

November 1, 2025

UTILIZATION MANAGEMENT STANDARD

CLINICAL REVIEW PREAUTHORIZATION LIST

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

Code Changes Are Highlighted In Grey

IMPORTANT

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

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

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

Behavioral Health, Medical & Durable Medical Equipment: For All Lines Of Business please go to CareAdvance Provider by going to this URL, https://provider.excellusbcbs.com/authorizations/request-authorization

CareCentrix

CareCentrix
Phone Requests: 1-866-501-4659 Sunday through Saturday from 8:00 a.m. – 8:00 p.m.
EVICore:
Phone Requests: Phone: 1-888-333-9036, Monday through Friday from 7:00 a.m. – 7:00 p.m.
Internet Request: https://provider.accellusbchs.com/authorizations/medical/evicore-healthcare
Fax Requests: Fax: 1888-785-2876-7 From to fax pre-authorization requests will be made available at www.eviCore.com

Services for Musculoskeletal (MSK) require prior authorization via EviCore for Fully Insured Commercial and Medicare Advantage Policies.

This service will exclude all Self Insulad Hembership and Selfey Net Including Essential Plans: Please review each code to determine if authorization is required through Excellus Health Plan for the EviCore exclusions

Is the code BH, DME, eviCore, or Medical?	Procedure Code	Revenue Code	Commercial Fully Insured Rate Code (Commercial Products, bu not limited to: HMO, PPO, EPO, POS & HNY EPO)	Commercial Self Funded t (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	90867		Required	Required	Not Required	Not Required	Required	Required	Required	Required	
BH/Medical BH/Medical	90868 90869		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
BH BH	90809 0889T		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
BH	0890T		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
BH	0891T		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
BH	0892T 90899	None	Required	Required Required	Not Required	Not Required	Not Required	Not Required Not Required	Not Required Not Required	Not Required	
BH BH	96130	None	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
BH	96130	0780	Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
BH	96130	0789	Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
BH	96130	0918	Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
BH BH	96131 96131	None 0780	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
BH	96131	0789	Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
BH	96131	0918	Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
BH	H0004	0911	Not Required	Not Required	Not Required	Notification Required	Not Required	Not Required	Notification Required	Not Required	
			PLEASE READ IN FULL	PLEASE READ IN FULL		PLEASE READ IN FULL	PLEASE READ IN FULL	PLEASE READ IN FULL	PLEASE READ IN FULL	PLEASE READ IN FULL	
BH	H0035	None	(If a service is Rendered in NYS, Notification is Required.	(If a service is Rendered in NYS, Notification is Required.	Not Required	(If a service is Rendered in NYS, Notification is Required. If	(If a service is Rendered in NYS, Notification is Required. If	(If a service is Rendered in NYS, Notification is Required. If	(If a service is Rendered in NYS,	(If a service is Rendered in NYS, Notification is Required.	
DIT	110033	None	If out of NYS, Authorization is		Not Required	out of NYS, Authorization is	out of NYS, Authorization is	out of NYS. Authorization is	Notification is Required. If out of	If out of NYS, Authorization is	
			Required)	Required)		Required)	Required)	Required)	NYS, Authorization is Required)	Required)	
			PLEASE READ IN FULL	PLEASE READ IN FULL		PLEASE READ IN FULL	PLEASE READ IN FULL	PLEASE READ IN FULL	PLEASE READ IN FULL	PLEASE READ IN FULL	
BH	H0035	0900	(If a service is Rendered in	(If a service is Rendered in	Not Required	(If a service is Rendered in	(If a service is Rendered in NYS, Notification is Required. If	(If a service is Rendered in NYS, Notification is Required. If	CE in Dondond in MVC	(If a service is Rendered in NYS, Notification is Required.	
ВΠ	HUU35	0900	NYS, Notification is Required. If out of NYS, Authorization is		Not Required	NYS, Notification is Required. If out of NYS, Authorization is	out of NYS, Authorization is	out of NYS, Authorization is	Notification is Required. If out of	If out of NYS, Authorization is	
			Required)	Required)		Required)	Required)	Required)	NYS, Authorization is Required)	Required)	
			PLEASE READ IN FULL	PLEASE READ IN FULL		PLEASE READ IN FULL	PLEASE READ IN FULL	PLEASE READ IN FULL	PLEASE READ IN FULL	PLEASE READ IN FULL	
			(If a service is Rendered in	(If a service is Rendered in		(If a service is Rendered in	(If a service is Rendered in	(If a service is Rendered in	CEi i- Dondond in MVC	(If a service is Rendered in	
BH	H0035	0912	NYS, Notification is Required. If out of NYS, Authorization is	NYS, Notification is Required. If out of NYS, Authorization is	Not Required	NYS, Notification is Required. If out of NYS, Authorization is	NYS, Notification is Required. If out of NYS, Authorization is	NYS, Notification is Required. If out of NYS, Authorization is	Notification is Required. If out of	NYS, Notification is Required. If out of NYS, Authorization is	
			Required)	Required)		Required)	Required)	Required)	NYS, Authorization is Required)	Required)	
			PLEASE READ IN FULL	PLEASE READ IN FULL		PLEASE READ IN FULL	PLEASE READ IN FULL	PLEASE READ IN FULL	PLEASE READ IN FULL	PLEASE READ IN FULL	
			(If a service is Rendered in	(If a service is Rendered in		(If a service is Rendered in	(If a service is Rendered in	(If a service is Rendered in	(TEi i- Dondond i- NVC	(If a service is Rendered in	
BH	H0035	0913	NYS, Notification is Required. If out of NYS, Authorization is		Not Required	NYS, Notification is Required. If out of NYS, Authorization is	NYS, Notification is Required. If out of NYS, Authorization is	NYS, Notification is Required. If out of NYS, Authorization is	Notification is Required. If out of	NYS, Notification is Required. If out of NYS, Authorization is	
			Required)	Required)		Required)	Required)	Required)	NYS, Authorization is Required)	Required)	
ВН	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)	
ВН	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)	
ВН	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)	
ВН	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)	
ВН	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)	
ВН	H0038	0911	Not Required	Not Required	Not Required	Notification Required only for CORE (Community Oriented Recovery Empowerment) (for HARP members only)	Not Required	Not Required	Not Required	Notification Required only for CORE (Community Oriented Recovery Empowerment)	
BH	H2012	None	Required	Required	Not Required	Required	Required	Required	Required	Required	

Is the code BH, DME, eviCore, or Medical?	Procedure Code	Revenue Code	Rate Code	Commercial Fully Insured (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)
BH Intensive Psychiatric Rehabilitation Treatment (IPRT)	H2012	0900		Not Required	Not Required	Not Required	Required	Required	Not Required	Required	Required	
BH Continuing Day Treatment	H2012	0907		Required	Required	Not Required	Required	Required	Required	Required	Required	
BH Intensive Psychiatric Rehabilitation Treatment (IPRT)	H2012	0911		Not Required	Not Required	Not Required	Required	Required	Not Required	Required	Required	
BH	H2012	0919		Required	Required	Not Required	Not Required Notification Required only for CORE (Community Oriented	Not Required	Not Required	Not Required	Not Required Notification Required only for	
ВН	H2014	None		Not Required	Not Required	Not Required	Recovery Empowerment) (for HARP members only) Notification Required only for	Not Required	Not Required	Not Required	CORE (Community Oriented Recovery Empowerment)	
ВН	H2014	0900		Not Required	Not Required	Not Required	CORE (Community Oriented Recovery Empowerment) (for HARP members only)	Not Required	Not Required	Not Required	Notification Required only for CORE (Community Oriented Recovery Empowerment)	
ВН	H2014	0911		Not Required	Not Required	Not Required	Notification Required only for CORE (Community Oriented Recovery Empowerment) (for HARP members only)	Not Required	Not Required	Not Required	Notification Required only for CORE (Community Oriented Recovery Empowerment)	
ВН	H2014HA	0240	8012	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the intial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the intial service period.	Not Required	
вн	H2014HAUK	0900	8003	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the intial service period.	Not Required	
ВН	H2014HAUK	0911	8003	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the intial service period.	Not Required	
ВН	H2014HAUN	0240	8013	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the intial service period.	Not Required	
ВН	H2014HAUP	0240	8014	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the intial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	
ВН	H2014HAUKU N	0900	8004	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the intial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the intial service period.	Not Required	
ВН	H2014HAUKU N	0911	8004	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the intial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the intial service period.	Not Required	
ВН	H2014HAUKU P	0900	8005	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Not Required	
ВН	H2014HAUKU P	0911	8005	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the intial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the intial service period.	Not Required	
ВН	H2015HA	0900	8009	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the intial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the intial service period.	Not Required	
ВН	H2015HA	0911	8009	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the intial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the intial service period.	Not Required	
ВН	H2015HAUN	0900	8010	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the intial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the intial service period.	Not Required	
ВН	H2015HAUN	0911	8010	Not Required	Not Required	Not Required	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the intial service period.	Not Required	Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the intial service period.	Not Required	

				Commercial Fully Insured	Commercial Self Funded							
Is the code BH, DME, eviCore, or Medical?	Procedure Code	Revenue Code	Rate Code	(Commercial Products, but not limited to: HMO, PPO, EPO, POS &	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)
				HNY EPO)	EPO & POS)			Notification Required only for		Notification Required only for		
BH	H2015HAUP	0900	8011	Not Required	Not Required	Not Required	Not Required	the initial service period of 60 days/96 units/24 hours; Prior	Not Required	the initial service period of 60 days/96 units/24 hours; Prior	Not Required	
DI	HZ015HAUP	0900	0011	Not Required	Not Required	Not Required	Not Required	Authorization Required for Concurrent Review beyond the	Not Required	Authorization Required for Concurrent Review beyond the	Not Required	
								intial service period. Notification Required only for		intial service period. Notification Required only for		
								the initial service period of 60 days/96 units/24 hours: Prior		the initial service period of 60 days/96 units/24 hours: Prior		
ВН	H2015HAUP	0911	8011	Not Required	Not Required	Not Required	Not Required	Authorization Required for Concurrent Review beyond the	Not Required	Authorization Required for Concurrent Review beyond the	Not Required	
								intial service period.		intial service period.		
811	112047						Notification Required only for CORE (Community Oriented			Notification Required only for Children and Family Treatment	Notification Required only for	
ВН	H2017	None		Not Required	Not Required	Not Required	Recovery Empowerment) (for HARP members only)	Not Required	Not Required	and Support Services (CFTSS)	CORE (Community Oriented Recovery Empowerment)	
							Notification Required only for			Notification Required only for		
ВН	H2017	0900		Not Required	Not Required	Not Required	CORE (Community Oriented Recovery Empowerment)	Not Required	Not Required	Children and Family Treatment and Support Services (CFTSS)	Notification Required only for CORE (Community Oriented	
							(for HARP members only)				Recovery Empowerment)	
							Notification Required only for CORE (Community Oriented			Notification Required only for Children and Family Treatment	Notification Required only for	
ВН	H2017	0911		Not Required	Not Required	Not Required	Recovery Empowerment) (for HARP members only)	Not Required	Not Required	and Support Services (CFTSS)	CORE (Community Oriented Recovery Empowerment)	
BH	H2023	None		Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	Required	
ВН	H2023	0900		Not Required	Not Required	Not Required	Required (only if the member is also a	Not Required	Not Required	Not Required	Required	
				*		*	member of HARP) Required			*	•	
ВН	H2023	0911		Not Required	Not Required	Not Required	(only if the member is also a member of HARP)	Not Required	Not Required	Not Required	Required	
								Notification Required only for the initial service period of 60		Notification Required only for the initial service period of 60		
ВН	H2023HA	0900	8015	Not Required	Not Required	Not Required	Not Required	days/96 units/24 hours; Prior Authorization Required for	Not Required	days/96 units/24 hours; Prior Authorization Required for	Not Required	
								Concurrent Review beyond the intial service period.		Concurrent Review beyond the intial service period.		
								Notification Required only for the initial service period of 60		Notification Required only for the initial service period of 60		
ВН	H2023HA	0911	8015	Not Required	Not Required	Not Required	Not Required	days/96 units/24 hours; Prior Authorization Required for	Not Required	days/96 units/24 hours; Prior Authorization Required for	Not Required	
							·	Concurrent Review beyond the	·	Concurrent Review beyond the	•	
BH	H2034	None		Not Required	Not Required	Not Required	Not Required	intial service period. Not Required	Not Required	intial service period. Notification Required	Notification Required	
BH BH	H2036	None		Notification Required	Notification Required	Not Required					Notification Doguized	
	H2036	0902		Notification Required	Notification Required	Not Required	Notification Required Notification Required	Notification Required Notification Required	Notification Required Notification Required	Notification Required Notification Required	Notification Required Notification Required	
BH	H2036 H2036			Notification Required Notification Required PLEASE READ IN FULL	Notification Required Notification Required PLEASE READ IN FULL	Not Required Not Required	Notification Required Notification Required Notification Required PLEASE READ IN FULL	Notification Required Notification Required Notification Required PLEASE READ IN FULL	Notification Required Notification Required Notification Required PLEASE READ IN FULL	Notification Required Notification Required	Notification Required Notification Required Notification Required	
	H2036	0902 1002		Notification Required Notification Required	Notification Required Notification Required	Not Required Not Required	Notification Required Notification Required	Notification Required Notification Required	Notification Required Notification Required	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS.	Notification Required Notification Required	
ВН		0902		Notification Required Notification Required PLEASE READ IN FULL (If a service is Renderent NYS, Notification is Required. If out of NYS. Authorization is	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is	Not Required	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is	Notification Required Notification Required PLEASE READ IN FULL	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is	
ВН	H2036	0902 1002		Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required.	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required.	Not Required Not Required	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required) Required	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required) Required	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required.	
BH BH	H2036 S0201	0902 1002		Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If our of NYS, Authorization is Required)	Not Required Not Required Required	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required) Required only for the initial service period of 60	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required) Required Notification Required only for the initial service period of 60	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	
BH BH	H2036 S0201	0902 1002	8023	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If our of NYS, Authorization is Required)	Not Required Not Required Required	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	Notification Required Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required.) Required Required Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required only	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	Notification Required Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required Required Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	
BH BH	H2036 S0201 S5150	0902 1002 None	8023	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required) Not Required	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required) Not Required	Not Required Not Required Required Not Required	Notification Required Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required) Not Required	Notification Required Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required) Not Required	Notification Required Notification Required Notification Required PEASE READ IN FULL (If a service is Rendered in NYs, Notification is Required. If out of NYS, Authorization is Required. Notification Required only for the initial service period of 60 days/96 units/24 hours; Prior Authorization Required for Concurrent Review beyond the initial service period.	Notification Required Notification Required PLEASE READ IN FULL (If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required) Required	
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eviCore, or Medical?	Code	Revenue Code	Rate Code	(Commercial Products, but not limited to: HMO, PPO,	(Commercial Products, but	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Health and Recovery Program	Diagnosis Requirements (if applicable)
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Is the code BH, DME,	Procedure Code	Revenue Code	Rate Code	(Commercial Products, but	(Communical Boardon to the total	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery	Diagnosis Requirements (if applicable)
evicore, or Medical?	Code	Code		not limited to: HMO, PPO,	not limited to: HMO, PPO,			Child Health Plus	Essentiai Pian	Managed Medicaid	Program	
				EPO, POS & HNY EPO)	EPO & POS)							
								Notification Required only for the initial service period of 60		Notification Required only for the initial service period of 60		
BH	T2015HA	0900	8006	Not Required	Not Required	Not Required	Not Required	days/96 units/24 hours; Prior	Not Required	days/96 units/24 hours; Prior	Not Required	
511	12023181	0,00	0000	Not required	Not required	Not required	Not required	Authorization Required for Concurrent Review beyond the	Not required	Authorization Required for Concurrent Review beyond the	Not required	
								intial service period.		intial service period.		
								Notification Required only for the initial service period of 60		Notification Required only for the initial service period of 60		
BH	T2015HA	0911	8006	Not Required	Not Required	Not Required	Not Required	days/96 units/24 hours: Prior	Not Required	days/96 units/24 hours: Prior	Not Required	
DIT	12013114	0511	8000	Not Required	Not Required	Not Required	Not required	Authorization Required for Concurrent Review beyond the	Not Required	Authorization Required for Concurrent Review beyond the	Not required	
								intial service period.		intial service period.		
								Notification Required only for the initial service period of 60		Notification Required only for the initial service period of 60		
BH	T2015HAUN	0900	8007	Not Required	Not Required	Not Required	Not Required	days/96 units/24 hours; Prior	Not Required	days/96 units/24 hours; Prior	Not Required	
DII	12013114014	0300	8007	Not Required	Not Required	Not Required	Not required	Authorization Required for Concurrent Review beyond the	Not Required	Authorization Required for Concurrent Review beyond the	Not required	
								intial service period.		intial service period.		
								Notification Required only for the initial service period of 60		Notification Required only for the initial service period of 60		
BH	T2015HAUN	0911	8007	Not Required	Not Required	Not Required	Not Required	days/96 units/24 hours; Prior	Not Required	days/96 units/24 hours; Prior	Not Required	
511	12023154014	0311	0007	Not required	Not required	Not required	Not required	Authorization Required for Concurrent Review beyond the	Not required	Authorization Required for Concurrent Review beyond the	Not required	
								intial service period.		intial service period.		
								Notification Required only for the initial service period of 60		Notification Required only for the initial service period of 60		
BH	T2015HAUP	0900	8008	Not Required	Not Required	Not Required	Not Required	days/96 units/24 hours; Prior	Not Required	days/96 units/24 hours; Prior	Not Required	
- J.								Authorization Required for Concurrent Review beyond the	cquircu	Authorization Required for Concurrent Review beyond the		
								intial service period.		intial service period.		
]			Notification Required only for the initial service period of 60		Notification Required only for the initial service period of 60		
BH	T2015HAUP	0911	8008	Not Required	Not Required	Not Required	Not Required	days/96 units/24 hours; Prior	Not Required	days/96 units/24 hours; Prior	Not Required	
5.1	01511101	0311	5555	not required	not required	Not required	not required	Authorization Required for Concurrent Review beyond the	not required	Authorization Required for Concurrent Review beyond the	not required	
								intial service period.		intial service period.		
BH RH	T2017 T2017	0900 0911		Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	
BH	T2019	None		Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	Required	
								Notification Required only for the initial service period of 60		Notification Required only for the initial service period of 60		
BH	T2020HA	0240	7933	Not Required	Not Required	Not Required	Not Required	days/96 units/24 hours; Prior	Not Required	days/96 units/24 hours; Prior	Not Required	
DII	12020114	0240	7933	Not Required	Not Required	Not Required	Not Required	Authorization Required for Concurrent Review beyond the	Not Required	Authorization Required for Concurrent Review beyond the	Not Required	
								intial service period.		intial service period.		
								Notification Required only for the initial service period of 60		Notification Required only for the initial service period of 60		
BH	T2020HAUN	0240	7934	Not Required	Not Required	Not Required	Not Required	days/96 units/24 hours; Prior	Not Required	days/96 units/24 hours; Prior	Not Required	
511	12020191011	02.10	,,,,,,	Not required	Not required	Not required	Not required	Authorization Required for Concurrent Review beyond the	Not required	Authorization Required for Concurrent Review beyond the	Not required	
								intial service period.		intial service period.		
								Notification Required only for the initial service period of 60		Notification Required only for the initial service period of 60		
BH	T2020HAUP	0240	7935	Not Required	Not Required	Not Required	Not Required	days/96 units/24 hours; Prior	Not Required	days/96 units/24 hours; Prior	Not Required	
DII	1202011401	0240	7933	Not Required	Not Required	Not Required	Not required	Authorization Required for Concurrent Review beyond the	Not Required	Authorization Required for Concurrent Review beyond the	Not required	
								intial service period. PLEASE READ IN FULL		intial service period.		
				PLEASE READ IN FULL (If a service is Rendered in	PLEASE READ IN FULL (If a service is Rendered in		PLEASE READ IN FULL (If a service is Rendered in	PLEASE READ IN FULL (If a service is Rendered in	PLEASE READ IN FULL (If a service is Rendered in	PLEASE READ IN FULL	PLEASE READ IN FULL (If a service is Rendered in	
BH		0124		NYS, Notification is Required.	NYS, Notification is Required.	Not Required	NYS, Notification is Required. If	NYS. Notification is Required. If	NYS, Notification is Required. It	(If a service is Rendered in NYS, Notification is Required. If out of	NYS, Notification is Required.	
				If out of NYS, Authorization is Required)	If out of NYS, Authorization is Required)		out of NYS, Authorization is Required)	out of NYS, Authorization is Required)	out of NYS, Authorization is Required)	NYS, Authorization is Required)	If out of NYS, Authorization is Required)	
				PLEASE READ IN FULL	PLEASE READ IN FULL		PLEASE READ IN FULL (If a service is Rendered in	PLEASE READ IN FULL	PLEASE READ IN FULL	PLEASE READ IN FULL	PLEASE READ IN FULL (If a service is Rendered in	
ВН		0126		(If a service is Rendered in NYS, Notification is Required.	(If a service is Rendered in NYS, Notification is Required.	Not Required	(If a service is Rendered in NYS, Notification is Required. If	(If a service is Rendered in NYS, Notification is Required. If	(If a service is Rendered in NYS, Notification is Required. If	(If a service is Rendered in NYS,	(If a service is Rendered in NYS, Notification is Required.	
				If out of NYS, Authorization is	If out of NYS, Authorization is		out of NYS, Authorization is	out of NYS, Authorization is	out of NYS, Authorization is	Notification is Required. If out of NYS, Authorization is Required)	If out of NYS, Authorization is	
				Required) PLEASE READ IN FULL	Required) PLEASE READ IN FULL		Required) PLEASE READ IN FULL	Required) PLEASE READ IN FULL	Required) PLEASE READ IN FULL		Required) PLEASE READ IN FULL	
BH		0128		(If a service is Rendered in NYS, Notification is Required.	(If a service is Rendered in NYS, Notification is Required.	Not Required	(If a service is Rendered in NYS, Notification is Required. If	(If a service is Rendered in NYS, Notification is Required. If	(If a service is Rendered in NYS, Notification is Required. It	PLEASE READ IN FULL (If a service is Rendered in NYS,	(If a service is Rendered in NYS, Notification is Required.	
ВН		0128		If out of NYS, Authorization is	If out of NYS, Authorization is	ivot kequirea	NYS, Notification is Required. If out of NYS, Authorization is	NYS, Notification is Required. If out of NYS, Authorization is	out of NYS, Authorization is	(If a service is Rendered in NYS, Notification is Required. If out of NYS, Authorization is Required)	NYS, Notification is Required. If out of NYS, Authorization is	
				Required)	Required)		Required)	Required)	Required)		Required) PLEASE READ IN FULL	
				PLEASE READ IN FULL (If a service is Rendered in	PLEASE READ IN FULL (If a service is Rendered in		PLEASE READ IN FULL (If a service is Rendered in	PLEASE READ IN FULL (If a service is Rendered in	PLEASE READ IN FULL (If a service is Rendered in	PLEASE READ IN FULL (If a service is Rendered in NYS.	(If a service is Rendered in	
BH		1002		NYS, Notification is Required. If out of NYS, Authorization is	NYS, Notification is Required. If out of NYS, Authorization is	Not Required	NYS, Notification is Required. If out of NYS, Authorization is	NYS, Notification is Required. If out of NYS, Authorization is	NYS, Notification is Required. If out of NYS, Authorization is	Notification is Required. If out of	NYS, Notification is Required. If out of NYS, Authorization is	
				Required)	Required)		Required)	Required)	Required)	NYS, Authorization is Required)	Required)	
				PLEASE READ IN FULL	PLEASE READ IN FULL		PLEASE READ IN FULL	PLEASE READ IN FULL	PLEASE READ IN FULL	PLEASE READ IN FULL	PLEASE READ IN FULL	
BH		1001		(If a service is Rendered in NYS, Notification is Required.	(If a service is Rendered in NYS, Notification is Required.	Not Required	(If a service is Rendered in NYS, Notification is Required. If	(If a service is Rendered in NYS, Notification is Required. If	(If a service is Rendered in NYS, Notification is Required. It	(If a service is Rendered in NYS, Notification is Required. If out of	(If a service is Rendered in NYS, Notification is Required.	
				If out of NYS, Authorization is Required)	If out of NYS, Authorization is Required)		out of NYS, Authorization is Required)	out of NYS, Authorization is Required)	out of NYS, Authorization is Required)	NYS, Authorization is Required)	If out of NYS, Authorization is Required)	
DME DME	A4239			Not Required	Not Required	Required	Required	Required	Required	Not Required	Not Required	
DME DME	A4468 A4520			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Not Required Not Required	
DME	A4540			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME DME	A4542 A4554			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME	A4560			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
DME DME	A4575 A4593			Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	
DME	A4594			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME DME	A6501 A6503			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Required	Required Required	
DME DME	A6507			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	A8002 A8003			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	
DME	A9272			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME DME	A9274 A9276			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Required Not Required	Required Not Required	
DME DME	A9277			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
DME DME	A9278 A9280			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Not Required	Not Required Required	Not Required Required	
DME	A9281			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME DME	A9282 B9004			Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Required	Not Required Not Required	Required Required	Required Required	
DME	E0193			Not Required	Not Required Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
·		_			· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	·		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·

