

### Services that do not require Prior Authorization

THIS MATRIX IS NOT TO BE UTILIZED TO MAKE BENEFIT COVERAGE DETERMINATIONS.

This Matrix is for outpatient services provided in participating (PAR) non-hospital settings (e.g., does not apply to place of service 19, 21, 22, 52) for authorizations the Health Plan (Brand New Day or Central Health Plan) is delegated to review. Please note that the below statements and lists do not apply to services authorized by Health Plan delegates. All Elective Inpatient Admissions to Acute Hospitals, Skilled Nursing Facilities (SNF), Rehabilitation Facilities (AIR), or Long Term Acute Care Hospitals (LTACH) require Prior Authorization. Additionally, all services related to transplant evaluation/listing or CAR-T-related evaluation or services require authorization even if the CPT code appears on the below list.

We attempt to provide the most current and accurate information on this PA Matrix. Obtaining authorization does not guarantee payment. The plan retains the right to review benefit limitations and exclusions, beneficiary eligibility on the date of the service, correct coding, billing practices and whether the service was provided in the most appropriate and cost-effective setting of care. If there is a question that Prior Authorization is needed, please refer to your Provider Manual or submit a PA Request Form.

No PA is required for office visits at Participating (PAR) Network Providers, except as identified above.

All NON-PAR Providers/locations require authorization regardless of services provided or codes submitted, except for Emergency Services. For any drugs on the prior authorization list that use a temporary C code or other temporary HCPCS code that is not unique to a specific drug, which are later assigned a new HCPCS code, will still require prior authorization for such drug even after it has been assigned a new HCPCS code, until otherwise noted in the Prior Authorization list.

Effective 5/01/2024

Procedure Code	Description
93000	ELECTROCARDIOGRAM COMPLETE
93005	ELECTROCARDIOGRAM TRACING
93010	ELECTROCARDIOGRAM REPORT
93279	PRGRMG DEV EVAL PM/LDLS PM
93280	PM DEVICE PROGR EVAL DUAL
93281	PM DEVICE PROGR EVAL MULTI
93282	PRGRMG EVAL IMPLANTABLE DFB
93283	PRGRMG EVAL IMPLANTABLE DFB
93284	PRGRMG EVAL IMPLANTABLE DFB

93285	PRGRMG DEV EVAL SCRMS IP
93286	PERI-PROCEDURAL DEVICE EVALUATION PM
93287	PERI-PROCEDURAL DEVICE EVALUATION ICD
93288	INTERROG EVL PM/LDLS PM IP
93289	INTERROG DEVICE EVAL HEART
93290	INTERROG DEV EVAL ICPMS IP
93291	INTERROG DEV EVAL SCRMS IP
93292	WCD DEVICE INTERROGATE
93293	PM PHONE R-STRIP DEVICE EVAL
93294	REM INTERROG EVL PM/LDLS PM
93295	DEV INTERROG REMOTE 1/2/MLT
93296	REM INTERROG EVL PM/IDS
93321	DOPPLER ECHO EXAM HEART
99212	OFFICE O/P EST SF 10
81003	URINALYSIS AUTO W/O SCOPE
92004	EYE EXAM NEW PATIENT
92012	EYE EXAM ESTABLISH PATIENT
92014	EYE EXAM&TX ESTAB PT 1/>VST
92015	DETERMINE REFRACTIVE STATE
92018	NEW EYE EXAM & TREATMENT
92019	EYE EXAM & TREATMENT
92020	SPECIAL EYE EVALUATION
92133	CMPTR OPHTH IMG OPTIC NERVE
92134	CPTR OPHTH DX IMG POST SEGMT
92250	EYE EXAM WITH PHOTOS
99204	OFFICE O/P NEW MOD 45
99214	OFFICE/OUTPATIENT VISIT EST
90833	PSYTX W PT W E/M 30 MIN
90785	PSYTX COMPLEX INTERACTIVE
62290	NJX PX DISCOGRAPHY LUMBAR
70030	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE HEAD AND NECK
70100	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE HEAD AND NECK
70110	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE HEAD AND NECK
70120	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE HEAD AND NECK
70130	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE HEAD AND NECK

