI-Medicare/Medicaid	G2006	BRIEF 20 MINS IH VST XST PT PST-D/C	HCPCS-PROC/PROF SERVICES (TE	NO	04/01/2019	04/01/2019			
MMAI-Medicare/Medicaid	G2005	EXTSV 75 MINS IH VST NEW PT PST-D/C	HCPCS-PROC/PROF SERVICES (TE	NO	04/01/2019	04/01/2019			
MMAI-Medicare/Medicaid	G2004	COMP 60 MINS IH VST NEW PT POST-D/C	HCPCS-PROC/PROF SERVICES (TE	NO	04/01/2019	04/01/2019			
MMAI-Medicare/Medicaid	G2003	MOD 45 MINS IH VISIT NEW PT PST-D/C	HCPCS-PROC/PROF SERVICES (TE	NO	04/01/2019	04/01/2019			
MMAI-Medicare/Medicaid	G2002	LTD 30 MINS IH VISIT NEW PT PST-D/C	HCPCS-PROC/PROF SERVICES (TE	NO	04/01/2019	04/01/2019			

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MMAI-Medicare/Medicaid	G2001	BRF 20 MINS IH VST NEW PT PST-D/C.	HCPCS-PROC/PROF SERVICES (TE	NO	04/01/2019	04/01/2019			
MMAI-Medicare/Medicaid	G2000	BLINDED ADMN OF CONVULSIVE TX PROC	HCPCS - PROC/PROF SERVICES (TE	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	G1019	CLINICAL DECN SUPP MECH LOGICNETS	HCPCS-PROC/PROF SERVICES (TE	NO	03/04/2020	03/04/2020			
MMAI-Medicare/Medicaid	G1018	CLINICAL DECISION SUPP MECH INFINX	HCPCS-PROC/PROF SERVICES (TE	NO	03/04/2020	03/04/2020			
MMAI-Medicare/Medicaid	G1017	CLINICAL DECN SUPP MECH HEALTHHELP	HCPCS-PROC/PROF SERVICES (TE	NO	03/04/2020	03/04/2020			
MMAI-Medicare/Medicaid	G1016	CLINICAL DECN SUPP MECH SPD OF CARE	HCPCS-PROC/PROF SERVICES (TE	NO	03/04/2020	03/04/2020			
MMAI-Medicare/Medicaid	G1015	CLIN DECN SUPP MECH RELIANT MED GRP	HCPCS-PROC/PROF SERVICES (TE	NO	03/04/2020	03/04/2020			
MMAI-Medicare/Medicaid	G1014	CD SUP MCH INVENIQA SMNTC ANSW MED	HCPCS-PROC/PROF SERVICES (TE	NO	03/04/2020	03/04/2020			
MMAI-Medicare/Medicaid	G1013	CLN DECN SUP MCH EVDNCECAR IMAG ADV	HCPCS-PROC/PROF SERVICES (TE	NO	03/04/2020	03/04/2020			
MMAI-Medicare/Medicaid	G1012	CLINICAL DECISION SUPP MECH AGILEMD	HCPCS-PROC/PROF SERVICES (TE	NO	03/04/2020	03/04/2020			
MMAI-Medicare/Medicaid	G1011	CDSM QUAL TOOL NOS DEFINED MCR AUC	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G1010	CDSM STANSON DEFINED MCR AUC PROG	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G1008	CDSM CRANBERRY PEAK DEFINED MCR AUC	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G1007	CDSM AIM DEFINED MEDICARE AUC PROG	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G1004	CDSM NDSC DEFINED MEDICARE AUC PROG	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G1003	CDSM MEDICALIS DEFINED MCR AUC PROG	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G1002	CDSM MEDCURRENT DFIND MCR AUC PROG	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G1001	CDS MECH EVICORE DFIND MCR AUC PROG	HCPCS-PROC/PROF SERVICES (TE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G1000	CDS MECH APPL P/W DEFINED MCR AUC	HCPCS-PROC/PROF SERVICES (TE	EXPIRED	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	G0918	SATISFCTN CARE NOT 90 D FLW CAT SRG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0916	SATISFACTN CARE IN 90 D FLW CAT SRG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0915	IMPRV VF NOT IN 90 DA FLW CAT SURG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0914	PT CARE SURVEY WAS NOT COMPLETED PT	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0913	IMPRV VF ACHV IN 90 DA FLW CAT SURG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0659	DRUG TST DEFIN DR ID M ANY DR CLS	HCPCS - PROC/PROF SERVICES (TE	NO	04/27/2017	04/27/2017			
MMAI-Medicare/Medicaid	G0518	REMV REINS NON-BIODEG RX D IMPL 4/GT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G0517	REMV NON-BIODEGRAD RX DEL IMPL 4/GT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G0516	INSRT NON-BIODEGRAD RX DEL IMPL 4/GT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G0514	PRLNG PRV SVC OFC/O O/P;EA ADD 30 M	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G0513	PRLNG PREV SVC OFC/OTH O/P;1ST 30 M	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G0512	RHC/FQHC PS COCM 60 M/GT C TM-CAL MO	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G0511	RHC/FQHC G C MGMT 20 M/GT C T-CAL MO	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G0509	TH C CC SB PHYS 50 M CMNCT PT&PROV	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G0508	TH C CC INT PHYS 60 M CMNCT PT&PROV	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G0506	CMP ASMT & C PLN PT RQR CC MGMT SVC	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G0501	RES-INT SVC PT SPZ M-ASST TECH MN	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G0500	MOD SED SVC PRV SM PHYS PER GI ENDO	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G0499	HEP B SCR IN NON-PREG HIGH RISK IND	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G0498	CTX IV INF T; INI INF OFC/CLIN SET	HCPCS - PROC/PROF SERVICES (TE	NO	11/01/2016	11/01/2016			
MMAI-Medicare/Medicaid	G0496	SKD SVC LPN T&/E PT/F HH/HSPC E 15M	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	G0495	SKD SRVC RN T&/E PT/F HH/HSPC E 15M	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	G0494	SKD SRVC LPN OBS&ASMT PT C E 15 MIN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	G0493	SKD SRVC RN OBV&ASMT PT C EA 15 MIN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	G0492	DIALY 1 EVL PHYS AC KID INJ NO ESRD	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G0491	DIALYSIS MC ESRD AC KID INJ NO ESRD	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G0490	FTF HHN VST RHC/FQHC AREA SHTG HHA	HCPCS - PROC/PROF SERVICES (TE	YES	11/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	G0473	FTF BEHAV CNSL OBESITY GRP 30 MIN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G0472	HEP C ABO SC IND HI RSK&OTH COV IND	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2010	01/01/2015			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G0471	COLL V BLD VP/URN SMP CATH IND SNF	HCPCS - PROC/PROF SERVICES (TE	NO	04/27/2017	04/27/2017			
MMAI-Medicare/Medicaid	G0470	FQHC VISIT MENTAL HEATH ESTAB PT;	HCPCS - PROC/PROF SERVICES (TE	NO	10/01/2014	10/01/2014			
MMAI-Medicare/Medicaid	G0469	FQHC VISIT MENTAL HEALTH NEW PT;	HCPCS - PROC/PROF SERVICES (TE	NO	10/01/2014	10/01/2014			
MMAI-Medicare/Medicaid	G0468	FQHC VISIT IPPE OR AWV;	HCPCS - PROC/PROF SERVICES (TE	NO	10/01/2014	10/01/2014			
MMAI-Medicare/Medicaid	G0467	FQHC VISIT ESTABLISHED PATIENT	HCPCS - PROC/PROF SERVICES (TE	NO	10/01/2014	10/01/2014			
MMAI-Medicare/Medicaid	G0466	FQHC VISIT NEW PATIENT;	HCPCS - PROC/PROF SERVICES (TE	NO	10/01/2014	10/01/2014			
MMAI-Medicare/Medicaid	G0463	HOS OP CLIN VISIT ASSESS & MGMT PT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G0459	INPATIENT TELEHEALTH PHARMACOL MGMT	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0451	DVLPMNT TEST I&R STANDRD INSTR FORM	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0448	INS/RPL PRM CV-DFIB TV LEADS PACE E	HCPCS - PROC/PROF SERVICES (TE	YES	03/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	G0447	FCE-FCE BEHAVRL CNSL OBESITY 15 MIN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0446	ANN F2F INT BEHV TX CV DZ IND 15 MN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0445	HI INTNS BHV CNSL PREV STI; IND ED;	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0443	BRF F/F BHVR CNSL ALC MISUSE 15 MIN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0439	ANNUAL WELLNESS VST; PPS SUBSQT VST	HCPCS - PROC/PROF SERVICES (TE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G0438	ANNUAL WELLNES VST; PERSNL PPS INIT	HCPCS - PROC/PROF SERVICES (TE	NO	05/01/2017	05/01/2017			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G0435	INF AGT ANTIG DETECT RPD AB TST OMT	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0433	INF AB ELISA TECH HIV-1 &/OR HIV-2	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0432	INF AB EIA TECH HIV-1 &/OR HIV-2	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0429	DERMAL FILLER INJ TREATMENT LDS	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0428	COLL MENISC IMPL FIL MENISCAL DEFEC	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0427	TELEHEALTH CONSULT ED/IP 70 MIN/GT PT	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0426	TELEHEALTH CONSULT ED/IP 50 MIN PT	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0425	TELEHEALTH CONSULT ED/IP 30 MIN PT	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0421	F/F EDU SRVC CKD; GRP PER SESS 1 HR	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0420	F/F EDU SRVC CKD; IND PER SESS 1 HR	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0416	SURG PATH PROS NEEDLE BX ANY METHOD	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0415	OPN TX POST PELV BONE FX &/ DISLOC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0414	OPN TX ANT PELV BONE FX &/ DISLOC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0413	PERQ SKEL FIX POST PELV BONE FX	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0412	OPN TX ILIAC SPINE/ILIAC WING FX	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0409	SW & PSYCH SRVC EA 15 MIN F/F IND	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G0408	FU IP CNSLT CMPLX 35 MIN/GT TELEHLTH	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0407	FU IP CNSLT INTRMD 25 MIN TELEHLTH	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0406	FU IP CNSLT LTD 15 MIN VIA TELEHLTH	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0405	ECG RTN ECG W/12 LEADS I&R ONLY	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0404	ECG RTN ECG W/12 LEADS TRACING ONLY	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0403	ECG RTN ECG 12 LEADS 1ST PREV PE	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0402	INIT PREV PE LTD DUR 1ST 12 MOS MCR	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0400	HST TYPE IV PRTBLE MON MIN 3 CH	HCPCS - PROC/PROF SERVICES (TE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G0399	HST TYPE III PRTBLE MON MIN 4 CH	HCPCS - PROC/PROF SERVICES (TE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G0398	HST W/TYPE II PRTBLE MON MIN 7 CH	HCPCS - PROC/PROF SERVICES (TE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G0397	ALC &/SUB MISUSE ST ASMT&INT GT 30 M	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0396	ALC&/SUB MISUSE ST ASMT&INT 15-30 M	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0390	TRAUMA RESPONSE TEAM W/HOSP CC SERV	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0384	LEVEL 5 HOSP ED VISIT TYPE B ED;	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0383	LEVEL 4 HOSP ED VISIT TYPE B ED;	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0382	LEVEL 3 HOSP ED VISIT TYPE B ED;	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G0381	LEVEL 2 HOSP ED VISIT TYPE B ED;	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0380	LEVEL 1 HOSP ED VISIT TYPE B ED;	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0379	DIRECT ADMISSION PT HOSP OBS CARE	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0378	HOSPITAL OBSERVATN SERVICE PER HOUR	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0372	PHYS EST & DOC NEED PWR MOBIL DEVC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0343	LAPROT ISLET CELL TPLNT PV CATH&INF	HCPCS - PROC/PROF SERVICES (TE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G0342	LAP ISLET CELL TPLNT PV CATH&INFUS	HCPCS - PROC/PROF SERVICES (TE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G0341	PERQ ISLET CELL TPLNT PV CATH&INFUS	HCPCS - PROC/PROF SERVICES (TE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G0340	IMAGE GUID ROB SRS FRAC TX 2-5 SESS	HCPCS - PROC/PROF SERVICES (TE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G0339	IMAGE GUID ROBOT ACCL SRS TX 1 SESS	HCPCS - PROC/PROF SERVICES (TE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G0337	HOSPICE EVAL&CNSL SRVC PREELECTION	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0333	PHRM DISPN FEE INHL RX;1ST 30-DAY	HCPCS - PROC/PROF SERVICES (TE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G0329	EM TX ULCERS NOT HEALING 30 DA CARE	HCPCS - PROC/PROF SERVICES (TE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G0328	COLOREC CA SCR; FOB TST IMMUNO 1-3	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0306	CMPL CBC AUTO&AUTO WBC DIFF COUNT	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0305	POST-D/C PULM SURG SRVC AFTER LVRS	HCPCS - PROC/PROF SERVICES (TE	YES	12/01/2013	12/31/2078			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G0304	PRE-OP PULM SURG PREP LVRS 1-9 DA	HCPCS - PROC/PROF SERVICES (TE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G0303	PRE-OP PULM SURG PREP LVRS 10-15 DA	HCPCS - PROC/PROF SERVICES (TE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G0302	PRE-OP PULM SURG SRVC PREP LVRS CMP	HCPCS - PROC/PROF SERVICES (TE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G0300	DIR SNS LPN HH/HOSPCE SET EA 15 MIN	2004 Codeset	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	G0295	ELECMAGNET TX 1/GT AREA NOT G0329/OTH	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G0294	NONCOVR PROC NO ANES/LOC-MCR QUAL	HCPCS - PROC/PROF SERVICES (TE	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	G0293	NONCOVR SURG SEDAT ANES-MCR QUAL	HCPCS - PROC/PROF SERVICES (TE	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	G0289	SCPE KNEE REMV FB TM SURG DIFF COMP	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0288	RECON CT ANGIO AORTA PLAN VASC SURG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0283	E-STIM 1/GT NOT WND CARE PART TX PLAN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0282	E-STIM 1/GT AREAS WND CARE NOT G0281	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0281	E-STIM 1/GT CHRN STAGE III&IV ULCRS	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0279	DX DIGTL BRST TOMOSYNTHESIS UNI/BIL	HCPCS - PROC/PROF SERVICES (TE	NO	07/26/2017	07/26/2017			
MMAI-Medicare/Medicaid	G0278	ILIAC&/FEM ART ANGIO TIME CARD CATH	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0271	MED NUT TX REASSESS GRP EA 30 MIN	HCPCS - PROC/PROF SERVICES (TE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G0269	PLCMT OCCL DEVC POST SURG/INTRVNAL	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G0268	REMV IMP CERUMN SAME DATE FUNCT TST	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0259	INJECTION PROC SI JNT; ARTHROGRAPY	HCPCS - PROC/PROF SERVICES (TE	NO	07/17/2015	07/17/2015			
MMAI-Medicare/Medicaid	G0257	UNSCHD/EMRG DIALYS HOS OP NOT CERT	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0255	CPT/SNCT PER LIMB ANY NERVE	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0252	PET IMAG DX BREST CA&/SURG PLAN	HCPCS - PROC/PROF SERVICES (TE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G0250	PHYS REV INTEPR HOME INR MON; Q WK	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0249	PRVS TST MATL&EQUIP HM INR MON;Q WK	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0248	DEMONSTRATION HOME INR MONITOR	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0247	ROUTINE FT CARE PHYS DIAB PT W/LOPS	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0246	F/U EVAL DIABETIC PT W/LOPS	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0245	INIT PHYS E&M DIABETIC PT W/LOPS	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0239	TX PROC IMPRV RESP FUNCT 2/GT IND	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0238	TX PROC IMPRV RESP NOT G0237 15 MIN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0237	MUSCLES FACE FACE 1 ON 1 EA 15 MIN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0235	PET IMAGING ANY SITE NOS	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G0219	PET BDY; MELANOMA NON-COVR INDICAT	HCPCS - PROC/PROF SERVICES (TE	YES	12/01/2013	12/31/2078			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G0186	DESTRUC LES CHOROID; PHOTOCOAG FEDR	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0182	PHYS SUPV PT UND MCR-APPRVD HOSPICE	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0176	ACTV TX PTS DISABL MENTL HLTH-SESS	HCPCS - PROC/PROF SERVICES (TE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G0175	SCHED INTRDISCIPLN TEAM CONF PT PRS	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0168	WOUND CLOS UTIL TISSUE ADHES ONLY	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0166	EXT COUNTERPULSATION-TX SESSION	HCPCS - PROC/PROF SERVICES (TE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G0162	SKILLED SRVC RN M&E POC; EA 15 MINS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	G0161	SRVC SLP HH EST/DEL SLP TX MP 15 MN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	G0160	SRVC OT HH EST/DEL OT MP EA 15 MIN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	G0159	SRVC PT HH EST/DEL PT MP EA 15 MINS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	G0158	SRVC OT ASSIST HH/HOSPICE EA 15 MIN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	G0157	SRVC PT ASSIST HH/HOSPICE EA 15 MIN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	G0156	SRVC HH/HOSPICE AIDE EA 15 MIN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	G0155	SRVC CLINICAL SW HH/HOSPICE EA 15	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G0153	SRVC SPCH&LANG PATH HH/HOSPIC EA 15	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	G0152	SRVC OT HOM HLTH/HOSPICE EA 15 MIN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019	Regulatory Compliance		

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MMAI-Medicare/Medicaid	G0151	SRVC PT HOM HLTH/HOSPICE EA 15 MIN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	G0148	SCR SMEARS CERV/VAG MNL RESCR	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0147	SCR SMEARS CERV/VAG AUTO UND PHYS	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0145	SCR CERV/VAG AUTO&MNL RSCR PHYS	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0144	SCR CERV/VAG SCR AUTO UND PHYS	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0143	SCR CERV/VAG MNL SCR/RSCR UND PHYS	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0141	SCR CERV/VAG MNL RSCR PHYS INTERP	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0130	SEXA BN DNSITY STDY 1/GT ; APPNDICULR	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0128	DIR SKLED SERV RN OP REHAB EA 10MIN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0127	TRIM DYSTROPHIC NAILS ANY NUMBER	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0124	SCR CERV/VAG THIN LAY PHYS INTERP	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0123	SCR CERV/VAG THIN LAY W/PHYS SUP	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0121	COLOREC CNCR SCR;COLNSCPY NO HI RSK	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0118	GLAUC SCR HI RISK UND DIR SUP DR	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	G0117	GLAUC SCR HI RISK BY OPT/OPHTHLGIST	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	G0109	DM SLF-MGMT TRN SRVC GRP-30 MIN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G0108	DM OP SLF-MGMT TRN SRVC IND-30 MIN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0105	COLOREC CANCR SCR; COLNSCPY HI RISK	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0104	COLOREC CANCER SCREENING; FLEXSIG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0102	PROS CANCER SCR; DIGTL RECTAL EXAM	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0101	CERV/VAG CANCR SCR;PELV&CLN BRST EX	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0087	COMP CARE MGMT HOME CARE PLAN OVER	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	G0086	LMTD CARE MGMT HOME CARE PLAN OVER	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	G0085	EXTENSIVE CARE MGM HOME VST EXST PT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	G0084	COMP CARE MGMT HOME VISIT EXIST PT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	G0083	MODERATE CARE MGMT HOME VST EXST PT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	G0082	LIMITED CARE MGMT HOME VST EXIST PT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	G0081	BRIEF CARE MGM HOME VISIT EXIST PT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	G0080	EXTENSIVE CARE MGMT HOME VST NEW PT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	G0079	COMP CARE MGMT HOME VISIT NEW PT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	G0078	MODERATE CARE MGMT HOME VST NEW PT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	G0077	LIMITED CARE MGM HOME VISIT NEW PT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G0076	BRIEF CARE MGMT HOME VISIT NEW PT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	G0071	PMT CMNCT TECH-B SRVC;RHC/FQHC ONLY	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	G0070	PROF SRVC ADM CHEMO ADM CD H E 15 M	HCPCS - PROC/PROF SERVICES (TE	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	G0069	PROF SRVC ADM SQ IMT ADM CD H E 15M	HCPCS - PROC/PROF SERVICES (TE	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	G0068	PS ADM ANTI-INF PM ADM CD H E 15M	HCPCS - PROC/PROF SERVICES (TE	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	G0010	ADMINISTRATION HEPATITIS B VACCINE	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0009	ADMINISTRATION PNEUMOCOCCAL VACC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0008	ADMINISTRATION INFLUENZA VIRUS VACC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E8001	GAIT TRAINER PED SZ UPRIGHT SUPP	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E8000	GAIT TRAINER PED SZ POST SUPP	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2633	WC ACSS ADD MOBIL ARM SUPP SUPINATR	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2632	WC ADD MOBL SUP OFFSET/LAT RCKR ARM	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2631	WC ADD MOBIL ARM SUPP ELEV PROX ARM	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2630	WC SHLDR ELB M SUP MONOSUSP ARM HND	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2629	WC SHLDR ELB M SUPP FRICTN ARM SUPP	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2628	WC SHLDR ELB MOBIL SUPP RECLINING	HCPCS - DME	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	E2627	WC SHLDR ELB M SUPP ADJUSTBL RANCHO	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2626	WC SHLDR ELB MOBL ARM SUPP ADJUSTBL	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2625	SKIN PROTCT&POSITION WC CUSH W 22/GT	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2624	SKIN PROTCT&POSITION WC CUSH WD LT 22	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2623	SKIN PROTECT WC CUSH WIDTH 22 IN/GT	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2622	SKIN PROTECT WC CUSH WIDTH LT 22 IN	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2621	PSTN WC BACK CUSHN PLANAR WD 22IN/GT	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2620	PSTN WC BACK CUSHN PLANAR WD LT 22 IN	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2619	REPL COVER WC SEAT/BACK CUSHN EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2617	CSTM FAB WC BACK CUSHION ANY SIZE	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2616	PSTN WC BACK CUSH POSTLAT WD 22IN/GT	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2615	PSTN WC BACK CUSHN POSTLAT WDLT 22 IN	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2614	PSTN WC BACK CUSHN POST WD 22 IN/GT	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2613	PSTN WC BACK CUSHN POST WDTH LT 22 IN	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2612	GEN WC BACK CUSHN WIDTH 22 IN/GT HT	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2611	GEN WC BACK CUSHN WIDTH LT 22 IN HT	HCPCS - DME	YES	12/01/2013	12/31/2078			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	E2609	CUSTOM FAB WHLCHAIR SEAT CUSHN SIZE	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2608	SKN PROTCT&PSTN WC SEAT WDTH 22IN/GT	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2607	SKN PROTCT&PSTN WC SEAT WDTH LT 22IN	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2605	PSTN WC SEAT CUSHN WIDTH LT 22 DEPTH	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2604	SKN PROTECT WC SEAT WDTH 22 IN/GT	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2603	SKN PROTCT WC SEAT WDTHLT 22IN DPTH	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2602	GEN WC SEAT CSHN WDTH 22 IN/GT DPTH	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2601	GEN WC SEAT CUSHN WIDTH LT 22 DEPTH	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2599	ACCESS SPEECH GENERATING DEVICE NOC	HCPCS - DME	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	E2512	ACSS SPCH GEN DEVICE MOUNTING SYS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2511	SPEECH GENERATING SOFTWARE PROGRAM	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2510	SPCH GEN DVC SYNTHSIZD MX METH MESS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2508	SPCH GEN DEVC SYNTHSIZD REQ MESS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2506	SPCH GEN DEVC DIGTIZDGT 40 MINS REC	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2504	SPCH GEN DEVC DGTZDGT 20LT /EQU 40 MIN REC	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2502	SPCH GEN DEVC DGTZDGT 8LT EQU 20 MINS REC	HCPCS - DME	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	E2500	SPEECH GEN DEV DIGTIZDLT /EQU 8 MINS REC	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2402	NEG PRSS WND TX PUMP STATN/PRTBL	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2397	POWER WC LITHIUM BASED BATTERY EACH	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2396	PWR WC CASTER FORK REPL ONLY EACH	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2395	PWR WC CASTER WHEEL EXCL TIRE REPL	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2394	PWR WC DRIVE WHEEL EXCL TIRE REPL	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2392	PWR WC S CASTR TIRE INTEGRT REPL EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2391	PWR WC SOLID CASTER TIRE REPL EACH	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2388	PWR WC FOAM WHEEL TIRE REPL ONLY EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2387	PWR WC FOAM FILL CASTR TIRE REPL EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2386	PWR WC FOAM FILL WHEEL TIRE REPL EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2385	PWR WC TUBE CASTER TIRE REPL EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2384	PWR WC PNEUMATIC CASTR TIRE REPL EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2383	PWR WC INSERT WHEEL TIRE REPL EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2382	PWR WC TUBE WHEEL TIRE REPL EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2377	PWR WC EXPANDBL CONTROLLER UPGRADE	HCPCS - DME	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	E2376	PWR WC EXPANDABLE CONTROLLER REPL	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2374	PWR WC STANDRD REMOTE JOYSTICK REPL	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2372	PWR WC GRP 27 NONSEAL LED ACID BATT	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2371	PWR WC GRP 27 SEALED LEAD ACID BATT	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2370	P WC CMP INT DR WHL MTR&GB CMB RPL	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2369	PWR WC CMPNNT DR WHL GR BX RPL ONLY	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2368	PWR WC CMPNT DR WHEEL MTR REPL ONLY	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2367	PWR WC ACSS BATTRY CHARGER DUL MODE	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2366	PWR WC ACSS BATTRY CHARGER 1 MODE	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2365	PWR WC ACSS U-1 SEALED BATTRY	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2364	PWR WC ACSS U-1 NON-SEALED BATTRY	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2363	PWR WC ACSS GRP 24 SEALED BATTRY	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2362	PWR WC ACSS GRP 24 NON-SEALED BATT	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2361	PWR WC ACSS 22NF SEALED LEAD BATTRY	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2360	PWR WC ACSS 22 NF NON-SEALED BATTRY	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2359	PWR WC GRP 34 SEALED LA BATT EA	HCPCS - DME	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	E2358	PWR WC GRP 34 NONSEALED LA BATT EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2351	PWR WC ACSS ELEC OP SPCH GEN DEVC	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2343	PWR WC NONSTD SEAT DEPTH 22-25 IN	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2342	PWR WC NONSTD SEAT DEPTH 20/21 IN	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2341	PWR WC ACSS NONSTD SEAT W 24-27 IN	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2340	POWER WC NONSTAND SEAT WD 20-23 IN	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2331	PWR WC ACSS ATDANT CNTRL PROPRTNAL	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2330	PWR WC ACCSS PROX SWTCH NOPROPRTNL	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2329	PWR WC ACSS CNTC SWTCH NOPRPRTNL	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2328	PWR WC ACSS HEAD/EXT ELEC PRPRTNL	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2327	PWR WC ACSS HEAD CNTRL MECH PRPRTNL	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2326	PWR WC ACSS BREATH TUBE KIT SIP&PUF	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2325	PWR WC ACSS SIP&PUFF NONPRPRTNAL	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2324	PWR WC ACSS CHIN CUP CHIN CNTRL INT	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2323	PWR WC ACSS SPCLTY JOYSTCK HND PRFB	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2322	PWR WC ACSS MX MECH SWTCH NOPRPRTNL	HCPCS - DME	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	E2321	PWR WC ACSS HND CNTRL NO PRPRTNL	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2313	POWER AC HARNESS UPGRD EXP CONTRLLR	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2312	POWER WC HAND/CHIN CONTRL INTERFACE	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2301	WHEELCHAIR ACC PWR STND SYS ANY TYP	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2295	MNL WC ACCESS PED SIZE WC SEAT FRME	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2294	SEAT CONTRD PED WC ATTCH HARDWARE	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2293	BACK CONTRD PED WC ATTCH HARDWARE	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2292	SEAT PLANR PED WC FIX ATTCH HARDWRE	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2291	BACK PLANR PED WC FIX ATTCH HARDWRE	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2231	MNL WC ACCESS SOLID SEAT SUPP BASE	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2230	MNL WHEELCHAIR ACCESS MNL STAND SYS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2228	MNL WC WHL BRAKE SYS&LOCK COMPL EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2227	MNL WC GEAR RED DRIVE WHEEL EACH	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2226	MNL WC ACSS CASTR FORK REPL ONLY	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2225	MNL WC CASTR WHL EXCLD TIRE REPL	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2224	MNL WC AC P WHL EXCL T SZ RPL ONL E	HCPCS - DME	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	E2222	MNL WC AC SLD C TIRE I WHL SZ RPL E	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2219	MNL WC ACSS FOAM CASTER TIRE ANY SZ	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2218	MNL WC ACCSS FOAM PROPULSION TIRE	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2215	MNL WC ACSS TUBE PNEUMAT CASTR TIRE	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2214	MNL WC ACCESS PNEUMAT CASTER TIRE	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2213	MNL WC INSRT PNEUMAT PROPULSN TIRE	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2211	MNL WC ACESS PNEUMAT PROPULSN TIRE	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2210	WC ACESS BEARINGS ANY TYPE REPL EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2209	ARM TROUGH W/WO HAND SUPPORT EACH	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2208	WHEELCHAIR ACCESS CYL TANK CARR EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2207	WHLCHAIR ACCESS CRUTCH&CANE HLDR EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2206	MANL WC AC WL ASM CMPL REPL ONLY EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2205	MNL WC HANDRIM W/O PROJ REPL EACH	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2204	MNL WC ACSS SEAT DEPTH 22-25 IN	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2203	MNL WC ACSS SEAT DEPTH 20 LT 11 IN	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2202	MNL WC ACSS SEAT WIDTH 24-27 IN	HCPCS - DME	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	E2201	MNL WC ACSS SEAT WDTH GT /EQU 20 IN &LT 24	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E2120	PULSE GEN SYS TYMPANIC TX INNR EAR	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E2101	BLD GLU MON INTGRT LANCING/BLD SAMP	HCPCS - DME	YES	02/15/2018	12/31/2078	Regulatory Compliance	The requested benefit is covered through our Pharmacy Benefit; the requested item can be filled at one of our network pharmacies. Please validate coverage rules through the online search tool located on our website at www.aetnabetterhealth.com/illinois/pharmacy	
MMAI-Medicare/Medicaid	E2100	BLD GLU MON INTEGRT VOICE SYNTHESZR	HCPCS - DME	YES	10/01/2016	12/31/2078		The requested benefit is covered through our Pharmacy Benefit; the requested item can be filled at one of our network pharmacies. Please validate coverage rules through the online search tool located on our website at www.aetnabetterhealth.com/illinois/pharmacy	
MMAI-Medicare/Medicaid	E2000	GASTR SUCTN PUMP HOME MODEL ELEC	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E1902	CMNCT BD NON-ELEC AUG/ALTERNTV DEVC	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1841	STATIC PROGRS STRETCH SHOULDER DEVC	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1840	DYN ADJUST SHLDR FLX/ABDUCT/ROT DVC	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1831	STATIC PROGRESSIVE STRETCH TOE DEVC	HCPCS - DME	YES	02/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	E1821	REPL SFT INTERFCE MATL/CUFF BI-DIR	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1820	REPL SFT INTERFCE MATL DYN EXT/FLX	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1818	STATIC PROGRSV STRETCH FOREARM DEVC	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1816	STATIC PROGRESSV STRETCH ANKLE DEVC	HCPCS - DME	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	E1812	DYN KNEE EXT/FLEX DEVC RESIST CNTRL	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1811	STATIC PROGRESSV STRETCH KNEE DEVC	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1806	STATIC PROGRESSV STRETCH WRIST DEVC	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1802	DYN ADJUSTBL FORARM PRON/SUPIN DEVC	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1702	REPL MSR SCLS JAW MOT REHAB SYS 200	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1701	REPL CUSHNS JAW MOT REHAB SYS PKG 6	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1699	DIALYSIS EQUIPMENT NOS	HCPCS - DME	NO	09/01/2017	09/01/2017		Submit claims with medical records	
MMAI-Medicare/Medicaid	E1636	SORBENT CARTRIDGES HEMODIAL PER 10	HCPCS - DME	NON-COV	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	E1630	RECIPROCAT PERITON DIALYSIS SYSTEM	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1625	WATER SOFTENING SYSTEM HEMODIALYSIS	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1620	BLOOD PUMP HEMODIALYSIS REPLACEMENT	HCPCS - DME	NON-COV	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	E1615	DEIONIZER H2O PURIF SYS HEMODIAL	HCPCS - DME	NON-COV	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	E1610	RVRS OSMOSIS H2O PURIF SYS HEMODIAL	HCPCS - DME	NON-COV	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	E1600	DEL &OR INSTL CHARGES HEMODIAL EQP	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1594	CYCLR DIALYSIS MACH PERITON DIALYS	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1592	AUTO INTERMIT PERITON DIALYSIS SYS	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	E1580	UNIPUNCTURE CONTROL SYSTEM HEMODIAL	HCPCS - DME	NON-COV	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	E1575	TRNSDUCR PRTCTR/BARR HEMODIAL SZ-10	HCPCS - DME	NON-COV	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	E1560	BLD LEAK DETECTOR HEMODIAL EA REPL	HCPCS - DME	NON-COV	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	E1550	BATH CONDUCTIVITY METER HEMODIAL EA	HCPCS - DME	NON-COV	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	E1540	PRESSURE ALARM HEMODIAL EA REPL	HCPCS - DME	NON-COV	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	E1530	AIR BUBBLE DETECTR HEMODIAL EA REPL	HCPCS - DME	NON-COV	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	E1520	HEPARIN INFUSION PUMP HEMODIALYSIS	HCPCS - DME	NON-COV	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	E1510	KIDNEY DIALYSAT DEL SYS KIDNEY MACH	HCPCS - DME	NON-COV	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	E1406	O2&WATR VAPR ENRCH SYS NO HEAT DEL	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E1405	O2&WATR VAPR ENRICH SYS W/HEAT DEL	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E1399	DME MISCELLANEOUS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1372	IMMERSION EXTERNAL HEATER NEBULIZER	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E1358	O2 ACCESS DC POWER ADAPTER REPL EA	HCPCS - DME	NON-COV	05/22/2019	05/22/2019			
MMAI-Medicare/Medicaid	E1357	O2 ACCESS BATTRY CHARGER REPL EA	HCPCS - DME	NON-COV	05/22/2019	05/22/2019			
MMAI-Medicare/Medicaid	E1356	O2 ACCESS BTTRY PACK/CRTRDGE REPL	HCPCS - DME	NON-COV	05/22/2019	05/22/2019			
MMAI-Medicare/Medicaid	E1354	O2 ACCESS CART PRTBLE CYL/CONC REPL	HCPCS - DME	NON-COV	05/22/2019	05/22/2019			

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MMAI-Medicare/Medicaid	E1352	OXYGEN ACC FLW REG CPBL POS INSP PR	HCPCS - DME	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	E1298	SPCL WHLCHAIR SEAT DPTH&/WDTH CNSTR	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1296	SPECIAL WHEELCHAIR SEAT HT FROM FLR	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1295	HEVY-DUTY WHLCHAIR; FIX ARMS LEGRST	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1290	HEVY-DUTY WHLCHR; DTACH ARM FOOTRST	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1285	HEVY-DUTY WHLCHR;FIX ARM DTACH FOOT	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1280	HEVY-DUTY WHLCHR; DTACH ARMS LEGRST	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1270	LGHTWT WHLCHR; FIX ARM DTACH LEGRST	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1260	LGHTWT WHLCHAIR; DTACH ARMS FOOTRST	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1250	LGHTWT WHLCHR;FIX ARM DTACH FOOTRST	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1238	WC PED SZ FOLD ADJUSTBL NO SEAT SYS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1237	WC PED SZ RIGD ADJUSTBL NO SEAT SYS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1236	WC PED SZ FOLD ADJUSTBL W/SEAT SYS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1235	WC PED SZ RIGD ADJUSTBL W/SEAT SYS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1234	WC PED SZ TILT-IN-SPCE FOLD NO SEAT	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1233	WC PED SZ TILT-IN-SPCE RIGD NO SEAT	HCPCS - DME	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	E1232	WC PED SZ TILT-IN-SPACE FOLD W/SEAT	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1231	WC PED SZ TILT-IN-SPACE RIGD W/SEAT	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1230	PWR OP VEH SPEC BRAND&MODEL NUMBER	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1226	WC ACCESS MNL FULL RECLIN BACK EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1225	WC ACCESS MNL SEMIRECLINING BACK EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1224	WHLCHAIR W/DTACHBL ARMS ELEV LEGRST	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1223	WHLCHAIR W/DETACHBLE ARMS FOOTRESTS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1220	WHEELCHAIR; SPCL SIZED/CONSTRUCTED	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1200	AMP WHLCHAIR; FIX ARM DTACH FOOTRST	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1195	HVY DUT WHLCHR;FIX ARM DTACH LEGRST	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1190	AMP WHLCHAIR; DTACHBL ARMS LEGRESTS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1180	AMP WHLCHAIR; DTACHBL ARMS FOOTRSTS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1172	AMP WHLCHR;DTACH ARM NO FOOT/LEGRST	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1171	AMP WHLCHAIR;FIX ARM NO FOOT/LEGRST	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1170	AMP WHLCHAIR; FIX ARM DTACH LEGREST	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1161	MANUAL ADLT SZ WC INCL TILT SPACE	HCPCS - DME	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	E1150	WHLCHAIR; DTACHBLE ARMS LEGRESTS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1140	WHLCHAIR; DTACHBLE ARMS FOOTRESTS	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1110	SEMI-RECLN WHLCHR; DTACH ARM LEGRST	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1093	WIDE HEVY-DUT WHLCHR;DTACH ARM FOOT	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1092	WIDE HEVY-DUT WHLCHR; DTACH ARM LEG	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1090	HI-STRGTH WHLCHAR;DTACH ARM FOOTRST	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1089	HI-STRGTH WHLCHAIR; FIX ARM FOOTRST	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1088	HI-STRGTH WHLCHAIR;DTACH ARM LEGRST	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1087	HI-STRGTH WHLCHAIR; FIX ARMS LEGRST	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1086	HEMI-WHLCHAIR; DTACHBL ARMS FOOTRST	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1085	HEMI-WHLCHAIR;FIX ARM DTACH FOOTRST	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1084	HEMI-WHLCHAIR; DTACHBLE ARMS LEGRST	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1083	HEMI-W/C; FIXED ARM DETACH LEGREST	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1070	FULL RECLN WHLCHR;DTACH ARM FOOTRST	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1060	FULL RECLN WHLCHAR;DTACH ARM LEGRST	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1050	FULL RECLINE WC FIX ARM DETACH LEGS	HCPCS - DME	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	E1039	TRNSPRT CHAIR ADLT PT WT CAPGT 300 LB	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1038	TRNSPRT CHAIR PT WT CAP TO&EQU 300 LB	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1036	MX-PSTN PT TRNSF SYS PT GT 300 LBS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1031	ROLLABOUT CHAIR W/CASTRS 5 IN/GT	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1030	WHLCHAIR ACCESS VENT TRAY GIMBALED	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1029	WHEELCHAIR ACCESS VENT TRAY FIX	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1028	WC ACCSS MANL SWINGAWAY OTH CNTRL	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1020	RES LIMB SUP SYS WHEELCHAIR ANY TYP	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1018	HEAVY DUTY SHOCK ABSORBR PWR WC EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1017	HEAVY DUTY SHOCK ABSORBR MNL WC EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1016	SHOCK ABSORBER POWER WHEELCHAIR EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1015	SHOCK ABSORBER MANUAL WHEELCHAIR EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1014	RECLIN BACK ADD PED SIZE WHLCHAIR	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1011	MOD PED SIZE WC WIDTH ADJ PACKAGE	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1010	WC ACCSS PWR LEG ELEV SYS PAIR	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1009	WC ACCSS MECH LINKD LEG ELEV EA	HCPCS - DME	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	E1008	WC ACSS TILT&RECLINE PWR SHEAR RDUC	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1007	WC ACSS TILT&RECLIN MECH SHEAR RDUC	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1006	WC ACSS TILT&RECLINE NO SHEAR RDUC	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1005	WC ACSS RECLINE W/PWR SHEAR RDUC	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1004	WC ACSS RECLINE W/MECH SHEAR RDUC	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1003	WC ACSS RECLINE ONLY NO SHEAR RDUC	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1002	WC ACSS PWR SEATING SYS TILT ONLY	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0995	WC AC CALF REST/PAD REPL ONLY EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0992	MNL WHLCHAIR ACCSS SOLID SEAT INSRT	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0990	WC ACCSS ELEV LEG REST CMPL ASSMBL	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0988	MNL WC ACSS LEVR-ACT WHL DRIVE PAIR	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0986	MNL WC ACSS PSH-RM ACT PWR ASST SYS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0985	WHEELCHAIR ACCESS SEAT LIFT MECH	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0981	WC ACSS SEAT UPHLSTER REPL ONLY EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0978	WC ACSS PSTN/SFTY BELT/PELV STRP EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0974	MNL WC ACCESS ANTI-ROLLBACK DEVC EA	HCPCS - DME	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	E0973	WC ACCSS ADJ HT DTACH ARMRST EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0971	MNL WC ACSS ANTI-TIPPING DEVC EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0970	NO 2 FOOTPLATES EXCEPT ELEV LEGREST	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0967	MNL WC AC HND RIM PROJ REPL ONL EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0966	MNL WC ACCESS HEADREST EXTENSION EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0961	MNL WC ACCESS WHL LOCK BRAKE EXT EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0960	WC ACSS SHLDR HRNSS/STRAPS/CHST STR	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0958	MNL WC ACCESS 1-ARM DRIVE ATTCH EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0957	WC ACSS MED THI SUPP HARDWARE EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0956	WC ACSS LAT TRNK/HIP HARDWARE EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0955	WC ACSS HEADREST CUSHND HARDWARE EA	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0951	HEEL LOOP/HOLDER ANY TYPE EACH	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0948	FX FRAME ATTCH CMPLX CERV TRAC	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0947	FX FRAME ATTCH CMPLX PELV TRAC	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0946	FX FRAM DUAL CROSS BARS ATTACH BED	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0941	GRAVITY ASSTD TRAC DEVICE ANY TYPE	HCPCS - DME	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	E0940	TRAPEZ BAR FREESTND CMPL W/GRAB BAR	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0936	CONT PASS MOTION EXER DEVC NOT KNEE	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0935	CONT PSV MOT EXER DEVC KNEE ONLY	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0930	FX FRAME FREESTANDING INCL WEIGHTS	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0920	FX FRAME ATTCH BED INCL WEIGHTS	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0912	TRAPEZ BAR PT WT GT 250 LBS FREE STND	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0911	TRAPEZ BAR PT WT GT 250 LBS BED GRAB	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0910	TRAPEZ BAR PT HLPR ATTCH BED W/GRAB	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0900	TRACT STAND FREESTAND PELV TRACT	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0890	TRAC FRAME ATTCH FOOTBRD PELV TRAC	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0880	TRACTION STAND FS EXTREMITY TRACTN	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0870	TRACT FRAME FOOTBOARD EXTREM TRACT	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0860	TRACTION EQUIPMENT OVERDOOR CERV	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0856	CERVICAL TRAC DEVC INFL AIR BLADDER	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0855	CERV TRACT EQUIP NOT RQR ADD STAND	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0850	TRACT STAND FREESTAND CERV TRACT	HCPCS - DME	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	E0849	TRAC EQP CERV FREESTND FRME PNEUMAT	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0840	TRACTION FRAME HEADBOARD CERV TRACT	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0830	AMB TRACTION DEVICE ALL TYPES EACH	HCPCS - DME	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0791	PAR INFUS PUMP STAT SINGLE/MXCHANEL	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0784	EXTERNAL AMB INFUSION PUMP INSULIN	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0781	AMB INFUS PUMP 1/MX CHANNL W/ADMIN	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0780	AMB INFUS PUMP MECH INFUS LT 8 HR	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0779	AMB INFUS PUMP MECH INFUS 8 HR/GT	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0770	FES TRANSQ STIM NERV&/MUSC CMPL NOS	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0769	ESTIM/ELECMAGNET WOUND TX DEVC NOC	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0766	ELEC STM DVC CA TX ALL ACC ANY TYPE	HCPCS - DME	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	E0765	FDA APPRVD NRV STIM TX NAUSA&VOMIT	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0764	FUNC NEUROMUSC STIM CMPT SC INJ	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0762	TRANSCUT ELEC JOINT STIM DEVC SYS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0761	NON-THRML PULS RADIOWAVE ELECMAGNET	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0760	OSTOGNS STIM LW INTENS US NONINVASV	HCPCS - DME	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	E0755	ELEC SALIVARY REFLEX STIMULATOR	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0749	OSTOGNS STIM ELEC SURGICALLY IMPL	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0748	OSTOGNS STIM NONINVASV SP APPLIC	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0747	OSTOGNS STIM NONINVASV NOT SP APPLC	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0745	NEUROMUSC STIM ELEC SHOCK UNIT	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0744	NEUROMUSCULAR STIMULATOR SCOLIOSIS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0740	N-IMPL PELV FLR ELEC STIM CMPL SYS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0731	FORM FIT CONDUCT GARM TENS/NMES	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0730	TENS DEVICE 4/GT LEADS MX NERVE STIM	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0720	TENS DEVICE 2 LEAD LOCALIZED STIM	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0705	TRANSFER DEVICE ANY TYPE EACH	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0700	SAFETY EQP DEVICE/ACCESSRY ANY TYPE	HCPCS - DME	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0694	UV MX DIR LT TX SYS 6 FT CABINET	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0693	UV LT TX SYS PANL W/LAMP 6 FT PANEL	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0692	UV LT TX SYS PANL W/LAMP 4 FT PANEL	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0691	UV LIGHT TX BULB/LAMP; TX 2 SQ FT/LT	HCPCS - DME	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	E0676	INTERMITT LIMB COMPRESSION DEVC NOS	HCPCS - DME	NO	09/01/2017	09/01/2017		Submit claims with medical records	
MMAI-Medicare/Medicaid	E0675	PNEUMAT COMPRS DEVC HI PRESS RAPID	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0673	SEG GRAD PRSS PNUMAT APPLNC HLF LEG	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0672	SEG GRAD PRSS PNUMAT APPLNC FUL ARM	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0671	SEG GRAD PRSS PNUMAT APPLNC FUL LEG	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0669	SEG PNEUMAT APPLINC COMPRS HALF LEG	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0668	SEG PNEUMAT APPLINC COMPRS FULL ARM	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0667	SEG PNEUMAT APPLINC COMPRS FULL LEG	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0666	NONSEG PNEUMAT APPLINC HALF LEG	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0665	NONSEG PNEUMAT APPLINC FULL ARM	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0657	SEG PNEUMAT APPLINC W/COMPRS CHEST	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0655	NONSEG PNEUMAT APPLINC HALF ARM	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0652	PNEUMAT COMPRS W/CALBRT GRADNT PRSS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0651	PNEUMAT COMPRS NO CALBRT GRDNT PRSS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0650	PNEUMAT COMPRS NONSEG HOME MODEL	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0641	STAND FRAME/TABLE SYS MX-POS ANY SZ	HCPCS - DME	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	E0640	PT LIFT FIX SYS ALL CMPNTS/ACCESS	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0639	PT LIFT MOVEABLE DISASSMBL&REASSMBL	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0638	STAND FRAME/TABLE SYS 1 POS ANY SZ	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0637	COMB SIT STAND FRAME/TABLE SEATLIFT	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0636	MX PSTN PT SUPP SYS LIFT PT CNTRL	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0635	PATIENT LIFT ELECTRIC W/SEAT/SLING	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0630	PATIENT LIFT HYRAULIC/MECH	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0629	SEAT LIFT MECH NON-ELECTRIC ANY TYP	HCPCS - DME	YES	04/05/2016	12/31/2078			
MMAI-Medicare/Medicaid	E0627	SEAT LIFT MECH COMB LIFT-CHAIR MECH	HCPCS - DME	YES	04/05/2016	12/31/2078			
MMAI-Medicare/Medicaid	E0621	SLING/SEAT PT LIFT CANVAS/NYLON	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0620	SKN PIERC DEVC CLCT CAPLRY BLD LASR	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0619	APNEA MONITOR W/RECORDING FEATURE	HCPCS - DME	YES	02/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	E0618	APNEA MONITOR W/O RECORDING FEATURE	HCPCS - DME	YES	02/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	E0617	EXT DEFIB W/INTEGRATED ECG ANALY	HCPCS - DME	YES	02/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	E0616	IMPL CARD EVNT REC MEM ACTVTR&PRGMR	HCPCS - DME	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0615	PACEMKR MON CHCK BATTRY DIGTL/VISBL	HCPCS - DME	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	E0610	PACEMKR MON CHCK BATTRY AUDBL&VISBL	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0604	BREAST PUMP HEVY DUTY HOSP GRADE	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0603	BREAST PUMP ELECTRIC ANY TYPE	HCPCS - DME	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	E0600	RESP SUCTN PUMP HOME MODEL ELEC	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0585	NEBULIZER W/COMPRESSOR AND HEATER	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0580	NEBULIZR GLASS/AUTOCLVBL PLST BOTTL	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0574	US/ELEC AROSL GEN W/SM VOLUME NEB	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0572	AROSL COMPRS ADJSTBL PRSS INTERMIT	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0565	COMPRS AIR PWR EQP NOT SLF-CONTAIND	HCPCS - DME	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	E0562	HUMDIFIR HEAT USED W/POS ARWAY PRSS	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0561	HUMDIFIR NON-HEAT USED W/POS AIRWAY	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0560	HUMDIFIR SUPLMNTL DUR IPPB TX/O2	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0555	HUMDIFR GLASS/AUTOCLVBL PLSTC BOTTL	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0550	HUMDIFR EXT SUPLMNTL DUR IPPB TX/O2	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0500	IPPB MACH BUILT-IN NEBULZ;VALVS;PWR	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0487	SPIROMETER ELECTRONIC INCL ACCESS	HCPCS - DME	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	E0486	ORL DEVC/APPL RDUC UA COLLAPS CSTM	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0485	ORL DEVC/APPL RDUC UA COLLAPS PRFAB	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0484	OSCILLAT POS EXPIRTORY PRSS NO-ELEC	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0482	COUGH STIM DEVC ALTRNAT POS&NEG	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0481	INTRAPULM PERCUSS VENT SYS&REL ACSS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0467	HOME VENTILATOR MULTI-FUNC RESP DVC	HCPCS - DME	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	E0462	ROCKING BED W/WO SIDE RAILS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0455	O2 TENT EXCLD CROUP/PEDIATRIC TENTS	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0447	P O C L 1M SPLEQU 1U PRSC R/N XCD 4LPM	HCPCS - DME	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	E0446	TOPICAL OXYGEN DELIVERY SYSTEM NOS	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0445	OXIMETER MSR BLD O2 LEVL NON-INVASV	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0443	PORTBL O2 CONTENT GAS 1 MO SPLEQU 1 U	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0442	STATIONARY 02 CONT LQD 1 MO SPLEQU 1 U	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0441	STATIONARY O2 CONT GAS 1 MO SPLEQU 1 U	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0440	STATION LIQUID O2 SYS PURCHASE;	HCPCS - DME	NON-COV	02/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	E0439	STATION LIQUID O2 SYS RENTAL;	HCPCS - DME	YES	02/15/2018	12/31/2078			

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MMAI-Medicare/Medicaid	E0435	PRTBLE LIQUID O2 SYS PURCHASE;	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0433	PORTBL LIQ O2 SYS RENT; HOME LIQUIF	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0430	PRTBLE GASEOUS O2 SYS PURCHASE;	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0425	STATION COMPRS GAS SYS PURCHASE;	HCPCS - DME	YES	02/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	E0373	NONPWR ADVD PRESS REDUCING MATTRSS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0372	PWR AIR OVRLAY MATTRSS STD LEN&WDTH	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0371	NONPWR PRSS RDUC OVRLAY MATTRSS STD	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0352	DISPBL PACK W/ELEC BOWEL IRRIG/EVAC	HCPCS - DME	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0350	CNTRL U ELEC BOWEL IRRIG/EVAC SYS	HCPCS - DME	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0329	HOSP BED PED ELECTRIC INCL MATTRESS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0328	HOSP BED PED MANUAL INCL MATTRESS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0326	URINAL; FE JUG-TYPE ANY MATERIAL	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0315	BED ACCESS: BOARD/TABL/SUPPRT DEVC	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0304	HOS BED XTRA HD WT CAPGT 600 MTTRSS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0303	HOS BED HEVY DUTY WT CAP GT 350LT EQU 600	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0302	HOS BED WT CAPGT 600 W/O MATTRESS	HCPCS - DME	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	E0301	HOS BED HEVY DUTY W/WT CAP GT 350 PDS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0300	PED CRIB HOS GRADE ENC W/WO TOP ENC	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0297	HOS BED TOT ELEC W/O RAIL/MATTRSS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0296	HOS BED TOT ELEC W/O RAIL W/MATTRSS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0295	HOS BED SEMI-ELEC W/O RAIL/MATTRSS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0294	HOS BED SEMI-ELEC NO RAIL W/MATTRSS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0293	HOS BED VARIBL HT W/O RAIL/MATTRSS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0292	HOS BED VARIBL HT NO RAIL W/MATTRSS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0291	HOS BED FIX HT W/O RAIL W/O MATTRSS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0290	HOS BED FIX HT W/O RAIL W/MATTRSS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0277	POWER PRESSURE-REDUCING AIR MATTRSS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0270	HOSP BED INST TYPE: W/MATTRSS	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0266	HOS BED TOT ELEC W/RAIL W/O MATTRSS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0265	HOS BED TOT ELEC W/RAIL W/MATTRSS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0261	HOS BED SEMI-ELEC W/RAIL NO MATTRSS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0260	HOS BED SEMI-ELEC W/RAIL W/MATTRSS	HCPCS - DME	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	E0256	HOS BED VARIBL HT W/RAIL NO MATTRSS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0255	HOS BED VARIBL HT W/RAIL W/MATTRSS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0251	HOS BED FIX HT W/RAIL W/O MATTRSS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0250	HOS BED FIX HT W/RAIL W/MATTRSS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0249	PAD H2O CIRC HEAT UNIT REPLCMT ONLY	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0248	TRNSF BENCH HEVY DUTY TUB/TOILET	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0247	TRNSF BENCH TUB/TOILET W/WO COMMODE	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0240	BATH/SHOWER CHAIR W/WO WHLS ANY SZ	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0231	NON-CNTC WND WARM DEVC W/CARD&COVR	HCPCS - DME	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0218	FLUID CIRC COLD PAD W/PUMP ANY TYPE	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0217	WATER CIRCULATING HEAT PAD W/PUMP	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0205	HEAT LAMP W/STAND W/INFRARD ELEM	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0203	TX LTBOX MINI 10000 LUX TABLE TOP	HCPCS - DME	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0200	HEAT LAMP W/O STAND W/INFRARD ELEM	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0199	DRY PRSS PAD MATTRSS STD LEN&WDTH	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0198	WATR PRSS PAD MATTRSS STD LEN&WDTH	HCPCS - DME	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	E0197	AIR PRSS PAD MATTRSS STD LEN&WDTH	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0190	PSTN CUSH/PILLOW/EDGE ALL COMPONENT	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0185	GEL/GEL-LIKE PRSS PAD MATTRSS STD	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0182	PUMP ALTERNATING PRESSURE PAD REPL	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0181	PWR PRESS RED MATTRESS PAD W/PUMP	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0175	FOOT REST USE W/COMMODE CHAIR EACH	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0172	SEAT LIFT MECH PLACE OVR/TOP TOILET	HCPCS - DME	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0171	COMMODE CHAIR SEAT LIFT MCH NONELEC	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0170	COMMODE CHAIR SEAT LIFT MECH ELEC	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0168	COMMODE CHAIR XTRA WIDE&/HEVY DUTY	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0167	PAIL/PAN USE W/COMMODE CHAIR REPL	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0165	COMMODE CHAIR WITH DETACHABLE ARMS	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0163	COMMODE CHAIR WITH FIXED ARMS	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0161	SITZ BATH/EQP PRTBLE USED W/FAUCET	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0160	SITZ BATH/EQP PRTBLE W/WO COMMODE	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0159	BRAKE ATTCH WHEELED WALK REPLCMT EA	HCPCS - DME	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	E0158	LEG EXTENSIONS WALKER PER SET FOUR	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0155	WHL ATTCH PCK-UP WLK- PER PAIR SEAT	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0153	PLATFORM ATTCH FOREARM CRUTCH EA	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0149	WALKER HEVY DUTY WHEELD ANY TYPE EA	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0148	WALK HEVY DUTY NO WHLS RIGD/FOLD EA	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0147	WALKR HEVY DUTY MX BRAKE VARIBL WHL	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0144	WALKER ENCLOS 4 SIDE WHL POST SEAT	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0143	WALKER FOLD WHEELED ADJUSTBL/FIX HT	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0141	WALKER RIGID WHEELD ADJUSTBL/FIX HT	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0140	WALK W/TRNK SUPP ADJUSTBL/FIX HT	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0135	WALKER FOLDING ADJUSTBLE/FIX HEIGHT	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0130	WALKER RIGID ADJUSTBLE/FIXED HEIGHT	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0118	CRUTCH SUBSTITUTE LW LEG PLATFORM	HCPCS - DME	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0117	CRTCH UNDERARM ARTIC SPRNG ASSTD EA	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0116	CRTCH UNDARM OTH THAN WOOD ADJ/FIX	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0114	CRTCHES UNDARM OTH THAN WOOD PAIR	HCPCS - DME	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	E0113	CRTCH UNDARM WOOD EA ADJUSTBL/FIX	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0112	CRTCHS UNDARM WOOD PAIR ADJSTBL/FIX	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0111	CRTCH FORARM VARIOUS MATL EA	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0110	CRTCHES FORARM VARIOUS MATL PAIR	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0105	CANE QUAD/3-PRONG ALL MATL W/TIPS	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0100	CANE ALL MATL ADJUSTBLE/FIXED W/TIP	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D9985	SALES TAX	HCPCS - DENTAL	NO	12/08/2015	12/08/2015			
MMAI-Medicare/Medicaid	D9975	EXT BLEACH HOM APP-ARCH;MATL&TRAYS	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D9943	OCCLUSAL GUARD ADJUSTMENT	Misc Svcs	YES	01/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	D9940	OCCLUSAL GUARD BY REPORT	HCPCS - DENTAL	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	D9935	CLEAN&INSPECT REMV PART DENTUR MAND	HCPCS-DENTAL-Misc Svcs	YES	01/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	D9934	CLEAN&INSPECT REMV PRT DENTUR MAXIL	HCPCS-DENTAL-Misc Svcs	YES	01/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	D9933	CLEAN&INSPECT REMV CMPL DENTUR MAND	HCPCS-DENTAL-Misc Svcs	YES	01/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	D9932	CLEAN&INSPCT REMV CMPL DENTUR MAXIL	HCPCS-DENTAL-Misc Svcs	YES	01/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	D9311	CONSULTATION W/MED HEALTH CARE PROF	HCPCS - DENTAL	NO	04/27/2017	04/27/2017			
MMAI-Medicare/Medicaid	D9243	IV MOD SED/ANAL-EA SUBS 15 MIN INCR	HCPCS-DENTAL-UNKNOWN	YES	01/01/2016	12/31/2078			

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MMAI-Medicare/Medicaid	D8694	REPAIR FIX RETAINERS INCL REATTACH	HCPCS - DENTAL	EXPIRED	10/05/2015	12/31/2078			
MMAI-Medicare/Medicaid	D8693	REBONDING/RECEMENTING FIXED RETAINR	HCPCS - DENTAL	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	D8692	REPLACEMENT LOST OR BROKEN RETAINER	HCPCS - DENTAL	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	D8691	REPAIR OF ORTHODONTIC APPLIANCE	HCPCS - DENTAL	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	D8681	REMOVABLE ORTHODONTIC RETAINER ADJ	Orthodontic-Oth	YES	01/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	D7952	SINUS AUGMENTATION VERTICAL APPR	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D7921	COLLECT&APPLIC AUTO BLOOD CONC PROD	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D7881	OCCLUSAL ORTHOTIC DEVICE ADJUSTMENT	TMJ	YES	01/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	D6104	BONE GRAFT TIME IMPLANT PLACEMENT	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D6103	BONE GRAFT REPAIR PERI-IMPL DEFECT	HCPCS-DENTAL-Implant Svcs	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D6102	DEBR&OSS CNTR PRIIMPL DEF;CLN SURF	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D6101	DEBR PRIIMPL DEF CLN EXPSD IMPL FLP	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D6013	SURGICAL PLACEMENT OF MINI IMPLANT	HCPCS - DENTAL	YES	10/05/2015	12/31/2078			
MMAI-Medicare/Medicaid	D5866	OVERDENTURE - PARTIAL MANDIBULAR	Denture-Other	YES	10/05/2015	12/31/2078			
MMAI-Medicare/Medicaid	D5865	OVERDENTURE - COMPLETE MANDIBULAR	HCPCS - DENTAL	YES	10/05/2015	12/31/2078			
MMAI-Medicare/Medicaid	D5864	OVERDENTURE - PARTIAL MAXILLARY	Denture-Other	YES	10/05/2015	12/31/2078			

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MMAI-Medicare/Medicaid	D5863	OVERDENTURE - COMPLETE MAXILLARY	Denture-Other	YES	10/05/2015	12/31/2078			
MMAI-Medicare/Medicaid	D5281	REMV UNILAT PART DENTUR - 1 PIECE CAST METAL	HCPCS - DENTAL	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	D5224	IMMED MAND PRTL D - CAST MTL FW	HCPCS - DENTAL	YES	01/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	D5223	IMMED MAX PRTL D - CAST METAL FW	HCPCS-DENTAL-Denture-Partial	YES	01/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	D5222	IMMED MAND PRTL DENTURE - RESN BASE	HCPCS-DENTAL-Denture-Partial	YES	01/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	D5221	IMMED MAX PRTL DENTURE - RESIN BASE	HCPCS - DENTAL	YES	01/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	D4285	NON-AUTOGEN CNCT TISSUE GRAFT PROC	HCPCS-DENTAL-Perio Surgical	YES	01/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	D4283	AUTOGEN CONNECTIVE TISS GRAFT PROC	HCPCS-DENTAL-Perio Surgical	YES	01/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	D4278	FREE ST GFT EA CNTG T/EDNT T SAME S	HCPCS-DENTAL-Perio Surgical	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D4277	FREE SFT TSS GFT 1ST T/EDNTULOUS T	HCPCS-DENTAL-Perio Surgical	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D4212	GING/GINGIVOPLASTY RES PROC-TOOTH	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D3432	GUIDE TISS REGEN PERIRADICULAR SURG	HCPCS - DENTAL	YES	10/05/2015	12/31/2078			
MMAI-Medicare/Medicaid	D3431	BIOL MATL TSS REGEN PERIRADICLR SRG	HCPCS - DENTAL	YES	10/05/2015	12/31/2078			
MMAI-Medicare/Medicaid	D3429	BONE GRAFT PERIRADICULR SURG EA ADD	HCPCS - DENTAL	YES	10/05/2015	12/31/2078			
MMAI-Medicare/Medicaid	D3428	BONE GRAFT PERIRADICULR SURG 1 SITE	HCPCS - DENTAL	YES	10/05/2015	12/31/2078			
MMAI-Medicare/Medicaid	D3357	PULPAL REGENERATION - COMPLETION TX	HCPCS - DENTAL	NO	12/08/2015	12/08/2015			

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MMAI-Medicare/Medicaid	D3356	PULPAL REGENERATION - MED REPLACMNT	HCPCS - DENTAL	NO	12/08/2015	12/08/2015			
MMAI-Medicare/Medicaid	D3355	PULPAL REGENERATION - INITIAL VISIT	HCPCS - DENTAL	NO	12/08/2015	12/08/2015			
MMAI-Medicare/Medicaid	D2990	RESIN INFIL INCIPIENT SMTH SURF LES	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D2983	VENEER REPR NEC RESTORATV MATL FAIL	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D2982	ONLAY REPR NEC RESTORATV MATL FAIL	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D2981	INLAY REPR NEC RESTORATV MATL FAIL	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D2949	RESTORATIV FOUNDATN INDIR RESTORATN	HCPCS - DENTAL	YES	10/05/2015	12/31/2078			
MMAI-Medicare/Medicaid	D2929	PREFAB PORC/CERAMC CROWN-PRIM TOOTH	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D2921	REATTCH TOOTH FRAG INCISL EDGE/CUSP	HCPCS - DENTAL	NO	12/08/2015	12/08/2015			
MMAI-Medicare/Medicaid	D1999	UNS PREVENTIVE PROCEDURE BY REPORT	HCPCS - DENTAL	YES	10/05/2015	12/31/2078			
MMAI-Medicare/Medicaid	D1555	REMOVAL OF FIXED SPACE MAINTAINER	HCPCS - DENTAL	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	D1550	RECEMENTATION OF SPACE MAINTAINER	HCPCS - DENTAL	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	D1525	SPACE MAINTAINER - REMOVABLE-BILATERAL	HCPCS-DENTAL-Space Maint.	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	D1515	SPACE MAINTAINER - FIXED-BILATERAL	HCPCS-DENTAL-Space Maint.	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	D1353	SEALANT REPAIR - PER TOOTH	HCPCS- DENTAL-Sealants	NO	12/08/2015	12/08/2015			
MMAI-Medicare/Medicaid	D0603	CARIES RISK ASSESS DOC FIND HI RSK	HCPCS - DENTAL	NO	12/08/2015	12/08/2015			

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MMAI-Medicare/Medicaid	D0602	CARIES RISK ASSESS DOC FIND MOD RSK	HCPCS - DENTAL	NO	12/08/2015	12/08/2015			
MMAI-Medicare/Medicaid	D0601	CARIES RISK ASSESS DOC FIND LOW RSK	HCPCS - DENTAL	NO	12/08/2015	12/08/2015			
MMAI-Medicare/Medicaid	D0423	GENETIC TEST SUSCEPT DZ-DPEC ANALY	HCPCS - DENTAL	YES	01/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	D0422	CLCT & PREP GENETIC SAMPLE MATERIAL	HCPCS-DENTAL-Tests and Labs	YES	01/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	D0414	LAB PROC MICROB SPEC INC C & S STS	HCPCS - DENTAL	NO	04/27/2017	04/27/2017			
MMAI-Medicare/Medicaid	D0395	FUSION 2/GT 3D IMAG VOL 1/GT MODAL	HCPCS - DENTAL	YES	10/05/2015	12/31/2078			
MMAI-Medicare/Medicaid	D0394	DIGTL SUBTR 2/GT IMAGES/VOL SAME MOD	HCPCS-DENTAL-Radiographs	YES	10/05/2015	12/31/2078			
MMAI-Medicare/Medicaid	D0391	INT DX IMAG P NOT ASSO CAP IMAG RPT	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D0386	MAXILLOFACIAL ULTRASOUND IMAGE CAP	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D0384	CONE BM CT IMAG CAP TMJ SER2/GT EXPOS	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D0383	CONE BEAM CT CAP FD VIEW BOTH JAWS	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D0382	CONE BEAM CT 1 FULL DENT ARCH-MAX	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D0381	CONE BEAM CT 1 FULL DENT ARCH-MAND	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D0380	CONE BEAM CT IMAG LTD FD VWLT 1 W JAW	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D0371	SIALOENDOSCOPY CAP & INTERPRETATION	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D0370	MAXILLOFACIAL U/S CAP & INTERPRET	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	D0369	MAXILLOFACIAL MRI CAP & INTERPRET	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D0368	CONE BM CT CAP&INT TMJ SER2/GT EXPOS	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D0367	CONE BEAM CT CAP&INT FD VW BOTH JWS	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D0366	CONE BEAM CT 1 FULL DENT ARCH-MAX	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D0365	CONE BEAM CT 1 FULL DENT ARCH-MAND	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D0364	CONE BM CT CAP&INT LTD FD VWLT 1 W JW	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D0251	EXTRA-ORAL POSTERIOR DENTAL X-RAY	Radiographs	NO	03/04/2016	03/04/2016			
MMAI-Medicare/Medicaid	D0171	RE-EVALUATION-POST-OP OFFICE VISIT	HCPCS- DENTAL-Exams	NO	12/08/2015	12/08/2015			
MMAI-Medicare/Medicaid	C9899	IMPL PROS DEVC PAYBL IP NO IP COV	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9898	RADIOLABELED PROD PROV HOS IP STAY	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9756	IO NIR FLUOR LM OF LYM W/ADMIN ICG	HCPCS - C CODES - OUTPATIENT PP	YES	06/16/2019	12/31/2078			
MMAI-Medicare/Medicaid	C9751	BRONCH RIGID/FLEX TRANSBRON ABL LES	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	C9738	ADJUNCT BLUE LT CYSTO FLUO IMAG AGT	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	C9733	NONOPHTHALMIC FLUOR VASCULAR ANGIO	HCPCS - C CODES - OUTPATIENT PP	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	C9728	PLCMT INTERSTIT DEV NOT ABD PROS RP	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9727	INSRT IMPL SOFT PALATE; MIN 3 IMPL	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	C9726	PLCMT&REMV AA BR IORT ADD-ON BR PRO	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9725	PLCMT ENDORECTAL APPLIC BRACHYTX	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9488	INJ CONIVAPTAN HYDROCHLORIDE 1 MG	HCPCS - C CODES - OUTPATIENT PP	NO	04/27/2017	04/27/2017			
MMAI-Medicare/Medicaid	C9482	INJECTION SOTALOL HYDROCHLORID 1 MG	HCPCS - C CODES - OUTPATIENT PP	NO	11/01/2016	11/01/2016			
MMAI-Medicare/Medicaid	C9364	PORCINE IMPLANT PERMACOL PER SQ CM	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9362	POROUS COLL BN FILLER STRIP 0.5 CC	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9361	COLL MATRIX NRV WRAP PER 0.5 CM LEN	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9360	DERM SUBST NEONAT BOV ORIG 0.5 CM	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9359	POROUS COLL BN FILLER PUTTY 0.5 CC	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9358	DERM SUB NATV FET BOV PER 0.5 SQ CM	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9356	TENDON MATRIX COLLAGEN & GAG SQ CM	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9355	COLLAGEN NERVE CUFF 0.5 CM LENGTH	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9353	MICROPOROUS COLL IMPL SLIT TUBE CM	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9293	INJECTION GLUCARPIDASE 10 UNITS	HCPCS - C CODES - OUTPATIENT PP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9285	LIDO 70 MG/TETRACAINE 70 MG PATCH	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9250	HUMAN PLASMA FIBRIN SEALANT 2ML	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	C9047	INJECTION CAPLACIZUMAB-YHDP 1 MG	HCPCS - C CODES - OUTPATIENT PP	YES	06/16/2019	12/31/2078			
MMAI-Medicare/Medicaid	C9046	COCAINE HCI NASAL SOL TOP ADMN 1 MG	HCPCS-C CODES-OUTPATIENT PP	YES	03/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	C8957	IV INFUS TX/DX;INIT PROLNG RQR PUMP	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C8937	CAD INCL CMP ALG ANALYS BRST MRI ID	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	C8936	MRA NO CONTRST FLW W/CONTRST UP EXT	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C8935	MRA WITHOUT CONTRST UPPER EXTREMITY	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C8934	MRA WITH CONTRAST UPPER EXTREMITY	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C8933	MRA NO CONTRST CONTRST SP CANAL CNT	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C8932	MRA W/O CONTRST SP CANAL CONTENTS	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C8931	MRA W/CONTRST SPINAL CANAL CONTENTS	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C8927	TEE MON ASSESS CARDIAC PUMP FUNCT	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C8926	TEE CONG CARDIAC ANOMAL; PROBE I&R	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C8925	TEE REAL TIME 2D; PROBE PLCMT I&R	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C8920	MRA NO CONTRST FLWED W/CONTRST PELV	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C8919	MRA WITHOUT CONTRAST PELVIS	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C8914	MR ANGIO NO CNTRST FLW CON LW EXTRM	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	C8913	MR ANGIO WITHOUT CONTRST LOW EXTREM	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C8912	MR ANGIO W/CONTRST LOWER EXTREMITY	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C8911	MR ANGIO NO CONTRST FLW CNTRST CHST	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C8910	MR ANGIO WITHOUT CONTRST CHEST	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C8906	MR IMAGING W/CONTRST BREAST; BIL	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C8905	MR NO CONTRST FLW W/CNTRST BRST;UNI	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C8903	MR IMAGING W/CONTRAST BREAST; UNI	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C8901	MR ANGIOGRAPHY WITHOUT CONTRST ABD	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C8900	MR ANGIOGRAPHY W/CONTRAST ABDOMEN	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C5278	APP SG F/N/HF/GGT /EQU 100;ADD 100/1PCT CH	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	C5277	APP SG F/N/HF/GGT /EQU 100;1ST 100/1PCT CH	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	C5276	APP SG F-S-N-HF-G 100 CM;EA A 25 CM	2010 Code Set	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	C5275	APP SG F-N-HF-G 100 CM;1ST 25 CM/LT	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	C5274	APP SG T-A-LGT /EQU 100 CM;EA ADD 100 CM	2010 Code Set	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	C5273	APPL SG T-A- LGT /EQU 100 CM;1ST 100 CM	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	C5272	APPL SG T-A-L A 100 CM;EA ADD 25 CM	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2014	01/01/2014			

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MMAI-Medicare/Medicaid	C5271	APPL SG T- A- L 100 CM;1ST 25 CM/LT	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	C2699	BRACHYTX NONSTRANDED NOS PER SOURCE	HCPCS - C CODES - OUTPATIENT PP	NON-COV	04/19/2020	12/31/2078			
MMAI-Medicare/Medicaid	C2698	BRACHYTX STRANDED NOS PER SOURCE	HCPCS - C CODES - OUTPATIENT PP	NON-COV	04/19/2020	12/31/2078			
MMAI-Medicare/Medicaid	C2645	BRT PLANAR SOURCE PD-103 PER SQ MM	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	C2644	BT SRC CESIUM-131 CHLOR SOL PER MCI	HCPCS - C CODES - OUTPATIENT PP	NO	11/04/2014	11/04/2014			
MMAI-Medicare/Medicaid	C2643	BRACHYTX NONSTRANDED CESIUM-131 SRC	HCPCS - C CODES - OUTPATIENT PP	NON-COV	04/19/2020	12/31/2078			
MMAI-Medicare/Medicaid	C2642	BRACHYTX STRANDED CESIUM-131 SRC	HCPCS - C CODES - OUTPATIENT PP	NON-COV	04/19/2020	12/31/2078			
MMAI-Medicare/Medicaid	C2641	BRACHYTX NONSTRND PALLADIUM-103 SRC	HCPCS - C CODES - OUTPATIENT PP	NON-COV	04/19/2020	12/31/2078			
MMAI-Medicare/Medicaid	C2640	BRACHYTX STRANDED PALLADIUM-103 SRC	HCPCS - C CODES - OUTPATIENT PP	NON-COV	04/19/2020	12/31/2078			
MMAI-Medicare/Medicaid	C2639	BRACHYTX NONSTRAND IODINE-125 SRC	HCPCS - C CODES - OUTPATIENT PP	NON-COV	04/19/2020	12/31/2078			
MMAI-Medicare/Medicaid	C2638	BRACHYTX STRANDED IODINE-125 SOURCE	HCPCS - C CODES - OUTPATIENT PP	NON-COV	04/19/2020	12/31/2078			
MMAI-Medicare/Medicaid	C2637	BRACHYTX NONSTRAND YTTERBIUM-169	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C2636	BRACHYTX LIN NONSTRAND PD-103 1 MM	HCPCS - C CODES - OUTPATIENT PP	NON-COV	04/19/2020	12/31/2078			
MMAI-Medicare/Medicaid	C2635	BRACHYTX NONSTRAND PD-103 GT 2.2 MCI	HCPCS - C CODES - OUTPATIENT PP	NON-COV	04/19/2020	12/31/2078			
MMAI-Medicare/Medicaid	C2634	BRACHYTX NONSTRAND I-125 GT 1.01 MCI	HCPCS - C CODES - OUTPATIENT PP	NON-COV	04/19/2020	12/31/2078			
MMAI-Medicare/Medicaid	C2631	REPR DEVC URIN INCONT W/O SLING GFT	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	C2630	CATH EP DX/ABLAT NOT MAP COOL-TIP	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C2629	INTRDCR/SHTH NOT GUID NO IC EEG LSR	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C2626	INFUS PUMP NON-PROGMMABLE TEMPORARY	HCPCS - C CODES - OUTPATIENT PP	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	C2625	STENT NON-COR TEMP W/DELIV SYSTEM	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C2624	IMPL WL PULM ART PRSS SNSR DEL CATH	HCPCS - C CODES - OUTPATIENT PP	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	C2623	CATHETER TA DRUG-COATED NON-LASER	HCPCS - C CODES - OUTPATIENT PP	NO	04/01/2015	04/01/2015			
MMAI-Medicare/Medicaid	C2621	PACEMKR OTH THAN SINGLE/DUAL CHAMB	HCPCS - C CODES - OUTPATIENT PP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C2620	PACEMKR 1 CHAMB NON RATE-RESPONSIVE	HCPCS - C CODES - OUTPATIENT PP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C2619	PACEMKR DUL CHAMB NON RATE-RESPONS	HCPCS - C CODES - OUTPATIENT PP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C2618	PROBE/NEEDLE CRYOABLATION	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C2617	STENT NON-COR TEMP W/O DELIV SYSTEM	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C2616	BRACHYTX NONSTRAND YTTRIUM-90 SRC	HCPCS - C CODES - OUTPATIENT PP	NON-COV	04/19/2020	12/31/2078			
MMAI-Medicare/Medicaid	C2614	PROBE PERCUT LUMBAR DISCECTOMY	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C2613	LUNG BIOPSY PLUG WITH DELIVERY SYST	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2010	07/14/2015			
MMAI-Medicare/Medicaid	C1982	CATH PRES GEN O/W VALV INTRMIT OCCL	HCPCS-C CODES-OUTPATIENT PP	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	C1900	LEAD LT VENTRICULAR CORON VENUS SYS	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	C1899	LEAD PACEMKR/CARDIOVERT-DEFIB COMB	HCPCS - C CODES - OUTPATIENT PP	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	C1898	LEAD PACEMKR NOT TRNS VDD 1 PASS	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1896	LEAD CARDIOVRT-DFIB NOT ENDOCARD	HCPCS - C CODES - OUTPATIENT PP	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	C1895	LEAD CARDIOVRT-DFIB ENDOCARD DUL	HCPCS - C CODES - OUTPATIENT PP	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	C1894	INTRDUCR/SHEATH NOT GUID NON-LASR	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1893	INTRDUCR/SHEATH EP CURVE NOT PEEL	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1892	INTRDUCR/SHEATH EP CURVE PEEL-AWAY	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1891	INFUS PUMP NON-PROGMMABLE PERMANENT	HCPCS - C CODES - OUTPATIENT PP	NON-COV	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	C1890	NO IMPL/INSRT DEVC U DEVC-INT PROC	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	C1889	IMPLANTABLE/INSERTABLE DEVICE NOC	HCPCS - C CODES - OUTPATIENT PP	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	C1888	CATH ABLATION NON-CARDIAC ENDOVASC	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1886	CATH EXTRAVASCULAR TISS ABLAT MODAL	HCPCS - C CODES - OUTPATIENT PP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1885	CATHETER TRNSLUM ANGPLSTY LASER	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1882	CARDIOVRT-DFIB OTH THAN 1/DUL CHAMB	HCPCS - C CODES - OUTPATIENT PP	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	C1878	MATL VOCAL CORD MEDIZATION SYNTH	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1877	STNT NON-COAT/NON-COVR W/O DEL SYS	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	C1876	STNT NON-COATED/NON-COVR DELIV SYS	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1875	STENT COATED/COVR W/O DELIV SYSTEM	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1874	STENT COATED/COVR W/DELIVERY SYSTEM	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1823	GEN NEUROSTM NON-RECHRG TV S&STM LD	HCPCS - C CODES - OUTPATIENT PP	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	C1819	SURG TISSUE LOC & EXC DEVICE	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1817	SEPTAL DEFEC IMPL SYSTEM INTRACARD	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1814	RETINAL TAMPONADE DEVICE SILCON OIL	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1786	PACEMKR 1 CHAMB RATE-RESPONSIVE	HCPCS - C CODES - OUTPATIENT PP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1785	PACEMKR DUAL CHAMB RATE-RESPONSIVE	HCPCS - C CODES - OUTPATIENT PP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1784	OCULR DEVC INTRAOP DETACHED RETINA	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1783	OCULAR IMPL AQUEOUS DRAIN ASST DEVC	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1779	LEAD PACEMKR TRNS VDD SINGLE PASS	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1777	LEAD CARDIOVRT-DFIB ENDOCARD 1 COIL	HCPCS - C CODES - OUTPATIENT PP	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	C1771	REPR DEVICE URIN INCONT W/SLING GFT	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1766	INTRDUCR/SHEATH EP NOT PEEL-AWAY	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1759	CATHETER INTRACARD ECHOCARDIOGRAPHY	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	C1751	CATH INFUS INSRT PERIPH CNTRL/MIDLN	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1750	CATH HEMODIAL/PERITON LONG-TERM	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1749	ENDO RETRO IMAG/ILLUM COLONOSCOPE	HCPCS - C CODES - OUTPATIENT PP	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	C1733	CATH EP DX/ABLAT NOT MAP/COOL-TIP	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1732	CATH EP DX/ABLAT 3D/VECTOR MAP	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1731	CATH EP DX OTH THAN 3D MAP 20/GT	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1730	CATH EP DX OTH THAN 3D MAP 19/LT	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1728	CATHETER BRACHYTHERAPY SEED ADMIN	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1727	CATH BALLN TISS DISSECTOR NON-VASC	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1726	CATHETER BALLOON DILAT NON-VASCULAR	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1725	CATHETER TRNSLUM ANGPLSTY NON-LASER	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1724	CATH TRNSLUM ATHERECT ROTATIONAL	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1722	CARDIOVERT-DEFIB SINGLE CHAMB	HCPCS - C CODES - OUTPATIENT PP	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	C1721	CARDIOVERT-DEFIBRILLATOR DUAL CHAMB	HCPCS - C CODES - OUTPATIENT PP	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	C1719	BRACHYTX NONSTRND NONHD IRIDIUM-192	HCPCS - C CODES - OUTPATIENT PP	NON-COV	04/19/2020	12/31/2078			
MMAI-Medicare/Medicaid	C1717	BRACHYTX NONSTRAND HD IRIDIUM-192	HCPCS - C CODES - OUTPATIENT PP	NON-COV	04/19/2020	12/31/2078			

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MMAI-Medicare/Medicaid	C1716	BRACHYTX NONSTRAND GOLD-198 PER SRC	HCPCS - C CODES - OUTPATIENT PP	NON-COV	04/19/2020	12/31/2078			
MMAI-Medicare/Medicaid	C1714	CATH TRNSLUM ATHERECT DIRECTIONAL	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1713	ANCHR/SCREW OPPOS BN-BN/SFT TISS-BN	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B9006	PARNTRAL NUTRIT INFUS PUMP STATION	HCPCS - ENTERAL & PARENTERAL	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	B9004	PARNTRAL NUTRIT INFUS PUMP PRTBLE	HCPCS - ENTERAL & PARENTERAL	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	B9002	ENTERAL NUTR INFUSION PUMP ANY TYPE	HCPCS - ENTERAL & PARENTERAL	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	B5200	PARNTRL NUT AMINO ACID & CARS STRSS	HCPCS - ENTERAL & PARENTERAL	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B5100	PARENTERL NUT SOL AMINO ACID & CARB	HCPCS - ENTERAL & PARENTERAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B5000	PARNTRAL NUT; AMINO ACID&CARBS RENL	HCPCS - ENTERAL & PARENTERAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B4224	PARNTRAL NUTRITION ADMIN KIT-DAY	HCPCS - ENTERAL & PARENTERAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B4222	PARNTRAL NUT SPL KIT; HOM MIX-DAY	HCPCS - ENTERAL & PARENTERAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B4220	PARNTRAL NUTRIT SPL KIT; PREMIX-DAY	HCPCS - ENTERAL & PARENTERAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B4216	PARNTRAL NUT; ADDITIVES-HOM MIX-DAY	HCPCS - ENTERAL & PARENTERAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B4199	PARNTRAL NUT;AMINO ACID&CARB GT 100GM	HCPCS - ENTERAL & PARENTERAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B4197	PARNTRL NUT;AMINOACID&CARB 74-100GM	HCPCS - ENTERAL & PARENTERAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B4193	PARNTRAL NUT;AMINOACID&CARB 52-73GM	HCPCS - ENTERAL & PARENTERAL	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	B4189	PARNTRAL NUT;AMINOACID&CARB 10-51GM	HCPCS - ENTERAL & PARENTERAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B4187	OMEGAVEN 10 G LIPIDS	HCPCS-ENTERAL & PARENTERAL	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	B4185	PARENTERAL NUTR SOL NOS 10 G LIPIDS	HCPCS - ENTERAL & PARENTERAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B4180	PARNTRAL NUT SOL; CARBS GT 50PCT HOM	HCPCS - ENTERAL & PARENTERAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B4178	PARNTRAL NUT SOL; AMINO ACID GT 8.5PCT	HCPCS - ENTERAL & PARENTERAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B4176	PARNTRAL NUT SOL; AMINO ACID 7-8.5PCT	HCPCS - ENTERAL & PARENTERAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B4172	PARNTRAL NUT SOL; AMINO ACID 5.5-7PCT	HCPCS - ENTERAL & PARENTERAL	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B4168	PARNTRAL NUT SOL; AMINO ACID 3.5PCT	HCPCS - ENTERAL & PARENTERAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B4164	PARNTRAL NUT SOL; CARBS 50PCT /LT HOM	HCPCS - ENTERAL & PARENTERAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B4162	ENTRAL F PED INHERITED DZ METAB	HCPCS - ENTERAL & PARENTERAL	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	B4161	ENTRAL F PED HYDROLYZED/AA PROTEINS	HCPCS - ENTERAL & PARENTERAL	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	B4160	ENTRAL F PED NUTRITN CMPL CAL DENSE	HCPCS - ENTERAL & PARENTERAL	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	B4159	ENTRAL F PED NUTRITN CMPL SOY BASD	HCPCS - ENTERAL & PARENTERAL	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	B4158	ENTRAL F PED NUTRITION COMPLETE	HCPCS - ENTERAL & PARENTERAL	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	B4157	ENTRAL F CMPL INHERITED DZ METAB	HCPCS - ENTERAL & PARENTERAL	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	B4155	ENTRAL F NUTRITN INCMPL/MOD NUTRNTS	HCPCS - ENTERAL & PARENTERAL	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	B4154	ENTRAL F CMPL NO INHERITED DZ METAB	HCPCS - ENTERAL & PARENTERAL	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	B4153	ENTRL F NUTRTN CMPL HYDROLYZD PROTS	HCPCS - ENTERAL & PARENTERAL	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	B4152	ENTRAL F NUTRITION CMPL CAL DENSE	HCPCS - ENTERAL & PARENTERAL	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	B4150	ENTRAL F NUTRITIONALLY COMPLETE	HCPCS - ENTERAL & PARENTERAL	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	B4149	ENTRAL F MANF BLNDRIZD NAT FOODS	HCPCS - ENTERAL & PARENTERAL	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	B4105	IN-LINE CART CTG DIG ENZYME EF EACH	HCPCS - ENTERAL & PARENTERAL	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	B4103	ENTRAL F PED REPL FL&LYTES 500 ML	HCPCS - ENTERAL & PARENTERAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B4102	ENTRAL F ADLT REPL FL&LYTES 500 ML	HCPCS - ENTERAL & PARENTERAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B4100	FOOD THICKENER ADMINED ORALLY-OUNCE	HCPCS - ENTERAL & PARENTERAL	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	B4088	GASTROSTOMY/J-TUBE LOW-PROFILE EA	HCPCS - ENTERAL & PARENTERAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B4087	GASTROSTOMY/J-TUBE STANDARD EACH	HCPCS - ENTERAL & PARENTERAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B4036	ENTERAL FD SPL KIT; GRAVITY FED-DAY	HCPCS - ENTERAL & PARENTERAL	NO	08/14/2018	08/14/2018			
MMAI-Medicare/Medicaid	B4035	ENTERAL FEED SPL KIT; PUMP FED-DAY	HCPCS - ENTERAL & PARENTERAL	NO	08/14/2018	08/14/2018			
MMAI-Medicare/Medicaid	B4034	ENTERAL FEED SPL KIT; SYRINGE DAY	HCPCS - ENTERAL & PARENTERAL	NO	08/14/2018	08/14/2018			
MMAI-Medicare/Medicaid	A9999	MISCELLANEOUS DME SUPPLY/ACCESS NOS	HCPCS - ADMIN MISC & INVEST	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	A9901	DME DEL SET&/DSPNS SRVC ANOTH HCPCS	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A9698	NON-RADIOACTV CONTRST IMAG MATL NOC	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9604	SM-153 LEXIDRONAM TX TO 150 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9598	PET RADIOPHARM DX NON-TUMOR ID NOC	HCPCS - MED-SURG SUPPLIES	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	A9597	PET RADIOPHARMA DX TUMOR ID NOC	HCPCS - MED-SURG SUPPLIES	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	A9590	IODINE I-131 IOBENGUANE 1 MCI	HCPCS-ADMIN MISC & INVEST	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	A9589	INSTILLATION HAL HCI 100 MG	HCPCS - MED-SURG SUPPLIES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	A9588	FLUCICLOVINE F-18 DIAGNOSTIC 1 MCI	HCPCS - MED-SURG SUPPLIES	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	A9587	GALLIUM GA-68 DOTATATE DX 0.1 MCI	HCPCS - MED-SURG SUPPLIES	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	A9584	IODINE I-123 IOFLUPAN DX UP 5 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9583	INJ GADOFOSVESET TRISODIUM 1 ML	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9582	I-123 IOBENGUANE DX DOSE TO 15 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9581	INJ GADOXETATE DISODIUM 1 ML	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9580	NAF F-18 DX STUDY DOSE TO 30 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9579	INJ GADOLINIUM MR CONTRAST NOS ML	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9578	INJ GADOBENATE DIMEGLUMIN MXPACK ML	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9577	INJ GADOBENATE DIMEGLUMINE PER ML	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A9576	INJECTION GADOTERIDOL PER ML	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9575	INJ GADOTERATE MEGLUMINE 0.1 ML	HCPCS - Radiopharmaceuticals &	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	A9572	IN-111 PENTETREOTIDE DX TO 6 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9571	INDIUM IN-111 AUTOLG PLATELETS DX	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9570	INDIUM IN-111 AUTOLG WBC DX DOSE	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9569	TC-99M EXAMETAZIME AUTOLG WBC DX	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9568	TC-99M ARCITUMOMAB DX TO 45 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9567	TC-99M PENTETATE DX AROSL TO 75 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9566	TC-99M FANOLESOMAB DX UP TO 25 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9562	TC-99M MERTIATIDE DX UP TO 15 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9561	TC-99M OXIDRONATE DX UP TO 30 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9560	TC-99M LABELED RBC DX UP TO 30 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9559	CO-57 CYANOCOBALAMN ORL DX TO 1 UCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9558	XENON XE-133 GAS DX PER 10 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9557	TC-99M BICISATE DX UP TO 25 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9556	GALLIUM GA-67 CITRATE DX PER MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A9555	RUBIDIUM RB-82 DX UP TO 60 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9554	I-125 SODUM IOTHALAMTE DX TO 10 UCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9553	CR-51 SODIUM CHROMATE DX TO 250 UCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9552	FDG F-18 FDG DX UP TO 45 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9551	TC-99M SUCCIMER DX UP TO 10 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9550	TC-99M SODIM GLUCEPTAT DX TO 25 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9548	INDIUM IN-111 PENTETATE DX 0.5 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9547	IN-111 OXYQUINOLIN DX 0.5 MILLICURE	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9546	CO-57/58 CYANOCOBALAMIN DX TO 1 UCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9541	TC-99M SULFUR COLL DX UP TO 20 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9540	TC-99M MAA DX UP TO 10 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9539	TC-99M PENTETATE DX UP TO 25 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9538	TC-99M PYROPHOSHATE DX UP TO 25 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9537	TC-99M MEBROFENIN DX UP TO 15 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9536	TC-99M DEPREOTIDE DX UP TO 35 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9532	I-125 SERUM ALB DX PER 5 MICROCURIE	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A9531	I-131 SODIM IODIDE DX UP TO 100 UCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9529	I-131 SODIM IODIDE SOL DX PER MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9528	I-131 SODIUM IODIDE CAPS DX PER MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9526	NITRO N-13 AMMONIA DX UP TO 40 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9524	I-131 IODINATD SERUM ALB DX 5 UCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9521	TC-99M EXETAZIME DX UP TO 25 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9520	TC-99M TILMANOCEPT DX TO 0.5 MCI	HCPCS - Radiopharmaceuticals &	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	A9516	I-123 SODIUM IODIDE DX TO 999 UCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9515	CHOLINE C-11 DX STUDY DOS TO 20 MCI	HCPCS - ADMIN MISC & INVEST	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	A9512	TC-99M PERTECHNETATE DX PER MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9510	TC-99M DISOFENIN DX UP TO 15 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9509	IODINE I-123 SODIM IODIDE DX MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9508	I-131 IOBENGUANE SULFATE DX 0.5 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9507	IN-111 CAPROMB PENDETD DX TO 10 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9505	TL-201 THALLOUS CHLORID DX PER MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9504	TC-99M APCITIDE DX UP TO 20 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A9503	TC-99M MEDRONATE DX UP TO 30 MCI	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9502	TC-99M TETROFOSMIN DX - STUDY DOSE	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9501	TC-99M TEBOROXIME DX PER STUDY DOSE	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9500	TC-99M SESTAMIBI DX PER STUDY DOSE	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9284	SPIROMETER NONELECTRONC INCL ACCESS	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9283	FOOT PRESSURE OFF LOAD/SUPP DEV EA	HCPCS - ADMIN MISC & INVEST	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9281	REACH/GRABBING DEVC ANY TYPE/LEN EA	HCPCS - ADMIN MISC & INVEST	NON-COV	05/22/2019	05/22/2019			
MMAI-Medicare/Medicaid	A9280	ALERT OR ALARM DEVICE NOC	HCPCS - ADMIN MISC & INVEST	NO	09/01/2017	09/01/2017		Submit claims with medical records	
MMAI-Medicare/Medicaid	A9279	MON FEATURE/DEVC ALONE/INTEGRAT NOC	HCPCS - ADMIN MISC & INVEST	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	A9275	HOME GLU DISPBL MON W/TEST STRIPS	HCPCS - ADMIN MISC & INVEST	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9274	EXT AMB INSULIN DEL SYS DISPOSBL EA	HCPCS - ADMIN MISC & INVEST	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9273	COLD/HOT FL BTL IC/C HT&/CLD W ANY	HCPCS - ADMIN MISC & INVEST	NON-COV	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	A9272	WND SCTN DISPBL DRSG ACC ANY TYP EA	HCPCS - ADMIN MISC & INVEST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	A9180	PEDICULOSIS TX TOP ADMN PT/CARETAKR	HCPCS - ADMIN MISC & INVEST	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9153	MULTIPLE VITAMINS ORAL PER DOSE NOS	HCPCS - ADMIN MISC & INVEST	NO	09/01/2017	09/01/2017		Submit claims with medical records	
MMAI-Medicare/Medicaid	A9152	1 VIT/MINERL/TRACE ELEM ORLDOSE NOS	HCPCS - ADMIN MISC & INVEST	NO	09/01/2017	09/01/2017		Submit claims with medical records	

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MMAI-Medicare/Medicaid	A8004	SOFT INTERFACE FOR HELMET REPL ONLY	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A8001	HELMET PROTECTIVE HARD PREFAB	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A8000	HELMET PROTECTIVE SOFT PREFAB	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7527	TRACHEOST/LRYNGCT TUBE PLUG/STOP EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7526	TRACHEOSTOMY TUBE COLLAR/HOLDER EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7522	TRACHEOST/LARYNGECT TUBE STNLESS ST	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7521	TRACHEOST/LARYNGECT TUBE CUFF PVC	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7520	TRACHEOST/LARYNGECT TUBE NON-CUFFED	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7509	FLTR HLDR&INTGR FLTR HOUS&ADHES	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7508	HOUS&INTGR ADHES EXCHG SYS &/ VALV	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7507	FLTR HLDR&INTGR FLTR TRACHEOSTOMA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7506	ADHES DISC EXCHG SYS&/ W/TRACH VALV	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7505	HOUS REUSABL W/O ADHES EXCHG SYS	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7504	FLTR USE TRACHEOSTOMA EXCHG SYS EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7503	FLTR HOLDER/CAP REUSBL TRACHEOSTOMA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7502	REPL DIAPH/FCEPLAT TRACHESTOMA VALV	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A7501	TRACHEOSTOMA VALV INCL DIAPHRAGM EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7048	VACUUM DRN CLCT U & TUBING KIT EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	A7047	ORAL INTF USED RESP SUCTION PUMP EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	A7046	WATR CHAMB HUMDIFIR USED W/POS ARWA	HCPCS - MED-SURG SUPPLIES	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	A7045	EXHALATION PORT REPLACEMENT ONLY	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7044	ORL INTERFCE W/POS ARWAY PRSS DEVC	HCPCS - MED-SURG SUPPLIES	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	A7041	WATER SEAL DRNAGE CONTAINER&TUBING	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7039	FLTR NON DISPBL POS ARWAY PRSS DEVC	HCPCS - MED-SURG SUPPLIES	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	A7038	FLTR DISPBL W/POS ARWAY PRSS DEVC	HCPCS - MED-SURG SUPPLIES	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	A7037	TUBING USED W/POS ARWAY PRESS DEVC	HCPCS - MED-SURG SUPPLIES	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	A7036	CHINSTRAP USE W/POS ARWAY PRSS DEVC	HCPCS - MED-SURG SUPPLIES	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	A7035	HEADGEAR USED W/POS ARWAY PRSS DEVC	HCPCS - MED-SURG SUPPLIES	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	A7034	NASL INTERFCE POS ARWAY PRSS DEVC	HCPCS - MED-SURG SUPPLIES	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	A7033	PILLW NASL CANNULA TYPE INTF REPL	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7032	CUSHN NASAL MASK INTF REPL ONLY EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7031	FCE MASK INTERFCE REPL FULL MASK EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A7030	FULL FCE MASK POS ARWAY PRSS DEV EA	HCPCS - MED-SURG SUPPLIES	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	A7029	NASL PILLOW ORL/NASL MASK REPL PAIR	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7028	ORAL CUSH ORAL/NASAL MASK REPL EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7027	COMB ORAL/NASAL MASK W/CPAP EACH	HCPCS - MED-SURG SUPPLIES	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	A7020	INTERFACE COUGH STIM DEVC REPL ONLY	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7016	DOME&MOUTHPECE W/SM VOL US NEBULIZR	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7014	FLTR NON-DISPBL AROSL COMPRS/US GEN	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7013	FILTER DISP W/AREO COMPRESS/US GEN	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7010	CORUG TUBE DISPBL LG VOL NEB 100 FT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7009	RESRVOR BOTTLE LG VOL US NEBULIZR	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7008	LG VOL NEBULIZR DISPBL PRFIL COMPRS	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7007	LG VOL NEBULIZR DISPBL UNFIL COMPRS	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7006	ADMN SET W/SM VOL FILTR NEBULIZR	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7005	ADMN SET SM VOL NONFLTR NEB NONDISP	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7004	SM VOL NONFILTR PNEUMAT NEB DISPBL	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7003	ADMN SET SM VOL NONFILTR NEB DISPBL	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A7001	CANISTR NONDISPBL USED W/SUCTN PUMP	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7000	CANISTER DISPBL USED W/SUCTN PUMP	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6544	GRADENT COMPRESSION STK GARTER BELT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6540	GRADENT COMPRS STK WAIST 30-40 MMHG	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6539	GRADENT COMPRS STK WAIST 18-30 MMHG	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6537	GRADENT COMPRS STK FULL 30 -40 MMHG	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6536	GRADENT COMPRS STK FULL 18 -30 MMHG	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6534	GRADENT COMPRS STK THIGH 30-40 MMHG	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6533	GRADENT COMPRS STK THIGH 18-30 MMHG	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6530	GRADIENT COMPRS STK BK 18-30 MMHG	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6513	COMPRS BRN MASK FCE&/NCK PLSTC/EQUL	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6511	COMPRS BRN GARMNT LW TRNK LEG OPN	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6510	COMPRS BRN GARMNT TRNK ARM LEG OPN	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6509	COMPRS BRN GARMNT TRNK WAIST CSTM	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6508	COMPRS BRN GARMNT FT THI LEN CSTM	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6507	COMPRS BRN GARMNT FT KNEE LEN CSTM	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A6506	COMPRS BURN GARMNT GLOV AX CSTM FAB	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6505	COMPRS BRN GARMNT GLOV ELB CSTM FAB	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6504	COMPRS BRN GARMNT GLOV WRST CSTM	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6503	COMPRS BRN GARMNT FCE HOOD CSTM FAB	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6502	COMPRS BRN GARMNT CHIN STRAP CSTM	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6501	COMPRS BURN GARMNT BDYSUIT CSTM FAB	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6457	TUBULR DRSG W/WO ELAST WDTH LINR YD	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6456	ZINC PAST BANDGE WD GT /EQU 3 & LT 5 IN	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6455	SELF-ADHERENT BANDGE WDTH GT /EQU 5 IN	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6454	SLF ADHERNT BANDGE WD GT /EQU 3 & LT 5 IN	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6453	SELF-ADHERENT BANDGE WDTH LT /EQU 3 IN	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6452	HI COMPRS BANDGE WD GT /EQU 3 & LT 5 IN	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6451	MOD COMPRS BANDGE WD GT /EQU 3 & LT 5 IN	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6450	LT COMPRS BANDGE WDTH GT /EQU 5 IN	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6449	LT COMPRS BANDGE WDTH GT /EQU 3 & LT 5 IN	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6448	LT COMPRS BANDGE ELAST WDTH LT 3 IN	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A6441	PADD BANDGE NON-ELAST NON-WOVEN/NON	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6413	ADHESIVE BANDAGE FIRST-AID TYPE EA	HCPCS - MED-SURG SUPPLIES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6407	PACK STRIPS NON-IMPREGNTD UP 2 IN	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6404	GAUZ NON-IMPREG STRL GT 48SQ NO ADHES	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6403	GAUZ NON-IMPREG STERL GT 16 LT EQU 48 SQ	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6402	GAUZ NON-IMPREG STERL 16 SQ/LT NO AD	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6266	GAUZ IMPRG NOT H2O SAL/ZINC LINR YD	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6262	WOUND FILLER DRY FORM PER G NOS	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6261	WOUND FILLR GEL/PASTE PER FL OZ NOS	HCPCS - MED-SURG SUPPLIES	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	A6260	WOUND CLEANSERS ANY TYPE ANY SIZE	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6259	TRNSPRT FILM STERL GT 48 SQ EA DRESS	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6258	TRNSPRT FILM GT 16 SQ BUT LT EQU 48 SQ EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6257	TRNSPRT FILM STERL 16 SQ/LT EA DRESS	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6256	SPCLTY ABSORB DRESS GT 48 SQ W/ADHES	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6255	SPCL ABSORB DRESS GT 16LT EQU 48 W/ADHES	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6254	SPCLTY ABSORB DRESS 16 SQ/LT W/ADHES	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A6253	SPCLTY ABSORB DRESS GT 48 SQ NO ADHES	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6252	SPCL ABSORB DRESS GT 16LT EQU 48 NO ADHES	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6251	SPCLTY ABSORB DRESS 16SQ/LT NO ADHES	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6250	SKN SEALNT PROTCT MOISTURZR OINTMNT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6248	HYDROGEL DRESS WOUND FIL GEL FL OZ	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6247	HYDROGEL DRESS STERL GT 48 SQ ADHES	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6246	HYDROGEL DRESS GT 16 LT EQU 48 SQ W/ADHES	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6245	HYDROGEL DRESS 16 SQ/LT W/ADHES EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6244	HYDROGEL DRESS GT 48 SQ W/O ADHES EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6243	HYDROGEL DRESS GT 16 LT EQU 48SQ NO ADHES	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6242	HYDROGEL DRESS 16 SQ/LT W/O ADHES EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6241	HYDROCOLLOID DRESS DRY FORM PER G	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6240	HYDROCOLLOID DRESS FIL PASTE-FL OZ	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6239	HYDROCOLLOID DRESS GT 48 SQ W/ADHES	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6238	HYDRCOLLOID DRESS GT 16LT EQU 48 W/ADHES	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6237	HYDROCOLLOID DRESS 16 SQ/LT W/ADHES	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A6236	HYDROCOLLOID DRESS GT 48 SQ W/O ADHES	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6235	HYDRCOLLOID DRESS GT 16LT EQU 48 NO ADHES	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6234	HYDRCOLLOID DRESS 16 SQ/LT W/O ADHES	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6233	GAUZ IMPREG HYDRGEL DIR WND GT 48 SQ	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6232	GAUZ IMPREG HYDRGEL DIR GT 16 LT EQU 48	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6231	GAUZ IMPREG HYDRGEL DIR WND 16 SQ/LT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6230	GAUZ IMPREG H2O/SALINE STERL GT 48 SQ	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6229	GAUZ IMPREG WATR/SALINE GT 16LT EQU 48 SQ	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6228	GAUZ IMPREG WATR/NL SALINE GT 16 SQ	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6224	GAUZ IMPREG NOT H2O/HYDROGEL GT 48 SQ	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6223	GAUZ IMPREG NOT H2O/HYDRGL GT 16LT EQU 48	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6222	GAUZ IMPREG NOT H2O/HYDRGEL 16 SQ/LT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6221	GAUZE NON-IMPREG GT 48 SQ W/ADHES	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6220	GAUZE NON-IMPREG GT 16 LT EQU 48 SQ ADHES	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6219	GAUZE NON-IMPREG STERL 16 SQ/LT ADHES	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6218	GAUZE NON-IMPREG NONSTERL GT 48 SQ	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A6217	GAUZE NON-IMPREG NONSTRL GT 16LT EQU 48SQ	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6216	GAUZE NON-IMPREG NONSTERL 16 SQ/LT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6215	FOAM DRESSING WOUND FIL STERL PER G	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6214	FOAM DRESS GT 48 SQ W/ADHES BORDR EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6213	FOAM DRESS GT 16 LT EQU 48 SQ W/ADHES EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6212	FOAM DRESS 16 SQ/LT W/ADHES BORDR EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6211	FOAM DRESS STERL GT 48 SQ NO ADHES	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6210	FOAM DRESS GT 16 LT EQU 48SQ W/O ADHES EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6209	FOAM DRESS STERL 16 SQ/LT NO ADHES	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6208	CONTACT LAYER GT 48 SQ EACH DRESSING	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6207	CNTC LAYER GT 16 SQ BUT LT EQU 48 SQ EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6206	CNTCT LAYR STERL 16 SQ IN/LT EA DRESS	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6205	COMPOS DRESS GT 48SQ W/ADHES BORDR EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6204	COMPOS DRESS GT 16 LT EQU 48 SQ W/ADHES	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6203	COMPOS DRESS 16 SQ/LT W/ADHES BORDR	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6199	ALGINAT/OTH FIBR GELL DRESS FIL-6IN	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A6198	ALGINAT/OTH FIBR GELL PAD GT 48 SQ EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6197	ALGINAT/OTH FIBR GELL GT 16LT EQU 48 SQEA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6196	ALGINAT/OTH FIBR GELL PAD 16 SQ/LT EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6025	GEL SHEET DERMAL/EPIDRMAL APPLIC EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6024	COLL DRESS WND FIL STERL PER 6 IN	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6023	COLL DRSG STERILE SZ GT 48 SQ IN EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6022	COLL DRSG STRLGT 16 BUTLT /EQU 48 SQ IN EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6021	COLL DRESS PAD SIZE 16 SQ/LESS EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6011	COLLEGEN WOUND FIL GEL/PASTE PER G	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6010	COLLEGEN WOUND FILLR DRY FORM PER G	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6000	NON-CNTC WND WARMING COVR W/DEVC	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5514	DIA MX DEN INS DIR CARV CSTM FAB EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	A5513	DIA ONLY MX DN INSRT CSTM MLD P F E	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5512	FOR DIAB ONLY MX DNSITY INSRT PRFAB	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5510	DIAB ONLY DIR FORM COMPRS MOLD FT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5508	DM ONLY DELUX FEATUR SHOE/CSTM MOLD	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A5507	DM ONLY NOS MOD SHOE/CSTM MOLD SHOE	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5506	DM ONLY MOD SHOE/CSTM OFF SET HEEL	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5505	DM ONLY MOD SHOE/CSTM W/MT BAR SHOE	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5504	DM ONLY MOD SHOE/CSTM W/WEDGE SHOE	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5503	DM ONLY MOD SHOE/CSTM ROLLER/ROCKER	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5501	DM ONLY CSTM PREP SHOE MOLD PTS FT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5500	DM ONLY CSTM PREP SHOE MX DNS INSRT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5200	PERQ CATH/TUBE ANCHR DEVC ADHES SKN	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5131	APPLINC CLNR INCONT&OST APPLN-16 OZ	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5126	ADHES/NON-ADHES; DISK/FOAM PAD	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5122	SKN BARRIER; SOLID 8X8/EQUVALNT EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5121	SKN BARRIER; SOLID 6X6/EQUVALNT EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5114	LEG STRAP; FOAM/FABRIC REPL-SET	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5113	LEG STRAP; LATEX REPLCMT ONLY-SET	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5112	URINARY DRAIN BAG LEG/ABD LATEX EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5105	URIN SUSPENSRY LEG BAG W/WO TUBE EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A5102	BEDSIDE DRN BOTTLE W/WO TUBING EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5083	CONT DEVICE STOMA ABSORPTIVE COVER	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5082	CONTINENT DEVC;CATH CONTINENT STOMA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5081	STOMA PLUG OR SEAL ANY TYPE	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5073	OST POUCH URIN; BARRIER W/FLNGE EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5072	OST POUCH URIN; W/O BARR ATTCH EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5071	OST POUCH URIN; W/BARRIER ATTCH EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5063	OST POUCH DRNABLE; BARR W/FLNGE EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5062	OST POUCH DRNABL; W/O BARR ATTCH EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5061	OST POUCH DRNABLE; W/BARR ATTCH EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5057	OST POUCH DRAIN BARR CONVX FLTR EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5056	OST POUCH DRAIN EXT BARRIER FLTR EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5054	OST POUCH CLOS; BARRIER W/FLNGE EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5053	OSTOMY POUCH CLOS; USE FACEPLATE EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5052	OST POUCH CLOS; W/O BARR ATTACH EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5051	OST POUCH CLOS; W/BARRIER ATTCH EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A4932	RECTAL THERMOMETER REUSBL TYPE EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4931	ORL THERMOMETER REUSBL ANY TYPE EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4918	VENOUS PRESSURE CLAMP HEMODIAL EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4860	DISPBL CATH TIP PERITON DIALYSIS-10	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4802	PROTAMINE SULFATE HEMODIAL-50 MG	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4774	AMMONIA TEST STRIPS DIALYSIS PER 50	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4773	OCCULT BLD TEST STRIPS DIALYSIS-50	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4772	BLD GLU TEST STRIPS DIALYSIS PER 50	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4771	SERUM CLOT TIME TUBE DIALYSIS-50	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4770	BLD COLLECTION TUBE VAC DIALYSIS-50	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4766	DIALYSATE SOL PERITON DIALYSIS-10ML	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4765	DIALYSATE POWDER PERITON DIALYSIS	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4760	DIALYSATE SOL TST KIT PERITON EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4755	BLD TUBING ART&VENOUS HEMODIAL EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4750	BLD TUBING ART/VENOUS HEMODIAL EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4740	SHUNT ACCESSRY HEMODIAL ANY TYPE EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	A4737	INJ ANESTHETIC DIALYSIS PER 10 ML	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4736	TOPICAL ANESTHETIC DIALYSIS PER G	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4730	FIST CANNULAT SET HEMODIALYSIS EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4728	DIALYSAT SOL NO-DXTRS CNTAIN 500 ML	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4726	DIALYSATE DEXTROSE FLGT 5999 CC PD	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4725	DIALYSATE FLGT 4999LT EQU 5999CC DIALYSIS	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4724	DIALYSATE FLGT 3999LT EQU 4999CC DIALYSIS	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4723	DIALYSATE FLGT 2999LT EQU 3999CC DIALYSIS	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4722	DIALYSATE FLGT 1999LT EQU 2999CC DIALYSIS	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4721	DIALYSATE FLGT 999LT EQU 1999CC DIALYSIS	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4720	DIALYSATE FLGT 249LT EQU 999 CC DIALYSIS	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4719	Y SET TUBING PERITONEAL DIALYSIS	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4714	TREATED H2O PERITON DIALYSIS-GALLON	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4709	ACID CONC SOL HEMODIAL-GALLON	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4708	ACTAT CONC SOL HEMODIAL-GALLON	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4707	BICARBONAT CONC PWDR HEMODIAL-PCKET	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A4706	BICARBONATE CONC SOL HEMODIAL-GAL	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4690	DIALYZER ALL TYPES SZS HEMODIAL EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4680	ACTIVATED CARBON FILTER HEMODIAL EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4674	CHEMS/ANTISPTC SOL CLEAN/STERL 8OZ	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4673	EXT LINE W/EASY LOCK CNCTR DIALYSIS	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4672	DRAIN EXT LINE STERILE DIALYSIS EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4671	DISPBL CYCLR SET USED W/CYCLR DIALY	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4660	SPHYGMOMANOMETER/BP W/CUFF&STETH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4653	PERITON DIALYSIS CATH ANCHR BELT EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4650	IMPLANTABLE RADIATION DOSIMETER EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4648	TISSUE MARKER IMPLANTBL ANY TYPE EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4642	IN-111 SATUMOMB PENDETID DX TO 6MCI	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4640	REPL PAD W/ALTRNAT PRSS PAD OWND PT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4639	REPL PAD INFRARD HEATING PAD SYS EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4638	REPL BATT PT-OWND EAR PULSE GEN EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4637	REPL TIP CANE CRUTCH WALKER EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A4636	REPL HANDGRIP CANE CRTCH/WALKER EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4635	UNDERARM PAD CRUTCH REPLACEMENT EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4634	REPLCMT BULB TX LGHT BOX TABOP MDL	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4633	REPLCMT BULB/LAMP UV LGHT TX SYS EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4630	REPL BATTRY TRNSQ ELEC STIM OWND PT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4629	TRACHEOST CARE KIT EST TRACHEOST	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4627	SPACR BAG/RESRVOR METRD DOSE INHAL	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4625	TRACHEOST CARE KIT NEW TRACHEOST	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4624	TRACHEAL SUCTN CATH NOT CLOS SYS EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4614	PEAK EXPIRATORY FLW METER HAND HELD	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4613	BATTRY CHARGER; REPL PT-OWNED VENT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4612	BATTRY CABLES; REPL PT-OWNED VENT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4611	BATTRY HEVY DUTY; REPL PT-OWND VENT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4606	O2 PROBE W/OXIMETER DEVICE REPLCMT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4605	TRACHEAL SUCTION CATH CLOS SYS EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4604	TUBING W/INTGR HEAT ELEM W/PAP DEVC	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A4602	REPL BA EXT IP OWND PT LI 1.5 V EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	A4601	LIB RECHARG NONPROSTHETIC USE REPL	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4600	SLEEVE INTERMITT LIMB COMP REPL EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4595	ELEC STIM SUPPLIES 2 LEAD PER MONTH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4566	SHOULDR SLING/VEST ABD RSTRN PREFAB	HCPCS - MED-SURG SUPPLIES	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	A4559	COUPLING GEL/PASTE W/US DEVC PER OZ	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4558	CONDUCTVE GEL/PASTE USE W/ELEC DEVC	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4557	LEAD WIRES PER PAIR	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4556	ELECTRODES PER PAIR	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4555	E/TRANSDUCR E-STIM U CA TX RPL ONLY	HCPCS - MED-SURG SUPPLIES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	A4553	NON-DISPOSABLE UNDERPADS ALL SIZES	HCPCS - MED-SURG SUPPLIES	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	A4500	SURG STOCKING BELOW KNEE LENGTH EA	HCPCS - MED-SURG SUPPLIES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4490	SURG STOCKING ABOVE KNEE LENGTH EA	HCPCS - MED-SURG SUPPLIES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4483	MOISTR EXCHGR DISPBL W/INVASV VENT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4481	TRACHEOSTOMA FLTR TYPE SZ EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4467	BELT STRAP SLV GARMENT/COV ANY TYPE	HCPCS - MED-SURG SUPPLIES	NO	01/27/2017	01/27/2017			