			Commercial	Commercial							
Is the code BH, DME, Procee	dura Royanya		Fully Insured	Self Funded			Safatu Nat	Safatu Not	Cafety Net	Safety Net	
eviCore, or Medical?	dure Revenue le Code	Rate Code	(Commercial Products, but not limited to: HMO, PPO,	(Commercial Products, but	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Health and Recovery Program	Diagnosis Requirements (if applicable)
			EPO, POS & HNY EPO)	EPO & POS)							
DME E019	94 15		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E02	17		Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	
DME E024	45		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME E025	55		Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Not Required Required	Not Required Required	
DME E026	60		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME E026			Required Not Required	Required Not Required	Not Required Required	Not Required Required	Not Required Required	Not Required Not Required	Required Required	Required Required	
DME E023	74		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
DME E023	90		Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	
DME E029	91		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	
DME E029	94		Not Required	Not Required	Required	Required	Required	Not Required	Not Required	Not Required	
DME E029			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E029	97		Required Not Required	Required Not Required	Not Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Required	Not Required	
DME E031	02		Required	Required	Required Required	Required	Required	Required	Required	Required Required	
DME E031			Not Required Required	Not Required Required	Required Required	Required Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E03:	16		Required	Required	Required	Required	Required	Required	Required	Required	
DME E033	71		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME E033	72		Not Required	Not Required	Not Required Not Required	Not Required	Required	Not Required	Required	Required	
DME E044	46		Not Required Required	Not Required Required	Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	
DME E040			Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Required	Required Required	
DME E04	68		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME E04:	81		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
DME E041	82		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Required	Required Required	
DME E04	85		Required	Required	Required	Required	Required	Required	Not Required	Not Required	
DME E041			Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E049	91		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
DME E049	92		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E051			Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	
DME E06:	16		Required	Required	Required	Required	Required	Not Required	Not Required	Not Required	
DME E06:	19		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	
DME E063	27		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME E06:	37		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME E06:	38		Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	
DME E064	42		Required	Required	Required	Required	Required	Required	Required	Required	
DME E069			Required Required	Required Required	Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	
DME E06	52		Required	Required	Required	Required	Required	Required	Not Required	Not Required	
DME E069	56		Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	
DME E06:	58		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E06	60		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
DME E066			Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	
DME E06	69		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME E06:	71		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E063			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	
DME E063	76		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME E06:		1	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E06:	79		Required	Required	Not Required	Not Required	Not Required Not Required	Not Required	Not Required Not Required	Not Required Not Required	
DME E06	81		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required	Not Required Not Required	Not Required	Not Required	
DME E061			Required Not Required	Required Not Required	Not Required Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E069 DME E069	92		Not Required	Not Required	Required	Required	Required	Not Required	Not Required	Not Required	
DME E069	94		Not Required Required	Not Required Required	Required Required	Required Required	Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	
DME E07:	15		Required	Required Not Required	Not Required	Not Required	Not Required	Not Required	Not Required Not Required	Not Required Not Required	
DME E073	21		Not Required Required	Required	Required Not Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required	Not Required	
DME E07:	30		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	
DME E07:	33		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME E07:	35		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E073			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E073	39		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME E074	48		Required Required	Required Required	Required Required	Required Required	Not Required Required	Required Required	Not Required Not Required	Not Required Not Required	
DME E074			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
DME E076	64		Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	
DME E076	65 66		Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
DME E07	81		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME E071			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E078	84		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
DME E071	86		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E079	91		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Not Required	Required Not Required	
DME E08:			Not Required Not Required	Not Required Not Required	Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	

			Commercial	Commorcial							
Is the code BH, DME, Proced	re Revenue		Fully Insured	Self Funded			Safety Net	Safety Net	Safety Net	Safety Net	
eviCore, or Medical?	Code	Rate Code	(Commercial Products, but not limited to: HMO, PPO,	(Commercial Products, but	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Health and Recovery Program	Diagnosis Requirements (if applicable)
			EPO, POS & HNY EPO)	EPO & POS)							
DME E0933			Not Required Required	Not Required Required	Required Required	Required Required	Not Required Not Required	Not Required Required	Not Required Not Required	Not Required Not Required	
DME E094:			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E1000			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME E1003			Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Required Required	Required Required	
DME E1005			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME E1000			Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Not Required	Not Required Not Required	Required Required	Required Required	
DME E1008			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME E1009			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME E101:			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Not Required	Required Not Required	
DME E1022			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
DME E102: DME E103:			Required Not Required	Required Not Required	Required Not Required	Required Not Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E1030 DME E1033			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E1039			Not Required	Not Required	Not Required	Not Required	Required Required	Not Required	Not Required	Not Required	
DME E1050			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E1070			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME E1080 DME E1080			Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E108			Not Required	Not Required	Not Required Not Required	Not Required	Required	Not Required	Not Required Not Required	Not Required	
DME E1089 DME E1090			Not Required Not Required	Not Required Not Required	Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required	Not Required Not Required	
DME E1093 DME E1100		-	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E1110			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME E1130 DME E1140			Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E1150 DME E1160			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E116:			Not Required	Not Required	Required	Required	Required	Required	Required	Required	
DME E1170			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E1172			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME E1180 DME E1190			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E119			Not Required Not Required	Not Required Not Required	Not Required	Not Required Not Required	Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E1220 DME E1221			Not Required	Not Required	Not Required Not Required	Not Required	Required Required	Required	Not Required	Not Required	
DME E1222			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
DME E1224			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
DME E1226			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Required	Required Required	
DME E1230 DME E1231			Not Required Required	Not Required Required	Required Not Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E1233			Required	Required	Required	Required	Required	Required	Not Required	Not Required	
DME E123			Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	
DME E1235			Not Required	Not Required	Required	Required	Required	Not Required	Not Required	Not Required	
DME E1233			Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	
DME E1230 DME E1230			Not Required Required	Not Required Required	Required Not Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E1240			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
DME E1250 DME E1260			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E1270 DME E1280			Not Required Not Required	Not Required Not Required	Not Required	Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E1285			Not Required	Not Required	Required Not Required	Required Not Required	Required	Not Required	Not Required	Not Required	
DME E1290 DME E1290			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DMF F129			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME E130: DME E1800			Required Not Required	Required Not Required	Required Not Required	Required Not Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E1803		H ===	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E1810			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME E181:		1	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E1818 DME E1830			Not Required Not Required	Not Required	Not Required Not Required	Not Required	Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E1840			Not Required	Not Required Not Required	Not Required	Not Required Not Required	Required Required	Not Required	Not Required	Not Required Not Required	
DME E1903 DME E1903		-	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E2000			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME E2103			Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
DME E2204 DME E2228		H ===	Not Required Required	Not Required Not Required	Not Required Required	Not Required Required	Required Required	Not Required Required	Required Not Required	Required Not Required	
DME E2230			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
DME E229:		1	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E229			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
DME E2290 DME E2301			Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E2310			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required Required	Required Required	
DME E2312			Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
DME E232		1	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E232			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME E2321		<u> </u>	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME E2325 DME E2330			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME E233:			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME E234: DME E234:		1	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME E235			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	

			Commercial	Commercial							
Is the code BH. DMF.	Procedure	Revenue	Fully Insured	Self Funded			Safety Net	Safety Net	Safety Net	Safety Net Health and Recovery	
Is the code BH, DME, eviCore, or Medical?	Code	Code	Rate Code (Commercial Products, bu not limited to: HMO, PPO	(Commercial Products, but	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Health and Recovery Program	Diagnosis Requirements (if applicable)
			EPO, POS & HNY EPO)	EPO & POS)							
DME DME	E2358 E2359		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	E2366 E2368		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	E2369 E2370		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	E2371		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	E2373 E2374		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	E2375 E2376		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Required	Required Required	
DME	E2377		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME DME	E2378 E2397		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Required Not Required	Required Not Required	
DME DME	E2402 E2500		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Required	Required Required	Required Required	Required Required	
DME DME	E2502 E2504		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
DME DME	E2506 E2508		Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Required Required	Required Required	
DME	E2510		Required	Required	Required	Required	Required	Required	Required	Required	
DME DME	E2511 E2512		Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
DME DME	E2599 E2609		Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Required	Required Not Required	Required Required	Required Required	
DME DME	E2616 E2617		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	E2621		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	E2626 E2627		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Required	Not Required Required	
DME DME	E2628 E2629		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME DME	E8000 E8001		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	
DME	E8002		Required	Required	Required	Required	Not Required	Required	Not Required	Not Required	
DME DME	K0002 K0005		Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	
DME DME	K0006 K0007		Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	Required Required	Required Required	Required Required	Required Required	
DME DME	K0008 K0009		Not Required Not Required	Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Required	Required Required	Required Required	
DME	K0010		Required	Not Required Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
DME DME	K0011 K0012		Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Required	Required Not Required	Required Required	Required Required	
DME DMF	K0013 K0014		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	
DME	K0108		Not Required	Not Required	Required	Required	Required	Required	Required	Required	
DME DME	K0455 K0606		Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	
DME DME	K0739 K0743		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	K0800 K0801		Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	
DME	K0802 K0806		Required	Required	Not Required	Not Required	Required	Required	Required	Required	
DME DME DME	K0807		Required Required	Required Reauired	Required Not Required	Required Not Required	Required Reauired	Required Reauired	Required Required	Required Required	
DME	K0808 K0812		Required Required	Required Required	Required Required	Required Required	Required Not Required	Required Not Required	Required Required	Required Required	
DME DME	K0813 K0814		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Required	Not Required Required	Required Required	Required Required	
DME	K0815		Required	Required	Not Required	Not Required	Required	Required	Required	Required	
DME DME DME	K0816 K0820		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
DME DME	K0821 K0822		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
DME DME	K0823 K0824		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
DME	K0825		Not Required	Not Required	Required	Required	Required	Required	Required	Required	
DME DME	K0826 K0827		Required Required	Required Required	Required Required	Required Required	Required Not Required	Required Not Required	Required Required	Required Required	
DME DME	K0828 K0829		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
DME DME	K0830 K0831		Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Required	Not Required Required	
DME DME	K0835 K0836		Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	
DME	K0837		Required	Required	Required	Required	Not Required	Required	Required	Required	
DME DME	K0838 K0839		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	Required Required	Required Required	
DME DME	K0840 K0841		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
DME DME	K0842 K0843		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
DME	K0848		Required	Required	Not Required	Not Required	Required	Required	Required	Required	
DME DME	K0849 K0850		Required Required	Required Required	Required Required	Required Required	Not Required Required	Not Required Required	Required Required	Required Required	
DME DME	K0851 K0852		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
DME DME	K0853 K0854		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Required	Not Required Required	Required Required	Required Required	
DME	K0855		Required	Required	Not Required	Not Required	Required	Required	Required	Required	
DME DME	K0856 K0857		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Required Not Required	Required Required	Required Required	
DME DME	K0858 K0859		Required Required	Required Required	Required Not Required	Required Not Required	Required Required	Required Required	Required Required	Required Required	
DME DME	K0860 K0861		Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	
DME	K0862		Required	Required	Required	Required	Required	Required	Required	Required	
DME DME	K0863 K0864		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Reauired	
DME DME	K0868 K0869		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
DME DME	K0870 K0871		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
DME	K0877		Required	Required	Not Required	Not Required	Required	Required	Required	Required	
DME	K0878		Required	Required	Not Required	Not Required	Required	Required	Required	Required	

			Commercial	Commorcial							
Is the code BH, DME,	Procedure	Revenue	Fully Insured	Self Funded			Safety Net	Safety Net	Safety Net	Safety Net	
eviCore, or Medical?	Code	Code	Rate Code (Commercial Products, but not limited to: HMO, PPO, EPO, POS &	(Commercial Products, but	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Health and Recovery Program	Diagnosis Requirements (if applicable)
			HNY EPO)	EPO & POS)							
DME DME	K0879 K0880		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
DME DME	K0884 K0885		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	Required Required	Required Required	
DME	K0886		Required	Required	Not Required	Not Required	Required	Required	Required	Required	
DME DME	K0890 K0891		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
DME DME	K1035 K1036		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME DME	K1037 L0112		Required	Required	Not Required	Not Required	Not Required	Not Required Not Required	Not Required	Not Required	
DME	L0456		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required	Required Required	Required Required	
DME DME	L0457 L0468		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
DME DME	L0469 L0470		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L0480		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L0482 L0484		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L0486 L0488		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Required	Required Required	
DME	L0490 L0491		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L0492		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L0631 L0632		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L0635 L0636		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L0637		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME DME	L0638 L0639		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Reauired	Not Required Not Required	Required Required	Required Required	
DME DME	L0640 L0648		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L0650 L0651		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L0700		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L0710 L0720		Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	
DME DME	L0810 L0820		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L0830		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L0859 L0999		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	
DME DME	L1000 L1001		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L1005		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME	L1007 L1200		Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Not Required Required	Not Required Required	
DME DME	L1300 L1310		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L1680 L1681		Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	
DME DME	L1685 L1686		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME	L1690		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L1700 L1710		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L1720 L1730		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L1755		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L1832 L1833		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Reauired	
DME DME	L1834 L1840		Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	
DME DME	L1843 L1844		Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Required	Not Required Required	Required Required	Required Required	
DME	L1845		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L1846 L1860		Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Required	Required Not Required	Required Required	Required Required	
DME DME DME	L1933 L1945		Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	
DME DME	L1950		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
DME	L1951 L1952		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME DME	L1960 L1970		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L2000 L2005		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L2010		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME DME	L2020 L2030		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Required	Required Reauired	
DME DME	L2034 L2036		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L2037 L2038		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L2108		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L2126 L2128		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L2132 L2134		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L2136 L2250		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Required	Required Required	
DME	L2280		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME DME	L2350 L2510		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L2520 L2525		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L2526		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L2570 L2580		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L2627 L2628		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L2861 L3161		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME	L3230		Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	
DME	L3671		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	

			Commercial	Commercial							
Is the code BH, DME,	Procedure	Pevenue	Fully Insured	Self Funded			Safety Net	Safety Net	Safety Net	Safety Net	
eviCore, or Medical?	Code	Code	Rate Code (Commercial Products, but not limited to: HMO, PPO, EPO, POS &	(Commercial Products, but	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Health and Recovery Program	Diagnosis Requirements (if applicable)
			HNY EPO)	EPO & POS)							
DME DME	L3674 L3720		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L3730 L3740		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L3763		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L3764 L3765		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L3766		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME DME	L3900 L3901		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L3904		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME DME	L3905 L3961		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L3962 L3967		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L3971		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L3973 L3975		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L3976 L3977		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L3978		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L4000 L4010		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L4020 L4030		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L4205		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME DME	L4631 L5010		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Required	Required Required	
DME	L5020		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME DME	L5050 L5060		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Not Required	Required Not Required	
DME DME DME	L5100 L5105		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L5150		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L5160 L5200		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L5210		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L5220 L5230		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L5250 L5270		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L5280		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L5301 L5312		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME DME	L5321		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required Required	Required Required	
DME	L5341		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L5400 L5410		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L5420 L5430		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required	Not Required Not Required	Required	Required	
DME	L5450		Not Required	Not Required	Not Required	Not Required	Required Not Required	Not Required	Required Required	Required Required	
DME DME	L5500 L5505		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L5510		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME DME	L5520 L5530		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L5535 L5540		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Required	Required Required	
DME	L5560		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L5570 L5580		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Reauired	
DME DME	L5585 L5590		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Required	Required Required	
DME	L5595		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L5600 L5610		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L5611		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
DME DME	L5614		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L5615 L5617		Required Not Required	Required Not Required	Required Not Required	Required Not Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME DME	L5630		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Required	Not Required Required	
DME	L5638		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L5639 L5640		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Required	Required Required	
DME DME	L5642 L5643		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L5644		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L5645 L5646		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L5647		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L5648 L5649		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L5650 L5651		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L5657		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
DME DME	L5661 L5665		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Required	Required Required	
DME	L5671		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME DME	L5673 L5677		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L5679 L5681		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
DME	L5682		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L5683 L5700	+	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Required	Required Required	
DME	L5701		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME DME	L5702 L5703		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L5704 L5705		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Required	Required Required	
DME	L5706		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L5707 L5711		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Reauired	

