



April 1, 2025

UTILIZATION MANAGEMENT STANDARD CLINICAL REVIEW PREAUTHORIZATION LIST

The following services require clinical review preauthorization for,
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 health benefit program regardless of place of service.

Code Changes Are Highlighted In Grey

IMPORTANT

This list represents those services that require preauthorization with a clinical medical necessity review.
It is NOT inclusive of all insurance products and procedures requiring preauthorization.
There may be services which require preauthorization / notification that do not require clinical review.
Please verify specific coverage requirements before rendering service.
These services require preauthorization regardless of place of service.

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

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>

CareCentrix

Phone Requests: Phone: 1-866-501-4659, Sunday through Saturday from 8:00 a.m. – 8:00 p.m.

EviCore:

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/evicore-healthcare>

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

Services for Musculoskeletal (MSK) require prior authorization via EviCore 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 Health Plan for the EviCore exclusions

Is the code BH, DME, eviCore, or Medical?	Procedure Code	Revenue 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 & HNY EPO)	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery Program
BH/Medical	90867			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
BH/Medical	90868			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
BH/Medical	90869			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
BH/Medical	90876	None		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
BH/Medical	90876	0917		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
BH	0889T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
BH	0890T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
BH	0891T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
BH	0892T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
BH	90899	None		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
BH	96130	None		Required	Required	Required	Required	Required	Required	Required	Required
BH	96130	0780		Required	Required	Required	Required	Required	Required	Required	Required
BH	96130	0789		Required	Required	Required	Required	Required	Required	Required	Required
BH	96130	0918		Required	Required	Required	Required	Required	Required	Required	Required
BH	96131	None		Required	Required	Required	Required	Required	Required	Required	Required
BH	96131	0780		Required	Required	Not Required	Not Required	Required	Required	Required	Required
BH	96131	0789		Required	Required	Not Required	Not Required	Required	Required	Required	Required
BH	96131	0918		Required	Required	Required	Required	Required	Required	Required	Required
BH	G0137	None		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
BH	H0004	0911		Not Required	Not Required	Not Required	Notification Required	Not Required	Not Required	Notification Required	Not Required
BH	H0035	None		PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	Not Required	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)
BH	H0035	0900		PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	Not Required	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)

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BH	H0035	0912		PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	Not Required	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)
BH	H0035	0913		PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	Not Required	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)
BH	H0036	None		Not Required	Not Required	Not Required	Notification Required only for CORE (Community Oriented Recovery Empowerment) (for HARP members only)	Not Required	Not Required	Not Required	Notification Required only for CORE (Community Oriented Recovery Empowerment)
BH	H0036	0900		Not Required	Not Required	Not Required	Notification Required only for CORE (Community Oriented Recovery Empowerment) (for HARP members only)	Not Required	Not Required	Not Required	Notification Required only for CORE (Community Oriented Recovery Empowerment)
BH	H0036	0911		Not Required	Not Required	Not Required	Notification Required only for CORE (Community Oriented Recovery Empowerment) (for HARP members only)	Not Required	Not Required	Not Required	Notification Required only for CORE (Community Oriented Recovery Empowerment)
BH	H0038	None		Not Required	Not Required	Not Required	Notification Required only for CORE (Community Oriented Recovery Empowerment) (for HARP members only)	Not Required	Not Required	Notification Required only for Children and Family Treatment and Support Services (CFTSS)	Notification Required only for CORE (Community Oriented Recovery Empowerment)
BH	H0038	0900		Not Required	Not Required	Not Required	Notification Required only for CORE (Community Oriented Recovery Empowerment) (for HARP members only)	Not Required	Not Required	Notification Required only for Children and Family Treatment and Support Services (CFTSS)	Notification Required only for CORE (Community Oriented Recovery Empowerment)
BH	H0038	0911		Not Required	Not Required	Not Required	Notification Required only for CORE (Community Oriented Recovery Empowerment) (for HARP members only)	Not Required	Not Required	Not Required	Notification Required only for CORE (Community Oriented Recovery Empowerment)
BH	H2012	None		Required	Required	Not Required	Required	Required	Required	Required	Required
BH Intensive Psychiatric Rehabilitation Treatment (IPRT)	H2012	0900		Not Required	Not Required	Not Required	Required	Required	Not Required	Required	Required
BH Continuing Day Treatment	H2012	0907		Required	Required	Not Required	Required	Required	Required	Required	Required
BH Intensive Psychiatric Rehabilitation Treatment (IPRT)	H2012	0911		Not Required	Not Required	Not Required	Required	Required	Not Required	Required	Required
BH	H2012	0919		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
BH	H2014	None		Not Required	Not Required	Not Required	Notification Required only for CORE (Community Oriented Recovery Empowerment) (for HARP members only)	Not Required	Not Required	Not Required	Notification Required only for CORE (Community Oriented Recovery Empowerment)
BH	H2014	0900		Not Required	Not Required	Not Required	Notification Required only for CORE (Community Oriented Recovery Empowerment) (for HARP members only)	Not Required	Not Required	Not Required	Notification Required only for CORE (Community Oriented Recovery Empowerment)
BH	H2014	0911		Not Required	Not Required	Not Required	Notification Required only for CORE (Community Oriented Recovery Empowerment) (for HARP members only)	Not Required	Not Required	Not Required	Notification Required only for CORE (Community Oriented Recovery Empowerment)
BH	H2014HA	0240	8012	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required

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BH	H2014HAUK	0900	8003	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	H2014HAUK	0911	8003	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	H2014HAUN	0240	8013	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	H2014HAUP	0240	8014	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	H2014HAUKU N	0900	8004	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	H2014HAUKU N	0911	8004	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	H2014HAUKU P	0900	8005	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	H2014HAUKU P	0911	8005	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	H2015HA	0900	8009	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	H2015HA	0911	8009	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required