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MMAI-Medicare/Medicaid	A4463	SURG DRESSING HOLDER REUSABLE EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4461	SURG DRESSING HOLDR NON-REUSABLE EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4459	MAN PUMP-OP ENEMA SYS REUSE ANY TYP	HCPCS - MED-SURG SUPPLIES	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	A4456	ADHESIVE REMOVER WIPES ANY TYPE EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4455	ADHESIVE REMOVER/SOLVENT PER OUNCE	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4452	TAPE WATERPROOF PER 18 SQUARE IN	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4450	TAPE NON-WATERPROOF 18 SQUARE IN	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4434	OST POUCH URN;LOCK FLNG FAUCT VLV	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4433	OST POUCH URIN; BARR W/LOCK FLNG EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4432	OST POUCH URN;NO-LCK FLNG FAUCT VLV	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4431	OST POUCH URIN;BARR FAUCT TAP VLV	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4430	OST POUCH URN BLT-IN CNVX FAUCT VLV	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4429	OST POUCH URIN W/BLT-IN CONVX VALVE	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4428	OST POUCH URIN W/FAUCET TAP W/VALVE	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4427	OST POUCH DRN;BARR LOCK FLNG FLTR	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4426	OST POUCH DRNBL;BARR W/LOCK FLNG EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A4425	OST POUCH DRNBL; BARR NON-LOCK FLNG	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4424	OST POUCH DRNBL BARR ATTCH FILTR EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4423	OST POUCH CLOS; BARR W/LOCK FLNG EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4422	OST ABSORB MATL THICKN LQD STOML OP	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4420	OST POUCH CLO;USE BARR LOCK FLNG EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4419	OST POUCH CLOS; BARRIER W/NON-LOCK	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4418	OST POUCH CLOS; W/O BARR W/FILTR EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4417	OST POUCH CLO BARR W/BLT-IN CONVXIT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4416	OST POUCH CLO BARR ATTCH W/FILTR EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4415	OST SKN BARRIER W/O CONVX GT 4X4 IN	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4414	OST SKN BARRIER W/O CONVX 4X4 IN/LT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4413	OST POUCH DRNABL BARRIER FLNGE/FLTR	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4412	OST POUCH DRNBL BARR FLNGE W/O FLTR	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4411	OST SKN BARR SOLID 4X4/EQ W/CONVXTY	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4410	OST SKN BARR EXT W/O CONVX GT 4X4 IN	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4409	OST SKN BARR EXT W/O CONVX 4X4 IN/LT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A4408	OST SKN BARRIER W/CONVXITY GT 4X4 IN	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4407	OST SKN BARRIER W/CONVXITY 4X4 IN/LT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4406	OST SKN BARRIER PECTIN PASTE-OZ	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4405	OST SKN BARRIER NONPECTIN PASTE-OZ	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4399	OST IRRIG SPL; CONE/CATH W/WO BRUSH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4396	OSTOMY BELT W/PERISTOMAL HERN SUP	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4395	OST DEODORANT OST POUCH SOLID-TAB	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4394	OSTOMY DEODORANT W/WO LUB PER FL OZ	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4393	OST POUCH URIN EXT W/CONVXITY EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4392	OST POUCH URIN STD W/CONVXITY EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4391	OST POUCH URIN W/EXT WEAR BARR EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4390	OST POUCH DRNABLE EXT W/CONVXITY EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4389	OST POUCH DRNBL BARR BUILT-IN CONVX	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4388	OST POUCH DRNABL W/EXT WEAR BARR EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4387	OST POUCH CLOS BARR BUILT-IN CONVX	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4385	OST SKN BARRIER 4X4 EXT W/O CONVXTY	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A4384	OST FCEPLAT EQUVALNT SILCON RING EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4383	OST POUCH URIN USE FCEPLAT RUBR EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4382	OST POUCH URIN FCEPLAT HVY PLSTC EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4381	OST POUCH URIN USE FCEPLAT PLSTC EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4380	OST POUCH URIN W/FCEPLAT RUBR EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4379	OST POUCH URIN W/FCEPLAT PLSTC EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4378	OST POUCH DRAINABLE FCEPLAT RUBR EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4377	OST POUCH DRNABLE FCEPLAT PLSTC EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4376	OST POUCH DRNABLE W/FCEPLAT RUBR EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4375	OST POUCH DRNABLE W/FCEPLAT PLST EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4373	OST SKN BARR W/FLNGE BUILT-IN CONVX	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4372	OST SKIN BARR SOL 4X4/EQUV STD EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4364	ADHES LIQUID/EQUAL ANY TYPE-OUNCE	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4363	OSTOMY CLAMP ANY TYPE REPL ONLY EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4362	SKN BARRIER; SOLID 4X4/EQUVALNT; EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4360	DISP EXT URETHRAL CLAMP/COMP DEV EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A4358	URINARY LEG BAG; VINYL W/WO TUBE EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4357	BEDSID DRN BAG DAY/NGT W/WO TUBE EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4356	EXT URETHRAL CLAMP/COMPRS DEVICE EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4355	IRRIG TUBING CONT 3-WAY CATH EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4354	INSRTION TRAY W/DRN BAG W/O CATH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4353	INTERMIT URIN CATH W/INSERTION SPL	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4352	INTERMIT URIN CATH; COUDE TIP EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4351	INTERMIT URIN CATH; STRAIT TIP EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4349	MALE EXT CATH W/WO ADHES DISPBL EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4346	INDWLL CATH; FOLY 3-WAY CONT IRRIG	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4340	INDWELL CATHETER; SPECIALTY TYPE EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4338	INDWLL CATH; 2-WAY LATEX W/COAT EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4336	INCONT SUPPLY URETHRAL INSERT EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4334	URIN CATH ANCHR DEVICE LEG STRAP EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4333	URIN CATH ANCHR DEVC ADHES ATTCH EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4332	LUBRICNT INDIVIDUAL STERL PACKET EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A4331	EXT DRN TUBING W/CNCTOR/ADAPTR EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4330	PERIAN FECAL CLCT POUCH W/ADHES EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4328	FE EXT URIN CLCT DEVICE; POUCH EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4327	FE EXT URIN CLCT DEVC; METL CUP EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4326	MALE EXT CATH CLCT CHAMB ANY TYPE	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4322	IRRIGATION SYRINGE BULB/PISTON EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4321	THERAPEUTIC AGT URIN CATH IRRIG	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4320	IRRIG TRAY W/BULB/PISTON SYRINGE	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4316	INSRTION TRAY W/BAG 3-WAY CONT IRRG	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4315	INSRTION TRAY W/BAG 2-WAY SILCON	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4314	INSRTION TRAY W/BAG 2-WAY LATEX	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4313	INSRT TRAY W/O BAG 3-WAY CNT IRRIG	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4312	INSRTION TRAY W/O BAG 2-WAY SILCON	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4311	INSRTION TRAY W/O BAG 2-WAY LATEX	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4310	INSRTION TRAY W/O DRN BAG&W/O CATH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4306	DISPOSABL RX DEL SYS FLW LT 50 ML HR	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A4305	DISPBL RX DEL SYS RATE 50 ML/GT -HR	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4301	IMPL ACSS TOTAL CATH PORT/RESERVOIR	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4300	IMPL ACSS CATHETER EXTERNAL ACCESS	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4290	SACRAL NERVE STIM TEST LEAD EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4286	LOCKING RING BREAST PUMP REPLACMENT	HCPCS - MED-SURG SUPPLIES	NO	03/01/2016	03/01/2016			
MMAI-Medicare/Medicaid	A4285	POLYCARBATE BOTTLE BREAST PUMP REPL	HCPCS - MED-SURG SUPPLIES	NO	03/01/2016	03/01/2016			
MMAI-Medicare/Medicaid	A4284	BRST SHIELD&SPLSH PROTCTR PUMP REPL	HCPCS - MED-SURG SUPPLIES	NO	03/01/2016	03/01/2016			
MMAI-Medicare/Medicaid	A4283	CAP BREAST PUMP BOTTLE REPLACEMENT	HCPCS - MED-SURG SUPPLIES	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	A4280	ADHES SKN SUPP ATTCH BRST PROSTH EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4269	CONTRACEPTIVE SUPPLY SPERMICIDE EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4268	CONTRACEPT SUPPLY CONDOM FEMALE EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4267	CONTRACEPTIVE SUPPLY CONDOM MALE EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4264	PERM IMPL CONTRCPTV TUBAL OCCL DEV	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4263	PERM NONDISSOLV LAC DUCT IMPL EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4262	TEMP ABSORB LAC DUCT IMPLANT EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4258	SPRING-POWERED DEVICE LANCET EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A4257	REPL LENS SHIELD CARTRIDGE LASR SKN	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4256	NORMAL LOW&HI CALIBRATOR SOL/CHIPS	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4255	PLATFORMS HOM BLD GLU MON 50-BOX	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4252	BLOOD KETONE TEST/REAGENT STRIP EA	HCPCS - MED-SURG SUPPLIES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4250	URINE TEST/REAGENT STRIPS/TABLETS	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4248	CHLORHEXIDINE CONTAINING ANTISEPTIC	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4247	BETADINE/IODINE SWABS/WIPES PER BOX	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4246	BETADINE/PHISOHEX SOLUTION PER PINT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4236	REPL BATT SILVER OXIDE HOM BG MON	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4235	REPL BATT LITHIUM HOM BG MON OWN PT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4234	REPL BATT ALK J CELL HOM BG MON	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4233	REPL BATT ALK NOT J CELL HOM BG MON	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4232	SYRINGE NDLE EXT INSULIN PUMP STERL	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4231	INFUS SET EXT INSULIN PUMP NEEDLE	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4230	INFUS SET EXT INSULIN PUMP NONNDLE	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4226	S MNT INS IP DR ADJ TX CNT G SNS PW	HCPCS-MED-SURG SUPPLIES	NO	01/01/2020	01/01/2020			

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MMAI-Medicare/Medicaid	A4225	SPL EXT INS INF PMP SYR T CART ST E	HCPCS - MED-SURG SUPPLIES	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	A4224	SPL MAINT INSULIN INFUS CATH PER WK	HCPCS - MED-SURG SUPPLIES	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	A4223	INFUS SPL NO EXT INFUS PUMP CAS/BAG	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4222	INFUS SPL EXT RX INFUS PUMP CAS/BAG	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4221	SUPS MAINT NON-INS RX INFUS CATH PW	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4220	REFILL KIT IMPLANTABLE INFUS PUMP	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4218	STERL SALINE/WATR METRD DOSE 10 ML	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4216	STERL H2O SALINE & OR DXT DIL 10 ML	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4213	SYRINGE STERILE 20 CC/GREATER EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4212	NONCORING NEEDLE/STYLET W/WO CATH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4211	SUPPLIES SELF-ADMINED INJECTIONS	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4209	SYRINGE W/NEEDLE STERILE 5 CC/GT EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4208	SYRINGE W/NEEDLE STERILE 3 CC EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4207	SYRINGE W/NEEDLE STERILE 2 CC EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4206	SYRINGE W/NEEDLE STERIL 1 CC/LT EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A0998	AMBULANCE RSPN&TREATMENT NO TRNSPRT	HCPCS - TRANSPORTATION (INCL A	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A0888	NONCOVERED AMB MILEAGE PER MILE	HCPCS - TRANSPORTATION (INCL A	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	A0436	ROTARY WING AIR MILEAGE-STATUT MILE	HCPCS - TRANSPORTATION (INCL A	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	A0435	FIX WING AIR MILEAGE-STATUTE MILE	HCPCS - TRANSPORTATION (INCL A	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	A0432	PARAMED INTRCPT RURL NO 3 PARTY PAY	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A0429	AMB SERVICE BLS EMERGENCY TRANSPORT	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A0427	AMB SRVC ALS EMERG TRANSPORT LEVL 1	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A0424	EXTRA AMB ATTENDANT GROUND/AIR;	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A0422	AMB OXYGEN&O2 SPL LIFE SUSTAINING	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A0420	AMB WAITING TIME 1/2 HR INCREMENTS	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A0396	ALS SPCLIZD SRVC DISPBL SPL;INTUBAT	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A0394	ALS SPCLIZED SRVC DISPBL SPL; IV RX	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A0392	ALS SPCLIZED SRVC DISPBL SPL; DEFIB	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A0384	BLS SPCLIZED SRVC DISPBL SPL; DEFIB	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A0225	AMB SRVC NEONAT TRNSPRT EMERG 1 WAY	HCPCS - TRANSPORTATION (INCL A	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99607	MTMS BY PHARM ADDL 15 MIN	MEDICINE - MEDICATION MANAGEME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99606	MTMS BY PHARM EST 15 MIN	MEDICINE - MEDICATION MANAGEME	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	99605	MTMS BY PHARM NP 15 MIN	MEDICINE - MEDICATION MANAGEME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99512	HOME VISIT FOR HEMODIALYSIS	MEDICINE - HOME HEALTH PROCEDU	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	99511	HOME VISIT FECAL/ENEMA MGMT	MEDICINE - HOME HEALTH PROCEDU	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	99510	HOME VISIT SING/M/FAM COUNS	MEDICINE - HOME HEALTH PROCEDU	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	99509	HOME VISIT DAY LIFE ACTIVITY	MEDICINE - HOME HEALTH PROCEDU	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	99507	HOME VISIT CATH MAINTAIN	MEDICINE - HOME HEALTH PROCEDU	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	99506	HOME VISIT IM INJECTION	MEDICINE - HOME HEALTH PROCEDU	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	99505	HOME VISIT STOMA CARE	MEDICINE - HOME HEALTH PROCEDU	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	99504	HOME VISIT MECH VENTILATOR	MEDICINE - HOME HEALTH PROCEDU	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	99503	HOME VISIT RESP THERAPY	MEDICINE - HOME HEALTH PROCEDU	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	99499	UNLISTED E&M SERVICE	E & M - OTHER E/M SERVICES	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	99498	ADVNCD CARE PLAN ADDL 30 MIN	E & M - OTHER E/M SERVICES	NO	06/13/2016	06/13/2016			
MMAI-Medicare/Medicaid	99497	ADVNCD CARE PLAN 30 MIN	E & M - PREVENTIVE MEDICINE SE	NO	06/13/2016	06/13/2016			
MMAI-Medicare/Medicaid	99494	1ST/SBSQ PSYC COLLAB CARE	E & M - CARE PLAN OVERSIGHT	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	99493	SBSQ PSYC COLLAB CARE MGMT	E & M - CARE PLAN OVERSIGHT	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	99492	1ST PSYC COLLAB CARE MGMT	E & M - CARE PLAN OVERSIGHT	NO	01/01/2018	01/01/2018			

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MMAI-Medicare/Medicaid	99484	CARE MGMT SVC BHVL HLTH COND	E & M - CARE PLAN OVERSIGHT	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	99480	IC INF PBW 2501-5000 G SUBSQ	E & M - NEONATAL CRITICAL CARE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99479	IC LBW INF 1500-2500 G SUBSQ	E & M - NEONATAL CRITICAL CARE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99478	IC LBW INF LT 1500 GM SUBSQ	E & M - NEONATAL CRITICAL CARE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99477	INIT DAY HOSP NEONATE CARE	E & M - NEONATAL CRITICAL CARE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99476	PED CRIT CARE AGE 2-5 SUBSQ	E & M - PEDIATRIC CRITICAL CAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99475	PED CRIT CARE AGE 2-5 INIT	E & M - PEDIATRIC CRITICAL CAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99474	SELF-MEAS BP 2 READG BID 30D	E & M-PEDIATRIC CRITICAL CARE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	99473	SELF-MEAS BP PT EDUCAJ/TRAIN	E & M-PEDIATRIC CRITICAL CARE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	99472	PED CRITICAL CARE SUBSQ	E & M - PEDIATRIC CRITICAL CAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99471	PED CRITICAL CARE INITIAL	E & M - PEDIATRIC CRITICAL CAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99469	NEONATE CRIT CARE SUBSQ	E & M - NEONATAL CRITICAL CARE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99468	NEONATE CRIT CARE INITIAL	E & M - NEONATAL CRITICAL CARE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99465	NB RESUSCITATION	E & M - NEWBORN CARE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99463	SAME DAY NB DISCHARGE	E & M - NEWBORN CARE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99462	SBSQ NB EM PER DAY HOSP	E & M - NEWBORN CARE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	99461	INIT NB EM PER DAY NON-FAC	E & M - NEWBORN CARE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99460	INIT NB EM PER DAY HOSP	E & M - NEWBORN CARE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99458	REM PHYSIOL MNTR EA ADDL 20	E & M-SPECIAL E/M SERVICES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	99457	REM PHYSIOL MNTR 1ST 20 MIN	E & M - SPECIAL E/M SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	99456	DISABILITY EXAMINATION	E & M - SPECIAL E/M SERVICES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99455	WORK RELATED DISABILITY EXAM	E & M - SPECIAL E/M SERVICES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99454	REM MNTR PHYSIOL PARAM DEV	E & M - SPECIAL E/M SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	99453	REM MNTR PHYSIOL PARAM SETUP	E & M - SPECIAL E/M SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	99452	NTRPROF PH1/NTRNET/EHR RFRL	E & M - SPECIAL E/M SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	99451	NTRPROF PH1/NTRNET/EHR 5/GT	E & M - SPECIAL E/M SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	99450	BASIC LIFE DISABILITY EXAM	E & M - SPECIAL E/M SERVICES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99449	NTRPROF PH1/NTRNET/EHR 31/GT	E & M - PREVENTIVE MEDICINE SE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	99448	NTRPROF PH1/NTRNET/EHR 21-30	E & M - PREVENTIVE MEDICINE SE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	99447	NTRPROF PH1/NTRNET/EHR 11-20	E & M - PREVENTIVE MEDICINE SE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	99446	NTRPROF PH1/NTRNET/EHR 5-10	E & M - PREVENTIVE MEDICINE SE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	99429	UNLISTED PREVENTIVE SERVICE	E & M - PREVENTIVE MEDICINE SE	NO	09/01/2017	09/01/2017		Submit claims with medical records	

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MMAI-Medicare/Medicaid	99423	OL DIG E/M SVC 21+ MIN	E & M-PREVENTIVE MEDICINE SE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	99422	OL DIG E/M SVC 11-20 MIN	E & M-PREVENTIVE MEDICINE SE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	99421	OL DIG E/M SVC 5-10 MIN	E & M-PREVENTIVE MEDICINE SE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	99412	PREVENTIVE COUNSELING GROUP	E & M - PREVENTIVE MEDICINE SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99411	PREVENTIVE COUNSELING GROUP	E & M - PREVENTIVE MEDICINE SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99409	AUDIT/DAST OVER 30 MIN	E & M - PREVENTIVE MEDICINE SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99408	AUDIT/DAST 15-30 MIN	E & M - PREVENTIVE MEDICINE SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99407	BEHAV CHNG SMOKING GT 10 MIN	E & M - PREVENTIVE MEDICINE SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99406	BEHAV CHNG SMOKING 3-10 MIN	E & M - PREVENTIVE MEDICINE SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99397	PER PM REEVAL EST PAT 65+ YR	E & M - PREVENTIVE MEDICINE SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99396	PREV VISIT EST AGE 40-64	E & M - PREVENTIVE MEDICINE SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99395	PREV VISIT EST AGE 18-39	E & M - PREVENTIVE MEDICINE SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99394	PREV VISIT EST AGE 12-17	E & M - PREVENTIVE MEDICINE SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99393	PREV VISIT EST AGE 5-11	E & M - PREVENTIVE MEDICINE SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99392	PREV VISIT EST AGE 1-4	E & M - PREVENTIVE MEDICINE SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99391	PER PM REEVAL EST PAT INFANT	E & M - PREVENTIVE MEDICINE SE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	99387	INIT PM E/M NEW PAT 65+ YRS	E & M - PREVENTIVE MEDICINE SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99386	PREV VISIT NEW AGE 40-64	E & M - PREVENTIVE MEDICINE SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99385	PREV VISIT NEW AGE 18-39	E & M - PREVENTIVE MEDICINE SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99384	PREV VISIT NEW AGE 12-17	E & M - PREVENTIVE MEDICINE SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99383	PREV VISIT NEW AGE 5-11	E & M - PREVENTIVE MEDICINE SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99382	INIT PM E/M NEW PAT 1-4 YRS	E & M - PREVENTIVE MEDICINE SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99381	INIT PM E/M NEW PAT INFANT	E & M - PREVENTIVE MEDICINE SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99368	TEAM CONF W/O PAT BY HC PRO	E & M - INTERDISCIPLINARY CONF	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99367	TEAM CONF W/O PAT BY PHYS	E & M - INTERDISCIPLINARY CONF	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99366	TEAM CONF W/PAT BY HC PROF	E & M - INTERDISCIPLINARY CONF	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99359	PROLONG SERV W/O CONTACT ADD	E & M - PROLONGED SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99358	PROLONG SERVICE W/O CONTACT	E & M - PROLONGED SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99292	CRITICAL CARE ADDL 30 MIN	E & M - CRITICAL CARE SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99291	CRITICAL CARE FIRST HOUR	E & M - CRITICAL CARE SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99195	PHLEBOTOMY	MEDICINE - OTHER SERVICES AND	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99192	SPECIAL PUMP SERVICES	MEDICINE - OTHER SERVICES AND	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	99191	SPECIAL PUMP SERVICES	MEDICINE - OTHER SERVICES AND	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99190	SPECIAL PUMP SERVICES	MEDICINE - OTHER SERVICES AND	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99188	APP TOPICAL FLUORIDE VARNISH	E & M - NON-FACE-TO-FACE SERVI	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	99184	HYPOTHERMIA ILL NEONATE	MEDICINE - OTHER SERVICES AND	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	99183	HYPERBARIC OXYGEN THERAPY	MEDICINE - OTHER SERVICES AND	YES	02/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	99175	INDUCTION OF VOMITING	MEDICINE - OTHER SERVICES AND	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99173	VISUAL ACUITY SCREEN	MEDICINE - OTHER SERVICES AND	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99172	OCULAR FUNCTION SCREEN	MEDICINE - OTHER SERVICES AND	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99170	ANOGENITAL EXAM CHILD W IMAG	MEDICINE - OTHER SERVICES AND	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99157	MOD SED OTHER PHYS/QHP EA	MEDICINE - OTHER SERVICES AND	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	99156	MOD SED OTH PHYS/QHP 5/GT YRS	MEDICINE - QUALIFYING CIRCUMST	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	99155	MOD SED OTH PHYS/QHP LT 5 YRS	MEDICINE - OTHER SERVICES AND	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	99153	MOD SED SAME PHYS/QHP EA	MEDICINE - OTHER SERVICES AND	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	99152	MOD SED SAME PHYS/QHP 5/GT YRS	MEDICINE - QUALIFYING CIRCUMST	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	99151	MOD SED SAME PHYS/QHP LT 5 YRS	MEDICINE - QUALIFYING CIRCUMST	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	99091	COLLJ & INTERPJ DATA EA 30 D	MEDICINE - SPECIAL SERVICES, P	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	99082	UNUSUAL PHYSICIAN TRAVEL	MEDICINE - SPECIAL SERVICES, P	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	99080	SPECIAL REPORTS OR FORMS	MEDICINE - SPECIAL SERVICES, P	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99075	MEDICAL TESTIMONY	MEDICINE - SPECIAL SERVICES, P	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99060	OUT OF OFFICE EMERG MED SERV	MEDICINE - SPECIAL SERVICES, P	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99058	OFFICE EMERGENCY CARE	MEDICINE - SPECIAL SERVICES, P	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99056	MED SERVICE OUT OF OFFICE	MEDICINE - SPECIAL SERVICES, P	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99053	MED SERV 10PM-8AM 24 HR FAC	MEDICINE - SPECIAL SERVICES, P	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99051	MED SERV EVE/WKEND/HOLIDAY	MEDICINE - SPECIAL SERVICES, P	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99050	MEDICAL SERVICES AFTER HRS	MEDICINE - SPECIAL SERVICES, P	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99027	OUT-OF-HOSP ON CALL SERVICE	MEDICINE - SPECIAL SERVICES, P	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99026	IN-HOSPITAL ON CALL SERVICE	MEDICINE - SPECIAL SERVICES, P	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99024	POSTOP FOLLOW-UP VISIT	MEDICINE - SPECIAL SERVICES, P	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	98943	CHIROPRACT MANJ XTRSPINL 1/GT	MEDICINE - CHIROPRACTIC MANIPU	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	98942	CHIROPRACTIC MANJ 5 REGIONS	MEDICINE - CHIROPRACTIC MANIPU	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	98941	CHIROPRACT MANJ 3-4 REGIONS	MEDICINE - CHIROPRACTIC MANIPU	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	98940	CHIROPRACT MANJ 1-2 REGIONS	MEDICINE - CHIROPRACTIC MANIPU	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	98929	OSTEOPATH MANJ 9-10 REGIONS	MEDICINE - OSTEOPATHIC MANIPUL	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	98928	OSTEOPATH MANJ 7-8 REGIONS	MEDICINE - OSTEOPATHIC MANIPUL	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	98927	OSTEOPATH MANJ 5-6 REGIONS	MEDICINE - OSTEOPATHIC MANIPUL	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	98926	OSTEOPATH MANJ 3-4 REGIONS	MEDICINE - OSTEOPATHIC MANIPUL	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	98925	OSTEOPATH MANJ 1-2 REGIONS	MEDICINE - OSTEOPATHIC MANIPUL	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	97804	MEDICAL NUTRITION GROUP	MEDICINE - MEDICAL NUTRITION T	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	97803	MED NUTRITION INDIV SUBSEQ	MEDICINE - MEDICAL NUTRITION T	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	97802	MEDICAL NUTRITION INDIV IN	MEDICINE - MEDICAL NUTRITION T	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	97763	ORTHC/PROSTC MGMT SBSQ ENC	MEDICINE - PHYSICAL MEDICINE A	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	97761	PROSTHETIC TRAING 1ST ENC	MEDICINE - PHYSICAL MEDICINE A	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	97760	ORTHOTIC MGMT&TRAING 1ST ENC	MEDICINE - PHYSICAL MEDICINE A	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	97750	PHYSICAL PERFORMANCE TEST	MEDICINE - PHYSICAL MEDICINE A	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	97610	LOW FREQUENCY NON-THERMAL US	MEDICINE - PHYSICAL MEDICINE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	97602	WOUND(S) CARE NON-SELECTIVE	MEDICINE - PHYSICAL MEDICINE A	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	97546	WORK HARDENING ADD-ON	MEDICINE - PHYSICAL MEDICINE A	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	97545	WORK HARDENING	MEDICINE - PHYSICAL MEDICINE A	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	97542	WHEELCHAIR MNGMENT TRAINING	MEDICINE - PHYSICAL MEDICINE A	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	97533	SENSORY INTEGRATION	MEDICINE - PHYSICAL MEDICINE A	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	97167	OT EVAL HIGH COMPLEX 60 MIN	MEDICINE - PHYSICAL MEDICINE A	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	97166	OT EVAL MOD COMPLEX 45 MIN	MEDICINE - PHYSICAL MEDICINE A	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	97165	OT EVAL LOW COMPLEX 30 MIN	MEDICINE - PHYSICAL MEDICINE A	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	97164	PT RE-EVAL EST PLAN CARE	MEDICINE - PHYSICAL MEDICINE A	YES	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	97163	PT EVAL HIGH COMPLEX 45 MIN	MEDICINE - PHYSICAL MEDICINE A	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	97162	PT EVAL MOD COMPLEX 30 MIN	MEDICINE - PHYSICAL MEDICINE A	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	97161	PT EVAL LOW COMPLEX 20 MIN	MEDICINE - PHYSICAL MEDICINE A	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	97158	GRP ADAPT BHV TX BY PHY/QHP	MEDICINE - PHYSICAL MEDICINE A	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	97157	MULT FAM ADAPT BHV TX GDN	MEDICINE - PHYSICAL MEDICINE A	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	97156	FAM ADAPT BHV TX GDN PHY/QHP	MEDICINE - PHYSICAL MEDICINE A	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	97155	ADAPT BEHAVIOR TX PHYS/QHP	MEDICINE - PHYSICAL MEDICINE A	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	97154	GRP ADAPT BHV TX BY TECH	MEDICINE - PHYSICAL MEDICINE A	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	97153	ADAPTIVE BEHAVIOR TX BY TECH	MEDICINE - PHYSICAL MEDICINE A	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	97152	BHV ID SUPRT ASSMT BY 1 TECH	MEDICINE - PHYSICAL MEDICINE A	YES	01/01/2019	12/31/2078			

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MMAI-Medicare/Medicaid	97151	BHV ID ASSMT BY PHYS/QHP	MEDICINE - PHYSICAL MEDICINE A	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	97150	GROUP THERAPEUTIC PROCEDURES	MEDICINE - PHYSICAL MEDICINE A	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	97140	MANUAL THERAPY 1/GT REGIONS	MEDICINE - PHYSICAL MEDICINE A	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	97130	THER IVNTJ EA ADDL 15 MIN	MEDICINE-PHYSICAL MEDICINE A	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	97129	THER IVNTJ 1ST 15 MIN	MEDICINE-PHYSICAL MEDICINE A	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	97124	MASSAGE THERAPY	MEDICINE - PHYSICAL MEDICINE A	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	97116	GAIT TRAINING THERAPY	MEDICINE - PHYSICAL MEDICINE A	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	97113	AQUATIC THERAPY/EXERCISES	MEDICINE - PHYSICAL MEDICINE A	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	97112	NEUROMUSCULAR REEDUCATION	MEDICINE - PHYSICAL MEDICINE A	YES	02/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	97110	THERAPEUTIC EXERCISES	MEDICINE - PHYSICAL MEDICINE A	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	97028	ULTRAVIOLET THERAPY	MEDICINE - PHYSICAL MEDICINE A	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	97026	INFRARED THERAPY	MEDICINE - PHYSICAL MEDICINE A	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	97024	DIATHERMY EG MICROWAVE	MEDICINE - PHYSICAL MEDICINE A	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	97022	WHIRLPOOL THERAPY	MEDICINE - PHYSICAL MEDICINE A	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	97018	PARAFFIN BATH THERAPY	MEDICINE - PHYSICAL MEDICINE A	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	97016	VASOPNEUMATIC DEVICE THERAPY	MEDICINE - PHYSICAL MEDICINE A	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	97014	ELECTRIC STIMULATION THERAPY	MEDICINE - PHYSICAL MEDICINE A	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	97012	MECHANICAL TRACTION THERAPY	MEDICINE - PHYSICAL MEDICINE A	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	97010	HOT OR COLD PACKS THERAPY	MEDICINE - PHYSICAL MEDICINE A	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	96904	WHOLE BODY PHOTOGRAPHY	MEDICINE - SPECIAL DERMATOLOGI	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96574	DBRDMT PRMLG LES W/PDT	MEDICINE - PHOTODYNAMIC THERAP	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	96573	PDT DSTR PRMLG LES PHYS/QHP	MEDICINE - PHOTODYNAMIC THERAP	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	96571	PHOTODYNAMIC TX ADDL 15 MIN	MEDICINE - PHOTODYNAMIC THERAP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96570	PHOTODYNMC TX 30 MIN ADD-ON	MEDICINE - PHOTODYNAMIC THERAP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96567	PDT DSTR PRMLG LES SKN	MEDICINE - PHOTODYNAMIC THERAP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96542	CHEMOTHERAPY INJECTION	MEDICINE - CHEMOTHERAPY ADMINI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96523	IRRIG DRUG DELIVERY DEVICE	MEDICINE - CHEMOTHERAPY ADMINI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96522	REFILL/MAINT PUMP/RESVR SYST	MEDICINE - CHEMOTHERAPY ADMINI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96521	REFILL/MAINT PORTABLE PUMP	MEDICINE - CHEMOTHERAPY ADMINI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96450	CHEMOTHERAPY INTO CNS	MEDICINE - CHEMOTHERAPY ADMINI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96425	CHEMOTHERAPY INFUSION METHOD	MEDICINE - CHEMOTHERAPY ADMINI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96423	CHEMO IA INFUSE EACH ADDL HR	MEDICINE - CHEMOTHERAPY ADMINI	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	96422	CHEMO IA INFUSION UP TO 1 HR	MEDICINE - CHEMOTHERAPY ADMINI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96420	CHEMO IA PUSH TECNIQUE	MEDICINE - CHEMOTHERAPY ADMINI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96417	CHEMO IV INFUS EACH ADDL SEQ	MEDICINE - CHEMOTHERAPY ADMINI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96416	CHEMO PROLONG INFUSE W/PUMP	MEDICINE - CHEMOTHERAPY ADMINI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96415	CHEMO IV INFUSION ADDL HR	MEDICINE - CHEMOTHERAPY ADMINI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96413	CHEMO IV INFUSION 1 HR	MEDICINE - CHEMOTHERAPY ADMINI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96411	CHEMO IV PUSH ADDL DRUG	MEDICINE - CHEMOTHERAPY ADMINI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96409	CHEMO IV PUSH SNGL DRUG	MEDICINE - CHEMOTHERAPY ADMINI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96406	CHEMO INTRALESIONAL OVER 7	MEDICINE - CHEMOTHERAPY ADMINI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96405	CHEMO INTRALESIONAL UP TO 7	MEDICINE - CHEMOTHERAPY ADMINI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96402	CHEMO HORMON ANTINEOPL SQ/IM	MEDICINE - CHEMOTHERAPY ADMINI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96401	CHEMO ANTI-NEOPL SQ/IM	MEDICINE - CHEMOTHERAPY ADMINI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96377	APPLICATON ON-BODY INJECTOR	MEDICINE - INFUSION	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	96376	TX/PRO/DX INJ SAME DRUG ADON	MEDICINE - INJECTION	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96375	TX/PRO/DX INJ NEW DRUG ADDON	MEDICINE - INJECTION	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96374	THER/PROPH/DIAG INJ IV PUSH	MEDICINE - INJECTION	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	96373	THER/PROPH/DIAG INJ IA	MEDICINE - INJECTION	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96372	THER/PROPH/DIAG INJ SC/IM	MEDICINE - INJECTION	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96371	SC THER INFUSION RESET PUMP	MEDICINE - INFUSION	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96370	SC THER INFUSION ADDL HR	MEDICINE - INFUSION	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96369	SC THER INFUSION UP TO 1 HR	MEDICINE - INFUSION	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96368	THER/DIAG CONCURRENT INF	MEDICINE - INFUSION	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96367	TX/PROPH/DG ADDL SEQ IV INF	MEDICINE - INFUSION	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96366	THER/PROPH/DIAG IV INF ADDON	MEDICINE - INFUSION	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96365	THER/PROPH/DIAG IV INF INIT	MEDICINE - INFUSION	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96361	HYDRATE IV INFUSION ADD-ON	MEDICINE - HYDRATION	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96360	HYDRATION IV INFUSION INIT	MEDICINE - HYDRATION	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96171	HLTH BHV IVNTJ FAM W/O PT EA	MEDICINE-HEALTH & BEHAVIOR	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	96170	HLTH BHV IVNTJ FAM WO PT 1ST	MEDICINE-HEALTH & BEHAVIOR	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	96168	HLTH BHV IVNTJ FAM EA ADDL	MEDICINE-HEALTH & BEHAVIOR	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	96167	HLTH BHV IVNTJ FAM 1ST 30	MEDICINE-HEALTH & BEHAVIOR	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	96165	HLTH BHV IVNTJ GRP EA ADDL	MEDICINE-HEALTH & BEHAVIOR	NO	01/01/2020	01/01/2020			

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MMAI-Medicare/Medicaid	96164	HLTH BHV IVNTJ GRP 1ST 30	MEDICINE-HEALTH & BEHAVIOR	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	96161	CAREGIVER HEALTH RISK ASSMT	MEDICINE - HEALTH AND BEHAVIOR	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	96160	PT-FOCUSED HLTH RISK ASSMT	MEDICINE - HEALTH AND BEHAVIOR	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	96159	HLTH BHV IVNTJ INDIV EA ADDL	MEDICINE-HEALTH & BEHAVIOR	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	96158	HLTH BHV IVNTJ INDIV 1ST 30	MEDICINE-HEALTH & BEHAVIOR	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	96156	HLTH BHV ASSMT/REASSESSMENT	MEDICINE-HEALTH & BEHAVIOR	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	96146	PSYCL/NRPSYC TST AUTO RESULT	MEDICINE - HEALTH AND BEHAVIOR	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	96139	PSYCL/NRPSYC TST TECH EA	MEDICINE - HEALTH AND BEHAVIOR	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	96138	PSYCL/NRPSYC TECH 1ST	MEDICINE - HEALTH AND BEHAVIOR	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	96137	PSYCL/NRPSYC TST PHY/QHP EA	MEDICINE - HEALTH AND BEHAVIOR	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	96136	PSYCL/NRPSYC TST PHY/QHP 1ST	MEDICINE - HEALTH AND BEHAVIOR	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	96133	NRPSYC TST EVAL PHYS/QHP EA	MEDICINE - HEALTH AND BEHAVIOR	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	96132	NRPSYC TST EVAL PHYS/QHP 1ST	MEDICINE - HEALTH AND BEHAVIOR	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	96131	PSYCL TST EVAL PHYS/QHP EA	MEDICINE - HEALTH AND BEHAVIOR	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	96130	PSYCL TST EVAL PHYS/QHP 1ST	MEDICINE - HEALTH AND BEHAVIOR	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	96127	BRIEF EMOTIONAL/BEHAV ASSMT	MEDICINE - HEALTH AND BEHAVIOR	NO	06/30/2020	06/30/2020	Other		

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MMAI-Medicare/Medicaid	96125	COGNITIVE TEST BY HC PRO	MEDICINE - NEUROLOGY AND NEURO	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	96121	NUBHVL XM PHY/QHP EA ADDL HR	MEDICINE - CENTRAL NERVOUS SYS	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	96116	NUBHVL XM PHYS/QHP 1ST HR	MEDICINE - NEUROLOGY AND NEURO	NO	10/12/2020	10/12/2020			
MMAI-Medicare/Medicaid	96113	DEVEL TST PHYS/QHP EA ADDL	MEDICINE - CENTRAL NERVOUS SYS	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	96112	DEVEL TST PHYS/QHP 1ST HR	MEDICINE - CENTRAL NERVOUS SYS	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	96110	DEVELOPMENTAL SCREEN W/SCORE	MEDICINE - CENTRAL NERVOUS SYS	NO	09/06/2016	09/06/2016			
MMAI-Medicare/Medicaid	96105	ASSESSMENT OF APHASIA	MEDICINE - CENTRAL NERVOUS SYS	YES	07/25/2016	12/31/2078			
MMAI-Medicare/Medicaid	96002	DYNAMIC SURFACE EMG	MEDICINE - NEUROLOGY AND NEURO	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	96001	MOTION TEST W/FT PRESS MEAS	MEDICINE - NEUROLOGY AND NEURO	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	96000	MOTION ANALYSIS VIDEO/3D	MEDICINE - NEUROLOGY AND NEURO	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	95992	CANALITH REPOSITIONING PROC	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95990	SPIN/BRAIN PUMP REFIL & MAIN	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95984	ALYS BRN NPGT PRGRMG ADDL 15	MEDICINE - NEUROLOGY AND NEURO	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	95983	ALYS BRN NPGT PRGRMG 15 MIN	MEDICINE - NEUROLOGY AND NEURO	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	95982	IO GA N-STIM SUBSQ W/REPROG	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95981	IO ANAL GAST N-STIM SUBSQ	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	95980	IO ANAL GAST N-STIM INIT	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95977	ALYS CPLX CN NPGT PRGRMG	MEDICINE - NEUROLOGY AND NEURO	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	95976	ALYS SMPL CN NPGT PRGRMG	MEDICINE - NEUROLOGY AND NEURO	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	95970	ALYS NPGT W/O PRGRMG	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95967	MEG EVOKED EACH ADDL	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95966	MEG EVOKED SINGLE	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95965	MEG SPONTANEOUS	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95958	EEG MONITORING/FUNCTION TEST	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95957	EEG DIGITAL ANALYSIS	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95955	EEG DURING SURGERY	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95941	IONM REMOTE/GT 1 PT OR PER HR	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95939	C MOTOR EVOKED UPR&LWR LIMBS	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95938	SOMATOSENSORY TESTING	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95937	NEUROMUSCULAR JUNCTION TEST	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95933	BLINK REFLEX TEST	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95930	VISUAL EP TEST CNS W/I&R	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	95929	C MOTOR EVOKED LWR LIMBS	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95928	C MOTOR EVOKED UPPR LIMBS	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95927	SOMATOSENSORY TESTING	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95926	SOMATOSENSORY TESTING	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95925	SOMATOSENSORY TESTING	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95923	AUTONOMIC NRV SYST FUNJ TEST	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95922	AUTONOMIC NRV ADRENRG INERVJ	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95921	AUTONOMIC NRV PARASYM INERVJ	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95913	NRV CNDJ TEST 13/GT STUDIES	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95905	MOTOR &/ SENS NRVE CNDJ TEST	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95887	MUSC TST DONE W/N TST NONEXT	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95886	MUSC TEST DONE W/N TEST COMP	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95885	MUSC TST DONE W/NERV TST LIM	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95875	LIMB EXERCISE TEST	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95874	GUIDE NERV DESTR NEEDLE EMG	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95873	GUIDE NERV DESTR ELEC STIM	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	95857	CHOLINESTERASE CHALLENGE	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95852	RANGE OF MOTION MEASUREMENTS	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95851	RANGE OF MOTION MEASUREMENTS	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95836	ECOG IMPLTD BRN NPGT LT 30 D	MEDICINE - NEUROLOGY AND NEURO	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	95829	SURGERY ELECTROCORTICOGRAM	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95824	EEG CEREBRAL DEATH ONLY	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95822	EEG COMA OR SLEEP ONLY	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95819	EEG AWAKE AND ASLEEP	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95816	EEG AWAKE AND DROWSY	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95813	EEG EXTND MNTR 61-119 MIN	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95812	EEG 41-60 MINUTES	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95811	POLYSOM 6/GT YRS CPAP 4/GT PARM	MEDICINE - NEUROLOGY AND NEURO	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	95810	POLYSOM 6/GT YRS 4/GT PARAM	MEDICINE - NEUROLOGY AND NEURO	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	95808	POLYSOM ANY AGE 1-3GT PARAM	MEDICINE - NEUROLOGY AND NEURO	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	95807	SLEEP STUDY ATTENDED	MEDICINE - NEUROLOGY AND NEURO	YES	02/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	95806	SLEEP STUDY UNATT&RESP EFFT	MEDICINE - NEUROLOGY AND NEURO	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	95805	MULTIPLE SLEEP LATENCY TEST	MEDICINE - NEUROLOGY AND NEURO	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	95803	ACTIGRAPHY TESTING	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95801	SLP STDY UNATND W/ANAL	MEDICINE - NEUROLOGY AND NEURO	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	95800	SLP STDY UNATTENDED	MEDICINE - NEUROLOGY AND NEURO	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	95783	POLYSOM LT 6 YRS CPAP/BILVL	MEDICINE - NEUROLOGY AND NEURO	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	95782	POLYSOM LT 6 YRS 4/GT PARAMTRS	MEDICINE - NEUROLOGY AND NEURO	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	95726	EEG PHY/QHPGT 84 HR W/VEEG	MEDICINE-NEUROLOGY & NEURO	YES	12/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	95725	EEG PHY/QHPGT 84 HR W/O VID	MEDICINE-NEUROLOGY & NEURO	YES	12/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	95724	EEG PHY/QHPGT 60LT 84 HR W/VEEG	MEDICINE-NEUROLOGY & NEURO	YES	12/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	95723	EEG PHY/QHPGT 60LT 84 HR W/O VID	MEDICINE-NEUROLOGY & NEURO	YES	12/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	95722	EEG PHY/QHPGT 36LT 60 HR W/VEEG	MEDICINE-NEUROLOGY & NEURO	YES	12/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	95721	EEG PHY/QHPGT 36LT 60 HR W/O VID	MEDICINE-NEUROLOGY & NEURO	YES	12/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	95720	EEG PHY/QHP EA INCR W/VEEG	MEDICINE-NEUROLOGY & NEURO	YES	12/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	95719	EEG PHYS/QHP EA INCR W/O VID	MEDICINE-NEUROLOGY & NEURO	YES	12/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	95718	EEG PHYS/QHP 2-12 HR W/VEEG	MEDICINE-NEUROLOGY & NEURO	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	95717	EEG PHYS/QHP 2-12 HR W/O VID	MEDICINE-NEUROLOGY & NEURO	NO	01/01/2020	01/01/2020			

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MMAI-Medicare/Medicaid	95716	VEEG EA 12-26HR CONT MNTR	MEDICINE-NEUROLOGY & NEURO	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	95715	VEEG EA 12-26HR INTMT MNTR	MEDICINE-NEUROLOGY & NEURO	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	95714	VEEG EA 12-26 HR UNMNTR	MEDICINE-NEUROLOGY & NEURO	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	95713	VEEG 2-12 HR CONT MNTR	MEDICINE-NEUROLOGY & NEURO	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	95712	VEEG 2-12 HR INTMT MNTR	MEDICINE-NEUROLOGY & NEURO	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	95711	VEEG 2-12 HR UNMONITORED	MEDICINE-NEUROLOGY & NEURO	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	95710	EEG W/O VID EA 12-26HR CONT	MEDICINE-NEUROLOGY & NEURO	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	95709	EEG W/O VID EA 12-26HR INTMT	MEDICINE-NEUROLOGY & NEURO	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	95708	EEG WO VID EA 12-26HR UNMNTR	MEDICINE-NEUROLOGY & NEURO	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	95707	EEG W/O VID 2-12HR CONT MNTR	MEDICINE-NEUROLOGY & NEURO	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	95706	EEG WO VID 2-12HR INTMT MNTR	MEDICINE-NEUROLOGY & NEURO	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	95705	EEG W/O VID 2-12 HR UNMNTR	MEDICINE-NEUROLOGY & NEURO	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	95700	EEG CONT REC W/VID EEG TECH	MEDICINE-NEUROLOGY & NEURO	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	95251	CONT GLUC MNTR ANALYSIS I&R	MEDICINE - ENDOCRINOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95250	CONT GLUC MNTR PHYS/QHP EQP	MEDICINE - ENDOCRINOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95249	CONT GLUC MNTR PT PROV EQP	MEDICINE - ENDOCRINOLOGY	NO	01/01/2018	01/01/2018			

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MMAI-Medicare/Medicaid	95180	RAPID DESENSITIZATION	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95170	ANTIGEN THERAPY SERVICES	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95165	ANTIGEN THERAPY SERVICES	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95149	ANTIGEN THERAPY SERVICES	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95148	ANTIGEN THERAPY SERVICES	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95147	ANTIGEN THERAPY SERVICES	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95146	ANTIGEN THERAPY SERVICES	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95145	ANTIGEN THERAPY SERVICES	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95144	ANTIGEN THERAPY SERVICES	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95125	IMMUNOTHERAPY 2/GT INJECTIONS	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95117	IMMUNOTHERAPY INJECTIONS	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95115	IMMUNOTHERAPY ONE INJECTION	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94781	CARS/BD TST INFT-12MO +30MIN	MEDICINE - PULMONARY	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	94780	CARS/BD TST INFT-12MO 60 MIN	MEDICINE - PULMONARY	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	94776	PED HOME APNEA REC DOWNLD	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94775	PED HOME APNEA REC HK-UP	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	94772	BREATH RECORDING INFANT	MEDICINE - PULMONARY	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	94762	MEASURE BLOOD OXYGEN LEVEL	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94761	MEASURE BLOOD OXYGEN LEVEL	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94760	MEASURE BLOOD OXYGEN LEVEL	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94729	CO/MEMBANE DIFFUSE CAPACITY	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94728	AIRWY RESIST BY OSCILLOMETRY	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94727	PULM FUNCTION TEST BY GAS	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94726	PULM FUNCT TST PLETHYSMOGRAP	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94680	EXHALED AIR ANALYSIS O2	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94669	MECHANICAL CHEST WALL OSCILL	MEDICINE - PULMONARY	NO	10/01/2017	10/01/2017			
MMAI-Medicare/Medicaid	94668	CHEST WALL MANIPULATION	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94667	CHEST WALL MANIPULATION	MEDICINE - PULMONARY	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	94664	EVALUATE PT USE OF INHALER	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94662	NEG PRESS VENTILATION CNP	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94660	POS AIRWAY PRESSURE CPAP	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94645	CBT EACH ADDL HOUR	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	94644	CBT 1ST HOUR	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94642	AEROSOL INHALATION TREATMENT	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94640	AIRWAY INHALATION TREATMENT	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94621	CARDIOPULM EXERCISE TESTING	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94450	HYPOXIA RESPONSE CURVE	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94375	RESPIRATORY FLOW VOLUME LOOP	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94200	LUNG FUNCTION TEST (MBC/MVV)	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94150	VITAL CAPACITY TEST	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94070	EVALUATION OF WHEEZING	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94060	EVALUATION OF WHEEZING	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94015	PATIENT RECORDED SPIROMETRY	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94013	MEAS LUNG VOL THRU 2 YRS	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94012	SPIRMTRY W/BRNCHDIL INF-2 YR	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94011	SPIROMETRY UP TO 2 YRS OLD	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94010	BREATHING CAPACITY TEST	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94005	HOME VENT MGMT SUPERVISION	MEDICINE - VENTILATOR MGMT	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	94004	VENT MGMT NF PER DAY	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94003	VENT MGMT INPAT SUBQ DAY	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94002	VENT MGMT INPAT INIT DAY	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93990	DOPPLER FLOW TESTING	MEDICINE - NON-INVASIVE VASCUL	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	93986	DUP-SCAN HEMO COMPL UNI STD	MEDICINE-NON-INVASIVE VASCUL	YES	12/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	93985	DUP-SCAN HEMO COMPL BI STD	MEDICINE-NON-INVASIVE VASCUL	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	93981	PENILE VASCULAR STUDY	MEDICINE - NON-INVASIVE VASCUL	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	93980	PENILE VASCULAR STUDY	MEDICINE - NON-INVASIVE VASCUL	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	93979	VASCULAR STUDY	MEDICINE - NON-INVASIVE VASCUL	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	93978	VASCULAR STUDY	MEDICINE - NON-INVASIVE VASCUL	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	93976	VASCULAR STUDY	MEDICINE - NON-INVASIVE VASCUL	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	93975	VASCULAR STUDY	MEDICINE - NON-INVASIVE VASCUL	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	93971	EXTREMITY STUDY	MEDICINE - NON-INVASIVE VASCUL	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	93970	EXTREMITY STUDY	MEDICINE - NON-INVASIVE VASCUL	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	93931	UPPER EXTREMITY STUDY	MEDICINE - NON-INVASIVE VASCUL	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	93930	UPPER EXTREMITY STUDY	MEDICINE - NON-INVASIVE VASCUL	NO	12/14/2017	12/14/2017			

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MMAI-Medicare/Medicaid	93926	LOWER EXTREMITY STUDY	MEDICINE - NON-INVASIVE VASCUL	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	93925	LOWER EXTREMITY STUDY	MEDICINE - NON-INVASIVE VASCUL	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	93924	LWR XTR VASC STDY BILAT	MEDICINE - NON-INVASIVE VASCUL	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	93923	UPR/LXTR ART STDY 3+ LVLS	MEDICINE - NON-INVASIVE VASCUL	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	93922	UPR/L XTREMITY ART 2 LEVELS	MEDICINE - NON-INVASIVE VASCUL	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	93892	TCD EMBOLI DETECT W/O INJ	MEDICINE - NON-INVASIVE VASCUL	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	93888	INTRACRANIAL LIMITED STUDY	MEDICINE - NON-INVASIVE VASCUL	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	93886	INTRACRANIAL COMPLETE STUDY	MEDICINE - NON-INVASIVE VASCUL	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	93882	EXTRACRANIAL UNI/LTD STUDY	MEDICINE - NON-INVASIVE VASCUL	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	93880	EXTRACRANIAL BILAT STUDY	MEDICINE - NON-INVASIVE VASCUL	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	93793	ANTICOAG MGMT PT WARFARIN	MEDICINE - CARDIOVASCULAR	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	93792	PT/CAREGIVER TRAING HOME INR	MEDICINE - CARDIOVASCULAR	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	93790	AMBL BP MNTR W/SW I&R	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93788	AMBL BP MNTR W/SW A/R	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93786	AMBL BP MNTR W/SW REC ONLY	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93784	AMBL BP MNTR W/SOFTWARE	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	93740	TEMPERATURE GRADIENT STUDIES	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93701	BIOIMPEDANCE CV ANALYSIS	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93668	PERIPHERAL VASCULAR REHAB	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93662	INTRACARDIAC ECG (ICE)	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93660	TILT TABLE EVALUATION	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93615	ESOPHAGEAL RECORDING	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93612	INTRAVENTRICULAR PACING	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93603	RIGHT VENTRICULAR RECORDING	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93592	PERQ TRANSCATH CLOSURE EACH	MEDICINE - CARDIOVASCULAR	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	93591	PERQ TRANSCATH CLS AORTIC	MEDICINE - CARDIOVASCULAR	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	93590	PERQ TRANSCATH CLS MITRAL	MEDICINE - CARDIOVASCULAR	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	93583	PERQ TRANSCATH SEPTAL REDUXN	MEDICINE - CARDIOVASCULAR	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	93582	PERQ TRANSCATH CLOSURE PDA	MEDICINE - CARDIOVASCULAR	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	93581	TRANSCATH CLOSURE OF VSD	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93580	TRANSCATH CLOSURE OF ASD	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93572	HEART FLOW RESERVE MEASURE	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	93571	HEART FLOW RESERVE MEASURE	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93503	INSERT/PLACE HEART CATHETER	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93464	EXERCISE W/HEMODYNAMIC MEAS	MEDICINE - CARDIOVASCULAR	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	93463	DRUG ADMIN & HEMODYNMIC MEAS	MEDICINE - CARDIOVASCULAR	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	93298	REM INTERROG DEV EVAL SCRMS	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93297	REM INTERROG DEV EVAL ICPMS	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93296	REM INTERROG EVL PM/IDS	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93295	DEV INTERROG REMOTE 1/2/MLT	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93294	REM INTERROG EVL PM/LDLS PM	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93291	INTERROG DEV EVAL SCRMS IP	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93290	INTERROG DEV EVAL ICPMS IP	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93289	INTERROG DEVICE EVAL HEART	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93288	INTERROG EVL PM/LDLS PM IP	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93287	PERI-PX DEVICE EVAL & PRGR	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93286	PERI-PX EVAL PM/LDLS PM IP	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93285	PRGRMG DEV EVAL SCRMS IP	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	93284	PRGRMG EVAL IMPLANTABLE DFB	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93283	PRGRMG EVAL IMPLANTABLE DFB	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93282	PRGRMG EVAL IMPLANTABLE DFB	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93279	PRGRMG DEV EVAL PM/LDLS PM	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93278	ECG/SIGNAL-AVERAGED	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93271	ECG/MONITORING AND ANALYSIS	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93270	REMOTE 30 DAY ECG REV/REPORT	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93264	REM MNTR WRLS P-ART PRS SNR	MEDICINE - CARDIOVASCULAR	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	93261	INTERROGATE SUBQ DEFIB	MEDICINE - CARDIOVASCULAR	NO	08/14/2018	08/14/2018			
MMAI-Medicare/Medicaid	93260	PRGRMG DEV EVAL IMPLTBL SYS	MEDICINE - CARDIOVASCULAR	NO	08/14/2018	08/14/2018			
MMAI-Medicare/Medicaid	93042	RHYTHM ECG REPORT	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93041	RHYTHM ECG TRACING	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93040	RHYTHM ECG WITH REPORT	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93025	MICROVOLT T-WAVE ASSESS	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93018	CARDIOVASCULAR STRESS TEST	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93017	CARDIOVASCULAR STRESS TEST	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	93010	ELECTROCARDIOGRAM REPORT	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93005	ELECTROCARDIOGRAM TRACING	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93000	ELECTROCARDIOGRAM COMPLETE	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92998	PUL ART BALLOON REPR PERCUT	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92997	PUL ART BALLOON REPR PERCUT	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92990	REVISION OF PULMONARY VALVE	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92987	REVISION OF MITRAL VALVE	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92986	REVISION OF AORTIC VALVE	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92979	ENDOLUMINL IVUS OCT C EA	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92978	ENDOLUMINL IVUS OCT C 1ST	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92977	DISSOLVE CLOT HEART VESSEL	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92975	DISSOLVE CLOT HEART VESSEL	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92974	CATH PLACE CARDIO BRACHYTX	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92971	CARDIOASSIST EXTERNAL	MEDICINE - CARDIOVASCULAR	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	92970	CARDIOASSIST INTERNAL	MEDICINE - CARDIOVASCULAR	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	92961	CARDIOVERSION ELECTRIC INT	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	92960	CARDIOVERSION ELECTRIC EXT	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92953	TEMPORARY EXTERNAL PACING	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92950	HEART/LUNG RESUSCITATION CPR	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92640	AUD BRAINSTEM IMPLT PROGRAMG	MEDICINE - SPECIAL OTORHINOLAR	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	92627	EVAL AUD FUNCJ EA ADDL 15	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92626	EVAL AUD FUNCJ 1ST HOUR	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92625	TINNITUS ASSESSMENT	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92621	AUDITORY FUNCTION + 15 MIN	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92620	AUDITORY FUNCTION 60 MIN	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92618	EX FOR NONSPEECH DEV RX ADD	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92617	FEES W/LARYNGEAL SENSE I&R	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92616	FEES W/LARYNGEAL SENSE TEST	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92615	LARYNGOSCOPIC SENSORY I&R	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92614	LARYNGOSCOPIC SENSORY VID	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92613	ENDOSCOPY SWALLOW (FEES) I&R	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92612	ENDOSCOPY SWALLOW (FEES) VID	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	92611	MOTION FLUOROSCOPY/SWALLOW	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92610	EVALUATE SWALLOWING FUNCTION	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92609	USE OF SPEECH DEVICE SERVICE	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92608	EX FOR SPEECH DEVICE RX ADDL	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92607	EX FOR SPEECH DEVICE RX 1HR	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92606	NON-SPEECH DEVICE SERVICE	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92605	EX FOR NONSPEECH DEVICE RX	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92604	REPROGRAM COCHLEAR IMPLT 7/GT	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92603	COCHLEAR IMPLT F/UP EXAM 7/GT	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92602	REPROGRAM COCHLEAR IMPLT LT 7	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92601	COCHLEAR IMPLT F/UP EXAM LT 7	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92597	ORAL SPEECH DEVICE EVAL	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92596	EAR PROTECTOR EVALUATION	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92595	ELECTRO HEARNG AID TST BOTH	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92594	ELECTRO HEARNG AID TEST ONE	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92588	EVOKED AUDITORY TST COMPLETE	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	92587	EVOKED AUDITORY TEST LIMITED	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92584	ELECTROCOCHLEOGRAPHY	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92583	SELECT PICTURE AUDIOMETRY	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92582	CONDITIONING PLAY AUDIOMETRY	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92579	VISUAL AUDIOMETRY (VRA)	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92577	STENGER TEST SPEECH	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92572	STAGGERED SPONDAIC WORD TEST	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92570	ACOUSTIC IMMITANCE TESTING	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92568	ACOUSTIC REFL THRESHOLD TST	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92565	STENGER TEST PURE TONE	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92563	TONE DECAY HEARING TEST	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92562	LOUDNESS BALANCE TEST	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92558	EVOKED AUDITORY TEST QUAL	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92557	COMPREHENSIVE HEARING TEST	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92556	SPEECH AUDIOMETRY COMPLETE	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92555	SPEECH THRESHOLD AUDIOMETRY	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	92553	AUDIOMETRY AIR & BONE	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92552	PURE TONE AUDIOMETRY AIR	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92551	PURE TONE HEARING TEST AIR	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92550	TYMPANOMETRY & REFLEX THRESH	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92549	CDP-SOT 6 COND W/I&R MCT&ADT	MEDICINE-SPECIAL OTORHINOLAR	YES	12/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	92548	CDP-SOT 6 COND W/I&R	MEDICINE - SPECIAL OTORHINOLAR	YES	08/05/2014	12/31/2078			
MMAI-Medicare/Medicaid	92547	SUPPLEMENTAL ELECTRICAL TEST	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92546	SINUSOIDAL ROTATIONAL TEST	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92545	OSCILLATING TRACKING TEST	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92544	OPTOKINETIC NYSTAGMUS TEST	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92542	POSITIONAL NYSTAGMUS TEST	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92541	SPONTANEOUS NYSTAGMUS TEST	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92540	BASIC VESTIBULAR EVALUATION	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92534	OPTOKINETIC NYSTAGMUS TEST	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92533	CALORIC VESTIBULAR TEST	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92532	POSITIONAL NYSTAGMUS TEST	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	92531	SPONTANEOUS NYSTAGMUS STUDY	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92526	ORAL FUNCTION THERAPY	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92524	BEHAVRAL QUALIT ANALYS VOICE	MEDICINE - SPECIAL PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	92523	SPEECH SOUND LANG COMPREHEN	MEDICINE - SPECIAL PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	92522	EVALUATE SPEECH PRODUCTION	MEDICINE - SPECIAL PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	92521	EVALUATION OF SPEECH FLUENCY	MEDICINE - SPECIAL PROCEDURES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	92520	LARYNGEAL FUNCTION STUDIES	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92516	FACIAL NERVE FUNCTION TEST	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92512	NASAL FUNCTION STUDIES	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92511	NASOPHARYNGOSCOPY	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92504	EAR MICROSCOPY EXAMINATION	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92502	EAR AND THROAT EXAMINATION	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92358	APHAKIA PROSTH SERVICE TEMP	MEDICINE - OPHTHALMOLOGY	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92353	FIT APHAKIA SPECTCL MULTIFOC	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	92352	FIT APHAKIA SPECTCL MONOFOCL	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	92342	FIT SPECTACLES MULTIFOCAL	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	92341	FIT SPECTACLES BIFOCAL	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	92340	FIT SPECTACLES MONOFOCAL	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	92326	REPLACEMENT OF CONTACT LENS	MEDICINE - OPHTHALMOLOGY	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92325	MODIFICATION OF CONTACT LENS	MEDICINE - OPHTHALMOLOGY	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92274	MULTIFOCAL ERG W/I&R	MEDICINE - OPHTHALMOLOGY	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	92273	FULL FIELD ERG W/I&R	MEDICINE - OPHTHALMOLOGY	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	92202	OPSCPY EXTND ON/MAC DRAW	MEDICINE-OPHTHALMOLOGY	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	92201	OPSCPY EXTND RTA DRAW UNI/BI	MEDICINE-OPHTHALMOLOGY	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	92136	OPHTHALMIC BIOMETRY	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92071	CONTACT LENS FITTING FOR TX	MEDICINE - OPHTHALMOLOGY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	92015	DETERMINE REFRACTIVE STATE	MEDICINE - OPHTHALMOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	91200	LIVER ELASTOGRAPHY	MEDICINE - GASTROENTEROLOGY	NO	03/01/2016	03/01/2016			
MMAI-Medicare/Medicaid	91133	ELECTROGASTROGRAPHY W/TEST	MEDICINE - GASTROENTEROLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	91132	ELECTROGASTROGRAPHY	MEDICINE - GASTROENTEROLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	91120	RECTAL SENSATION TEST	MEDICINE - GASTROENTEROLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	91117	COLON MOTILITY 6 HR STUDY	MEDICINE - GASTROENTEROLOGY	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	91065	BREATH HYDROGEN/METHANE TEST	MEDICINE - GASTROENTEROLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	91040	ESOPH BALLOON DISTENSION TST	MEDICINE - GASTROENTEROLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	91038	ESOPH IMPED FUNCT TEST GT 1HR	MEDICINE - GASTROENTEROLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	91037	ESOPH IMPED FUNCTION TEST	MEDICINE - GASTROENTEROLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	91035	G-ESOPH REFLX TST W/ELECTROD	MEDICINE - GASTROENTEROLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	91034	GASTROESOPHAGEAL REFLUX TEST	MEDICINE - GASTROENTEROLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	91030	ACID PERFUSION OF ESOPHAGUS	MEDICINE - GASTROENTEROLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	91022	DUODENAL MOTILITY STUDY	MEDICINE - GASTROENTEROLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	91020	GASTRIC MOTILITY STUDIES	MEDICINE - GASTROENTEROLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	91013	ESOPHGL MOTIL W/STIM/PERFUS	MEDICINE - GASTROENTEROLOGY	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	91010	ESOPHAGUS MOTILITY STUDY	MEDICINE - GASTROENTEROLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90997	HEMOPERFUSION	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90993	DIALYSIS TRAINING INCOMPL	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90989	DIALYSIS TRAINING COMPLETE	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90970	ESRD SVC PR DAY PT 20+	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90969	ESRD SVC PR DAY PT 12-19	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	90968	ESRD SVC PR DAY PT 2-11	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90967	ESRD SVC PR DAY PT LT 2	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90966	ESRD HOME PT SERV P MO 20+	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90965	ESRD HOME PT SERV P MO 12-19	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90964	ESRD HOME PT SERV P MO 2-11	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90963	ESRD HOME PT SERV P MO LT 2YRS	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90953	ESRD SERV 1 VISIT P MO LT 2YRS	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90952	ESRD SERV 2-3 VSTS P MO LT 2YR	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90951	ESRD SERV 4 VISITS P MO LT 2YR	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90940	HEMODIALYSIS ACCESS STUDY	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90937	HEMODIALYSIS REPEATED EVAL	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90913	BFB TRAINING EA ADDL 15 MIN	MEDICINE-BIOFEEDBACK	YES	12/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	90912	BFB TRAINING 1ST 15 MIN	MEDICINE-BIOFEEDBACK	YES	12/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	90901	BIOFEEDBACK TRAIN ANY METH	MEDICINE - BIOFEEDBACK	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	90887	CONSULTATION WITH FAMILY	MEDICINE - PSYCHIATRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90885	PSY EVALUATION OF RECORDS	MEDICINE - PSYCHIATRY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	90882	ENVIRONMENTAL MANIPULATION	MEDICINE - PSYCHIATRY	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90880	HYPNOTHERAPY	MEDICINE - PSYCHIATRY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	90870	ELECTROCONVULSIVE THERAPY	MEDICINE - PSYCHIATRY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	90869	TCRAN MAGN STIM REDETEMINE	MEDICINE - PSYCHIATRY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	90865	NARCOSYNTHESIS	MEDICINE - PSYCHIATRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90853	GROUP PSYCHOTHERAPY	MEDICINE - PSYCHIATRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90849	MULTIPLE FAMILY GROUP PSYTX	MEDICINE - PSYCHIATRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90847	FAMILY PSYTX W/PT 50 MIN	MEDICINE - PSYCHIATRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90846	FAMILY PSYTX W/O PT 50 MIN	MEDICINE - PSYCHIATRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90845	PSYCHOANALYSIS	MEDICINE - PSYCHIATRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90838	PSYTX W PT W E/M 60 MIN	MEDICINE - PSYCHIATRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90837	PSYTX W PT 60 MINUTES	MEDICINE - PSYCHIATRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90836	PSYTX W PT W E/M 45 MIN	MEDICINE - PSYCHIATRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90834	PSYTX W PT 45 MINUTES	MEDICINE - PSYCHIATRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90833	PSYTX W PT W E/M 30 MIN	MEDICINE - PSYCHIATRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90832	PSYTX W PT 30 MINUTES	MEDICINE - PSYCHIATRY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	90756	CCIIV4 VACC ABX FREE IM	MEDICINE - VACCINES, TOXOIDS	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	90750	HZV VACC RECOMBINANT IM	MEDICINE - VACCINES, TOXOIDS	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	90748	HIB-HEPB VACCINE IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90747	HEPB VACC 4 DOSE IMMUNSUP IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90746	HEPB VACCINE 3 DOSE ADULT IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90744	HEPB VACC 3 DOSE PED/ADOL IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90743	HEPB VACC 2 DOSE ADOLESC IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90740	HEPB VACC 3 DOSE IMMUNSUP IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90738	INACTIVATED JE VACC IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90736	HZV VACCINE LIVE SUBQ	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013		Prior Authorization is required for code 90736 if member is less than 60 years old, otherwise authorization is not required.	
MMAI-Medicare/Medicaid	90734	MENACWYD/MENACWYCRM VACC IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90733	MPSV4 VACCINE SUBQ	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90732	PPSV23 VACC 2 YRS+ SUBQ/IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90723	DTAP-HEP B-IPV VACCINE IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90717	YELLOW FEVER VACCINE SUBQ	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90716	VAR VACCINE LIVE SUBQ	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	90715	TDAP VACCINE 7 YRS/GT IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90714	TD VACC NO PRESV 7 YRS+ IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90713	POLIOVIRUS IPV SC/IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90710	MMRV VACCINE SC	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90707	MMR VACCINE SC	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90702	DT VACCINE UNDER 7 YRS IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90700	DTAP VACCINE LT 7 YRS IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90698	DTAP-IPV/HIB VACCINE IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90697	DTAP-IPV-HIB-HEPB VACCINE IM	MEDICINE - VACCINES, TOXOIDS	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	90696	DTAP-IPV VACCINE 4-6 YRS IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90694	VACC AIIV4 NO PRSRV 0.5ML IM	MEDICINE-VACCINE/TOXOIDS	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	90691	TYPHOID VACCINE IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90690	TYPHOID VACCINE ORAL	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90689	VACC IIV4 NO PRSRV 0.25 ML IM	MEDICINE - VACCINES, TOXOIDS	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	90688	IIV4 VACCINE SPLT 0.5 ML IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90687	IIV4 VACCINE SPLT 0.25 ML IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	90686	IIV4 VACC NO PRSV 0.5 ML IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90685	IIV4 VACC NO PRSV 0.25 ML IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90682	RIV4 VACC RECOMBINANT DNA IM	MEDICINE - VACCINES, TOXOIDS	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	90681	RV1 VACC 2 DOSE LIVE ORAL	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90680	RV5 VACC 3 DOSE LIVE ORAL	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90676	RABIES VACCINE ID	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90675	RABIES VACCINE IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90674	CCIIV4 VAC NO PRSV 0.5 ML IM	MEDICINE - VACCINES, TOXOIDS	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	90673	RIV3 VACCINE NO PRESERV IM	MEDICINE - VACCINES, TOXOIDS	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	90672	LAIV4 VACCINE INTRANASAL	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90670	PCV13 VACCINE IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90668	IIV VACCINE PANDEMIC IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90667	IIV VACC PANDEMIC ADJUVT IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90666	FLU VAC PANDEM PRSRV FREE IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90664	LAIV VACC PANDEMIC INTRANASL	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90662	IIV NO PRSV INCREASED AG IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	90660	LAIV3 VACCINE INTRANASAL	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90658	IIV3 VACCINE SPLT 0.5 ML IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90657	IIV3 VACCINE SPLT 0.25 ML IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90656	IIV3 VACC NO PRSV 0.5 ML IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90655	IIV3 VACC NO PRSV 0.25 ML IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90653	IIV ADJUVANT VACCINE IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90651	9VHPV VACCINE 2/3 DOSE IM	MEDICINE - VACCINES, TOXOIDS	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	90650	2VHPV VACCINE 3 DOSE IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90649	4VHPV VACCINE 3 DOSE IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90648	HIB PRP-T VACCINE 4 DOSE IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90647	HIB PRP-OMP VACC 3 DOSE IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90644	HIB-MENCY VACCINE 4 DOSE IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90636	HEP A/HEP B VACC ADULT IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90634	HEPA VACC PED/ADOL 3 DOSE	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90633	HEPA VACC PED/ADOL 2 DOSE	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90632	HEP A VACCINE ADULT IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	90621	MENB-FHBP VACC 2/3 DOSE IM	MEDICINE - VACCINES, TOXOIDS	NO	04/01/2015	04/01/2015			
MMAI-Medicare/Medicaid	90620	MENB-4C VACC 2 DOSE IM	MEDICINE - VACCINES, TOXOIDS	NO	04/01/2015	04/01/2015			
MMAI-Medicare/Medicaid	90619	MENACWY-TT VACCINE IM	MEDICINE - VACCINES, TOXOIDS	NO	07/01/2019	07/01/2019			
MMAI-Medicare/Medicaid	90587	DENGUE VACC QUAD 3 DOSE SUBQ	MEDICINE - VACCINES, TOXOIDS	YES	06/12/2017	12/31/2078			
MMAI-Medicare/Medicaid	90586	BCG VACCINE INTRAVESICAL	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90585	BCG VACCINE PERCUT	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90581	ANTHRAX VACCINE SC OR IM	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90477	ADENOVIRUS VACCINE TYPE 7	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90476	ADENOVIRUS VACCINE TYPE 4	MEDICINE - VACCINES, TOXOIDS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90474	IMMUNE ADMIN ORAL/NASAL ADDL	MEDICINE - IMMUNIZATION ADMINI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90473	IMMUNE ADMIN ORAL/NASAL	MEDICINE - IMMUNIZATION ADMINI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90472	IMMUNIZATION ADMIN EACH ADD	MEDICINE - IMMUNIZATION ADMINI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90471	IMMUNIZATION ADMIN	MEDICINE - IMMUNIZATION ADMINI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90461	IM ADMIN EACH ADDL COMPONENT	MEDICINE - VACCINES, TOXOIDS	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	90460	IM ADMIN 1ST/ONLY COMPONENT	MEDICINE REST HOME	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	90396	VARICELLA-ZOSTER IG IM	MEDICINE - IMMUNE GLOBULINS	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	90393	VACCINA IG IM	MEDICINE - IMMUNE GLOBULINS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90389	TETANUS IG IM	MEDICINE - IMMUNE GLOBULINS	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90386	RH IG IV	MEDICINE - IMMUNE GLOBULINS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90385	RH IG MINIDOSE IM	MEDICINE - IMMUNE GLOBULINS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90384	RH IG FULL-DOSE IM	MEDICINE - IMMUNE GLOBULINS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90378	RSV MAB IM 50MG	MEDICINE - IMMUNE GLOBULINS	YES	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	90376	RABIES IG HEAT TREATED	MEDICINE - IMMUNE GLOBULINS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90375	RABIES IG IM/SC	MEDICINE - IMMUNE GLOBULINS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90371	HEP B IG IM	MEDICINE - IMMUNE GLOBULINS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90296	DIPHTHERIA ANTITOXIN	MEDICINE - IMMUNE GLOBULINS	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90291	CMV IG IV	MEDICINE - IMMUNE GLOBULINS	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90288	BOTULISM IG IV	MEDICINE - IMMUNE GLOBULINS	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90287	BOTULINUM ANTITOXIN	MEDICINE - IMMUNE GLOBULINS	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90284	HUMAN IG SC	MEDICINE - IMMUNE GLOBULINS	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90283	HUMAN IG IV	MEDICINE - IMMUNE GLOBULINS	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90281	HUMAN IG IM	MEDICINE - IMMUNE GLOBULINS	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	9007F	OTHER CAROT STEN 120 DAYS/GT	CATEGORY II CODES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	9006F	SYMPT STEN-TIA/STRKLT 120DAYS	CATEGORY II CODES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	9005F	ASYMPT CAROT/VRTBRBAS STEN	CATEGORY II CODES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	9004F	AORTIC ANRYSM 6/GT CM DIAM	CATEGORY II CODES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	9003F	AORTIC ANRYSM5.5-5.9CM DIAM	CATEGORY II CODES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	9002F	AORTIC ANEURYSM 5-5.4CM DIAM	CATEGORY II CODES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	9001F	AORTIC ANEURYSMLT 5CM DIAM CT	CATEGORY II CODES	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	89398	UNLISTED REPROD MED LAB PROC	PATH & LAB - OTHER PROCEDURES	NO	09/01/2017	09/01/2017		Submit claims with medical records	
MMAI-Medicare/Medicaid	89356	THAWING CRYOPRESRVED OOCYTE	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89354	THAW CRYOPRSVRD REPROD TISS	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89353	THAWING CRYOPRESRVED SPERM	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89352	THAWING CRYOPRESRVED EMBRYO	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89346	STORAGE/YEAR OOCYTE(S)	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89344	STORAGE/YEAR REPROD TISSUE	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89343	STORAGE/YEAR SPERM/SEMEN	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89342	STORAGE/YEAR EMBRYO(S)	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	89335	CRYOPRESERVE TESTICULAR TISS	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89331	RETROGRADE EJACULATION ANAL	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89330	EVALUATION CERVICAL MUCUS	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89329	SPERM EVALUATION TEST	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89325	SPERM ANTIBODY TEST	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89322	SEMEN ANAL STRICT CRITERIA	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89321	SEMEN ANAL SPERM DETECTION	PATH & LAB - OTHER PROCEDURES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89320	SEMEN ANAL VOL/COUNT/MOT	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89310	SEMEN ANALYSIS W/COUNT	PATH & LAB - OTHER PROCEDURES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89300	SEMEN ANALYSIS W/HUHNER	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89291	BIOPSY OOCYTE POLAR BODY	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89281	ASSIST OOCYTE FERTILIZATION	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89280	ASSIST OOCYTE FERTILIZATION	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89272	EXTENDED CULTURE OF OOCYTES	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89268	INSEMINATION OF OOCYTES	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89264	IDENTIFY SPERM TISSUE	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	89261	SPERM ISOLATION COMPLEX	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89260	SPERM ISOLATION SIMPLE	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89259	CRYOPRESERVATION SPERM	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89258	CRYOPRESERVATION EMBRYO (S)	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89257	SPERM IDENTIFICATION	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89255	PREPARE EMBRYO FOR TRANSFER	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89254	OOCYTE IDENTIFICATION	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89253	EMBRYO HATCHING	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89251	CULTR OOCYTE/EMBRYO LT 4 DAYS	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89250	CULTR OOCYTE/EMBRYO LT 4 DAYS	PATH & LAB - OTHER PROCEDURES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	89230	COLLECT SWEAT FOR TEST	PATH & LAB - OTHER PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	89220	SPUTUM SPECIMEN COLLECTION	PATH & LAB - OTHER PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	89190	NASAL SMEAR FOR EOSINOPHILS	PATH & LAB - OTHER PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	89160	EXAM FECES FOR MEAT FIBERS	PATH & LAB - OTHER PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	89125	SPECIMEN FAT STAIN	PATH & LAB - OTHER PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	89060	EXAM SYNOVIAL FLUID CRYSTALS	PATH & LAB - OTHER PROCEDURES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	89055	LEUKOCYTE ASSESSMENT FECAL	PATH & LAB - OTHER PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	89051	BODY FLUID CELL COUNT	PATH & LAB - OTHER PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	89050	BODY FLUID CELL COUNT	PATH & LAB - OTHER PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	89049	CHCT FOR MAL HYPERTHERMIA	PATH & LAB - TRANSCUTANEOUS PR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88741	TRANSCUTANEOUS METHB	PATH & LAB - TRANSCUTANEOUS PR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88740	TRANSCUTANEOUS CARBOXYHB	PATH & LAB - TRANSCUTANEOUS PR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88738	HGB QUANT TRANSCUTANEOUS	PATH & LAB - TRANSCUTANEOUS PR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88720	BILIRUBIN TOTAL TRANSCUT	PATH & LAB - TRANSCUTANEOUS PR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88381	MICRODISSECTION MANUAL	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88380	MICRODISSECTION LASER	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88372	PROTEIN ANALYSIS W/PROBE	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88371	PROTEIN WESTERN BLOT TISSUE	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88368	INSITU HYBRIDIZATION MANUAL	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88367	INSITU HYBRIDIZATION AUTO	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88365	INSITU HYBRIDIZATION (FISH)	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88363	XM ARCHIVE TISSUE MOLEC ANAL	PATH & LAB - SURGICAL PATHOLOG	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	88362	NERVE TEASING PREPARATIONS	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88361	TUMOR IMMUNOHISTOCHEM/COMPUT	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88360	TUMOR IMMUNOHISTOCHEM/MANUAL	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88358	ANALYSIS TUMOR	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88356	ANALYSIS NERVE	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88319	ENZYME HISTOCHEMISTRY	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88314	HISTOCHEMICAL STAINS ADD-ON	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88313	SPECIAL STAINS GROUP 2	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88312	SPECIAL STAINS GROUP 1	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88311	DECALCIFY TISSUE	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88309	TISSUE EXAM BY PATHOLOGIST	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88307	TISSUE EXAM BY PATHOLOGIST	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88305	TISSUE EXAM BY PATHOLOGIST	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88304	TISSUE EXAM BY PATHOLOGIST	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88302	TISSUE EXAM BY PATHOLOGIST	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88300	SURGICAL PATH GROSS	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	88283	CHROMOSOME BANDING STUDY	PATH & LAB - CYTOGENETIC STUDI	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	88272	CYTOGENETICS 3-5	PATH & LAB - CYTOGENETIC STUDI	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	88267	CHROMOSOME ANALYS PLACENTA	PATH & LAB - CYTOGENETIC STUDI	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	88264	CHROMOSOME ANALYSIS 20-25	PATH & LAB - CYTOGENETIC STUDI	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	88263	CHROMOSOME ANALYSIS 45	PATH & LAB - CYTOGENETIC STUDI	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	88261	CHROMOSOME ANALYSIS 5	PATH & LAB - CYTOGENETIC STUDI	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	88249	CHROMOSOME ANALYSIS 100	PATH & LAB - CYTOGENETIC STUDI	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	88248	CHROMOSOME ANALYSIS 50-100	PATH & LAB - CYTOGENETIC STUDI	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	88245	CHROMOSOME ANALYSIS 20-25	PATH & LAB - CYTOGENETIC STUDI	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	88241	FROZEN CELL PREPARATION	PATH & LAB - CYTOGENETIC STUDI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88240	CELL CRYOPRESERVE/STORAGE	PATH & LAB - CYTOGENETIC STUDI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88239	TISSUE CULTURE TUMOR	PATH & LAB - CYTOGENETIC STUDI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88237	TISSUE CULTURE BONE MARROW	PATH & LAB - CYTOGENETIC STUDI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88235	TISSUE CULTURE PLACENTA	PATH & LAB - CYTOGENETIC STUDI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88233	TISSUE CULTURE SKIN/BIOPSY	PATH & LAB - CYTOGENETIC STUDI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88230	TISSUE CULTURE LYMPHOCYTE	PATH & LAB - CYTOGENETIC STUDI	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	88189	FLOWCYTOMETRY/READ 16 & GT	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88188	FLOWCYTOMETRY/READ 9-15	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88187	FLOWCYTOMETRY/READ 2-8	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88185	FLOWCYTOMETRY/TC ADD-ON	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88184	FLOWCYTOMETRY/ TC 1 MARKER	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88182	CELL MARKER STUDY	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88177	CYTP FNA EVAL EA ADDL	PATH & LAB - CYTOPATHOLOGY	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	88175	CYTOPATH C/V AUTO FLUID REDO	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88174	CYTOPATH C/V AUTO IN FLUID	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88173	CYTOPATH EVAL FNA REPORT	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88172	CYTP DX EVAL FNA 1ST EA SITE	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88167	CYTOPATH TBS C/V SELECT	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88166	CYTOPATH TBS C/V AUTO REDO	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88165	CYTOPATH TBS C/V REDO	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88164	CYTOPATH TBS C/V MANUAL	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88162	CYTOPATH SMEAR OTHER SOURCE	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	88161	CYTOPATH SMEAR OTHER SOURCE	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88160	CYTOPATH SMEAR OTHER SOURCE	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88155	CYTOPATH C/V INDEX ADD-ON	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88153	CYTOPATH C/V REDO	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88152	CYTOPATH C/V AUTO REDO	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88150	CYTOPATH C/V MANUAL	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88148	CYTOPATH C/V AUTO RESCREEN	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88147	CYTOPATH C/V AUTOMATED	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88143	CYTOPATH C/V THIN LAYER REDO	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88142	CYTOPATH C/V THIN LAYER	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88141	CYTOPATH C/V INTERPRET	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88140	SEX CHROMATIN IDENTIFICATION	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88130	SEX CHROMATIN IDENTIFICATION	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88125	FORENSIC CYTOPATHOLOGY	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88121	CYTP URINE 3-5 PROBES CMPTR	PATH & LAB - CYTOPATHOLOGY	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	88120	CYTP URNE 3-5 PROBES EA SPEC	PATH & LAB - CYTOPATHOLOGY	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	88112	CYTOPATH CELL ENHANCE TECH	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88108	CYTOPATH CONCENTRATE TECH	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88106	CYTOPATH FL NONGYN FILTER	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88104	CYTOPATH FL NONGYN SMEARS	PATH & LAB - CYTOPATHOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88045	CORONERS AUTOPSY (NECROPSY)	PATH & LAB - ANATOMIC PATHOLOG	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88040	FORENSIC AUTOPSY (NECROPSY)	PATH & LAB - ANATOMIC PATHOLOG	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88037	LIMITED AUTOPSY	PATH & LAB - ANATOMIC PATHOLOG	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88036	LIMITED AUTOPSY	PATH & LAB - ANATOMIC PATHOLOG	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88029	AUTOPSY (NECROPSY) COMPLETE	PATH & LAB - ANATOMIC PATHOLOG	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88028	AUTOPSY (NECROPSY) COMPLETE	PATH & LAB - ANATOMIC PATHOLOG	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88027	AUTOPSY (NECROPSY) COMPLETE	PATH & LAB - ANATOMIC PATHOLOG	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88025	AUTOPSY (NECROPSY) COMPLETE	PATH & LAB - ANATOMIC PATHOLOG	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88020	AUTOPSY (NECROPSY) COMPLETE	PATH & LAB - ANATOMIC PATHOLOG	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88016	AUTOPSY (NECROPSY) GROSS	PATH & LAB - ANATOMIC PATHOLOG	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88014	AUTOPSY (NECROPSY) GROSS	PATH & LAB - ANATOMIC PATHOLOG	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88012	AUTOPSY (NECROPSY) GROSS	PATH & LAB - ANATOMIC PATHOLOG	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	88007	AUTOPSY (NECROPSY) GROSS	PATH & LAB - ANATOMIC PATHOLOG	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88005	AUTOPSY (NECROPSY) GROSS	PATH & LAB - ANATOMIC PATHOLOG	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	88000	AUTOPSY (NECROPSY) GROSS	PATH & LAB - ANATOMIC PATHOLOG	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87905	SIALIDASE ENZYME ASSAY	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87904	PHENOTYPE DNA HIV W/CLT ADD	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87903	PHENOTYPE DNA HIV W/CULTURE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87900	PHENOTYPE INFECT AGENT DRUG	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87899	AGENT NOS ASSAY W/OPTIC	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87880	STREP A ASSAY W/OPTIC	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87850	N. GONORRHOEAE ASSAY W/OPTIC	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87809	ADENOVIRUS ASSAY W/OPTIC	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87808	TRICHOMONAS ASSAY W/OPTIC	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87807	RSV ASSAY W/OPTIC	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87806	HIV AG W/HIV1&2 ANTB W/OPTIC	PATH & LAB - MICROBIOLOGY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	87804	INFLUENZA ASSAY W/OPTIC	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87803	CLOSTRIDIUM TOXIN A W/OPTIC	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	87802	STREP B ASSAY W/OPTIC	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87801	DETECT AGNT MULT DNA AMPLI	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87800	DETECT AGNT MULT DNA DIREC	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87799	DETECT AGENT NOS DNA QUANT	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87798	DETECT AGENT NOS DNA AMP	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87797	DETECT AGENT NOS DNA DIR	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87661	TRICHOMONAS VAGINALIS AMPLIF	PATH & LAB - MICROBIOLOGY	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	87660	TRICHOMONAS VAGIN DIR PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87653	STREP B DNA AMP PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87652	STREP A DNA QUANT	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87651	STREP A DNA AMP PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87650	STREP A DNA DIR PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87641	MR-STAPH DNA AMP PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87640	STAPH A DNA AMP PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87635	SARS-COV-2 COVID-19 AMP PRB	PATH & LAB - CHEMISTRY	NO	03/12/2020	03/12/2020			
MMAI-Medicare/Medicaid	87631	RESP VIRUS 3-5 TARGETS	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	87625	HPV TYPES 16 & 18 ONLY	PATH & LAB - MICROBIOLOGY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	87623	HPV LOW-RISK TYPES	PATH & LAB - MICROBIOLOGY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	87592	N.GONORRHOEAE DNA QUANT	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87591	N.GONORRHOEAE DNA AMP PROB	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87590	N.GONORRHOEAE DNA DIR PROB	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87582	M.PNEUMON DNA QUANT	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87581	M.PNEUMON DNA AMP PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87580	M.PNEUMON DNA DIR PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87563	M. GENITALIUM AMP PROBE	PATH & LAB-MICROBIOLOGY	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	87562	M.AVIUM-INTRA DNA QUANT	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87561	M.AVIUM-INTRA DNA AMP PROB	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87560	M.AVIUM-INTRA DNA DIR PROB	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87557	M.TUBERCULO DNA QUANT	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87556	M.TUBERCULO DNA AMP PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87555	M.TUBERCULO DNA DIR PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87552	MYCOBACTERIA DNA QUANT	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	87551	MYCOBACTERIA DNA AMP PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87550	MYCOBACTERIA DNA DIR PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87542	LEGION PNEUMO DNA QUANT	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87541	LEGION PNEUMO DNA AMP PROB	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87540	LEGION PNEUMO DNA DIR PROB	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87537	HIV-2 DNA DIR PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87534	HIV-1 DNA DIR PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87533	HHV-6 DNA QUANT	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87532	HHV-6 DNA AMP PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87531	HHV-6 DNA DIR PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87530	HSV DNA QUANT	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87529	HSV DNA AMP PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87528	HSV DNA DIR PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87527	HEPATITIS G DNA QUANT	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87526	HEPATITIS G DNA AMP PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87525	HEPATITIS G DNA DIR PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	87520	HEPATITIS C RNA DIR PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87517	HEPATITIS B DNA QUANT	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87516	HEPATITIS B DNA AMP PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87512	GARDNER VAG DNA QUANT	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87511	GARDNER VAG DNA AMP PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87510	GARDNER VAG DNA DIR PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87503	INFLUENZA DNA AMP PROB ADDL	PATH & LAB - MICROBIOLOGY	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	87502	INFLUENZA DNA AMP PROBE	PATH & LAB - MICROBIOLOGY	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	87501	INFLUENZA DNA AMP PROB 1+	PATH & LAB - MICROBIOLOGY	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	87500	VANOMYCIN DNA AMP PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87497	CYTOMEG DNA QUANT	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87496	CYTOMEG DNA AMP PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87495	CYTOMEG DNA DIR PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87493	C DIFF AMPLIFIED PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87492	CHYLMD TRACH DNA QUANT	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87491	CHYLMD TRACH DNA AMP PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	87490	CHYLMD TRACH DNA DIR PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87487	CHYLMD PNEUM DNA QUANT	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87486	CHYLMD PNEUM DNA AMP PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87485	CHYLMD PNEUM DNA DIR PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87483	CNS DNA AMP PROBE TYPE 12-25	PATH & LAB - MICROBIOLOGY	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	87482	CANDIDA DNA QUANT	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87481	CANDIDA DNA AMP PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87480	CANDIDA DNA DIR PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87476	LYME DIS DNA AMP PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87475	LYME DIS DNA DIR PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87472	BARTONELLA DNA QUANT	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87471	BARTONELLA DNA AMP PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87451	POLYVALENT MULT ORG EA AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87449	NOS EACH ORGANISM AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87430	STREP A AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87427	SHIGA-LIKE TOXIN AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	87425	ROTAVIRUS AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87420	RESP SYNCYTIAL VIRUS AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87400	INFLUENZA A/B EACH AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87391	HIV-2 AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87390	HIV-1 AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87389	HIV-1 AG W/HIV-1 & -2 AB AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87385	HISTOPLASMA CAPSUL AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87380	HEPATITIS DELTA AGENT AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87350	HEPATITIS BE AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87341	HEPATITIS B SURFACE AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87340	HEPATITIS B SURFACE AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87339	H PYLORI AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87338	HPYLORI STOOL AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87337	ENTAMOEB HIST GROUP AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87336	ENTAMOEB HIST DISPR AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87335	E COLI 0157 AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	87332	CYTOMEGALOVIRUS AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87329	GIARDIA AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87328	CRYPTOSPORIDIUM AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87327	CRYPTOCOCCUS NEOFORM AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87324	CLOSTRIDIUM AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87320	CHYLMD TRACH AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87305	ASPERGILLUS AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87301	ADENOVIRUS AG IA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87300	AG DETECTION POLYVAL IF	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87299	ANTIBODY DETECTION NOS IF	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87290	VARICELLA ZOSTER AG IF	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87285	TREPONEMA PALLIDUM AG IF	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87283	RUBEOLA AG IF	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87281	PNEUMOCYSTIS CARINII AG IF	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87280	RESPIRATORY SYNCYTIAL AG IF	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87279	PARAINFLUENZA AG IF	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	87278	LEGION PNEUMOPHILIA AG IF	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87276	INFLUENZA A AG IF	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87275	INFLUENZA B AG IF	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87274	HERPES SIMPLEX 1 AG IF	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87273	HERPES SIMPLEX 2 AG IF	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87272	CRYPTOSPORIDIUM AG IF	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87271	CYTOMEGALOVIRUS DFA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87270	CHLAMYDIA TRACHOMATIS AG IF	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87269	GIARDIA AG IF	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87267	ENTEROVIRUS ANTIBODY DFA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87265	PERTUSSIS AG IF	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87260	ADENOVIRUS AG IF	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87255	GENET VIRUS ISOLATE HSV	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87254	VIRUS INOCULATION SHELL VIA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87253	VIRUS INOCULATE TISSUE ADDL	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87252	VIRUS INOCULATION TISSUE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	87250	VIRUS INOCULATE EGGS/ANIMAL	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87230	ASSAY TOXIN OR ANTITOXIN	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87220	TISSUE EXAM FOR FUNGI	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87210	SMEAR WET MOUNT SALINE/INK	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87209	SMEAR COMPLEX STAIN	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87207	SMEAR SPECIAL STAIN	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87206	SMEAR FLUORESCENT/ACID STAI	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87205	SMEAR GRAM STAIN	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87197	BACTERICIDAL LEVEL SERUM	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87190	MICROBE SUSCEPT MYCOBACTERI	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87188	MICROBE SUSCEPT MACROBROTH	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87187	MICROBE SUSCEPTIBLE MLC	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87186	MICROBE SUSCEPTIBLE MIC	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87185	MICROBE SUSCEPTIBLE ENZYME	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87184	MICROBE SUSCEPTIBLE DISK	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87181	MICROBE SUSCEPTIBLE DIFFUSE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	87177	OVA AND PARASITES SMEARS	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87176	TISSUE HOMOGENIZATION CULTR	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87172	PINWORM EXAM	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87169	MACROSCOPIC EXAM PARASITE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87168	MACROSCOPIC EXAM ARTHROPOD	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87158	CULTURE TYPING ADDED METHOD	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87153	DNA/RNA SEQUENCING	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87152	CULTURE TYPE PULSE FIELD GEL	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87150	DNA/RNA AMPLIFIED PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87149	DNA/RNA DIRECT PROBE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87147	CULTURE TYPE IMMUNOLOGIC	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87143	CULTURE TYPING GLC/HPLC	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87140	CULTURE TYPE IMMUNOFLUORESC	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87118	MYCOBACTERIC IDENTIFICATION	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87116	MYCOBACTERIA CULTURE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87110	CHLAMYDIA CULTURE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	87109	MYCOPLASMA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87107	FUNGI IDENTIFICATION MOLD	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87106	FUNGI IDENTIFICATION YEAST	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87103	BLOOD FUNGUS CULTURE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87102	FUNGUS ISOLATION CULTURE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87101	SKIN FUNGI CULTURE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87088	URINE BACTERIA CULTURE	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87086	URINE CULTURE/COLONY COUNT	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87084	CULTURE OF SPECIMEN BY KIT	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87081	CULTURE SCREEN ONLY	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87077	CULTURE AEROBIC IDENTIFY	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87076	CULTURE ANAEROBE IDENT EACH	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87075	CULTR BACTERIA EXCEPT BLOOD	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87073	CULTURE BACTERIA ANAEROBIC	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87071	CULTURE AEROBIC QUANT OTHER	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87070	CULTURE OTHR SPECIMN AEROBIC	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	87046	STOOL CULTR AEROBIC BACT EA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87045	FECES CULTURE AEROBIC BACT	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87040	BLOOD CULTURE FOR BACTERIA	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87015	SPECIMEN INFECT AGNT CONCNTJ	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87003	SMALL ANIMAL INOCULATION	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86985	SPLIT BLOOD OR PRODUCTS	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86978	RBC PRETREATMENT SERUM	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86977	RBC SERUM PRETX INCUBJ/INHIB	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86976	RBC SERUM PRETX ID DILUTION	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86975	RBC SERUM PRETX INCUBJ DRUGS	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86972	RBC PRETX INCUBATJ W/DENSITY	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86971	RBC PRETX INCUBATJ W/ENZYMES	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86970	RBC PRETX INCUBATJ W/CHEMICL	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86965	POOLING BLOOD PLATELETS	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86960	VOL REDUCTION OF BLOOD/PROD	PATH & LAB - TRANSFUSION MEDIC	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86950	LEUKACYTE TRANSFUSION	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	86945	BLOOD PRODUCT/IRRADIATION	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86941	HEMOLYSINS/AGGLUTININS	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86940	HEMOLYSINS/AGGLUTININS AUTO	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86932	FROZEN BLOOD FREEZE/THAW	PATH & LAB - TRANSFUSION MEDIC	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86931	FROZEN BLOOD THAW	PATH & LAB - TRANSFUSION MEDIC	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86930	FROZEN BLOOD PREP	PATH & LAB - TRANSFUSION MEDIC	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86927	PLASMA FRESH FROZEN	PATH & LAB - TRANSFUSION MEDIC	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86923	COMPATIBILITY TEST ELECTRIC	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86922	COMPATIBILITY TEST ANTIGLOB	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86921	COMPATIBILITY TEST INCUBATE	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86920	COMPATIBILITY TEST SPIN	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86911	BLOOD TYPING ANTIGEN SYSTEM	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86910	BLOOD TYPING PATERNITY TEST	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86906	BLD TYPING SEROLOGIC RH PHNT	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86905	BLOOD TYPING RBC ANTIGENS	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86904	BLOOD TYPING PATIENT SERUM	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	86902	BLOOD TYPE ANTIGEN DONOR EA	PATH & LAB - TRANSFUSION MEDIC	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	86901	BLOOD TYPING SEROLOGIC RH (D)	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86900	BLOOD TYPING SEROLOGIC ABO	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86891	AUTOLOGOUS BLOOD OP SALVAGE	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86890	AUTOLOGOUS BLOOD PROCESS	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86886	COOMBS TEST INDIRECT TITER	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86885	COOMBS TEST INDIRECT QUAL	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86880	COOMBS TEST DIRECT	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86870	RBC ANTIBODY IDENTIFICATION	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86860	RBC ANTIBODY ELUTION	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86850	RBC ANTIBODY SCREEN	PATH & LAB - TRANSFUSION MEDIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86849	IMMUNOLOGY PROCEDURE	PATH & LAB - IMMUNOLOGY	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	86826	HLA X-MATCH NONCYTOTOXC ADDL	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86825	HLA X-MATH NON-CYTOTOXIC	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86821	LYMPHOCYTE CULTURE MIXED	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86817	HLA TYPING DR/DQ	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	86816	HLA TYPING DR/DQ	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86813	HLA TYPING A B OR C	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86812	HLA TYPING A B OR C	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86808	CYTOTOXIC ANTIBODY SCREENING	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86807	CYTOTOXIC ANTIBODY SCREENING	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86806	LYMPHOCYTOTOXICITY ASSAY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86805	LYMPHOCYTOTOXICITY ASSAY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86804	HEP C AB TEST CONFIRM	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86803	HEPATITIS C AB TEST	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86800	THYROGLOBULIN ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86793	YERSINIA ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86790	VIRUS ANTIBODY NOS	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86789	WEST NILE VIRUS ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86788	WEST NILE VIRUS AB IGM	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86787	VARICELLA-ZOSTER ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86784	TRICHINELLA ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	86780	TREPONEMA PALLIDUM	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86778	TOXOPLASMA ANTIBODY IGM	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86777	TOXOPLASMA ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86774	TETANUS ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86771	SHIGELLA ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86769	SARS-COV-2 COVID-19 ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	04/09/2020	04/09/2020			
MMAI-Medicare/Medicaid	86768	SALMONELLA ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86765	RUBEOLA ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86762	RUBELLA ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86759	ROTAVIRUS ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86757	RICKETTSIA ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86756	RESPIRATORY VIRUS ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86753	PROTOZOA ANTIBODY NOS	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86750	MALARIA ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86747	PARVOVIRUS ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86744	NOCARDIA ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	86741	NEISSERIA MENINGITIDIS	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86738	MYCOPLASMA ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86735	MUMPS ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86732	MUCORMYCOSIS ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86727	LYMPH CHORIOMENINGITIS AB	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86723	LISTERIA MONOCYTOGENES	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86720	LEPTOSPIRA ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86717	LEISHMANIA ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86713	LEGIONELLA ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86710	INFLUENZA VIRUS ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86709	HEPATITIS A IGM ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86708	HEPATITIS A ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86707	HEPATITIS BE ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86706	HEP B SURFACE ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86705	HEP B CORE ANTIBODY IGM	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86704	HEP B CORE ANTIBODY TOTAL	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	86703	HIV-1/HIV-2 1 RESULT ANTBDY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86702	HIV-2 ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86701	HIV-1ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86698	HISTOPLASMA ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86696	HERPES SIMPLEX TYPE 2 TEST	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86695	HERPES SIMPLEX TYPE 1 TEST	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86694	HERPES SIMPLEX NES ANTBDY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86692	HEPATITIS DELTA AGENT ANTBDY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86689	HTLV/HIV CONFIRMJ ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86688	HTLV-II ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86687	HTLV-I ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86684	HEMOPHILUS INFLUENZA ANTIBDY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86682	HELMINTH ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86677	HELICOBACTER PYLORI ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86674	GIARDIA LAMBLIA ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86671	FUNGUS NES ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	86668	FRANCISELLA TULARENSIS	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86666	EHRLICHIA ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86665	EPSTEIN-BARR CAPSID VCA	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86664	EPSTEIN-BARR NUCLEAR ANTIGEN	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86663	EPSTEIN-BARR ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86658	ENTEROVIRUS ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86654	ENCEPHALTIS WEST EQNE ANTBDY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86653	ENCEPHALTIS ST LOUIS ANTBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86652	ENCEPHALTIS EAST EQNE ANBDY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86651	ENCEPHALITIS CALIFORN ANTBDY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86648	DIPHTHERIA ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86645	CMV ANTIBODY IGM	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86644	CMV ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86641	CRYPTOCOCCUS ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86638	Q FEVER ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86635	COCCIDIOIDES ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	86632	CHLAMYDIA IGM ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86631	CHLAMYDIA ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86628	CANDIDA ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86625	CAMPYLOBACTER ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86622	BRUCELLA ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86619	BORRELIA ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86618	LYME DISEASE ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86617	LYME DISEASE ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86615	BORDETELLA ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86612	BLASTOMYCES ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86611	BARTONELLA ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86609	BACTERIUM ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86606	ASPERGILLUS ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86603	ADENOVIRUS ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86602	ANTINOMYCES ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86593	SYPHILIS TEST NON-TREP QUANT	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	86592	SYPHILIS TEST NON-TREP QUAL	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86590	STREPTOKINASE ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86580	TB INTRADERMAL TEST	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86510	HISTOPLASMOSIS SKIN TEST	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86485	SKIN TEST CANDIDA	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86481	TB AG RESPONSE T-CELL SUSP	PATH & LAB - IMMUNOLOGY	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	86480	TB TEST CELL IMMUN MEASURE	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86431	RHEUMATOID FACTOR QUANT	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86430	RHEUMATOID FACTOR TEST QUAL	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86406	PARTICLE AGGLUT ANTBDY TITR	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86403	PARTICLE AGGLUT ANTBDY SCRN	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86386	NUCLEAR MATRIX PROTEIN 22	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86384	NITROBLUE TETRAZOLIUM DYE	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86382	NEUTRALIZATION TEST VIRAL	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86376	MICROSOMAL ANTIBODY EACH	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86367	STEM CELLS TOTAL COUNT	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	86361	T CELL ABSOLUTE COUNT	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86360	T CELL ABSOLUTE COUNT/RATIO	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86359	T CELLS TOTAL COUNT	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86357	NK CELLS TOTAL COUNT	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86356	MONONUCLEAR CELL ANTIGEN	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86355	B CELLS TOTAL COUNT	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86353	LYMPHOCYTE TRANSFORMATION	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86352	CELL FUNCTION ASSAY W/STIM	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86344	LEUKOCYTE PHAGOCYTOSIS	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86343	LEUKOCYTE HISTAMINE RELEASE	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86341	ISLET CELL ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86340	INTRINSIC FACTOR ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86336	INHIBIN A	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86335	IMMUNFIX E-PHORSIS/URINE/CSF	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86334	IMMUNOFIX E-PHORESIS SERUM	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86332	IMMUNE COMPLEX ASSAY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	86331	IMMUNODIFFUSION OUCHTERLONY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86328	IA NFCT AB SARSCOV2 COVID19	PATH & LAB - IMMUNOLOGY	NO	04/09/2020	04/09/2020			
MMAI-Medicare/Medicaid	86327	IMMUNOELECTROPHORESIS ASSAY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86325	OTHER IMMUNOELECTROPHORESIS	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86320	SERUM IMMUNOELECTROPHORESIS	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86318	IA INFECTIOUS AGENT ANTIBODY	PATH & LAB-MULTIANALYTE ASSAYS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86317	IMMUNOASSAY INFECTIOUS AGENT	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86316	IMMUNOASSAY TUMOR OTHER	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86310	HETEROPHILE ANTIBODY ABSRBJ	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86309	HETEROPHILE ANTIBODY TITER	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86308	HETEROPHILE ANTIBODY SCREEN	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86305	HUMAN EPIDIDYMIS PROTEIN 4	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86304	IMMUNOASSAY TUMOR CA 125	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86301	IMMUNOASSAY TUMOR CA 19-9	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86300	IMMUNOASSAY TUMOR CA 15-3	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86294	IMMUNOASSAY TUMOR QUAL	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	86280	HEMAGGLUTINATION INHIBITION	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86277	GROWTH HORMONE ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86256	FLUORESCENT ANTIBODY TITER	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86255	FLUORESCENT ANTIBODY SCREEN	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86235	NUCLEAR ANTIGEN ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86226	DNA ANTIBODY SINGLE STRAND	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86225	DNA ANTIBODY NATIVE	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86215	DEOXYRIBONUCLEASE ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86200	CCP ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86171	COMPLEMENT FIXATION EACH	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86162	COMPLEMENT TOTAL (CH50)	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86161	COMPLEMENT/FUNCTION ACTIVITY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86160	COMPLEMENT ANTIGEN	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86156	COLD AGGLUTININ SCREEN	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86155	CHEMOTAXIS ASSAY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86148	ANTI-PHOSPHOLIPID ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	86147	CARDIOLIPIN ANTIBODY EA IG	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86146	BETA-2 GLYCOPROTEIN ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86141	C-REACTIVE PROTEIN HS	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86079	PHYS BLOOD BANK SERV AUTHRJ	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86078	PHYS BLOOD BANK SERV REACTJ	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86077	PHYS BLOOD BANK SERV XMATCH	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86063	ANTISTREPTOLYSIN O SCREEN	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86060	ANTISTREPTOLYSIN O TITER	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86039	ANTINUCLEAR ANTIBODIES (ANA)	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86038	ANTINUCLEAR ANTIBODIES	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86023	IMMUNOGLOBULIN ASSAY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86022	PLATELET ANTIBODIES	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86021	WBC ANTIBODY IDENTIFICATION	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86008	ALLG SPEC IGE RECOMB EA	PATH & LAB - IMMUNOLOGY	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	86005	ALLG SPEC IGE MULTIALLG SCR	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86003	ALLG SPEC IGE CRUDE XTRC EA	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	86001	ALLERGEN SPECIFIC IGG	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86000	AGGLUTININS FEBRILE ANTIGEN	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85810	BLOOD VISCOSITY EXAMINATION	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85732	THROMBOPLASTIN TIME PARTIAL	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85730	THROMBOPLASTIN TIME PARTIAL	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85705	THROMBOPLASTIN INHIBITION	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85675	THROMBIN TIME TITER	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85670	THROMBIN TIME PLASMA	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85660	RBC SICKLE CELL TEST	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85652	RBC SED RATE AUTOMATED	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85651	RBC SED RATE NONAUTOMATED	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85635	REPTILASE TEST	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85613	RUSSELL VIPER VENOM DILUTED	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85612	VIPER VENOM PROTHROMBIN TIME	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85611	PROTHROMBIN TEST	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85610	PROTHROMBIN TIME	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	85598	HEXAGNAL PHOSPH PLTLT NEUTRL	PATH & LAB - HEMATOLOGY AND CO	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	85597	PHOSPHOLIPID PLTLT NEUTRALIZ	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85576	BLOOD PLATELET AGGREGATION	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85557	RBC OSMOTIC FRAGILITY	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85555	RBC OSMOTIC FRAGILITY	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85547	RBC MECHANICAL FRAGILITY	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85540	WBC ALKALINE PHOSPHATASE	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85536	IRON STAIN PERIPHERAL BLOOD	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85530	HEPARIN-PROTAMINE TOLERANCE	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85461	HEMOGLOBIN FETAL	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85460	HEMOGLOBIN FETAL	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85445	HEINZ BODIES INDUCED	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85441	HEINZ BODIES DIRECT	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85421	FIBRINOLYTIC PLASMINOGEN	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85420	FIBRINOLYTIC PLASMINOGEN	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85415	FIBRINOLYTIC PLASMINOGEN	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	85410	FIBRINOLYTIC ANTIPLASMIN	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85400	FIBRINOLYTIC PLASMIN	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85397	CLOTTING FUNCT ACTIVITY	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85396	CLOTTING ASSAY WHOLE BLOOD	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85390	FIBRINOLYSINS SCREEN I&R	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85385	FIBRINOGEN ANTIGEN	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85384	FIBRINOGEN ACTIVITY	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85380	FIBRIN DEGRADJ D-DIMER	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85379	FIBRIN DEGRADATION QUANT	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85378	FIBRIN DEGRADE SEMIQUANT	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85370	FIBRINOGEN TEST	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85366	FIBRINOGEN TEST	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85362	FIBRIN DEGRADATION PRODUCTS	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85360	EUGLOBULIN LYSIS	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85348	COAGULATION TIME OTR METHOD	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85347	COAGULATION TIME ACTIVATED	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	85345	COAGULATION TIME LEE & WHITE	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85335	FACTOR INHIBITOR TEST	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85307	ASSAY ACTIVATED PROTEIN C	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85306	CLOT INHIBIT PROT S FREE	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85305	CLOT INHIBIT PROT S TOTAL	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85303	CLOT INHIBIT PROT C ACTIVITY	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85302	CLOT INHIBIT PROT C ANTIGEN	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85301	ANTITHROMBIN III ANTIGEN	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85300	ANTITHROMBIN III ACTIVITY	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85293	CLOT FACTOR WGHT KININOGEN	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85292	CLOT FACTOR FLETCHER FACT	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85291	CLOT FACTOR XIII FIBRIN SCRN	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85290	CLOT FACTOR XIII FIBRIN STAB	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85280	CLOT FACTOR XII HAGEMAN	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85270	CLOT FACTOR XI PTA	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85260	CLOT FACTOR X STUART-POWER	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	85250	CLOT FACTOR IX PTC/CHRSTMAS	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85247	CLOT FACTOR VIII MULTIMETRIC	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85246	CLOT FACTOR VIII VW ANTIGEN	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85245	CLOT FACTOR VIII VW RISTOCTN	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85244	CLOT FACTOR VIII RELTD ANTGN	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85240	CLOT FACTOR VIII AHG 1 STAGE	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85230	CLOT FACTOR VII PROCONVERTIN	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85220	BLOOC CLOT FACTOR V TEST	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85210	CLOT FACTOR II PROTHROM SPEC	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85175	BLOOD CLOT LYSIS TIME	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85170	BLOOD CLOT RETRACTION	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85097	BONE MARROW INTERPRETATION	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85060	BLOOD SMEAR INTERPRETATION	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85055	RETICULATED PLATELET ASSAY	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85049	AUTOMATED PLATELET COUNT	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85048	AUTOMATED LEUKOCYTE COUNT	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	85046	RETICYTE/HGB CONCENTRATE	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85045	AUTOMATED RETICULOCYTE COUNT	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85044	MANUAL RETICULOCYTE COUNT	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85041	AUTOMATED RBC COUNT	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85032	MANUAL CELL COUNT EACH	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85027	COMPLETE CBC AUTOMATED	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85025	COMPLETE CBC W/AUTO DIFF WBC	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85018	HEMOGLOBIN	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85014	HEMATOCRIT	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85013	SPUN MICROHEMATOCRIT	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85009	MANUAL DIFF WBC COUNT B-COAT	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85008	BL SMEAR W/O DIFF WBC COUNT	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85007	BL SMEAR W/DIFF WBC COUNT	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85004	AUTOMATED DIFF WBC COUNT	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85002	BLEEDING TIME TEST	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84830	OVULATION TESTS	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	84704	HCG FREE BETACHAIN TEST	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84703	CHORIONIC GONADOTROPIN ASSAY	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84702	CHORIONIC GONADOTROPIN TEST	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84681	ASSAY OF C-PEPTIDE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84630	ASSAY OF ZINC	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84620	XYLOSE TOLERANCE TEST	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84600	ASSAY OF VOLATILES	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84597	ASSAY OF VITAMIN K	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84591	ASSAY OF NOS VITAMIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84590	ASSAY OF VITAMIN A	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84588	ASSAY OF VASOPRESSIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84586	ASSAY OF VIP	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84585	ASSAY OF URINE VMA	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84583	ASSAY OF URINE UROBILINOGEN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84580	ASSAY OF URINE UROBILINOGEN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84578	TEST URINE UROBILINOGEN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	84577	ASSAY OF FECES/UROBILINOGEN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84560	ASSAY OF URINE/URIC ACID	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84550	ASSAY OF BLOOD/URIC ACID	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84545	UREA-N CLEARANCE TEST	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84540	ASSAY OF URINE/UREA-N	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84525	UREA NITROGEN SEMI-QUANT	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84520	ASSAY OF UREA NITROGEN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84512	ASSAY OF TROPONIN QUAL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84510	ASSAY OF TYROSINE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84490	ASSAY OF FECES FOR TRYPSIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84488	TEST FECES FOR TRYPSIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84485	ASSAY DUODENAL FLUID TRYPSIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84484	ASSAY OF TROPONIN QUANT	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84482	T3 REVERSE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84481	FREE ASSAY (FT-3)	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84480	ASSAY TRIIODOTHYRONINE (T3)	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	84479	ASSAY OF THYROID (T3 OR T4)	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84478	ASSAY OF TRIGLYCERIDES	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84466	ASSAY OF TRANSFERRIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84460	ALANINE AMINO (ALT) (SGPT)	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84450	TRANSFERASE (AST) (SGOT)	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84449	ASSAY OF TRANSCORTIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84446	ASSAY OF VITAMIN E	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84445	ASSAY OF TSI GLOBULIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84443	ASSAY THYROID STIM HORMONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84442	ASSAY OF THYROID ACTIVITY	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84439	ASSAY OF FREE THYROXINE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84437	ASSAY OF NEONATAL THYROXINE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84436	ASSAY OF TOTAL THYROXINE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84432	ASSAY OF THYROGLOBULIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84431	THROMBOXANE URINE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84430	ASSAY OF THIOCYANATE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	84425	ASSAY OF VITAMIN B-1	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84410	TESTOSTERONE BIOAVAILABLE	PATH & LAB - CHEMISTRY	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	84403	ASSAY OF TOTAL TESTOSTERONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84402	ASSAY OF FREE TESTOSTERONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84392	ASSAY OF URINE SULFATE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84379	SUGARS MULTIPLE QUANT	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84378	SUGARS SINGLE QUANT	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84377	SUGARS MULTIPLE QUAL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84376	SUGARS SINGLE QUAL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84375	CHROMATOGRAM ASSAY SUGARS	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84315	BODY FLUID SPECIFIC GRAVITY	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84311	SPECTROPHOTOMETRY	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84307	ASSAY OF SOMATOSTATIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84305	ASSAY OF SOMATOMEDIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84302	ASSAY OF SWEAT SODIUM	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84300	ASSAY OF URINE SODIUM	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	84295	ASSAY OF SERUM SODIUM	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84285	ASSAY OF SILICA	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84275	ASSAY OF SIALIC ACID	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84270	ASSAY OF SEX HORMONE GLOBUL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84260	ASSAY OF SEROTONIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84255	ASSAY OF SELENIUM	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84252	ASSAY OF VITAMIN B-2	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84244	ASSAY OF RENIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84238	ASSAY NONENDOCRINE RECEPTOR	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84235	ASSAY OF ENDOCRINE HORMONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84234	ASSAY OF PROGESTERONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84233	ASSAY OF ESTROGEN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84228	ASSAY OF QUININE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84220	ASSAY OF PYRUVATE KINASE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84210	ASSAY OF PYRUVATE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84207	ASSAY OF VITAMIN B-6	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	84206	ASSAY OF PROINSULIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84203	TEST RBC PROTOPORPHYRIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84202	ASSAY RBC PROTOPORPHYRIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84182	PROTEIN WESTERN BLOT TEST	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84181	WESTERN BLOT TEST	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84166	PROTEIN E-PHORESIS/URINE/CSF	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84165	PROTEIN E-PHORESIS SERUM	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84163	PAPPA SERUM	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84160	ASSAY OF PROTEIN ANY SOURCE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84157	ASSAY OF PROTEIN OTHER	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84156	ASSAY OF PROTEIN URINE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84155	ASSAY OF PROTEIN SERUM	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84154	ASSAY OF PSA FREE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84153	ASSAY OF PSA TOTAL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84152	ASSAY OF PSA COMPLEXED	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84150	ASSAY OF PROSTAGLANDIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	84146	ASSAY OF PROLACTIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84144	ASSAY OF PROGESTERONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84143	ASSAY OF 17-HYDROXYPREGNENO	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84140	ASSAY OF PREGNENOLONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84138	ASSAY OF PREGNANETRIOL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84135	ASSAY OF PREGNANEDIOL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84134	ASSAY OF PREALBUMIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84133	ASSAY OF URINE POTASSIUM	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84132	ASSAY OF SERUM POTASSIUM	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84126	ASSAY OF FECES PORPHYRINS	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84120	ASSAY OF URINE PORPHYRINS	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84119	TEST URINE FOR PORPHYRINS	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84112	EVAL AMNIOTIC FLUID PROTEIN	PATH & LAB - CHEMISTRY	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	84110	ASSAY OF PORPHOBILINOGEN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84106	TEST FOR PORPHOBILINOGEN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84105	ASSAY OF URINE PHOSPHORUS	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	84100	ASSAY OF PHOSPHORUS	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84087	ASSAY PHOSPHOHEXOSE ENZYMES	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84085	ASSAY OF RBC PG6D ENZYME	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84081	ASSAY PHOSPHATIDYLGLYCEROL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84080	ASSAY ALKALINE PHOSPHATASES	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84078	ASSAY ALKALINE PHOSPHATASE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84075	ASSAY ALKALINE PHOSPHATASE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84066	ASSAY PROSTATE PHOSPHATASE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84060	ASSAY ACID PHOSPHATASE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84035	ASSAY OF PHENYLKETONES	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84030	ASSAY OF BLOOD PKU	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83993	ASSAY FOR CALPROTECTIN FECAL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83992	ASSAY FOR PHENCYCLIDINE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83987	EXHALED BREATH CONDENSATE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83986	ASSAY PH BODY FLUID NOS	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83970	ASSAY OF PARATHORMONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	83951	ONCOPROTEIN DCP	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83945	ASSAY OF OXALATE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83937	ASSAY OF OSTEOCALCIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83935	ASSAY OF URINE OSMOLALITY	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83930	ASSAY OF BLOOD OSMOLALITY	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83921	ORGANIC ACID SINGLE QUANT	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83919	ORGANIC ACIDS QUAL EACH	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83918	ORGANIC ACIDS TOTAL QUANT	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83916	OLIGOCLONAL BANDS	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83915	ASSAY OF NUCLEOTIDASE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83885	ASSAY OF NICKEL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83883	ASSAY NEPHELOMETRY NOT SPEC	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83880	ASSAY OF NATRIURETIC PEPTIDE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83876	ASSAY MYELOPEROXIDASE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83874	ASSAY OF MYOGLOBIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83873	ASSAY OF CSF PROTEIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	83872	ASSAY SYNOVIAL FLUID MUCIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83864	MUCOPOLYSACCHARIDES	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83861	MICROFLUID ANALY TEARS	PATH & LAB - CHEMISTRY	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	83857	ASSAY OF METHEMALBUMIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83835	ASSAY OF METANEPHRINES	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83825	ASSAY OF MERCURY	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83789	MASS SPECTROMETRY QUAL/QUAN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83785	ASSAY OF MANGANESE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83775	ASSAY MALATE DEHYDROGENASE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83735	ASSAY OF MAGNESIUM	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83727	ASSAY OF LRH HORMONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83722	LIPOPRTN DIR MEAS SD LDL CHL	PATH & LAB - CHEMISTRY	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	83721	ASSAY OF BLOOD LIPOPROTEIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83719	ASSAY OF BLOOD LIPOPROTEIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83718	ASSAY OF LIPOPROTEIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83704	LIPOPROTEIN BLD QUAN PART	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	83701	LIPOPROTEIN BLD HR FRACTION	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83700	LIPOPRO BLD ELECTROPHORETIC	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83698	ASSAY LIPOPROTEIN PLA2	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83695	ASSAY OF LIPOPROTEIN(A)	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83690	ASSAY OF LIPASE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83670	ASSAY OF LAP ENZYME	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83664	LAMELLAR BDY FETAL LUNG	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83663	FLUORO POLARIZE FETAL LUNG	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83662	FOAM STABILITY FETAL LUNG	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83661	L/S RATIO FETAL LUNG	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83655	ASSAY OF LEAD	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83633	TEST URINE FOR LACTOSE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83632	PLACENTAL LACTOGEN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83631	LACTOFERRIN FECAL (QUANT)	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83630	LACTOFERRIN FECAL (QUAL)	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83625	ASSAY OF LDH ENZYMES	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	83615	LACTATE (LD) (LDH) ENZYME	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83605	ASSAY OF LACTIC ACID	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83593	FRACTIONATION KETOSTEROIDS	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83586	ASSAY 17- KETOSTEROIDS	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83582	ASSAY OF KETOGENIC STEROIDS	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83570	ASSAY OF IDH ENZYME	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83550	IRON BINDING TEST	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83540	ASSAY OF IRON	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83528	ASSAY OF INTRINSIC FACTOR	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83527	ASSAY OF INSULIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83525	ASSAY OF INSULIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83520	IMMUNOASSAY QUANT NOS NONAB	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83519	RIA NONANTIBODY	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83518	IMMUNOASSAY DIPSTICK	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83516	IMMUNOASSAY NONANTIBODY	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83505	ASSAY TOTAL HYDROXYPROLINE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	83500	ASSAY FREE HYDROXYPROLINE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83497	ASSAY OF 5-HIAA	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83150	ASSAY OF HOMOVANILLIC ACID	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83090	ASSAY OF HOMOCYSTINE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83088	ASSAY OF HISTAMINE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83070	ASSAY OF HEMOSIDERIN QUAL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83026	HEMOGLOBIN COPPER SULFATE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83021	HEMOGLOBIN CHROMOTOGRAPHY	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83020	HEMOGLOBIN ELECTROPHORESIS	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83018	HEAVY METAL QUANT EACH NES	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83015	HEAVY METAL QUAL ANY ANAL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83014	H PYLORI DRUG ADMIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83013	H PYLORI (C-13) BREATH	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83012	ASSAY OF HAPTOGLOBINS	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83010	ASSAY OF HAPTOGLOBIN QUANT	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83009	H PYLORI (C-13) BLOOD	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	83003	ASSAY GROWTH HORMONE (HGH)	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83002	ASSAY OF GONADOTROPIN (LH)	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83001	ASSAY OF GONADOTROPIN (FSH)	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82985	ASSAY OF GLYCATED PROTEIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82979	ASSAY RBC GLUTATHIONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82978	ASSAY OF GLUTATHIONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82977	ASSAY OF GGT	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82965	ASSAY OF GDH ENZYME	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82963	ASSAY OF GLUCOSIDASE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82962	GLUCOSE BLOOD TEST	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82960	TEST FOR G6PD ENZYME	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82955	ASSAY OF G6PD ENZYME	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82952	GTT-ADDED SAMPLES	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82951	GLUCOSE TOLERANCE TEST (GTT)	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82950	GLUCOSE TEST	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82948	REAGENT STRIP/BLOOD GLUCOSE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	82947	ASSAY GLUCOSE BLOOD QUANT	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82946	GLUCAGON TOLERANCE TEST	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82945	GLUCOSE OTHER FLUID	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82943	ASSAY OF GLUCAGON	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82941	ASSAY OF GASTRIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82938	GASTRIN TEST	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82930	GASTRIC ANALY W/PH EA SPEC	PATH & LAB - CHEMISTRY	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	82820	HEMOGLOBIN-OXYGEN AFFINITY	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82810	BLOOD GASES O2 SAT ONLY	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82805	BLOOD GASES W/O2 SATURATION	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82803	BLOOD GASES ANY COMBINATION	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82800	BLOOD PH	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82787	IGG 1 2 3 OR 4 EACH	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82785	ASSAY OF IGE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82784	ASSAY IGA/IGD/IGG/IGM EACH	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82777	GALECTIN-3	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	82776	GALACTOSE TRANSFERASE TEST	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82775	ASSAY GALACTOSE TRANSFERASE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82760	ASSAY OF GALACTOSE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82759	ASSAY OF RBC GALACTOKINASE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82757	ASSAY OF SEMEN FRUCTOSE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82747	ASSAY OF FOLIC ACID RBC	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82746	ASSAY OF FOLIC ACID SERUM	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82735	ASSAY OF FLUORIDE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82731	ASSAY OF FETAL FIBRONECTIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82728	ASSAY OF FERRITIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82726	LONG CHAIN FATTY ACIDS	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82725	ASSAY OF BLOOD FATTY ACIDS	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82715	ASSAY OF FECAL FAT	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82710	FATS/LIPIDS FECES QUANT	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82705	FATS/LIPIDS FECES QUAL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82696	ASSAY OF ETIOCHOLANOLONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	82693	ASSAY OF ETHYLENE GLYCOL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82679	ASSAY OF ESTRONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82677	ASSAY OF ESTRIOL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82672	ASSAY OF ESTROGEN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82671	ASSAY OF ESTROGENS	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82668	ASSAY OF ERYTHROPOIETIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82664	ELECTROPHORETIC TEST	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82658	ENZYME CELL ACTIVITY RA	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82657	ENZYME CELL ACTIVITY	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82652	VIT D 1 25-DIHYDROXY	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82642	DIHYDROTESTOSTERONE	PATH & LAB - CHEMISTRY	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	82638	ASSAY OF DIBUCAINE NUMBER	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82634	DEOXYCORTISOL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82633	DESOXYCORTICOSTERONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82627	DEHYDROEPIANDROSTERONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82615	TEST FOR URINE CYSTINES	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	82608	B-12 BINDING CAPACITY	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82607	VITAMIN B-12	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82600	ASSAY OF CYANIDE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82595	ASSAY OF CRYOGLOBULIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82585	ASSAY OF CRYOFIBRINOGEN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82575	CREATININE CLEARANCE TEST	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82570	ASSAY OF URINE CREATININE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82565	ASSAY OF CREATININE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82554	CREATINE ISOFORMS	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82553	CREATINE MB FRACTION	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82552	ASSAY OF CPK IN BLOOD	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82550	ASSAY OF CK (CPK)	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82542	COL CHROMOTOGRAPHY QUAL/QUAN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82540	ASSAY OF CREATINE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82533	TOTAL CORTISOL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82530	CORTISOL FREE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	82528	ASSAY OF CORTICOSTERONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82525	ASSAY OF COPPER	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82523	COLLAGEN CROSSLINKS	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82507	ASSAY OF CITRATE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82495	ASSAY OF CHROMIUM	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82485	ASSAY CHONDROITIN SULFATE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82482	ASSAY RBC CHOLINESTERASE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82480	ASSAY SERUM CHOLINESTERASE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82465	ASSAY BLD/SERUM CHOLESTEROL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82441	TEST FOR CHLOROHYDROCARBONS	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82438	ASSAY OTHER FLUID CHLORIDES	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82436	ASSAY OF URINE CHLORIDE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82435	ASSAY OF BLOOD CHLORIDE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82415	ASSAY OF CHLORAMPHENICOL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82390	ASSAY OF CERULOPLASMIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82387	ASSAY OF CATHEPSIN-D	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	82384	ASSAY THREE CATECHOLAMINES	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82383	ASSAY BLOOD CATECHOLAMINES	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82382	ASSAY URINE CATECHOLAMINES	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82380	ASSAY OF CAROTENE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82379	ASSAY OF CARNITINE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82378	CARCINOEMBRYONIC ANTIGEN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82376	ASSAY CARBOXYHB QUAL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82375	ASSAY CARBOXYHB QUANT	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82374	ASSAY BLOOD CARBON DIOXIDE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82373	ASSAY C-D TRANSFER MEASURE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82370	X-RAY ASSAY CALCULUS	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82365	CALCULUS SPECTROSCOPY	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82360	CALCULUS ASSAY QUANT	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82355	CALCULUS ANALYSIS QUAL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82340	ASSAY OF CALCIUM IN URINE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82331	CALCIUM INFUSION TEST	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	82330	ASSAY OF CALCIUM	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82310	ASSAY OF CALCIUM	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82308	ASSAY OF CALCITONIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82306	VITAMIN D 25 HYDROXY	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82300	ASSAY OF CADMIUM	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82286	ASSAY OF BRADYKININ	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82274	ASSAY TEST FOR BLOOD FECAL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82272	OCCULT BLD FECES 1-3 TESTS	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82271	OCCULT BLOOD OTHER SOURCES	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82270	OCCULT BLOOD FECES	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82261	ASSAY OF BIOTINIDASE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82252	FECAL BILIRUBIN TEST	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82248	BILIRUBIN DIRECT	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82247	BILIRUBIN TOTAL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82239	BILE ACIDS TOTAL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82232	ASSAY OF BETA-2 PROTEIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	82190	ATOMIC ABSORPTION	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82180	ASSAY OF ASCORBIC ACID	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82175	ASSAY OF ARSENIC	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82172	ASSAY OF APOLIPOPROTEIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82164	ANGIOTENSIN I ENZYME TEST	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82163	ASSAY OF ANGIOTENSIN II	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82160	ASSAY OF ANDROSTERONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82157	ASSAY OF ANDROSTENEDIONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82150	ASSAY OF AMYLASE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82143	AMNIOTIC FLUID SCAN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82140	ASSAY OF AMMONIA	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82139	AMINO ACIDS QUAN 6 OR MORE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82136	AMINO ACIDS QUANT 2-5	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82135	ASSAY AMINOLEVULINIC ACID	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82131	AMINO ACIDS SINGLE QUANT	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82128	AMINO ACIDS MULT QUAL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	82127	AMINO ACID SINGLE QUAL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82120	AMINES VAGINAL FLUID QUAL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82108	ASSAY OF ALUMINUM	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82107	ALPHA-FETOPROTEIN L3	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82106	ALPHA-FETOPROTEIN AMNIOTIC	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82104	ALPHA-1-ANTITRYPSIN PHENO	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82103	ALPHA-1-ANTITRYPSIN TOTAL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82088	ASSAY OF ALDOSTERONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82085	ASSAY OF ALDOLASE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82075	ASSAY OF BREATH ETHANOL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82045	ALBUMIN ISCHEMIA MODIFIED	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82044	UR ALBUMIN SEMIQUANTITATIVE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82043	UR ALBUMIN QUANTITATIVE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82042	OTHER SOURCE ALBUMIN QUAN EA	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82040	ASSAY OF SERUM ALBUMIN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82030	ASSAY OF ADP & AMP	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	82024	ASSAY OF ACTH	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82017	ACYLCARNITINES QUANT	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82016	ACYLCARNITINES QUAL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82013	ACETYLCHOLINESTERASE ASSAY	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81552	ONC UVEAL MLNMA MRNA 15 GENE	PATH & LAB-MULTIANALYTE ASSAYS	YES	12/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	81542	ONC PROSTATE MRNA 22 CNT GEN	PATH & LAB-MULTIANALYTE ASSAYS	YES	12/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	81539	ONCOLOGY PROSTATE PROB SCORE	PATH & LAB - MICROBIOLOGY	YES	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	81522	ONC BREAST MRNA 12 GENES	PATH & LAB-MULTIANALYTE ASSAYS	YES	12/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	81518	ONC BRST MRNA 11 GENES	PATH & LAB - CYTOGENETIC STUDI	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	81507	FETAL ANEUPLOIDY TRISOM RISK	PATH & LAB - MICROBIOLOGY	NO	03/28/2020	03/28/2020			
MMAI-Medicare/Medicaid	81504	ONCOLOGY TISSUE OF ORIGIN	PATH & LAB - CYTOGENETIC STUDI	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	81420	FETAL CHRMOML ANEUPLOIDY	PATH & LAB - MICROBIOLOGY	NO	03/28/2020	03/28/2020			
MMAI-Medicare/Medicaid	81383	HLA II TYPING 1 ALLELE HR	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81382	HLA II TYPING 1 LOC HR	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81381	HLA I TYPING 1 ALLELE HR	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81380	HLA I TYPING 1 LOCUS HR	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	81379	HLA I TYPING COMPLETE HR	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81378	HLA I & II TYPING HR	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81377	HLA II TYPE 1 AG EQUIV LR	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81376	HLA II TYPING 1 LOCUS LR	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81375	HLA II TYPING AG EQUIV LR	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81374	HLA I TYPING 1 ANTIGEN LR	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81373	HLA I TYPING 1 LOCUS LR	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81372	HLA I TYPING COMPLETE LR	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81371	HLA I & II TYPE VERIFY LR	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81370	HLA I & II TYPING LR	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81327	SEPT9 GEN PRMTR MTHYLTN ALYS	PATH & LAB - CYTOGENETIC STUDI	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	81287	MGMT GENE PRMTR MTHYLTN ALYS	PATH & LAB - MICROBIOLOGY	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	81221	CFTR GENE KNOWN FAM VARIANTS	PATH & LAB - CHEMISTRY	NO	09/06/2016	09/06/2016			
MMAI-Medicare/Medicaid	81220	CFTR GENE COM VARIANTS	PATH & LAB - CHEMISTRY	NO	09/06/2016	09/06/2016			
MMAI-Medicare/Medicaid	81210	BRAF GENE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81209	BLM GENE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	81208	BCR/ABL1 GENE OTHER BP	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81207	BCR/ABL1 GENE MINOR BP	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81206	BCR/ABL1 GENE MAJOR BP	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81205	BCKDHB GENE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81200	ASPA GENE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81050	URINALYSIS VOLUME MEASURE	PATH & LAB - URINALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81025	URINE PREGNANCY TEST	PATH & LAB - URINALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81020	URINALYSIS GLASS TEST	PATH & LAB - URINALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81015	MICROSCOPIC EXAM OF URINE	PATH & LAB - URINALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81007	URINE SCREEN FOR BACTERIA	PATH & LAB - URINALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81005	URINALYSIS	PATH & LAB - URINALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81003	URINALYSIS AUTO W/O SCOPE	PATH & LAB - URINALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81002	URINALYSIS NONAUTO W/O SCOPE	PATH & LAB - URINALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81001	URINALYSIS AUTO W/SCOPE	PATH & LAB - URINALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81000	URINALYSIS NONAUTO W/SCOPE	PATH & LAB - URINALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80439	TRH STIMULATION PANEL	PATH & LAB - EVOCATIVE/SUPPRES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	80438	TRH STIMULATION PANEL	PATH & LAB - EVOCATIVE/SUPPRES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80435	INSULIN TOLERANCE PANEL	PATH & LAB - EVOCATIVE/SUPPRES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80434	INSULIN TOLERANCE PANEL	PATH & LAB - EVOCATIVE/SUPPRES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80432	INSULIN SUPPRESSION PANEL	PATH & LAB - EVOCATIVE/SUPPRES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80430	GROWTH HORMONE PANEL	PATH & LAB - EVOCATIVE/SUPPRES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80428	GROWTH HORMONE PANEL	PATH & LAB - EVOCATIVE/SUPPRES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80426	GONADOTROPIN HORMONE PANEL	PATH & LAB - EVOCATIVE/SUPPRES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80424	GLUCAGON TOLERANCE PANEL	PATH & LAB - EVOCATIVE/SUPPRES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80422	GLUCAGON TOLERANCE PANEL	PATH & LAB - EVOCATIVE/SUPPRES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80420	DEXAMETHASONE PANEL	PATH & LAB - EVOCATIVE/SUPPRES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80418	PITUITARY EVALUATION PANEL	PATH & LAB - EVOCATIVE/SUPPRES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80417	RENIN STIMULATION PANEL	PATH & LAB - EVOCATIVE/SUPPRES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80416	RENIN STIMULATION PANEL	PATH & LAB - EVOCATIVE/SUPPRES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80412	CRH STIMULATION PANEL	PATH & LAB - EVOCATIVE/SUPPRES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80410	CALCITONIN STIMUL PANEL	PATH & LAB - EVOCATIVE/SUPPRES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80408	ALDOSTERONE SUPPRESSION EVAL	PATH & LAB - EVOCATIVE/SUPPRES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	80406	ACTH STIMULATION PANEL	PATH & LAB - EVOCATIVE/SUPPRES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80402	ACTH STIMULATION PANEL	PATH & LAB - EVOCATIVE/SUPPRES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80400	ACTH STIMULATION PANEL	PATH & LAB - EVOCATIVE/SUPPRES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80377	DRUG/SUBSTANCE NOS 7/MORE	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80376	DRUG/SUBSTANCE NOS 4-6	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80375	DRUG/SUBSTANCE NOS 1-3	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80374	STEREOISOMER ANALYSIS	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80371	STIMULANTS SYNTHETIC	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80370	SKEL MUSC RELAXANT 3 OR MORE	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80369	SKELETAL MUSCLE RELAXANT 1/2	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80368	SEDATIVE HYPNOTICS	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80364	OPIOID &OPIATE ANALOG 5/MORE	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80363	OPIOIDS & OPIATE ANALOGS 3/4	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80362	OPIOIDS & OPIATE ANALOGS 1/2	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80361	OPIATES 1 OR MORE	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80360	METHYLPHENIDATE	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			

