

January 1, 2027

**UTILIZATION MANAGEMENT STANDARD
CLINICAL REVIEW PREAUTHORIZATION LIST**

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

Code Changes Are Highlighted In Grey

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

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

The Category column identifies the medical category associated with a specific procedure code. By using either, the category listed on the PDF or the procedure code itself, users can navigate to the Corporate Medical Policy page: <https://provider.excellusbcbs.com/policies/medical> to view all applicable medical policies within that category or related to the selected code. Please note that the medical necessity criteria applied during the review process are dependent on the member's plan and may not be outlined in a Corporate Medical Policy. In some cases, criteria may instead be derived from InterQual®, eMedNY, or CMS guidelines.

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>

Health Help

Phone Requests: Phone: 1-877-296-2793, Monday through Friday from 7:00 a.m. – 7:00 p.m. EST

Internet Request: <https://www.healthhelp.com/guidelines/>

Fax Requests:

STAT Case Request: PROD -866-872-1616

Standard Case Request: PROD -866-872-1611

Clinicals: PROD -866-872-1571

Is the code BH, DME, Health Help, or Medical?	Category	Procedure Code	Revenue Code	Rate Code	Commercial Fully Insured (Commercial Products, but not limited to: HMO, PPO, EPO, POS & HMO EPO)	Commercial Self Funded (Commercial Products, but not limited to: HMO, PPO, EPO & POS)	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery Program	Diagnosis Requirements (If applicable)
BH/Medical	Behavioral Health (Psychology)	90867			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
BH/Medical	Behavioral Health (Psychology)	90868			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
BH/Medical	Behavioral Health (Psychology)	90869			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
BH	Behavioral Health (Psychology)	08207			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
BH	Behavioral Health (Psychology)	0821T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
BH	Behavioral Health (Psychology)	0822T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
BH	Behavioral Health (Psychology)	0889T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
BH	Behavioral Health (Psychology)	0890T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
BH	Behavioral Health (Psychology)	0891T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
BH	Behavioral Health (Psychology)	0892T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
BH	Behavioral Health (Psychology)	90899	None		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
BH	Behavioral Health (Psychology)	96130	None		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
BH	Behavioral Health (Psychology)	96130	0780		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
BH	Behavioral Health (Psychology)	96130	0789		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
BH	Behavioral Health (Psychology)	96130	0918		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
BH	Behavioral Health (Psychology)	96131	None		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
BH	Behavioral Health (Psychology)	96131	0780		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
BH	Behavioral Health (Psychology)	96131	0789		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
BH	Behavioral Health (Psychology)	96131	0918		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
BH	Behavioral Health (Psychology)	H0004	0911		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
BH	Behavioral Health (Psychology)	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	Behavioral Health (Psychology)	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)	
BH	Behavioral Health (Psychology)	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	Behavioral Health (Psychology)	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	Behavioral Health (Psychology)	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	Behavioral Health (Psychology)	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	Behavioral Health (Psychology)	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	Behavioral Health (Psychology)	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	Behavioral Health (Psychology)	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	Behavioral Health (Psychology)	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)	

[illegible]

[illegible]

Is the code DH, DME, Health Help, or Medical?	Category	Procedure Code	Revenue Code	Rate Code	Commercial Product, but not limited to: HMO, PPO, EPO, POS (Commercial Products, but not limited to: HMO, PPO, EPO & POS)	Commercial Self Funded (Commercial Products, but not limited to: HMO, PPO, EPO & POS)	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery Program	Diagnosis Requirements (If applicable)
DME	Bone and Joint (Orthopedics)	E0747			Required	Required	Required	Required	Not Required	Required	Not Required	Not Required	
DME	Bone and Joint (Orthopedics)	E0748			Required	Required	Required	Required	Required	Required	Not Required	Not Required	
DME	Bone and Joint (Orthopedics)	E0749			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
DME	Bone and Joint (Orthopedics)	E0760			Required	Required	Required	Required	Required	Required	Required	Required	
DME	Durable Medical Equipment	E0764			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME	Digestive System (Gastroenterology)	E0765			Required	Required	Required	Required	Required	Required	Not Required	Not Required	
DME	Cancer Treatment (Oncology)	E0766			Required	Required	Required	Required	Required	Required	Required	Required	
DME	Durable Medical Equipment	E0781			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E0782			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E0783			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E0791			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME	Durable Medical Equipment	E0856			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E0912			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E0935			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E0936			Required	Required	Required	Required	Not Required	Required	Not Required	Not Required	
DME	Durable Medical Equipment	E0941			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E0945			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1002			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME	Durable Medical Equipment	E1003			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
DME	Durable Medical Equipment	E1004			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME	Durable Medical Equipment	E1005			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME	Durable Medical Equipment	E1006			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME	Durable Medical Equipment	E1007			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
DME	Durable Medical Equipment	E1008			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME	Durable Medical Equipment	E1009			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME	Durable Medical Equipment	E1010			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME	Durable Medical Equipment	E1011			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME	Durable Medical Equipment	E1016			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1022			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1023			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1031			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1036			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1038			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1039			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1050			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1060			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1070			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1086			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1087			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1088			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1089			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1090			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1092			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1100			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1110			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1130			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1140			Not Required	Not Required	Required	Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1150			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1160			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1161			Not Required	Not Required	Required	Required	Required	Required	Required	Required	
DME	Durable Medical Equipment	E1170			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1171			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1172			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1180			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1190			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1195			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1220			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1221			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1222			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	

