



Banner Plan Administration®

AARP® MedicareComplete® insured through UnitedHealthcare 2022 Prior Authorization List - Effective Date 1/1/2022

For questions or more information, please contact Banner Plan Administration at: 866-238-5564

All services and procedures, regardless of place of service, must meet medical necessity criteria.

Organizational Determinations Status Definitions	<p>Expedited: When the enrollee or his/her physician believes that waiting for a decision under the standard time frame could place the enrollee's life, health, or ability to regain maximum function in serious jeopardy</p> <p>Standard: Determination must be made as expeditiously as the enrollee's health condition requires, but no later than 14 calendar days after the date organization receives the request.</p>
Inpatient Admissions	<p>Prior authorization is not required for emergent inpatient admission. Please submit a face sheet as a form of notification for acute or post-acute (SNF, AIR, LTAC) to allow for authorization entry and concurrent review.</p>
Out of Network Services	<p>Participating primary care providers must obtain prior authorization for any referral of non-emergency care to a non-participating health care facility or provider. Participating specialists requesting service at a non-participating health care entity must also request prior authorization.</p>
Durable Medical Equipment	<p>Equipment (prosthetics, orthotics, equipment and/or associated medical supplies) for which the billed amount exceeds \$1,000.00 retail cost.</p>
Advanced Imaging, Cardiology, Joint, Spine, Pain Injections, PT/OT, Medical Oncology, Radiation Oncology	<p>Requires Prior Authorization: Submit to Evicore. www.evicore.com/pages/providerlogin.aspx Phone – 888-693-3211; Fax – 888-693-3210;</p>
Ambulance Services	<p>Non-Emergent all codes</p>
Transplants	<p>All codes excluding corneal transplants. All transplant requests, all codes, must be submitted to UnitedHealthCare Medicare Advantage. Website: www.uhcprovider.com Phone: 888-936-7246</p>
Genetic Testing	<p>All codes</p>
Cosmetic Surgery following Mastectomy for Breast Cancer	<p>Reconstruction procedures are covered but require prior authorization.</p>
Experimental or Investigational	<p>Experimental, investigational or unproven requests need to be submitted to UnitedHealthcare Medicare Advantage. Website: www.uhcprovider.com Phone: 888-936-7246</p>

Code	Description	Items Processed	Items Processed	eviCore List Name
15780	Dermabrasion; total face	Banner		
15786	Abrasion; single lesion	Banner		
15787	Abrasion; each additional 4 lesions or less	Banner		
15788	Chemical peel, facial; epidermal	Banner		
15789	Chemical peel; facial; dermal	Banner		
15792	Chemical peel, nonfacial; epidermal	Banner		
15793	Chemical peel Nonfacial	Banner		
15819	Plastic surgery neck	Banner		
15820	Blepharoplasty Lower Eyelid	Banner		
15821	Blepharoplasty Lower Eyelid Herniated Fat Pad	Banner		
15822	Blepharoplasty Upper Eyelid	Banner		
15823	Blepharoplasty, Upper Eyelid; With Excessive Skin Weighting Down Lid	Banner		
15824	Rhytidectomy Forehead	Banner		
15825	Rhytidectomy Neck W/Platysmal Tightening	Banner		
15826	Rhytidectomy Glabellar Frown Lines	Banner		
15828	Rhytidectomy Cheek Chin&Neck	Banner		
15829	Rhytidectomy Smas Flap	Banner		
15830	Excision Skin Abd Infraumbilical Panniculectomy	Banner		
15832	Excision Excessive Skin&Subq Tissue Thigh	Banner		
15833	Excision Excessive Skin&Subq Tissue Leg	Banner		
15834	Excision Excessive Skin&Subq Tissue Hip	Banner		
15835	Excision Excessive Skin&Subq Tissue Buttock	Banner		
15836	Excision Excessive Skin&Subq Tissue Arm	Banner		
15837	Exc Excessive Skin&Subq Tissue Forearm/Hand	Banner		
15838	Exc Excsv Skin&Subq Tissue Submental Fat Pad	Banner		
15839	Excision Excessive Skin&Subq Tissue Other Area	Banner		
15847	Excision Excessive Skin & Subq Tissue Abdomen	Banner		
15876	Suction Assisted Lipectomy Head&Neck	Banner		
15877	Suction Assisted Lipectomy Trunk	Banner		
15878	Suction Assisted Lipectomy Upper Extremity	Banner		

Code	Description	Items Processed	Items Processed	eviCore List Name
15879	Suction Assisted Lipectomy Lower Extremity	Banner		
17999	<i>Skin tissue procedure</i>	Banner		
19294	Preparation of tumor cavity, with placement of radiation therapy applicator, concurrent with partial mastectomy	Banner		
19296	Placement of radiotherapy afterloading expandable catheter into the breast following partial mastectomy,	Banner		
19297	Placement of radiotherapy afterloading expandable catheter into the breast following partial mastectomy,	Banner		
19298	Placement of radiotherapy after loading brachytherapy catheters into the breast following (at the time of or subsequent to) partial mastectomy	Banner		
19316	Mastopexy	Banner		
19318	Reduction Mammoplasty	Banner		
19324	Mammoplasty Augmentation W/O Prosthetic Implant	Banner		
19325	Mammoplasty, Augmentation; With Prosthetic Implant	Banner		
19328	Removal Of Intact Mammary Implant	Banner		
19330	Removal Of Mammary Implant Material	Banner		
19340	Immediate Insertion Of Breast Prosthesis Following Mastopexy, Mastectomy Or In	Banner		
19342	Delayed Insertion Of Breast Prosthesis Following Mastopexy, Mastectomy Or In	Banner		
19350	Nipple/Areola Reconstruction	Banner		
19355	Correction Of Inverted Nipples	Banner		
19357	Breast Reconstruction, Immediate Or Delayed, With Tissue Expander, Including	Banner		
19361	Breast Reconstruction With Latissimus Dorsi Flap, Without Prosthetic Implant	Banner		
19364	Breast Reconstruction With Free Flap	Banner		
19366	Breast Reconstruction With Other Technique	Banner		
19367	Breast Reconstruction With Transverse Rectus Abdominis Myocutaneous Flap	Banner		
19368	Breast Reconstruction With Transverse Rectus Abdominis Myocutaneous Flap	Banner		
19369	Breast Reconstruction With Transverse Rectus Abdominis Myocutaneous Flap	Banner		
19370	Open Periprosthetic Capsulotomy, Breast	Banner		
19371	Periprosthetic Capsulectomy, Breast	Banner		
19380	Revision Of Reconstructed Breast	Banner		
19396	Preparation Moulage Custom Breast Implant	Banner		
19499	Unlisted Procedure Breast	Banner		
20930	Allograft, Morselized, Or Placement Of Osteopromotive Material, For Spine Surgery Only		eviCore	MSK - Spine
20931	Allograft, Structural, For Spine Surgery Only (List Separately In Addition To Code For Primary Procedure)		eviCore	MSK - Spine
20936	Autograft For Spine Surgery Only (Includes Harvesting The Graft); Local (Eg, Ribs, Spinous Process, Or Laminar Fragments) Obtained From Same Incision		eviCore	MSK - Spine

Code	Description	Items Processed	Items Processed	eviCore List Name
20937	Autograft For Spine Surgery Only (Includes Harvesting The Graft); Morselized (Through Separate Skin Or Fascial Incision)		eviCore	MSK - Spine
20938	Autograft For Spine Surgery Only (Includes Harvesting The Graft); Structural,Bicortical Or Tricortical (Through Separate Skin Or Fascial Incision)		eviCore	MSK - Spine
20974	Electrical Stimulation To Aid Bone Healing; Non Invasive (Nonoperative)		eviCore	MSK - Spine
20975	Electrical Stimulation To Aid Bone Healing; Invasive (Operative)		eviCore	MSK - Spine
21120	Genioplasty Augmentation	Banner		
21121	Genioplasty Sliding Osteotomy Single Piece	Banner		
21122	Genioplasty 2/> Sliding Osteotomies	Banner		
21123	Geniop Sliding Agmntj W/Interposal Bone Grafts	Banner		
21125	Agmntj Mndblr Body/Angle Prosthetic Material	Banner		
21127	Agmntj Mndblr Bdy/Angl W/B1 Grf Onlay/Interposal	Banner		
21142	Reconstruction Midface, Lefort I; Two Pieces, Segment Movement In Any	Banner		
21145	Reconstruction Midface, Lefort I; Single Piece, Segment Movement In Any	Banner		
21147	Reconstruction Midface, Lefort I; Three Or More Pieces, Segment Movement In Any	Banner		
21150	Reconstruction Midface, Lefort Ii; Anterior Intrusion (Eg, Treacher-Collins	Banner		
21151	Reconstruction Midface, Lefort Ii; Any Direction, Requiring Bone Grafts	Banner		
21154	Reconstruction Midface, Lefort Iii (Extracranial), Any Type, Requiring Bone	Banner		
21155	Reconstruction Midface, Lefort Iii (Extracranial), Any Type, Requiring Bone	Banner		
21159	Reconstruction Midface, Lefort Iii (Extra And Intracranial) With Forehead	Banner		
21160	Reconstruction Midface, Lefort Iii (Extra And Intracranial) With Forehead	Banner		
21172	Rcnstj Superior-Lateral Orbital Rim&Lower Fhd	Banner		
21175	Rcnstj Bifrontal Superior-Lat Orb Rims&Lwr Fhd	Banner		
21179	Rcnstj Forehead&/Supraorb Rims W/Algrf/Prostc	Banner		
21180	Rcnstj Forehead&/Supraorbital Rims W/Autograft	Banner		
21181	Rcnstj Contouring Benign Tumor Crnl Bones Xtrc	Banner		
21182	Rcnstj Orbit/Fhd/Nasethmd Exc B9 Tum Grf <40Sqcm	Banner		
21183	Rcnstj Orbit/Fhd/Nasethmd Exc B9 Grf >40 <80Sqcm	Banner		
21184	Rcnstj Orbit/Fhd/Nasethmd Exc B9 Tum Grf>80Sq Cm	Banner		
21188	Reconstruction Midface, Osteotomies (Other Than Lefort Type) And Bone Grafts	Banner		
21193	Rcnstj Mndblr Rami Hrzntl/Ver/C/L Osteot W/O Grf	Banner		
21194	Rcnstj Mndblr Rami Hrzntl/Ver/C/L Osteot W/Graft	Banner		
21195	Rcnstj Mndblr Rami&/Body Sglt Splt W/O Int Rgd	Banner		
21196	Rcnstj Mndblr Rami&/Bdy Sglt Splt W/Int Rgd Fixj	Banner		
21198	Osteotomy Mandible Segmental	Banner		
21199	Osteotomy Mandible Sgmtl W/Genioglossus Advmnt	Banner		
21206	Osteotomy Maxilla Segmental	Banner		
21208	Osteoplasty Facial Bones Augmentation	Banner		
21209	Osteoplasty Facial Bones Reduction	Banner		

Code	Description	Items Processed	Items Processed	eviCore List Name
21210	Graft Bone Nasal/Maxillary/Malar Areas	Banner		
21215	Graft Bone Mandible	Banner		
21230	Graft Rib Crtlg Autogenous Face/Chin/Nose/Ear	Banner		
21235	Graft Ear Crtlg Autogenous Nose/Ear	Banner		
21240	Arthrp Temporomandibular Joint W/Wo Autograft	Banner		
21242	Arthroplasty Temporomandibular Jt W/Allograft	Banner		
21243	Arthrp Tmprmand Joint W/Prosthetic Replacement	Banner		
21244	Rcnstj Mndbl Xtroral W/Transosteal Bone Plate	Banner		
21245	Rcnstj Mndbl/Maxl Subpriosteal Implant Partial	Banner		
21246	Rcnstj Mndbl/Maxl Subpriosteal Implant Complete	Banner		
21247	Rcnstj Mndblr Condyle W/Bone Cartlg Autografts	Banner		
21248	Rcnstj Mandible/Maxl Endosteal Implant Partial	Banner		
21249	Rcnstj Mandible/Maxl Endosteal Implant Complete	Banner		
21255	Rcnstj Zygmtc Arch/Glenoid Fossa W/Bone Cartlg	Banner		
21256	Reconstruction Orbit W/Osteotomies&Bone Grafts	Banner		
21260	Periorbital Osteotomies Bone Grafts Extracranial	Banner		
21261	Periorbital Osteotomies W/Bone Grafts I cra&Xtrc	Banner		
21263	Periorbital Osteotomies W/Bone Grafts W/Forehead	Banner		
21267	Orbital Repositioning W/Bone Grafts Extracranial	Banner		
21268	Orbital Repositioning W/Bone Grafts I cra&Xtrc	Banner		
21270	Malar Augmentation Prosthetic Material	Banner		
21275	Secondary Revision Orbitocraniofacial Rcnstj	Banner		
21280	Medial Canthopexy (Separate Procedure)	Banner		
21282	Lateral Canthopexy	Banner		
21295	Reduction Masseter Muscle&Bone Extraoral	Banner		
21296	Reduction Masseter Muscle&Bone Intraoral	Banner		
21299	Unlisted Craniofacial&Maxillofacial Procedure	Banner		
21421	Closed Tx Palatal/Maxillary Fx W/Fixation/Splint	Banner		
21422	Open Treatment Palatal/Maxillary Fracture	Banner		
21423	Open Tx Palatal/Maxillary Fx Comp Multiple Appr	Banner		
21431	Closed Tx Craniofacial Separation	Banner		
21432	Open Tx Craniofacial Sep W/Wiring&/Int Fixj	Banner		
21433	Open Tx Craniofacial Sep Complicated Mlt Appr	Banner		
21435	Open Tx Craniofacial Sep Comp W/Int&/Xtrnl Fixj	Banner		
21436	Opx Crnfc l Sep Lft Iii Typ Comp Int Fixj W/Bone	Banner		
22100	Partial Excision Of Posterior Vertebral Component (Eg, Spinous Process, Lamina O	Banner		
22101	Partial Excision Of Posterior Vertebral Component (Eg, Spinous Process, Lamina	Banner		
22102	Partial Excision Of Posterior Vertebral Component (Eg, Spinous Process, Lamina	Banner		
22103	Partial Excision Of Posterior Vertebral Component (Eg, Spinous Process, Lamina	Banner		

Code	Description	Items Processed	Items Processed	eviCore List Name
22110	Partial Excision Of Vertebral Body, For Intrinsic Bony Lesion, Without	Banner		
22112	Partial Excision Of Vertebral Body, For Intrinsic Bony Lesion, Without	Banner		
22114	Partial Excision Of Vertebral Body, For Intrinsic Bony Lesion, Without	Banner		
22116	Partial Excision Of Vertebral Body, For Intrinsic Bony Lesion, Without	Banner		
22206	Osteotomy Of Spine, Posterior Or Posterolateral Approach, Three Columns, One Ver	Banner		
22207	Osteotomy Of Spine, Posterior Or Posterolateral Approach, Three Columns, One Ver	Banner		
22208	Osteotomy Of Spine, Posterior Or Posterolateral Approach, Three Columns, One Ver	Banner		
22210	Osteotomy Of Spine, Posterior Or Posterolateral Approach, One Vertebral Segment;	Banner		
22212	Osteotomy Of Spine, Posterior Or Posterolateral Approach, One Vertebral	Banner		
22214	Osteotomy Of Spine, Posterior Or Posterolateral Approach, One Vertebral	Banner		
22216	Osteotomy Of Spine, Posterior Or Posterolateral Approach, One Vertebral	Banner		
22220	Osteotomy Of Spine, Including Discectomy, Anterior Approach, Single Vertebral	Banner		
22222	Osteotomy Of Spine, Including Discectomy, Anterior Approach, Single Vertebral	Banner		
22224	Osteotomy Of Spine, Including Discectomy, Anterior Approach, Single Vertebral	Banner		
22226	Osteotomy Of Spine, Including Discectomy, Anterior Approach, Single Vertebral	Banner		
22510	Percutaneous Vertebroplasty(Bone Biopsy Included When Performed), 1 Vertebral Body, Unilateral Or Bilateral Injection, Inclusive Of All Imaging Guidance; Cervicothoracic		eviCore	MSK - Spine
22511	Percutaneous Vertebroplasty(Bone Biopsy Included When Performed), 1 Vertebral Body, Unilateral Or Bilateral Injection,		eviCore	MSK - Spine
22512	Percutaneous Vertebroplasty(Bone Biopsy Included When Performed), 1 Vertebral Body, Unilateral Or Bilateral Injection,		eviCore	MSK - Spine
22513	Percutaneous Vertebral Augmentation, Including Cavity Creation Using Mechanical Device (Eg, Kyphoplasty), 1 Vertebral Body, Unilateral Or Bilateral Cannulation, Thoracic		eviCore	MSK - Spine
22514	Percutaneous Vertebral Augmentation, Including Cavity Creation Using Mechanical Device (Eg, Kyphoplasty), 1 Vertebral Body, Unilateral, Or Bilateral Cannulation, Lumbar		eviCore	MSK - Spine
22515	Percutaneous Vertebral Augmentation, Including Cavity Creation Using Mechanical Device(Eg, Kyphoplasty), 1 Vertebral Body, Unilateral Or Bilateral Cannulation, Thoracic Or Lumbar Vertebral Body		eviCore	MSK - Spine
22526	Percutaneous Intradiscal Electrothermal Annuloplasty, Unilateral Or Bilateral Including Fluoroscopic Guidance; Single Level		eviCore	MSK - Pain
22527	Percutaneous Intradiscal Electrothermal Annuloplasty, Unilateral Or Bilateral Including Fluoroscopic Guidance; Once Or More Additional Levels		eviCore	MSK - Pain
22533	Arthrodesis, Lateral Extracavitary Technique, Including Minimal Discectomy To Prepare Interspace (Other Than For Decompression); Lumbar		eviCore	MSK - Spine
22534	Arthrodesis, Lateral Extracavitary Technique, Including Minimal Discectomy To Prepare Interspace; Thoracic Or Lumbar, Each Additional Vertebral Segment		eviCore	MSK - Spine