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MMAI-Medicare/Medicaid	80359	METHYLENEDIOXYAMPHETAMINES	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80357	KETAMINE AND NORKETAMINE	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80356	HEROIN METABOLITE	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80355	GABAPENTIN NON-BLOOD	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80352	CANNABINOID SYNTHETIC 7/MORE	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80351	CANNABINOIDS SYNTHETIC 4-6	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80350	CANNABINOIDS SYNTHETIC 1-3	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80349	CANNABINOIDS NATURAL	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80347	BENZODIAZEPINES 13 OR MORE	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80346	BENZODIAZEPINES1-12	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80344	ANTIPSYCHOTICS NOS 7/MORE	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80343	ANTIPSYCHOTICS NOS 4-6	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80342	ANTIPSYCHOTICS NOS 1-3	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80341	ANTIEPILEPTICS NOS 7/MORE	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80340	ANTIEPILEPTICS NOS 4-6	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80339	ANTIEPILEPTICS NOS 1-3	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			

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MMAI-Medicare/Medicaid	80338	ANTIDEPRESSANT NOT SPECIFIED	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80337	TRICYCLIC & CYCLICALS 6/MORE	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80336	ANTIDEPRESSANT TRICYCLIC 3-5	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80335	ANTIDEPRESSANT TRICYCLIC 1/2	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80334	ANTIDEPRESSANTS CLASS 6/MORE	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80333	ANTIDEPRESSANTS CLASS 3-5	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80332	ANTIDEPRESSANTS CLASS 1 OR 2	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80331	ANALGESICS NON-OPIOID 6/MORE	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80330	ANALGESICS NON-OPIOID 3-5	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80329	ANALGESICS NON-OPIOID 1 OR 2	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80328	ANABOLIC STEROID 3 OR MORE	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80327	ANABOLIC STEROID 1 OR 2	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80326	AMPHETAMINES 5 OR MORE	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80325	AMPHETAMINES 3OR 4	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80324	DRUG SCREEN AMPHETAMINES 1/2	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80323	ALKALOIDS NOS	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			

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MMAI-Medicare/Medicaid	80322	ALCOHOLS BIOMARKERS 3/MORE	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80321	ALCOHOLS BIOMARKERS 1OR 2	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80320	DRUG SCREEN QUANTALCOHOLS	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80307	DRUG TEST PRSMV CHEM ANLYZR	PATH & LAB - CHEMISTRY	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	80306	DRUG TEST PRSMV INSTRMNT	PATH & LAB - CHEMISTRY	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	80305	DRUG TEST PRSMV DIR OPT OBS	PATH & LAB - CHEMISTRY	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	80299	QUANTITATIVE ASSAY DRUG	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80285	DRUG ASSAY VORICONAZOLE	PATH & LAB-THERAPEUTIC DRUG	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	80280	DRUG ASSAY VEDOLIZUMAB	PATH & LAB-THERAPEUTIC DRUG	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	80235	DRUG ASSAY LACOSAMIDE	PATH & LAB-THERAPEUTIC DRUG	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	80230	DRUG ASSAY INFLIXIMAB	PATH & LAB-THERAPEUTIC DRUG	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	80203	DRUG SCREEN QUANT ZONISAMIDE	PATH & LAB - CHEMISTRY	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	80202	ASSAY OF VANCOMYCIN	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80201	ASSAY OF TOPIRAMATE	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80200	ASSAY OF TOBRAMYCIN	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80199	DRUG SCREEN QUANT TIAGABINE	PATH & LAB - CHEMISTRY	NO	01/01/2014	01/01/2014			

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MMAI-Medicare/Medicaid	80198	ASSAY OF THEOPHYLLINE	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80197	ASSAY OF TACROLIMUS	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80195	ASSAY OF SIROLIMUS	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80194	ASSAY OF QUINIDINE	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80192	ASSAY OF PROCAINAMIDE	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80190	ASSAY OF PROCAINAMIDE	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80188	ASSAY OF PRIMIDONE	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80187	DRUG ASSAY POSACONAZOLE	PATH & LAB-THERAPEUTIC DRUG	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	80186	ASSAY OF PHENYTOIN FREE	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80185	ASSAY OF PHENYTOIN TOTAL	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80184	ASSAY OF PHENOBARBITAL	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80183	DRUG SCRN QUANT OXCARBAZEPIN	PATH & LAB - CHEMISTRY	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	80180	DRUG SCRN QUAN MYCOPHENOLATE	PATH & LAB - CHEMISTRY	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	80178	ASSAY OF LITHIUM	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80177	DRUG SCRN QUAN LEVETIRACETAM	PATH & LAB - CHEMISTRY	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	80176	ASSAY OF LIDOCAINE	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	80175	DRUG SCREEN QUAN LAMOTRIGINE	PATH & LAB - CHEMISTRY	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	80173	ASSAY OF HALOPERIDOL	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80171	DRUG SCREEN QUANT GABAPENTIN	PATH & LAB - CHEMISTRY	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	80170	ASSAY OF GENTAMICIN	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80169	DRUG ASSAY EVEROLIMUS	PATH & LAB - CHEMISTRY	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	80168	ASSAY OF ETHOSUXIMIDE	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80165	DIPROPYLACETIC ACID FREE	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80164	ASSAY DIPROPYLACETIC ACD TOT	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80163	ASSAY OF DIGOXIN FREE	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80162	ASSAY OF DIGOXIN TOTAL	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80159	DRUG ASSAY CLOZAPINE	PATH & LAB - CHEMISTRY	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	80158	DRUG ASSAY CYCLOSPORINE	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80157	ASSAY CARBAMAZEPINE FREE	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80156	ASSAY CARBAMAZEPINE TOTAL	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80155	DRUG ASSAY CAFFEINE	PATH & LAB - CHEMISTRY	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	80150	ASSAY OF AMIKACIN	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	80145	DRUG ASSAY ADALIMUMAB	PATH & LAB-THERAPEUTIC DRUG	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	80076	HEPATIC FUNCTION PANEL	PATH & LAB - ORGAN OR DISEASE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80074	ACUTE HEPATITIS PANEL	PATH & LAB - ORGAN OR DISEASE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80069	RENAL FUNCTION PANEL	PATH & LAB - ORGAN OR DISEASE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80055	OBSTETRIC PANEL	PATH & LAB - ORGAN OR DISEASE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80053	COMPREHEN METABOLIC PANEL	PATH & LAB - ORGAN OR DISEASE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80050	GENERAL HEALTH PANEL	PATH & LAB - ORGAN OR DISEASE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80048	METABOLIC PANEL TOTAL CA	PATH & LAB - ORGAN OR DISEASE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80047	METABOLIC PANEL IONIZED CA	PATH & LAB - ORGAN OR DISEASE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	79445	NUCLEAR RX INTRA-ARTERIAL	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	79440	NUCLEAR RX INTRA-ARTICULAR	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	79403	HEMATOPOIETIC NUCLEAR TX	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	79300	NUCLR RX INTERSTIT COLLOID	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	79200	NUCLEAR RX INTRACAV ADMIN	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	79101	NUCLEAR RX IV ADMIN	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	79005	NUCLEAR RX ORAL ADMIN	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	78835	RP QUAN MEAS SINGLE AREA	RADIOLOGY-NUCLEAR MEDICINE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	78832	RP LOCLZJ TUM SPECT W/CT 2	RADIOLOGY-NUCLEAR MEDICINE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	78831	RP LOCLZJ TUM SPECT 2 AREAS	RADIOLOGY-NUCLEAR MEDICINE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	78830	RP LOCLZJ TUM SPECT W/CT 1	RADIOLOGY-NUCLEAR MEDICINE	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	78808	IV INJ RA DRUG DX STUDY	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78804	RP LOCLZJ TUM WHBDY 2+D IMG	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78803	RP LOCLZJ TUM SPECT 1 AREA	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78802	RP LOCLZJ TUM WHBDY 1 D IMG	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78801	RP LOCLZJ TUM 2+AREA 1+D IMG	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78800	RP LOCLZJ TUM 1 AREA 1 D IMG	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78761	TESTICULAR IMAGING W/FLOW	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78740	URETERAL REFLUX STUDY	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78730	URINARY BLADDER RETENTION	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78725	KIDNEY FUNCTION STUDY	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78709	K FLOW/FUNCT IMAGE MULTIPLE	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78708	K FLOW/FUNCT IMAGE W/DRUG	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	78707	K FLOW/FUNCT IMAGE W/O DRUG	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78701	KIDNEY IMAGING WITH FLOW	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78700	KIDNEY IMAGING MORPHOL	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78660	NUCLEAR EXAM OF TEAR FLOW	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78650	CSF LEAKAGE IMAGING	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78645	CSF SHUNT EVALUATION	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78635	CSF VENTRICULOGRAPHY	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78630	CEREBROSPINAL FLUID SCAN	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78610	BRAIN FLOW IMAGING ONLY	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78606	BRAIN IMAGE W/FLOW 4 + VIEWS	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78605	BRAIN IMAGE 4+ VIEWS	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78601	BRAIN IMAGE W/FLOW LT 4 VIEWS	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78600	BRAIN IMAGE LT 4 VIEWS	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78598	LUNG PERF&VENTILAT DIFERENTL	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78597	LUNG PERFUSION DIFFERENTIAL	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78582	LUNG VENTILAT&PERFUS IMAGING	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	78580	LUNG PERFUSION IMAGING	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78579	LUNG VENTILATION IMAGING	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78458	VEN THROMBOSIS IMAGES BILAT	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78457	VENOUS THROMBOSIS IMAGING	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78456	ACUTE VENOUS THROMBUS IMAGE	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78445	VASCULAR FLOW IMAGING	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78428	CARDIAC SHUNT IMAGING	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78414	NON-IMAGING HEART FUNCTION	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78351	BONE MINERAL DUAL PHOTON	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78350	BONE MINERAL SINGLE PHOTON	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78315	BONE IMAGING 3 PHASE	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78306	BONE IMAGING WHOLE BODY	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78305	BONE IMAGING MULTIPLE AREAS	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78300	BONE IMAGING LIMITED AREA	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78291	LEVEEN/SHUNT PATENCY EXAM	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78290	MECKELS DIVERT EXAM	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	78282	GI PROTEIN LOSS EXAM	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78278	ACUTE GI BLOOD LOSS IMAGING	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78268	BREATH TEST ANALYSIS C-14	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78267	BREATH TST ATTAIN/ANAL C-14	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78264	GASTRIC EMPTYING IMAG STUDY	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78261	GASTRIC MUCOSA IMAGING	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78230	SALIVARY GLAND IMAGING	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78227	HEPATOBIL SYST IMAGE W/DRUG	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78226	HEPATOBILIARY SYSTEM IMAGING	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78195	LYMPH SYSTEM IMAGING	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78185	SPLEEN IMAGING	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78140	RED CELL SEQUESTRATION	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78130	RED CELL SURVIVAL STUDY	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78121	RED CELL MASS MULTIPLE	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78120	RED CELL MASS SINGLE	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78111	PLASMA VOLUME MULTIPLE	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	78110	PLASMA VOLUME SINGLE	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78104	BONE MARROW IMAGING BODY	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78103	BONE MARROW IMAGING MULT	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78102	BONE MARROW IMAGING LTD	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78075	ADRENAL CORTEX & MEDULLA IMG	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78020	THYROID MET UPTAKE	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78018	THYROID MET IMAGING BODY	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78016	THYROID MET IMAGING/STUDIES	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78015	THYROID MET IMAGING	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77790	RADIATION HANDLING	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77470	SPECIAL RADIATION TREATMENT	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77469	IO RADIATION TX MANAGEMENT	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77435	SBRT MANAGEMENT	RADIOLOGY - RADIATION ONCOLOGY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	77432	STEREOTACTIC RADIATION TRMT	RADIOLOGY - RADIATION ONCOLOGY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	77431	RADIATION THERAPY MANAGEMENT	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77427	RADIATION TX MANAGEMENT X5	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	77370	RADIATION PHYSICS CONSULT	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77338	DESIGN MLC DEVICE FOR IMRT	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77336	RADIATION PHYSICS CONSULT	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77334	RADIATION TREATMENT AID(S)	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77333	RADIATION TREATMENT AID(S)	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77332	RADIATION TREATMENT AID(S)	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77331	SPECIAL RADIATION DOSIMETRY	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77321	SPECIAL TELETX PORT PLAN	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77307	TELETHX ISODOSE PLAN CPLX	RADIOLOGY - RADIATION ONCOLOGY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	77306	TELETHX ISODOSE PLAN SIMPLE	RADIOLOGY - RADIATION ONCOLOGY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	77301	RADIOTHERAPY DOSE PLAN IMRT	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77300	RADIATION THERAPY DOSE PLAN	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77295	3-D RADIOTHERAPY PLAN	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77293	RESPIRATOR MOTION MGMT SIMUL	RADIOLOGY - RADIATION ONCOLOGY	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	77080	DXA BONE DENSITY AXIAL	RADIOLOGY-DIAGNOSTIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77077	JOINT SURVEY SINGLE VIEW	RADIOLOGY-DIAGNOSTIC	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	77067	SCR MAMMO BI INCL CAD	RADIOLOGY - RADIOLOGIC GUIDANC	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	77066	DX MAMMO INCL CAD BI	RADIOLOGY - RADIOLOGIC GUIDANC	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	77065	DX MAMMO INCL CAD UNI	RADIOLOGY - RADIOLOGIC GUIDANC	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	77063	BREAST TOMOSYNTHESIS BI	RADIOLOGY - RADIOLOGIC GUIDANC	NO	07/26/2017	07/26/2017			
MMAI-Medicare/Medicaid	77062	BREAST TOMOSYNTHESIS BI	RADIOLOGY - RADIOLOGIC GUIDANC	NO	07/26/2017	07/26/2017			
MMAI-Medicare/Medicaid	77061	BREAST TOMOSYNTHESIS UNI	RADIOLOGY - RADIOLOGIC GUIDANC	NO	07/26/2017	07/26/2017			
MMAI-Medicare/Medicaid	77054	X-RAY OF MAMMARY DUCTS	RADIOLOGY-BREAST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77053	X-RAY OF MAMMARY DUCT	RADIOLOGY-BREAST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77003	FLUOROGUIDE FOR SPINE INJECT	RADIOLOGY-IMAGING GUIDANCE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77002	NEEDLE LOCALIZATION BY XRAY	RADIOLOGY-IMAGING GUIDANCE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77001	FLUOROGUIDE FOR VEIN DEVICE	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76999	ECHO EXAMINATION PROCEDURE	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	76998	US GUIDE INTRAOP	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76983	USE EA ADDL TARGET LESION	RADIOLOGY - DIAGNOSTIC ULTRASO	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	76982	USE 1ST TARGET LESION	RADIOLOGY - DIAGNOSTIC ULTRASO	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	76981	USE PARENCHYMA	RADIOLOGY - DIAGNOSTIC ULTRASO	YES	01/01/2019	12/31/2078			

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MMAI-Medicare/Medicaid	76979	US TRGT DYN MBUBB EA ADDL	RADIOLOGY - DIAGNOSTIC ULTRASO	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	76978	US TRGT DYN MBUBB 1ST LES	RADIOLOGY - DIAGNOSTIC ULTRASO	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	76977	US BONE DENSITY MEASURE	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76975	GI ENDOSCOPIC ULTRASOUND	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76965	ECHO GUIDANCE RADIOTHERAPY	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76948	ECHO GUIDE OVA ASPIRATION	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76946	ECHO GUIDE FOR AMNIOCENTESIS	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76945	ECHO GUIDE VILLUS SAMPLING	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76942	ECHO GUIDE FOR BIOPSY	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76941	ECHO GUIDE FOR TRANSFUSION	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76940	US GUIDE TISSUE ABLATION	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76937	US GUIDE VASCULAR ACCESS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76936	ECHO GUIDE FOR ARTERY REPAIR	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76932	ECHO GUIDE FOR HEART BIOPSY	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76881	US COMPL JOINT R-T W/IMG	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	76873	ECHOGRAP TRANS R PROS STUDY	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	76872	US TRANSRECTAL	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	76870	US EXAM SCROTUM	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	76857	US EXAM PELVIC LIMITED	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	76856	US EXAM PELVIC COMPLETE	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	76831	ECHO EXAM UTERUS	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	76830	TRANSVAGINAL US NON-OB	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	76800	US EXAM SPINAL CANAL	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	76776	US EXAM K TRANSPL W/DOPPLER	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	76775	US EXAM ABDO BACK WALL LIM	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	76770	US EXAM ABDO BACK WALL COMP	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	76706	US ABDL AORTA SCREEN AAA	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	76705	ECHO EXAM OF ABDOMEN	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	76700	US EXAM ABDOM COMPLETE	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	76642	ULTRASOUND BREAST LIMITED	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	76641	ULTRASOUND BREAST COMPLETE	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	76604	US EXAM CHEST	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/14/2017	12/14/2017			

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MMAI-Medicare/Medicaid	76536	US EXAM OF HEAD AND NECK	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	76529	ECHO EXAM OF EYE	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76519	ECHO EXAM OF EYE	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76516	ECHO EXAM OF EYE	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76514	ECHO EXAM OF EYE THICKNESS	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76506	ECHO EXAM OF HEAD	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	76140	X-RAY CONSULTATION	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76125	CINE/VIDEO X-RAYS ADD-ON	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76120	CINE/VIDEO X-RAYS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76100	X-RAY EXAM OF BODY SECTION	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76098	X-RAY EXAM SURGICAL SPECIMEN	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76080	X-RAY EXAM OF FISTULA	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76010	X-RAY NOSE TO RECTUM	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76000	FLUOROSCOPY LT 1 HR PHYS/QHP	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75989	ABSCESS DRAINAGE UNDER X-RAY	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75984	XRAY CONTROL CATHETER CHANGE	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	75970	VASCULAR BIOPSY	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75959	XRAY PLACE DIST EXT THOR AO	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75958	XRAY PLACE PROX EXT THOR AO	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75957	XRAY ENDOVASC THOR AO REPR	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75956	XRAY ENDOVASC THOR AO REPR	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75902	REMOVE CVA LUMEN OBSTRUCT	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75901	REMOVE CVA DEVICE OBSTRUCT	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75894	X-RAYS TRANSCATH THERAPY	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75893	VENOUS SAMPLING BY CATHETER	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75891	VEIN X-RAY LIVER	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75889	VEIN X-RAY LIVER W/HEMODYNAM	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75887	VEIN X-RAY LIVER W/O HEMODYN	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75885	VEIN X-RAY LIVER W/HEMODYNAM	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75880	VEIN X-RAY EYE SOCKET	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75872	VEIN X-RAY SKULL EPIDURAL	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75870	VEIN X-RAY SKULL	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	75860	VEIN X-RAY NECK	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75842	VEIN X-RAY ADRENAL GLANDS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75840	VEIN X-RAY ADRENAL GLAND	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75833	VEIN X-RAY KIDNEYS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75831	VEIN X-RAY KIDNEY	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75827	VEIN X-RAY CHEST	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75825	VEIN X-RAY TRUNK	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75822	VEIN X-RAY ARMS/LEGS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75820	VEIN X-RAY ARM/LEG	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75810	VEIN X-RAY SPLEEN/LIVER	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75809	NONVASCULAR SHUNT X-RAY	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75807	LYMPH VESSEL X-RAY TRUNK	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75805	LYMPH VESSEL X-RAY TRUNK	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75803	LYMPH VESSEL X-RAY ARMS/LEGS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75801	LYMPH VESSEL X-RAY ARM/LEG	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75774	ARTERY X-RAY EACH VESSEL	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	75756	ARTERY X-RAYS CHEST	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	75746	ARTERY X-RAYS LUNG	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	75743	ARTERY X-RAYS LUNGS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	75741	ARTERY X-RAYS LUNG	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	75736	ARTERY X-RAYS PELVIS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	75733	ARTERY X-RAYS ADRENALS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	75731	ARTERY X-RAYS ADRENAL GLAND	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	75726	ARTERY X-RAYS ABDOMEN	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	75716	ARTERY X-RAYS ARMS/LEGS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	75710	ARTERY X-RAYS ARM/LEG	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	75705	ARTERY X-RAYS SPINE	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	75630	X-RAY AORTA LEG ARTERIES	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	75625	CONTRAST EXAM ABDOMINL AORTA	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	75605	CONTRAST EXAM THORACIC AORTA	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	75600	CONTRAST EXAM THORACIC AORTA	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	74775	X-RAY EXAM OF PERINEUM	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	74742	X-RAY FALLOPIAN TUBE	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74740	X-RAY FEMALE GENITAL TRACT	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74485	DILATION URTR/URT RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74470	X-RAY EXAM OF KIDNEY LESION	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74455	X-RAY URETHRA/BLADDER	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74450	X-RAY URETHRA/BLADDER	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74445	X-RAY EXAM OF PENIS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74440	X-RAY MALE GENITAL TRACT	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74430	CONTRAST X-RAY BLADDER	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74363	X-RAY BILE DUCT DILATION	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74360	X-RAY GUIDE GI DILATION	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74355	X-RAY GUIDE INTESTINAL TUBE	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74340	X-RAY GUIDE FOR GI TUBE	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74330	X-RAY BILE/PANC ENDOSCOPY	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74329	X-RAY FOR PANCREAS ENDOSCOPY	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74328	X-RAY BILE DUCT ENDOSCOPY	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	74301	X-RAYS AT SURGERY ADD-ON	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74300	X-RAY BILE DUCTS/PANCREAS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74290	CONTRAST X-RAY GALLBLADDER	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74283	THER NMA RDCTJ INTUS/OBSTRCJ	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74280	X-RAY XM COLON 2CNTRST STD	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74270	X-RAY XM COLON 1CNTRST STD	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74251	X-RAY XM SM INT 2CNTRST STD	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74250	X-RAY XM SM INT 1CNTRST STD	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74248	X-RAY SM INT F-THRU STD	RADIOLOGY-DIAGNOSTIC RADIOLOGY	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	74246	X-RAY XM UPR GI TRC 2CNTRST	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74240	X-RAY XM UPR GI TRC 1CNTRST	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74235	REMOVE ESOPHAGUS OBSTRUCTION	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74230	X-RAY XM SWLNG FUNCJ C+	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74221	X-RAY XM ESOPHAGUS 2CNTRST	RADIOLOGY-DIAGNOSTIC RADIOLOGY	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	74220	X-RAY XM ESOPHAGUS 1CNTRST	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74210	X-RAY XM PHRNX&/CRV ESOPH C+	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	73660	X-RAY EXAM OF TOE(S)	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73650	X-RAY EXAM OF HEEL	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73630	X-RAY EXAM OF FOOT	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73620	X-RAY EXAM OF FOOT	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73615	CONTRAST X-RAY OF ANKLE	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73610	X-RAY EXAM OF ANKLE	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73600	X-RAY EXAM OF ANKLE	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73592	X-RAY EXAM OF LEG INFANT	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73590	X-RAY EXAM OF LOWER LEG	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73580	CONTRAST X-RAY OF KNEE JOINT	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73565	X-RAY EXAM OF KNEES	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73564	X-RAY EXAM KNEE 4 OR MORE	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73562	X-RAY EXAM OF KNEE 3	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73560	X-RAY EXAM OF KNEE 1 OR 2	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73552	X-RAY EXAM OF FEMUR 2/GT	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	73525	CONTRAST X-RAY OF HIP	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	73523	X-RAY EXAM HIPS BI 5/GT VIEWS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	73503	X-RAY EXAM HIP UNI 4/GT VIEWS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	73140	X-RAY EXAM OF FINGER(S)	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73130	X-RAY EXAM OF HAND	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73120	X-RAY EXAM OF HAND	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73115	CONTRAST X-RAY OF WRIST	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73110	X-RAY EXAM OF WRIST	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73100	X-RAY EXAM OF WRIST	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73092	X-RAY EXAM OF ARM INFANT	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73090	X-RAY EXAM OF FOREARM	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73085	CONTRAST X-RAY OF ELBOW	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73080	X-RAY EXAM OF ELBOW	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73070	X-RAY EXAM OF ELBOW	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73060	X-RAY EXAM OF HUMERUS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73050	X-RAY EXAM OF SHOULDERS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73040	CONTRAST X-RAY OF SHOULDER	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	73030	X-RAY EXAM OF SHOULDER	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73020	X-RAY EXAM OF SHOULDER	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73010	X-RAY EXAM OF SHOULDER BLADE	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73000	X-RAY EXAM OF COLLAR BONE	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	72270	MYELOGPHY 2/GT SPINE REGIONS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	72265	MYELOGRAPHY L-S SPINE	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	72255	MYELOGRAPHY THORACIC SPINE	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	72240	MYELOGRAPHY NECK SPINE	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	72220	X-RAY EXAM SACRUM TAILBONE	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	72202	X-RAY EXAM SI JOINTS 3/GT VWS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	72200	X-RAY EXAM SI JOINTS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	72190	X-RAY EXAM OF PELVIS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	72170	X-RAY EXAM OF PELVIS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	72120	X-RAY BEND ONLY L-S SPINE	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	72114	X-RAY EXAM L-S SPINE BENDING	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	72110	X-RAY EXAM L-2 SPINE 4/GT VWS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	72100	X-RAY EXAM L-S SPINE 2/3 VWS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	72084	X-RAY EXAM ENTIRE SPI 6/GT VW	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	72080	X-RAY EXAM THORACOLMB 2/GT VW	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	72074	X-RAY EXAM THORAC SPINE4/GT VW	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	72072	X-RAY EXAM THORAC SPINE 3VWS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	72070	X-RAY EXAM THORAC SPINE 2VWS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	72052	X-RAY EXAM NECK SPINE 6/GT VWS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	72040	X-RAY EXAM NECK SPINE 2-3 VW	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	72020	X-RAY EXAM OF SPINE 1 VIEW	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	71130	X-RAY STRENOCLAVIC JT 3/GT VWS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	71120	X-RAY EXAM BREASTBONE 2/GT VWS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	71111	X-RAY EXAM RIBS/CHEST4/GT VWS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	71110	X-RAY EXAM RIBS BIL 3 VIEWS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	71101	X-RAY EXAM UNILAT RIBS/CHEST	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	71100	X-RAY EXAM RIBS UNI 2 VIEWS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	71048	X-RAY EXAM CHEST 4+ VIEWS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2018	01/01/2018			

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MMAI-Medicare/Medicaid	71047	X-RAY EXAM CHEST 3 VIEWS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	71046	X-RAY EXAM CHEST 2 VIEWS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	71045	X-RAY EXAM CHEST 1 VIEW	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	70559	MRI BRAIN W/O & W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	03/01/2016	03/01/2016			
MMAI-Medicare/Medicaid	70558	MRI BRAIN W/DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	03/01/2016	03/01/2016			
MMAI-Medicare/Medicaid	70557	MRI BRAIN W/O DYE	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	03/01/2016	03/01/2016			
MMAI-Medicare/Medicaid	70390	X-RAY EXAM OF SALIVARY DUCT	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70380	X-RAY EXAM OF SALIVARY GLAND	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70371	SPEECH EVALUATION COMPLEX	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70370	THROAT X-RAY & FLUOROSCOPY	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70360	X-RAY EXAM OF NECK	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70355	PANORAMIC X-RAY OF JAWS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70350	X-RAY HEAD FOR ORTHODONTIA	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70332	X-RAY EXAM OF JAW JOINT	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70330	X-RAY EXAM OF JAW JOINTS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70328	X-RAY EXAM OF JAW JOINT	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	70320	FULL MOUTH X-RAY OF TEETH	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70310	X-RAY EXAM OF TEETH	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70300	X-RAY EXAM OF TEETH	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70260	X-RAY EXAM OF SKULL	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	7025F	PT INFOSYS ALARM 4 NXT MAMMO	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70250	X-RAY EXAM OF SKULL	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70240	X-RAY EXAM PITUITARY SADDLE	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70220	X-RAY EXAM OF SINUSES	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70210	X-RAY EXAM OF SINUSES	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	7020F	MAMMO ASSESS CAT IN DBASE	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70200	X-RAY EXAM OF EYE SOCKETS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70190	X-RAY EXAM OF EYE SOCKETS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70170	X-RAY EXAM OF TEAR DUCT	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70160	X-RAY EXAM OF NASAL BONES	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70150	X-RAY EXAM OF FACIAL BONES	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70140	X-RAY EXAM OF FACIAL BONES	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	70134	X-RAY EXAM OF MIDDLE EAR	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70130	X-RAY EXAM OF MASTOIDS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70120	X-RAY EXAM OF MASTOIDS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70110	X-RAY EXAM OF JAW 4/GT VIEWS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	7010F	PT INFO INTO RECALL SYSTEM	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70100	X-RAY EXAM OF JAW LT 4VIEWS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70030	X-RAY EYE FOR FOREIGN BODY	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70015	CONTRAST X-RAY OF BRAIN	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70010	CONTRAST X-RAY OF BRAIN	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69990	MICROSURGERY ADD-ON	SURGERY - OPERATING MICROSCOPE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69970	REMOVE INNER EAR LESION	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69960	RELEASE INNER EAR CANAL	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69955	RELEASE FACIAL NERVE	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69950	INCISE INNER EAR NERVE	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69930	IMPLANT COCHLEAR DEVICE	SURGERY - AUDITORY SYSTEM	YES	02/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	69915	INCISE INNER EAR NERVE	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	69910	REMOVE INNER EAR & MASTOID	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69905	REMOVE INNER EAR	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69806	EXPLORE INNER EAR	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69805	EXPLORE INNER EAR	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69801	INCISE INNER EAR	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69745	REPAIR FACIAL NERVE	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69740	REPAIR FACIAL NERVE	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69725	RELEASE FACIAL NERVE	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69720	RELEASE FACIAL NERVE	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69711	REMOVE/REPAIR HEARING AID	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69710	IMPLANT/REPLACE HEARING AID	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69700	CLOSE MASTOID FISTULA	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69676	REMOVE MIDDLE EAR NERVE	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69670	REMOVE MASTOID AIR CELLS	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69667	REPAIR MIDDLE EAR STRUCTURES	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69666	REPAIR MIDDLE EAR STRUCTURES	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	69662	REVISE MIDDLE EAR BONE	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69661	REVISE MIDDLE EAR BONE	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69660	REVISE MIDDLE EAR BONE	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69646	REVISE MIDDLE EAR & MASTOID	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69645	REVISE MIDDLE EAR & MASTOID	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69644	REVISE MIDDLE EAR & MASTOID	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69643	REVISE MIDDLE EAR & MASTOID	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69642	REVISE MIDDLE EAR & MASTOID	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69641	REVISE MIDDLE EAR & MASTOID	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69635	REPAIR EARDRUM STRUCTURES	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69632	REBUILD EARDRUM STRUCTURES	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69631	REPAIR EARDRUM STRUCTURES	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69535	REMOVE PART OF TEMPORAL BONE	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69530	EXTENSIVE MASTOID SURGERY	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69511	EXTENSIVE MASTOID SURGERY	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69505	REMOVE MASTOID STRUCTURES	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	69502	MASTOIDECTOMY	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69501	MASTOIDECTOMY	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69450	EARDRUM REVISION	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69440	EXPLORATION OF MIDDLE EAR	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69436	CREATE EARDRUM OPENING	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69433	CREATE EARDRUM OPENING	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69424	REMOVE VENTILATING TUBE	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69421	INCISION OF EARDRUM	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69420	INCISION OF EARDRUM	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69320	REBUILD OUTER EAR CANAL	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69310	REBUILD OUTER EAR CANAL	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69300	REVISE EXTERNAL EAR	SURGERY - AUDITORY SYSTEM	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	69222	CLEAN OUT MASTOID CAVITY	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69220	CLEAN OUT MASTOID CAVITY	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69210	REMOVE IMPACTED EAR WAX UNI	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69205	CLEAR OUTER EAR CANAL	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	69200	CLEAR OUTER EAR CANAL	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69155	EXTENSIVE EAR/NECK SURGERY	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69150	EXTENSIVE EAR CANAL SURGERY	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69145	REMOVE EAR CANAL LESION(S)	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69140	REMOVE EAR CANAL LESION(S)	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69120	REMOVAL OF EXTERNAL EAR	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69110	REMOVE EXTERNAL EAR PARTIAL	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69105	BIOPSY OF EXTERNAL EAR CANAL	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69100	BIOPSY OF EXTERNAL EAR	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68850	INJECTION FOR TEAR SAC X-RAY	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68840	EXPLORE/IRRIGATE TEAR DUCTS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68816	PROBE NL DUCT W/BALLOON	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68815	PROBE NASOLACRIMAL DUCT	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68811	PROBE NASOLACRIMAL DUCT	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68810	PROBE NASOLACRIMAL DUCT	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68801	DILATE TEAR DUCT OPENING	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	68770	CLOSE TEAR SYSTEM FISTULA	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68761	CLOSE TEAR DUCT OPENING	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68760	CLOSE TEAR DUCT OPENING	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68750	CREATE TEAR DUCT DRAIN	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68745	CREATE TEAR DUCT DRAIN	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68720	CREATE TEAR SAC DRAIN	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68705	REVISE TEAR DUCT OPENING	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68700	REPAIR TEAR DUCTS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68550	REMOVE TEAR GLAND LESION	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68540	REMOVE TEAR GLAND LESION	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68530	CLEARANCE OF TEAR DUCT	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68525	BIOPSY OF TEAR SAC	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68520	REMOVAL OF TEAR SAC	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68510	BIOPSY OF TEAR GLAND	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68505	PARTIAL REMOVAL TEAR GLAND	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68500	REMOVAL OF TEAR GLAND	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	68371	HARVEST EYE TISSUE ALOGRAFT	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68362	REVISE EYELID LINING	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68360	REVISE EYELID LINING	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68340	SEPARATE EYELID ADHESIONS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68335	REVISE/GRAFT EYELID LINING	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68330	REVISE EYELID LINING	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68328	REVISE/GRAFT EYELID LINING	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68326	REVISE/GRAFT EYELID LINING	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68325	REVISE/GRAFT EYELID LINING	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68320	REVISE/GRAFT EYELID LINING	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68200	TREAT EYELID BY INJECTION	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68040	TREATMENT OF EYELID LESIONS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	68020	INCISE/DRAIN EYELID LINING	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67975	RECONSTRUCTION OF EYELID	SURGERY - EYE AND OCULAR ADNEX	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	67974	RECONSTRUCTION OF EYELID	SURGERY - EYE AND OCULAR ADNEX	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	67973	RECONSTRUCTION OF EYELID	SURGERY - EYE AND OCULAR ADNEX	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	67971	RECONSTRUCTION OF EYELID	SURGERY - EYE AND OCULAR ADNEX	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	67966	REVISION OF EYELID	SURGERY - EYE AND OCULAR ADNEX	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	67961	REVISION OF EYELID	SURGERY - EYE AND OCULAR ADNEX	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	67950	REVISION OF EYELID	SURGERY - EYE AND OCULAR ADNEX	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	67938	REMOVE EYELID FOREIGN BODY	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67935	REPAIR EYELID WOUND	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67930	REPAIR EYELID WOUND	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67924	REPAIR EYELID DEFECT	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67923	REPAIR EYELID DEFECT	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67922	REPAIR EYELID DEFECT	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67921	REPAIR EYELID DEFECT	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67917	REPAIR EYELID DEFECT	SURGERY - EYE AND OCULAR ADNEX	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	67915	REPAIR EYELID DEFECT	SURGERY - EYE AND OCULAR ADNEX	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	67914	REPAIR EYELID DEFECT	SURGERY - EYE AND OCULAR ADNEX	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	67912	CORRECTION EYELID W/IMPLANT	SURGERY - EYE AND OCULAR ADNEX	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	67909	REVISE EYELID DEFECT	SURGERY - EYE AND OCULAR ADNEX	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	67908	REPAIR EYELID DEFECT	SURGERY - EYE AND OCULAR ADNEX	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	67906	REPAIR EYELID DEFECT	SURGERY - EYE AND OCULAR ADNEX	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	67904	REPAIR EYELID DEFECT	SURGERY - EYE AND OCULAR ADNEX	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	67903	REPAIR EYELID DEFECT	SURGERY - EYE AND OCULAR ADNEX	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	67902	REPAIR EYELID DEFECT	SURGERY - EYE AND OCULAR ADNEX	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	67901	REPAIR EYELID DEFECT	SURGERY - EYE AND OCULAR ADNEX	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	67900	REPAIR BROW DEFECT	SURGERY - EYE AND OCULAR ADNEX	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	67882	REVISION OF EYELID	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67880	REVISION OF EYELID	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67875	CLOSURE OF EYELID BY SUTURE	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67840	REMOVE EYELID LESION	SURGERY - EYE AND OCULAR ADNEX	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	67835	REVISE EYELASHES	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67830	REVISE EYELASHES	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67825	REVISE EYELASHES	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67820	REVISE EYELASHES	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67808	REMOVE EYELID LESION(S)	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	67805	REMOVE EYELID LESIONS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67801	REMOVE EYELID LESIONS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67800	REMOVE EYELID LESION	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67570	DECOMPRESS OPTIC NERVE	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67560	REVISE EYE SOCKET IMPLANT	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67550	INSERT EYE SOCKET IMPLANT	SURGERY - EYE AND OCULAR ADNEX	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	67515	INJECT/TREAT EYE SOCKET	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67505	INJECT/TREAT EYE SOCKET	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67500	INJECT/TREAT EYE SOCKET	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67450	EXPLORE/BIOPSY EYE SOCKET	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67445	EXPLR/DECOMPRESS EYE SOCKET	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67440	EXPLORE/DRAIN EYE SOCKET	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67430	EXPLORE/TREAT EYE SOCKET	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67420	EXPLORE/TREAT EYE SOCKET	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67415	ASPIRATION ORBITAL CONTENTS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67414	EXPLR/DECOMPRESS EYE SOCKET	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	67413	EXPLORE/TREAT EYE SOCKET	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67412	EXPLORE/TREAT EYE SOCKET	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67405	EXPLORE/DRAIN EYE SOCKET	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67400	EXPLORE/BIOPSY EYE SOCKET	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67399	UNLISTED PX EXTRAOCULAR MUSC	SURGERY - EYE AND OCULAR ADNEX	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	67346	BIOPSY EYE MUSCLE	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67345	DESTROY NERVE OF EYE MUSCLE	SURGERY - EYE AND OCULAR ADNEX	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	67343	RELEASE EYE TISSUE	SURGERY - EYE AND OCULAR ADNEX	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	67340	REVISE EYE MUSCLE ADD-ON	SURGERY - EYE AND OCULAR ADNEX	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	67335	EYE SUTURE DURING SURGERY	SURGERY - EYE AND OCULAR ADNEX	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	67334	REVISE EYE MUSCLE W/SUTURE	SURGERY - EYE AND OCULAR ADNEX	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	67332	REREVISE EYE MUSCLES ADD-ON	SURGERY - EYE AND OCULAR ADNEX	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	67331	EYE SURGERY FOLLOW-UP ADD-ON	SURGERY - EYE AND OCULAR ADNEX	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	67320	REVISE EYE MUSCLE(S) ADD-ON	SURGERY - EYE AND OCULAR ADNEX	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	67318	REVISE EYE MUSCLE(S)	SURGERY - EYE AND OCULAR ADNEX	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	67316	REVISE TWO EYE MUSCLES	SURGERY - EYE AND OCULAR ADNEX	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	67314	REVISE EYE MUSCLE	SURGERY - EYE AND OCULAR ADNEX	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	67312	REVISE TWO EYE MUSCLES	SURGERY - EYE AND OCULAR ADNEX	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	67311	REVISE EYE MUSCLE	SURGERY - EYE AND OCULAR ADNEX	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	67255	REINFORCE/GRAFT EYE WALL	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67250	REINFORCE EYE WALL	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67229	TR RETINAL LES PRETERM INF	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67228	TREATMENT X10SV RETINOPATHY	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67227	DSTRJ EXTENSIVE RETINOPATHY	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67225	EYE PHOTODYNAMIC THER ADD-ON	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67221	OCULAR PHOTODYNAMIC THER	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67220	TREATMENT OF CHOROID LESION	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67218	TREATMENT OF RETINAL LESION	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67210	TREATMENT OF RETINAL LESION	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67208	TREATMENT OF RETINAL LESION	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67121	REMOVE EYE IMPLANT MATERIAL	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67120	REMOVE EYE IMPLANT MATERIAL	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	67115	RELEASE ENCIRCLING MATERIAL	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67113	REPAIR RETINAL DETACH CPLX	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67110	REPAIR DETACHED RETINA	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67108	REPAIR DETACHED RETINA	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67107	REPAIR DETACHED RETINA	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67105	REPAIR DETACHED RETINA PC	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67101	REPAIR DETACHED RETINA CRTX	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67043	VIT FOR MEMBRANE DISSECT	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67042	VIT FOR MACULAR HOLE	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67041	VIT FOR MACULAR PUCKER	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67040	LASER TREATMENT OF RETINA	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67039	LASER TREATMENT OF RETINA	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67036	REMOVAL OF INNER EYE FLUID	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67031	LASER SURGERY EYE STRANDS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67030	INCISE INNER EYE STRANDS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67028	INJECTION EYE DRUG	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	67027	IMPLANT EYE DRUG SYSTEM	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67025	REPLACE EYE FLUID	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67015	RELEASE OF EYE FLUID	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67010	PARTIAL REMOVAL OF EYE FLUID	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	67005	PARTIAL REMOVAL OF EYE FLUID	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66990	OPHTHALMIC ENDOSCOPE ADD-ON	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66988	XCAPSL CTRC RMVL W/ECP	SURGERY-NERVOUS SYSTEM	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	66987	XCAPSL CTRC RMVL CPLX W/ECP	SURGERY-NERVOUS SYSTEM	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	66986	EXCHANGE LENS PROSTHESIS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66985	INSERT LENS PROSTHESIS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66984	XCAPSL CTRC RMVL W/O ECP	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66983	CATARACT SURG W/IOL 1 STAGE	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66982	XCAPSL CTRC RMVL CPLX WO ECP	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66940	EXTRACTION OF LENS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66930	EXTRACTION OF LENS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66920	EXTRACTION OF LENS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	66852	REMOVAL OF LENS MATERIAL	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66850	REMOVAL OF LENS MATERIAL	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66840	REMOVAL OF LENS MATERIAL	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66830	REMOVAL OF LENS LESION	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66825	REPOSITION INTRAOCULAR LENS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66821	AFTER CATARACT LASER SURGERY	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66820	INCISION SECONDARY CATARACT	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66770	REMOVAL OF INNER EYE LESION	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66762	REVISION OF IRIS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66761	REVISION OF IRIS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66740	DESTRUCTION CILIARY BODY	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66720	DESTRUCTION CILIARY BODY	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66711	ECP CILIARY BODY DESTRUCTION	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66710	CILIARY TRANSSLERAL THERAPY	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66700	DESTRUCTION CILIARY BODY	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66682	REPAIR IRIS & CILIARY BODY	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	66680	REPAIR IRIS & CILIARY BODY	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66635	REMOVAL OF IRIS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66630	REMOVAL OF IRIS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66625	REMOVAL OF IRIS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66605	REMOVAL OF IRIS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66600	REMOVE IRIS AND LESION	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66505	INCISION OF IRIS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66500	INCISION OF IRIS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66250	FOLLOW-UP SURGERY OF EYE	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66225	REPAIR/GRAFT EYE LESION	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66185	REVISE AQUEOUS SHUNT EYE	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66184	REVISION OF AQUEOUS SHUNT	SURGERY - NERVOUS SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	66183	INSERT ANT DRAINAGE DEVICE	SURGERY - NERVOUS SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	66180	AQUEOUS SHUNT EYE W/GRAFT	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66179	AQUEOUS SHUNT EYE W/O GRAFT	SURGERY - NERVOUS SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	66172	INCISION OF EYE	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	66170	GLAUCOMA SURGERY	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66160	GLAUCOMA SURGERY	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66155	GLAUCOMA SURGERY	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66150	GLAUCOMA SURGERY	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66130	REMOVE EYE LESION	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66030	INJECTION TREATMENT OF EYE	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66020	INJECTION TREATMENT OF EYE	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65930	REMOVE BLOOD CLOT FROM EYE	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65920	REMOVE IMPLANT OF EYE	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65900	REMOVE EYE LESION	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65880	INCISE INNER EYE ADHESIONS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65875	INCISE INNER EYE ADHESIONS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65870	INCISE INNER EYE ADHESIONS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65865	INCISE INNER EYE ADHESIONS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65855	TRABECULOPLASTY LASER SURG	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65815	DRAINAGE OF EYE	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	65810	DRAINAGE OF EYE	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65781	OCULAR RECONST TRANSPLANT	SURGERY - EYE AND OCULAR ADNEX	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	65778	COVER EYE W/MEMBRANE	SURGERY - EYE AND OCULAR ADNEX	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	65775	CORRECTION OF ASTIGMATISM	SURGERY - EYE AND OCULAR ADNEX	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	65772	CORRECTION OF ASTIGMATISM	SURGERY - EYE AND OCULAR ADNEX	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	65771	RADIAL KERATOTOMY	SURGERY - EYE AND OCULAR ADNEX	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	65755	CORNEAL TRANSPLANT	SURGERY - EYE AND OCULAR ADNEX	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	65750	CORNEAL TRANSPLANT	SURGERY - EYE AND OCULAR ADNEX	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	65600	REVISION OF CORNEA	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65450	TREATMENT OF CORNEAL LESION	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65436	CURETTE/TREAT CORNEA	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65435	CURETTE/TREAT CORNEA	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65430	CORNEAL SMEAR	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65426	REMOVAL OF EYE LESION	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65420	REMOVAL OF EYE LESION	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65410	BIOPSY OF CORNEA	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	65400	REMOVAL OF EYE LESION	SURGERY - EYE AND OCULAR ADNEX	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	65290	REPAIR OF EYE SOCKET WOUND	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65286	REPAIR OF EYE WOUND	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65285	REPAIR OF EYE WOUND	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65280	REPAIR OF EYE WOUND	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65275	REPAIR OF EYE WOUND	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65273	REPAIR OF EYE WOUND	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65272	REPAIR OF EYE WOUND	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65270	REPAIR OF EYE WOUND	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65265	REMOVE FOREIGN BODY FROM EYE	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65260	REMOVE FOREIGN BODY FROM EYE	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65235	REMOVE FOREIGN BODY FROM EYE	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65222	REMOVE FOREIGN BODY FROM EYE	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65220	REMOVE FOREIGN BODY FROM EYE	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65210	REMOVE FOREIGN BODY FROM EYE	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65205	REMOVE FOREIGN BODY FROM EYE	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	65175	REMOVAL OF OCULAR IMPLANT	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65155	REINSERT OCULAR IMPLANT	SURGERY - EYE AND OCULAR ADNEX	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	65150	REVISE OCULAR IMPLANT	SURGERY - EYE AND OCULAR ADNEX	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	65140	ATTACH OCULAR IMPLANT	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65135	INSERT OCULAR IMPLANT	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65130	INSERT OCULAR IMPLANT	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65125	REVISE OCULAR IMPLANT	SURGERY - EYE AND OCULAR ADNEX	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	65114	REMOVE EYE/REVISE SOCKET	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65112	REMOVE EYE/REVISE SOCKET	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65110	REMOVAL OF EYE	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65105	REMOVE EYE/ATTACH IMPLANT	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65103	REMOVE EYE/INSERT IMPLANT	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65101	REMOVAL OF EYE	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65093	REVISE EYE WITH IMPLANT	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65091	REVISE EYE	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64913	NRV RPR W/NRV ALGRFT EA ADDL	SURGERY - NERVOUS SYSTEM	NO	01/01/2018	01/01/2018			

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MMAI-Medicare/Medicaid	64912	NRV RPR W/NRV ALGRFT 1ST	SURGERY - NERVOUS SYSTEM	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	64911	NEURORRAPHY W/VEIN AUTOGRAFT	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64910	NERVE REPAIR W/ALLOGRAFT	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64907	NERVE PEDICLE TRANSFER	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64905	NERVE PEDICLE TRANSFER	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64902	NERVE GRAFT ADD-ON	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64901	NERVE GRAFT ADD-ON	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64886	NERVE GRAFT HEAD/NECK GT 4 CM	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64876	REPAIR NERVE/SHORTEN BONE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64874	REPAIR & REVISE NERVE ADD-ON	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64872	SUBSEQUENT REPAIR OF NERVE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64868	FUSION OF FACIAL/OTHER NERVE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64866	FUSION OF FACIAL/OTHER NERVE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64865	REPAIR OF FACIAL NERVE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64864	REPAIR OF FACIAL NERVE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64862	REPAIR OF LOW BACK NERVES	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	64861	REPAIR OF ARM NERVES	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64859	NERVE SURGERY	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64858	REPAIR SCIATIC NERVE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64857	REPAIR ARM/LEG NERVE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64856	REPAIR/TRANSPOSE NERVE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64840	REPAIR OF LEG NERVE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64837	REPAIR NERVE ADD-ON	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64836	REPAIR OF HAND OR FOOT NERVE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64835	REPAIR OF HAND OR FOOT NERVE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64834	REPAIR OF HAND OR FOOT NERVE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64832	REPAIR NERVE ADD-ON	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64831	REPAIR OF DIGIT NERVE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64823	SYMPATHECTOMY SUPFC PALMAR	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	64820	SYMPATHECTOMY DIGITAL ARTERY	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	64802	SYMPATHECTOMY CERVICAL	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	64795	BIOPSY OF NERVE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	64792	REMOVAL OF NERVE LESION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64790	REMOVAL OF NERVE LESION	SURGERY - NERVOUS SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	64788	REMOVE SKIN NERVE LESION	SURGERY - NERVOUS SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	64787	IMPLANT NERVE END	SURGERY - NERVOUS SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	64786	REMOVE SCIATIC NERVE LESION	SURGERY - NERVOUS SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	64784	REMOVE NERVE LESION	SURGERY - NERVOUS SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	64783	LIMB NERVE SURGERY ADD-ON	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64782	REMOVE LIMB NERVE LESION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64778	DIGIT NERVE SURGERY ADD-ON	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64776	REMOVE DIGIT NERVE LESION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64774	REMOVE SKIN NERVE LESION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64772	INCISION OF SPINAL NERVE	SURGERY - NERVOUS SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	64771	SEVER CRANIAL NERVE	SURGERY - NERVOUS SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	64766	INCISE HIP/THIGH NERVE	SURGERY - NERVOUS SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	64763	INCISE HIP/THIGH NERVE	SURGERY - NERVOUS SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	64760	INCISION OF VAGUS NERVE	SURGERY - NERVOUS SYSTEM	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	64755	INCISION OF STOMACH NERVES	SURGERY - NERVOUS SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	64746	INCISE DIAPHRAGM NERVE	SURGERY - NERVOUS SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	64744	INCISE NERVE BACK OF HEAD	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	64742	INCISION OF FACIAL NERVE	SURGERY - NERVOUS SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	64740	INCISION OF TONGUE NERVE	SURGERY - NERVOUS SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	64738	INCISION OF JAW NERVE	SURGERY - NERVOUS SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	64736	INCISION OF CHIN NERVE	SURGERY - NERVOUS SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	64734	INCISION OF CHEEK NERVE	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	64732	INCISION OF BROW NERVE	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	64727	INTERNAL NERVE REVISION	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	64726	RELEASE FOOT/TOE NERVE	SURGERY - NERVOUS SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	64722	RELIEVE PRESSURE ON NERVE (S)	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	64721	CARPAL TUNNEL SURGERY	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	64719	REVISE ULNAR NERVE AT WRIST	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	64718	REVISE ULNAR NERVE AT ELBOW	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	64716	REVISION OF CRANIAL NERVE	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	64714	REVISE LOW BACK NERVE(S)	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	64713	REVISION OF ARM NERVE(S)	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	64712	REVISION OF SCIATIC NERVE	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	64708	REVISE ARM/LEG NERVE	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	64704	REVISE HAND/FOOT NERVE	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	64702	REVISE FINGER/TOE NERVE	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	64681	INJECTION TREATMENT OF NERVE	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	64680	INJECTION TREATMENT OF NERVE	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	64653	CHEMODENERV ECCRINE GLANDS	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	64644	CHEMODENERV 1 EXTREM 5/GT MUS	SURGERY - NERVOUS SYSTEM	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	64632	N BLOCK INJ COMMON DIGIT	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	64630	INJECTION TREATMENT OF NERVE	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	64624	DSTRJ NULYT AGT GNCLR NRV	SURGERY-NERVOUS SYSTEM	YES	12/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	64620	INJECTION TREATMENT OF NERVE	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	64610	INJECTION TREATMENT OF NERVE	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	64605	INJECTION TREATMENT OF NERVE	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	64600	INJECTION TREATMENT OF NERVE	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	64566	NEUROELTRD STIM POST TIBIAL	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	64530	N BLOCK INJ CELIAC PELUS	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	64517	N BLOCK INJ HYPOGAS PLXS	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	64505	N BLOCK SPENOPALATINE GANGL	SURGERY - NERVOUS SYSTEM	YES	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	64489	TAP BLOCK BI BY INFUSION	SURGERY - NERVOUS SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	64488	TAP BLOCK BI INJECTION	SURGERY - NERVOUS SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	64487	TAP BLOCK UNI BY INFUSION	SURGERY - NERVOUS SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	64486	TAP BLOCK UNIL BY INJECTION	SURGERY - NERVOUS SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	64454	NJX AA&/STRD GNCLR NRV BRNCH	SURGERY-NERVOUS SYSTEM	YES	12/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	64450	NJX AA&/STRD OTHER PN/BRANCH	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	64449	NJX AA&/STRD LMBR PLEX NFS	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	64435	NJX AA&/STRD PARACRV NRV	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64430	NJX AA&/STRD PUDENDAL NERVE	SURGERY - NERVOUS SYSTEM	YES	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	64425	NJX AA&/STRD II IH NERVES	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64421	NJX AA&/STRD NTRCOST NRV EA	SURGERY - NERVOUS SYSTEM	YES	08/15/2018	12/31/2078			

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MMAI-Medicare/Medicaid	64420	NJX AA&/STRD NTRCOST NRV 1	SURGERY - NERVOUS SYSTEM	YES	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	64418	NJX AA&/STRD SPRSCAP NRV	SURGERY - NERVOUS SYSTEM	NO	07/17/2015	07/17/2015			
MMAI-Medicare/Medicaid	64408	NJX AA&/STRD VAGUS NRV	SURGERY - NERVOUS SYSTEM	YES	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	64400	NJX AA&/STRD TRIGEMINAL NRV	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	63746	REMOVAL OF SPINAL SHUNT	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	63744	REVISION OF SPINAL SHUNT	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	63741	INSTALL SPINAL SHUNT	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	63740	INSTALL SPINAL SHUNT	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	63710	GRAFT REPAIR OF SPINE DEFECT	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	63709	REPAIR SPINAL FLUID LEAKAGE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	63707	REPAIR SPINAL FLUID LEAKAGE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	63706	REPAIR OF SPINAL HERNIATION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	63704	REPAIR OF SPINAL HERNIATION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	63702	REPAIR OF SPINAL HERNIATION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	63700	REPAIR OF SPINAL HERNIATION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	63621	SRS SPINAL LESION ADDL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	63620	SRS SPINAL LESION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	63610	STIMULATION OF SPINAL CORD	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	63600	REMOVE SPINAL CORD LESION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	63308	REMOVE VERTEBRAL BODY ADD-ON	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63307	REMOV VERT IDRL BDY LMBR/SAC	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63306	REMOV VERT IDRL BDY THRCLMBR	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63305	REMOVE VERT IDRL BODY THRC	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63304	REMOVE VERT IDRL BODY CRVCL	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63303	REMOV VERT XDRL BDY LMBR/SAC	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63302	REMOVE VERT XDRL BODY THRLMB	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63301	REMOVE VERT XDRL BODY THRC	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63300	REMOVE VERT XDRL BODY CRVCL	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63295	REPAIR LAMINECTOMY DEFECT	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63290	BX/EXC XDRL/IDRL LSN ANY LVL	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63287	BX/EXC IDRL IMED LESN THRLMB	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63286	BX/EXC IDRL IMED LESN THRC	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	63285	BX/EXC IDRL IMED LESN CERVL	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63283	BX/EXC IDRL SPINE LESN SCRL	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63282	BX/EXC IDRL SPINE LESN LMBR	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63281	BX/EXC IDRL SPINE LESN THRC	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63280	BX/EXC IDRL SPINE LESN CRVL	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63278	BX/EXC XDRL SPINE LESN SCRL	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63277	BX/EXC XDRL SPINE LESN LMBR	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63276	BX/EXC XDRL SPINE LESN THRC	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63275	BX/EXC XDRL SPINE LESN CRVL	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63273	EXCISE INTRSPINL LESION SCRL	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63272	EXCISE INTRSPINL LESION LMBR	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63271	EXCISE INTRSPINL LESION THRC	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63270	EXCISE INTRSPINL LESION CRVL	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63268	EXCISE INTRSPINL LESION SCRL	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63267	EXCISE INTRSPINL LESION LMBR	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63266	EXCISE INTRSPINL LESION THRC	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	63265	EXCISE INTRASPINL LESION CRV	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63252	REVISE SPINE CORD VSL THRLMB	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63251	REVISE SPINAL CORD VSLS THRC	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63250	REVISE SPINAL CORD VSLS CRVL	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63200	RELEASE SPINAL CORD LUMBAR	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63191	INCISE SPINE ACCESSORY NERVE	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63190	INCISE SPINE NRV GT 2 SEGMNTS	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63185	INCISE SPINE NRV HALF SEGMNT	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63173	DRAINAGE OF SPINAL CYST	SURGERY - NERVOUS SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	63172	DRAINAGE OF SPINAL CYST	SURGERY - NERVOUS SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	63170	INCISE SPINAL CORD TRACT(S)	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63103	REMOVE VERTEBRAL BODY ADD-ON	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63102	REMOVE VERT BODY DCMPRN LMBR	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63101	REMOVE VERT BODY DCMPRN THRC	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63091	REMOVE VERTEBRAL BODY ADD-ON	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63090	REMOVE VERT BODY DCMPRN LMBR	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	63088	REMOVE VERTEBRAL BODY ADD-ON	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63087	REMOV VERTBR DCMPRN THRCLMBR	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63086	REMOVE VERTEBRAL BODY ADD-ON	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63085	REMOVE VERT BODY DCMPRN THRC	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63082	REMOVE VERTEBRAL BODY ADD-ON	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63081	REMOVE VERT BODY DCMPRN CRVL	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63078	SPINE DISK SURGERY THORAX	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63077	SPINE DISK SURGERY THORAX	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63076	NECK SPINE DISK SURGERY	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63075	NECK SPINE DISK SURGERY	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63066	DECOMPRESS SPINE CORD ADD-ON	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63064	DECOMPRESS SPINAL CORD THRC	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63057	DECOMPRESS SPINE CORD ADD-ON	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63056	DECOMPRESS SPINAL CORD LMBR	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63055	DECOMPRESS SPINAL CORD THRC	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63051	C-LAMINOPLASTY W/GRAFT/PLATE	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	63050	CERVICAL LAMINOPLSTY 2/GT SEG	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63044	LAMINOTOMY ADDL LUMBAR	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63043	LAMINOTOMY ADDL CERVICAL	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63042	LAMINOTOMY SINGLE LUMBAR	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63040	LAMINOTOMY SINGLE CERVICAL	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63035	SPINAL DISK SURGERY ADD-ON	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63030	LOW BACK DISK SURGERY	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63020	NECK SPINE DISK SURGERY	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63017	REMOVE SPINE LAMINA GT 2 LMBR	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63016	REMOVE SPINE LAMINA GT 2 THRC	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63015	REMOVE SPINE LAMINA GT 2 CRVCL	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63011	REMOVE SPINE LAMINA 1/2 SCRL	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63005	REMOVE SPINE LAMINA 1/2 LMBR	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63003	REMOVE SPINE LAMINA 1/2 THRC	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	63001	REMOVE SPINE LAMINA 1/2 CRVL	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	62380	NDSC DCMPRN 1 NTRSPC LUMBAR	SURGERY - NERVOUS SYSTEM	YES	01/27/2017	12/31/2078			

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MMAI-Medicare/Medicaid	62369	ANAL SP INF PMP W/REPRG&FILL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62329	THER SPI PNXR CSF FLUOR/CT	SURGERY-NERVOUS SYSTEM	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	62328	DX LMBR SPI PNXR W/FLUOR/CT	SURGERY-NERVOUS SYSTEM	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	62305	MYELOGRAPHY LUMBAR INJECTION	SURGERY - NERVOUS SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	62304	MYELOGRAPHY LUMBAR INJECTION	SURGERY - NERVOUS SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	62303	MYELOGRAPHY LUMBAR INJECTION	SURGERY - NERVOUS SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	62302	MYELOGRAPHY LUMBAR INJECTION	SURGERY - NERVOUS SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	62294	INJECTION INTO SPINAL ARTERY	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62284	INJECTION FOR MYELOGRAM	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62273	INJECT EPIDURAL PATCH	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62272	THER SPI PNXR DRG CSF	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62270	DX LMBR SPI PNXR	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62269	NEEDLE BIOPSY SPINAL CORD	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62268	DRAIN SPINAL CORD CYST	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62267	INTERDISCAL PERQ ASPIR DX	SURGERY - NERVOUS SYSTEM	NO	07/17/2015	07/17/2015			
MMAI-Medicare/Medicaid	62258	REPLACE BRAIN CAVITY SHUNT	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	62256	REMOVE BRAIN CAVITY SHUNT	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62252	CSF SHUNT REPROGRAM	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62230	REPLACE/REVISE BRAIN SHUNT	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62225	REPLACE/IRRIGATE CATHETER	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62223	ESTABLISH BRAIN CAVITY SHUNT	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62220	ESTABLISH BRAIN CAVITY SHUNT	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62201	BRAIN CAVITY SHUNT W/SCOPE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62200	ESTABLISH BRAIN CAVITY SHUNT	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62194	REPLACE/IRRIGATE CATHETER	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62192	ESTABLISH BRAIN CAVITY SHUNT	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62190	ESTABLISH BRAIN CAVITY SHUNT	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62180	ESTABLISH BRAIN CAVITY SHUNT	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62165	REMOVE PITUIT TUMOR W/SCOPE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62164	REMOVE BRAIN TUMOR W/SCOPE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62162	REMOVE COLLOID CYST W/SCOPE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62161	DISSECT BRAIN W/SCOPE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	62160	NEUROENDOSCOPY ADD-ON	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62148	RETR BONE FLAP TO FIX SKULL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62145	REPAIR OF SKULL & BRAIN	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62121	INCISE SKULL REPAIR	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62120	REPAIR SKULL CAVITY LESION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62117	REDUCTION OF SKULL DEFECT	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62115	REDUCTION OF SKULL DEFECT	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62100	REPAIR BRAIN FLUID LEAKAGE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62010	TREATMENT OF HEAD INJURY	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62005	TREAT SKULL FRACTURE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	62000	TREAT SKULL FRACTURE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61888	REVISE/REMOVE NEURORECEIVER	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61886	IMPLANT NEUROSTIM ARRAYS	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61885	INSRT/REDO NEUROSTIM 1 ARRAY	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61880	REVISE/REMOVE NEUROELECTRODE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61868	IMPLANT NEUROELECTRDE ADDL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	61867	IMPLANT NEUROELECTRODE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61864	IMPLANT NEUROELECTRDE ADDL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61863	IMPLANT NEUROELECTRODE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61860	IMPLANT NEUROELECTRODES	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61850	IMPLANT NEUROELECTRODES	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61800	APPLY SRS HEADFRAME ADD-ON	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61799	SRS CRAN LES COMPLEX ADDL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61798	SRS CRANIAL LESION COMPLEX	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61797	SRS CRAN LES SIMPLE ADDL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61796	SRS CRANIAL LESION SIMPLE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61791	TREAT TRIGEMINAL TRACT	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61790	TREAT TRIGEMINAL NERVE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61783	SCAN PROC SPINAL	SURGERY - NERVOUS SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	61782	SCAN PROC CRANIAL EXTRA	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	61781	SCAN PROC CRANIAL INTRA	SURGERY - NERVOUS SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	61770	INCISE SKULL FOR TREATMENT	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	61760	IMPLANT BRAIN ELECTRODES	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61751	BRAIN BIOPSY W/CT/MR GUIDE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61750	INCISE SKULL/BRAIN BIOPSY	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61735	INCISE SKULL/BRAIN SURGERY	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61720	INCISE SKULL/BRAIN SURGERY	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61711	FUSION OF SKULL ARTERIES	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61710	REVISE CIRCULATION TO HEAD	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61708	REVISE CIRCULATION TO HEAD	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61705	REVISE CIRCULATION TO HEAD	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61703	CLAMP NECK ARTERY	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61702	INNER SKULL VESSEL SURGERY	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61700	BRAIN ANEURYSM REPR SIMPLE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61698	BRAIN ANEURYSM REPR COMPLX	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61697	BRAIN ANEURYSM REPR COMPLX	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61692	INTRACRANIAL VESSEL SURGERY	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61690	INTRACRANIAL VESSEL SURGERY	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	61686	INTRACRANIAL VESSEL SURGERY	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61684	INTRACRANIAL VESSEL SURGERY	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61682	INTRACRANIAL VESSEL SURGERY	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61680	INTRACRANIAL VESSEL SURGERY	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61642	DILAT IC VSPSM EA DIFF TER	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61641	DILAT IC VSPSM EA VSL SM TER	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61640	DILATE IC VASOSPASM INIT	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61635	INTRACRAN ANGIOPLSTY W/STENT	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61630	INTRACRANIAL ANGIOPLASTY	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61626	TRANSCATH OCCLUSION NON-CNS	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61624	TRANSCATH OCCLUSION CNS	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61623	ENDOVASC TEMPORY VESSEL OCCL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61619	REPAIR DURA	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61618	REPAIR DURA	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61616	RESECT/EXCISE LESION SKULL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61615	RESECT/EXCISE LESION SKULL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	61613	REMOVE ANEURYSM SINUS	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61611	TRANSECT ARTERY SINUS	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61608	RESECT/EXCISE CRANIAL LESION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61607	RESECT/EXCISE CRANIAL LESION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61606	RESECT/EXCISE CRANIAL LESION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61605	RESECT/EXCISE CRANIAL LESION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61601	RESECT/EXCISE CRANIAL LESION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61600	RESECT/EXCISE CRANIAL LESION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61598	TRANSPETROSAL APPROACH/SKULL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61597	TRANSCONDYLAR APPROACH/SKULL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61596	TRANSCOCHLEAR APPROACH/SKULL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61595	TRANSTEMPORAL APPROACH/SKULL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61592	ORBITOCRANIAL APPROACH/SKULL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61591	INFRATEMPORAL APPROACH/SKULL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61590	INFRATEMPORAL APPROACH/SKULL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61586	RESECT NASOPHARYNX SKULL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	61585	ORBITOCRANIAL APPROACH/SKULL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61584	ORBITOCRANIAL APPROACH/SKULL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61583	CRANIOFACIAL APPROACH SKULL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61582	CRANIOFACIAL APPROACH SKULL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61581	CRANIOFACIAL APPROACH SKULL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61580	CRANIOFACIAL APPROACH SKULL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61576	SKULL BASE/BRAINSTEM SURGERY	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61575	SKULL BASE/BRAINSTEM SURGERY	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61571	INCISE SKULL FOR BRAIN WOUND	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61570	REMOVE FOREIGN BODY BRAIN	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61567	INCISION OF BRAIN TISSUE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61566	REMOVAL OF BRAIN TISSUE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61564	EXCISION OF SKULL TUMOR	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61563	EXCISION OF SKULL TUMOR	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61559	EXCISION OF SKULL/SUTURES	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61558	EXCISION OF SKULL/SUTURES	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	61557	INCISE SKULL/SUTURES	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61556	INCISE SKULL/SUTURES	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61552	RELEASE OF SKULL SEAMS	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61550	RELEASE OF SKULL SEAMS	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61548	REMOVAL OF PITUITARY GLAND	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61546	REMOVAL OF PITUITARY GLAND	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61545	EXCISION OF BRAIN TUMOR	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61544	REMOVE & TREAT BRAIN LESION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61543	REMOVAL OF BRAIN TISSUE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61541	INCISION OF BRAIN TISSUE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61540	REMOVAL OF BRAIN TISSUE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61539	REMOVAL OF BRAIN TISSUE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61538	REMOVAL OF BRAIN TISSUE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61537	REMOVAL OF BRAIN TISSUE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61536	REMOVAL OF BRAIN LESION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61535	REMOVE BRAIN ELECTRODES	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	61534	REMOVAL OF BRAIN LESION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61533	IMPLANT BRAIN ELECTRODES	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61531	IMPLANT BRAIN ELECTRODES	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61530	REMOVAL OF BRAIN LESION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61526	REMOVAL OF BRAIN LESION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61524	REMOVAL OF BRAIN LESION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61522	REMOVAL OF BRAIN ABSCESS	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61521	REMOVAL OF BRAIN LESION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61520	REMOVAL OF BRAIN LESION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61519	REMOVE BRAIN LINING LESION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61518	REMOVAL OF BRAIN LESION	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	6150F	PT NOTRCVNG1ST ANTITNF TXMNT	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	6110F	COUNSEL PROV DRIVING RISKS	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61070	BRAIN CANAL SHUNT PROCEDURE	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61055	INJECTION INTO BRAIN CANAL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61050	REMOVE BRAIN CANAL FLUID	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	6102F	SAFETY COUNSELING DEM ORDER	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61026	INJECTION INTO BRAIN CANAL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61020	REMOVE BRAIN CAVITY FLUID	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	6101F	SAFETY COUNSELING DEMENTIA	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	6100F	VERIFY PT SITE PXD DOCD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61001	REMOVE CRANIAL CAVITY FLUID	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61000	REMOVE CRANIAL CAVITY FLUID	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	6090F	PT/CAREGIVER COUNSEL SAFETY	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	6080F	PT/CAREGIVER QUERIED FALLS	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	6070F	PT ASKED/CNSLD AED EFFECTS	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60650	LAPAROSCOPY ADRENALECTOMY	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60605	REMOVE CAROTID BODY LESION	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60600	REMOVE CAROTID BODY LESION	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60545	EXPLORE ADRENAL GLAND	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60540	EXPLORE ADRENAL GLAND	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60522	REMOVAL OF THYMUS GLAND	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	60521	REMOVAL OF THYMUS GLAND	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60520	REMOVAL OF THYMUS GLAND	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60512	AUTOTRANSPLANT PARATHYROID	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60505	EXPLORE PARATHYROID GLANDS	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60502	RE-EXPLORE PARATHYROIDS	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60500	EXPLORE PARATHYROID GLANDS	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	6045F	RADXPS IN END RPRT4FLURO PXD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	6040F	APPRO RAD DS DVCS TECHS DOCD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	6030F	MAX STERILE BARRIERS FLWD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60300	ASPIR/INJ THYROID CYST	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60281	REMOVE THYROID DUCT LESION	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60280	REMOVE THYROID DUCT LESION	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60271	REMOVAL OF THYROID	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60270	REMOVAL OF THYROID	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60260	REPEAT THYROID SURGERY	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60254	EXTENSIVE THYROID SURGERY	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	60252	REMOVAL OF THYROID	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60240	REMOVAL OF THYROID	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60225	PARTIAL REMOVAL OF THYROID	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60220	PARTIAL REMOVAL OF THYROID	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60212	PARTIAL THYROID EXCISION	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60210	PARTIAL THYROID EXCISION	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	6020F	NPO (NOTHING-MOUTH) ORDERED	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60200	REMOVE THYROID LESION	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	6015F	DYSPHAG TEST DONE B/4 EATING	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	6010F	DYSPHAG TEST DONE B/4 EATING	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60100	BIOPSY OF THYROID	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	6005F	CARE LEVEL RATIONALE DOC	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	60000	DRAIN THYROID/TONGUE CYST	SURGERY - ENDOCRINE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59871	REMOVE CERCLAGE SUTURE	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59870	EVACUATE MOLE OF UTERUS	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59866	ABORTION (MPR)	SURGERY - MATERNITY CARE AND D	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	59830	TREAT UTERUS INFECTION	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59821	TREATMENT OF MISCARRIAGE	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59820	CARE OF MISCARRIAGE	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59812	TREATMENT OF MISCARRIAGE	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59622	ATTEMPTED VBAC AFTER CARE	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59620	ATTEMPTED VBAC DELIVERY ONLY	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59618	ATTEMPTED VBAC DELIVERY	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59614	VBAC CARE AFTER DELIVERY	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59612	VBAC DELIVERY ONLY	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59610	VBAC DELIVERY	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59525	REMOVE UTERUS AFTER CESAREAN	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59515	CESAREAN DELIVERY	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59514	CESAREAN DELIVERY ONLY	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59510	CESAREAN DELIVERY	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59430	CARE AFTER DELIVERY	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59426	ANTEPARTUM CARE ONLY	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	59425	ANTEPARTUM CARE ONLY	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59414	DELIVER PLACENTA	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59412	ANTEPARTUM MANIPULATION	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59410	OBSTETRICAL CARE	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59409	OBSTETRICAL CARE	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59400	OBSTETRICAL CARE	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59350	REPAIR OF UTERUS	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59325	REVISION OF CERVIX	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59320	REVISION OF CERVIX	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59200	INSERT CERVICAL DILATOR	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59160	D & C AFTER DELIVERY	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59151	TREAT ECTOPIC PREGNANCY	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59150	TREAT ECTOPIC PREGNANCY	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59140	TREAT ECTOPIC PREGNANCY	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59136	TREAT ECTOPIC PREGNANCY	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59130	TREAT ECTOPIC PREGNANCY	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	59121	TREAT ECTOPIC PREGNANCY	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59120	TREAT ECTOPIC PREGNANCY	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59100	REMOVE UTERUS LESION	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59076	FETAL SHUNT PLACEMENT W/US	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59074	FETAL FLUID DRAINAGE W/US	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59072	UMBILICAL CORD OCCLUD W/US	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59070	TRANSABDOM AMNIOINFUS W/US	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59051	FETAL MONITOR/INTERPRET ONLY	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59050	FETAL MONITOR W/REPORT	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59025	FETAL NON-STRESS TEST	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59020	FETAL CONTRACT STRESS TEST	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59015	CHORION BIOPSY	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59012	FETAL CORD PUNCTURE PRENATAL	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59001	AMNIOCENTESIS THERAPEUTIC	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	59000	AMNIOCENTESIS DIAGNOSTIC	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	58976	TRANSFER OF EMBRYO	SURGERY - FEMALE GENITAL SYSTE	NON-COV	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	58970	RETRIEVAL OF OOCYTE	SURGERY - FEMALE GENITAL SYSTE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	58960	EXPLORATION OF ABDOMEN	SURGERY - FEMALE GENITAL SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	58956	BSO OMENTECTOMY W/TAH	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58954	TAH RAD DEBULK/LYMPH REMOVE	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58953	TAH RAD DISSECT FOR DEBULK	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58952	RESECT OVARIAN MALIGNANCY	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58951	RESECT OVARIAN MALIGNANCY	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58950	RESECT OVARIAN MALIGNANCY	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58943	REMOVAL OF OVARY(S)	SURGERY - FEMALE GENITAL SYSTE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	58940	REMOVAL OF OVARY(S)	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58925	REMOVAL OF OVARIAN CYST(S)	SURGERY - FEMALE GENITAL SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	58920	PARTIAL REMOVAL OF OVARY (S)	SURGERY - FEMALE GENITAL SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	58900	BIOPSY OF OVARY(S)	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	58825	TRANSPOSITION OVARY(S)	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	58822	DRAIN OVARY ABSCESS PERCUT	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	58820	DRAIN OVARY ABSCESS OPEN	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	58805	DRAINAGE OF OVARIAN CYST(S)	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	58800	DRAINAGE OF OVARIAN CYST(S)	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	58770	CREATE NEW TUBAL OPENING	SURGERY - FEMALE GENITAL SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	58752	REVISE OVARIAN TUBE(S)	SURGERY - FEMALE GENITAL SYSTE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	58750	REPAIR OVIDUCT	SURGERY - FEMALE GENITAL SYSTE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	58740	ADHESIOLYSIS TUBE OVARY	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58720	REMOVAL OF OVARY/TUBE(S)	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58700	REMOVAL OF FALLOPIAN TUBE	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58674	LAPS ABLTJ UTERINE FIBROIDS	SURGERY - FEMALE GENITAL SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	58673	LAPAROSCOPY SALPINGOSTOMY	SURGERY - FEMALE GENITAL SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	58672	LAPAROSCOPY FIMBRIOPLASTY	SURGERY - FEMALE GENITAL SYSTE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	58671	LAPAROSCOPY TUBAL BLOCK	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58670	LAPAROSCOPY TUBAL CAUTERY	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58662	LAPAROSCOPY EXCISE LESIONS	SURGERY - FEMALE GENITAL SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	58661	LAPAROSCOPY REMOVE ADNEXA	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58660	LAPAROSCOPY LYSIS	SURGERY - FEMALE GENITAL SYSTE	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	58615	OCCLUDE FALLOPIAN TUBE(S)	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58611	LIGATE OVIDUCT(S) ADD-ON	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58605	DIVISION OF FALLOPIAN TUBE	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58600	DIVISION OF FALLOPIAN TUBE	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58575	LAPS TOT HYST RESJ MAL	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58573	TLH W/T/O UTERUS OVER 250 G	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58572	TLH UTERUS OVER 250 G	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58571	TLH W/T/O 250 G OR LESS	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58570	TLH UTERUS 250 G OR LESS	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58565	HYSTEROSCOPY STERILIZATION	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58563	HYSTEROSCOPY ABLATION	SURGERY - FEMALE GENITAL SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	58562	HYSTEROSCOPY REMOVE FB	SURGERY - FEMALE GENITAL SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	58561	HYSTEROSCOPY REMOVE MYOMA	SURGERY - FEMALE GENITAL SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	58560	HYSTEROSCOPY RESECT SEPTUM	SURGERY - FEMALE GENITAL SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	58559	HYSTEROSCOPY LYSIS	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58558	HYSTEROSCOPY BIOPSY	SURGERY - FEMALE GENITAL SYSTE	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	58555	HYSTEROSCOPY DX SEP PROC	SURGERY - FEMALE GENITAL SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	58554	LAPARO-VAG HYST W/T/O COMPL	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58553	LAPARO-VAG HYST COMPLEX	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58552	LAPARO-VAG HYST INCL T/O	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58550	LAPARO-ASST VAG HYSTERECTOMY	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58548	LAP RADICAL HYST	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58546	LAPARO-MYOMECTOMY COMPLEX	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58545	LAPAROSCOPIC MYOMECTOMY	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58544	LSH W/T/O UTERUS ABOVE 250 G	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58543	LSH UTERUS ABOVE 250 G	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58542	LSH W/T/O UT 250 G OR LESS	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58541	LSH UTERUS 250 G OR LESS	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58540	REVISION OF UTERUS	SURGERY - FEMALE GENITAL SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	58520	REPAIR OF RUPTURED UTERUS	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	58410	SUSPENSION OF UTERUS	SURGERY - FEMALE GENITAL SYSTE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	58400	SUSPENSION OF UTERUS	SURGERY - FEMALE GENITAL SYSTE	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	58356	ENDOMETRIAL CRYOABLATION	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	58353	ENDOMETR ABLATE THERMAL	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	58350	REOPEN FALLOPIAN TUBE	SURGERY - FEMALE GENITAL SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	58346	INSERT HEYMAN UTERI CAPSULE	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	58345	REOPEN FALLOPIAN TUBE	SURGERY - FEMALE GENITAL SYSTE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	58340	CATHETER FOR HYSTEROGRAPHY	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58323	SPERM WASHING	SURGERY - FEMALE GENITAL SYSTE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	58322	ARTIFICIAL INSEMINATION	SURGERY - FEMALE GENITAL SYSTE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	58321	ARTIFICIAL INSEMINATION	SURGERY - FEMALE GENITAL SYSTE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	58301	REMOVE INTRAUTERINE DEVICE	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	58300	INSERT INTRAUTERINE DEVICE	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	58294	VAG HYST W/ENTEROCELE COMPL	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58292	VAG HYST T/O & REPAIR COMPL	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58291	VAG HYST INCL T/O COMPLEX	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58290	VAG HYST COMPLEX	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58285	EXTENSIVE HYSTERECTOMY	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	