			Commercial	Commercial							
Is the code BH, DME.	Procedure	Revenue _	Fully Insured	Self Funded			Safety Net	Safety Net	Safety Net	Safety Net Health and Recovery	
Is the code BH, DME, eviCore, or Medical?	Code	Code	(Commercial Products, but not limited to: HMO, PPO,	(Commercial Products, but	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Health and Recovery Program	Diagnosis Requirements (if applicable)
			EPO, POS & HNY EPO)	EPO & POS)							
DME DME	L5712 L5714		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L5716 L5718		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Not Required	Required Not Required	
DME DME	L5722 L5724		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L5726 L5728		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L5780 L5781		Not Required Not Required	Not Required Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L5782		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME DME	L5783 L5785		Required Not Required	Required Not Required	Required Not Required	Required Not Required	Not Required Required	Not Required Not Required	Not Required Required	Not Required Required	
DME DME	L5795 L5810		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Required	Required Required	
DME DME	L5811 L5812		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Required	Required Required	
DME	L5814		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L5816 L5818		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L5822 L5824		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L5826 L5827		Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	
DME DME	L5828 L5830		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L5840 L5845		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L5856		Required	Required	Required	Required	Required	Required	Required	Required	
DME DME DME	L5857 L5858		Required Reauired	Required Required	Required Reauired	Required Required	Required Required	Required Required	Required Required	Required Reauired	
DME DME	L5859 L5920		Required Not Required	Required Not Required	Required Not Required	Required Not Required	Not Required Required	Required Not Required	Not Required Required	Not Required Required	
DME DME	L5930 L5950		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L5960 L5961		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Not Required	Required Not Required	
DME	L5962		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME DME	L5964 L5966		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L5968 L5969		Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	
DME DME	L5973 L5975		Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Required	Required Not Required	Required Required	Required Required	
DME DME	L5976 L5979		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Required	Required Required	
DME	L5980		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L5981 L5982		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L5984 L5986		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Required	Required Required	
DME DME	L5987 L5988		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L5990 L5991		Not Required Required	Not Required Required	Not Required	Not Required Required	Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	
DME DME	L5999		Not Required	Not Required	Required Not Required	Not Required	Not Required	Not Required	Required Required	Required	
DME	L6000 L6010		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required	Required Required	
DME DME	L6020 L6026		Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Required	Not Required Required	Required Required	Required Required	
DME DME	L6034 L6035		Required Reauired	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME DME	L6036 L6038		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME DME	L6039 L6050		Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Not Required Required	Not Required Required	
DME	L6055		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L6100 L6110		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L6120 L6130		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L6200 L6205		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L6250 L6300		Not Required Not Required	Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required	Required Required	
DME DME	L6310		Not Required	Not Required Not Required Not Required	Not Required Not Required Not Required	Not Required Not Required Not Required	Required	Not Required Not Required Not Required	Required Required	Required	
DME DME	L6320 L6350		Not Required Not Required	Not Required	Not Required	Not Required	Required Required	Not Required	Required Required	Required Required	
DME DME	L6360 L6370		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L6380 L6382		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L6384 L6386		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L6388		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L6400 L6450		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L6500 L6550		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L6570 L6580		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L6582 L6584		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L6586 L6588		Not Required Not Required Not Required	Not Required Not Required Not Required	Not Required Not Required Not Required	Not Required Not Required Not Required	Required Required Required	Not Required Not Required Not Required	Required Required Required	Required Required Required	
DME	L6590		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L6621 L6623		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L6624 L6625		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L6628 L6638		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L6646		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L6647 L6648		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME	L6686		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	

				Commercial	Commercial							
Is the code BH. D	MF Procedure	Povenue		Fully Insured	Self Funded			Safety Net	Safety Net	Safety Net	Safety Net	
eviCore, or Medic	cal? Code	Code	Rate Code	(Commercial Products, but not limited to: HMO, PPO,	(Commercial Products, but	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Health and Recovery Program	Diagnosis Requirements (if applicable)
				EPO, POS & HNY EPO)	EPO & POS)							
DME DME	L6687 L6688			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Required	Required Required	
DME	L6689			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L6690 L6692			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L6693 L6694			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Required	Required Required	
DME	L6695			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L6696 L6697			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L6700 L6703			Required Not Required	Required Not Required	Required Not Required	Required Not Required	Not Required Required	Not Required Not Required	Not Required Required	Not Required Required	
DME	L6704			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME DME	L6706 L6707			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L6708 L6709			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L6711			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L6712 L6713			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L6714 L6715			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Not Required	Required Not Required	
DME	L6721			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L6722 L6810			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L6880 L6881			Required	Required Required	Required	Required	Required Required	Required	Not Required	Not Required	
DME	L6882			Required Required	Required	Required Required	Required Required	Required	Required Required	Required Not Required	Required Required	
DME DME	L6883 L6884			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L6885			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME	L6895 L6900			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L6905 L6910			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L6915			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L6920 L6925			Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Required	Not Required Required	Required Required	Required Required	
DME DME	L6930 L6935			Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Required	Required Not Required	Required Required	Required Required	
DME	L6940			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME	L6945 L6950			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L6955 L6960			Not Required	Not Required	Not Required	Not Required Not Required	Required	Not Required	Required Required	Required Required	
DME	L6965			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required	Required Required	Not Required Not Required	Required	Required	
DME DME	L6970 L6975			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME	L7007			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
DME DME	L7008 L7009			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L7040 L7045			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L7170			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME DME DME	L7180 L7181			Not Required Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L7185 L7186			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	L7190			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
DME	L7191 L7366			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Required	Required Required	Required Required	
DME DME	L7368			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Required	Not Required Required	Not Required Required	
DME DME	L7404 L7405			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
DME DME	L7406 L7499			Required Not Required	Required Not Required	Required Not Required	Required Not Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	
DME DME	L5000 L5848			Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
DME DME	L7900 L7902			Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
DME	L8600			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: CS6.1, CS6.2, C79.61, C79.62, C48.1, C50.011, C50.012, C50.019, C50.111, C50.112, C50.119, C50.211, C50.212, C50.219, C50.311, C50.312, C50.319, C50.411, C50.412, C50.419, C50.511, C50.512, C50.519, C50.512,
DME DME	L8610 L8615			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
DME	L8619			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
DME DME	L8627 L8628			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Required	Not Required Required	
DME DME DME	L8692 L8693			Required Not Required	Required Not Required	Required Required	Required Not Required	Required Required	Required Not Required	Required Not Required	Required Not Required	
DME	L8701			Required	Required	Required	Required	Required	Required	Not Required	Not Required	
DME DME	L8702 S1030			Required Required	Required Required	Required Not Required	Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
DME DME	S1031 S1035			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
DME	S1036			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
DME DME	S1037 S1040			Required Required	Required Required	Not Required Not Required	Not Required Required	Required Required	Required Not Required	Not Required Required	Not Required Required	
DME	S5160			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
DME DME	S5161 S9433			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Required	Required Not Required	Required Not Required	
DME DME	T4521 T4522			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Not Required	Not Required Not Required	Not Required Not Required	
DME	T4523			Required	Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
DME DME	T4524 T4525			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Required	Required Required	Not Required Not Required	Not Required Not Required	
DME DME	T4526 T4527			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
DME	T4528			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
DME DME	T4529 T4530			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
DME	T4531	ш_Т		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	

				Commercial Fully Insured	Commercial							
Is the code BH, DME,	Procedure Code	Revenue Code	Rate Code	(Commercial Products, but	Self Funded	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery	Diagnosis Requirements (if applicable)
eviCore, or Medical?	Code	Code		not limited to: HMO, PPO, EPO, POS &	(Commercial Products, but not limited to: HMO, PPO, EPO & POS)			Child Health Plus	Essential Plan	Managed Medicaid	Program	
DME	T4532			HNY EPO) Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
DME DME	T4533 T4534			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	
DME DME	T4535 T4536			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
DME DME	T4537 T4538			Required Required	Required	Not Required Not Required	Not Required	Required	Required	Not Required	Not Required Not Required	
DME	T4540			Required	Required Required	Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required	
DME DME	T4541 T4542			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	
DME DME	T4543 T5001			Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Not Required Required	Not Required Required	
DME DME	V5014 V5030			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Required	Required Required	
DME DME	V5040 V5050			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Required	Required Required	
DME DME	V5060 V5070			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Required Not Required	Required Required	Required Required	
DME DMF	V5080 V5120			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required	Required Required	Required Required	
DME	V5130			Not Required	Not Required	Not Required	Not Required	Not Required	Required Required	Required	Required	
DME DME	V5140 V5150			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Required Required	Required Required	Required Required	
DME DME DME	V5190 V5230			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
DME DME	V5246 V5247			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
DME DME	V5252 V5253			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Required Required	Required Required	
DME DME	V5256 V5257			Not Required Not Required Not Required	Not Required Not Required Not Required	Not Required Not Required Not Required	Not Required Not Required Not Required	Not Required Not Required Required	Required Required	Required Required	Required Required	
DME DME DMF	V5258			Not Required Not Required	Not Required	Not Required	Not Required Not Required Not Required	Required	Required	Not Required	Not Required	
DME	V5260 V5261			Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Required Required	Required Required	Required Required	
EviCore (MSK)	0213T			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore (MSK)	0214T			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore (MSK)	0215T			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore (MSK)	0216T			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore (MSK)	0217T			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore (MSK)	0218T			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore	0266T				0				0			
(Cardiac Impl. Devices)	02661			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Radiology)	0331T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Radiology)	0332T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Radiation Therapy)	0394T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Radiation Therapy)	0395T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	0408T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
				.,	.,	.,	.,	.,	.,	.,	.,	
EviCore (Cardiac Impl. Devices)	0409T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore	0515T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Cardiac Impl. Devices)	03131			Required tilrough Evicore	Required dirough Evicore	Required dirough Evicore	Required dirough Evicore	Required through Evictore	Required through Evicore	Required through Evictore	Required dirough Evicore	
EviCore (Cardiac Impl. Devices)	0516T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore												
(Cardiac Impl. Devices)	0517T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	0519T	J	Ī	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
	-											
EviCore (Cardiac Impl. Devices)	0520T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore	0571T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Cardiac Impl. Devices) EviCore								-				
(Radiology)	0609T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiology) EviCore	0610T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiology)	0611T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Radiology)	0612T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	0614T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Cardiac Impl. Devices) EviCore	0623T										Required through EviCore	
(Radiology) EviCore				Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	.,	
(Radiology) EviCore	0624T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiology) EviCore	0625T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiology)	0626T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Radiology)	0633T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Radiology)	0634T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Radiology)	0635T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	

				Commercial	Commercial							
Is the code BH, DME,	Procedure	Revenue Code	Rate Code	Fully Insured	Self Funded	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net	Diagnosis Requirements (if applicable)
eviCore, or Medical?	Code	Code	Kate Code	not limited to: HMO, PPO, EPO, POS &	(Commercial Products, but not limited to: HMO, PPO, EPO & POS)	Pieucare	IIIIO D-SKP	Child Health Plus	Essential Plan	Managed Medicaid	Health and Recovery Program	pragricoso requiremento (ii applicable)
EviCore	0636T			HNY EPO) Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiology) EviCore	0637T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiology) EviCore (Radiology)	0638T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Radiology)	0648T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Radiology)	0649T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Radiology)	0697T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Radiology)	0698T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Radiology) EviCore	0710T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiology)	0711T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Radiology) EviCore	0712T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiology) EviCore	0713T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiology) EviCore	0742T 0747T			Required through EviCore	Required through EviCore Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore Required through EviCore	
(Radiation Therapy) EviCore	07471 0784T			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required through EviCore	Required through EviCore Not Required	Not Required	
(MSK) EviCore	0785T			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore	0795T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Cardiac Impl. Devices)	0/951			Required tilrough Evicore	Required tilrough Evicore	Required tilrough Evicore	Required dirough Evicore	Required through Evicore	Required through Evicore	Required through Evicore	Required tilrough Evicore	
EviCore (Cardiac Impl. Devices)	0796T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	0797T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	0801T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	0802T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	0803T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	0823T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	0825T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	0861T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	0862T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	0863T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Radiology)	0865T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Radiology)	0866T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	0915T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	0916T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	0923T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	0933T			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (MSK)	23000			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore (MSK) EviCore	23020			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore	23460			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore	27280			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore	29876			Required through EviCore Required through EviCore	Not Required Not Required	Required through EviCore Required through EviCore	Required through EviCore Required through EviCore	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
(MSK) EviCore	29879			Required through EviCore	Not Required Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required Not Required	Not Required Not Required	Not Required	
(MSK) EviCore	29883			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore (MSK)	29884			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore (MSK)	29885			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore (MSK)	29886			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore (MSK)	29887			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore (MSK)	29889			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore (MSK)	29914			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	

				Commercial	Commercial							
Is the code BH, DME, eviCore, or Medical?	Procedure	Revenue Code	Rate Code	Fully Insured	Self Funded	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery	Diagnosis Requirements (if applicable)
eviCore, or Medical?	Code	Code	Rate Code	not limited to: HMO, PPO, EPO, POS &	(Commercial Products, but not limited to: HMO, PPO, EPO & POS)	Pieuicare	IIIIO D-SKF	Child Health Plus	Essential Plan	Managed Medicaid	Program	plagriosis requirements (ii applicable)
EviCore	29915			HNY EPO) Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore	33206			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Cardiac Impl. Devices)												
(Cardiac Impl. Devices)	33207			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	33208			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	33212			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	33213			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore	33214			Danish the said Side	Description of Science	Description of the control of the co	Description theory to Core	Description of Con-	Description of the control of the co	Description of Green	Description of SciCon	
(Cardiac Impl. Devices) EviCore	33214			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Cardiac Impl. Devices)	33221			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	33224			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	33225			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	33227			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore	33228			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Cardiac Impl. Devices) EviCore												
(Cardiac Impl. Devices)	33229			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	33230			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	33231			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	33240			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	33249			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	33262			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore	33263			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Cardiac Impl. Devices) EviCore	33264											
(Cardiac Impl. Devices)				Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	33270			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	33274			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Cardiac Impl. Devices)	33289			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (MSK)	62324			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore (MSK)	62325			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore (MSK) EviCore	62326			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore	62327			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore	62355			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore	62365			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore	62367			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore	62368			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore	64479			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore	64480			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore	64483			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore	64484			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore	64490			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore	64491			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore	64492			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore	64493			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore	64494			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore	64495			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK)	64510	ļ		Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	

Part					Commercial	Commercial							
March Col.	Is the code BH, DME,	Procedure	Revenue		Fully Insured	Self Funded			Safety Net	Safety Net	Safety Net	Safety Net	
March Marc	eviCore, or Medical?	Code	Code	Rate Code	not limited to: HMO, PPO,	(Commercial Products, but not limited to: HMO, PPO,	Medicare	HMO D-SNP	Child Health Plus	Essential Plan	Managed Medicaid	Health and Recovery Program	Diagnosis Requirements (if applicable)
March Marc	EviCore				HNY EPO)	EPO & POS)							
March Marc	(MSK)				.,		.,	.,					
March Marc	(MSK)												
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Section Sect	(MSK)												
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Is the code BH, DME, eviCore, or Medical?	Procedure Code	Revenue Rate Code	(Commercial Products, but	(Commercial Products, but	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery	Diagnosis Requirements (if applicable)
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EviCore (Radiology)	77021		Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Radiology)	77022		Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore (Radiology)	77084		Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
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				Commercial Fully Insured	Commercial							
Is the code BH, DME,	Procedure	Revenue Code	Rate Code	(Commercial Products, but	Self Funded	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery	Diagnosis Requirements (if applicable)
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Is the code BH, DME,	Procedure	Revenue	Rate Code	Fully Insured	Self Funded		HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net	Safety Net	Diagnosis Requirements (if applicable)
eviCore, or Medical?	Code	Code	Kate Code	not limited to: HMO, PPO, EPO, POS &	(Commercial Products, but not limited to: HMO, PPO,	Medicare	HMO D-SNP	Child Health Plus	Essential Plan	Safety Net Managed Medicaid	Program	Diagnosis Requirements (if applicable)
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(Radiology) EviCore	C8911			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiology)	C8912			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiology) EviCore	C8913			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiology) EviCore	C8914			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiology) EviCore	C8918			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiology) EviCore	C8919 C8920			Required through EviCore Required through EviCore	Required through EviCore Required through EviCore	Required through EviCore Required through EviCore	Required through EviCore Required through EviCore	Required through EviCore Required through EviCore	Required through EviCore Required through EviCore	Required through EviCore Required through EviCore	Required through EviCore Required through EviCore	
(Radiology) EviCore						.,	.,			.,	.,	
(Radiology) EviCore	C8931 C8932			Required through EviCore Required through EviCore	Required through EviCore Required through EviCore	Required through EviCore Required through EviCore	Required through EviCore Required through EviCore	Required through EviCore Required through EviCore	Required through EviCore Required through EviCore	Required through EviCore Required through EviCore	Required through EviCore Required through EviCore	
(Radiology) EviCore	C8932 C8933											
(Radiology) EviCore	C8933			Required through EviCore Required through EviCore	Required through EviCore	Required through EviCore Required through EviCore	Required through EviCore Required through EviCore	Required through EviCore	Required through EviCore Required through EviCore	Required through EviCore Required through EviCore	Required through EviCore	
(Radiology) EviCore	C8935			Required through EviCore Required through EviCore		.,	.,		.,		Required through EviCore	
(Radiology) EviCore	C8935				Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore		
(Radiology) EviCore				Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiology) EviCore	C9791 G0219			Required through EviCore Required through EviCore	Required through EviCore Required through EviCore	Required through EviCore Not Required	Required through EviCore Not Required	Required through EviCore Required through EviCore	Required through EviCore Required through eviCore	Required through EviCore Not Required	Required through EviCore Not Required	
(Radiology) EviCore	G0219 G0235								.,			
(Radiology) EviCore	G0235 G0252			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiology) EviCore				Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(MSK) EviCore	G0260			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore	G0339			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiation Therapy) EviCore	G0340			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiation Therapy)	G0458			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiation Therapy)	G0563			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiation Therapy) EviCore	G6001			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiation Therapy) EviCore	G6002			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiation Therapy) EviCore	G6003			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiation Therapy)	G6004			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiation Therapy) EviCore	G6005			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiation Therapy) EviCore	G6006			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiation Therapy) EviCore	G6007			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiation Therapy) EviCore	G6008			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiation Therapy) EviCore	G6009			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiation Therapy) EviCore	G6010			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiation Therapy) EviCore	G6011			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiation Therapy) EviCore	G6012			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiation Therapy) EviCore	G6013			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiation Therapy)	G6014			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiation Therapy) EviCore	G6015			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiation Therapy) EviCore	G6016			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiation Therapy) EviCore	G6017			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiation Therapy) EviCore	S2095			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiology)	S8042			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
(Radiology)	S8085			Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	Required through EviCore	
EviCore/Medical (MSK) EviCore/Medical	0095T			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Not Required	Not Required	
(MSK) EviCore/Medical	0098T			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Not Required	Not Required	
(MSK) EviCore/Medical	0164T			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Not Required	Not Required	
(MSK) EviCore/Medical	0165T			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Not Required	Not Required	
(MSK) EviCore/Medical	0200T			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
(MSK) EviCore/Medical	0201T			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
(MSK) EviCore/Medical	0219T			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore/Medical	0274T			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK)	0275T			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK) EviCore/Medical	0627T			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Not Required	Not Required	
(MSK)	0628T			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Not Required	Not Required	