Is the code DH, DME, Health Help, or Medicare?	Category	Procedure Code	Revenue Code	Rate Code	Commercial Fully Insured (Commercial Products, but not limited to: HMO, PPO, EPO, POS & HWY EPO)	Commercial Self Funded (Commercial Products, but not limited to: HMO, PPO, EPO & POS)	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery Program	Diagnosis Requirements (If applicable)
DME	Durable Medical Equipment	E1223			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1224			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1228			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME	Durable Medical Equipment	E1229			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME	Durable Medical Equipment	E1230			Not Required	Not Required	Required	Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1231			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1232			Required	Required	Required	Required	Required	Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1233			Required	Required	Required	Required	Required	Required	Required	Required	
DME	Durable Medical Equipment	E1234			Required	Required	Required	Required	Required	Required	Required	Required	
DME	Durable Medical Equipment	E1235			Not Required	Not Required	Required	Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1236			Required	Required	Required	Required	Required	Required	Required	Required	
DME	Durable Medical Equipment	E1237			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1238			Not Required	Not Required	Required	Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1239			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1240			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1250			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1260			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1270			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1280			Not Required	Not Required	Required	Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1285			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1290			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1295			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1298			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME	Durable Medical Equipment	E1301			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
DME	Bone and Joint (Orthopedics)	E1800			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Bone and Joint (Orthopedics)	E1801			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Bone and Joint (Orthopedics)	E1802			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Bone and Joint (Orthopedics)	E1810			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Bone and Joint (Orthopedics)	E1811			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Bone and Joint (Orthopedics)	E1815			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Bone and Joint (Orthopedics)	E1818			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Bone and Joint (Orthopedics)	E1830			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Bone and Joint (Orthopedics)	E1840			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1902			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E1905			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E2000			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E2204			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME	Durable Medical Equipment	E2228			Required	Not Required	Required	Required	Required	Required	Not Required	Not Required	
DME	Durable Medical Equipment	E2230			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
DME	Durable Medical Equipment	E2293			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E2294			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E2295			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
DME	Durable Medical Equipment	E2298			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E2301			Required	Required	Required	Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E2310			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME	Durable Medical Equipment	E2311			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME	Durable Medical Equipment	E2312			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME	Durable Medical Equipment	E2321			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E2322			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E2325			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME	Durable Medical Equipment	E2327			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME	Durable Medical Equipment	E2328			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME	Durable Medical Equipment	E2329			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME	Durable Medical Equipment	E2330			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME	Durable Medical Equipment	E2331			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME	Durable Medical Equipment	E2341			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E2343			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	E2351			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
DME	Durable Medical Equipment	E2358			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	

[illegible]

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DME	Bone and Joint (Orthopedics)	L1950			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME	Bone and Joint (Orthopedics)	L1952			Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME	Bone and Joint (Orthopedics)	L2006			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME	Bone and Joint (Orthopedics)	L2034			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME	Durable Medical Equipment	L5020			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME	Durable Medical Equipment	L5050			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME	Miscellaneous & Unlisted Codes	L5657			Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME	Miscellaneous & Unlisted Codes	L5827			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	L5828			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME	Durable Medical Equipment	L5856			Not Required	Not Required	Required	Required	Required	Required	Not Required	Not Required	
DME	Durable Medical Equipment	L5857			Required	Required	Required	Required	Not Required	Required	Required	Required	
DME	Durable Medical Equipment	L5858			Required	Required	Required	Required	Not Required	Required	Not Required	Not Required	
DME	Durable Medical Equipment	L5859			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
DME	Bone and Joint (Orthopedics)	L5969			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	L5973			Required	Not Required	Required	Required	Required	Required	Required	Required	
DME	Durable Medical Equipment	L5976			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME	Durable Medical Equipment	L5990			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME	Durable Medical Equipment	L5999			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME	Durable Medical Equipment	L6026			Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
DME	Miscellaneous & Unlisted Codes	L6034			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME	Miscellaneous & Unlisted Codes	L6035			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME	Miscellaneous & Unlisted Codes	L6036			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME	Miscellaneous & Unlisted Codes	L6038			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME	Miscellaneous & Unlisted Codes	L6039			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	L6621			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME	Miscellaneous & Unlisted Codes	L6700			Required	Required	Required	Required	Required	Required	Required	Required	
DME	Durable Medical Equipment	L6880			Required	Required	Required	Required	Required	Required	Required	Required	
DME	Durable Medical Equipment	L6882			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	L6925			Required	Not Required	Not Required	Required	Required	Required	Not Required	Not Required	
DME	Durable Medical Equipment	L6930			Required	Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
DME	Miscellaneous & Unlisted Codes	L7406			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
DME	Durable Medical Equipment	L7499			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
DME	Urinary System(Gastrointestinal)	L7900			Not Required	Not Required	Required	Required	Not Required	Not Required	Required	Required	
DME	Erectile Dysfunction	L7902			Not Required	Not Required	Required	Required	Not Required	Not Required	Required	Required	
DME	Reconstructive Surgery and/or Cosmetic Services	L8600			Not Required	Required (By Diagnosis - see last column)	Not Required	Not Required	Required (By Diagnosis - see last column)	Not Required	Not Required	Not Required	PA is Required for All diagnosis codes EXCEPT: C48.1, C50.019, C50.011, C50.012, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.631, C50.612, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929, C50.930, C50.941, C50.942, C50.921, C56.1, C56.2, C56.3, C79.60, C79.61, C79.62, C79.63, C79.64, C79.65, C79.66, C79.67, C79.68, C79.69,