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MMAI-Medicare/Medicaid	58280	HYSTERECTOMY/REVISE VAGINA	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58275	HYSTERECTOMY/REVISE VAGINA	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58270	VAG HYST W/ENTEROCELE REPAIR	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58267	VAG HYST W/URINARY REPAIR	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58263	VAG HYST W/T/O & VAG REPAIR	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58262	VAG HYST INCLUDING T/O	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58260	VAGINAL HYSTERECTOMY	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58240	REMOVAL OF PELVIS CONTENTS	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58210	EXTENSIVE HYSTERECTOMY	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58200	EXTENSIVE HYSTERECTOMY	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58180	PARTIAL HYSTERECTOMY	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58152	TOTAL HYSTERECTOMY	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58150	TOTAL HYSTERECTOMY	SURGERY - FEMALE GENITAL SYSTE	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	58146	MYOMECTOMY ABDOM COMPLEX	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	58145	MYOMECTOMY VAG METHOD	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	58140	MYOMECTOMY ABDOM METHOD	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	58120	DILATION AND CURETTAGE	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	58110	BX DONE W/COLPOSCOPY ADD-ON	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	58100	BIOPSY OF UTERUS LINING	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57800	DILATION OF CERVICAL CANAL	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57720	REVISION OF CERVIX	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57700	REVISION OF CERVIX	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57558	D&C OF CERVICAL STUMP	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57556	REMOVE CERVIX REPAIR BOWEL	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57555	REMOVE CERVIX/REPAIR VAGINA	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57550	REMOVAL OF RESIDUAL CERVIX	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57545	REMOVE CERVIX/REPAIR PELVIS	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57540	REMOVAL OF RESIDUAL CERVIX	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57531	REMOVAL OF CERVIX RADICAL	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57530	REMOVAL OF CERVIX	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57522	CONIZATION OF CERVIX	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57520	CONIZATION OF CERVIX	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	57513	LASER SURGERY OF CERVIX	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57511	CRYOCAUTERY OF CERVIX	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57510	CAUTERIZATION OF CERVIX	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57505	ENDOCERVICAL CURETTAGE	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57500	BIOPSY OF CERVIX	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57461	CONZ OF CERVIX W/SCOPE LEEP	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57460	BX OF CERVIX W/SCOPE LEEP	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57456	ENDOCERV CURETTAGE W/SCOPE	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57455	BIOPSY OF CERVIX W/SCOPE	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57454	BX/CURETT OF CERVIX W/SCOPE	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57452	EXAM OF CERVIX W/SCOPE	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57426	REVISE PROSTH VAG GRAFT LAP	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57425	LAPAROSCOPY SURG COLPOPEXY	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57423	REPAIR PARAVAG DEFECT LAP	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57421	EXAM/BIOPSY OF VAG W/SCOPE	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57420	EXAM OF VAGINA W/SCOPE	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	57415	REMOVE VAGINAL FOREIGN BODY	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57410	PELVIC EXAMINATION	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57400	DILATION OF VAGINA	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57335	REPAIR VAGINA	SURGERY - FEMALE GENITAL SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	57330	REPAIR BLADDER-VAGINA LESION	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57320	REPAIR BLADDER-VAGINA LESION	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57311	REPAIR URETHROVAGINAL LESION	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57310	REPAIR URETHROVAGINAL LESION	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57308	FISTULA REPAIR TRANSPERINE	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57307	FISTULA REPAIR & COLOSTOMY	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57305	REPAIR RECTUM-VAGINA FISTULA	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57300	REPAIR RECTUM-VAGINA FISTULA	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57296	REVISE VAG GRAFT OPEN ABD	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57295	REVISE VAG GRAFT VIA VAGINA	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57292	CONSTRUCT VAGINA WITH GRAFT	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57291	CONSTRUCTION OF VAGINA	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	57289	REPAIR BLADDER & VAGINA	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57288	REPAIR BLADDER DEFECT	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57287	REVISE/REMOVE SLING REPAIR	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57285	REPAIR PARAVAG DEFECT VAG	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57284	REPAIR PARAVAG DEFECT OPEN	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57283	COLPOPEXY INTRAPERITONEAL	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57282	COLPOPEXY EXTRAPERITONEAL	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57280	SUSPENSION OF VAGINA	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57270	REPAIR OF BOWEL POUCH	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57268	REPAIR OF BOWEL BULGE	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57267	INSERT MESH/PELVIC FLR ADDON	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57265	CMBN AP COLPRHY W/NTRCL RPR	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57260	CMBN ANT PST COLPRHY	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57250	REPAIR RECTUM & VAGINA	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57240	ANTERIOR COLPORRHAPHY	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57230	REPAIR OF URETHRAL LESION	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	57220	REVISION OF URETHRA	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57210	REPAIR VAGINA/PERINEUM	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57200	REPAIR OF VAGINA	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57180	TREAT VAGINAL BLEEDING	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57170	FITTING OF DIAPHRAGM/CAP	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57160	INSERT PESSARY/OTHER DEVICE	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57156	INS VAG BRACHYTX DEVICE	SURGERY - FEMALE GENITAL SYSTE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	57150	TREAT VAGINA INFECTION	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	56606	BIOPSY OF VULVA/PERINEUM	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	56605	BIOPSY OF VULVA/PERINEUM	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	56515	DESTROY VULVA LESION/S COMPL	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	56501	DESTROY VULVA LESIONS SIM	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	56442	HYMENOTOMY	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	56420	DRAINAGE OF GLAND ABSCESS	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	56405	I & D OF VULVA/PERINEUM	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55980	SEX TRANSFORMATION F TO M	SURGERY - INTERSEX SURGERY	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	55970	SEX TRANSFORMATION M TO F	SURGERY - INTERSEX SURGERY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	55920	PLACE NEEDLES PELVIC FOR RT	SURGERY-MALE/FEMALE GENITAL SY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55876	PLACE RT DEVICE/MARKER PROS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55875	TRANSPERI NEEDLE PLACE PROS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55874	TPRNL PLMT BIODEGRDABL MATRL	SURGERY - MALE GENITAL SYSTEM	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	55873	CRYOABLATE PROSTATE	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55865	EXTENSIVE PROSTATE SURGERY	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55862	EXTENSIVE PROSTATE SURGERY	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55860	SURGICAL EXPOSURE PROSTATE	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55845	EXTENSIVE PROSTATE SURGERY	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55842	EXTENSIVE PROSTATE SURGERY	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55840	EXTENSIVE PROSTATE SURGERY	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55831	REMOVAL OF PROSTATE	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55821	REMOVAL OF PROSTATE	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55815	EXTENSIVE PROSTATE SURGERY	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55812	EXTENSIVE PROSTATE SURGERY	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	55810	EXTENSIVE PROSTATE SURGERY	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55801	REMOVAL OF PROSTATE	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55725	DRAINAGE OF PROSTATE ABSCESS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55720	DRAINAGE OF PROSTATE ABSCESS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55706	PROSTATE SATURATION SAMPLING	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55705	BIOPSY OF PROSTATE	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55700	BIOPSY OF PROSTATE	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55680	REMOVE SPERM POUCH LESION	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55650	REMOVE SPERM DUCT POUCH	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55550	LAPARO LIGATE SPERMATIC VEIN	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55540	REVISE HERNIA & SPERM VEINS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55535	REVISE SPERMATIC CORD VEINS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55530	REVISE SPERMATIC CORD VEINS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55520	REMOVAL OF SPERM CORD LESION	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55500	REMOVAL OF HYDROCELE	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55400	REPAIR OF SPERM DUCT	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	55300	PREPARE SPERM DUCT X-RAY	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55250	REMOVAL OF SPERM DUCT(S)	SURGERY - MALE GENITAL SYSTEM	NO	04/30/2020	04/30/2020		Submission of valid patient consent form required with claim.	
MMAI-Medicare/Medicaid	55200	INCISION OF SPERM DUCT	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55180	REVISION OF SCROTUM	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55175	REVISION OF SCROTUM	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55150	REMOVAL OF SCROTUM	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55120	REMOVAL OF SCROTUM LESION	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55110	EXPLORE SCROTUM	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55100	DRAINAGE OF SCROTUM ABSCESS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55060	REPAIR OF HYDROCELE	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55041	REMOVAL OF HYDROCELES	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55040	REMOVAL OF HYDROCELE	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55000	DRAINAGE OF HYDROCELE	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54901	FUSION OF SPERMATIC DUCTS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54900	FUSION OF SPERMATIC DUCTS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54865	EXPLORE EPIDIDYMIS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	54861	REMOVAL OF EPIDIDYMIS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54860	REMOVAL OF EPIDIDYMIS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54840	REMOVE EPIDIDYMIS LESION	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54830	REMOVE EPIDIDYMIS LESION	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54800	BIOPSY OF EPIDIDYMIS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54700	DRAINAGE OF SCROTUM	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54692	LAPAROSCOPY ORCHIOPEXY	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54690	LAPAROSCOPY ORCHIECTOMY	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54680	RELOCATION OF TESTIS(ES)	SURGERY - MALE GENITAL SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	54670	REPAIR TESTIS INJURY	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54660	REVISION OF TESTIS	SURGERY - MALE GENITAL SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	54650	ORCHIOPEXY (FOWLER-STEPHENS)	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54640	ORCHIOPEXY INGUN/SCROT APPR	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54620	SUSPENSION OF TESTIS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54600	REDUCE TESTIS TORSION	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54560	EXPLORATION FOR TESTIS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	54550	EXPLORATION FOR TESTIS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54535	EXTENSIVE TESTIS SURGERY	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54530	REMOVAL OF TESTIS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54522	ORCHIECTOMY PARTIAL	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54520	REMOVAL OF TESTIS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54512	EXCISE LESION TESTIS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54505	BIOPSY OF TESTIS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54500	BIOPSY OF TESTIS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54450	PREPUTIAL STRETCHING	SURGERY - MALE GENITAL SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	54440	REPAIR OF PENIS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54435	REVISION OF PENIS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54430	REVISION OF PENIS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54420	REVISION OF PENIS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54417	REMV/REPLC PENIS PROS COMPL	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54416	REMV/REPL PENIS CONTAIN PROS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54415	REMOVE SELF-CONTD PENIS PROS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	54411	REMOV/REPLC PENIS PROS COMP	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54408	REPAIR MULTI-COMP PENIS PROS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54406	REMOVE MUTI-COMP PENIS PROS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54400	INSERT SEMI-RIGID PROSTHESIS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54390	REPAIR PENIS AND BLADDER	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54385	REPAIR PENIS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54380	REPAIR PENIS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54360	PENIS PLASTIC SURGERY	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54336	REVISE PENIS/URETHRA	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54332	REVISE PENIS/URETHRA	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54328	REVISE PENIS/URETHRA	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54326	RECONSTRUCTION OF URETHRA	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54324	RECONSTRUCTION OF URETHRA	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54322	RECONSTRUCTION OF URETHRA	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54318	RECONSTRUCTION OF URETHRA	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54316	RECONSTRUCTION OF URETHRA	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	54312	RECONSTRUCTION OF URETHRA	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54308	RECONSTRUCTION OF URETHRA	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54304	REVISION OF PENIS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54300	REVISION OF PENIS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54231	DYNAMIC CAVERNOSOMETRY	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54164	FRENULOTOMY OF PENIS	SURGERY - MALE GENITAL SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	54163	REPAIR OF CIRCUMCISION	SURGERY - MALE GENITAL SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	54162	LYSIS PENIL CIRCUMIC LESION	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54161	CIRCUM 28 DAYS OR OLDER	SURGERY - MALE GENITAL SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	54150	CIRCUMCISION W/REGIONL BLOCK	SURGERY - MALE GENITAL SYSTEM	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	54135	REMOVE PENIS & NODES	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54130	REMOVE PENIS & NODES	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54125	REMOVAL OF PENIS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54120	PARTIAL REMOVAL OF PENIS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54115	TREATMENT OF PENIS LESION	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54112	TREAT PENIS LESION GRAFT	SURGERY - MALE GENITAL SYSTEM	NO	05/01/2017	05/01/2017			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	54111	TREAT PENIS LESION GRAFT	SURGERY - MALE GENITAL SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	54110	TREATMENT OF PENIS LESION	SURGERY - MALE GENITAL SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	54105	BIOPSY OF PENIS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54100	BIOPSY OF PENIS	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54065	DESTRUCTION PENIS LESION(S)	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54060	EXCISION OF PENIS LESION(S)	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54057	LASER SURG PENIS LESION(S)	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54056	CRYOSURGERY PENIS LESION(S)	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54055	DESTRUCTION PENIS LESION(S)	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54050	DESTRUCTION PENIS LESION(S)	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54015	DRAIN PENIS LESION	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54001	SLITTING OF PREPUCE	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54000	SLITTING OF PREPUCE	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53860	TRANSURETHRAL RF TREATMENT	SURGERY - URINARY SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	53855	INSERT PROST URETHRAL STENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53854	TRURL DSTRJ PRST8 TISS RF WV	SURGERY - URINARY SYSTEM	NO	01/01/2019	01/01/2019			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	53852	PROSTATIC RF THERMOTX	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53850	PROSTATIC MICROWAVE THERMOTX	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53665	DILATION OF URETHRA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53661	DILATION OF URETHRA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53660	DILATION OF URETHRA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53621	DILATE URETHRA STRICTURE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53620	DILATE URETHRA STRICTURE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53605	DILATE URETHRA STRICTURE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53601	DILATE URETHRA STRICTURE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53600	DILATE URETHRA STRICTURE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53520	REPAIR OF URETHRA DEFECT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53515	REPAIR OF URETHRA INJURY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53510	REPAIR OF URETHRA INJURY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53505	REPAIR OF URETHRA INJURY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53502	REPAIR OF URETHRA INJURY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53500	URETHRLYS TRANSVAG W/ SCOPE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	53460	REVISION OF URETHRA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53450	REVISION OF URETHRA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53449	REPAIR URO SPHINCTER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53448	REMOV/REPLC UR SPHINCTR COMP	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53447	REMOVE/REPLACE UR SPHINCTER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53446	REMOVE URO SPHINCTER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53445	INSERT URO/VES NCK SPHINCTER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53444	INSERT TANDEM CUFF	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53442	REMOVE/REVISE MALE SLING	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53440	MALE SLING PROCEDURE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53431	RECONSTRUCT URETHRA/BLADDER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53430	RECONSTRUCTION OF URETHRA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53425	RECONSTRUCT URETHRA STAGE 2	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53420	RECONSTRUCT URETHRA STAGE 1	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53415	RECONSTRUCTION OF URETHRA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53410	RECONSTRUCTION OF URETHRA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	53405	REVISE URETHRA STAGE 2	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53400	REVISE URETHRA STAGE 1	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53275	REPAIR OF URETHRA DEFECT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53270	REMOVAL OF URETHRA GLAND	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53265	TREATMENT OF URETHRA LESION	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53260	TREATMENT OF URETHRA LESION	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53250	REMOVAL OF URETHRA GLAND	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53240	SURGERY FOR URETHRA POUCH	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53235	REMOVAL OF URETHRA LESION	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53230	REMOVAL OF URETHRA LESION	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53220	TREATMENT OF URETHRA LESION	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53215	REMOVAL OF URETHRA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53210	REMOVAL OF URETHRA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53200	BIOPSY OF URETHRA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53085	DRAINAGE OF URINARY LEAKAGE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53080	DRAINAGE OF URINARY LEAKAGE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	53060	DRAINAGE OF URETHRA ABSCESS	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53040	DRAINAGE OF URETHRA ABSCESS	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53025	INCISION OF URETHRA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53020	INCISION OF URETHRA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53010	INCISION OF URETHRA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	53000	INCISION OF URETHRA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52700	DRAINAGE OF PROSTATE ABSCESS	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52648	LASER SURGERY OF PROSTATE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52647	LASER SURGERY OF PROSTATE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52640	RELIEVE BLADDER CONTRACTURE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52630	REMOVE PROSTATE REGROWTH	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52601	PROSTATECTOMY (TURP)	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	5250F	ASTHMA DISCHARGE PLAN PRESNT	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52500	REVISION OF BLADDER NECK	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52450	INCISION OF PROSTATE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52442	CYSTOURETHRO W/ADDL IMPLANT	SURGERY - URINARY SYSTEM	NO	01/01/2010	01/01/2015			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	52441	CYSTOURETHRO W/IMPLANT	SURGERY - URINARY SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	52402	CYSTOURETHRO CUT EJACUL DUCT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52400	CYSTOURETERO W/CONGEN REPR	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52356	CYSTO/URETERO W/LITHOTRIPSY	SURGERY - URINARY SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	52355	CYSTOURETERO W/EXCISE TUMOR	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52354	CYSTOURETERO W/BIOPSY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52353	CYSTOURETERO W/LITHOTRIPSY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52352	CYSTOURETERO W/STONE REMOVE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52351	CYSTOURETERO & OR PYELOSCOPE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52346	CYSTOURETERO W/RENAL STRICT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52345	CYSTO/URETERO W/UP STRICTURE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52344	CYSTO/URETERO STRICTURE TX	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52343	CYSTO W/RENAL STRICTURE TX	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52342	CYSTO W/UP STRICTURE TX	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52341	CYSTO W/URETER STRICTURE TX	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52334	CREATE PASSAGE TO KIDNEY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	52332	CYSTOSCOPY AND TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52330	CYSTOSCOPY AND TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52327	CYSTOSCOPY INJECT MATERIAL	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52325	CYSTOSCOPY STONE REMOVAL	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52320	CYSTOSCOPY AND TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52318	REMOVE BLADDER STONE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52317	REMOVE BLADDER STONE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52315	CYSTOSCOPY AND TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52310	CYSTOSCOPY AND TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52305	CYSTOSCOPY AND TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52301	CYSTOSCOPY AND TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52300	CYSTOSCOPY AND TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52290	CYSTOSCOPY AND TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52285	CYSTOSCOPY AND TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52283	CYSTOSCOPY AND TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52282	CYSTOSCOPY IMPLANT STENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	52281	CYSTOSCOPY AND TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52277	CYSTOSCOPY AND TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52276	CYSTOSCOPY AND TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52275	CYSTOSCOPY & REVISE URETHRA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52270	CYSTOSCOPY & REVISE URETHRA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52265	CYSTOSCOPY AND TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52260	CYSTOSCOPY AND TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52250	CYSTOSCOPY AND RADIOTRACER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52240	CYSTOSCOPY AND TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52235	CYSTOSCOPY AND TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52234	CYSTOSCOPY AND TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52224	CYSTOSCOPY AND TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52214	CYSTOSCOPY AND TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52204	CYSTOSCOPY W/BIOPSY(S)	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	52010	CYSTOSCOPY & DUCT CATHETER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	5200F	EVAL APPROS SURG THXPY EPI	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	51992	LAPARO SLING OPERATION	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51990	LAPARO URETHRAL SUSPENSION	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51980	CONSTRUCT BLADDER OPENING	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51960	REVISION OF BLADDER & BOWEL	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51940	CORRECTION OF BLADDER DEFECT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51925	HYSTERECTOMY/BLADDER REPAIR	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51920	CLOSE BLADDER-UTERUS FISTULA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51900	REPAIR BLADDER/VAGINA LESION	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51880	REPAIR OF BLADDER OPENING	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51865	REPAIR OF BLADDER WOUND	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51860	REPAIR OF BLADDER WOUND	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51845	REPAIR BLADDER NECK	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51841	ATTACH BLADDER/URETHRA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51840	ATTACH BLADDER/URETHRA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51820	REVISION OF URINARY TRACT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51800	REVISION OF BLADDER/URETHRA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	51798	US URINE CAPACITY MEASURE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51797	INTRAABDOMINAL PRESSURE TEST	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51792	URINARY REFLEX STUDY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51785	ANAL/URINARY MUSCLE STUDY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51784	ANAL/URINARY MUSCLE STUDY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51741	ELECTRO-UROFLOWMETRY FIRST	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51736	URINE FLOW MEASUREMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51729	CYSTOMETROGRAM W/VP&UP	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51728	CYSTOMETROGRAM W/VP	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51727	CYSTOMETROGRAM W/UP	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51726	COMPLEX CYSTOMETROGRAM	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51725	SIMPLE CYSTOMETROGRAM	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51720	TREATMENT OF BLADDER LESION	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51715	ENDOSCOPIC INJECTION/IMPLANT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51710	CHANGE OF BLADDER TUBE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51705	CHANGE OF BLADDER TUBE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	51703	INSERT BLADDER CATH COMPLEX	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51702	INSERT TEMP BLADDER CATH	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51701	INSERT BLADDER CATHETER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51700	IRRIGATION OF BLADDER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51610	INJECTION FOR BLADDER X-RAY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51605	PREPARATION FOR BLADDER XRAY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51600	INJECTION FOR BLADDER X-RAY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51597	REMOVAL OF PELVIC STRUCTURES	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51596	REMOVE BLADDER/CREATE POUCH	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51595	REMOVE BLADDER/REVISE TRACT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51590	REMOVE BLADDER/REVISE TRACT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51585	REMOVAL OF BLADDER & NODES	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51580	REMOVE BLADDER/REVISE TRACT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51575	REMOVAL OF BLADDER & NODES	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51570	REMOVAL OF BLADDER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51565	REVISE BLADDER & URETER(S)	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	51555	PARTIAL REMOVAL OF BLADDER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51550	PARTIAL REMOVAL OF BLADDER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51535	REPAIR OF URETER LESION	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51530	REMOVAL OF BLADDER LESION	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51525	REMOVAL OF BLADDER LESION	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51520	REMOVAL OF BLADDER LESION	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51500	REMOVAL OF BLADDER CYST	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51102	DRAIN BL W/CATH INSERTION	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51101	DRAIN BLADDER BY TROCAR/CATH	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51100	DRAIN BLADDER BY NEEDLE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51080	DRAINAGE OF BLADDER ABSCESS	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51065	REMOVE URETER CALCULUS	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51060	REMOVAL OF URETER STONE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51050	REMOVAL OF BLADDER STONE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51045	INCISE BLADDER/DRAIN URETER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	51040	INCISE & DRAIN BLADDER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	50980	URETER ENDOSCOPY & TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50976	URETER ENDOSCOPY & TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50974	URETER ENDOSCOPY & BIOPSY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50972	URETER ENDOSCOPY & CATHETER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50970	URETER ENDOSCOPY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50961	URETER ENDOSCOPY & TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50957	URETER ENDOSCOPY & TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50955	URETER ENDOSCOPY & BIOPSY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50953	ENDOSCOPY OF URETER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50951	ENDOSCOPY OF URETER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50948	LAPARO NEW URETER/BLADDER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50947	LAPARO NEW URETER/BLADDER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50945	LAPAROSCOPY URETEROLITHOTOMY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50940	RELEASE OF URETER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50930	CLOSURE URETER/BOWEL FISTULA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50920	CLOSURE URETER/SKIN FISTULA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	50900	REPAIR OF URETER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50860	TRANSPLANT URETER TO SKIN	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50845	APPENDICO-VESICOSTOMY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50840	REPLACE URETER BY BOWEL	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50830	REVISE URINE FLOW	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50825	CONSTRUCT BOWEL BLADDER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50820	CONSTRUCT BOWEL BLADDER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50815	URINE SHUNT TO INTESTINE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50810	FUSION OF URETER & BOWEL	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50800	IMPLANT URETER IN BOWEL	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50785	REIMPLANT URETER IN BLADDER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50783	REIMPLANT URETER IN BLADDER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50782	REIMPLANT URETER IN BLADDER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50780	REIMPLANT URETER IN BLADDER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50770	SPLICING OF URETERS	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50750	FUSION OF URETER & KIDNEY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	50740	FUSION OF URETER & KIDNEY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50728	REVISE URETER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50727	REVISE URETER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50725	RELEASE/REVISE URETER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50722	RELEASE OF URETER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50715	RELEASE OF URETER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50700	REVISION OF URETER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50690	INJECTION FOR URETER X-RAY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50688	CHANGE OF URETER TUBE/STENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50686	MEASURE URETER PRESSURE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50684	INJECTION FOR URETER X-RAY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50660	REMOVAL OF URETER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50650	REMOVAL OF URETER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50630	REMOVAL OF URETER STONE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50620	REMOVAL OF URETER STONE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50610	REMOVAL OF URETER STONE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	50605	INSERT URETERAL SUPPORT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50600	EXPLORATION OF URETER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50593	PERC CRYO ABLATE RENAL TUM	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50592	PERC RF ABLATE RENAL TUMOR	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50590	FRAGMENTING OF KIDNEY STONE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50580	KIDNEY ENDOSCOPY & TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50576	KIDNEY ENDOSCOPY & TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50575	KIDNEY ENDOSCOPY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50574	KIDNEY ENDOSCOPY & BIOPSY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50572	KIDNEY ENDOSCOPY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50570	KIDNEY ENDOSCOPY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50562	RENAL SCOPE W/TUMOR RESECT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50561	KIDNEY ENDOSCOPY & TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50557	KIDNEY ENDOSCOPY & TREATMENT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50555	KIDNEY ENDOSCOPY & BIOPSY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50553	KIDNEY ENDOSCOPY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	50551	KIDNEY ENDOSCOPY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50548	LAPARO REMOVE W/URETER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50547	LAPARO REMOVAL DONOR KIDNEY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50546	LAPAROSCOPIC NEPHRECTOMY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50545	LAPARO RADICAL NEPHRECTOMY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50544	LAPAROSCOPY PYELOPLASTY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50543	LAPARO PARTIAL NEPHRECTOMY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50542	LAPARO ABLATE RENAL MASS	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50541	LAPARO ABLATE RENAL CYST	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50540	REVISION OF HORSESHOE KIDNEY	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50526	CLOSE NEPHROVISCERAL FISTULA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50525	CLOSE NEPHROVISCERAL FISTULA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50520	CLOSE KIDNEY-SKIN FISTULA	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50500	REPAIR OF KIDNEY WOUND	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50437	DILAT XST TRC NEW ACCESS RCS	SURGERY - URINARY SYSTEM	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	50436	DILAT XST TRC NDURLGC PX	SURGERY - URINARY SYSTEM	NO	01/01/2019	01/01/2019			

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MMAI-Medicare/Medicaid	50405	REVISION OF KIDNEY/URETER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50400	REVISION OF KIDNEY/URETER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50396	MEASURE KIDNEY PRESSURE	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50391	INSTLL RX AGNT INTO RNAL TUB	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50390	DRAINAGE OF KIDNEY LESION	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50389	REMOVE RENAL TUBE W/FLUORO	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50387	CHANGE NEPHROURETERAL CATH	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50386	REMOVE STENT VIA TRANSURETH	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50385	CHANGE STENT VIA TRANSURETH	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50384	REMOVE URETER STENT PERCUT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50382	CHANGE URETER STENT PERCUT	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50329	PREP RENAL GRAFT/URETERAL	SURGERY - URINARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	50328	PREP RENAL GRAFT/ARTERIAL	SURGERY - URINARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	50327	PREP RENAL GRAFT/VENOUS	SURGERY - URINARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	50325	PREP DONOR RENAL GRAFT	SURGERY - URINARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	50323	PREP CADAVER RENAL ALLOGRAFT	SURGERY - URINARY SYSTEM	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	50320	REMOVE KIDNEY LIVING DONOR	SURGERY - URINARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	50300	REMOVE CADAVER DONOR KIDNEY	SURGERY - URINARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	50236	REMOVAL OF KIDNEY & URETER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50234	REMOVAL OF KIDNEY & URETER	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50230	REMOVAL KIDNEY OPEN RADICAL	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50225	REMOVAL KIDNEY OPEN COMPLEX	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50220	REMOVE KIDNEY OPEN	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50200	RENAL BIOPSY PERQ	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	5015F	DOC FX & TEST/TXMNT FOR OP	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	5005F	PT COUNSLD ON EXAM FOR MOLES	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	49906	FREE OMENTAL FLAP MICROVASC	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49905	OMENTAL FLAP INTRA-ABDOM	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49904	OMENTAL FLAP EXTRA-ABDOM	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49900	REPAIR OF ABDOMINAL WALL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49651	LAP ING HERNIA REPAIR RECUR	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49650	LAP ING HERNIA REPAIR INIT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	49611	REPAIR UMBILICAL LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49610	REPAIR UMBILICAL LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49606	REPAIR UMBILICAL LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49605	REPAIR UMBILICAL LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49600	REPAIR UMBILICAL LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49557	REREPAIR FEM HERNIA BLOCKED	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49555	REREPAIR FEM HERNIA REDUCE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49553	RPR FEM HERNIA INIT BLOCKED	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49550	RPR REM HERNIA INIT REDUCE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49540	REPAIR LUMBAR HERNIA	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49525	REPAIR ING HERNIA SLIDING	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49521	REREPAIR ING HERNIA BLOCKED	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49520	REREPAIR ING HERNIA REDUCE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49507	PRP I/HERN INIT BLOCK GT 5 YR	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49505	PRP I/HERN INIT REDUC GT 5 YR	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49501	RPR ING HERNIA INIT BLOCKED	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	49500	RPR ING HERNIA INIT REDUCE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49496	RPR ING HERNIA BABY BLOCKED	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49495	RPR ING HERNIA BABY REDUC	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49492	RPR ING HERN PREMIE BLOCKED	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49491	RPR HERN PREEMIE REDUC	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49465	FLUORO EXAM OF G/COLON TUBE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49460	FIX G/COLON TUBE W/DEVICE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49452	REPLACE G-J TUBE PERC	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49451	REPLACE DUOD/JEJ TUBE PERC	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49450	REPLACE G/C TUBE PERC	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49446	CHANGE G-TUBE TO G-J PERC	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49442	PLACE CECOSTOMY TUBE PERC	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49441	PLACE DUOD/JEJ TUBE PERC	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49440	PLACE GASTROSTOMY TUBE PERC	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49436	EMBEDDED IP CATH EXIT-SITE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49435	INSERT SUBQ EXTEN TO IP CATH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	49429	REMOVAL OF SHUNT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49428	LIGATION OF SHUNT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49427	INJECTION ABDOMINAL SHUNT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49426	REVISE ABDOMEN-VENOUS SHUNT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49425	INSERT ABDOMEN-VENOUS DRAIN	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49424	ASSESS CYST CONTRAST INJECT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49423	EXCHANGE DRAINAGE CATHETER	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49422	REMOVE TUNNELED IP CATH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49421	INS TUN IP CATH FOR DIAL OPN	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49419	INSERT TUN IP CATH W/PORT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49418	INSERT TUN IP CATH PERC	SURGERY - DIGESTIVE SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	49412	INS DEVICE FOR RT GUIDE OPEN	SURGERY - DIGESTIVE SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	49411	INS MARK ABD/PEL FOR RT PERQ	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49407	IMAGE CATH FLUID TRNS/VGNL	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	49406	IMAGE CATH FLUID PERI/RETRO	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	49405	IMAGE CATH FLUID COLXN VISC	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2014	01/01/2014			

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MMAI-Medicare/Medicaid	49402	REMOVE FOREIGN BODY ADBOMEN	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49400	AIR INJECTION INTO ABDOMEN	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49327	LAP INS DEVICE FOR RT	SURGERY - DIGESTIVE SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	49326	LAP W/OMENTOPEXY ADD-ON	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49325	LAP REVISION PERM IP CATH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49324	LAP INSERT TUNNEL IP CATH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49323	LAPARO DRAIN LYMPHOCELE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49322	LAPAROSCOPY ASPIRATION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49321	LAPAROSCOPY BIOPSY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49320	DIAG LAPARO SEPARATE PROC	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49255	REMOVAL OF OMENTUM	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49250	EXCISION OF UMBILICUS	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	49215	EXCISE SACRAL SPINE TUMOR	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49180	BIOPSY ABDOMINAL MASS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49084	PERITONEAL LAVAGE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49083	ABD PARACENTESIS W/IMAGING	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	49082	ABD PARACENTESIS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49062	DRAIN TO PERITONEAL CAVITY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49060	DRAIN OPEN RETROPERI ABSCESS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49040	DRAIN OPEN ABDOM ABSCESS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49020	DRAINAGE ABDOM ABSCESS OPEN	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49014	REEXPLORATION PELVIC WOUND	SURGERY-DIGESTIVE SYSTEM	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	49013	PRPERTL PEL PACK HEMRRG TRMA	SURGERY-DIGESTIVE SYSTEM	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	49010	EXPLORATION BEHIND ABDOMEN	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49002	REOPENING OF ABDOMEN	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	49000	EXPLORATION OF ABDOMEN	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	48556	REMOVAL ALLOGRAFT PANCREAS	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	48554	TRANSPL ALLOGRAFT PANCREAS	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	48552	PREP DONOR PANCREAS/VENOUS	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	48551	PREP DONOR PANCREAS	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	48550	DONOR PANCREATECTOMY	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	48548	FUSE PANCREAS AND BOWEL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	48547	DUODENAL EXCLUSION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	48545	PANCREATORRHAPHY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	48540	FUSE PANCREAS CYST AND BOWEL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	48520	FUSE PANCREAS CYST AND BOWEL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	48510	DRAIN PANCREATIC PSEUDOCYST	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	48500	SURGERY OF PANCREATIC CYST	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	48400	INJECTION INTRAOP ADD-ON	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	48160	PANCREAS REMOVAL/TRANSPLANT	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	48155	REMOVAL OF PANCREAS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	48154	PANCREATECTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	48153	PANCREATECTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	48152	PANCREATECTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	48150	PARTIAL REMOVAL OF PANCREAS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	48148	REMOVAL OF PANCREATIC DUCT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	48146	PANCREATECTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	48145	PARTIAL REMOVAL OF PANCREAS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	48140	PARTIAL REMOVAL OF PANCREAS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	48120	REMOVAL OF PANCREAS LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	48105	RESECT/DEBRIDE PANCREAS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	48102	NEEDLE BIOPSY PANCREAS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	48100	BIOPSY OF PANCREAS OPEN	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	48020	REMOVAL OF PANCREATIC STONE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	48001	PLACEMENT OF DRAIN PANCREAS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	48000	DRAINAGE OF ABDOMEN	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47900	SUTURE BILE DUCT INJURY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47801	PLACEMENT BILE DUCT SUPPORT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47800	RECONSTRUCTION OF BILE DUCTS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47785	FUSE BILE DUCTS AND BOWEL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47780	FUSE BILE DUCTS AND BOWEL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47765	FUSE LIVER DUCTS & BOWEL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47760	FUSE BILE DUCTS AND BOWEL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47741	FUSE GALLBLADDER & BOWEL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	47740	FUSE GALLBLADDER & BOWEL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47721	FUSE UPPER GI STRUCTURES	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47720	FUSE GALLBLADDER & BOWEL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47715	EXCISION OF BILE DUCT CYST	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47712	EXCISION OF BILE DUCT TUMOR	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47711	EXCISION OF BILE DUCT TUMOR	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47701	BILE DUCT REVISION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47700	EXPLORATION OF BILE DUCTS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47620	REMOVAL OF GALLBLADDER	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47612	REMOVAL OF GALLBLADDER	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47610	REMOVAL OF GALLBLADDER	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47570	LAPARO CHOLECYSTOENTEROSTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47564	LAPARO CHOLECYSTECTOMY/EXPLR	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47563	LAPARO CHOLECYSTECTOMY/GRAPH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47562	LAPAROSCOPIC CHOLECYSTECTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47556	BILIARY ENDOSCOPY THRU SKIN	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	47555	BILIARY ENDOSCOPY THRU SKIN	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47554	BILIARY ENDOSCOPY THRU SKIN	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47553	BILIARY ENDOSCOPY THRU SKIN	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47552	BILIARY ENDO PERQ DX W/SPECI	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47550	BILE DUCT ENDOSCOPY ADD-ON	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47490	INCISION OF GALLBLADDER	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47480	INCISION OF GALLBLADDER	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47460	INCISE BILE DUCT SPHINCTER	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47425	INCISION OF BILE DUCT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47420	INCISION OF BILE DUCT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47400	INCISION OF LIVER DUCT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47383	PERQ ABLTJ LVR CRYOABLATION	SURGERY - DIGESTIVE SYSTEM	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	47382	PERCUT ABLATE LIVER RF	SURGERY - DIGESTIVE SYSTEM	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	47381	OPEN ABLATE LIVER TUMOR CRYO	SURGERY - DIGESTIVE SYSTEM	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	47380	OPEN ABLATE LIVER TUMOR RF	SURGERY - DIGESTIVE SYSTEM	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	47371	LAPARO ABLATE LIVER CRYOSURG	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	47370	LAPARO ABLATE LIVER TUMOR RF	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	47362	REPAIR LIVER WOUND	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47361	REPAIR LIVER WOUND	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47360	REPAIR LIVER WOUND	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47350	REPAIR LIVER WOUND	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47300	SURGERY FOR LIVER LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47147	PREP DONOR LIVER/ARTERIAL	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	47146	PREP DONOR LIVER/VENOUS	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	47145	PREP DONOR LIVER LOBE SPLIT	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	47144	PREP DONOR LIVER 3-SEGMENT	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	47143	PREP DONOR LIVER WHOLE	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	47142	PARTIAL REMOVAL DONOR LIVER	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	47141	PARTIAL REMOVAL DONOR LIVER	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	47140	PARTIAL REMOVAL DONOR LIVER	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	47135	TRANSPLANTATION OF LIVER	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	47133	REMOVAL OF DONOR LIVER	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	47130	PARTIAL REMOVAL OF LIVER	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47125	PARTIAL REMOVAL OF LIVER	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47122	EXTENSIVE REMOVAL OF LIVER	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47120	PARTIAL REMOVAL OF LIVER	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47100	WEDGE BIOPSY OF LIVER	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46948	INT HRHC TRANAL DARTLZJ 2+	SURGERY-DIGESTIVE SYSTEM	YES	12/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	46947	HEMORRHOIDOPEXY BY STAPLING	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46946	INT HRHC LIG 2+HROID W/O IMG	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46945	INT HRHC LIG 1 HROID W/O IMG	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46942	TREATMENT OF ANAL FISSURE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46940	TREATMENT OF ANAL FISSURE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46930	DESTROY INTERNAL HEMORRHOIDS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46924	DESTRUCTION ANAL LESION(S)	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46922	EXCISION OF ANAL LESION(S)	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46917	LASER SURGERY ANAL LESIONS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46916	CRYOSURGERY ANAL LESION(S)	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	46910	DESTRUCTION ANAL LESION(S)	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46900	DESTRUCTION ANAL LESION(S)	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46761	REPAIR OF ANAL SPHINCTER	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46760	REPAIR OF ANAL SPHINCTER	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46754	REMOVAL OF SUTURE FROM ANUS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46753	RECONSTRUCTION OF ANUS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46751	REPAIR OF ANAL SPHINCTER	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46750	REPAIR OF ANAL SPHINCTER	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46748	REPAIR OF CLOACAL ANOMALY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46746	REPAIR OF CLOACAL ANOMALY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46744	REPAIR OF CLOACAL ANOMALY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46742	REPAIR OF IMPERFORATED ANUS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46740	CONSTRUCTION OF ABSENT ANUS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46735	CONSTRUCTION OF ABSENT ANUS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46730	CONSTRUCTION OF ABSENT ANUS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46716	REP PERF ANOPER/VESTIB FISTU	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	46715	REP PERF ANOPER FISTU	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46712	REPR PER/VAG POUCH DBL PROC	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46710	REPR PER/VAG POUCH SNGL PROC	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46707	REPAIR ANORECTAL FIST W/PLUG	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46706	REPR OF ANAL FISTULA W/GLUE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46705	REPAIR OF ANAL STRICTURE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46700	REPAIR OF ANAL STRICTURE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46615	ANOSCOPY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46614	ANOSCOPY CONTROL BLEEDING	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46612	ANOSCOPY REMOVE LESIONS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46611	ANOSCOPY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46610	ANOSCOPY REMOVE LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46608	ANOSCOPY REMOVE FOR BODY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46607	DIAGNOSTIC ANOSCOPY & BIOPSY	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	46606	ANOSCOPY AND BIOPSY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46604	ANOSCOPY AND DILATION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	46601	DIAGNOSTIC ANOSCOPY	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	46600	DIAGNOSTIC ANOSCOPY SPX	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46505	CHEMODENERVATION ANAL MUSC	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46500	INJECTION INTO HEMORRHOID (S)	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46320	REMOVAL OF HEMORRHOID CLOT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46288	REPAIR ANAL FISTULA	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46285	REMOVE ANAL FIST 2 STAGE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46280	REMOVE ANAL FIST COMPLEX	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46275	REMOVE ANAL FIST INTER	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46270	REMOVE ANAL FIST SUBQ	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46262	REMOVE IN/EX HEM GRPS W/FIST	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46261	REMOVE IN/EX HEM GRPS & FISS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46260	REMOVE IN/EX HEM GROUPS 2+	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46258	REMOVE IN/EX HEM GRP W/FISTU	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46257	REMOVE IN/EX HEM GRP & FISS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46255	REMOVE INT/EXT HEM 1 GROUP	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	46250	REMOVE EXT HEM GROUPS 2+	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46230	REMOVAL OF ANAL TAGS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46221	LIGATION OF HEMORRHOID(S)	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46220	EXCISE ANAL EXT TAG/PAPILLA	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46200	REMOVAL OF ANAL FISSURE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46083	INCISE EXTERNAL HEMORRHOID	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46080	INCISION OF ANAL SPHINCTER	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46060	INCISION OF RECTAL ABSCESS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46050	INCISION OF ANAL ABSCESS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46045	INCISION OF RECTAL ABSCESS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46040	INCISION OF RECTAL ABSCESS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	46020	PLACEMENT OF SETON	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45990	SURG DX EXAM ANORECTAL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45915	REMOVE RECTAL OBSTRUCTION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45910	DILATION OF RECTAL NARROWING	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45905	DILATION OF ANAL SPHINCTER	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	45900	REDUCTION OF RECTAL PROLAPSE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45825	REPAIR FISTULA W/COLOSTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45820	REPAIR RECTOURETHRAL FISTULA	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45805	REPAIR FISTULA W/COLOSTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45800	REPAIR RECT/BLADDER FISTULA	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4559F	1 BODYTEMP GT EQU 35.5CW/IN 30MIN	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4558F	PT RECVD 2 RX ANTI-EMET AGT	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4557F	PT W/O 3+ POST-OPNAUSEA&VOM	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4556F	PT W/3+ POST-OP NAUSEA&VOM	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45563	EXPLORATION/REPAIR OF RECTUM	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45562	EXPLORATION/REPAIR OF RECTUM	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45560	REPAIR OF RECTOCELE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45550	REPAIR RECTUM/REMOVE SIGMOID	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45541	CORRECT RECTAL PROLAPSE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45540	CORRECT RECTAL PROLAPSE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45520	TREATMENT OF RECTAL PROLAPSE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	45505	REPAIR OF RECTUM	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45500	REPAIR OF RECTUM	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45499	LAPAROSCOPE PROC RECTUM	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	45402	LAP PROCTOPEXY W/SIG RESECT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45400	LAPAROSCOPIC PROC	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45399	UNLISTED PROCEDURE COLON	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	45398	COLONOSCOPY W/BAND LIGATION	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	45397	LAP REMOVE RECTUM W/POUCH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45395	LAP REMOVAL OF RECTUM	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45393	COLONOSCOPY W/DECOMPRESSION	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	45392	COLONOSCOPY W/ENDOSCOPIC FNB	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45391	COLONOSCOPY W/ENDOSCOPE US	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45390	COLONOSCOPY W/RESECTION	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	45389	COLONOSCOPY W/STENT PLCMT	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	45388	COLONOSCOPY W/ABLATION	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	45386	COLONOSCOPY W/BALLOON DILAT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	45385	COLONOSCOPY W/LESION REMOVAL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45384	COLONOSCOPY W/LESION REMOVAL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45382	COLONOSCOPY W/CONTROL BLEED	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45381	COLONOSCOPY SUBMUCOUS NJX	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45380	COLONOSCOPY AND BIOPSY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45379	COLONOSCOPY W/FB REMOVAL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45378	DIAGNOSTIC COLONOSCOPY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45350	SGMDSC W/BAND LIGATION	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	45349	SIGMOIDOSCOPY W/RESECTION	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	45347	SIGMOIDOSCOPY W/PLCMT STENT	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	45346	SIGMOIDOSCOPY W/ABLATION	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	45342	SIGMOIDOSCOPY W/US GUIDE BX	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45341	SIGMOIDOSCOPY W/ULTRASOUND	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45340	SIG W/TNDSC BALLOON DILATION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45338	SIGMOIDOSCOPY W/TUMR REMOVE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45337	SIGMOIDOSCOPY & DECOMPRESS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	45335	SIGMOIDOSCOPY W/SUBMUC INJ	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45334	SIGMOIDOSCOPY FOR BLEEDING	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45333	SIGMOIDOSCOPY & POLYPECTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45332	SIGMOIDOSCOPY W/FB REMOVAL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45331	SIGMOIDOSCOPY AND BIOPSY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45330	DIAGNOSTIC SIGMOIDOSCOPY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45327	PROCTOSIGMOIDOSCOPY W/STENT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45321	PROCTOSIGMOIDOSCOPY VOLVUL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45320	PROCTOSIGMOIDOSCOPY ABLATE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45317	PROCTOSIGMOIDOSCOPY BLEED	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45315	PROCTOSIGMOIDOSCOPY REMOVAL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45309	PROCTOSIGMOIDOSCOPY REMOVAL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45308	PROCTOSIGMOIDOSCOPY REMOVAL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45307	PROCTOSIGMOIDOSCOPY FB	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45305	PROCTOSIGMOIDOSCOPY W/BX	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45303	PROCTOSIGMOIDOSCOPY DILATE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	45300	PROCTOSIGMOIDOSCOPY DX	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4526F	NEUROPSYCHIA INTERVEN RCVD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4525F	NEUROPSYCHIA INTERVEN ORDER	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45190	DESTRUCTION RECTAL TUMOR	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45172	EXC RECT TUM TRANSANAL FULL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45171	EXC RECT TUM TRANSANAL PART	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45160	EXCISION OF RECTAL LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45150	EXCISION OF RECTAL STRICTURE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45136	EXCISE ILEOANAL RESERVIOR	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45135	EXCISION OF RECTAL PROLAPSE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45130	EXCISION OF RECTAL PROLAPSE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45126	PELVIC EXENTERATION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45123	PARTIAL PROCTECTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45121	REMOVAL OF RECTUM AND COLON	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45120	REMOVAL OF RECTUM	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45119	REMOVE RECTUM W/RESERVOIR	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	45116	PARTIAL REMOVAL OF RECTUM	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45114	PARTIAL REMOVAL OF RECTUM	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45113	PARTIAL PROCTECTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45112	REMOVAL OF RECTUM	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45111	PARTIAL REMOVAL OF RECTUM	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45110	REMOVAL OF RECTUM	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4510F	PREV CARDREHAB QUALCARDEVENT	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45100	BIOPSY OF RECTUM	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45020	DRAINAGE OF RECTAL ABSCESS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4500F	REF TO OUTPT CARD REHAB PROG	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45005	DRAINAGE OF RECTAL ABSCESS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45000	DRAINAGE OF PELVIC ABSCESS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44970	LAPAROSCOPY APPENDECTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44960	APPENDECTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44955	APPENDECTOMY ADD-ON	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44950	APPENDECTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	44900	DRAIN APPENDIX ABSCESS OPEN	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44850	REPAIR OF MESENTERY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44820	EXCISION OF MESENTERY LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4481F	PT RCVNG ACE/ARB BLKER LT 3MOS	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4480F	PT RCVNG ACE/ARB B-BLOCKERTX	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44800	EXCISION OF BOWEL POUCH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44799	UNLISTED PX SMALL INTESTINE	SURGERY - DIGESTIVE SYSTEM	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	44721	PREP DONOR INTESTINE/ARTERY	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	44720	PREP DONOR INTESTINE/VENOUS	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	44715	PREPARE DONOR INTESTINE	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	4470F	ICD COUNSELING PROVIDED	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44701	INTRAOP COLON LAVAGE ADD-ON	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44700	SUSPEND BOWEL W/PROSTHESIS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44680	SURGICAL REVISION INTESTINE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44661	REPAIR BOWEL-BLADDER FISTULA	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44660	REPAIR BOWEL-BLADDER FISTULA	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	44650	REPAIR BOWEL FISTULA	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44640	REPAIR BOWEL-SKIN FISTULA	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44626	REPAIR BOWEL OPENING	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44625	REPAIR BOWEL OPENING	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44620	REPAIR BOWEL OPENING	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44615	INTESTINAL STRICTUROPLASTY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44605	REPAIR OF BOWEL LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44604	SUTURE LARGE INTESTINE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44603	SUTURE SMALL INTESTINE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44602	SUTURE SMALL INTESTINE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4450F	SELF-CARE ED PROVIDED TO PT	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44500	INTRO GASTROINTESTINAL TUBE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44408	COLONOSCOPY W/DECOMPRESSION	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	44407	COLONOSCOPY W/NDL ASPIR/BX	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	44406	COLONOSCOPY W/ULTRASOUND	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	44405	COLONOSCOPY W/DILATION	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2010	01/01/2015			

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MMAI-Medicare/Medicaid	44404	COLONOSCOPY W/INJECTION	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	44403	COLONOSCOPY W/RESECTION	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	44402	COLONOSCOPY W/STENT PLCMT	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	44401	COLONOSCOPY WITH ABLATION	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	44394	COLONOSCOPY W/SNARE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44392	COLONOSCOPY & POLYPECTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44391	COLONOSCOPY FOR BLEEDING	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44390	COLONOSCOPY FOR FOREIGN BODY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44389	COLONOSCOPY WITH BIOPSY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44388	COLONOSCOPY THRU STOMA SPX	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44386	ENDOSCOPY BOWEL POUCH/BIOP	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44385	ENDOSCOPY OF BOWEL POUCH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44384	SMALL BOWEL ENDOSCOPY	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	44382	SMALL BOWEL ENDOSCOPY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44381	SMALL BOWEL ENDOSCOPY BR/WA	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	44380	SMALL BOWEL ENDOSCOPY BR/WA	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	44379	S BOWEL ENDOSCOPE W/STENT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44378	SMALL BOWEL ENDOSCOPY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44377	SMALL BOWEL ENDOSCOPY/BIOPSY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44376	SMALL BOWEL ENDOSCOPY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44373	SMALL BOWEL ENDOSCOPY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44372	SMALL BOWEL ENDOSCOPY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44370	SMALL BOWEL ENDOSCOPY/STENT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44369	SMALL BOWEL ENDOSCOPY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44366	SMALL BOWEL ENDOSCOPY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44365	SMALL BOWEL ENDOSCOPY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44364	SMALL BOWEL ENDOSCOPY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44363	SMALL BOWEL ENDOSCOPY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44361	SMALL BOWEL ENDOSCOPY/BIOPSY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44360	SMALL BOWEL ENDOSCOPY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44346	REVISION OF COLOSTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44345	REVISION OF COLOSTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	44340	REVISION OF COLOSTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44322	COLOSTOMY WITH BIOPSIES	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44320	COLOSTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44316	DEVISE BOWEL POUCH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44314	REVISION OF ILEOSTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44312	REVISION OF ILEOSTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44310	ILEOSTOMY/JEJUNOSTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44300	OPEN BOWEL TO SKIN	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44227	LAP CLOSE ENTEROSTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44213	LAP MOBIL SPLENIC FL ADD-ON	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44212	LAPARO TOTAL PROCTOCOLECTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44211	LAP COLECTOMY W/PROCTECTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44210	LAPARO TOTAL PROCTOCOLECTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44208	L COLECTOMY/COLOPROCTOSTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44207	L COLECTOMY/COLOPROCTOSTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44206	LAP PART COLECTOMY W/STOMA	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	44205	LAP COLECTOMY PART W/ILEUM	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44204	LAPARO PARTIAL COLECTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44203	LAP RESECT S/INTESTINE ADDL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44202	LAP ENTERECTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44188	LAP COLOSTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44187	LAP ILEO/JEJUNO-STOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44186	LAP JEJUNOSTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44180	LAP ENTEROLYSIS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44160	REMOVAL OF COLON	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44158	COLECTOMY W/NEO-RECTUM POUCH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44157	COLECTOMY W/ILEOANAL ANAST	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44156	REMOVAL OF COLON/ILEOSTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44155	REMOVAL OF COLON/ILEOSTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44151	REMOVAL OF COLON/ILEOSTOMY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44150	REMOVAL OF COLON	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44147	PARTIAL REMOVAL OF COLON	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	44146	PARTIAL REMOVAL OF COLON	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44145	PARTIAL REMOVAL OF COLON	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44144	PARTIAL REMOVAL OF COLON	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44143	PARTIAL REMOVAL OF COLON	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44141	PARTIAL REMOVAL OF COLON	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44140	PARTIAL REMOVAL OF COLON	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44139	MOBILIZATION OF COLON	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44137	REMOVE INTESTINAL ALLOGRAFT	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	44136	INTESTINE TRANSPLANT LIVE	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	44135	INTESTINE TRANSPLNT CADAVER	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	44133	ENTERECTOMY LIVE DONOR	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	44132	ENTERECTOMY CADAVER DONOR	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	44130	BOWEL TO BOWEL FUSION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44128	ENTERECTOMY CONG ADD-ON	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44127	ENTERECTOMY W/TAPER CONG	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44126	ENTERECTOMY W/O TAPER CONG	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	44125	REMOVAL OF SMALL INTESTINE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44121	REMOVAL OF SMALL INTESTINE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44120	REMOVAL OF SMALL INTESTINE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44111	EXCISION OF BOWEL LESION(S)	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44110	EXCISE INTESTINE LESION(S)	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44100	BIOPSY OF BOWEL	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	44055	CORRECT MALROTATION OF BOWEL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44050	REDUCE BOWEL OBSTRUCTION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44025	INCISION OF LARGE BOWEL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44021	DECOMPRESS SMALL BOWEL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44020	EXPLORE SMALL INTESTINE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44015	INSERT NEEDLE CATH BOWEL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44010	INCISION OF SMALL BOWEL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4400F	REHAB THXPY OPTIONS W/PT	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44005	FREEING OF BOWEL ADHESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43888	CHANGE GASTRIC PORT OPEN	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	43887	REMOVE GASTRIC PORT OPEN	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	43886	REVISE GASTRIC PORT OPEN	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	43882	REVISE/REMOVE ELECTRD ANTRUM	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	43880	REPAIR STOMACH-BOWEL FISTULA	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43870	REPAIR STOMACH OPENING	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43865	REVISE STOMACH-BOWEL FUSION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43860	REVISE STOMACH-BOWEL FUSION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43848	REVISION GASTROPLASTY	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	43847	GASTRIC BYPASS INCL SMALL I	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	43846	GASTRIC BYPASS FOR OBESITY	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	43845	GASTROPLASTY DUODENAL SWITCH	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	43843	GASTROPLASTY W/O V-BAND	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	43842	V-BAND GASTROPLASTY	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	43840	REPAIR OF STOMACH LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43775	LAP SLEEVE GASTRECTOMY	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	43774	LAP RMVL GASTR ADJ ALL PARTS	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	43773	LAP REPLACE GASTR ADJ DEVICE	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	43772	LAP RMVL GASTR ADJ DEVICE	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	43771	LAP REVISE GASTR ADJ DEVICE	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	43770	LAP PLACE GASTR ADJ DEVICE	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	43763	RPLC GTUBE REVJ GSTRST TRC	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	43762	RPLC GTUBE NO REVJ TRC	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	43761	REPOSITION GASTROSTOMY TUBE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43757	DX DUOD INTUB W/ASP SPECS	SURGERY - DIGESTIVE SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	43756	DX DUOD INTUB W/ASP SPEC	SURGERY - DIGESTIVE SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	43755	DX GASTR INTUB W/ASP SPECS	SURGERY - DIGESTIVE SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	43754	DX GASTR INTUB W/ASP SPEC	SURGERY - DIGESTIVE SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	43753	TX GASTRO INTUB W/ASP	SURGERY - DIGESTIVE SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	43752	NASAL/OROGASTRIC W/TUBE PLMT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43653	LAPAROSCOPY GASTROSTOMY	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	43652	LAPAROSCOPY VAGUS NERVE	SURGERY - DIGESTIVE SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	43651	LAPAROSCOPY VAGUS NERVE	SURGERY - DIGESTIVE SYSTEM	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	43648	LAP REVISE/REMV ELTRD ANTRUM	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	43647	LAP IMPL ELECTRODE ANTRUM	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	43645	LAP GASTR BYPASS INCL SMLL I	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	43644	LAP GASTRIC BYPASS/ROUX-EN-Y	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	43641	VAGOTOMY & PYLORUS REPAIR	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43640	VAGOTOMY & PYLORUS REPAIR	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43635	REMOVAL OF STOMACH PARTIAL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43634	REMOVAL OF STOMACH PARTIAL	SURGERY - DIGESTIVE SYSTEM	YES	02/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	43633	REMOVAL OF STOMACH PARTIAL	SURGERY - DIGESTIVE SYSTEM	YES	02/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	43632	REMOVAL OF STOMACH PARTIAL	SURGERY - DIGESTIVE SYSTEM	YES	02/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	43631	REMOVAL OF STOMACH PARTIAL	SURGERY - DIGESTIVE SYSTEM	YES	02/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	43622	REMOVAL OF STOMACH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43621	REMOVAL OF STOMACH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43620	REMOVAL OF STOMACH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43611	EXCISION OF STOMACH LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43610	EXCISION OF STOMACH LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	43605	BIOPSY OF STOMACH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43520	INCISION OF PYLORIC MUSCLE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43510	SURGICAL OPENING OF STOMACH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4350F	CNSLNG PROVIDED SYMP MNGMNT	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43502	SURGICAL REPAIR OF STOMACH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43501	SURGICAL REPAIR OF STOMACH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43500	SURGICAL OPENING OF STOMACH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43496	FREE JEJUNUM FLAP MICROVASC	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43460	PRESSURE TREATMENT ESOPHAGUS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43453	DILATE ESOPHAGUS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43450	DILATE ESOPHAGUS 1/MULT PASS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43425	REPAIR ESOPHAGUS OPENING	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43420	REPAIR ESOPHAGUS OPENING	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43415	REPAIR ESOPHAGUS WOUND	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43410	REPAIR ESOPHAGUS WOUND	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4340F	CNSLNG CHLDBRNG WOMEN EPI	CATEGORY II CODES	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	43405	LIGATE/STAPLE ESOPHAGUS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43400	LIGATE ESOPHAGUS VEINS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43361	GASTROINTESTINAL REPAIR	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43360	GASTROINTESTINAL REPAIR	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43352	SURGICAL OPENING ESOPHAGUS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43351	SURGICAL OPENING ESOPHAGUS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43341	FUSE ESOPHAGUS & INTESTINE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43340	FUSE ESOPHAGUS & INTESTINE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43338	ESOPH LENGTHENING	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	43337	THORABD DIAPHR HERN REPAIR	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	43336	THORABD DIAPHR HERN REPAIR	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	43335	TRANSTHOR DIAPHRAG HERN RPR	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	43334	TRANSTHOR DIAPHRAG HERN RPR	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	43333	TRANSAB ESOPH HIAT HERN RPR	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	43332	TRANSAB ESOPH HIAT HERN RPR	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	43331	ESOPHAGOMYOTOMY THORACIC	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	43330	ESOPHAGOMYOTOMY ABDOMINAL	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	43328	ESOPH FUNDOPLASTY THOR	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	43327	ESOPH FUNDOPLASTY LAP	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	43325	REVISE ESOPHAGUS & STOMACH	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	43320	FUSE ESOPHAGUS & STOMACH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43314	TRACHEO-ESOPHAGOPLASTY CONG	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43313	ESOPHAGOPLASTY CONGENITAL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43312	REPAIR ESOPHAGUS AND FISTULA	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43310	REPAIR OF ESOPHAGUS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4330F	CNSLNG EPI SPEC SFTY ISSUES	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43305	REPAIR ESOPHAGUS AND FISTULA	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43300	REPAIR OF ESOPHAGUS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4328F	PT ASKED RE SLEEP DISTURB	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43288	ESPHG THRSC MOBLJ	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	43287	ESPHG DSTL 2/3 W/LAPS MOBLJ	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	43286	ESPHG TOT W/LAPS MOBLJ	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2018	01/01/2018			

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MMAI-Medicare/Medicaid	43285	RMVL ESOPHGL SPHNCTR DEV	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	43284	LAPS ESOPHGL SPHNCTR AGMNTJ	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	43283	LAP ESOPH LENGTHENING	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	43282	LAP PARAESOPH HER RPR W/MESH	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	43281	LAP PARAESOPHAG HERN REPAIR	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	43280	LAPAROSCOPY FUNDOPLASTY	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	43279	LAP MYOTOMY HELLER	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	43278	ERCP LESION ABLATE W/DILATE	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	43277	ERCP EA DUCT/AMPULLA DILATE	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	43276	ERCP STENT EXCHANGE W/DILATE	2010 Code Set	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	43275	ERCP REMOVE FORGN BODY DUCT	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	43274	ERCP DUCT STENT PLACEMENT	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	43273	ENDOSCOPIC PANCREATOSCOPY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43270	EGD LESION ABLATION	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	4326F	PT ASKED RE SYMP AUTO DYSFXN	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43266	EGD ENDOSCOPIC STENT PLACE	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2014	01/01/2014			

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MMAI-Medicare/Medicaid	43265	ERCP LITHOTRIPSY CALCULI	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43264	ERCP REMOVE DUCT CALCULI	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43263	ERCP SPHINCTER PRESSURE MEAS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43262	ENDO CHOLANGIOPANCREATOGRAPH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43261	ENDO CHOLANGIOPANCREATOGRAPH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43260	ERCP W/SPECIMEN COLLECTION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4325F	MED TXMNT OPTIONS RVWD W/PT	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43259	EGD US EXAM DUODENUM/JEJUNUM	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43257	EGD W/THRML TXMNT GERD	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43255	EGD CONTROL BLEEDING ANY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43254	EGD ENDO MUCOSAL RESECTION	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	43253	EGD US TRANSMURAL INJXN/MARK	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	43252	EGD OPTICAL ENDOMICROSCOPY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43251	EGD REMOVE LESION SNARE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43250	EGD CAUTERY TUMOR POLYP	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4324F	PT QUERIED PRKNS COMPLIC	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	43249	ESOPH EGD DILATION LT 30 MM	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43248	EGD GUIDE WIRE INSERTION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43247	EGD REMOVE FOREIGN BODY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43246	EGD PLACE GASTROSTOMY TUBE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43245	EGD DILATE STRICTURE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43244	EGD VARICES LIGATION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43243	EGD INJECTION VARICES	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43242	EGD US FINE NEEDLE BX/ASPIR	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43241	EGD TUBE/CATH INSERTION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43240	EGD W/TRANSMURAL DRAIN CYST	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43239	EGD BIOPSY SINGLE/MULTIPLE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43238	EGD US FINE NEEDLE BX/ASPIR	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43237	ENDOSCOPIC US EXAM ESOPH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43236	UPPR GI SCOPE W/SUBMUC INJ	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43235	EGD DIAGNOSTIC BRUSH WASH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43233	EGD BALLOON DIL ESOPH30 MM/GT	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2014	01/01/2014			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	43232	ESOPHAGOSCOPY W/US NEEDLE BX	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43231	ESOPHAGOSCOP ULTRASOUND EXAM	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4322F	CRGVR PROV W/ ED ADDL RSRCS	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43229	ESOPHAGOSCOPY LESION ABLATE	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	43227	ESOPHAGOSCOPY CONTROL BLEED	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43226	ESOPH ENDOSCOPY DILATION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43220	ESOPHAGOSCOPY BALLOON LT 30MM	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43217	ESOPHAGOSCOPY SNARE LES REMV	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43216	ESOPHAGOSCOPY LESION REMOVAL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43215	ESOPHAGOSCOPY FLEX REMOVE FB	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43214	ESOPHAGOSC DILATE BALLOON 30	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	43213	ESOPHAGOSCOPY RETRO BALLOON	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	43212	ESOPHAGOSCOP STENT PLACEMENT	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	43211	ESOPHAGOSCOP MUCOSAL RESECT	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	4320F	PT TALK PSYCHSOC&RX OH DPND	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43205	ESOPHAGUS ENDOSCOPY/LIGATION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	43204	ESOPH SCOPE W/SCLEROSIS INJ	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43202	ESOPHAGOSCOPY FLEX BIOPSY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43201	ESOPH SCOPE W/SUBMUCOUS INJ	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43200	ESOPHAGOSCOPY FLEXIBLE BRUSH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43198	ESOPHAGOSC FLEX TRNSN BIOPSY	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	43197	ESOPHAGOSCOPY FLEX DX BRUSH	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	43196	ESOPHAGOSCP GUIDE WIRE DILAT	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	43195	ESOPHAGOSCOPY RIGID BALLOON	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	43194	ESOPHAGOSCP RIG TRNSO REM FB	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	43193	ESOPHAGOSCP RIG TRNSO BIOPSY	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	43192	ESOPHAGOSCP RIG TRNSO INJECT	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	43191	ESOPHAGOSCOPY RIGID TRNSO DX	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	43180	ESOPHAGOSCOPY RIGID TRNSO	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	43135	REMOVAL OF ESOPHAGUS POUCH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43130	REMOVAL OF ESOPHAGUS POUCH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43124	REMOVAL OF ESOPHAGUS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	43123	PARTIAL REMOVAL OF ESOPHAGUS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43122	PARTIAL REMOVAL OF ESOPHAGUS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43121	PARTIAL REMOVAL OF ESOPHAGUS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43118	PARTIAL REMOVAL OF ESOPHAGUS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43117	PARTIAL REMOVAL OF ESOPHAGUS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43116	PARTIAL REMOVAL OF ESOPHAGUS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43113	REMOVAL OF ESOPHAGUS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43112	ESPHG TOT W/THRCM	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43108	REMOVAL OF ESOPHAGUS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43107	REMOVAL OF ESOPHAGUS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43101	EXCISION OF ESOPHAGUS LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43100	EXCISION OF ESOPHAGUS LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4306F	PT TLK PSYCH & RX OPD ADDIC	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4305F	PT ED RE FT CARE INSPCT RCVD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43020	INCISION OF ESOPHAGUS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4301F	PT NOT RCVNG WARF THXPY	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	4300F	PT RCVNG WARF THXPY	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42972	CONTROL NOSE/THROAT BLEEDING	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42971	CONTROL NOSE/THROAT BLEEDING	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42970	CONTROL NOSE/THROAT BLEEDING	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42962	CONTROL THROAT BLEEDING	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42961	CONTROL THROAT BLEEDING	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42960	CONTROL THROAT BLEEDING	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42955	SURGICAL OPENING OF THROAT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42953	REPAIR THROAT ESOPHAGUS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42950	RECONSTRUCTION OF THROAT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4293F	PT SCRND HGH-RISK SEX BEHAV	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4290F	PT SCRNED FOR INJ DRUG USE	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42900	REPAIR THROAT WOUND	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42894	REVISION OF PHARYNGEAL WALLS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42892	REVISION OF PHARYNGEAL WALLS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42870	EXCISION OF LINGUAL TONSIL	SURGERY - DIGESTIVE SYSTEM	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	42860	EXCISION OF TONSIL TAGS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42845	EXTENSIVE SURGERY OF THROAT	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	42844	EXTENSIVE SURGERY OF THROAT	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	42842	EXTENSIVE SURGERY OF THROAT	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	42836	REMOVAL OF ADENOIDS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42835	REMOVAL OF ADENOIDS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42831	REMOVAL OF ADENOIDS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42830	REMOVAL OF ADENOIDS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42826	REMOVAL OF TONSILS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42825	REMOVAL OF TONSILS	SURGERY - DIGESTIVE SYSTEM	NO	06/13/2016	06/13/2016			
MMAI-Medicare/Medicaid	42821	REMOVE TONSILS AND ADENOIDS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42820	REMOVE TONSILS AND ADENOIDS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42815	EXCISION OF NECK CYST	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42810	EXCISION OF NECK CYST	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4280F	PCP PROPHYLAX RXD 3MON LOW PCT	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42809	REMOVE PHARYNX FOREIGN BODY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	42808	EXCISE PHARYNX LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42806	BIOPSY OF UPPER NOSE/THROAT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42804	BIOPSY OF UPPER NOSE/THROAT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42800	BIOPSY OF THROAT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4279F	PCP PROPHYLAXIS RXD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4276F	POTENT ANTIVIR THXPY RXD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4274F	FLU IMMUNO ADMIND RCVD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42725	DRAINAGE OF THROAT ABSCESS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42720	DRAINAGE OF THROAT ABSCESS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4271F	PT RCVNG ANTI R-VIRAL THXPY	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4270F	PT RCVNG ANTI R-VIRAL THXPY	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42700	DRAINAGE OF TONSIL ABSCESS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4269F	APPROPOS MTHD OFFLOADING RXD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4268F	PT ED RE COMP THXPY RCVD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4267F	COMPRSSION THXPY PRESCRIBED	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4266F	NO WET-DRY DRSSINGS RX RECMD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	42665	LIGATION OF SALIVARY DUCT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42660	DILATION OF SALIVARY DUCT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4265F	WET-DRY DRESSINGS RX RECMD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42650	DILATION OF SALIVARY DUCT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4261F	TECH OTHER THAN SURFC CULTR	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4260F	WOUND SRFC CULTURETECH USED	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42600	CLOSURE OF SALIVARY FISTULA	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4256F	ANESTHE LT 60 MIN AS DOCD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4255F	ANESTH 60 MIN/GT AS DOCD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42550	INJECTION FOR SALIVARY X-RAY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42510	PAROTID DUCT DIVERSION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4250F	WRMNG 4 SURG NORMOTHERMIA	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42509	PAROTID DUCT DIVERSION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42507	PAROTID DUCT DIVERSION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42505	REPAIR SALIVARY DUCT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42500	REPAIR SALIVARY DUCT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	4248F	PT INSTR NO BD REST 4 DAYS/GT	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4245F	PT INSTR NRML ACTIVITIES	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42450	EXCISE SUBLINGUAL GLAND	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42440	EXCISE SUBMAXILLARY GLAND	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4242F	SPRVSD XRCZ BACK PN GT 12 WKS	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42426	EXCISE PAROTID GLAND/LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42425	EXCISE PAROTID GLAND/LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42420	EXCISE PAROTID GLAND/LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42415	EXCISE PAROTID GLAND/LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42410	EXCISE PAROTID GLAND/LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42409	DRAINAGE OF SALIVARY CYST	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42408	EXCISION OF SALIVARY CYST	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42405	BIOPSY OF SALIVARY GLAND	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42400	BIOPSY OF SALIVARY GLAND	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42340	REMOVAL OF SALIVARY STONE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42335	REMOVAL OF SALIVARY STONE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	42330	REMOVAL OF SALIVARY STONE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42320	DRAINAGE OF SALIVARY GLAND	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42310	DRAINAGE OF SALIVARY GLAND	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4230F	ANTICONV THXPY FOR 6 MOS/GT	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42305	DRAINAGE OF SALIVARY GLAND	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42300	DRAINAGE OF SALIVARY GLAND	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42281	INSERTION PALATE PROSTHESIS	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42280	PREPARATION PALATE MOLD	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42260	REPAIR NOSE TO LIP FISTULA	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42235	REPAIR PALATE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42227	LENGTHENING OF PALATE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42226	LENGTHENING OF PALATE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42225	RECONSTRUCT CLEFT PALATE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42220	RECONSTRUCT CLEFT PALATE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4221F	DIURETIC THXPY FOR 6 MOS/GT	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42215	RECONSTRUCT CLEFT PALATE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	42210	RECONSTRUCT CLEFT PALATE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4220F	DIGOXIN THXPY FOR 6 MOS/GT	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42205	RECONSTRUCT CLEFT PALATE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42200	RECONSTRUCT CLEFT PALATE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42182	REPAIR PALATE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42160	TREATMENT MOUTH ROOF LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42145	REPAIR PALATE PHARYNX/UVULA	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	42140	EXCISION OF UVULA	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	42120	REMOVE PALATE/LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4210F	ACE/ARB THXPY FOR MOS/GT	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42107	EXCISION LESION MOUTH ROOF	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42106	EXCISION LESION MOUTH ROOF	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42104	EXCISION LESION MOUTH ROOF	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42100	BIOPSY ROOF OF MOUTH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4201F	EXTRNL BEAM OTHER THAN PROST	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4200F	EXTERNAL BEAM TO PROST ONLY	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	42000	DRAINAGE MOUTH ROOF LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4196F	PTNOT RCVNG ANTI-RHM THXPYRA	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4195F	PT RCVNG ANTI-RHEUM THXPY RA	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4194F	PT RCV EQU GT 10MG DAILY PREDNISO	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4193F	PT RCV LT 10MG DAILY PREDNISO	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4192F	PT NOT RCVNG GLUCOCO THXPY	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4191F	APPROP ANTICONVULS TSTNG	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4190F	APPROP DIURETIC TSTNG DONE	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4189F	APPROP DIGOXIN TSTNG DONE	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4188F	APPROP ACE/ARB TSTNG DONE	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4187F	ANTI RHEUM DRUGTHXPYRXD/GVN	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4186F	NO CONT PPI OR H2RA RCVD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4185F	CONTINUOUS PPI OR H2RA RCVD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41850	TREATMENT OF GUM LESION	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	4182F	NO CONFORMAL RADN THXPY	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41827	EXCISION OF GUM LESION	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	41822	EXCISION OF GUM LESION	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	41821	EXCISION OF GUM FLAP	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	41820	EXCISION GUM EACH QUADRANT	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	4181F	CONFORMAL RADN THXPY RCVD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4180F	ADJV THXPYRXD/RCVD COLON CA	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41806	REMOVAL FOREIGN BODY JAWBONE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41805	REMOVAL FOREIGN BODY GUM	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41800	DRAINAGE OF GUM LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4179F	TAMOXIFEN/AI PRESCRIBED	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4178F	ANTID GLBLN RCVD W/IN 26WKS	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4177F	TALK PT/CRGVR RE AREDS PREV	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4176F	TALK RE UV LIGHT PT/CRGVR	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4175F	VIS 20/40/GT W/IN 90 DAYS	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4174F	COUNS POTENT GLAUC IMPCT	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4172F	PT NOT RCVNG ESA THXPY	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4171F	PT RCVNG ESA THXPY	CATEGORY II CODES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	4169F	NO PT CARE ICU/VENT IN 24HRS	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4168F	PT CARE ICU&VENT W/IN 24HRS	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4167F	HD BED TILTED 1ST DAY VENT	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4165F	3D-CRT/IMRT RECEIVED	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4164F	ADJV HRMNL THXPY RXD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4163F	PT COUNS 4 TXMNT OPT PROST	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4159F	CONTRCP TALK B/4 ANTIV TXMNT	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4158F	PT EDU RE ALCOH DRNKNG DONE	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4157F	HEP B VAC SERIES PREV RECVD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4155F	HEP A VAC SERIES PREV RECVD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4153F	COMBO PEGINTF/RIB RX	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41530	TONGUE BASE VOL REDUCTION	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	41520	RECONSTRUCTION TONGUE FOLD	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	4151F	PT NOT RECVNG ANTIV HEP C	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41512	TONGUE SUSPENSION	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	41510	TONGUE TO LIP SURGERY	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	4150F	PT RECVNG ANTIVIR TXMNT HEPC	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4149F	HEP B VAC INJXN ADMIN/RECVD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4148F	HEP A VAC INJXN ADMIN/RECVD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4145F	2+ ANTI-HYPRTNSV AGENTS TKN	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4144F	ALT LONG-TERM CNTRL MED RXD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4142F	CORTICOSTER SPARNG THRPY RXD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4140F	INHALED CORTICOSTEROIDS RXD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4136F	SYST CORTICOSTEROIDS NOT RX	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4135F	SYSTEMIC CORTICOSTEROIDS RX	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4134F	NO ANTIHIST/DECONG RX/RECOM	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4133F	ANTIHIST/DECONG RX/RECOM	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4132F	NO SYST ANTIMICROBIAL THX RX	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4131F	SYST ANTIMICROBIAL THX RX	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4130F	TOPICAL PREP RX AOE	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41252	REPAIR TONGUE LACERATION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41251	REPAIR TONGUE LACERATION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	41250	REPAIR TONGUE LACERATION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4124F	ANTIBIOT NOT RXD/GIVEN	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4120F	ANTIBIOT RXD/GIVEN	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4115F	BETA BLCKR ADMIN W/IN 24 HRS	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41155	TONGUE JAW & NECK SURGERY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41153	TONGUE MOUTH NECK SURGERY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41150	TONGUE MOUTH JAW SURGERY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41145	TONGUE REMOVAL NECK SURGERY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41140	REMOVAL OF TONGUE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41135	TONGUE AND NECK SURGERY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41130	PARTIAL REMOVAL OF TONGUE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41120	PARTIAL REMOVAL OF TONGUE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41116	EXCISION OF MOUTH LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41115	EXCISION OF TONGUE FOLD	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	41114	EXCISION OF TONGUE LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41113	EXCISION OF TONGUE LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	41112	EXCISION OF TONGUE LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41110	EXCISION OF TONGUE LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4110F	INT MAM ART USED FOR CABG	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41108	BIOPSY OF FLOOR OF MOUTH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41105	BIOPSY OF TONGUE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41100	BIOPSY OF TONGUE	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41019	PLACE NEEDLES H&N FOR RT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41018	DRAINAGE OF MOUTH LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41017	DRAINAGE OF MOUTH LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41016	DRAINAGE OF MOUTH LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41015	DRAINAGE OF MOUTH LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41010	INCISION OF TONGUE FOLD	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	4100F	BIPHOS THXPY VEIN ORD/RECVD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41009	DRAINAGE OF MOUTH LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41008	DRAINAGE OF MOUTH LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41007	DRAINAGE OF MOUTH LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	41006	DRAINAGE OF MOUTH LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41005	DRAINAGE OF MOUTH LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	41000	DRAINAGE OF MOUTH LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4095F	PT NOT RCVNG EPO THXPY	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4086F	ASPIRIN/CLOPIDOGREL RXD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4084F	ASPIRIN RECVD W/IN 24 HRS	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40845	RECONSTRUCTION OF MOUTH	SURGERY - DIGESTIVE SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	40844	RECONSTRUCTION OF MOUTH	SURGERY - DIGESTIVE SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	40843	RECONSTRUCTION OF MOUTH	SURGERY - DIGESTIVE SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	40842	RECONSTRUCTION OF MOUTH	SURGERY - DIGESTIVE SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	40840	RECONSTRUCTION OF MOUTH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40831	REPAIR MOUTH LACERATION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40830	REPAIR MOUTH LACERATION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40820	TREATMENT OF MOUTH LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40819	EXCISE LIP OR CHEEK FOLD	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40818	EXCISE ORAL MUCOSA FOR GRAFT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	40816	EXCISION OF MOUTH LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40814	EXCISE/REPAIR MOUTH LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40812	EXCISE/REPAIR MOUTH LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40810	EXCISION OF MOUTH LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40808	BIOPSY OF MOUTH LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40806	INCISION OF LIP FOLD	SURGERY - DIGESTIVE SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	40805	REMOVAL FOREIGN BODY MOUTH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40804	REMOVAL FOREIGN BODY MOUTH	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40801	DRAINAGE OF MOUTH LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40800	DRAINAGE OF MOUTH LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4079F	DOC REHAB SVCS CONSIDERED	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4077F	DOC T-PA ADMIN CONSIDERED	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40761	REPAIR CLEFT LIP/NASAL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4075F	ANTICOAG THX RX AT DISCHRG	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4073F	ORAL ANTIPLAT THX RX DISCHRG	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40720	REPAIR CLEFT LIP/NASAL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	4070F	DVT PROPHYLX RECVD DAY 2	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40702	REPAIR CLEFT LIP/NASAL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40701	REPAIR CLEFT LIP/NASAL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40700	REPAIR CLEFT LIP/NASAL	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4069F	VTE PROPHYLAXIS RCVD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4067F	PT REFERRAL FOR ECT DOCD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4066F	ECT PROVIDED	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4065F	ANTIPSYCHOTIC RX	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4064F	ANTIDEPRESSANT RX	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4063F	ANTIDEPRES RXTHXPY NOT RXD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4062F	PT REFERRAL PSYCH DOCD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4060F	PSYCH SVCS PROVIDED	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4058F	PED GASTRO ED GIVEN CAREGVR	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4056F	APPROP ORAL REHYD RECOMMD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4055F	PT RCVNG PERITON DIALYSIS	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4053F	HEMODIALYSIS VIA AV GRAFT	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	40530	PARTIAL REMOVAL OF LIP	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4052F	HEMODIALYSIS VIA AV FISTULA	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40527	RECONSTRUCT LIP WITH FLAP	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40525	RECONSTRUCT LIP WITH FLAP	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40520	PARTIAL EXCISION OF LIP	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4051F	REFERRED FOR AN AV FISTULA	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40510	PARTIAL EXCISION OF LIP	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4050F	HT CARE PLAN DOC	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40500	PARTIAL EXCISION OF LIP	SURGERY - DIGESTIVE SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	4049F	DOC ORDER GIVEN STOP ANTIBIO	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	40490	BIOPSY OF LIP	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4048F	DOC ANTIBIO GIVEN B/4 SURG	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4047F	DOC ANTIBIO GIVEN B/4 SURG	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4046F	DOC ANTIBIO GIVEN B/4 SURG	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4045F	EMPIRIC ANTIBIOTIC RX	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4044F	DOC ORDER GIVEN VTE PROPHYLX	CATEGORY II CODES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	4043F	DOC ORDER GIVEN STOP ANTIBIO	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4042F	DOC ANTIBIO NOT GIVEN	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4041F	DOC ORDER CEFAZOLIN/CEFUROX	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4040F	PNEUMOC VAC/ADMIN/RCVD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4037F	INFLUENZA IMM ORDER/ADMIN	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4035F	INFLUENZA IMM REC	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4033F	PULMONARY REHAB REC	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4030F	OXYGEN THERAPY RX	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4025F	INHALED BRONCHODILATOR RX	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4019F	DOC RECPT COUNSL VIT D/CALC+	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4018F	THERAPY EXERCISE JOINT RX	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4017F	GI PROPHYLAXIS FOR NSAID RX	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4016F	ANTI-INFLM/ANLGSC AGENT RX	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4015F	PERSIST ASTHMA MEDICINE CTRL	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4014F	WRITTEN DISCHARGE INSTR PRVD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4013F	STATIN THERAPY/CURRENTLY TKN	CATEGORY II CODES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	4012F	WARFARIN THERAPY RX	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4011F	ORAL ANTIPLATELET THERAPY RX	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4010F	ACE/ARB THERAPY RXD/TAKEN	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4008F	BETA-BLOCKER THERAPY RXD/TKN	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4005F	PHARM THX FOR OP RXD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4004F	PT TOBACCO SCREEN RCVD TLK	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4003F	PT ED WRITE/ORAL PTS W/ HF	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4001F	TOBACCO USE TXMNT PHARMACOL	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4000F	TOBACCO USE TXMNT COUNSELING	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	39561	RESECT DIAPHRAGM COMPLEX	SURGERY - MEDIASTINUM AND DIAP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	39560	RESECT DIAPHRAGM SIMPLE	SURGERY - MEDIASTINUM AND DIAP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	39545	REVISION OF DIAPHRAGM	SURGERY - MEDIASTINUM AND DIAP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	39541	REPAIR OF DIAPHRAGM HERNIA	SURGERY - MEDIASTINUM AND DIAP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	39540	REPAIR OF DIAPHRAGM HERNIA	SURGERY - MEDIASTINUM AND DIAP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	39503	REPAIR OF DIAPHRAGM HERNIA	SURGERY - MEDIASTINUM AND DIAP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	39501	REPAIR DIAPHRAGM LACERATION	SURGERY - MEDIASTINUM AND DIAP	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	39220	RESECT MEDIASTINAL TUMOR	SURGERY - MEDIASTINUM AND DIAP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	39200	RESECT MEDIASTINAL CYST	SURGERY - MEDIASTINUM AND DIAP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	39010	EXPLORATION OF CHEST	SURGERY - MEDIASTINUM AND DIAP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	39000	EXPLORATION OF CHEST	SURGERY - MEDIASTINUM AND DIAP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38900	IO MAP OF SENT LYMPH NODE	SURGERY - CARDIOVASCULAR SYSTE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	38794	ACCESS THORACIC LYMPH DUCT	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38792	RA TRACER ID OF SENTINL NODE	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38790	INJECT FOR LYMPHATIC X-RAY	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38780	REMOVE ABDOMEN LYMPH NODES	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38770	REMOVE PELVIS LYMPH NODES	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38765	REMOVE GROIN LYMPH NODES	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38760	REMOVE GROIN LYMPH NODES	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38747	REMOVE ABDOMINAL LYMPH NODES	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38746	REMOVE THORACIC LYMPH NODES	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38745	REMOVE ARMPIT LYMPH NODES	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38740	REMOVE ARMPIT LYMPH NODES	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	38724	REMOVAL OF LYMPH NODES NECK	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38720	REMOVAL OF LYMPH NODES NECK	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38700	REMOVAL OF LYMPH NODES NECK	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38573	LAPS PELVIC LYMPHADEC	SURGERY - HEMIC AND LYMPHATIC	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	38572	LAPAROSCOPY LYMPHADENECTOMY	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38571	LAPAROSCOPY LYMPHADENECTOMY	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38570	LAPAROSCOPY LYMPH NODE BIOP	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38564	REMOVAL ABDOMEN LYMPH NODES	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38562	REMOVAL PELVIC LYMPH NODES	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38555	REMOVAL NECK/ARMPIT LESION	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38550	REMOVAL NECK/ARMPIT LESION	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38542	EXPLORE DEEP NODE(S) NECK	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38531	OPEN BX/EXC INGUINOFEM NODES	SURGERY - HEMIC AND LYMPHATIC	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	38530	BIOPSY/REMOVAL LYMPH NODES	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38525	BIOPSY/REMOVAL LYMPH NODES	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38520	BIOPSY/REMOVAL LYMPH NODES	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	38510	BIOPSY/REMOVAL LYMPH NODES	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38505	NEEDLE BIOPSY LYMPH NODES	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38500	BIOPSY/REMOVAL LYMPH NODES	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38382	THORACIC DUCT PROCEDURE	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38381	THORACIC DUCT PROCEDURE	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38380	THORACIC DUCT PROCEDURE	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38308	INCISION OF LYMPH CHANNELS	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38305	DRAINAGE LYMPH NODE LESION	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38300	DRAINAGE LYMPH NODE LESION	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38232	BONE MARROW HARVEST AUTOLOG	SURGERY - CARDIOVASCULAR SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	38230	BONE MARROW HARVEST ALLOGEN	SURGERY - HEMIC AND LYMPHATIC	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	38222	DX BONE MARROW BX & ASPIR	SURGERY - HEMIC AND LYMPHATIC	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	38221	DX BONE MARROW BIOPSIES	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38220	DX BONE MARROW ASPIRATIONS	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38215	HARVEST STEM CELL CONCENTRTE	SURGERY - HEMIC AND LYMPHATIC	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	38214	VOLUME DEPLETE OF HARVEST	SURGERY - HEMIC AND LYMPHATIC	NON-COV	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	38213	PLATELET DEPLETE OF HARVEST	SURGERY - HEMIC AND LYMPHATIC	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	38212	RBC DEPLETION OF HARVEST	SURGERY - HEMIC AND LYMPHATIC	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	38211	TUMOR CELL DEPLETE OF HARVST	SURGERY - HEMIC AND LYMPHATIC	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	38210	T-CELL DEPLETION OF HARVEST	SURGERY - HEMIC AND LYMPHATIC	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	38209	WASH HARVEST STEM CELLS	SURGERY - HEMIC AND LYMPHATIC	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	38208	THAW PRESERVED STEM CELLS	SURGERY - HEMIC AND LYMPHATIC	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	38207	CRYOPRESERVE STEM CELLS	SURGERY - HEMIC AND LYMPHATIC	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	38206	HARVEST AUTO STEM CELLS	SURGERY - HEMIC AND LYMPHATIC	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	38204	BL DONOR SEARCH MANAGEMENT	SURGERY - HEMIC AND LYMPHATIC	NON-COV	12/01/2013	12/31/2078		According to the current HFS Fee Schedule, the CPT 38204 (for unrelated stem cell donor search) is only covered for 09-Qualified Medicare Beneficiary (QMB)/MMAI business only. (5/2/16)	
MMAI-Medicare/Medicaid	38200	INJECTION FOR SPLEEN X-RAY	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38120	LAPAROSCOPY SPLENECTOMY	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38115	REPAIR OF RUPTURED SPLEEN	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38102	REMOVAL OF SPLEEN TOTAL	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38101	REMOVAL OF SPLEEN PARTIAL	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	38100	REMOVAL OF SPLEEN TOTAL	SURGERY - HEMIC AND LYMPHATIC	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	37790	PENILE VENOUS OCCLUSION	SURGERY - CARDIOVASCULAR SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	37788	REVASCULARIZATION PENIS	SURGERY - CARDIOVASCULAR SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	37785	LIGATE/DIVIDE/EXCISE VEIN	SURGERY - CARDIOVASCULAR SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	37780	REVISION OF LEG VEIN	SURGERY - CARDIOVASCULAR SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	3776F	ADENOMA NOT DETECT SCREENING	CATEGORY II CODES	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	37766	PHLEB VEINS - EXTREM 20+	SURGERY - CARDIOVASCULAR SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	37765	STAB PHLEB VEINS XTR 10-20	SURGERY - CARDIOVASCULAR SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	37761	LIGATE LEG VEINS OPEN	SURGERY - CARDIOVASCULAR SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	3775F	ADENOMA DETECTED SCREENING	CATEGORY II CODES	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	37619	LIGATION OF INF VENA CAVA	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3760F	PT W/DYSPHAG/WT LOSS/NUTR	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3758F	PT REF PULM FX TEST/PEAKFLOW	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3757F	PT W/O PSEUDOBULBAFFECT/ALS	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3755F	COG&BEHAV IMPRMNT SCRNG DONE	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3753F	PT HAS SYMP&SIGNS NEUROPATHY	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3752F	NO ELECTRODIAG POLYNEURO 6MN	CATEGORY II CODES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	3751F	ELECTRODIAG POLYNEURO 6 MN	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37500	ENDOSCOPY LIGATE PERF VEINS	SURGERY - CARDIOVASCULAR SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	3725F	SCREEN DEPRESSION PERFORMED	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37249	TRLUML BALO ANGIOP ADDL VEIN	SURGERY - CARDIOVASCULAR	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	37248	TRLUML BALO ANGIOP 1ST VEIN	SURGERY - CARDIOVASCULAR SYSTE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	37247	TRLUML BALO ANGIOP ADDL ART	SURGERY - CARDIOVASCULAR	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	37246	TRLUML BALO ANGIOP 1ST ART	2010 Code Set	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	37244	VASC EMBOLIZE/OCCLUDE BLEED	SURGERY - CARDIOVASCULAR	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	37243	VASC EMBOLIZE/OCCLUDE ORGAN	SURGERY - CARDIOVASCULAR	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	37242	VASC EMBOLIZE/OCCLUDE ARTERY	2010 Code Set	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	37241	VASC EMBOLIZE/OCCLUDE VENOUS	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	37239	OPEN/PERQ PLACE STENT EA ADD	2010 Code Set	NO	10/01/2017	10/01/2017			
MMAI-Medicare/Medicaid	37238	OPEN/PERQ PLACE STENT SAME	SURGERY - CARDIOVASCULAR	NO	10/01/2017	10/01/2017			
MMAI-Medicare/Medicaid	37237	OPEN/PERQ PLACE STENT EA ADD	2010 Code Set	NO	10/01/2017	10/01/2017			
MMAI-Medicare/Medicaid	37236	OPEN/PERQ PLACE STENT 1ST	SURGERY - CARDIOVASCULAR SYSTE	NO	10/01/2017	10/01/2017			
MMAI-Medicare/Medicaid	37235	TIB/PER REVASC STNT & ATHER	SURGERY - CARDIOVASCULAR SYSTE	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	37234	REVSC OPN/PRQ TIB/PERO STENT	SURGERY - CARDIOVASCULAR SYSTE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	37233	TIBPER REVASC W/ATHER ADD-ON	SURGERY - CARDIOVASCULAR SYSTE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	37232	TIB/PER REVASC ADD-ON	SURGERY - CARDIOVASCULAR SYSTE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	37231	TIB/PER REVASC STENT & ATHER	SURGERY - CARDIOVASCULAR SYSTE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	37230	TIB/PER REVASC W/STENT	SURGERY - CARDIOVASCULAR SYSTE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	37229	TIB/PER REVASC W/ATHER	SURGERY - CARDIOVASCULAR SYSTE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	37228	TIB/PER REVASC W/TLA	SURGERY - CARDIOVASCULAR SYSTE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	37227	FEM/POPL REVASC STNT & ATHER	SURGERY - CARDIOVASCULAR SYSTE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	37226	FEM/POPL REVASC W/STENT	SURGERY - CARDIOVASCULAR SYSTE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	37225	FEM/POPL REVAS W/ATHER	SURGERY - CARDIOVASCULAR SYSTE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	37224	FEM/POPL REVAS W/TLA	SURGERY - CARDIOVASCULAR SYSTE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	37223	ILIAC REVASC W/STENT ADD-ON	SURGERY - CARDIOVASCULAR SYSTE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	37222	ILIAC REVASC ADD-ON	SURGERY - CARDIOVASCULAR SYSTE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	37221	ILIAC REVASC W/STENT	SURGERY - CARDIOVASCULAR SYSTE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	37220	ILIAC REVASC	SURGERY - CARDIOVASCULAR SYSTE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	37218	STENT PLACEMT ANTE CAROTID	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			

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MMAI-Medicare/Medicaid	37217	STENT PLACEMT RETRO CAROTID	SURGERY - CARDIOVASCULAR	NO	10/01/2017	10/01/2017			
MMAI-Medicare/Medicaid	37216	TRANSCATH STENT CCA W/O EPS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37215	TRANSCATH STENT CCA W/EPS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3720F	COGNIT IMPAIRMENT ASSESSED	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37200	TRANSCATHETER BIOPSY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37195	THROMBOLYTIC THERAPY STROKE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37193	REM ENDOVAS VENA CAVA FILTER	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37192	REDO ENDOVAS VENA CAVA FILTR	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37191	INS ENDOVAS VENA CAVA FILTR	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37188	VEN MECHNL THRMBC REPEAT TX	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37187	VENOUS MECH THROMBECTOMY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37186	SEC ART THROMBECTOMY ADD-ON	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37185	PRIM ART M-THRMBC SBSQ VSL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37184	PRIM ART M-THRMBC 1ST VSL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37182	INSERT HEPATIC SHUNT (TIPS)	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37181	SPLICE SPLEEN/KIDNEY VEINS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	37180	REVISION OF CIRCULATION	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37160	REVISION OF CIRCULATION	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37145	REVISION OF CIRCULATION	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37140	REVISION OF CIRCULATION	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3700F	PSYCH DISORDERS ASSESSED	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36909	DIALYSIS CIRCUIT EMBOLJ	CATEGORY II CODES	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	36908	STENT PLMT CTR DIALYSIS SEG	SURGERY - CARDIOVASCULAR SYSTE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	36907	BALO ANGIOP CTR DIALYSIS SEG	SURGERY - CARDIOVASCULAR SYSTE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	36906	THRMBC/NFS DIALYSIS CIRCUIT	SURGERY - CARDIOVASCULAR SYSTE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	36905	THRMBC/NFS DIALYSIS CIRCUIT	SURGERY - CARDIOVASCULAR SYSTE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	36904	THRMBC/NFS DIALYSIS CIRCUIT	SURGERY - CARDIOVASCULAR SYSTE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	36903	INTRO CATH DIALYSIS CIRCUIT	SURGERY - CARDIOVASCULAR SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	36902	INTRO CATH DIALYSIS CIRCUIT	SURGERY - CARDIOVASCULAR SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	36901	INTRO CATH DIALYSIS CIRCUIT	SURGERY - CARDIOVASCULAR SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	36861	CANNULA DECLOTTING	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36860	EXTERNAL CANNULA DECLOTTING	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	36838	DIST REVAS LIGATION HEMO	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36833	AV FISTULA REVISION	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36832	AV FISTULA REVISION OPEN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36831	OPEN THROMBECT AV FISTULA	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36830	ARTERY-VEIN NONAUTOGRAFT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36825	ARTERY-VEIN AUTOGRAFT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36823	INSERTION OF CANNULA(S)	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36821	AV FUSION DIRECT ANY SITE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36820	AV FUSION/FOREARM VEIN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36819	AV FUSE UPPR ARM BASILIC	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36818	AV FUSE UPPR ARM CEPHALIC	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36815	INSERTION OF CANNULA	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36810	INSERTION OF CANNULA	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36800	INSERTION OF CANNULA	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36680	INSERT NEEDLE BONE CAVITY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36660	INSERTION CATHETER ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	36640	INSERTION CATHETER ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36625	INSERTION CATHETER ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36620	INSERTION CATHETER ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36600	WITHDRAWAL OF ARTERIAL BLOOD	SURGERY - CARDIOVASCULAR SYSTE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36598	INJ W/FLUOR EVAL CV DEVICE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36597	REPOSITION VENOUS CATHETER	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36596	MECH REMOV TUNNELED CV CATH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36595	MECH REMOV TUNNELED CV CATH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36593	DECLOT VASCULAR DEVICE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36592	COLLECT BLOOD FROM PICC	SURGERY - CARDIOVASCULAR SYSTE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36591	DRAW BLOOD OFF VENOUS DEVICE	SURGERY - CARDIOVASCULAR SYSTE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36590	REMOVAL TUNNELED CV CATH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36589	REMOVAL TUNNELED CV CATH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36585	REPLACE PICVAD CATH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36584	COMPL RPLCMT PICC RS&I	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36583	REPLACE TUNNELED CV CATH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	36582	REPLACE TUNNELED CV CATH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36581	REPLACE TUNNELED CV CATH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36580	REPLACE CVAD CATH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36578	REPLACE TUNNELED CV CATH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36576	REPAIR TUNNELED CV CATH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36575	REPAIR TUNNELED CV CATH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36573	INSJ PICC RS&I 5 YR+	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	36572	INSJ PICC RS&I LT 5 YR	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	36571	INSERT PICVAD CATH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36570	INSERT PICVAD CATH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36569	INSJ PICC 5 YR+ W/O IMAGING	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36568	INSJ PICC LT 5 YR W/O IMAGING	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36566	INSERT TUNNELED CV CATH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36565	INSERT TUNNELED CV CATH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36563	INSERT TUNNELED CV CATH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36561	INSERT TUNNELED CV CATH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	36560	INSERT TUNNELED CV CATH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36558	INSERT TUNNELED CV CATH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36557	INSERT TUNNELED CV CATH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36556	INSERT NON-TUNNEL CV CATH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36555	INSERT NON-TUNNEL CV CATH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36522	PHOTOPHERESIS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36514	APHERESIS PLASMA	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36513	APHERESIS PLATELETS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36512	APHERESIS RBC	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36511	APHERESIS WBC	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36510	INSERTION OF CATHETER VEIN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3650F	EEG ORDERED RVWD REQSTD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36500	INSERTION OF CATHETER VEIN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36481	INSERTION OF CATHETER VEIN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36479	ENDOVENOUS LASER VEIN ADDON	SURGERY - CARDIOVASCULAR SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	36478	ENDOVENOUS LASER 1ST VEIN	SURGERY - CARDIOVASCULAR SYSTE	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	36476	ENDOVENOUS RF VEIN ADD-ON	SURGERY - CARDIOVASCULAR SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	36475	ENDOVENOUS RF 1ST VEIN	SURGERY - CARDIOVASCULAR SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	36474	ENDOVENOUS MCHNCHEM ADD-ON	SURGERY - CARDIOVASCULAR SYSTE	YES	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	36473	ENDOVENOUS MCHNCHEM 1ST VEIN	SURGERY - CARDIOVASCULAR SYSTE	YES	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	36471	NJX SCLRSNT MLT INCMPTNT VN	SURGERY - CARDIOVASCULAR SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	36470	NJX SCLRSNT 1 INCMPTNT VEIN	SURGERY - CARDIOVASCULAR SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	36468	NJX SCLRSNT SPIDER VEINS	SURGERY - CARDIOVASCULAR SYSTE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	36456	PRTL EXCHANGE TRANSFUSE NB	SURGERY - CARDIOVASCULAR SYSTE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	36262	REMOVAL OF INFUSION PUMP	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36261	REVISION OF INFUSION PUMP	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36260	INSERTION OF INFUSION PUMP	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36254	INS CATH REN ART 2ND+ BILAT	SURGERY - CARDIOVASCULAR SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	36253	INS CATH REN ART 2ND+ UNILAT	SURGERY - CARDIOVASCULAR SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	36252	INS CATH REN ART 1ST BILAT	SURGERY - CARDIOVASCULAR SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	36251	INS CATH REN ART 1ST UNILAT	SURGERY - CARDIOVASCULAR SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	36248	INS CATH ABD/L-EXT ART ADDL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	36247	INS CATH ABD/L-EXT ART 3RD	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36246	INS CATH ABD/L-EXT ART 2ND	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36245	INS CATH ABD/L-EXT ART 1ST	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36218	PLACE CATHETER IN ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36217	PLACE CATHETER IN ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36216	PLACE CATHETER IN ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36215	PLACE CATHETER IN ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36200	PLACE CATHETER IN AORTA	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36160	ESTABLISH ACCESS TO AORTA	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36140	INTRO NDL ICATH UPR/LXTR ART	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36100	ESTABLISH ACCESS TO ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36015	PLACE CATHETER IN ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36014	PLACE CATHETER IN ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36013	PLACE CATHETER IN ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36012	PLACE CATHETER IN VEIN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36011	PLACE CATHETER IN VEIN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	36005	INJECTION EXT VENOGRAPHY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36002	PSEUDOANEURYSM INJECTION TRT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36000	PLACE NEEDLE IN VEIN	SURGERY - CARDIOVASCULAR SYSTE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35907	EXCISION GRAFT ABDOMEN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35905	EXCISION GRAFT THORAX	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35903	EXCISION GRAFT EXTREMITY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35901	EXCISION GRAFT NECK	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35881	REVISE GRAFT W/VEIN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35879	REVISE GRAFT W/VEIN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35876	REMOVAL OF CLOT IN GRAFT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35875	REMOVAL OF CLOT IN GRAFT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35870	REPAIR VESSEL GRAFT DEFECT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35860	EXPLORE LIMB VESSELS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35840	EXPLORE ABDOMINAL VESSELS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35820	EXPLORE CHEST VESSELS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35800	EXPLORE NECK VESSELS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	35703	EXPL N/FLWD SURG LXTR ART	SURGERY-CARDIOVASCULAR SYSTEM	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	35702	EXPL N/FLWD SURG UXTR ART	SURGERY-CARDIOVASCULAR SYSTEM	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	35701	EXPL N/FLWD SURG NECK ART	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35700	REOPERATION BYPASS GRAFT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35697	REIMPLANT ARTERY EACH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35695	ART TRNSPOSJ CAROTID SUBCLAV	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35694	ART TRNSPOSJ SUBCLAV CAROTID	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35693	ART TRNSPOSJ SUBCLAVIAN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35691	ART TRNSPOSJ VERTBRL CAROTID	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35686	BYPASS GRAFT/AV FIST PATENCY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35685	BYPASS GRAFT PATENCY/PATCH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35683	COMPOSITE BYP GRFT 3/GT SEGMT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35682	COMPOSITE BYP GRFT 2 VEINS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35681	COMPOSITE BYP GRFT PROS&VEIN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35671	ART BYP POP-TIBL-PRL-OTHER	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35666	ART BYP FEM-ANT-POST TIB/PRL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	35665	ART BYP ILIOFEMORAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35663	ART BYP ILIOILIAC	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35661	ART BYP FEMORAL-FEMORAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35656	ART BYP FEMORAL-POPLITEAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35654	ART BYP AXILL-FEM-FEMORAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35650	ART BYP AXILLARY-AXILLARY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35647	ART BYP AORTOFEMORAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35646	ART BYP AORTOBIFEMORAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35645	ART BYP SUBCLAV-VERTEBRL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35642	ART BYP CAROTID-VERTEBRAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35638	ART BYP AORTOBI-ILIAC	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35637	ART BYP AORTOILIAC	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35636	ART BYP SPENORENAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35634	ART BYP ILIORENAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35633	ART BYP ILIO-MESENTERIC	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35632	ART BYP ILIO-CELIAC	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	35631	ART BYP AOR-CELIAC-MSN-RENAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35626	ART BYP AORSUBCL/CAROT/INNOM	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35623	ART BYP AXILLARY-POP-TIBIAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35621	ART BYP AXILLARY-FEMORAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35616	ART BYP SUBCLAV-AXILLARY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35612	ART BYP SUBCLAV-SUBCLAVIAN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35606	ART BYP CAROTID-SUBCLAVIAN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35601	ART BYP COMMON IPSI CAROTID	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35587	VEIN BYP POP-TIBL PERONEAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35585	VEIN BYP FEM-TIBIAL PERONEAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35583	VEIN BYP GRFT FEM-POPLITEAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35572	HARVEST FEMOROPOPLITEAL VEIN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35571	ART BYP POP-TIBL-PRL-OTHER	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35570	ART BYP TIBIAL-TIB/PERONEAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35566	ART BYP FEM-ANT-POST TIB/PRL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35565	ART BYP GRFT ILIOFEMORAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	35563	ART BYP GRFT ILIOILIAC	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35560	ART BYP GRFT AORTORENAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35558	ART BYP GRFT FEM-FEMORAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35556	ART BYP GRFT FEM-POPLITEAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35540	ART BYP GRFT AORTBIFEMORAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35539	ART BYP GRFT AORTOFEMORAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35538	ART BYP GRFT AORTOBI-ILIAC	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35537	ART BYP GRFT AORTOILIAC	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35536	ART BYP GRFT SPLENORENAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35535	ART BYP GRFT HEPATORENAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35533	ART BYP GRFT AXILL/FEM/FEM	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35531	ART BYP GRFT AORCEL/AORMESEN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35526	ART BYP GRFT AOR/CAROT/INNOM	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35525	ART BYP GRFT BRACHIAL-BRCHL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35523	ART BYP GRFT BRCHL-ULNR-RDL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35522	ART BYP GRFT AXILL-BRACHIAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	35521	ART BYP GRFT AXILL-FEMORAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35518	ART BYP GRFT AXILLARY-AXILRY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35516	ART BYP GRFT SUBCLAV-AXILARY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35515	ART BYP GRFT SUBCLAV-VERTBRL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35512	ART BYP GRFT SUBCLAV-BRCHIAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35511	ART BYP GRFT SUBCLAV-SUBCLAV	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35510	ART BYP GRFT CAROTID-BRCHIAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35509	ART BYP GRFT CONTRAL CAROTID	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35508	ART BYP GRFT CAROTID-VERTBRL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35506	ART BYP GRFT SUBCLAV-CAROTID	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35501	ART BYP GRFT IPSILAT CAROTID	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35500	HARVEST VEIN FOR BYPASS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35400	ANGIOSCOPY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35390	REOPERATION CAROTID ADD-ON	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35372	RECHANNELING OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35371	RECHANNELING OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	35363	RECHANNELING OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35361	RECHANNELING OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35355	RECHANNELING OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35351	RECHANNELING OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35341	RECHANNELING OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35331	RECHANNELING OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35321	RECHANNELING OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35311	RECHANNELING OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35306	RECHANNELING OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35305	RECHANNELING OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35304	RECHANNELING OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35303	RECHANNELING OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35302	RECHANNELING OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35301	RECHANNELING OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3520F	CDIFFICILE TESTING PERFORMED	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3517F	HBV ASSESS&RESULTS INTRP 1YR	CATEGORY II CODES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	35152	REPAIR RUPTD POPLITEAL ART	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35151	REPAIR DEFECT OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35142	REPAIR ARTERY RUPTURE THIGH	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35141	REPAIR DEFECT OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35132	REPAIR ARTERY RUPTURE GROIN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35131	REPAIR DEFECT OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35122	REPAIR ARTERY RUPTURE BELLY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35121	REPAIR DEFECT OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35112	REPAIR ARTERY RUPTURE SPLEEN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35111	REPAIR DEFECT OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35103	REPAIR ARTERY RUPTURE AORTA	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35102	REPAIR DEFECT OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35092	REPAIR ARTERY RUPTURE AORTA	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35091	REPAIR DEFECT OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35082	REPAIR ARTERY RUPTURE AORTA	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35081	REPAIR DEFECT OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	35045	REPAIR DEFECT OF ARM ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35022	REPAIR ARTERY RUPTURE CHEST	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35021	REPAIR DEFECT OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35013	REPAIR ARTERY RUPTURE ARM	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35011	REPAIR DEFECT OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35005	REPAIR DEFECT OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35002	REPAIR ARTERY RUPTURE NECK	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35001	REPAIR DEFECT OF ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3498F	CD4+ CELL GT EQU 15PCT (HIV)	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3496F	CD4+ CELL COUNT EQU GT 500 CELLS	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34848	VISC & INFRAREN ABD 4+ PROST	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	34847	VISC & INFRAREN ABD 3 PROSTH	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	34846	VISC & INFRAREN ABD 2 PROSTH	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	34845	VISC & INFRAREN ABD 1 PROSTH	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	34844	ENDOVASC VISC AORTA 4 GRAFT	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	34843	ENDOVASC VISC AORTA 3 GRAFT	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2014	01/01/2014			

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MMAI-Medicare/Medicaid	34842	ENDOVASC VISC AORTA 2 GRAFT	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	34841	ENDOVASC VISC AORTA 1 GRAFT	SURGERY - CARDIOVASCULAR	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	34839	PLNNING PT SPEC FENEST GRAFT	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	34834	OPN BRACH ART EXPOS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34833	OPN ILAC ART EXPOS CNDT CRTJ	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34832	OPEN AORTOFEMOR PROSTH REPR	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34831	OPEN AORTOILIAC PROSTH REPR	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34830	OPEN AORTIC TUBE PROSTH REPR	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34820	OPN ILIAC ART EXPOS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34813	FEMORAL ENDOVAS GRAFT ADD-ON	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34812	OPN FEM ART EXPOS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34808	ENDOVAS ILIAC A DEVICE ADDON	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34718	EVASC RPR N/A A-ILIAC NDGFT	SURGERY-CARDIOVASCULAR SYSTEM	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	34717	EVASC RPR A-ILIAC NDGFT	SURGERY-CARDIOVASCULAR SYSTEM	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	34716	OPN AX/SUBCLA ART EXPOS CNDT	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	34715	OPN AX/SUBCLA ART EXPOS	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2018	01/01/2018			

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MMAI-Medicare/Medicaid	34714	OPN FEM ART EXPOS CNDT CRTJ	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	34713	PERQ ACCESS & CLSR FEM ART	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	34712	TCAT DLVR ENHNCD FIXJ DEV	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	34711	DLYD PLMT XTN PROSTH EA ADDL	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	34710	DLYD PLMT XTN PROSTH 1ST VSL	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	34709	PLMT XTN PROSTH EVASC RPR	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	34708	EVASC RPR ILIO-ILIAC RPT	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	34707	EVASC RPR ILIO-ILIAC NDGFT	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	34706	EVASC RPR A-BIILIAC RPT	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	34705	EVAC RPR A-BIILIAC NDGFT	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	34704	EVASC RPR A-UNILAC NDGFT RPT	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	34703	EVASC RPR A-UNILAC NDGFT	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	34702	EVASC RPR A-AO NDGFT RPT	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	34701	EVASC RPR A-AO NDGFT	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	34530	LEG VEIN FUSION	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34520	CROSS-OVER VEIN GRAFT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	34510	TRANSPOSITION OF VEIN VALVE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34502	RECONSTRUCT VENA CAVA	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34501	REPAIR VALVE FEMORAL VEIN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34490	REMOVAL OF VEIN CLOT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34471	REMOVAL OF VEIN CLOT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34451	REMOVAL OF VEIN CLOT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34421	REMOVAL OF VEIN CLOT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34401	REMOVAL OF VEIN CLOT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34203	REMOVAL OF LEG ARTERY CLOT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34201	REMOVAL OF ARTERY CLOT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34151	REMOVAL OF ARTERY CLOT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34111	REMOVAL OF ARM ARTERY CLOT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34101	REMOVAL OF ARTERY CLOT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34051	REMOVAL OF ARTERY CLOT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34001	REMOVAL OF ARTERY CLOT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33989	REMOVAL OF LEFT HEART VENT	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			

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MMAI-Medicare/Medicaid	33988	INSERTION OF LEFT HEART VENT	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	33987	ARTERY EXPOS/GRAFT ARTERY	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	33986	ECMO/ECLS RMVL CTR CANNULA	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	33985	ECMO/ECLS RMVL CTR CANNULA	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	33984	ECMO/ECLS RMVL PRPH CANNULA	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	33983	REPLACE VAD INTRA W/BP	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33982	REPLACE VAD INTRA W/O BP	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33981	REPLACE VAD PUMP EXT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33980	REMOVE INTRACORPOREAL DEVICE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33979	INSERT INTRACORPOREAL DEVICE	SURGERY - CARDIOVASCULAR SYSTE	YES	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	33978	REMOVE VENTRICULAR DEVICE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33977	REMOVE VENTRICULAR DEVICE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33976	IMPLANT VENTRICULAR DEVICE	SURGERY - CARDIOVASCULAR SYSTE	YES	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	33975	IMPLANT VENTRICULAR DEVICE	SURGERY - CARDIOVASCULAR SYSTE	YES	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	33974	REMOVE INTRA-AORTIC BALLOON	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33973	INSERT BALLOON DEVICE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	33971	AORTIC CIRCULATION ASSIST	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33970	AORTIC CIRCULATION ASSIST	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33969	ECMO/ECLS RMVL PERPH CANNULA	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	33968	REMOVE AORTIC ASSIST DEVICE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33967	INSERT I-AORT PERCUT DEVICE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33966	ECMO/ECLS RMVL PRPH CANNULA	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	33965	ECMO/ECLS RMVL PERPH CANNULA	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	33964	ECMO/ECLS REPOS PERPH CNULA	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	33963	ECMO/ECLS REPOS PERPH CNULA	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	33962	ECMO/ECLS REPOS PERPH CNULA	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	3395F	QUANT NONHER2 IHC BRST CX	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33959	ECMO/ECLS REPOS PERPH CNULA	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	33958	ECMO/ECLS REPOS PERPH CNULA	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	33957	ECMO/ECLS REPOS PERPH CNULA	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	33956	ECMO/ECLS INSJ CTR CANNULA	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	33955	ECMO/ECLS INSJ CTR CANNULA	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			

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MMAI-Medicare/Medicaid	33954	ECMO/ECLS INSJ PRPH CANNULA	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	33953	ECMO/ECLS INSJ PRPH CANNULA	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	33952	ECMO/ECLS INSJ PRPH CANNULA	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	33951	ECMO/ECLS INSJ PRPH CANNULA	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	3394F	QUANT HER2 IHC EVAL BRST CX	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33949	ECMO/ECLS DAILY MGMT ARTERY	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	33948	ECMO/ECLS DAILY MGMT-VENOUS	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	33947	ECMO/ECLS INITIATION ARTERY	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	33946	ECMO/ECLS INITIATION VENOUS	SURGERY - CARDIOVASCULAR	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	33945	TRANSPLANTATION OF HEART	SURGERY - CARDIOVASCULAR SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	33944	PREPARE DONOR HEART	SURGERY - CARDIOVASCULAR SYSTE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	33940	REMOVAL OF DONOR HEART	SURGERY - CARDIOVASCULAR SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	33935	TRANSPLANTATION HEART/LUNG	SURGERY - CARDIOVASCULAR SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	33933	PREPARE DONOR HEART/LUNG	SURGERY - CARDIOVASCULAR SYSTE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	33930	REMOVAL OF DONOR HEART/LUNG	SURGERY - CARDIOVASCULAR SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	33926	REPR PUL ART UNIFOCAL W/CPB	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	33925	RPR PUL ART UNIFOCAL W/O CPB	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33924	REMOVE PULMONARY SHUNT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33922	TRANSECT PULMONARY ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33920	REPAIR PULMONARY ATRESIA	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33917	REPAIR PULMONARY ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33916	SURGERY OF GREAT VESSEL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33915	REMOVE LUNG ARTERY EMBOLI	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33910	REMOVE LUNG ARTERY EMBOLI	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33891	CAR-CAR BP GRFT/ENDOVAS TAA	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33889	ARTERY TRANSPOSE/ENDOVAS TAA	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33886	ENDOVASC PROSTH DELAYED	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33884	ENDOVASC PROSTH TAA ADD-ON	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33883	INSERT ENDOVASC PROSTH TAA	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33881	ENDOVASC TAA REPR W/O SUBCL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33880	ENDOVASC TAA REPR INCL SUBCL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33877	THORACOABDOMINAL GRAFT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	33875	THORACIC AORTIC GRAFT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33871	TRANSVRS A-ARCH GRF HYPTHRM	SURGERY-CARDIOVASCULAR SYSTEM	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	33866	AORTIC HEMIARCH GRAFT	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	33864	ASCENDING AORTIC GRAFT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33863	ASCENDING AORTIC GRAFT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33859	AS-AORT GRF F/DS OTH/THN DSJ	SURGERY-CARDIOVASCULAR SYSTEM	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	33858	AS-AORT GRF F/AORTIC DSJ	SURGERY-CARDIOVASCULAR SYSTEM	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	33800	AORTIC SUSPENSION	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33788	REVISION OF PULMONARY ARTERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33786	REPAIR ARTERIAL TRUNK	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33783	NIKAIDOH PROC W/OSTIA IMPLT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33782	NIKAIDOH PROC	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3374F	AJCC BRST CNCR STAGE 1 DOCD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33736	REVISION OF HEART CHAMBER	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33735	REVISION OF HEART CHAMBER	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33732	REPAIR HEART-VEIN DEFECT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	33730	REPAIR HEART-VEIN DEFECT(S)	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3372F	AJCC BRST CNCR STAGE 1 DOCD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33726	REPAIR PUL VENOUS STENOSIS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33724	REPAIR VENOUS ANOMALY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33720	REPAIR OF HEART DEFECT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33710	REPAIR OF HEART DEFECTS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33702	REPAIR OF HEART DEFECTS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33677	CL MULT VSD W/REM PUL BAND	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33676	CLOSE MULT VSD W/RESECTION	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33675	CLOSE MULT VSD	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33670	REPAIR OF HEART CHAMBERS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33665	REPAIR OF HEART DEFECTS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33660	REPAIR OF HEART DEFECTS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33647	REPAIR HEART SEPTUM DEFECTS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33645	REVISION OF HEART VEINS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33641	REPAIR HEART SEPTUM DEFECT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	33622	REDO COMPL CARDIAC ANOMALY	SURGERY - CARDIOVASCULAR SYSTE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	33621	TRANSTHOR CATH FOR STENT	SURGERY - CARDIOVASCULAR SYSTE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	33620	APPLY R&L PULM ART BANDS	SURGERY - CARDIOVASCULAR SYSTE	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	33619	REPAIR SINGLE VENTRICLE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33617	REPAIR SINGLE VENTRICLE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33615	REPAIR MODIFIED FONTAN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33612	REPAIR DOUBLE VENTRICLE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33611	REPAIR DOUBLE VENTRICLE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33610	REPAIR BY ENLARGEMENT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33608	REPAIR ANOMALY W/CONDUIT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33606	ANASTOMOSIS/ARTERY-AORTA	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33602	CLOSURE OF VALVE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33600	CLOSURE OF VALVE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33572	OPEN CORONARY ENDARTERECTOMY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3354F	CLIN SIG DEP SYM BY DEP TOOL	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33548	RESTORE/REMODEL VENTRICLE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	33545	REPAIR OF HEART DAMAGE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33542	REMOVAL OF HEART LESION	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3353F	MILD-MOD DEP SYMP BY DEPTOOL	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33536	CABG ARTERIAL FOUR OR MORE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33535	CABG ARTERIAL THREE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33534	CABG ARTERIAL TWO	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33533	CABG ARTERIAL SINGLE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33530	CORONARY ARTERY BYPASS/REOP	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3352F	NO SIG DEP SYMP BY DEP TOOL	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33523	CABG ART-VEIN SIX OR MORE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33522	CABG ARTERY-VEIN FIVE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33521	CABG ARTERY-VEIN FOUR	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3351F	NEG SCRN DEP SYMP BY DEPTOOL	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33519	CABG ARTERY-VEIN THREE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33518	CABG ARTERY-VEIN TWO	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33517	CABG ARTERY-VEIN SINGLE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	33516	CABG VEIN SIX OR MORE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33514	CABG VEIN FIVE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33513	CABG VEIN FOUR	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33512	CABG VEIN THREE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33511	CABG VEIN TWO	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33510	CABG VEIN SINGLE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3350F	MAMMO BX PROVEN MALIG DOCD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33508	ENDOSCOPIC VEIN HARVEST	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33507	REPAIR ART INTRAMURAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33506	REPAIR ARTERY TRANSLOCATION	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33505	REPAIR ARTERY W/TUNNEL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33504	CORONARY ARTERY GRAFT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33503	CORONARY ARTERY GRAFT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33502	CORONARY ARTERY CORRECTION	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33501	REPAIR HEART VESSEL FISTULA	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33500	REPAIR HEART VESSEL FISTULA	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	33496	REPAIR PROSTH VALVE CLOT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33478	REVISION OF HEART CHAMBER	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33476	REVISION OF HEART CHAMBER	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33474	REVISION OF PULMONARY VALVE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33468	REVISION OF TRICUSPID VALVE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33465	REPLACE TRICUSPID VALVE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33464	VALVULOPLASTY TRICUSPID	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33463	VALVULOPLASTY TRICUSPID	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33460	REVISION OF TRICUSPID VALVE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33440	RPLCMT A-VALVE TLCJ AUTOL PV	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	33430	REPLACEMENT OF MITRAL VALVE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33427	REPAIR OF MITRAL VALVE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33426	REPAIR OF MITRAL VALVE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33425	REPAIR OF MITRAL VALVE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33422	REVISION OF MITRAL VALVE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33420	REVISION OF MITRAL VALVE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	33419	REPAIR TCAT MITRAL VALVE	SURGERY - CARDIOVASCULAR	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	33418	REPAIR TCAT MITRAL VALVE	SURGERY - CARDIOVASCULAR	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	33417	REPAIR OF AORTIC VALVE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33416	REVISE VENTRICLE MUSCLE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33415	REVISION SUBVALVULAR TISSUE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33414	REPAIR OF AORTIC VALVE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33413	REPLACEMENT OF AORTIC VALVE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33412	REPLACEMENT OF AORTIC VALVE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33411	REPLACEMENT OF AORTIC VALVE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33410	REPLACEMENT AORTIC VALVE OPN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33406	REPLACEMENT AORTIC VALVE OPN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33405	REPLACEMENT AORTIC VALVE OPN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33404	PREPARE HEART-AORTA CONDUIT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33391	VALVULOPLASTY AORTIC VALVE	SURGERY - CARDIOVASCULAR SYSTE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	33390	VALVULOPLASTY AORTIC VALVE	SURGERY - CARDIOVASCULAR SYSTE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	33366	TRCATH REPLACE AORTIC VALVE	SURGERY - CARDIOVASCULAR	NO	10/01/2017	10/01/2017			