				Commercial	Commercial							
Is the code BH. DME.	Procedure	Revenue		Fully Insured	Self Funded		HMO D-SNP	Safety Net	Safety Net	Safety Net	Safety Net	
Is the code BH, DME, eviCore, or Medical?	Code	Code	Rate Code	not limited to: HMO, PPO,	(Commercial Products, but not limited to: HMO, PPO,	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Health and Recovery Program	Diagnosis Requirements (if applicable)
EviCore/Medical				EPO, POS & HNY EPO)	EPO & POS)							
(MSK) EviCore/Medical	0629T			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore/Medical	0630T			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore/Medical	20930			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore/Medical	20931			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore/Medical	20936			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore/Medical	20937			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK)	20938			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical (MSK) EviCore/Medical	22207			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Not Required	Not Required	
(MSK) EviCore/Medical	22208			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Not Required	Not Required	
(MSK) EviCore/Medical	22210			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
(MSK) EviCore/Medical	22214			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
(MSK)	22216			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK) EviCore/Medical	22220			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
(MSK) EviCore/Medical	22224			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
(MSK) EviCore/Medical	22226			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
(MSK) EviCore/Medical	22510			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	22511			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
EviCore/Medical (MSK) EviCore/Medical	22512			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	22513 22514			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	22514			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required Required	Required Required	Required Required	
(MSK) EviCore/Medical	22515			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
(MSK) EviCore/Medical (MSK)	22526				Not kequired Required			Not kequired Required		i i	Not Required	
EviCore/Medical	22527			Required through EviCore Required through EviCore	Required	Required through EviCore Required through EviCore	Required through EviCore Required through EviCore	Required	Required Required	Not Required Required	Required	
(MSK) EviCore/Medical	22533			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
(MSK) EviCore/Medical	22551			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	22552			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	22554			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	22558			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
(MSK) EviCore/Medical (MSK)	22585			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical	22586			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Not Required	Not Required	
(MSK) EviCore/Medical	22595			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore/Medical (MSK)	22600			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK)	22612			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK)	22614			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical	22630			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical (MSK)	22632			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
EviCore/Medical (MSK)	22633			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK)	22634			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK)	22841			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical (MSK)	22842			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK)	22843			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
EviCore/Medical (MSK)	22844			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
EviCore/Medical	22845			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical	22846			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK)	22847			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK)	22848			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
EviCore/Medical (MSK)	22853			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical	22854			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical	22856			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK)	22857			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK)	22858			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical	22859			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
IACE				1	1	l	1	1	1	1	1	

				Commercial	Commercial							
Is the code BH, DME, eviCore, or Medical?	Procedure	Revenue		Fully Insured	Self Funded		HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net	
eviCore, or Medical?	Code	Code	Rate Code	not limited to: HMO, PPO,	(Commercial Products, but not limited to: HMO, PPO,	Medicare	HMO D-SNP	Child Health Plus	Essential Plan	Managed Medicaid	Health and Recovery Program	Diagnosis Requirements (if applicable)
EviCore/Medical				EPO, POS & HNY EPO)	EPO & POS)							
(MSK)	22860			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK) EviCore/Medical	22861			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
(MSK) EviCore/Medical	22862			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Not Required	Not Required	
(MSK) EviCore/Medical	22867			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
(MSK) EviCore/Medical	22868			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
(MSK) EviCore/Medical	22869			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
(MSK)	22870			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK) EviCore/Medical	23120			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Not Required	Not Required	
(MSK) EviCore/Medical	23130			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
(MSK) EviCore/Medical	23410			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	23412			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK)	23415			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Not Required	Required	
EviCore/Medical (MSK) EviCore/Medical	23420			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	23430			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	23440			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Not Required	Required	
(MSK) EviCore/Medical	23450			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Not Required	Not Required	
(MSK) EviCore/Medical	23455			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK) EviCore/Medical	23462			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	23465 23466			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	23406			Required through EviCore	Not Required Required	Required through EviCore	Required through EviCore	Not Required	Required Required	Not Required Required	Required	
(MSK) EviCore/Medical	23470			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	23472				Not Required			· ·		i i		
(MSK) EviCore/Medical	23473			Required through EviCore Required through EviCore	Not Required	Required through EviCore Required through EviCore	Required through EviCore Required through EviCore	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
(MSK) EviCore/Medical	23700			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore/Medical	27096			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	27125			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
(MSK) EviCore/Medical	27130			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	27132			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical (MSK)	27134			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical	27137			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
(MSK) EviCore/Medical	27138			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical (MSK)	27278			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical (MSK)	27279			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK)	27332			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical	27333			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore/Medical (MSK)	27334			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK)	27335			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
EviCore/Medical (MSK)	27403			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK)	27405			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical (MSK)	27412			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK)	27415			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK)	27416			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
EviCore/Medical (MSK)	27418			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK)	27420			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Required	Required	Not Required	Not Required	
EviCore/Medical (MSK)	27422			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical (MSK)	27424			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK)	27425			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK)	27427			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical (MSK)	27428			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Not Required	Required	
EviCore/Medical (MSK)	27429			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
EviCore/Medical (MSK)	27430			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical (MSK)	27438			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
	•	•	•									

				Commercial	Commercial							
Is the code BH, DME,	Procedure	Revenue		Fully Insured	Self Funded		HMO D-SNP	Safety Net	Safety Net	Safety Net	Safety Net	
Is the code BH, DME, eviCore, or Medical?	Code	Code	Rate Code	not limited to: HMO, PPO,	(Commercial Products, but not limited to: HMO, PPO,	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Health and Recovery Program	Diagnosis Requirements (if applicable)
EviCore/Medical				EPO, POS & HNY EPO)	EPO & POS)							
(MSK) EviCore/Medical	27440			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
(MSK) EviCore/Medical	27441			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore/Medical	27442			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
(MSK) EviCore/Medical	27443			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore/Medical	27446			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
(MSK) EviCore/Medical	27447			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK)	27486			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK) EviCore/Medical	27487			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	27570			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore/Medical	29805			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
(MSK) EviCore/Medical	29806			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
(MSK)	29807			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK) EviCore/Medical	29819			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	29820			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	29821			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	29822			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	29823			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK) EviCore/Medical	29824			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	29825 29826			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required Required	Required	
(MSK) EviCore/Medical	29826			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Required Not Required	Required Required	Required	Required Required	
(MSK) EviCore/Medical	29828			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore/Medical (MSK)	29828				Not Required Not Required					Not kequired Required		
(MSK) EviCore/Medical	29860			Required through EviCore Required through EviCore	Not Required	Required through EviCore Required through EviCore	Required through EviCore Required through EviCore	Not Required Not Required	Required Required	Required	Required Required	
(MSK) EviCore/Medical	29862			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	29863			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	29866			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
(MSK) EviCore/Medical	29867			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Not Required	Required	Required	
(MSK) EviCore/Medical	29868			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical (MSK)	29870			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical	29871			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	29873			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
(MSK) EviCore/Medical (MSK)	29874			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK)	29875			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK)	29877			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical	29880			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical (MSK)	29881			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK)	29888			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK)	62263			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
EviCore/Medical (MSK)	62264			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
EviCore/Medical (MSK)	62280			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK)	62281			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK)	62282			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK)	62287			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
EviCore/Medical (MSK)	62292			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical (MSK)	62320			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
EviCore/Medical (MSK)	62321			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK)	62322			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical (MSK)	62323			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical	62350			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical (MSK)	62351			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical (MSK)	62360			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK)	62361			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
ISKI	•											

				Commercial Fully Insured	Commercial Self Funded							
Is the code BH, DME, eviCore, or Medical?	Procedure Code	Revenue Code	Rate Code	(Commercial Products, but not limited to: HMO, PPO, EPO, POS & HNY EPO)	(Commercial Products, but not limited to: HMO, PPO,	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery Program	Diagnosis Requirements (if applicable)
EviCore/Medical	62362				EPO & POS)				Not Required	Not Required		
(MSK) EviCore/Medical				Required through EviCore		Required through EviCore	Required through EviCore	Not Required			Not Required	
(MSK) EviCore/Medical	62380			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore/Medical	63001			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	63005			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
(MSK) EviCore/Medical	63012			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	63015			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
(MSK)	63017			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
EviCore/Medical (MSK) EviCore/Medical	63030			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	63035			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	63040			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
(MSK) EviCore/Medical	63042			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK)	63043			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
EviCore/Medical (MSK)	63044			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
EviCore/Medical (MSK) EviCore/Medical	63045			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK)	63047			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK)	63048			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK)	63050			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
EviCore/Medical (MSK)	63051			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
EviCore/Medical (MSK)	63052			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK)	63053			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK)	63056			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK)	63057			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Required	Required	
EviCore/Medical (MSK)	63075			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical (MSK)	63076			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK)	63081			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK)	63082			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK)	63087			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK)	63088			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK)	63090			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK)	63091			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK)	63102			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK)	63103			Required through EviCore	Required	Required through EviCore	Required through EviCore	Required	Required	Required	Required	
EviCore/Medical (MSK)	63650			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK)	63655			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK)	63663			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical (MSK)	63664			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical	63685			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical (MSK)	64451			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK)	64624			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical (MSK)	64625			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
EviCore/Medical (MSK)	64628			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical	64629			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
EviCore/Medical	64632			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore/Medical	C9757			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Required	Required	Required	
(MSK) EviCore/Medical	M0076			Required through EviCore	Not Required	Required through EviCore	Required through EviCore	Not Required	Required	Not Required	Not Required	
(MSK) EviCore/Medical	S2118			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK) EviCore/Medical	S2348			Required through EviCore	Required	Required through EviCore	Required through EviCore	Not Required	Not Required	Not Required	Not Required	
(MSK)	32340			required unrough EviCore	Required	required ullough EviCore	required unrough EVICORE	ног кединеи	ног кединеи	Not Required	Not Required	

				Commercial Fully Insured	Commercial Self Funded							
Is the code BH, DME, eviCore, or Medical?	Procedure Code	Revenue Code	Rate Code	(Commercial Products, but	(Commercial Products, but	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)
				EPO, POS & HNY EPO)	not limited to: HMO, PPO, EPO & POS)						Program	
	Inpatient Admissions											
	(except routine											
Inpatient Admissions (except routine	Maternity) to any facility											
Maternity) to any facility including hospital,	including hospital,											
elective and direct admit, behavioral health,	elective and direct admit,			Required	Required	Required	Required	Required	Required	Required	Required	
substance abuse, and hospital to hospital	behavioral health,											
transfers.	substance abuse, and hospital to											
	hospital to hospital transfers.											
Acute Rehab/ SNF	Acute Rehab/											
Admissions	SNF Admissions			Required	Required	Required through CareCentrix	Required	Required	Required	Required	Required	
Medical Medical	0006M 0007M			Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0012M 0013M			Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0015M 0016M			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0018M 0019M			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0020M 0001U			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0005U 0017U			Required Required	Required Required	Required Required	Required Required	Not Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical Medical	0018U 0026U 0027U			Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical	0030U 0034U			Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Required Required Required	Required Not Required	Not Required Not Required Not Required	Not Required Not Required Not Required	
Medical Medical Medical	0035U 0036U			Required Not Required Required	Required Not Required Required	Required Not Required Required	Required Not Required Required	Required Required Required	Required Required Required	Not Required Not Required Not Required	Not Required Not Required Not Required	
Medical Medical	0037U 0045U			Required Required	Required Required	Required Not Required	Required Not Required	Not Required Required	Required Required	Not Required Not Required Not Required	Not Required Not Required	
Medical Medical	0047U 0055U			Not Required Required	Not Required Required	Required Required	Required Required	Not Required Required	Required Not Required	Not Required Not Required Not Required	Not Required Not Required	
Medical Medical	0060U 0070U			Required Not Required	Required Not Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required Not Required	
Medical Medical	0071U 0072U			Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0073U 0074U			Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0075U 0076U			Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0080U 0087U			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0088U 0089U			Required Required	Required Required	Not Required Required	Not Required Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0090U 0092U			Required Not Required	Required Not Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0101U 0102U			Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0103U 0118U			Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0129U 0130U			Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0131U 0132U 0133U			Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required Not Required	Not Required Not Required	
Medical Medical	0134U			Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Not Required	Not Required Not Required	
Medical Medical	0135U 0136U			Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0137U 0138U 0153U			Required Required Required	Required Required Required	Required Required Required	Required Required Required	Required Required Required	Required Required Required	Not Required Not Required Not Required	Not Required Not Required Not Required	
Medical Medical	0154U 0160U			Required Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Not Required Not Required	Not Required Not Required Not Required	
Medical Medical	0161U 0162U			Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0171U 0172U			Required Required	Required Required	Required Required	Required Required	Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0173U 0175U			Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0179U 0209U			Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0211U 0213U			Not Required Required	Not Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0214U 0215U			Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0218U 0220U			Required Required	Required Required	Not Required Required	Not Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0228U 0229U			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0230U 0235U			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0236U 0237U			Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0238U 0239U			Required Required	Required Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0242U 0243U			Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0244U 0245U			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0247U 0249U			Required Required	Required Required	Not Required Required	Not Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0250U 0251U			Required Required	Required Required	Not Required Not Required	Required Not Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	
medical	0252U		1	Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	

Column C				Commercial	Commercial							
	Is the code BH. DMF.	Procedure	Revenue	Fully Insured	Self Funded			Safety Net	Safety Net	Safety Net	Safety Net	
Column C	eviCore, or Medical?	Code	Code	not limited to: HMO, PPO,	(Commercial Products, but	Medicare	HMO D-SNP	Child Health Plus	Essential Plan	Managed Medicaid	Health and Recovery Program	Diagnosis Requirements (if applicable)
The column				HNY EPO)								
The column The	Medical											
The column The	Medical											
100	Medical	0261U		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
104	Medical	0263U		Required	Required	Not Required	Not Required	Required	Required Required	Not Required	Not Required	
March Marc				Required Required	Required Required	Not Required Not Required	Not Required Not Required			Not Required Not Required	Not Required Not Required	
Prop	Medical	0266U		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
March 100	Medical	0286U		Required	Required	Not Required	Not Required	Required	Required	Required	Required	
March Color Colo	Medical Medical			Required Required	Required Required			Required Required		Required Required	Required Required	
Mode	Medical Medical			Required Provising	Required Required	Required	Required Populared	Required Required	Required Required	Required Promitted	Required	
The color	Medical	0291U		Required	Required	Required	Required	Required	Required	Required	Required	
March Marc	Medical			Required	Required	Required	Required	Required	Required	Required	Required	
March State Stat	Medical Medical	0294U 0295U		Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	
Mode Col.	Medical	0296U		Required	Required	Required	Required	Required	Required	Required	Required	
March Marc	Medical	0298U		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Note Col.	Medical									Required Required		
100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100	Medical Medical			Required					Required			
March 100	Medical	0308U		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
March Cold March	Medical	0310U		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
March 1985	Medical	0312U		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
March Marc	Medical	0314U		Required	Required	Required	Required	Required	Required	Not Required	Not Required	
No. 100	Medical	0317U		Required	Required	Required	Required	Required	Required	Not Required	Not Required	
March Color												
	Medical	0320U		Required	Required	Required	Required	Required	Required	Not Required	Not Required	
March 1952	Medical	0326U		Required	Required	Required	Not Required	Required	Not Required	Not Required	Not Required	
March Marc												
Model 1072	Medical Medical								Required Required	Not Required		
	Medical	0337U		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Montage Color				Required	Required			Required				
	Medical	0343U		Required	Required	Required	Required	Required	Required	Not Required	Not Required	
Model 1,540	Medical	0347U		Required	Required	Required	Required	Required	Required	Not Required	Not Required	
Model 1980											Not Required	
Model 1950	Medical	0350U		Required	Required	Required	Required	Required	Required	Not Required	Not Required	
Model 1991	Medical	0356U		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Mortal Marco	Medical	0359U		Required	Required	Required	Required	Required	Required	Not Required	Not Required	
Model (1951) Research Resear	Medical Medical			Required Required		Not Required Required	Not Required Required		Required Required	Not Required Not Required		
Model 1989 Reparted Reparted Reparted Not Reparted R	Medical Modical	0362U		Required Provising	Required Required	Not Required	Not Required	Required Required	Required Required	Not Required	Not Required	
Medial (1980) Fearered Fearere	Medical	0364U		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Modes 10791		0366U		Required Required		Not Required	Not Required			Not Required Not Required	Not Required Not Required	
Medical COVID Required Re	Medical Medical	0368U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required				
Medical 0779 Required R	Medical	0371U		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical 0.77U Researed Researed Mod Resea	Medical	0375U		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical 0.1796 Required Required Reduced Required Reduced Required Req												
Medical OSE/11 Required R	Medical	037911		Required	Required	Not Required	Not Required	Required			Not Required	
Medical O.383 Required Required Not Required Not Required Required Required Not Required No	Medical	0381U		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical OSSU Required Required Not Requir	Medical	0383U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required		Not Required Not Required	
Medical 0387U Required Repuired Not Required												
Medical 0390 Required Required Not Required	Medical	0387U		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical 03931 Required Required Required Required Not Req	Medical	0389U		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical 0393U Required Required Required Not												
Medical 0399-U Required Repolired Not Required Not Requir	Medical			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical O3981 Required Required Not Requi	Medical	0394U		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical 0399.1 Required Required Not Require	Medical	0398U		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical 04031 Required Required Required Not	Medical			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical 046/U Required Required Required Required Not Req	Medical	0401U		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical 0405U Required Required Not Required	Medical	0404U		Required Required	Required Required	Required	Required Required	Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical 04/7U Required Required Not Required	Medical	0405U 0406U		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical 0411U Required Required Required Required Not Required	Medical	0407U		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical 041.01 Required Required Required Not Required	Medical	0410U		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical 041.3.0 Required Required Not Requir				Required	Required	Required	Required	Not Required	Not Required	Not Required Not Required	Not Required Not Required	
	Medical			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
	Medical			Required								

			Commercial	Commercial							
Is the code BH, DME,	Procedure	Revenue	Fully Insured	Self Funded			Safety Net	Safety Net	Safety Net	Safety Net	
eviCore, or Medical?	Code	Revenue Code	Rate Code (Commercial Products, but not limited to: HMO, PPO, EPO, POS &	(Commercial Products, but	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Health and Recovery Program	Diagnosis Requirements (if applicable)
			HNY EPO)	EPO & POS)							
Medical Medical	0417U 0418U		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0419U 0420U		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	0421U		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	0422U 0423U		Required Required	Required Required	Not Required Required	Not Required Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0424U 0425U		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0426U		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	0429U 0433U		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0434U 0435U		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0436U 0437U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	0438U		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	0439U 0440U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0443U 0444U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	0445U 0446U		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	0447U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0449U 0452U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0453U 0454U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	0457U		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	0459U 0460U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0461U 0462U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	0463U		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	0464U 0465U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0466U 0467U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	0468U		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	0469U 0470U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0471U 0472U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	0473U 0474U		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	0474U 0475U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0476U 0477U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical	0478U		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical Medical	0479U 0481U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0485U 0486U		Required Required	Required Required	Required Not Required	Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0487U 0489U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical	0490U		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical Medical	0491U 0493U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0494U 0495U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0496U 0497U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical	0498U		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical Medical	0499U 0501U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0503U 0508U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical	0509U		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical Medical	0514U 0515U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0516U 0517U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical	0518U		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical Medical	0519U 0520U		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0523U 0530U		Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0532U 0533U		Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical	0534U		Required	Required	Required	Required	Not Required	Required	Not Required	Not Required	
Medical Medical	0536U 0537U		Required Required	Required Required	Required Required	Required Required	Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical	0538U 0539U		Required Required	Required	Required Required	Required	Not Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0540U		Required	Required Required	Required	Required Required	Required	Required	Not Required	Not Required	
Medical Medical	0542U 0543U		Required Required	Required Required	Required Required	Required Required	Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0544U 0549U		Required Required	Required Required	Required Required	Required Required	Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical	0550U		Required	Required	Required	Required	Not Required	Required	Not Required	Not Required	
Medical Medical	0551U 0552U		Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical	0553U 0554U		Required	Required	Required Required	Required	Not Required	Required Required	Not Required Not Required	Not Required	
Medical Medical	0555U		Required Required	Required Required	Required	Required Required	Not Required Not Required	Required	Not Required	Not Required Not Required	
Medical Medical	0558U 0562U		Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0567U 0568U		Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical	0569U		Required	Required	Required	Required	Not Required	Required	Not Required	Not Required	
Medical Medical	0571U 0572U		Required Required	Required Required	Required Required	Required Required	Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0573U 0575U		Required Required	Required Required	Required Not Required	Required Required	Required Required	Required Required	Not Required Required	Not Required Required	
Medical	0576U		Required	Required	Required	Required	Required	Required	Required	Required	
Medical	0578U		Required	Required	Required	Required	Required	Required	Required	Required	