Is the code BH, DME, Health Help, or Medical?	Category	Procedure Code	Revenue Code	Rate Code	Commercially Insured (Commercial Products, but not limited to: HMO, PPO, EPO, POS & HWY EPO)	Commercially Fully Insured (Commercial Products, but not limited to: HMO, PPO, EPO & POS)	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery Program	Diagnosis Requirements (If applicable)
Medical	Radiology (Imaging)	0815T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Nervous System (Neurology)	0816T			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Nervous System (Neurology)	0817T			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Laboratory	0827T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0828T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0830T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0831T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0832T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0833T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0834T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0835T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0836T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0837T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0839T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0840T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0841T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0842T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0843T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0844T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0845T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0846T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0847T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0848T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0849T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0850T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0851T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0852T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0853T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0854T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0855T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Laboratory	0856T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Miscellaneous & Unlisted Codes	0858T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Miscellaneous & Unlisted Codes	0860T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Urinary System(Genitourinary)	0864T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Urinary System(Genitourinary)	0867T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Miscellaneous & Unlisted Codes	0868T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Miscellaneous & Unlisted Codes	0869T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Miscellaneous & Unlisted Codes	0870T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Miscellaneous & Unlisted Codes	0871T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Miscellaneous & Unlisted Codes	0872T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Miscellaneous & Unlisted Codes	0873T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Miscellaneous & Unlisted Codes	0874T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Miscellaneous & Unlisted Codes	0875T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Miscellaneous & Unlisted Codes	0876T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Miscellaneous & Unlisted Codes	0881T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Miscellaneous & Unlisted Codes	0884T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Miscellaneous & Unlisted Codes	0885T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Miscellaneous & Unlisted Codes	0886T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Miscellaneous & Unlisted Codes	0888T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	0897T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Cancer Treatment (Oncology)	0908T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Nervous System (Neurology)	0908T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Nervous System (Neurology)	0911T			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Nervous System (Neurology)	0912T			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Miscellaneous & Unlisted Codes	0913T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	0914T			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	0932T			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Urinary System(Genitourinary)	0941T			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Urinary System(Genitourinary)	0942T			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Urinary System(Genitourinary)	0943T			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Urinary System(Genitourinary)	0963T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Digestive System (Gastroenterology)	0977T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Nervous System (Neurology)	0988T			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Urinary System(Genitourinary)	0999T			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Urinary System(Genitourinary)	1000T			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Urinary System(Genitourinary)	1001T			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	11920			Not Required	Not Required	Not Required	Not Required	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	PA is Required for all diagnosis codes EXCEPT C48.1, C50.019, C50.011, C50.012, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929, C50.931, C50.932, C50.939, C50.941, C50.942, C50.943, C50.944, C50.945, C50.946, C50.947, C50.948, C50.949, C50.951, C50.952, C50.953, C50.954, C50.955, C50.956, C50.957, C50.958, C50.959, C50.961, C50.962, C50.963, C50.964, C50.965, C50.966, C50.967, C50.968, C50.969, C50.971, C50.972, C50.973, C50.974, C50.975, C50.976, C50.977, C50.978, C50.979, C50.981, C50.982, C50.983, C50.984, C50.985, C50.986, C50.987, C50.988, C50.989, C50.991, C50.992, C50.993, C50.994, C50.995, C50.996, C50.997, C50.998, C50.999, C51.01, C51.02, C51.03, C51.04, C51.05, C51.06, C51.07, C51.08, C51.09, C51.11, C51.12, C51.13, C51.14, C51.15, C51.16, C51.17, C51.18, C51.19, C51.21, C51.22, C51.23, C51.24, C51.25, C51.26, C51.27, C51.28, C51.29, C51.31, C51.32, C51.33, C51.34, C51.35, C51.36, C51.37, C51.38, C51.39, C51.41, C51.42, C51.43, C51.44, C51.45, C51.46, C51.47, C51.48, C51.49, C51.51, C51.52, C51.53, C51.54, C51.55, C51.56, C51.57, C51.58, C51.59, C51.61, C51.62, C51.63, C51.64, C51.65, C51.66, C51.67, C51.68, C51.69, C51.71, C51.72, C51.73, C51.74, C51.75, C51.76, C51.77, C51.78, C51.79, C51.81, C51.82, C51.83, C51.84, C51.85, C51.86, C51.87, C51.88, C51.89, C51.91, C51.92, C51.93, C51.94, C51.95, C51.96, C51.97, C51.98, C51.99, C52.01, C52.02, C52.03, C52.04, C52.05, C52.06, C52.07, C52.08, C52.09, C52.11, C52.12, C52.13, C52.14, C52.15, C52.16, C52.17, C52.18, C52.19, C52.21, C52.22, C52.23, C52.24, C52.25, C52.26, C52.27, C52.28, C52.29, C52.31, C52.32, C52.33, C52.34, C52.35, C52.36, C52.37, C52.38, C52.39, C52.41, C52.42, C52.43, C52.44, C52.45, C52.46, C52.47, C52.48, C52.49, C52.51, C52.52, C52.53, C52.54, C52.55, C52.56, C52.57, C52.58, C52.59, C52.61, C52.62, C52.63, C52.64, C52.65, C52.66, C52.67, C52.68, C52.69, C52.71, C52.72, C52.73, C52.74, C52.75, C52.76, C52.77, C52.78, C52.79, C52.81, C52.82, C52.83, C52.84, C52.85, C52.86, C52.87, C52.88, C52.89, C52.91, C52.92, C52.93, C52.94, C52.95, C52.96, C52.97, C52.98, C52.99, C53.01, C53.02, C53.03, C53.04, C53.05, C53.06, C53.07, C53.08, C53.09, C53.11, C53.12, C53.13, C53.14, C53.15, C53.16, C53.17, C53.18, C53.19, C53.21, C53.22, C53.23, C53.24, C53.25, C53.26, C53.27, C53.28, C53.29, C53.31, C53.32, C53.33, C53.34, C53.35, C53.36, C53.37, C53.38, C53.39, C53.41, C53.42, C53.43, C53.44, C53.45, C53.46, C53.47, C53.48, C53.49, C53.51, C53.52, C53.53, C53.54, C53.55, C53.56, C53.57, C53.58, C53.59, C53.61, C53.62, C53.63, C53.64, C53.65, C53.66, C53.67, C53.68, C53.69, C53.71, C53.72, C53.73, C53.74, C53.75, C53.76, C53.77, C53.78, C53.79, C53.81, C53.82, C53.83, C53.84, C53.85, C53.86, C53.87, C53.88, C53.89, C53.91, C53.92, C53.93, C53.94, C53.95, C53.96, C53.97, C53.98, C53.99, C54.01, C54.02, C54.03, C54.04, C54.05, C54.06, C54.07, C54.08, C54.09, C54.11, C54.12, C54.13, C54.14, C54.15, C54.16, C54.17, C54.18, C54.19, C54.21, C54.22, C54.23, C54.24, C54.25, C54.26, C54.27, C54.28, C54.29, C54.31, C54.32, C54.33, C54.34, C54.35, C54.36, C54.37, C54.38, C54.39, C54.41, C54.42, C54.43, C54.44, C54.45, C54.46, C54.47, C54.48, C54.49, C54.51, C54.52, C54.53, C54.54, C54.55, C54.56, C54.57, C54.58, C54.59, C54.61, C54.62, C54.63, C54.64, C54.65, C54.66, C54.67, C54.68, C54.69, C54.71, C54.72, C54.73, C54.74, C54.75, C54.76, C54.77, C54.78, C54.79, C54.81, C54.82, C54.83, C54.84, C54.85, C54.86, C54.87, C54.88, C54.89, C54.91, C54.92, C54.93, C54.94, C54.95, C54.96, C54.97, C54.98, C54.99, C55.01, C55.02, C55.03, C55.04, C55.05, C55.06, C55.07, C55.08, C55.09, C55.11, C55.12, C55.13, C55.14, C55.15, C55.16, C55.17, C55.18, C55.19, C55.21, C55.22, C55.23, C55.24, C55.25, C55.26, C55.27, C55.28, C55.29, C55.31, C55.32, C55.33, C55.34, C55.35, C55.36, C55.37, C55.38, C55.39, C55.41, C55.42, C55.43, C55.44, C55.45, C55.46, C55.47, C55.48, C55.49, C55.51, C55.52, C55.53, C55.54, C55.55, C55.56, C55.57, C55.58, C55.59, C55.61, C55.62, C55.63, C55.64, C55.65, C55.66, C55.67, C55.68, C55.69, C55.71, C55.72, C55.73, C55.74, C55.75, C55.76, C55.77, C55.78, C55.79, C55.81, C55.82, C55.83, C55.84, C55.85, C55.86, C55.87, C55.88, C55.89, C55.91, C55.92, C55.93, C55.94, C55.95, C55.96, C55.97, C55.98, C55.99, C56.01, C56.02, C56.03, C56.04, C56.05, C56.06, C56.07, C56.08, C56.09, C56.11, C56.12, C56.13, C56.14, C56.15, C56.16, C56.17, C56.18, C56.19, C56.21, C56.22, C56.23, C56.24, C56.25, C56.26, C56.27, C56.28, C56.29, C56.31, C56.32, C56.33, C56.34, C56.35, C56.36, C56.37, C56.38, C56.39, C56.41, C56.42, C56.43, C56.44, C56.45, C56.46, C56.47, C56.48, C56.49, C56.51, C56.52, C56.53, C56.54, C56.55, C56.56, C56.57, C56.58, C56.59, C56.61, C56.62, C56.63, C56.64, C56.65, C56.66, C56.67, C56.68, C56.69, C56.71, C56.72, C56.73, C56.74, C56.75, C56.76, C56.77, C56.78, C56.79, C56.81, C56.82, C56.83, C56.84, C56.85, C56.86, C56.87, C56.88, C56.89, C56.91, C56.92, C56.93, C56.94, C56.95, C56.96, C56.97, C56.98, C56.99, C57.01, C57.02, C57.03, C57.04, C57.05, C57.06, C57.07, C57.08, C57.09, C57.11, C57.12, C57.13, C57.14, C57.15, C57.16, C57.17, C57.18, C57.19, C57.21, C57.22, C57.23, C57.24, C57.25, C57.26, C57.27, C57.28, C57.29, C57.31, C57.32, C57.33, C57.34, C57.35, C57.36, C57.37, C57.38, C57.39, C57.41, C57.42, C57.43, C57.44, C57.45, C57.46, C57.47, C57.48, C57.49, C57.51, C57.52, C57.53, C57.54, C57.55, C57.56, C57.57, C57.58, C57.59, C57.61, C57.62, C57.63, C57.64, C57.65, C57.66, C57.67, C57.68, C57.69, C57.71, C57.72, C57.73, C57.74, C57.75, C57.76, C57.77, C57.78, C57.79, C57.81, C57.82, C57.83, C57.84, C57.85, C57.86, C57.87, C57.88, C57.89, C57.91, C57.92, C57.93, C57.94, C57.95, C57.96, C57.97, C57.98, C57.99, C58.01, C58.02, C58.03, C58.04, C58.05, C58.06, C58.07, C58.08, C58.09, C58.11, C58.12, C58.13, C58.14, C58.15, C58.16, C58.17, C58.18, C58.19, C58.21, C58.22, C58.23, C58.24, C58.25, C58.26, C58.27, C58.28, C58.29, C58.31, C58.32, C58.33, C58.34, C58.35, C58.36, C58.37, C58.38, C58.39, C58.41, C58.42, C58.43, C58.44, C58.45, C58.46, C58.47, C58.48, C58.49, C58.51, C58.52, C58.53, C58.54, C58.55, C58.56, C58.57, C58.58, C58.59, C58.61, C58.62, C58.63, C58.64, C58.65, C58.66, C58.67, C58.68, C58.69, C58.71, C58.72,