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MMAI-Medicare/Medicaid	33340	PERQ CLSR TCAT L ATR APNDGE	SURGERY - CARDIOVASCULAR SYSTE	YES	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	33335	INSERT MAJOR VESSEL GRAFT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33330	INSERT MAJOR VESSEL GRAFT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33322	REPAIR MAJOR BLOOD VESSEL (S)	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33321	REPAIR MAJOR VESSEL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33320	REPAIR MAJOR BLOOD VESSEL (S)	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33315	EXPLORATORY HEART SURGERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33310	EXPLORATORY HEART SURGERY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33305	REPAIR OF HEART WOUND	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33300	REPAIR OF HEART WOUND	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3328F	PRFRMNC DOCD 2 WKS B/4 SURG	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33286	RMVL SUBQ CAR RHYTHM MNTR	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	33285	INSJ SUBQ CAR RHYTHM MNTR	SURGERY - CARDIOVASCULAR SYSTE	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	33275	TCAT RMVL PERM LDLS PM W/IMG	SURGERY - CARDIOVASCULAR	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	33271	INSJ SUBQ IMPLTBL DFB ELCTRD	SURGERY - CARDIOVASCULAR	YES	03/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	33266	ABLATE ATRIA X10SV ENDO	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	33265	ABLATE ATRIA LMTD ENDO	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33264	RMVL & RPLCMT DFB GEN MLT LD	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33263	RMVL & RPLCMT DFB GEN 2 LEAD	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33262	RMVL& REPLC PULSE GEN 1 LEAD	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33261	ABLATE HEART DYSRHYTHM FOCUS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33259	ABLATE ATRIA W/BYPASS ADD-ON	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33258	ABLATE ATRIA X10SV ADD-ON	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33257	ABLATE ATRIA LMTD ADD-ON	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33256	ABLATE ATRIA W/BYPASS EXTEN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33255	ABLATE ATRIA W/O BYPASS EXT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33254	ABLATE ATRIA LMTD	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33251	ABLATE HEART DYSRHYTHM FOCUS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33250	ABLATE HEART DYSRHYTHM FOCUS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3324F	MRI CT SCAN ORD RVWD RQSTD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33249	INSJ/RPLCMT DEFIB W/LEAD(S)	SURGERY - CARDIOVASCULAR SYSTE	YES	03/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	33244	REMOVE ELCTRD TRANSVENOUSLY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	33243	REMOVE ELTRD/THORACOTOMY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33241	REMOVE PULSE GENERATOR	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33240	INSRT PULSE GEN W/SINGL LEAD	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3323F	CLIN NODE STGNG DOCDB/4 SURG	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33238	REMOVE ELECTRODE/THORACOTOMY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33237	REMOVE ELECTRODE/THORACOTOMY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33236	REMOVE ELECTRODE/THORACOTOMY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33235	REMOVAL PACEMAKER ELECTRODE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33234	REMOVAL OF PACEMAKER SYSTEM	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33233	REMOVAL OF PM GENERATOR	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33231	INSRT PULSE GEN W/MULT LEADS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33230	INSRT PULSE GEN W/DUAL LEADS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33229	REMV&REPLC PM GEN MULT LEADS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33228	REMV&REPLC PM GEN DUAL LEAD	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33227	REMOVE&REPLACE PM GEN SINGL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33226	REPOSITION L VENTRIC LEAD	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	33224	INSERT PACING LEAD & CONNECT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33223	RELOCATE POCKET FOR DEFIB	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33222	RELOCATION POCKET PACEMAKER	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33221	INSERT PULSE GEN MULT LEADS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33220	REPAIR LEAD PACE-DEFIB DUAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33218	REPAIR LEAD PACE-DEFIB ONE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33217	INSERT 2 ELECTRODE PM-DEFIB	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33216	INSERT 1 ELECTRODE PM-DEFIB	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33215	REPOSITION PACING-DEFIB LEAD	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33214	UPGRADE OF PACEMAKER SYSTEM	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33213	INSERT PULSE GEN DUAL LEADS	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33212	INSERT PULSE GEN SNGL LEAD	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33211	INSERT CARD ELECTRODES DUAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33210	INSERT ELECTRD/PM CATH SNGL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33208	INSRT HEART PM ATRIAL & VENT	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33207	INSERT HEART PM VENTRICULAR	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	33206	INSERT HEART PM ATRIAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33203	INSERT EPICARD ELTRD ENDO	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33202	INSERT EPICARD ELTRD OPEN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33141	HEART TMR W/OTHER PROCEDURE	SURGERY - CARDIOVASCULAR SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	33140	HEART REVASCULARIZE (TMR)	SURGERY - CARDIOVASCULAR SYSTE	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	33050	RESECT HEART SAC LESION	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33031	PARTIAL REMOVAL OF HEART SAC	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33030	PARTIAL REMOVAL OF HEART SAC	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33025	INCISION OF HEART SAC	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33020	INCISION OF HEART SAC	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33019	PERQ PRCRD DRG INSJ CATH CT	SURGERY-CARDIOVASCULAR SYSTEM	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	33018	PRCRD DRG 0-5YR OR W/ANOMLY	SURGERY-CARDIOVASCULAR SYSTEM	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	33017	PRCRD DRG 6YR+ W/O CGEN CAR	SURGERY-CARDIOVASCULAR SYSTEM	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	33016	PERICARDIOCENTESIS W/IMAGING	SURGERY-CARDIOVASCULAR SYSTEM	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	32998	ABLATE PULM TUMOR PERQ RF	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32997	TOTAL LUNG LAVAGE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	32994	ABLATE PULM TUMOR PERQ CRYBL	SURGERY - RESPIRATORY SYSTEM	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	32960	THERAPEUTIC PNEUMOTHORAX	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3294F	GRP B STREP SCREENING DOCD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32940	REVISION OF LUNG	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3293F	ABO RH BLOOD TYPING DOCD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32906	REVISE & REPAIR CHEST WALL	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32905	REVISE & REPAIR CHEST WALL	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32900	REMOVAL OF RIB(S)	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32856	PREPARE DONOR LUNG DOUBLE	SURGERY - RESPIRATORY SYSTEM	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	32855	PREPARE DONOR LUNG SINGLE	SURGERY - RESPIRATORY SYSTEM	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	32854	LUNG TRANSPLANT WITH BYPASS	SURGERY - RESPIRATORY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	32853	LUNG TRANSPLANT DOUBLE	SURGERY - RESPIRATORY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	32852	LUNG TRANSPLANT WITH BYPASS	SURGERY - RESPIRATORY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	32851	LUNG TRANSPLANT SINGLE	SURGERY - RESPIRATORY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	32850	DONOR PNEUMONECTOMY	SURGERY - RESPIRATORY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	32820	RECONSTRUCT INJURED CHEST	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	32815	CLOSE BRONCHIAL FISTULA	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32810	CLOSE CHEST AFTER DRAINAGE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32800	REPAIR LUNG HERNIA	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3267F	PATH RPRT W/ PT PN CAT ET AL	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32674	THORACOSCOPY LYMPH NODE EXC	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32673	THORACOSCOPY W/THYMUS RESECT	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32672	THORACOSCOPY FOR LVRS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32671	THORACOSCOPY PNEUMONECTOMY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32670	THORACOSCOPY BILOBECTOMY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32669	THORACOSCOPY REMOVE SEGMENT	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32668	THORACOSCOPY W/W RESECT DIAG	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32667	THORACOSCOPY W/W RESECT ADDL	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32666	THORACOSCOPY W/WEDGE RESECT	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32665	THORACOSCOP W/ESOPH MUSC EXC	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32664	THORACOSCOPY W/ TH NRV EXC	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32663	THORACOSCOPY W/LOBECTOMY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	32662	THORACOSCOPY W/MEDIAST EXC	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32661	THORACOSCOPY W/PERICARD EXC	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32659	THORACOSCOPY W/SAC DRAINAGE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32658	THORACOSCOPY W/SAC FB REMOVE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32656	THORACOSCOPY W/PLEURECTOMY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32655	THORACOSCOPY RESECT BULLAE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32654	THORACOSCOPY CONTRL BLEEDING	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32653	THORACOSCOPY REMOV FB/FIBRIN	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32652	THORACOSCOPY REM TOTL CORTEX	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32651	THORACOSCOPY REMOVE CORTEX	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32609	THORACOSCOPY W/BX PLEURA	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32608	THORACOSCOPY W/BX NODULE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32607	THORACOSCOPY W/BX INFILTRATE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32606	THORACOSCOPY W/BX MED SPACE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32604	THORACOSCOPY WBX SAC	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32601	THORACOSCOPY DIAGNOSTIC	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	32562	LYSE CHEST FIBRIN SUBQ DAY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32561	LYSE CHEST FIBRIN INIT DAY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32560	TREAT PLEURODESIS W/AGENT	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32553	INS MARK THOR FOR RT PERQ	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32552	REMOVE LUNG CATHETER	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32550	INSERT PLEURAL CATH	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32540	REMOVAL OF LUNG LESION	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32507	WEDGE RESECT OF LUNG DIAG	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32506	WEDGE RESECT OF LUNG ADD-ON	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32505	WEDGE RESECT OF LUNG INITIAL	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32504	RESECT APICAL LUNG TUM/CHEST	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32503	RESECT APICAL LUNG TUMOR	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32501	REPAIR BRONCHUS ADD-ON	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32491	LUNG VOLUME REDUCTION	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32488	COMPLETION PNEUMONECTOMY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32486	SLEEVE LOBECTOMY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	32484	SEGMENTECTOMY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32482	BILOBECTOMY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32480	PARTIAL REMOVAL OF LUNG	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32445	REMOVAL OF LUNG EXTRAPLEURAL	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32442	SLEEVE PNEUMONECTOMY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32440	REMOVE LUNG PNEUMONECTOMY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32400	NEEDLE BIOPSY CHEST LINING	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32320	FREE/REMOVE CHEST LINING	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32310	REMOVAL OF CHEST LINING	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32225	PARTIAL RELEASE OF LUNG	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32220	RELEASE OF LUNG	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32215	TREAT CHEST LINING	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32200	DRAIN OPEN LUNG LESION	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3216F	PT IMMUNITY TO HEP B DOCD	CATEGORY II CODES	NO	01/01/2008	01/01/2008			
MMAI-Medicare/Medicaid	32160	OPEN CHEST HEART MASSAGE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32151	REMOVE LUNG FOREIGN BODY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	32150	REMOVAL OF LUNG LESION(S)	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32141	REMOVE/TREAT LUNG LESIONS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32140	REMOVAL OF LUNG LESION(S)	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32124	EXPLORE CHEST FREE ADHESIONS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32120	RE-EXPLORATION OF CHEST	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32110	EXPLORE/REPAIR CHEST	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32100	EXPLORATION OF CHEST	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32098	OPEN BIOPSY OF LUNG PLEURA	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32097	OPEN WEDGE/BX LUNG NODULE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32096	OPEN WEDGE/BX LUNG INFILTR	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32036	THORACOSTOMY W/FLAP DRAINAGE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32035	THORACOSTOMY W/RIB RESECTION	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31830	REVISE WINDPIPE SCAR	SURGERY - RESPIRATORY SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	31825	REPAIR OF WINDPIPE DEFECT	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31820	CLOSURE OF WINDPIPE LESION	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31805	REPAIR OF WINDPIPE INJURY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	31800	REPAIR OF WINDPIPE INJURY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31786	REMOVE WINDPIPE LESION	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31785	REMOVE WINDPIPE LESION	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31781	RECONSTRUCT WINDPIPE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31780	RECONSTRUCT WINDPIPE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31775	RECONSTRUCT BRONCHUS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31770	REPAIR/GRAFT OF BRONCHUS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31730	INTRO WINDPIPE WIRE/TUBE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31725	CLEARANCE OF AIRWAYS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31720	CLEARANCE OF AIRWAYS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31717	BRONCHIAL BRUSH BIOPSY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31661	BRONCH THERMOPLSTY 2/GT LOBES	SURGERY - RESPIRATORY SYSTEM	YES	07/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	31653	BRONCH EBUS SAMPLNG 3/GT NODE	SURGERY - RESPIRATORY SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	31651	BRONCHIAL VALVE ADDL INSERT	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31649	BRONCHIAL VALVE REMOV ADDL	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31648	BRONCHIAL VALVE REMOV INIT	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	31646	BRNCHSC W/THER ASPIR SBSQ	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31645	BRNCHSC W/THER ASPIR 1ST	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31643	DIAG BRONCHOSCOPE/CATHETER	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31641	BRONCHOSCOPY TREAT BLOCKAGE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31640	BRONCHOSCOPY W/TUMOR EXCISE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31638	BRONCHOSCOPY REVISE STENT	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31637	BRONCHOSCOPY STENT ADD-ON	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31636	BRONCHOSCOPY BRONCH STENTS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31635	BRONCHOSCOPY W/FB REMOVAL	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31634	BRONCH W/BALLOON OCCLUSION	SURGERY - RESPIRATORY SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	31633	BRONCHOSCOPY/NEEDLE BX ADDL	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31632	BRONCHOSCOPY/LUNG BX ADDL	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31631	BRONCHOSCOPY DILATE W/STENT	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31630	BRONCHOSCOPY DILATE/FX REPR	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31629	BRONCHOSCOPY/NEEDLE BX EACH	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31628	BRONCHOSCOPY/LUNG BX EACH	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	31627	NAVIGATIONAL BRONCHOSCOPY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31626	BRONCHOSCOPY W/MARKERS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31625	BRONCHOSCOPY W/BIOPSY(S)	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31624	DX BRONCHOSCOPE/LAVAGE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31623	DX BRONCHOSCOPE/BRUSH	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31622	DX BRONCHOSCOPE/WASH	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31591	LARYNGOPLASTY MEDIALIZATION	SURGERY - RESPIRATORY SYSTEM	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	31590	REINNERVATE LARYNX	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31584	LARYNGOPLASTY FX RDCTJ FIXJ	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31580	LARYNGOPLASTY LARYNGEAL WEB	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31579	LARYNGOSCOPY TELESCOPIC	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31578	LARGSC W/REMOVAL LESION	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31577	LARGSC W/RMVL FOREIGN BDY (S)	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31576	LARYNGOSCOPY WITH BIOPSY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31575	DIAGNOSTIC LARYNGOSCOPY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31574	LARGSC W/NJX AUGMENTATION	SURGERY - RESPIRATORY SYSTEM	NO	01/27/2017	01/27/2017			

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MMAI-Medicare/Medicaid	31573	LARGSC W/THER INJECTION	SURGERY - RESPIRATORY SYSTEM	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	31572	LARGSC W/LASER DSTRJ LES	SURGERY - RESPIRATORY SYSTEM	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	31571	LARYNGOSCOP W/VC INJ + SCOPE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31570	LARYNGOSCOPE W/VC INJ	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31561	LARYNSCOP REMVE CART + SCOP	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31560	LARYNGOSCOP W/ARYTENOIDECTOM	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31554	LARYNGOPLASTY LARYNGEAL STEN	SURGERY - RESPIRATORY SYSTEM	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	31553	LARYNGOPLASTY LARYNGEAL STEN	SURGERY - RESPIRATORY SYSTEM	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	31552	LARYNGOPLASTY LARYNGEAL STEN	SURGERY - RESPIRATORY SYSTEM	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	31551	LARYNGOPLASTY LARYNGEAL STEN	SURGERY - RESPIRATORY SYSTEM	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	31546	REMOVE VC LESION SCOPE/GRAFT	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31545	REMOVE VC LESION W/SCOPE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31541	LARYNSCOP W/TUMR EXC + SCOPE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31540	LARYNGOSCOPY W/EXC OF TUMOR	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31536	LARYNGOSCOPY W/BX & OP SCOPE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31535	LARYNGOSCOPY W/BIOPSY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	31531	LARYNGOSCOPY W/FB & OP SCOPE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31530	LARYNGOSCOPY W/FB REMOVAL	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31529	LARYNGOSCOPY AND DILATION	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31528	LARYNGOSCOPY AND DILATION	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31527	LARYNGOSCOPY FOR TREATMENT	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31526	DX LARYNGOSCOPY W/OPER SCOPE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31525	DX LARYNGOSCOPY EXCL NB	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31520	DX LARYNGOSCOPY NEWBORN	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31515	LARYNGOSCOPY FOR ASPIRATION	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31513	INJECTION INTO VOCAL CORD	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31512	REMOVAL OF LARYNX LESION	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31511	REMOVE FOREIGN BODY LARYNX	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31510	LARYNGOSCOPY WITH BIOPSY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31505	DIAGNOSTIC LARYNGOSCOPY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31502	CHANGE OF WINDPIPE AIRWAY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31500	INSERT EMERGENCY AIRWAY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	3141F	UPPER GI ENDO NOT BARRTTS	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	3140F	UPPER GI ENDO SHOWS BARRTTS	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	31400	REVISION OF LARYNX	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31395	RECONSTRUCT LARYNX & PHARYNX	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31390	REMOVAL OF LARYNX & PHARYNX	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31382	PARTIAL REMOVAL OF LARYNX	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31380	PARTIAL REMOVAL OF LARYNX	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31375	PARTIAL REMOVAL OF LARYNX	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31370	PARTIAL REMOVAL OF LARYNX	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31368	PARTIAL REMOVAL OF LARYNX	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31367	PARTIAL REMOVAL OF LARYNX	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31365	REMOVAL OF LARYNX	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31360	REMOVAL OF LARYNX	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3132F	DOC REF UPPER GI ENDOSCOPY	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	31300	REMOVAL OF LARYNX LESION	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31298	NSL/SINS NDSC SURG FRNT&SPHN	SURGERY - RESPIRATORY SYSTEM	NO	01/01/2018	01/01/2018			

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MMAI-Medicare/Medicaid	31297	NSL/SINS NDSC SURG SPHN SINS	SURGERY - RESPIRATORY SYSTEM	NO	06/01/2016	06/01/2016			
MMAI-Medicare/Medicaid	31296	NSL/SINS NDSC SURG FRNT SINS	SURGERY - RESPIRATORY SYSTEM	NO	06/01/2016	06/01/2016			
MMAI-Medicare/Medicaid	31295	NSL/SINS NDSC SURG MAX SINS	SURGERY - RESPIRATORY SYSTEM	NO	06/01/2016	06/01/2016			
MMAI-Medicare/Medicaid	31294	NSL/SINS NDSC SURG ON DCMPRN	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31293	NSL/SINS NDSC MED&INF DCMPRN	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31292	NSL/SINS NDSC MED/INF DCMPRN	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31291	NASAL/SINUS ENDOSCOPY SURG	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31290	NASAL/SINUS ENDOSCOPY SURG	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31288	NASAL/SINUS ENDOSCOPY SURG	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31287	NASAL/SINUS ENDOSCOPY SURG	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31276	NSL/SINS NDSC FRNT TISS RMVL	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3126F	ESOPH BX RPRT W/DYSPL INFO	CATEGORY II CODES	NO	04/01/2015	04/01/2015			
MMAI-Medicare/Medicaid	31267	ENDOSCOPY MAXILLARY SINUS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31259	NSL/SINS NDSC SPHN TISS RMVL	SURGERY - RESPIRATORY SYSTEM	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	31257	NSL/SINS NDSC TOT W/SPHENDT	SURGERY - RESPIRATORY SYSTEM	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	31256	EXPLORATION MAXILLARY SINUS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	31255	NSL/SINS NDSC W/TOT ETHMDCT	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31254	NSL/SINS NDSC W/PRTL ETHMDCT	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31253	NSL/SINS NDSC TOTAL	SURGERY - RESPIRATORY SYSTEM	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	31235	NSL/SINS NDSC DX SPHN SINUSC	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31233	NSL/SINS NDSC DX MAX SINUSC	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31231	NASAL ENDOSCOPY DX	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31230	REMOVAL OF UPPER JAW	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31225	REMOVAL OF UPPER JAW	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31205	REMOVAL OF ETHMOID SINUS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31201	REMOVAL OF ETHMOID SINUS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31200	REMOVAL OF ETHMOID SINUS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3119F	NO EVAL ACTIVITY CLIN SYMP	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3118F	NY HEART ASSOC CLASS DOCD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3117F	HF ASSESSMENT TOOL COMPLETED	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3115F	QUANT RESULTS ACTIVITY &SYMP	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3112F	CT/MRI BRAIN DONE 24 HRS	CATEGORY II CODES	NO	04/01/2010	04/01/2010			

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MMAI-Medicare/Medicaid	3111F	CT/MRI BRAIN DONE W/IN 24HRS	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	3110F	PRES/ABSN HMRHG/LESION DOCD	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	31090	EXPLORATION OF SINUSES	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31087	REMOVAL OF FRONTAL SINUS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31086	REMOVAL OF FRONTAL SINUS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31085	REMOVAL OF FRONTAL SINUS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31084	REMOVAL OF FRONTAL SINUS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31081	REMOVAL OF FRONTAL SINUS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31080	REMOVAL OF FRONTAL SINUS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31075	EXPLORATION OF FRONTAL SINUS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31070	EXPLORATION OF FRONTAL SINUS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31051	SPHENOID SINUS SURGERY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31050	EXPLORATION SPHENOID SINUS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31040	EXPLORATION BEHIND UPPER JAW	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31032	EXPLORE SINUS REMOVE POLYPS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31030	EXPLORATION MAXILLARY SINUS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	31020	EXPLORATION MAXILLARY SINUS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3100F	IMAGE TEST REF CAROT DIAM	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	31002	IRRIGATION SPHENOID SINUS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31000	IRRIGATION MAXILLARY SINUS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3096F	CENTRAL DEXA ORDERED	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	3095F	CENTRAL DEXA RESULTS DOCD	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	3093F	DOC NEW DIAG 1ST/ADDL MDD	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	30930	THER FX NASAL INF TURBINATE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	30920	LIGATION UPPER JAW ARTERY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3091F	MDD SEVERE W/PSYCH	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	30915	LIGATION NASAL SINUS ARTERY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3090F	MDD SEVERE W/O PSYCH	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	30906	REPEAT CONTROL OF NOSEBLEED	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	30905	CONTROL OF NOSEBLEED	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	30903	CONTROL OF NOSEBLEED	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	30901	CONTROL OF NOSEBLEED	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	3083F	KT/V EQU /GT 1.2 & LT 1.7	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	3082F	KT/V LT 1.2	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	30802	ABLATE INF TURBINATE SUBMUC	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	30801	ABLATE INF TURBINATE SUPERF	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3079F	DIAST BP 80-89 MM HG	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	3078F	DIAST BP LT 80 MM HG	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	3075F	SYST BP GE 130 - 139MM HG	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3074F	SYST BP LT 130 MM HG	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	3073F	PRE-SURG EYE MEASURES DOCD	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	3066F	NEPHROPATHY DOC TX	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	30630	REPAIR NASAL SEPTUM DEFECT	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3062F	POS MACROALBUMINURIA REV	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	30620	INTRANASAL RECONSTRUCTION	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3061F	NEG MICROALBUMINURIA REV	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	3060F	POS MICROALBUMINURIA REV	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	30600	REPAIR MOUTH/NOSE FISTULA	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	30580	REPAIR UPPER JAW FISTULA	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3056F	LVEF GREATER THAN 35PCT	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3055F	LVEF LESS THAN/EQUAL TO 35PCT	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3052F	HG A1CGT EQUAL 8.0PCT LT EQUAL 9.0PCT	CATII	NO	10/01/2019	10/01/2019			
MMAI-Medicare/Medicaid	30520	REPAIR OF NASAL SEPTUM	SURGERY - RESPIRATORY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	3051F	HG A1CGT EQUAL 7.0PCT LT 8.0PCT	CATII	NO	09/30/2019	09/30/2019			
MMAI-Medicare/Medicaid	3049F	LDL-C 100-129 MG/DL	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	3048F	LDL-C LT 100 MG/DL	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	3046F	HEMOGLOBIN A1C LEVEL GT 9.0PCT	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	30465	REPAIR NASAL STENOSIS	SURGERY - RESPIRATORY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	30462	REVISION OF NOSE	SURGERY - RESPIRATORY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	30460	REVISION OF NOSE	SURGERY - RESPIRATORY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	30450	REVISION OF NOSE	SURGERY - RESPIRATORY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	3044F	HG A1C LEVEL LT 7.0PCT	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	30435	REVISION OF NOSE	SURGERY - RESPIRATORY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	30430	REVISION OF NOSE	SURGERY - RESPIRATORY SYSTEM	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	30420	RECONSTRUCTION OF NOSE	SURGERY - RESPIRATORY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	30410	RECONSTRUCTION OF NOSE	SURGERY - RESPIRATORY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	3040F	FEV LT 40PCT PREDICTED VALUE	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	30400	RECONSTRUCTION OF NOSE	SURGERY - RESPIRATORY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	3038F	PULM FX W/IN 12 MON B/4 SURG	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3037F	O2 SATURATION GT 88PCT /PAOGT 55 HG	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	30320	REMOVE NASAL FOREIGN BODY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	30310	REMOVE NASAL FOREIGN BODY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	30300	REMOVE NASAL FOREIGN BODY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3028F	O2 SATURATION DOC REV	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	3025F	SPIROM FEV/FVC LT 70PCT W/COPD	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	3023F	SPIROM DOC REV	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	30220	INSERT NASAL SEPTAL BUTTON	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3021F	LVEF MOD/SEVER DEPRS SYST	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	30210	NASAL SINUS THERAPY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3020F	LVF ASSESS	CATEGORY II CODES	NO	04/01/2010	04/01/2010			

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MMAI-Medicare/Medicaid	30200	INJECTION TREATMENT OF NOSE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3019F	LVEF ASSESS PLANPOST DSCHRGE	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3018F	PRE-PRXD RSK ET AL DOCD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3017F	COLORECTAL CA SCREEN DOC REV	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	3015F	CERV CANCER SCREEN DOCD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3014F	SCREEN MAMMO DOC REV	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	30140	RESECT INFERIOR TURBINATE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	30130	EXCISE INFERIOR TURBINATE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	30125	REMOVAL OF NOSE LESION	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	30124	REMOVAL OF NOSE LESION	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	30120	REVISION OF NOSE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3011F	LIPID PANEL DOC REV	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	30118	REMOVAL OF INTRANASAL LESION	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	30117	REMOVAL OF INTRANASAL LESION	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	30115	REMOVAL OF NOSE POLYP(S)	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	30110	REMOVAL OF NOSE POLYP(S)	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	30100	INTRANASAL BIOPSY	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3008F	BODY MASS INDEX DOCD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3006F	CXR DOC REV	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	30020	DRAINAGE OF NOSE LESION	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	30000	DRAINAGE OF NOSE LESION	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29916	HIP ARTHRO W/LABRAL REPAIR	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29915	HIP ARTHRO ACETABULOPLASTY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29914	HIP ARTHRO W/FEMOROPLASTY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29907	SUBTALAR ARTHRO W/FUSION	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29906	SUBTALAR ARTHRO W/DEB	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29905	SUBTALAR ARTHRO W/EXC	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29904	SUBTALAR ARTHRO W/FB RMVL	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29902	MCP JOINT ARTHROSCOPY SURG	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	29901	MCP JOINT ARTHROSCOPY SURG	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	29900	MCP JOINT ARTHROSCOPY DX	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	29899	ANKLE ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	29898	ANKLE ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29897	ANKLE ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29895	ANKLE ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29894	ANKLE ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29893	SCOPE PLANTAR FASCIOTOMY	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	29892	ANKLE ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29891	ANKLE ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29889	KNEE ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29888	KNEE ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29887	KNEE ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29886	KNEE ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29885	KNEE ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29884	KNEE ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29883	KNEE ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29882	KNEE ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29881	KNEE ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	29880	KNEE ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29879	KNEE ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29877	KNEE ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29876	KNEE ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29875	KNEE ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29874	KNEE ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29873	KNEE ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29871	KNEE ARTHROSCOPY/DRAINAGE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29870	KNEE ARTHROSCOPY DX	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29868	MENISCAL TRNSPL KNEE W/SCPE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29867	ALLGRFT IMPLNT KNEE W/SCOPE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29866	AUTGRFT IMPLNT KNEE W/SCOPE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29863	HIP ARTHR0 W/SYNOVECTOMY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29862	HIP ARTHR0 W/DEBRIDEMENT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29861	HIP ARTHRO W/FB REMOVAL	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29860	HIP ARTHROSCOPY DX	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	29856	TIBIAL ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	29855	TIBIAL ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	29851	KNEE ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	29850	KNEE ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	29848	WRIST ENDOSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29847	WRIST ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29846	WRIST ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29845	WRIST ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29844	WRIST ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29843	WRIST ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29840	WRIST ARTHROSCOPY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29838	ELBOW ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29837	ELBOW ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29836	ELBOW ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29835	ELBOW ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29834	ELBOW ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	29830	ELBOW ARTHROSCOPY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	29804	JAW ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	29800	JAW ARTHROSCOPY/SURGERY	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	29750	WEDGING OF CLUBFOOT CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29740	WEDGING OF CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29730	WINDOWING OF CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29720	REPAIR OF BODY CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29710	REMOVAL/REVISION OF CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29705	REMOVAL/REVISION OF CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29700	REMOVAL/REVISION OF CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29584	APPL MULTLAY COMPRS ARM/HAND	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29581	APPLY MULTLAY COMPRS LWR LEG	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29550	STRAPPING OF TOES	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29540	STRAPPING OF ANKLE AND/OR FT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29530	STRAPPING OF KNEE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29520	STRAPPING OF HIP	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	29515	APPLICATION LOWER LEG SPLINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29505	APPLICATION LONG LEG SPLINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29450	APPLICATION OF LEG CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29445	APPLY RIGID LEG CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29440	ADDITION OF WALKER TO CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29435	APPLY SHORT LEG CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29425	APPLY SHORT LEG CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29405	APPLY SHORT LEG CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29365	APPLICATION OF LONG LEG CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29358	APPLY LONG LEG CAST BRACE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29355	APPLICATION OF LONG LEG CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29345	APPLICATION OF LONG LEG CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29325	APPLICATION OF HIP CASTS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29305	APPLICATION OF HIP CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29280	STRAPPING OF HAND OR FINGER	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29260	STRAPPING OF ELBOW OR WRIST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	29240	STRAPPING OF SHOULDER	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29131	APPLICATION OF FINGER SPLINT	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	29130	APPLICATION OF FINGER SPLINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29125	APPLY FOREARM SPLINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29105	APPLY LONG ARM SPLINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29086	APPLY FINGER CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29085	APPLY HAND/WRIST CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29075	APPLICATION OF FOREARM CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29065	APPLICATION OF LONG ARM CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29058	APPLICATION OF SHOULDER CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29055	APPLICATION OF SHOULDER CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29049	APPLICATION OF FIGURE EIGHT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29046	APPLICATION OF BODY CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29044	APPLICATION OF BODY CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29040	APPLICATION OF BODY CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29035	APPLICATION OF BODY CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	29015	APPLICATION OF BODY CAST	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	29010	APPLICATION OF BODY CAST	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	29000	APPLICATION OF BODY CAST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28825	PARTIAL AMPUTATION OF TOE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28820	AMPUTATION OF TOE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28810	AMPUTATION TOE & METATARSAL	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28805	AMPUTATION THRU METATARSAL	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28800	AMPUTATION OF MIDFOOT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28760	FUSION OF BIG TOE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28755	FUSION OF BIG TOE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28750	FUSION OF BIG TOE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28740	FUSION OF FOOT BONES	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28737	REVISION OF FOOT BONES	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28735	FUSION OF FOOT BONES	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28730	FUSION OF FOOT BONES	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28675	REPAIR OF TOE DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	28666	TREAT TOE DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28665	TREAT TOE DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28660	TREAT TOE DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28645	REPAIR TOE DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28636	TREAT TOE DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28635	TREAT TOE DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28630	TREAT TOE DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28615	REPAIR FOOT DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28606	TREAT FOOT DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28605	TREAT FOOT DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28600	TREAT FOOT DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28585	REPAIR FOOT DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28576	TREAT FOOT DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28575	TREAT FOOT DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28570	TREAT FOOT DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28555	REPAIR FOOT DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	28546	TREAT FOOT DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28545	TREAT FOOT DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28540	TREAT FOOT DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28531	TREAT SESAMOID BONE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28530	TREAT SESAMOID BONE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28525	TREAT TOE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28515	TREATMENT OF TOE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28510	TREATMENT OF TOE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28505	TREAT BIG TOE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28496	TREAT BIG TOE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28495	TREAT BIG TOE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28490	TREAT BIG TOE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28485	TREAT METATARSAL FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28476	TREAT METATARSAL FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28475	TREAT METATARSAL FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28470	TREAT METATARSAL FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	28465	TREAT MIDFOOT FRACTURE EACH	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28456	TREAT MIDFOOT FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28455	TREAT MIDFOOT FRACTURE EACH	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28450	TREAT MIDFOOT FRACTURE EACH	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28446	OSTEOCHONDRAL TALUS AUTOGRFT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28445	TREAT ANKLE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28436	TREATMENT OF ANKLE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28435	TREATMENT OF ANKLE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28430	TREATMENT OF ANKLE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28420	TREAT/GRAFT HEEL FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28415	TREAT HEEL FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28406	TREATMENT OF HEEL FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28405	TREATMENT OF HEEL FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28400	TREATMENT OF HEEL FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28360	RECONSTRUCT CLEFT FOOT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28345	REPAIR WEBBED TOE(S)	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	28344	REPAIR EXTRA TOE(S)	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28341	RESECT ENLARGED TOE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28340	RESECT ENLARGED TOE TISSUE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28322	REPAIR OF METATARSALS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28320	REPAIR OF FOOT BONES	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28315	REMOVAL OF SESAMOID BONE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28313	REPAIR DEFORMITY OF TOE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28312	REVISION OF TOE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28310	REVISION OF BIG TOE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28309	INCISION OF METATARSALS	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28308	INCISION OF METATARSAL	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28307	INCISION OF METATARSAL	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28306	INCISION OF METATARSAL	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28305	INCISE/GRAFT MIDFOOT BONES	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28304	INCISION OF MIDFOOT BONES	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28302	INCISION OF ANKLE BONE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	28300	INCISION OF HEEL BONE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28291	CORRJ HALUX RIGDUS W/IMPLT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28289	CORRJ HALUX RIGDUS W/O IMPLT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28288	PARTIAL REMOVAL OF FOOT BONE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28286	REPAIR OF HAMMERTOE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28285	REPAIR OF HAMMERTOE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28280	FUSION OF TOES	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28272	RELEASE OF TOE JOINT EACH	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28270	RELEASE OF FOOT CONTRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28264	RELEASE OF MIDFOOT JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28262	REVISION OF FOOT AND ANKLE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28261	REVISION OF FOOT TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28260	RELEASE OF MIDFOOT JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28250	REVISION OF FOOT FASCIA	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28240	RELEASE OF BIG TOE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28238	REVISION OF FOOT TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	28234	INCISION OF FOOT TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28232	INCISION OF TOE TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28230	INCISION OF FOOT TENDON(S)	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28226	RELEASE OF FOOT TENDONS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28225	RELEASE OF FOOT TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28222	RELEASE OF FOOT TENDONS	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28220	RELEASE OF FOOT TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28210	REPAIR/GRAFT OF FOOT TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28208	REPAIR OF FOOT TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28202	REPAIR/GRAFT OF FOOT TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28200	REPAIR OF FOOT TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28193	REMOVAL OF FOOT FOREIGN BODY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28192	REMOVAL OF FOOT FOREIGN BODY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28190	REMOVAL OF FOOT FOREIGN BODY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28175	RESECT PHALANX OF TOE TUMOR	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28173	RESECT METATARSAL TUMOR	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	28171	RESECT TARSAL TUMOR	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28160	PARTIAL REMOVAL OF TOE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28153	PARTIAL REMOVAL OF TOE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28150	REMOVAL OF TOE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28140	REMOVAL OF METATARSAL	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28130	REMOVAL OF ANKLE BONE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28126	PARTIAL REMOVAL OF TOE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28124	PARTIAL REMOVAL OF TOE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28122	PARTIAL REMOVAL OF FOOT BONE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28120	PART REMOVAL OF ANKLE/HEEL	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28119	REMOVAL OF HEEL SPUR	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28118	REMOVAL OF HEEL BONE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28116	REVISION OF FOOT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28114	REMOVAL OF METATARSAL HEADS	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28113	PART REMOVAL OF METATARSAL	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28112	PART REMOVAL OF METATARSAL	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	28111	PART REMOVAL OF METATARSAL	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28110	PART REMOVAL OF METATARSAL	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28108	REMOVAL OF TOE LESIONS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28107	REMOVE/GRAFT FOOT LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28106	REMOVE/GRAFT FOOT LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28104	REMOVAL OF FOOT LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28103	REMOVE/GRAFT FOOT LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28102	REMOVE/GRAFT FOOT LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28100	REMOVAL OF ANKLE/HEEL LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28092	REMOVAL OF TOE LESIONS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28090	REMOVAL OF FOOT LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28088	EXCISE FOOT TENDON SHEATH	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28086	EXCISE FOOT TENDON SHEATH	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28080	REMOVAL OF FOOT LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28072	REMOVAL OF FOOT JOINT LINING	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28070	REMOVAL OF FOOT JOINT LINING	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	28062	REMOVAL OF FOOT FASCIA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28060	PARTIAL REMOVAL FOOT FASCIA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28055	NEURECTOMY FOOT	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	28054	BIOPSY OF TOE JOINT LINING	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28052	BIOPSY OF FOOT JOINT LINING	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28050	BIOPSY OF FOOT JOINT LINING	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28047	RESECT FOOT/TOE TUMOR 3 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28046	RESECT FOOT/TOE TUMOR LT 3 CM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28045	EXC FOOT/TOE TUM DEEP LT 1.5CM	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28043	EXC FOOT/TOE TUM SC LT 1.5 CM	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28041	EXC FOOT/TOE TUM DEP 1.5CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28039	EXC FOOT/TOE TUM SC 1.5 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28035	DECOMPRESSION OF TIBIA NERVE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	28024	EXPLORATION OF TOE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28022	EXPLORATION OF FOOT JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28020	EXPLORATION OF FOOT JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	28011	INCISION OF TOE TENDONS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28010	INCISION OF TOE TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	28008	INCISION OF FOOT FASCIA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28005	TREAT FOOT BONE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28003	TREATMENT OF FOOT INFECTION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28002	TREATMENT OF FOOT INFECTION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	28001	DRAINAGE OF BURSA OF FOOT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27894	DECOMPRESSION OF LEG	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27893	DECOMPRESSION OF LEG	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27892	DECOMPRESSION OF LEG	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27888	AMPUTATION OF FOOT AT ANKLE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27886	AMPUTATION FOLLOW-UP SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27884	AMPUTATION FOLLOW-UP SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27882	AMPUTATION OF LOWER LEG	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27881	AMPUTATION OF LOWER LEG	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27880	AMPUTATION OF LOWER LEG	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	27871	FUSION OF TIBIOFIBULAR JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27870	FUSION OF ANKLE JOINT OPEN	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27860	FIXATION OF ANKLE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27848	TREAT ANKLE DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27846	TREAT ANKLE DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27842	TREAT ANKLE DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27840	TREAT ANKLE DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27832	TREAT LOWER LEG DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27831	TREAT LOWER LEG DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27830	TREAT LOWER LEG DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27829	TREAT LOWER LEG JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27828	TREAT LOWER LEG FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27827	TREAT LOWER LEG FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27826	TREAT LOWER LEG FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27825	TREAT LOWER LEG FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27824	TREAT LOWER LEG FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	27823	TREATMENT OF ANKLE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27822	TREATMENT OF ANKLE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27818	TREATMENT OF ANKLE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27816	TREATMENT OF ANKLE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27814	TREATMENT OF ANKLE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27810	TREATMENT OF ANKLE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27808	TREATMENT OF ANKLE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27792	TREATMENT OF ANKLE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27788	TREATMENT OF ANKLE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27786	TREATMENT OF ANKLE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27784	TREATMENT OF FIBULA FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27781	TREATMENT OF FIBULA FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27780	TREATMENT OF FIBULA FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27769	OPTX POST ANKLE FX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27768	CLTX POST ANKLE FX W/MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27767	CLTX POST ANKLE FX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	27766	OPTX MEDIAL ANKLE FX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27762	CLTX MED ANKLE FX W/MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27760	CLTX MEDIAL ANKLE FX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27759	TREATMENT OF TIBIA FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27758	TREATMENT OF TIBIA FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27756	TREATMENT OF TIBIA FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27752	TREATMENT OF TIBIA FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27750	TREATMENT OF TIBIA FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27745	REINFORCE TIBIA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27742	REPAIR OF LEG EPIPHYSES	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27740	REPAIR OF LEG EPIPHYSES	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27734	REPAIR LOWER LEG EPIPHYSES	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27732	REPAIR OF FIBULA EPIPHYSIS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27730	REPAIR OF TIBIA EPIPHYSIS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27727	REPAIR OF LOWER LEG	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27726	REPAIR FIBULA NONUNION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	27725	REPAIR OF LOWER LEG	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27724	REPAIR/GRAFT OF TIBIA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27722	REPAIR/GRAFT OF TIBIA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27720	REPAIR OF TIBIA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27704	REMOVAL OF ANKLE IMPLANT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27703	RECONSTRUCTION ANKLE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27702	RECONSTRUCT ANKLE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27700	REVISION OF ANKLE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27698	REPAIR OF ANKLE LIGAMENT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27696	REPAIR OF ANKLE LIGAMENTS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27695	REPAIR OF ANKLE LIGAMENT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27692	REVISE ADDITIONAL LEG TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27691	REVISE LOWER LEG TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27690	REVISE LOWER LEG TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27687	REVISION OF CALF TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27686	REVISE LOWER LEG TENDONS	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	27685	REVISION OF LOWER LEG TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27681	RELEASE OF LOWER LEG TENDONS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27680	RELEASE OF LOWER LEG TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27676	REPAIR LOWER LEG TENDONS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27675	REPAIR LOWER LEG TENDONS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27665	REPAIR OF LEG TENDON EACH	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27664	REPAIR OF LEG TENDON EACH	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27659	REPAIR OF LEG TENDON EACH	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27658	REPAIR OF LEG TENDON EACH	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27656	REPAIR LEG FASCIA DEFECT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27654	REPAIR OF ACHILLES TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27652	REPAIR/GRAFT ACHILLES TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27650	REPAIR ACHILLES TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27648	INJECTION FOR ANKLE X-RAY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27647	RESECT TALUS/CALCANEUS TUM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27646	RESECT FIBULA TUMOR	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	27645	RESECT TIBIA TUMOR	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27641	PARTIAL REMOVAL OF FIBULA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27640	PARTIAL REMOVAL OF TIBIA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27638	REMOVE/GRAFT LEG BONE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27637	REMOVE/GRAFT LEG BONE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27635	REMOVE LOWER LEG BONE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27634	EXC LEG/ANKLE TUM DEP 5 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27632	EXC LEG/ANKLE LES SC 3 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27630	REMOVAL OF TENDON LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27626	REMOVE ANKLE JOINT LINING	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27625	REMOVE ANKLE JOINT LINING	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27620	EXPLORE/TREAT ANKLE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27619	EXC LEG/ANKLE TUM DEEP LT 5 CM	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27618	EXC LEG/ANKLE TUM LT 3 CM	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27616	RESECT LEG/ANKLE TUM 5 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27615	RESECT LEG/ANKLE TUM LT 5 CM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	27614	BIOPSY LOWER LEG SOFT TISSUE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27613	BIOPSY LOWER LEG SOFT TISSUE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27612	EXPLORATION OF ANKLE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27610	EXPLORE/TREAT ANKLE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27607	TREAT LOWER LEG BONE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27606	INCISION OF ACHILLES TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27605	INCISION OF ACHILLES TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27604	DRAIN LOWER LEG BURSA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27603	DRAIN LOWER LEG LESION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27602	DECOMPRESSION OF LOWER LEG	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27601	DECOMPRESSION OF LOWER LEG	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27600	DECOMPRESSION OF LOWER LEG	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27598	AMPUTATE LOWER LEG AT KNEE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27596	AMPUTATION FOLLOW-UP SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27594	AMPUTATION FOLLOW-UP SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27592	AMPUTATE LEG AT THIGH	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	27591	AMPUTATE LEG AT THIGH	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27590	AMPUTATE LEG AT THIGH	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27580	FUSION OF KNEE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27570	FIXATION OF KNEE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27566	TREAT KNEECAP DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27562	TREAT KNEECAP DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27560	TREAT KNEECAP DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27558	TREAT KNEE DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27557	TREAT KNEE DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27556	TREAT KNEE DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27552	TREAT KNEE DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27550	TREAT KNEE DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27540	TREAT KNEE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27538	TREAT KNEE FRACTURE(S)	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27536	TREAT KNEE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27535	TREAT KNEE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	27532	TREAT KNEE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27530	TREAT KNEE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27524	TREAT KNEECAP FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27520	TREAT KNEECAP FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27519	TREAT THIGH FX GROWTH PLATE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27517	TREAT THIGH FX GROWTH PLATE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27516	TREAT THIGH FX GROWTH PLATE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27514	TREATMENT OF THIGH FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27513	TREATMENT OF THIGH FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27511	TREATMENT OF THIGH FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27510	TREATMENT OF THIGH FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27509	TREATMENT OF THIGH FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27508	TREATMENT OF THIGH FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27507	TREATMENT OF THIGH FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27506	TREATMENT OF THIGH FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27503	TREATMENT OF THIGH FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	27502	TREATMENT OF THIGH FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27501	TREATMENT OF THIGH FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27500	TREATMENT OF THIGH FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27499	DECOMPRESSION OF THIGH/KNEE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27498	DECOMPRESSION OF THIGH/KNEE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27497	DECOMPRESSION OF THIGH/KNEE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27496	DECOMPRESSION OF THIGH/KNEE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27495	REINFORCE THIGH	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27488	REMOVAL OF KNEE PROSTHESIS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27487	REVISE/REPLACE KNEE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27486	REVISE/REPLACE KNEE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27485	SURGERY TO STOP LEG GROWTH	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27479	SURGERY TO STOP LEG GROWTH	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27477	SURGERY TO STOP LEG GROWTH	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27475	SURGERY TO STOP LEG GROWTH	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27472	REPAIR/GRAFT OF THIGH	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	27470	REPAIR OF THIGH	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27468	SHORTEN/LENGTHEN THIGHS	SURGERY - MUSCULOSKELETAL SYST	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	27466	LENGTHENING OF THIGH BONE	SURGERY - MUSCULOSKELETAL SYST	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	27465	SHORTENING OF THIGH BONE	SURGERY - MUSCULOSKELETAL SYST	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	27457	REALIGNMENT OF KNEE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27455	REALIGNMENT OF KNEE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27454	REALIGNMENT OF THIGH BONE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27450	INCISION OF THIGH	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27448	INCISION OF THIGH	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27447	TOTAL KNEE ARTHROPLASTY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27446	REVISION OF KNEE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27445	REVISION OF KNEE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27443	REVISION OF KNEE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27442	REVISION OF KNEE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27441	REVISION OF KNEE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27440	REVISION OF KNEE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	27438	REVISE KNEECAP WITH IMPLANT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27435	INCISION OF KNEE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27430	REVISION OF THIGH MUSCLES	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27429	RECONSTRUCTION KNEE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27428	RECONSTRUCTION KNEE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27427	RECONSTRUCTION KNEE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27425	LAT RETINACULAR RELEASE OPEN	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27424	REVISION/REMOVAL OF KNEECAP	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27422	REVISION OF UNSTABLE KNEECAP	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27420	REVISION OF UNSTABLE KNEECAP	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27418	REPAIR DEGENERATED KNEECAP	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27416	OSTEOCHONDRAL KNEE AUTOGRAFT	SURGERY - MUSCULOSKELETAL SYST	YES	02/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	27415	OSTEOCHONDRAL KNEE ALLOGRAFT	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	27412	AUTOCHONDROCYTE IMPLANT KNEE	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	27409	REPAIR OF KNEE LIGAMENTS	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27407	REPAIR OF KNEE LIGAMENT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	27405	REPAIR OF KNEE LIGAMENT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27403	REPAIR OF KNEE CARTILAGE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27400	REVISE THIGH MUSCLES/TENDONS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27397	TRANSPLANTS OF THIGH TENDONS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27396	TRANSPLANT OF THIGH TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27395	LENGTHENING OF THIGH TENDONS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27394	LENGTHENING OF THIGH TENDONS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27393	LENGTHENING OF THIGH TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27392	INCISION OF THIGH TENDONS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27391	INCISION OF THIGH TENDONS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27390	INCISION OF THIGH TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27386	REPAIR/GRAFT OF THIGH MUSCLE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27385	REPAIR OF THIGH MUSCLE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27381	REPAIR/GRAFT KNEECAP TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27380	REPAIR OF KNEECAP TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27372	REMOVAL OF FOREIGN BODY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	27369	NJX CNTRST KNE ARTHG/CT/MRI	SURGERY - MUSCULOSKELETAL SYST	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	27365	RESECT FEMUR/KNEE TUMOR	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27364	RESECT THIGH/KNEE TUM 5 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27360	PARTIAL REMOVAL LEG BONE (S)	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27358	REMOVE FEMUR LESION/FIXATION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27357	REMOVE FEMUR LESION/GRAFT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27356	REMOVE FEMUR LESION/GRAFT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27355	REMOVE FEMUR LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27350	REMOVAL OF KNEECAP	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27347	REMOVE KNEE CYST	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27345	REMOVAL OF KNEE CYST	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27340	REMOVAL OF KNEECAP BURSA	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27339	EXC THIGH/KNEE TUM DEP 5CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27337	EXC THIGH/KNEE LES SC 3 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27335	REMOVE KNEE JOINT LINING	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27334	REMOVE KNEE JOINT LINING	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	27333	REMOVAL OF KNEE CARTILAGE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27332	REMOVAL OF KNEE CARTILAGE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27331	EXPLORE/TREAT KNEE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27329	RESECT THIGH/KNEE TUM LT 5 CM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27328	EXC THIGH/KNEE TUM DEEP LT 5CM	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27327	EXC THIGH/KNEE LES SC LT 3 CM	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27325	NEURECTOMY HAMSTRING	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27324	BIOPSY THIGH SOFT TISSUES	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27323	BIOPSY THIGH SOFT TISSUES	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27310	EXPLORATION OF KNEE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27307	INCISION OF THIGH TENDONS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27306	INCISION OF THIGH TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27305	INCISE THIGH TENDON & FASCIA	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27303	DRAINAGE OF BONE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27301	DRAIN THIGH/KNEE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27295	AMPUTATION OF LEG AT HIP	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	27290	AMPUTATION OF LEG AT HIP	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27275	MANIPULATION OF HIP JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27269	OPTX THIGH FX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27268	CLTX THIGH FX W/MNPJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27267	CLTX THIGH FX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27266	TREAT HIP DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27265	TREAT HIP DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27259	TREAT HIP DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27258	TREAT HIP DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27257	TREAT HIP DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27256	TREAT HIP DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27254	TREAT HIP DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27253	TREAT HIP DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27252	TREAT HIP DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27250	TREAT HIP DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27248	TREAT THIGH FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	27246	TREAT THIGH FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27245	TREAT THIGH FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27244	TREAT THIGH FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27240	TREAT THIGH FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27238	TREAT THIGH FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27236	TREAT THIGH FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27235	TREAT THIGH FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27232	TREAT THIGH FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27230	TREAT THIGH FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27228	TREAT HIP FRACTURE(S)	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27227	TREAT HIP FRACTURE(S)	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27226	TREAT HIP WALL FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27222	TREAT HIP SOCKET FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27220	TREAT HIP SOCKET FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27218	TREAT PELVIC RING FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27217	TREAT PELVIC RING FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	27216	TREAT PELVIC RING FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27215	TREAT PELVIC FRACTURE(S)	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27202	TREAT TAIL BONE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27200	TREAT TAIL BONE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27198	CLSD TX PELVIC RING FX	SURGERY - MUSCULOSKELETAL SYST	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	27197	CLSD TX PELVIC RING FX	SURGERY - MUSCULOSKELETAL SYST	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	27187	REINFORCE HIP BONES	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27185	REVISION OF FEMUR EPIPHYSIS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27181	TREAT SLIPPED EPIPHYSIS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27179	REVISE HEAD/NECK OF FEMUR	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27178	TREAT SLIPPED EPIPHYSIS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27177	TREAT SLIPPED EPIPHYSIS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27176	TREAT SLIPPED EPIPHYSIS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27175	TREAT SLIPPED EPIPHYSIS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27170	REPAIR/GRAFT FEMUR HEAD/NECK	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27165	INCISION/FIXATION OF FEMUR	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	27161	INCISION OF NECK OF FEMUR	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27158	REVISION OF PELVIS	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27156	REVISION OF HIP BONES	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27151	INCISION OF HIP BONES	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27147	REVISION OF HIP BONE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27146	INCISION OF HIP BONE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27140	TRANSPLANT FEMUR RIDGE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27138	REVISE HIP JOINT REPLACEMENT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27137	REVISE HIP JOINT REPLACEMENT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27134	REVISE HIP JOINT REPLACEMENT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27132	TOTAL HIP ARTHROPLASTY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27130	TOTAL HIP ARTHROPLASTY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27125	PARTIAL HIP REPLACEMENT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	27122	RECONSTRUCTION OF HIP SOCKET	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27120	RECONSTRUCTION OF HIP SOCKET	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27111	TRANSFER OF ILIOPSOAS MUSCLE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	27110	TRANSFER OF ILIOPSOAS MUSCLE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27105	TRANSFER OF SPINAL MUSCLE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27100	TRANSFER OF ABDOMINAL MUSCLE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27098	TRANSFER TENDON TO PELVIS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27097	REVISION OF HIP TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27095	INJECTION FOR HIP X-RAY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27093	INJECTION FOR HIP X-RAY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27091	REMOVAL OF HIP PROSTHESIS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27090	REMOVAL OF HIP PROSTHESIS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27087	REMOVE HIP FOREIGN BODY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27086	REMOVE HIP FOREIGN BODY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27080	REMOVAL OF TAIL BONE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27078	RSECT HIP TUM INCL FEMUR	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27077	RESECT HIP TUM W/INNOM BONE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27076	RESECT HIP TUM INCL ACETABUL	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27075	RESECT HIP TUMOR	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	27071	PART REMOVAL HIP BONE DEEP	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27070	PART REMOVE HIP BONE SUPER	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27067	REMOVE/GRAFT HIP BONE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27066	REMOVE HIP BONE LES DEEP	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27065	REMOVE HIP BONE LES SUPER	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27062	REMOVE FEMUR LESION/BURSA	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27060	REMOVAL OF ISCHIAL BURSA	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27059	RESECT HIP/PELV TUM 5 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27057	BUTTOCK FASCIOTOMY W/DBRDMT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27054	REMOVAL OF HIP JOINT LINING	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27052	BIOPSY OF HIP JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27050	BIOPSY OF SACROILIAC JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27049	RESECT HIP/PELV TUM LT 5 CM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27048	EXC HIP/PELV TUM DEEP LT 5 CM	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27047	EXC HIP/PELVIS LES SC LT 3 CM	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27045	EXC HIP/PELV TUM DEEP 5 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	27043	EXC HIP PELVIS LES SC 3 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27041	BIOPSY OF SOFT TISSUES	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27040	BIOPSY OF SOFT TISSUES	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27036	EXCISION OF HIP JOINT/MUSCLE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27035	DENERVATION OF HIP JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27033	EXPLORATION OF HIP JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27030	DRAINAGE OF HIP JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27027	BUTTOCK FASCIOTOMY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27025	INCISION OF HIP/THIGH FASCIA	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27006	INCISION OF HIP TENDONS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27005	INCISION OF HIP TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27003	INCISION OF HIP TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27001	INCISION OF HIP TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27000	INCISION OF HIP TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26992	DRAINAGE OF BONE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26991	DRAINAGE OF PELVIS BURSA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	26990	DRAINAGE OF PELVIS LESION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26952	AMPUTATION OF FINGER/THUMB	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26951	AMPUTATION OF FINGER/THUMB	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26910	AMPUTATE METACARPAL BONE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26863	FUSE/GRAFT ADDED JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26862	FUSION/GRAFT OF FINGER JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26861	FUSION OF FINGER JNT ADD-ON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26860	FUSION OF FINGER JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26852	FUSION OF KNUCKLE WITH GRAFT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26850	FUSION OF KNUCKLE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26844	FUSION/GRAFT OF HAND JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26843	FUSION OF HAND JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26842	THUMB FUSION WITH GRAFT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26841	FUSION OF THUMB	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26820	THUMB FUSION WITH GRAFT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26785	TREAT FINGER DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	26776	PIN FINGER DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26775	TREAT FINGER DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26770	TREAT FINGER DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26765	TREAT FINGER FRACTURE EACH	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26756	PIN FINGER FRACTURE EACH	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26755	TREAT FINGER FRACTURE EACH	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26750	TREAT FINGER FRACTURE EACH	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26746	TREAT FINGER FRACTURE EACH	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26742	TREAT FINGER FRACTURE EACH	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26740	TREAT FINGER FRACTURE EACH	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26735	TREAT FINGER FRACTURE EACH	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26727	TREAT FINGER FRACTURE EACH	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26725	TREAT FINGER FRACTURE EACH	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26720	TREAT FINGER FRACTURE EACH	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26715	TREAT KNUCKLE DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26706	PIN KNUCKLE DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	26705	TREAT KNUCKLE DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26700	TREAT KNUCKLE DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26686	TREAT HAND DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26685	TREAT HAND DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26676	PIN HAND DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26675	TREAT HAND DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26670	TREAT HAND DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26665	TREAT THUMB FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26650	TREAT THUMB FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26645	TREAT THUMB FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26641	TREAT THUMB DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26615	TREAT METACARPAL FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26608	TREAT METACARPAL FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26607	TREAT METACARPAL FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26605	TREAT METACARPAL FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26600	TREAT METACARPAL FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	26596	EXCISION CONSTRICTING TISSUE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26593	RELEASE MUSCLES OF HAND	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26591	REPAIR MUSCLES OF HAND	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26590	REPAIR FINGER DEFORMITY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26587	RECONSTRUCT EXTRA FINGER	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26568	LENGTHEN METACARPAL/FINGER	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26567	CORRECT FINGER DEFORMITY	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26565	CORRECT METACARPAL FLAW	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26562	REPAIR OF WEB FINGER	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26561	REPAIR OF WEB FINGER	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26560	REPAIR OF WEB FINGER	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26556	TOE JOINT TRANSFER	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26555	POSITIONAL CHANGE OF FINGER	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26554	DOUBLE TRANSFER TOE-HAND	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26553	SINGLE TRANSFER TOE-HAND	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26551	GREAT TOE-HAND TRANSFER	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	26548	RECONSTRUCT FINGER JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26546	REPAIR NONUNION HAND	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26545	RECONSTRUCT FINGER JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26542	REPAIR HAND JOINT WITH GRAFT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26541	REPAIR HAND JOINT WITH GRAFT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26540	REPAIR HAND JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26536	REVISE/IMPLANT FINGER JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26535	REVISE FINGER JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26531	REVISE KNUCKLE WITH IMPLANT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26530	REVISE KNUCKLE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26525	RELEASE FINGER CONTRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26520	RELEASE KNUCKLE CONTRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26518	FUSION OF KNUCKLE JOINTS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26517	FUSION OF KNUCKLE JOINTS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26516	FUSION OF KNUCKLE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26510	THUMB TENDON TRANSFER	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	26508	RELEASE THUMB CONTRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	26502	HAND TENDON RECONSTRUCTION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26500	HAND TENDON RECONSTRUCTION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26499	REVISION OF FINGER	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	26498	FINGER TENDON TRANSFER	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26497	FINGER TENDON TRANSFER	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26496	REVISE THUMB TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26494	HAND TENDON/MUSCLE TRANSFER	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26492	TENDON TRANSFER WITH GRAFT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26490	REVISE THUMB TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26489	TRANSPLANT/GRAFT PALM TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26485	TRANSPLANT PALM TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26483	TRANSPLANT/GRAFT HAND TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26480	TRANSPLANT HAND TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26479	SHORTENING OF HAND TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26478	LENGTHENING OF HAND TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	26477	TENDON SHORTENING	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26476	TENDON LENGTHENING	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26474	FUSION OF FINGER TENDONS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26471	FUSION OF FINGER TENDONS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26460	INCISE HAND/FINGER TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26455	INCISION OF FINGER TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26450	INCISION OF PALM TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26449	RELEASE FOREARM/HAND TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26445	RELEASE HAND/FINGER TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26442	RELEASE PALM & FINGER TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26440	RELEASE PALM/FINGER TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26437	REALIGNMENT OF TENDONS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26434	REPAIR/GRAFT FINGER TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26433	REPAIR FINGER TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26432	REPAIR FINGER TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26428	REPAIR/GRAFT FINGER TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	26426	REPAIR FINGER/HAND TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26420	REPAIR/GRAFT FINGER TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26418	REPAIR FINGER TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26416	GRAFT HAND OR FINGER TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26415	EXCISION HAND/FINGER TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26412	REPAIR/GRAFT HAND TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26410	REPAIR HAND TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26392	REPAIR/GRAFT HAND TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26390	REVISE HAND/FINGER TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26373	REPAIR FINGER/HAND TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26372	REPAIR/GRAFT HAND TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26370	REPAIR FINGER/HAND TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26358	REPAIR/GRAFT HAND TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26357	REPAIR FINGER/HAND TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26356	REPAIR FINGER/HAND TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26352	REPAIR/GRAFT HAND TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	26350	REPAIR FINGER/HAND TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26341	MANIPULAT PALM CORD POST INJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26340	MANIPULATE FINGER W/ANESTH	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26320	REMOVAL OF IMPLANT FROM HAND	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26262	RESECT DISTAL FINGER TUMOR	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26260	RESECT PROX FINGER TUMOR	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26250	EXTENSIVE HAND SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26236	PARTIAL REMOVAL FINGER BONE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26235	PARTIAL REMOVAL FINGER BONE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26230	PARTIAL REMOVAL OF HAND BONE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26215	REMOVE/GRAFT FINGER LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26210	REMOVAL OF FINGER LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26205	REMOVE/GRAFT BONE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26200	REMOVE HAND BONE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26185	REMOVE FINGER BONE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26180	REMOVAL OF FINGER TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	26170	REMOVAL OF PALM TENDON EACH	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26160	REMOVE TENDON SHEATH LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26145	TENDON EXCISION PALM/FINGER	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26140	REVISE FINGER JOINT EACH	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26135	REVISE FINGER JOINT EACH	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26130	REMOVE WRIST JOINT LINING	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26125	RELEASE PALM CONTRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	26123	RELEASE PALM CONTRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	26121	RELEASE PALM CONTRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	26118	RAD RESECT HAND TUMOR 3 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26117	RAD RESECT HAND TUMOR LT 3 CM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26116	EXC HAND TUM DEEP LT 1.5 CM	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26115	EXC HAND LES SC LT 1.5 CM	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26113	EXC HAND TUM DEEP 1.5 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26111	EXC HAND LES SC 1.5 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26110	BIOPSY FINGER JOINT LINING	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	26105	BIOPSY FINGER JOINT LINING	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26100	BIOPSY HAND JOINT LINING	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26080	EXPLORE/TREAT FINGER JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26075	EXPLORE/TREAT FINGER JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26070	EXPLORE/TREAT HAND JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26060	INCISION OF FINGER TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	26055	INCISE FINGER TENDON SHEATH	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	26045	RELEASE PALM CONTRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26040	RELEASE PALM CONTRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26037	DECOMPRESS FINGERS/HAND	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26035	DECOMPRESS FINGERS/HAND	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	26034	TREAT HAND BONE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26030	DRAINAGE OF PALM BURSAS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26025	DRAINAGE OF PALM BURSA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26020	DRAIN HAND TENDON SHEATH	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	26011	DRAINAGE OF FINGER ABSCESS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	26010	DRAINAGE OF FINGER ABSCESS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25931	AMPUTATION FOLLOW-UP SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25929	AMPUTATION FOLLOW-UP SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25927	AMPUTATION OF HAND	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25924	AMPUTATION FOLLOW-UP SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25922	AMPUTATE HAND AT WRIST	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	25920	AMPUTATE HAND AT WRIST	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	25915	AMPUTATION OF FOREARM	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25909	AMPUTATION FOLLOW-UP SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25907	AMPUTATION FOLLOW-UP SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25905	AMPUTATION OF FOREARM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25900	AMPUTATION OF FOREARM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25431	REPAIR NONUNION CARPAL BONE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25430	VASC GRAFT INTO CARPAL BONE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25426	REPAIR/GRAFT RADIUS & ULNA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25425	REPAIR/GRAFT RADIUS OR ULNA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	25420	REPAIR/GRAFT RADIUS & ULNA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25415	REPAIR RADIUS & ULNA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25405	REPAIR/GRAFT RADIUS OR ULNA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25400	REPAIR RADIUS OR ULNA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25394	REPAIR CARPAL BONE SHORTEN	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25393	LENGTHEN RADIUS & ULNA	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25392	SHORTEN RADIUS & ULNA	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25391	LENGTHEN RADIUS OR ULNA	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25390	SHORTEN RADIUS OR ULNA	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25375	REVISE RADIUS & ULNA	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25370	REVISE RADIUS OR ULNA	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25365	REVISE RADIUS & ULNA	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25360	REVISION OF ULNA	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25355	REVISION OF RADIUS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25350	REVISION OF RADIUS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25337	RECONSTRUCT ULNA/RADIOULNAR	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	25332	REVISE WRIST JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	25320	REPAIR/REVISE WRIST JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25316	REVISE PALSY HAND TENDON(S)	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25315	REVISE PALSY HAND TENDON(S)	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25312	TRANSPLANT FOREARM TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25310	TRANSPLANT FOREARM TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25301	FUSION OF TENDONS AT WRIST	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25300	FUSION OF TENDONS AT WRIST	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25295	RELEASE WRIST/FOREARM TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25290	INCISE WRIST/FOREARM TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25280	REVISE WRIST/FOREARM TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25275	REPAIR FOREARM TENDON SHEATH	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25274	REPAIR FOREARM TENDON/MUSCLE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25272	REPAIR FOREARM TENDON/MUSCLE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25270	REPAIR FOREARM TENDON/MUSCLE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25265	REPAIR FOREARM TENDON/MUSCLE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	25263	REPAIR FOREARM TENDON/MUSCLE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25260	REPAIR FOREARM TENDON/MUSCLE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25259	MANIPULATE WRIST W/ANESTHES	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25251	REMOVAL OF WRIST PROSTHESIS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25250	REMOVAL OF WRIST PROSTHESIS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25248	REMOVE FOREARM FOREIGN BODY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25246	INJECTION FOR WRIST X-RAY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25240	PARTIAL REMOVAL OF ULNA	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25230	PARTIAL REMOVAL OF RADIUS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25215	REMOVAL OF WRIST BONES	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25210	REMOVAL OF WRIST BONE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25170	RESECT RADIUS/ULNAR TUMOR	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25151	PARTIAL REMOVAL OF RADIUS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25150	PARTIAL REMOVAL OF ULNA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25145	REMOVE FOREARM BONE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25136	REMOVE & GRAFT WRIST LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	25135	REMOVE & GRAFT WRIST LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25130	REMOVAL OF WRIST LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25126	REMOVE/GRAFT FOREARM LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25125	REMOVE/GRAFT FOREARM LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25120	REMOVAL OF FOREARM LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25119	PARTIAL REMOVAL OF ULNA	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25118	EXCISE WRIST TENDON SHEATH	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25116	REMOVE WRIST/FOREARM LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25115	REMOVE WRIST/FOREARM LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25112	REREMOVE WRIST TENDON LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25111	REMOVE WRIST TENDON LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25110	REMOVE WRIST TENDON LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25109	EXCISE TENDON FOREARM/WRIST	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25107	REMOVE WRIST JOINT CARTILAGE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25105	REMOVE WRIST JOINT LINING	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25101	EXPLORE/TREAT WRIST JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	25100	BIOPSY OF WRIST JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25085	INCISION OF WRIST CAPSULE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25078	RESECT FORARM/WRIST TUM 3CMGT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25077	RESECT FOREARM/WRIST TUMLT 3CM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25076	EXC FOREARM TUM DEEP LT 3 CM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25075	EXC FOREARM LES SC LT 3 CM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25073	EXC FOREARM TUM DEEP 3 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25071	EXC FOREARM LES SC 3 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	25066	BIOPSY FOREARM SOFT TISSUES	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25065	BIOPSY FOREARM SOFT TISSUES	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25040	EXPLORE/TREAT WRIST JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25035	TREAT FOREARM BONE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25031	DRAINAGE OF FOREARM BURSA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25028	DRAINAGE OF FOREARM LESION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25025	DECOMPRESS FOREARM 2 SPACES	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25024	DECOMPRESS FOREARM 2 SPACES	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	25023	DECOMPRESS FOREARM 1 SPACE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25020	DECOMPRESS FOREARM 1 SPACE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	25001	INCISE FLEXOR CARPI RADIALIS	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	25000	INCISION OF TENDON SHEATH	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	24940	REVISION OF UPPER ARM	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	24935	REVISION OF AMPUTATION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	24931	AMPUTATE UPPER ARM & IMPLANT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24930	AMPUTATION FOLLOW-UP SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24925	AMPUTATION FOLLOW-UP SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24920	AMPUTATION OF UPPER ARM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24900	AMPUTATION OF UPPER ARM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24802	FUSION/GRAFT OF ELBOW JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	24800	FUSION OF ELBOW JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	24685	TREAT ULNAR FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24675	TREAT ULNAR FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24670	TREAT ULNAR FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	24666	TREAT RADIUS FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24665	TREAT RADIUS FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24655	TREAT RADIUS FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24650	TREAT RADIUS FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24640	TREAT ELBOW DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24635	TREAT ELBOW FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24620	TREAT ELBOW FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24615	TREAT ELBOW DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24605	TREAT ELBOW DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24600	TREAT ELBOW DISLOCATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24587	TREAT ELBOW FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24586	TREAT ELBOW FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24582	TREAT HUMERUS FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24579	TREAT HUMERUS FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24577	TREAT HUMERUS FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24576	TREAT HUMERUS FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	24575	TREAT HUMERUS FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24566	TREAT HUMERUS FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24565	TREAT HUMERUS FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24560	TREAT HUMERUS FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24546	TREAT HUMERUS FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24545	TREAT HUMERUS FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24538	TREAT HUMERUS FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24535	TREAT HUMERUS FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24530	TREAT HUMERUS FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24516	TREAT HUMERUS FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24515	TREAT HUMERUS FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24505	TREAT HUMERUS FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24500	TREAT HUMERUS FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24498	REINFORCE HUMERUS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24495	DECOMPRESSION OF FOREARM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24470	REVISION OF ELBOW JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	24435	REPAIR HUMERUS WITH GRAFT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	24430	REPAIR OF HUMERUS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	24420	REVISION OF HUMERUS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	24410	REVISION OF HUMERUS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	24400	REVISION OF HUMERUS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	24366	RECONSTRUCT HEAD OF RADIUS	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	24365	RECONSTRUCT HEAD OF RADIUS	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	24363	REPLACE ELBOW JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	24362	RECONSTRUCT ELBOW JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	24361	RECONSTRUCT ELBOW JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	24360	RECONSTRUCT ELBOW JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	24359	REPAIR ELBOW DEB/ATTCH OPEN	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	24358	REPAIR ELBOW W/DEB OPEN	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	24357	REPAIR ELBOW PERC	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	24346	RECONSTRUCT ELBOW MED LIGMNT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	24345	REPR ELBW MED LIGMNT W/TISSU	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	24344	RECONSTRUCT ELBOW LAT LIGMNT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	24343	REPR ELBOW LAT LIGMNT W/TISS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	24342	REPAIR OF RUPTURED TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	24149	RADICAL RESECTION OF ELBOW	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	24076	EX ARM/ELBOW TUM DEEP LT 5 CM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24075	EXC ARM/ELBOW LES SC LT 3 CM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24073	EX ARM/ELBOW TUM DEEP 5 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	24071	EXC ARM/ELBOW LES SC 3 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	24066	BIOPSY ARM/ELBOW SOFT TISSUE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	24065	BIOPSY ARM/ELBOW SOFT TISSUE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23491	REINFORCE SHOULDER BONES	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23490	REINFORCE CLAVICLE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23485	REVISION OF COLLAR BONE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23480	REVISION OF COLLAR BONE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23472	RECONSTRUCT SHOULDER JOINT	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	23470	RECONSTRUCT SHOULDER JOINT	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	23466	REPAIR SHOULDER CAPSULE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23465	REPAIR SHOULDER CAPSULE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23462	REPAIR SHOULDER CAPSULE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23460	REPAIR SHOULDER CAPSULE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23455	REPAIR SHOULDER CAPSULE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	23450	REPAIR SHOULDER CAPSULE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23440	REMOVE/TRANSPLANT TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23430	REPAIR BICEPS TENDON	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23420	REPAIR OF SHOULDER	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	23415	RELEASE OF SHOULDER LIGAMENT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	23412	REPAIR ROTATOR CUFF CHRONIC	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	23410	REPAIR ROTATOR CUFF ACUTE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	23406	INCISE TENDON(S) & MUSCLE(S)	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23405	INCISION OF TENDON & MUSCLE	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23400	FIXATION OF SHOULDER BLADE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	23397	MUSCLE TRANSFERS	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	23395	MUSCLE TRANSFER SHOULDER/ARM	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	23350	INJECTION FOR SHOULDER X-RAY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23335	SHOULDER PROSTHESIS REMOVAL	SURGERY - MUSKULOSKELETAL SYST	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	23334	SHOULDER PROSTHESIS REMOVAL	SURGERY - MUSKULOSKELETAL SYST	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	23333	REMOVE SHOULDER FB DEEP	SURGERY - MUSKULOSKELETAL SYST	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	23330	REMOVE SHOULDER FOREIGN BODY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23220	RESECT PROX HUMERUS TUMOR	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23210	RESECT SCAPULA TUMOR	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23200	RESECT CLAVICLE TUMOR	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23195	REMOVAL OF HEAD OF HUMERUS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23190	PARTIAL REMOVAL OF SCAPULA	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23184	REMOVE HUMERUS LESION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23182	REMOVE SHOULDER BLADE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23180	REMOVE COLLAR BONE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23174	REMOVE HUMERUS LESION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23172	REMOVE SHOULDER BLADE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	23170	REMOVE COLLAR BONE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23156	REMOVAL OF HUMERUS LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23155	REMOVAL OF HUMERUS LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23150	REMOVAL OF HUMERUS LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23146	REMOVAL OF BONE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23145	REMOVAL OF BONE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23140	REMOVAL OF BONE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23107	EXPLORE TREAT SHOULDER JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23106	INCISION OF COLLARBONE JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23105	REMOVE SHOULDER JOINT LINING	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23101	SHOULDER JOINT SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23100	BIOPSY OF SHOULDER JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23078	RESECT SHOULDER TUMOR 5 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23077	RESECT SHOULDER TUMOR LT 5 CM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23076	EXC SHOULDER TUM DEEP LT 5 CM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23075	EXC SHOULDER LES SC LT 3 CM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	23073	EXC SHOULDER TUM DEEP 5 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23071	EXC SHOULDER LES SC 3 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23066	BIOPSY SHOULDER TISSUES	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23065	BIOPSY SHOULDER TISSUES	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23044	EXPLORATORY SHOULDER SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23040	EXPLORATORY SHOULDER SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23035	DRAIN SHOULDER BONE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23031	DRAIN SHOULDER BURSA	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23030	DRAIN SHOULDER LESION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23020	RELEASE SHOULDER JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	23000	REMOVAL OF CALCIUM DEPOSITS	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	22905	RAD RESECT ABD TUMOR 5 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	22904	RADICAL RESECT ABD TUMORLT 5CM	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	22903	EXC ABD LES SC 3 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	22902	EXC ABD LES SC LT 3 CM	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	22901	EXC ABDL TUM DEEP 5 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	22900	EXC ABDL TUM DEEP LT 5 CM	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	22870	INSJ STABLJ DEV W/O DCMPRN	SURGERY - MUSCULOSKELETAL SYST	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	22869	INSJ STABLJ DEV W/O DCMPRN	SURGERY - MUSCULOSKELETAL SYST	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	22868	INSJ STABLJ DEV W/DCMPRN	SURGERY - MUSCULOSKELETAL SYST	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	22867	INSJ STABLJ DEV W/DCMPRN	SURGERY - MUSCULOSKELETAL SYST	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	22859	INSJ BIOMECHANICAL DEVICE	2009 Code Set	YES	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	22854	INSJ BIOMECHANICAL DEVICE	SURGERY - MUSCULOSKELETAL SYST	YES	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	22853	INSJ BIOMECHANICAL DEVICE	SURGERY - MUSCULOSKELETAL SYST	YES	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	22852	REMOVE SPINE FIXATION DEVICE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	22850	REMOVE SPINE FIXATION DEVICE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	22849	REINSERT SPINAL FIXATION	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22830	EXPLORATION OF SPINAL FUSION	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	22819	KYPHECTOMY 3 OR MORE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	22818	KYPHECTOMY 1-2 SEGMENTS	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	22505	MANIPULATION OF SPINE	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	22328	TREAT EACH ADD SPINE FX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	22327	TREAT THORAX SPINE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	22326	TREAT NECK SPINE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	22325	TREAT SPINE FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	22319	TREAT ODONTOID FX W/GRAFT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	22318	TREAT ODONTOID FX W/O GRAFT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	22315	CLOSED TX VERT FX W/MANJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	22310	CLOSED TX VERT FX W/O MANJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	22216	INCIS ADDL SPINE SEGMENT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	22214	INCIS 1 VERTEBRAL SEG LUMBAR	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	22212	INCIS 1 VERTEBRAL SEG THORAC	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	22210	INCIS 1 VERTEBRAL SEG CERV	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	22208	INCIS SPINE 3 COLUMN ADL SEG	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	22207	INCIS SPINE 3 COLUMN LUMBAR	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	22206	INCIS SPINE 3 COLUMN THORAC	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	22116	REMOVE EXTRA SPINE SEGMENT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	22114	REMOVE PART LUMBAR VERTEBRA	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	22112	REMOVE PART THORAX VERTEBRA	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	22110	REMOVE PART OF NECK VERTEBRA	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	22103	REMOVE EXTRA SPINE SEGMENT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	22102	REMOVE PART LUMBAR VERTEBRA	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	22101	REMOVE PART THORAX VERTEBRA	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	22100	REMOVE PART OF NECK VERTEBRA	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	22015	I&D ABSCESS P-SPINE L/S/LS	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	22010	I&D P-SPINE C/T/CERV-THOR	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21936	RESECT BACK TUM 5 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21935	RESECT BACK TUM LT 5 CM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21933	EXC BACK TUM DEEP 5 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	21932	EXC BACK TUM DEEP LT 5 CM	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	21931	EXC BACK LES SC 3 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	21930	EXC BACK LES SC LT 3 CM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21925	BIOPSY SOFT TISSUE OF BACK	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21920	BIOPSY SOFT TISSUE OF BACK	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	21825	TREAT STERNUM FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21820	TREAT STERNUM FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21813	TREATMENT OF RIB FRACTURE	SURGERY - MUSKULOSKELETAL SYST	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	21812	TREATMENT OF RIB FRACTURE	SURGERY - MUSKULOSKELETAL SYST	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	21811	OPTX OF RIB FX W/FIXJ SCOPE	SURGERY - MUSKULOSKELETAL SYST	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	21750	REPAIR OF STERNUM SEPARATION	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21742	REPAIR STERN/NUSS W/O SCOPE	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21725	REVISION OF NECK MUSCLE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21720	REVISION OF NECK MUSCLE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21705	REVISION OF NECK MUSCLE/RIB	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21700	REVISION OF NECK MUSCLE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21620	PARTIAL REMOVAL OF STERNUM	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	21616	REMOVAL OF RIB AND NERVES	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	21615	REMOVAL OF RIB	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	21610	PARTIAL REMOVAL OF RIB	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	21603	EXC CH WAL TUM W/LYMPHADEC	SURGERY-MUSCULOSKELETAL SYST	NO	01/01/2020	01/01/2020			

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MMAI-Medicare/Medicaid	21602	EXC CH WAL TUM W/O LYMPHADEC	SURGERY-MUSCULOSKELETAL SYST	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	21601	EXC CHEST WALL TUMOR W/RIBS	SURGERY-MUSCULOSKELETAL SYST	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	21600	PARTIAL REMOVAL OF RIB	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	21558	RESECT NECK TUMOR 5 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	21557	RESECT NECK THORAX TUMORLT 5CM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21556	EXC NECK TUM DEEP LT 5 CM	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	21555	EXC NECK LES SC LT 3 CM	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	21554	EXC NECK TUM DEEP 5 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	21552	EXC NECK LES SC 3 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	21550	BIOPSY OF NECK/CHEST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21408	OPN TX ORBIT FX W/BONE GRFT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21407	OPN TX ORBIT FX W/IMPLANT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21406	OPN TX ORBIT FX W/O IMPLANT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21401	CLOSED TX ORBIT W/MANIPULJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21400	CLOSED TX ORBIT W/O MANIPULJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21395	OPN TX ORBIT PERIORBT W/GRFT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	21390	OPN TX ORBIT PERIORBTL IMPLT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21387	OPN TX ORBIT FX COMBINED	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21386	OPN TX ORBIT FX PERIORBITAL	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21385	OPN TX ORBIT FX TRANSANTRAL	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21366	OPN TX COMPLX MALAR W/GRFT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21365	OPN TX COMPLX MALAR FX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21360	OPN TX DPRSD MALAR FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21356	OPN TX DPRSD ZYGOMATIC ARCH	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21355	PERQ TX MALAR FRACTURE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21348	OPN TX NASOMAX FX W/GRAFT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21347	OPN TX NASOMAX FX MULTPLE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21346	OPN TX NASOMAX FX W/FIXJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21345	CLOSED TX NOSE/JAW FX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21344	OPEN TX COMPL FRONT SINUS FX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21343	OPEN TX DPRSD FRONT SINUS FX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21340	PERQ TX NASOETHMOID FX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	21339	OPEN NASOETHMOID FX W/ FIXJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21338	OPEN NASOETHMOID FX W/O FIXJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21337	CLOSED TX SEPTAL&NOSE FX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21336	OPEN TX SEPTAL FX W/WO STABJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21335	OPEN TX NOSE & SEPTAL FX	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21330	OPEN TX NOSE FX W/SKELE FIXJ	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21325	OPEN TX NOSE FX UNCOMPLICATD	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21296	REVISION OF JAW MUSCLE/BONE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21295	REVISION OF JAW MUSCLE/BONE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21275	REVISION ORBITOFACIAL BONES	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21270	AUGMENTATION CHEEK BONE	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21268	REVISE EYE SOCKETS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	21267	REVISE EYE SOCKETS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	21263	REVISE EYE SOCKETS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	21261	REVISE EYE SOCKETS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	21260	REVISE EYE SOCKETS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	21256	RECONSTRUCTION OF ORBIT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21255	RECONSTRUCT LOWER JAW BONE	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21249	RECONSTRUCTION OF JAW	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21248	RECONSTRUCTION OF JAW	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21247	RECONSTRUCT LOWER JAW BONE	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21246	RECONSTRUCTION OF JAW	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21245	RECONSTRUCTION OF JAW	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21244	RECONSTRUCTION OF LOWER JAW	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21243	RECONSTRUCTION OF JAW JOINT	SURGERY - MUSCULOSKELETAL SYST	YES	02/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	21242	RECONSTRUCTION OF JAW JOINT	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21240	RECONSTRUCTION OF JAW JOINT	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21215	LOWER JAW BONE GRAFT	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21210	FACE BONE GRAFT	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21209	REDUCTION OF FACIAL BONES	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21208	AUGMENTATION OF FACIAL BONES	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21206	RECONSTRUCT UPPER JAW BONE	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	21199	RECONSTR LWR JAW W/ADVANCE	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21198	RECONSTR LWR JAW SEGMENT	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21196	RECONST LWR JAW W/FIXATION	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21195	RECONST LWR JAW W/O FIXATION	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21194	RECONST LWR JAW W/GRAFT	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21193	RECONST LWR JAW W/O GRAFT	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21188	RECONSTRUCTION OF MIDFACE	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21184	RECONSTRUCT CRANIAL BONE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21183	RECONSTRUCT CRANIAL BONE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21182	RECONSTRUCT CRANIAL BONE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21181	CONTOUR CRANIAL BONE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21180	RECONSTRUCT ENTIRE FOREHEAD	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21179	RECONSTRUCT ENTIRE FOREHEAD	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21172	RECONSTRUCT ORBIT/FOREHEAD	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21160	LEFORT III W/FHD W/ LEFORT I	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21159	LEFORT III W/FHDW/O LEFORT I	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	21155	LEFORT III W/ LEFORT I	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21154	LEFORT III W/O LEFORT I	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21151	LEFORT II W/BONE GRAFTS	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21150	LEFORT II ANTERIOR INTRUSION	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21147	LEFORT I-3/GT PIECE W/ GRAFT	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21146	LEFORT I-2 PIECE W/ GRAFT	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21145	LEFORT I-1 PIECE W/ GRAFT	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21143	LEFORT I-3/GT PIECE W/O GRAFT	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21142	LEFORT I-2 PIECE W/O GRAFT	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21141	LEFORT I-1 PIECE W/O GRAFT	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21116	INJECTION JAW JOINT X-RAY	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21110	INTERDENTAL FIXATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21100	MAXILLOFACIAL FIXATION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21073	MNPJ OF TMJ W/ANESTH	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21070	REMOVE CORONOID PROCESS	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21060	REMOVE JAW JOINT CARTILAGE	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	21050	REMOVAL OF JAW JOINT	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	21049	EXCIS UPPR JAW CYST W/REPAIR	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21048	REMOVE MAXILLA CYST COMPLEX	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21047	EXCISE LWR JAW CYST W/REPAIR	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21046	REMOVE MANDIBLE CYST COMPLEX	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21045	EXTENSIVE JAW SURGERY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21044	REMOVAL OF JAW BONE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21040	EXCISE MANDIBLE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21034	EXCISE MAX/ZYGOMA MAL TUMOR	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21032	REMOVE EXOSTOSIS MAXILLA	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21031	REMOVE EXOSTOSIS MANDIBLE	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21030	EXCISE MAX/ZYGOMA B9 TUMOR	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	21029	CONTOUR OF FACE BONE LESION	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	21026	EXCISION OF FACIAL BONE(S)	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21025	EXCISION OF BONE LOWER JAW	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21016	RESECT FACE/SCALP TUM 2 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	21015	RESECT FACE/SCALP TUM LT 2 CM	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21014	EXC FACE TUM DEEP 2 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	21013	EXC FACE TUM DEEP LT 2 CM	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	21012	EXC FACE LES SBQ 2 CM/GT	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	21011	EXC FACE LES SC LT 2 CM	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	21010	INCISION OF JAW JOINT	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	20985	CPTR-ASST DIR MS PX	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	20982	ABLATE BONE TUMOR(S) PERQ	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	20979	US BONE STIMULATION	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	20975	ELECTRICAL BONE STIMULATION	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	20974	ELECTRICAL BONE STIMULATION	SURGERY - MUSCULOSKELETAL SYST	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	20973	BONE/SKIN GRAFT GREAT TOE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20972	BONE/SKIN GRAFT METATARSAL	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20970	BONE/SKIN GRAFT ILIAC CREST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20969	BONE/SKIN GRAFT MICROVASC	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20962	OTHER BONE GRAFT MICROVASC	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	20957	MT BONE GRAFT MICROVASC	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20956	ILIAC BONE GRAFT MICROVASC	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20955	FIBULA BONE GRAFT MICROVASC	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20950	FLUID PRESSURE MUSCLE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20938	SP BONE AGRFT STRUCT ADD-ON	SURGERY - MUSCULOSKELETAL SYST	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20937	SP BONE AGRFT MORSEL ADD-ON	SURGERY - MUSCULOSKELETAL SYST	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20936	SP BONE AGRFT LOCAL ADD-ON	SURGERY - MUSCULOSKELETAL SYST	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20934	INTERCALARY ALGRFT COMPL	SURGERY - MUSCULOSKELETAL SYST	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	20933	HEMICRT INTRCLRY ALGRFT PRTL	SURGERY - MUSCULOSKELETAL SYST	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	20932	OSTEOART ALGRFT W/SURF & B1	SURGERY - MUSCULOSKELETAL SYST	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	20931	SP BONE ALGRFT STRUCT ADD-ON	SURGERY - MUSCULOSKELETAL SYST	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20930	SP BONE ALGRFT MORSEL ADD-ON	SURGERY - MUSCULOSKELETAL SYST	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20924	REMOVAL OF TENDON FOR GRAFT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	20922	REMOVAL OF FASCIA FOR GRAFT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	20920	REMOVAL OF FASCIA FOR GRAFT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	20912	REMOVE CARTILAGE FOR GRAFT	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	20910	REMOVE CARTILAGE FOR GRAFT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	20902	REMOVAL OF BONE FOR GRAFT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20900	REMOVAL OF BONE FOR GRAFT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20838	REPLANTATION FOOT COMPLETE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20827	REPLANTATION THUMB COMPLETE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20824	REPLANTATION THUMB COMPLETE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20822	REPLANTATION DIGIT COMPLETE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20816	REPLANTATION DIGIT COMPLETE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20808	REPLANTATION HAND COMPLETE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20805	REPLANT FOREARM COMPLETE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20802	REPLANTATION ARM COMPLETE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20705	RMVL I-ARTIC RX DELIVERY DEV	SURGERY-MUSCULOSKELETAL SYST	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	20704	MNL PREP&INSJ I-ARTIC RX DEV	SURGERY-MUSCULOSKELETAL SYST	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	20703	RMVL IMED RX DELIVERY DEVICE	SURGERY-MUSCULOSKELETAL SYST	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	20702	MNL PREP&INSJ IMED RX DEV	SURGERY-MUSCULOSKELETAL SYST	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	20701	RMVL DEEP RX DELIVERY DEVICE	SURGERY-MUSCULOSKELETAL SYST	NO	01/01/2020	01/01/2020			

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MMAI-Medicare/Medicaid	20700	MNL PREP&INSJ DP RX DLVR DEV	SURGERY-MUSCULOSKELETAL SYST	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	20660	APPLY REM FIXATION DEVICE	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20650	INSERT AND REMOVE BONE PIN	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20615	TREATMENT OF BONE CYST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20612	ASPIRATE/INJ GANGLION CYST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20611	DRAIN/INJ JOINT/BURSA W/US	SURGERY - MUSKULOSKELETAL SYST	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	20610	DRAIN/INJ JOINT/BURSA W/O US	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20606	DRAIN/INJ JOINT/BURSA W/US	SURGERY - MUSKULOSKELETAL SYST	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	20605	DRAIN/INJ JOINT/BURSA W/O US	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20604	DRAIN/INJ JOINT/BURSA W/US	SURGERY - MUSKULOSKELETAL SYST	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	20600	DRAIN/INJ JOINT/BURSA W/O US	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20561	NDL INSJ W/O NJX 3+ MUSC	SURGERY-MUSCULOSKELETAL SYST	NO	06/24/2020	06/24/2020	Regulatory Compliance		
MMAI-Medicare/Medicaid	20560	NDL INSJ W/O NJX 1 OR 2 MUSC	SURGERY-MUSCULOSKELETAL SYST	NO	06/24/2020	06/24/2020	Regulatory Compliance		
MMAI-Medicare/Medicaid	20555	PLACE NDL MUSC/TIS FOR RT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20551	INJ TENDON ORIGIN/INSERTION	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20550	INJ TENDON SHEATH/LIGAMENT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	20527	INJ DUPUYTREN CORD W/ENZYME	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20526	THER INJECTION CARP TUNNEL	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20525	REMOVAL OF FOREIGN BODY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20520	REMOVAL OF FOREIGN BODY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	2050F	WOUND CHAR SIZE ETC DOCD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20501	INJECT SINUS TRACT FOR X-RAY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20500	INJECTION OF SINUS TRACT	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	2044F	DOC MNTL TST B/4 BK TRXMNT	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	2040F	BK PN XM ON INIT VISIT DATE	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	2035F	TYMP MEMB MOTION EXAMD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	2033F	EYE IMG VALID W/O RTNOPTHY	CATII	NO	09/30/2019	09/30/2019			
MMAI-Medicare/Medicaid	2031F	H2O STAT DOCD DEHYDRATED	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	2030F	H2O STAT DOCD NORMAL	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	2029F	COMPLETE PHYS SKIN EXAM DONE	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	2028F	FOOT EXAM PERFORMED	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	2027F	OPTIC NERVE HEAD EVAL DONE	CATEGORY II CODES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	2026F	EYE IMG VALID EVC RTNOPTHY	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	2025F	7 FLD RTA PHOTO W/O RTNOPTHY	CATII	NO	09/30/2019	09/30/2019			
MMAI-Medicare/Medicaid	2024F	7 FLD RTA PHOTO EVC RTNOPTHY	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20245	BONE BIOPSY OPEN DEEP	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20240	BONE BIOPSY OPEN SUPERFICIAL	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	2023F	DILAT RTA XM W/O RTNOPTHY	CATII	NO	09/30/2019	09/30/2019			
MMAI-Medicare/Medicaid	2022F	DILAT RTA XM EVC RTNOPTHY	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	2021F	DILAT MACULAR EXAM DONE	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	2020F	DILATED FUNDUS EVAL DONE	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20205	DEEP MUSCLE BIOPSY	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	2019F	DILATED MACUL EXAM DONE	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	2018F	HYDRATION STATUS ASSESS	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	2014F	MENTAL STATUS ASSESS	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	2004F	INITIAL EXAM INVOLVED JOINTS	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	2002F	CLIN SIGN VOL OVRLD ASSESS	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	2001F	WEIGHT RECORD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	2000F	BLOOD PRESSURE MEASURE	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19396	DESIGN CUSTOM BREAST IMPLANT	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	19355	CORRECT INVERTED NIPPLE(S)	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	19307	MAST MOD RAD	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19306	MAST RAD URBAN TYPE	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19305	MAST RADICAL	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19303	MAST SIMPLE COMPLETE	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19302	P-MASTECTOMY W/LN REMOVAL	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19301	PARTIAL MASTECTOMY	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19298	PLACE BREAST RAD TUBE/CATHS	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19297	PLACE BREAST CATH FOR RAD	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19296	PLACE PO BREAST CATH FOR RAD	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19288	PERQ DEV BREAST ADD MR GUIDE	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	19287	PERQ DEV BREAST 1ST MR GUIDE	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	19286	PERQ DEV BREAST ADD US IMAG	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	19285	PERQ DEV BREAST 1ST US IMAG	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2014	01/01/2014			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	19284	PERQ DEV BREAST ADD STRTCTC	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	19283	PERQ DEV BREAST 1ST STRTCTC	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	19282	PERQ DEVICE BREAST EA IMAG	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	19281	PERQ DEVICE BREAST 1ST IMAG	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	19126	EXCISION ADDL BREAST LESION	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19125	EXCISION BREAST LESION	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19120	REMOVAL OF BREAST LESION	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19112	EXCISE BREAST DUCT FISTULA	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19105	CRYOSURG ABLATE FA EACH	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19101	BIOPSY OF BREAST OPEN	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19100	BX BREAST PERCUT W/O IMAGE	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	19086	BX BREAST ADD LESION MR IMAG	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	19085	BX BREAST 1ST LESION MR IMAG	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	19084	BX BREAST ADD LESION US IMAG	2010 Code Set	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	19083	BX BREAST 1ST LESION US IMAG	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	19082	BX BREAST ADD LESION STRTCTC	2010 Code Set	NO	01/01/2014	01/01/2014			

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MMAI-Medicare/Medicaid	19081	BX BREAST 1ST LESION STRTCTC	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	17315	MOHS SURG ADDL BLOCK	SURGERY - INTEGUMENTARY SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	17314	MOHS ADDL STAGE T/A/L	SURGERY - INTEGUMENTARY SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	17313	MOHS 1 STAGE T/A/L	SURGERY - INTEGUMENTARY SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	17312	MOHS ADDL STAGE	SURGERY - INTEGUMENTARY SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	17311	MOHS 1 STAGE H/N/HF/G	SURGERY - INTEGUMENTARY SYSTEM	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	17250	CHEM CAUT OF GRANLTJ TISSUE	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	17111	DESTRUCT LESION 15 OR MORE	SURGERY - INTEGUMENTARY SYSTEM	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	17110	DESTRUCT B9 LESION 1-14	SURGERY - INTEGUMENTARY SYSTEM	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	17108	DESTRUCTION OF SKIN LESIONS	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	17107	DESTRUCTION OF SKIN LESIONS	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	17106	DESTRUCTION OF SKIN LESIONS	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	17004	DESTROY PREMAL LESIONS 15/GT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	17003	DESTRUCT PREMALG LES 2-14	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	17000	DESTRUCT PREMALG LESION	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	16036	ESCHAROTOMY ADDL INCISION	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	16035	INCISION OF BURN SCAB INITI	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	16030	DRESS/DEBRID P-THICK BURN L	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	16025	DRESS/DEBRID P-THICK BURN M	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	16020	DRESS/DEBRID P-THICK BURN S	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	16000	INITIAL TREATMENT OF BURN (S)	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15879	SUCTION LIPECTOMY LWR EXTREM	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15878	SUCTION LIPECTOMY UPR EXTREM	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15877	SUCTION LIPECTOMY TRUNK	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15876	SUCTION LIPECTOMY HEAD&NECK	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15860	TEST FOR BLOOD FLOW IN GRAFT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15852	DRESSING CHANGE NOT FOR BURN	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15847	EXC SKIN ABD ADD-ON	SURGERY - INTEGUMENTARY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15845	SKIN AND MUSCLE REPAIR FACE	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15842	NERVE PALSY MICROSURG GRAFT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15841	NERVE PALSY MUSCLE GRAFT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15840	NERVE PALSY FASCIAL GRAFT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	15787	ABRASION LESIONS ADD-ON	SURGERY - INTEGUMENTARY SYSTEM	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15786	ABRASION LESION SINGLE	SURGERY - INTEGUMENTARY SYSTEM	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15783	DERMABRASION SUPRFL ANY SITE	SURGERY - INTEGUMENTARY SYSTEM	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15782	DERMABRASION OTHER THAN FACE	SURGERY - INTEGUMENTARY SYSTEM	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15777	ACELLULAR DERM MATRIX IMPLT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15776	HAIR TRNSPL GT 15 PUNCH GRAFTS	SURGERY - INTEGUMENTARY SYSTEM	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15775	HAIR TRNSPL 1-15 PUNCH GRFTS	SURGERY - INTEGUMENTARY SYSTEM	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	15774	GFRG AUTOL FAT LIPO EA ADDL	SURGERY- INTEGUMENTARY SYSTEM	YES	12/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	15773	GRFG AUTOL FAT LIPO 25 CC/LT	SURGERY- INTEGUMENTARY SYSTEM	YES	12/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	15772	GRFG AUTOL FAT LIPO EA ADDL	SURGERY- INTEGUMENTARY SYSTEM	YES	12/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	15771	GRFG AUTOL FAT LIPO 50 CC/LT	SURGERY- INTEGUMENTARY SYSTEM	YES	12/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	15770	DERMA-FAT-FASCIA GRAFT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15769	GRFG AUTOL SOFT TISS DIR EXC	SURGERY- INTEGUMENTARY SYSTEM	YES	12/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	15760	COMPOSITE SKIN GRAFT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15758	FREE FASCIAL FLAP MICROVASC	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15757	FREE SKIN FLAP MICROVASC	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	15756	FREE MYO/SKIN FLAP MICROVASC	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15750	NEUROVASCULAR PEDICLE FLAP	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15738	MUSCLE-SKIN GRAFT LEG	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15736	MUSCLE-SKIN GRAFT ARM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15734	MUSCLE-SKIN GRAFT TRUNK	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15733	MUSC MYOQ/FSCQ FLP H&N PEDCL	SURGERY - INTEGUMENTARY SYSTEM	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	15731	FOREHEAD FLAP W/VASC PEDICLE	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15730	MDFC FLAP W/PRSRV VASC PEDCL	SURGERY - INTEGUMENTARY SYSTEM	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	15650	TRANSFER SKIN PEDICLE FLAP	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15630	DELAY FLAP EYE/NOS/EAR/LIP	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15620	DELAY FLAP F/C/C/N/AX/G/H/F	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15610	DELAY FLAP ARMS/LEGS	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15600	DELAY FLAP TRUNK	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15576	PEDICLE E/N/E/L/NTRORAL	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15574	PEDCLE FH/CH/CH/M/N/AX/G/H/F	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15572	SKIN PEDICLE FLAP ARMS/LEGS	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	15570	SKIN PEDICLE FLAP TRUNK	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15278	SKN SUB GRFT F/N/HF/G CH ADD	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15277	SKN SUB GRFT F/N/HF/G CHILD	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15276	SKIN SUB GRAFT F/N/HF/G ADDL	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15275	SKIN SUB GRAFT FACE/NK/HF/G	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15274	SKN SUB GRFT T/A/L CHILD ADD	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15273	SKIN SUB GRFT T/ARM/LG CHILD	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15272	SKIN SUB GRAFT T/A/L ADD-ON	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15271	SKIN SUB GRAFT TRNK/ARM/LEG	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15040	HARVEST CULTURED SKIN GRAFT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1500F	SYMPTOM&SIGN SYMM POLYNEURO	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15005	WND PREP F/N/HF/G ADDL CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15004	WOUND PREP F/N/HF/G	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15003	WOUND PREP ADDL 100 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15002	WOUND PREP TRK/ARM/LEG	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1494F	COGNIT ASSESSED AND REVIEWED	CATEGORY II CODES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	1493F	DEM SEVERITY CLASS SEVERE	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1491F	DEM SEVERITY CLASSIFIED MOD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1490F	DEM SEVERITY CLASSIFIED MILD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1461F	NO QUAL CARD DIAG PRIOR12MON	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1460F	QUAL CARD DIAG PRIOR 12 MONS	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1451F	SYMPT SHOW CLIN IMPORT DROP	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1450F	SYMPTOMS IMPROVED/CONSIST	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	14350	FILLETED FINGER/TOE FLAP	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	14302	TIS TRNFR ADDL 30 SQ CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	14301	TIS TRNFR ANY 30.1-60 SQ CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	14061	TIS TRNFR E/N/E/L10.1-30SQCM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	14060	TIS TRNFR E/N/E/L 10 SQ CM/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	14041	TIS TRNFR F/C/C/M/N/A/G/H/F	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	14040	TIS TRNFR F/C/C/M/N/A/G/H/F	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	14021	TIS TRNFR S/A/L 10.1-30 SQCM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	14020	TIS TRNFR S/A/L 10 SQ CM/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	1400F	PRKNS DIAG RVIEWED	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	14001	TIS TRNFR TRUNK 10.1-30SQCM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	14000	TIS TRNFR TRUNK 10 SQ CM/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	13153	CMPLX RPR E/N/E/L ADDL 5CM/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	13152	CMPLX RPR E/N/E/L 2.6-7.5 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	13151	CMPLX RPR E/N/E/L 1.1-2.5 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	13133	CMPLX RPR F/C/C/M/N/AX/G/H/F	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	13132	CMPLX RPR F/C/C/M/N/AX/G/H/F	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	13131	CMPLX RPR F/C/C/M/N/AX/G/H/F	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	13122	CMPLX RPR S/A/L ADDL 5 CM/GT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	13121	CMPLX RPR S/A/L 2.6-7.5 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	13120	CMPLX RPR S/A/L 1.1-2.5 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	13102	CMPLX RPR TRUNK ADDL 5CM/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	13101	CMPLX RPR TRUNK 2.6-7.5 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	13100	CMPLX RPR TRUNK 1.1-2.5 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1220F	PT SCREENED FOR DEPRESSION	CATEGORY II CODES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	1205F	EPI ETIOL SYND RVWD AND DOCD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12057	INTMD RPR FACE/MM GT 30.0 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12056	INTMD RPR FACE/MM 20.1-30.0	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12055	INTMD RPR FACE/MM 12.6-20 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12054	INTMD RPR FACE/MM 7.6-12.5CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12053	INTMD RPR FACE/MM 5.1-7.5 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12052	INTMD RPR FACE/MM 2.6-5.0 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12051	INTMD RPR FACE/MM 2.5 CM/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12047	INTMD RPR N-HF/GENIT GT 30.0CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12046	INTMD RPR N-HF/GENIT20.1-30	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12045	INTMD RPR N-HF/GENIT12.6-20	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12044	INTMD RPR N-HF/GENIT7.6-12.5	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12042	INTMD RPR N-HF/GENIT2.6-7.5	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12041	INTMD RPR N-HF/GENIT 2.5CM/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12037	INTMD RPR S/TR/EXT GT 30.0 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12036	INTMD RPR S/A/T/EXT 20.1-30	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	12035	INTMD RPR S/A/T/EXT 12.6-20	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12034	INTMD RPR S/TR/EXT 7.6-12.5	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12032	INTMD RPR S/A/T/EXT 2.6-7.5	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12031	INTMD RPR S/A/T/EXT 2.5 CM/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12018	RPR F/E/E/N/L/M GT 30.0 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12017	RPR FE/E/EN/L/M 20.1-30.0 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12016	RPR FE/E/EN/L/M 12.6-20.0 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12015	RPR F/E/E/N/L/M 7.6-12.5 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12014	RPR F/E/E/N/L/M 5.1-7.5 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12013	RPR F/E/E/N/L/M 2.6-5.0 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12011	RPR F/E/E/N/L/M 2.5 CM/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1200F	SEIZURE TYPE& FREQU DOCD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12007	RPR S/N/AX/GEN/TRNK GT 30.0 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12006	RPR S/N/A/GEN/TRK20.1-30.0CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12005	RPR S/N/A/GEN/TRK12.6-20.0CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12004	RPR S/N/AX/GEN/TRK7.6-12.5CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	12002	RPR S/N/AX/GEN/TRNK2.6-7.5CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	12001	RPR S/N/AX/GEN/TRNK 2.5CM/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11983	REMOVE/INSERT DRUG IMPLANT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11982	REMOVE DRUG IMPLANT DEVICE	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11980	IMPLANT HORMONE PELLET(S)	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11976	REMOVE CONTRACEPTIVE CAPSULE	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11960	INSERT TISSUE EXPANDER(S)	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	11954	TX CONTOUR DEFECTS GT 10.0 CC	SURGERY - INTEGUMENTARY SYSTEM	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	11952	TX CONTOUR DEFECTS 5.1-10CC	SURGERY - INTEGUMENTARY SYSTEM	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	11951	TX CONTOUR DEFECTS 1.1-5.0CC	SURGERY - INTEGUMENTARY SYSTEM	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	11950	TX CONTOUR DEFECTS 1 CC/LT	SURGERY - INTEGUMENTARY SYSTEM	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	11922	CORRECT SKIN COLOR EA 20.0CM	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	11921	CORRECT SKN COLOR 6.1-20.0CM	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	11920	CORRECT SKIN COLOR 6.0 CM/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	11901	INJECT SKIN LESIONS GT 7	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11900	INJECT SKIN LESIONS LT /W 7	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	1183F	NEUROPSYCHIATRIC SYMP ABSENT	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1182F	NEUROPSYCHI SYMPT 1+PRESENT	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1181F	NEUROPSYCHIA SYMPTS ASSESSED	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11772	REMOVE PILONIDAL CYST COMPL	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11771	REMOVE PILONIDAL CYST EXTEN	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11770	REMOVE PILONIDAL CYST SIMPLE	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11765	EXCISION OF NAIL FOLD TOE	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11762	RECONSTRUCTION OF NAIL BED	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11760	REPAIR OF NAIL BED	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1175F	FUNCTION STAT ASSESSED RVWD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11755	BIOPSY NAIL UNIT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11750	REMOVAL OF NAIL BED	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11740	DRAIN BLOOD FROM UNDER NAIL	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11732	REMOVE NAIL PLATE ADD-ON	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11730	REMOVAL OF NAIL PLATE	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11721	DEBRIDE NAIL 6 OR MORE	SURGERY - INTEGUMENTARY SYSTEM	NO	03/01/2016	03/01/2016			

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MMAI-Medicare/Medicaid	11720	DEBRIDE NAIL 1-5	SURGERY - INTEGUMENTARY SYSTEM	NO	03/01/2016	03/01/2016			
MMAI-Medicare/Medicaid	11719	TRIM NAIL(S) ANY NUMBER	SURGERY - INTEGUMENTARY SYSTEM	NO	03/01/2016	03/01/2016			
MMAI-Medicare/Medicaid	1170F	FXNL STATUS ASSESSED	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11646	EXC F/E/E/N/L MAL+MRG GT 4 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11644	EXC F/E/E/N/L MAL+MRG 3.1-4	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11643	EXC F/E/E/N/L MAL+MRG 2.1-3	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11642	EXC F/E/E/N/L MAL+MRG 1.1-2	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11641	EXC F/E/E/N/L MAL+MRG 0.6-1	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11640	EXC F/E/E/N/L MAL+MRG 0.5CMLT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11626	EXC S/N/H/F/G MAL+MRG GT 4 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11624	EXC S/N/H/F/G MAL+MRG 3.1-4	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11623	EXC S/N/H/F/G MAL+MRG 2.1-3	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11622	EXC S/N/H/F/G MAL+MRG 1.1-2	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11621	EXC S/N/H/F/G MAL+MRG 0.6-1	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11620	EXC H-F-NK-SP MAL+MARG 0.5/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1160F	RVW MEDS BY RX/DR IN RCRD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	11606	EXC TR-EXT MAL+MARG GT 4 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11604	EXC TR-EXT MAL+MARG 3.1-4 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11603	EXC TR-EXT MAL+MARG 2.1-3 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11602	EXC TR-EXT MAL+MARG 1.1-2 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11601	EXC TR-EXT MAL+MARG 0.6-1 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11600	EXC TR-EXT MAL+MARG 0.5 CM/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1159F	MED LIST DOCD IN RCRD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1158F	ADVNC CARE PLAN TLK DOCD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1157F	ADVNC CARE PLAN IN RCRD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1153F	DOC ADVNCD DIS CMFRT NOT 1ST	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1152F	DOC ADVNCD DIS COMFORT 1ST	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1151F	DOC NO PT RSK DEATH W/IN 1YR	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1150F	DOC PT RSK DEATH W/IN 1YR	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11446	EXC FACE-MM B9+MARG GT 4 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11444	EXC FACE-MM B9+MARG 3.1-4 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11443	EXC FACE-MM B9+MARG 2.1-3 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	11442	EXC FACE-MM B9+MARG 1.1-2 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11441	EXC FACE-MM B9+MARG 0.6-1 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11440	EXC FACE-MM B9+MARG 0.5 CM/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11426	EXC H-F-NK-SP B9+MARG GT 4 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11424	EXC H-F-NK-SP B9+MARG 3.1-4	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11423	EXC H-F-NK-SP B9+MARG 2.1-3	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11422	EXC H-F-NK-SP B9+MARG 1.1-2	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11421	EXC H-F-NK-SP B9+MARG 0.6-1	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11420	EXC H-F-NK-SP B9+MARG 0.5/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11406	EXC TR-EXT B9+MARG GT 4.0 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11404	EXC TR-EXT B9+MARG 3.1-4 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11403	EXC TR-EXT B9+MARG 2.1-3CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11402	EXC TR-EXT B9+MARG 1.1-2 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11401	EXC TR-EXT B9+MARG 0.6-1 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11400	EXC TR-EXT B9+MARG 0.5 CMLT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1137F	EPSD BK PAIN FOR GT 12 WKS	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	1136F	EPSD BK PAIN FOR 12 WKS/LT	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1135F	EPSD BK PAIN FOR GT 6 WKS	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1134F	EPSD BK PAIN FOR 6 WKS/LT	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11313	SHAVE SKIN LESION GT 2.0 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11312	SHAVE SKIN LESION 1.1-2.0 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11311	SHAVE SKIN LESION 0.6-1.0 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11310	SHAVE SKIN LESION 0.5 CM/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1130F	BK PAIN & FXN ASSESSED	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11308	SHAVE SKIN LESION GT 2.0 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11307	SHAVE SKIN LESION 1.1-2.0 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11306	SHAVE SKIN LESION 0.6-1.0 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11305	SHAVE SKIN LESION 0.5 CM/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11303	SHAVE SKIN LESION GT 2.0 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11302	SHAVE SKIN LESION 1.1-2.0 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11301	SHAVE SKIN LESION 0.6-1.0 CM	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11300	SHAVE SKIN LESION 0.5 CM/LT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	1128F	SUBS EPISODE FOR CONDITION	CATEGORY II CODES	NON-COV	04/01/2015	04/01/2015			
MMAI-Medicare/Medicaid	1126F	AMNT PAIN NOTED NONE PRSNT	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1125F	AMNT PAIN NOTED PAIN PRSNT	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1124F	ACP DISCUSS-NO DSCNMKR DOCD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1123F	ACP DISCUSS/DSCN MKR DOCD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1121F	SUBS EVAL FOR CONDITION	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1119F	INIT EVAL FOR CONDITION	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1118F	GERD SYMPS ASSESSED 12 MONTH	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1116F	AURIC/PERI PAIN ASSESSED	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1111F	DSCHRG MED/CURRENT MED MERGE	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1110F	PT LFT INPT FAC W/IN 60 DAYS	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11107	INCAL BX SKN EA SEP/ADDL	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	11106	INCAL BX SKN SINGLE LES	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	11105	PUNCH BX SKIN EA SEP/ADDL	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	11104	PUNCH BX SKIN SINGLE LESION	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	11103	TANGNTL BX SKIN EA SEP/ADDL	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2019	01/01/2019			