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BH	H2015HAUN	0900	8010	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	H2015HAUN	0911	8010	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	H2015HAUP	0900	8011	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	H2015HAUP	0911	8011	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	H2017	None		Not Required	Not Required	Not Required	Notification Required only for CORE (Community Oriented Recovery Empowerment) (for HARP members only)	Not Required	Not Required	Notification Required only for Children and Family Treatment and Support Services (CFTSS)	Notification Required only for CORE (Community Oriented Recovery Empowerment)
BH	H2017	0900		Not Required	Not Required	Not Required	Notification Required only for CORE (Community Oriented Recovery Empowerment) (for HARP members only)	Not Required	Not Required	Notification Required only for Children and Family Treatment and Support Services (CFTSS)	Notification Required only for CORE (Community Oriented Recovery Empowerment)
BH	H2017	0911		Not Required	Not Required	Not Required	Notification Required only for CORE (Community Oriented Recovery Empowerment) (for HARP members only)	Not Required	Not Required	Notification Required only for Children and Family Treatment and Support Services (CFTSS)	Notification Required only for CORE (Community Oriented Recovery Empowerment)
BH	H2023	None		Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	Required
BH	H2023	0900		Not Required	Not Required	Not Required	Required (only if the member is also a member of HARP)	Not Required	Not Required	Not Required	Required
BH	H2023	0911		Not Required	Not Required	Not Required	Required (only if the member is also a member of HARP)	Not Required	Not Required	Not Required	Required
BH	H2023HA	0900	8015	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	H2023HA	0911	8015	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	H2034	None		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Notification Required	Notification Required
BH	H2036	None		Notification Required	Notification Required	Not Required	Notification Required	Notification Required	Notification Required	Notification Required	Notification Required
BH	H2036	0900		Notification Required	Notification Required	Not Required	Notification Required	Notification Required	Notification Required	Notification Required	Notification Required
BH	H2036	0902		Notification Required	Notification Required	Not Required	Notification Required	Notification Required	Notification Required	Notification Required	Notification Required
BH	H2036	0911		Notification Required	Notification Required	Not Required	Notification Required	Notification Required	Notification Required	Notification Required	Notification Required
BH	H2036	0914		Notification Required	Notification Required	Not Required	Notification Required	Notification Required	Notification Required	Notification Required	Notification Required

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BH	H2036	0944		Notification Required	Notification Required	Not Required	Notification Required	Notification Required	Notification Required	Notification Required	Notification Required
BH	H2036	0945		Notification Required	Notification Required	Not Required	Notification Required	Notification Required	Notification Required	Notification Required	Notification Required
BH	H2036	1002		Notification Required	Notification Required	Not Required	Notification Required	Notification Required	Notification Required	Notification Required	Notification Required
BH	S0201	None		PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	Required	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)
BH	S5150			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
BH	S5150HA	0900	8023	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	S5150HA	0911	8023	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	S5150HAHKH Q	0900	8026	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	S5150HAHKH Q	0911	8026	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	S5150HAHQ	0900	8027	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	S5150HAHQ	0911	8027	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	S5150HAET	0900	8028	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	S5150HAET	0911	8028	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required

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BH	S5150HAUN		8065	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	S5150HAUN	0900	8065	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	S5150HAUN	0911	8065	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	S5150HB			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Notification Required	Notification Required
BH	S5150HR			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Notification Required	Notification Required
BH	S5151			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
BH	S5151HA	0900	8024	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	S5151HA	0911	8024	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	S5151HAHK	0900	8025	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	S5151HAHK	0911	8025	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	S5151HAET	0900	8029	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	S5151HAET	0911	8029	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required

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BH	S5151HAETH K	0900	8030	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	S5151HAETH K	0911	8030	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	S5151HAUN		8066	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	S5151HAUN	0900	8065	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	S5151HAUN	0911	8065	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	S5151HB			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Notification Required	Notification Required
BH (Excludes Chemical Dependency Diagnosis)	S9480	None		PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	Not Required	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)
BH (Excludes Chemical Dependency Diagnosis)	S9480	0905		PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	Not Required	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)
BH	T2013	0900		Not Required	Not Required	Not Required	Required (only if the member is also a member of HARP)	Not Required	Not Required	Not Required	Required
BH	T2013	0911		Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	Required
BH	T2015	None		Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	Required
BH	T2015	0900		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required
BH	T2015	0911		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required
BH	T2015HA	0900	8006	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required
BH	T2015HA	0911	8006	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required

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Is the code BH, DME, eviCore, or Medical?	Procedure Code	Revenue 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 & HNY EPO)	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery Program
BH		1002	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	Not Required	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)
BH		1001	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	Not Required	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)
DME	A4239		Not Required	Not Required	Required	Required	Required	Required	Not Required	Not Required
DME	A4468		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
DME	A4520		Required	Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required
DME	A4540		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
DME	A4542		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
DME	A4554		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
DME	A4560		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
DME	A4575		Required	Required	Required	Required	Required	Required	Required	Required
DME	A4593		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
DME	A4594		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
DME	A6501		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
DME	A6503		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
DME	A6507		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
DME	A8002		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Required
DME	A8003		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Required
DME	A9272		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
DME	A9274		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
DME	A9276		Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required
DME	A9277		Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required
DME	A9278		Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required
DME	A9280		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
DME	A9281		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
DME	A9282		Not Required	Not Required	Not Required	Required	Not Required	Not Required	Required	Required
DME	B9004		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
DME	E0193		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
DME	E0194		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
DME	E0215		Required	Required	Required	Required	Required	Not Required	Not Required	Not Required
DME	E0217		Required	Required	Required	Required	Required	Required	Not Required	Not Required
DME	E0240		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
DME	E0245		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
DME	E0255		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
DME	E0256		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
DME	E0260		Required	Required	Required	Required	Not Required	Required	Not Required	Not Required
DME	E0261		Required	Required	Required	Required	Not Required	Not Required	Required	Required
DME	E0265		Not Required	Not Required	Required	Required	Required	Not Required	Not Required	Not Required
DME	E0266		Not Required	Not Required	Required	Required	Required	Not Required	Required	Required
DME	E0274		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
DME	E0277		Required	Required	Required	Required	Required	Required	Required	Required
DME	E0290		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
DME	E0291		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
DME	E0292		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
DME	E0294		Not Required	Not Required	Required	Required	Required	Not Required	Not Required	Not Required
DME	E0295		Required	Required	Required	Required	Required	Required	Not Required	Not Required
DME	E0296		Required	Required	Not Required	Not Required	Not Required			