Column C				Commercial	Commercial							
March Marc	Is the code BH, DME,	Procedure	Revenue	Fully Insured	Self Funded	M	UMO D CND	Safety Net	Safety Net	Safety Net	Safety Net	Discourie Benedicture de (de continuedo)
The column	eviCore, or Medical?	Code	Code	not limited to: HMO, PPO,	(Commercial Products, but not limited to: HMO, PPO,	Medicare	HMO D-SNP	Child Health Plus	Essential Plan	Managed Medicaid	Program	Diagnosis κequirements (π applicable)
March 1900	Modical	059311		HNY EPO)		Required	Required	Required	Required	Paguirod	Poguired	
March Marc	Medical	0583U		Required	Required	Required	Required	Required	Required	Required	Required	
The column	Medical	0586U		Required	Required	Required	Required	Required	Required	Required	Required	
March Marc	Medical	0592U		Required	Required	Required	Required	Required	Required	Required	Required	
March Marc	Medical Medical	0596U 0597U		Required Required	Required Required	Required Required	Required			Required		
March Marc				Required	Required	Required				Required		
Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec Dec De	Medical	0072T		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
March Col.	Medical	0076T		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
March Color	Medical	0174T		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
	Medical	0220T		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
1.00	Medical	0221T 0232T		Required	Required	Required	Required	Not Required	Required	Not Required	Not Required	
Mar. 100	Medical	0278T 0333T		Required Required	Required Required	Not Required Not Required						
March 100				Required	Required							
Add	Medical	0342T		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Note 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100	Medical	0358T		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
March Marc	Medical	0397T		Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
March Marc	Medical	0441T		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
March Marc	Medical	0446T		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required Not Required	
Property	Medical	0448T		Required	Required	Not Required		Required	Required	Not Required	Not Required	
	Medical Medical			Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
March Marc	Medical	0479T		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Deciding Column	Medical	0483T		Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
March Marc	Medical	0525T		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Part	Medical	0545T		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
March Marc	Medical	0570T		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
March 1997	Medical			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
March 1977	Medical	0585T		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Mode 1997	Medical	0587T		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Model Mode	Medical	0596T		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Model	Medical	0607T		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Model Mode	Medical Medical											
Model Mode	Medical	0619T 0620T				Not Required Not Required						
Medial (951) Record Record				Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Model Gelf Beauted Beauted Med Board Med	Medical	0645T		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Model (1957) Beared Beared Mel Boured Mel Boured	Medical	0647T		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical 1,006.77	Medical	0652T		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical (6677) Bosovered Bosovered Ved Recounted Med Bosovered Ved Recounted Med Bosovered Ved Recounted Medical (6677) Recounted Recounted Ved Recounted Ve	Medical	0655T		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical OSTT Required Required Recurred Required Reduced	Medical	0657T		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical GoTT Required Required Required Red Required	Medical Medical		T	Required Required		Not Required Not Required	Not Required Not Required			Not Required Not Required	Not Required Not Required	
Medical 10697T Beaumed Required Most Beaumed Not Required Not Requi	Medical			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical 06877 Required Required Not Requi	Medical	0673T		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Metical 0697T Required Required Not Required	Medical	0687T		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical 06967 Required Required Not Required	Medical	0692T		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical 0797T Recuired Required Not Required	Medical	0695T		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical 0714T Required Required Not Required	Medical	0704T		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical 0720T Required Required Required Not	Medical Medical											
Medical 0798T Required Required Required Required Required Required Required Not Required Not Required Not Required Not Required Not Required Requir	Medical			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	-
Medical 0740T Required Required Not Required Not Required Not Required Not Required Not Required Required Required Not Required N	Medical			Required Required	Required Required	Required Required	Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical 0743T Required Req	Medical	0740T		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical 0745T Required Req	Medical	0743T		Required	Required	Required	Required	Required	Required	Not Required	Not Required	
Medical 0746T Required Required Required Required Required Required Not Required No	Medical	0745T		Required	Required	Required	Required	Required	Required	Not Required	Not Required	
Medical 0749T Required Required Not Requ	Medical	0748T		Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical 0751T Not Required N	Medical Medical			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required Not Required	
Medical (17537) Not Required Not Required Not Required Not Required Required Required Required Not Required N	Medical			Not Required	Not Required	Not Required	Not Required	Required Required	Required Required	Not Required	Not Required	
Medical 0755T Not Required	Medical	0753T		Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical 075/T Not required Not	Medical	0755T		Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical 0758T Not Required Not Required Not Required Not Required Required Required Not Required Not Required Not Required	Medical	0757T		Not Required	Not Required	Not Required	Not Required	Required	Required		Not Required	
	Medical	0758T		Not Required Not Required				кеquired Required		Not Required Not Required		

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Is the code BH, DME,	Procedure Code	Revenue Code	Rate Code	(Commercial Products but	Self Funded	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery	Diagnosis Requirements (if applicable)
eviCore, or Medical?	Code	Code	nate code	not limited to: HMO, PPO, EPO, POS &	(Commercial Products, but not limited to: HMO, PPO,	riculture	11110 0 0111	Child Health Plus	Essential Plan	Managed Medicaid	Program	Diagnoss requirements (ii appressie)
Medical	0760T			Not Required	EPO & POS) Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical Medical	0761T 0762T			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical	0763T			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical Medical	0765T 0766T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0767T 0770T			Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical	0771T			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical Medical	0772T 0773T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0774T 0776T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical	0777T			Required	Required	Not Required Not Required	Not Required Not Required	Required	Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0778T 0779T			Required Required	Required Required	Not Required	Not Required	Required Required	Required Required	Not Required	Not Required	
Medical Medical	0780T 0783T			Required Required	Required Required	Not Required Required	Not Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical	0786T			Required Required	Required Required	Required Required	Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0788T 0789T			Required	Required	Required	Required Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	0790T 0793T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	0794T			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	0804T 0805T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0806T 0807T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	0808T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	0810T 0811T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0812T 0813T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	0815T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	0816T 0817T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0820T 0821T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	0822T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	0827T 0828T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0830T 0831T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	0832T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required	Not Required Not Required	Not Required Not Required Not Required	Not Required Not Required	
Medical Medical	0833T 0834T			Required	Required	Not Required	Not Required	Not Required Not Required	Not Required	Not Required	Not Required	
Medical Medical	0835T 0836T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	0837T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	0839T 0840T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0841T 0842T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	0843T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	0844T 0845T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0846T 0847T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	0848T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	0849T 0850T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0851T 0852T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	0853T			Required Required	Required Required	Not Required	Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required	
Medical Medical	0854T 0855T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0856T 0858T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	0860T			Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0864T 0867T			Required Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	0868T 0869T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	0870T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	0871T 0872T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0873T 0874T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	0875T			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	0876T 0881T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	0884T 0885T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	0886T			Required Required	Required Required	Not Required	Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required	
Medical Medical	0888T 0897T			Required	Required	Not Required Not Required	Not Required Not Required	Not Required	Not Required	Not Required	Not Required Not Required	
Medical Medical	0898T 0908T			Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	
Medical Medical	0911T 0912T			Required Required	Required Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	
Medical	0941T			Required	Required	Required	Required	Required	Required	Required	Required	
Medical Medical	0942T 0943T			Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	0963T 0977T			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	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 degroes codes EXCEPT. CS6.1, CS6.2, C79.61, C79.62, C48.1,CS0.011, CS0.012, CS0.013, CS0.111, CS0.112, CS0.112, CS0.112, CS0.113, CS0
Medical	11950			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical Medical	11951 11952			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical	11954			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	

Is the code BH, DME, eviCore, or Medical?	Procedure Code	Revenue Code	Rate Code	Commercial Fully Insured (Commercial Products, but not limited to: HMO, PPO, EPO, POS & HNY EPO)	Commercial Self Funded (Commercial Products, but not limited to: HMO, PPO, EPO & POS)	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery Program	Diagnosis Requirements (if applicable)
Medical	13100			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)	Ph is Bequired for all deproves crise. EMCEPT. CS5.1, CS5.2, C76.1, C78.2, C76.1, C50.11, C50.
Medical	13101			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)	Ph 18 Sequind 16 of Septiment (CS1, CS3, CS3, CS3, CS3, CS2, CS4, CS3, CS3, CS3, CS3, CS3, CS3, CS3, CS3
Medical	13102			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical Medical	13120 13121			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Not Required	Required Not Required	
Medical Medical	13122			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Not Required	Required Not Required	
Medical	13131 13132			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical Medical	13133 13151			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required	Required	
Medical	14000			Not Required	Not Required	Not Required	Not Required	Required Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Required Required (By Diagnosis - see last column)	Required Required (By Diagnosis - see last column)	PA is <u>Required</u> for all diagnosis codes <u>EXCEPT</u> : CS6.1, CS6.2, C79.61, C79.62, C48.1,CS0.011, CS0.012, CS0.019, CS0.111, CS0.112, CS0.119, CS0.211, CS0.212, CS0.219, CS0.211, CS0.312, CS0.319, CS0.411, CS0.412, CS0.419, CS0.511, CS0.512, CS0.519, CS0.51
Medical	14001			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 & Required for all disposits codes EXCEPT. CS1, CS6, 279.61, C79.62, C48.1,C50.011, C50.012, C50.01
Medical	14301			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)	Ph. Beguired for all disposits codes (EXCEPT, CS.1, CS.2, C79.61, C79.62, C48.1,C50.011, C50.012, C50.
Medical	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)	Ph. Beguined for all disprosis codes (EECEPT, CSS.1, CSS.2, CPS6.1, CPS6.2, CR4.1, CS0.111, CS0.111, CS0.112, C
Medical	15738			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 <u>Required</u> for all diagnosis codes <u>EXCEPT</u> : CS6.1, CS6.2, C79.61, C79.62, C48.1,CS0.011, CS0.012, CS0.013, CS0.011, CS0.012, CS0.013, CS0.01
Medical	15740			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: CS6.1, CS6.2, C79.61, C79.62, C48.1,CS0.011, CS0.012, CS0.019, CS0.111, CS0.112, CS0.019, CS0.211, CS0.212, CS0.219, CS0.211, CS0.312, CS0.319, CS0.411, CS0.412, CS0.419, CS0.511, CS0.512, CS0.519, CS0.511, CS0.512, CS0.511, CS0.512, C
Medical	15769			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)	As a Regulated for 41 Desposic Codes (EXCEST, CS0.011, CS0.012, CS0.010, CS0.011, CS0.112, CS0.112, CS0.112, CS0.013, CS0.012, CS
Medical	15770			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)	Ph. Beguited for all disposits codes (EXCEPT, CS.1, CS.2, CP.61, CP.62, C.98.1, CS.011, CS.011
Medical	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)	Ph. Beguined for all deprovis codes (EMEER: CS.1, CS.2, CP.61, CP.62, C.64, L.550.11, C.50.11, C.50.11
Medical	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)	Ph 18 Beautinal for all supposes codes (EXCEPT, CS1, CS3, CY36, CY36, CY62, CS2, CS3, CY31, CS3, CY36, CY62, CS3, CS3, CS3, CS3, CS3, CS3, CS3, CS3
Medical	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)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	PA & Required for Al Diagnosis Codes EXCEPT. CS0.011, CS0.012, CS0.019, CS0.111, CS0.112, CS0.119, CS0.211, CS0.212, CS0.219, CS0.211, CS0.212, CS0.219, CS0.211, CS0.212, CS0.219, CS0.211, CS0.212, CS0.219, CS0.211, CS0.212, CS0.212, CS0.219, CS0.211, CS0.212, CS0.212, CS0.219, CS0.211, CS0.212, CS0.212, CS0.212, CS0.219, CS0.211, CS0.212, CS0.2122, CS0.21222, CS0.212222, CS0.21222, CS0.212222, CS0.2122222, CS0.212222, CS0.2122222, CS0.2122222, CS0.212222, CS0
Medical	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)	Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	As a Regulated for 41 Despoise Codes (PECEDE: CS0.011, CS0.012, CS0.010; CS0.011, CS0.112, CS0.112, CS0.113, CS0.113, CS0.113, CS0.113, CS0.114, CS
Medical	15775		L	Required	Required	Required	Required	Required	Required	Required	Required	

			Commercial Fully Insured	Commercial Self Funded							
Is the code BH, DME, eviCore, or Medical?	Procedure Code	Revenue Code Rate Code	(Commercial Products, but not limited to: HMO, PPO, EPO, POS &	(Commercial Products, but not limited to: HMO, PPO,	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	15776		HNY EPO) Required	EPO & POS) Required	Required	Required	Required	Required	Required	Required	
Medical	15780		Required	Required	Required	Required	Not Required	Required	Not Required	Not Required	
Medical Medical	15781 15782		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Required Required	Not Required Required	Not Required Required	
Medical	15783		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	15786 15788		Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical	15789		Required	Required	Required	Required	Required	Not Required	Required	Required	
Medical Medical	15792 15793		Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical	15820		Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical Medical	15821		Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical	15822 15823		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Required	Not Required Required	Required Required	Required Required	
Medical	15824		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	15825 15826		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Required	Required Required	
Medical	15828		Required	Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical Medical	15829 15830		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Required	Required Required	Required Required	
Medical	15832		Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical Medical	15833 15834		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Required Required	Required Required	
Medical	15835		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	15836 15837		Required Required	Required Required	Required Not Required	Required	Not Required Not Required	Required Not Required	Required	Required	
Medical	15838		Required	Required	Not Required	Not Required Not Required	Required	Required	Required Required	Required Required	
Medical Medical	15839 15840		Required Not Required	Required Net Provinced	Required Not Required	Required	Not Required	Required Not Required	Required	Required	
Medical Medical	15840 15842		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	
Medical	15845		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical Medical	15847 15876		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Required	Required Required	Required Required	
Medical	15877		Required	Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical Medical	15878 15879		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	
Medical	17106		Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical Medical	17107 17108		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical	17360		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	17380 17999		Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Required	Required Not Required	Required Required	Required Required	
Medical	19105		Required	Required	Not Required	Not Required	Not Required Not Required	Not Required	Not Required	Not Required	
Medical	19300		Required	Required	Not Required	Not Required	Required	Required	Required	Required	DALLE TO ALLE TO ALLE TO ALLE THE PROPERTY OF A COURT OFF DATA COURT OFF AND COURT OFF
Medical	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 & Required for All disposite codes EXCEPT_C481, CS0.011, CS0.012, CS0.019, CS0.111, CS0.112, CS0.119, CS0.119, CS0.119, CS0.119, CS0.119, CS0.119, CS0.119, CS0.119, CS0.119, CS0.111, CS0.112, CS0.119, CS0.119, CS0.111, CS0.112, CS0.119, CS0.11
Medical	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 & Bequited for All disposite codes EXCEPT_C481_C50.011_C50.012_C50.019_C50.111_C50.112_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.
Medical	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 & Required for All disposits codes EXCEPT_C481_C50.011_C50.012_C50.019_C50.111_C50.112_C50.119_C50.119_C50.112_C50.119_C50.119_C50.112_C50.119_C50.112_C50.119_C50.112_C50.119_C50.112_C50.119_C50.112_C50.119_C50.112_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.119_C50.
Medical	19328		Not Required	Not Required	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 <u>DECEPT</u> , C481, C50.011, C50.012, C50.019, C50.111, C50.112, C50.119, C5			
Medical	19330		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 disprosis codes EXCEPT. C48.1, C50.011, C50.012, C50.019, C50.111, C50.112, C50.119, C50
Medical	19340		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 disprosis codes BCCEPT; C48.1, C50.011, C50.012, C50.019, C50.111, C50.112, C50.119, C50
Medical	19342		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 & Bequitted for All disposite codes ECCEPT. C481, C50.011, C50.012, C50.019, C50.111, C50.112, C50.119, C50.
Medical	19350		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 disprosis codes EXCEPT, C48.1, C50.011, C50.012, C50.019, C50.111, C50.112, C50.119, C50
Medical	19355		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 Bequitted for All disprosis codes ECCEPT. C481, C50.011, C50.012, C50.019, C50.111, C50.112, C50.119, C50
Medical	19357		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 & Required for All disproses codes (ECEPT, C48.1, C50.011, C50.012, C50.019, C50.110, C50.112, C50.

				Fully Insured	Commercial Self Funded							
Is the code BH, DME,	Procedure Code	Revenue Code	Rate Code	(Commercial Products, but	Gen rundes	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net	Safety Net Health and Recovery	Diagnosis Requirements (if applicable)
eviCore, or Medical?	Code	Code		not limited to: HMO, PPO, EPO, POS &	not limited to: HMO, PPO,			Child Health Plus	Essential Plan	Managed Medicaid	Health and Recovery Program	
				HNY EPO)	EPO & POS)							
												PA is Required for All diagnosis codes EXCEPT: C48.1, C50.011, C50.012, C50.019, C50.111, C50.112, C50.119, C50.211, C50.212, C50.219, C50.311, C50.312, C50.319, C50.411, C50.412, C50.419, C50.511, C50.512, C50.519,
Medical	19370			Required (By Diagnosis - see last	Required (By Diagnosis - see last	Required (By Diagnosis - see last	Required (By Diagnosis - see last	Required (By Diagnosis - see last	Required (By Diagnosis - see last	Required	Required (By Diagnosis - see last	C50.611, C50.612, C50.619, C50.811, C50.812, C50.819, C50.911, C50.912, C50.919, C56.1, C56.2, C56.3, C79.61,
	-55.5			column)	column)	column)	column)	column)	column)	(By Diagnosis - see last column)	column)	C79.62, C79.63, C79.81, C84.7A, D05.00,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, Z40.01, Z40.02, Z40.03, Z42.1, Z803, Z853, Z90.10,
												Z90.11, Z90.12, Z90.13, C50A0, C50A1, C50A2 & Z1505 PA is Required for All diagnosis codes EXCEPT: C48.1, C50.011, C50.012, C50.019, C50.111, C50.112, C50.119,
				Required	Required	Required	Required	Required	Required		Required	CSO.211, CSO.212, CSO.219, CSO.311, CSO.312, CSO.319, CSO.311, CSO.312, CSO.311, CSO.511, CSO.511, CSO.511, CSO.519, CSO.311, CSO.312, CSO.3122, CSO.312
Medical	19371			(By Diagnosis - see last column)	(By Diagnosis - see last column)	(By Diagnosis - see last column)	(By Diagnosis - see last column)	(By Diagnosis - see last column)	(By Diagnosis - see last column)	Required (By Diagnosis - see last column)	(By Diagnosis - see last column)	C50.611, C50.612, C50.619, C50.811, C50.812, C50.819, C50.911, C50.912, C50.919, C56.1, C56.2, C56.3, C79.61, C79.62, C79.63, C79.81, C84.7A, D05.00,D05.02, D05.10, D05.11, D05.12, D05.80, D05.81, D05.82, D05.90,
				column)	column)	column)	column)	column)	column)	(=, ===,===,	column)	D05.91, D05.92, D24.1, D24.2, D24.9, D49.3, Z15.01, Z15.02, Z40.01, Z40.02, Z40.03, Z42.1, Z803, Z853, Z90.10,
												Z90.11, Z90.12, Z90.13, C50A0, C50A1, C50A2 & Z1505 PA is Required for All diagnosis codes EXCEPT : C48.1, C50.011, C50.012, C50.019, C50.111, C50.112, C50.119.
				Required	Required	Required	Required	Required	Required	Required	Required	PA is Required for All diagnosis codes EXCEPT: C48.1, C50.011, C50.012, C50.019, C50.111, C50.112, C50.119, C50.211, C50.212, C50.219, C50.211, C50.312, C50.313, C50.313, C50.411, C50.412, C50.419, C50.511, C50.512, C50.519, C50.511, C50.812, C50
Medical	19380			(By Diagnosis - see last column)	(By Diagnosis - see last column)	(By Diagnosis - see last column)	(By Diagnosis - see last column)	(By Diagnosis - see last column)	(By Diagnosis - see last column)	(By Diagnosis - see last column)	(By Diagnosis - see last column)	C79.62, C79.63, C79.81, C84.7A, D05.00.D05.02, D05.10, D05.11, D05.12, D05.80, D05.81, D05.82, D05.90,
				columny	column)	columny	Columny	Columni	columny		columny	D05.91, D05.92, D24.1, D24.2, D24.9, D49.3, Z15.01, Z15.02, Z40.01, Z40.02, Z40.03, Z42.1, Z803, Z853, Z90.10, Z90.11, Z90.12, Z90.13, C50A0, C50A1, C50A2 & Z1505
												PA is Required for all diagnosis codes EXCEPT: C48.1, C50.011, C50.012, C50.019, C50.111, C50.112, C50.119.
Medical	19499			Not Required	Not Required		Not Required	Required	Required	Required	Required	C50.211, C50.212, 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, C50.1, C56.2, C56.3, C79.61,
Medical	19499			Not kequired	Not kequired	Not Required	Not kequired	(By Diagnosis - see last column)	(By Diagnosis - see last column)	(By Diagnosis - see last column)	(By Diagnosis - see last column)	C79.62, C79.63, C79.81, C84.7A, D05.00,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, Z40.01, Z40.02, Z40.03, Z42.1, Z803, Z853, Z90.10,
												290.11, 290.12, 290.13, C50A0, C50A1, C50A2 & Z1505
Medical Medical	20975 20982			Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Not Required	Not Required Required	Required Required	Required Required	
Medical	20983			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	21120 21121			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Required	Required Required	
Medical	21122			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	21123 21125			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Required	Not Required Required	
Medical	21127			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	21137 21138			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	21139 21141			Required Not Required	Required Not Required	Required Not Required	Required Not Required	Not Required Required	Required Not Required	Required Required	Required Required	
Medical	21141			Not Required	Not Required	Not Required Not Required	Not Required Not Required	Not Required	Not Required	Required	Required	
Medical Medical	21143 21145			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical	21146			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	21147 21150			Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Required	Not Required Required	Required Required	Required Required	
Medical	21151			Required	Required	Required	Required	Required	Required	Required	Required	
Medical Medical	21154 21155			Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	
Medical	21159			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical Medical	21160 21172			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical	21175			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical Medical	21179 21180			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	21181 21182			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Required	Not Required Required	
Medical	21183			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical Medical	21184 21188			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Required	Not Required Required	
Medical	21193			Required	Required	Required	Required	Required	Required	Required	Required	
Medical Medical	21194 21195			Not Required Required	Not Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	
Medical	21196			Required	Required	Required	Required	Required	Required	Required	Required	
Medical Medical	21198 21199			Not Required Not Required	Not Required Not Required	Required Reauired	Required Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	21206			Not Required	Not Required	Required	Required	Required	Required	Required	Required	
Medical	21208 21209			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	21210			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required	Not Required	Not Required Not Required	Required	Required Required	
Medical	21215 21230			Not Required	Not Required	Not Required	Not Required Not Required	Not Required Not Required	Not Required	Required Required	Required	
Medical Medical	21235 21240			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical	21242			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	21243 21244			Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Required	Required Required	
Medical	21245			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical Medical	21246 21247			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	21248 21249			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical	21255			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical Medical	21256			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical	21260 21261			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical Medical	21263 21267			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical	21268			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical Medical	21270 21275			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	21280 21282			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical	21282 21295			Not Required Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required Required	Required	
Medical	21296			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical Medical	21299 21740			Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	
Medical Medical	21742 21743			Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	22101			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical Medical	22102 22103			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical	22110			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical Medical	22112 22114			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical	22116			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical Medical	22206 22212			Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	
Medical	22222			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	