Is the code BH, DME, Health Help, or Medical?	Category	Procedure Code	Revenue Code	Rate Code	Commercial Fully Insured	Commercial Self Funded	Medicare	HMO-D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery Program	Diagnosis Requirements (If applicable)
					(Commercial Products, but not limited to: HMO, PPO, EPO, POS & HWY EPO)	(Commercial Products, but not limited to: HMO, PPO, EPO & POS)			(By Diagnosis - see last column)	(By Diagnosis - see last column)	(By Diagnosis - see last column)	(By Diagnosis - see last column)	
Medical	Reconstructive Surgery and/or Cosmetic Services	11952			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	11954			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	13102			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	14000			Not Required	Not Required	Not Required	Not Required	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Not Required	Not Required	PA is Required for all diagnosis codes EXCEPT C48.1, C50.019, C50.011, C50.012, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929, C50.930, C50.A1, C50.A2, C50.S21, C56.1, C56.2, C56.3, C79.60, C79.61, C79.81, C79.62, C79.63, C84.7A, D05.00, D05.01, D05.02, D05.10, D05.11, D05.12, D05.80, D05.81, D05.82, D05.90, D05.91, D05.92, D24.1, D24.2, D24.3, D49.3, Z15.01, Z15.02, Z15.05, Z40.01, Z40.02, Z40.03, Z42.1, Z85.3, Z90.11, Z90.12, Z90.13
Medical	Reconstructive Surgery and/or Cosmetic Services	14301			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	PA is Required for all diagnosis codes EXCEPT C48.1, C50.019, C50.011, C50.012, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929, C50.930, C50.A1, C50.A2, C50.S21, C56.1, C56.2, C56.3, C79.60, C79.61, C79.81, C79.62, C79.63, C84.7A, D05.00, D05.01, D05.02, D05.10, D05.11, D05.12, D05.80, D05.81, D05.82, D05.90, D05.91, D05.92, D24.1, D24.2, D24.3, D49.3, Z15.01, Z15.02, Z15.05, Z40.01, Z40.02, Z40.03, Z42.1, Z85.3, Z90.11, Z90.12, Z90.13
Medical	Skin (Dermatology)	15011			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	15013			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	15015			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Skin (Dermatology)	15017			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15650			Not Required	Not Required	Not Required	Not Required	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	PA is Required for all diagnosis codes EXCEPT C48.1, C50.019, C50.011, C50.012, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929, C50.930, C50.A1, C50.A2, C50.S21, C56.1, C56.2, C56.3, C79.60, C79.61, C79.81, C79.62, C79.63, C84.7A, D05.00, D05.01, D05.02, D05.10, D05.11, D05.12, D05.80, D05.81, D05.82, D05.90, D05.91, D05.92, D24.1, D24.2, D24.3, D49.3, Z15.01, Z15.02, Z15.05, Z40.01, Z40.02, Z40.03, Z42.1, Z85.3, Z90.11, Z90.12, Z90.13
Medical	Reconstructive Surgery and/or Cosmetic Services	15770			Not Required	Not Required	Not Required	Not Required	Required (By Diagnosis - see last column)	Not Required	Not Required	Not Required	PA is Required for all diagnosis codes EXCEPT C56.1, C56.2, C79.61, C79.62, C48.1, C50.011, C50.012, C50.019, C50.111, C50.112, C50.119, C50.121, C50.122, C50.219, C50.311, C50.312, C50.319, C50.411, C50.412, C50.419, C50.511, C50.512, C50.519, C50.611, C50.612, C50.619, C50.811, C50.812, C50.819, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929, C50.930, C50.A1, C50.A2, C50.S21, C56.1, C56.2, C56.3, C79.60, C79.61, C79.81, C79.62, C79.63, C84.7A, D05.00, D05.01, D05.02, D05.10, D05.11, D05.12, D05.80, D05.81, D05.82, D05.90, D05.91, D05.92, D24.1, D24.2, D24.3, D49.3, Z15.01, Z15.02, Z15.05, Z40.01, Z40.02, Z40.03, Z42.1, Z85.3, Z90.11, Z90.12, Z90.13
Medical	Reconstructive Surgery and/or Cosmetic Services	15771			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	PA is Required for all diagnosis codes EXCEPT C48.1, C50.019, C50.011, C50.012, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929, C50.930, C50.A1, C50.A2, C50.S21, C56.1, C56.2, C56.3, C79.60, C79.61, C79.81, C79.62, C79.63, C84.7A, D05.00, D05.01, D05.02, D05.10, D05.11, D05.12, D05.80, D05.81, D05.82, D05.90, D05.91, D05.92, D24.1, D24.2, D24.3, D49.3, Z15.01, Z15.02, Z15.05, Z40.01, Z40.02, Z40.03, Z42.1, Z85.3, Z90.11, Z90.12, Z90.13
Medical	Reconstructive Surgery and/or Cosmetic Services	15772			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	PA is Required for all diagnosis codes EXCEPT C48.1, C50.019, C50.011, C50.012, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929, C50.930, C50.A1, C50.A2, C50.S21, C56.1, C56.2, C56.3, C79.60, C79.61, C79.81, C79.62, C79.63, C84.7A, D05.00, D05.01, D05.02, D05.10, D05.11, D05.12, D05.80, D05.81, D05.82, D05.90, D05.91, D05.92, D24.1, D24.2, D24.3, D49.3, Z15.01, Z15.02, Z15.05, Z40.01, Z40.02, Z40.03, Z42.1, Z85.3, Z90.11, Z90.12, Z90.13
Medical	Reconstructive Surgery and/or Cosmetic Services	15773			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Not Required	Not Required	PA is Required for All Diagnosis Codes EXCEPT C48.1, C50.019, C50.011, C50.012, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929, C50.930, C50.A1, C50.A2, C50.S21, C56.1, C56.2, C56.3, C79.60, C79.61, C79.81, C79.62, C79.63, C84.7A, D05.00, D05.01, D05.02, D05.10, D05.11, D05.12, D05.80, D05.81, D05.82, D05.90, D05.91, D05.92, D24.1, D24.2, D24.3, D49.3, Z15.01, Z15.02, Z15.05, Z40.01, Z40.02, Z40.03, Z42.1, Z85.3, Z90.11, Z90.12, Z90.13
Medical	Reconstructive Surgery and/or Cosmetic Services	15774			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Not Required	Not Required	PA is Required for all diagnosis codes EXCEPT C48.1, C50.019, C50.011, C50.012, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929, C50.930, C50.A1, C50.A2, C50.S21, C56.1, C56.2, C56.3, C79.60, C79.61, C79.81, C79.62, C79.63, C84.7A, D05.00, D05.01, D05.02, D05.10, D05.11, D05.12, D05.80, D05.81, D05.82, D05.90, D05.91, D05.92, D24.1, D24.2, D24.3, D49.3, Z15.01, Z15.02, Z15.05, Z40.01, Z40.02, Z40.03, Z42.1, Z85.3, Z90.11, Z90.12, Z90.13
Medical	Reconstructive Surgery and/or Cosmetic Services	15775			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15776			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15780			Required	Required	Required	Required	Not Required	Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15781			Required	Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15782			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15783			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15786			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15788			Required	Required	Required	Required	Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15789			Required	Required	Required	Required	Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15792			Required	Required	Required	Required	Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15793			Required	Required	Required	Required	Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15820			Required	Required	Not Required	Not Required	Required	Required	Required	Required	