Code	Description	Items Processed	Items Processed	eviCore List Name
22551	Arthrodesis, Anterior Interbody, Including Disc Space Preparation, Discectomy, Osteophyctomy And Decompression Of Spinal Cord And/Or Nerve Roots; Cervical Below C2		eviCore	MSK - Spine
22552	Arthrodesis, Anterior Interbody, Including Disc Space Preparation, Discectomy, Osteophyctomy And Decompression Of Spinal Cord And/Or Nerve Roots; Cervical Below C2, Each Additional Interspace		eviCore	MSK - Spine
22554	Arthrodesis, Anterior Interbody Technique, Including Minimal Discectomy To Prepare Interspace (Other Than For Decompression); Cervical Below C2		eviCore	MSK - Spine
22558	Arthrodesis, Anterior Interbody Technique, Including Minimal Discectomy To Prepare Interspace (Other Than For Decompression); Lumbar		eviCore	MSK - Spine
22585	Arthrodesis, Anterior Interbody Technique, Including Minimal Discectomy To Prepare Interspace (Other Than For Decompression); Each Additional Interspace		eviCore	MSK - Spine
22595	Arthrodesis, posterior technique, atlas-axis (C1-C2)		eviCore	MSK - Spine
22600	Arthrodesis, Posterior Or Posterolateral Technique, Single Level; Cervical Below C2 Segment		eviCore	MSK - Spine
22612	Arthrodesis, Posterior Or Posterolateral Technique, Single Level; Lumbar (With Lateral Transverse Technique, When Performed)		eviCore	MSK - Spine
22614	Arthrodesis, Posterior Or Posterolateral Technique, Single Level; Each Additional Vertebral Segment		eviCore	MSK - Spine
22630	Arthrodesis, Posterior Interbody Technique, Including Laminectomy And/Or Discectomy To Prepare Interspace (Other Than For Decompression), Single Interspace; Lumbar		eviCore	MSK - Spine
22632	Arthrodesis, Posterior Interbody Technique, Including Laminectomy And/Or Discectomy To Prepare Interspace (Other Than For Decompression), Single Interspace; Each Additional Interspace		eviCore	MSK - Spine
22633	Arthrodesis, Combined Posterior Or Posterolateral Technique With Posterior Interbody Technique Including Laminectomy And/Or Discectomy Sufficient To Prepare Interspace (Other Than For Decompression), Single Interspace And Segment; Lumbar		eviCore	MSK - Spine
22634	Arthrodesis, Combined Posterior Or Posterolateral Technique With Posterior Interbody Technique Including Laminectomy And/Or Discectomy Sufficient To Prepare Interspace (Other Than For Decompression); Each Additional Interspace And Segment		eviCore	MSK - Spine
22830	Exploration Of Spinal Fusion		eviCore	MSK - Spine
22840	Posterior Non-Segmental Instrumentation (Eg, Harrington Rod Technique, Pedicle F		eviCore	MSK - Spine
22841	Internal Spinal Fixation By Wiring Of Spinous Processes (List Separately In Addition To Code For Primary Procedure)		eviCore	MSK - Spine
22842	Posterior Segmental Instrumentation (Eg, Pedicle Fixation, Dual Rods With Multiple Hooks And Sublaminar Wires); 3 To 6 Vertebral Segments		eviCore	MSK - Spine
22843	Posterior Segmental Instrumentation (Eg, Pedicle Fixation, Dual Rods With Multiple Hooks And Sublaminar Wires); 7 To 12 Vertebral Segments		eviCore	MSK - Spine

Code	Description	Items Processed	Items Processed	eviCore List Name
22844	Posterior Segmental Instrumentation (Eg, Pedicle Fixation, Dual Rods With Multiple Hooks And Sublaminar Wires); 13 Or More Vertebral Segments		eviCore	MSK - Spine
22845	Anterior Instrumentation; 2 To 3 Vertebral Segments (List Separately In Addition To Code For Primary Procedure)		eviCore	MSK - Spine
22846	Anterior Instrumentation; 4 To 7 Vertebral Segments (List Separately In Addition To Code For Primary Procedure)		eviCore	MSK - Spine
22847	Anterior Instrumentation; 8 Of More Vertebral Segments (List Separately In Addition To Code For Primary Procedure)		eviCore	MSK - Spine
22848	Pelvic Fixation (Attachment Of Caudal End Of Instrumentation To Pelvic Bony Structures) Other Than Sacrum (List Separately In Addition To Code For Primary Procedure)		eviCore	MSK - Spine
22853	Insertion Of Interbody Biomechanical Device(S) (Eg, Synthetic Cage, Mesh) With Integral Anterior Instrumentation For Device Anchoring (Eg, Screws, Flanges), When Conjunction With Interbody Arthrodesis, Each Interspace		eviCore	MSK - Spine
22854	Insertion Of Intervertebral Biomechanical Device(S) With Integral Anterior Instrumentation For Device Anchoring When Performed, To Vertebral Corpectomy(Ies) Defect, In Conjunction With Interbody Arthrodesis, Each Contiguous Defect		eviCore	MSK - Spine
22856	Total Disc Arthroplasty (Artificial Disc), Anterior Approach, Including Discectomy With End Plate Preparation (Includes Osteophyctomy For Nerve Root Or Spinal Cord Decompression And Microdissection), Single Interspace, Cervical		eviCore	MSK - Spine
22857	Total Disc Arthroplasty (Artificial Disc), Anterior Approach, Including Discectomy To Prepare Interspace, Single Interspace, Lumbar		eviCore	MSK - Spine
22858	Total Disc Arthroplasty (Artificial Disc), Anterior Approach, Including Discectomy With End Plate Preparation (Includes Osteophyctomy For Nerve Root Or Spinal Cord Decompression And Microdissection); Second Level, Cervical (List Separately In Addition To Code For Primary Procedure)		eviCore	MSK - Spine
22859	Insertion Of Intervertebral Biomechanical Device(S) (Eg, Synthetic Cage, Mesh, Methylmethacrylate) To Intervertebral Disc Space Or Vertebral Body Defect Without Interbody Arthrodesis, Each Contiguous Effect (List Separately In Addition To Code For Primary Procedure)		eviCore	MSK-Spine
22861	Revision Including Replacement Of Total Disc Arthroplasty (Artificial Disc), Anterior Approach, Single Interspace; Cervical		eviCore	MSK-Spine
22862	Revision Including Replacement Of Total Disc Arthroplasty (Artificial Disc), Anterior Approach, Single Interspace; Lumbar		eviCore	MSK-Spine
22867	Insertion Of Interlaminar/Interspinous Process Stabilization/Distracton Device, Without Fusion, Including Image Guidance When Performed, With Open Decompression, Lumbar; Single Level		eviCore	MSK-Spine

Code	Description	Items Processed	Items Processed	eviCore List Name
22868	Insertion Of Interlaminar/Interspinous Process Stabilization/Distractio		eviCore	MSK-Spine
22869	Insertion Of Interlaminar/Interspinous Process Stabilization/Distractio		eviCore	MSK-Spine
22870	Insertion Of Interlaminar/Interspinous Process Stabilization/Distractio		eviCore	MSK-Spine
22899	<i>Spine surgery procedure</i>	Banner		
22999	<i>Abdomen surgery procedure</i>	Banner		
23000	Removal Of Subdeltoid Calcareous Deposits, Open		eviCore	MSK - joint
23020	Capsular Contracture Release (Eg, Sever Type Procedure)		eviCore	MSK - joint
23120	Claviclectomy; Partial		eviCore	MSK - joint
23130	Acromioplasty Or Acromionectomy, Partial, With Or Without Coracoacromial Ligament Release		eviCore	MSK - joint
23410	Repair Of Ruptured Musculotendinous Cuff (Eg, Rotator Cuff) Open; Acute		eviCore	MSK - joint
23412	Repair Of Ruptured Musculotendinous Cuff (Eg, Rotator Cuff) Open;Chronic		eviCore	MSK - joint
23415	Coracoacromial Ligament Release, With Or Without Acromioplasty		eviCore	MSK - joint
23420	Reconstruction Of Complete Shoulder (Rotator) Cuff Avulsion, Chronic (Includes Acromioplasty)		eviCore	MSK - joint
23430	Tenodesis Of Long Tendon Of Biceps		eviCore	MSK - joint
23440	Resection Or Transplantation Of Long Tendon Of Biceps		eviCore	MSK - joint
23450	Capsulorrhaphy, Anterior; Putti-Platt Procedure Or Magnuson Type Operation		eviCore	MSK - joint
23455	Capsulorrhaphy, Anterior;With Labral Repair (Eg, Bankart Procedure)		eviCore	MSK - joint
23460	Capsulorrhaphy, Anterior, Any Type; With Bone Block		eviCore	MSK - joint
23462	Capsulorrhaphy, Anterior, Any Type;With Coracoid Process Transfer		eviCore	MSK - joint
23465	Capsulorrhaphy, Glenohumeral Joint, Posterior, With Or Without Bone Block		eviCore	MSK - joint
23466	Capsulorrhaphy, Glenohumeral Joint, Any Type Multi-Directional Instability		eviCore	MSK - joint
23470	Arthroplasty, Glenohumeral Joint; Hemiarthroplasty		eviCore	MSK - joint
23472	Arthroplasty, Glenohumeral Joint; Total Shoulder [Glenoid And Proximal Humeral Replacement (E.G., Total Shoulder)]		eviCore	MSK - joint
23473	Revision Of Total Shoulder Arthroplasty, Including Allograft When Performed; Humeral Or Glenoid Component		eviCore	MSK - joint
23474	Revision Of Total Shoulder Arthroplasty, Including Allograft When Performed; Humeral And Glenoid Component		eviCore	MSK - joint
23800	Arthrodesis Glenohumeral Joint	Banner		
23802	Arthrodesis Glenohumeral Jt W/Autogenous Graft	Banner		
25441	Arthroplasty W/Prosthetic Rplcmt Distal Radius	Banner		

Code	Description	Items Processed	Items Processed	eviCore List Name
25442	Arthroplasty W/Prosthetic Rplcmt Distal Ulna	Banner		
25443	Arthroplasty W/Prosthetic Rplcmt Scaphoid Carpal	Banner		
25444	Arthroplasty W/Prosthetic Replacement Lunate	Banner		
25445	Arthroplasty W/Prosthetic Replacement Trapezium	Banner		
25446	Arthrp W/Prostc Rplcmt Dstl Rds&Prtl/Carpus	Banner		
27096	Injection Procedure For Sacroiliac Joint, Anesthetic/Steroid, With Image Guidance (Fluoroscopy Or Ct) Including Arthrography When Performed		eviCore	MSK - Pain
27125	Hemiarthroplasty, Hip, Partial (E.G., Femoral Stem Prosthesis, Bipolar Arthroplasty)		eviCore	MSK - Joint
27130	Arthroplasty, Acetabular And Proximal Femoral Prosthetic Replacement (Total Hip Arthroplasty), With Or Without Autograft Or Allograft		eviCore	MSK - Joint
27132	Conversion Of Previous Hip Surgery To Total Hip Arthroplasty, With Or Without Autograft Or Allograft		eviCore	MSK - Joint
27134	Revision Of Total Hip Arthroplasty; Both Components, With Or Without Autograft Or Allograft		eviCore	MSK - Joint
27137	Revision Of Total Hip Arthroplasty; Acetabular Component Only, With Or Without Autograft Or Allograft		eviCore	MSK - Joint
27138	Revision Of Total Hip Arthroplasty; Femoral Component Only, With Or Without Autograft Or Allograft		eviCore	MSK - Joint
27332	Arthrotomy, With Excision Of Semilunar Cartilage (Meniscectomy) Knee; Medial OR Lateral		eviCore	MSK - Joint
27333	Arthrotomy, With Excision Of Semilunar Cartilage (Meniscectomy) Knee; Medial AND Lateral		eviCore	MSK - Joint
27334	Arthrotomy, With Synovectomy, Knee; Anterior OR Posterior		eviCore	MSK - Joint
27335	Arthrotomy, With Synovectomy, Knee; Anterior and Posteriorincluding popliteal area		eviCore	MSK - Joint
27403	Arthrotomy With Meniscus Repair, Knee		eviCore	MSK - Joint
27412	Autologous Chondrocyte Implantation, Knee		eviCore	MSK - Joint
27415	Osteochondral Allograft, Knee, Open		eviCore	MSK - Joint
27416	Osteochondral Autograft(S), Knee, Open (Eg, Mosaicplasty) (Includes Harvesting Of Autograft[S])		eviCore	MSK - Joint
27418	Anterior Tibial Tubercleplasty (Eg, Maquet Type Procedure)		eviCore	MSK - Joint
27420	Reconstruction Of Dislocating Patella; (Eg, Hauser Type Procedure)		eviCore	MSK - Joint
27422	Reconstruction Of Dislocating Patella;With Extensor Realignment And/Or Muscle Advancement Or Release (Eg, Campbell, Goldwaite Type Procedure)		eviCore	MSK - Joint
27424	Reconstruction Of Dislocating Patella;With Patellectomy		eviCore	MSK - Joint
27425	Lateral Retinacular Release, Open		eviCore	MSK - Joint
27427	Ligamentous Reconstruction (Augmentation), Knee; Extra-Articular		eviCore	MSK - Joint
27428	Ligamentous Reconstruction (Augmentation), Knee;Intra-Articular (Open)		eviCore	MSK - Joint
27429	Ligamentous Reconstruction (Augmentation), Knee;Intra-Articular (Open) And Extra-Articular		eviCore	MSK - Joint

Code	Description	Items Processed	Items Processed	eviCore List Name
27430	Quadricepsplasty (Eg, Bennett Or Thompson Type)		eviCore	MSK - Joint
27438	Arthroplasty, Patella; With Prosthesis		eviCore	MSK - Joint
27440	Arthroplasty, Knee, Tibial Plateau		eviCore	MSK - Joint
27441	Arthroplasty, Knee, Tibial Plateau; With Debridement And Partial Synovectomy		eviCore	MSK - Joint
27442	Arthroplasty, Femoral Condyles Or Tibial Plateau(S), Knee; With Debridement And Partial Synovectomy		eviCore	MSK - Joint
27443	Arthroplasty, Femoral Condyles Or Tibial Plateau(S), Knee; With Debridement And Partial Synovectomy		eviCore	MSK - Joint
27446	Arthroplasty, Knee, Condyle And Plateau; Medial Or Lateral Compartment		eviCore	MSK - Joint
27447	Arthroplasty, Knee, Condyle And Plateau; Medial And Lateral Compartments With Or Without Patella Resurfacing (Total Knee Arthroplasty)		eviCore	MSK - Joint
27486	Revision Of Total Knee Arthroplasty, With Or Without Allograft; 1 Component		eviCore	MSK - Joint
27487	Revision Of Total Knee Arthroplasty, With Or Without Allograft; Femoral And Entire Tibial Component		eviCore	MSK - Joint
27700	Arthroplasty, Ankle;		eviCore	MSK - Joint
27702	Arthroplasty, Ankle; With Implant (Total Ankle)	Banner		
27703	Arthroplasty, Ankle; Revision, Total Ankle	Banner		
29805	Arthroscopy, Shoulder, Diagnostic, With Or Without Synovial Biopsy (Separate Procedure)		eviCore	MSK - Joint
29806	Arthroscopy, Shoulder, Surgical; Capsulorrhaphy		eviCore	MSK - Joint
29807	Arthroscopy, Shoulder, Slap Repair		eviCore	MSK - Joint
29819	Arthroscopy, Shoulder, Surgical; With Removal Of Loose Body Or Foreign Body		eviCore	MSK - Joint
29820	Arthroscopy, Shoulder, Surgical; Synovectomy, Partial		eviCore	MSK - Joint
29821	Arthroscopy, Shoulder, Surgical; Synovectomy, Complete		eviCore	MSK - Joint
29822	Arthroscopy, Shoulder, Surgical; Debridement, Limited		eviCore	MSK - Joint
29823	Arthroscopy, Shoulder, Surgical; Debridement, Extensive		eviCore	MSK - Joint
29824	Arthroscopy, Shoulder, Surgical; Distal Claviclectomy Including Distal Articular Surface (Mumford Procedure)		eviCore	MSK - Joint
29825	Arthroscopy, Shoulder, Surgical; With Lysis And Resection Of Adhesions, With Our Without Manipulation		eviCore	MSK - Joint
29826	Arthroscopy, Shoulder, Surgical; Decompression Of Subacromial Space With Partial Acromioplasty, With Coracoacromial Ligament (Ie, Arch) Release, When Performed (List Separately In Addition To Code For Primary Procedure)		eviCore	MSK - Joint
29827	Arthroscopy, Shoulder, Surgical; With Rotator Cuff Repair		eviCore	MSK - Joint
29828	Arthroscopy, Shoulder, Biceps Tenodesis		eviCore	MSK - Joint
29860	Arthroscopy, Hip, Diagnostic, With Or Without Synovial Biopsy (Separate Procedure)		eviCore	MSK - Joint
29861	Arthroscopy, Hip, Surgical; With Removal Of Loose Body Or Foreign Body		eviCore	MSK - Joint
29862	Arthroscopy, Hip, Surgical; With Debridement/Shaving Of Articular Cartilage (Chondroplasty), Abrasion Arthroplasty, And/Or Resection Of Labrum		eviCore	MSK - Joint