			Commercial	Commercial							
Is the code BH, DME,	Procedure	Revenue	Fully Insured	Self Funded			Safety Net	Safety Net	Safety Net	Safety Net	
eviCore, or Medical?	Code	Revenue Code	Rate Code (Commercial Products, but not limited to: HMO, PPO, EPO, POS &	(Commercial Products, but	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Health and Recovery Program	Diagnosis Requirements (if applicable)
			HNY EPO)	EPO & POS)							
Medical Medical	22532 22548		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	
Medical Medical	22556 22590		Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	22610		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	22800 22802		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	22804 22808		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical	22810		Required Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical Medical	22812 22818		Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Not Required	Required Not Required	
Medical Medical	22819 22830		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Required	Required Required	Required Required	
Medical Medical	22836 22837		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	22838		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	22840 22849		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Required Required	Required Not Required	Required Not Required	
Medical Medical	22850 22852		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Required Required	Required Required	
Medical Medical	22855 22899		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Required Not Required	
Medical	24360		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical Medical	24361 24362		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Required Not Required	
Medical Medical	24363 24366		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Required	
Medical	24370		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical Medical	24371 25441		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Reauired	Not Required Not Required	Not Required Required	Not Required Required	
Medical Medical	25442 25443		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Not Required	Required Not Required	
Medical Medical	25444 25445		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Required Not Required	
Medical	25446		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical Medical	25447 25449		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Required Not Required	Required Required	Required Required	
Medical Medical	26530 26531		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical	26535		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical Medical	26536 27437		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Required	Required Required	Required Required	
Medical Medical	27445 27702		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Required	Required Required	Required Required	
Medical Medical	27703 28446		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Required	
Medical	28890		Required	Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical Medical	29800 29804		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	
Medical Medical	30117 30120		Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Required Required	Required Required	
Medical Medical	30400 30410		Required Required	Required Required	Not Required Required	Not Required	Not Required Not Required	Not Required Required	Required	Required Required	
Medical	30420		Required	Required	Required	Required Required	Required	Required	Required Required	Required	
Medical Medical	30430 30435		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Required	Required Required	Required Required	
Medical Medical	30450 30460		Required Not Required	Required Not Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical	30462		Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical Medical	30465 30468		Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Not Required	Required Required	Required Required	Required Reauired	
Medical Medical	30469 30520		Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	30630 30801		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	Required Required	Required Required	
Medical	30802		Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical Medical	30999 31242		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	
Medical Medical	31243 31295		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	
Medical Medical	31295 31296 31297		Required Required	Required Required	Required Required	Required Required	Not Required Required	Required Required	Required	Required Required	
Medical	31298		Required	Required	Required	Required	Not Required	Required	Required Required	Required	
Medical Medical	31626 32664		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	
Medical Medical	32850 32851		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical	32852		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	32853 32854		Required Reauired	Required Reauired	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Required	Required Reauired	
Medical Medical	32998 33202		Required Not Required	Required Not Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	33203 33254		Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Not Required Required	Not Required Not Required	Not Required Required	Not Required Required	
Medical	33255		Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical Medical	33258 33265		Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Required	Required Required	
Medical Medical	33266 33269		Required Not Required	Required Not Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Required	Required Required	
Medical Medical	33276 33277		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	33278		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	33279 33280		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	33281 33285		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	33287		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	33288 33340		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	33361 33362		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	33363 33364		Required Required	Required	Not Required	Not Required	Not Required Not Required Not Required	Not Required	Not Required Not Required	Not Required	
Medical Medical	33365		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required	Not Required Not Required	Not Required	Not Required Not Required	
Medical	33366		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	

			Commercial	Commercial							
Is the code BH, DME,	Procedure	Revenue	Fully Insured	Self Funded			Safety Net	Safety Net	Safety Net	Safety Net	
eviCore, or Medical?	Code	Code	Rate Code (Commercial Products, but not limited to: HMO, PPO, EPO, POS &	(Commercial Products, but not limited to: HMO, PPO,	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Health and Recovery Program	Diagnosis Requirements (if applicable)
Medical	33367		HNY EPO) Required	EPO & POS) Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	33368		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	33369 33406		Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Not Required Required	Not Required Required	
Medical Medical	33410 33411		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	33412 33413		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Not Required	Required Not Required	
Medical Medical	33418 33419		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical	33927		Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	33930 33933		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Required	Required Not Required	Required Not Required	
Medical Medical	33935 33944		Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	33945 33975		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Required	Required Required	Required Not Required	Required Not Required	
Medical Medical	33976 33979		Required Required	Required Required	Not Required Required	Not Required Required	Required Not Required	Required Not Required	Not Required Required	Not Required Required	
Medical Medical	33990 33991		Required Required	Required Required	Required Required	Required Required	Not Required Required	Not Required Required	Required Required	Required Required	
Medical	33992		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	33993 33995		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	33997 33999		Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	34701 34702		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Not Required Required	
Medical Medical	34703 34704		Not Required Not Required	Not Required Not Required	Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical	34705		Not Required	Not Required	Not Required Not Required	Not Required	Required	Not Required	Required	Required	
Medical Medical	34706 34707		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	34708 34709		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Not Required	Required Not Required	
Medical Medical	34710 34711		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Required	Not Required Required	
Medical Medical	34712 34713		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	34714 34715		Not Required	Not Required	Not Required	Not Required	Required	Not Required Not Required	Not Required	Not Required	
Medical Medical	34716		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	34841 34842		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	
Medical Medical	34843 34844		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	
Medical Medical	34845 34846		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	
Medical	34847		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	
Medical Medical	34848 36465		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	Required Required	
Medical Medical	36466 36470		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Required	Required Required	
Medical Medical	36471 36475		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Required Required	Required Required	
Medical Medical	36476 36478		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	
Medical Medical	36479 36482		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Required Not Required	
Medical	36483		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	36522 37241		Required Required	Required Reauired	Required Not Required	Required Not Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	
Medical	37242		Required (By Diagnosis - see last	Required (By Diagnosis - see last	Required (By Diagnosis - see last	Required (By Diagnosis - see last	Not Required	Not Required	Not Required	Not Required	PA is Required for the following diagnosis codes: N40.1
Medical	37243		column) Required	column) Required	column) Required	column) Required	Not Required	Required	Required	Required	
Medical Medical	37500 37700		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical	37718 37722		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	37760		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	37761 37765		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Required Required	Required Reauired	
Medical Medical	37766 37780		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Required	Required Required	
Medical Medical	37785 37788		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	37790 38204		Not Required Not Required Not Required	Not Required Not Required Not Required	Not Required Not Required Not Required	Not Required Not Required Not Required	Not Required Required	Not Required Not Required	Required Required Not Required	Required Required Not Required	
Medical	38205		Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical Medical	38206 38207		Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Required	Required Not Required	Required Not Required	Required Not Required	
Medical Medical	38208 38209		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	38210		Required	Required	Required Not Required	Required Not Required	Required Required	Required Required	Required	Required	
Medical Medical	38211 38214		Required Not Required	Required Not Required	Not Required	Not Required	Required	Not Required	Required Not Required	Required Not Required	
Medical Medical	38215 38220		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	
Medical Medical	38221 38230		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	
Medical Medical	38232 38240		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	
Medical Medical	38241 38242		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	
Medical	38243		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	41512 42145		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	
Medical Medical	42820 42821		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	42825 42826		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical	42830 42831		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical Medical Medical	42835 42836		Not Required	Not Required	Not Required Not Required Not Required	Not Required	Required	Not Required Not Required Not Required	Not Required	Not Required	
Medical	4283b		Not Required	Not Required	INUL KEQUIFED	Not Required	Not Required	INUL REQUIRED	Required	Required	

				Commercial Fully Insured	Commercial							
Is the code BH, DME,	Procedure Code	Revenue Code	Rate Code	(Commercial Products but	Self Funded	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery	Diagnosis Requirements (if applicable)
eviCore, or Medical?	Code	Code	nate code	not limited to: HMO, PPO,	(Commercial Products, but not limited to: HMO, PPO,	riculture	inio b sin	Child Health Plus	Essential Plan	Managed Medicaid	Program	bugnoss requirements (it appreciate)
Medical	43192			EPO, POS & HNY EPO) Required	EPO & POS) Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	43201 43210			Required Not Required	Required Not Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Required	Required Not Required	Required Not Required	
Medical	43236			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	43257 43284			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	43285 43290			Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	
Medical Medical	43291 43497			Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Required	Required Required	
Medical Medical	43644 43645			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Required Required	Required Required	Required Required	
Medical	43647			Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	43648 43659			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Required	Required Required	Required Required	
Medical Medical	43770 43771			Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Required	Required Required	
Medical Medical	43772			Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Reauired	Required Required	Required Required	
Medical	43773 43774			Required	Required	Required	Not Required Required	Not Required	Not Required	Required Required	Required	
Medical Medical	43775 43842			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Required Required	Required Required	Required Required	
Medical Medical	43843 43845			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Required	Required Required	Required Required	
Medical Medical	43846 43847			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	
Medical Medical	43848 43860			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required	Required	Required	
Medical	43865			Not Required	Not Required	Not Required	Not Required	Not Required	Required Required	Required Required	Required Required	
Medical Medical	43881 43882			Required Reauired	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Reauired	
Medical Medical	43886 43887			Required Required	Required Required	Required Not Required	Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	43888 43999			Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Required	Required Required	
Medical	44132			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical Medical	44133 44135			Required Required	Required Required	Not Required Required	Not Required Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	44136 44705			Required Required	Required Required	Not Required Required	Not Required Required	Required Required	Required Not Required	Required Required	Required Required	
Medical Medical	46707 46999			Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	
Medical	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, Z68.44, E66.45, E66.0, E66.09, E66.3, E66.811, E66.812, E66.813, E66.89,
Medical	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, E66.09, E66.3, E66.811, E66.812, E66.813, E66.89,E66.9
Medical Medical	47100 47133			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Not Required Required	Not Required	PA is Required for the following diagnosis codes: E66.01, E66.2, 268.35, Z68.36, Z68.37, Z68.38, Z68.39, Z68.40, Z68.41, Z68.42, Z68.43, Z68.44, Z68.44, Z68.45, E66.0, E66.0, E66.3, E66.81, E66.812, E66.813, E66.89,E66.9
Medical	47135			Not Required Required	Not Required Required	Not Required	Not Required	Not Required	Required	Required	Required Required	
Medical Medical	47140 47141			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	47142 47370			Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical	47371			Required Required	Required Required	Required	Required	Required Required	Required Required	Required	Required Required	
Medical Medical	47379 47380			(By Diagnosis - see last column) Required	(By Diagnosis - see last column) Required	Not Required Not Required	Not Required Not Required	(By Diagnosis - see last column) Required	(By Diagnosis - see last column) Not Required	Required (By Diagnosis - see last column) Required	(By Diagnosis - see last column) 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, Z68.44, Z68.45, E66.0, E66.0, E66.0, E66.81, E66.812, E66.813, E66.816, E66.89, E66.9
Medical Medical	47381 47382			Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	
Medical	47383			Not Required	Not Required	Required	Required	Not Required	Not Required	Required	Required	
Medical Medical	47562 47564			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Reauired	Not Required Not Required	Not Required Not Required	
Medical Medical	47605 48160			Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Not Required	Not Required Required	Not Required Required	
Medical Medical	48550 48551			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	48552 48554			Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Required	Required Required	
Medical	48556			Required	Required	Required	Required	Required	Required	Required	Required	
Medical Medical	50300 50320			Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Required	Not Required Required	Required Required	Required Required	
Medical Medical	50325 50328			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	
Medical Medical	50329 50340			Not Required Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Required	Not Required Required	Required Required	Required Required	
Medical Medical	50360 50365			Required Required	Required Required	Required Required	Required Required	Required Not Required	Required Required	Required Required	Required Required	
Medical	50370			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical Medical	50380 50542			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	50547 50590			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Required	Required Required	Required Required	
Medical Medical	50592 50593	-		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Not Required	
Medical Medical	51715 52284			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Required Not Required	
Medical	52441			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	52442 53854			Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	53865 53866			Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Required Required	Required Required	Required Required	
Medical Medical	54220 54230			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	54231 54235			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	54240 54250			Not Required Not Required Not Required	Not Required Not Required Not Required	Not Required Not Required	Not Required	Not Required Not Required	Not Required Not Required Not Required	Required	Required Required	
Medical	54400			Not Required	Not Required	Not Required	Not Required Not Required	Not Required	Not Required	Required Required	Required	
Medical Medical	54401 54405			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical	54406	T	T	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	

Is the code BH, DME, eviCore, or Medical?	Procedure Code	Revenue Code	Rate Code	Commercial Fully Insured (Commercial Products, but not limited to: HMO, PPO, EPO, POS &	Commercial Self Funded (Commercial Products, but not limited to: HMO, PPO, FPO & 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	54408			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	54410			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	54411 54415			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical	54416			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	54417			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	54680 55870			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Not Required Required	Not Required	
Medical	55870			Not keguired Required	Not keguired Required	Not kequired Required	Not keguired Required	Not Required Not Required	Not Required Not Required	Not Required	Required Not Required	
Medical	55880			Required	Required	Required	Required	Not Required	Required	Not Required	Not Required	
Medical	55970			Required	Required	Required	Required	Not Required	Required	Not Required	Not Required	
Medical Medical	55980 56620			Required Required	Required Required	Required Not Required	Required Not Required	Not Required Required	Required Required	Not Required Required	Not Required Required	
Medical	56625			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	56805			Required	Required	Required	Required	Required	Required	Required	Required	
Medical	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 disprosis codes EXCEPT: C459, C510, C511, C512, C563, C963, C518, C519, C510, C520, C530, C531, C531, C510, C570, C
Medical	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: C459, C510, C511, C512, C563, C963, C518, C519, C510, C520, C530, C531, C531, C510, C520, C520, C530, C
Medical	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 & Required for All disprosis codes EXCEPT: C459, C51.0, C51.1, C51.2, C56.3, C96.8, C51.8, C51.9, C52.0, C53.0, C53.1,
Medical	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, C56.3, C79.63, C51.8, C51.9, C52.0, C53.0, C51.2, C53.2, C53
Medical	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 & Bequired for Al diagnosis codes EXCEST: C459, C510, C511, C512, C563, C79.63, C518, C519, C520, C530, C531, C538, C539, C540, C542, C543, C543, C544, C552, C543, C540, C5700, C570
Medical	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 & Required for All disposis code EXCEPT: C45.9, C51.0, C51.1, C51.2, C56.3, C79.63, C51.8, C51.9, C52.0, C53.0, C53.1, C53.2, C53.0, C53.1, C53.2, C53.0, C53.0, C53.0, C53.0, C53.0, C57.0,
Medical	58270			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 Bequited for All disposis codes EXCEPT. C45.9, C51.0, C51.1, C51.2, C56.3, C79.63, C51.8, C51.9, C52.0, 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, C56.9, C57.00, C57.01, C57.02, C57.01, C57.10, C57.11, C57.12, C57.2, C57.2, C57.2, C57.3, C57.9,
Medical	58280			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 disposis codes EXCEPT: C45.9, C51.0, C51.1, C51.2, C56.3, C79.63, C51.8, C51.9, C52.0, 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, C56.9, C57.00, C57.01, C57.02, C57.01, C57.10, C57.2, C57.2, C57.2, C57.3, C57.4, C57.7, C57.8, C57.9, C58, C56.2, C63.2, C67.2, C77.2, C77.5, C79.60, C79.62, C79.61, C79.82, C79.89, C79.9, C80.0, C80.1, D66.2, D66.1, D66.7, D66.9, D07.0, D07.2, D07.2, D07.2, D07.3, D07.3, D07.2, D07.3, D07
Medical	58285			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 & Bequired for Al diagnosis codes EXCEST: C459, C510, C511, C512, C563, C79.63, C518, C519, C520, C530, C531, C538, C539, C540, C541, C642, C543, C543, C549, C55, C561, C562, C569, C57.00, C57.00
Medical	58290			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 DCCEPT. C45.9, C51.0, C51.1, C51.2, C56.3, C79.62, C51.8, C51.9, C52.0, C53.0, C53.1, C53.1, C53.1, C53.2, C53.0, C54.0, C54.2, C54.0, C54.0, C54.0, C57.0, C57
Medical	58291			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 <u>PXCEPT</u> : C45.9, C51.0, C51.1, C51.2, C56.3, C79.6, C51.8, C51.9, C52.0, C53.0, C53.1, C53.1, C53.0, C54.0, C54.1, C54.2, C54.3, C54.6, C54.0, C56.3, C75.0, C57.0, C5
Medical	58292			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 & Required for All disposis codes EXCEPT: C45.9, C51.0, C51.1, C51.2, C56.3, C79.63, C51.8, C51.9, C52.0, C53.0, C53.1, C53.6, C53.0, C54.0, C54.1, C54.2, C54.3, C64.2, C64.2, C56.2, C56.2, C56.2, C56.2, C57.00, C57.01, C57.02, C57.01, C57.01, C57.02, C57.01, C57.02, C57.
Medical	58294			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: CHS9, CS10, CS11, CS12, CS63, CP9.83, CS18, CS19, CS10, CS20, CS31, CS32, CS34, CS32,
Medical	58541			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: C459, C510, C511, C512, C563, C963, C518, C519, C510, C520, C530, C531, C
Medical	58542			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 disprosis codes EXCEPT: C459, C510, C511, C512, C563, C963, C518, C519, C510, C520, C530, C531, C531, C510, C570, C
Medical	58543			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 & Beguired for Al disposes codes EXCEPT. C459, C510, C511, C512, C53, C79.63, C518, C519, C520, C520, C531, C531, C519, C520, C520, C530, C531, C53
Medical	58544			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)	Ale Required for Al diagnosis codes EXCEST: C459, C510, C511, C512, C53, C79.83, C518, C519, C520, C530, C531, C538, C539, C540, C541, C542, C543, C543, C549, C55, C561, C562, C569, C57.00, C57.01, C57.02, C57.0
Medical	58550			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 disprosis codes EXCEPT: C459, C51.0, C51.1, C51.2, C56.3, C79.63, C51.8, C51.9, C52.0, C51.0, C51.0, C51.0, C51.0, C51.0, C51.0, C51.0, C51.0, C51.0, C57.0, C57.