Is the code BH, DME, Health Help, or Medical?	Category	Procedure Code	Revenue Code	Rate Code	Commercial Fully Insured (Commercial Products, but not limited to: HMO, PPO, EPO, POS & HMO EPO)	Commercial Self Funded (Commercial Products, but not limited to: HMO, PPO, EPO & POS)	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery Program	Diagnosis Requirements (if applicable)
Medical	Reconstructive Surgery and/or Cosmetic Services	15821			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15822			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15823			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15824			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15825			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15826			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15828			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15829			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15830			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15832			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15833			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15834			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15835			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15836			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15837			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15838			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15839			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15840			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15845			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15847			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15876			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15877			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15878			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	15879			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	17106			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	17107			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	17108			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	17360			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	17380			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	17999			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	19300			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	19316			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Not Required	Not Required	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	PA is Required for All diagnosis codes EXCEPT : C48.1, C50.019, C50.011, C50.012, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929, C50.940, C50.A1, C50.A2, C50.521, C56.1, C56.2, C56.3, C79.60, C79.61, C79.81, C79.82, C79.63, C94.70, D05.00, D05.01, D05.02, D05.10, D05.11, D05.12, D05.80, D05.81, D05.82, D05.90, D05.91, D05.92, D24.1, D24.2, D24.9, D49.3, Z15.01, Z15.02, Z15.05, Z40.01, Z40.02, Z40.03, Z42.1, Z85.3, Z90.11, Z90.12, Z90.13
Medical	Reconstructive Surgery and/or Cosmetic Services	19318			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Not Required	Not Required	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	PA is Required for All diagnosis codes EXCEPT : C48.1, C50.019, C50.011, C50.012, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929, C50.940, C50.A1, C50.A2, C50.521, C56.1, C56.2, C56.3, C79.60, C79.61, C79.81, C79.82, C79.63, C94.70, D05.00, D05.01, D05.02, D05.10, D05.11, D05.12, D05.80, D05.81, D05.82, D05.90, D05.91, D05.92, D24.1, D24.2, D24.9, D49.3, Z15.01, Z15.02, Z15.05, Z40.01, Z40.02, Z40.03, Z42.1, Z85.3, Z90.11, Z90.12, Z90.13