70134	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE HEAD AND NECK
70140	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE HEAD AND NECK
70150	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE HEAD AND NECK
70160	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE HEAD AND NECK
70170	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE HEAD AND NECK
70190	RADIOLOGIC EXAMINATION; OPTIC FORAMINA
70200	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE HEAD AND NECK
70210	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE HEAD AND NECK
70220	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE HEAD AND NECK
70240	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE HEAD AND NECK
70250	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE HEAD AND NECK
70260	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE HEAD AND NECK
70300	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE HEAD AND NECK
70310	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE HEAD AND NECK
70320	FULL MOUTH XR
70328	RADIOLOGIC EXAMINATION, TEMPOROMANDIBULAR JOINT, OPEN AND CLOSED MOUTH
70330	RADIOLOGIC EXAMINATION, TEMPOROMANDIBULAR JOINT, OPEN AND CLOSED MOUTH
70332	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE HEAD AND NECK
70350	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE HEAD AND NECK
70355	PANORAMIC XR
70360	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE HEAD AND NECK
70370	THROAT XR
70380	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE HEAD AND NECK
71045	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE CHEST
71046	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE CHEST
71047	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE CHEST
71100	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE CHEST
71101	RADIOLOGICAL SERVICES SPECIFIC TO X-RAYS OF THE RIBS, BILATERAL.
71110	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE CHEST
71111	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE CHEST
71120	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE CHEST
71130	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE CHEST
71250	CT THORAX DX C
71260	CT THORAX DX C+
71270	CT THORAX DX C

72020	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE SPINE AND PELVIS
72040	RADIOLOGIC EXAMINATION, SPINE, CERVICAL; TWO OR THREE VIEWS.
72050	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE SPINE AND PELVIS
72052	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE SPINE AND PELVIS
72070	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE SPINE AND PELVIS
72072	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE SPINE AND PELVIS
72074	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE SPINE AND PELVIS
72080	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE SPINE AND PELVIS
72081	RADIOLOGIC EXAMINATION OF THE ENTIRE THORACIC AND LUMBAR SPINE, INCLUDING THE SKULL AND THE CERVICAL AND SACRAL SPINE, IF PERFORMED, IN A SINGLE VIEW.
72082	RADIOLOGIC EXAMINATION, SPINE, ENTIRE THORACIC AND LUMBAR, INCLUDING SKULL, CERVICAL AND SACRAL SPINE IF PERFORMED (EG, SCOLIOSIS EVALUATION)
72083	RADIOLOGIC EXAMINATION, SPINE, ENTIRE THORACIC AND LUMBAR, INCLUDING SKULL, CERVICAL AND SACRAL SPINE IF PERFORMED (EG, SCOLIOSIS EVALUATION)
72084	RADIOLOGIC EXAMINATION, SPINE, ENTIRE THORACIC AND LUMBAR, INCLUDING SKULL, CERVICAL AND SACRAL SPINE IF PERFORMED (EG, SCOLIOSIS EVALUATION)
72100	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE SPINE AND PELVIS
72110	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE SPINE AND PELVIS
72114	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE SPINE AND PELVIS
72120	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE SPINE AND PELVIS
72170	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE SPINE AND PELVIS
72190	RADIOLOGIC EXAMINATION, PELVIS; COMPLETE, MINIMUM OF THREE VIEWS.
72200	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE SPINE AND PELVIS
72202	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE SPINE AND PELVIS
72220	X-RAY OF SACRUM AND COCCYX, MINIMUM OF 2 VIEWS
73000	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE UPPER EXTREMITIES
73010	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE UPPER EXTREMITIES
73020	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE UPPER EXTREMITIES
73030	RADIOLOGIC EXAMINATION, SHOULDER
73050	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE UPPER EXTREMITIES
73060	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE UPPER EXTREMITIES
73070	RADIOLOGIC EXAMINATION, ELBOW
73080	RADIOLOGIC EXAMINATION, ELBOW
73090	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE UPPER EXTREMITIES
73100	X-RAY EXAMINATION WRIST 2 VIEWS, BOTH LEFT AND RIGHT