				Fully Insured	Commercial Self Funded							
Is the code BH, DME,	Procedure Code	Revenue Code	Rate Code	(Commercial Products, but	CO	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery	Diagnosis Requirements (if applicable)
evicore, or Medical?	Code	Code		not limited to: HMO, PPO, EPO, POS &	not limited to: HMO, PPO,			Child Health Plus	Essential Plan	managed medicaid	Program	
				HNY EPO)	EPO & POS)							
				Required	Required	Required	Required	Required	Required	Required	Required	PA is Required for All diagnosis codes EXCEPT: C45.9, C51.0, C51.1, C51.2, C56.3, C79.63, C51.8, C51.9, C52.0, 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, C56.9, C57.00, C57.01,
Medical	58552			(By Diagnosis - see last column)	(By Diagnosis - see last column)	(By Diagnosis - see last column)	(By Diagnosis - see last column)	(By Diagnosis - see last column)	C57.02, 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, C79.62, C79.61, C79.82, C79.89, C79.9, C80.0, C80.1, D06.0, D06.1, D06.7, D06.9, D07.0,			
				columny	column)	columniy	columny	country	columny		columni	D07.1, D07.2, D07.30, D07.39, Z1505, Z8044, Z854A, Z8600A
				Required	Required			Required	Required		Required	PA is Required for All diagnosis codes EXCEPT: C45.9, C51.0, C51.1, C51.2, C56.3, C79.63, C51.8, C51.9, C52.0, 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, C56.9, C57.00, C57.01,
Medical	58553			(By Diagnosis - see last	(By Diagnosis - see last	Not Required	Not Required	(By Diagnosis - see last	(By Diagnosis - see last	Required (By Diagnosis - see last column)	(By Diagnosis - see last	C57.02, 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,
				column)	column)			column)	column)	(b) biognosis see lose column)	column)	C77.2, C77.5, C79.60, C79.62, C79.61, C79.82, C79.89, C79.9, C80.0, C80.1, D06.0, D06.1, D06.7, D06.9, D07.0, D07.1, D07.2, D07.30, D07.39, Z1505, Z8044, Z854A, Z8600A
						B						PA is Required for All diagnosis codes EXCEPT: C45.9, C51.0, C51.1, C51.2, C56.3, C79.63, C51.8, C51.9, C52.0, 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, C56.9, C57.00, C57.01,
Medical	58554			Required (By Diagnosis - see last column)	Required	Required (By Diagnosis - see last column)	C57.02 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					
				column)	column)	column)	column)	column)	column)	(By Diagnosis - see last column)	column)	C77.2, C77.5, C79.60, C79.62, C79.61, C79.82, C79.89, C79.9, C80.0, C80.1, D06.0, D06.1, D06.7, D06.9, D07.0, D07.1, D07.2, D07.30, D07.39, Z1505, Z8044, Z854A, Z8600A
												PA is Required for All diagnosis codes EXCEPT: C45.9, C51.0, C51.1, C51.2, C56.3, C79.63, C51.8, C51.9, C52.0,
Medical	58570			Required (By Diagnosis - see last	Required	Required (By Diagnosis - see last	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, C56.9, C57.00, C57.01, C57.02, 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,					
				column)	column)	column)	(By Diagnosis - see last column)	(By Diagnosis - see last column)	(By Diagnosis - see last column)	(By Diagnosis - see last column)	column)	C77.2, C77.5, C79.60, C79.62, C79.61, C79.82, C79.89, C79.9, C80.0, C80.1, D06.0, D06.1, D06.7, D06.9, D07.0, D07.1, D07.2, D07.30, D07.39, Z1505, Z8044, Z854A, Z8600A
												PA is Required for All diagnosis codes EXCEPT: C45.9, C51.0, C51.1, C51.2, C56.3, C79.63, C51.8, C51.9, C52.0,
Medical	58571			Required (By Diagnosis - see last	Required	Required (By Diagnosis - see last	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, C56.9, C57.00, C57.01, C57.02, 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,					
				(By Diagnosis - see last column)	column)	column)	column)	column)	column)	(By Diagnosis - see last column)	(By Diagnosis - see last column)	C77.2, C77.5, C79.60, C79.62, C79.61, C79.82, C79.89, C79.9, C80.0, C80.1, D06.0, D06.1, D06.7, D06.9, D07.0, D07.1, D07.2, D07.30, D07.39, Z1505, Z8044, Z854A, Z8600A
												PA is Required for All diagnosis codes EXCEPT: C45.9, C51.0, C51.1, C51.2, C56.3, C79.63, C51.8, C51.9, C52.0,
Medical	58572			Required (Ry Diagnosis - con last	Required (Py Diagnosis - soo last	Required (By Diagnosis - see last	Required (By Diagnosis - see last	Required (By Diagnosis - see last	Required (By Diagnosis - see last	Required	Required	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, C56.9, C57.00, C57.01, C57.02, C57.10, C57.11, C57.12, C57.20, C57.21, C57.22, C57.3, C57.4, C57.7, C57.8, C57.9, C58.276.2, C76.3,
rieulcai	30372			(By Diagnosis - see last column)	(By Diagnosis - see last column)	column)	column)	column)	column)	(By Diagnosis - see last column)	(By Diagnosis - see last column)	C77.2, C77.5, C79.60, C79.62, C79.61, C79.82, C79.89, C79.9, C80.0, C80.1, D06.0, D06.1, D06.7, D06.9, D07.0,
												D07.1, D07.2, D07.30, D07.39, Z1505, Z8044, Z854A, Z8600A PA is Required for All diagnosis codes EXCEPT: C45.9, C51.0, C51.1, C51.2, C56.3, C79.63, C51.8, C51.9, C52.0,
	58573			Required	Required	Required	Required	Required	Required (By Diagnosis - see last	Required	Required (By Diagnosis - see last	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, C56.9, C57.00, C57.01, C57.02, 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,
Medical	58573			(By Diagnosis - see last column)	(By Diagnosis - see last column)	(By Diagnosis - see last column)	C57.02, 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, C79.62, C79.61, C79.82, C79.89, C79.9, C80.0, C80.1, D06.0, D06.1, D06.7, D06.9, D07.0,					
Medical	58580			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	D07.1, D07.2, D07.30, D07.39, Z1505, Z8044, Z854A, Z8600A
Medical	58674			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	58752 60660			Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Not Required	Not Required Required	Required Required	Required Required	
Medical	60661			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical Medical	61630 61635			Required Required	Required Required	Required Not Required	Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	61736 61737			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical	61850			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical Medical	61860 61863			Required Required	Required Reauired	Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	
Medical	61864 61867			Not Required	Required	Required						
Medical Medical	61868			Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Required	Required Not Required	Required Required	Required Required	
Medical Medical	61880 61885			Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Not Required	Not Required Required	Required Required	Required Required	
Medical Medical	61886			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical Medical	61888 62369			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Not Required	Required Not Required	
Medical Medical	62370 63003			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Not Required	
Medical	63011			Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	
Medical Medical	63016 63020			Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	Not Required Required	
Medical	63046			Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical Medical	63055 63064			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	
Medical Medical	63066 63077			Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	63078			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical Medical	63085 63086			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	63101 63170			Not Required Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	63172			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	63173 63185			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical	63190			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical Medical	63191 63197			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical	63200		-	Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical Medical	63250 63251			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	63252 63266			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical	63268			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical Medical	63270 63271			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Required	Required Not Required	Not Required Not Required	
Medical Medical	63273 63275		_	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Not Required	Required Required	Required Required	
Medical	63276			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical Medical	63278 63280			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical	63281			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical Medical	63282 63283			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	63285 63286	\vdash		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical	63287			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical Medical	63290 63295			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Reauired	Required Required	
Medical Medical Medical	63295 63300 63301		_	Not Required Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required Required	Not Required Required	Required Required	Required Required	
Medical	63302			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical Medical	63303 63304			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	63305			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical	63306 63307			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical	63308			Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	

				Commercial	Commercial							
Is the code BH, DME.	Procedure	Revenue		Fully Insured	Self Funded			Safety Net	Safety Net	Safety Net	Safety Net	
eviCore, or Medical?	Code	Code	Rate Code	(Commercial Products, but not limited to: HMO, PPO,	(Commercial Products, but	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Health and Recovery Program	Diagnosis Requirements (if applicable)
				EPO, POS & HNY EPO)	EPO & POS)							
Medical	63661 64450			Not Required Required	Not Required Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical				(By Diagnosis - see last column)	(By Diagnosis - see last column)	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	PA is Required for the following diagnosis codes: M17.10, M17.11, M17.2, M17.12, M17.30, M17.31, M17.32, M17.4, M17.5, M17.9, M25.561, M25.562, M25.569
Medical	64454			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	64553 64555			Required Required	Required Required	Not Required Required	Not Required Required	Required Not Required	Required Required	Required Required	Required Required	
Medical	64561			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical Medical	64568 64580			Required Not Required	Required Not Required	Required Not Required	Required Not Required	Not Required Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	64581 64582			Required Required	Required Required	Required Not Required	Required Not Required	Not Required Required	Required Required	Required Required	Required Required	
Medical Medical	64583 64584			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical	64590			Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical	64596			Required Required	Required Required	Not Required	Not Required	Not Required	Not Required	Not Required Required	Not Required Required	DA is Parallel S. M. Giller in January and M. M. 710 M. 711 M. 720 M. 720 M. 720 M. 720 M. 720
Medical	64640			(By Diagnosis - see last column)	(By Diagnosis - see last column)	Not Required	Not Required	Not Required	Required (All Diagnoses)	(All Diagnoses)	(All Diagnoses)	PA is Required for the following diagnosis codes: M17.10, M17.11, M17.2, M17.12, M17.30, M17.31, M17.32, M17.4, M17.5, M17.9, M25.561, M25.562, M25.569
Medical	64821			Required Required	Required Required	Not Required Not Required	Not Required	Not Required	Not Required Required	Required	Required	
Medical Medical	64822 64823			Required	Required Required	Not Required	Not Required Not Required	Required Not Required	Not Required	Required Required	Required Required	
Medical	64999			Required (By Diagnosis - see last column)	Required (By Diagnosis - see last column)	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	PA Is Required for the following diagnosis codes: 640.001,640.009,640.01,640.011,640.0119,640.1264.010,640.016,640.011,640.0119,640.2640.201, 640.020,640.01,640.011,640.011,640.019,640.016,640.010,640.016,640.011,640.011,640.019,640.201, 640.020,640.01,640.011,640.015,640.010,640.010,640.016,640.011,640.019,640.011, 640.496.40.076,640.11,640.419,640.501,640.000,640.016,640.016,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,640.011,
Medical Medical	66179 66180			Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	66183			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	66989 66991			Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	67715 67900	<u> </u>		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required	Not Required Required	Not Required Required	
Medical Medical	67901			Required	Required	Required	Required	Not Required	Required Not Required	Required	Required	
Medical Medical	67902 67903			Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	67904 67906			Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Required Required	Required Required	
Medical Medical	67908 67909			Required	Required Required	Required Not Required	Required Not Required	Not Required	Required	Required	Required	
Medical	67911			Required Not Required	Not Required	Not Required	Not Required	Not Required Not Required	Required Not Required	Required Required	Required Required	
Medical Medical	67914 67915			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Required	Required Required	
Medical	67916			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	67917 67921			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	67922 67923			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Required	Not Required Required	
Medical Medical	67924 67938			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical	67950			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	67999 68841			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Not Required	Required Not Required	
Medical Medical	69300 69705			Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Required	Required Not Required	Required Not Required	
Medical Medical	69706 69714			Required	Required	Not Required	Not Required	Required Required	Required	Not Required	Not Required Required	
Medical Medical	69716			Required Required	Required Required	Required Not Required Not Required	Required Not Required	Not Required Not Required	Required Not Required	Required Required	Required	
Medical Medical	69717 69719			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	69729			Required	Required	Required	Required	Required	Required	Required	Required	
Medical Medical	69730 69799			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	
Medical	69930			Not Required Required	Not Required Required	Not Required	Not Required	Not Required	Required	Required	Required	
Medical	75894			(By Diagnosis - see last column)	(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: I86.2, N94.89, R10.2
Medical	76497			Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical Medical	77086 81120			Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	Not Required Not Required	Required Not Required	
Medical Medical	81121 81162			Required Required	Required Required	Not Required Required	Not Required Required	Required Not Required	Required Required	Not Required Required	Not Required Required	
Medical	81163			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical Medical	81164 81165			Required Required	Required Required Required	Required Required	Required Required	Required Required	Required Not Required	Not Required Required	Not Required Required	
Medical Medical	81166 81167	<u> </u>		Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Required	Required Required	
Medical	81171			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	81172 81175			Required Required	Required Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81177 81178			Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	81179			Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	81180 81181			Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81182 81183	<u> </u>		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required	Not Required Not Required	
Medical Medical	81184			Required	Required	Required	Required	Not Required	Not Required	Not Required Not Required	Not Required	
Medical Medical	81185 81186			Required Required	Required Required	Not Required Required	Not Required Required	Not Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	81187 81188			Not Required	Not Required	Required	Required	Required Not Required	Not Required Not Required	Required	Required	
Medical Medical	81190			Required Required	Required Reauired	Required Reauired	Required Required	Not Required	Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81191 81192			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	81193			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	81194 81200			Required Required	Required Required	Required Not Required	Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81201 81202			Required Required	Required Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical	81203			Required	Required	Required	Required	Not Required	Not Required	Required	Required	
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			Commercial	Commercial							
Is the code BH, DME	Procedure	Revenue	Fully Insured	Self Funded			Safety Net	Safety Net	Safety Net	Safety Net	
eviCore, or Medical?	Code	Revenue Code	Rate Code (Commercial Products, but not limited to: HMO, PPO, EPO, POS &	(Commercial Products, but	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Health and Recovery Program	Diagnosis Requirements (if applicable)
			HNY EPO)	EPO & POS)							
Medical Medical	81204 81205		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81208 81209		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Required	Required Not Required	Required Not Required	
Medical	81210		Required	Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical Medical	81212 81215		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	81216 81217		Not Required Required	Not Required Required	Required Required	Required Required	Required Required	Required Not Required	Required Required	Required Required	
Medical Medical	81223		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	81224 81225		Not Required Required	Not Required Required	Required Not Required	Required Not Required	Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	
Medical Medical	81226 81227		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	81228 81229		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Required Required	Required Required	Required Required	
Medical	81230		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	81231 81233		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81234 81235		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81238 81242		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	81243		Required	Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical Medical	81244 81250		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81251 81252		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	81253		Required	Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical Medical	81254 81255		Required Required	Required Reauired	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81257 81258		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	81259		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	81260 81261		Required Not Required	Required Not Required	Not Required Required	Not Required Required	Not Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81263 81264		Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81265 81266		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	81267		Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	81268 81269		Not Required Required	Not Required Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81272 81273		Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	81275		Required	Required	Not Required	Not kequired	Not Required	Required	Not Required	Not Required	
Medical Medical	81276 81277		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81284 81285		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81286		Required	Required	Not Required Not Required	Not Required	Not Required	Not Required Not Required	Not Required	Not Required	
Medical	81287 81288		Required Not Required	Required Not Required	Required	Not Required Required	Not Required Required	Not Required	Required Required	Required Required	
Medical Medical	81289 81290		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	
Medical Medical	81292 81293		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Required Not Required	Required Required	Required Required	
Medical	81294		Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical Medical	81295 81296		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Not Required	Required Not Required	Required Required	Required Required	
Medical Medical	81297 81298		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Required Required	Required Required	Required Required	
Medical Medical	81299 81300		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Required	Required Required	Required Required	
Medical	81301		Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical Medical	81302 81303		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	
Medical Medical	81304 81305		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Not Required	
Medical	81306		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	81307 81308		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Not Required	Required Required	Not Required Required	Not Required Required	
Medical Medical	81309 81310		Required Not Required	Required Not Required	Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	
Medical Medical	81311 81312		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	81313		Required	Required	Required	Required	Required	Required	Required	Required	
Medical Medical	81314 81315		Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81317 81318		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81319 81320		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Required Not Required	
Medical	81321		Required	Required	Required	Required	Not Required	Required	Not Required	Not Required	
Medical Medical	81322 81323		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81324 81325		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	81326		Required	Required	Required	Required	Required	Required	Required	Required	
Medical Medical	81327 81330		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81331 81332		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Not Required	Required Not Required	Not Required Required	Required Required	
Medical Medical	81335		Required Not Required	Required Not Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required	Not Required	
Medical	81336 81337		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required Required	Required Required	
Medical Medical	81349 81351		Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Not Required	Not Required Required	Required Not Required	Required Not Required	
Medical Medical	81352 81353		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	81400		Required	Required	Required	Required	Not Required	Required	Required	Required	
Medical Medical	81401 81402		Required Required	Required Required	Required Required	Required Required	Required Not Required	Required Required	Required Required	Required Required	
Medical Medical	81403 81404		Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	
Medical	81405		Required	Required	Required	Required	Required	Required	Required	Required	

			Commercial	Commorcial							
Is the code BH, DME,	Procedure	Revenue	Fully Insured	Self Funded			Safety Net	Safety Net	Safety Net	Safety Net	
eviCore, or Medical?	Code	Revenue Code	Rate Code (Commercial Products, but not limited to: HMO, PPO, EPO, POS &	(Commercial Products, but	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Health and Recovery Program	Diagnosis Requirements (if applicable)
			HNY EPO)	EPO & POS)							
Medical Medical	81406 81407		Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	81408 81410		Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Not Required	Required Not Required	
Medical Medical	81411 81412		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81413 81414		Required Required	Required Required	Required Required	Required Required	Required Not Required	Required Required	Required Not Required	Required Not Required	
Medical	81415		Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical Medical	81416 81417		Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Required Required	Required Required	
Medical Medical	81418 81419		Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Required	Required Not Required	Required Not Required	
Medical Medical	81422 81425		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81426 81427		Required Required	Required Required	Not Required Required	Not Required Required	Required Required	Required Required	Not Required Required	Not Required Required	
Medical Medical	81432 81434		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81435 81439		Required	Required	Required	Required	Not Required	Not Required	Not Required Not Required	Not Required	
Medical	81440		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Not Required	Not Required Not Required	
Medical Medical	81441 81442		Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	
Medical Medical	81443 81445		Required Required	Required Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81448 81449		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	
Medical Medical	81450 81451		Required Required	Required Required	Required Not Required	Required Required	Required Required	Required Required	Not Required Required	Not Required Required	
Medical Medical	81455		Required	Required	Required Not Required Not Required	Required	Not Required	Required	Not Required	Not Required	
Medical	81456 81457		Required Required	Required Required	Required	Not Required Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	81458 81459		Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	81460 81462		Required Required	Required Required	Not Required Required	Not Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	
Medical Medical	81463 81464		Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	81465 81470		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	81471		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	81479 81490		Required Reauired	Required Reauired	Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	
Medical Medical	81506 81518		Required Required	Required Required	Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	
Medical Medical	81519 81520		Required Required	Required Required	Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	
Medical Medical	81521 81522		Required Required	Required Required	Not Required Required	Not Required Required	Required Required	Required Required	Not Required Required	Not Required Required	
Medical Medical	81523 81529		Required Required	Required Required	Required Required	Required Required	Required Not Required	Required Required	Required Not Required	Required Not Required	
Medical Medical	81535 81536		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical	81538		Required	Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical Medical	81539 81540		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81541 81542		Required Required	Required Required	Not Required Not Required	Not Required Required	Not Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81546 81551		Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81552 81554		Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	81595 81599		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical	84433		Not Required	Not Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical Medical	86152 86153		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Required Required	Required Required	
Medical Medical	88120 88121		Required Not Required	Required Not Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	88240 88261		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	88263 88264		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	88267 88271		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	88275 88361		Required Not Required	Required Not Required	Not Required Required	Not Required Required	Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	
Medical	89251		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	89253 89290		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	89291 91110		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Required	Not Required Required	
Medical Medical	91111 91112		Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	91113 92145		Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	92310 92311		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Required Not Required	Not Required Required	Not Required Required	
Medical Medical	92313 92507		Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Required	Required	Required Required	
Medical	92508		Required	Required	Not Required	Not Required	Not Required	Required	Required Required	Required	
Medical Medical Medical	92517 92518		Required Required	Required Required Required	Not Required Not Required	Not Required Not Required Not Required	Not Required Not Required	Not Required Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	92519 92526		Required Required	Required	Not Required Required	Required	Not Required Not Required	Required	Not Required Required	Not Required Required	
Medical Medical	92549 92972		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	93025 93150		Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	
Medical	93151		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	93153 93264		Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	93452 93454		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Not Required Required	Required Required	
Medical	93458		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	