Is the code BH, DME, Health Help, or Medical?	Category	Procedure Code	Revenue Code	Rate Code	Commercial Fully Insured	Commercial Self Funded	Medicare	HMO-D-SNP	Safety Net	Safety Net	Safety Net	Safety Net	Diagnosis Requirements (If applicable)
					(Commercial Products, but not limited to: HMO, PPO, EPO, POS, HMO EPO)	(Commercial Products, but not limited to: HMO, PPO, EPO & POS)			Child Health Plus	Essential Plan	Managed Medicaid	Health and Recovery Program	
Medical	Reconstructive Surgery and/or Cosmetic Services	19325			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	PA is Required for All diagnosis codes EXCEPT: C48.1, C50.019, C50.011, C50.012, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929, C50.930, C50.A1, C50.A2, C50.S21, C56.1, C56.2, C56.3, C79.60, C79.61, C79.62, C79.63, C79.64, C79.65, C50.050, C50.051, C50.052, C50.100, C50.110, C50.120, C50.130, C50.140, C50.150, C50.160, C50.170, C50.180, C50.190, C50.200, C50.210, C50.220, C50.230, C50.240, C50.250, C50.260, C50.270, C50.280, C50.290, C50.300, C50.310, C50.320, C50.330, C50.340, C50.350, C50.360, C50.370, C50.380, C50.390, C50.400, C50.410, C50.420, C50.430, C50.440, C50.450, C50.460, C50.470, C50.480, C50.490, C50.500, C50.510, C50.520, C50.530, C50.540, C50.550, C50.560, C50.570, C50.580, C50.590, C50.600, C50.610, C50.620, C50.630, C50.640, C50.650, C50.660, C50.670, C50.680, C50.690, C50.700, C50.710, C50.720, C50.730, C50.740, C50.750, C50.760, C50.770, C50.780, C50.790, C50.800, C50.810, C50.820, C50.830, C50.840, C50.850, C50.860, C50.870, C50.880, C50.890, C50.900, C50.910, C50.920, C50.930, C50.940, C50.950, C50.960, C50.970, C50.980, C50.990, C50.000, C50.010, C50.020, C50.030, C50.040, C50.050, C50.060, C50.070, C50.080, C50.090, C50.100, C50.110, C50.120, C50.130, C50.140, C50.150, C50.160, C50.170, C50.180, C50.190, C50.200, C50.210, C50.220, C50.230, C50.240, C50.250, C50.260, C50.270, C50.280, C50.290, C50.300, C50.310, C50.320, C50.330, C50.340, C50.350, C50.360, C50.370, C50.380, C50.390, C50.400, C50.410, C50.420, C50.430, C50.440, C50.450, C50.460, C50.470, C50.480, C50.490, C50.500, C50.510, C50.520, C50.530, C50.540, C50.550, C50.560, C50.570, C50.580, C50.590, C50.600, C50.610, C50.620, C50.630, C50.640, C50.650, C50.660, C50.670, C50.680, C50.690, C50.700, C50.710, C50.720, C50.730, C50.740, C50.750, C50.760, C50.770, C50.780, C50.790, C50.800, C50.810, C50.820, C50.830, C50.840, C50.850, C50.860, C50.870, C50.880, C50.890, C50.900, C50.910, C50.920, C50.930, C50.940, C50.950, C50.960, C50.970, C50.980, C50.990, C50.000, C50.010, C50.020, C50.030, C50.040, C50.050, C50.060, C50.070, C50.080, C50.090, C50.100, C50.110, C50.120, C50.130, C50.140, C50.150, C50.160, C50.170, C50.180, C50.190, C50.200, C50.210, C50.220, C50.230, C50.240, C50.250, C50.260, C50.270, C50.280, C50.290, C50.300, C50.310, C50.320, C50.330, C50.340, C50.350, C50.360, C50.370, C50.380, C50.390, C50.400, C50.410, C50.420, C50.430, C50.440, C50.450, C50.460, C50.470, C50.480, C50.490, C50.500, C50.510, C50.520, C50.530, C50.540, C50.550, C50.560, C50.570, C50.580, C50.590, C50.600, C50.610, C50.620, C50.630, C50.640, C50.650, C50.660, C50.670, C50.680, C50.690, C50.700, C50.710, C50.720, C50.730, C50.740, C50.750, C50.760, C50.770, C50.780, C50.790, C50.800, C50.810, C50.820, C50.830, C50.840, C50.850, C50.860, C50.870, C50.880, C50.890, C50.900, C50.910, C50.920, C50.930, C50.940, C50.950, C50.960, C50.970, C50.980, C50.990, C50.000, C50.010, C50.020, C50.030, C50.040, C50.050, C50.060, C50.070, C50.080, C50.090, C50.100, C50.110, C50.120, C50.130, C50.140, C50.150, C50.160, C50.170, C50.180, C50.190, C50.200, C50.210, C50.220, C50.230, C50.240, C50.250, C50.260, C50.270, C50.280, C50.290, C50.300, C50.310, C50.320, C50.330, C50.340, C50.350, C50.360, C50.370, C50.380, C50.390, C50.400, C50.410, C50.420, C50.430, C50.440, C50.450, C50.460, C50.470, C50.480, C50.490, C50.500, C50.510, C50.520, C50.530, C50.540, C50.550, C50.560, C50.570, C50.580, C50.590, C50.600, C50.610, C50.620, C50.630, C50.640, C50.650, C50.660, C50.670, C50.680, C50.690, C50.700, C50.710, C50.720, C50.730, C50.740, C50.750, C50.760, C50.770, C50.780, C50.790, C50.800, C50.810, C50.820, C50.830, C50.840, C50.850, C50.860, C50.870, C50.880, C50.890, C50.900, C50.910, C50.920, C50.930, C50.940, C50.950, C50.960, C50.970, C50.980, C50.990, C50.000, C50.010, C50.020, C5

Is the code BH, DME, Health Help, or Medical?	Category	Procedure Code	Revenue Code	Rate Code	Commercial Fully Insured (Commercial Products, but not limited to: HMO, PPO, EPO, POS & HWY EPO)	Commercial Self Funded (Commercial Products, but not limited to: HMO, PPO, EPO & POS)	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery Program	Diagnosis Requirements (If applicable)
Medical	Reconstructive Surgery and/or Cosmetic Services	21123			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21125			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21127			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21137			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21139			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Sleep Medicine	21141			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21142			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21143			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21145			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21146			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21147			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Sleep Medicine	21150			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical	Sleep Medicine	21151			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Sleep Medicine	21154			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Sleep Medicine	21155			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21159			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21172			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21175			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21179			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21180			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21181			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21182			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21183			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21184			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21188			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21193			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Sleep Medicine	21194			Not Required	Not Required	Required	Required	Required	Required	Required	Required	
Medical	Sleep Medicine	21195			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Sleep Medicine	21196			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Sleep Medicine	21198			Not Required	Not Required	Required	Required	Required	Required	Required	Required	
Medical	Sleep Medicine	21199			Not Required	Not Required	Required	Required	Not Required	Required	Required	Required	
Medical	Sleep Medicine	21206			Not Required	Not Required	Required	Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21208			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	21240			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	21242			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Bone and Joint (Orthopedics)	21243			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Sleep Medicine	21244			Not Required	Not Required	Required	Required	Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21245			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21246			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21247			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21256			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21270			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21280			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21282			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21296			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21299			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21740			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	21742			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	