73110	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE UPPER EXTREMITIES
73120	RADIOLOGIC EXAMINATION OF THE HAND, MINIMUM OF TWO VIEWS.
73130	RADIOLOGIC EXAMINATION OF THE HAND, MINIMUM OF TWO VIEWS.
73140	RADIOLOGIC EXAMINATION, FINGER(S), MINIMUM OF 2 VIEW
73501	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE LOWER EXTREMITIES
73502	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE LOWER EXTREMITIES
73503	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE LOWER EXTREMITIES
73521	RADIOLOGIC EXAMINATION, HIPS, BILATERAL, WITH PELVIS WHEN PERFORMED; 2 VIEWS
73522	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE LOWER EXTREMITIES
73523	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE LOWER EXTREMITIES
73551	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE LOWER EXTREMITIES
73552	RADIOLOGIC EXAMINATION, FEMUR; MINIMUM 2 VIEWS
73560	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE LOWER EXTREMITIES
73562	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE LOWER EXTREMITIES
73564	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE LOWER EXTREMITIES
73565	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE LOWER EXTREMITIES
73590	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE LOWER EXTREMITIES
73592	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE LOWER EXTREMITIES
73600	RADIOLOGIC EXAMINATION, ANKLE
73610	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE LOWER EXTREMITIES
73620	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE LOWER EXTREMITIES
73630	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE LOWER EXTREMITIES
73650	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE LOWER EXTREMITIES
73660	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE LOWER EXTREMITIES
74018	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE ABDOMEN
74019	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE ABDOMEN
74021	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE ABDOMEN
74022	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE ABDOMEN
74210	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE GASTROINTESTINAL TRACT
74220	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE GASTROINTESTINAL TRACT
74221	SWALLOW STUDY DOUBLE-CONTRAST (EG, HIGH-DENSITY BARIUM AND EFFERVESCENT AGENT) STUDY
74230	COMPLETE BARIUM SWALLOW STUDY
74240	RADIOLOGIC EXAMINATION, UPPER GASTROINTESTINAL TRACT, INCLUDING SCOUT ABDOMINAL RADIOGRAPH(S) AND DELAYED IMAGE(S), WHEN PERFORMED; SINGLE-CONTRAST (EG, BARIUM) STUDY
74246	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE GASTROINTESTINAL TRACT

74248	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE GASTROINTESTINAL TRACT
74250	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE GASTROINTESTINAL TRACT
74251	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE GASTROINTESTINAL TRACT
74270	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE GASTROINTESTINAL TRACT
74280	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE GASTROINTESTINAL TRACT
74290	CONTRAST X
74710	DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) PROCEDURES OF THE GASTROINTESTINAL TRACT
76010	RADIOLOGICAL EXAMINATION FROM NOSE TO RECTUM FOR FOREIGN BODY, SINGLE VIEW, CHILD.
76100	OTHER DIAGNOSTIC RADIOLOGY (DIAGNOSTIC IMAGING) RELATED PROCEDURES
76120	CINE/VIDEO X
76125	CINE/VIDEO X
76536	US EXAM OF HEAD AND NECK
76641	ULTRASOUND BREAST COMPLETE
76642	ULTRASOUND BREAST LIMITED
76700	US EXAM ABDOM COMPLETE
76705	ECHO EXAM OF ABDOMEN
76770	US EXAM ABDO BACK WALL COMP
76775	US EXAM ABDO BACK WALL LIM
76830	TRANSVAGINAL US NON
76856	US EXAM PELVIC COMPLETE
76857	US EXAM PELVIC LIMITED
76870	US EXAM SCROTUM
76881	US COMPL JOINT R
76882	US LMTD JT/NONVASC XTR STRUX
77071	MANUAL APPLICATION OF STRESS PERFORMED BY A PHYSICIAN FOR JOINT RADIOGRAPHY, INCLUDING THE CONTRALATERAL JOINT IF INDICATED
77072	BONE/JOINT STUDIES
77073	BONE/JOINT STUDIES
77074	THE PROVIDER PERFORMS A SERIES OF X-RAYS ON SPECIFIC BONES OF THE BODY TO EVALUATE CONDITIONS SUCH AS THE SPREAD OF CANCER
77075	BONE/JOINT STUDIES
77076	BONE/JOINT STUDIES
77080	DXA BONE DENSITY/PERIPHERAL DXA BONE DENSITY STUDY
77080	DXA BONE DENSITY/PERIPHERAL DXA BONE DENSITY STUDY
77078	CT BONE DENSITY AXIAL

