



August 1, 2026

**UTILIZATION MANAGEMENT STANDARD
CLINICAL REVIEW PREAUTHORIZATION LIST**

The following services require clinical review preauthorization for the following lines of business:
Commercial products, Essential Plan, Medicare, Dual Eligible Special Needs Plan (HMO, D-SNP), and Managed Safety Net Products.
Please review the column that applies to the member's specific line of business.

Code Changes Are Highlighted In Grey

IMPORTANT

This list represents those services that require preauthorization with a clinical medical necessity review.
Certain services require preauthorization or notification without requiring clinical review.
It is NOT inclusive of all insurance products and procedures requiring preauthorization.
Please verify specific coverage requirements before rendering service.

To initiate preauthorization requests please follow the below service contact information:

Please Note: There are some codes that require PA by diagnosis. These additional diagnosis details are now included in the last column of this document.

Behavioral Health, Medical & Durable Medical Equipment:

For All Lines Of Business please go to CareAdvance Provider by going to this URL,
<https://provider.excellusbcbs.com/authorizations/request-authorization>

EvCore:

Phone Requests: Phone: 1-888-333-9036, Monday through Friday from 7:00 a.m. – 7:00 p.m.

Internet Request: <https://provider.excellusbcbs.com/authorizations/medical/evcore-healthcare>

Fax Requests: Fax: 1-888-785-2487. Forms to fax preauthorization requests will be made available at www.evCore.com

Services for Musculoskeletal (MSK) require prior authorization via EvCore for Fully Insured Commercial and Medicare Advantage Policies.
This service will exclude all Self Funded Membership and Safety Net including Essential Plans. Please review each code to determine if authorization is required through Univera Healthcare for the EvCore exclusions

Is the code BH, DME, eviCore, or Medical?	Category	Procedure Code	Revenue Code	Rate Code	Commercial Fully Insured (Commercial Products, but not limited to: HMO, PPO, EPO, POS & HNY EPO)	Commercial Self Funded (Commercial Products, but not limited to: HMO, PPO, EPO & POS)	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery Program	Diagnosis Requirements (if applicable)
	DME	Durable Medical Equipment	K0885		Required	Required	Not Required	Not Required	Required	Required	Required	Required	
	DME	Durable Medical Equipment	K0886		Required	Required	Not Required	Not Required	Required	Required	Required	Required	
	DME	Durable Medical Equipment	K0890		Required	Required	Not Required	Not Required	Required	Required	Required	Required	
	DME	Durable Medical Equipment	K0891		Required	Required	Not Required	Not Required	Required	Required	Required	Required	
	DME	Durable Medical Equipment	K1035		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
	DME	Durable Medical Equipment	K1036		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
	DME	Durable Medical Equipment	K1037		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
	DME	Bone and Joint (Orthopedics)	L0720		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
	DME	Durable Medical Equipment	L0999		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
	DME	Bone and Joint (Orthopedics)	L1007		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
	DME	Bone and Joint (Orthopedics)	L1200		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
	DME	Bone and Joint (Orthopedics)	L1300		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
	DME	Durable Medical Equipment	L1844		Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
	DME	Durable Medical Equipment	L1846		Required	Required	Required	Required	Required	Required	Required	Required	
	DME	Bone and Joint (Orthopedics)	L1933		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
	DME	Bone and Joint (Orthopedics)	L1950		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
	DME	Bone and Joint (Orthopedics)	L1952		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
	DME	Bone and Joint (Orthopedics)	L2034		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
	DME	Durable Medical Equipment	L5020		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
	DME	Durable Medical Equipment	L5050		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
	DME	Miscellaneous & Unlisted Codes	L5657		Required	Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
	DME	Miscellaneous & Unlisted Codes	L5827		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
	DME	Durable Medical Equipment	L5828		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
	DME	Durable Medical Equipment	L5856		Not Required	Not Required	Required	Required	Required	Required	Not Required	Not Required	
	DME	Durable Medical Equipment	L5857		Required	Required	Required	Required	Not Required	Required	Required	Required	
	DME	Durable Medical Equipment	L5858		Required	Required	Required	Required	Not Required	Required	Not Required	Not Required	
	DME	Durable Medical Equipment	L5859		Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
	DME	Bone and Joint (Orthopedics)	L5969		Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
	DME	Durable Medical Equipment	L5973		Required	Not Required	Required	Required	Required	Required	Required	Required	
	DME	Durable Medical Equipment	L5976		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
	DME	Durable Medical Equipment	L5990		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
	DME	Durable Medical Equipment	L5999		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
	DME	Durable Medical Equipment	L6026		Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	