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DME	K0005		Not Required	Not Required	Required	Required	Required	Required	Required	Required
DME	K0006		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
DME	K0007		Not Required	Not Required	Not Required	Required	Required	Required	Required	Required
DME	K0008		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
DME	K0009		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
DME	K0010		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
DME	K0011		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
DME	K0012		Required	Required	Required	Required	Required	Not Required	Required	Required
DME	K0013		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
DME	K0014		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
DME	K0108		Not Required	Not Required	Required	Required	Required	Required	Required	Required
DME	K0455		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
DME	K0606		Required	Required	Required	Required	Required	Required	Required	Required
DME	K0739		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
DME	K0743		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
DME	K0800		Required	Required	Required	Required	Required	Required	Required	Required
DME	K0801		Required	Required	Required	Required	Required	Required	Required	Required
DME	K0802		Required	Required	Not Required	Not Required	Required	Required	Required	Required
DME	K0806		Required	Required	Required	Required	Required	Required	Required	Required
DME	K0807		Required	Required	Not Required	Not Required	Required	Required	Required	Required
DME	K0808		Required	Required	Required	Required	Required	Required	Required	Required
DME	K0812		Required	Required	Required	Required	Not Required	Not Required	Required	Required
DME	K0813		Required	Required	Required	Required	Not Required	Not Required	Required	Required
DME	K0814		Required	Required	Not Required	Not Required	Required	Required	Required	Required
DME	K0815		Required	Required	Not Required	Not Required	Required	Required	Required	Required
DME	K0816		Required	Required	Not Required	Not Required	Required	Required	Required	Required
DME	K0820		Required	Required	Not Required	Not Required	Required	Required	Required	Required
DME	K0821		Required	Required	Not Required	Not Required	Required	Required	Required	Required
DME	K0822		Required	Required	Not Required	Not Required	Required	Required	Required	Required
DME	K0823		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
DME	K0824		Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
DME	K0825		Not Required	Not Required	Required	Required	Required	Required	Required	Required
DME	K0826		Required	Required	Required	Required	Required	Required	Required	Required
DME	K0827		Required	Required	Required	Required	Not Required	Not Required	Required	Required
DME	K0828		Required	Required	Not Required	Not Required	Required	Required	Required	Required
DME	K0829		Required	Required	Not Required	Not Required	Required	Required	Required	Required
DME	K0830		Required	Required	Required	Required	Required	Required	Not Required	Not Required
DME	K0831		Required	Required	Required	Required	Required	Required	Required	Required
DME	K0835		Required	Required	Required	Required	Required	Required	Required	Required
DME	K0836		Required	Required	Required	Required	Required	Required	Required	Required
DME	K0837		Required	Required	Required	Required	Not Required	Required	Required	Required
DME	K0838		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
DME	K0839		Required	Required	Not Required	Not Required	Required	Required	Required	Required
DME	K0840		Required	Required	Not Required	Not Required	Required	Required	Required	Required
DME	K0841		Required	Required	Not Required	Not Required	Required	Required	Required	Required
DME	K0842		Required	Required	Not Required	Not Required	Required	Required	Required	Required
DME	K0843		Required	Required	Not Required	Not Required	Required	Required	Required	Required
DME	K0848		Required	Required	Not Required	Not Required	Required	Required	Required	Required
DME	K0849		Required	Required	Required	Required	Not Required	Not Required	Required	Required
DME	K0850		Required	Required	Required	Required	Required	Required	Required	Required
DME	K0851		Required	Required	Not Required	Not Required	Required	Required	Required	Required
DME	K0852		Required	Required	Not Required	Not Required	Required	Required	Required	Required
DME	K0853		Required	Required	Required	Required	Not Required	Not Required	Required	Required
DME	K0854		Required	Required	Not Required					

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DME	L6965		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
DME	L6970		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
DME	L6975		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
DME	L7007		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
DME	L7008		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
DME	L7009		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
DME	L7040		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
DME	L7045		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
DME	L7170		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
DME	L7180		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
DME	L7181		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
DME	L7185		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
DME	L7186		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
DME	L7190		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
DME	L7191		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
DME	L7366		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
DME	L7368		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
DME	L7404		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
DME	L7405		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
DME	L7406		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
DME	L7499		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
DME	L7900		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
DME	L7902		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
DME (excludes breast cancer diagnosis)	L8600		Required	Required	Not Required	Not Required	Required	Required	Required	Required
DME	L8610		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
DME	L8615		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
DME	L8619		Not Required	Not Required	Required	Required	Required	Required	Required	Required
DME	L8627		Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required
DME	L8628		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
DME	L8692		Required	Required	Required	Required	Required	Required	Required	Required
DME	L8693		Not Required	Not Required	Required	Not Required	Required	Not Required	Not Required	Not Required
DME	L8701		Required	Required	Required	Required	Required	Required	Not Required	Not Required
DME	L8702		Required	Required	Required	Required	Required	Required	Not Required	Not Required
DME	S1030		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
DME	S1031		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
DME	S1035		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
DME	S1036		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
DME	S1037		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
DME	S1040		Required	Required	Not Required	Required	Required	Not Required	Required	Required
DME	SS160		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
DME	SS161		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
DME	S9002		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
DME	S9433		Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required
DME	T4521		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
DME	T4522		Required	Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
DME	T4523		Required	Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
DME	T4524		Required	Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required
DME	T4525		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
DME	T4526		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
DME	T4527		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
DME	T4528		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required