77081	DXA BONE DENSITY/PERIPHERAL
77085	DXA BONE DENSITY STUDY
77081	DXA BONE DENSITY/PERIPHERAL
77085	DXA BONE DENSITY STUDY
93970	EXTREMITY STUDY
93971	EXTREMITY STUDY
11055	TRIM SKIN LESION
11056	TRIM SKIN LESIONS 2 TO 4
11057	TRIM SKIN LESIONS OVER 4
11720	DEBRIDE NAIL 1
11721	DEBRIDE NAIL 6 OR MORE
99203	OFFICE O/P NEW LOW 30
99204	OFFICE O/P NEW MOD 45
99205	OFFICE O/P NEW HI 60
99213	OFFICE O/P EST LOW 20
99214	OFFICE/OUTPATIENT VISIT EST
99215	OFFICE O/P EST HI 40
77065	DX MAMMO INCL CAD UNI
77066	DX MAMMO INCL CAD BI
77067	SCR MAMMO BI INCL CAD
77063	BREAST TOMOSYNTHESIS BI
99203	OFFICE O/P NEW LOW 30
99204	OFFICE O/P NEW MOD 45
99205	OFFICE O/P NEW HI 60
99213	OFFICE O/P EST LOW 20
99214	OFFICE/OUTPATIENT VISIT EST
99215	OFFICE O/P EST HI 40
99203	OFFICE O/P NEW LOW 30
99204	OFFICE O/P NEW MOD 45
99205	OFFICE O/P NEW HI 60
99213	OFFICE O/P EST LOW 20
99214	OFFICE/OUTPATIENT VISIT EST
99215	OFFICE O/P EST HI 40
99203	OFFICE O/P NEW LOW 30
99204	OFFICE O/P NEW MOD 45

99205	OFFICE O/P NEW HI 60
99213	OFFICE O/P EST LOW 20
99214	OFFICE/OUTPATIENT VISIT EST
99215	OFFICE O/P EST HI 40
45300	PROCTOSIGMOIDOSCOPY DX
45303	PROCTOSIGMOIDOSCOPY DILATE
45305	PROCTOSIGMOIDOSCOPY W/BX
45307	PROCTOSIGMOIDOSCOPY FB
45308	PROCTOSIGMOIDOSCOPY REMOVAL
45309	PROCTOSIGMOIDOSCOPY REMOVAL
45315	PROCTOSIGMOIDOSCOPY REMOVAL
45317	PROCTOSIGMOIDOSCOPY BLEED
45320	PROCTOSIGMOIDOSCOPY ABLATE
45321	PROCTOSIGMOIDOSCOPY VOLVUL
45327	PROCTOSIGMOIDOSCOPY W/STENT
45330	DIAGNOSTIC SIGMOIDOSCOPY
45331	SIGMOIDOSCOPY AND BIOPSY
45332	SIGMOIDOSCOPY W/FB REMOVAL
45333	SIGMOIDOSCOPY & POLYPECTOMY
45334	SIGMOIDOSCOPY FOR BLEEDING
45335	SIGMOIDOSCOPY W/SUBMUC INJ
45337	SIGMOIDOSCOPY & DECOMPRESS
45338	SIGMOIDOSCOPY W/TUMR REMOVE
45346	SIGMOIDOSCOPY W/ABLATION
45340	SIG W/TNDSC BALLOON DILATION
45341	SIGMOIDOSCOPY W/ULTRASOUND
45342	SIGMOIDOSCOPY W/US GUIDE BX
45347	SIGMOIDOSCOPY W/PLCMT STENT
45349	SIGMOIDOSCOPY W/RESECTION
45350	SGMDSC W/BAND LIGATION
45378	DIAGNOSTIC COLONOSCOPY
45379	COLONOSCOPY W/FB REMOVAL
45380	COLONOSCOPY AND BIOPSY
45381	COLONOSCOPY SUBMUCOUS NJX
45382	COLONOSCOPY W/CONTROL BLEED