Code	Description	Items Processed	Items Processed	eviCore List Name
29863	Arthroscopy, Hip, Surgical; With Synovectomy		eviCore	MSK - Joint
29866	Arthroscopy, Knee, Surgical; Osteochondral Autograft(S) (Eg, Mosaicplasty) (Includes Harvesting Of The Autograft[S])		eviCore	MSK - Joint
29867	Arthroscopy, Knee, Surgical; Osteochondral Allograft (Eg, Mosaicplasty)		eviCore	MSK - Joint
29868	Arthroscopy, Knee, Surgical; Meniscal Transplantation (Includes Arthrotomy For Meniscal Insertion(, Medial Or Lateral		eviCore	MSK - Joint
29870	Arthroscopy, Knee, Diagnostic, With Or Without Synovial Biopsy (Separate Procedure)		eviCore	MSK - Joint
29871	Arthroscopy, Knee, Surgical; For Infection, Lavage And Drainage		eviCore	MSK - Joint
29873	Arthroscopy, Knee, Surgical; With Lateral Release		eviCore	MSK - Joint
29874	Arthroscopy, Knee, Surgical; For Removal Of Loose Body Or Foreign Body (Eg Osteochondritis Dissecans Fragmentation, Chondral Fragmentation)		eviCore	MSK - Joint
29875	Arthroscopy, Knee, Surgical; Synovectomy, Limited (Eg Plica Or Shelf Resection) (Separate Procedure)		eviCore	MSK - Joint
29876	Arthroscopy, Knee, Surgical; Synovectomy, Major, 2 Or More Compartments (Eg, Medial Or Lateral)		eviCore	MSK - Joint
29877	Arthroscopy, Knee, Surgical; Debridement/Shaving Of Articular Cartilage (Chondroplasty)		eviCore	MSK - Joint
29879	Arthroscopy, Knee, Surgical; Abrasion Arthroplasty (Includes Chondroplasty Where Necessary) Or Multiple Drilling Or Microfracture		eviCore	MSK - Joint
29880	Arthroscopy, Knee, Surgical; With Meniscectomy (Medial And Lateral, Including Any Meniscal Shaving) Including Debridement/Shaving Of Articular Cartilage (Chondroplasty), Same Or Separate Compartment (S) When Performed		eviCore	MSK - Joint
29881	Arthroscopy, Knee, Surgical; With Meniscectomy (Medial Or Lateral, Including Any Meniscal Shaving) Including Debridement/Shaving Of Articular Cartilage (Chondroplasty), Same Or Separate Compartment (S) When Performed		eviCore	MSK - Joint
29882	Arthroscopy, Knee, Surgical; With Meniscal Repair (Medial Or Lateral)		eviCore	MSK - Joint
29883	Arthroscopy, Knee, Surgical; With Meniscal Repair (Medial And Lateral)		eviCore	MSK - Joint
29884	Arthroscopy, Knee, Surgical; With Lysis Of Adhesions, With Or Without Manipulation (Separate Procedure)		eviCore	MSK - Joint
29885	Arthroscopy, Knee, Surgical; Drilling For Osteochondritis Dissecans With Bone Grafting, With Or Without Internal Fixation (Including Debridement Of Base Of Lesion)		eviCore	MSK - Joint
29886	Arthroscopy, Knee, Surgical; Drilling For Intact Osteochondritis Dissecans Lesion		eviCore	MSK - Joint
29887	Arthroscopy, Knee, Surgical; Drilling For Intact Osteochondritis Dissecans Lesion With Internal Fixation		eviCore	MSK - Joint
29888	Arthroscopically Aided Anterior Cruciate Ligament Repair/Augmentation Or Reconstruction		eviCore	MSK - Joint
29889	Arthroscopically Aided Posterior Cruciate Ligament Repair/Augmentation Or Reconstruction		eviCore	MSK - Joint
29914	Arthroscopy, Hip, Surgical; With Femoroplasty (Ie, Treatment Of Cam Lesion)		eviCore	MSK - Joint

Code	Description	Items Processed	Items Processed	eviCore List Name
29915	Arthroscopy, Hip, Surgical; With Acetabuloplasty (Ie, Treatment Of Pincer Lesion)		eviCore	MSK - Joint
29916	Arthroscopy, Hip, Surgical; With Labral Repair		eviCore	MSK - Joint
30400	Rhinp Prim Lat&Alar Crtlgs&Elvtn Nasal Tip	Banner		
30410	Rhinp Prim Complete Xtrnl Parts	Banner		
30420	Rhinoplasty Primary W/Major Septal Repair	Banner		
30430	Rhinoplasty Secondary Minor Revision	Banner		
30435	Rhinoplasty Secondary Intermediate Revision	Banner		
30450	Rhinoplasty Secondary Major Revision	Banner		
30460	Rhinp Dfrm W/Colum Lngth Tip Only	Banner		
30462	Rhinp Dfrm Colum Lngth Tip Septum Osteot	Banner		
30520	Septoplasty Or Submucous Resection, With Or Without Cartilage Scoring, Contouring Or Replacement With Graft	Banner		
31643	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with placement of catheter(s) for intracavitary radioelement application	Banner		
32553	Placement of interstitial device(s) for radiation therapy guidance (eg, fiducial markers, dosimeter), percutaneous, intra-thoracic, single or multiple	Banner		
33206	Insertion of new or replacement of permanent pacemaker with transvenous electrode(s); atrial	Banner		
33207	Insertion of new or replacement of permanent pacemaker with transvenous electrode(s); ventricular	Banner		
33208	Insertion of new or replacement of permanent pacemaker with transvenous electrode(s); atrial and ventricular	Banner		
33212	Insertion of pacemaker pulse generator only; with existing single lead	Banner		
33213	Insertion of pacemaker pulse generator only; with existing dual leads	Banner		
33214	Upgrade of implanted pacemaker system, conversion of single chamber system to dual chamber system	Banner		
33221	Insertion of pacemaker pulse generator only; with existing multiple leads	Banner		
33224	Insertion of pacing electrode, cardiac venous system, for left ventricular pacing, with attachment to previously placed pacemaker or pacing cardioverter-defibrillator pulse generator	Banner		
33225	Insertion of pacing electrode, cardiac venous system, for left ventricular pacing, at time of insertion of pacing cardioverter-defibrillator or pacemaker pulse generator	Banner		
33227	Removal of permanent pacemaker pulse generator with replacement of pacemaker pulse generator; single lead system	Banner		
33228	Removal of permanent pacemaker pulse generator with replacement of pacemaker pulse generator; dual lead system	Banner		
33229	Removal of permanent pacemaker pulse generator with replacement of pacemaker pulse generator; multiple lead system	Banner		

Code	Description	Items Processed	Items Processed	eviCore List Name
33230	Insertion of pacing cardioverter-defibrillator pulse generator only; with existing dual leads	Banner		
33231	Insertion of pacing cardioverter-defibrillator pulse generator only; with existing multiple leads	Banner		
33240	Insertion of pacing cardioverter-defibrillator pulse generator only; with existing single lead	Banner		
33249	Insertion or replacement of permanent pacing cardioverter-defibrillator system with transvenous lead(s), single or dual chamber	Banner		
33262	Removal of pacing cardioverter-defibrillator pulse generator with replacement of pacing cardioverter-defibrillator pulse generator; single lead system	Banner		
33263	Removal of pacing cardioverter-defibrillator pulse generator with replacement of pacing cardioverter-defibrillator pulse generator; dual lead system	Banner		
33264	Removal of pacing cardioverter-defibrillator pulse generator with replacement of pacing cardioverter-defibrillator pulse generator; multiple lead system	Banner		
33270	Insertion or replacement of permanent subcutaneous implantable defibrillator system, including defibrillation threshold evaluation, induction of arrhythmia, evaluation of sensing for arrhythmia termination, and programming or reprogramming of sensing or therapeutic parameters,	Banner		
33975	Insertion of Ventricular assist device; extracorporeal, single ventricle	Banner		
33976	Insertion of Ventricular assist device; extracorporeal, bi-ventricular	Banner		
33979	Insertion of Ventricular assist device; implantable intracorporeal, single ventricle	Banner		
33990	Insertion of Ventricular assist device; percutaneous, arterial access only	Banner		
33991	Insertion of Ventricular assist device; percutaneous, arterial and venous access with transeptal puncture	Banner		
36465	Injection of non-compounded foam sclerosant with ultrasound compression maneuvers to guide dispersion of the injectate, inclusive of all imaging guidance and monitoring; single incompetent extremity truncal vein	Banner		
36466	multiple incompetent truncal veins (eg, great saphenous vein; accessory saphenous vein), same leg	Banner		
36468	1/Mlt Njxs Sclrsng Slns Spider Veins Limb/Trunk	Banner		
36469	1/Mlt Njxs Sclrsng Slns Spider Veins Face	Banner		
36470	Injection Of Sclerosing Solution; Single Vein	Banner		
36471	Injection Of Sclerosing Solution; Multiple Veins, Same Leg	Banner		
36473	Endovenous ablation therapy of incompetent vein, extremity, Inclusive of all imaging guidance and monitoring, percutaneous, mechanochemical; first vein treated	Banner		
36475	Endovenous Ablation Therapy Of Incompetent Vein, Extremity, Inclusive Of All	Banner		
36476	Endovenous Ablation Therapy Of Incompetent Vein, Extremity, Inclusive Of All	Banner		
36478	Endovenous Ablation Therapy Of Incompetent Vein, Extremity, Inclusive Of All	Banner		

Code	Description	Items Processed	Items Processed	eviCore List Name
36479	Endovenous Ablation Therapy Of Incompetent Vein, Extremity, Inclusive Of All	Banner		
36482	Endovenous ablation therapy of incompetent vein, extremity, by transcatheter delivery of a chemical adhesive	Banner		
36483	subsequent vein(s) treated in a single extremity, each through separate access sites	Banner		
37220	Revascularization	Banner		
37221	Revascularization	Banner		
37222	Revascularization	Banner		
37223	Revascularization	Banner		
37224	Revascularization	Banner		
37225	Revascularization	Banner		
37226	Revascularization	Banner		
37227	Revascularization	Banner		
37228	Revascularization	Banner		
37229	Revascularization	Banner		
37230	Revascularization	Banner		
37231	Revascularization	Banner		
37232	Revascularization	Banner		
37233	Revascularization	Banner		
37234	Revascularization	Banner		
37235	Revascularization	Banner		
37650	Ligation Of Femoral Vein	Banner		
37660	Ligation Of Common Iliac Vein	Banner		
37700	Ligation And Division Of Long Saphenous Vein At Saphenofemoral Junction, Or	Banner		
37718	Ligation, Division, And Stripping, Short Saphenous Vein	Banner		
37722	Ligation, Division, And Stripping, Long (Greater) Saphenous Veins From Saphenofe	Banner		
37735	Ligation And Division And Complete Stripping Of Long Or Short Saphenous Veins	Banner		
37760	Ligation Of Perforator Veins, Subfascial, Radical (Linton Type), Including Skin	Banner		
37761	Ligation Of Perforator Vein(S), Subfascial, Open, Including Ultrasound Guidance,	Banner		
37765	Stab Phlebectomy Of Varicose Veins, One Extremity; 10-20 Stab Incisions	Banner		
37766	Stab Phlebectomy Of Varicose Veins, One Extremity; More Than 20 Incisions	Banner		
37780	Ligation And Division Of Short Saphenous Vein At Saphenopopliteal Junction	Banner		
37785	Ligation, Division, And/Or Excision Of Varicose Vein Cluster(S), One Leg	Banner		
41019	Placement of needles, catheters, or other device(s) into the head and/or neck region (percutaneous, transoral, or transnasal) for subsequent interstitial radioelement application	Banner		
42120	Resection of palate or extensive resection of lesion	Banner		
42145	Palatopharyngoplasty	Banner		
42140	Uvulectomy, excision of uvula	Banner		
43210	Esophagogastroduodenoscopy, flexible, transoral	Banner		

Code	Description	Items Processed	Items Processed	eviCore List Name
43644	Laparoscopy, Surgical, Gastric Restrictive Procedure; With Gastric Bypass And Ro	Banner		
43645	Laparoscopy, Surgical, Gastric Restrictive Procedure; With Gastric Bypass And	Banner		
43647	Laparoscopy, Surgical; Implantation Or Replacement Of Gastric Neurostimulator Electrodes, Antrum	Banner		
43770	Laparoscopy, Surgical, Gastric Restrictive Procedure; Placement Of Adjustable Ga	Banner		
43771	Laparoscopy, Surgical, Gastric Restrictive Procedure; Revision Of Adjustable Gas	Banner		
43772	Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gast	Banner		
43773	Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal And Replacement Of	Banner		
43774	Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gast	Banner		
43842	Gastric Rstcv W/O Byp Vertical-Banded Gastroply	Banner		
43843	Gstr Rstcv W/O Byp Oth/Thn Ver-Banded Gstp	Banner		
43845	Gastric Rstcv W/Prtl Gastrectomy 50-100 Cm	Banner		
43846	Gastric Rstcv W/Byp W/Short Limb 150 Cm/<	Banner		
43847	Gastric Rstcv W/Byp W/Sm Int Rcnstj Limit Absrj	Banner		
43848	Revision Open Gastric Restrictive Px Not Device	Banner		
43881	Implantation Or Replacement Of Gastric Neurostimulator Electrodes, Antrum, Open	Banner		
43882	Revision Or Removal Of Gastric Neurostimulator Electrodes, Antrum, Open	Banner		
43886	Gstr Rstcv Px Opn Revj Subq Port Component Only	Banner		
43887	Gstr Rstcv Px Opn Rmvl Subq Port Component Only	Banner		
43888	Gstr Rstcv Opn Rmvl&Rplcmt Subq Port	Banner		
49411	Placement of interstitial device(s) for radiation therapy guidance (eg, fiducial markers, dosimeter), percutaneous, intra-abdominal, intra-pelvic (except prostate), and/or retroperitoneum, single or multiple	Banner		
49412	Placement of interstitial device(s) for radiation therapy guidance open, intra-abdominal, intrapelvic, and/or retroperitoneum, including image guidance,	Banner		
54150	Circumcision, using clamp or other device with regional dorsal penile or ring block	Banner		
54161	Circumcision, surgical excision other than clamp, device, or dorsal slit, older than 28 days of age	Banner		
54162	Lysis or excision of penile post-circumcision adhesions	Banner		
54163	Repair incomplete circumcision	Banner		
54164	Frenulotomy of penis	Banner		
55875	Transperineal placement of needles or catheters into prostate for interstitial radioelement application, with or without cystoscopy	Banner		
55876	Placement of interstitial device(s) for radiation therapy guidance (eg, fiducial markers, dosimeter), prostate (via needle, any approach), single or multiple	Banner		
55920	Placement of needles or catheters into pelvic organs and/or genitalia (except prostate) for subsequent interstitial radioelement application	Banner		
57155	Insertion of uterine tandem and/or vaginal ovoids for clinical brachytherapy	Banner		
57156	Insertion of a vaginal radiation afterloading apparatus for clinical brachytherapy	Banner		

Code	Description	Items Processed	Items Processed	eviCore List Name
58150	Total abdominal hysterectomy (corpus and cervix), with or without removal of tube(s), with or without removal of ovary(s)	Banner		
58152	Total abdominal hysterectomy (corpus and cervix), with or without removal of tube(s), with or without removal of ovary(s); with colpo-urethrocytopexy	Banner		
58180	Supra cervical abdominal hysterectomy (subtotal hysterectomy), with or without removal of tube(s), with or without removal of ovary (s)	Banner		
58200	Total Abdominal hysterectomy, including partial vaginectomy, with para aortic and pelvic lymph node sampling, with or without removal of tube(s), with or with out removal of ovary(s)	Banner		
58210	Radical abdominal hysterectomy	Banner		
58240	Pelvic Exenteration for gynecologic malignancy, with total abdominal hysterectomy with or with removal of (tubes, ovaries, bladder, ureteral transplantation), and or abdominal perineal resection of rectum and colon and colostomy, or any combination there of.	Banner		
58260	Vaginal hysterectomy for uterus with 250 grams or less	Banner		
58262	Vaginal hysterectomy for uterus with 250 grams or less with removal of tubes and or ovaries	Banner		
58263	Vaginal hysterectomy for uterus with 250 grams or less with removal of tubes and or ovaries with repair of enterocele	Banner		
58267	Vaginal hysterectomy for uterus with 250 grams or less; with colpo-urethrocytopexy	Banner		
58270	Vaginal hysterectomy for uterus with 250 grams or less with repair of enterocele	Banner		
58275	Vaginal hysterectomy with total or partial vaginectomy	Banner		
58280	Vaginal hysterectomy with total or partial vaginectomy with repair of enterocele	Banner		
58285	Vaginal hysterectomy, radical	Banner		
58290	Vaginal hysterectomy for uterus greater than 250 grams	Banner		
58291	Vaginal hysterectomy for uterus greater than 250 grams with removal of tubes and or ovaries	Banner		
58292	Vaginal hysterectomy for uterus greater than 250 grams with removal of tubes and or ovaries with repair of enterocele	Banner		
58293	Vaginal hysterectomy for uterus greater than 250 grams; with colpo-urethrocytopexy	Banner		
58294	Vaginal hysterectomy for uterus greater than 250 grams with repair of enterocele	Banner		
58346	Insertion of Heyman capsules for clinical brachytherapy	Banner		
58353	Endometrial ablation, thermal, without hystoroscopic guidance	Banner		
58356	Endometrial crioablation with ultrasonic guidance, including endometrial curettage, when performed	Banner		
59400	Routine Obstetrical Care Including antepartum care, vaginal delivery and post partum care	Banner		
61796	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); 1 simple cranial lesion	Banner		

Code	Description	Items Processed	Items Processed	eviCore List Name
61797	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); each additional cranial lesion, simple (List separately in addition to code for primary procedure)	Banner		
61798	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); 1 complex cranial lesion	Banner		
61799	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); each additional cranial lesion, complex (List separately in addition to code for primary procedure)	Banner		
61800	Application of stereotactic headframe for stereotactic radiosurgery (List separately in addition to code for primary procedure)	Banner		
61850	Twist/Burr Hole Impltj Nstim Eltrd Cortical	Banner		
61860	Crnec/Crx Impltj Nstim Eltrd Cere Cortical	Banner		
61863	Strtctc Impltj Nstim Eltrd W/O Record 1St Array	Banner		
61864	Strtctc Impltj Nstim Eltrd W/O Record Ea Array	Banner		
61867	Strtctc Impltj Nstim Eltrd W/Record 1St Array	Banner		
61868	Strtctc Impltj Nstim Eltrd W/Record Ea Array	Banner		
61870	Crnec Impltj Nstim Eltrd Cerebellar Cortical	Banner		
61880	Revision Or Removal Of Intracranial Neurostimulator Electrodes	Banner		
61885	Insertion Or Replacement Of Cranial Neurostimulator Pulse Generator Or	Banner		
61886	Insertion Or Replacement Of Cranial Neurostimulator Pulse Generator Or	Banner		
61888	Revision Or Removal Of Cranial Neurostimulator Pulse Generator Or Receiver	Banner		
62263	Percutaneous Lysis Of Epidural Adhesions Using Solution Injection Including Radiologic Localization		eviCore	MSK - pain
62264	Percutaneous Lysis Of Epidural Adhesions Using Solution Injection Including Radiologic Localization		eviCore	MSK - pain
62280	Injection/Infusion Of Neurolytic Substance (Eg, Alcohol, Phenol, Iced Saline Solutions), With Or Without Other Therapeutic Substance; Subarachnoid		eviCore	MSK - pain
62281	Injection/Infusion Of Neurolytic Substance (Eg, Alcohol, Phenol, Iced Saline Solutions), With Or Without Other Therapeutic Substance; Epidural, Cervical Or Thoracic		eviCore	MSK - pain
62282	Injection/Infusion Of Neurolytic Substance With Or Without Other Therapeutic Substance; Epidural, Lumbar, Sacral (Caudal)		eviCore	MSK - pain
62287	Decompression Procedure, Percutaneous, Of Nucleus Pulposus Of Intervertebral Disc, Any Method Utilizing Needle Based Technique To Remove Disc Material Under Fluoroscopic Imaging		eviCore	MSK - pain
62292	Injection Procedure For Chemonucleolysis, Including Discography, Intervertebral Disc, Single, Or Multiple Levels, Lumbar		eviCore	MSK - pain
62320	Injection(S), Of Diagnostic Or Therapeutic Substance(S)		eviCore	MSK - pain
62321	Injection(S), Of Diagnostic Or Therapeutic Substance(S)		eviCore	MSK - pain