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MMAI-Medicare/Medicaid	11102	TANGNTL BX SKIN SINGLE LES	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	1101F	PT FALLS ASSESS-DOCD LE1/YR	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11012	DEB SKIN BONE AT FX SITE	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11011	DEBRIDE SKIN MUSC AT FX SITE	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11010	DEBRIDE SKIN AT FX SITE	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1100F	PTFALLS ASSESS-DOCD GE2GT /YR	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1091F	URINE INCON CHARACTERIZED	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1090F	PRES/ABSN URINE INCON ASSESS	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1071F	ALARM SYMP ASSESSED-1+ PRSNT	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1070F	ALARM SYMP ASSESSED-ABSENT	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1065F	ISCHM STROKE SYMP LT3 HRSB/4	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1061F	DOC LACK PERM&CONT&PAROX FIB	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1060F	DOC PERM/CONT/PAROX ATR FIB	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1055F	VISUAL FUNCT STATUS ASSESS	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1052F	TYPE LOCATION ACTIVITYASSESS	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1050F	HISTORY OF MOLE CHANGES	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	1040F	DSM-5 INFO MDD DOCD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1038F	PERSISTENT ASTHMA	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1036F	TOBACCO NON-USER	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1035F	SMOKELESS TOBACCO USER	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1033F	TOBACCO NONSMOKER NOR 2NDHND	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1032F	SMOKER/EXPOSED 2ND HND SMOKE	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1031F	SMOKING & 2ND HAND ASSESSED	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1030F	INFLUENZA IMM STATUS ASSESS	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1026F	CO-MORBID CONDITION ASSESS	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1022F	PNEUMO IMM STATUS ASSESS	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1019F	ASSESS DYSPNEA PRESENT	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1018F	ASSESS DYSPNEA NOT PRESENT	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1015F	COPD SYMPTOMS ASSESS	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1010F	SEVERITY ANGINA BY ACTVTY	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1008F	GI/RENAL RISK ASSESS	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1007F	ANTI-INFLM/ANLGSC OTC ASSESS	CATEGORY II CODES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	1006F	OSTEOARTHRITIS ASSESS	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1004F	CLIN SYMP VOL OVRLD ASSESS	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1003F	LEVEL OF ACTIVITY ASSESS	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1002F	ASSESS ANGINAL SYMPTOM/LEVEL	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	10021	FNA BX W/O IMG GDN 1ST LES	SURGERY - GENERAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	10012	FNA BX W/MR GDN EA ADDL	SURGERY - INTEGUMENTARY SYSTEM	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	10011	FNA BX W/MR GDN 1ST LES	SURGERY - INTEGUMENTARY SYSTEM	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	10009	FNA BX W/CT GDN 1ST LES	SURGERY - INTEGUMENTARY SYSTEM	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	10008	FNA BX W/FLUOR GDN EA ADDL	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	10007	FNA BX W/FLUOR GDN 1ST LES	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	10006	FNA BX W/US GDN EA ADDL	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	10005	FNA BX W/US GDN 1ST LES	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	10004	FNA BX W/O IMG GDN EA ADDL	SURGERY - INTEGUMENTARY SYSTEM	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	0580T	RMVL SS IMPL DFB PG ONLY	CATEGORY III CODES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	0579T	REM INTERROG DEV ICDS TECH	CATEGORY III CODES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	0578T	REM INTERROG DEV ICDS PHYS	CATEGORY III CODES	NO	01/01/2020	01/01/2020			

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MMAI-Medicare/Medicaid	0577T	EPHYS EVAL ICDS SS	CATEGORY III CODES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	0576T	INTERROG DEV EVAL ICDS SS IP	CATEGORY III CODES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	0575T	PRGRMG DEV EVAL ICDS SS IP	CATEGORY III CODES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	0575F	HIV RNA PLAN CARE DOCD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0574T	REPOS PREV SS IMPL DFB ELTRD	CATEGORY III CODES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	0573T	REMOVAL SS DFB ELECTRODE	CATEGORY III CODES	NO	01/01/2020	01/01/2020			
MMAI-Medicare/Medicaid	0562T	ANTMC GUIDE 3D PRINT EA ADDL	CATEGORY III CODES	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	0561T	ANTMC GUIDE 3D PRINT 1ST GD	CATEGORY III CODES	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	0560T	ANTMC MDL 3D PRINT EA ADDL	CATEGORY III CODES	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	0559T	ANTMC MDL 3D PRINT 1ST CMPNT	CATEGORY III CODES	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	0558T	CT SCAN F/BIOMCHN CT ALYS	CATEGORY III CODES	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	0557T	B1 STR & FX RSK I&R	CATEGORY III CODES	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	0557F	PLAN CAREMNG ANGNL SYMPTDOCD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0556T	B1 STR & FX RSK ASSESSMENT	CATEGORY III CODES	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	0556F	PLAN CARE LIPID CONTROL DOCD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0555T	B1 STR&FX RSK TRANSMIS DATA	CATEGORY III CODES	YES	06/09/2019	12/31/2078			

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MMAI-Medicare/Medicaid	0555F	SYMPTOM MGMNT PLAN CARE DOCD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0554T	B1 STR & FX RSK ANALYSIS	CATEGORY III CODES	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	0552T	LOW-LEVEL LASER THERAPY	CATEGORY III CODES	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	0551F	CYTOPATH REPORT NON ROUTINE	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0550F	CYTOPATH REPORT NONGYN SPCMN	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0547T	B1 MATRL QUAL TST MCRIND TIB	CATEGORY III CODES	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	0546T	RF SPECTRSC NTRAOP MRGN ASMT	CATEGORY III CODES	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	0545T	TCAT TV ANNULUS RCNSTJ	CATEGORY III CODES	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	0545F	FOLLOW UP CARE PLAN MDD DOCD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0544T	TCAT MV ANNULUS RCNSTJ	CATEGORY III CODES	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	0543T	TA MV RPR W/ARTIF CHORD TEND	CATEGORY III CODES	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	0542T	MYOCARDIAL IMAGING MCG I&R	CATEGORY III CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	0541T	MYOCARDIAL IMAGING MCG	CATEGORY III CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	0540F	GLUCO MNGMNT PLAN DOCD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0535F	DYSPNEA MNGMNT PLAN DOCD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0532T	REMOVAL IIMS IMPLT MNTR ONLY	CATEGORY III CODES	NO	06/30/2020	06/30/2020			

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MMAI-Medicare/Medicaid	0531T	REMOVAL IIMS ELECTRODE ONLY	CATEGORY III CODES	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	0530T	REMOVAL COMPLETE IIMS	CATEGORY III CODES	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	0529T	INTERROG DEV EVAL IIMS IP	CATEGORY III CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	0529F	INTRVL 3/GT YR PTS CLNSCP DOCD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0528T	PRGRMG DEV EVAL IIMS IP	CATEGORY III CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	0528F	RCMND FLW-UP 10 YRS DOCD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0527T	INSJ/RPLCMT IIMS IMPLT MNTR	CATEGORY III CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	0526T	INSJ/RPLCMT IIMS ELTRD ONLY	CATEGORY III CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	0526F	SUBS VISIT FOR EPISODE	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0525T	INSJ/RPLCMT COMPL IIMS	CATEGORY III CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	0524T	EV CATH DIR CHEM ABLTJ W/IMG	CATEGORY III CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	0523T	NTRAPX C FFR W/3D FUNCJL MAP	CATEGORY III CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	0522T	PRGRMG DEV EVAL WCS IP	CATEGORY III CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	0521T	INTERROG DEV EVAL WCS IP	CATEGORY III CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	0521F	PLAN OF CARE 4 PAIN DOCD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0520F	RAD DOS LIMTS B/4 3D RAD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	0519F	PLAND CHEMO DOCD B/4 TXMNT	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0518F	FALL PLAN OF CARE DOCD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0517F	GLAUCOMA PLAN OF CARE DOCD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0516F	ANEMIA PLAN OF CARE DOCD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0514F	CARE PLAN HGB DOCD ESA PT	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0513T	ESW INTEG WND HLG EA ADDL	CATEGORY III CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	0513F	ELEV BP PLAN OF CARE DOCD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0512T	ESW INTEG WND HLG 1ST WND	CATEGORY III CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	0510T	RMVL SINUS TARSI IMPLANT	CATEGORY III CODES	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	0509T	PATTERN ERG W/I&R	CATEGORY III CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	0509F	URINE INCON PLAN DOCD	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0507T	NEAR IFR 2IMG MIBMN GLND I&R	CATEGORY III CODES	NO	07/01/2018	07/01/2018			
MMAI-Medicare/Medicaid	0507F	PERITON DIALYSIS PLAN DOCD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0506T	MAC PGMT OPT DNS MEAS HFP	CATEGORY III CODES	YES	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	0505T	EV FEMPOP ARTL REVSC	CATEGORY III CODES	NO	07/01/2018	07/01/2018			
MMAI-Medicare/Medicaid	0505F	HEMODIALYSIS PLAN DOCD	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	0503F	POSTPARTUM CARE VISIT	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0502F	SUBSEQUENT PRENATAL CARE	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0501F	PRENATAL FLOW SHEET	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0500F	INITIAL PRENATAL CARE VISIT	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0474T	INSJ AQUEOUS DRG DEV IO RSVR	CATEGORY III CODES	YES	06/15/2017	12/31/2078			
MMAI-Medicare/Medicaid	0473T	REPRGRMG IO RTA ELTRD RA	Category III Codes	YES	06/15/2017	12/31/2078			
MMAI-Medicare/Medicaid	0472T	PRGRMG IO RTA ELTRD RA	Category III Codes	YES	06/15/2017	12/31/2078			
MMAI-Medicare/Medicaid	0469T	RTA POLARIZE SCAN OC SCR BI	Category III Codes	YES	06/15/2017	12/31/2078			
MMAI-Medicare/Medicaid	0450T	INSJ AQUEOUS DRAIN DEV EACH	CATEGORY III CODES	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	0449T	INSJ AQUEOUS DRAIN DEV 1ST	CATEGORY III CODES	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	0448T	REMVL INSJ IMPLTBL GLUC SENS	CATEGORY III CODES	YES	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	0447T	RMVL IMPLTBL GLUCOSE SENSOR	CATEGORY III CODES	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	0446T	INSJ IMPLTBL GLUCOSE SENSOR	CATEGORY III CODES	YES	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	0445T	SBSQT PLMT DRUG ELUT OC INS	CATEGORY III CODES	YES	08/02/2016	12/31/2078			
MMAI-Medicare/Medicaid	0444T	1ST PLMT DRUG ELUT OC INS	CATEGORY III CODES	YES	08/02/2016	12/31/2078			
MMAI-Medicare/Medicaid	0443T	R-T SPCTRL ALYS PRST8 TISS	CATEGORY III CODES	YES	08/02/2016	12/31/2078			

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MMAI-Medicare/Medicaid	0442T	ABLTJ PERC PLEX/TRNCL NRV	CATEGORY III CODES	NO	08/02/2016	08/02/2016			
MMAI-Medicare/Medicaid	0441T	ABLTJ PERC LXTR/PERPH NRV	CATEGORY III CODES	NO	08/02/2016	08/02/2016			
MMAI-Medicare/Medicaid	0440T	ABLTJ PERC UXTR/PERPH NRV	CATEGORY III CODES	NO	08/02/2016	08/02/2016			
MMAI-Medicare/Medicaid	0439T	MYOCRD CONTRAST PRFUJ ECHO	CATEGORY III CODES	NO	08/02/2016	08/02/2016			
MMAI-Medicare/Medicaid	0437T	IMPLTJ SYNTH RNFCMT ABDL WAL	CATEGORY III CODES	NO	08/02/2016	08/02/2016			
MMAI-Medicare/Medicaid	0379T	VIS FIELD ASSMNT TECH SUPPT	CATEGORY III CODES	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	0378T	VISUAL FIELD ASSMNT REV/RPRT	CATEGORY III CODES	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	0373T	ADAPT BHV TX EA 15 MIN	CATEGORY III CODES	YES	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0362T	BHV ID SUPRT ASSMT EA 15 MIN	CATEGORY III CODES	YES	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0358T	BIA WHOLE BODY	CATEGORY III CODES	YES	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0354T	OCT BREAST SURG CAVITY I&R	CATEGORY III CODES	YES	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0353T	INTRAOP OCT BREAST CAVITY	CATEGORY III CODES	YES	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0352T	OCT BRST/NODE I&R PER SPEC	CATEGORY III CODES	YES	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0351T	INTRAOP OCT BRST/NODE SPEC	CATEGORY III CODES	YES	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0350T	RSA LOWER EXTR EXAM	CATEGORY III CODES	YES	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0349T	RSA UPPER EXTR EXAM	CATEGORY III CODES	YES	07/14/2014	12/31/2078			

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MMAI-Medicare/Medicaid	0348T	RSA SPINE EXAM	CATEGORY III CODES	YES	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0347T	INS BONE DEVICE FOR RSA	CATEGORY III CODES	YES	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0345T	TRANSCATH MTRAL VLVE REPAIR	CATEGORY III CODES	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	0342T	THXP APHERESIS W/HDL DELIP	CATEGORY III CODES	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	0339T	TRNSCTH RENAL SYMP DENRV BIL	CATEGORY III CODES	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	0338T	TRNSCTH RENAL SYMP DENRV UNL	CATEGORY III CODES	YES	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	0333T	VISUAL EP ACUITY SCREEN AUTO	CATEGORY III CODES	YES	07/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0332T	HEART SYMP IMAGE PLNR SPECT	CATEGORY III CODES	YES	07/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0331T	HEART SYMP IMAGE PLNR	CATEGORY III CODES	YES	07/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0330T	TEAR FILM IMG UNI/BI W/I&R	CATEGORY III CODES	YES	07/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0329T	MNTR IO PRESS 24HRS/GT UNI/BI	CATEGORY III CODES	NO	07/01/2013	07/01/2013			
MMAI-Medicare/Medicaid	0278T	TEMPR	CATEGORY III CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0275T	PERQ LAMOT/LAM LUMBAR	CATEGORY III CODES	YES	12/07/2016	12/31/2078			
MMAI-Medicare/Medicaid	0274T	PERQ LAMOT/LAM CRV/THRC	CATEGORY III CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0273T	INTERROGATE CRTD SNS W/PGRMG	CATEGORY III CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0272T	INTERROGATE CRTD SNS DEV	CATEGORY III CODES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	0271T	REV/REMVL CRTD SNS DEV GEN	CATEGORY III CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0270T	REV/REMVL CRTD SNS DEV LEAD	CATEGORY III CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0269T	REV/REMVL CRTD SNS DEV TOTAL	CATEGORY III CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0268T	IMPLT/RPL CRTD SNS DEV GEN	CATEGORY III CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0267T	IMPLT/RPL CRTD SNS DEV LEAD	CATEGORY III CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0266T	IMPLT/RPL CRTD SNS DEV TOTAL	CATEGORY III CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0265T	IM B1 MRW CEL THER HRVST ONL	CATEGORY III CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0264T	IM B1 MRW CEL THER XCL HRVST	CATEGORY III CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0263T	IM B1 MRW CEL THER CMPL	CATEGORY III CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0253T	INSERT AQUEOUS DRAIN DEVICE	CATEGORY III CODES	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	0238T	TRLUML PERIP ATHRC ILIAC ART	CATEGORY III CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0237T	TRLUML PERIP ATHRC BRCHIOCPH	CATEGORY III CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0236T	TRLUML PERIP ATHRC ABD AORTA	CATEGORY III CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0235T	TRLUML PERIP ATHRC VISCERAL	CATEGORY III CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0234T	TRLUML PERIP ATHRC RENAL ART	CATEGORY III CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0232T	NJX PLATELET PLASMA	CATEGORY III CODES	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	0222T	PLMT POST FACET IMPLT ADDL	CATEGORY III CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0221T	PLMT POST FACET IMPLT LUMB	CATEGORY III CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0220T	PLMT POST FACET IMPLT THOR	CATEGORY III CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0219T	PLMT POST FACET IMPLT CERV	CATEGORY III CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0212T	COMPRE AUDIOMETRY EVALUATION	CATEGORY III CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0211T	SPEECH AUDIOM THRESH & RECOG	CATEGORY III CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0210T	SPEECH AUDIOMETRY THRESHOLD	CATEGORY III CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0209T	AUDIOMETRY AIR & BONE	CATEGORY III CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0208T	AUDIOMETRY AIR ONLY	CATEGORY III CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0207T	CLEAR EYELID GLAND W/HEAT	CATEGORY III CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0202T	POST VERT ARTHRPLST 1 LUMBAR	CATEGORY III CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01996	HOSP MANAGE CONT DRUG ADMIN	ANESTH - OTHER PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01990	SUPPORT FOR ORGAN DONOR	ANESTH - OTHER PROCEDURES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0198T	OCULAR BLOOD FLOW MEASURE	CATEGORY III CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01933	ANES TX INTERV RAD CRAN VEIN	ANESTH - RADIOLOGICAL PROCEDUR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01932	ANES TX INTERV RAD TH VEIN	ANESTH - RADIOLOGICAL PROCEDUR	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	01931	ANES THER INTERVEN RAD TIPS	ANESTH - RADIOLOGICAL PROCEDUR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01930	ANES THER INTERVEN RAD VEIN	ANESTH - RADIOLOGICAL PROCEDUR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01926	ANES TX INTERV RAD HRT/CRAN	ANESTH - RADIOLOGICAL PROCEDUR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01925	ANES THER INTERVEN RAD CARD	ANESTH - RADIOLOGICAL PROCEDUR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01924	ANES THER INTERVEN RAD ARTRL	ANESTH - RADIOLOGICAL PROCEDUR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01922	ANESTH CAT OR MRI SCAN	ANESTH - RADIOLOGICAL PROCEDUR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01920	ANESTH CATHETERIZE HEART	ANESTH - RADIOLOGICAL PROCEDUR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01916	ANESTH DX ARTERIOGRAPHY	ANESTH - RADIOLOGICAL PROCEDUR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01860	ANESTH LOWER ARM CASTING	ANESTH - FOREARM, WRIST AND HA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01852	ANESTH LWR ARM VEIN REPAIR	ANESTH - FOREARM, WRIST AND HA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01850	ANESTH LOWER ARM VEIN SURG	ANESTH - FOREARM, WRIST AND HA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0184T	EXC RECTAL TUMOR ENDOSCOPIC	CATEGORY III CODES	YES	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	01844	ANESTH VASCULAR SHUNT SURG	ANESTH - FOREARM, WRIST AND HA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01842	ANESTH LWR ARM EMBOLECTOMY	ANESTH - FOREARM, WRIST AND HA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01840	ANESTH LWR ARM ARTERY SURG	ANESTH - FOREARM, WRIST AND HA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01832	ANESTH WRIST REPLACEMENT	ANESTH - FOREARM, WRIST AND HA	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	01830	ANESTH LOWER ARM SURGERY	ANESTH - FOREARM, WRIST AND HA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01829	ANESTH DX WRIST ARTHROSCOPY	ANESTH - FOREARM, WRIST AND HA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01820	ANESTH LOWER ARM PROCEDURE	ANESTH - FOREARM, WRIST AND HA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01810	ANESTH LOWER ARM SURGERY	ANESTH - FOREARM, WRIST AND HA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01782	ANESTH UPPR ARM VEIN REPAIR	ANESTH - UPPER ARM AND ELBOW	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01780	ANESTH UPPER ARM VEIN SURG	ANESTH - UPPER ARM AND ELBOW	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01772	ANESTH UPPR ARM EMBOLECTOMY	ANESTH - UPPER ARM AND ELBOW	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01770	ANESTH UPPR ARM ARTERY SURG	ANESTH - UPPER ARM AND ELBOW	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01760	ANESTH ELBOW REPLACEMENT	ANESTH - UPPER ARM AND ELBOW	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0175T	CAD CXR REMOTE	CATEGORY III CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01758	ANESTH HUMERAL LESION SURG	ANESTH - UPPER ARM AND ELBOW	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01756	ANESTH RADICAL HUMERUS SURG	ANESTH - UPPER ARM AND ELBOW	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0174T	CAD CXR WITH INTERP	CATEGORY III CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01744	ANESTH HUMERUS REPAIR	ANESTH - UPPER ARM AND ELBOW	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01742	ANESTH HUMERUS SURGERY	ANESTH - UPPER ARM AND ELBOW	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01740	ANESTH UPPER ARM SURGERY	ANESTH - UPPER ARM AND ELBOW	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	01732	ANESTH DX ELBOW ARTHROSCOPY	ANESTH - UPPER ARM AND ELBOW	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01730	ANESTH UPPR ARM PROCEDURE	ANESTH - UPPER ARM AND ELBOW	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0171U	TRGT GEN SEQ ALYS PNL DNA 23	PATH & LAB-PROPRIETARY LAB ANA	YES	03/11/2020	12/31/2078			
MMAI-Medicare/Medicaid	01716	ANESTH BICEPS TENDON REPAIR	ANESTH - UPPER ARM AND ELBOW	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01714	ANESTH UPPR ARM TENDON SURG	ANESTH - UPPER ARM AND ELBOW	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01712	ANESTH UPPR ARM TENDON SURG	ANESTH - UPPER ARM AND ELBOW	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01710	ANESTH ELBOW AREA SURGERY	ANESTH - UPPER ARM AND ELBOW	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0170U	NEURO ASD RNA NEXT GEN SEQ	PATH & LAB-PROPRIETARY LAB ANA	YES	03/11/2020	12/31/2078			
MMAI-Medicare/Medicaid	0169U	NUDT15&TPMT GENE COM VRNT	PATH & LAB-PROPRIETARY LAB ANA	YES	03/11/2020	12/31/2078			
MMAI-Medicare/Medicaid	01680	ANESTH SHOULDER CASTING	ANESTH - SHOULDER AND AXILLA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01670	ANESTH SHOULDER VEIN SURG	ANESTH - SHOULDER AND AXILLA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0166U	LIVER DS 10 BIOCHEM ASY SRM	PATH & LAB-PROPRIETARY LAB ANA	YES	03/11/2020	12/31/2078			
MMAI-Medicare/Medicaid	0165U	PEANUT ALLG ASMT EPI PRB ALL	PATH & LAB-PROPRIETARY LAB ANA	YES	03/11/2020	12/31/2078			
MMAI-Medicare/Medicaid	0165T	REVISE LUMB ARTIF DISC ADDL	CATEGORY III CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01656	ANESTH ARM-LEG VESSEL SURG	ANESTH - SHOULDER AND AXILLA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01654	ANESTH SHOULDER VESSEL SURG	ANESTH - SHOULDER AND AXILLA	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	01652	ANESTH SHOULDER VESSEL SURG	ANESTH - SHOULDER AND AXILLA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01650	ANESTH SHOULDER ARTERY SURG	ANESTH - SHOULDER AND AXILLA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0164U	GI IBS IA ANTI-CDTB&VINCULIN	PATH & LAB-PROPRIETARY LAB ANA	YES	03/11/2020	12/31/2078			
MMAI-Medicare/Medicaid	0164T	REMOVE LUMB ARTIF DISC ADDL	CATEGORY III CODES	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	0163U	ONC CLRCT SCR 3 PRTN ALG	PATH & LAB-PROPRIETARY LAB ANA	YES	03/11/2020	12/31/2078			
MMAI-Medicare/Medicaid	01638	ANESTH SHOULDER REPLACEMENT	ANESTH - SHOULDER AND AXILLA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01636	ANESTH FOREQUARTER AMPUT	ANESTH - SHOULDER AND AXILLA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01634	ANESTH SHOULDER JOINT AMPUT	ANESTH - SHOULDER AND AXILLA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01630	ANESTH SURGERY OF SHOULDER	ANESTH - SHOULDER AND AXILLA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01622	ANES DX SHOULDER ARTHROSCOPY	ANESTH - SHOULDER AND AXILLA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01620	ANESTH SHOULDER PROCEDURE	ANESTH - SHOULDER AND AXILLA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01610	ANESTH SURGERY OF SHOULDER	ANESTH - SHOULDER AND AXILLA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01522	ANESTH LOWER LEG VEIN SURG	ANESTH - LOWER LEG (BELOW KNEE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01520	ANESTH LOWER LEG VEIN SURG	ANESTH - LOWER LEG (BELOW KNEE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01502	ANESTH LWR LEG EMBOLECTOMY	ANESTH - LOWER LEG (BELOW KNEE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01500	ANESTH LEG ARTERIES SURG	ANESTH - LOWER LEG (BELOW KNEE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	01490	ANESTH LOWER LEG CASTING	ANESTH - LOWER LEG (BELOW KNEE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01486	ANESTH ANKLE REPLACEMENT	ANESTH - LOWER LEG (BELOW KNEE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01484	ANESTH LOWER LEG REVISION	ANESTH - LOWER LEG (BELOW KNEE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01482	ANESTH RADICAL LEG SURGERY	ANESTH - LOWER LEG (BELOW KNEE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01480	ANESTH LOWER LEG BONE SURG	ANESTH - LOWER LEG (BELOW KNEE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01474	ANESTH LOWER LEG SURGERY	ANESTH - LOWER LEG (BELOW KNEE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01472	ANESTH ACHILLES TENDON SURG	ANESTH - LOWER LEG (BELOW KNEE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01470	ANESTH LOWER LEG SURGERY	ANESTH - LOWER LEG (BELOW KNEE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01464	ANESTH ANKLE/FT ARTHROSCOPY	ANESTH - LOWER LEG (BELOW KNEE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01462	ANESTH LOWER LEG PROCEDURE	ANESTH - LOWER LEG (BELOW KNEE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01444	ANESTH KNEE ARTERY REPAIR	ANESTH - KNEE AND POPLITEAL AR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01442	ANESTH KNEE ARTERY SURG	ANESTH - KNEE AND POPLITEAL AR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01440	ANESTH KNEE ARTERIES SURG	ANESTH - KNEE AND POPLITEAL AR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01432	ANESTH KNEE VESSEL SURG	ANESTH - KNEE AND POPLITEAL AR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01430	ANESTH KNEE VEINS SURGERY	ANESTH - KNEE AND POPLITEAL AR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01420	ANESTH KNEE JOINT CASTING	ANESTH - KNEE AND POPLITEAL AR	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	01404	ANESTH AMPUTATION AT KNEE	ANESTH - KNEE AND POPLITEAL AR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01402	ANESTH KNEE ARTHROPLASTY	ANESTH - KNEE AND POPLITEAL AR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01400	ANESTH KNEE JOINT SURGERY	ANESTH - KNEE AND POPLITEAL AR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01392	ANESTH KNEE AREA SURGERY	ANESTH - KNEE AND POPLITEAL AR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01390	ANESTH KNEE AREA PROCEDURE	ANESTH - KNEE AND POPLITEAL AR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0138U	BRCA1 BRCA2 MRNA SEQ ALYS	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	01382	ANESTH DX KNEE ARTHROSCOPY	ANESTH - KNEE AND POPLITEAL AR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01380	ANESTH KNEE JOINT PROCEDURE	ANESTH - KNEE AND POPLITEAL AR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0137U	PALB2 MRNA SEQ ALYS	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	0136U	ATM MRNA SEQ ALYS	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	01360	ANESTH KNEE AREA SURGERY	ANESTH - KNEE AND POPLITEAL AR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0135U	HERED GYN CA MRNA PNL 12 GEN	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	0134U	HERED PAN CA MRNA PNL 18 GEN	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	01340	ANESTH KNEE AREA PROCEDURE	ANESTH - KNEE AND POPLITEAL AR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0133U	HERED PRST8 CA RLTD DO 11	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	0132U	HERED OVA CA RLTD DO PNL 17	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			

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MMAI-Medicare/Medicaid	01320	ANESTH KNEE AREA SURGERY	ANESTH - KNEE AND POPLITEAL AR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0131U	HERED BRST CA RLTD DO PNL 13	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	0130U	HERED COLON CA DO MRNA PNL	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	0129U	HERED BRST CA RLTD DO PANEL	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	01274	ANESTH FEMORAL EMBOLECTOMY	ANESTH - UPPER LEG (EXCEPT KNE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01272	ANESTH FEMORAL ARTERY SURG	ANESTH - UPPER LEG (EXCEPT KNE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01270	ANESTH THIGH ARTERIES SURG	ANESTH - UPPER LEG (EXCEPT KNE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01260	ANESTH UPPER LEG VEINS SURG	ANESTH - UPPER LEG (EXCEPT KNE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01250	ANESTH UPPER LEG SURGERY	ANESTH - UPPER LEG (EXCEPT KNE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0123U	MCHNL FRAGILITY RBC PRFLG	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	01234	ANESTH RADICAL FEMUR SURG	ANESTH - UPPER LEG (EXCEPT KNE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01232	ANESTH AMPUTATION OF FEMUR	ANESTH - UPPER LEG (EXCEPT KNE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01230	ANESTH SURGERY OF FEMUR	ANESTH - UPPER LEG (EXCEPT KNE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0122U	SC DIS P-SELECTIN WHL BLOOD	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	01220	ANESTH PROCEDURE ON FEMUR	ANESTH - UPPER LEG (EXCEPT KNE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0121U	SC DIS VCAM-1 WHOLE BLOOD	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			

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MMAI-Medicare/Medicaid	01215	ANESTH REVISE HIP REPAIR	ANESTH - UPPER LEG (EXCEPT KNE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01214	ANESTH HIP ARTHROPLASTY	ANESTH - UPPER LEG (EXCEPT KNE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01212	ANESTH HIP DISARTICULATION	ANESTH - UPPER LEG (EXCEPT KNE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01210	ANESTH HIP JOINT SURGERY	ANESTH - UPPER LEG (EXCEPT KNE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0120U	ONC B CLL LYMPHM MRNA 58 GEN	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	01202	ANESTH ARTHROSCOPY OF HIP	ANESTH - UPPER LEG (EXCEPT KNE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01200	ANESTH HIP JOINT PROCEDURE	ANESTH - UPPER LEG (EXCEPT KNE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0119U	CRD CERAMIDES LIQ CHROM PLSM	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	0118U	TRNSPLJ DON-DRV CLL-FR DNA	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	0117U	PAIN MGMT 11 ENDOGENOUS ANAL	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	01173	ANESTH FX REPAIR PELVIS	ANESTH - PELVIS (EXCEPT HIP)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01170	ANESTH PELVIS SURGERY	ANESTH - PELVIS (EXCEPT HIP)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0116U	RX MNTR NZM IA 35+ORAL FLU	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	01160	ANESTH PELVIS PROCEDURE	ANESTH - PELVIS (EXCEPT HIP)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0115U	RESPIR IADNA 18 VIRAL&2 BACT	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	01150	ANESTH PELVIC TUMOR SURGERY	ANESTH - PELVIS (EXCEPT HIP)	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	0114U	GI BARRETTS ESOPH VIM&CCNA1	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	01140	ANESTH AMPUTATION AT PELVIS	ANESTH - PELVIS (EXCEPT HIP)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0113U	ONC PRST8 PCA3&TMPRSS2-ERG	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	01130	ANESTH BODY CAST PROCEDURE	ANESTH - PELVIS (EXCEPT HIP)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0112U	IADI 16S&18S RRNA GENES	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	01120	ANESTH PELVIS SURGERY	ANESTH - PELVIS (EXCEPT HIP)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0111U	ONC COLON CA KRAS&NRAS ALYS	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	01112	ANESTH BONE ASPIRATE/BX	ANESTH - PELVIS (EXCEPT HIP)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0110U	RX MNTR 1+ORAL ONC RX&SBSTS	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	0110T	NOS QUANT SENSORY TEST	CATEGORY III CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0109U	ID ASPERGILLUS DNA 4 SPECIES	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	0109T	HEAT QUANT SENSORY TEST	CATEGORY III CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0108U	GI BARRETT ESOPH 9 PRTN BMRK	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	0108T	COOL QUANT SENSORY TEST	CATEGORY III CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0107U	C DIFF TOX AG DETCJ IA STOOL	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	0107T	VIBRATE QUANT SENSORY TEST	CATEGORY III CODES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	0106U	GSTR EMPTG 7 TIMED BRTH SPEC	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	0106T	TOUCH QUANT SENSORY TEST	CATEGORY III CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0105U	NEPH CKD MULT ECLIA TUM NEC	PATH & LAB - CHEMISTRY	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	0103U	HERED OVA CA PNL 24 GENES	PATH & LAB - CHEMISTRY	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	0102U	HERED BRST CA RLTD DO 17 GEN	PATH & LAB - CHEMISTRY	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	0101U	HERED COLON CA DO 15 GENES	PATH & LAB - CHEMISTRY	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	0098T	REV ARTIFIC DISC ADDL	CATEGORY III CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0096U	HPV HI RISK TYPES MALE URINE	PATH & LAB - CHEMISTRY	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	0095T	RMVL ARTIFIC DISC ADDL CRVCL	CATEGORY III CODES	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	00952	ANESTH HYSTEROSCOPE/GRAPH	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00950	ANESTH VAGINAL ENDOSCOPY	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0094U	GENOME RAPID SEQUENCE ALYS	PATH & LAB - CHEMISTRY	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	00948	ANESTH REPAIR OF CERVIX	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00944	ANESTH VAGINAL HYSTERECTOMY	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00942	ANESTH SURG ON VAG/URETHRAL	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00940	ANESTH VAGINAL PROCEDURES	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	0093U	RX MNTR 65 COM DRUGS URINE	PATH & LAB - CHEMISTRY	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	00938	ANESTH INSERT PENIS DEVICE	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00936	ANESTH PENIS NODES REMOVAL	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00934	ANESTH PENIS NODES REMOVAL	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00932	ANESTH AMPUTATION OF PENIS	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00930	ANESTH TESTIS SUSPENSION	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0092U	ONC LNG 3 PRTN BMRK PLSM ALG	PATH & LAB - CHEMISTRY	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	00928	ANESTH REMOVAL OF TESTIS	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00926	ANESTH REMOVAL OF TESTIS	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00924	ANESTH TESTIS EXPLORATION	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00922	ANESTH SPERM DUCT SURGERY	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00921	ANESTH VASECTOMY	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00920	ANESTH GENITALIA SURGERY	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0091U	ONC CLRCT SCR WHL BLD ALG	PATH & LAB - CHEMISTRY	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	00918	ANESTH STONE REMOVAL	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00916	ANESTH BLEEDING CONTROL	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	00914	ANESTH REMOVAL OF PROSTATE	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00912	ANESTH BLADDER TUMOR SURG	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00910	ANESTH BLADDER SURGERY	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0090U	ONC CUTAN MLNMA MRNA 23 GENE	PATH & LAB - CHEMISTRY	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	00908	ANESTH REMOVAL OF PROSTATE	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00904	ANESTH PERINEAL SURGERY	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00902	ANESTH ANORECTAL SURGERY	ANESTH - PERINEUM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0089U	ONC MLNMA PRAME & LINC00518	PATH & LAB - CHEMISTRY	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	0088U	TRNSPLJ KDN ALGRFT REJ 1494	PATH & LAB - CHEMISTRY	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	00882	ANESTH MAJOR VEIN LIGATION	ANESTH - LOWER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00880	ANESTH ABDOMEN VESSEL SURG	ANESTH - LOWER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0087U	CRD HRT TRNSPL MRNA 1283 GEN	PATH & LAB - CHEMISTRY	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	00873	ANESTH KIDNEY STONE DESTRUCT	ANESTH - LOWER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00872	ANESTH KIDNEY STONE DESTRUCT	ANESTH - LOWER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00870	ANESTH BLADDER STONE SURG	ANESTH - LOWER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0086U	NFCT DS BACT&FNG ORG ID 6+	PATH & LAB - CHEMISTRY	YES	06/09/2019	12/31/2078			

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MMAI-Medicare/Medicaid	00868	ANESTH KIDNEY TRANSPLANT	ANESTH - LOWER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00866	ANESTH REMOVAL OF ADRENAL	ANESTH - LOWER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00865	ANESTH REMOVAL OF PROSTATE	ANESTH - LOWER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00864	ANESTH REMOVAL OF BLADDER	ANESTH - LOWER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00862	ANESTH KIDNEY/URETER SURG	ANESTH - LOWER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00860	ANESTH SURGERY OF ABDOMEN	ANESTH - LOWER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00851	ANESTH TUBAL LIGATION	ANESTH - LOWER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0084U	RBC DNA GNOTYP 10 BLD GROUPS	PATH & LAB - CHEMISTRY	YES	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	00848	ANESTH PELVIC ORGAN SURG	ANESTH - LOWER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00846	ANESTH HYSTERECTOMY	ANESTH - LOWER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00844	ANESTH PELVIS SURGERY	ANESTH - LOWER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00842	ANESTH AMNIOCENTESIS	ANESTH - LOWER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00840	ANESTH SURG LOWER ABDOMEN	ANESTH - LOWER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0083U	ONC RSPSE CHEMO CNTRST TOMOG	HCPCS - PATH & LAB	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	00836	ANESTH HERNIA REPAIR PREEMIE	ANESTH - LOWER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00834	ANESTH HERNIA REPAIR LT 1 YR	ANESTH - LOWER ABDOMEN	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	00832	ANESTH REPAIR OF HERNIA	ANESTH - LOWER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00830	ANESTH REPAIR OF HERNIA	ANESTH - LOWER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0082U	RX TEST DEF 90+ RX/SBSTS UR	HCPCS - PATH & LAB	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	00820	ANESTH ABDOMINAL WALL SURG	ANESTH - LOWER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00813	ANES UPR LWR GI NDSC PX	ANESTH - LOWER ABDOMEN	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	00812	ANES LWR INTST SCR COLSC	ANESTH - LOWER ABDOMEN	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	00811	ANES LWR INTST NDSC NOS	ANESTH - LOWER ABDOMEN	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	0080U	ONC LNG 5 CLIN RSK FACTR ALG	HCPCS - PATH & LAB	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	00802	ANESTH FAT LAYER REMOVAL	ANESTH - LOWER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00800	ANESTH ABDOMINAL WALL SURG	ANESTH - LOWER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0079U	CMPRTV DNA ALYS MLT SNPS	CATEGORY III CODES	YES	09/25/2018	12/31/2078			
MMAI-Medicare/Medicaid	0077U	IG PARAPROTEIN QUAL BLD/UR	CATEGORY III CODES	YES	09/25/2018	12/31/2078			
MMAI-Medicare/Medicaid	0076U	CYP2D6 3' GENE DUP/MLT	CATEGORY III CODES	YES	09/25/2018	12/31/2078			
MMAI-Medicare/Medicaid	0076T	S&I STENT/CHEST VERT ART	CATEGORY III CODES	YES	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	0075U	CYP2D6 5' GENE DUP/MLT	CATEGORY III CODES	YES	09/25/2018	12/31/2078			
MMAI-Medicare/Medicaid	0074U	CYP2D6 NONDUPLICATED GENE	CATEGORY III CODES	YES	09/25/2018	12/31/2078			

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MMAI-Medicare/Medicaid	0073U	CYP2D6 GEN CYP2D7-2D6 HYBRID	CATEGORY III CODES	YES	09/25/2018	12/31/2078			
MMAI-Medicare/Medicaid	00732	ANES UPR GI NDSC PX ERCP	ANESTH - UPPER ABDOMEN	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	00731	ANES UPR GI NDSC PX NOS	ANESTH - UPPER ABDOMEN	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	00730	ANESTH ABDOMINAL WALL SURG	ANESTH - UPPER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0072U	CYP2D6 GEN CYP2D6-2D7 HYBRID	CATEGORY III CODES	YES	09/25/2018	12/31/2078			
MMAI-Medicare/Medicaid	0071U	CYP2D6 FULL GENE SEQUENCE	CATEGORY III CODES	YES	09/25/2018	12/31/2078			
MMAI-Medicare/Medicaid	0070U	CYP2D6 GEN COM&SLCT RAR VRNT	CATEGORY III CODES	YES	09/25/2018	12/31/2078			
MMAI-Medicare/Medicaid	00702	ANESTH FOR LIVER BIOPSY	ANESTH - UPPER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00700	ANESTH ABDOMINAL WALL SURG	ANESTH - UPPER ABDOMEN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0069U	ONC CLRCT MICRORNA MIR-31-3P	CATEGORY III CODES	YES	09/25/2018	12/31/2078			
MMAI-Medicare/Medicaid	0068U	CANDIDA SPECIES PNL AMP PRB	CATEGORY III CODES	YES	09/25/2018	12/31/2078			
MMAI-Medicare/Medicaid	0067U	ONC BRST IMHCHEM PRFL 4 BMRK	CATEGORY III CODES	YES	09/25/2018	12/31/2078			
MMAI-Medicare/Medicaid	00670	ANESTH SPINE CORD SURGERY	ANESTH - SPINE AND SPINAL CORD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0065U	SYFLS TST NONTREPONEMAL ANTB	CATEGORY III CODES	NO	10/01/2018	10/01/2018			
MMAI-Medicare/Medicaid	0064U	ANTB TP TOTAL&RPR IA QUAL	CATEGORY III CODES	NO	10/01/2018	10/01/2018			
MMAI-Medicare/Medicaid	00640	ANESTH SPINE MANIPULATION	ANESTH - SPINE AND SPINAL CORD	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	0063U	NEURO AUTISM 32 AMINES ALG	CATEGORY III CODES	YES	09/25/2018	12/31/2078			
MMAI-Medicare/Medicaid	00635	ANESTH LUMBAR PUNCTURE	ANESTH - SPINE AND SPINAL CORD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00632	ANESTH REMOVAL OF NERVES	ANESTH - SPINE AND SPINAL CORD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00630	ANESTH SPINE CORD SURGERY	ANESTH - SPINE AND SPINAL CORD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0062U	AI SLE IGG&IGM ALYS 80 BMRK	CATEGORY III CODES	YES	09/25/2018	12/31/2078			
MMAI-Medicare/Medicaid	00626	ANES SPINE TRANSTHOR W/VENT	ANESTH - SPINE AND SPINAL CORD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00625	ANES SPINE TRANTHOR W/O VENT	ANESTH - SPINE AND SPINAL CORD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00620	ANESTH SPINE CORD SURGERY	ANESTH - SPINE AND SPINAL CORD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0061U	TC MEAS 5 BMRK SFDI M-S ALYS	ANESTH - SPINE AND SPINAL CORD	YES	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	0060U	TWN ZYG GEN SEQ ALYS CHRMS2	ANESTH - SPINE AND SPINAL CORD	YES	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	00604	ANESTH SITTING PROCEDURE	ANESTH - SPINE AND SPINAL CORD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00600	ANESTH SPINE CORD SURGERY	ANESTH - SPINE AND SPINAL CORD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0059U	ONC MERKEL CLL CARC SRM +/-	CATEGORY III CODES	YES	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	0058U	ONC MERKEL CLL CARC SRM QUAN	CATEGORY III CODES	YES	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	00580	ANESTH HEART/LUNG TRANSPLNT	ANESTH - INTRATHORACIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00567	ANESTH CABG W/PUMP	ANESTH - INTRATHORACIC	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	00566	ANESTH CABG W/O PUMP	ANESTH - INTRATHORACIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00563	ANESTH HEART SURG W/ARREST	ANESTH - INTRATHORACIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00562	ANESTH HRT SURG W/PMP AGE 1+	ANESTH - INTRATHORACIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00561	ANESTH HEART SURG LT 1 YR	ANESTH - INTRATHORACIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00560	ANESTH HEART SURG W/O PUMP	ANESTH - INTRATHORACIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0055U	CARD HRT TRNSPL 96 DNA SEQ	CATEGORY III CODES	YES	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	0055T	BONE SRGRY CMPTR CT/MRI IMAG	CATEGORY III CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00550	ANESTH STERNAL DEBRIDEMENT	ANESTH - INTRATHORACIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0054U	RX MNTR 14+ DRUGS & SBSTS	CATEGORY III CODES	YES	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	0054T	BONE SRGRY CMPTR FLUOR IMAGE	CATEGORY III CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00548	ANESTH TRACHEA BRONCHI SURG	ANESTH - INTRATHORACIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00546	ANESTH LUNG CHEST WALL SURG	ANESTH - INTRATHORACIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00542	ANESTHESIA REMOVAL PLEURA	ANESTH - INTRATHORACIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00541	ANESTH ONE LUNG VENTILATION	ANESTH - INTRATHORACIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00540	ANESTH CHEST SURGERY	ANESTH - INTRATHORACIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00539	ANESTH TRACH-BRONCH RECONST	ANESTH - INTRATHORACIC	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	00537	ANESTH CARDIAC ELECTROPHYS	ANESTH - INTRATHORACIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00534	ANESTH CARDIOVERTER/DEFIB	ANESTH - INTRATHORACIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00532	ANESTH VASCULAR ACCESS	ANESTH - INTRATHORACIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00530	ANESTH PACEMAKER INSERTION	ANESTH - INTRATHORACIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0052U	LPOPRTN BLD W/5 MAJ CLASSES	CATEGORY III CODES	YES	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	00529	ANES MEDSCPY&THORSCPY 1 LUNG	ANESTH - INTRATHORACIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00528	ANES MEDIASCPY & DX THORSCPY	ANESTH - INTRATHORACIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00524	ANESTH CHEST DRAINAGE	ANESTH - INTRATHORACIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00522	ANESTH CHEST LINING BIOPSY	ANESTH - INTRATHORACIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00520	ANESTH CHEST PROCEDURE	ANESTH - INTRATHORACIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0050U	TRGT GEN SEQ DNA 194 GENES	ANESTH - INTRATHORACIC	YES	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	00500	ANESTH ESOPHAGEAL SURGERY	ANESTH - INTRATHORACIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0049U	NPM1 GENE ANALYSIS QUAN	ANESTH - THORAX (CHEST WALL AN	YES	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	0048U	ONC SLD ORG NEO DNA 468 GENE	ANESTH - THORAX (CHEST WALL AN	YES	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	0047U	ONC PRST8 MRNA 17 GENE ALG	ANESTH - THORAX (CHEST WALL AN	YES	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	00474	ANESTH SURGERY OF RIB	ANESTH - THORAX (CHEST WALL AN	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	00472	ANESTH CHEST WALL REPAIR	ANESTH - THORAX (CHEST WALL AN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00470	ANESTH REMOVAL OF RIB	ANESTH - THORAX (CHEST WALL AN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0046U	FLT3 GENE ITD VARIANTS QUAN	ANESTH - THORAX (CHEST WALL AN	YES	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	0045U	ONC BRST DUX CARC IS 12 GENE	ANESTH - THORAX (CHEST WALL AN	YES	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	00454	ANESTH COLLAR BONE BIOPSY	ANESTH - THORAX (CHEST WALL AN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00450	ANESTH SURGERY OF SHOULDER	ANESTH - THORAX (CHEST WALL AN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0044U	TBRF B GRP ANTB 4 PRTN IGG	PATH & LAB - CHEMISTRY	YES	04/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	0043U	TBRF B GRP ANTB 4 PRTN IGM	PATH & LAB - CHEMISTRY	YES	04/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	0042U	B BRGDRFERI ANTB 12 PRTN IGG	PATH & LAB - CHEMISTRY	YES	04/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	0041U	B BRGDRFERI ANTB 5 PRTN IGM	PATH & LAB - CHEMISTRY	YES	04/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	00410	ANESTH CORRECT HEART RHYTHM	ANESTH - THORAX (CHEST WALL AN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0040U	BCR/ABL1 GENE MAJOR BP QUAN	PATH & LAB - CHEMISTRY	YES	04/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	00406	ANESTH SURGERY OF BREAST	ANESTH - THORAX (CHEST WALL AN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00404	ANESTH SURGERY OF BREAST	ANESTH - THORAX (CHEST WALL AN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00402	ANESTH SURGERY OF BREAST	ANESTH - THORAX (CHEST WALL AN	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00400	ANESTH SKIN EXT/PER/ATRUNK	ANESTH - THORAX (CHEST WALL AN	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	0039U	DNA ANTB 2STRAND HI AVIDITY	PATH & LAB - CHEMISTRY	YES	04/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	0038U	VITAMIN D SRM MICROSAMP QUAN	PATH & LAB - CHEMISTRY	YES	04/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	0036U	XOME TUM & NML SPEC SEQ ALYS	PATH & LAB - CHEMISTRY	YES	04/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	0035U	NEURO CSF PRION PRTN QUAL	PATH & LAB - CHEMISTRY	YES	04/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	00352	ANESTH NECK VESSEL SURGERY	ANESTH - NECK	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00350	ANESTH NECK VESSEL SURGERY	ANESTH - NECK	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0034U	TPMT NUDT15 GENES	Pathology & Laboratory	YES	01/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	0033U	HTR2A HTR2C GENES	Pathology & Laboratory	YES	01/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	00326	ANESTH LARYNX/TRACH LT 1 YR	ANESTH - NECK	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00322	ANESTH BIOPSY OF THYROID	ANESTH - NECK	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00320	ANESTH NECK ORGAN 1YR/GT	ANESTH - NECK	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0030U	RX METAB WARF TRGT SEQ ALYS	Pathology & Laboratory	YES	01/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	00300	ANESTH HEAD/NECK/PTRUNK	ANESTH - NECK	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0029U	RX METAB ADVRS TRGT SEQ ALYS	Pathology & Laboratory	YES	01/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	0027U	JAK2 GENE TRGT SEQ ALYS	Pathology & Laboratory	YES	01/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	0026U	ONC THYR DNA&MRNA 112 GENES	Pathology & Laboratory	YES	01/01/2018	12/31/2078			

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MMAI-Medicare/Medicaid	0025U	TENOFOVIR LIQ CHROM UR QUAN	Pathology & Laboratory	YES	01/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	0024U	GLYCA NUC MR SPECTRSC QUAN	Pathology & Laboratory	YES	01/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	00222	ANESTH HEAD NERVE SURGERY	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00220	ANESTH INTRCRN NERVE	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00218	ANESTH SPECIAL HEAD SURGERY	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00216	ANESTH HEAD VESSEL SURGERY	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00215	ANESTH SKULL REPAIR/FRACT	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00214	ANESTH SKULL DRAINAGE	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00212	ANESTH SKULL DRAINAGE	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00211	ANESTH CRAN SURG HEMOTOMA	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00210	ANESTH CRANIAL SURG NOS	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00192	ANESTH FACIAL BONE SURGERY	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00190	ANESTH FACE/SKULL BONE SURG	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0017U	ONC HMTLMF NEO JAK2 MUT DNA	PATH & LAB - CHEMISTRY	YES	08/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	00176	ANESTH PHARYNGEAL SURGERY	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00174	ANESTH PHARYNGEAL SURGERY	ANESTH - HEAD	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	00172	ANESTH CLEFT PALATE REPAIR	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00170	ANESTH PROCEDURE ON MOUTH	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0016U	ONC HMTLMF NEO RNA BCR/ABL1	PATH & LAB - CHEMISTRY	YES	08/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	00164	ANESTH BIOPSY OF NOSE	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00162	ANESTH NOSE/SINUS SURGERY	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00160	ANESTH NOSE/SINUS SURGERY	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0015F	MELAN FOLLOW-UP COMPLETE	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0014F	COMP PREOP ASSESS CAT SURG	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00148	ANESTH EYE EXAM	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00147	ANESTH IRIDECTOMY	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00145	ANESTH VITREORETINAL SURG	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00144	ANESTH CORNEAL TRANSPLANT	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00142	ANESTH LENS SURGERY	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00140	ANESTH PROCEDURES ON EYE	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0013M	ONC MRNA 5 GEN RECR URTHL CA	PATH & LAB - CHEMISTRY	YES	04/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	0012M	ONC MRNA 5 GEN RSK URTHL CA	CATEGORY II CODES	YES	04/01/2018	12/31/2078			

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MMAI-Medicare/Medicaid	0012F	CAP BACTERIAL ASSESS	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00126	ANESTH TYMPANOTOMY	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00124	ANESTH EAR EXAM	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00120	ANESTH EAR SURGERY	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0011U	RX MNTR LC-MS/MS ORAL FLUID	PATH & LAB - CHEMISTRY	YES	08/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	0011M	ONC PRST8 CA MRNA 12 GEN ALG	Pathology & Laboratory	YES	01/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	0010U	NFCT DS STRN TYP WHL GEN SEQ	PATH & LAB - CHEMISTRY	YES	08/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	00104	ANESTH ELECTROSHOCK	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00103	ANESTH BLEPHAROPLASTY	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00102	ANESTH REPAIR OF CLEFT LIP	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00100	ANESTH SALIVARY GLAND	ANESTH - HEAD	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0009U	ONC BRST CA ERBB2 AMP/NONAMP	PATH & LAB - CHEMISTRY	YES	08/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	0008U	HPYLORI DETCJ ABX RSTNC DNA	PATH & LAB - CHEMISTRY	YES	08/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	0007U	RX TEST PRSMV UR W/DEF CONF	PATH & LAB - CHEMISTRY	YES	08/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	0006M	ONC HEP GENE RISK CLASSIFIER	Path & Lab - CHEMISTRY	YES	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0005U	ONCO PRST8 3 GENE UR ALG	PATH & LAB - CHEMISTRY	YES	05/01/2017	12/31/2078			

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MMAI-Medicare/Medicaid	0005F	OSTEOARTHRITIS COMPOSITE	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0003M	LIVER DIS 10 ASSAYS W/NASH	CATEGORY III CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0002M	LIVER DIS 10 ASSAYS W/ASH	PATH & LAB - CHEMISTRY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0001F	HEART FAILURE COMPOSITE	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0189	TESTOSTERONE PELLET 75 MG	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C2622	PROSTHESIS PENILE NON-INFLATABLE	HCPCS - C CODES - OUTPATIENT PP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1813	PROSTHESIS PENILE INFLATABLE	HCPCS - C CODES - OUTPATIENT PP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9399	UNCLASSIFIED DRUGS OR BIOLOGICALS	HCPCS - C CODES - OUTPATIENT PP	NO	09/01/2017	09/01/2017		Submit claims with medical records	
MMAI-Medicare/Medicaid	S5001	PRESCRIPTION DRUG BRAND NAME	HCPCS - TEMP NATIONAL CODES	NO	09/01/2017	09/01/2017		Submit claims with medical records	
MMAI-Medicare/Medicaid	S5199	PERSONAL CARE ITEM NOS EACH	HCPCS - TEMP NATIONAL CODES	NO	09/01/2017	09/01/2017		Submit claims with medical records	
MMAI-Medicare/Medicaid	T5999	SUPPLY NOT OTHERWISE SPECIFIED	HCPCS - STATE MEDICAID AGENCY	NO	09/01/2017	09/01/2017		Submit claims with medical records	
MMAI-Medicare/Medicaid	S9999	SALES TAX	HCPCS - TEMP NATIONAL CODES	NO	09/01/2017	09/01/2017		Submit claims with medical records	
MMAI-Medicare/Medicaid	V5299	HEARING SERVICE MISCELLANEOUS	HCPCS - HEARING SERVICES	NO	09/01/2017	09/01/2017		Submit claims with medical records	
MMAI-Medicare/Medicaid	J0178	INJECTION AFLIBERCEPT 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	06/24/2020	12/31/2078	Regulatory Compliance		
MMAI-Medicare/Medicaid	L8607	INJ BLK AGT VC MEDIALIZATION 0.1 ML	HCPCS - PROSTHETIC PROCED	YES	07/01/2020	12/31/2078			
MMAI-Medicare/Medicaid	L7259	ELECTRONIC WRIST ROTATOR ANY TYPE	HCPCS - PROSTHETIC PROCED	YES	07/01/2020	12/31/2078			

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MMAI-Medicare/Medicaid	L7499	UPPER EXTREMITY PROSTHESIS NOS	HCPCS - PROSTHETIC PROCED	NO	06/30/2020	06/30/2020		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	A4641	RADIOPHARMACEUTICAL DIAGNOSTIC NOC	HCPCS - MED-SURG SUPPLIES	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	0413T	RMVL CAR MODULJ TRANVNS ELT	CATEGORY III CODES	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	0412T	RMVL CARDIAC MODULJ PLS GEN	CATEGORY III CODES	NO	06/30/2020	06/30/2020			
MMAI-Medicare/Medicaid	K0902	KNEE ORTHOSIS DOUBLE UPRIGHT THIGH & CALF PREFAB	HCPCS - K CODES -DMERCS ONLY	EXPIRED	01/01/2010	07/14/2015			
MMAI-Medicare/Medicaid	K0901	KNEE ORTHOSIS SINGLE UPRIGHT THIGH & CALF PREFAB	HCPCS - K CODES -DMERCS ONLY	EXPIRED	01/01/2010	07/14/2015			
MMAI-Medicare/Medicaid	S0178	LOMUSTINE ORAL 10 MG	HCPCS - TEMP NATIONAL CODES	NON-COV	04/19/2020	12/31/2078			
MMAI-Medicare/Medicaid	S0175	FLUTAMIDE ORAL 125 MG	HCPCS - TEMP NATIONAL CODES	NON-COV	04/19/2020	12/31/2078			
MMAI-Medicare/Medicaid	S0172	CHLORAMBUCIL ORAL 2 MG	HCPCS - TEMP NATIONAL CODES	NON-COV	04/19/2020	12/31/2078			
MMAI-Medicare/Medicaid	S0156	EXEMESTANE 25 MG	HCPCS - TEMP NATIONAL CODES	NON-COV	04/19/2020	12/31/2078			
MMAI-Medicare/Medicaid	S0108	MERCAPTOPURINE ORAL 50 MG	HCPCS - TEMP NATIONAL CODES	NON-COV	04/19/2020	12/31/2078			
MMAI-Medicare/Medicaid	C9407	IODINE I-131 IOBENGUANE DIAGN 1 MCI	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	C9043	INJECTION LEVOLEUCOVORIN 1 MG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	03/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	0377T	ANOSCPY INJ AGENT FOR INCONT	CATEGORY III CODES	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	0009M	FETAL ANEUPLOIDY TRISOM RISK	PATH & LAB - CHEMISTRY	EXPIRED	06/13/2016	12/31/2078			
MMAI-Medicare/Medicaid	M1053	LEG PN MSR VAS WI 3 M PREOP&1 Y P/O	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			

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MMAI-Medicare/Medicaid	M1050	FNC ST MSR ODI WI 3M PREOP&AT 3M PO	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1048	FNC ST MSR ODI WI 3M PREOP&AT 3M PO	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1047	FNC ST MSR OKS 3M PREOP & AT 1 Y PO	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1044	FNC ST MSR ODI WI 3 M PREOP & 1Y PO	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1042	FNC ST MSR ODI WI 3M PREOP AT 1Y PO	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1030	PT W/CLIN INDIC FOR IMAGING OF HEAD	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1002	POC MS PN NO DOC 2ND VST CLN NO RSN	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1001	POC ADRESS MS PN DOC 2ND VISIT CLIN	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	M1000	PAIN SCREENED AS MODERATE TO SEVERE	HCPCS - MEDICAL SERVICES	EXPIRED	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	J1942	INJECTION ARIPIPRAZOLE LAUROXL 1 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	G9947	LEG PN MSR VAS WI 3 M PRE&AT 3 M PO	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9944	BP MSR VAS W/I 3 MO PRE&AT 1 YR P/O	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9941	BP MSR VAS W/I 3 MO PRE&AT 3 MO P/O	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9743	PSYCHIATRIC SX NOT ASSESSED RSN NOS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9742	PSYCHIATRIC SYMPTOMS ASSESSED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9472	WI PAST 2 YRS CNTRL DXA NOT ORD&DOC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			

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MMAI-Medicare/Medicaid	G9186	MOTR SPEECH LIM PROJ GOAL STATUS TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9176	OTH SPEECH LANG LIM D/C STS D/C TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9175	OTH SPEECH LANG LIM PROJ GOAL STAT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9174	OTH SPEECH LANG FUCNT LIMIT CURR TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9173	VOICE FUNCT LIMIT D/C STATUS D/C TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9172	VOICE FUNCT LIMIT PROJ GOAL STAT TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9171	VOICE FUNCT LIMIT CURR STATUS TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9170	MEMORY FUNCT LIMIT D/C STATUS D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9169	MEMORY FUNCT LIMIT PROJ GOAL STS TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9168	MEMORY FUNCT LIMIT CURR STATUS TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9167	ATTN FUNCT LIMIT D/C STATUS D/C TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9166	ATTN FUNCT LIMIT PROJ GOAL STAT TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9165	ATTN FUNCT LIMIT CURR STATUS TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9164	SPOKN LANG EXPRS LIMIT D/C STAT D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9163	SL EXP FCN LMT GOAL TX D/C/END RPRT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9162	SPOKN LANG EXPRS LIMIT CURR STAT TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G9161	SPOKN LANG COMP LIMIT D/C STAT D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9160	SL COMP FCN LMT GL TX D/C/END RPRT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9159	SPOKN LANG COMP LIMIT CURR STAT TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9158	MOTR SPEECH FUNCT LIM D/C STAT D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9036	RIMANTADINE HCI ORAL BRAND-100 MG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9035	OSELTAMIVIR PHOSPH ORAL BRND-75 MG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9034	ZANAMIVIR INHAL POWDER BRAND-10 MG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9033	AMANTADINE HCI ORAL BRAN PER 100 MG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9020	RIMANTADINE HCI ORAL PER 100 MG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9019	OSELTAMIVIR PHOSPHATE ORL PER 75 MG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9018	ZANAMIVIR INHAL POWDER INHAL-10 MG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9017	AMANTADINE HCI ORAL PER 100 MG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8999	MO SPH FCN LIM CUR STS TX&RPRT INTR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8998	SWALLOWING FCN LIM D/C STATUS D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8997	SWLLOW FCN LIM GOAL TX EPIS&D/C TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8996	SWALLOW FCN LIM CUR STATUS INIT TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G8995	OTH PHYS/OCC SB FCN LIM D/C STS D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8994	OTH PHYS/OCCUP TX SUB FCN LIM GL TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8993	OTH PHYS/OCCUP TX SUB FCN LIM CUR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8992	OTH PHYS/OCCUP TX PRIM FCN LIM D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8991	OTH PHYS/OCCUP TX PRIM FCN LIM GOAL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8990	OTH PHYS/OCCUP PRIM FCN LIM CUR TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8989	SELF CARE FUNC LIM D/C STATUS D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8988	SELF CARE FCN LIMITATN GOAL AT D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8987	SLF CARE FCN LIM CUR REP INTERVLS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8986	CAR MOV HNLG OBJ F LIM D/C STS D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8985	CAR MOV HDLG OBJ PROJ GOAL TX OUTST	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8984	CAR MOV HDLG OBJ FCN LIM REP INT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8983	CHNG&MAINT BDY POS F LIM D/C AT D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8982	CHNG&MAINT BDY PSTN FCN LIM PROJ GL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8981	CHNG&MAINT BDY PSTN FCN LIM REP INT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8980	MOB:WLK&MOV ARND FCN LIM D/C AT D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G8979	MOB: WALK MOV AROUND FCN LIM GOAL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8978	MOB:WALK MOV ARND FCN LIM CUR STS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8861	PST 2 YRS DXA ORD&DOC ROS&MED HX OP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8673	RSK-A ST CH R SC N CR M TS R PT NA	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8669	RSK-A ST CH SC E W/H IMPR PT N APP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8665	RSK-A ST CH R S SHLDR IMPR PT N APP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8657	RSK-ADJ F STS FT/ANK IMPR PT N APP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8653	RSK-ADJ F STS SC HIP IMPR PT N APP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8649	RISK-ADJ FUNC STS K IMPR PT NOT APP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G0515	DVLP CS IMP AT M PROB SLV EA 15 MN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	C9447	INJ PHENYLEPHRINE & KET 4 ML VIAL	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	C9408	IODINE I-131 IOBENGUANE TX 1 MCI	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	C9052	INJECTION RAVULIZUMAB-CWVZ 10 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	06/16/2019	12/31/2078			
MMAI-Medicare/Medicaid	C9051	INJECTION OMADACYCLINE 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	06/16/2019	12/31/2078			
MMAI-Medicare/Medicaid	C9050	INJECTION EMAPALUMAB-LZSG 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	06/16/2019	12/31/2078			
MMAI-Medicare/Medicaid	C9049	INJECTION TAGRAXOFUSP-ERZS 10 MCG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	06/16/2019	12/31/2078			

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MMAI-Medicare/Medicaid	C9048	DEXAMETHASONE LAC OPHTH INSR 0.1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	06/16/2019	12/31/2078			
MMAI-Medicare/Medicaid	C9045	INJ MOXTUMOMB PASUDOTX-TDFK 0.01 MG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	03/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	C9044	INJECTION CEMIPLIMAB-RWLC 1 MG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	03/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	C9040	INJECTION FREMANEZUMAB-VFRM 1 MG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	03/01/2019	03/01/2019			
MMAI-Medicare/Medicaid	C9039	INJECTION PLAZOMICIN 5 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	C9038	INJECTION MOGAMULIZUMAB-KPKC 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	C9037	INJECTION RISPERIDONE 0.5 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	C9036	INJECTION PATISIRAN 0.1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	C9035	INJECT ARIPIPRAZOLE LAUROXIL 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	99444	ONLINE E/M BY PHYS/QHP	2008 Code Set	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	98969	ONLINE SERVICE BY HC PRO	MEDICINE - SPECIAL SERVICES, P	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	97127	THER IVNTJ W/FOCUS COG FUNCJ	MEDICINE - PHYSICAL MEDICINE A	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	96155	INTERV HLTH/BEHAV FAM NO PT	MEDICINE - HEALTH AND BEHAVIOR	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0482T	ABSL QUAN MYOCRD BLD FLO PET	CATEGORY III CODES	EXPIRED	01/01/2018	12/31/2078	Carve Out		Please contact eviCore, Inc. for prior authorization of these services at www.eviCore.com, phone 888-693-3211 or fax 844-822-3862.
MMAI-Medicare/Medicaid	0399T	MYOCARDIAL STRAIN IMAGING	CATEGORY III CODES	EXPIRED	10/03/2016	12/31/2078	Carve Out		
MMAI-Medicare/Medicaid	0380T	COMP ANIMAT RET IMAG SERIES	CATEGORY III CODES	EXPIRED	01/01/2010	01/01/2015			

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MMAI-Medicare/Medicaid	0375T	TOTAL DISC ARTHRP ANT APPR	CATEGORY III CODES	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	0357T	CRYOPRESERVATION OOCYTE (S)	CATEGORY III CODES	EXPIRED	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0341T	QUANT PUPILLOMETRY W/RPRT	CATEGORY III CODES	EXPIRED	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	0254T	EVASC RPR ILIAC ART BIFUR	CATEGORY III CODES	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	0206T	CPTR DBS ALYS CAR ELEC DTA	CATEGORY III CODES	EXPIRED	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	0205T	INIRS EACH VESSEL ADD-ON	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0085U	CDTB&VINCULIN IGG ANTB IA	PATH & LAB - CHEMISTRY	EXPIRED	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	0081U	ONC UVEAL MLNMA MRNA 15 GENE	HCPCS - PATH & LAB	EXPIRED	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	J0222	INJECTION PATISIRAN 0.1 MG	HCPCS - DRUGS (NOT ORAL)	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	J9210	INJECTION EMAPALUMAB-LZSG 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	J0291	INJECTION PLAZOMICIN 5 MG	HCPCS - DRUGS (NOT ORAL)	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	J3111	INJECTION ROMOSOZUMAB-AQQG 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	J2798	INJECTION RISPERIDONE 0.5 MG	HCPCS - DRUGS (NOT ORAL)	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	J1303	INJECTION RAVULIZUMAB-CWVZ 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	J0121	INJECTION OMADACYCLINE 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	J3031	INJECTION FREMANEZUMAB-VFRM 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	09/13/2019	12/31/2078			

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MMAI-Medicare/Medicaid	J0122	INJECTION ERAVACYCLINE 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	09/13/2019	12/31/2078			
MMAI-Medicare/Medicaid	S1090	MOMETASONE FUROATE SS IMPL 370 MCG	HCPCS - TEMP CODES	EXPIRED	07/01/2012	12/31/2078			
MMAI-Medicare/Medicaid	Q3026	INJECTION INTERFERON BETA-1A 11 MCG SUBQ USE	HCPCS - TEMP CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	Q0179	ONDANSETRON HCL 8 MG ORL NOT GREATER THAN 48 HR DOSE REGIMEN	HCPCS - TEMP CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	Q0178	HYDROXYZINE PAMOATE 50 MG ORAL NOT GT48 HR DOSE	HCPCS - TEMP CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	Q0176	PERPHENZAINE 8MG ORAL NOT GT48 HR DOSE REGIMEN	HCPCS - TEMP CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	Q0172	CHLORPROMAZINE HCL 25 MG ORAL NOT GT48 HR DOSE	HCPCS - TEMP CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	Q0171	CHLORPROMAZINE HCL 10 MG ORAL NOT GT48 HR DOSE	HCPCS - TEMP CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	Q0170	PROMETHAZINE HCL 25 MG ORAL NOT GT48 HR DOSE	HCPCS - TEMP CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	Q0168	DRONABINOL 5 MG ORAL NOTGT48 HR DOSE REGIMEN	HCPCS - TEMP CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	Q0165	PROCHLORPERAZINE MALEATE 10 MG ORL NOTGT48HR DOSE	HCPCS - TEMP CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	L7274	PROPRTNAL CONTROL 6-12 VOLT LIBERTY UTAH/EQUAL	HCPCS - PROSTHETIC PROCED	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	L7272	ANALOGUE CONTROL UNB OR EQUAL	HCPCS - PROSTHETIC PROCED	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	L5311	SHIN SACH FOOT ENDOSKELETAL SYSTEM	HCPCS - PROSTHETIC PROCED	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	L4380	PNEUMATIC KNEE SPLINT PREFAB INCLUDES FIT&ADJ	HCPCS - ORTHOTIC PROCEDURES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	L3974	SEO ADDITION TO MOBILE ARM SUPPORT SUPINATOR	HCPCS - ORTHOTIC PROCEDURES	EXPIRED	04/01/2010	04/01/2010			

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MMAI-Medicare/Medicaid	L3972	SEO ADD MOBIL ARM OFFSET/LAT ROCKR ARM W/ELAST	HCPCS - ORTHOTIC PROCEDURES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	L3970	SEO ADDITION MOBILE ARM SUPPORT ELEV PROX ARM	HCPCS - ORTHOTIC PROCEDURES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	L3969	SEO MOBIL ARM SUPP MONOSUSP ARM&HND SUPP PRFAB	HCPCS - ORTHOTIC PROCEDURES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	L3968	SEO MOBIL ARM SUPP ATTCH WC BAL FRICTN ARM PRFAB	HCPCS - ORTHOTIC PROCEDURES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	L3966	SEO MOBIL ARM SUPP ATTCH WC BAL RECLIN PRFAB	HCPCS - ORTHOTIC PROCEDURES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	L3965	SEO MOBIL ARM SUPP ATTCH WC BAL ADJ RANCHO PRFAB	HCPCS - ORTHOTIC PROCEDURES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	L3964	SEO MOBIL ARM SUPP ATTCH WC BAL ADJ PRFAB W/FIT	HCPCS - ORTHOTIC PROCEDURES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	L1520	THKAO SWIVEL WALKER	HCPCS - ORTHOTIC PROCEDURES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	L1510	THKAO STANDING FRAME W/WO TRAY AND ACCESSORIES	HCPCS - ORTHOTIC PROCEDURES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	L1500	THORACIC-HIP-KNEE-ANKLE ORTHOTIC MOBILITY FRAME	HCPCS - ORTHOTIC PROCEDURES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	L0430	SP ORTHOTIC ANT-POST-LAT CNTRL INTRFCE MATL CSTM	HCPCS - ORTHOTIC PROCEDURES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	K0737	SKIN PROTECT& PSTN WC CUSHN ADJ WIDTH 22 IN / GREATER THAN	HCPCS - K CODES -DMERCS ONLY	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	K0735	SKIN PROTECTION WC SEAT CUSH ADJ WIDTH 22 INCH/ GREATER THAN	HCPCS - K CODES -DMERCS ONLY	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	J9375	VINCRISTINE SULFATE 2 MG	HCPCS - CHEMO DRUGS	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	J9300	INJECTION GEMTUZUMAB OZOGAMICIN 5 MG	HCPCS - CHEMO DRUGS	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J9291	MITOMYCIN 40 MG	HCPCS - CHEMO DRUGS	EXPIRED	04/01/2010	04/01/2010			

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MMAI-Medicare/Medicaid	J9290	MITOMYCIN 20 MG	HCPCS - CHEMO DRUGS	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	J9140	DACARBAZINE 200 MG	HCPCS - CHEMO DRUGS	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	J9110	INJECTION CYTARABINE 500 MG	HCPCS - CHEMO DRUGS	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	J9097	CYCLOPHOSPHAMIDE LYOPHILIZED 2 G	HCPCS - CHEMO DRUGS	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	J9096	CYCLOPHOSPHAMIDE LYOPHILIZED 1 G	HCPCS - CHEMO DRUGS	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	J9095	CYCLOPHOSPHAMIDE LYOPHILIZED 500 MG	HCPCS - CHEMO DRUGS	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	J9094	CYCLOPHOSPHAMIDE LYOPHILIZED 200 MG	HCPCS - CHEMO DRUGS	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	J9093	CYCLOPHOSPHAMIDE LYOPHILIZED 100 MG	HCPCS - CHEMO DRUGS	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	J9092	CYCLOPHOSPHAMIDE 2 G	HCPCS - CHEMO DRUGS	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	J9091	CYCLOPHOSPHAMIDE 1 G	HCPCS - CHEMO DRUGS	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	J9090	CYCLOPHOSPHAMIDE 500 MG	HCPCS - CHEMO DRUGS	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	J9080	CYCLOPHOSPHAMIDE 200 MG	HCPCS - CHEMO DRUGS	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	J9062	CISPLATIN 50 MG	HCPCS - CHEMO DRUGS	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	J9010	INJECTION ALEMTUZUMAB 10 MG	HCPCS - CHEMO DRUGS	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J9001	INJ DOXORUBICIN HCL ALL LIPID FORMULATIONS 10 MG	HCPCS - CHEMO DRUGS	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	J7302	LEVONORGESTREL-RLSE INTRAUTERN CNTRACPT 52 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	J3487	INJECTION ZOLEDRONICCID ZOMETA 1 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	J2322	INJECTION NANDROLONE DECANOATE UP TO 200 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	J2321	INJECTION NANDROLONE DECANOATE UP TO 100 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	J1825	INJECTION INTERFERON BETA-1A 33 MCG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	J1785	INJECTION IMIGLUCERASE PER UNIT	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	J1680	INJECTION HUMAN FIBRINOGEN CONCENTRATE 100 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	J1441	INJECTION FILGRASTIM 480 MCG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	J1390	INJECTION ESTRADIOL VALERATE UP TO 20 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	J1055	INJ MDRXYPRGESTRON ACTAT CNTRACPT USE 150 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	J1051	INJECTION MEDROXYPROGESTERONE ACETATE 50 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	J0970	INJECTION ESTRADIOL VALERATE UP TO 40 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	J0760	INJECTION COLCHICINE PER 1 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0718	INJECTION CERTOLIZUMAB PEGOL 1 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	J0704	INJECTION BETAMETHASONE SODIUM PHOSPHATE-4 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	J0580	INJECTION PENICILLIN G BENZ TO 2400000 UNITS	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	J0560	INJECTION PENICILLIN G BENZ UP TO 600000 UNITS	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	04/01/2010			

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MMAI-Medicare/Medicaid	J0170	INJECTION ADRENALIN EPINEPHRINE UP 1 ML AMPULE	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	J0152	INJECTION ADENOSINE DIAGNOSTIC USE 30 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	J0128	INJECTION ABARELIX 10 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	G0430	DRUG SCREEN QUAL; MX CLASS NOT CHROMATOGRAPH EA	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G0377	ADMINISTRATION OF VACCINE PART D DRUG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	G0275	RENAL ANGIOGRAPHY NONSELECTIVE 1/BOTH KIDNEYS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	E0628	SEP SEAT LIFT MECH USE W/PT OWND FURN - ELEC	HCPCS - DME	EXPIRED	04/05/2016	12/31/2078			
MMAI-Medicare/Medicaid	E0463	PRSSURE SUPP VENT W/VOL CNTRL INVASV INTERFCE	HCPCS - DME	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0461	VOL CNTRL VENT W/O PRSSUR SUPP NONINVASV INTRFCE	HCPCS - DME	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0460	NEG PRESSURE VENTILATOR; PORTABLE/STATIONARY	HCPCS - DME	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0450	VOL CNTRL VENT W/O PRSSURE SUPP INVASV INTERFCE	HCPCS - DME	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0238	NONELECTRIC HEAT PAD MOIST	HCPCS - DME	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	E0230	ICE CAP OR COLLAR	HCPCS - DME	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	E0220	HOT WATER BOTTLE	HCPCS - DME	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	C9746	TRNSPRNL IMPL PRM ADJ BALLN CNT DVC	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	06/15/2017	12/31/2078			
MMAI-Medicare/Medicaid	C9141	INJ FACTOR VIII PEGYLATED-AUCL 1 IU	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	03/01/2019	12/31/2078			

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MMAI-Medicare/Medicaid	97003	OCCUPATIONAL THERAPY EVALUATION	MEDICINE - PHYSICAL MEDICINE A	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	97001	PHYSICAL THERAPY EVALUATION	MEDICINE - PHYSICAL MEDICINE A	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	96445	CHEMOTX ADMN PRTL CAVITY REQ&W/PRITONEOCNTS	MEDICINE - CHEMOTHERAPY ADMINI	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	95979	ELEC ALYS NSTIM PLS GEN CPLX DP BRN EA 30 MIN	MEDICINE - NEUROLOGY AND NEURO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95978	ELEC ALYS NSTIM PLS GEN CPLX DP BRN 1ST HR	MEDICINE - NEUROLOGY AND NEURO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95975	ELEC ALYS NSTIM PLS GEN CPLX CRNL NRV EA 30 MIN	MEDICINE - NEUROLOGY AND NEURO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95974	ELEC ALYS NSTIM PLS GEN CPLX CRNL NRV 1ST HR	MEDICINE - NEUROLOGY AND NEURO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95973	ELEC ALYS NSTIM PLS GEN CPLX SC/PERPH EA 30 MIN	MEDICINE - NEUROLOGY AND NEURO	EXPIRED	05/01/2017	12/31/2078	Carve Out		Please contact eviCore, Inc. for prior authorization of these services at www.eviCore.com, phone 888-693-3211 or fax 844-822-3862.
MMAI-Medicare/Medicaid	95936	H-REFLEX AMPLT&LATENCY OTH/THN GASTRCN/SOLEUS	MEDICINE - NEUROLOGY AND NEURO	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	95934	H-REFLEX AMPLT&LATENCY GASTRCN/SOLEUS MUSC	MEDICINE - NEUROLOGY AND NEURO	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	95075	INGESTION CHALLENGE TEST	MEDICINE - ALLERGY AND CLINICA	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	95015	IQ TSTS SEQL&INCRL RX/BIOLOGIC/VNM IMMT RXN	MEDICINE - ALLERGY AND CLINICA	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	95010	PERQ TSTS SEQL&INCRL RX/BIOLOGIC/VNM IMMT RXN	MEDICINE - ALLERGY AND CLINICA	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	93982	IMPLANT WIRELESS PRESS SENSOR STUDY ANEURYSM SAC	MEDICINE - NON-INVASIVE VASCUL	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93965	N-INVAS PHYSIOLOGIC STD XTR VEINS COMPL BI STD	MEDICINE - NON-INVASIVE VASCUL	EXPIRED	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	93722	PLETHYSMOGRAPY TOT BDY I&R ONLY	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			

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MMAI-Medicare/Medicaid	93721	PLETHYSMOGRAPY TOT BDY TRCG ONLY W/O I&R	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93720	PLETHYSMOGRAPY TOT BDY W/I&R	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93652	ICAR CATH ABLATION ARRHYTGNIC FOC VENTR TCHYCAR	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	93651	ICAR CATH ABLTJ ARRHYTGNIC FOC SUPVENTR TCHYCAR	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	93556	I SI&R F/NJX PX DURING C-CATHJ PULM&/OR SELECT	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93545	NJX PX C-CATHJ F/SLCTV C ANGRPH	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93544	NJX PX C-CATHJ F/AORTOGRAPY	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93543	INJECTION CARDIAC CATHJ L VENTR/L ATR ANGIOGRAPH	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93542	INJECTION CARDIAC CATHJ R VENTR/R ATR ANGIOGRAPH	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93541	INJECTION CARDIAC CATHETERIZE PULMONARY ANGRPH	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93540	NJX PX C-CATHJ SLCTV OPACIFICJ BPG 1+ C ART	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93539	NJX PX DURING C-CATHJ SLCTV OPACIFICJ CONDUITS	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93529	CMBN R HRT & L HRT CATHETERIZATION THRU EXISTING	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93528	CMBN R HRT CATHETERIZATION W L VENTRICULAR PNXR	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93527	CMBN R HRT & T-SEPTAL L HRT CATHJ INTACT SEPTUM	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93526	COMBINED RIGHT &RETROGRADE L HRT CATHETERIZATION	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			

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MMAI-Medicare/Medicaid	93524	CMBN TRANSSEPTAL &RETROGRADE L HRT CATHETERIZE	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93514	LEFT HEART CATHETERIZATION LEFT VENTR PUNCTURE	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93511	L HRT CATHETERIZATION RETROGRAD BRACHIAL CUTDOWN	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93510	L HRT CATHETERIZATION RETROGRADE BRACHIAL PERQ	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93508	CATH PLACE C ARTERY FOR ANGRPH W/O LEFT CATHJ	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93501	RIGHT HEART CATHETERIZATION	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93237	WR ECG 24 HR FULL SIZE TRCG PHYS R&I	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93236	WR ECG 24 HR FULL-SIZE TRACG W/REPRT	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93235	WR ECG 24 HR FULL-SIZE TRCG W/MNTR/A/PHYS R&I	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93233	WR ECG 24 HR W/O SUPIMPOS WMINI TRACG PHYS R&I	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93232	WR ECG 24 HR W/O SUPIMPOS W/MINI TRACG W/REPRT	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93231	WR ECG 24 HR W/O SUPIMPOS W/MINI TRACG W/REC	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93230	WR ECG 24 HR W/O SUPIMPOS W/MINI TRACG PHYS R&I	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93014	PH1 ECG RHYTHM STRIP 24-HR MNTR 30 D PHYS I&R	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	93012	PH1 ECG RHYTHM STRIP 24-HR MNTR 30 D TRCG	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	92995	PRQ TRLUML CORON ATHERECT W/WO ANGIOP 1 VESSEL	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	12/31/2012			

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MMAI-Medicare/Medicaid	92982	PRQ TRLUML CORONARY BALLOON ANGIOPLASTY 1 VSL	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	92980	TCAT PLMT INTRACORONARY STENT PRQ 1 VESSEL	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	91123	PLSD IRRG FECAL IMPACTION	MEDICINE - GASTROENTEROLOGY	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	91105	GSTR INTUBAJ&ASPIR/LVG	MEDICINE - GASTROENTEROLOGY	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	91055	GSTR INTUBAJ WASHGS&PREPG SLIDES CYTOL SPX	MEDICINE - GASTROENTEROLOGY	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	91052	GA TST NJX STIMULANT GSTR SECRETION	MEDICINE - GASTROENTEROLOGY	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	91012	ESOPHGL MOTILITY STD ACID PRFJ STD	MEDICINE - GASTROENTEROLOGY	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	91011	ESOPHGL MOTILITY STD MECHOLYL/SIMILAR STIMULANT	MEDICINE - GASTROENTEROLOGY	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	91000	ESOPHGL INTUBAJ&COLLJ WASHGS CYTOL SPEC SPX	MEDICINE - GASTROENTEROLOGY	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	90829	IND PSYCTX IA INPT/PRTL HOS/RESDNT 75-80 MIN E/M	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	90828	INDIV PSYCTX IA INPT/PRTL HOSP/RESDNTL 75-80 MIN	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	90827	IND PSYCTX IA INPT/PRTL HOS/RESDNT 45-50 MIN E/M	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	90826	INDIV PSYCTX IA INPT/PRTL HOSP/RESDNTL 45-50 MIN	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	90824	IND PSYCTX IA INPT/PRTL HOS/RESDNT 20-30 MIN E/M	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	90823	INDIV PSYCTX IA INPT/PRTL HOSP/RESDNTL 20-30 MIN	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	90822	IND PSYCTX INPT/PRTL HOSP/RES 75-80 MIN MED E/M	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			

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MMAI-Medicare/Medicaid	90821	INDIV PSYCTX INPT/PRTL HOSP/RESDNTL 75-80 MIN	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	90819	IND PSYCTX INPT/PRTL HOSP/RES 45-50 MIN MED E/M	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	90818	INDIV PSYCTX INPT/PRTL HOSP/RESDNTL 45-50 MIN	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	90817	IND PSYCTX INPT/PRTL HOSP/RES 20-30 MIN MED E/M	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	90816	INDIV PSYCTX INPT/PRTL HOSP/RESDNTL 20-30 MIN	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	90815	INDIV PSYCTX INTERACT OFF/OP 75-80 MIN MED E/M	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	90814	INDIV PSYCTX INTERACTIVE OFFICE/OUTPT 75 MIN	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	90813	INDIV PSYCTX INTERACT OFF/OP 45-50 MIN MED E/M	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	90812	INDIV PSYCTX INTERACTIVE OFFICE/OUTPT 45-50 MIN	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	90811	INDIV PSYCTX INTERACT OFF/OP 20-30 MIN MED E/M	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	90810	INDIV PSYCTX INTERACTIVE OFFICE/OUTPT 20-30 MIN	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	90809	INDIV PSYCTX OFFICE/OUTPT 75-80 MIN W/MED E/M	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	90808	INDIV PSYCTX OFFICE/OUTPATIENT 75-80 MIN	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	90807	INDIV PSYCTX OFFICE/OUTPT 45-50 MIN W/MED E/M	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	90806	INDIV PSYCTX OFFICE/OUTPATIENT 45-50 MIN	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	90805	INDIV PSYCTX OFFICE/OUTPT 20-30 MIN W/MED E/M	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			

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MMAI-Medicare/Medicaid	90802	INTERACTIVE PSYCH DX INTERVIEW EXAM W/PLAY	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	90801	PSYCHIATRIC DIAGNOSTIC INTERVIEW EXAMINATION	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	89235	WATER LOAD	PATH & LAB - OTHER PROCEDURES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	89225	STARCH GRANULES FECES	PATH & LAB - OTHER PROCEDURES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	89141	GSTR INTUBAJ ASPIR&FXJAL COLLJ 3 HR GSTR STIMJ	PATH & LAB - OTHER PROCEDURES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	89140	GSTR INTUBAJ ASPIR&FXJAL COLLJ 2 HR GSTR STIMJ	PATH & LAB - OTHER PROCEDURES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	89135	GSTR INTUBAJ ASPIR&FXJAL COLLJ 1 HR	PATH & LAB - OTHER PROCEDURES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	89130	GSTR DX EA SPEC CHEM ANALYSES/CYTP	PATH & LAB - OTHER PROCEDURES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	89105	DUOL INTUBAJ&ASPIR COLLJ MLT FXJAL SPEC	PATH & LAB - OTHER PROCEDURES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	89100	DUOL INTUBAJ&ASPIR 1 SPEC PLUS TST PX	PATH & LAB - OTHER PROCEDURES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	86903	BLD TYPING AG SCR UNIT RGNT SERUM SCR	PATH & LAB - TRANSFUSION MEDIC	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	82928	GSTR ACID FR/TOT EA SPEC	PATH & LAB - CHEMISTRY	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	82926	GSTR ACID FR&TOT EA SPEC	PATH & LAB - CHEMISTRY	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	78272	VITAMIN B-12 ABSRPJ STDY W/WO INTRINSIC FACT	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78271	VITAMIN B-12 ABSRPJ STUDY W/INTRINSIC FACTOR	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78270	VITAMIN B-12 ABSRPJ STUDY W/O INTRINSIC FACTOR	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	77422	HIGH ENERGY NEUTRON RADJ TX DLVR 1 TX AREA	RADIOLOGY - RADIATION ONCOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76880	US EXTREMITY NON-VASC REAL-TIME IMG	RADIOLOGY - DIAGNOSTIC ULTRASO	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	76001	FLUOROSCOPY SPX GT 1 HOUR PHYS/QHP TIME	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75995	TRLUML ATHRC VISC RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	75994	TRLUML ATHRC RNL RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	75992	TRLUML ATHRC PRPH ART RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	75982	PRQ PLMT INT/EXT BILIARY DRNG CATH/STENT RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75980	PRQ TRANSHEPATC BILIARY DRG W/CONTRAST MNTR RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75961	TCAT RETRIEVAL PRQ IV FOREIGN BODY RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	75960	TCAT STENT ILIAC/LOW EXT ART PRQ/OPN RSI EA VSL	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	75954	EVASC RPR ILIAC ART W/ILIO-ILIAC PROSTH RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75953	PLMT XTN PROSTH EVASC RPR INFRARENAL RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75952	EVASC RPR INFRARENAL AAA/DISSECTION RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75946	IV ULTRASOUND RS&I EACH NON-CORONARY VESSEL	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75945	IV ULTRASOUND RS&I INITIAL VESSEL	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75940	PRQ PLMT IVC FILTER RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	04/01/2010	04/01/2010			

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MMAI-Medicare/Medicaid	75900	EXCHNG CATH THROMBOLYTIC THERAPY W/CONTRAST RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	75896	TRANSCATHETER INFUSION OTHER THAN THROMBOLYSIS	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	75724	ANGRPH RNL BI SLCTV W/FLUSH AORTOGRAM RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	75722	ANGRPH RNL UNI SLCTV W/FLUSH AORTOGRAM RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	75685	ANGIOGRAPHY VERTEBRAL/CERVICAL/&/INTR ACRAN RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	75680	ANGIOGRAPHY CAROTID CERVICAL BILATERAL RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	75676	ANGIOGRAPHY CAROTID CERVICAL UNILATERAL RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	75671	ANGIOGRAPHY CAROTID CEREBRAL BILATERAL RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	75665	ANGIOGRAPHY CAROTID CEREBRAL UNILATERAL RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	75662	ANGIOGRAPHY EXTERNAL CAROTID BI SLCTV RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	75660	ANGIOGRAPHY EXTERNAL CAROTID UNI SLCTV RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	75658	ANIOGRAPHY BRACHIAL RETROGRADE RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	75650	ANGIOGRAPHY CERVICOCEREBRAL CATHETER RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	74327	POSTOP BILIARY STONE RMVL PRQ T-TUBE RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74320	CHOLANGIO&/PANCREATOGRA PHY TRANSHEPATC RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74305	CHOLANGIO&/PANCREATOGRA PHY THRU CATH RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	73542	RAD XM SI JT ARTHG RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	71090	INSJ PM FLUOR&RADIOGRAPY RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	71060	BRONCHOGRAPY BILATERAL RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	71040	BRONCHOGRAPY UNILATERAL RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	71034	RADEX CHEST COMPLETE MINIMUM 4 VIEWS W/FLUORO	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	71023	RADEX CH 2 VIEWS FRONTAL & LATERAL W/FLUORO	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	71022	RADEX CH 2 VIEWS FRONTAL & LATERAL OBLIQUE PRJCJ	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	71015	RADIOLOGIC EXAMINATION CHEST STERO FRONTAL	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	70373	LARYNGOGRAPHY CONTRAST RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69840	REVISION FENESTRATION OPERATION	SURGERY - AUDITORY SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69820	FENESTRATION SEMICIRCULAR CANAL	SURGERY - AUDITORY SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69802	LABYRINTHOTOMY MASTOIDECTOMY	SURGERY - AUDITORY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	66220	REPAIR SCLERAL STAPHYLOMA W/O GRAFT	SURGERY - EYE AND OCULAR ADNEX	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	65805	PARACENTSIS ANT CHAM EYE W/THER REL AQUEOUS SPX	SURGERY - EYE AND OCULAR ADNEX	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	64627	DSTRJ NULYT PVRT FACET JT NRV CRV/THRC EA LVL	SURGERY - NERVOUS SYSTEM	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	64626	DSTRJ NULYT PVRT FACET JT NRV CRV/THRC 1 LVL	SURGERY - NERVOUS SYSTEM	EXPIRED	04/01/2010	01/01/2078			

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MMAI-Medicare/Medicaid	64623	DSTRJ NULYT PVRT FACET JT NRV LMBR/SAC EA LVL	SURGERY - NERVOUS SYSTEM	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	64622	DSTRJ NULYT PVRT FACET JT NRV LMBR/SAC 1 LVL	SURGERY - NERVOUS SYSTEM	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	64614	DESTROY NERVE EXTREM MUSC	SURGERY - NERVOUS SYSTEM	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	64613	CHEMODENERVATION NECK MUSCLE	SURGERY - NERVOUS SYSTEM	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	64577	INC IMPLTJ NSTIM ELTRDS AUTONOMIC NRV	SURGERY - NERVOUS SYSTEM	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	64573	INC IMPLTJ NSTIM ELTRDS CRNL NRV	SURGERY - NERVOUS SYSTEM	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	64550	APPLICATION OF SURFACE NEUROSTIMULATOR	SURGERY - NERVOUS SYSTEM	EXPIRED	10/03/2016	12/31/2078	Carve Out		Please contact eviCore, Inc. for prior authorization of these services at www.eviCore.com, phone 888-693-3211 or fax 844-822-3862.
MMAI-Medicare/Medicaid	64508	INJECTION ANESTHETIC AGENT CAROTID SINUS SPX	SURGERY - NERVOUS SYSTEM	EXPIRED	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	64412	INJECTION ANESTHETIC AGENT SPINAL ACCESSORY NRV	SURGERY - NERVOUS SYSTEM	EXPIRED	07/17/2015	07/17/2015			
MMAI-Medicare/Medicaid	63615	STRTCTC BX ASPIRAT/EXC LESION SPINAL CORD	SURGERY - NERVOUS SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61795	STRTCTC CPTR ASSTD ICRA XTRC/SPI	SURGERY - NERVOUS SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	61612	TRNSXJ/LIG CRTD ART PETROUS CANAL RPR ANAST/GRF	SURGERY - NERVOUS SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61610	TRNSXJ/LIG CAROTID ARTERY SINUS W/RPR ANAST/GRFT	SURGERY - NERVOUS SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61480	CRNEC SUBOCPTL MESENCEPHAL TRCOTOMY/PEDUNCULOTMY	SURGERY - NERVOUS SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61332	EXPLORATION ORBIT TRANSCRANIAL APPROACH W/BIOPSY	SURGERY - NERVOUS SYSTEM	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	58823	DRG PELVIC ABSCESS TRANSVAG/TRANSRECTAL APPR	SURGERY - FEMALE GENITAL SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	55450	LIGATION PRQ VAS DEFERENS UNI/BI SPX	SURGERY - MALE GENITAL SYSTEM	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	50395	INTRO GUIDE PELVIS&/URETER W/DILAT NFROS TRACT	SURGERY - URINARY SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50021	DRAINAGE PERIRENAL/RENAL ABSCESS PRW	SURGERY - URINARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	49420	INSJ IPR CANNULA/CATH F/DRG/DIAL TEMP	SURGERY - DIGESTIVE SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	49081	PRITONEOCNTS ABDL PCNTS/PRTL LVG SBSQ	SURGERY - DIGESTIVE SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	49080	PRITONEOCNTS ABDL PCNTS/PRTL LVG 1ST	SURGERY - DIGESTIVE SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	49061	DRG RETROPERITONEAL ABSCESS PERCUTANEOUS	SURGERY - DIGESTIVE SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	49041	DRG SUBDIAPHRAGMATIC/SUBPHRENIC ABSCESS PRQ	SURGERY - DIGESTIVE SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	49021	DRG PERITONEAL ABSCESS/LOCAL PERITONITIS PRQ	SURGERY - DIGESTIVE SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	48511	XTRNL DRG PSEUDOCYST PANCREAS PRQ	SURGERY - DIGESTIVE SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	47630	BILIARY DUCT STONE XTRJ PRQ VIA BASKET/SNARE	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47561	LAPS SURG W/GID TRANSHEPATC CHOLANGRPH W/BX	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47560	LAPS SURG W/GID TRANSHEPATC CHOLANGRPH W/O BX	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47530	REVISION &/REINSERTION TRANSHEPATC TUBE	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47525	CHANGE PERCUTANEOUS BILIARY DRAINAGE CATHETER	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	47511	INTRODUCJ PERCUT TRANSHEPATC STENT BILIARY DRG	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47510	INTRO PRQ TRANSHEPATC CATH BILIARY DRG	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47505	INJ PX CHOLANGIOGRAPHY VIA CATHETER/T-TUBE	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47500	INJECTION PX PRQ TRANSHEPATIC CHOLANGIOGRAPHY	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	47136	LVR ALTRNSPLJ HTRTPC PRTL/WHL DON ANY AGE	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	47011	HEPATOTOMY PRQ DRG ABSCESS/CYST 1/2 STAGES	SURGERY - DIGESTIVE SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	46762	SPHNCTROP ANAL IMPLTJ ARTIF SPHNCTR	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44901	I&D APPENDICEAL ABSC PRQ	SURGERY - DIGESTIVE SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	43600	BX STOMACH CAPSL TUBE PRORAL 1+ SPECS	SURGERY - DIGESTIVE SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	43458	DILAT ESOPH BALLOON 30 MM DIAM/GT ACHALASIA	SURGERY - DIGESTIVE SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	43456	DILAT ESOPHAGUS BALLOON/DILATOR RETROGRADE	SURGERY - DIGESTIVE SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	43326	ESOPG/GSTR FUNDOPLASTY W/GASTROPLASTY	SURGERY - DIGESTIVE SYSTEM	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	43324	ESOPG/GSTR FUNDOPLASTY	SURGERY - DIGESTIVE SYSTEM	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	43272	ERCP W/ABLTJ LES X RMVL FORCEPS/CAUT/SNARE	SURGERY - DIGESTIVE SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	43271	ERCP W/BALO DILAT AMPULLA BILIARY&/PNCRTC DUX	SURGERY - DIGESTIVE SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	43269	ERCP W/RTRGR RMVL FB&/CHNG TUBE/STENT	SURGERY - DIGESTIVE SYSTEM	EXPIRED	04/01/2010	04/01/2010			

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MMAI-Medicare/Medicaid	43268	ERCP W/INSJ TUBE/STENT BILE/PANCREATIC DUCT	SURGERY - DIGESTIVE SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	43267	ERCP W/INSJ NASOBILIARY/NASOPNCRTC DRAINAGE TUBE	SURGERY - DIGESTIVE SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	43258	UPR GI NDSC ABLTJ LES X RMVL FORCEPS/CAUT/SNARE	SURGERY - DIGESTIVE SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	43256	UPR GI NDSC TNDSC STENT PLMT W/PREDILAT	SURGERY - DIGESTIVE SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	43234	UPPER GI ENDOSCOPY SIMPLE EXAMINATION	SURGERY - DIGESTIVE SYSTEM	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	43228	ESPHGSC RGD/FLX ABLTJ TUM XCP HOT BX/CAUT/SNARE	SURGERY - DIGESTIVE SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	43219	ESPHGSC RGD/FLX W/INSJ PLSTC TUBE/STENT	SURGERY - DIGESTIVE SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	42802	BIOPSY HYPOPHARYNX	SURGERY - DIGESTIVE SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	41500	FIXJ TONGUE MECHANICAL OTHER/THAN SUTURE	SURGERY - DIGESTIVE SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	39531	RPR DIPHRG HRNA CMBN THORACOABDL W/DILAT STRIX	SURGERY - MEDIASTINUM AND DIAP	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	39530	RPR DIPHRG HRNA CMBN THORACOABDL	SURGERY - MEDIASTINUM AND DIAP	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	39520	RPR DIPHRG HRNA ESOPHGL HIATAL TTHRC	SURGERY - MEDIASTINUM AND DIAP	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	39502	RPR PARAESOPHGL HIATUS HRNA TABDL	SURGERY - MEDIASTINUM AND DIAP	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	39400	MEDIASTINOSCOPY INCL BIOPSIES WHEN PERFORMED	SURGERY - MEDIASTINUM AND DIAP	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37620	INTERRUPJ IVC SUTR LIG PLCTJ CLIP XTRVASC IV	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	37250	IV US NON-C VSL DX EVAL&/THER IVNTJ 1ST VSL	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	37210	UTERINE FIBROID EMBOLIZATION PERQ W/RAD GID	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	37209	EXCHNG PREV PLACED IV CATH THROMBOLYTIC THER	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	37207	TCAT PLMT IV STENT OPEN 1ST VESSEL	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	37205	TCAT PLMT IV STENT PERCUTANEOUS 1ST VESSEL	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	37204	TCAT OCCLS/EMBOLJ PRQ NON-CNS NON-HEAD/NCK	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	37203	TCAT RETRIEVAL PRQ INTRAVASCULAR FOREIGN BODY	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	37201	TCAT THER INFUSION THROMBOLYS OTHR/THN CORONARY	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	36120	INTRO NEEDLE/INTRACATH RETROGRADE BRACHIAL ART	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35651	BYP OTH/THN VEIN AORTOFEMPOP	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	35551	BYP W/VEIN AORTOFEMPOP	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	35549	BYP W/VEIN AORTOILIOFEM BI	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	35548	BYP W/VEIN AORTOILIOFEM UNI	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	35495	TRLUML PRPH ATHRC PRQ TIBPRNL TRNK&BRNCH	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	35494	TRLUML PRPH ATHRC PRQ BRCH/CPHLC TRNK/BRNCH EA	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	35493	TRLUML PRPH ATHRC PRQ FEMPOP	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	35492	TRLUML PRPH ATHRC PRQ ILIAC	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			

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MMAI-Medicare/Medicaid	35491	TRLUML PRPH ATHRC PRQ AORTIC	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	35490	TRLUML PRPH ATHRC PRQ RNL/OTH VISC ART	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	35485	TRLUML PRPH ATHRC OPN TIBPRNL TRNK&BRNCH	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	35484	TRLUML PRPH ATHRC OPN BRCH/CPHLC TRNK/BRNCH EA	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	35483	TRLUML PRPH ATHRC OPN FEMPOP	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	35482	TRLUML PRPH ATHRC OPN ILIAC	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	35481	TRLUML PRPH ATHRC OPN AORTIC	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	35480	TRLUML PRPH ATHRC OPN RNL/OTH VISC ART	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	35475	TRLUML BALO ANGIOP PRQ BRCH/CPHLC TRNK/BRNCH EA	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35474	TRLUML BALO ANGIOP PRQ FEMPOP	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	35473	TRLUML BALO ANGIOP PRQ ILIAC	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	35472	TRLUML BALLOON ANGIOPLASTY PERCUTANEOUS AORTIC	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35471	TRLUML BALLOON ANGIOP PRQ RENAL/VISCERAL ART	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35470	TRLUML BALO ANGIOP PRQ TIBPRNL TRNK/BRNCH EA	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	35460	TRLUML BALLOON ANGIOPLASTY OPEN VENOUS	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35459	TRLUML BALO ANGIOP OPN TIBIOPRONEAL TRNK&BRNCH	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			

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MMAI-Medicare/Medicaid	35458	TRLUML BALO ANGIOP OPN BRCH/CPHLC TRNK/BRNCH EA	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35456	TRLUML BALO ANGIOP OPN FEM-POP	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	35454	TRLUML BALO ANGIOP OPN ILIAC	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	35452	TRLUML BALLOON ANGIOPLASTY OPEN AORTIC	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	35450	TRLUML BALOON ANGIOPL OPN RENAL/OTH VISCERAL ART	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34900	EVASC RPR ILIAC ART ILIO-ILIAC PROSTHESIS	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34826	PLMT XTN PROSTH EVASC RPR ARYSM/DSJ EA VSL	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34825	PLMT XTN PROSTH EVASC RPR ARYSM/DSJ 1ST VSL	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34806	TCAT PLACEMENT PHYSIOLOGIC SENSOR ANEURYSMAL SAC	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34805	EVASC RPR AAA AORTO-UNIILIAC/AORTO-UNIFEM PROSTH	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34804	EVASC RPR AAA W/UNIBDY BFRC PROSTH	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34803	EVASC RPR AAA W/MDLR BFRC PROSTH 2 LIMBS	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34802	EVASC RPR AAA W/MDLR BFRC PROSTH 1 LIMB	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	34800	EVASC RPR AAA W/AORTO-AORTIC TUBE PROSTH	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33861	ASCENDING AORTA GRF +-VALVE SSP W/C RCNSTJ	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	33403	VLVP AORTIC VALVE W/TRANSVENTR DILAT W/CARD BYP	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	33401	VALVULOPLASTY AORTIC VALVE OPEN W/INFLOW OCCLUS	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33400	VALVULOPLASTY AORTIC VALVE OPEN W/BYPASS	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33284	RMVL IMPLANTABLE PT-ACTIVATED CAR EVENT RECORDER	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33282	IMPLANTATION PT-ACTIVATED CARDIAC EVENT RECORDER	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32660	THORACOSCOPY W/TOTAL PERICARDIECTOMY	SURGERY - RESPIRATORY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	32657	THRSC W/WEDGE RESCJ LNG 1/MLT	SURGERY - RESPIRATORY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	32605	THORACOSCOPY DX MEDIASTINAL SPACE W/O BIOPSY SPX	SURGERY - RESPIRATORY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	32603	THORACOSCOPY DX PERICARDIAL SAC W/O BIOPSY SPX	SURGERY - RESPIRATORY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	32602	THORACOSCOPY DX LUNGS&PLEURAL SPACE W/BX SPX	SURGERY - RESPIRATORY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	32500	RMVL LNG OTH/THN TOT PNUMEC WEDGE RESCJ 1/MLT	SURGERY - RESPIRATORY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	32422	THORACENTESIS WITH INSERTION TUBE WATER SEAL	SURGERY - RESPIRATORY SYSTEM	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	32421	THORACENTESIS PUNCTURE PLEURAL CAVITY ASPIRATION	SURGERY - RESPIRATORY SYSTEM	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	32420	PNEUMOCENTESIS PUNCTURE LUNG ASPIRATION	SURGERY - RESPIRATORY SYSTEM	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	32402	BIOPSY PLEURA OPEN	SURGERY - RESPIRATORY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	32201	PNEUMONOSTOMY PERCUTANEOUS DRAINAGE ABSCESS/CYST	SURGERY - RESPIRATORY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	32095	THORACOTOMY LIMITED BIOPSY LUNG/PLEURA	SURGERY - RESPIRATORY SYSTEM	EXPIRED	04/01/2010	04/01/2010			

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MMAI-Medicare/Medicaid	31715	TRANSTRACHEAL INJECTION BRONCHOGRAPHY	SURGERY - RESPIRATORY SYSTEM	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	31656	BRNCHSC W/NJX CONTRAST SGMTL BRONCHOG	SURGERY - RESPIRATORY SYSTEM	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	31595	SECTION RECURRENT LARYNGEAL NERVE THER UNI SPX	SURGERY - RESPIRATORY SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31582	LARYNGP LARYN STENOSIS GRF/CORE MOLD W/TRACHT	SURGERY - RESPIRATORY SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31320	LARYNGOTOMY THYROTOMY LARYNGOFISSURE DX	SURGERY - RESPIRATORY SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3045F	HG A1C LEVEL 7.0-9.0PCT	CATEGORY II CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	29590	DENIS-BROWNE SPLINT STRAPPING	SURGERY - MUSCULOSKELETAL SYST	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	28294	CORRJ HALLUX VALGUS W/WO SESMDC W/TDN TRNSPLS	SURGERY - MUSCULOSKELETAL SYST	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	28293	CORRJ HALLUX VALGUS W/WO SESMDC RESCJ JT W/IMPLT	SURGERY - MUSCULOSKELETAL SYST	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	27370	INJECTION KNEE ARTHROGRAPHY	SURGERY - MUSCULOSKELETAL SYST	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27194	CLTX PEL RING FX DISLC DIAST/SUBLXTJ W/MANJ ANES	SURGERY - MUSCULOSKELETAL SYST	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	27193	CLTX PEL RING FX DISLC DIAST/SUBLXTJ W/O MANJ	SURGERY - MUSCULOSKELETAL SYST	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	23331	REMOVAL FOREIGN BODY SHOULDER DEEP	SURGERY - MUSCULOSKELETAL SYST	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	22305	CLOSED TX VERTEBRAL PROCESS FRACTURE	SURGERY - MUSCULOSKELETAL SYST	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21805	OPEN TX RIB FRACTURE W/O FIXATION EACH	SURGERY - MUSCULOSKELETAL SYST	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21495	OPEN TREATMENT HYOID FRACTURE	SURGERY - MUSCULOSKELETAL SYST	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	20005	I&D SOFT TISSUE ABSCESS SUBFASC	SURGERY - MUSCULOSKELETAL SYST	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	20000	INCISION SOFT TISSUE ABSCESS SUPERFICIAL	SURGERY - MUSCULOSKELETAL SYST	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	19295	IMG GID PLMT MTLC LOCLZJ CLIP PRQ BRST BX/ASPIR	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	19291	PREOP PLMT LOCALIZATION WIRE BREAST EACH LESION	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	19290	PREOP PLACEMENT LOCALIZATION WIRE BREAST	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	19103	BREAST BIOPSY VACUUM ASSISTED/ROTATING DEVICE	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	19102	BIOPSY BREAST NEEDLE CORE W/IMAGING GUIDANCE	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	15430	ACELLULAR XENOGRAFT IMPLANT 1ST 100 CM/1 PCT	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	15421	XENOGRAFT TEMP CLOSURE F/S/N/H/F/G/M/D EA 100CM	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	15420	XENOGRF TEMP CLOSURE F/S/N/H/F/G/M/D 1ST 100CM	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	15400	XENOGRAFT TEMP CLOSURE TRUNK/ARM/LEG 1ST 100CM	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	15366	TISS CLTR ALGC DRM F/S/N/H/F/G/M/D EA 100 CM	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	15365	TISS CLTR ALGC DRM F/S/N/H/F/G/M/D 1ST 100 CM	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	15361	TISSUE CLTR ALGC DERMAL T/A/L EA 100CM/EA 1 PCT	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	15360	TISSUE CLTR ALGC DRM TRUNK/ARM/LEG 1ST 100 CM	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	15341	TISS CLTR ALGC SKN EA 25 CM	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			

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MMAI-Medicare/Medicaid	15340	TISSUE CULTURED ALLOGENEIC SKIN 1ST 25CM/LESS THAN	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	15336	ACLR DRM ALGRFT F/S/N/H/F/G/M/D GT EA 100 CM/EA	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	15335	ACLR DRM ALLOGRAFT F/S/N/H/F/G/M/D GT 1ST 100CM	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	15331	ACLR DERMAL ALLOGRAFT TRUNK/ARM/LEG EA 100CM/EA	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	15330	ACLR DERMAL ALLOGRAFT TRUNK/ARM/LEG 1ST 100 CM	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	15321	ALGRFT TEMP CLOSURE F/S/N/H/F/G/M/D EA 100CM	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	15320	ALGRFT TEMP CLOSURE F/S/N/H/F/G/M/D 1ST 100CM	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	15301	ALGRFT TEMPORARY CLOSURE T/A/L EA 100 CM/EA	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	15300	ALGRFT TEMPORARY CLOSURE T/A/L 1ST 100 CM/LESS THAN/1	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	15176	ACLR DRM RPLCMT F/S/N/H/F/G/M/D GT EA 100 CM/EA	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	15175	ACLR DRM RPLCMT F/S/N/H/F/G/M/D GT 1ST 100 CM	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	15171	ACLR DRM RPLCMT T/A/L EA 100 CM/EA 1 PCT BDY	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	15170	ACLR DRM RPLCMT T/A/L 1ST 100 CM/LESS THAN/1 PCT BDY	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	13150	CMPLX RPR E/N/E/L 1.0 CM LT	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	11977	RMVL W/RINSJ IMPLANTABLE CONTRACEPTIVE CAPSULES	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	11975	INSERTION IMPLANTABLE CONTRACEPTIVE CAPSULES	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			