Is the code BH, DME, eviCore, or Medical?	Category	Procedure Code	Revenue Code	Rate Code	Commercial Fully Insured (Commercial Products, but not limited to: HMO, PPO, EPO, POS & HMO EPO)	Commercial Self Funded (Commercial Products, but not limited to: HMO, PPO, EPO & POS)	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery Program	Diagnosis Requirements (if applicable)
EviCore/Medical (MSK)	Bone and Joint (Orthopedics)	64624			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical (MSK)	Bone and Joint (Orthopedics)	64625			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK)	Bone and Joint (Orthopedics)	64628			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical (MSK)	Bone and Joint (Orthopedics)	64629			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical (MSK)	Nervous System (Neurology)	64632			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical (MSK)	Bone and Joint (Orthopedics)	64633			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical (MSK)	Bone and Joint (Orthopedics)	64635			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical (MSK)	Miscellaneous & Unlisted Code	95990			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical (MSK)	Miscellaneous & Unlisted Code	95991			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical (MSK)	Bone and Joint (Orthopedics)	C9757			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK)	Bone and Joint (Orthopedics)	G0260			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical (MSK)	Bone and Joint (Orthopedics)	M0076			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Not Required	Not Required	
EviCore/Medical (MSK)	Bone and Joint (Orthopedics)	S2118			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical (MSK)	Bone and Joint (Orthopedics)	S2348			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
Inpatient Admissions (except routine Maternity) to any facility including hospital, elective and direct admit, behavioral health, substance abuse, and hospital to hospital transfers.	N/A	Inpatient Admissions (except routine Maternity) to any facility including hospital, elective and direct admit, behavioral health, substance abuse, and hospital to hospital transfers.			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Genetic Testing	0006M			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Genetic Testing	0007M			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Genetic Testing	0012M			Required	Required	Required	Required	Not Required	Required	Not Required	Not Required	
Medical	Genetic Testing	0013M			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Genetic Testing	0016M			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Genetic Testing	0019M			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Genetic Testing	0020M			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0071T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0072T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	0075T			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Heart and Blood Vessel (Cardiovascular)	0076T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	0102T			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0174T			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Radiology (Imaging) Services	0175T			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Miscellaneous & Unlisted Code	0184T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	0220T			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	0221T			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Skin (Dermatology)	0232T			Required	Required	Required	Required	Not Required	Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0278T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Nervous System (Neurology)	0333T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0335T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0339T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Blood Disorder (Hematology)	0342T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	0345T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0358T			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Experimental and Investigational Procedures/ Services	0379T			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Experimental and Investigational Procedures/ Services	0397T			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	0441T			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0442T			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Diabetes (Endocrinology)	0446T			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Diabetes (Endocrinology)	0447T			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	

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Medical	Experimental and Investigational Procedures/ Services	0693T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	0695T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	0696T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0704T			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0707T			Required	Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0714T			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0719T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Cancer Treatment (Oncology)	0738T			Required	Required	Required	Required	Required	Required	Not Required	Not Required	
Medical	Cancer Treatment (Oncology)	0739T			Required	Required	Required	Required	Required	Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0740T			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0741T			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Radiology (Imaging) Services	0743T			Required	Required	Required	Required	Required	Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0744T			Required	Required	Required	Required	Required	Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0745T			Required	Required	Required	Required	Required	Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0746T			Required	Required	Required	Required	Required	Required	Not Required	Not Required	
Medical	Digestive System (Gastroenterology)	0748T			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0749T			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0750T			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Laboratory	0751T			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Laboratory	0752T			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Laboratory	0753T			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Laboratory	0754T			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Laboratory	0755T			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Laboratory	0756T			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Laboratory	0757T			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Laboratory	0758T			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Laboratory	0759T			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Laboratory	0760T			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Laboratory	0761T			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Laboratory	0762T			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Laboratory	0763T			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0765T			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0766T			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0767T			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0770T			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Alternative Medicine	0771T			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0772T			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0773T			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0774T			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0776T			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0777T			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	0778T			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	0779T			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Digestive System (Gastroenterology)	0780T			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Alternative Medicine	0783T			Required	Required	Required	Required	Required	Required	Not Required	Not Required	
Medical	Nervous System (Neurology)	0786T			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Nervous System (Neurology)	0788T			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Nervous System (Neurology)	0789T			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	