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EviCore/Medical (MSK)	64451			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required
EviCore/Medical (MSK)	64624			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required
EviCore/Medical (MSK)	64625			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required
EviCore/Medical (MSK)	64628			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required
EviCore/Medical (MSK)	64629			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required
EviCore/Medical (MSK)	64632			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required
EviCore/Medical (MSK)	C9757			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required
EviCore/Medical (MSK)	M0076			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Not Required	Not Required
EviCore/Medical (MSK)	S2118			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required
EviCore/Medical (MSK)	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.	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
Acute Rehab/ SNF Admissions	Acute Rehab/ SNF Admissions			Required	Required	Required through CareCentrix	Required	Required	Required	Required	Required
Medical	0006M			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	0007M			Required	Required	Required	Required	Required	Required	Not Required	Not Required
Medical	0012M			Required	Required	Required	Required	Not Required	Required	Not Required	Not Required
Medical	0013M			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	0015M			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
Medical	0016M			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
Medical	0018M			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
Medical	0019M			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	0020M			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	0001U			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
Medical	0005U			Required	Required	Required	Required	Not Required	Required	Not Required	Not Required
Medical	0017U			Required	Required	Required	Required	Required	Required	Not Required	Not Required
Medical	0018U			Required	Required	Required	Required	Not Required	Required	Not Required	Not Required
Medical	0026U			Required	Required	Required	Required	Not Required	Required	Not Required	Not Required
Medical	0027U			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required
Medical	0030U			Required	Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	0034U			Required	Required	Required	Required	Required	Required	Not Required	Not Required
Medical	0035U			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required
Medical	0036U			Required	Required	Required	Required	Required	Required	Not Required	Not Required
Medical	0037U			Required	Required	Required	Required	Not Required	Required	Not Required	Not Required
Medical	0045U			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
Medical	0047U			Not Required	Not Required	Required	Required	Not Required	Required	Not Required	Not Required
Medical	0055U			Required	Required	Required	Required	Required	Not Required	Not Required	Not Required
Medical	0060U			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	0070U			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	0071U			Required	Required	Required	Required	Required	Required	Not Required	Not Required
Medical	0072U			Required	Required	Required	Required	Required	Required	Not Required	Not Required
Medical	0073U			Required	Required	Required	Required	Required	Required	Not Required	Not Required
Medical	0074U			Required	Required	Required	Required	Required	Required	Not Required	Not Required

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Is the code BH, DME, eviCore, or Medical?	Procedure Code	Revenue 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 & HNY EPO)	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery Program
Medical (By Diagnosis)	15772			Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	15773			Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	15774			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	15775			Required	Required	Required	Required	Required	Required	Required	Required
Medical	15776			Required	Required	Required	Required	Required	Required	Required	Required
Medical	15780			Required	Required	Required	Required	Not Required	Required	Not Required	Not Required
Medical	15781			Required	Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required
Medical	15782			Required	Required	Required	Required	Required	Required	Required	Required
Medical	15783			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	15786			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	15788			Required	Required	Required	Required	Required	Not Required	Required	Required
Medical	15789			Required	Required	Required	Required	Required	Not Required	Required	Required
Medical	15792			Required	Required	Required	Required	Required	Not Required	Required	Required
Medical	15793			Required	Required	Required	Required	Required	Not Required	Required	Required
Medical	15820			Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	15821			Required	Required	Required	Required	Not Required	Not Required	Required	Required
Medical	15822			Required	Required	Required	Required	Not Required	Not Required	Required	Required
Medical	15823			Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	15824			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	15825			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	15826			Required	Required	Required	Required	Required	Required	Required	Required
Medical	15828			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required
Medical	15829			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	15830			Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	15832			Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	15833			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	15834			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	15835			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	15836			Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	15837			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	15838			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	15839			Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	15840			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	15842			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	15845			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	15847			Required	Required	Required	Required	Not Required	Not Required	Required	Required
Medical	15876			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required
Medical	15877			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required
Medical	15878			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required
Medical	15879			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required
Medical	17106			Required	Required	Required	Required	Not Required	Not Required	Required	Required
Medical	17107			Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	17108			Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	17360			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	17380			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	17999			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	19105			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	19300			Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical (excludes breast cancer diagnosis)	19316			Required	Required	Not Required	Not Required	Required	Required		

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Medical (excludes breast cancer diagnosis)	19350			Required	Required	Required	Required	Required	Required	Required	Required
Medical (excludes breast cancer diagnosis)	19355			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical (excludes breast cancer diagnosis)	19357			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical (excludes breast cancer diagnosis)	19370			Required	Required	Required	Required	Required	Required	Required	Required
Medical (excludes breast cancer diagnosis)	19371			Required	Required	Required	Required	Required	Required	Required	Required
Medical (excludes breast cancer diagnosis)	19380			Required	Required	Required	Required	Required	Required	Required	Required
Medical (excludes breast cancer diagnosis)	19499			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	20975			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	20982			Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	20983			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	21120			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	21121			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	21122			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	21123			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	21125			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	21127			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	21137			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	21138			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	21139			Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	21141			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	21142			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	21143			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	21145			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	21146			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	21147			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	21150			Required	Required	Required	Required	Required	Required	Required	Required
Medical	21151			Required	Required	Required	Required	Required	Required	Required	Required
Medical	21154			Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	21155			Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	21159			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	21160			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	21172			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	21175			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	21179			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	21180			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	21181			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	21182			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	21183			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	21184			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	21188			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	21193			Required	Required	Required	Required	Not Required	Not Required	Required	Required
Medical	21194			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	21195			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	21196			Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	21198			Not Required	Not Required	Required	Required	Not Required	Not Required	Required	Required
Medical	21199			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	21206			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	21208			Not Required	Not Required	Not Required</					

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Medical	25443		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	25444		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Required
Medical	25445		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	25446		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	25447		Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required
Medical	25449		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	26530		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	26531		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	26535		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	26536		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	27437		Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required
Medical	27445		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	27702		Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required
Medical	27703		Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required
Medical	28446		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required
Medical	28890		Required	Required	Not Required	Not Required	Not Required	Required	Required	Required
Medical	29800		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	29804		Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	30117		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	30120		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	30400		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	30410		Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	30420		Required	Required	Required	Required	Required	Required	Required	Required
Medical	30430		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	30435		Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	30450		Required	Required	Required	Required	Not Required	Not Required	Required	Required
Medical	30460		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	30462		Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	30465		Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required
Medical	30468		Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	30469		Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	30520		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	30630		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	31242		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	31243		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	31295		Required	Required	Required	Required	Required	Required	Required	Required
Medical	31296		Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	31297		Required	Required	Required	Required	Required	Required	Required	Required
Medical	31298		Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	31626		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	31660		Required	Required	Required	Required	Required	Required	Required	Required
Medical	31661		Required	Required	Required	Required	Required	Required	Required	Required
Medical	32664		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	32850		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	32851		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	32852		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	32853		Required	Required	Not Required	Not Required	Not Required	Required	Required	Required
Medical	32854		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	32998		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	33202		Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	33203		Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	33254		Not Required	Not Required	Not Required					