Is the code BH, DME, Health Help, or Medical?	Category	Procedure Code	Revenue Code	Rate Code	Commercial Fully Insured (Commercial Products, but not limited to: HMO, PPO, EPO, POS & HMO EPO)	Commercial Self Funded (Commercial Products, but not limited to: HMO, PPO, EPO & POS)	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery Program	Diagnosis Requirements (if applicable)
Medical	Reconstructive Surgery and/or Cosmetic Services	21743			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	29800			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Bone and Joint (Orthopedics)	29804			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Ears and Nose and Throat (Otorhinolaryngology)	30117			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	30120			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	30400			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	30410			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	30420			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	30430			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	30435			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	30450			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	30462			Required	Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Ears and Nose and Throat (Otorhinolaryngology)	30468			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Ears and Nose and Throat (Otorhinolaryngology)	30469			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Ears and Nose and Throat (Otorhinolaryngology)	30802			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Ears and Nose and Throat (Otorhinolaryngology)	30999			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Ears and Nose and Throat (Otorhinolaryngology)	31242			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Ears and Nose and Throat (Otorhinolaryngology)	31243			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Ears and Nose and Throat (Otorhinolaryngology)	31295			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Ears and Nose and Throat (Otorhinolaryngology)	31296			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Ears and Nose and Throat (Otorhinolaryngology)	31297			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Ears and Nose and Throat (Otorhinolaryngology)	31298			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	32664			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Transplants	32851			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Transplants	32852			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Transplants	32853			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Transplants	32854			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33258			Not Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33265			Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Transplants	33933			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical	Transplants	33935			Required	Required	Required	Required	Required	Required	Not Required	Not Required	
Medical	Transplants	33944			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Transplants	33945			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Heart and Blood Vessel (Cardiovascular)	33999			Required	Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Endovascular Grafts for Abdominal Aortic & Thoracic Aneurysms	34703			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	
Medical	Endovascular Grafts for Abdominal Aortic & Thoracic Aneurysms	34705			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Endovascular Grafts for Abdominal Aortic & Thoracic Aneurysms	34841			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Endovascular Grafts for Abdominal Aortic & Thoracic Aneurysms	34842			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Endovascular Grafts for Abdominal Aortic & Thoracic Aneurysms	34843			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Endovascular Grafts for Abdominal Aortic & Thoracic Aneurysms	34844			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Endovascular Grafts for Abdominal Aortic & Thoracic Aneurysms	34846			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Endovascular Grafts for Abdominal Aortic & Thoracic Aneurysms	34847			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Endovascular Grafts for Abdominal Aortic & Thoracic Aneurysms	34848			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	36465			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	36466			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	36470			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	