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Medical	Genetic Testing	0616U			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0617U			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Genetic Testing	0630U			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	11920			Not Required	Not Required	Not Required	Not Required	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	PA is Required for all diagnosis codes EXCEPT: C48.1, C50.019, C50.011, C50.012, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929, C50.A0, C50.A1, C50.A2, C50.S21, C56.1, C56.2, C56.3, C79.60, C79.61, C79.81, C79.62, C79.63, C84.7A, D05.00, D05.01, D05.02, D05.10, D05.11, D05.12, D05.80, D05.81, D05.82, D05.90, D05.91, D05.92, D24.1, D24.2, D24.9, D49.3, Z15.01, Z15.02, Z15.05, Z40.01, Z40.02, Z40.03, Z42.1, 280.3, 285.3, 290.11, 290.12, 290.13
Medical	Reconstructive Surgery and/or Cosmetic Services	11950			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	11951			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	11952			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	11954			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	13100			Not Required	Not Required	Not Required	Not Required	Required (By Diagnosis - see last column)	Not Required	Not Required	Not Required	PA is Required for all diagnosis codes EXCEPT: C48.1, C50.019, C50.011, C50.012, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929, C50.A0, C50.A1, C50.A2, C50.S21, C56.1, C56.2, C56.3, C79.60, C79.61, C79.81, C79.62, C79.63, C84.7A, D05.00, D05.01, D05.02, D05.10, D05.11, D05.12, D05.80, D05.81, D05.82, D05.90, D05.91, D05.92, D24.1, D24.2, D24.9, D49.3, Z15.01, Z15.02, Z15.05, Z40.01, Z40.02, Z40.03, Z42.1, 280.3, 285.3, 290.10, 290.11, 290.12, 290.14, C50A0, C50A1, C50A2, Z1505
Medical	Reconstructive Surgery and/or Cosmetic Services	13102			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	14000			Not Required	Not Required	Not Required	Not Required	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Not Required	Not Required	PA is Required for all diagnosis codes EXCEPT: C48.1, C50.019, C50.011, C50.012, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929, C50.A0, C50.A1, C50.A2, C50.S21, C56.1, C56.2, C56.3, C79.60, C79.61, C79.81, C79.62, C79.63, C84.7A, D05.00, D05.01, D05.02, D05.10, D05.11, D05.12, D05.80, D05.81, D05.82, D05.90, D05.91, D05.92, D24.1, D24.2, D24.9, D49.3, Z15.01, Z15.02, Z15.05, Z40.01, Z40.02, Z40.03, Z42.1, 280.3, 285.3, 290.11, 290.12, 290.13
Medical	Reconstructive Surgery and/or Cosmetic Services	14301			Not Required	Not Required	Not Required	Not Required	Not Required	Required (By Diagnosis - see last column)	Not Required	Not Required	PA is Required for all diagnosis codes EXCEPT: C48.1, C50.019, C50.011, C50.012, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929, C50.A0, C50.A1, C50.A2, C50.S21, C56.1, C56.2, C56.3, C79.60, C79.61, C79.81, C79.62, C79.63, C84.7A, D05.00, D05.01, D05.02, D05.10, D05.11, D05.12, D05.80, D05.81, D05.82, D05.90, D05.91, D05.92, D24.1, D24.2, D24.9, D49.3, Z15.01, Z15.02, Z15.05, Z40.01, Z40.02, Z40.03, Z42.1, 280.3, 285.3, 290.11, 290.12, 290.13
Medical	Reconstructive Surgery and/or Cosmetic Services	15650			Not Required	Not Required	Not Required	Not Required	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	PA is Required for all diagnosis codes EXCEPT: C48.1, C50.019, C50.011, C50.012, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929, C50.A0, C50.A1, C50.A2, C50.S21, C56.1, C56.2, C56.3, C79.60, C79.61, C79.81, C79.62, C79.63, C84.7A, D05.00, D05.01, D05.02, D05.10, D05.11, D05.12, D05.80, D05.81, D05.82, D05.90, D05.91, D05.92, D24.1, D24.2, D24.9, D49.3, Z15.01, Z15.02, Z15.05, Z40.01, Z40.02, Z40.03, Z42.1, 280.3, 285.3, 290.11, 290.12, 290.13
Medical	Reconstructive Surgery and/or Cosmetic Services	15770			Not Required	Not Required	Not Required	Not Required	Required (By Diagnosis - see last column)	Not Required	Not Required	Not Required	PA is Required for all diagnosis codes EXCEPT: C48.1, C56.2, C79.61, C79.62, C48.1, C50.011, C50.012, C50.019, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929, C50.A0, C50.A1, C50.A2, C50.S21, C56.1, C56.2, C56.3, C79.60, C79.61, C79.81, C79.62, C79.63, C84.7A, D05.00, D05.01, D05.02, D05.10, D05.11, D05.12, D05.80, D05.81, D05.82, D05.90, D05.91, D05.92, D24.1, D24.2, D24.9, D49.3, Z15.01, Z15.02, Z15.05, Z40.01, Z40.02, Z40.03, Z42.1, 280.3, 285.3, 290.10, 290.11, 290.12, 290.14, C50A0, C50A1, C50A2, Z1505