			Commercial	Commercial							
Is the code BH, DME,	Procedure	Revenue	Fully Insured	Self Funded			Safety Net	Safety Net	Safety Net	Safety Net	
eviCore, or Medical?	Code	Code	Rate Code (Commercial Products, but not limited to: HMO, PPO, EPO, POS &	(Commercial Products, but	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Health and Recovery Program	Diagnosis Requirements (if applicable)
			HNY EPO)	EPO & POS)							
Medical Medical	93459 93462		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Required	Required Not Required	
Medical Medical	93702 93980		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical	93981		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	95782 95783		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	95803 95805		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Required	Not Required Required	Not Required Required	
Medical Medical	95807 95808		Required Required	Required	Not Required Not Required	Not Required	Not Required Not Required	Not Required Not Required	Required	Required Required	
Medical	95810		Required	Required Reauired	Not Required	Not Required Not Required	Required	Required	Required Required	Required	
Medical Medical	95811 95939		Required Not Required	Required Not Required	Not Required Required	Not Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	
Medical Medical	96116 96121		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	96132		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	96133 96136		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	96137 96138		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	96139		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	96573 96574		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	97605 97606		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	97607 97608		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	97799		Not Required	Not Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	99377 99378		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	A0080 A0090		Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Required	Not Required Not Required	Required Required	Required Required	
Medical	A0140		Not Required	Not Required	Required	Required	Required	Required	Required	Required	
Medical Medical	A0180 A0190		Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	
Medical Medical	A0210 A2001		Not Required Required	Not Required Required	Not Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	
Medical	A2002		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	A2004 A2005		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	
Medical Medical	A2007 A2008		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	
Medical Medical	A2009		Required	Required	Not Required	Not Required Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	A2010 A2011		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	A2012 A2013		Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	A2014		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	A2015 A2016		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	A2017 A2018		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	A2019 A2020		Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical	A2021		Required	Required	Required	Required	Required	Required	Not Required	Not Required	
Medical Medical	A2026 A2027		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	
Medical Medical	A2028 A2029		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical	A2030		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	A2031 A2032		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	A2033 A2034		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	A2035		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	A2036 A2037		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	A2038 A2039		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	A4238		Not Required	Not Required	Required	Required	Required	Required	Not Required	Not Required	
Medical Medical	A6512 A9156		Not Required Required	Not Required Required	Required Not Required	Required Not Required	Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	
Medical Medical	A9268 A9269		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	A9292 A9697		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	A9900		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical Medical	A9999 B4105		Not Required Required	Not Required Required	Required Required	Required Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	B9999 C1767		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical	C1783		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	C1813 C1820		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	Required Not Required	Required Not Required	
Medical Medical	C1821 C1822		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	C1825		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	C1827 C1832		Required Not Required	Required Not Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	C2614 C2618		Required Required (By Diagnosis - see last	Required Required (By Diagnosis - see last	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	PA is Required for the following diagnosis codes: C61, C79.82, D07.5, Z85.46
Medical	C2624		column) Required	column) Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	C2622 C5273		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Required Not Required	Required Not Required	
Medical	C5277		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical Medical	C9354 C9356		Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	C9363 C9727		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	C9734		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical Medical	C9784 C9785		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	C9792		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	

			Commercial	Commercial							
Is the code BH, DME,	Procedure	Revenue	Fully Insured	Self Funded			Safety Net	Safety Net	Safety Net Managed Medicaid	Safety Net	
eviCore, or Medical?	Code	Code	Rate Code (Commercial Products, but not limited to: HMO, PPO, EPO, POS &	(Commercial Products, but not limited to: HMO, PPO,	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Managed Medicaid	Health and Recovery Program	Diagnosis Requirements (if applicable)
Medical	C9796		HNY EPO) Required	EPO & POS) Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	E0201		Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical Medical	E0470 E0471		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	E0601 E0769		Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	Not Required Not Required	Required Not Required	Required Not Required	Required Not Required	
Medical Medical	E1399 E3000		Required Not Required	Required Not Required	Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	
Medical	G0182		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical Medical	G0255 G0276		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Required	Required Required	Required Required	
Medical Medical	G0277 G0299		Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Required	Required Not Required	Required Not Required	
Medical Medical	G0300 G0341		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Required	Required Required	Not Required Required	Not Required Required	
Medical	G0342		Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical Medical	G0343 G0422		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Required Required	Required Required	
Medical Medical	G0423 G0428		Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Not Required	Required Not Required	
Medical Medical	G0429 G0455		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	G0460 G0465		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Required Required	Not Required Required	Not Required Required	
Medical	H0051		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	J0270 J0275		Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	J2440 J2760		Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	J3570 J7330		Not Required Not Required	Not Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Not Required	Not Required Required	Not Required Required	-
Medical Medical	37330 37402 K0898		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Not Required	Required Not Required	Not Required Required	Not Required Required	
Medical	K0899		Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical Medical	L1320 L1499		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	
Medical Medical	L2006 L2999		Required Not Required	Required Not Required	Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	
Medical Medical	L3649 L3999		Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required	Required Required	Not Required Required	Not Required Required	
Medical	L6805		Not Required	Not Required	Not Required	Not Required	Required Required	Not Required	Required	Required	
Medical Medical	L7259 L8499		Not Required Required	Not Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	L8603 L8604		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	
Medical Medical	L8605 L8606		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	
Medical Medical	L8612 M0075		Required	Required	Not Required	Not Required	Required	Not Required Not Required	Required	Required	
Medical	M0300		Not Required Required	Not Required Reauired	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required	Required Not Required	Required Not Required	
Medical Medical	P9020 Q2026		Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Required Not Required	Not Required Required	Not Required Required	
Medical Medical	Q4101 O4104		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	Q4105 O4106		Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	Q4107 Q4108		Required Required	Required Required	Required Required	Required Required	Not Required Required	Not Required Not Required	Not Required Required	Not Required Required	
Medical	Q4110		Required	Required	Required	Required	Required	Not Required	Required	Required	
Medical Medical	Q4111 Q4112		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Required Not Required	Not Required Required	Not Required Required	
Medical Medical	04113 04114		Required Required	Required Required	Required Required	Required Required	Not Required Required	Not Required Not Required	Not Required Required	Not Required Required	
Medical Medical	Q4115 Q4116		Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	Q4117 Q4118		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical	Q4121		Required	Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical Medical	O4122 Q4123		Required Required	Required Required	Required Required	Required Required	Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	
Medical Medical	Q4124 Q4125		Required Required	Required Required	Required Required	Required Required	Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	Q4126 Q4127		Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	04128 Q4130		Required Required	Required Required Required	Required Required	Required Required	Required Required Required	Not Required Not Required Required	Not Required Not Required Not Required	Not Required Not Required Not Required	
Medical Medical	Q4132		Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical Medical	Q4133 Q4134		Not Required Required	Not Required Required	Required Required	Required Required	Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	
Medical Medical	Q4135 O4136		Required Reauired	Required Reauired	Not Required Reauired	Not Required Required	Not Required Required	Not Required Required	Required Required	Required Reauired	
Medical Medical	Q4137 Q4138		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	Q4139		Required Not Required	Required Not Required	Not Required Not Required	Not Required	Not Required Not Required	Not Required Not Required Not Required	Not Required	Not Required	
Medical	Q4140 Q4141		Required	Required	Not Required	Not Required Not Required	Not Required	Not Required	Required Not Required	Required Not Required	
Medical Medical	04142 04143		Reauired Reauired	Reauired Reauired	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	Q4145 Q4146		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	
Medical Medical	Q4147 Q4148		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	Q4149		Required	Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	O4150 Q4151		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	Q4152 Q4153		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	
Medical Medical	Q4154 Q4155		Required Not Required	Required Not Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	04156 Q4157		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	
Medical	Q4158		Required	Required	Required	Required	Not Required	Not Required	Required	Required	
Medical Medical	Q4159 Q4160		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4161 O4162		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	

			Commercial	Commental							
Is the code BH, DME,	Brocoduro	Povonuo	Fully Insured	Self Funded			Safatu Not	Safaty Not	Cafety Net	Safety Net	
eviCore, or Medical?	Code	Revenue Code	Rate Code (Commercial Products, but not limited to: HMO, PPO, EPO, POS &	(Commercial Products, but	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Health and Recovery Program	Diagnosis Requirements (if applicable)
			HNY EPO)	EPO & POS)							
Medical Medical	Q4163 Q4164		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4165 Q4166		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	Q4167 O4169		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	Q4170		Not Required	Not Required	Not Required Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical	Q4171 Q4173		Required Required	Required Required	Required	Not Required Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	Q4174 Q4175		Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	
Medical Medical	04176		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4177 Q4178 Q4179		Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	Q4180		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	Q4181 Q4182		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	O4183 Q4184		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4185 Q4186		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4188 Q4189		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	O4190 O4191		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	Q4192		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	Q4193 Q4194		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4195 O4196		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4197 Q4198		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4199 Q4200		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	
Medical	Q4201		Required	Required	Required	Required	Required	Required	Not Required	Not Required	
Medical Medical	04212 04217 Q4224		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4225		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	
Medical Medical	Q4229 Q4230		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4232 Q4233		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4234 Q4235		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	Q4236		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	Q4237 Q4238		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	O4239 Q4240		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4241 Q4242		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4245 Q4246		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	04247		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	Q4248 Q4249		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4250 Q4251		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4252 Q4253		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	
Medical Medical	O4254 O4255		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4255 Q4256 Q4257		Required	Required Required	Not Required Not Required	Not Required	Not Required Not Required	Not Required Not Required	Not Required	Not Required Not Required	
Medical	Q4258		Required Required	Required	Not Required	Not Required Not Required	Not Required	Not Required	Not Required Not Required	Not Required	
Medical Medical	Q4259 Q4260		Required Required	Required Required	Required Not Required	Required Not Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4261 Q4262		Required Required	Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	Not Required Required	
Medical Medical	Q4263 Q4264		Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	Q4265 Q4266		Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical	Q4267 Q4268		Required	Required	Required	Required	Required	Required	Not Required	Not Required	
Medical Medical	Q4269		Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4270 Q4271		Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	O4272 Q4273		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4274 Q4275		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4276 Q4278		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	O4279		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	O4280 Q4281		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4282 Q4283		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4284 Q4285		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	O4286 Q4287		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4288 Q4289		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	Q4290		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	Q4291 O4292		Required Reauired	Required Required	Required Reauired	Required Reauired	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4293 Q4294		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4295 Q4296		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4297		Required Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical	O4298		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	

			Commercial	Commercial							
Is the code BH, DME,	Procedure	Revenue	Fully Insured	Self Funded			Safety Net	Safety Net	Safety Net	Safety Net	
eviCore, or Medical?	Code	Revenue Code	Rate Code (Commercial Products, but not limited to: HMO, PPO, EPO, POS &	(Commercial Products, but	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Health and Recovery Program	Diagnosis Requirements (if applicable)
			HNY EPO)	EPO & POS)							
Medical Medical	Q4299 Q4300		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4301 Q4302		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	Q4303		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	O4304 Q4305		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4306 Q4307		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4308 O4309		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical	04310		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	O4311 Q4312		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4313 Q4314		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	Q4315		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	Q4316 O4317		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4318 Q4319		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4320 Q4321		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	Q4322		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	O4323 Q4324		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4325 Q4326		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	-
Medical	Q4327		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	Q4331 Q4332		Required Required	Required Required	Required Reauired	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4334 Q4335	-	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical	Q4336		Required	Required	Not Required	Not Required	Required	Required	Required	Required	
Medical Medical	Q4337 Q4338		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	O4339 O4340		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical	Q4341		Required	Required	Not Required Not Required	Not Required	Required	Required	Required	Required	
Medical Medical	Q4342 Q4343		Required Required	Required Required	Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	Q4344 Q4345		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	04346 Q4347		Required Required	Required Required	Required Required	Required Required	Not Required	Not Required	Not Required Not Required	Not Required	
Medical	Q4348		Required	Required	Required	Required	Not Required Not Required	Not Required Not Required	Not Required	Not Required Not Required	
Medical Medical	Q4349 Q4350		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4351 O4352		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	Q4353		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	Q4354 Q4355		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4356 Q4357		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	O4358		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	Q4359 Q4360		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4361 Q4362		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4363 Q4364		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	04365		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	Q4366 Q4367		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4368 Q4369		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	Q4370 Q4371		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4372		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	Q4373 Q4375	T	Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4376 Q4377		Required Required	Required Required	Required Required	Required Required	Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	-
Medical	04378		Required	Required	Required	Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	Q4379 Q4380		Required Required	Required Required	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4382 Q4383		Required Required	Required Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	-
Medical	Q4384		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	O4385 Q4386		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4387 Q4388	T	Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	Q4389		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	Q4390 O4391		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	O4392 Q4393		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical	Q4394 Q4395		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	Q4396		Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	Q4397 O5006		Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical Medical Medical	Q5009 Q5010		Not Required Not Required	Not Required Not Required	Not Required Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical	R0076		Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical Medical	S0207 S0208		Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	S0255 S0271		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical	S0596		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	S1091 S2053		Required Required	Required Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Required	Not Required Required	
Medical Medical	S2054 S2060		Required Not Required	Required Not Required	Not Required Not Required	Required Not Required	Required Required	Required Not Required	Required Required	Required Required	

				Commercial	Commercial							
Is the code BH, DME,	Procedure	Revenue	Rate Code	Fully Insured	Self Funded	Medicare	HMO D-SNP	Safety Net Child Health Plus	Safety Net Essential Plan	Safety Net Managed Medicaid	Safety Net Health and Recovery	Diagnosis Requirements (if applicable)
eviCore, or Medical?	Code	Code	Rate Code	not limited to: HMO, PPO, EPO, POS &	(Commercial Products, but not limited to: HMO, PPO,	medicare	HHO D-SNP	Child Health Plus	Essential Plan	Managed Medicaid	Program	Diagnosis Requirements (if applicable)
Medical	S2061			HNY EPO) Not Required	EPO & POS) Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical Medical	S2065 S2102			Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Not Required	Required Required	Required Required	
Medical	S2120			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	Not Required	
Medical Medical	S2140 S2142			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	S2150			Required	Required	Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	
Medical Medical	S2152 S2202			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Not Required	Required Required	Required Required	
Medical Medical	S2235 S2300			Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required	Not Required Required	
Medical	S3841			Required	Required	Required	Required	Required	Required	Required Reauired	Required	
Medical Medical	S3844 S3846			Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	
Medical	S3849			Required	Required	Required	Required	Required	Required	Required	Required	
Medical Medical	S3850 S3852			Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	S3853 S3854			Required Not Required	Required Not Required	Required Not Required	Required Not Required	Required Required	Required Required	Required Not Required	Required Not Required	
Medical	S3861			Required	Required	Required	Required	Required	Required	Required	Required	
Medical Medical	S3865 S3866			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Required	Required Required	Required Required	
Medical	S5102			Not Required	Not Required	Not Required	Required	Not Required	Not Required	Required	Required	
Medical Medical	S5105 S5130			Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	
Medical	S5165		1 7	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required (Ages 22 & older)	Not Required	
Medical	S5199			Not Required	Not Required	Not Required	Required	Required	Not Required	Required	Required	
Medical Medical	S8080 S9025			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Required	Not Required Not Required	Not Required Not Required	
Medical Medical	S9055 S9097			Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	
Medical	S9122			Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical Medical	S9123 S9124			Required Required	Required Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	S9125 S9126			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Not Required Required	Not Required Required	
Medical	S9127	None		Not Required	Not Required	Not Required	Not Required	Not Required	Required	Not Required	Not Required	
Medical Medical	S9127 S9127	780 789		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Not Required	
Medical	S9128	None		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	S9128 S9128	780 789		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	S9129 S9129	None 780		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	
Medical	S9129	789		Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	S9131 S9152			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Required	Required Reauired	Required Reauired	
Medical	S9960			Required	Required	Not Required	Not Required	Required	Required	Not Required	Not Required	
Medical Medical	S9961 T1000			Required Not Required	Required Not Required	Not Required Not Required	Not Required Required	Not Required Required	Not Required Not Required	Not Required Required	Not Required Required	
Medical Medical	T1001 T1001	None 780		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical	T1001	789		Not Required	Not Required	Not Required	Not Required	Required	Required	Required	Required	
Medical Medical	T1002 T1003			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical Medical	T1004 T1019			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Required Required	Required Required	
Medical	T1020			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	Required	Required	
Medical Medical	T1021 T1030			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Required Required	Required Required	
Medical Medical	T1031 T1999			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Required Required	Required Required	
Medical	T2001			Not Required	Not Required	Not Required	Required	Not Required	Not Required	Required	Required	
Medical Medical	T2004 T2005			Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical	T2007			Required	Required	Not Required	Not Required	Not Required	Not Required	Required Required	Required	
Medical	T2028			Not Required	Not Required	Not Required	Not Required	Required	Not Required	(Ages 22 & older)	Not Required	
Medical	T2029			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required Required	Required	
Medical	T2038			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	(Only for Moving Assistance/Community	Required (Only required for Moving	
medical	12030			Not Required	Not Required	Not Required	Not Required	Not Required	Not Required	transition, for HCBS or CFCO	Assistance/Community transition, for CFCO program)	
	*****			N. D. C.						program) Required		
Medical	T2039			Not Required	Not Required	Not Required	Required	Required	Not Required	(Ages 22 & older)	Required	
Medical Medical	T2042 T2043			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	T2044 T2045		1	Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical	T2046			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical Medical	T5999 V2199			Required Not Required	Required Not Required	Not Required Not Required	Not Required Not Required	Required Not Required	Required Not Required	Not Required Required	Not Required Required	
Medical Medical	V2299 V2399			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical	V2499			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical Medical	V2700 V2799			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Not Required Required	Not Required Required	
Medical Medical	V5362 V5363			Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical	V5364			Not Required	Not Required	Not Required	Not Required	Required	Not Required	Required	Required	
Medical Medical	NONE NONE	0650 0651		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical	NONE NONE	0652 0655		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required	Required	Not Required Not Required	Required	Required Required	
Medical Medical	NONE	0656		Not Required	Not Required	Not Required	Not Required Not Required	Required Required	Not Required	Required Required	Required	
Medical Medical	NONE NONE	0657 0659		Not Required Not Required	Not Required Not Required	Not Required Not Required	Not Required Not Required	Required Required	Not Required Not Required	Required Required	Required Required	
Medical Medical	NONE NONE	0172 0173		Notification Required Notification Required	Notification Required Notification Required	Not Required Not Required	Not Required Not Required	Notification Required Notification Required	Notification Required Notification Required	Notification Required Notification Required	Notification Required Notification Required	
Medical	NONE	0174		Notification Required	Notification Required	Not Required	Not Required	Notification Required	Notification Required	Notification Required	Notification Required	
Medical	NONE			Notification Required	Notification Required	Not Required	Not Required	Notification Required	Notification Required	Notification Required	Notification Required	