Code	Description	Items Processed	Items Processed	eviCore List Name
62322	Injection(S), Of Diagnostic Or Therapeutic Substance(S)		eviCore	MSK - pain
62323	Injection(S), Of Diagnostic Or Therapeutic Substance(S)		eviCore	MSK - pain
62324	Injection(S), Including Indwelling Catheter Placement, Continuous Infusion Or Intermittent Bolus,		eviCore	MSK - pain
62325	Injection(S), Including Indwelling Catheter Placement, Continuous Infusion Or Intermittent Bolus, Of Diagnostic Or Therapeutic Substance(S)		eviCore	MSK - pain
62326	Injection(S), Including Indwelling Catheter Placement, Continuous Infusion Or Intermittent Bolus, Of Diagnostic Or Therapeutic Substance(S)		eviCore	MSK - pain
62327	Injection(S), Including Indwelling Catheter Placement, Continuous Infusion Or Intermittent Bolus, Of Diagnostic Or Therapeutic Substance(S)		eviCore	MSK - pain
62350	Implantation, Revision Or Repositioning Of Tunneled Intrathecal Or Epidural Catheter, For Long-Term Medication Administration Via An External Pump Or Implantable Reservoir/Infusion Pump; Without Laminectomy		eviCore	MSK - pain
62351	Implantation, Revision Or Repositioning Of Tunneled Intrathecal Or Epidural Catheter, For Long-Term Medication Administration Via An External Pump Or Implantable Reservoir/Infusion Pump; With Laminectomy		eviCore	MSK - pain
62360	Implantation Or Replacement Of Device For Intrathecal Or Epidural Drug Infusion; Subcutaneous Reservoir		eviCore	MSK - pain
62361	Implantation Or Replacement Of Device For Intrathecal Or Epidural Drug Infusion; Subcutaneous Reservoir; Nonprogrammable Pump		eviCore	MSK - pain
62362	Implantation Or Replacement Of Device For Intrathecal Or Epidural Drug Infusion; Programmable Pump, Including Preparation Of Pump, With Or Without Programming		eviCore	MSK - pain
62380	Endoscopic Decompression Of Spinal Cord, Nerve Root(S), Including Laminotomy, Partial Facetomy, Foraminotomy, Discectomy And/Or Excision Of Herniated Intervertebral Disc, 1 Interspace, Lumbar		eviCore	MSK - Spine
63001	Laminectomy With Exploration And/Or Decompression Of Spinal Cord And/Or Cauda Equina, Without Facetomy, Foraminotomy Or Discectomy (Eg, Spinal Stenosis), 1 Or 2 Vertebral Segments; Cervical		eviCore	MSK - Spine
63003	Laminectomy With Exploration And/Or Decompression Of Spinal Cord And/Or Cauda	Banner		
63005	Laminectomy With Exploration And/Or Decompression Of Spinal Cord And/Or Cauda Equina, Without Facetomy, Foraminotomy Or Discectomy (Eg, Spinal Stenosis), 1 Or 2 Vertebral Segments; Lumbar, Except For Spondylolisthesis		eviCore	MSK - Spine
63011	Laminectomy With Exploration And/Or Decompression Of Spinal Cord And/Or Cauda	Banner		
63012	Laminectomy With Removal Of Abnormal Facets And/Or Pars Inter-Articularis With Decompression Of Cauda Equina And Nerve Roots For Spondylolisthesis, Lumbar (Gill Type Procedure)		eviCore	MSK - Spine
63015	Laminectomy With Exploration And/Or Decompression Of Spinal Cord And/Or Cauda Equina, Without Facetomy, Foraminotomy Or Discectomy (Eg, Spinal Stenosis), More Than 2 Vertebral Segments; Cervical		eviCore	MSK - Spine

Code	Description	Items Processed	Items Processed	eviCore List Name
63016	Laminectomy With Exploration And/Or Decompression Of Spinal Cord And/Or Cauda		eviCore	MSK - Spine
63017	Laminectomy With Exploration And/Or Decompression Of Spinal Cord And/Or Cauda Equina, Without Facetomy, Foraminotomy Or Discectomy (Eg, Spinal Stenosis), More Than 2 Vertebral Segments; Lumbar		eviCore	MSK - Spine
63020	Laminotomy (Hemilaminectomy), With Decompression Of Nerve Root(S), Including Partial Facetomy, Foraminotomy And/Or Excision Of Herniated Intervertebral Disc; 1 Interspace, Cervical		eviCore	MSK - Spine
63030	Laminotomy (Hemilaminectomy), With Decompression Of Nerve Root(S), Including Partial Facetomy, Foraminotomy And/Or Excision Of Herniated Intervertebral Disc; 1 Interspace, Lumbar		eviCore	MSK - Spine
63035	Laminotomy (Hemilaminectomy), With Decompression Of Nerve Root(S), Including Partial Facetomy, Foraminotomy And/Or Excision Of Herniated Intervertebral Disc; Each Additional Interspace, Cervical Or Lumbar		eviCore	MSK - Spine
63040	Laminotomy (Hemilaminectomy), With Decompression Of Nerve Root(S), Including Partial Facetomy, Foraminotomy And/Or Excision Of Herniated Intervertebral Disc, Reexploration, Single Interspace; Cervical		eviCore	MSK - Spine
63042	Laminotomy (Hemilaminectomy), With Decompression Of Nerve Root(S), Including Partial Facetomy, Foraminotomy And/Or Excision Of Herniated Intervertebral Disc, Reexploration, Single Interspace; Lumbar		eviCore	MSK - Spine
63043	Laminotomy (Hemilaminectomy), With Decompression Of Nerve Root(S), Including Partial Facetomy, Foraminotomy And/Or Excision Of Herniated Intervertebral Disc, Reexploration, Single Interspace; Each Additional Cervical Interspace		eviCore	MSK - Spine
63044	Laminotomy (Hemilaminectomy), With Decompression Of Nerve Root(S), Including Partial Facetomy, Foraminotomy And/Or Excision Of Herniated Intervertebral Disc, Reexploration, Single Interspace; Each Additional Lumbar Interspace		eviCore	MSK - Spine
63045	Laminectomy, Facetomy And Foraminotomy (Unilateral Or Bilateral With Decompression Of Spinal Cord, Cauda Equina And/Or Nerve Root[S], [Eg, Spinal Or Lateral Recess Stenosis], Single Vertebral Segment; Cervical		eviCore	MSK - Spine
63046	Laminectomy, Facetomy And Foraminotomy (Unilateral Or Bilateral With		eviCore	MSK - Spine
63047	Laminectomy, Facetomy And Foraminotomy (Unilateral Or Bilateral With Decompression Of Spinal Cord, Cauda Equina And/Or Nerve Root(S), [Eg,Spinal Or Lateral Recess Stenosis]), Single Vertebral Segment; Lumbar		eviCore	MSK - Spine
63048	Laminectomy, Facetomy And Foraminotomy (Unilateral Or Bilateral With Decompression Of Spinal Cord, Cauda Equina And/Or Nerve Root[S],		eviCore	MSK - Spine
63050	Laminoplasty, Cervical, With Decompression Of The Spinal Cord, 2 Or More Vertebral Segments		eviCore	MSK - Spine

Code	Description	Items Processed	Items Processed	eviCore List Name
63051	Laminoplasty, Cervical, With Decompression Of The Spinal Cord, 2 Or More Vertebral Segments; With Reconstruction Of The Posterior Bony Elements (Including The Application Of Bridging Bone Graft And Non-Segmental Fixation Devices (Eg, Wire, Suture, Mini-Plates), When Performed)		eviCore	MSK - Spine
63055	Transpedicular Approach With Decompression Of Spinal Cord, Equina And/Or Nerve R	Banner		
63056	Transpedicular Approach With Decompression Of Spinal Cord, Equina And/Or Nerve Root(S) (Eg, Herniated Intervertebral Disc), Single Segment; Lumbar (Including Transfacet, Or Lateral Extraforaminal Approach) (Eg, Far Lateral Herniated Intervertebral Disc)		eviCore	MSK - Spine
63057	Transpedicular Approach With Decompression Of Spinal Cord, Equina And/Or Nerve Root(S) (Eg, Herniated Intervertebral Disc), Single Segment; Each Additional Segment, Thoracic Or Lumbar (List Separately In Addition To Code For Primary Procedure)		eviCore	MSK - Spine
63075	Discectomy, Anterior, With Decompression Of Spinal Cord And/Or Nerve Root(S), Including Osteophytectomy; Cervical, Single Interspace		eviCore	MSK - Spine
63076	Discectomy, Anterior, With Decompression Of Spinal Cord And/Or Nerve Root(S), Including Osteophytectomy; Cervical, Each Additional Interspace (List Separately In Addition To Code For Primary Procedure)		eviCore	MSK - Spine
63077	Removal Of Middle Spine Disc And Release Of Spinal Cord And/Or Nerves	Banner		
63078	Removal Of Middle Spine Disc And Release Of Spinal Cord And/Or Nerves	Banner		
63081	Vertebral Corpectomy (Vertebral Body Resection), Partial Or Complete, Anterior Approach With Decompression Of Spinal Cord And/Or Nerve Root(S); Cervical, Single Segment		eviCore	MSK-Spine
63082	Vertebral Corpectomy (Vertebral Body Resection), Partial Or Complete, Anterior Approach With Decompression Of Spinal Cord And/Or Nerve Root(S); Cervical, Each Additional Segment (List Separately In Addition To Code For Primary Procedure)		eviCore	MSK-Spine
63085	Vertebral Corpectomy (Vertebral Body Resection), Partial Or Complete,	Banner		
63086	Vertebral Corpectomy (Vertebral Body Resection), Partial Or Complete,	Banner		
63087	Vertebral Corpectomy (Vertebral Body Resection), Partial Or Complete, Combined	Banner		
63088	Vertebral Corpectomy (Vertebral Body Resection), Partial Or Complete, Combined	Banner		
63090	Vertebral Corpectomy (Vertebral Body Resection), Partial Or Complete,	Banner		
63091	Vertebral Corpectomy (Vertebral Body Resection), Partial Or Complete,	Banner		
63101	Vertebral Corpectomy (Vertebral Body Resection), Partial Or Complete, Lateral Ex	Banner		
63102	Vertebral Corpectomy (Vertebral Body Resection), Partial Or Complete, Lateral	Banner		
63103	Vertebral Corpectomy (Vertebral Body Resection), Partial Or Complete, Lateral	Banner		
63250	Laminectomy For Excision Or Occlusion Of Arteriovenous Malformation Of Spinal Co	Banner		
63251	Laminectomy For Excision Or Occlusion Of Arteriovenous Malformation Of Spinal	Banner		
63252	Laminectomy For Excision Or Occlusion Of Arteriovenous Malformation Of Spinal	Banner		
63265	Laminectomy For Excision Or Evacuation Of Intraspinal Lesion Other Than	Banner		

Code	Description	Items Processed	Items Processed	eviCore List Name
63266	Laminectomy For Excision Or Evacuation Of Intraspinal Lesion Other Than	Banner		
63267	Laminectomy For Excision Or Evacuation Of Intraspinal Lesion Other Than	Banner		
63268	Laminectomy For Excision Or Evacuation Of Intraspinal Lesion Other Than	Banner		
63270	Laminectomy For Excision Of Intraspinal Lesion Other Than Neoplasm, Intradural;	Banner		
63271	Laminectomy For Excision Of Intraspinal Lesion Other Than Neoplasm, Intradural;	Banner		
63272	Laminectomy For Excision Of Intraspinal Lesion Other Than Neoplasm, Intradural;	Banner		
63273	Laminectomy For Excision Of Intraspinal Lesion Other Than Neoplasm, Intradural;	Banner		
63275	Laminectomy For Biopsy/Excision Of Intraspinal Neoplasm; Extradural, Cervical	Banner		
63276	Laminectomy For Biopsy/Excision Of Intraspinal Neoplasm; Extradural, Thoracic	Banner		
63277	Laminectomy For Biopsy/Excision Of Intraspinal Neoplasm; Extradural, Lumbar	Banner		
63278	Laminectomy For Biopsy/Excision Of Intraspinal Neoplasm; Extradural, Sacral	Banner		
63615	Strctc Bx Aspirat/Exc Lesion Spinal Cord	Banner		
63620	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); 1 spinal lesion	Banner		
63621	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); each additional spinal lesion (List separately in addition to code for primary procedure)	Banner		
63650	Percutaneous Implantation Of Neurostimulator Electrode Array, Epidural		eviCore	MSK - Pain
63655	Laminectomy For Implantation Of Neurostimulator Electrodes, Plate/Paddle, Epidural		eviCore	MSK - Pain
63661	Removal Of Spinal Neurostimulator Electrode Percutaneous Array(S), Including Fluoroscopy, When Performed	Banner		
63662	Removal Of Spinal Neurostimulator Electrode Plate/Paddle(S) Placed Via Laminotomy Or Laminectomy, Including Fluoroscopy, When Performed	Banner		
63663	Revision Including Replacement, When Performed, Of Spinal Neurostimulator Electr	Banner		
63664	Revision Including Replacement, When Performed, Of Spinal Neurostimulator Electrode Plate/Paddle(S) Placed Via Laminotomy Or Laminectomy, Including Fluoroscopy, When Performed	Banner		
63685	Insertion Or Replacement Of Spinal Neurostimulator Pulse Generator Or Receiver, Direct Or Inductive Coupling		eviCore	MSK - Pain
63688	Revision Or Removal Of Implanted Spinal Neurostimulator Pulse Generator Or	Banner		
64445	N block inj sciatic sng	Banner		
64448	N block inj fem cont inf	Banner		
64449	N block inj lumbar plexus	Banner		
64479	Injection, Anesthetic Agent And/Or Steroid, Transforaminal Epidural, With Imaging Guidance (Fluoroscopy Or Ct); Cervical Or Thoracic, Single Level		eviCore	MSK - Pain
64480	Injection, Anesthetic Agent And/Or Steroid, Transforaminal Epidural, With Imaging Guidance (Fluoroscopy Or Ct); Cervical Or Thoracic, Each Additional Level		eviCore	MSK - Pain
64483	Injection, Anesthetic Agent And/Or Steroid, Transforaminal Epidural, With Imaging Guidance (Fluoroscopy Or Ct); Lumbar Or Sacral, Single Level		eviCore	MSK - Pain

Code	Description	Items Processed	Items Processed	eviCore List Name
64484	Injection, Anesthetic Agent And/Or Steroid, Transforaminal Epidural, With Imaging Guidance (Fluoroscopy Or Ct); Lumbar Or Sacral, Each Additional Level		eviCore	MSK - Pain
64490	Injection(S), Diagnostic Or Therapeutic Agent, Paravertebral Facet (Zygapophyseal) Joint (Or Nerves Innervating That Joint) With Image Guidance (Fluoroscopy Or Ct), Cervical Or Thoracic; Single Level		eviCore	MSK - Pain
64491	Injection(S), Diagnostic Or Therapeutic Agent, Paravertebral Facet (Zygapophyseal) Joint (Or Nerves Innervating That Joint) With Image Guidance (Fluoroscopy Or Ct), Cervical Or Thoracic; Second Level		eviCore	MSK - Pain
64492	Injection(S), Diagnostic Or Therapeutic Agent, Paravertebral Facet (Zygapophyseal) Joint (Or Nerves Innervating That Joint) With Image Guidance (Fluoroscopy Or Ct), Cervical Or Thoracic; Third And Any Additional Level(S)		eviCore	MSK - Pain
64493	Injection(S), Diagnostic Or Therapeutic Agent, Paravertebral Facet (Zygapophyseal) Joint (Or Nerves Innervating That Joint) With Image Guidance (Fluoroscopy Or Ct), Lumbar Or Sacral; Single Level		eviCore	MSK - Pain
64494	Injection(S), Diagnostic Or Therapeutic Agent, Paravertebral Facet (Zygapophyseal) Joint (Or Nerves Innervating That Joint) With Image Guidance (Fluoroscopy Or Ct), Lumbar Or Sacral; Second Level		eviCore	MSK - Pain
64495	Injection(S), Diagnostic Or Therapeutic Agent, Paravertebral Facet (Zygapophyseal) Joint (Or Nerves Innervating That Joint) With Image Guidance (Fluoroscopy Or Ct), Lumbar Or Sacral; Third And Any Additional Level(S)		eviCore	MSK - Pain
64510	Injection, Anesthetic Agent; Stellate Ganglion (Cervical Sympathetic)		eviCore	MSK - Pain
64520	Injection, Anesthetic Agent; Lumbar Or Thoracic (Paravertebral Sympathetic)		eviCore	MSK - Pain
64553	Percutaneous Implantation Of Neurostimulator Electrode Array; Cranial Nerve	Banner		
64555	Percutaneous Implantation Of Neurostimulator Electrode Array; Peripheral Nerve (Banner		
64561	Percutaneous Implantation Of Neurostimulator Electrode Array; Sacral Nerve (Tran	Banner		
64565	Percutaneous Implantation Of Neurostimulator Electrode Array; Neuromuscular	Banner		
64566	Posterior Tibial Neurostimulation, Percutaneous Needle Electrode, Single Treatme	Banner		
64568	Incision For Implantation Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array And Pulse Generator	Banner		
64569	Revision Or Replacement Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array, Including Connection To Existing Pulse Generator	Banner		
64575	Incision For Implantation Of Neurostimulator Electrode Array; Peripheral Nerve (Banner		
64580	Incision For Implantation Of Neurostimulator Electrode Array; Neuromuscular	Banner		
64581	Incision For Implantation Of Neurostimulator Electrode Array; Sacral Nerve (Tran	Banner		
64585	Revision Or Removal Of Peripheral Neurostimulator Electrode Array	Banner		
64590	Insertion Or Replacement Of Peripheral Or Gastric Neurostimulator Pulse Generato	Banner		
64595	Revision Or Removal Of Peripheral Or Gastric Neurostimulator Pulse Generator Or	Banner		
64633	Destruction By Neurolytic Agent, Paravertebral Facet Joint Nerve(S), With Imaging Guidance (Fluoroscopy Or Ct); Cervical Or Thoracic, Single Facet Joint		eviCore	MSK - Pain