Is the code BH, DME, eviCore, or Medical?	Category	Procedure Code	Revenue Code	Rate Code	Commercial Fully Insured (Commercial Products, but not limited to: HMO, PPO, EPO, POS & HMO EPO)	Commercial Self Funded (Commercial Products, but not limited to: HMO, PPO, EPO & POS)	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery Program	Diagnosis Requirements (if applicable)
Medical	Reconstructive Surgery and/or Cosmetic Services	15825			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15826			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15828			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15829			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15830			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15832			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15833			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15834			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15835			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15836			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15837			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15838			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15839			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15840			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15845			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15847			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15876			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15877			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15878			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15879			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	17106			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	17107			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	17108			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	17360			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	17380			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	17999			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	19300			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	19316			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Not Required	Not Required	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	PA is Required for All diagnosis codes EXCEPT: C48.1, C50.019, C50.011, C50.012, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929, C50.A0, C50.A1, C50.A2, C50.S21, C56.1, C56.2, C56.3, C79.60, C79.61, C79.81, C79.62, C79.63, C84.7A, D05.00, D05.01, D05.02, D05.10, D05.11, D05.12, D05.80, D05.81, D05.82, D05.90, D05.91, D05.92, D24.1, D24.2, D24.9, D49.3, Z15.01, Z15.02, Z15.05, Z40.01, Z40.02, Z40.03, Z42.1, Z80.3, Z85.3, Z90.11, Z90.12, Z90.13

Is the code BH, DME, eviCore, or Medical?	Category	Procedure Code	Revenue Code	Rate Code	Commercial Fully Insured (Commercial Products, but not limited to: HMO, PPO, EPO, POS & HMO EPO)	Commercial Self Funded (Commercial Products, but not limited to: HMO, PPO, EPO & POS)	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery Program	Diagnosis Requirements (if applicable)
Medical	Reconstructive Surgery and/or Cosmetic Services	21299			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21740			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21742			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21743			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	22206			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	22212			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Not Required	
Medical	Bone and Joint (Orthopedics)	22532			Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	22548			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	22556			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	22590			Not Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	22610			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	22800			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	22802			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	22804			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	22808			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	22810			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	22812			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	22818			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	22836			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	22837			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	22838			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	22849			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	22850			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	22852			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	22855			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	22899			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	25447			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	27437			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	29800			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	29804			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Ears and Nose and Throat (Otorhinolaryngology)	30117			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	30120			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	30400			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	30410			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	30420			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	30430			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	30435			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	30450			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	30462			Required	Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Ears and Nose and Throat (Otorhinolaryngology)	30468			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Experimental and Investigational Procedures/ Services	30469			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Ears and Nose and Throat (Otorhinolaryngology)	30802			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Ears and Nose and Throat (Otorhinolaryngology)	30999			Required	Required	Not Required	Not Required	Required	Required	Required	Required	

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Medical	Ears and Nose and Throat (Otorhinolaryngology)	31242			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Ears and Nose and Throat (Otorhinolaryngology)	31243			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Ears and Nose and Throat (Otorhinolaryngology)	31295			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Ears and Nose and Throat (Otorhinolaryngology)	31296			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Ears and Nose and Throat (Otorhinolaryngology)	31297			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Ears and Nose and Throat (Otorhinolaryngology)	31298			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	32664			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Transplants	32851			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Transplants	32852			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Transplants	32853			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Transplants	32854			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33202			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33203			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33258			Not Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33265			Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33269			Not Required	Not Required	Required	Required	Required	Required	Required	Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33285			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33340			Required	Required	Required	Required	Not Required	Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33361			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33362			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33363			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33364			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33365			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33366			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33367			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33368			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33369			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33418			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33419			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Transplants	33933			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical	Transplants	33935			Required	Required	Required	Required	Required	Required	Not Required	Not Required	
Medical	Transplants	33944			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Transplants	33945			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33975			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33976			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33979			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33990			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33991			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33992			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33993			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33995			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33999			Required	Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Endovascular Grafts for Abdominal Aortic & Thoracic Aneurysms	34703			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	
Medical	Endovascular Grafts for Abdominal Aortic & Thoracic Aneurysms	34705			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Endovascular Grafts for Abdominal Aortic & Thoracic Aneurysms	34841			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Endovascular Grafts for Abdominal Aortic & Thoracic Aneurysms	34842			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Endovascular Grafts for Abdominal Aortic & Thoracic Aneurysms	34843			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Endovascular Grafts for Abdominal Aortic & Thoracic Aneurysms	34844			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Endovascular Grafts for Abdominal Aortic & Thoracic Aneurysms	34846			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	

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Medical	Endovascular Grafts for Abdominal Aortic & Thoracic Aneurysms	34847			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Endovascular Grafts for Abdominal Aortic & Thoracic Aneurysms	34848			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	36465			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	36466			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	36470			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	36471			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	36475			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	36476			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	36478			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	36479			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	36482			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	36483			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	36522			Not Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	37241			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Urinary System(Genitourinary)	37242			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Not Required	Not Required	Not Required	Not Required	PA is Required for the following diagnosis codes: N40.1
Medical	Radiation Therapy	37243			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	37700			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	37718			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	37722			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	37761			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	37765			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	37766			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	37780			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Erectile Dysfunction	37788			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Erectile Dysfunction	37790			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Transplants	38205			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Transplants	38206			Required	Required	Required	Required	Not Required	Required	Not Required	Not Required	
Medical	Transplants	38210			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Transplants	38211			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Transplants	38230			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Transplants	38232			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Transplants	38240			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Transplants	38241			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Transplants	38242			Not Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Sleep Medicine	41512			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Sleep Medicine	42145			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Ears and Nose and Throat (Otorhinolaryngology)	42835			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Digestive System (Gastroenterology)	43192			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Digestive System (Gastroenterology)	43201			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Digestive System (Gastroenterology)	43210			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical	Digestive System (Gastroenterology)	43236			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Digestive System (Gastroenterology)	43284			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Digestive System (Gastroenterology)	43290			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Digestive System (Gastroenterology)	43291			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Experimental and Investigational Procedures/ Services	43497			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Digestive System (Gastroenterology)	43647			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Digestive System (Gastroenterology)	43648			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Digestive System (Gastroenterology)	43659			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required	