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Medical	37722			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	37760			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	37761			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	37765			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	37766			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	37780			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	37785			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	37788			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	37790			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	38204			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	38205			Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	38206			Required	Required	Required	Required	Required	Required	Required	Required
Medical	38207			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	38208			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	38209			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	38210			Required	Required	Required	Required	Required	Required	Required	Required
Medical	38211			Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	38214			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	38215			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	38220			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	38221			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	38230			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	38232			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	38240			Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	38241			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	38242			Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	38243			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	41512			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	42145			Required	Required	Required	Required	Required	Required	Required	Required
Medical	42820			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	42821			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	42825			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	42826			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	42830			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	42831			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	42835			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	42836			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	43192			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	43201			Required	Required	Required	Required	Not Required	Not Required	Required	Required
Medical	43210			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required
Medical	43236			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	43257			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	43284			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	43285			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	43290			Required	Required	Required	Required	Required	Required	Required	Required
Medical	43291			Required	Required	Required	Required	Required	Required	Required	Required
Medical	43497			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	43644			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required
Medical	43645			Not Required	Not Required						

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Medical	43999		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	44132		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	44133		Required	Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	44135		Required	Required	Required	Required	Required	Required	Required	Required
Medical	44136		Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	44705		Required	Required	Required	Required	Required	Not Required	Required	Required
Medical	46707		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical (By Diagnosis)	47000		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical (By Diagnosis)	47001		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical (By Diagnosis)	47100		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	47133		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	47135		Required	Required	Not Required	Not Required	Not Required	Required	Required	Required
Medical	47140		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	47141		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	47142		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	47370		Required	Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	47371		Required	Required	Required	Required	Required	Required	Required	Required
Medical (By Diagnosis)	47379		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	47380		Required	Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	47381		Required	Required	Required	Required	Required	Required	Required	Required
Medical	47382		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	47383		Not Required	Not Required	Required	Required	Not Required	Not Required	Required	Required
Medical	47562		Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required
Medical	47563		Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required
Medical	47564		Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required
Medical	47605		Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required
Medical	48160		Required	Required	Required	Required	Required	Not Required	Required	Required
Medical	48550		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	48551		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	48552		Required	Required	Required	Required	Required	Required	Required	Required
Medical	48554		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	48556		Required	Required	Required	Required	Required	Required	Required	Required
Medical	50300		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	50320		Required	Required	Required	Required	Required	Required	Required	Required
Medical	50325		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	50328		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	50329		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	50340		Required	Required	Required	Not Required	Required	Required	Required	Required
Medical	50360		Required	Required	Required	Required	Required	Required	Required	Required
Medical	50365		Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	50370		Required	Required	Required	Required	Required	Required	Not Required	Not Required
Medical	50380		Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	50542		Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	50547		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	50590		Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required
Medical	50592		Required	Required	Required	Required	Not Required	Not Required	Required	Required
Medical	50593		Required	Required	Required	Required	Not Required	Not Required	Required	Not Required
Medical	51715		Required	Required	Not Required	Not Required	Not Required	Required	Required	Required
Medical	52284		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	52441		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	52442		Required	Required	Required	Required				

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Medical	54415			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	54416			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	54417			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	54680			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	55870			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	55873			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	55880			Required	Required	Required	Required	Not Required	Required	Not Required	Not Required
Medical	55970			Required	Required	Required	Required	Not Required	Required	Not Required	Not Required
Medical	55980			Required	Required	Required	Required	Not Required	Required	Not Required	Not Required
Medical	56620			Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	56625			Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	56805			Required	Required	Required	Required	Required	Required	Required	Required
Medical (Excludes some hysterectomy related cancer diagnoses)	58150			Required	Required	Required	Required	Required	Required	Required	Required
Medical (Excludes some hysterectomy related cancer diagnoses)	58152			Required	Required	Required	Required	Required	Required	Required	Required
Medical (Excludes some hysterectomy related cancer diagnoses)	58180			Required	Required	Required	Required	Required	Required	Required	Required
Medical (Excludes some hysterectomy related cancer diagnoses)	58260			Required	Required	Required	Required	Required	Required	Required	Required
Medical (Excludes some hysterectomy related cancer diagnoses)	58262			Required	Required	Required	Required	Required	Required	Required	Required
Medical (Excludes some hysterectomy related cancer diagnoses)	58263			Required	Required	Required	Required	Required	Required	Required	Required
Medical (Excludes some hysterectomy related cancer diagnoses)	58270			Required	Required	Required	Required	Required	Required	Required	Required
Medical (Excludes some hysterectomy related cancer diagnoses)	58280			Required	Required	Required	Required	Required	Required	Required	Required
Medical (Excludes some hysterectomy related cancer diagnoses)	58285			Required	Required	Required	Required	Required	Required	Required	Required
Medical (Excludes some hysterectomy related cancer diagnoses)	58290			Required	Required	Required	Required	Required	Required	Required	Required
Medical (Excludes some hysterectomy related cancer diagnoses)	58291			Required	Required	Required	Required	Required	Required	Required	Required
Medical (Excludes some hysterectomy related cancer diagnoses)	58292			Required	Required	Required	Required	Required	Required	Required	Required
Medical (Excludes some hysterectomy related cancer diagnoses)	58294			Required	Required	Required	Required	Required	Required	Required	Required
Medical (Excludes some hysterectomy related cancer diagnoses)	58541			Required	Required	Required	Required	Required	Required	Required	Required
Medical (Excludes some hysterectomy related cancer diagnoses)	58542			Required	Required	Required	Required	Required	Required	Required	Required
Medical (Excludes some hysterectomy related cancer diagnoses)	58543			Required	Required	Required	Required	Required	Required	Required	Required
Medical (Excludes some hysterectomy related cancer diagnoses)	58544			Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical (Excludes some hysterectomy related cancer diagnoses)	58550			Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical (Excludes some hysterectomy related cancer diagnoses)	58552			Required	Required	Required	Required	Required	Required	Required	Required
Medical (Excludes some hysterectomy related cancer diagnoses)	58553			Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical (Excludes some hysterectomy related cancer diagnoses)	58554			Required	Required	Required	Required	Required	Required	Required	Required
Medical (Excludes some hysterectomy related cancer diagnoses)	58570			Required	Required	Required	Required	Required	Required	Required	Required
Medical (Excludes some hysterectomy related cancer diagnoses)	58571			Required	Required	Required	Required	Required	Required	Required	Required
Medical (Excludes some hysterectomy related cancer diagnoses)	58572			Required	Required	Required	Required	Required	Required	Required	Required
Medical (Excludes some hysterectomy related cancer diagnoses)	58573			Required	Required	Required	Required	Required	Required	Required	Required
Medical	58580			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required