Code	Description	Items Processed	Items Processed	eviCore List Name
64634	Destruction By Neurolytic Agent, Paravertebral Facet Joint Nerve(S), With Imaging Guidance (Fluoroscopy Or Ct); Cervical Or Thoracic, Each Additional Facet Joint (List Separately In Addition To Code For Primary Procedure)		eviCore	MSK - Pain
64635	Destruction By Neurolytic Agent, Paravertebral Facet Joint Nerve(S), With Imaging Guidance (Fluroscopy Or Ct); Lumbar Or Sacral, Single Facet Joint		eviCore	MSK - Pain
64636	Destruction By Neurolytic Agent, Paravertebral Facet Joint Nerve(S), With Imaging Guidance (Fluroscopy Or Ct); Lumbar Or Sacral, Each Additional Facet Joint (List Separately In Addition To Code For Primary Procedure)		eviCore	MSK - Pain
66930	Cochlear device implantation, with or without mastoidectomy	Banner		
67311	Strabismus Recession/Rescj 1 Hrzntl Musc	Banner		
67312	Strabismus Recession/Rescj 2 Hrzntl Musc	Banner		
67314	Strabismus Recession/Rescj 1 Ver Musc	Banner		
67316	Strabismus Recession/Rescj 2/More Ver Musc	Banner		
67318	Strabismus Any Superior Oblique Muscle	Banner		
67320	Transposition Procedure Extraocular Musc	Banner		
67331	Strabismus Previous Eye X Involve Eo Musc	Banner		
67332	Strabismus Scarring Eo Musc/Rstcv Myopathy	Banner		
67334	Strabismus Post Fixj Sutr Tq W/Wo Musc Recession	Banner		
67335	Placement Adjustable Suture Strabismus	Banner		
67340	Strabismus Expl&/Rpr Detached Extrocular Musc	Banner		
67343	Rls Xtntsv Scar Tiss W/O Detaching Eo Musc Spx	Banner		
67399	Unlisted Procedure Ocular Muscle	Banner		
67900	Repair Brow Ptosis	Banner		
67901	Rpr Blepharoptosis Frontalis Musc Sutr/Oth Matr	Banner		
67902	Rpr Blepharopt Frontalis Musc Autol Fascal Sling	Banner		
67903	Rpr Blepharoptosis Levator Rescj/Advmnt Internal	Banner		
67904	Rpr Blepharoptosis Levator Rescj/Advmnt Xtrnl	Banner		
67906	Rpr Blepharoptosis Superior Rectus Fascial Sling	Banner		
67908	Rpr Blpos Conjunctivo-Tarso-Musc-Levator Rescj	Banner		
67909	Reduction Overcorrection Ptosis	Banner		
67911	Correction Lid Retraction	Banner		
67914	Repair Of Ectropion; Suture	Banner		
67915	Repair Of Ectropion; Thermocauterization	Banner		
67916	Repair Ectropion Excision Tarsal Wedge	Banner		
67917	Repair Ectropion Extensive	Banner		
67921	Repair Of Entropion; Suture	Banner		
67922	Repair Of Entropion; Thermocauterization	Banner		
67923	Repair Of Entropion; Excision Tarsal Wedge	Banner		

Code	Description	Items Processed	Items Processed	eviCore List Name
67924	Repair Of Entropion; Extensive (Eg, Tarsal Strip Or Capsulopalpebral Fascia Repairs Operation)	Banner		
67950	Canthoplasty	Banner		
67961	Excision & Repair Eyelid > One-Fourth Lid Margin	Banner		
67966	Excision & Repair Eyelid One-Fourth Lid Margin/>	Banner		
67971	Rcnstj Eyelid Full Thickness < Two-Thirds 1 Stg	Banner		
67973	Rcnstj Eyelid Full Thickness Lower Eyelid 1 Stg	Banner		
67974	Rcnstj Eyelid Full Thickness Upper Eyelid 1 Stg	Banner		
67975	Rcnstj Eyelid Full Thickness Second Stage	Banner		
68320	Conjunctivoplasty W/Grf/Xtnsv Rearrangement	Banner		
68325	Conjunctivoplasty W/Buccal Muc Memb Graft	Banner		
68326	Cjp Rcnstj Cul-De-Sac Buccal Grf/Xtnsv Rearrgmt	Banner		
68328	Conjunctpl Cul-De-Sac W/Buccal Muc Memb Graft	Banner		
68360	Conjunctival Flap Bridge/Partial Spx	Banner		
68362	Conjunctival Flap Total	Banner		
68371	Harvesting Conjunctival Allography Living Donor	Banner		
68399	Unlisted Procedure Conjunctiva	Banner		
68700	Plastic Repair Canaliculi	Banner		
69714	Implantation, oseointegrated implant, temporal bone, with percutaneous attachment to external speech processer/cochlear stimulator, without mastoidectomy	Banner		
69715	Implantation, oseointegrated implant, temporal bone, with percutaneous attachment to external speech processer/cochlear stimulator, with mastoidectomy	Banner		
69717	Replacement(including removal of existing device), oseointegrated implant, temporal bone, with percutaneous attachment to external speech processor/cochlear stimulator without mastoidectomy	Banner		
70336	MRI Temporomandibular Joint		eviCore	RAD
70450	Computed Tomography, Head Or Brain; Without Contrast Material		eviCore	RAD
70460	Computed Tomography, Head Or Brain; With Contrast Material(S)		eviCore	RAD
70470	Computed Tomography, Head Or Brain; Without Contrast Material, Followed By		eviCore	RAD
70480	Computed Tomography, Orbit, Sella, Or Posterior Fossa Or Outer, Middle, Or		eviCore	RAD
70481	Computed Tomography, Orbit, Sella, Or Posterior Fossa Or Outer, Middle, Or		eviCore	RAD
70482	Computed Tomography, Orbit, Sella, Or Posterior Fossa Or Outer, Middle, Or		eviCore	RAD
70486	Computed Tomography, Maxillofacial Area; Without Contrast Material		eviCore	RAD
70487	Computed Tomography, Maxillofacial Area; With Contrast Material(S)		eviCore	RAD
70488	Computed Tomography, Maxillofacial Area; Without Contrast Material, Followed By		eviCore	RAD
70490	Computed Tomography, Soft Tissue Neck; Without Contrast Material		eviCore	RAD
70491	Computed Tomography, Soft Tissue Neck; With Contrast Material(S)		eviCore	RAD
70492	Computed Tomography, Soft Tissue Neck; Without Contrast Material Followed By		eviCore	RAD
70496	Computed Tomographic Angiography, Head, With Contrast Material(S), Including Non		eviCore	RAD

Code	Description	Items Processed	Items Processed	eviCore List Name
70498	Computed Tomographic Angiography, Neck, With Contrast Material(S), Including Non		eviCore	RAD
70540	Magnetic Resonance (Eg, Proton) Imaging, Orbit, Face, And/Or Neck; Without Contr		eviCore	RAD
70542	Magnetic Resonance (Eg, Proton) Imaging, Orbit, Face, And Neck; With Contrast		eviCore	RAD
70543	Magnetic Resonance (Eg, Proton) Imaging, Orbit, Face, And Neck; Without		eviCore	RAD
70544	Magnetic Resonance Angiography, Head; Without Contrast Material(S)		eviCore	RAD
70545	Magnetic Resonance Angiography, Head; With Contrast Material(S)		eviCore	RAD
70546	Magnetic Resonance Angiography, Head; Without Contrast Material(S), Followed By		eviCore	RAD
70547	Magnetic Resonance Angiography, Neck; Without Contrast Material(S)		eviCore	RAD
70548	Magnetic Resonance Angiography, Neck; With Contrast Material(S)		eviCore	RAD
70549	Magnetic Resonance Angiography, Neck; Without Contrast Material(S), Followed By		eviCore	RAD
70551	Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without		eviCore	RAD
70552	Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); With		eviCore	RAD
70553	Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without		eviCore	RAD
70554	Magnetic Resonance Imaging, Brain, Functional Mri; Including Test Selection And		eviCore	RAD
70555	Magnetic Resonance Imaging, Brain, Functional Mri; Requiring Physician Or Psycho		eviCore	RAD
71250	Computed Tomography, Thorax; Without Contrast Material		eviCore	RAD
71260	Computed Tomography, Thorax; With Contrast Material(S)		eviCore	RAD
71270	Computed Tomography, Thorax; Without Contrast Material, Followed By Contrast		eviCore	RAD
71275	Computed Tomographic Angiography, Chest (Noncoronary), With Contrast Material(S)		eviCore	RAD
71550	Magnetic Resonance (Eg, Proton) Imaging, Chest (Eg, For Evaluation Of Hilar And		eviCore	RAD
71551	Magnetic Resonance (Eg, Proton) Imaging, Chest (Eg, For Evaluation Of Hilar And		eviCore	RAD
71552	Magnetic Resonance (Eg, Proton) Imaging, Chest (Eg, For Evaluation Of Hilar And		eviCore	RAD
71555	Magnetic Resonance Angiography, Chest (Excluding Myocardium), With Or Without		eviCore	RAD
72125	Computed Tomography, Cervical Spine; Without Contrast Material		eviCore	RAD
72126	Computed Tomography, Cervical Spine; With Contrast Material		eviCore	RAD
72127	Computed Tomography, Cervical Spine; Without Contrast Material, Followed By		eviCore	RAD
72128	Computed Tomography, Thoracic Spine; Without Contrast Material		eviCore	RAD
72129	Computed Tomography, Thoracic Spine; With Contrast Material		eviCore	RAD
72130	Computed Tomography, Thoracic Spine; Without Contrast Material, Followed By		eviCore	RAD
72131	Computed Tomography, Lumbar Spine; Without Contrast Material		eviCore	RAD
72132	Computed Tomography, Lumbar Spine; With Contrast Material		eviCore	RAD
72133	Computed Tomography, Lumbar Spine; Without Contrast Material, Followed By		eviCore	RAD
72141	Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Cervical;		eviCore	RAD
72142	Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Cervical;		eviCore	RAD
72146	Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Thoracic;		eviCore	RAD
72147	Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Thoracic;		eviCore	RAD
72148	Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Lumbar;		eviCore	RAD
72149	Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Lumbar;		eviCore	RAD
72156	Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Without		eviCore	RAD

Code	Description	Items Processed	Items Processed	eviCore List Name
72157	Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Without		eviCore	RAD
72158	Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Without		eviCore	RAD
72159	Magnetic Resonance Angiography, Spinal Canal And Contents, With Or Without		eviCore	RAD
72191	Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including N		eviCore	RAD
72192	Computed Tomography, Pelvis; Without Contrast Material		eviCore	RAD
72193	Computed Tomography, Pelvis; With Contrast Material(S)		eviCore	RAD
72194	Computed Tomography, Pelvis; Without Contrast Material, Followed By Contrast		eviCore	RAD
72195	Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S)		eviCore	RAD
72196	Magnetic Resonance (Eg, Proton) Imaging, Pelvis; With Contrast Material(S)		eviCore	RAD
72197	Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S),		eviCore	RAD
72198	Magnetic Resonance Angiography, Pelvis, With Or Without Contrast Material(S)		eviCore	RAD
73200	Computed Tomography, Upper Extremity; Without Contrast Material		eviCore	RAD
73201	Computed Tomography, Upper Extremity; With Contrast Material(S)		eviCore	RAD
73202	Computed Tomography, Upper Extremity; Without Contrast Material, Followed By		eviCore	RAD
73206	Computed Tomographic Angiography, Upper Extremity, With Contrast Material(S), In		eviCore	RAD
73218	Magnetic Resonance (Eg, Proton) Imaging, Upper Extremity, Other Than Joint;		eviCore	RAD
73219	Magnetic Resonance (Eg, Proton) Imaging, Upper Extremity, Other Than Joint;		eviCore	RAD
73220	Magnetic Resonance (Eg, Proton) Imaging, Upper Extremity, Other Than Joint;		eviCore	RAD
73221	Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Upper Extremity; Without		eviCore	RAD
73222	Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Upper Extremity; With		eviCore	RAD
73223	Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Upper Extremity; Without		eviCore	RAD
73225	Magnetic Resonance Angiography, Upper Extremity, With Or Without Contrast		eviCore	RAD
73700	Computed Tomography, Lower Extremity; Without Contrast Material		eviCore	RAD
73701	Computed Tomography, Lower Extremity; With Contrast Material(S)		eviCore	RAD
73702	Computed Tomography, Lower Extremity; Without Contrast Material, Followed By		eviCore	RAD
73706	Computed Tomographic Angiography, Lower Extremity, With Contrast Material(S), In		eviCore	RAD
73718	Magnetic Resonance (Eg, Proton) Imaging, Lower Extremity Other Than Joint;		eviCore	RAD
73719	Magnetic Resonance (Eg, Proton) Imaging, Lower Extremity Other Than Joint; With		eviCore	RAD
73720	Magnetic Resonance (Eg, Proton) Imaging, Lower Extremity Other Than Joint;		eviCore	RAD
73721	Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without		eviCore	RAD
73722	Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; With		eviCore	RAD
73723	Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without		eviCore	RAD
73725	Magnetic Resonance Angiography, Lower Extremity, With Or Without Contrast		eviCore	RAD
74150	Ct Abdomen W/O Contrast Material		eviCore	RAD
74160	Computed Tomography, Abdomen; With Contrast Material(S)		eviCore	RAD
74170	Computed Tomography, Abdomen; Without Contrast Material, Followed By Contrast		eviCore	RAD
74174	Computed Tomographic Angiography, Abdomen And Pelvis, With Contrast Material(S),		eviCore	RAD
74175	Computed Tomographic Angiography, Abdomen, With Contrast Material(S), Including		eviCore	RAD

Code	Description	Items Processed	Items Processed	eviCore List Name
74176	Computed Tomography, Abdomen And Pelvis; Without Contrast Material		eviCore	RAD
74177	Computed Tomography, Abdomen And Pelvis; With Contrast Material(S)		eviCore	RAD
74178	Computed Tomography, Abdomen And Pelvis; Without Contrast Material In One Or Bot		eviCore	RAD
74181	Magnetic Resonance (Eg, Proton) Imaging, Abdomen; Without Contrast Material(S)		eviCore	RAD
74182	Magnetic Resonance (Eg, Proton) Imaging, Abdomen; With Contrast Material(S)		eviCore	RAD
74183	Magnetic Resonance (Eg, Proton) Imaging, Abdomen; Without Contrast Material(S),		eviCore	RAD
74185	Magnetic Resonance Angiography, Abdomen, With Or Without Contrast Material(S)		eviCore	RAD
74261	Computed tomographic (CT) colonography, diagnostic, including image postprocessing; without contrast material		eviCore	RAD
74262	Computed tomographic (CT) colonography, diagnostic, including image postprocessing; with contrast material(s) including non-contrast images, if performed		eviCore	RAD
74263	Computed tomographic (CT) colonography, screening, including image postprocessing		eviCore	RAD
74712	MR Fetal W+orW/O MaternalPelvic Sgl		eviCore	RAD
74713	Magnetic resonance (eg, proton) imaging, fetal, including placental and maternal pelvic imaging when performed; each additional gestation (List separately in addition to code for primary procedure) - probably not much need for this!!!		eviCore	RAD
75557	Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast		eviCore	RAD
75559	Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast		eviCore	RAD
75561	Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast		eviCore	RAD
75563	Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast		eviCore	RAD
75565	Cardiac Magnetic Resonance Imaging For Velocity Flow Mapping (List Separately In		eviCore	RAD
75571	Computed Tomography, Heart, Without Contrast Material, With Quantitative Evaluat		eviCore	RAD
75572	Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology (Including 3D Image Postprocessing, Assessment Of Cardiac Function, And Evaluation Of Venous Structures, If Performed)		eviCore	RAD
75574	Computed Tomographic Angiography, Heart, Coronary Arteries And Bypass Grafts (Wh		eviCore	RAD
75635	Computed Tomographic Angiography, Abdominal Aorta And Bilateral Iliofemoral Lower Extremity Runoff, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing		eviCore	RAD
76380	Ct Limited/Localized Follow Up Study		eviCore	RAD
76390	Magnetic Resonance Imaging Spectroscopy		eviCore	RAD
76391	Magnetic resonance (eg, vibration) elastography		eviCore	RAD
76497	Unlisted computed tomography procedure		eviCore	RAD
76498	Unlisted MRI Procedure		eviCore	RAD
77014	Computed tomography guidance for placement of radiation therapy fields		eviCore	RAD THER
77021	M R I Guidance For Needle Placement		eviCore	RAD
77022	Magnetic resonance guidance for, and monitoring of, parenchymal tissue ablation		eviCore	RAD