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Medical	Womens Health (Obstetrics and Gynecology)	58573			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	PA is Required for All diagnosis codes EXCEPT: C45.9, C51.0, C51.1, C51.2, C51.8, C51.9, C52, C53.0, C53.1, C53.8, C53.9, C54.0, C54.1, C54.2, C54.3, C54.8, C54.9, C55, C56.1, C56.2, C56.3, C56.9, C57.00, C57.01, C57.10, C57.11, C57.12, C57.20, C57.21, C57.22, C57.3, C57.4, C57.7, C57.8, C57.9, C58, C76.2, C76.3, C77.2, C77.5, C79.60, C79.61, C79.62, C79.63, C79.82, C79.89, C79.9, C80.0, C80.1, D46.0, D46.1, D46.7, D46.9, D07.0, D07.1, D07.2, D07.30, D07.39, Z15.04, Z15.05, Z80.44, Z85.4A, Z86.00A
Medical	Cancer Treatment (Oncology)	58580			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Cancer Treatment (Oncology)	58674			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Cancer Treatment (Oncology)	60660			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Cancer Treatment (Oncology)	60661			Required	Required	Required	Required	Not Required	Required	Not Required	Required	
Medical	Nervous System (Neurology)	61630			Not Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Nervous System (Neurology)	61715			Not Required	Not Required	Not Required	Required	Not Required	Not Required	Required	Required	
Medical	Experimental and Investigational Procedures/ Services	61736			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Nervous System (Neurology)	61863			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Nervous System (Neurology)	61867			Not Required	Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Nervous System (Neurology)	61868			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Not Required	
Medical	Nervous System (Neurology)	61885			Not Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Nervous System (Neurology)	61886			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	63003			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	63016			Not Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	63020			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63046			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63055			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Bone and Joint (Orthopedics)	63064			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	63077			Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63101			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63185			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	63191			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63200			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	63251			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63252			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63300			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63301			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	63304			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63305			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63306			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63307			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	64454			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Nervous System (Neurology)	64553			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Nervous System (Neurology)	64555			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Nervous System (Neurology)	64561			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Durable Medical Equipment	64567			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Nervous System (Neurology)	64568			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Nervous System (Neurology)	64581			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Sleep Medicine	64582			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Nervous System (Neurology)	64590			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	64640			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	PA is Required for the following diagnosis codes: M17.10, M17.11, M17.2, M17.12, M17.30, M17.31, M17.32, M17.4, M17.5, M17.9, M25.561, M25.562, M25.569
Medical	Reconstructive Surgery and/or Cosmetic Services	64822			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	

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Medical	Transplants	52102			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Blood Disorder (Hematology)	52120			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Transplants	52150			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Genetic Testing	53841			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Genetic Testing	53844			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Genetic Testing	53846			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Genetic Testing	53849			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Genetic Testing	53850			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Genetic Testing	53852			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Genetic Testing	53853			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Genetic Testing	53854			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Genetic Testing	53861			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Genetic Testing	53865			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Genetic Testing	53866			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	55102			Not Required	Not Required	Not Required	Required	Not Required	Not Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	55130			Not Required	Not Required	Not Required	Required	Not Required	Not Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	55199			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Radiology (Imaging) Services	58080			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	59055			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Home Care & Home Infusion Nursing Visits	59097			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Home Care & Home Infusion Nursing Visits	59122			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical	Home Care & Home Infusion Nursing Visits	59123			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	59124			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	59125			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical	Therapy and Rehabilitation	59128	None		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Therapy and Rehabilitation	59128	780		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Therapy and Rehabilitation	59128	789		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Therapy and Rehabilitation	59129	None		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Therapy and Rehabilitation	59129	780		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Therapy and Rehabilitation	59129	789		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Therapy and Rehabilitation	59131			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Transportation	59960			Required	Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Transportation	59961			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Home Care & Home Infusion Nursing Visits	T1000			Not Required	Not Required	Not Required	Required	Required	Not Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T1001	None		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T1001	780		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T1001	789		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T1002			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T1003			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T1004			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T1019			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T1020			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T1021			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T1030			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T1031			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Durable Medical Equipment	T1999			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T2024			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T2028			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required (Ages 22 & older)	Not Required	
Medical	Durable Medical Equipment	T2029			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T2038			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required (Only for Moving Assistance/Community transition, for HCBS or CFCD program)	Required (Only required for Moving Assistance/Community transition, for CFCD program)	
Medical	Home Care & Home Infusion Nursing Visits	T2039			Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Durable Medical Equipment	T5999			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Eyes (Ophthalmology)	V2199			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Eyes (Ophthalmology)	V2499			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Eyes (Ophthalmology)	V2787			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Eyes (Ophthalmology)	V2788			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Eyes (Ophthalmology)	V2799			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Hospice Services	NONE	0650		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Hospice Services	NONE	0651		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Hospice Services	NONE	0652		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Hospice Services	NONE	0655		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Hospice Services	NONE	0656		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Hospice Services	NONE	0657		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Hospice Services	NONE	0659		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	