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Medical (Excludes some hysterectomy related cancer diagnoses)	58674		Required	Required	Required	Required	Required	Required	Not Required	Not Required
Medical	58752		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	60660		Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	60661		Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	61630		Required	Required	Required	Required	Not Required	Required	Not Required	Not Required
Medical	61736		Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	61737		Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	61850		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	61860		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	61863		Required	Required	Required	Required	Required	Required	Required	Required
Medical	61864		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	61867		Required	Required	Required	Required	Required	Required	Required	Required
Medical	61868		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	61880		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	61885		Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	61886		Required	Required	Required	Required	Not Required	Not Required	Required	Required
Medical	61888		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	62369		Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required
Medical	62370		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Not Required
Medical	63003		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	63011		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	63016		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	63020		Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required
Medical	63046		Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	63055		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	63064		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	63066		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	63075		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	63077		Required	Required	Required	Required	Required	Required	Required	Required
Medical	63078		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	63085		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	63086		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	63101		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	63170		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	63172		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	63173		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	63185		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	63190		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	63191		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	63197		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	63200		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	63250		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	63251		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	63252		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	63266		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	63267		Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required
Medical	63268		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	63270		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Not Required
Medical	63271		Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required
Medical	63272		Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required
Medical										

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Medical	63305		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	63306		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	63307		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	63308		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	63661		Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required
Medical (By Diagnosis)	64450		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	64454		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	64553		Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	64555		Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	64561		Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	64568		Required	Required	Required	Required	Not Required	Not Required	Required	Required
Medical	64580		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	64581		Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	64582		Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	64590		Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	64596		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical (By Diagnosis)	64640		Required (By Diagnosis)	Required (By Diagnosis)	Not Required	Not Required	Not Required	Required (All Diagnoses)	Required (All Diagnoses)	Required (All Diagnoses)
Medical	64821		Required	Required	Not Required	Not Required	Not Required	Required	Required	Required
Medical	64822		Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	64823		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical (By Diagnosis)	64999		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	66179		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	66180		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	66183		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	66989		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	66991		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	67715		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	67900		Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	67901		Required	Required	Required	Required	Not Required	Not Required	Required	Required
Medical	67902		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	67903		Required	Required	Required	Required	Required	Required	Required	Required
Medical	67904		Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	67906		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	67908		Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	67909		Required	Required	Not Required	Not Required	Not Required	Required	Required	Required
Medical	67911		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	67914		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	67915		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	67916		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	67917		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	67921		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	67922		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	67923		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	67924		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	67938		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	67950		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	67999		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	68841		Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required
Medical	69300		Required	Required	Required	Required	Not Required	Not Required	Required	Required
Medical	69705		Required	Required	Required	Required	Not Required	Required	Not Required	Not Required

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Medical	81277		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	81287		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	81288		Not Required	Not Required	Required	Required	Not Required	Not Required	Required	Required
Medical	81290		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	81291		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	81292		Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	81293		Required	Required	Required	Required	Not Required	Not Required	Required	Required
Medical	81294		Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	81295		Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	81296		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	81297		Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	81298		Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	81299		Required	Required	Required	Required	Not Required	Not Required	Required	Required
Medical	81300		Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	81301		Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	81302		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	81303		Required	Required	Required	Required	Required	Required	Required	Required
Medical	81304		Required	Required	Required	Required	Not Required	Required	Not Required	Required
Medical	81305		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	81306		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	81307		Required	Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required
Medical	81308		Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	81309		Required	Required	Required	Required	Required	Required	Required	Required
Medical	81310		Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	81311		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	81313		Required	Required	Required	Required	Required	Required	Required	Required
Medical	81314		Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	81315		Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	81317		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	81318		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	81319		Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	81320		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	81321		Required	Required	Required	Required	Not Required	Required	Not Required	Not Required
Medical	81322		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	81323		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	81324		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	81325		Not Required	Not Required	Required	Required	Not Required	Not Required	Required	Required
Medical	81326		Required	Required	Required	Required	Required	Required	Required	Required
Medical	81330		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	81331		Required	Required	Required	Required	Not Required	Required	Not Required	Required
Medical	81332		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	81335		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	81336		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	81337		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	81344		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	81349		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	81351		Required	Required	Required	Required	Not Required	Required	Not Required	Not Required
Medical	81352		Required	Required	Required	Required	Not Required	Required	Not Required	Not Required
Medical	81353		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	81364		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	81370		Required	Required	Required	Required	Not Required	Required	Not Required	Not Required
Medical	81371		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required</

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Medical (Inclusion for prostate cancer screening diagnosis codes only)	88184			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical (Inclusion for prostate cancer screening diagnosis codes only)	88185			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	88237			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	88240			Required	Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	88261			Required	Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	88263			Required	Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	88264			Required	Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	88267			Required	Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	88271			Required	Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	88275			Required	Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	88361			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	89251			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	89253			Required	Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required
Medical	89290			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
Medical	89291			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
Medical	91110			Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	91111			Required	Required	Required	Required	Required	Not Required	Required	Required
Medical	91112			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	91113			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
Medical	92145			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	92310			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required
Medical	92311			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	92313			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	92507			Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	92508			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required
Medical	92517			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	92518			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	92519			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	92526			Required	Required	Required	Required	Not Required	Required	Required	Required
Medical	92549			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	92972			Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	93025			Required	Required	Required	Required	Required	Required	Required	Required
Medical	93150			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	93151			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	93152			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	93153			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	93264			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required
Medical	93452			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Required
Medical	93454			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	93458			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	93459			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	93462			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Not Required
Medical	93702			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	93980			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	93981			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	95199			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	95782			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	95783			Required							