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MMAI-Medicare/Medicaid	11752	EXC NAIL MATRIX PRM RMVL W/AMP TUFT DSTL PHALANX	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	11041	DEBRIDEMENT SKIN FULL THICKNESS	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	11040	DEBRIDEMENT SKIN PARTIAL THICKNESS	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0104U	HERED PAN CA PNL 32 GENES	PATH & LAB - CHEMISTRY	EXPIRED	06/09/2019	12/31/2078			
MMAI-Medicare/Medicaid	0078T	EVASC RPR AAA PSEUDOARYSM ABDL AORTA VISC	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	M0064	BRF OV MONITOR/CHANGING RX PRSCS-TX MENTL D/O	HCPCS - MEDICAL SERVICES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J9265	INJECTION PACLITAXEL 30 MG	HCPCS - CHEMO DRUGS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3150	INJECTION TESTOSTERONE PROPIONATE UP TO 100 MG	HCPCS - DRUGS (NOT ORAL)	YES	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	J3140	INJECTION TESTOSTERONE SUSPENSION UP TO 50 MG	HCPCS - DRUGS (NOT ORAL)	YES	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	J3130	INJECTION TESTOSTERONE ENANTHATE UP TO 200 MG	HCPCS - DRUGS (NOT ORAL)	YES	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	J3120	INJECTION TESTOSTERONE ENANTHATE UP TO 100 MG	HCPCS - DRUGS (NOT ORAL)	YES	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	J2275	INJECTION MORPHINE SULFATE PER 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2271	INJECTION MORPHINE SULFATE 100 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1080	INJECTION TESTOSTERONE CYPIONATE 1 CC 200 MG	HCPCS - DRUGS (NOT ORAL)	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J1070	INJECTION TESTOSTERONE CYPIONATE UP TO 100 MG	HCPCS - DRUGS (NOT ORAL)	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J0150	INJECTION ADENOSINE THERAPEUTIC USE 6 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	93555	I SI&R F/NJX PX DURING C-CATHJ VENTR&/ATR ANGRPH	MEDICINE - CARDIOVASCULAR	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	88349	ELECTRON MICROSCOPY SCANNING	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87622	IADNA PAPILLOMAVIRUS HUMAN QUANTIFICATION	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87621	IADNA PAPILLOMAVIRUS HUMAN AMPLIFIED PROBE TQ	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87620	IADNA PAPILLOMAVIRUS HUMAN DIRECT PROBE TQ	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87001	ANIMAL INOCULATION SMALL ANIMAL W/OBSERVATION	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84127	PORPHYRINS FECES QUALITATIVE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84022	ASSAY OF PHENOTHIAZINE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83925	OPIATE(S) DRUG AND METABOLITES EACH PROCEDURE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83887	ASSAY OF NICOTINE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83866	MUCOPOLYSACCHARIDES ACID SCREEN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83858	METHSUXIMIDE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83840	METHADONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83805	ASSAY OF MEPROBAMATE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83634	LACTOSE URINE QUANTITATIVE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83071	ASSAY OF HEMOSIDERIN QUANTITATIVE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	83055	HEMOGLOBIN SULFHEMOGLOBIN QUALITATIVE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83008	ASSAY OF GUANOSINE MONOPHOSPHATE CYCLIC	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82980	ASSAY OF GLUTETHIMIDE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82975	ASSAY OF GLUTAMINE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82953	GLUC TOLBUTAMIDE TOLERANCE TST	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82742	ASSAY OF FLURAZEPAM	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82690	ASSAY OF ETHCHLORVYNOL	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82666	ASSAY OF EPIANDROSTERONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82654	ASSAY OF DIMETHADIONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82651	ASSAY OF DIHYDROTSTOSTERONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82649	ASSAY OF DIHYDROMORPHINONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82646	ASSAY OF DIHYDROCODEINONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82520	COCAINE/METABOLITE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82205	BARBITURATES NOT ELSEWHERE SPECIFIED	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82145	AMPHETAMINE/METHAMPHETAMINE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82101	ALKALOIDS URINE QUANTITATIVE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	82055	ALCOHOL ANY SPECIMEN EXCEPT BREATH	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82003	ASSAY OF ACETAMINOPHEN	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82000	ASSAY ACETALDEHYDE BLOOD	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80440	THYROTROPIN RELEAS HORMONE HYPRPROLACTINEMIA	PATH & LAB - EVOCATIVE/SUPPRES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80196	DRUG SCREEN QUANTITATIVE SALICYLATE	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80182	DRUG SCREEN QUANTITATIVE NORTRIPTYLINE	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80174	DRUG SCREEN QUANTITATIVE IMIPRAMINE	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80172	DRUG SCREEN QUANTITATIVE GOLD	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80166	DRUG SCREEN QUANTITATIVE DOXEPIN	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80160	DRUG SCREEN QUANTITATIVE DESIPRAMINE	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80154	DRUG SCREEN QUANTITATIVE BENZODIAZEPINES	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80152	DRUG SCREEN QUANTITATIVE AMITRIPTYLINE	PATH & LAB - THERAPEUTIC DRUG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80101	DRUG SCR QUAL 1 DRUG CLASS METH EA DRUG CLASS	PATH & LAB - DRUG TESTING	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80100	DRUG SCR QUAL MLT DRUG CLASSES CHROM EA PX	PATH & LAB - DRUG TESTING	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77421	STRSC X-RAY GDN LOCLZJ TARGET VOL DLVR RADJ THER	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77418	NTSTY MODUL DLVR 1/MLT FLDS/ARCS PR TX SESSION	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	77416	RADJ DLVR 3/GT AREAS CUSTOM BLKING 20MEV/LT	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77414	RADJ DLVR 3/GT AREAS CUSTOM BLKING 11-19MEV	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77413	RADJ DLVR 3/GT AREAS CUSTOM BLKING 6-10MEV	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77411	RADJ DLVR 2 AREAS 3/GT PORTS 1 TX AREA 20 MEV/LT	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77409	RADJ DLVR 2 AREAS 3/GTPORTS 1 MLT BLKS 11-19MEV	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77408	RADJ DLVR 2 AREAS 3/GTPORTS 1 MLT BLKS 6-1MEV	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77406	RADJ DLVR 1 AREA 1/PRLL OPSD PORTS SMPL 20MEV/LT	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77404	RADJ DLVR 1 AREA 1/PRLL OPSD PORTS SMPL 11-19MEV	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77403	RADJ DLVR 1 AREA 1/PRLL OPSD PORTS SMPL 6-10MEV	RADIOLOGY - RADIATION ONCOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77082	DXA BONE DENSITY STUDY VERTEBRAL FRACTURE	RADIOLOGY-DIAGNOSTIC	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76950	US GUIDANCE PLACEMENT RADIATION THERAPY FIELDS	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76645	US BREAST REAL TIME W/IMAGE DOCUMENTATION	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	74291	CHOLECYST ORAL CNTRST ADDL/REPEAT XM/MULT DAY XM	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	72292	RAD S&I PERQ VRTPLS/SACRPLSTY PER VRT BODY CT	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	72291	RAD S&I PERQ VRTPLS/SACRPLSTY PR VRT BODY FLUO	RADIOLOGY - DIAGNOSTIC RADIOLO	YES	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	69405	EUSTACHIAN TUBE CATHJ TRANSTYMPANIC	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	69401	EUSTACHIAN TUBE NFLTJ TRANSNSL W/O CATHJ	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69400	EUSTACHIAN TUBE NFLTJ TRANSNSL CATHJ	SURGERY - AUDITORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	66165	FSTLJ SCLERA GLAUCOMA IRIDENCLEISIS/IRIDOTASIS	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64870	ANASTOMOSIS FACIAL-PHRENIC	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64761	TRANSECTION/AVULSION PUDENDAL NERVE	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	64752	TRANSECTION/AVULSION VAGUS NRV TRANSTHORACIC	SURGERY - NERVOUS SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	62116	RDCTJ CRANIOMEGALIC SKULL W/SIMPLE CRANIOPLASTY	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61875	CRNEC IMPLTJ NSTIM ELTRD CEREBELLAR SUBCORTICAL	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61609	TRNSXJ/LIGATION CAROTID ARTERY SINUS W/O REPAIR	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61542	CRANIOTOMY TOTAL HEMISPHERECTOMY	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61490	CRANIOTOMY LOBOTOMY W/CINGULOTOMY	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61470	CRANIECTOMY SUBOCCIPITAL MEDULLARY TRACTOTOMY	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61440	CRANIOTOMY SECTION TENTORIUM CEREBELLI SPX	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	61334	EXPL ORBIT TRANSCRANIAL W/RMVL FOREIGN BODY	SURGERY - NERVOUS SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45387	COLSC FLX PROX SPLENIC FLXR TNDSC STENT PLMT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45383	COLSC FLX PROX SPLENIC FLXR ABLTJ LES	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	45355	COLSC RGD/FLX TABDL VIA COLOTOMY 1/MLT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45345	SIGMOIDOSCOPY FLX TNDSC STENT PLMT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	45339	SIGMOIDOSCOPY FLX ABLTJ LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44397	COLONOSCOPY STOMA W/TNDSC STENT PLMT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44393	COLONOSCOPY STOMA ABLATION LESION	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44383	ILEOSCOPY STOMA W/TNDSC STENT PLMT	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43350	ESOPHAGOSTOMY FSTLJ ESOPH XTRNL ABDL APPR	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	42508	PAROTID DUCT DIVERSION BI W/EXC 1 SUBMNDBLR GLND	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36822	INSJ CANNULA PROLNG XC-CIRCJ ECMO SPX	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33961	PROLONGED EXTRACORPOREAL CIRCULATION EA ADDL DAY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33960	PROLONGED EXTRACORPOREAL CIRCULATION INIT DAY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33472	VALVOTOMY PULM VALVE OPEN HRT W/INFLOW OCCLUSION	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33332	INSJ GRAFT AORTA/GREAT VESSEL W/SHUN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29715	REMOVAL/BIVALVING TURNBUCKLE JACKET	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29025	APPLICATION TURNBUCKLE JACKET BODY W/HEAD	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	29020	APPLICATION TURNBUCKLE JACKET BODY ONLY	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	21810	TX RIB FRACTURE EXTERNAL FIXATION FLAIL CHEST	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	21800	CLOSED TX RIB FRACTURE UNCOMPLICATED EACH	SURGERY - MUSCULOSKELETAL SYST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0073T	COMPNSTR-BASED BEAM MODLJ TX DLVR INVERSE 3GT FLD	CATEGORY III CODES	YES	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	D9990	CERTI TRANS/SIGN-LANG SER PER VISIT	HCPCS - DENTAL	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	D9961	DUPLICATE/COPY PATIENT'S RECORDS	HCPCS - DENTAL	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	D9946	OCCLU GUARD HARD APPLNCE, PART ARCH	HCPCS-DENTAL-Misc Svcs	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	D9945	OCCLU GUARD SOFT APPLNCE FULL ARCH	HCPCS-DENTAL-Misc Svcs	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	D9944	OCCLUS GUARD HARD APLINCE FULL ARCH	HCPCS-DENTAL-Misc Svcs	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	D9130	TMJ DYSFUNCTION - NON-INVASIVE PT	HCPCS- DENTAL-Palliative	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	D1527	SPACE MNTAIN- REMOVE-BILAT, MANDIB	HCPCS-DENTAL-Space Maint	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	D1526	SPACE MAINTAIN- REMOVE-BILAT, MAXIL	HCPCS-DENTAL-Space Maint	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	D1517	SPACE MAINTAIN-FIXED BILAT MANDIB	HCPCS-DENTAL-Space Maint	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	D1516	SPACE MAINTAIN-FIXED-BILAT MAXIL	HCPCS-DENTAL-Space Maint	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	C9034	INJ DEXAMETHASONE 9PCT IOL 1 MCG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	09/25/2018	12/31/2078			
MMAI-Medicare/Medicaid	0057U	ONC SLD ORG NEO MRNA 51 GENE	ANESTH - INTRATHORACIC	EXPIRED	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	C9042	INJECTION BENDAMUSTINE HCL 1 MG	HCPCS-C CODES-OUTPATIENT PP	EXPIRED	03/01/2019	12/31/2078			

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MMAI-Medicare/Medicaid	92275	ELECTRORETINOGRAPY W/INTERPRETATION & REPORT	MEDICINE - OPHTHALMOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S3855	GENETIC TEST DETECT MUTATIONS PRESENILIN 1 GENE	HCPCS - TEMP NATIONAL CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0144	INJECTION PROPOFOL 10MG	HCPCS - TEMP NATIONAL CODES	EXPIRED	11/04/2014	11/04/2014			
MMAI-Medicare/Medicaid	Q9989	USTEKINUMAB FOR INTRAVENOUS INJECTION 1 MG	HCPCS - TEMP CODES	EXPIRED	06/15/2017	12/31/2078			
MMAI-Medicare/Medicaid	Q9986	INJECTION HYDROXYPROGESTERONE CAPROATE 10 MG	HCPCS - TEMP CODES	EXPIRED	06/15/2017	12/31/2078			
MMAI-Medicare/Medicaid	Q9985	INJECTION HYDROXYPROGESTERONE CAPROATE NOS 10 MG	HCPCS - TEMP CODES	EXPIRED	06/15/2017	12/31/2078			
MMAI-Medicare/Medicaid	Q9984	LEVONORGESTREL-RLS IU CNTRACPT SYS 19.5 MG	HCPCS - TEMP CODES	EXPIRED	06/15/2017	06/15/2017			
MMAI-Medicare/Medicaid	Q9975	INJECTION FACTOR VIII FC FUSION PROTEIN PER IU	HCPCS - TEMP CODES	EXPIRED	04/01/2015	04/01/2015			
MMAI-Medicare/Medicaid	Q9974	INJ MORPHINE SULF PRES-FREE EPID/IT USE 10 MG	HCPCS - TEMP CODES	EXPIRED	11/04/2014	11/04/2014			
MMAI-Medicare/Medicaid	Q9973	INJECTION EPOETIN BETA 1 MICROGRAM NON-ESRD USE	HCPCS - TEMP CODES	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	Q9972	INJ EPOETIN BETA 1 MICROGRAM ESRD ON DIALYSIS	HCPCS - TEMP CODES	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	Q9970	INJECTION FERRIC CARBOXYMALTOSE 1MG	HCPCS - TEMP CODES	EXPIRED	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	Q5102	INJECTION INFLIXIMAB BIOSIMILAR 10 MG	HCPCS - TEMP CODES	EXPIRED	08/02/2016	12/31/2078			
MMAI-Medicare/Medicaid	L7261	ELECTRONIC WRIST ROTATOR FOR UTAH ARM	HCPCS - PROSTHETIC PROCED	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L7260	ELECTRONIC WRIST ROTATOR OTTO BOCK OR EQUAL	HCPCS - PROSTHETIC PROCED	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6025	TRANSCARPAL/MC/PART HND DISARTIC PROS DEVC	HCPCS - PROSTHETIC PROCED	EXPIRED	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	J7335	CAPSAICIN 8% PATCH PER 10 SQUARE CM	HCPCS - DRUGS (NOT ORAL)	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J2994	INJECTION RETEPLASE, 37.6 MG (TWO SINGLE-USE VIALS)	HCPCS - DRUGS (NOT ORAL)	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	J1590	INJECTION GATIFLOXACIN 10 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1446	INJECTION TBO-FILGRASTIM 5 MICROGRAMS	HCPCS - DRUGS (NOT ORAL)	EXPIRED	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	J1060	INJ TESTO CYPIONATE&ESTRADIOL CYPIONATE TO 1 ML	HCPCS - DRUGS (NOT ORAL)	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J0900	INJ TESTO ENANTHATE&ESTRADIOL VALERATETOP 1 CC	HCPCS - DRUGS (NOT ORAL)	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J0151	INJECTION ADENOSINE DIAGNOSTIC USE 1 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9272	LDL VALUE GTEQU 100	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9271	LDL VALUE LT 100	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9253	ADENOMA/OTH NEOPLASM NOT DETECTD SCR COLONOSCOPY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9252	ADENOMA/OTH NEOPLASM DETECTD DUR SCR COLONOSCOPY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9249	PATIENT HAD A MEDICAL VISIT IN THE LAST 6 MONTHS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9248	PT DID NOT HAVE A MEDICAL VISIT IN LAST 6 MOS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9224	DOCUMENTATION MED REASON NOT PERFORM FOOT EXAM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9221	PNEUMOCYSTIS JIROVECI PNEUMONIA PROPHLAXIS PRSC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9220	PCP NOT PRSC 3 MO CD4+ LT500/MM3/CD4PCT LT15PCT MED R	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			

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MMAI-Medicare/Medicaid	G9218	PCP P NOT PRSC 3 MO CD4+ BLW 500/% BLW 15 NO RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9216	PCP PROPH NOT PRSC TIME DIAG HIV RSN NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9215	CD4+ CELL COUNT/% NOT DOC PERFORM RSN NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9214	CD4+ CELL COUNT/CD4+ CELL PERCENTAGE RESULTS DOC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9202	PATIENTS WITH POSITIVE HEPATITIS C ANTIBODY TEST	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9201	VTE PROPH ADMIN DAY OF/AFTER HOSPITAL ADMISSION	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9200	VTE PROPH NOT ADM DAY OF/AFTR HOSP ADMISS NO RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9199	VTE PRPH NOT ADM DAY OF/DAY AFTR HOS ADM DOC RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9195	PT DX MD NOT DOC TRTD AD ENTR 180 DAY CONT TX PH	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9194	PT DX MD DOC TRTD AD ENTR 180 DAY CONT TX PHASE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9193	CLIN DOC PT DX MD NOT AN ELIG CAND AD MED TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G8957	PT NOT RECEIVING MAINT HD AN OP DIALYSIS FACL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8949	DOC PT RSN PT NOT RECEIV CNSL DIET PHYS ACTIVITY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8943	LDL-C RESULT NOT PRESENT/NOT W/I 12 MONTHS PRIOR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8933	SUICIDE RSK NOT ASSESSED INIT EVAL RSN NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8932	SUICIDE RISK ASSESSED AT THE INITIAL EVALUATION	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G8931	ASSESSMENT OF DEPRESS SEV NOT DOC RSN NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8930	ASSESS OF DEP INITIAL EVAL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8905	I INTEND TO REPORT CARDIOVASCULAR PREV MSR GROUP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8904	I INTEND TO REPORT HYPERTENSION MEASURES GROUP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8897	ORAL ASPIRIN/OTH ANTITHROM NOT PRSC RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8896	DOC MED RSN NOT PRSC ORAL ASPIRIN/OTH THERAPY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8895	ORAL ASPIRIN/OTH ANTITHROMBOTIC TX PRESCRIBED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8894	LDL-C NOT PERFORMED REASON NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8893	MOST RECENT LDL-C NOT UNDR CONTRL RESLT DOC &REV	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8892	DOCUMENTATION MEDICAL RSN NOT PERFORM LDL-C TEST	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8891	DOC MED RSN MOST RECENT LDL-C NOT UNDER CONTROL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8890	MOST RECENT LDL-C UNDER CONTROL RESULT DOC & REV	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8889	NO DOCUMENTATION BLOOD PRESS MSR REASON NOT GIVN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8888	MOST RECENT BP NOT UND CONTROL RESULTS DOC & REV	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8887	DOC MEDICAL RSN MOST RECENT BP NOT UND CONTROL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8886	MOST RECENT BLOOD PRESSURE UNDER CONTROL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G8862	PT NOT REC CORTICOSTEROID GT/EQU 10 MG/DAY 60/GT DAY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8860	PTS HAVE RECV STEROIDS GT/EQU10 MG/DAY 60/GTCONS DAY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8859	PT REC CORTICOSTEROID GT/EQU10 MG/DAY 60/GT CONS DAY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8782	COUNSELING DIET & PHYS ACT NOT PERF RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8781	DOC MED RSN PT NOT RECV CNSL DIET & PHYS ACT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8780	COUNSELING DIET & PHYSICAL ACTIVITY PERFORMED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8779	DIABETES SCREENING TEST NOT PERF RSN NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8778	DOC MEDICAL RSN NOT PERFORM DIABETES SCR TEST	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8777	DIABETES SCREENING TEST PERFORMED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8776	SERUM CREATININE TEST NOT PERF REASON NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8775	DOC MEDICAL REASON NOT PER SERUM CREATININE TEST	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8774	SERUM CREATININE TEST RESULT DOCUMENT & REVIEWED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8773	URINE PROTEIN TEST NOT PERFORMD REASON NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8772	DOC MEDICAL REASON NOT PERFRM URINE PROTEIN TEST	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8771	DOCUMENTATION OF DIAGNOSIS OF CHRONIC KIDNEY DZ	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8770	URINE PROTEIN TEST RESULT DOCUMENTED & REVIEWED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G8769	LIPID PROFILE NOT PERFORMED REASON NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8768	DOC MEDICAL REASON FOR NOT PERFORM LIPID PROFILE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8767	LIPID PANEL RESULTS DOCUMENTED AND REVIEWED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8764	ALL QUALITY ACTIONS CV PREV MSR GRP PERFORM PT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8763	ALL QUALITY ACT APPLIC MSR HTN MSR GRP PERF PT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8751	SMOK STS&EXPS SHS HOME NOT ASSESSED RSN NOT GIVN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8740	LVEF NOT PERFORMED/ASSESSED REASON NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8739	LVEF GTEQU 40PCT/DOC NL/MILDLY DPRSD LT VENT SYS FUNC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8738	LVEF LT 40PCT OR DOC SEV/MOD DPERESS LV SYSTOL FUNC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8737	MOST CURRENT LDL-C GTEQU100 MG/DL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8736	MOST CURRENT LDL-C LT100 MG/DL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8707	12-LEAD ELECTROCARDIOGRAM NOT PERF RSN NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8706	DOCUMENT PT REASONS NOT PERFORMING 12-LEAD ECG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8705	DOC MEDICAL RSN NOT PERFORMING 12-LEAD ECG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8704	12-LEAD ELECTROCARDIOGRAM PERFORMED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8703	DOCUMENT PA NOT GIVEN W/I 4 HR SURG INCI/INTRAOP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G8702	DOC PROPH ABX GIVEN W/I 4HR B4 SURG INCI/INTRAOP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8701	REHAB SERVICES WERE NOT ORDERED REASON NOS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8700	REHAB SRVC OCCUP PHYS/SPCH NOT INDIC AT/B4 D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8699	REHAB SRVC OCCUP PHYSICAL/SPCH ORDERED AT/B4 D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8685	LVF TEST NOT PERF PRIOR D/C/PREV 12 MO NO RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8683	LVF TEST NOT PERF PRIOR D/C/PREV 12 MO DOC RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8682	LVF TEST DOC PERF PRIOR D/C OR PREV 12 MONTHS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8632	PROPH PARENT ABX NOT ORD/GVN IN 1 HR SURG NOT GV	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8631	CLIN DOC PT NOT ELIG PROPH P ABX W/IN 1 HR SURG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8630	DOC PROPH PARENT ABX INIT W/IN 1 HR SURG AS ORD	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8629	DOC ORDER PROPH PARENT ABX GIVE W/IN 1 HR SURG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8597	MOST RECENT LDL-C GTEQU100 MG/DL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8595	MOST RECENT LDL-C LT100 MG/DL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8594	LIPID PROFILE NOT PERFORMED REASON NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8593	LIPID PROFILE RESULTS DOCUMENTED AND REVIEWED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8587	NO ANTILIPID TREATMENT AT DISCHARGE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8586	ANTILIPID TREATMENT CONTRAINDICATED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8585	ANTILIPID TREATMENT AT DISCHARGE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8584	NO BETA-BLOCKER AT DISCHARGE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8583	BETA-BLOCKER CONTRAINDICATED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8582	BETA-BLOCKER AT DISCHARGE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8581	NO ANTIPLATELET MEDICATION AT DISCHARGE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8580	ANTIPLATELET MEDICATION CONTRAINDICATED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8579	ANTIPLATELET MEDICATION AT DISCHARGE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8552	ALL QUAL ACTIONS ISCHEMIC VASC DZ MSR PERFORMED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8547	I INTEND TO REPORT THE ISCHEMIC VASCULAR DISEASE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8502	ALL QUAL ACTION APPL MSR BACK PAIN MSR GRP PRFRM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8501	ALL QUAL ACTN APPL MSR PERIOP CARE MSR GRP PRFRM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8493	I INTEND TO REPORT THE BACK PAIN MEASURES GROUP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8492	I INTEND TO RPT THE PERIOPERATIVE CARE MSR GROUP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8464	CLIN DOC PROS CA NOT ELIG ADJVANT HORMONAL TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8406	CLIN DOC PT NOT ELIG LOWER EXT NEURO EXAM MEAS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G8128	CLIN DOC PT NOT ELIG ANTIDEPRESSANT 12 WK AC TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8127	PT DX MD NOT DOC TRTD AD MED DUR 84 DAY AC TX PH	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8126	PT DX MD DOC TRTD AD MED DUR 84 DAY AC TX PHASE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G6058	DRUG CONFIRMATION EACH PROCEDURE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6057	ASSAY OF PHENOTHIAZINE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6056	OPIATE DRUG AND METABOLITES EACH PROCEDURE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6055	ASSAY OF NICOTINE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6054	ASSAY OF METHSUXIMIDE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6053	ASSAY OF METHADONE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6052	ASSAY OF MEPROBAMATE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6051	ASSAY OF FLURAZEPAM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6050	ASSAY OF ETHCHLORVYNOL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6049	ASSAY OF EPIANDROSTERONE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6048	ASSAY OF DIMETHADIONE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6047	ASSAY OF DIHYDROTESTOSTERONE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6046	ASSAY OF DIHYDROMORPHINONE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			

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MMAI-Medicare/Medicaid	G6045	ASSAY OF DIHYDROCODEINONE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6044	ASSAY OF COCAINE OR METABOLITE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6043	ASSAY OF BARBITURATES NOT ELSEWHERE SPECIFIED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6042	ASSAY OF AMPHETAMINE OR METHAMPHETAMINE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6041	ALKALOIDS URINE QUANTITATIVE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6040	ASSAY OF ALCOHOL; ANY SPECIMEN EXCEPT BREATH	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6039	ASSAY OF ACETAMINOPHEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6038	ASSAY OF SALICYLATE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6037	ASSAY OF NORTRIPTYLINE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6036	ASSAY OF IMIPRAMINE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6035	ASSAY OF GOLD	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6034	ASSAY OF DOXEPIN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6032	ASSAY OF DESIPRAMINE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6031	ASSAY OF BENZODIAZEPINES	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6030	ASSAY OF AMITRIPTYLINE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G0922	NO DOC DZ TYPE ANATOMIC LOC & ACT RSN NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G0921	DOCUMENTATION PT REASON NOT BEING ABLE TO ASSESS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0920	TYPE ANATOMIC LOCATION & ACTIVITY ALL DOCUMENTED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0919	FLU IMMUN ORDER/RECOM; VAC NOT AVAILBL TIME VST	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0910	MOST RECENT HEMOGLOBIN LEVEL LTEQU 12.0 G/DL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0909	HEMOGLOBIN LEVEL MSR NOT DOC REASON NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0908	MOST RECENT HEMOGLOBIN LEVEL GT 12.0 G/DL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0479	DR TST PRESUMP;INSTR CHEMISTRY ANLZ	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	01/01/2016			
MMAI-Medicare/Medicaid	G0478	DR TST PRESUMP;INSTR-AST DC OPT OBV	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	01/01/2016			
MMAI-Medicare/Medicaid	G0477	DR TST PRESUMP;READ DC OPT OBV ONLY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	01/01/2016			
MMAI-Medicare/Medicaid	G0464	COLORECTAL CA SCR; STOOL-BASED DNA & F OCCLT HGB	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	G0462	ICH/ICH-SPECIMEN; EA ADD 1/MULTIPLEX AB STAIN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G0461	IMC/IMC PER SPECIMEN; 1ST SNGL/MPX ANTIBODY STN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G0457	NPWT MECH-PWR DVC NOT DME-SES;TOT WNDGT50 SQ CM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G0456	NPWT MCH-PWR DVC NOT DME-SES;TL WND SLT/EQU50 SQ CM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G0434	DRUG SCR NOT CHROMATOGRAPHIC; ANY NUMBER PT ENC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G0419	SURG PATH PROS NEEDLE BIOPSY ANY METH GT60 SPEC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G0418	SURG PATH PROS NEEDLE BIOPSY ANY METH 41-60 SPEC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0417	SURG PATH PROS NEEDLE BIOPSY ANY METH 21-40 SPEC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0251	LINR STEREOTAC RADIOSURG TX ALL LES MAX 5 SESS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0173	LINR ACCELERATOR STEREOTAC RADIOSURG CMPL 1 SESS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0154	DIRECT SKILL NURSE SERVICES HH/HOSPICE EA 15 MIN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C9735	ANOSCOPY; DIRECTED SUBMUCOSAL INJ ANY SUBSTANCE	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9135	FACTOR IX ALPROLIX PER 10 I.U.	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	10/01/2014	10/01/2014			
MMAI-Medicare/Medicaid	C9134	FACTOR XIII TRETTEN PER 10 I.U.	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	C9133	FACTOR IX RIXIBUS PER I.U.	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	C9023	INJECTION TESTOSTERONE UNDECANOATE 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9022	INJECTION ELOSULFASE ALFA 1MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	C9021	INJECTION OBINUTUZUMAB 10 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C1300	HYPRBR O2 UND PRSS FULL BDY CHAMB-30 MIN INTRVL	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	A7043	VACUUM DRAIN BOTTLE&TUBING USE W/IMPL CATHETER	HCPCS - MED-SURG SUPPLIES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7042	IMPLANTED PLEURAL CATHETER EACH	HCPCS - MED-SURG SUPPLIES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99488	COMPLX CHRON CARE COORD W/ PT VST 1ST HR PER MO	E & M - CARE PLAN OVERSIGHT SE	EXPIRED	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	99482	SELECTIVE HEAD HYPOTHERMIA CRITICAL NEONATE	E & M - NON-FACE-TO-FACE SERVI	EXPIRED	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	99481	TOT BODY SYSTEMIC HYPOTHERMIA CRITICAL NEONATE	E & M - NON-FACE-TO-FACE SERVI	EXPIRED	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	88343	IMHISTOCHEM/CYTCHM EA ADDL ANTIBODY SLIDE	PATH & LAB - IMMUNOLOGY	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	80104	DRUG SCRN QUAL MLT CLASS NONCHROMOTOGRAPHIC EACH	PATH & LAB - DRUG TESTING	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	80103	TISSUE PREPARATION DRUG ANALYSIS	PATH & LAB - DRUG TESTING	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80102	DRUG CONFIRMATION EACH PROCEDURE	PATH & LAB - DRUG TESTING	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77328	BRACHYTHERAPY ISODOSE PLAN COMPLEX	RADIOLOGY - RADIATION ONCOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77327	BRACHYTHERAPY ISODOSE PLAN INTERMEDIATE	RADIOLOGY - RADIATION ONCOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77326	BRACHYTHERAPY ISODOSE PLAN SIMPLE	RADIOLOGY - RADIATION ONCOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77315	TELETHERAPY ISODOSE PLAN COMPLETE	RADIOLOGY - RADIATION ONCOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77310	TELETHERAPY ISODOSE PLAN INTERMEDIATE	RADIOLOGY - RADIATION ONCOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	77305	TELETHERAPY ISODOSE PLAN SIMPLE	RADIOLOGY - RADIATION ONCOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36469	1/MLT NJXS SCLRSG SLNS SPIDER VEINS FACE	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	3125F	ESOPH BX RPRT W/DYSPL INFO (PRSNT/ABSNT/UNKNWN)	CATEGORY II CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0344T	TRANSCATH MITRAL VALVE REPAIR W/ PUNCT ADDTL	CATEGORY III CODES	EXPIRED	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	0343T	TRANSCATH MITRAL VALVE REPAIR W/ PUNCT INITIAL	CATEGORY III CODES	EXPIRED	01/01/2014	12/31/2078			

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MMAI-Medicare/Medicaid	0334T	STABLJ SI JOINT FOR ARTHRODESIS PERQ/MIN INVAS	CATEGORY III CODES	EXPIRED	07/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0328T	IMPLT SUBQ DEFIB SYS PROGRAMMING DEVICE EVAL	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0327T	IMPLT SUBQ DEFIB SYS INTERROGATION DEVICE EVAL	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0326T	EPHYS EVAL SUBQ IMPLT DEFIB PRGRMG/REPRGRMG	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0325T	REPOSITN SUBQ IMPLANT DEFIB ELECTRODE/PULSE GEN	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0324T	REMOVAL SUBCUTANEOUS DEFIBRILLATOR ELECTRODE	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0323T	RMVL W/REPLCMT SUBQ IMPLT DEFIB PULSE GENERATOR	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0322T	REMOVAL SUBQ IMPLT DEFIB PULSE GENERATOR	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0321T	INSERTION SUBQ IMPLT DEFIB PLS GEN W/SUBQ ELTRD	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0320T	INSERTION SUBCUTANEOUS DEFIBRILLATOR ELECTRODE	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0319T	INS/REPLCMT SUBQ IMPLT DEFIB SYSTEM W/SUBQ ELTRD	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0248T	OPEN TX RIB FRACTURE W/INT FIXATION UNI 7/GT RIBS	CATEGORY III CODES	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	0247T	OPEN TX RIB FRACTURE W/INT FIX UNI 5-6 RIBS	CATEGORY III CODES	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	0246T	OPEN TX RIB FRACTURE W/INT FIX UNI 3-4 RIBS	CATEGORY III CODES	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	0245T	OPEN TX RIB FRACTURE W/INT FIX UNI 1-2 RIBS	CATEGORY III CODES	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	0239T	BIOIMPEDANCE SPECTROSCOPY LIMB DIFFERENCES	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	0227T	ANOSCOPY HIGH RESOLUTION W/BIOPSY	CATEGORY III CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0226T	ANOSCOPY HIGH RESOLUTION W/SPECIMEN COLLECTION	CATEGORY III CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0199T	PHYSIOL REC TRMR W/ACCEL & GYRO FREQ&AMPL & I&O	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0197T	IFXJ LOCLZ&TRAKG TRGT/PT MTN DUR RADTX EA FXJ	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0181T	CORNEAL HYSTERESIS AIR IMPULSE STIMJ BI W/I&R	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0092T	TOT DISC ARTHRP ANT APPR DSKC PREP CRV EA NTRSPC	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00634	ANESTHESIA LUMBAR CHEMONUCLEOLYSIS	ANESTH - SPINE AND SPINAL CORD	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	00622	ANES THORACIC SPINE & CORD THORACOLUMBAR SYMPTH	ANESTH - SPINE AND SPINAL CORD	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0059T	CRYOPRESERVATION OOCYTES	CATEGORY III CODES	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	00452	ANESTHESIA CLAVICLE & SCAPULA RADICAL SURGERY	ANESTH - THORAX (CHEST WALL AN	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S9152	SPEECH THERAPY RE-EVALUATION	HCPCS - TEMP NATIONAL CODES	NON-COV	05/22/2019	05/22/2019			
MMAI-Medicare/Medicaid	E1570	ADJUSTABLE CHAIR FOR ESRD PATIENTS	HCPCS - DME	NON-COV	05/22/2019	05/22/2019			
MMAI-Medicare/Medicaid	E1500	CENTRIFUGE FOR DIALYSIS	HCPCS - DME	NON-COV	05/22/2019	05/22/2019			
MMAI-Medicare/Medicaid	A9282	WIG ANY TYPE EACH	HCPCS - ADMIN MISC & INVEST	NON-COV	05/22/2019	05/22/2019			
MMAI-Medicare/Medicaid	A4520	INCONTINENCE GARMENT ANY TYPE EACH	HCPCS - MED-SURG SUPPLIES	NON-COV	05/22/2019	05/22/2019			
MMAI-Medicare/Medicaid	Q4172	PURAPLY OR PURAPLY AM PER SQ CM	HCPCS - TEMP CODES	EXPIRED	01/27/2017	12/31/2078			

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MMAI-Medicare/Medicaid	C9750	INSRT/REMV & REPL IC ISCHEMIA MON SYS;CMPL SYS	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	09/17/2018	12/31/2078			
MMAI-Medicare/Medicaid	C9748	TRANSURETHRAL DESTRUC PROS TISS;BY RF WV THRM TX	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	C9744	ULTRASOUND ABDOMINAL WITH CONTRAST	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	C9497	LOXAPINE INHALATION POWDER 10 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	C9493	INJECTION EDARAVONE 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	09/13/2017	12/31/2078			
MMAI-Medicare/Medicaid	C9492	INJECTION DURVALUMAB 10 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	09/13/2017	12/31/2078			
MMAI-Medicare/Medicaid	C9468	INJECTION FACTOR IX GLYCOPEGYLATED REBINYN 1 IU	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9467	INJECTION RITUXIMAB AND HYALURONIDASE 10 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2018	04/01/2018			
MMAI-Medicare/Medicaid	C9466	INJECTION BENRALIZUMAB 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9465	HYALURONAN/DERIVATIVE DUROLANE IA INJ PER DOSE	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9464	INJECTION ROLAPITANT 0.5 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9463	INJECTION APREPITANT 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2018	04/01/2018			
MMAI-Medicare/Medicaid	C9033	INJ FOSNETUPITANT 235 MG & PALONOSETRON 0.25 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	09/25/2018	12/31/2078			
MMAI-Medicare/Medicaid	C9032	INJECTION VORETIGENE NEPARVOVEC-RZYL 1 B VCTR G	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	C9030	INJECTION COPANLISIB 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	C9029	INJECTION GUSELKUMAB 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			

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MMAI-Medicare/Medicaid	C9028	INJECTION INOTUZUMAB OZOGAMICIN 0.1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9024	INJECTION LIP 1 MG DAUNORUBICIN & 2.27 MG CY	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9016	INJECTION TRIPTORELIN EXTENDED RELEASE 3.75 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9015	INJECTION C-1 ESTERASE INHIBITOR HAEGARDA 10 U	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9014	INJECTION CERLIPONASE ALFA 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C8907	MR IMAGING WITHOUT CONTRAST BREAST; BILATERAL	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C8904	MR IMAGING WITHOUT CONTRAST BREAST; UNILATERAL	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0388T	TRANSCATH REMOVAL LEADLESS PM VENTRICULAR	CATEGORY III CODES	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	0516T	INSJ WCS LV ELTRD ONLY	CATEGORY III CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	0515T	INSJ WCS LV COMPL SYS	CATEGORY III CODES	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	33289	TCAT IMPL WRLS P-ART PRS SNR	SURGERY - CARDIOVASCULAR SYSTE	YES	01/01/2019	12/31/2078			
MMAI-Medicare/Medicaid	T1016	CASE MANAGEMENT EACH 15 MINS	HCPCS - STATE MEDICAID AGENCY	NO	01/01/2019	01/01/2019	Regulatory Compliance	Greater than limit of 200 units/year require Prior Auth	
MMAI-Medicare/Medicaid	Q4131	EPIFIX OR EPICORD PER SQ CM	HCPCS - TEMP CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M1068	ADULTS WHO ARE NOT AMBULATORY	HCPCS - MEDICAL SERVICES	NO	01/01/2019	01/01/2019			
MMAI-Medicare/Medicaid	T1003	LPN/LVN SERVICES UP TO 15 MINUTES	HCPCS - STATE MEDICAID AGENCY	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	T1002	RN SERVICES UP TO 15 MINUTES	HCPCS - STATE MEDICAID AGENCY	NO	01/01/2019	01/01/2019	Regulatory Compliance		

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MMAI-Medicare/Medicaid	T1001	NURSING ASSESSMENT/EVALUATION	HCPCS - STATE MEDICAID AGENCY	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	S9128	SPEECH THERAPY IN THE HOME PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	G0299	DIR SNS RN HH/HOSPICE SET EA 15 MIN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2019	01/01/2019	Regulatory Compliance		
MMAI-Medicare/Medicaid	V5290	ALD TRANSMITT MICROPHONE ANY TYPE	HCPCS - HEARING SERVICES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V5289	ALD PERS FM/DM ADPTR/BOOT CPLG RECV	HCPCS - HEARING SERVICES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V5288	ALD PERS FM/DM TRANSMITTER ALD	HCPCS - HEARING SERVICES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V5287	ALD PERS FM/DM RECEIVER NOS	HCPCS - HEARING SERVICES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V5286	ALD PERS BLUE TOOTH FM/DM RECEIVR	HCPCS - HEARING SERVICES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V5285	ALD PERS FM/DM DIR AUDIO INPUT RECV	HCPCS - HEARING SERVICES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V5284	ALD PERS FM/DM EAR LEVEL RECEIVER	HCPCS - HEARING SERVICES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V5283	ALD PERS FM/DM NCK LOOP INDUCT RECV	HCPCS - HEARING SERVICES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V5281	ALD PERS FM/DM SYS MONAURL ANY TYPE	HCPCS - HEARING SERVICES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9110	TELEMON PT HOME ALL EQUIP; PER MTH	HCPCS - TEMP NATIONAL CODES	NO	08/14/2018	08/14/2018			
MMAI-Medicare/Medicaid	Q9994	IN-LINE CARTRIDGE CONTAINING DIGEST ENZYME EACH	HCPCS - TEMP CODES	EXPIRED	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	Q9969	TC-99M NON-HEU COST ADD-ON STDY DS	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q9950	INJ S HEXAFLUORIDE LIPID MSS PER ML	HCPCS - TEMP CODES	NO	01/01/2016	03/03/2016			

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MMAI-Medicare/Medicaid	Q2040	TISAGENLECLEUCEL TO 250 M CAR-POS VI T CELLS-INF	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	Q0044	BRIEF OFFICE VISIT FOR THE SOLE PURPOSE OF MONITORING OR CHA	HCPCS - TEMP CODES	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	P9071	PLASMA PATHOGEN REDUCED FROZEN EA U	HCPCS - PATH & LAB	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	P9070	PL POOLD MX DNR PATH RDUC FRZN EA U	HCPCS - PATH & LAB	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	L8605	INJ BLK AGT DX/HA CP IMPL ANAL 1 ML	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L7902	TENSION RING VAC ERECT DEVC REPL EA	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5859	ADD LW EXT PROS KN-SHN PROG FLX/EXT	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L3913	HFO W/O JOINTS CUSTOM FABRICATED	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7503	TACROLIMUS EXT RELEASE ORAL 0.25 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	J1050	INJ MEDROXYPROGESTERNE ACETATE 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0716	INJ CENTRUROIDS IMM FAB2 TO 120 MCI	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0714	INJ CFTAZDM & AVIBCTM 0.5 G/0.125 G	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	J0695	INJ CEFTOLOZANE 50 MG & TAZ 25 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9686	ONSITE NURS FAC CONF SEP & DISTINCT FROM E & M	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	11/01/2016	11/01/2016			
MMAI-Medicare/Medicaid	G9676	PT 40-75 YRS BEG MSR PRD T 1/2 DIAB	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9674	PATIENTS W/CLINICAL ASCVD DIAGNOSIS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			

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MMAI-Medicare/Medicaid	G9665	PT NO CUR STATN USR/NO ORD STATN TX	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9664	PT CUR STATIN USR/RCVD ORD STATN TX	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9658	A TRAN CARE PROT/HO TOOL/CHECKLIST	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9655	A TRAN OF CARE PROT/H/O TL/CHCKLIST	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9646	PATIENTS W/90 DA MRS SCORE 0 TO 2	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9645	PT NOT F ABST SMK PRI ANES D SX/PCR	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9644	PT ABST FROM SMOK PRI ANES D SX/PCR	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9622	PT NOT ID UNHLTHY ALC USR SCR ALC U	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9621	PT ID UNHLTHY ALC USR SCR&BRF COUNS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9608	IORT CYSTSCPY NOT P EVL LW TRCT INJ	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9606	IORT CYSTSCPY PERF EVAL LW TRCT INJ	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9605	PT SURV SCRE NO IMPRV BASE FLW TX	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9604	PATIENT SURVEY RSLT NOT AVAILABLE	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9603	PT SURV SCRE IMPRV FROM BASE FLW TX	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9598	AA 5.5-5.9 CM MX D CL CT/MI D AX CT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9597	PED PT MI HD TRMA NOT LW RSK PECARN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			

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MMAI-Medicare/Medicaid	G9593	PED PT M BLNT HD TRMA LW RSK PECARN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9544	PT THAT DO NOT HAVE THE FILTER RMVD	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9543	DOC AT LEAST TWO ATTEMPTS REACH PT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9542	DOC RE-ASSESS APPROP FILTR RMVL 3 M	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9541	FILTER REMOVED W/I 3 MO OF PLACEMNT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9540	PATIENT ALIVE 3 MOS POST PROCEDURE	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9539	INTENT FOR PTNTL REMV TIME OF PLCMT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9538	ADVANCED BRAIN IMAGING WAS ORDERED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9536	DOCUMENTATION OF MED RSN ORD ADV BRAIN IMAG STDY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9535	PATIENTS WITH A NORMAL NEUROLOGICAL EXAMINATION	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9534	ADVANCED BRAIN IMAGING WAS NOT ORDERED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9533	PT MIN BLNT HD TRMA NO INDCAT HD CT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9529	PT MIN BLNT HD TRMA APPROP INDCT CT	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9518	DOCUMENTATION OF ACTIVE INJ DRUG US	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9517	PT NO IMPRV VA PREOP LVL 90D S NO R	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9516	PT ACHVD IMPRV VA PREOP LVL 90 D SX	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			

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MMAI-Medicare/Medicaid	G9515	PT DID NOT RQR RTN OR W/I 90 D SURG	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9514	PT RQR RTN TO OR W/I 90 D OF SURG	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9512	INDIVIDUAL HAD A PDC OF 0.8/GREATER	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9508	DOC PT IS NOT ON STATIN MEDICATION	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9507	DOC PT ON STATN MED/DOC VALID CNTRA	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9505	ABX PRSC 10 D AFT ON SX DOC MED RSN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9502	DOC MED RSN FOR NOT PERF FOOT EXAM	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9480	ADMISSION TO MCCM PROGRAM	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9479	SRVC PRF QUAL PHARM HOSPICE EA 15 M	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9478	SRVC PRF OTH QUAL TH HOSPCE EA 15 M	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9477	SRVC PRF CARE COORD HOSPICE EA 15 M	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9476	SRVC PRF VOLUNTEER HOSPICE EA15 MIN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9475	SRVC PERF OTH COUNS HSPCE EA 15 MIN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9474	SRVC PRF DIET CNSLR HOSPICE EA 15 M	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9473	SRVC PERF CHAPLN HOSPICE EA 15 MIN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G8970	NO RISK FACTOR/1 MOD RISK FACTOR TE	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G8962	CARD STRESS IMAG TEST PERF ANY RSN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8961	CRD SS IMAG L RSK PT PREOP 30 D SRG	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8958	ASMT ADEQ VOL M NOT DOC RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8956	PT RCV MAINT HEMODIAL O/P DIALY FAC	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8946	MIN INVSV BX METH ATMPT NO DX BR CA	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8944	AJCC MELANOMA CANCER STGE 0-IIC MEL	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8937	CLN NOT PRSC ACE INH/ARB RSN NOT GV	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8935	CLINICIAN PRSC ACE INHIB/ARB TX	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0483	DR TST DEFIN DR ID M P D 22/M DR CL	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	01/01/2016			
MMAI-Medicare/Medicaid	G0482	DR TST DEFN DR ID M P D 15-21 DR CL	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	01/01/2016			
MMAI-Medicare/Medicaid	G0481	DR TST DEFIN DR ID M P D 8-14 DR CL	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	01/01/2016			
MMAI-Medicare/Medicaid	G0480	DR TST DEFIN DR ID M P D 1-7 DR CL	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	01/01/2016			
MMAI-Medicare/Medicaid	G0476	INF AGT DTCT DNA/RNA; HPV ADD PAP T	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G0475	HIV ANTIGEN/ANTIBODY COMB ASSAY SCR	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G0458	LDR PROSTATE BT SERVICE COMPOS RATE	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0455	PREP IT FEC MICROBIOTA ASMT D SPEC	HCPCS - PROC/PROF SERVICES (TE	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	G0454	PHYS DOC F2F DME DET PRF NP PA/CNS	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0453	C IO NEUROPHYS MON OUTSD OR EA 15 M	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0452	MOLECULAR PATH PROC;PHYS INTEPR REP	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0296	CNSL VST DISCUSS LDCT LW DS CT SCAN	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	E0670	SEG PNEU APPL P C INT 2 F LEG TRNK	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C9741	RHC W/IMPLANTATION WIRELESS PRESS SENS PULM ART	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9608	PC TL REV CHRN TOT OCCL; EA ADD BR	HCPCS - C CODES - OUTPATIENT PP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9607	PERQ TL REV CHRN TOT OCCL; 1 VESSEL	HCPCS - C CODES - OUTPATIENT PP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9606	PC TL REV AC TOT/SUBTOT OCCL 1 VES	HCPCS - C CODES - OUTPATIENT PP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9605	PERQ TL REV OF/THRU CABG;EA ADD BR	HCPCS - C CODES - OUTPATIENT PP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9604	PERQ TL REVISION OF/THRU CABG;1 VES	HCPCS - C CODES - OUTPATIENT PP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9603	PERQ TL COR ATHERECT;EA ADD BR MCA	HCPCS - C CODES - OUTPATIENT PP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9602	PERQ TL CORONARY ATHERECT; 1 MCA/BR	HCPCS - C CODES - OUTPATIENT PP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9601	PC TRNSCATH PLCMT; EA ADD BR MAJ CA	HCPCS - C CODES - OUTPATIENT PP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9600	PERQ TRANSCATH PLCMT; 1 MAJ CA/BR	HCPCS - C CODES - OUTPATIENT PP	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9275	INJ HEXAMINOLEVULINATE HCI 100 MG PER STUDY DOSE	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	C9031	LUTETIUM LU 177 DOTATATE THERAPEUTIC 1 MCI	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	07/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	C1822	GEN NEUROSTIM HI FREQ RECHARG BATT	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	A4435	OST POUCH DRN HI OP EXT WR BARR EA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4337	INCONT SPL RECTAL INSRT ANY TYPE EA	HCPCS - MED-SURG SUPPLIES	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	99486	SUPRV INTERFAC TRNSPORT ADDL	E & M - PATIENT TRANSPORT	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99485	SUPRV INTERFACILTY TRANSPORT	E & M - PATIENT TRANSPORT	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99467	PED CRIT CARE TRANSPORT ADDL	E & M - PATIENT TRANSPORT	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99466	PED CRIT CARE TRANSPORT	E & M - PATIENT TRANSPORT	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99464	ATTENDANCE AT DELIVERY	E & M - NEWBORN CARE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99380	NURSING FAC CARE SUPERVISION	E & M - CARE PLAN OVERSIGHT SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99379	NURSING FAC CARE SUPERVISION	E & M - CARE PLAN OVERSIGHT SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99378	HOSPICE CARE SUPERVISION	E & M - CARE PLAN OVERSIGHT SE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99377	HOSPICE CARE SUPERVISION	E & M - CARE PLAN OVERSIGHT SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99375	HOME HEALTH CARE SUPERVISION	E & M - CARE PLAN OVERSIGHT SE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99374	HOME HEALTH CARE SUPERVISION	E & M - CARE PLAN OVERSIGHT SE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99360	PHYSICIAN STANDBY SERVICES	E & M - PROLONGED SERVICES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	99288	DIRECT ADVANCED LIFE SUPPORT	E & M - EMERGENCY DEPARTMENT S	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99177	OCULAR INSTRUMNT SCREEN BIL	MEDICINE - OTHER SERVICES AND	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	99174	OCULAR INSTRUMNT SCREEN BIL	MEDICINE - OTHER SERVICES AND	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99090	ANALYSIS CLINICAL DATA STORED IN COMPUTERS	MEDICINE - SPECIAL SERVICES, P	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99078	GROUP HEALTH EDUCATION	MEDICINE - SPECIAL SERVICES, P	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99071	PATIENT EDUCATION MATERIALS	MEDICINE - SPECIAL SERVICES, P	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99070	SPECIAL SUPPLIES PHYS/QHP	MEDICINE - SPECIAL SERVICES, P	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99002	DEVICE HANDLING PHYS/QHP	MEDICINE - SPECIAL SERVICES, P	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99001	SPECIMEN HANDLING PT-LAB	MEDICINE - SPECIAL SERVICES, P	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99000	SPECIMEN HANDLING OFFICE-LAB	MEDICINE - SPECIAL SERVICES, P	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	97755	ASSISTIVE TECHNOLOGY ASSESS	MEDICINE - PHYSICAL MEDICINE A	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	97537	COMMUNITY/WORK REINTEGRATION	MEDICINE - PHYSICAL MEDICINE A	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	97535	SELF CARE MNGMENT TRAINING	MEDICINE - PHYSICAL MEDICINE A	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	97530	THERAPEUTIC ACTIVITIES	MEDICINE - PHYSICAL MEDICINE A	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	96120	NEUROPSYCHOLOG TESTING COMPUTER W/PROF I&R	MEDICINE - CENTRAL NERVOUS SYS	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	96103	PSYCHOLOGICAL TESTING COMPUTER W/PROF I&R	MEDICINE - CENTRAL NERVOUS SYS	EXPIRED	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	96102	PSYCHOLOGICAL TESTING ADMN BY TECH PR HR	MEDICINE - NEUROLOGY AND NEURO	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	96101	PSYCHOLOGICAL TESTING PR HR WITH PATIENT	MEDICINE - NEUROLOGY AND NEURO	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	96020	FUNCTIONAL BRAIN MAPPING	MEDICINE - CENTRAL NERVOUS SYS	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	96004	PHYS REVIEW OF MOTION TESTS	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95962	ELECTRODE STIM BRAIN ADD-ON	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95961	ELECTRODE STIMULATION BRAIN	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95954	EEG MONITORING/GIVING DRUGS	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95940	IONM IN OPERATNG ROOM 15 MIN	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95924	ANS PARASYMP & SYMP W/TILT	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95912	NRV CNDJ TEST 11-12 STUDIES	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95911	NRV CNDJ TEST 9-10 STUDIES	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95910	NRV CNDJ TEST 7-8 STUDIES	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95909	NRV CNDJ TST 5-6 STUDIES	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95908	NRV CNDJ TST 3-4 STUDIES	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95907	NVR CNDJ TST 1-2 STUDIES	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95830	INSERT ELECTRODES FOR EEG	MEDICINE - NEUROLOGY AND NEURO	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	95134	IMMNTX 5 STING INSECTS	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95133	IMMNTX 4 STING INSECTS	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95132	IMMNTX 3 STING INSECTS	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95131	IMMNTX 2 STING INSECTS	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95130	IMMNTX 1 STING INSECT	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95120	IMMUNOTHERAPY ONE INJECTION	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95079	INGEST CHALLENGE ADDL 60 MIN	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	95076	INGEST CHALLENGE INI 120 MIN	MEDICINE - ALLERGY AND CLINICA	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94777	PED HOME APNEA REC REPORT	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94774	PED HOME APNEA REC COMPL	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94610	SURFACTANT ADMIN THRU TUBE	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94453	HAST W/OXYGEN TITRATE	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94452	HAST W/REPORT	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94016	REVIEW PATIENT SPIROMETRY	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	94014	PATIENT RECORDED SPIROMETRY	MEDICINE - PULMONARY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93750	INTERROGATION VAD IN PERSON	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	93745	SET-UP CARDIOVERT-DEFIBRILL	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93657	TX L/R ATRIAL FIB ADDL	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93293	PM PHONE R-STRIP DEVICE EVAL	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93292	WCD DEVICE INTERROGATE	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93281	PM DEVICE PROGR EVAL MULTI	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93280	PM DEVICE PROGR EVAL DUAL	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93272	ECG/REVIEW INTERPRET ONLY	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93268	ECG RECORD/REVIEW	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93229	REMOTE 30 DAY ECG TECH SUPP	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93228	REMOTE 30 DAY ECG REV/REPORT	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93050	ART PRESSURE WAVEFORM ANALYS	MEDICINE - CARDIOVASCULAR	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	93016	CARDIOVASCULAR STRESS TEST	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93015	CARDIOVASCULAR STRESS TEST	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92973	PRQ CORONARY MECH THROMBECT	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92944	PRQ CARD REVASC CHRONIC ADDL	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92943	PRQ CARD REVASC CHRONIC 1VSL	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	92941	PRQ CARD REVASC MI 1 VSL	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92938	PRQ REVASC BYP GRAFT ADDL	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92937	PRQ REVASC BYP GRAFT 1 VSL	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92934	PRQ CARD STENT/ATH/ANGIO	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92933	PRQ CARD STENT/ATH/ANGIO	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92929	PRQ CARD STENT W/ANGIO ADDL	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92928	PRQ CARD STENT W/ANGIO 1 VSL	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92925	PRQ CARD ANGIO/ATHRECT ADDL	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92924	PRQ CARD ANGIO/ATHRECT 1 ART	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92921	PRQ CARDIAC ANGIO ADDL ART	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92920	PRQ CARDIAC ANGIOPLAST 1 ART	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	91112	GI WIRELESS CAPSULE MEASURE	MEDICINE - GASTROENTEROLOGY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	90962	ESRD SERV 1 VISIT P MO 20+	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90961	ESRD SRV 2-3 VSTS P MO 20+	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90960	ESRD SRV 4 VISITS P MO 20+	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90959	ESRD SERV 1 VST P MO 12-19	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	90958	ESRD SRV 2-3 VSTS P MO 12-19	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90957	ESRD SRV 4 VSTS P MO 12-19	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90956	ESRD SRV 1 VISIT P MO 2-11	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90955	ESRD SRV 2-3 VSTS P MO 2-11	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90954	ESRD SERV 4 VSTS P MO 2-11	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90947	DIALYSIS REPEATED EVAL	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90945	DIALYSIS ONE EVALUATION	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90935	HEMODIALYSIS ONE EVALUATION	MEDICINE - DIALYSIS	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90889	PREPARATION OF REPORT	MEDICINE - PSYCHIATRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90875	PSYCHOPHYSIOLOGICAL THERAPY	MEDICINE - PSYCHIATRY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	90863	PHARMACOLOGIC MGMT W/PSYTX	MEDICINE - PSYCHIATRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90840	PSYTX CRISIS EA ADDL 30 MIN	MEDICINE - PSYCHIATRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90839	PSYTX CRISIS INITIAL 60 MIN	MEDICINE - PSYCHIATRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90792	PSYCH DIAG EVAL W/MED SRVCS	MEDICINE - PSYCHIATRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90791	PSYCH DIAGNOSTIC EVALUATION	MEDICINE - PSYCHIATRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90785	PSYTX COMPLEX INTERACTIVE	MEDICINE - PSYCHIATRY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	88375	OPTICAL ENDOMICROSCPY INTERP	PATH & LAB - SURGICAL PATHOLOG	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87633	RESP VIRUS 12-25 TARGETS	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87632	RESP VIRUS 6-11 TARGETS	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87539	HIV-2 QUANT&REVRSE TRNSCRIPJ	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87538	HIV-2 PROBE&REVRSE TRNSCRIPJ	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87536	HIV-1 QUANT&REVRSE TRNSCRPJ	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87535	HIV-1 PROBE&REVERSE TRNSCRPJ	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87522	HEPATITIS C REVRS TRNSCRPJ	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87521	HEPATITIS C PROBE&RVRS TRNSC	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	87498	ENTEROVIRUS PROBE&REVRS TRNS	PATH & LAB - MICROBIOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86835	HLA CLASS II SEMIQUANT PANEL	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86834	HLA CLASS I SEMIQUANT PANEL	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86833	HLA CLASS II HIGH DEFIN QUAL	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86832	HLA CLASS I HIGH DEFIN QUAL	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86831	HLA CLASS II PHENOTYPE QUAL	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86830	HLA CLASS I PHENOTYPE QUAL	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	86829	HLA CLASS I/II ANTIBODY QUAL	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86828	HLA CLASS I&II ANTIBODY QUAL	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86711	JOHN CUNNINGHAM ANTIBODY	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86329	IMMUNODIFFUSION NES	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86153	CELL ENUMERATION PHYS INTERP	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86152	CELL ENUMERATION & ID	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81599	UNLISTED MAAA	PATH & LAB - CYTOGENETIC STUDI	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	81512	FTL CGEN ABNOR FIVE ANAL	PATH & LAB - CYTOGENETIC STUDI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81511	FTL CGEN ABNOR FOUR ANAL	PATH & LAB - CYTOGENETIC STUDI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81510	FTL CGEN ABNOR THREE ANAL	PATH & LAB - CYTOGENETIC STUDI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81509	FTL CGEN ABNOR 3 PROTEINS	PATH & LAB - CYTOGENETIC STUDI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81508	FTL CGEN ABNOR TWO PROTEINS	PATH & LAB - CYTOGENETIC STUDI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81506	ENDO ASSAY SEVEN ANAL	PATH & LAB - CYTOGENETIC STUDI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81503	ONCO (OVAR) FIVE PROTEINS	PATH & LAB - CYTOGENETIC STUDI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	81500	ONCO (OVAR) TWO PROTEINS	PATH & LAB - CYTOGENETIC STUDI	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78266	GASTRIC EMPTYING IMAG STUDY	RADIOLOGY - NUCLEAR MEDICINE	NO	01/01/2016	03/03/2016			

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MMAI-Medicare/Medicaid	78265	GASTRIC EMPTYING IMAG STUDY	RADIOLOGY - NUCLEAR MEDICINE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	78072	PARATHYRD PLANAR W/SPECT&CT	RADIOLOGY - NUCLEAR MEDICINE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	78071	PARATHYRD PLANAR W/WO SUBTRJ	RADIOLOGY - NUCLEAR MEDICINE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	78014	THYROID IMAGING W/BLOOD FLOW	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78013	THYROID IMAGING W/BLOOD FLOW	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78012	THYROID UPTAKE MEASUREMENT	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	76886	US EXAM INFANT HIPS STATIC	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	76885	US EXAM INFANT HIPS DYNAMIC	RADIOLOGY - DIAGNOSTIC ULTRASO	NO	12/14/2017	12/14/2017			
MMAI-Medicare/Medicaid	75898	FOLLOW-UP ANGIOGRAPHY	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	73551	X-RAY EXAM OF FEMUR 1	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	73522	X-RAY EXAM HIPS BI 3-4 VIEWS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	73521	X-RAY EXAM HIPS BI 2 VIEWS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	73502	X-RAY EXAM HIP UNI 2-3 VIEWS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	73501	X-RAY EXAM HIP UNI 1 VIEW	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	72083	X-RAY EXAM ENTIRE SPI 4/5 VW	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	72082	X-RAY EXAM ENTIRE SPI 2/3 VW	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2016	03/03/2016			

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MMAI-Medicare/Medicaid	72081	X-RAY EXAM ENTIRE SPI 1 VW	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	72050	X-RAY EXAM NECK SPINE 4/5VWS	RADIOLOGY - DIAGNOSTIC RADIOLO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	69209	REMOVE IMPACTED EAR WAX UNI	SURGERY - NERVOUS SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	65800	DRAINAGE OF EYE	SURGERY - EYE AND OCULAR ADNEX	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64463	PVB THORACIC CONT INFUSION	SURGERY - NERVOUS SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	64462	PVB THORACIC 2ND+ INJ SITE	SURGERY - NERVOUS SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	64461	PVB THORACIC SINGLE INJ SITE	SURGERY - NERVOUS SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	61651	EVASC PRLNG ADMN RX AGNT ADD	SURGERY - NERVOUS SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	61650	EVASC PRLNG ADMN RX AGNT 1ST	SURGERY - NERVOUS SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	61645	PERQ ART M-THROMBECT &/NFS	SURGERY - NERVOUS SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	59300	EPISIOTOMY OR VAGINAL REPAIR	SURGERY - MATERNITY CARE AND D	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	57155	INSERT UTERI TANDEM/OVOIDS	SURGERY - FEMALE GENITAL SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54437	REPAIR CORPOREAL TEAR	SURGERY - URINARY SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	52287	CYSTOSCOPY CHEMODENERVATION	SURGERY - URINARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	50706	BALLOON DILATE URTRL STRIX	SURGERY - URINARY SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	50705	URETERAL EMBOLIZATION/OCCL	SURGERY - URINARY SYSTEM	NO	01/01/2016	03/03/2016			

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MMAI-Medicare/Medicaid	50695	PLMT URETERAL STENT PRQ	SURGERY - URINARY SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	50694	PLMT URETERAL STENT PRQ	SURGERY - URINARY SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	50693	PLMT URETERAL STENT PRQ	SURGERY - URINARY SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	50606	ENDOLUMINAL BX URTR RNL PLVS	SURGERY - URINARY SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	50435	EXCHANGE NEPHROSTOMY CATH	SURGERY - URINARY SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	50434	CONVERT NEPHROSTOMY CATHETER	SURGERY - URINARY SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	50433	PLMT NEPHROURETERAL CATHETER	SURGERY - URINARY SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	50432	PLMT NEPHROSTOMY CATHETER	SURGERY - URINARY SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	50431	NJX PX NFROSGRM &/URTRGRM	SURGERY - URINARY SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	50430	NJX PX NFROSGRM &/URTRGRM	SURGERY - URINARY SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	5010F	MACUL RESULT PHY/QHP MNG DM	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	49185	SCLEROTX FLUID COLLECTION	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	47544	REMOVAL DUCT GLBLDR CALCULI	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	47543	ENDOLUMINAL BX BILIARY TREE	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	47542	DILATE BILIARY DUCT/AMPULLA	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	47541	PLMT ACCESS BIL TREE SM BWL	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2016	03/03/2016			

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MMAI-Medicare/Medicaid	47540	PERQ PLMT BILE DUCT STENT	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	47539	PERQ PLMT BILE DUCT STENT	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	47538	PERQ PLMT BILE DUCT STENT	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	47537	REMOVAL BILIARY DRG CATH	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	47536	EXCHANGE BILIARY DRG CATH	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	47535	CONVERSION EXT BIL DRG CATH	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	47534	PLMT BILIARY DRAINAGE CATH	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	47533	PLMT BILIARY DRAINAGE CATH	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	47532	INJECTION FOR CHOLANGIOGRAM	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	47531	INJECTION FOR CHOLANGIOGRAM	SURGERY - DIGESTIVE SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	4563F	PT RECVD ASPIRIN W/IN 24 HRS	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4562F	PT W/O CORONARY ARTERY STENT	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4561F	PT W/ CORONARY ARTERY STENT	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4560F	ANESTH W/O GEN/NEURAX ANESTH	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4555F	PT RECVD NO INHAL ANESTHIC	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4554F	PT RECVD INHAL ANESTHETIC	CATEGORY II CODES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	4553F	PT ASST RE END LIFE ISSUES	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4552F	PT REF FOR SPEECH LANG PATH	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4550F	NONINVAS RESP SUPPORT TALK	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4541F	PT OFFERED TX FOR PSEUDOBULB	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4540F	DISEASE MODIF PHARMACOTHXPY	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	44705	PREPARE FECAL MICROBIOTA	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	43206	ESOPH OPTICAL ENDOMICROSCOPY	SURGERY - DIGESTIVE SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4240F	INSTR XRCZ BACK PAIN 12 WKS	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4090F	PT RCVNG EPO THXPY	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	39402	MEDIASTINOSCPY W/LMPH NOD BX	SURGERY - CARDIOVASCULAR	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	39401	MEDIASTINOSCPY W/MEDSTNL BX	SURGERY - CARDIOVASCULAR	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	38243	TRANSPLJ HEMATOPOIETIC BOOST	SURGERY - HEMIC AND LYMPHATIC	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	38242	TRANSPLT ALLO LYMPHOCYTES	SURGERY - HEMIC AND LYMPHATIC	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	38241	TRANSPLT AUTOL HCT/DONOR	SURGERY - HEMIC AND LYMPHATIC	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	38240	TRANSPLT ALLO HCT/DONOR	SURGERY - HEMIC AND LYMPHATIC	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	38205	HARVEST ALLOGENEIC STEM CELL	SURGERY - HEMIC AND LYMPHATIC	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	3761F	PT W/O DYSPHAG/WT LOSS/NUTR	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3759F	PT SCRN DYSPHAG/WT LOSS/NUTR	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3756F	PT W/PSEUDOBULB AFFECT/ALS	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3754F	SCREENING TESTS DM DONE	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37253	INTRVASC US NONCORONARY ADDL	SURGERY - CARDIOVASCULAR	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	37252	INTRVASC US NONCORONARY 1ST	SURGERY - CARDIOVASCULAR	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	37214	CESSJ THERAPY CATH REMOVAL	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37213	THROMBLYTIC ART/VEN THERAPY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37212	THROMBOLYTIC VENOUS THERAPY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37211	THROMBOLYTIC ART THERAPY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	37197	REMOVE INTRVAS FOREIGN BODY	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36228	PLACE CATH INTRACRANIAL ART	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	36227	PLACE CATH XTRNL CAROTID	SURGERY - CARDIOVASCULAR SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	36226	PLACE CATH VERTEBRAL ART	SURGERY - CARDIOVASCULAR SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	36225	PLACE CATH SUBCLAVIAN ART	SURGERY - CARDIOVASCULAR SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	36224	PLACE CATH CAROTD ART	SURGERY - CARDIOVASCULAR SYSTE	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	36223	PLACE CATH CAROTID/INOM ART	SURGERY - CARDIOVASCULAR SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	36222	PLACE CATH CAROTID/INOM ART	SURGERY - CARDIOVASCULAR SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	36221	PLACE CATH THORACIC AORTA	SURGERY - CARDIOVASCULAR SYSTE	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	36010	PLACE CATHETER IN VEIN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33477	IMPLANT TCAT PULM VLV PERQ	SURGERY - CARDIOVASCULAR	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	33369	REPLACE AORTIC VALVE W/BYP	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33368	REPLACE AORTIC VALVE W/BYP	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33367	REPLACE AORTIC VALVE W/BYP	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33365	REPLACE AORTIC VALVE OPEN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33364	REPLACE AORTIC VALVE OPEN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33363	REPLACE AORTIC VALVE OPEN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33362	REPLACE AORTIC VALVE OPEN	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33361	REPLACE AORTIC VALVE PERQ	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33225	L VENTRIC PACING LEAD ADD-ON	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32701	THORAX STEREO RAD TARGETW/TX	SURGERY - RESPIRATORY SYSTEM	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	32557	INSERT CATH PLEURA W/ IMAGE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	32556	INSERT CATH PLEURA W/O IMAGE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32555	ASPIRATE PLEURA W/ IMAGING	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32554	ASPIRATE PLEURA W/O IMAGING	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32551	INSERTION OF CHEST TUBE	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31660	BRONCH THERMOPLSTY 1 LOBE	SURGERY - RESPIRATORY SYSTEM	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	31654	BRONCH EBUS IVNTJ PERPH LES	SURGERY - RESPIRATORY SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	31652	BRONCH EBUS SAMPLNG 1/2 NODE	SURGERY - RESPIRATORY SYSTEM	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	31647	BRONCHIAL VALVE INIT INSERT	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	31587	LARYNGOPLASTY CRICOID SPLIT	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3092F	MDD IN REMISSION	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	3089F	MDD MODERATE	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	3088F	MDD MILD	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	28890	HI ENRGY ESWT PLANTAR FASCIA	SURGERY - MUSCULOSKELETAL SYST	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	24371	REVISE RECONST ELBOW JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	24370	REVISE RECONST ELBOW JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	23474	REVIS RECONST SHOULDER JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			

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MMAI-Medicare/Medicaid	23473	REVIS RECONST SHOULDER JOINT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	15740	ISLAND PEDICLE FLAP GRAFT	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1505F	PT HAS NO RESP INSUFFICIENCY	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1504F	PT HAS RESP INSUFFICIENCY	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1503F	PT QUERIED SYMP RESP INSUFF	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1502F	PT QUERIED PAIN FXN W/ INSTR	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1501F	NOT INITIAL EVAL FOR COND	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1180F	THROMBOEMB RISK ASSESSED	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1005F	ASTHMA SYMPTOMS EVALUATE	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0584F	NO TRANSFERCARE CHKLIST USED	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0583F	TRANSFER CARE CHECKLIST USED	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0582F	NO TRNSFR FROM ANESTH TO CC	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0581F	PT TRNSFRD FROM ANESTH TO CC	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0580F	MULTIDISCIPLINARY CARE PLAN	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0407T	NSL NDSC SURG ETHMD PLMT DRUG ELUTNG IMPLNT W/BX	CATEGORY III CODES	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	0406T	NSL NDSC SURG ETHMD SIN PLMT DRUG ELUTNG IMPLNT	CATEGORY III CODES	EXPIRED	01/01/2010	01/01/2078			

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MMAI-Medicare/Medicaid	0374T	EXPOSURE BEHAVIOR TREATMENT ADDL 30 MIN	CATEGORY III CODES	EXPIRED	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0372T	BEHAVIOR TREATMENT SOCIAL SKILLS TRAINING GROUP	CATEGORY III CODES	EXPIRED	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0371T	MULTIPLE FAMILY GROUP BEHAV TREATMENT GUIDANCE	CATEGORY III CODES	EXPIRED	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0370T	FAMILY BEHAVIOR TREATMENT GUIDANCE	CATEGORY III CODES	EXPIRED	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0369T	BEHAVIOR TREATMENT WITH MODIFICATION ADDL 30 MIN	CATEGORY III CODES	EXPIRED	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0368T	BEHAVIOR TX WITH MODIFICATION FIRST 30 MIN	CATEGORY III CODES	EXPIRED	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0367T	GROUP BEHAVIOR TREATMENT ADDL 30 MIN	CATEGORY III CODES	EXPIRED	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0366T	GROUP BEHAVIOR TREATMENT FIRST 30 MIN	CATEGORY III CODES	EXPIRED	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0365T	ADAPTIVE BEHAVIOR TX BY PROTOCOL ADDL 30 MIN	CATEGORY III CODES	EXPIRED	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0364T	ADAPTIVE BEHAVIOR TX BY PROTOCOL FIRST 30 MIN	CATEGORY III CODES	EXPIRED	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0363T	EXPOSURE BEHAV ASSESSMENT ADDL 30 MIN	CATEGORY III CODES	EXPIRED	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0361T	OBSERVATIONAL BEHAV ASSESSMENT ADDL 30 MIN	CATEGORY III CODES	EXPIRED	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0360T	OBSERVATIONAL BEHAV ASSESSMENT FIRST 30 MIN	CATEGORY III CODES	EXPIRED	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0359T	BEHAVIORAL IDENTIFICATION ASSESSMENT	CATEGORY III CODES	EXPIRED	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0346T	ULTRASOUND ELASTOGRAPHY	CATEGORY III CODES	EXPIRED	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	0337T	ENDOTHELIAL FUNCTION ASSESSMENT NON-INVASIVE	CATEGORY III CODES	EXPIRED	01/01/2014	12/31/2078			

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MMAI-Medicare/Medicaid	0308T	INSJ OCULAR TELESCOPE PROSTH	CATEGORY III CODES	NO	07/01/2012	07/01/2012			
MMAI-Medicare/Medicaid	01992	ANESTH N BLOCK/INJ PRONE	ANESTH - OTHER PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	01991	ANESTH NERVE BLOCK/INJ	ANESTH - OTHER PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0196T	ARTHRODESIS PRESACRAL INTRBDY W/O INSTRUM L4/L5	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0195T	ARTHRODESIS PRESACRAL INTRBDY W/O INSTRUM L5/S1	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0190T	INTRAOCULAR RADIATION SRC APPLICATOR PLACEMENT	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0189T	VIDEOCONFERENCED CRITICAL CARE EA ADDL 30 MIN	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0188T	VIDEOCONFERENCED CRITICAL CARE FIRST 30-74 MIN	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0159T	COMPUTER AIDED DETECTION BREAST MRI	CATEGORY III CODES	EXPIRED	05/01/2017	12/31/2078	Carve Out		Please contact eviCore, Inc. for prior authorization of these services at www.eviCore.com, phone 888-693-3211 or fax 844-822-3862.
MMAI-Medicare/Medicaid	3120F	12-LEAD ECG PERFORMED	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	3072F	LOW RISK FOR RETINOPATHY	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	3142F	BARIUM SWALLOW TEST ORDERED	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	3085F	SUICIDE RISK ASSESSED	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	3130F	UPPER GI ENDOSCOPY PERFORMED	CATEGORY II CODES	NO	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	K0037	HIGH MOUNT FLIP-UP FOOTREST EACH	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C9469	INJ TRIAMCINOLONE ACETONIDE PF EXT-REL MS F 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			

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MMAI-Medicare/Medicaid	0028U	CYP2D6 GENE COPY NUMBER CMN VRNTS TRGT SEQ ALYS	Pathology & Laboratory	EXPIRED	01/01/2018	12/31/2078			
MMAI-Medicare/Medicaid	0020U	RX TEST PRESUMPTIVE URINE W/DEF CONFIRMATION	PATH & LAB - CHEMISTRY	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	15401	XENOGRAFT TEMP CLOSURE TRUNK/ARM/LEG EA 100CM	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	76150	XERORADIOGRAPY	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	90857	INTERACTIVE GROUP PSYCHOTHERAPY	MEDICINE - PSYCHIATRY	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	S3628	PLACNTL ALPHA MICROGLOBULN-1 RAPID IA DETECT ROM	HCPCS - TEMP CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	S3828	COMPLETE GENE SEQUENCE ANALYSIS; MLH1 GENE	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/04/2010	12/31/2078			
MMAI-Medicare/Medicaid	37206	TCAT PLMT IV STENT PERCUTANEOUS EACH ADDL VESSEL	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	S3831	SINGLE-MUTATION ANALYSIS HNPCC GENETIC TESTING	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	S3818	COMPLETE GENE SEQUENCE ANALYSIS; BRCA1 GENE	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	90665	LYME DISEASE VACCINE ADULT IM	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	92984	PRQ TRLUML CORONARY BALLOON ANGIOPLASTY EA VSL	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	Q2045	INJECTION HUMAN FIBRINOGEN CONCENTRATE 1 MG	HCPCS - TEMP CODES	EXPIRED	07/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	23332	REMOVAL FOREIGN BODY SHOULDER COMPLICATED	SURGERY - MUSCULOSKELETAL SYST	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	S9075	SMOKING CESSATION TREATMENT	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	S3823	3-MUTATION BRCA1&BRCA2 ANALYSIS ASHKENAZI IND	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/04/2010	12/31/2078			

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MMAI-Medicare/Medicaid	S3713	KRAS MUTATION ANALYSIS TESTING	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	S3626	MATERNAL SERUM SCR W/AFP ESTRIOL HCG INHIBIN A	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	37208	TCAT PLMT IV STENT OPEN EACH ADDL VESSEL	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	S9109	CONGESTIVE HEART FAILURE TELEMONITOR PER MONTH	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	S3834	SINGLE-MUTAT ANALY SUSCEPT FAP&ATTENUATED FAP	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	S3820	COMPL BRCA1&BRCA2 GENE SEQ ANALY BRST&OVARN CA	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/04/2010	12/31/2078			
MMAI-Medicare/Medicaid	S0625	RETINAL TELESCR DIGTL IMAG MX DIFF FUNDUS AREAS	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	90701	DIPHTHERA TETANUS TOXOID PERTUSSIS VACCINE IM	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	Q3025	INJECTION INTRFER BETA1A 11 MCG IM USE	HCPCS - TEMP CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	88384	RA-BASED EVAL MLT MOLEC PROBES 11 THRU 50 PROBES	PATH & LAB - SURGICAL PATHOLOG	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	S3830	CMPL MLH1&MSH2 GENE SEQ ANALY HNPCC GENETIC TEST	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	S2344	NASAL/SINUS ENDO; ENLARGE OSTIUM INFLAT DEVICE	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	76350	SUBTRCJ CONJUNCT C+ STD	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	75993	TRLUML ATHRC EA PRPH ART RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	15431	ACELLULAR XENOGRAFT IMPLANT EA 100 CM/1 PCT	SURGERY - INTEGUMENTARY SYSTEM	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	75996	TRLUML ATHRC EA VISC ART RS&I	RADIOLOGY - DIAGNOSTIC RADIOLO	EXPIRED	04/01/2010	04/01/2010			

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MMAI-Medicare/Medicaid	Q0505	MISC SUPPLY/ACCESS W/VENTRICULAR ASSIST DEVC	HCPCS - TEMP CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	S3835	CMPL GENE SEQ ANALY CYSTIC FIBROSIS GENETIC TST	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	S3822	SINGLE-MUTAT ANALY SUSCEPT BREAST&OVARIAN CANCER	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/04/2010	12/31/2078			
MMAI-Medicare/Medicaid	S3711	CIRCULATING TUMOR CELL TEST	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	S3625	MATERNL SERUM TRIPLE MARKR SCR W/AFP ESTRIOL&HCG	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	Q2025	FLUDARABINE PHOSPHATE ORAL 1 MG	HCPCS - TEMP CODES	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	95900	NRV CNDJ AMPLT&LATNCY EA NRV MOTR W/O F-WAVE STD	MEDICINE - NEUROLOGY AND NEURO	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	90466	IMADM LESS THAN 8YR PHYS CNSL EA NJX PR D	MEDICINE - IMMUNIZATION ADMINI	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	S3905	NONINVASV ELECDX TEST AUTO CMPTRZD HAND-HELD DVC	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	S3862	GENETIC TEST FAMILY-SPECIFIC ION CHANNEL ANALY	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	92130	TNGRPHY WATER PROVOCATION	MEDICINE - OPHTHALMOLOGY	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	92070	FITG C-LENS TX DISEASE SUPPLY LENS	MEDICINE - OPHTHALMOLOGY	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	G0125	PET IMAGING REGIONAL OR WHOLE BODY; SINGLE PULMONARY NODULE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	J1550	INJECTION GAMMA GLOBULIN INTRAMUSCULAR 10 CC	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	J1470	INJECTION GAMMA GLOBULIN INTRAMUSCULAR 2 CC	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	0256T	EVASC CATHETER-DELIVRD PROSTH AORTIC HEART VALVE	CATEGORY III CODES	EXPIRED	08/01/2009	12/31/2012			

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MMAI-Medicare/Medicaid	G8832	ANEURYSM MINOR DIAMETER 5.6-6.0 CM FOR WOMEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	G8824	FEMALE PT W/ANEURYSM MINOR DIAMETER 5.6-6.0 CM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	D6970	POST & CORE ADD FIXED PART DENTURE RETAINER FAB	HCPCS - DENTAL	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	C9483	INJECTION ATEZOLIZUMAB 10 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	11/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	C9366	EPIFIX PER SQ CM	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	C9297	INJECTION OMACETAZINE MEPESUCCINATE 0.01 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2013	04/01/2013			
MMAI-Medicare/Medicaid	C9289	INJ ASPARAGINASE ERWINIA CHRYSANTHEMI 1,000 IU	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	G8789	SEVERITY ANGINA NOT ASSESS ACCORDING LEVL ACTVTY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	G8748	PATIENT NOT TREATED FOR SWALLOWING DISORDER	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	01/01/2012			
MMAI-Medicare/Medicaid	G8170	PT W/ISOLATED CABG DOC D/C ASPIRIN/CLOPIDOGREL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8156	PT W/O DOC RECEIPT THROMBOEMBOLISM PROPHYLAXIS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8112	PT FE NOT DOC RECV MAMMO MSR YR/PRIOR YR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8103	NEW DX OP PT DOC TREATED PTH IN 3 MONTHS OF DX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8080	CLINICIAN DOC ERSD PT NOT ELIG FOR HCT MEASURE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8060	PT DOCUMENTED FOR THE ASSESSMENT URINARY INCONT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8052	PT FEMALE NOT DOC BEEN ASSESSED FOR OSTEOPOROSIS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			

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MMAI-Medicare/Medicaid	G8035	CLIN DOC PR MI CAD PT NOT ELG BB TX/PT NO PR MI	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8027	HEART FAIL PT LVSD DOC BE ON EITHER ACE1/ARB TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8019	DIAB PT MOST RECENT LD LIPOPROTEIN GREATER THAN/EQUAL TO 10	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8011	CLIN DOC AMI PT NOT ELG BETABLOCKER ARRIVAL MSR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	C9287	INJECTION BRENTUXIMAB VEDOTIN 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	C9279	INJECTION IBUPROFEN 100 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	02/01/2011	12/31/2012			
MMAI-Medicare/Medicaid	C9271	INJECTION VELAGLUCERASE ALFA 100 UNITS	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9263	INJECTION ECALLANTIDE 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	S3829	COMPLETE GENE SEQUENCE ANALYSIS; MSH2 GENE	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/04/2010	12/31/2078			
MMAI-Medicare/Medicaid	90663	INFLUENZA VACCINE PANDEMIC FORMULATION H1N1	MEDICINE - VACCINES, TOXOIDS	EXPIRED	02/05/2013	02/05/2013			
MMAI-Medicare/Medicaid	92981	TCAT PLMT INTRACORONARY STENT PRQ EA VESSEL	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	Q4109	SKIN SUBSTITUTE TISSUEMEND PER SQ CM	HCPCS - TEMP CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	Q2051	INJECTION ZOLEDRONIC ACID NOS 1 MG	HCPCS - TEMP CODES	EXPIRED	07/01/2013	07/01/2013			
MMAI-Medicare/Medicaid	89132	GSTR DX EA SPEC CHEM ANALYSES/CYTP AFTER STIMJ	PATH & LAB - OTHER PROCEDURES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	95903	NRV CNDJ AMPLT&LATENCY EA NRV MOTOR W/F-WAVE STD	MEDICINE - NEUROLOGY AND NEURO	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	90467	IMADM LESS THAN 8YR INTRANSL/ORAL PHYS CNSL 1ST PR D	MEDICINE - IMMUNIZATION ADMINI	EXPIRED	04/01/2010	04/01/2010			

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MMAI-Medicare/Medicaid	S3851	GENETIC TESTING FOR CANAVAN DISEASE	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/04/2010	12/31/2078			
MMAI-Medicare/Medicaid	S3843	DNA ANALYSIS F5 GENE FCT V LEIDEN THROMBOPHILIA	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/04/2010	12/31/2078			
MMAI-Medicare/Medicaid	J1480	INJECTION GAMMA GLOBULIN INTRAMUSCULAR 3 CC	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	0257T	OPEN THORACIC CATHETER DELIVD AORTIC HEART VALVE	CATEGORY III CODES	EXPIRED	08/01/2009	12/31/2012			
MMAI-Medicare/Medicaid	0192T	ANT SEGMENT INSERTION DRAINAGE W/O RESERVOIR EXT	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	A9599	RADIOPHRM DX BETA-AMYLOID PET IMAG PR S DOSE NOS	HCPCS - Radiopharmaceuticals &	EXPIRED	12/07/2016	12/31/2078			
MMAI-Medicare/Medicaid	D6972	PREFAB POST&CORE IN ADDITION TO BRIDGE RETAINER	HCPCS - DENTAL	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	C9484	INJECTION ETEPLIRSEN 10 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	C9367	SKIN SUBST ENDOFORM DERM TEMPLATE PER SQUARE CM	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	C9298	INJECTION OCRIPLASMIN 0.125 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2013	04/01/2013			
MMAI-Medicare/Medicaid	W7801	Social Work Encounter	HCPCS - STATE MEDICAID AGENCY	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	G8790	MOST RECENT OFFICE VISIT SYSTOLIC BP LT 130 MM HG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	01/01/2012			
MMAI-Medicare/Medicaid	G8741	PT NOT TREATED SPOKEN LANG COMPREHENSION D/O	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	01/01/2012			
MMAI-Medicare/Medicaid	G0440	APPL TISS ALLO/DERM; LOW LIMB; FIRST 25 SQ CM/LESS THAN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	G8919	MOST RECENT SYSTOLIC BP LT 140 MM HG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2013	01/01/2013			
MMAI-Medicare/Medicaid	G8157	CLIN DOC PT NOT ELIG THROMBOEMBOLISM PROPH MSR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			

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MMAI-Medicare/Medicaid	G8129	PT DOC TX W/AD AT LEAST 6 MOS CONT TX PHASE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8113	CLINICIAN DOC FE PT NOT ELIG FOR MAMMO MEASURE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8104	CLIN DOC NEW DX OP PT NOT ELIG PTH W/IN 3 MOS DX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8081	ERSD PT RQR HD VASC ACSS DOC AUTOGEN AV FIST	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8061	PT NOT DOCUMENTED FOR ASSESSMENT URINARY INCONT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8053	CLIN DOC FEMAL PT NOT ELIG OSTEOPOROSIS ASMT MSR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8036	CORONARY ARTERY DISEASE PT DOC ON ANTIPLATLET TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	S3833	CMPL APC GENE SEQ ANALY SUSCPT FAP&ATTENUATD FAP	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	S3819	COMPLETE GENE SEQUENCE ANALYSIS; BRCA2 GENE	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	S2270	INSRT VAG CYL APPLIC RAD SOURCE/CLIN BRACHYTX	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0005M	FETAL ANEUPLOIDY TRISOMY 21/18/13 DNA RISK SCORE	PATH & LAB - CHEMISTRY	EXPIRED	07/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	90718	TETANUS & DIPHTHERIA TOXOIDS ADSORBED 7/GTYR IM	MEDICINE - VACCINES, TOXOIDS	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	Q2046	INJECTION AFLIBERCEPT 1 MG	HCPCS - TEMP CODES	EXPIRED	07/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	Q2033	INFLUENZA VACC RECOMB HEMAGGLUTININ ANTIGEN IM	HCPCS - TEMP CODES	EXPIRED	07/01/2013	07/01/2013			
MMAI-Medicare/Medicaid	G9141	INFLUENZA A H1N1 IMMUNIZATION ADMINISTRATION	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	92135	SCANNING OPHTHALMIC IMAGING POSTERIOR SGM UNI	MEDICINE - OPHTHALMOLOGY	EXPIRED	04/01/2010	04/01/2010			

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MMAI-Medicare/Medicaid	J1510	INJECTION GAMMA GLOBULIN INTRAMUSCULAR 6 CC	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	0260T	HYPTHRM BDY NEONATE 28D LT	CATEGORY III CODES	EXPIRED	02/01/2011	12/31/2078			
MMAI-Medicare/Medicaid	0252T	BRONCHOSCOPY REMOVAL BRONCH VALVE EA ADDL LOBE	CATEGORY III CODES	EXPIRED	08/01/2009	12/31/2012			
MMAI-Medicare/Medicaid	0204T	SLEEP STDY UNATT HEART RATE OXSAT RESP ANALYSIS	CATEGORY III CODES	EXPIRED	02/05/2013	02/05/2013			
MMAI-Medicare/Medicaid	G8836	SYMPTOMATC PT IPSI STROKE/TIA 120 DAYS PRIOR CEA	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	G8828	ANEURYSM MINOR DIAMETER LT = 5.5 CM FOR MEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	G8820	ANEURYSM MINOR DIAMETER 5.6-6.0 CM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	G8812	PT NOT ELIG FOR F/U CTA DUPLEX/MRA	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	01/01/2012			
MMAI-Medicare/Medicaid	D6976	EACH ADD INDIRECTLY FABRICATED POST SAME TOOTH	HCPCS - DENTAL	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	C9487	USTEKINUMAB FOR INTRAVENOUS INJECTION 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	G9343	DT MED RSN SRCH NOT CD DICOM F I C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G8801	ANTICOAGULATION NOT ORD RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	01/01/2012			
MMAI-Medicare/Medicaid	G8793	MOST RECENT OFFICE VISIT DIASTOLIC BP LT 80 MM HG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	01/01/2012			
MMAI-Medicare/Medicaid	G8760	ALL QUAL ACTIONS EPILEPSY MSR GRP PRFORM THIS PT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	G8744	PATIENT NOT TREATED FOR MOTOR SPEECH DISORDER	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	01/01/2012			
MMAI-Medicare/Medicaid	G8727	PT RECV HD PERITONEAL DIALYSIS/KIDNEY TRANSPLANT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			

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MMAI-Medicare/Medicaid	G0291	TRNSCATH PLCMT RX ELUTING INTRACOR STNT; EA ADD	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	K0741	PORTABLE GASEOUS OXYGEN SYSTEM RENTAL	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	07/01/2011	12/31/2012			
MMAI-Medicare/Medicaid	C9730	BRONCH THERMOPLASTY RF ABLAT SMOOTH MUSC 1 LOBE	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	G8954	CMPL PT DATA REP QUAL CLIN DB REG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2013	01/01/2013			
MMAI-Medicare/Medicaid	G8922	MOST RECENT DIASTOLIC BP GT EQU 90 MM HG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2013	01/01/2013			
MMAI-Medicare/Medicaid	G8164	PT W/ISOLATED CABG DOC PROLONGED INTUBATION	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8152	PT DOC RECEIVED ABX PROPH 1 HR PRIOR TO INCI TM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8116	PT NOT DOC TO HAVE RECEIVED PNEUMOCOCCAL VACC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8108	PT DOC TO HAVE RECEIVED FLU VACC DUR FLU SEASON	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8093	NEW DX COPD PT DOC SMOK CESS INTERVEN W/IN 3 MOS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8076	TOT KT/V LT1.7 PER WEEK RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8056	CLIN DOC PT NOT ELIG FALLS ASMT MSR W/I 12 MOS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	92996	PRQ TRLUML CORON ATHERECT W/WO ANGIOP EA VESSEL	MEDICINE - CARDIOVASCULAR	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	Q2027	INJECTION SCULPTRA 0.1ML	HCPCS - TEMP CODES	EXPIRED	08/01/2009	12/31/2078			
MMAI-Medicare/Medicaid	Q1003	NEW TECHNOLOGY INTRAOCULAR LENS CATEGORY 3	HCPCS - TEMP CODES	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	95904	NRV CNDJ AMPLITUDE & LATENCY EACH NERVE SENSORY	MEDICINE - NEUROLOGY AND NEURO	EXPIRED	04/01/2010	12/31/2012			

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MMAI-Medicare/Medicaid	90468	IMADM LESS THAN 8YR INTRANSL/ORAL PHYS CNSL EA PR D	MEDICINE - IMMUNIZATION ADMINI	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	J1490	INJECTION GAMMA GLOBULIN INTRAMUSCULAR 4 CC	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	0258T	TTHRC EXPOS CATH-DELIV AORTIC VALVE W/O CARD BYP	CATEGORY III CODES	EXPIRED	08/01/2009	12/31/2012			
MMAI-Medicare/Medicaid	0250T	AIRWAY SIZING & INSERT BRONCHIAL VALVE EA LOBE	CATEGORY III CODES	EXPIRED	08/01/2009	12/31/2012			
MMAI-Medicare/Medicaid	0242T	GI TRACT TRANSIT&PRESSURE MEAS W/I&R	CATEGORY III CODES	EXPIRED	02/05/2013	02/05/2013			
MMAI-Medicare/Medicaid	0193T	TRANSURETHRAL RF BLADDER NECK MICROREMODEL	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	L3672	SHOULDER ORTHOTIC W/O JOINTS CUSTOM FAB	HCPCS - ORTHOTIC PROCEDURES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	D6973	CORE BUILD UP FOR RETAINER INCLUDING ANY PINS	HCPCS - DENTAL	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	C9485	INJECTION OLARATUMAB 10 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	C9368	GRAFIX CORE PER SQ CM	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	07/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	C9291	INJECTION AFLIBERCEPT 2 MG VIAL	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2012	12/31/2078			
MMAI-Medicare/Medicaid	Q0090	LEVONORGESTREL-REL IU CONTRACEPTIVE SYS 13.5 MG	HCPCS - TEMP CODES	EXPIRED	07/01/2013	07/01/2013			
MMAI-Medicare/Medicaid	W7802	Psychologist Encounter	HCPCS - STATE MEDICAID AGENCY	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	G8799	ANTICOAGULATION ORDERED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	01/01/2012			
MMAI-Medicare/Medicaid	G8791	MOST RECENT OFFICE VISIT SYSTOL BP 130-139 MM HG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	01/01/2012			
MMAI-Medicare/Medicaid	G8750	PRESENCE SIGNS MELANOMA/SYMPTOMS MELANOMA	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			

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MMAI-Medicare/Medicaid	G8742	PATIENT NOT TREATED FOR ATTENTION DISORDER	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	01/01/2012			
MMAI-Medicare/Medicaid	G0911	ASSESSED LEVEL OF ACTIVITY AND SYMPTOMS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	G0449	ANNUAL FACE-TO-FACE OBESITY SCREENING 15 MINUTES	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	01/01/2012			
MMAI-Medicare/Medicaid	G0441	APPL TISS ALLO/DERM; LOW LIMB; EA ADD 25 SQ CM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	J9002	INJ DOXORUBICIN HCI LIP DOXIL 10 MG	HCPCS - CHEMO DRUGS	EXPIRED	01/01/2013	01/01/2013			
MMAI-Medicare/Medicaid	C9736	LAP SURG RF ABLAT UT FIBROIDS IO GD MON WHEN PER	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	07/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G8920	MOST RECENT SYSTOLIC BP GT EQU 140 MM HG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2013	01/01/2013			
MMAI-Medicare/Medicaid	G8159	PT DOC RECV CABG W/O USE INTERNAL MAMMARY ARTERY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8130	PT NOT DOC AS TX AD AT LEAST 6 MOS CONT TX PHASE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8114	CLINICIAN DID NOT PROV CARE RQRD TM OF MAMMO MSR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8106	W/I 6 MO NONTRAMA FX F 65/ GREATER THANDOC BMD/RX TX/PREV OP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8082	ERSD PT RQR HD DOC VASC ACSS NOT AUTOGEN AV FIST	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8062	CLIN DOC PT NOT ELIG URIN INCONT ASSESSMENT MSR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8054	PT NOT DOC ASSESSMENT FALLS W/IN LAST 12 MONTHS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8037	CORONARY ARTERY DZ PT NOT DOC ON ANTIPLATLET TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8029	CLIN DOC HEART FAIL PT NOT ELIG ACEI/ARB TX MSR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			

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MMAI-Medicare/Medicaid	G8021	CLIN DOC DIAB PT NOT ELIG LD LIPOPROTEIN MEASURE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8013	PNEU: PT NOT DOC RECVD ABX W/I 4 HR PRESENTATN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	Q2048	INJ DOXORUBICIN HYDROCHLORIDE LIP DOXIL 10 MG	HCPCS - TEMP CODES	EXPIRED	07/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	S3860	GENETIC TESTING COMP CARDIAC ION CHANNEL ANALY	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	S3848	GENETIC TESTING FOR GAUCHER DISEASE	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/04/2010	12/31/2078			
MMAI-Medicare/Medicaid	J1530	INJECTION GAMMA GLOBULIN INTRAMUSCULAR 8 CC	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	G8830	ANEURYSM MINOR DIAMETER GT6 CM FOR MEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	G8822	MALE PATIENTS W/ANEURYSMS MINOR DIAMETER GT6 CM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	G8814	FOLLOW-UP CTA DUPLEX/MRA ABD & PELV NOT PERFORMD	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	01/01/2012			
MMAI-Medicare/Medicaid	J8561	EVEROLIMUS ORAL 0.25 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	C9716	CREATIONS THERMAL ANAL LESIONS RADIOFREQ ENERGY	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	C9489	INJECTION NUSINERSEN 0.1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	06/15/2017	12/31/2078			
MMAI-Medicare/Medicaid	C9481	INJECTION RESLIZUMAB 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	11/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	C9295	INJECTION CARFILZOMIB 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G8803	PREGNANCY TEST NOT ORDERED RSN DOC CLINICIAN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	G8795	MOST RECENT OFFICE VISIT DIASTOLIC BP LT 90 MM HG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	01/01/2012			

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MMAI-Medicare/Medicaid	G8787	ANGINA ASSESSED AS PRESENT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	G8746	PT NOT TREATED SPOKEN LANG EXPRESSION DISORDER	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	01/01/2012			
MMAI-Medicare/Medicaid	C9732	INSRT OCULR TELESCOPE PROSTH REMV CRYSTALNE LENS	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2012	01/01/2012			
MMAI-Medicare/Medicaid	G8166	PT W/ISOLATED CABG DOC RQR SURG RE-EXPLORATION	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8154	CLIN DOC PT NOT ELIG AB PROP 1HR PRIOR INCI TIME	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8110	CLINICIAN DOC PT NOT ELIGIBLE FLU VAC MEASURE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8099	OSTEOPOROSIS PT DOC RX CALCIUM & VIT D SUPPLEMNT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8078	ERSD PT W/DOC HCT GREATER THAN/ EQUAL TO 33 OR HGB GREATER T	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8058	PT NOT DOC TO HAVE RECEIVED HEARING ASSESSMENT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8041	CLIN DOC CAD PT NOT ELIG LD LIPOPROTEIN MEASURE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8033	PRIOR MI CAD PT DOC TO BE ON BETA-BLOCKER TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8025	CLINICIAN DOC DIABETIC PT NOT ELIG BP MEASURE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8017	CLIN DOC DIABETIC PT NOT ELIG HGB A1C MEASURE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8009	ACUTE MI: PT DOC TO HAVE RECVD BETABLKER ARRIVAL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	C9277	INJECTION ALGLUCOSIDASE ALFA LUMIZUME 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	02/01/2011	12/31/2078			
MMAI-Medicare/Medicaid	C9269	INJ C-1 ESTERASE INHIBITOR BERINERT 10 UNITS	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			

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MMAI-Medicare/Medicaid	C9260	INJECTION OFATUMUMAB 10 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	90465	IMADM LESS THAN 8YR PHYS CNSL1ST NJX PR D	MEDICINE - IMMUNIZATION ADMINI	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	92120	TNGRPHY I&R REC INDENTAJ TNMTR SUCJ	MEDICINE - OPHTHALMOLOGY	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	S0181	ONDANSETRON HYDROCHLORIDE ORAL 4 MG	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	J1540	INJECTION GAMMA GLOBULIN INTRAMUSCULAR 9 CC	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	G8847	POSITIVE AIRWAY PRESSURE THERAPY NOT PRESCRIBED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	G8831	ANEURYSM MINOR DIAMETER GT6 CM FOR WOMEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	G8823	FEMALE PATIENTS W/ANEURYSM MINOR DIAMETER GT6 CM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	C9490	INJECTION BEZLOTOXUMAB 10 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	06/15/2017	12/31/2078			
MMAI-Medicare/Medicaid	C9365	OASIS ULTRA TRI-LAYER MATRIX PER SQ CENTIMETER	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	C9296	INJECTION ZIV-AFLIBERCEPT 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C9288	INJECTION CENTRUROIDES IMMUNE F2 1 VIAL	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	G9346	F/U REC INCDNT D PNS NO DOC MED RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G8805	PREGNANCY TEST WAS NOT ORDERED REASON NOT SPEC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	G8796	BP MSR NOT DOC REASON NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	01/01/2012			
MMAI-Medicare/Medicaid	G8788	ANGINA ASSESSED AS ABSENT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			

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MMAI-Medicare/Medicaid	G8747	PATIENT NOT TREATED FOR WRITING DISORDER	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	01/01/2012			
MMAI-Medicare/Medicaid	4002F	STATIN THER PRESCRIBED	CATEGORY II CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8901	I INTEND TO REPORT THE EPILEPSY MEASURES GROUP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	G8167	PT W/ISOLATED CABG NOT RQR SURG RE-EXPLORATION	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8155	PT W/DOC RECEIPT THROMBOEMBOILISM PROPHYLAXIS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8111	PT FE DOC RECV MAMMO MSR YR/PRIOR YR TO MSR YR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8100	CLIN DOC OSTEOPOROS PT NOT ELIG CA&VIT D SUP MSR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8079	ENDSTAGE RENAL DZ PT W/DOC HCT LESS THAN 33 OR HGB LESS THAN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8059	CLIN DOC PT NOT ELIG HEARING ASSESSMENT MEASURE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8051	PT FEMALE DOC BEEN ASSESSED FOR OSTEOPOROSIS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8034	PRIOR MI CAD PT NOT DOC TO BE ON BETA-BLOCKER TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8026	CLIN NOT PROV CARE DIAB PT RQRD TM BP MEASURE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8018	CLIN NOT PROV CARE DIAB PT RQRD TM HGB A1C MSR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8010	AMI: PT NOT DOC RECEIVED BETA-BLOCKER AT ARRIVAL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	C9286	INJECTION BELATACEPT 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	10/01/2011	12/31/2012			
MMAI-Medicare/Medicaid	C9278	INJECTION INCOBOTULINUMTOXINA 1 UNIT	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	02/01/2011	12/31/2078			

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MMAI-Medicare/Medicaid	C9270	INJ IG GAMMAPLEX IV NONLYOPHILIZED 500 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	08/01/2009	12/31/2078			
MMAI-Medicare/Medicaid	C9261	INJECTION USTEKINUMAB 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	0187T	SCANNING CPTRIZED OPH DX IMG ANTERIOR I&R UNI	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0161T	TRANSCRANIAL MAG STIMJ TX DLVR & MGMT	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	Q2047	INJECTION PEGINESATIDE 0.1 MG FOR ESRD DIALYSIS	HCPCS - TEMP CODES	EXPIRED	07/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	S3847	GENETIC TESTING FOR TAY-SACHS DISEASE	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/04/2010	12/31/2078			
MMAI-Medicare/Medicaid	S3837	CMPL GENE SEQ ANALY HEMOCHROMATOSIS GENETIC TST	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	G9142	INFLUENZA A H1N1 VACCINE ANY ROUTE ADMIN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	J1520	INJECTION GAMMA GLOBULIN INTRAMUSCULAR 7 CC	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	G8837	OTH SYM PT IPSI TIA/STROKE GT120 DAYS PRIOR CEA	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	G8829	ANEURYSM MINOR DIAMETER 5.6-6.0 CM FOR MEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	G8821	ABDOMINAL AORTIC ANEURYSM IS NOT INFRARENAL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	G8813	FOLLOW-UP CTA DUPLEX/MRA ABDOMEN & PELVIS PRFRMD	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	01/01/2012			
MMAI-Medicare/Medicaid	D6977	EACH ADD PREFABRICATED POST - SAME TOOTH	HCPCS - DENTAL	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	C9406	I-123 IOFLUPANE DX PER STUDY DOSE UP TO 5 MCI	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	C9294	INJECTION TALIGLUCERASE ALFA 10 U	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	G8802	PREGNANCY TEST URINE OR SERUM ORDERED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	G8794	MOST RECENT OFFICE VISIT DIASTOL BP 80-89 MM HG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	01/01/2012			
MMAI-Medicare/Medicaid	G8786	SEVERITY ANGINA ASSESS ACCORD LEVEL OF ACTIVITY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	G8745	PATIENT NOT TREATED FOR READING DISORDER	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	01/01/2012			
MMAI-Medicare/Medicaid	Q2044	NJECTION BELIMUMAB 10 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	08/01/2009	12/31/2011			
MMAI-Medicare/Medicaid	K0742	PRTBLE O2 CNTN GASEOUS 1 MONTHS SPL = 1 U	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	07/01/2011	12/31/2012			
MMAI-Medicare/Medicaid	C9731	BRONCH THERMOPLST RF ABLAT SMOOTH MUSC 2/GREATER THAN LOBES	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	4009F	ACE/ARB INHIBITOR THERAPY PRESCRIBED	CATEGORY II CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8165	PT W/ISOLATED CABG NOT DOC PRLONGED INTUBATION	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8153	PT NOT DOC RECV ANTIBIOTIC PROPH 1 HR TO INCI	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8117	CLIN DOC PT NOT ELIG PNEUMOCOCCAL VACC MSR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8109	PT NOT DOC RECV FLU VACC DUR INFLUENZA SEASON	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8094	NEW DX COPD PT NOT DOC SMOK CESS INTRVN W/I 3 MO	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8077	CLIN DOC ERSD PT NOT ELIG URR OR KT/V MEASURE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8057	PT DOCUMENTD TO HAVE RECEIVED HEARING ASSESSMENT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8040	CAD PT LOW DENSITY LIPOPROTEIN DOC LESS THAN / EQUAL TO 100	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			

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MMAI-Medicare/Medicaid	G8032	CLINICIAN DOC HRT FAIL PT NOT ELIG BB TX MEASURE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8024	DIAB PT MOST REC BP LESS THAN 140 SYST & LESS THAN 80 DIASTO	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8016	DIAB PT W/REC HGB A1C LEVL DOC AS LESS THAN OR EQUAL TO 9 PC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8008	CLIN DOC AMI PT NOT ELIG REC ASPIRIN ARRIVAL MSR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	J0559	INJ PCN G BENZATHINE & PCN G PROCAINE 2500 U	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	D6254	Interim pontic	HCPCS - DENTAL	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	C9284	INJECTION IPILIMUMAB 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	08/01/2009	12/31/2011			
MMAI-Medicare/Medicaid	C9276	INJECTION CABAZITAXEL 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	02/01/2011	12/31/2078			
MMAI-Medicare/Medicaid	C9268	CAPSAICIN PATCH 10CM2	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9259	INJECTION PRALATREXATE 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	89136	GSTR INTUBAJ ASPIR&FXJAL COLLJ 2 HR	PATH & LAB - OTHER PROCEDURES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	95920	INTRAOP NEUROPHYSIOLOGY TSTG PR HR	MEDICINE - NEUROLOGY AND NEURO	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	90470	IMMUNE ADMIN H1N1 IM/NASAL INCL CNSL	MEDICINE - IMMUNIZATION ADMINI	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	S8049	INTRAOPERATIVE RADIATION THERAPY	HCPCS - TEMP NATIONAL CODES	EXPIRED	04/04/2010	04/04/2010			
MMAI-Medicare/Medicaid	J1500	INJECTION GAMMA GLOBULIN INTRAMUSCULAR 5 CC	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	J1056	INJ MEDROXYPROGESTRON/ESTRADIOL CYPIONATE 5/25MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	12/31/2012			