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Medical	Neonatal Intensive Care	NONE	0172		Notification Required	Notification Required	Not Required	Not Required	Notification Required	Notification Required	Notification Required	Notification Required	
Medical	Neonatal Intensive Care	NONE	0173		Notification Required	Notification Required	Not Required	Not Required	Notification Required	Notification Required	Notification Required	Notification Required	
Medical	Neonatal Intensive Care	NONE	0174		Notification Required	Notification Required	Not Required	Not Required	Notification Required	Notification Required	Notification Required	Notification Required	
Medical	Neonatal Intensive Care	NONE	0179		Notification Required	Notification Required	Not Required	Not Required	Notification Required	Notification Required	Notification Required	Notification Required	
Medical	Digestive System (Gastroenterology)	4700			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	PA is Required for the following diagnosis codes: E66.01, E66.2, Z68.35, Z68.36, Z68.37, Z68.38, Z68.39, Z68.40, Z68.41, Z68.42, Z68.43, Z68.44, Z68.45, E66.0, E66.09, E66.3, E66.811, E66.812, E66.813, E66.89, E66.9
Medical	Digestive System (Gastroenterology)	4701			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	PA is Required for the following diagnosis codes: E66.01, E66.2, Z68.35, Z68.36, Z68.37, Z68.38, Z68.39, Z68.40, Z68.41, Z68.42, Z68.43, Z68.44, Z68.45, E66.0, E66.09, E66.3, E66.811, E66.812, E66.813, E66.89, E66.9
Medical	Digestive System (Gastroenterology)	4710			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	PA is Required for the following diagnosis codes: E66.01, E66.2, Z68.35, Z68.36, Z68.37, Z68.38, Z68.39, Z68.40, Z68.41, Z68.42, Z68.43, Z68.44, Z68.45, E66.0, E66.09, E66.3, E66.811, E66.812, E66.813, E66.89, E66.9
Medical	Transplants	4715			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Cancer Treatment (Oncology)	47370			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Cancer Treatment (Oncology)	47371			Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Digestive System (Gastroenterology)	47379			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Not Required	Not Required	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	PA is Required for the following diagnosis codes: E66.01, E66.2, Z68.35, Z68.36, Z68.37, Z68.38, Z68.39, Z68.40, Z68.41, Z68.42, Z68.43, Z68.44, Z68.45, E66.0, E66.09, E66.3, E66.811, E66.812, E66.813, E66.89, E66.9
Medical	Cancer Treatment (Oncology)	47381			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Cancer Treatment (Oncology)	47382			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Digestive System (Gastroenterology)	47605			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Transplants	48160			Required	Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Transplants	48554			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Transplants	50320			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Transplants	50360			Required	Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Transplants	50365			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Transplants	50370			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Transplants	50380			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Transplants	50547			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Urinary System (Genitourinary)	50590			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Cancer Treatment (Oncology)	50592			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Cancer Treatment (Oncology)	50593			Required	Required	Required	Required	Not Required	Not Required	Required	Not Required	
Medical	Urinary System (Genitourinary)	51715			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Urinary System (Genitourinary)	52284			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Urinary System (Genitourinary)	52441			Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Urinary System (Genitourinary)	52443			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Urinary System (Genitourinary)	52597			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Urinary System (Genitourinary)	53854			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Urinary System (Genitourinary)	53865			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Urinary System (Genitourinary)	53866			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	
Medical	Erectile Dysfunction	54220			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Erectile Dysfunction	54230			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Erectile Dysfunction	54231			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Erectile Dysfunction	54235			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Erectile Dysfunction	54240			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Erectile Dysfunction	54250			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Erectile Dysfunction	54400			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Erectile Dysfunction	54401			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Erectile Dysfunction	54405			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Erectile Dysfunction	54406			Not Required	Not Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Erectile Dysfunction	54408			Not Required	Not Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Erectile Dysfunction	54410			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Erectile Dysfunction	54411			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Erectile Dysfunction	54415			Not Required	Not Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Erectile Dysfunction	54416			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Erectile Dysfunction	54417			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Urinary System (Genitourinary)	54440			Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Transplants	54680			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Erectile Dysfunction	55870			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Cancer Treatment (Oncology)	55873			Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Urinary System (Genitourinary)	55877			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Urinary System (Genitourinary)	55880			Required	Required	Required	Required	Not Required	Required	Not Required	Not Required	
Medical	Gender Affirmation	55970			Required	Required	Required	Required	Not Required	Required	Not Required	Not Required	
Medical	Gender Affirmation	55980			Required	Required	Required	Required	Not Required	Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	56620			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	56625			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Gender Affirmation	56805			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	