				Commercial Fully Insured	Commercial Self Funded						
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Medical	96574			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	97605			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	97606			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	97607			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	97608			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	97799			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	99377			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	99378			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	99601			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	99602			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	A0080			Not Required	Not Required	Not Required	Required	Not Required	Not Required	Required	Required
Medical	A0090			Not Required	Not Required	Not Required	Required	Required	Not Required	Required	Required
Medical	A0140			Not Required	Not Required	Required	Required	Required	Required	Required	Required
Medical	A0180			Not Required	Not Required	Not Required	Required	Required	Not Required	Required	Required
Medical	A0190			Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	A0210			Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	A2001			Required	Required	Required	Required	Required	Required	Required	Required
Medical	A2002			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	A2004			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	A2005			Required	Required	Required	Required	Required	Required	Required	Required
Medical	A2007			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	A2008			Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	A2009			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	A2010			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	A2011			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	A2012			Required	Required	Required	Required	Required	Required	Not Required	Not Required
Medical	A2013			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	A2014			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	A2015			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	A2016			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	A2017			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	A2018			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	A2019			Required	Required	Required	Required	Required	Required	Not Required	Not Required
Medical	A2020			Required	Required	Required	Required	Required	Required	Not Required	Not Required
Medical	A2021			Required	Required	Required	Required	Required	Required	Not Required	Not Required
Medical	A2026			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	A2027			Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	A2028			Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	A2029			Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	A2030			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	A2031			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	A2032			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	A2033			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	A2034			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	A2035			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	A4238			Not Required	Not Required	Required	Required	Required	Required	Not Required	Not Required
Medical	A6512			Not Required	Not Required	Required	Required	Required	Not Required	Required	Required
Medical	A9156			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	A9268			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	A9269			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	A9292			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	A9697			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	A9900			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	A9999			Not Required	Not Required	Required	Required	Required	Required	Not Required	Not Required
Medical	B4105			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	B9999			Required	Required	Required	Required	Not Required	Required	Not Required	Not Required
Medical	C1767			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
Medical	C1783			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	C1813			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	C1818			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	C1820			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
Medical	C1821			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	C1822			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	C1825			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	C1826			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	C1827			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	C1832			Not Required	Not Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	C2614			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical (By Diagnosis)	C2618			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	C2624			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required

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Medical	C2622		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	C5273		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	C5277		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	C9354		Required	Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	C9356		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	C9363		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	C9727		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	C9734		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	C9784		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	C9785		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	C9792		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	C9796		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	E0201		Required	Required	Required	Required	Not Required	Not Required	Required	Required
Medical	E0470		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	E0471		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	E0601		Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required
Medical	E0769		Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	E1399		Required	Required	Required	Required	Required	Required	Required	Required
Medical	E3000		Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	G0182		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	G0255		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	G0276		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	G0277		Required	Required	Required	Required	Required	Required	Required	Required
Medical	G0283		Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required
Medical	G0299		Required	Required	Required	Not Required	Not Required	Required	Not Required	Not Required
Medical	G0300		Not Required	Not Required	Required	Not Required	Not Required	Required	Not Required	Not Required
Medical	G0341		Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	G0342		Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	G0343		Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	G0422		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	G0423		Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	G0428		Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required
Medical	G0429		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	G0455		Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	G0460		Required	Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required
Medical	G0465		Required	Required	Required	Required	Required	Required	Required	Required
Medical	H0051		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	J0270		Not Required	Not Required	Not Required	Required	Not Required	Not Required	Required	Required
Medical	J0275		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	J2440		Not Required	Not Required	Not Required	Required	Not Required	Not Required	Required	Required
Medical	J2760		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	J3570		Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required
Medical	J7330		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	J7402		Required	Required	Required	Required	Not Required	Required	Not Required	Not Required
Medical	J9600		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	K0898		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	K0899		Required	Required	Required	Required	Not Required	Not Required	Required	Required
Medical	L1320		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	L1499		Required	Required	Required	Required	Required	Required	Required	Required
Medical	L2006		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	L2999		Not Required	Not Required	Required	Required	Required	Required	Required	Required
Medical	L3649		Not Required	Not Required	Required	Required	Not Required	Required	Not Required	Not Required
Medical	L3999		Not Required	Not Required	Required	Required	Required	Required	Required	Required
Medical	L6805		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	L7259		Required	Required	Required	Required	Required	Required	Required	Required
Medical	L8499		Required	Required	Required	Required	Required	Required	Required	Required
Medical	L8603		Required	Required	Not Required	Not Required	Not Required	Required	Required	Required
Medical	L8604		Required	Required	Not Required	Not Required	Not Required	Required	Required	Required
Medical	L8605		Required	Required	Not Required	Not Required	Not Required	Required	Required	Required
Medical	L8606		Required	Required	Not Required	Not Required	Not Required	Required	Required	Required
Medical	L8612		Required	Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	M0075		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	M0300		Required	Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required
Medical	P9020		Required	Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required
Medical	Q2026		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	Q4101		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	Q4104		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	Q4105		Required	Required	Required	Required	Required	Not Required	Required	Required
Medical	Q4106		Required	Required	Required	Required	Required	Not Required	Required	Required
Medical	Q4107		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	Q4108		Required	Required	Required	Required	Required	Not Required	Required	Required