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MMAI-Medicare/Medicaid	0259T	CARDIAC EXPOSURE FOR AORTIC VALVE W/CARD BYPASS	CATEGORY III CODES	EXPIRED	08/01/2009	12/31/2012			
MMAI-Medicare/Medicaid	0251T	REMOVAL BRONCHIAL VALVE INITIAL LOBE	CATEGORY III CODES	EXPIRED	08/01/2009	12/31/2012			
MMAI-Medicare/Medicaid	0203T	SLEEP STDY UNATT HEART RT OXSAT RESP&SLEEP TIME	CATEGORY III CODES	EXPIRED	02/05/2013	02/05/2013			
MMAI-Medicare/Medicaid	L7500	REPAIR OF PROSTHETIC DEVICE HOURLY RATE	HCPCS - PROSTHETIC PROCED	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	L7266	SERVO CONTROL STEEPER OR EQUAL	HCPCS - PROSTHETIC PROCED	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8835	ASX PT W/NO HX TIA/STROKE CAROTID/VB TERR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	01/01/2012			
MMAI-Medicare/Medicaid	G8827	ANEURYSM MINOR DIAMETER LT = 5.5 CM FOR WOMEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	01/01/2012			
MMAI-Medicare/Medicaid	G8819	ANEURYSM MINOR DIAMETER LT = 5.5 CM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	L3673	SO INCL NONTORSION JOINT/TURNBUCKLE CSTM FAB	HCPCS - ORTHOTIC PROCEDURES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	D6795	Interim retainer crown	HCPCS - DENTAL	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	C9486	INJECTION GRANISETRON EXTENDED RELEASE 0.1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	C9369	GRAFIX PRIME PER SQUARE CENTIMETER	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	07/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	C9292	INJECTION PERTUZUMAB 10 MG INJEC	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	10/01/2012	10/01/2012			
MMAI-Medicare/Medicaid	W7803	LCPC Encounter	HCPCS - STATE MEDICAID AGENCY	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	G8800	ANTICOAGULATION NOT ORDERED RSN DOC CLINICIAN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	01/01/2012			
MMAI-Medicare/Medicaid	G8792	MOST RECENT OFFICE VISIT SYSTOLIC BP GT=140 MM HG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	01/01/2012			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8743	PATIENT NOT TREATED FOR MEMORY DISORDER	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	01/01/2012			
MMAI-Medicare/Medicaid	G0912	LEVEL OF ACTIVITY AND SYMPTOMS NOT ASSESSED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	G0450	SCREEN STI LAB TESTS CHLAMYD GONORHEA SYPH HEP B	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	01/01/2012			
MMAI-Medicare/Medicaid	G0290	TRNSCATH PLCMT RX ELUTING INTRACOR STNT; 1 VES	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	A4319	Sterile water irrigation solution, 1000 ml	HCPCS - MED-SURG SUPPLIES	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9729	PERQ LAMINOTOMY/LAMINECT ENDO WHEN PRFRM; LUMB	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	08/01/2009	12/31/2078			
MMAI-Medicare/Medicaid	4006F	BETA-BLKER THER PRESCRIBED	CATEGORY II CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8945	ANEURYSM MINOR DIAMETER LT EQU 6 CM MEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2013	01/01/2013			
MMAI-Medicare/Medicaid	G8921	MOST RECENT DIASTOLIC BP LT90 MM HG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2013	01/01/2013			
MMAI-Medicare/Medicaid	G8162	PT W/ISOLATED CABG NO DOC RECV PRE-OP BETA-BLOCK	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8131	CLIN DOC PT NOT ELIG ANTIDEPRESS CONT TX PHASE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8115	PT DOCUMENTED TO HAVE RECEIVED PNEUMOCOCCAL VACC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8107	CLN DOC F 65 YR/ GREATER THANNOT ELIG BMD/RX TX/PREV OP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8085	ESRD PT RQR HD VAS ACCCESS NOT ELIGIBLE AV FIST	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8075	ESRD PT W/DOC DIALYSIS DOSE OF URR GT/EQUAL TO 65 PCT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8055	PATIENT DOC ASSESSMENT FALLS W/IN LAST 12 MONTHS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8038	CLIN DOC CAD PT NOT ELIG ANTIPLATLET TX MEASURE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8030	HEART FAIL PT LVSD DOC TO BE ON BETA-BLOCKER TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8022	CLIN NOT PROV CARE DIAB PT RQRD TM LD LP MSR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8014	CLN DOC PNEU PT NOT ELIG ABX W/I 4 HR PRESENTATN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8006	ACUTE MI: PT DOC RECEIVED ASPIRIN AT ARRIVAL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	C9282	INJECTION CEFTAROLINE FOSAMIL 10 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	08/01/2009	12/31/2078			
MMAI-Medicare/Medicaid	C9274	CROTALIDAE POLYVLENT IMMUNE FAB OVINE 1 VIAL	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	C9266	INJ COLLAGENASE CLOSTRIDIUM HISTOLYTICUM 0.1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9130	INJECTION IMMUNE GLOBULIN BIVIGAM 500 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	03/26/2013	12/31/2078			
MMAI-Medicare/Medicaid	0307T	RMVL INTRACARDIAC ISCHEMIA MONITORING DEVICE	CATEGORY III CODES	EXPIRED	07/01/2012	07/01/2012			
MMAI-Medicare/Medicaid	0143T	LAPS PNCRTC ISLET CELL TRNSPLJ	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0081T	PLMT VISC XTN PROSTH EVASC RPR AAA EA VISC RS&I	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G9328	DICOM IMAG DATA NOT DOC RPT MED RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9320	DOC RSN NOT NAME CT STDY NOMEN PROV	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9312	SURGICAL SITE INFECTION	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G8716	DOC RSN PT NOT HAV GT/=1.2 1-POOL CLEAR UREA KT/V	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8692	CURRENT SMOKELESS TOBOACCO USER NO EXPS SHS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	G8684	PT NOT HOSP PRINCIPAL DX HRT FAIL DUR MSR PERIOD	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	G8676	MOST RECENT DIASTOLIC BLOOD PRESSURE GT= 90 MM HG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	12/31/2012			
MMAI-Medicare/Medicaid	G8553	PRESCRIPTIONS GEN TRANSMITTED QUALIFIED ERX SYS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2010			
MMAI-Medicare/Medicaid	G8537	ELDER MALTX SCR DOC F/U PLAN NOT DOC PT NOT ELIG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8525	CLINICIAN DOC PT DID NOT RECEIVE CONVENTIONL CEA	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	G8508	DOC PAIN ASSESSMENT; NO DOC F/U PLAN PT NOT ELIG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8481	CLIN NOT PRSC ACE INHIBITOR/ARB TX RSN NOT SPEC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	J7130	HYPERTONIC SALINE SOLUTION 50/100 MEQ 20 CC VIAL	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G9043	LW VISN REHAB SRVC CERT LW VISN TRPST EA 15 MIN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	G8638	FLU IMMUN NOT ADMIN/PREV RECEIVED REASON NOS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	G8622	SCOR WRIT FCM D/C NOT HI ADM NO RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8614	PT TREATED NOT SCORED MOTOR SPEECH FCM ADM/D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8606	SCORE ATTENTION FCM D/C HIGHER THAN ADMISSION	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8590	MOST RECENT DIASTOLIC BLOOD PRESSURE LT 90 MM HG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8558	NOT REF PHYS OTO EVAL RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	0017T	DSTRJ MACULAR DRUSEN PC	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G9234	I INTEND TO REPORT TOTAL KNEE REPLACEMNT MSR GRP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9210	HEP C Q RNA NOT PERF 4-12 WKS AFTR AV TX DOC RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G8457	CURRENT TOBACCO NONUSER	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8449	PT ENCOUNTER NOT DOC EMR D/T SYSTEM REASONS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8440	DOC PAIN ASSESSMENT PRIOR TO TX & F/U PLAN DOC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8424	FLU VACCINE STATUS WAS NOT SCREENED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8385	DIABETIC PT W/NO DOC OF HEMOGLOBIN A1C LEVEL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8377	CLIN DOC COLON CA PT NOT ELIGIBLE CHEMO MEASURE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8367	PT NOT DOC TO HAVE APPROP EMPIRIC ABX PRSC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8341	PT NOT DOC DEXA MEAS OR PHARMACOLOGICAL THERAPY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8310	PT NOT DOC PRESC AT LEAST 1 VIT/MINERAL DUR YR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8299	PT NOT DOC RECEIVED OPTIC NERVE HEAD EVALUATION	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8276	PT NOT DOC RECVD MED HX W/ASSESS NEW/CHNG MOLES	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8254	PATIENT WITH NO DOC ORDER BARIUM SW SWALLOW TEST	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8231	PT NOT DOC REC TPA OR NOT DOC CONSIDERD TPA ADMN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8209	CLIN NOT DOC ORDER DC PROPH ABX 48 HR SURG END	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8183	PT W/HF & ATRIAL FIBRILLATION DOC ON WARFARIN TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	C1204	TECHNETIUM TC 99M TILMANOCEPT DIGN TO 0.5 MCI	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	10/01/2013	10/01/2013			
MMAI-Medicare/Medicaid	G8028	HRT FAIL PT LVSD NOT DOC BE ON EITHR ACE1/ARB TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8020	DIAB PT MOST RECENT LD LIPOPROTEIN LESS THAN 100 MG/DL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8012	PNEU: PT DOC RECVD ABX W/I 4 HR OF PRESENTATION	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	C9280	INJECTION ERIBULIN MESYLATE 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	08/01/2009	12/31/2078			
MMAI-Medicare/Medicaid	C9272	INJECTION DENOSUMAB 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	08/01/2009	12/31/2078			
MMAI-Medicare/Medicaid	C9264	INJECTION TOCILIZUMAB 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9255	INJECTION, PALIPERIDONE PALMITATE, 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	0276T	BRONCHSCPY FLUORO W/BRONCHIAL THERMPLASTY 1 LOBE	CATEGORY III CODES	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	0173T	MONITOR INTRAOCULAR PRESS DURING VITRECTOMY	CATEGORY III CODES	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	0155T	LAPAROSCOPIC IMPLTJ/RPLCMT GASTRIC ELECTRODE	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0048T	IMPLTJ VENTR ASSIST DEV XTRCORP PRQ T-SEPTAL	CATEGORY III CODES	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	G8693	TOBACCO USE NOT ASSESSED REASON NOT SPECIFIED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	G8677	MOST RECENT SYSTOLIC BLOOD PRESSURE LT 130 MM HG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	12/31/2012			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8546	I INTEND TO REPORT CA PNEUMONIA MEASURES GROUP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	G8538	ELDER MALTX SCR DOC F/U PLAN NOT DOC RNS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8526	PATCH CLOS NOT USED PT UNDRGOING CNVNTNL CES RNS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	J7184	INJECTION VWF COMPLEX WILATE PER 100 IU VWF:RCO	HCPCS - DRUGS (NOT ORAL)	EXPIRED	02/01/2011	12/31/2078			
MMAI-Medicare/Medicaid	G9044	LW VISN REHAB SRVC QUAL REHAB TEACHR EA 15 MIN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	G8639	INFLUENZA IMMUN WAS ADMIN/PREVIOUSLY RECEIVED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	G8623	PT TREATED WRITING NOT SCORED WRITING FCM ADM/DC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8615	SCORE READING FCM D/C HIGHER THAN AT ADMISSION	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8607	SCOR ATTN FCM D/C NOT HI ADM NO RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8591	MOST RECENT DIASTOLIC BLOOD PRESSURE GT=90 MM HG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	D0360	CONE BEAM CT - CRANIOFACIAL DATA CAPTURE	HCPCS - DENTAL	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G9235	ALL QUAL ACTION APPL MSR GEN SUR MSR GRP PERFORM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9219	PCP P NOT PRSC 3 MO CD4+ BLW 200 C/MM3 MED RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9211	HEP C QUAN RNA NOT PERF 4-12 WK AFTR AV NO RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9203	RNA TEST HEP C DOC 12 MO PRIOR INIT AV TX HEP C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G8466	CLINC DOC PT NOT ELIG SUICIDE RISK ASSESS MDD	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8441	NO DOC PAIN ASSESSMENT PRIOR TO INIT TREATMENT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8425	FLU VACC STAT SCREEN PT NOT CURR & CNSL NOT PROV	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8386	DIABETIC PT W/NO DOC OF LOW-DENSITY LIPOPROTEIN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8378	CLIN DOC PT NOT ELIG RADIATION THERAPY MEASURE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8370	ASTHMA PT W/NUM FREQ SYMP/PT CMPL ASSESS NOT DOC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8345	PT NOT DOC DEXA MEAS ORDERED/PERFORM OR PHARM TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8314	PT NOT DOC MAC EX MAC THICK/HEM&NO DOC MD SEV	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8302	PT DOC SPEC TARGET INTRAOCULAR PRESS RANGE GOAL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8279	PT NOT DOC HAVE RECEIVED CMPL PHYSICAL SKIN EXAM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8257	CLIN NOT DOC RECONCILIATION DC MED CURR MED LIST	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8234	PT NOT DOC HAVE RECEIVED DYSPHAGIA SCREENING	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8214	CLIN NOT DOC ORDER VTE PROPH 24 HR PRIOR/AFTR SX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8184	CLIN DOC PT W/HF & AF NOT ELIG WARFARIN TX MSR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8039	CAD PT W/LOW DENSITY LIPOPROTEIN DOC GREATER THAN 100 MG/DL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8031	HEART FAIL PT W/LVSD NOT DOC ON BETA-BLOCKER TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8023	DIAB PT REC BP EQUAL TO / GREATER THAN 140 SYST OR EQUAL TO	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8015	DIAB PT W/REC HGB A1C LEVL DOC AS GREATER THAN 9 PCT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8007	ACUTE MI: PT NOT DOC RECEIVED ASPIRIN AT ARRIVAL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	C9283	INJECTION ACETAMINOPHEN 10 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	08/01/2009	12/31/2011			
MMAI-Medicare/Medicaid	C9267	INJECTION VWF COMPLEX WILATE-100 IU VWF: RCO	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9258	INJECTION TELAVANCIN 10 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	C9131	INJECTION ADO-TRASTUZUMAB EMTANSINE 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	07/01/2013	07/01/2013			
MMAI-Medicare/Medicaid	0303T	INSJ/RMVL RPLCMT ICAR ISCHM MNTRNG SYS ELTRD	CATEGORY III CODES	EXPIRED	07/01/2012	12/31/2078			
MMAI-Medicare/Medicaid	0279T	CELL ENUMRTION W/IMMUN SELXN & ID FLUID SPECIMN	CATEGORY III CODES	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	0176T	AQUEOUS CANAL TRLUML DILAT W/O STENT RETENTION	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0167T	TRANSMYOCARDIAL CLOSURE V-SEPTL DFCT W/BYPASS	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0158T	LAPT REVJ/RMVL GASTRIC ELTRD LESS THAN CURVATURE	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G9324	ALL NEC DATA ELEMENTS NOT INCL REASON NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9244	ANTIRETROVIRAL THEREAPY NOT PRESCRIBED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G8688	CURRENTLY SMOKELESS TOBACCO USER NO EXPS SHS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	G8680	MOST RECENT DIASTOLIC BLOOD PRESSURE 80-89 MM HG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	12/31/2012			
MMAI-Medicare/Medicaid	G8518	CLINICAL STAGE PRIOR TO SURG RESECTION REC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8469	CLIN DOC PT LVEF LT 40 PCT/DPRESD LVS NO ELIG ACE I	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	G8642	ELIG PRACTICE RURAL W/O INTERNET REQ HARDSHIP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	G8626	PT TREATED NOT SCORED SWALLOWING FCM ADM/D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8618	SCORE SPOKEN LANG EXPRSSN FCM D/C HI THAN ADMIS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8610	SCOR MEM FCM D/C NOT HI ADM NO RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G9238	I INTEND REPORT OPTIMIZ PT EXPOSURE IR MSR GROUP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9222	PCP PROPH PRSC W/I 3 MO L CD4+ CC BLW 200 CE/MM3	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9206	PATIENT START ANTIVIRAL TX HEP C DUR MSR PERIOD	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G8453	TOBACCO USE CESSATION INTERVENTION COUNSELING	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8445	NO PRSC GEN DUR ENCNTR NO ACCESS QUAL E-PRSC SYS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8436	PT NOT ELIGIBLE/NOT APPROP COGNITIVE IMPR SCR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8408	ABI MEASUREMENT WAS NOT OBTAINED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8389	MDS PT NO DOC IRON STORE PRIOR ERYTHROPOIETIN TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8381	FOR PT STG IC-III BRST CA DOC REC TAMOXIFEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8373	CHEMOTHAPY PLAN DOC PRIOR CHEMO ADMINISTRATION	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8357	PATIENT NOT DOCUMENTED TO HAVE HAD ECG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8326	PT NOT DOC FUNDUS EVAL 6 MO PRIOR CATARACT SURG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8305	CLIN NOT PROV CARE POAG PT TIME TX GOAL DOC MSR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8289	PT NO DOC CAL&VIT D USE/CNSL CAL&VIT D USE/EXER	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8266	PT NOT DOC CHARACTERIZATION URINARY INCONTINENCE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8243	PT NOT DOC REC CT/MRI HEM LES INF NOT FINAL RPT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8220	PT NOT DOC RECEIVED DVT PROPH BY END HOSP DAY 2	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8193	CLIN NOT DOC ORDER PROPH ABX 1 HR PRIOR SX GIVEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	E0571	AROSL COMPRS BATTRY PWR USE W/SM VOLUME NEBULIZR	HCPCS - DME	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0304T	INSJ/RMVL RPLCMT ICAR ISCHM MNTRNG SYS DEVICE	CATEGORY III CODES	EXPIRED	07/01/2012	12/31/2078			
MMAI-Medicare/Medicaid	0280T	CELL ENUMRATION W/IMMUN SELXN ID FLUID SPEC I&R	CATEGORY III CODES	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	0185T	MULTIVARIATE ALYS PT FINDINGS CPTR PROBABILITY	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0177T	AQUEOUS CANAL TRLUML DILAT W STENT RETENTION	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0168T	RHINOPHOTOTHERAPY APPLICATION LIGHT BILATERAL	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0130T	1-PT CHRNC CARE DRUGS INVSTGJ	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G9325	CT NOT RPT RAD DO INDX REG MED RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9245	ANTIRETROVIRAL THERAPY PRESCRIBED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8689	TOBACCO USE NOT ASSESSED REASON NOS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	G8681	PT HOSP PRINCIPAL DX HEART FAIL DUR MEAS PERIOD	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	G8550	ALL QUAL ACTIONS CAP MSR PERFORMED FOR PATIENT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	G8534	DOC OF AN ELDER MALTREATMENT SCREEN & F/U PLAN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8519	CLIN DOC PT NOT ELIG CLIN STAGE B4 SURG RES MSR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8470	PT W/VEF GT EQU 40 PCT/DOC NOR/MILD DEPRESSED LVS FUNCT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	G8643	ELIG PRACTICE W/O PHARMACY E-PRESC REQ HARDSHIP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	G8619	SCR SPKN L FCM D/C NO HI ADM NO RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8611	PT TREATED MEMORY NOT SCORED MEMORY FCM ADM/D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8603	SCORE SPOKEN LANG COMP FCM D/C HIGHER THAN ADMIS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	K0008	CUSTOM MANUAL WHEELCHAIR/BASE	HCPCS - K CODES -DMERCS ONLY	YES	07/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G9207	HEP C GENOTYPE TEST DOC 12 MO PRIOR INIT AV TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G8462	CLIN DOC PT NOT ELIG CNSL CONTRCP PRI ANTIVIRAL;	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8454	TOBACCO USE CESSATION INTERVEN NOT CNSL RSN NS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8446	PROV ACCESS QUAL E-PRSC SYS PRSC GEN DUR ENCNTR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8437	DOC CLIN & PT INVLV W/DLVP PLAN OF CARE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8429	INCOMPL/NO DOC PT CURR MEDS W/DOSAGES ASSESSED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8409	CLIN DOC PT NOT ELIG FOR ABI MEASUREMENT MEASURE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8390	DIABETIC PT W/NO DOC BLOOD PRESSURE MEASUREMENT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8382	MM PT NO DOC PRSRB/RECV IV BISPHOSPHONATE TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8374	CHEMO PLAN NOT DOC PRIOR CHEMO ADMINISTRATION	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8360	PT NOT DOC HAVE VITAL SIGNS RECORDED & REVIEWED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8330	PT NOT DOC D MAC/FUND EX MAC EDEMA NOT DOC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8306	PRIM OAG PT W/IO PRESS ABVE TRGT GOAL DOC POC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8293	COPD PATIENT W/O SPIROMETRY RESULTS DOCUMENTED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8268	PT NOT DOC PLAN OF CARE FOR URINARY INCONTINENCE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8246	PT NOT ELIG MED HX REV ASSESS NEW/CHANGING MOLES	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8221	CLIN DOC PT NOT ELIG DVT PROPH BY END HOSP DAY 2	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8196	CLIN NOT DOC PROPH ABX ADMIN 1 HR PRIOR SURG INC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8171	PT ISOLATED CABG NOT DOC D/C ASPIRIN/CLOPIDOGREL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	C1879	TISSUE MARKER	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0318T	REPLACE AORTIC VALVE TTHORAC	CATEGORY III CODES	EXPIRED	01/01/2014	12/31/2078			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	0302T	INSJ/RMVL RPLCMT ICAR ISCHM MNTRNG SYS COMPL	CATEGORY III CODES	EXPIRED	07/01/2012	12/31/2078			
MMAI-Medicare/Medicaid	0183T	LOW FREQUENCY WOUND ULTRASOUND	CATEGORY III CODES	EXPIRED	04/03/2012	12/31/2078			
MMAI-Medicare/Medicaid	0166T	TRANSMYOCARDIAL CLOSURE V-SEPTL DFCT W/O BYPASS	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0157T	LAPAROTOMY IMPLTJ/RPLCMT GASTRIC ELECTRODE	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0124T	CONJUNCTVL INC W/POST XTRSCLERA PLCMT PHARM AGNT	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0105T	INERT GAS RBRTHING CAR OUTPUT MEAS XERS	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G9323	DOC MED RSN NOT CNT PREV CT CARD NM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G8695	LVEF GT EQU 40 PCT OR MILDLY DEPRSD LV SYST FUNCT/NORML	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	G8687	CURRENTLY TOB NONUSER NO EXPS SECONDHAND SMOKE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	G8679	MOST RECENT DIASTOLIC BLOOD PRESSURE LT 80 MM HG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	12/31/2012			
MMAI-Medicare/Medicaid	G8468	ACE I/ARB PRSC PT LVEFLT 40 PCT/DOC MOD/SEV DPRSD LVS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	G8641	FLU IMMUN WAS NOT ADMIN/PREV RECEIVED REASON NOS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	G8625	SCR SWALL FCM D/C NOT HI ADM NO RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8617	PT TREATED READING NOT SCORED READNG FCM ADM/D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8609	SCORE MEMORY FCM DISCHARGE HIGHER THAN ADMISSION	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	L1815	KNEE ORTHOSIS ELASTIC WITH JOINTS PREFAB	HCPCS - ORTHOTIC PROCEDURES	EXPIRED	01/01/2010	01/01/2078			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	D4272	APICALLY REPOSITIONING FLAP PROCEDURE	HCPCS - DENTAL	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	D1204	TOPICAL APPLICATION OF FLUORIDE - ADULT	HCPCS - DENTAL	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	4275F	HEP B VAC INJECTION ADMIN/PREVIOUSLY RCVD	CATEGORY II CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G9237	I INTEND TO REPORT GENERAL SURGERY MSR GROUP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9205	PATIENT START ANTIVIRAL TX HEP C DUR MSR PERIOD	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G8443	ALL PRSC DUR ENCOUNTR GEN BY QUAL E-PRSC SYS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8435	NO DOC COGNITIVE IMPAIR SCR USE STANDARD TOOL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8407	ABI MEASURED AND DOCUMENTED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8388	ESRD PT WITH URR OR KT/V NOT DOC BUT ELIG MSR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8380	FOR PT STG IC-III BRST CA NOT DOC REC TAMOXIFEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8372	CHEMO DOC RECVD/PRSC STAGE III COLON CANCER PTS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8354	PT NOT DOC RECV/TAKEN ASPIRIN 24 HRS B4 ER	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8322	PT NOT DOC PRE-SURG AXL LEN CRN PWR&IOL PWR CALC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8304	CLIN DOC PT NOT ELIG SPEC TRGT IO PRESS RNG GOAL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8285	PT NOT DOC HAVE RECEIVED PHRMCL THERAPY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8263	PT NOT DOC ASSESS PRESENCE/ABSENCE URIN INCONT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8240	IC STENOSIS PT 30-99 PCT RANGE NO DOC DIST IC DIA	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8219	PT DOC RECEIVED DVT PROPH BY END HOSPITAL DAY 2	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8186	CLIN DOC SX OA PT NOT ELIG ANL ASSESS FUNCT&PAIN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	C9281	INJECTION PEGLOTICASE 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	08/01/2009	12/31/2078			
MMAI-Medicare/Medicaid	C9273	SIPULEUCEL-T INCLUDING LEUKAPHERESIS PER INFUS	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	C9265	INJECTION ROMIDEPSIN 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9256	INJ DEXAMETHASONE INTRAVITREAL IMPLANT 0.1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0277T	BRONCHSCPY FLUORO W/BRNCHIAL THERMPLASTY /GT2LOBE	CATEGORY III CODES	EXPIRED	02/05/2013	02/05/2013			
MMAI-Medicare/Medicaid	0261T	HYPTHRM HEAD NEONATE 28D LT	CATEGORY III CODES	EXPIRED	02/01/2011	12/31/2078			
MMAI-Medicare/Medicaid	0156T	LAPS REVJ/RMVL GASTRIC ELTRD LESS THAN CURVATURE	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0104T	INERT GAS RBRTHING CAR OUTPUT MEAS REST	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0050T	RMVL VENTR DEV XTRCORP PRQ T-SEPTAL 1/DUAL	CATEGORY III CODES	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	G8686	CURRENTLY TOB SMOKER/CURR EXPS SECONDHAND SMOKE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	G8678	MOST RECENT SYSTOLIC BP 130 TO 139 MM HG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	12/31/2012			
MMAI-Medicare/Medicaid	G8640	CLIN HAS DOC PT NOT ELIG RECEIVE INFLUENZA IMMUN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	G8624	SCORE SWALLOWING FCM AT D/C HIGHER THAN ADMIS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8616	SCOR READ FCM D/C NOT HI ADM NO RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8608	PT TREATED ATTENTION NOT SCORED ATTN FCM ADM/D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8592	NO DOC BP MEASURE REASON NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	D4271	FREE SOFT TISSUE GRAFT PROCEDURE	HCPCS - DENTAL	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	D1203	TOPICAL APPLICATION OF FLUORIDE - CHILD	HCPCS - DENTAL	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	D0362	CONE BEAM 2-D RECONST EXISTING DATA MULTI IMAGES	HCPCS - DENTAL	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0030T	ANTIPROTHROMBIN ANTIBODY EACH IG CLASS	CATEGORY III CODES	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	G9236	ALL QUAL ACTION OPTIMIZ PT EXPOS IR MSR PERFORM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9204	RNA TEST HEP C NOT DOC 12 MO PRIOR INIT AV TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G8467	DOC NEW DX INITIAL/RECUR EPIS MAJOR DPRESSV D/O	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8459	CLIN DOC PT RECV ANTIVIRAL TX FOR HEP C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8434	DOC COGNITIVE IMPAIR SCR USING STANDARDIZED TOOL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8426	DOC PT NOT APPROP SCREEN &/ COUNSELING FLU VACC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8387	ESRD PT WITH HEMATOCRIT OR HEMOGLOBIN NOT DOC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8379	DOC RADIATION TX RECOMMEND WITHIN 12 MOS 1ST OV	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8371	CHEMO DOC NOT RECVD/PRSC STAGE III COLON CA PTS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8351	PATIENT NOT DOCUMENTED TO HAVE HAD ECG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8318	PT DOC NOT TO HAVE VISUAL FUNC STATUS ASSESSED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8303	PT NOT DOC SPEC TARGET IO PRESS RANGE GOAL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8282	PT NOT DOC RECEIVED COUNSELING PRFRM SELF-EXAM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8260	PT NOT DOC SURROGATE DECISN MAKER/ADV CARE PLAN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8238	PT NOT DOC REC ORDER OR CONSIDERATION REHAB SRVC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8217	PT NOT DOC RECEIVED DVT PROPH BY END HOSP DAY 2	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8185	PT DX W/SX OA W/DOC ANNUAL ASSESS FUNCT&PAIN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0305T	PROGRAM EVAL ICAR ISCHM MNTRNG SYS	CATEGORY III CODES	EXPIRED	07/01/2012	12/31/2078			
MMAI-Medicare/Medicaid	0186T	SUPRACHOROIDAL PHARMACOLOGIC AGENT DELIVERY	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0160T	TRANSCRANIAL MAG STIMJ TX PLANNING	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0141T	PNCRTC ISLET CELL TRNSPLJ PORTAL PERQ	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0079T	PLMT VISC XTN PROSTH EVASC RPR AAA EA VISC	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8690	CURRENT TOB SMOKER/CURR EXPOS SECONDHAND SMOKE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	G8520	CLIN STAGE PRIOR SURG RESECTION NOT RECORDED RNS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8479	CLINICIAN PRESCRIBED ACE INHIBITOR/ARB THERAPY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8471	LVEF WAS NOT PERFORMED OR DOCUMENTED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	J3488	INJECTION ZOLEDRONICCID RECLAST 1 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	04/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	G9041	LW VISN REHAB SRVC QUALIFIED OT 1 ON 1 EA 15 MIN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	G8644	ELIGIBLE PROF DOES NOT HAVE PRESCRIB PRIVILEGES	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	G8636	INFLUENZA IMMUNIZATION ADMIN/PREVIOUSLY RECEIVED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	G8620	PT TREATED NOT SCORE SPOKN LANG EXPRS FCM ADM/DC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8612	SCORE MOTOR SPEECH FCM D/C HIGHER THAN ADMISSION	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8604	SCOR LANG FCM D/C NOT HI ADM NO RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8596	LDL-C WAS NOT PERFORMED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8588	MOST RECENT SYSTOLIC BLOOD PRESSURE LT 140 MM HG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8556	REFERRED TO A PHYSICIAN FOR AN OTOLOGIC EVAL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G9208	HEP C GENOTYPE TEST NOT DOC 12 MO PRIOR INIT AV	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G8463	PATIENT RECEIVING ANTIVIRAL TX HEPATITIS C DOC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8455	CURRENT TOBACCO SMOKER	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8447	PT ENCOUNTER WAS DOC USING EHR CERTIFIED BY ATCB	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	G8438	NO DOC CLIN & PT INVLV DLVP TX PLAN/PLAN OF CARE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8402	TOBACCO USE CESSATION INTERVENTION COUNSELING	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8391	PT ASTHMA NO DOC LT CNTRL MED/ACCEPT ALT TX PRSC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8383	NO DOC RADIATION TX RECOMMEND IN 12 MOS 1ST OV	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8375	CLL PT W/NO DOC BASELINE FLOW CYTOMETRY PERFORMD	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8362	PT NOT DOC TO HAVE OXYGEN SATURATION ASSESSED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8334	DOC FIND MAC/FUND EX NOT CMNC PHYS MAN DIAB CARE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8307	PRIM OAG PT W/IO PRESS /BELW GOAL NO POC NECES	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8296	COPD PT NOT DOC INHALED BRONCHODILATOR TX PRSCED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8271	PT W/NO DOC SCREENING FUTURE FALL RISKS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8248	PT AT LEAST 1 ALARM SX NOT DOC HAD UP ENDO/REF	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8223	PT NOT DOC REC RX ANTIPLATELET THERAPY DISCHARGE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8200	ORDR CEFAZOLN/CEFUROXIME ANTIMICRB PROPH NOT DOC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8172	CLIN DOC PT ISOLAT CABG NOT ELIG ANTIPLAT TX D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	S2075	Laparoscopy, surgical; repair incisional or ventral hernia	2006 Code Set	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	0142T	PNCRTC ISLET CELL TRNSPLJ PORTAL OPN	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	0080T	EVASC RPR AAA PSEUDOARYSM ABDL AORTA VISC RS&I	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G9311	NO SURGICAL SITE INFECTION	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G8715	HD TX PRFRM LT 3 TIMES-WEEK/GT 3 TIMES PER WEEK	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2012	12/31/2012			
MMAI-Medicare/Medicaid	G8691	CURRENT TOB NONUSER NO EXPOS SECONDHAND SMOKE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	G8675	MOST RECENT SYSTOLIC BLOOD PRESSURE GT= 140 MM HG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	12/31/2012			
MMAI-Medicare/Medicaid	G8524	PATCH CLOSURE FOR PT UNDERGOING CONVENTNAL CEA	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	G8507	PROV DOC PT NOT ELIG PT VERFICATN CURRNT MEDS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8488	CLINICIAN INTENDS TO REPORT THE ESRD MSR GRP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8480	CLIN DOC PT NOT ELIG FOR ACE INHIBITOR/ARB TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8472	ACE I/ARB TX NOT PRSC PT LVEF LT 40 PCT/DOC DPRSD LVS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	G9042	LW VIS REHAB SRVC CERT ORNT&MOBIL SPCLIST 15 MIN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	12/31/2078			
MMAI-Medicare/Medicaid	G8637	CLINCIAN DOC PT NOT ELIG INFLUENZA IMMUNIZATION	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	08/01/2009	08/01/2009			
MMAI-Medicare/Medicaid	G8621	SCORE WRITING FCM D/C WAS HIGHER THAN AT ADMIS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8613	SCR M SPCH FCM D/C NO HI ADM NO RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8605	PT TREATED NOT SCORD SPOKN LANG COMP FCM ADM/D/C	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8589	MOST RECENT SYSTOLIC BLOOD PRESSURE GT=140 MM HG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8557	PT NOT ELIGIBLE REFERRAL OTOLOGIC EVALUATION MSR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			

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MMAI-Medicare/Medicaid	L2924	HAND FINGER ORTHOSIS WITHOUT JOINTS PREFAB	HCPCS - ORTHOTIC PROCEDURES	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	0016T	DSTRJ LOCLZD LES CHOROID TRANSPUPILLARY THERMOTH	CATEGORY III CODES	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G9233	ALL QUAL ACTION APPLIC MSR TKR MSR PERFRM PT RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9217	PCP P NOT PRSC 3 MO CD4+ BELOW 200 C/MM3 NO RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G9209	HEP C QUAN RNA TEST PERF 4-12 WK AFTR INIT AV TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2014	01/01/2014			
MMAI-Medicare/Medicaid	G8456	CURRENT SMOKELESS TOBACCO USER	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8448	PT ENCOUNTER DOC USING PQRI QUAL EHR/OTH SYSTEM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	12/31/2012			
MMAI-Medicare/Medicaid	G8439	DOC PT NOT ELIGIBLE CO-DEVELOPMENT PLAN OF CARE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8423	DOC PT SCREENED FLU VACC CURRENT OR PT COUNSELED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8403	TOBACCO CESSATION INTERVENTION NOT COUNSELED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8384	BL CYTOGENETIC TEST NOT PRFRM PT MDS/ACUT LEUKEM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8376	CLIN DOC BRST CA PT NOT ELIG TAMOXIFEN/AIT MSR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8365	PT NOT DOC TO HAVE MENTAL STATUS ASSESSED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8338	CLIN NOT DOC CMNC PHYS PT FRAC PT TESTED OSTEO	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8308	POAG PT W/IO PRESS ABV TARGET & NOT DOC RECV POC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8298	PT DOC RECEIVED OPTIC NERVE HEAD EVALUATION	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8274	CLIN NOT DOC PRESENCE/ABSENCE OF ALARM SYMPTOMS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8251	PT NOT DOC REC ESOPH BX SUSPICION BARRETT ESOPH	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8226	PT NOT DOC REC RX ANTICOAGULANT TX AT DISCHARGE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8204	CLIN NOT DOC ORDER DC PROPH ABX 24 HR SURG END	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	G8182	CLIN NOT PROV CARE CARD PT RQR TIME LDL MSR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	04/01/2010	04/01/2010			
MMAI-Medicare/Medicaid	S3900	SURFACE ELECTROMYOGRAPHY	HCPCS - TEMP NATIONAL CODES	NON-COV	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	Q4134	HMATRIX PER SQUARE CENTIMETER	HCPCS - TEMP CODES	YES	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	Q4127	TALYMED PER SQ CM	HCPCS - TEMP CODES	YES	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	Q4125	ARTHROFLEX PER SQ CM	HCPCS - TEMP CODES	YES	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	Q4123	ALLOSKIN RT PER SQ CM	HCPCS - TEMP CODES	YES	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	Q4121	THERASKIN PER SQ CM	HCPCS - TEMP CODES	YES	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	Q4118	MATRISTEM MICROMATRIX 1 MG	HCPCS - TEMP CODES	YES	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	Q4117	HYALOMATRIX PER SQ CM	HCPCS - TEMP CODES	YES	08/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	29583	APPL MLTLAYR COMPRES SYSTEM UPPER & LOWER ARM	SURGERY - MUSCULOSKELETAL SYST	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	29582	APPL MLTLAYR COMPRES THGH LEG ANKLE FT WHEN DONE	SURGERY - MUSCULOSKELETAL SYST	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S9015	AUTOMATED EEG MONITORING	HCPCS - TEMP NATIONAL CODES	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	S8262	MANDIB ORTHO REPOSITION DEVICE EACH	HCPCS - TEMP NATIONAL CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S8032	LOW-DOSE COMPUTED TOMOGRAPHY LUNG CANCER SCRNG	HCPCS - TEMP NATIONAL CODES	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	S5011	5% DEXTROSE-LACTATED RINGERS 1000ML	HCPCS - TEMP NATIONAL CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S3890	DNA ANALYSIS FECAL COLOREC CA SCR	HCPCS - TEMP NATIONAL CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S3721	PROSTATE CANCER ANTIGEN 3 TESTING	HCPCS - TEMP NATIONAL CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2361	EACH ADD CERVICAL VERTEBRAL BODY	HCPCS - TEMP NATIONAL CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2360	PERQ VERTPLSTY 1 VERT UNI/BIL; CERV	HCPCS - TEMP NATIONAL CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0195	PNEUMCOCCL CONJUGAT VAC IM 5-9 YR NOT PREV RECVD	HCPCS - TEMP NATIONAL CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q9981	ROLAPITANT ORAL 1 MG	HCPCS - TEMP CODES	EXPIRED	08/02/2016	12/31/2078			
MMAI-Medicare/Medicaid	Q9980	HYLAN/DER GENVISC 850 FOR IA INJ	HCPCS - TEMP CODES	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	Q9979	INJECTION ALEMTUZUMAB 1 MG	HCPCS - TEMP CODES	EXPIRED	12/08/2015	12/08/2015			
MMAI-Medicare/Medicaid	Q9978	NETUPITANT 300 MG AND PALONOSETRON 0.5 MG ORAL	HCPCS - TEMP CODES	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	Q9977	COMPOUNDED DRUG NOC	HCPCS - TEMP CODES	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	Q9976	INJ FERRIC PYP CIT SOL 0.1 MG IRON	HCPCS - TEMP CODES	EXPIRED	01/01/2010	07/14/2015			
MMAI-Medicare/Medicaid	Q4129	UNITE BIOMATRIX PER SQ CM	HCPCS - TEMP CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4120	MATRISTEM BURN MATRIX PER SQ CM	HCPCS - TEMP CODES	EXPIRED	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	Q4119	MATRISTEM WOUND MATRIX PER SQUARE CENTIMETER	HCPCS - TEMP CODES	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G9677	ALL QLTY ACT APPLIC MSR CV PREV MSR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9673	I INTEND TO RPR THE CV PREV MSR GRP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9672	ALL QLTY ACT APPL MSR DIAB RP MSR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9671	I INTEND TO RPT THE DIAB RP MSR GRP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9670	ALL QLTY ACT APP MSR MX CHR CND MSR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9669	I INTND TO RPT MX CHRN COND MSR GRP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9667	DC MD R NO STATN TX U/RCV ORD STATN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9657	TRNSF OF CARE DUR ANESTHETIC/TO ICU	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9653	PT NOT TX SYS/BIO MED PSO AL 6 MOS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9652	PT BEEN TX SYS/BIO MED PSO AL 6 MOS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9650	DOC THAT PATIENT DECLINED TX CHANGE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9619	DOC REASON NO SCR FOR UTERN MALIG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9581	DOOR-PUNCT TIME >2 HRS RSN DOC CLIN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9572	IND D PHQ-SCR>9 DC 12M DNMNTR ID PR	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9499	PT NOT ST/RECV AV TX HEP C MSR PER	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			

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MMAI-Medicare/Medicaid	G9467	PT RCVD/RCV CSGT /EQU 10 MG/D PRD EQ 60/GT CNS D L 12 M	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9466	ALL QUAL ACT APPLIC MSR AOE MSR GRP PRFRMD PT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9465	I INTEND TO REPORT THE AOE MEASURES GROUP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9464	ALL QUAL ACT MSR SINUSITIS MSR GRP PRFRM FOR PT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9463	I INTEND TO REPORT THE SINUSITIS MEASURES GROUP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9443	STATIN NOT PRESCRIBED AT DISCHARGE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9442	STATIN NOT PRESCRIBED FOR DOCUMENTED REASONS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9441	STATIN PRESCRIBED AT DISCHARGE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9440	P2Y INHIBITOR NOT PRESCRIBED AT DISCHARGE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9439	P2Y INHIBITOR NOT PRESCRIBED FOR DOC REASONS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9438	P2Y INHIBITOR PRESCRIBED AT DISCHARGE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9437	ASPIRIN NOT PRESCRIBED AT DISCHARGE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9436	ASPIRIN NOT PRESCRIBED FOR DOCUMENTED REASONS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9435	ASPIRIN PRESCRIBED AT DISCHARGE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9433	DEATH PERM NH RES/HSPC/PC T MSR PRD	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9392	PT NO REFR +-1 D EYE- CAT S 1 MO FU	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G9391	PT REFR +-1 D EYE-CAT SURG 1 MO F/U	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9379	PT NOT ACHV FLAT RET 6 MO POST SURG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9378	PT CONT RETINA ATTCH 6 MO F/U VISIT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9377	PT NO RET ATTCH AFTR 6 MO FLW 1 SRG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9376	PT CONT RET ATTCH 6 MO F/U 1 SURG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9370	IND NOT F 2 PRS AP MED/NO PDC 0.8/>	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9369	IND FLL LST 2 PRSC AP MED&PDC 0.8/>	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9363	DUR MAC/PNB NO GA/NEURAXIAL<60 MIN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G9362	DUR MAC/PNB NO GA 60 MIN/>ANES RCRD	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G8977	I INTEND TO REPORT THE ONCOLOGY MEASURES GROUP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8953	ALL QUAL ACT APPLIC MSR ONC MSR GRP PERF FOR PT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8951	PREHTN/HTN BP DOC FU NOT PT NOT ELG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8948	NO NEUROPSYCHIATRIC SYMPTOMS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8940	SCR CLIN DEP DOC FU PLAN NOT DOC PT NOT ELGIBLE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8929	ADJ CHEMO NOT PRSC/RECV RSN NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8928	ADJUVANT CHEMO NOT PRSC/PREV RECEIVED DOC REASON	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8927	ADJ CHEMO REF PRSC/PREV RECV AJCC STAGE III CC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8906	I INTEND TO REPORT THE CATARACT MEASURES GROUP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8903	I INTEND TO REPORT PARKINSONS DZ MEASURES GROUP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8902	I INTEND TO REPORT THE DEMENTIA MEASURES GROUP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8900	I INTEND TO REPORT SLEEP APNEA MEASURES GROUP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8899	I INTEND TO REPORT INFLAMMATORY BOWEL DZ MSR GRP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8898	I INTEND TO REPORT CHRONIC OBSTR PULM DX MSR GRP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8871	PT NOT RECV 1ST COURSE ANTI-TNF TX	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8870	HEP B VAC ADM/PREV&REC 1ST ANTI-TNF	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8868	PATIENTS RECEIVING FIRST COURSE ANTI-TNF THERAPY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8853	POSITIVE AIRWAY PRESSURE THERAPY NOT PRESCRIBED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8848	MILD OBSTRUCTIVE SLEEP APNEA AHI OR RDI LT 5	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8784	PATIENT NOT ELIGBL E.G. PT REFUSES URGENT/EM SIT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8765	ALL QUAL ACTIONS APPLIC CATARACT MEAS PERFORM PT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8762	ALL QUAL ACTIONS PARKINSONS DZ MSR GRP PRFRM PT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8761	ALL QUAL ACTIONS APPLIC DEMENTIA MEAS PERFORM PT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8759	ALL QUAL ACT APPL MSR SLEEP APNEA MSR GRP PRF PT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8758	ALL QUALITY ACT APPLIC MSR IBD MSR GRP PERF PT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8757	ALL QUALITY ACT APPLIC MSR COPD MSR GRP PERF PT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8728	FASTING LIPID PROFILE NOT PERF REASON NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8726	CLINICIAN DOC REASON NOT PERF FASTING LIPID PROF	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8725	FASTING LIPID PROFILE PERFORMED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8720	TOTAL KT/V LESS THAN 1.7 PER WEEK	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8718	TOTAL KT/V >/= TO 1.7 PER WEEK	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8717	SPKT/V LESS THAN 1.2 RSN NOT GIVEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8714	HEMO TX PERF EXACTLY 3X PW>90 DAYS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8713	SPKT/ V GREATER THAN/EQUAL TO 1.2	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8646	ALL QUALITY ACTION ASTHMA MEASURE PERFORMED PT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8645	I INTEND TO REPORT THE ASTHMA MEASURES GROUP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8634	CLIN DOC PT NOT ELIG PHARM TX FOR OSTEOPOROSIS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G8551	ALL QUAL ACTIONS HEART FAIL MSR PERFORMED FOR PT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8549	ALL QUAL ACTIONS HEP C MSR PERFORMED FOR PATIENT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8548	I INTEND TO REPORT HEART FAILURE MEASURES GROUP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8545	I INTEND TO REPORT HEPATITIS C MEASURES GROUP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8544	I INTEND TO REPORT THE CABG MEASURES GROUP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8532	CLIN DOC PT VA NO AV FIST NO RSN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8531	CLIN DOC PT NOT ELIG AUTOGN AV FIST	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8530	AUTOGENOUS AV FISTULA RECEIVED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8500	ALL QUAL ACTION APPL MSR HIV/AIDS MSR GRP PRFRM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8499	ALL QUAL ACTION APPL MSR RA MSR GRP PERFORMED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8498	ALL QUAL ACTION APPL MSR CAD MSR GRP PERFORMED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8497	ALL QUAL ACTION APPL MSR CABG MSR GRP PERFORMED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8496	ALL QUAL ACTION APPL MSR PREV CARE MSR GRP PRFRM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8495	ALL Q ACT APPL MSR CHRN KID DZ MSR GRP PERF PT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8494	ALL QUAL ACTION APPL MSR DM MSR GRP PERFORMED	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8491	I INTEND TO REPORT THE HIV/AIDS MEASURES GROUP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8490	I INTEND TO REPORT RHEUMATOID ARTHRITIS MSR GRP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8489	I INTEND TO REPORT THE CAD MEASURES GROUP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G8487	I INTEND TO REPORT THE CHRONIC KIDNEY DZ MSR GRP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8486	I INTEND TO REPORT THE PREVENTIVE CARE MSR GRP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8485	I INTEND TO REPORT DIABETES MELLITUS MSR GROUP	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8461	PATIENT RECV ANTIVIRAL TX HEP C DUR MSR PERIOD	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8460	CLIN DOC NOT ELIG QUAN RNA TEST WK 12;NO ANTIVRL	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8458	CLINICIAN DOC PT NOT ELIG CAND GENOTYPE TESTING	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8401	CLINICIAN DOC PT NOT ELIG CANDIDATE FOR SCREEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G6028	ANOSCOPY HIGH RESOLUTION; W/BIOPSY	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	G6027	ANOSCOPY HIGH RES;DX INCL CLCT SPEC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	G6025	COLO FLEX PROX TO SP FLEXR;TRANSENDO STENT PLCMT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6024	COLO FLEX; PROX TO SP F; ABL TUMOR POLYP/OTH LES	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6023	SIGMOIDOSCOPY FLEX; TRANSENDO STENT PLACEMENT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6022	SIGMOIDOSCOPY FLEXIBLE; ABL TUMOR POLYP/OTH LES	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6021	UNLISTED PROCEDURE INTESTINE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	G6020	COLONOSCOPY THROUGH STOMA; TRANSENDO STENT PLCMT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G6019	COLONOSCOPY-STOMA; ABLATION TUMOR POLYP/OTH LES	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	G6018	ILEOSCOPY THROUGH STOMA;TRANSENDO STENT PLCMT	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G3001	ADMINISTRATION AND SUPPLY OF TOSITUMOMAB 450MG	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0437	SMOKING & TOB CESS CNSL AS PT; INTENSIVE GT 10 MIN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G0436	SMOKE TOB CESSATION CNSL AS PT; INTRMED 3-10 MIN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	G0389	US B-SCAN &/OR REAL TIME W/IMAG DOC; AAA SCREEN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	05/01/2017	12/31/2078	Carve Out		Please contact eviCore, Inc. for prior authorization of these services at www.eviCore.com, phone 888-693-3211 or fax 844-822-3862.
MMAI-Medicare/Medicaid	G0164	SKL SRVC LPN/RN TRN&/ED PT/FAM HH/HOSPICE 15 MIN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G0163	SKILLED SERVICE LPN/RN OBS & ASSESS PT EA 15 MIN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	D9931	CLEANING AND INSPECTION OF A REMOVABLE APPLIANCE	HCPCS- DENTAL-Misc Svcs	EXPIRED	12/08/2015	12/08/2015			
MMAI-Medicare/Medicaid	D9242	IV CONSCIOUS SEDATION/ANALG - EA ADD 15 MINUTES	HCPCS-DENTAL-Anesthesia	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	D9241	IV CONSCIOUS SEDATION/ANALG - 1ST 30 MINUTES	HCPCS-DENTAL-Anesthesia	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	D9221	DEEP SEDATION/GENERAL ANESTHESIA-EA ADD 15 MIN	HCPCS-DENTAL-Anesthesia	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	D9220	DEEP SEDATION/GENERAL ANESTHESIA-1ST 30 MINUTES	HCPCS- DENTAL-Anesthesia	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	D6975	COPING	HCPCS - DENTAL	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	D6079	IMPL/ABUT SUPPORTED FIX DENTUR PART EDNTULS ARCH	HCPCS - DENTAL	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	D6078	IMPLNT/ABUT SUPP FIXED DENTURE CMPL ENDENT ARCH	HCPCS - DENTAL	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	D6054	IMPL/ABUT SUPP REMV DENTUR PART EDNTULS ARCH	HCPCS - DENTAL	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	D6053	IMPL/ABUT SUPP REMV DENTUR CMPL EDNTULS ARCH	HCPCS - DENTAL	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	D5861	OVERDENTURE - PARTIAL BY REPORT	HCPCS-DENTAL-Denture-Other	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	D5860	OVERDENTURE - COMPLETE BY REPORT	HCPCS-DENTAL-Denture-Other	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	D3354	Pupal regeneration - (completion of regenerative treatment i	HCPCS-DENTAL-Procedure-Other	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	D2970	TEMPORARY CROWN FRACTURED TOOTH	HCPCS-DENTAL-Restoration Oth	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	D0421	GENETIC TEST FOR SUSCEPTIBILITY TO ORAL DISEASES	HCPCS- DENTAL-Tests and Lab	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	D0363	CONE BM 3-D RECNS XST DATA MX IMAGE	HCPCS-DENTAL-Radiographs	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	D0290	POST-ANT/LAT SKULL&FACE BONE FILM	HCPCS - DENTAL	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	D0260	EXTRAORAL-EA ADD RADIOGRAPHIC IMAGE	HCPCS-DENTAL-Radiographs	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	C9800	DERM INJ FACL LDS PRVS RADIESSE/SCULPTRA FILLER	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	C9743	INJ/IMPL BULKING/SPACER MATL W/WO IMAGE GUIDANCE	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	12/08/2015	12/08/2015			
MMAI-Medicare/Medicaid	C9742	LARYNGSCOP FLX FIBROPT INJ VOCAL CORD TX INCL DX	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	C9737	LAPAROSCOPY SURG ESOPHAGEAL SPHINCTER AUG W/DEVC	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	C9724	ENDO FULL-THICK PLICATION STOMACH EPS; INCL ENDO	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9494	INJECTION OCRELIZUMAB 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	09/13/2017	12/31/2078			
MMAI-Medicare/Medicaid	C9491	INJECTION AVELUMAB 10 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	09/13/2017	12/31/2078			

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MMAI-Medicare/Medicaid	C9480	INJECTION TRABECTEDIN 0.1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	08/02/2016	12/31/2078			
MMAI-Medicare/Medicaid	C9479	INSTILLATION CIPROFLOXACIN OTIC SUSPENSION 6 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	08/02/2016	08/02/2016			
MMAI-Medicare/Medicaid	C9478	INJECTION SEBELIPASE ALFA 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	08/02/2016	12/31/2078			
MMAI-Medicare/Medicaid	C9477	INJECTION ELOTUZUMAB 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	08/02/2016	12/31/2078			
MMAI-Medicare/Medicaid	C9476	INJECTION DARATUMUMAB 10 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	08/02/2016	12/31/2078			
MMAI-Medicare/Medicaid	C9475	INJECTION NECITUMUMAB 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	C9474	INJECTION IRINOTECAN LIPOSOME 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	C9473	INJECTION MEPOLIZUMAB 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	C9472	INJECTION TALIMOGENE LAHERPAREPVEC 1 MILLION PFU	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	C9471	HYALURONAN/DERIVATIVE HYMOVIS FOR IA INJ 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	C9470	INJECTION ARIPIPRAZOLE LAUROXIL 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	C9461	CHOLINE C 11 DIAGNOSTIC PER STUDY DOSE	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2016	04/01/2016			
MMAI-Medicare/Medicaid	C9459	FLUTEMETAMOL F18 DIAGNOSTC TO 5 MCI	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	C9458	FLORBETABEN F18 DIAGN TO 8.1 MCI	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	C9457	INJ SULFUR HEXAFLUORIDE LIPID MICROSPHERE PER ML	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	12/08/2015	12/08/2015			
MMAI-Medicare/Medicaid	C9456	INJECTION ISAVUCONAZONIUM SULFATE 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	12/08/2015	12/08/2015			

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MMAI-Medicare/Medicaid	C9455	INJECTION SILTUXIMAB 10 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9454	INJECTION PASIREOTIDE LONG ACTING 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9453	INJECTION NIVOLUMAB 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9452	Inj, ceftolozane/tazobactam	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2015	04/01/2015			
MMAI-Medicare/Medicaid	C9451	Injection, peramivir	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2015	12/31/2078			
MMAI-Medicare/Medicaid	C9450	Fluocinolone acetonide implt	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2015	12/31/2078			
MMAI-Medicare/Medicaid	C9449	Inj, blinatumomab	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2015	04/01/2015			
MMAI-Medicare/Medicaid	C9448	NETUPITNT 300MG&PALONOSTRN 0.5 MG O	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2015	12/31/2078			
MMAI-Medicare/Medicaid	C9446	INJECTION TEDIZOLID PHOSPHATE 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9445	C-1 esterase, Ruconest	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2015	12/31/2078			
MMAI-Medicare/Medicaid	C9444	INJECTION ORITAVANCIN 10 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9443	INJECTION DALBAVANCIN 10 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9442	INJECTION BELINOSTAT 10 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9441	INJECTION FERRIC CARBOXYMALTOSE 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	C9349	PURAPLY&PRPL ANTIMICRBL TYP P SQ CM	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9140	INJECTION FACTOR VIII 1 I.U.	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/27/2017	12/31/2078			

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MMAI-Medicare/Medicaid	C9139	INJ FACTOR IX ALBUMIN FUSION PRT IDELVION 1 I.U.	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	11/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	C9138	INJECTION FACTOR VIII 1 I.U.	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	C9137	INJECTION FACTOR VIII PEGYLATED 1 I.U.	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	04/01/2016	12/31/2078			
MMAI-Medicare/Medicaid	C9136	INJECTION FACTOR VIII FC FUSION PROTEIN PER I.U.	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	C9121	INJECTION ARGATROBAN PER 5 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9027	INJECTION PEMBROLIZUMAB 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9026	INJECTION VEDOLIZUMAB 1 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	C9025	INJECTION RAMUCIRUMAB 5 MG	HCPCS - C CODES - OUTPATIENT PP	EXPIRED	10/01/2014	10/01/2014			
MMAI-Medicare/Medicaid	A9545	IODINE I-131 TOSITUMOMAB THERAPEUTIC PER TX DOSE	HCPCS - ADMIN MISC & INVEST	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9544	IODINE I-131 TOSITUMOMAB DX PER STUDY DOSE	HCPCS - ADMIN MISC & INVEST	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7011	CORRG TUBING NON-DISP/NEB USE 10 FT	HCPCS - MED-SURG SUPPLIES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90703	TETANUS TOXOID ADSORBED INTRAMUSCULAR	MEDICINE - VACCINES, TOXOIDS	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	78190	KINETICS PLATELET W/WO DIFFRNTL ORGAN/TIS LOCLZJ	RADIOLOGY - NUCLEAR MEDICINE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	64565	PRQ IMPLTJ NSTIM ELTRD NEUROMUSCULAR	SURGERY - NERVOUS SYSTEM	EXPIRED	10/03/2016	12/31/2078	Carve Out		Please contact eviCore, Inc. for prior authorization of these services at www.eviCore.com, phone 888-693-3211 or fax 844-822-3862.
MMAI-Medicare/Medicaid	36515	THER APHERESIS W/XTRCORP IMMUNODSPTJ& PLSM RENFJ	SURGERY - CARDIOVASCULAR SYSTE	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0438T	TPRNL PLMT BIODEGRADABLE MATRL PERIPROSTATIC	CATEGORY III CODES	EXPIRED	08/02/2016	08/02/2016			

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MMAI-Medicare/Medicaid	0393T	ESOPHAGO SPHINCTER AUGMENT DEVICE REMOVAL	CATEGORY III CODES	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	0392T	LAP ESOPHAG SPHINCTER AUGMENT PROC PLACE DEVICE	CATEGORY III CODES	EXPIRED	01/01/2010	01/01/2078			
MMAI-Medicare/Medicaid	0340T	ABLATE PULM TUMORS W/PLEURA/CHEST WALL EXTSN	CATEGORY III CODES	EXPIRED	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	0336T	LAPS ABLATJ UTERINE FIBROIDS W/INTRAOP US GDNC	CATEGORY III CODES	EXPIRED	01/01/2014	12/31/2078			
MMAI-Medicare/Medicaid	0311T	CAL & ALYS CNTRL ARTL PRESS	CATEGORY III CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0301T	DEST/REDUC MALIG BRST TUMR W/US THRMORX GUIDANCE	CATEGORY III CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0299T	ESW HI ENERGY W/TOPCAL APP &DRESNG CARE 1ST WND	CATEGORY III CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0292T	INTRAV OPTCAL COHRNCE TMGRPHY W/S&I ADL VESL	CATEGORY III CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0291T	INTRAV OPTCL CHERNCE TMGRPHY W/S&I INTL VESL	CATEGORY III CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0289T	CORNEA INCISNS DONOR CORNEA W/LASR KERTPLSTY	CATEGORY III CODES	EXPIRED	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	0288T	ANSCPY W/DELVRY THERMAL ENERGY MUSCLE ANAL CANAL	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0287T	NEARINFRED GUIDANCE VASC ACES RL TIME DIG VISU	CATEGORY III CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0286T	NEAR INFRARED SPECTROSCPY STUDIES LOW EXT WOUNDS	CATEGORY III CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0285T	ELEC ANLYS IMPLANT SUBQ FIELD STIM PG REPROGRAMM	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0284T	REV/REMVL PG/ELCTRODES IMAGNG ADDN NEW ELCTRODES	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0283T	PERC/OPEN IMPLNT NEUROSTIM ELECTRODE SUBQ PERM	CATEGORY III CODES	EXPIRED	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	0282T	PERC/OPEN IMPLNT NEUROSTIM ELECTRODE SUBQ TRIAL	CATEGORY III CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0281T	PERC TRANSCTH CLOSR LT ATRIAL APPNDGE IMPLNT S&I	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0262T	IMPLTJ PULM VLV EVASC APPR	CATEGORY III CODES	EXPIRED	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	0244T	CONT MSR BRONCHODIL WHEEZE	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0243T	INTM MSR BRONCHODIL WHEEZE	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0241T	ESOPH MOTILITY W/STIM/PERF	CATEGORY III CODES	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	0240T	ESOPH MOTILITY 3D TOPOGRAPHY	CATEGORY III CODES	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	0225T	ACOUSTIC ECG ANALY & REPROG	CATEGORY III CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0224T	ACOUSTIC ECG 1+ ANALYSIS	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0223T	ACOUSTIC ECG W/I&R	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0182T	HDR ELECTRONIC BRACHYTHERAPY PER FRACTION	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0172T	PST SPINOUS PROCESS DEVICE INSERT LMBR EA LVL	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0171T	PST SPINOUS PROCESS DEVICE INSERT LMBR 1 LVL	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0169T	STEREOTACTIC PLACEMENT CATHETER BRAIN	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0123T	FISTULIZATION SCLERA GLAUCOMA CILIARY BODY	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0103T	HOLOTRANSCOBALAMIN	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	0099T	IMPLTJ INTRASTROMAL CORNEAL RING SEGMENTS	CATEGORY III CODES	EXPIRED	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	0019T	EXTRACORPOREAL SHOCK WAVE MUSCSKEL NOS LOW ENRGY	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0015U	RX METAB ADVRS RX RXN DNA 22 GENES BLD/BUCCAL	PATH & LAB - CHEMISTRY	EXPIRED	08/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	0008M	ONCOLOGY BREAST MRNA 58 ALGORITHM RISK SCORE	Path & Lab - CHEMISTRY	EXPIRED	07/14/2014	12/31/2078			
MMAI-Medicare/Medicaid	0004U	NFCT DS DNA 27 RESIST GENES BCT CUL PR ISOL	PATH & LAB - CHEMISTRY	EXPIRED	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	K0105	IV HANGER EACH	HCPCS - K CODES -DMERCS ONLY	YES	02/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	K0073	CASTER PIN LOCK EACH	HCPCS - K CODES -DMERCS ONLY	YES	02/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	K0065	SPOKE PROTECTORS EACH	HCPCS - K CODES -DMERCS ONLY	YES	02/15/2018	12/31/2078			
MMAI-Medicare/Medicaid	P9100	PATHOGEN TEST FOR PLATELETS	HCPCS - PATH & LAB	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9961	SYSTEMIC ANTIMICROBIALS PRESCRIBED	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	G9915	NO RECORD OF HBV RESULTS DOCUMENTED	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	94618	PULMONARY STRESS TESTING	MEDICINE - PULMONARY	NO	01/01/2018	01/01/2018			
MMAI-Medicare/Medicaid	Q9988	PLATELETS PHERESIS PATHOGEN REDUCED EACH UNIT	HCPCS - TEMP CODES	EXPIRED	06/15/2017	06/15/2017			
MMAI-Medicare/Medicaid	Q9987	PATHOGEN TEST FOR PLATELETS	HCPCS - TEMP CODES	EXPIRED	06/15/2017	06/15/2017			
MMAI-Medicare/Medicaid	P9072	PLATELTS PHERESIS PATHOGN RDUC/RPD BACT TST EA U	HCPCS - PATH & LAB	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	J1725	INJECTION HYDROXYPROGESTERONE CAPROATE 1 MG	HCPCS - DRUGS (NOT ORAL)	EXPIRED	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	G9496	DOC REASON NOT DETECTING ADENOMA/OTH NEOPLASM	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9381	DOC MED RSN NOT OFFR ASST EOL ISSUE DUR MSR PERD	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	G8972	1/GT HI RSK FCT THROMBOEMBOLISM/GT 1 MOD RSK FCT TE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8971	WARFARIN/OTH ORL AC FDA APV NOT PRSC RSN NOT GVN	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8947	ONE OR MORE NEUROPSYCHIATRIC SYMPTOMS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8879	CLINICALLY NODE NEGATIVE INVASIVE BREAST CANCER	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8698	ANTITHROMBOTIC TX WAS NOT PRSC D/C REASON NOS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8697	ANTITHROMBOTIC TX NOT PRESCRIBED DOC REASONS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G8696	ANTITHROMBOTIC THERAPY PRESCRIBED AT DISCHARGE	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0507	CARE MGMT BH COND AL 20 MIN CL STAFF TM P CAL MO	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G0505	COGN & FUNCT ASMT USING STD INST OFF/OTH OP/HOME	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	12/31/2078			
MMAI-Medicare/Medicaid	G0504	INIT/SUBSQ PS CCM EA ADD 30 MN CAL MO BHC MGR AC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G0503	SUBSQT PS CCM 1ST 60 MIN SUBSQT MO BEH HC MGR AC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G0502	INIT PS CCM 1ST 70 MIN 1ST CAL MO BEH HC MGR AC	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G0364	BN MARROW ASPIR PRFRM W/BX SAME INCI SAME DOS	HCPCS - PROC/PROF SERVICES (TE	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D5620	REPAIR CAST FRAMEWORK	HCPCS - DENTAL	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements

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MMAI-Medicare/Medicaid	D5610	REPAIR RESIN DENTURE BASE	HCPCS - DENTAL	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	D5510	REPAIR BROKEN COMPLETE DENTURE BASE	HCPCS - DENTAL	EXPIRED	05/01/2017	12/31/2078	Carve Out		Dental services are provided by DentaQuest Please call 1-800-508-6780 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	99364	ANTICOAGULANT MGMT OUTPATIENT EA SBSQ 90 DAYS	E & M - SPECIAL E/M SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99363	ANTICOAGULANT MGMT OUTPATIENT INIT 90 DAYS	E & M - SPECIAL E/M SERVICES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	97762	CHECKOUT ORTHOTIC/PROSTHETIC ESTAB PT EA 15 MIN	MEDICINE - PHYSICAL MEDICINE A	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	97532	DEVELOPMENT OF COGNITIVE SKILLS EACH 15 MINUTES	MEDICINE - PHYSICAL MEDICINE A	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0310T	MOTOR FUNCTION MAPPING NAVIGATED TMS TX PLAN	CATEGORY III CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0309T	ARTHRODESIS PRESACRAL INTRBDY W/INSTRUMENT L4/L5	CATEGORY III CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0306T	INTERROGATION EVAL ICAR ISCHM MNTRNG SYS	CATEGORY III CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0300T	ESW HI ENERGY W/TOPCAL APP &DRESNG CARE ADL WND	CATEGORY III CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0294T	INS LT ATRL HEMDYN MTR PRSR SENSR LEAD W/S&I	CATEGORY III CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0293T	INS LT ATRL HEMODYN MOTR CMPLETE SYST W/S&I	CATEGORY III CODES	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	0255T	EVASC ILIAC ART BIFURC W/ENDOPROSTH UNI RS&I	CATEGORY III CODES	EXPIRED	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	0180T	64 LEAD ECG W/INTERPRETATION & REPORT ONLY	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0179T	64 LEAD ECG W/TRACING & GRAPHICS	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0178T	64 LEAD ECG W/INTERPRETATION & REPORT	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	0053T	RPLCMT/RPR IMPLTBL COMPNT TOT RPLCMT HRT EX THRC	CATEGORY III CODES	EXPIRED	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	0052T	RPLCMT/RPR THRC UNIT TOT RPLCMT HRT SYS	CATEGORY III CODES	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0051T	IMPLTJ TOT RPLCMT HRT SYS W/RCP CARDIECTOMY	CATEGORY III CODES	EXPIRED	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	V5364	DYSPHAGIA SCREENING	HCPCS - HEARING SERVICES	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	S9150	EVALUATION BY OCCULARIST	HCPCS - TEMP NATIONAL CODES	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	S2325	HIP CORE DECOMPRESSION	HCPCS - TEMP NATIONAL CODES	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	S2117	ARTHROEREISIS SUBTALAR	HCPCS - TEMP NATIONAL CODES	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	S2079	LAP ESOPHAGOMYOTOMY HELLER TYPE	HCPCS - TEMP NATIONAL CODES	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	E0273	BED BOARD	HCPCS - DME	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	C1772	INFUSION PUMP PROGRAMMABLE	HCPCS - C CODES - OUTPATIENT PP	NON-COV	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21685	HYOID MYOTOMY & SUSPENSION	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	21627	STERNAL DEBRIDEMENT	SURGERY - MUSCULOSKELETAL SYST	NO	10/14/2017	10/14/2017			
MMAI-Medicare/Medicaid	V2599	CONTACT LENS OTHER TYPE	HCPCS - VISION SERVICES	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	V5274	ASSISTIVE LEARNING DEVICE NOS	HCPCS - HEARING SERVICES	NON-COV	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	Q4051	SPLINT SUPPLIES MISCELLANEOUS	HCPCS - TEMP CODES	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	L5999	LOWER EXTREMITY PROSTHESIS NOS	HCPCS - PROSTHETIC PROCED	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	

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MMAI-Medicare/Medicaid	E1229	WHEELCHAIR PEDIATRIC SIZE NOS	HCPCS - DME	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	B9999	NOC FOR PARENTERAL SUPPLIES	HCPCS - ENTERAL & PARENTERAL	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	B9998	NOC FOR ENTERAL SUPPLIES	HCPCS - ENTERAL & PARENTERAL	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	A9900	DME SUP/ACCESS/SRV-COMPON/OTH HCPCS	HCPCS - ADMIN MISC & INVEST	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	A9699	RADIOPHARMACEUTICAL THERAPEUTIC NOC	HCPCS - ADMIN MISC & INVEST	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	A4913	MISCELLANEOUS DIALYSIS SUPPLIES NOS	HCPCS - MED-SURG SUPPLIES	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	A4649	SURGICAL SUPPLY; MISCELLANEOUS	HCPCS - MED-SURG SUPPLIES	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	A4421	OSTOMY SUPPLY; MISCELLANEOUS	HCPCS - MED-SURG SUPPLIES	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	A4335	INCONTINENCE SUPPLY; MISCELLANEOUS	HCPCS - MED-SURG SUPPLIES	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	A0999	UNLISTED AMBULANCE SERVICE	HCPCS - TRANSPORTATION (INCL A	NO	09/01/2017	09/01/2017		Submit claims with Medical Records	
MMAI-Medicare/Medicaid	T1020	PERSONAL CARE SERVICES PER DIEM	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G9654	MONITORED ANESTHESIA CARE	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	J3090	INJECTION TEDIZOLID PHOSPHATE 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	C9460	INJECTION CANGRELOR 1 MG	HCPCS - C CODES - OUTPATIENT PP	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	99150	MODERATE SEDATJ DIFF PHYS/QHP EA ADDL 15 MIN	MEDICINE - QUALIFYING CIRCUMST	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99145	MODERATE SEDATJ SAME PHYS/QHP EACH ADDL 15 MIN	MEDICINE - QUALIFYING CIRCUMST	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	99144	MODERATE SEDATJ SAME PHYS/QHP 5/GTYRS INIT 30 MIN	MEDICINE - QUALIFYING CIRCUMST	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99143	MODERATE SEDATJ SAME PHYS/QHP LT5 YRS INIT 30 MIN	MEDICINE - QUALIFYING CIRCUMST	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D1208	TOPICAL APPLICATION OF FLUORIDE	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99149	MODERATE SEDATJ DIFF PHYS/QHP 5/GTYRS INIT 30 MIN	MEDICINE - QUALIFYING CIRCUMST	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	99148	MOD SEDATJ DIFF PHYS/QHP LT5 YRS INIT 30 MIN	MEDICINE - QUALIFYING CIRCUMST	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90735	JAPANESE ENCEPHALITIS VIRUS VACCINE SUBCUTANEOUS	MEDICINE - VACCINES, TOXOIDS	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90721	DTAP/HIB VACCINE FOR INTRAMUSCULAR USE	MEDICINE - VACCINES, TOXOIDS	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	97006	ATHLETIC TRAINING RE-EVALUATION	MEDICINE - PHYSICAL MEDICINE A	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	97005	ATHLETIC TRAINING EVALUATION	MEDICINE - PHYSICAL MEDICINE A	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	92140	PROVOCATIVE TESTS GLAUCOMA I&R W/O TONOGRAPHY	MEDICINE - OPHTHALMOLOGY	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90704	MUMPS VIRUS VACCINE LIVE SUBCUTANEOUS	MEDICINE - VACCINES, TOXOIDS	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90645	HEMOPHILUS INFLUENZA B VACC HBOC CONJ 4 DOSE IM	MEDICINE - VACCINES, TOXOIDS	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90719	DIPHTHERIA TOXOID INTRAMUSCULAR	MEDICINE - VACCINES, TOXOIDS	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90712	POLIOVIRUS VACCINE ANY LIVE ORAL	MEDICINE - VACCINES, TOXOIDS	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90706	RUBELLA VIRUS VACCINE LIVE SUBCUTANEOUS	MEDICINE - VACCINES, TOXOIDS	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90705	MEASLES VIRUS VACCINE LIVE SUBCUTANEOUS	MEDICINE - VACCINES, TOXOIDS	EXPIRED	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	90646	HEMOPHILUS INFLUENZA B VACCINE PRP-D BOOSTER IM	MEDICINE - VACCINES, TOXOIDS	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3485	INJECTION ZIDOVUDINE 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	J2469	INJECTION PALONOSETRON HCL 25 MCG	HCPCS - DRUGS (NOT ORAL)	YES	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	J2425	INJECTION PALIFERMIN 50 MICROGRAMS	HCPCS - DRUGS (NOT ORAL)	YES	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	J2278	INJECTION ZICONOTIDE 1 MICROGRAM	HCPCS - DRUGS (NOT ORAL)	YES	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	J2020	INJECTION LINEZOLID 200 MG	HCPCS - DRUGS (NOT ORAL)	YES	05/01/2017	12/31/2078			
MMAI-Medicare/Medicaid	S0093	INJECTION MORPHINE SULFATE 500 MG	HCPCS - TEMP NATIONAL CODES	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J2950	INJECTION PROMAZINE HCL UP TO 25 MG	HCPCS - DRUGS (NOT ORAL)	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J2940	INJECTION SOMATREM 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J2785	INJECTION REGADENOSON 0.1 MG	HCPCS - DRUGS (NOT ORAL)	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J2725	INJECTION PROTIRELIN PER 250 MCG	HCPCS - DRUGS (NOT ORAL)	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J1267	INJECTION DORIPENEM 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J0740	INJECTION CIDOFOVIR 375 MG	HCPCS - DRUGS (NOT ORAL)	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J0637	INJECTION CASPOFUNGIN ACETATE 5 MG	HCPCS - DRUGS (NOT ORAL)	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J0395	INJECTION ARBUTAMINE HCL 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	J0365	INJECTION APROTININ 10000 KIU	HCPCS - DRUGS (NOT ORAL)	NO	05/01/2017	05/01/2017			

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MMAI-Medicare/Medicaid	J0348	INJECTION ANIDULAFUNGIN 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	27326	NEURECTOMY POPLITEAL	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	24332	TENOLYSIS TRICEPS	SURGERY - MUSCULOSKELETAL SYST	NO	05/01/2017	05/01/2017			
MMAI-Medicare/Medicaid	31592	Cricotracheal resection	SURGERY - RESPIRATORY SYSTEM	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9726	Patient refused to participate	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9728	Patient refused to participate	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9730	Patient refused to participate	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9732	Patient refused to participate	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9734	Patient refused to participate	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9736	Patient refused to participate	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9752	Emergency surgery	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9797	Patient is not on a statin therapy	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9818	Documentation of sexual activity	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9830	HER2/neu positive	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9846	Patients who died from cancer	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	G9858	Patient enrolled in hospice	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			

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MMAI-Medicare/Medicaid	G9859	Patients who died from cancer	HCPCS - PROC/PROF SERVICES (TE	NO	01/27/2017	01/27/2017			
MMAI-Medicare/Medicaid	80302	DRUG SCREEN PRESUMPTIVE 1 CLASS METHOD LIST B	PATH & LAB - CHEMISTRY	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80301	DRUG SCREEN LIST A SINGLE DRUG CLASS METHOD	PATH & LAB - CHEMISTRY	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80300	DRUG SCREEN LIST A ANY NMBR NON TLC DEVICES	PATH & LAB - CHEMISTRY	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	0010M	ONCOLOGY PROSTATE 4 PROTEINS PROBABILITY SCORE	MEDICINE - SPECIAL PROCEDURES	EXPIRED	01/01/2010	07/14/2015			
MMAI-Medicare/Medicaid	97004	OCCUPATIONAL THERAPY RE-EVALUATION	MEDICINE - PHYSICAL MEDICINE A	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	97002	PHYSICAL THERAPY RE-EVALUATION	MEDICINE - PHYSICAL MEDICINE A	EXPIRED	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	80304	DRUG SCREEN PRSMPTV 1/MULT CLASS METHOD	PATH & LAB - CHEMISTRY	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80303	DRUG SCREEN PRSMPTV 1/MULT CLASS METHOD TLC	PATH & LAB - CHEMISTRY	EXPIRED	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	90720	DTWP-HIB VACCINE IM	MEDICINE - VACCINES, TOXOIDS	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90708	MEASLES-RUBELLA VACCINE SC	MEDICINE - VACCINES, TOXOIDS	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90692	TYPHOID VACCINE H-P SC/ID	MEDICINE - VACCINES, TOXOIDS	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90727	PLAGUE VACCINE IM	MEDICINE - VACCINES, TOXOIDS	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90725	CHOLERA VACCINE INJECTABLE	MEDICINE - VACCINES, TOXOIDS	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	90693	TYPHOID VACCINE AKD SC	MEDICINE - VACCINES, TOXOIDS	EXPIRED	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	0233T	SKIN GLYCATION SPECTROSCOPY	CATEGORY III CODES	EXPIRED	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	E0607	HOME BLOOD GLUCOSE MONITOR	HCPCS - DME	YES	10/01/2016	12/31/2078	Regulatory Compliance	The requested benefit is covered through our Pharmacy Benefit; the requested item can be filled at one of our network pharmacies. Please validate coverage rules through the online search tool located on our website at www.aetnabetterhealth.com/illinois/pharmacy	
MMAI-Medicare/Medicaid	E1634	PERITONEAL DIALYSIS CLAMPS EACH	HCPCS - DME	NON-COV	03/01/2016	03/01/2016			
MMAI-Medicare/Medicaid	G9643	ELECTIVE SURGERY	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9553	PRIOR THYROID DISEASE DIAGNOSIS	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	G9498	ANTIBIOTIC REGIMEN PRESCRIBED	HCPCS - PROC/PROF SERVICES (TE	NO	01/01/2016	03/03/2016			
MMAI-Medicare/Medicaid	S0136	CLOZAPINE 25 MG	HCPCS - TEMP NATIONAL CODES	NON-COV	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	S0122	INJECTION MENOTROPINS 75 IU	HCPCS - TEMP NATIONAL CODES	NON-COV	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	S0104	ZIDOVUDINE ORAL 100 MG	HCPCS - TEMP NATIONAL CODES	NON-COV	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	S0091	GRANISETRON HYDROCHLORIDE 1 MG	HCPCS - TEMP NATIONAL CODES	NON-COV	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J2325	INJECTION NESIRITIDE 0.1 MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J3530	NASAL VACCINE INHALATION	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J3095	INJECTION TELAVANCIN 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J3520	EDETATE DISODIUM PER 150 MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J3310	INJECTION PERPHENAZINE UP TO 5 MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	J1750	INJECTION IRON DEXTRAN 50 MG	HCPCS - DRUGS (NOT ORAL)	NO	04/05/2016	04/05/2016			

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MMAI-Medicare/Medicaid	V5363	LANGUAGE SCREENING	HCPCS - HEARING SERVICES	NON-COV	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	V5362	SPEECH SCREENING	HCPCS - HEARING SERVICES	NON-COV	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	A4282	ADAPTER FOR BREAST PUMP REPLACEMENT	HCPCS - MED-SURG SUPPLIES	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	A4281	TUBING FOR BREAST PUMP REPLACEMENT	HCPCS - MED-SURG SUPPLIES	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	E1639	SCALE EACH	HCPCS - DME	NO	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	E1637	HEMOSTATS EACH	HCPCS - DME	NON-COV	04/05/2016	04/05/2016			
MMAI-Medicare/Medicaid	H0049	ALCOHOL AND/OR DRUG SCREENING	HCPCS - ALCOHOL/DRUG ABUSE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D9986	MISSED APPOINTMENT	HCPCS - DENTAL	NO	01/01/2010	07/14/2015			
MMAI-Medicare/Medicaid	D9987	CANCELLED APPOINTMENT	HCPCS - DENTAL	NO	01/01/2010	07/14/2015			
MMAI-Medicare/Medicaid	80345	DRUG SCREENING BARBITURATES	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80348	DRUG SCREENING BUPRENORPHINE	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80353	DRUG SCREENING COCAINE	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80354	DRUG SCREENING FENTANYL	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80358	DRUG SCREENING METHADONE	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80365	DRUG SCREENING OXYCODONE	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80366	DRUG SCREENING PREGABALIN	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			

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MMAI-Medicare/Medicaid	80367	DRUG SCREENING PROPOXYPHENE	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80372	DRUG SCREENING TAPENTADOL	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	80373	DRUG SCREENING TRAMADOL	PATH & LAB - CHEMISTRY	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	J0153	INJECTION ADENOSINE 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	J0571	BUPRENORPHINE ORAL 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	J2704	INJECTION PROPOFOL 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	01/01/2010	01/01/2015			
MMAI-Medicare/Medicaid	1127F	NEW EPISODE FOR CONDITION	CATEGORY II CODES	NON-COV	04/01/2015	04/01/2015			
MMAI-Medicare/Medicaid	H2001	REHABILITATION PROGRAM PER 1/2 DAY	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	09/02/2014	12/31/2078			
MMAI-Medicare/Medicaid	0525F	INITIAL VISIT FOR EPISODE	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1000F	TOBACCO USE ASSESSED	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	10040	ACNE SURGERY	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1011F	ANGINA PRESENT	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1012F	ANGINA ABSENT	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1034F	CURRENT TOBACCO SMOKER	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	1039F	INTERMITTENT ASTHMA	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	15780	DERMABRASION TOTAL FACE	SURGERY - INTEGUMENTARY SYSTEM	NON-COV	12/01/2013	12/31/2078			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	15781	DERMABRASION SEGMENTAL FACE	SURGERY - INTEGUMENTARY SYSTEM	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	19110	NIPPLE EXPLORATION	SURGERY - INTEGUMENTARY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	2010F	VITAL SIGNS RECORDED	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	2015F	ASTHMA IMPAIRMENT ASSESSED	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	2016F	ASTHMA RISK ASSESSED	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	32650	THORACOSCOPY W/PLEURODESIS	SURGERY - RESPIRATORY SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	33475	REPLACEMENT PULMONARY VALVE	SURGERY - CARDIOVASCULAR SYSTE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3762F	PATIENT IS DYSARTHRIC	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	3763F	PATIENT IS NOT DYSARTHRIC	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4054F	HEMODIALYSIS VIA CATHETER	CATEGORY II CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	4551F	NUTRITIONAL SUPPORT OFFERED	CATEGORY II CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	54160	CIRCUMCISION NEONATE	SURGERY - MALE GENITAL SYSTEM	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	55870	ELECTROEJACULATION	SURGERY - MALE GENITAL SYSTEM	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	58760	FIMBRIOPLASTY	SURGERY - FEMALE GENITAL SYSTE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	78070	PARATHYROID PLANAR IMAGING	RADIOLOGY - NUCLEAR MEDICINE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80051	ELECTROLYTE PANEL	PATH & LAB - ORGAN OR DISEASE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	80061	LIPID PANEL	PATH & LAB - ORGAN OR DISEASE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	80436	METYRAPONE PANEL	PATH & LAB - EVOCATIVE/SUPPRES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82105	ALPHA-FETOPROTEIN SERUM	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82154	ANDROSTANEDIOL GLUCURONIDE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82240	BILE ACIDS CHOLYLGLYCINE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82397	CHEMILUMINESCENT ASSAY	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82610	CYSTATIN C	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	82626	DEHYDROEPIANDROSTERONE	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	83950	ONCOPROTEIN HER-2/NEU	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	84145	PROCALCITONIN (PCT)	PATH & LAB - CHEMISTRY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85130	CHROMOGENIC SUBSTRATE ASSAY	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85337	THROMBOMODULIN	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85475	HEMOLYSIN ACID	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85520	HEPARIN ASSAY	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85525	HEPARIN NEUTRALIZATION	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	85549	MURAMIDASE	PATH & LAB - HEMATOLOGY AND CO	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	86140	C-REACTIVE PROTEIN	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86157	COLD AGGLUTININ TITER	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	86337	INSULIN ANTIBODIES	PATH & LAB - IMMUNOLOGY	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	92567	TYMPANOMETRY	MEDICINE - SPECIAL OTORHINOLAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93600	BUNDLE OF HIS RECORDING	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93602	INTRA-ATRIAL RECORDING	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	93610	INTRA-ATRIAL PACING	MEDICINE - CARDIOVASCULAR	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A0380	BLS MILEAGE	HCPCS - TRANSPORTATION (INCL A	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A0382	BLS ROUTINE DISPOSABLE SUPPLIES	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A0390	ALS MILEAGE	HCPCS - TRANSPORTATION (INCL A	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A0398	ALS ROUTINE DISPOSABLE SUPPLIES	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A0425	GROUND MILEAGE PER STATUTE MILE	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A0433	ADVANCED LIFE SUPPORT LEVEL 2	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A0434	SPECIALTY CARE TRANSPORT	HCPCS - TRANSPORTATION (INCL A	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4210	NEEDLE-FREE INJECTION DEVICE EACH	HCPCS - MED-SURG SUPPLIES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4215	NEEDLE STERILE ANY SIZE EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A4217	STERILE WATER/SALINE 500 ML	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4244	ALCOHOL OR PEROXIDE PER PINT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4245	ALCOHOL WIPES PER BOX	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4259	LANCETS PER BOX OF 100	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4261	CERVICAL CAP FOR CONTRACEPTIVE USE	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4265	PARAFFIN PER POUND	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4266	DIAPHRAGM FOR CONTRACEPTIVE USE	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4270	DISPOSABLE ENDOSCOPE SHEATH EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4361	OSTOMY FACEPLATE EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4366	OSTOMY VENT ANY TYPE EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4367	OSTOMY BELT EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4368	OSTOMY FILTER ANY TYPE EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4369	OSTOMY SKIN BARRIER LIQUID PER OZ	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4371	OSTOMY SKIN BARRIER POWDER PER OZ	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4398	OSTOMY IRRIGATION SUPPLY; BAG EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4400	OSTOMY IRRIGATION SET	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A4402	LUBRICANT PER OUNCE	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4404	OSTOMY RING EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4458	ENEMA BAG WITH TUBING REUSABLE	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4465	NONELASTIC BINDER FOR EXTREMITY	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4470	GRAVLEE JET WASHER	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4480	VABRA ASPIRATOR	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4495	SURGICAL STOCKING THIGH LENGTH EACH	HCPCS - MED-SURG SUPPLIES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4510	SURGICAL STOCKING FULL-LENGTH EACH	HCPCS - MED-SURG SUPPLIES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4550	SURGICAL TRAYS	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4554	DISPOSABLE UNDERPADS ALL SIZES	HCPCS - MED-SURG SUPPLIES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4565	SLINGS	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4570	SPLINTS	HCPCS - MED-SURG SUPPLIES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4580	CAST SUPPLIES	HCPCS - MED-SURG SUPPLIES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4590	SPECIAL CASTING MATERIAL	HCPCS - MED-SURG SUPPLIES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4608	TRANSTRACHEAL OXYGEN CATHETER EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4615	CANNULA NASAL	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A4616	TUBING PER FOOT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4617	MOUTHPIECE	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4618	BREATHING CIRCUITS	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4619	FACE TENT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4620	VARIABLE CONCENTRATION MASK	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4623	TRACHEOSTOMY INNER CANNULA	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4626	TRACHEOSTOMY CLEANING BRUSH EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4651	CALIBRATED MICROCAPILLARY TUBE EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4652	MICROCAPILLARY TUBE SEALANT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4657	SYRINGE WITH OR WITHOUT NEEDLE EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4663	BLOOD PRESSURE CUFF ONLY	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4670	AUTOMATIC BLOOD PRESSURE MONITOR	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4911	DRAIN BAG/BOTTLE FOR DIALYSIS EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4927	GLOVES NON-STERILE PER 100	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4928	SURGICAL MASK PER 20	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A4929	TOURNIQUET FOR DIALYSIS EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A4930	GLOVES STERILE PER PAIR	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5055	STOMA CAP	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5093	OSTOMY ACCESSORY; CONVEX INSERT	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A5120	SKIN BARRIER WIPES OR SWABS EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6154	WOUND POUCH EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6410	EYE PAD STERILE EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6411	EYE PAD NON-STERILE EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6412	EYE PATCH OCCLUSIVE EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A6512	COMPRESSION BURN GARMENT NOC	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7002	TUBING USED WITH SUCTION PUMP EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7012	WATER COLLEC DEV USE W/LG VOL NEB	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7015	AREO MASK USED W/ DME NEB	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7017	NEB GLASS/AUTOCLAV NOT USE W/O2	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7018	H2O DIST USE W/LG VOL NEB 1000 ML	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7040	ONE WAY CHEST DRAIN VALVE	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7523	TRACHEOSTOMY SHOWER PROTECTOR EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	A7524	TRACHEOSTOMA STENT/STUD/BUTTON EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A7525	TRACHEOSTOMY MASK EACH	HCPCS - MED-SURG SUPPLIES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9150	NONPRESCRIPTION DRUG	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9155	ARTFICIAL SALIVA 30 ML	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9270	NONCOVERED ITEM OR SERVICE	HCPCS - ADMIN MISC & INVEST	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	A9300	EXERCISE EQUIPMENT	HCPCS - ADMIN MISC & INVEST	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	A9585	INJECTION GADOBUTROL 0.1 ML	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	A9700	SUP OF INJ CONTRST MAT-ECHO P/STUDY	HCPCS - ADMIN MISC & INVEST	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B4081	NASOGASTRIC TUBING WITH STYLET	HCPCS - ENTERAL & PARENTERAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B4082	NASOGASTRIC TUBING WITHOUT STYLET	HCPCS - ENTERAL & PARENTERAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	B4083	STOMACH TUBE - LEVINE TYPE	HCPCS - ENTERAL & PARENTERAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1715	BRACHYTHERAPY NEEDLE	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1729	CATHETER DRAINAGE	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1752	CATHETER HEMODIALYSIS SHORT-TERM	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1753	CATHETER INTRAVASCULAR ULTRASOUND	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1754	CATHETER INTRADISCAL	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	C1755	CATHETER INTRASPINAL	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1756	CATHETER PACING TRANSESOPHAGEAL	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1757	CATHETER THROMBECTOMY/EMBOLECTOMY	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1758	CATHETER URETERAL	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1760	CLOSURE DEVICE VASCULAR	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1762	CONNECTIVE TISSUE HUMAN	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1763	CONNECTIVE TISSUE NON-HUMAN	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1764	EVENT RECORDER CARDIAC	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1765	ADHESION BARRIER	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1768	GRAFT VASCULAR	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1769	GUIDE WIRE	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1770	IMAGING COIL MAGNETIC RESONANCE	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1773	RETRIEVAL DEVICE INSERTABLE	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1776	JOINT DEVICE	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1780	LENS INTRAOCULAR	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1781	MESH	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	C1782	MORCELLATOR	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1788	PORT INDWELLING	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1789	PROSTHESIS BREAST	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1815	PROSTHESIS URINARY SPHINCTER	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1818	INTEGRATED KERATOPROSTHESIS	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1830	POWERED BONE MARROW BIOPSY NEEDLE	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1840	LENS INTRAOCULAR TELESCOPIC	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1880	VENA CAVA FILTER	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1881	DIALYSIS ACCESS SYSTEM	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1884	EMBOLIZATION PROTECTIVE SYSTEM	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C1887	CATHETER GUIDING	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C2615	SEALANT PULMONARY LIQUID	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C2627	CATHETER SUPRAPUBIC/CYSTOSCOPIC	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C2628	CATHETER OCCLUSION	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C8909	MR ANGIOGRAPHY WITH CONTRAST CHEST	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	C8918	MR ANGIOGRAPHY WITH CONTRAST PELVIS	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	C9248	INJECTION CLEVIDIPINE BUTYRATE 1 MG	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	C9254	INJECTION LACOSAMIDE 1 MG	HCPCS - C CODES - OUTPATIENT PP	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D0190	SCREENING OF A PATIENT	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D0191	ASSESSMENT OF A PATIENT	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	D0385	MAXILLOFACIAL MRI IMAGE CAPTURE	HCPCS - DENTAL	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0154	PLATFORM ATTACHMENT WALKER EACH	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0156	SEAT ATTACHMENT WALKER	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0157	CRUTCH ATTACHMENT WALKER EACH	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0162	SITZ BATH CHAIR	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0184	DRY PRESSURE MATTRESS	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0186	AIR PRESSURE MATTRESS	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0187	WATER PRESSURE MATTRESS	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0188	SYNTHETIC SHEEPSKIN PAD	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0189	LAMBSWOOL SHEEPSKIN PAD ANY SIZE	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0191	HEEL OR ELBOW PROTECTOR EACH	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0193	POWERED AIR FLOTATION BED	HCPCS - DME	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	E0194	AIR FLUIDIZED BED	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0196	GEL PRESSURE MATTRESS	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0202	PHOTOTHERAPY LIGHT WITH PHOTOMETER	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0210	ELECTRIC HEAT PAD STANDARD	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0215	ELECTRIC HEAT PAD MOIST	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0221	INFRARED HEATING PAD SYSTEM	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0225	HYDROCOLLATOR UNIT INCLUDES PADS	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0232	WOUND WARMING WOUND COVER	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0235	PARAFFIN BATH UNIT PORTABLE	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0236	PUMP FOR WATER CIRCULATING PAD	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0239	HYDROCOLLATOR UNIT PORTABLE	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0241	BATHTUB WALL RAIL EACH	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0242	BATHTUB RAIL FLOOR BASE	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0243	TOILET RAIL EACH	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0244	RAISED TOILET SEAT	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0245	TUB STOOL OR BENCH	HCPCS - DME	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	E0246	TRANSFER TUB RAIL ATTACHMENT	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0271	MATTRESS INNER SPRING	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0272	MATTRESS FOAM RUBBER	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0274	OVER-BED TABLE	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0275	BED PAN STANDARD METAL OR PLASTIC	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0276	BED PAN FRACTURE METAL OR PLASTIC	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0280	BED CRADLE ANY TYPE	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0305	BEDSIDE RAILS HALF-LENGTH	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0310	BEDSIDE RAILS FULL-LENGTH	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0325	URINAL; MALE JUG-TYPE ANY MATERIAL	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0370	AIR PRESSURE ELEVATOR FOR HEEL	HCPCS - DME	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0457	CHEST SHELL	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0459	CHEST WRAP	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0570	NEBULIZER WITH COMPRESSOR	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0575	NEBULIZER ULTRASONIC LARGE VOLUME	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0602	BREAST PUMP MANUAL ANY TYPE	HCPCS - DME	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	E0605	VAPORIZER ROOM TYPE	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0606	POSTURAL DRAINAGE BOARD	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0625	PATIENT LIFT BATHROOM OR TOILET NOC	HCPCS - DME	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0710	RESTRAINT ANY TYPE	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0746	ELECTROMYOGRAPHY BIOFEEDBACK DEVICE	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0776	IV POLE	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0942	CERVICAL HEAD HARNESS/HALTER	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0944	PELVIC BELT/HARNESS/BOOT	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0945	EXTREMITY BELT/HARNESS	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E0950	WHEELCHAIR ACCESSORY TRAY EACH	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0952	TOE LOOP/HOLDER ANY TYPE EACH	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0968	COMMODE SEAT WHEELCHAIR	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0969	NARROWING DEVICE WHEELCHAIR	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0980	SAFETY VEST WHEELCHAIR	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E0994	ARMREST EACH	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1037	TRANSPORT CHAIR PEDIATRIC SIZE	HCPCS - DME	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	E1221	WHEELCHAIR WITH FIXED ARM FOOTRESTS	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1227	SPECIAL HEIGHT ARMS FOR WHEELCHAIR	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1228	SPECIAL BACK HEIGHT FOR WHEELCHAIR	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1239	POWER WHEELCHAIR PEDIATRIC SIZE NOS	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1300	WHIRLPOOL PORTABLE	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1310	WHIRLPOOL NONPORTABLE	HCPCS - DME	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1353	REGULATOR	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E1355	STAND/RACK	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E1590	HEMODIALYSIS MACHINE	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1632	WEARABLE ARTIFICIAL KIDNEY EACH	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1635	COMPACT TRAVEL HEMODIALYZER SYSTEM	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	E1700	JAW MOTION REHABILITATION SYSTEM	HCPCS - DME	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	E2610	WHEELCHAIR SEAT CUSHION POWERED	HCPCS - DME	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	G0027	SEMEN ANALY; PRES/MOT EXCLD HUHNER	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0103	PROSTATE CANCER SCREENING; PSA TEST	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G0307	COMPLETE CBC AUTOMATED	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	G9001	COORDINATED CARE FEE INITIAL RATE	HCPCS - PROC/PROF SERVICES (TE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	G9013	ESRD DEMO BASIC BUNDLE LEVEL I	HCPCS - PROC/PROF SERVICES (TE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H0001	ALCOHOL AND/OR DRUG ASSESSMENT	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H0030	BEHAVIORAL HEALTH HOTLINE SERVICE	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H0044	SUPPORTED HOUSING PER MONTH	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	H1000	PRENATAL CARE AT-RISK ASSESSMENT	HCPCS - ALCOHOL/DRUG ABUSE	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H2023	SUPPORTED EMPLOYMENT PER 15 MINUTES	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	H2032	ACTIVITY THERAPY PER 15 MINUTES	HCPCS - ALCOHOL/DRUG ABUSE	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0120	INJECTION TETRACYCLINE UP TO 250 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0130	INJECTION ABCIXIMAB 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0132	INJECTION ACETYLCYSTEINE 100 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0133	INJECTION ACYCLOVIR 5 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0180	INJECTION AGALSIDASE BETA 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J0205	INJECTION ALGLUCERASE PER 10 UNITS	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J0215	INJECTION ALEFACEPT 0.5 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J0270	INJECTION ALPROSTADIL 1.25 MCG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	J0275	ALPROSTADIL URETHRAL SUPPOSITORY	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0278	INJECTION AMIKACIN SULFATE 100 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0285	INJECTION AMPHOTERICIN B 50 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0290	INJECTION AMPICILLIN SODIUM 500 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0350	INJECTION ANISTREPLASE PER 30 UNITS	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0456	INJECTION AZITHROMYCIN 500 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0470	INJECTION DIMERCAPROL PER 100 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0475	INJECTION BACLOFEN 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0480	INJECTION BASILIXIMAB 20 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0485	INJECTION BELATACEPT 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0490	INJECTION BELIMUMAB 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J0520	INJ BETHANECHOL CHLORIDE UP TO 5 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0583	INJECTION BIVALIRUDIN 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0585	BOTULINUM TOXIN TYPE A PER UNIT	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J0595	INJECTION BUTORPHANOL TARTRATE 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0636	INJECTION CALCITRIOL 0.1 MCG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	J0638	INJECTION CANAKINUMAB 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J0670	INJECTION MEPIVACAINE HCL PER 10 ML	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0690	INJECTION CEFAZOLIN SODIUM 500 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0698	INJECTION CEFOTAXIME SODIUM PER G	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0712	INJECTION CEFTAROLINE FOSAMIL 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0713	INJECTION CEFTAZIDIME PER 500 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0834	INJECTION COSYNTROPIN 0.25 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J0878	INJECTION DAPTOMYCIN 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J0890	INJECTION PEGINESATIDE 0.1 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J1160	INJECTION DIGOXIN UP TO 0.5 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1180	INJECTION DYPHYLLINE UP TO 500 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1230	INJECTION METHADONE HCL UP TO 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1245	INJECTION DIPYRIDAMOLE PER 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1250	INJECTION DOBUTAMINE HCI PER 250 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1265	INJECTION DOPAMINE HCL 40 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1270	INJECTION DOXERCALCIFEROL 1 MCG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	J1290	INJECTION ECALLANTIDE 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J1300	INJECTION ECULIZUMAB 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J1324	INJECTION ENFUVIRTIDE 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J1325	INJECTION EPOPROSTENOL 0.5 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J1327	INJECTION EPTIFIBATIDE 5 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1335	INJECTION ERTAPENEM SODIUM 500 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1435	INJECTION ESTRONE PER 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1438	INJECTION ETANERCEPT 25 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J1450	INJECTION FLUCONAZOLE 200 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1451	INJECTION FOMEPIZOLE 15 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1457	INJECTION GALLIUM NITRATE 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1458	INJECTION GALSULFASE 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J1570	INJECTION GANCICLOVIR SODIUM 500 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1595	INJECTION GLATIRAMER ACETATE 20 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J1630	INJECTION HALOPERIDOL UP TO 5 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1640	INJECTION HEMIN 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	J1650	INJECTION ENOXAPARIN SODIUM 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1655	INJECTION TINZAPARIN SODIUM 1000 IU	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1730	INJECTION DIAZOXIDE UP TO 300 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1740	INJECTION IBANDRONATE SODIUM 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J1742	INJ IBUTILIDE FUMARATE 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1743	INJECTION IDURSULFASE 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J1744	INJECTION ICATIBANT 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1756	INJECTION IRON SUCROSE 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1786	INJECTION IMIGLUCERASE 10 UNITS	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J1790	INJECTION DROPERIDOL UP TO 5 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1815	INJECTION INSULIN PER 5 UNITS	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1826	INJECTION INTERFERON BETA-1A 30 MCG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J1835	INJECTION ITRACONAZOLE 50 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1931	INJECTION LARONIDASE 0.1 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J1945	INJECTION LEPIRUDIN 50 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1953	INJECTION LEVETIRACETAM 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	J1955	INJECTION LEVOCARNITINE PER 1 G	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J1956	INJECTION LEVOFLOXACIN 250 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2170	INJECTION MECASERMIN 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2185	INJECTION MEROPENEM 100 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2212	INJECTION METHYLNALTREXONE 0.1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2248	INJECTION MICAFUNGIN SODIUM 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J2250	INJECTION MIDAZOLAM HCL PER 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2260	INJECTION MILRINONE LACTATE 5 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2265	INJECTION MINOCYCLINE HCL 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2280	INJECTION MOXIFLOXACIN 100 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2300	INJECTION NALBUPHINE HCL PER 10 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2310	INJECTION NALOXONE HCL PER 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2323	INJECTION NATALIZUMAB 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J2355	INJECTION OPRELVEKIN 5 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J2357	INJECTION OMALIZUMAB 5 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J2501	INJECTION PARICALCITOL 1 MCG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	J2503	INJECTION PEGAPTANIB SODIUM 0.3 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J2504	INJECTION PEGADEMASE BOVINE 25 IU	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J2507	INJECTION PEGLOTICASE 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J2590	INJECTION OXYTOCIN UP TO 10 UNITS	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2675	INJECTION PROGESTERONE PER 50 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2778	INJECTION RANIBIZUMAB 0.1 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J2793	INJECTION RILONACEPT 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J2800	INJECTION METHOCARBAMOL UP TO 10 ML	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2805	INJECTION SINCALIDE 5 MICROGRAMS	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2810	INJECTION THEOPHYLLINE PER 40 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J2941	INJECTION SOMATROPIN 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J2993	INJECTION RETEPLASE 18.1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3000	INJECTION STREPTOMYCIN UP TO 1 G	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3010	INJECTION FENTANYL CITRATE 0.1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3070	INJECTION PENTAZOCINE 30 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3101	INJECTION TENECTEPLASE 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	J3110	INJECTION TERIPARATIDE 10 MCG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J3246	INJECTION TIROFIBAN HCl 0.25 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3265	INJECTION TORSEMIDE 10 MG/ML	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3285	INJECTION TREPROSTINIL 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J3350	INJECTION UREA UP TO 40 G	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3355	INJECTION UROFOLLITROPIN 75 IU	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J3360	INJECTION DIAZEPAM UP TO 5 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3364	INJECTION UROKINASE 5000 IU VIAL	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3370	INJECTION VANCOMYCIN HCL 500 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3396	INJECTION VERTEPORFIN 0.1 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J3411	INJECTION THIAMINE HCL 100 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3415	INJECTION PYRIDOXINE HCL 100 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3430	INJECTION PHYTONADIONE PER 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J3465	INJECTION VORICONAZOLE 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J3570	LAETRILE AMYGDALIN VITAMIN B17	HCPCS - DRUGS (NOT ORAL)	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7070	INFUSION D-5-W 1000 CC	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	J7131	HYPERTONIC SALINE SOLUTION 1 ML	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7180	INJECTION FACTOR XIII 1 I.U.	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7185	INJECTION FACTOR VIII PER IU	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7194	FACTOR IX COMPLEX PER IU	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7197	ANTITHROMBIN III PER IU	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7198	ANTI-INHIBITOR PER IU	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7199	HEMOPHILIA CLOTTING FACTOR NOC	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J7300	INTRAUTERINE COPPER CONTRACEPTIVE	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7500	AZATHIOPRINE ORAL 50 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7502	CYCLOSPORINE ORAL 100 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7505	MUROMONAB-CD3 PARENTERAL 5 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7513	DACLIZUMAB PARENTERAL 25 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7515	CYCLOSPORINE ORAL 25 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7517	MYCOPHENOLATE MOFETIL ORAL 250 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7518	MYCOPHENOLIC ACID ORAL 180 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J7520	SIROLIMUS ORAL 1 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	J7525	TACROLIMUS PARENTERAL 5 MG	HCPCS - DRUGS (NOT ORAL)	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	J8515	CABERGOLINE ORAL 0.25 MG	HCPCS - DRUGS (NOT ORAL)	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J8562	FLUDARABINE PHOSPHATE ORAL 10 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	J8650	NABILONE ORAL 1 MG	HCPCS - DRUGS (NOT ORAL)	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0001	STANDARD WHEELCHAIR	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0002	STANDARD HEMI WHEELCHAIR	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0003	LIGHTWEIGHT WHEELCHAIR	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0005	ULTRALIGHTWEIGHT WHEELCHAIR	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0006	HEAVY-DUTY WHEELCHAIR	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0007	EXTRA HEAVY-DUTY WHEELCHAIR	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0009	OTHER MANUAL WHEELCHAIR/BASE	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0038	LEG STRAP EACH	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0040	ADJUSTABLE ANGLE FOOTPLATE EACH	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	K0195	ELEVATING LEGREST PAIR	HCPCS - K CODES -DMERCS ONLY	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L0140	CERVICAL SEMI-RIGID ADJUSTABLE	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0220	THORACIC RIB BELT CUSTOM FABRICATED	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L0970	TLSO CORSET FRONT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0972	LSO CORSET FRONT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0974	TLSO FULL CORSET	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0976	LSO FULL CORSET	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L0978	AXILLARY CRUTCH EXTENSION	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1250	ADDITION TO TLSO ANTERIOR ASIS PAD	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1270	ADDITION TO TLSO ABDOMINAL PAD	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L1280	ADDITION TO TLSO RIB GUSSET EACH	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L2526	ADD LW EXTRM ISCH M-L BRIM CSTM FIT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3208	SURGICAL BOOT EACH INFANT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3209	SURGICAL BOOT EACH CHILD	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3211	SURGICAL BOOT EACH JUNIOR	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3212	BENESCH BOOT PAIR INFANT	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3213	BENESCH BOOT PAIR CHILD	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3214	BENESCH BOOT PAIR JUNIOR	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3254	NONSTANDARD SIZE OR WIDTH	HCPCS - ORTHOTIC PROCEDURES	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	L3255	NONSTANDARD SIZE OR LENGTH	HCPCS - ORTHOTIC PROCEDURES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3260	SURGICAL BOOT/SHOE EACH	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3265	PLASTAZOTE SANDAL EACH	HCPCS - ORTHOTIC PROCEDURES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3330	LIFT ELEVATION METAL EXTENSION	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3334	LIFT ELEVATION HEEL PER INCH	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3340	HEEL WEDGE SACH	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3350	HEEL WEDGE	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3360	SOLE WEDGE OUTSIDE SOLE	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3370	SOLE WEDGE BETWEEN SOLE	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3380	CLUBFOOT WEDGE	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3390	OUTFLARE WEDGE	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3400	METATARSAL BAR WEDGE ROCKER	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3410	METATARSAL BAR WEDGE BETWEEN SOLE	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3430	HEEL COUNTER PLASTIC REINFORCED	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3440	HEEL COUNTER LEATHER REINFORCED	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3450	HEEL SACH CUSHION TYPE	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	L3455	HEEL NEW LEATHER STANDARD	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3460	HEEL NEW RUBBER STANDARD	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3465	HEEL THOMAS WITH WEDGE	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3470	HEEL THOMAS EXTENDED TO BALL	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3480	HEEL PAD AND DEPRESSION FOR SPUR	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3485	HEEL PAD REMOVABLE FOR SPUR	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3530	ORTHOPEDIC SHOE ADDITION SOLE HALF	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3540	ORTHOPEDIC SHOE ADDITION SOLE FULL	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3595	ORTHOPEDIC SHOE ADDITION MARCH BAR	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3971	SEWHO SHOULDER CAP DESIGN CSTM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L3977	SEWHFO SHOULD CAP DESIGN CUSTOM FAB	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L4000	REPLACE GIRDLE FOR SPINAL ORTHOSIS	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L4010	REPLACE TRILATERAL SOCKET BRIM	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L4060	REPLACE HIGH ROLL CUFF	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L4130	REPLACE PRETIBIAL SHELL	HCPCS - ORTHOTIC PROCEDURES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5050	ANKLE SYMES MOLDED SOCKET SACH FOOT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	L5331	JOINT SINGLE AXIS KNEE SACH FOOT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L5341	SINGLE AXIS KNEE SACH FOOT	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L6110	BELOW ELBOW MOLDED SOCKET	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L7360	SIX VOLT BATTERY EACH	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L7364	TWELVE VOLT BATTERY EACH	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L7900	MALE VACUUM ERECTION SYSTEM	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8010	BREAST PROSTHESIS MASTECTOMY SLEEVE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8020	BREAST PROSTHESIS MASTECTOMY FORM	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8300	TRUSS SINGLE WITH STANDARD PAD	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8310	TRUSS DOUBLE WITH STANDARD PADS	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8400	PROSTHETIC SHEATH BELOW KNEE EACH	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8410	PROSTHETIC SHEATH ABOVE KNEE EACH	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8415	PROSTHETIC SHEATH UPPER LIMB EACH	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8440	PROSTHETIC SHRINKER BELOW KNEE EACH	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8460	PROSTHETIC SHRINKER ABOVE KNEE EACH	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8465	PROSTHETIC SHRINKER UPPER LIMB EACH	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	L8500	ARTIFICIAL LARYNX ANY TYPE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8501	TRACHEOSTOMY SPEAKING VALVE	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8510	VOICE AMPLIFIER	HCPCS - PROSTHETIC PROCED	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	L8609	ARTIFICIAL CORNEA	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L8610	OCULAR IMPLANT	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L8612	AQUEOUS SHUNT	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L8630	METACARPOPHALANGEAL JOINT IMPLANT	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L8641	METATARSAL JOINT IMPLANT	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	L8642	HALLUX IMPLANT	HCPCS - PROSTHETIC PROCED	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	M0075	CELLULAR THERAPY	HCPCS - MEDICAL SERVICES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	M0076	PROLOTHERAPY	HCPCS - MEDICAL SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	M0300	IV CHELATION THERAPY	HCPCS - MEDICAL SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	P2029	CONGO RED BLOOD	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P2031	HAIR ANALYSIS	HCPCS - PATH & LAB	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	P2033	THYMOL TURBIDITY BLOOD	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P2038	MUCOPROTEIN BLOOD	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	P9010	BLOOD FOR TRANSFUSION PER UNIT	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9011	BLOOD SPLIT UNIT	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9012	CRYOPRECIPITATE EACH UNIT	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9019	PLATELETS EACH UNIT	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9020	PLATELET RICH PLASMA EACH UNIT	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9021	RED BLOOD CELLS EACH UNIT	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9022	RED BLOOD CELLS WASHED EACH UNIT	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9032	PLATELETS IRRADIATED EACH UNIT	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9034	PLATELETS PHERESIS EACH UNIT	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	P9050	GRANULOCYTES PHERESIS EACH UNIT	HCPCS - PATH & LAB	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0035	CARDIOKYMOGRAPHY	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0092	SET-UP PORTABLE X-RAY EQUIPMENT	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0113	PINWORM EXAMINATION	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q0114	FERN TEST	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q2017	INJECTION TENIPOSIDE 50 MG	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q3001	ADJUNCTIVE PROCEDURE	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	Q3031	COLLAGEN SKIN TEST	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4049	FINGER SPLINT STATIC	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4130	STRATTICE PER SQ CM	HCPCS - TEMP CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	Q4135	MEDISKIN PER SQUARE CENTIMETER	HCPCS - TEMP CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0014	TACRINE HYDROCHLORIDE 10 MG	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0017	INJECTION AMINOCAPROIC ACID 5 GRAMS	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0032	INJECTION NAFCILLIN SODIUM 2 GRAMS	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0034	INJECTION OFLOXACIN 400 MG	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0090	SILDENAFIL CITRATE 25 MG	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0109	METHADONE ORAL 5MG	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0126	INJECTION FOLLITROPIN ALFA 75 IU	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0128	INJECTION FOLLITROPIN BETA 75 IU	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0132	INJECTION GANIRELIX ACETATE 250 MCG	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0137	DIDANOSINE 25 MG	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0138	FINASTERIDE 5 MG	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0139	MINOXIDIL 10 MG	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	S0140	SAQUINAVIR 200 MG	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0160	DEXTROAMPHETAMINE SULFATE 5 MG	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0177	LEVAMISOLE HYDROCHLORIDE ORAL 50 MG	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0190	MIFEPRISTONE ORAL 200 MG	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0191	MISOPROSTOL ORAL 200 MCG	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0197	PRENATAL VITAMINS 30-DAY SUPPLY	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0209	WHEELCHAIR VAN MILEAGE PER MILE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S0310	HOSPITALIST SERVICES	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0500	DISPOSABLE CONTACT LENS PER LENS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0510	NON-PRESCRIPTION LENS PER LENS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0514	COLOR CONTACT LENS PER LENS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0516	SAFETY EYEGLASS FRAMES	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0518	SUNGLASSES FRAMES	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0580	POLYCARBONATE LENS	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	S0581	NONSTANDARD LENS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0601	SCREENING PROCTOSCOPY	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	S0800	LASER IN SITU KERATOMILEUSIS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0810	PHOTOREFRACTIVE KERATECTOMY	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S0812	PHOTOTHERAPEUTIC KERATECTOMY	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S1001	DELUXE ITEM PATIENT AWARE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S1002	CUSTOMIZED ITEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S1015	IV TUBING EXTENSION SET	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S2060	LOBAR LUNG TRANSPLANTATION	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2080	LASER-ASSISTED UVULOPALATOPLASTY	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2103	ADRENAL TISSUE TRANSPLANT TO BRAIN	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2202	ECHOSCLEROTHERAPY	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2225	MYRINGOTOMY LASER-ASSISTED	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S2265	INDUCED ABORTION 25 TO 28 WEEKS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S2266	INDUCED ABORTION 29 TO 31 WEEKS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S3600	STAT LABORATORY REQUEST	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S3630	EOSINOPHIL COUNT BLOOD DIRECT	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S3655	ANTISPERM ANTIBODIES TEST	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			

LOB	CPT	CPT Description	CPT Group	Prior Auth Required?	PA Eff Date	PA Term Date	PA Exception	Variance Detail	Service Partner Detail
MMAI-Medicare/Medicaid	S3841	GENETIC TESTING FOR RETINOBLASTOMA	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S3902	BALLISTOCARDIOGRAM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S3904	MASTERS TWO STEP	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S4005	INTERIM LABOR FACILITY GLOBAL	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S4011	IN VITRO FERTILIZATION;	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S4990	NICOTINE PATCHES LEGEND	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S4991	NICOTINE PATCHES NON-LEGEND	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S4995	SMOKING CESSATION GUM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S5000	PRESCRIPTION DRUG GENERIC	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5102	DAY CARE SERVICES ADULT; PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5120	CHORE SERVICES; PER 15 MINUTES	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5121	CHORE SERVICES; PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5126	ATTENDANT CARE SERVICES; PER DIEM	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5131	HOMEMAKER SERVICE NOS; PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5136	COMPANION CARE ADULT ; PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5140	FOSTER CARE ADULT; PER DIEM	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	S5141	FOSTER CARE ADULT; PER MONTH	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5165	HOME MODIFICATIONS; PER SERVICE	HCPCS - TEMP NATIONAL CODES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S5550	INSULIN RAPID ONSET; 5 UNITS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S5551	INSULIN MOST RAPID ONSET; 5 UNITS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S5553	INSULIN LONG ACTING; 5 UNITS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8040	TOPOGRAPHIC BRAIN MAPPING	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8096	PORTABLE PEAK FLOW METER	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8097	ASTHMA KIT	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8110	PEAK EXPIRATORY FLOW RATE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8185	FLUTTER DEVICE	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8186	SWIVEL ADAPTOR	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8210	MUCUS TRAP	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8301	INFECTION CONTROL SUPPLIES NOS	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8429	GRADIENT PRESSURE EXTERIOR WRAP	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8431	COMPRESSION BANDAGE ROLL	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8450	SPLINT PREFABRICATED DIGIT	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	S8451	SPLINT PREFABRICATED WRIST OR ANKLE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8452	SPLINT PREFABRICATED ELBOW	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8460	CAMISOLE POST-MASTECTOMY	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8490	INSULIN SYRINGES	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S8940	EQUESTRIAN/HIPPOTHERAPY PER SESSION	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S8999	RESUSCITATION BAG	HCPCS - TEMP NATIONAL CODES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S9007	ULTRAFILTRATION MONITOR	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9024	PARANASAL SINUS ULTRASOUND	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	S9025	OMNICARDIOGRAM/CARDIOINTEGRAM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9056	COMA STIMULATION PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9097	HOME VISIT FOR WOUND CARE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9117	BACK SCHOOL PER VISIT	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9125	RESPITE CARE IN THE HOME PER DIEM	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9970	HEALTH CLUB MEMBERSHIP ANNUAL	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	S9986	NOT MEDICALLY NECESSARY SERVICE	HCPCS - TEMP NATIONAL CODES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2020	DAY HABILITATION WAIVER; PER DIEM	HCPCS - STATE MEDICAID AGENCY	YES	12/01/2013	12/31/2078			

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MMAI-Medicare/Medicaid	T2022	CASE MANAGEMENT; PER MONTH	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2023	TARGETED CASE MANAGEMENT; PER MONTH	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2030	ASSISTED LIVING WAIVER; PER MONTH	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	T2031	ASSISTED LIVING WAIVER; PER DIEM	HCPCS - STATE MEDICAID AGENCY	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2115	LENTICULAR PER LENS SINGLE VISION	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2118	ANISEIKONIC LENS SINGLE VISION	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2121	LENTICULAR LENS PER LENS SINGLE	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2215	LENTICULAR PER LENS BIFOCAL	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2218	ANISEIKONIC PER LENS BIFOCAL	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2219	BIFOCAL SEG WIDTH OVER 28MM	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2220	BIFOCAL ADD OVER 3.25D	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2221	LENTICULAR LENS PER LENS BIFOCAL	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2299	SPECIALTY BIFOCAL	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2315	LENTICULAR PER LENS TRIFOCAL	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2318	ANISEIKONIC LENS TRIFOCAL	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2319	TRIFOCAL SEG WIDTH OVER 28 MM	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	V2320	TRIFOCAL ADD OVER 3.25D	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V2321	LENTICULAR LENS PER LENS TRIFOCAL	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2399	SPECIALTY TRIFOCAL	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2499	VARIABLE SPHERICITY LENS OTHER TYPE	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2502	CONTACT LENS PMMA BIFOCAL PER LENS	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2623	PROSTHETIC EYE PLASTIC CUSTOM	HCPCS - VISION SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V2625	ENLARGEMENT OF OCULAR PROSTHESIS	HCPCS - VISION SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V2626	REDUCTION OF OCULAR PROSTHESIS	HCPCS - VISION SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V2627	SCLERAL COVER SHELL	HCPCS - VISION SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V2629	PROSTHETIC EYE OTHER TYPE	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2630	ANTERIOR CHAMBER INTRAOCULAR LENS	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2631	IRIS SUPPORTED INTRAOCULAR LENS	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2632	POSTERIOR CHAMBER INTRAOCULAR LENS	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2700	BALANCE LENS PER LENS	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements
MMAI-Medicare/Medicaid	V2702	DELUXE LENS FEATURE	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2715	PRISM PER LENS	HCPCS - VISION SERVICES	YES	12/01/2013	12/31/2078			Vision services are provided by March Vision. Please call 1 888 493 4070 to determine benefits or prior authorization requirements

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MMAI-Medicare/Medicaid	V2744	TINT PHOTOCHROMATIC PER LENS	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2750	ANTIREFLECTIVE COATING PER LENS	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2755	U-V LENS PER LENS	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2756	EYE GLASS CASE	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2760	SCRATCH RESISTANT COATING PER LENS	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2770	OCCLUDER LENS PER LENS	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2780	OVERSIZE LENS PER LENS	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V2781	PROGRESSIVE LENS PER LENS	HCPCS - VISION SERVICES	NON-COV	12/01/2013	12/31/2078			
MMAI-Medicare/Medicaid	V5008	HEARING SCREENING	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5010	ASSESSMENT FOR HEARING AID	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5020	CONFORMITY EVALUATION	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5050	HEARING AID MONAURAL IN THE EAR	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5060	HEARING AID MONAURAL BEHIND THE EAR	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5070	GLASSES AIR CONDUCTION	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5080	GLASSES BONE CONDUCTION	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5100	HEARING AID BILATERAL BODY WORN	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	V5110	DISPENSING FEE BILATERAL	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5120	BINAURAL BODY	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5130	BINAURAL IN THE EAR	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5140	BINAURAL BEHIND THE EAR	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5150	BINAURAL GLASSES	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5160	DISPENSING FEE BINAURAL	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5242	HEARING AID ANALOG MONAURAL CIC	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5243	HEARING AID ANALOG MONAURAL ITC	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5248	HEARING AID ANALOG BINAURAL CIC	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5249	HEARING AID ANALOG BINAURAL ITC	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5254	HEARING AID DIGITAL MONAURAL CIC	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5255	HEARING AID DIGITAL MONAURAL ITC	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5256	HEARING AID DIGITAL MONAURAL ITE	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5257	HEARING AID DIGITAL MONAURAL BTE	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5258	HEARING AID DIGITAL BINAURAL CIC	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5259	HEARING AID DIGITAL BINAURAL ITC	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			

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MMAI-Medicare/Medicaid	V5260	HEARING AID DIGITAL BINAURAL ITE	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5261	HEARING AID DIGITAL BINAURAL BTE	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5265	EAR MOLD/INSERT DISPOSABLE ANY TYPE	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5266	BATTERY FOR USE IN HEARING DEVICE	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5272	ASSISTIVE LISTENING DEVICE TDD	HCPCS - HEARING SERVICES	NON-COV	12/01/2013	12/01/2013			
MMAI-Medicare/Medicaid	V5275	EAR IMPRESSION EACH	HCPCS - HEARING SERVICES	NO	12/01/2013	12/01/2013			