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Medical	Cancer Treatment (Oncology)	60660			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Cancer Treatment (Oncology)	60661			Required	Required	Required	Required	Not Required	Required	Not Required	Required	
Medical	Nervous System (Neurology)	61630			Not Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Nervous System (Neurology)	61715			Not Required	Not Required	Not Required	Required	Not Required	Not Required	Required	Required	
Medical	Experimental and Investigational Procedures/ Services	61736			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Nervous System (Neurology)	61850			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Nervous System (Neurology)	61863			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Nervous System (Neurology)	61867			Not Required	Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Nervous System (Neurology)	61868			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Not Required	
Medical	Nervous System (Neurology)	61880			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Nervous System (Neurology)	61885			Not Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Nervous System (Neurology)	61886			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Nervous System (Neurology)	61888			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	62369			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	62370			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	63003			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	63016			Not Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	63020			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63046			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63055			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63064			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	63077			Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63086			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63101			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63170			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63173			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63185			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	63191			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63197			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63200			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	63251			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63252			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63266			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63270			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Not Required	
Medical	Bone and Joint (Orthopedics)	63271			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	63273			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63275			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63276			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63278			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63280			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63281			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63282			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63286			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63295			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63300			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63301			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	63304			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63305			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63306			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63307			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	63308			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	

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Medical	Bone and Joint (Orthopedics)	63661			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	64554			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Nervous System (Neurology)	64553			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Nervous System (Neurology)	64555			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Nervous System (Neurology)	64561			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Durable Medical Equipment	64567			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Nervous System (Neurology)	64568			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Nervous System (Neurology)	64580			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Nervous System (Neurology)	64581			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Sleep Medicine	64582			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Sleep Medicine	64583			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Sleep Medicine	64584			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Nervous System (Neurology)	64590			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	64640			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Not Required	Not Required	Not Required	Required (All Diagnoses)	Required (All Diagnoses)	Required (All Diagnoses)	PA is Required for the following diagnosis codes: M17.10, M17.11, M17.2, M17.12, M17.30, M17.31, M17.32, M17.4, M17.5, M17.9, M25.561, M25.562, M25.569
Medical	Reconstructive Surgery and/or Cosmetic Services	64822			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical	Nervous System (Neurology)	64999			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	PA is Required for the following diagnosis codes: G40.001, G40.009, G40.011, G40.019, G40.101, G40.109, G40.111, G40.119, G40.201, G40.209, G40.211, G40.219, G40.301, G40.309, G40.311, G40.319, G40.401, G40.409, G40.411, G40.419, G40.501, G40.509, G40.801, G40.802, G40.803, G40.804, G40.811, G40.812, G40.813, G40.814, G40.821, G40.822, G40.823, G40.824, G40.833, G40.834, G40.841, G40.842, G40.843, G40.844, G40.89, G40.901, G40.909, G40.911, G40.919, G93.45, M17.0, M17.2, M17.4, M17.5, M17.9, M17.10, M17.11, M17.12, M17.30, M17.31, M17.32, M25.561, M25.562, M25.569
Medical	Eyes (Ophthalmology)	66179			Not Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Eyes (Ophthalmology)	66180			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Eyes (Ophthalmology)	66183			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	67715			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	67900			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	67901			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	67902			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	67903			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	67904			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	67906			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	67908			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	67909			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	67911			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	67914			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	67916			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	67917			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	67921			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	67922			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	67923			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	67924			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	67950			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	67999			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	69300			Required	Required	Required	Required	Not Required	Not Required	Required	Required	