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Medical	Q4110		Required	Required	Required	Required	Required	Not Required	Required	Required
Medical	Q4111		Required	Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required
Medical	Q4112		Required	Required	Required	Required	Required	Not Required	Required	Required
Medical	Q4113		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	Q4114		Required	Required	Required	Required	Required	Not Required	Required	Required
Medical	Q4115		Required	Required	Required	Required	Required	Not Required	Required	Required
Medical	Q4116		Required	Required	Required	Required	Required	Not Required	Required	Required
Medical	Q4117		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	Q4118		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	Q4121		Required	Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required
Medical	Q4122		Required	Required	Required	Required	Required	Not Required	Required	Required
Medical	Q4123		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	Q4124		Required	Required	Required	Required	Required	Not Required	Required	Required
Medical	Q4125		Required	Required	Required	Required	Not Required	Not Required	Required	Required
Medical	Q4126		Required	Required	Required	Required	Required	Required	Not Required	Not Required
Medical	Q4127		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	Q4128		Required	Required	Required	Required	Required	Not Required	Not Required	Not Required
Medical	Q4130		Required	Required	Required	Required	Required	Required	Not Required	Not Required
Medical	Q4132		Required	Required	Required	Required	Not Required	Not Required	Required	Required
Medical	Q4133		Not Required	Not Required	Required	Required	Required	Not Required	Required	Required
Medical	Q4134		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	Q4135		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	Q4136		Required	Required	Required	Required	Required	Required	Required	Required
Medical	Q4137		Required	Required	Required	Required	Not Required	Not Required	Required	Required
Medical	Q4138		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	Q4139		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	Q4140		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	Q4141		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	Q4142		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	Q4143		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	Q4145		Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	Q4146		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	Q4147		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	Q4148		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	Q4149		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	Q4150		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	Q4151		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	Q4152		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	Q4153		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	Q4154		Required	Required	Required	Required	Not Required	Not Required	Required	Required
Medical	Q4155		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	Q4156		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	Q4157		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	Q4158		Required	Required	Required	Required	Not Required	Not Required	Required	Required
Medical	Q4159		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	Q4160		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	Q4161		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	Q4162		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	Q4163		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	Q4164		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	Q4165		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required

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Medical	Q4363		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	Q4364		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	Q4365		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	Q4366		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	Q4367		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	Q5006		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	Q5009		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	Q5010		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	R0076		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	S0207		Not Required	Not Required	Not Required	Required	Required	Not Required	Required	Required
Medical	S0208		Not Required	Not Required	Not Required	Required	Required	Not Required	Required	Required
Medical	S0255		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	S0271		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	S0596		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	S1091		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
Medical	S2053		Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	S2054		Required	Required	Not Required	Required	Required	Required	Required	Required
Medical	S2060		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	S2061		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	S2065		Required	Required	Not Required	Not Required	Required	Required	Required	Required
Medical	S2102		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	S2120		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	S2140		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	S2142		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	S2150		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	S2152		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	S2202		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	S2235		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
Medical	S2300		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	S3841		Required	Required	Required	Required	Required	Required	Required	Required
Medical	S3844		Required	Required	Required	Required	Required	Required	Required	Required
Medical	S3846		Required	Required	Required	Required	Required	Required	Required	Required
Medical	S3849		Required	Required	Required	Required	Required	Required	Required	Required
Medical	S3850		Required	Required	Required	Required	Required	Required	Required	Required
Medical	S3852		Required	Required	Required	Required	Required	Required	Required	Required
Medical	S3853		Required	Required	Required	Required	Required	Required	Required	Required
Medical	S3854		Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required
Medical	S3861		Required	Required	Required	Required	Required	Required	Required	Required
Medical	S3865		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	S3866		Required	Required	Required	Required	Required	Required	Required	Required
Medical	S5102		Not Required	Not Required	Not Required	Required	Not Required	Not Required	Required	Required
Medical	S5105		Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	S5130		Not Required	Not Required	Not Required	Required	Not Required	Not Required	Required	Required
Medical	S5165		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required (Ages 22 & older)	Not Required
Medical	S5199		Not Required	Not Required	Not Required	Required	Required	Not Required	Required	Required
Medical	S8080		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	S9025		Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required
Medical	S9055		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
Medical	S9097		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required
Medical	S9122		Required	Required	Required	Required	Not Required	Required	Not Required	Not Required
Medical	S9123		Required	Required	Required	Required	Not Required	Not Required	Required	Required
Medical	S9124									

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Medical	T1001	789		Required	Required	Required	Required	Required	Required	Required	Required
Medical	T1002			Required	Required	Required	Required	Required	Required	Required	Required
Medical	T1003			Not Required	Not Required	Required	Required	Required	Required	Required	Required
Medical	T1004			Not Required	Not Required	Required	Required	Required	Required	Required	Required
Medical	T1019			Not Required	Not Required	Not Required	Required	Not Required	Not Required	Required	Required
Medical	T1020			Not Required	Not Required	Not Required	Required	Not Required	Not Required	Required	Required
Medical	T1021			Required	Required	Required	Required	Required	Required	Required	Required
Medical	T1030			Required	Required	Required	Required	Not Required	Not Required	Required	Required
Medical	T1031			Required	Required	Required	Required	Required	Required	Required	Required
Medical	T1999			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required
Medical	T2001			Not Required	Not Required	Not Required	Required	Not Required	Not Required	Required	Required
Medical	T2004			Not Required	Not Required	Not Required	Required	Required	Not Required	Required	Required
Medical	T2005			Not Required	Not Required	Not Required	Required	Required	Not Required	Required	Required
Medical	T2007			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	T2028			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required (Ages 22 & older)	Not Required
Medical	T2029			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	T2038			Not Required	Not Required	Not Required	Required	Not Required	Not Required	Required (Only for Moving Assistance/Community transition, for HCBS or CFCO program)	Required (Only for Moving Assistance/Community transition, for CFCO program)
Medical	T2039			Not Required	Not Required	Not Required	Required	Required	Not Required	Required (Ages 22 & older)	Required
Medical	T2042			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	T2043			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	T2044			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	T2045			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	T2046			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	T5999			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required
Medical	V2199			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required
Medical	V2299			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	V2399			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	V2499			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	V2700			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required
Medical	V2787			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	V2788			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required
Medical	V2799			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	V5362			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	V5363			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	V5364			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	NONE	0650		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	NONE	0651		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	NONE	0652		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	NONE	0655		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	NONE	0656		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	NONE	0657		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	NONE	0659		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required
Medical	NONE	0172		Notification Required	Notification Required	Notification Required	Not Required	Notification Required	Notification Required	Notification Required	Notification Required
Medical	NONE	0173		Notification Required	Notification Required	Notification Required	Not Required	Notification Required	Notification Required	Notification Required	Notification Required
Medical	NONE	0174		Notification Required	Notification Required	Notification Required	Not Required	Notification Required	Notification Required	Notification Required	Notification Required
Medical	NONE	0179		Notification Required	Notification Required	Notification Required	Not Required	Notification Required	Notification Required	Notification Required	Notification Required