Code	Description	Items Processed	Items Processed	eviCore List Name
77046	Magnetic resonance imaging, breast, without contrast material; unilateral		eviCore	RAD
77047	Magnetic resonance imaging, breast, without contrast material; bilateral		eviCore	RAD
77048	Magnetic resonance imaging, breast, without contrast material; with and without contrast bilateral		eviCore	RAD
77049	Magnetic resonance imaging, breast, without contrast material; with and without contrast unilateral		eviCore	RAD
77058	Magnetic Resonance Imaging, Breast, Without And/Or With Contrast Material(S); Un		eviCore	RAD
77059	Magnetic Resonance Imaging, Breast, Without And/Or With Contrast Material(S); Bi		eviCore	RAD
77078	Computed Tomography, bone mineral density study, 1 or more sites; axial skeleton		eviCore	RAD
77084	Bone Marrow Blood Supply		eviCore	RAD
77371	Radiation treatment delivery, stereotactic radiosurgery (SRS), complete course of treatment of cranial lesion(s) consisting of 1 session; multi-source Cobalt 60 based		eviCore	RAD THER
77372	Radiation treatment delivery, stereotactic radiosurgery (SRS), complete course of treatment of cranial lesion(s) consisting of 1 session; linear accelerator based		eviCore	RAD THER
77373	Stereotactic body radiation therapy, treatment delivery, per fraction to 1 or more lesions, including image guidance, entire course not to exceed 5 fractions		eviCore	RAD THER
77385	Intensity modulated radiation treatment delivery (IMRT), includes guidance and tracking, when performed; simple		eviCore	RAD THER
77386	Intensity modulated radiation treatment delivery (IMRT), includes guidance and tracking, when performed; complex		eviCore	RAD THER
77387	Guidance for localization of target volume for delivery of radiation treatment delivery, includes intrafraction tracking, when performed		eviCore	RAD THER
77399	Unlisted procedure, medical radiation physics, dosimetry and treatment devices, and special services		eviCore	RAD THER
77401	Radiation treatment delivery, superficial and/or ortho voltage, per day		eviCore	RAD THER
77402	Radiation treatment delivery, >1 MeV; simple		eviCore	RAD THER
77407	Radiation treatment delivery; two separate treatment areas; three or more ports on a single treatment area; or three or more simple blocks;>=1 MeV; intermediate		eviCore	RAD THER
77412	Radiation treatment delivery; three or more separate treatment areas; custom blocking; tangential ports; wedges; rotational beam; field-in-field or other tissue compensation that does not meet IMRT guidelines; or electron beam; >=1 MeV; complex		eviCore	RAD THER
77417	Therapeutic radiology port images(s)		eviCore	RAD THER
77423	High energy neutron radiation treatment delivery; 1 or more isocenter(s) with coplanar or non-coplanar geometry with blocking and/or wedge, and/or compensator(s)		eviCore	RAD THER
77424	Intraoperative radiation treatment delivery, x-ray, single treatment session		eviCore	RAD THER
77425	Intraoperative radiation treatment delivery, electrons, single treatment session		eviCore	RAD THER
77427	Radiation treatment management, 5 treatments		eviCore	RAD THER

Code	Description	Items Processed	Items Processed	eviCore List Name
77431	Radiation therapy management with complete course of therapy consisting of 1 or 2 fractions only		eviCore	RAD THER
77432	Stereotactic radiation treatment management of cranial lesion(s) (complete course of treatment consisting of 1 session)		eviCore	RAD THER
77435	Stereotactic body radiation therapy, treatment management, per treatment course, to 1 or more lesions, including image guidance, entire course not to exceed 5 fractions		eviCore	RAD THER
77469	Intraoperative radiation treatment management		eviCore	RAD THER
77470	Special treatment procedure (eg, total body irradiation, hemibody radiation, per oral or endocavitary irradiation)		eviCore	RAD THER
77499	Unlisted procedure, therapeutic radiology treatment management		eviCore	RAD THER
77520	Proton treatment delivery; simple, without compensation		eviCore	RAD THER
77522	Proton treatment delivery; simple, with compensation		eviCore	RAD THER
77523	Proton treatment delivery; intermediate		eviCore	RAD THER
77525	Proton treatment delivery; complex		eviCore	RAD THER
77600	Hyperthermia, externally generated; superficial (ie, heating to a depth of 4 cm or less)		eviCore	RAD THER
77605	Hyperthermia, externally generated; deep (ie, heating to depths greater than 4 cm)		eviCore	RAD THER
77610	Hyperthermia generated by interstitial probe(s); 5 or fewer interstitial applicators		eviCore	RAD THER
77615	Hyperthermia generated by interstitial probe(s); more than 5 interstitial applicators		eviCore	RAD THER
77620	Hyperthermia generated by intracavitary probe(s)		eviCore	RAD THER
77750	Infusion or instillation of radioelement solution (includes 3-month follow-up care)		eviCore	RAD THER
77761	Intracavitary radiation source application; simple		eviCore	RAD THER
77762	Intracavitary radiation source application; intermediate		eviCore	RAD THER
77763	Intracavitary radiation source application; complex		eviCore	RAD THER
77767	HDR radionuclide skin surface brachytherapy; lesion diameter up to 2.0 cm or 1 channel		eviCore	RAD THER
77768	HDR radionuclide skin surface brachytherapy; lesion diameter over 2.0 cm and 2 or more channels, or multiple lesions		eviCore	RAD THER
77770	HDR radionuclide interstitial or intracavitary brachytherapy; 1 channel		eviCore	RAD THER
77771	HDR radionuclide rate interstitial or intracavitary brachytherapy; 2 to 12 channels		eviCore	RAD THER
77772	HDR radionuclide interstitial or intracavitary brachytherapy; over 12 channels		eviCore	RAD THER
77778	Interstitial radiation source application, complex, includes supervision, handling, loading of radiation source when performed		eviCore	RAD THER
78459	Myocardial Imaging Pet Metabolic Evaluation		eviCore	NUC CARD
78491	Myocardial Imaging, Positron Emission Tomography (Pet), Perfusion; Single Study		eviCore	NUC CARD
78492	Myocardial Imaging, Positron Emission Tomography (Pet), Perfusion; Multiple		eviCore	NUC CARD
78608	Brain Imaging, Positron Emission Tomography (Pet); Metabolic Evaluation		eviCore	PET
78609	Brain Imaging, Positron Emission Tomography (Pet); Perfusion Evaluation		eviCore	PET
78811	Positron Emission Tomography (Pet) Imaging; Limited Area (Eg, Chest, Head/Neck)		eviCore	PET
78812	Positron Emission Tomography (Pet) Imaging; Skull Base To Mid-Thigh		eviCore	PET

Code	Description	Items Processed	Items Processed	eviCore List Name
78813	Positron Emission Tomography (Pet) Imaging; Whole Body		eviCore	PET
78814	Positron Emission Tomography (Pet) With Concurrently Acquired Computed Tomograph		eviCore	PET
78815	Positron Emission Tomography (Pet) With Concurrently Acquired Computed Tomograph		eviCore	PET
78816	TUMOR IMAGING, POSITRON EMISSION TOMOGRAPHY (PET) WITH CONCURRENTLY ACQUIRED COMPUTER TOMOGRAPHY (CT)		eviCore	PET
0042T	CT PERFUSION BRAIN		eviCore	RAD
0095T	Removal Of Total Disc Arthroplasty (Artificial Disc), Anterior Approach,Each Additional Interspace, Cervical (List Separately In Addition To Code For Primary Procedure)		eviCore	MSK - Spine
0098T	Revision Including Replacement Of Total Disc Arthroplasty (Artificial Disc), Anterior Approach, Each Additional Interspace, Cervical (Listseparately In Addition To Code For Primary Procedure)		eviCore	MSK - Spine
0163T	Total Disc Arthroplasty (Artificial Disc), Anterior Approach, Includingdiscectomy To Prepare Interspace (Other Than For Decompression),Each Additional Interspace, Lumbar		eviCore	MSK- Spine
0164T	Removal Of Total Disc Arthroplasty, (Artificial Disc), Anterior Approach,Each Additional Interspace, Lumbar (List Separately In Addition To Code For Primary Procedure)		eviCore	MSK- Spine
0165T	Revision Including Replacement Of Total Disc Arthroplasty (Artificialdisc), Anterior Approach, Each Additional Interspace, Lumbar (List Separately In Addition To Code For Primary Procedure)		eviCore	MSK- Spine
0190T	Placement of intraocular radiation source applicator (List separately in addition to primary procedure)		eviCore	MSK- Spine
0213T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, cervical or thoracic; single level		eviCore	MSK - Pain
0214T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, cervical or thoracic; second level		eviCore	MSK - Pain
0215T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, cervical or thoracic; third and any additional level(s)		eviCore	MSK - Pain
0216T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, lumbar or sacral; single level		eviCore	MSK - Pain
0217T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, lumbar or sacral; second level (List separately in addition to code for primary procedure)		eviCore	MSK - Pain

Code	Description	Items Processed	Items Processed	eviCore List Name
0218T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, lumbar or sacral; third and any additional level(s) (List separately in addition to code for primary procedure)		eviCore	MSK - Pain
0228T	Injection(S), Anesthetic Agent And/Or Steroid, Transforaminal Epidural, With Ultrasound Guidance, Cervical/Thoracic; Single Level		eviCore	MSK- Pain
0229T	Injection(S), Anesthetic Agent And/Or Steroid, Transforaminal Epidural, With Ultrasound Guidance, Cervical Or Thoracic; Each Additional Level (List Separately In Addition To Code For Primary Procedure)		eviCore	MSK- Pain
0230T	Injection(S), Anesthetic Agent And/Or Steroid, Transforaminal Epidural, With Ultrasound Guidance, Lumbar Or Sacral; Single Level		eviCore	MSK- Pain
0231T	Injection(S), Anesthetic Agent And/Or Steroid, Transforaminal Epidural, With Ultrasound Guidance, Lumbar Or Sacral; Each Additional Level (List Separately In Addition To Code For Primary Procedure)		eviCore	MSK- Pain
0274T	Percutaneous Laminotomy/Laminectomy (Interlaminar Approach) For Decompression Of Neural Elements, (With Or Without Ligamentous Resection, Descectomy, Facetectomy And/Or Foraminotomy), Any Method, Under Indirect Image Guidance		eviCore	MSK- Pain
0275T	Percutaneous Laminotomy/Laminectomy (Interlaminar Approach) For Decompression Of Neural Elements, (With Or Without Ligamentous Resection, Descectomy, Facetectomy And/Or Foraminotomy), Any Method, Under Indirect Image Guidance		eviCore	MSK- Pain
0282T	Percutaneous Or Open Implantation Of Neurostimulator Electrode Array(S), Subcutaneous (Peripheral Subcutaneous Field Stimulation), Including Imaging Guidance, When Performed, Cervical, Thoracic Or Lumbar;	Banner		
0283T	Percutaneous Or Open Implantation Of Neurostimulator Electrode Array(S), Subcutaneous Including Imaging Guidance, When Performed, Cervical, Thoracic Or Lumbar; Permanent, With Implantation Of A Pulse Generator	Banner		
0284T	Revision Or Removal Of Pulse Generator Or Electrodes, Including Imaging Guidance, When Performed, Including Addition Of New Electrodes, When Performed	Banner		
0296T	iRhythm Zio System Recording	Banner		
0297T	IRhythm Zio System Scanning Analysis with report	Banner		
0298T	iRhythm Zio System Review and Interpretation	Banner		
0394T	HDR electronic brachytherapy, skin surface application, per fraction		eviCore	RAD THER
0395T	HDR electronic brachytherapy, interstitial or intracavitary treatment, per fraction		eviCore	RAD THER
A0080	Non-Emergency Transportation, Per Mile - Vehicle Provided By Volunteer (Individual Or Organization), With No Vested Interest	Banner		
A0090	Non-Emergency Transportation, Per Mile - Vehicle Provided By Individual (Family Member, Self, Neighbor) With Vested Interest	Banner		
A0100	Non-Emergency Transportation; Taxi	Banner		
A0110	Non-Emergency Transportation And Bus, Intra Or Inter State Carrier	Banner		

Code	Description	Items Processed	Items Processed	eviCore List Name
A0120	Non-Emergency Transportation: Mini-Bus, Mountain Area Transports, Or Other Transportation Systems	Banner		
A0130	Non-Emergency Transportation: Wheelchair Van	Banner		
A0140	Non-Emergency Transportation And Air Travel (Private Or Commercial) Intra Or Inter State	Banner		
A0180	Non-Emergency Transportation: Ancillary: Lodging-Recipient	Banner		
A0190	Non-Emergency Transportation: Ancillary: Meals-Recipient	Banner		
A0200	Non-Emergency Transportation: Ancillary: Lodging Escort	Banner		
A0210	Non-Emergency Transportation: Ancillary: Meals-Escort	Banner		
A0426	Ambulance Service, Advanced Life Support, Non-Emergency Transport, Level 1 (Als 1)	Banner		
A0428	Ambulance Service, Basic Life Support, Non-Emergency Transport, (BlS)	Banner		
A0434	Specialty Care Transport (SCT)	Banner		
A9543	Yttrium 90 Ibritumomab Tiuxetan (Zevalin)		eviCore	RAD THER
A9606	Radium RA-223 dichloride, therapeutic, per microcurie		eviCore	RAD THER
C9408	Iodine i-131 iobenguane, therapeuti, 1 millicuried		eviCore	RAD THER
C8900 - 74185	MRA Abdomen with contrast		eviCore	RAD
C8901 - 74185	MRA Abdomen without contrast		eviCore	RAD
C8902 - 74185	MRA Abdomen with and w/o contrast		eviCore	RAD
C8903 - 77058	MRI Breast w/ contrast, unilateral		eviCore	RAD
C8904 - 77058	MRI Breast w/o contrast, unilateral		eviCore	RAD
C8905 - 77058	MRI Breast w. and w/o contrast, unilateral		eviCore	RAD
C8906 - 77059	MRI BREAST BILATERAL w/ CONTRAST		eviCore	RAD
C8907 - 77059	MRI BREAST BILATERAL w/o CONTRAST		eviCore	RAD
C8908 - 77059	MRI BREAST BILATERAL w/ and w/o CONTRAST		eviCore	RAD
C8909 - 71555	MRA chest w/contrast (excluding myocardium)		eviCore	RAD
C8910 - 71555	MRA chest w/o contrast (excluding myocardium)		eviCore	RAD
C8911 - 71555	MRA chest (excluding myocardium)		eviCore	RAD
C8912 - 73725	MRA lower extremity w/ contrast		eviCore	RAD
C8913 - 73725	MRA lower extremity w/o contrast		eviCore	RAD
C8914 - 73725	MRA lower extremity w/ and w/o contrast		eviCore	RAD
C8918 - 72198	MRA pelvis w/ contrast		eviCore	RAD
C8919 - 72198	MRA pelvis w/o contrast		eviCore	RAD
C8920 - 72198	MRA pelvis w/ and w/o contrast		eviCore	RAD
C8931 - 72159	MRA, W/DYE, SPINAL CANAL		eviCore	RAD
C8932 - 72159	MRA, W/O DYE, SPINAL CANAL		eviCore	RAD
C8933 - 72159	MRA, W/O&W/DYE, SPINAL CANAL		eviCore	RAD
C8934 - 73225	MRA, W/DYE, UPPER EXTREMITY		eviCore	RAD
C8935 - 73225	MRA, W/O DYE, UPPER EXTR		eviCore	RAD
C8936 - 73225	MRA, W/O&W/DYE, UPPER EXTR		eviCore	RAD

Code	Description	Items Processed	Items Processed	eviCore List Name
A9513	Lutetium Lu 177, dotatate, therapeutic, 1 mCi		eviCore	RAD THER
E0748	Osteogenesis Stimulator; Electrical, Noninvasive, Spinal Applications		eviCore	MSK - Spine
E0749	Osteogenesis Stimulator; Electrical, Surgically Implanted		eviCore	MSK - Spine
G0027	Semen Analysis	Banner		
G0219	PET IMAGING WHOLE BODY; MELANOMA FOR NON-COVERED INDICATIONS		eviCore	RAD
G0235	PET IMAGING, ANY SITE, NOT OTHERWISE SPECIFIED		eviCore	RAD
G0252	PET IMAGING, FULL AND PARTIAL-RING PET SCANNERS ONLY FOR INITIAL DIAGNOSIS OF BREAST CANCER AND/OR SURGICAL PLANNING FOR BREAST CANCER		eviCore	RAD
G0260	Injection Procedure For Sacroiliac Joint; Provision Of Anesthetic, Steroid And/Or Other Therapeutic Agent, With Or Without Arthrography		eviCore	MSK - Pain
G0297	Low-dose Computed Tomography For Lung Cancer Screening		eviCore	RAD
G0339	Image guided robotic linear accelerator-based stereotactic radiosurgery, complete course of therapy in one session or first session of fractionated treatment		EviCore	RAD THER
G0340	Image guided robotic linear accelerator-based stereotactic radiosurgery, delivery including collimator changes and custom plugging, fractionated treatment, all lesions, per session,		EviCore	RAD THER
G0458	Low dose rate (LDR) prostate brachytherapy services, composite rate		eviCore	RAD THER
G6001	Ultrasonic guidance for placement of radiation therapy fields		eviCore	RAD THER
G6002	Stereoscopic x-ray guidance for localization of target volume for the delivery of radiation therapy		eviCore	RAD THER
G6003	Radiation treatment delivery, single treatment area,single port or parallel opposed ports, simple blocks or no blocks: up to 5mev		eviCore	RAD THER
G6004	Radiation treatment delivery, single treatment area,single port or parallel opposed ports, simple blocks or no blocks: 6-10mev		eviCore	RAD THER
G6005	Radiation treatment delivery, single treatment area,single port or parallel opposed ports, simple blocks or no blocks: 11-19mev		eviCore	RAD THER
G6006	Radiation treatment delivery, single treatment area,single port or parallel opposed ports, simple blocks or no blocks: 20mev or greater		eviCore	RAD THER
G6007	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks: up to 5mev		eviCore	RAD THER
G6008	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks: 6-10mev		eviCore	RAD THER
G6009	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks: 11-19mev		eviCore	RAD THER
G6010	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks: 20 mev or greater		eviCore	RAD THER