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Medical	Skin (Dermatology)	A2005			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Skin (Dermatology)	A2007			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	A2008			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	A2009			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	A2010			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	A2011			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	A2012			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Skin (Dermatology)	A2013			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	A2014			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	A2015			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	A2016			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	A2017			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	A2018			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	A2019			Required	Required	Required	Required	Required	Required	Not Required	Not Required	
Medical	Skin (Dermatology)	A2020			Required	Required	Required	Required	Required	Required	Not Required	Not Required	
Medical	Skin (Dermatology)	A2021			Required	Required	Required	Required	Required	Required	Not Required	Not Required	
Medical	Skin (Dermatology)	A2026			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	A2027			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Skin (Dermatology)	A2028			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Skin (Dermatology)	A2029			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Skin (Dermatology)	A2030			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	A2031			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	A2032			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	A2033			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	A2034			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	A2035			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	A2036			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	A2037			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	A2038			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	A2039			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Digestive System (Gastroenterology)	A4238			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Durable Medical Equipment	A6512			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Miscellaneous & Unlisted Codes	A9156			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	A9268			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Experimental and Investigational Procedures/ Services	A9269			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Radiology (Imaging) Services	A9697			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Durable Medical Equipment	A9900			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Durable Medical Equipment	A9999			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Nervous System (Neurology)	C1767			Required	Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical	Eyes (Ophthalmology)	C1783			Not Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Erectile Dysfunction	C1813			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	C1821			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	C1826			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	C2614			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	C2624			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Erectile Dysfunction	C2622			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Skin (Dermatology)	C9354			Not Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Skin (Dermatology)	C9356			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Sleep Medicine	C9272			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Miscellaneous & Unlisted Codes	C9734			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Digestive System (Gastroenterology)	C9785			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Clinical Trials *	C9792			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	C9817			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Urinary System(Genitourinary)	E0201			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Sleep Medicine	E0470			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Sleep Medicine	E0471			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Sleep Medicine	E0601			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Durable Medical Equipment	E0769			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Durable Medical Equipment	E1399			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Durable Medical Equipment	E3000			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Nervous System (Neurology)	G0255			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	G0276			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Miscellaneous & Unlisted Codes	G0277			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	G0299			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical	Home Care & Home Infusion Nursing Visits	G0300			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical	Transplants	G0341			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Transplants	G0342			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Transplants	G0343			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	G0428			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Sleep Medicine	G0429			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Skin (Dermatology)	G0465			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Erectile Dysfunction	J0270			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Erectile Dysfunction	J0275			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Erectile Dysfunction	J2440			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Erectile Dysfunction	J2760			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	

Is the code BH, DME, eviCore, or Medical?	Category	Procedure Code	Revenue Code	Rate Code	Commercial Fully Insured (Commercial Products, but not limited to: HMO, PPO, EPO, POS & HMO EPO)	Commercial Self Funded (Commercial Products, but not limited to: HMO, PPO, EPO & POS)	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery Program	Diagnosis Requirements (if applicable)
Medical	Home Care & Home Infusion Nursing Visits	55130			Not Required	Not Required	Not Required	Required	Not Required	Not Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	55199			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Radiology (Imaging) Services	58080			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	59025			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical	Skin (Dermatology)	59055			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Home Care & Home Infusion Nursing Visits	59097			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Home Care & Home Infusion Nursing Visits	59122			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical	Home Care & Home Infusion Nursing Visits	59123			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	59124			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	59125			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical	Therapy and Rehabilitation	59128	None		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Therapy and Rehabilitation	59128	780		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Therapy and Rehabilitation	59128	789		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Therapy and Rehabilitation	59129	None		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Therapy and Rehabilitation	59129	780		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Therapy and Rehabilitation	59129	789		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Therapy and Rehabilitation	59131			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Therapy and Rehabilitation	59152			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Transportation	59960			Required	Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical	Transportation	59961			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Home Care & Home Infusion Nursing Visits	T1000			Not Required	Not Required	Not Required	Required	Required	Not Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T1001	None		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T1001	780		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T1001	789		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T1002			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T1003			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T1004			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T1019			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T1020			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T1021			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T1030			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T1031			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Durable Medical Equipment	T1999			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T2024			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T2028			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required (Ages 22 & older)	Not Required	
Medical	Durable Medical Equipment	T2029			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Home Care & Home Infusion Nursing Visits	T2038			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required (Only for Moving Assistance/Community transition, for HCBS or CFCO program)	Required (Only required for Moving Assistance/Community transition, for CFCO program)	
Medical	Home Care & Home Infusion Nursing Visits	T2039			Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	
Medical	Durable Medical Equipment	T5999			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Eyes (Ophthalmology)	V2199			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Eyes (Ophthalmology)	V2499			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Eyes (Ophthalmology)	V2787			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Eyes (Ophthalmology)	V2788			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Eyes (Ophthalmology)	V2799			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Hospice Services	NONE	0650		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Hospice Services	NONE	0651		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Hospice Services	NONE	0652		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Hospice Services	NONE	0655		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Hospice Services	NONE	0656		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Hospice Services	NONE	0657		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Hospice Services	NONE	0659		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Neonatal Intensive Care	NONE	0172		Notification Required	Notification Required	Not Required	Not Required	Notification Required	Notification Required	Notification Required	Notification Required	
Medical	Neonatal Intensive Care	NONE	0173		Notification Required	Notification Required	Not Required	Not Required	Notification Required	Notification Required	Notification Required	Notification Required	
Medical	Neonatal Intensive Care	NONE	0174		Notification Required	Notification Required	Not Required	Not Required	Notification Required	Notification Required	Notification Required	Notification Required	
Medical	Neonatal Intensive Care	NONE	0179		Notification Required	Notification Required	Not Required	Not Required	Notification Required	Notification Required	Notification Required	Notification Required	