Is the code BH, DME, Health Help, or Medical?	Category	Procedure Code	Revenue Code	Rate Code	Commercial Fully Insured (Commercial Products, but not limited to: HMO, PPO, EPO, POS, HMO EPO)	Commercial Self Funded (Commercial Products, but not limited to: HMO, PPO, EPO & POS)	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery Program	Diagnosis Requirements (If applicable)
Medical	Digestive System (Gastroenterology)	43999			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Transplants	44135			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Transplants	44136			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Digestive System (Gastroenterology)	47000			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	PA is Required for the following diagnosis codes: E66.01, E66.2, Z68.35, Z68.36, Z68.37, Z68.38, Z68.39, Z68.40, Z68.41, Z68.42, Z68.43, Z68.44, Z68.45, E66.09, E66.3, E66.811, E66.812, E66.813, E66.89, E66.9
Medical	Digestive System (Gastroenterology)	47001			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	PA is Required for the following diagnosis codes: E66.01, E66.2, Z68.35, Z68.36, Z68.37, Z68.38, Z68.39, Z68.40, Z68.41, Z68.42, Z68.43, Z68.44, Z68.45, E66.09, E66.3, E66.811, E66.812, E66.813, E66.89, E66.9
Medical	Digestive System (Gastroenterology)	47100			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	PA is Required for the following diagnosis codes: E66.01, E66.2, Z68.35, Z68.36, Z68.37, Z68.38, Z68.39, Z68.40, Z68.41, Z68.42, Z68.43, Z68.44, Z68.45, E66.09, E66.3, E66.811, E66.812, E66.813, E66.89, E66.9
Medical	Transplants	47135			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	Cancer Treatment (Oncology)	47370			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Cancer Treatment (Oncology)	47371			Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Digestive System (Gastroenterology)	47379			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Not Required	Not Required	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	PA is Required for the following diagnosis codes: E66.01, E66.2, Z68.35, Z68.36, Z68.37, Z68.38, Z68.39, Z68.40, Z68.41, Z68.42, Z68.43, Z68.44, Z68.45, E66.09, E66.3, E66.811, E66.812, E66.813, E66.89, E66.9
Medical	Cancer Treatment (Oncology)	47381			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Cancer Treatment (Oncology)	47382			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Transplants	48160			Required	Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical	Transplants	48554			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Transplants	50320			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Transplants	50360			Required	Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Transplants	50365			Required	Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	Transplants	50370			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Transplants	50380			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical	Cancer Treatment (Oncology)	50592			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Cancer Treatment (Oncology)	50593			Required	Required	Required	Required	Not Required	Not Required	Required	Not Required	
Medical	Urinary System(Genitourinary)	51715			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Urinary System(Genitourinary)	5284			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Urinary System(Genitourinary)	52441			Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Urinary System(Genitourinary)	52443			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Urinary System(Genitourinary)	52597			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Urinary System(Genitourinary)	53854			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Urinary System(Genitourinary)	53865			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	Urinary System(Genitourinary)	53866			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	
Medical	Erectile Dysfunction	54220			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Erectile Dysfunction	54230			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Erectile Dysfunction	54231			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Erectile Dysfunction	54235			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Erectile Dysfunction	54240			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Erectile Dysfunction	54250			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Erectile Dysfunction	54400			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Erectile Dysfunction	54401			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Erectile Dysfunction	54402			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Erectile Dysfunction	54406			Not Required	Not Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Erectile Dysfunction	54408			Not Required	Not Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Erectile Dysfunction	54410			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Erectile Dysfunction	54411			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Erectile Dysfunction	54415			Not Required	Not Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Erectile Dysfunction	54416			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	Erectile Dysfunction	54417			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Urinary System(Genitourinary)	54440			Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Transplants	54680			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical	Erectile Dysfunction	55870			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical	Cancer Treatment (Oncology)	55873			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	Urinary System(Genitourinary)	55877			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Urinary System(Genitourinary)	55880			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	Gender Affirmation	55970			Required	Required	Required	Required	Not Required	Required	Not Required	Not Required	
Medical	Gender Affirmation	55980			Required	Required	Required	Required	Not Required	Required	Not Required	Not Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	56620			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Reconstructive Surgery and/or Cosmetic Services	56625			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Gender Affirmation	56805			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	Womens Health (Obstetrics and Gynecology)	58150			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	PA is Required for All diagnosis codes EXCEPT : C45.9, C51.0, C51.1, C51.2, C51.8, C51.9, C52, C53.0, C53.1, C53.8, C53.9, C54.0, C54.1, C54.2, C54.3, C54.8, C54.9, C55, C56.1, C56.2, C56.3, C56.9, C57.00, C57.01, C57.10, C57.11, C57.12, C57.20, C57.21, C57.22, C57.3, C57.4, C57.7, C57.8, C57.9, C58, C76.2, C76.3, C77.2, C77.5, C79.60, C79.61, C79.62, C79.63, C79.82, C79.89, C79.9, C80.0, C80.1, D06.0, D06.1, D06.7, D06.9, D07.0, D07.1, D07.2, D07.3, D07.39, Z15.04, Z15.05, Z80.44, Z85.4A, Z86.00A
Medical	Womens Health (Obstetrics and Gynecology)	58152			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	PA is Required for All diagnosis codes EXCEPT : C45.9, C51.0, C51.1, C51.2, C51.8, C51.9, C52, C53.0, C53.1, C53.8, C53.9, C54.0, C54.1, C54.2, C54.3, C54.8, C54.9, C55, C56.1, C56.2, C56.3, C56.9, C57.00, C57.01, C57.10, C57.11, C57.12, C57.20, C57.21, C57.22, C57.3, C57.4, C57.7, C57.8, C57.9, C58, C76.2, C76.3, C77.2, C77.5, C79.60, C79.61, C79.62, C79.63, C79.82, C79.89, C79.9, C80.0, C80.1, D06.0, D06.1, D06.7, D06.9, D07.0, D07.1, D07.2, D07.3, D07.39, Z15.04, Z15.05, Z80.44, Z85.4A, Z86.00A
Medical	Womens Health (Obstetrics and Gynecology)	58180			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	PA is Required for All diagnosis codes EXCEPT : C45.9, C51.0, C51.1, C51.2, C51.8, C51.9, C52, C53.0, C53.1, C53.8, C53.9, C54.0, C54.1, C54.2, C54.3, C54.8, C54.9, C55, C56.1, C56.2, C56.3, C56.9, C57.00, C57.01, C57.10, C57.11, C57.12, C57.20, C57.21, C57.22, C57.3, C57.4, C57.7, C57.8, C57.9, C58, C76.2, C76.3, C77.2, C77.5, C79.60, C79.61, C79.62, C79.63, C79.82, C79.89, C79.9, C80.0, C80.1, D06.0, D06.1, D06.7, D06.9, D07.0, D07.1, D07.2, D07.3, D07.39, Z15.04, Z15.05, Z80.44, Z85.4A, Z86.00A
Medical	Womens Health (Obstetrics and Gynecology)	58260			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	PA is Required for All diagnosis codes EXCEPT : C45.9, C51.0, C51.1, C51.2, C51.8, C51.9, C52, C53.0, C53.1, C53.8, C53.9, C54.0, C54.1, C54.2, C54.3, C54.8, C54.9, C55, C56.1, C56.2, C56.3, C56.9, C57.00, C57.01, C57.10, C57.11, C57.12, C57.20, C57.21, C57.22, C57.3, C57.4, C57.7, C57.8, C57.9, C58, C76.2, C76.3, C77.2, C77.5, C79.60, C79.61, C79.62, C79.63, C79.82, C79.89, C79.9, C80.0, C80.1, D06.0, D06.1, D06.7, D06.9, D07.0, D07.1, D07.2, D07.3, D07.39, Z15.04, Z15.05, Z80.44, Z85.4A, Z86.00A
Medical	Womens Health (Obstetrics and Gynecology)	58262			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	PA is Required for All diagnosis codes EXCEPT : C45.9, C51.0, C51.1, C51.2, C51.8, C51.9, C52, C53.0, C53.1, C53.8, C53.9, C54.0, C54.1, C54.2, C54.3, C54.8, C54.9, C55, C56.1, C56.2, C56.3, C56.9, C57.00, C57.01, C57.10, C57.11, C57.12, C57.20, C57.21, C57.22, C57.3, C57.4, C57.7, C57.8, C57.9, C58, C76.2, C76.3, C77.2, C77.5, C79.60, C79.61, C79.62, C79.63, C79.82, C79.89, C79.9, C80.0, C80.1, D06.0, D06.1, D06.7, D06.9, D07.0, D07.1, D07.2, D07.3, D07.39, Z15.04, Z15.05, Z80.44, Z85.4A, Z86.00A
Medical	Womens Health (Obstetrics and Gynecology)	58263			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	PA is Required for All diagnosis codes EXCEPT : C45.9, C51.0, C51.1, C51.2, C51.8, C51.9, C52, C53.0, C53.1, C53.8, C53.9, C54.0, C54.1, C54.2, C54.3, C54.8, C54.9, C55, C56.1, C56.2, C56.3, C56.9, C57.00, C57.01, C57.10, C57.11, C57.12, C57.20, C57.21, C57.22, C57.3, C57.4, C57.7, C57.8, C57.9, C58, C76.2, C76.3, C77.2, C77.5, C79.60, C79.61, C79.62, C79.63, C79.82, C79.89, C79.9, C80.0, C80.1, D06.0, D06.1, D06.7, D06.9, D07.0, D07.1, D07.2, D07.3, D07.39, Z15.04, Z15.05, Z80.44, Z85.4A, Z86.00A

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