Code	Description	Items Processed	Items Processed	eviCore List Name
G6011	Radiation treatment delivery,3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; up to 5mev		eviCore	RAD THER
G6012	Radiation treatment delivery,3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; 6-10mev		eviCore	RAD THER
G6013	Radiation treatment delivery,3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; 11-19mev		eviCore	RAD THER
G6014	Radiation treatment delivery,3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; 20mev or greater		eviCore	RAD THER
G6015	Intensity modulated treatment delivery, single or multiple fields/arcs, via narrow spatially and temporally modulated beams, binary, dynamic mlc, per treatment session		eviCore	RAD THER
G6016	Compensator-based beam modulation treatment delivery of inverse planned treatment using 3 or more high resolution (milled or cast) compensator, convergent beam modulated fields, per treatment session		eviCore	RAD THER
90901	Biofeedback Training By Any Modality		eviCore	MSK - PT/OT
92548	Computerized Dynamic Posturography		eviCore	MSK - PT/OT
95831	Muscle Testing, Manual (Separate Procedure) With Report; Extremity (Excluding Hand) Or Trunk		eviCore	MSK - PT/OT
95832	Muscle Testing, Manual (Separate Procedure) With Report; Hand, With Or Without Comparison With Normal Side		eviCore	MSK - PT/OT
95833	Muscle Testing, Manual (Separate Procedure) With Report; Total Evaluation Of Body, Excluding Hands		eviCore	MSK - PT/OT
95834	Muscle Testing, Manual (Separate Procedure) With Report; Total Evaluation Of Body, Including Hands		eviCore	MSK - PT/OT
95851	Range Of Motion Measurements And Report (Separate Procedure); Each Extremity (Excluding Hand) Or Each Trunk Section (Spine)		eviCore	MSK - PT/OT
95852	Range Of Motion Measurements And Report (Separate Procedure); Hand, With Or Without Comparison With Normal Side		eviCore	MSK - PT/OT
95992	Canalith Repositioning Procedure(S) (Eg, Epley Maneuver, Semont Maneuver), Per Day		eviCore	MSK - PT/OT
97010	Application Of A Modality To 1 Or More Areas; Hot Or Cold Packs		eviCore	MSK - PT/OT
97012	Application Of A Modality To 1 Or More Areas; Traction, Mechanical		eviCore	MSK - PT/OT
97014	Application Of A Modality To 1 Or More Areas; Electrical Stimulation (Unattended)		eviCore	MSK - PT/OT
97016	Application Of A Modality To 1 Or More Areas; Vasopneumatic Devices		eviCore	MSK - PT/OT
97018	Application Of A Modality To 1 Or More Areas; Paraffin Bath		eviCore	MSK - PT/OT
97022	Application Of A Modality To 1 Or More Areas; Whirlpool		eviCore	MSK - PT/OT
97024	Application Of A Modality To 1 Or More Areas; Diathermy (Eg, Microwave)		eviCore	MSK - PT/OT
97026	Application Of A Modality To 1 Or More Areas; Infrared		eviCore	MSK - PT/OT

Code	Description	Items Processed	Items Processed	eviCore List Name
97028	Application Of A Modality To 1 Or More Areas; Ultraviolet		eviCore	MSK - PT/OT
97032	Application Of A Modality To 1 Or More Areas; Electrical Stimulation (Manual), Each 15 Minutes		eviCore	MSK - PT/OT
97033	Application Of A Modality To 1 Or More Areas; Iontophoresis, Each 15 Minutes		eviCore	MSK - PT/OT
97034	Application Of A Modality To 1 Or More Areas; Contrast Baths, Each 15 Minutes		eviCore	MSK - PT/OT
97035	Application Of A Modality To 1 Or More Areas; Ultrasound, Each 15 Minutes		eviCore	MSK - PT/OT
97036	Application Of A Modality To 1 Or More Areas; Hubbard Tank, Each 15 Minutes		eviCore	MSK - PT/OT
97039	Unlisted Modality (Specify Type And Time If Constant Attendance)		eviCore	MSK - PT/OT
97110	Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Therapeutic Exercises To Develop Strength And Endurance, Range Of Motion And Flexibility		eviCore	MSK - PT/OT
97112	Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Neuromuscular Reeducation Of Movement, Balance, Coordination, Kinesthetic Sense, Posture, And/Or Proprioception For Sitting And/Or Standing Activities		eviCore	MSK - PT/OT
97113	Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapy With Therapeutic Exercises		eviCore	MSK - PT/OT
97116	Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Gait Training (Includes Stair Climbing)		eviCore	MSK - PT/OT
97124	Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Massage, Including Effleurage, Petrissage And/Or Tapotement (Stroking, Compression, Percussion)		eviCore	MSK - PT/OT
97127	Therapeutic Interventions That Focus On Cognitive Function And Compensatory Strategies To Manage The Performance Of An Activity Direct (One-On-One) Patient Contact		eviCore	MSK - PT/OT
97139	Unlisted Therapeutic Procedure (Specify)		eviCore	MSK - PT/OT
97140	Manual Therapy Techniques (Eg, Mobilization/ Manipulation, Manual Lymphatic Drainage, Manual Traction), 1 Or More Regions, Each 15 Minutes		eviCore	MSK - PT/OT
97150	Therapeutic Procedure(S), Group (2 Or More Individuals)		eviCore	MSK - PT/OT
97161	Physical Therapy Evaluation: Low Complexity, Using Standardized Tests And Measures Typically, 20 Minutes Are Spent Face-To-Face With The Patient And/Or Family.		eviCore	MSK - PT/OT
97162	Physical Therapy Evaluation: Moderate Complexity, An Examination Of Body Systems Using Standardized Tests And Measures Using Standardized Patient Assessment Instrument Typically, 30 Minutes Are Spent Face-To-Face With The Patient And/Or Family.		eviCore	MSK - PT/OT
97163	Physical Therapy Evaluation: High Complexity, Using Standardized Tests And Measures Using Standardized Patient Assessment Instrument Typically, 45 Minutes Are Spent Face-To-Face With The Patient And/Or Family.		eviCore	MSK - PT/OT
97164	Re-Evaluation Of Physical Therapy Established Plan Of Care, Use Of Standardized Tests And Measures Is Required; Typically, 20 Minutes Are Spent Face-To-Face With The Patient And/Or Family.		eviCore	MSK - PT/OT

Code	Description	Items Processed	Items Processed	eviCore List Name
97165	Occupational Therapy Evaluation, Low Complexity, Includes An Analysis Of The Occupational Profile, Analysis Of Data From Problem-Focused Assessment(S), Typically, 30 Minutes Are Spent Face-To-Face With The Patient And/Or Family.		eviCore	MSK - PT/OT
97166	Occupational Therapy Evaluation, Moderate Complexity, An Analysis Of The Occupational Profile, Analysis Of Data From Detailed Assessment(S), Typically, 45 Minutes Are Spent Face-To-Face With The Patient And/Or Family.		eviCore	MSK - PT/OT
97167	Occupational Therapy Evaluation, High Complexity, Typically, 60 Minutes Are Spent Face-To-Face With The Patient And/Or Family		eviCore	MSK - PT/OT
97168	Re-Evaluation Of Occupational Therapy Established Plan Of Care, Typically, 30 Minutes Are Spent Face-To-Face With The Patient And/Or Family.		eviCore	MSK - PT/OT
97530	Therapeutic Activities, Direct (One-On-One) Patient Contact (Use Of Dynamic Activities To Improve Functional Performance), Each 15 Minutes		eviCore	MSK - PT/OT
97533	Sensory Integrative Techniques To Enhance Sensory Processing And Promote Adaptive Responses To Environmental Demands, Direct (One-On-One) Patient Contact, Each 15 Minutes		eviCore	MSK - PT/OT
97535	Self-Care/Home Management Training (Eg, Activities Of Daily Living (ADL) And Compensatory Training, Meal Preparation, Safety Procedures, And Instructions In Use Of Assistive Technology Devices/Adaptive Equipment) Direct One-On-One Contact, Each 15 Minutes		eviCore	MSK - PT/OT
97537	Community/Work Reintegration Training (Eg, Shopping, Transportation, Money Management, Avocational Activities And/Or Work Environment/Modification Analysis, Work Task Analysis, Use Of Assistive Technology Device/Adaptive Equipment), Direct One-On-One Contact, Each 15 Minutes		eviCore	MSK - PT/OT
97542	Wheelchair Management (Eg, Assessment, Fitting, Training), Each 15 Minutes		eviCore	MSK - PT/OT
97545	Work Hardening /Conditioning; Initial 2 Hours		eviCore	MSK - PT/OT
97546	Work Hardening /Conditioning; Each Additional Hour (List Separately In Addition To Code For Primary Procedure)		eviCore	MSK - PT/OT
97597	Debridement (Eg, High Pressure Waterjet With/Without Suction, Sharp Selective Debridement With Scissors, Scalpel And Forceps), Open Wound,, Wound Assessment, Use of a Whirlpool, Total Wound(S) Surface Area; First 20 Sq Cm Or Less	Banner		
97598	Debridement (Eg, High Pressure Waterjet With/Without Suction, Sharp Selective Debridement With Scissors, Scalpel And Forceps), Open Wound, Wound Assessment, Use Of A Whirlpool, Total Wound(S) Surface Area; Each Additional 20 Sq Cm, Or Part Thereof	Banner		
97602	Removal of devitalized tissue from wound(s), non-selective debridement, without anesthesia including topical application(s), wound assessment, and instruction(s) for ongoing care, per session		eviCore	MSK - PT/OT
97605	Negative Pressure Wound Therapy Utilizing Durable Medical Equipment Wound Assessment, Total Wound(S) Surface Area Less Than Or Equal To 50 Square Centimeters		eviCore	MSK - PT/OT

Code	Description	Items Processed	Items Processed	eviCore List Name
97606	Negative Pressure Wound Therapy Utilizing Durable Medical Equipment , Total Wound(S) Surface Area Greater Than 50 Square Centimeters		eviCore	MSK - PT/OT
97750	Physical Performance Test Or Measurement (Eg, Musculoskeletal, Functional Capacity), With Written Report, Each 15 Minutes		eviCore	MSK - PT/OT
97755	Assistive Technology Assessment Direct One-On-One Contact, With Written Report, Each 15 Minutes		eviCore	MSK - PT/OT
97760	Orthotic(S) Management And Training (Including Assessment And Fitting When Not Otherwise Reported), Upper Extremity(ies), Lower Extremity(ies) And/Or Trunk, Initial Orthotic(S) Encounter, Each 15 Minutes		eviCore	MSK - PT/OT
97761	Prosthetic(S) Training, Upper And/Or Lower Extremity(ies), Initial Prosthetic(S) Encounter, Each 15 Minutes		eviCore	MSK - PT/OT
97763	Orthotic(S)/Prosthetic(S) Management And/Or Training, Upper Extremity(ies), Lower Extremity(ies), And/Or Trunk, Subsequent Orthotic(S)/Prosthetic(S) Encounter, Each 15 Minutes		eviCore	MSK - PT/OT
97799	Unlisted Physical Medicine/Rehabilitation Service Or Procedure		eviCore	MSK - PT/OT
G0151	Services Of Physical Therapist In Home Health Setting, Each 15 Minutes		eviCore	MSK - PT/OT
G0152	Services Of Occupational Therapist In Home Health Setting, Each 15 Minutes		eviCore	MSK - PT/OT
G0157	Services Performed By A Qualified Physical Therapist Assistant In The Home Health Or Hospice Setting, Each 15 Minutes		eviCore	MSK - PT/OT
G0158	Services Performed By A Qualified Occupational Therapist Assistant In The Home Health Or Hospice Setting, Each 15 Minutes		eviCore	MSK - PT/OT
G0159	Services Performed By A Qualified Physical Therapist, In The Home Health Setting, In The Establishment Or Delivery Of A Safe And Effective Physical Therapy Maintenance Program, Each 15 Minutes		eviCore	MSK - PT/OT
G0160	Services Performed By A Qualified Occupational Therapist, In The Home Health Setting, In The Establishment Or Delivery Of A Safe And Effective Occupational Therapy Maintenance Program, Each 15 Minutes		eviCore	MSK - PT/OT
G0281	Electrical Stimulation, (Unattended), To One Or More Areas, For Chronic Stage Iii And Stage Iv Pressure Ulcers, Etc.		eviCore	MSK - PT/OT
G0282	Electrical Stimulation, (Unattended), To One Or More Areas, For Wound Care Other Than Described In G0281		eviCore	MSK - PT/OT
G0283	Electrical Stimulation (Unattended), To One Or More Areas For Indication(S) Other Than Wound Care, As Part Of A Therapy Plan Of Care		eviCore	MSK - PT/OT
G0329	Electromagnetic Therapy, Not Demonstrating Measurable Signs Of Healing After 30 Days Of Conventional Care As Part Of A Therapy Plan Of Care		eviCore	MSK - PT/OT
G0515	Development of cognitive skills to improve attention, memory, problem solving (includes compensatory training), direct (one-on-one) patient contact, each 15 minutes		eviCore	MSK - PT/OT
78499	Unlisted Cardiovascular Procedure		eviCore	CARD

Code	Description	Items Processed	Items Processed	eviCore List Name
75573	Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology		eviCore	CARD
78414	Non-Imaging Heart Function		eviCore	NUC CARD
78428	Cardiac Shunt Imaging		eviCore	NUC CARD
78451	Myocardial perfusion imaging, tomographic (spect) single study, at rest or stress (exercise or pharmacologic)		eviCore	NUC CARD
78452	Myocardial perfusion imaging, tomographic ; multiple studies, at rest and/or stress (exercise or pharmacologic) and/or redistribution and/or rest reinjection		eviCore	NUC CARD
78453	Myocardial perfusion imaging, planar (including qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); single study, at rest or stress (exercise or pharmacologic)		eviCore	NUC CARD
78454	Myocardial perfusion imaging, planar ; multiple studies, at rest and/or stress (exercise or pharmacologic) and/or redistribution and/or rest reinjection		eviCore	NUC CARD
78466	Myocardial Infarction Scan		eviCore	NUC CARD
78468	Heart Infarct Image Ejection Fraction		eviCore	NUC CARD
78469	Heart Infarct Image 3D SPECT		eviCore	NUC CARD
78472	Cardiac Bloodpool Img, Single		eviCore	NUC CARD
78473	Cardiac Bloodpool Img, Multi		eviCore	NUC CARD
78481	Heart First Pass Single		eviCore	NUC CARD
78483	Cardiac Blood Pool Imaging -- Multiple		eviCore	NUC CARD
78494	Cardiac Blood Pool Imaging , SPECT		eviCore	NUC CARD
78496	Cardiac blood pool imaging, gated equilibrium, single study, at rest, with right ventricular ejection fraction by first pass technique (List separately in addition to code for primary procedure)		eviCore	NUC CARD
79005	Radiopharmaceutical therapy, by oral administration used for 1-131 treatment		eviCore	RAD THER
79101	Radiopharmaceutical therapy by Intravenous administration		eviCore	RAD THER
79403	Radiopharmaceutical therapy radiolabeled monoclonal antibody by intravenous infusion		eviCore	RAD THER
93303	Transthoracic echocardiography for congenital cardiac anomalies; complete		eviCore	CARD
93304	Transthoracic echocardiography for congenital cardiac anomalies; follow-up or limited study		eviCore	CARD
93306	Echocardiography, transthoracic, real-time with image documentation (2d),		eviCore	CARD
93307	Echocardiography, transthoracic, real-time with image documentation (2d) with or without m-mode recording; complete		eviCore	CARD
93308	Echocardiography, transthoracic, real-time with image documentation (2d) with or without m-mode recording; follow-up or limited study		eviCore	CARD
93312	TEE 2D;Incl Probe Placement, Imaging/Interp/Report		eviCore	CARD
93313	Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); placement of transesophageal probe only		eviCore	CARD

Code	Description	Items Processed	Items Processed	eviCore List Name
93314	Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); image acquisition, interpretation and report only		eviCore	CARD
93315	Transesophageal echocardiography for congenital cardiac anomalies; including probe placement, image acquisition, interpretation and report		eviCore	CARD
93316	Transesophageal echocardiography for congenital cardiac anomalies; placement of transesophageal probe only		eviCore	CARD
93317	Transesophageal echocardiography for congenital cardiac anomalies; image acquisition, interpretation and report only		eviCore	CARD
93320	Doppler echocardiography, pulsed wave and/or continuous wave with spectral display; complete		eviCore	CARD
93321	Doppler echocardiography, pulsed wave and/or continuous wave with spectral display; follow-up or limited study		eviCore	CARD
93325	Doppler echocardiography color flow velocity mapping		eviCore	CARD
93350	Echocardiography, transthoracic, real-time with image documentation (2d), with or without m-mode recording, during rest and cardiovascular stress test, with interpretation and report		eviCore	CARD
93351	Echocardiography, transthoracic, real-time with image documentation (2d),		eviCore	CARD
93352	Use of echocardiographic contrast agent during stress echocardiography (list separately in addition to code for primary procedure)		eviCore	CARD
93451	Right Heart Catheterization Including Measurement(S) Of Oxygen Saturation And Cardiac Output, When Performed		eviCore	CARD
93452	Left heart catheterization including intraprocedural injection(s) for left ventriculography, imaging supervision and interpretation, when performed		eviCore	CARD
93453	Combined right and left heart catheterization including intraprocedural injection(s) for left ventriculography, imaging supervision and interpretation, when performed		eviCore	CARD
93454	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation		eviCore	CARD
93455	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography,		eviCore	CARD
93456	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right heart catheterization		eviCore	CARD
93457	Catheter placement in coronary artery(s) for coronary angiography, in bypass graft(s) for bypass graft angiography and right heart catheterization		eviCore	CARD
93458	Catheter placement in coronary artery(s) for coronary angiography,		eviCore	CARD
93459	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography,		eviCore	CARD