45388	COLONOSCOPY W/ABLATION
45384	COLONOSCOPY W/LESION REMOVAL
45385	COLONOSCOPY W/LESION REMOVAL
45386	COLONOSCOPY W/BALLOON DILAT
45389	COLONOSCOPY W/STENT PLCMT
45391	COLONOSCOPY W/ENDOSCOPE US
45392	COLONOSCOPY W/ENDOSCOPIC FNB
45390	COLONOSCOPY W/RESECTION
45393	COLONOSCOPY W/DECOMPRESSION
45398	COLONOSCOPY W/BAND LIGATION
45395	LAP REMOVAL OF RECTUM
45397	LAP REMOVE RECTUM W/POUCH
45400	LAPAROSCOPIC PROC
45402	LAP PROCTOPEXY W/SIG RESECT
45499	LAPAROSCOPE PROC RECTUM
45500	REPAIR OF RECTUM
45505	REPAIR OF RECTUM
45520	TREATMENT OF RECTAL PROLAPSE
45540	CORRECT RECTAL PROLAPSE
45541	CORRECT RECTAL PROLAPSE
45550	REPAIR RECTUM/REMOVE SIGMOID
45560	REPAIR OF RECTOCELE
45562	EXPLORATION/REPAIR OF RECTUM
45563	EXPLORATION/REPAIR OF RECTUM
45800	REPAIR RECT/BLADDER FISTULA
45805	REPAIR FISTULA W/COLOSTOMY
45820	REPAIR RECTOURETHRAL FISTULA
45825	REPAIR FISTULA W/COLOSTOMY
45900	REDUCTION OF RECTAL PROLAPSE
45905	DILATION OF ANAL SPHINCTER
45910	DILATION OF RECTAL NARROWING
45915	REMOVE RECTAL OBSTRUCTION
45399	UNLISTED PROCEDURE COLON
45990	SURG DX EXAM ANORECTAL
45999	RECTUM SURGERY PROCEDURE

G0105	COLOREC CANCR SCR; COLNSCPY HI RISK
97802	MEDICAL NUTRITION INDIV IN
97803	MED NUTRITION INDIV SUBSEQ
97804	MEDICAL NUTRITION GROUP
G0420	F/F EDU SRVC CKD; IND PER SESS 1 HR
E0143	WALKER FOLD WHEELED ADJUSTBL/FIX HT
E0156	SEAT ATTACHMENT WALKER
E0100	CANE ALL MATL ADJUSTBLE/FIXED W/TIP
E0159	BRAKE ATTCH WHEELED WALK REPLCMT EA
Q0092	SET-UP FOR PORTABLE X-RAY EQUIPMENT
90791	PSYCH DIAGNOSTIC EVALUATION
90792	PSYCH DIAG EVAL W/MED SRVCS
R0070	TRANS PRTBL XRAY EQP&PERS
R0075	TRANS PRTBL XRAY EQP&PERS