Code	Description	Items Processed	Items Processed	eviCore List Name
93460	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography,		eviCore	CARD
93461	Catheter placement in coronary artery(s) for coronary angiography,		eviCore	CARD
93462	Left heart catheterization by transseptal puncture through intact septum or by transapical puncture (list separately in addition to code for primary procedure)		eviCore	CARD
93530	Right Heart Catheterization (CHD)		eviCore	CARD
93531	Right/Left Heart Catheterization (CHD)		eviCore	CARD
93532	Right/Left Heart Catheterization (CHD-TS)		eviCore	CARD
93533	Right/Left Heart Catheterization (CAD-ASD)		eviCore	CARD
0331T	Myocardial sympathetic innervation imaging, planar qualitative and quantitative assessment;		eviCore	CARD
0332T	Myocardial sympathetic innervation imaging, planar qualitative and quantitative assessment; with tomographic SPECT		eviCore	CARD
0399T	Myocardial strain imaging (quantitative assessment of myocardial mechanics using image-based analysis of local myocardial dynamics) (List separately in addition to code for primary procedure)		eviCore	CARD
0439T	Myocardial contrast perfusion echocardiography, at rest or with stress, for assessment of myocardial ischemia or viability (List separately in addition to code for primary procedure)		eviCore	CARD
0482T	Absolute quantitation of myocardial blood flow, PET, rest and stress		eviCore	CARD
0501T	Noninvasive estimated coronary fractional flow reserve (FFR) derived from coronary computed tomography angiography data		eviCore	CARD
0502T	data preparation and transmission		eviCore	CARD
0503T	analysis of fluid dynamics and simulated maximal coronary hyperemia, and generation of estimated FFR model		eviCore	CARD
0504T	anatomical data review in comparison with estimated FFR model to reconcile discordant data, interpretation and report		eviCore	CARD
C8921	Transthoracic echocardiography w/contrast for congenital cardiac anomalies; complete		eviCore	CARD
C8922	Transthoracic echocardiography w/contrast for congenital cardiac anomalies; f/u or limited study		eviCore	CARD
C8923	Transthoracic echocardiography w/contrast, real-time w/image documentation (2d), w/wo m-mode recording; complete		eviCore	CARD
C8924	Transthoracic echocardiography w/contrast, real-time w/image documentation (2d), w/wo m-mode recording; f/u or limited study		eviCore	CARD
C8925	Transesophageal echocardiography (TEE) with contrast, or without contrast followed by with contrast,		eviCore	CARD
C8926	Transesophageal echocardiography (TEE) with contrast, or without contrast followed by with contrast, for congenital cardiac anomalies; including probe placement, image acquisition, interpretation and report		eviCore	CARD

Code	Description	Items Processed	Items Processed	eviCore List Name
C8928	Transthoracic echocardiography w/contrast, real-time w/image documentation (2d), w/wo m-mode recording, during rest and cardiovascular stress test, w/interpretation and report		eviCore	CARD
C8929	Transthoracic echocardiography with contrast, or without contrast followed by with contrast, real-time with image documentation (2d),		eviCore	CARD
C8930	Transthoracic echocardiography, with contrast, or without contrast followed by with contrast, real-time with image documentation (2d),		eviCore	CARD
81162	Gene Analysis (Breast Cancer 1 & 2) Full Seq & Dup OR	Banner		
81211	Brca1&2 seq & com dup/del	Banner		
81214	Brca1 Full Seq & Com Dup/Del	Banner		
81308	PALB2 breast and pancreatic cancer gene analysis	Banner		
81220	Cftr gene com variants	Banner		
81229	Cytogen m array copy No&snp	Banner		
81282	Long qt syn gene dup/dlt var	Banner		
81292	Mlh1 gene full seq	Banner		
81299	MSH6 gene analysis	Banner		
81293	Mlh1 colon cancer gene analysis	Banner		
81296	MSH2 colon cancer gene analysis	Banner		
81318	PMS2 colo rectal cancer gene analysis	Banner		
81319	PMS2 colo rectal cancer gene analysis	Banner		
81326	PMP22 Charcot-Marie-Tooth gene analysis	Banner		
81215	BRCA 1	Banner		
81217	BRCA 2	Banner		
81303	MECP2 Rett syndrome gene analysis	Banner		
81201	APC polyposis gene analysis	Banner		
81322	PTEN Cowden syndrome, hamartoma tumor gene analysis	Banner		
81202	APC polyposis gene analysis	Banner		
81300	MSH6 non-polyposis colorectal cancer gene analysis	Banner		
81253	GJB2 non-syndromic hearing loss gene analysis	Banner		
81294	MLH1 nonpolyposis type 2 gene analysis	Banner		
81256	HFE hemochromotosis gene analysis	Banner		
81297	MSH2 nonpolyposis type 1 gene analysis	Banner		
81317	PMS2 nonpolyposis gene analysis full sequence	Banner		
81298	MSH6 non-polyposis colorectal cancer gene analysis	Banner		
81410	Genomic sequencing panel - aortic dysfunction	Banner		
81411	Duplication/Deletion Panel - aortic dysfunction	Banner		
81412	Genomic sequencing panel - Ashkenazi associated	Banner		
81413	Genomic sequencing panel - cardiac ion	Banner		
81414	Duplication/Deletion Panel - cardiac ion	Banner		

Code	Description	Items Processed	Items Processed	eviCore List Name
81415	Exome sequence analysis	Banner		
81416	Exome sequence analysis	Banner		
81417	Exome re-evaluation	Banner		
81420	Fetal chromosomal aneuploidy genomic sequence analysis	Banner		
81422	Fetal chromosomal aneuploidy genomic sequence analysis	Banner		
81443	Genetic testing for severe inherited conditions	Banner		
81425	Genome sequence analysis	Banner		
81426	Genome sequence analysis	Banner		
81427	Genome re-evaluation	Banner		
81430	Hearing loss genomic sequence analysis	Banner		
81431	Hearing loss duplication/deletion analysis panel	Banner		
81432	Hereditary breast cancer-related disorders genomic sequence	Banner		
81433	Hereditary breast cancer-related disorders duplication/deletion analysis	Banner		
81434	Hereditary retinal disorders	Banner		
81435	Hereditary colon cancer disorders	Banner		
81436	Hereditary colon cancer disorders	Banner		
81437	Hereditary neuroendocrine tumor disorders	Banner		
81438	Hereditary peripheral neuropathies	Banner		
81439	Hereditary cardiomyopathy	Banner		
81440	Nuclear encoded mitochondrial genes	Banner		
81442	Noonan spectrum disorder	Banner		
81445	Targeted genomic seq analys	Banner		
81450	Targeted genomic seq analys	Banner		
81455	Targeted genomic seq analys	Banner		
81460	Whole mitochondrial genome	Banner		
81465	Whole mitochondrial genome large deletion analysis	Banner		
81470	X-Linked intellectual disability genomic sequence	Banner		
81471	X-Linked intellectual disability duplication/deletion analysis	Banner		
81408	Mopath procedure level 9	Banner		
81479	Unlisted molecular pathology	Banner		
81507	Ftl aneuploidy	Banner		
81508	Ftl cgen abnor two proteins	Banner		
81509	Fetal congenital abnormality	Banner		
81510	Fetal congenital abnormality	Banner		
81511	Fetal congenital abnormality	Banner		
81512	Fetal congenital abnormality	Banner		
81518	Breast oncology gene expression	Banner		
81519	Oncology Breast mrna	Banner		
81520	Onc breast mrna 58 genes	Banner		

Code	Description	Items Processed	Items Processed	eviCore List Name
81521	Onc breast mrna 70 genes	Banner		
81522	Onc breast gene expression	Banner		
81525	Oncology colon mrna	Banner		
81528	Oncology colorectal screen	Banner		
81535	Oncology gynecological live tumor response	Banner		
81536	Oncology gynecological live tumor cell culture	Banner		
81538	Oncology lung	Banner		
81539	Oncology high grade prostate cancer	Banner		
81540	Oncology tum unknown origin	Banner		
81541	Onc prostate mrna 46 genes	Banner		
81542	Oncology prostate	Banner		
81545	Oncology thyroid	Banner		
81551	Oncology prostate	Banner		
81552	Oncology uveal melanoma	Banner		
81595	Cardiology hrt tmspl mrna	Banner		
81596	Infectious Disease chronic hepatitis C	Banner		
81599	Unlisted multianalyce assay	Banner		
S3841	Genetic testing for retinoblastoma	Banner		
S3845	Genetic testing for alpha-thalassemia	Banner		
S3850	Genetic testing for sickle cell anemia	Banner		
S3849	Genetic testing for Niemann-Pick disease	Banner		
S3853	Genetic testing for myotonic muscular dystrophy	Banner		
S3800	Genetic testing for ALS	Banner		
S3846	Genetic testing for hemoglobin E beta-thalassemia	Banner		
S3842	Genetic testing for Von Hippel-Landau disease	Banner		
S3861	Genetic testing for alpha subunit (SCN5A) and variants for suspected Brugada Syndrome	Banner		
S3866	Genetic testing for hypertrophic cardiomyopathy	Banner		
S3870	Genetic testing for developmental delay, autism spectrum disorder	Banner		
S3854	Genetic testing for management of breast cancer treatment	Banner		
S3865	Gene sequence analysis for hypertrophic cardiomyopathy	Banner		
S3844	DNA analysis for profound deafness	Banner		
S3852	Genetic testing for susceptibility to Alzheimer's	Banner		
S3840	DNA analysis for susceptibility to multiple endocrine neoplasia type 2	Banner		
0539T	CAR-T therapy, receipt and prep of cells	Banner		
0540T	CAR-T therapy, cell administration	Banner		
0537T	CAR-T therapy, harvesting T lymphocytes per day	Banner		
0538T	CAR-T therapy, preparation for transportation	Banner		
C9036	Patisiran	Banner		
C9047	Caplacizumab-yhdp	Banner		
C9061	Teprotumumab-trbw	Banner		
C9063	Eptinezumab-jjmr	Banner		

C9071	viltolarsen (10 mg)	Banner		
C9072	immune globulin (Asceniv)	Banner		
C9073	Brexucabtagene autoleucl	Banner		
C9074	Injection, lumasiran	Banner		
C9075	Injection, casimersen (10 mg)	Banner		
C9076	Lisocabtagene car pos t	Banner		
C9077	Inj cabotegravir/rilpivirine	Banner		
C9079	Inj, evinacumab-dgnb (5 mg)	Banner		
C9131	Factor VIII antihemophilic factor pegylated-auci	Banner		
C9132	Prothrombin Complex Concentrate (Kcentra)	Banner		
C9133	Factor IX Antihemophilic Factor, Recombinant (Rixibus)	Banner		
C9399	Mipomersen (Kynamro)	Banner		
J0129	Abatacept	Banner		
J0135	Adalimumab	Banner		
J0178	Aflibercept (Eylea)* Avastin preferred	Banner		
J0179	Brolucizumab-dbl (Beovu)* Avastin preferred	Banner		
J0180	Agalsidase beta injection	Banner		
J0185	Aprepitant (Cinvanti)* Emend, Granisetron, or Ondansetron preferred NAN		eviCore	MED ONC
J0205	Alglucerase	Banner		
J0215	Alefacept	Banner		
J0220	Alglucosidase Alfa (Myozyme)	Banner		
J0221	Alglucosidase Alfa (Lumizyme)	Banner		
J0222	Patisiran	Banner		
J0223	Givosiran (0.5 mg)	Banner		
J0224	Inj. Lumasiran (0.5 mg)	Banner		
J0256	Alpha 1-Proteinase Inhibitor	Banner		
J0257	Alpha 1-Proteinase Inhibitor (Glassia)	Banner		
J0275	Alprostadil Urethral Suppository	Banner		
J0490	Belimumab	Banner		
J0517	Benralizumab	Banner		
J0567	Cerliponase alfa	Banner		
J0570	Buprenorphine implant	Banner		
J0584	Burosumab-twza (1 mg)	Banner		
J0585	Onabotulinumtoxina (Botox)	Banner		
J0586	Botulinum Toxin Type A: Botox	Banner		
J0587	Myobloc (Botulinum Toxin Type B): Myobloc (Botulinum Toxin Type B)	Banner		
J0588	ncobotulinumtoxinb (Xeomin)	Banner		
J0593	Lanadelumab-flyo (1 mg)	Banner		
J0597	C-1 Esterase Inhibitor (Berinert)	Banner		
J0598	C-1 Esterase Inhibitor (Cinryze)	Banner		
J0599	C-1 Esterase inhibitor (human), (Haegarda)	Banner		
J0640	Leucovorin* Preferred		eviCore	MED ONC
J0641	Fusilev* Leucovorin preferred		eviCore	MED ONC

J0642	Levoleucovorin - Khapzory Leucovorin preferred		eviCore	MED ONC
J0693	Injection, cefiderocol (5 mg)	Banner		
J0717	Certolizumab Pegol	Banner		
J0725	Chorionic Gonadotropin	Banner		
J0741	cabotegravir/rilpivrine (Cabenuva)	Banner		
J0775	Collagenase, Clostridium Histolyticum	Banner		
J0791	Crizanlizumab-tmca (5 mg)	Banner		
J0800	Corticotropin	Banner		
J0881	Darbepoetin alfa		eviCore	MED ONC
J0885	Epoetin alfa* Retacrit preferred	Banner		
J0888	Epoetin beta	Banner		
J0894	Decitabine		eviCore	MED ONC
J0896	Luspatercept-aamt	Banner		
J0897	Denosumab		eviCore	MED ONC
J0900	Testosterone Enanthate/Estradiol Valerate	Banner		
J1060	Testosterone Cypionate/Estradiol Cypionate	Banner		
J1070	Testosterone Cypionate, up to 1 mg	Banner		
J1071	Testosterone Cypionate/Estradiol Cypionate	Banner		
J1080	Elosulfase alfa	Banner		
J1095	Dexamethasone 9 percent, intraocular	Banner		
J1096	Dexamethasone, lacrimal ophthalmic insert	Banner		
J1290	Ecallantide	Banner		
J1300	Eculizumab	Banner		
J1301	Edaravone	Banner		
J1303	Ravulizumab-cwvz	Banner		
J1322	Elosulfase alfa	Banner		
J1324	Enfuvirtide	Banner		
J1325	Epoprostenol	Banner		
J1427	Injection, Viltolarsen	Banner		
J1428	Eteplirsen	Banner		
J1429	Golodirsen	Banner		
J1438	Etanercept	Banner		
J1439	Ferric carboxymaltos (Injectafer)	Banner		
J1442	Filgrastim (Neupogen)* Zarxio preferred		eviCore	MED ONC
J1444	Ferric pyrophosphate citrate powder	Banner		
J1447	Tbo-filgrastim (Granix)* Zarxio preferred		eviCore	MED ONC
J1448	Inj, trilaciclib, 1 mg		eviCore	MED ONC
J1454	Fosnetupitant/Palonosetron		eviCore	MED ONC
J1458	Gulsulfase	Banner		
J1459	Immune Globulin (Privigen)	Banner		
J1460	Gamma globulin IM (GamaStan)	Banner		
J1554	Immune Globulin (asceniv)	Banner		
J1555	Immune globulin SQ (Cuvitru)	Banner		

J1556	Immune globulin IV (Bivigam)	Banner		
J1557	Immune globulin IV (Gammaplex)	Banner		
J1558	Immune globulin IV (Xembify)	Banner		
J1559	Immune globulin SQ (Hizentra)	Banner		
J1560	Immune globulin IV (Gammunex, Gammaked)	Banner		
J1561	Immune Globulin (Gamunex/Gamunex-C/Gammaked)	Banner		
J1562	Immune globulin (Vivaglobin)	Banner		
J1566	Immune globulin NOS	Banner		
J1568	Immune globulin (Octagam)	Banner		
J1569	Immune globulin (Gammagard)	Banner		
J1572	Immune globulin (Flebogamma)	Banner		
J1599	Immune Globulin NOS non-lyophilized	Banner		
J1602	Golimumab	Banner		
J1620	Gonadorelin	Banner		
J1627	Sustol* Emend, Granisetron, or Ondansetron preferred NAN		eviCore	MED ONC
J1628	Guselkumab	Banner		
J1640	Hemin	Banner		
J1726	Hydroxyprogesterone Caproate (Makena)	Banner		
J1729	Hydroxyprogesterone Caproate (not otherwise specified)	Banner		
J1740	Ibandronate	Banner		
J1743	Idursulfase	Banner		
J1744	Icatibant	Banner		
J1745	Infliximab (Remicade and Infliximab)* Avsola and Inflectra preferred	Banner		
J1786	Imiglucerase	Banner		
J1823	Injection, inebilizumab-cdon	Banner		
J1930	Lanreotide		eviCore	MED ONC
J1931	Laronidase	Banner		
J1943	Aripiprazole lauroxil, (Aristada initio)	Banner		
J1944	Aripiprazole lauroxil, (Aristada)	Banner		
J1950	Leuprolide Acetate (3.75mg)		eviCore	MED ONC
J1951	Fensolvi 0.25 mg		eviCore	MED ONC
J2062	Loxapine for inhalation (1 mg)	Banner		
J2170	Mecasermin	Banner		
J2182	Mepolizumab	Banner		
J2212	Methylnaltrexone	Banner		
J2323	Natalizumab	Banner		
J2326	Nusineren (Spinraza)	Banner		
J2350	Ocrelizumab (Ocrevus)	Banner		
J2353	Octreotide depot		eviCore	MED ONC
J2357	Omalizumab	Banner		
J2469	Palonosetron (Aloxi)* Emend, Granisetron, or Ondansetron preferred NAN		eviCore	MED ONC
J2502	Pasireotide Long Acting	Banner		
J2503	Macugen* Avastin preferred	Banner		

J2506	Pegfilgrastim (Neulasta)* Preferred		eviCore	MED ONC
J2724	Protein C, Human (Ceprotin)	Banner		
J2778	Ranibizumab (Lucentis)* Avastin preferred	Banner		
J2786	Reslizumab	Banner		
J2796	Romiplostim	Banner		
J2798	Risperidone, (Perseris)	Banner		
J2820	Sargramostim		eviCore	MED ONC
J2840	Sebelipase alfa	Banner		
J2860	Siltuximab		eviCore	MED ONC
J2940	Somatrem	Banner		
J2941	Somatropin	Banner		
J3031	Fremanezumab-vfrm	Banner		
J3060	Taliglucerase-alfa	Banner		
J3110	Teriparatide	Banner		
J3111	Romozozumab	Banner		
J3121	Testosterone Enanthate	Banner		
J3145	Testosterone Undecanoate	Banner		
J3245	Tildrakizumab	Banner		
J3262	Tocilizumab		eviCore	MED ONC
J3285	Treprostinil	Banner		
J3315	Triptorelin Pamoate		eviCore	MED ONC
J3358	Ustekinumab	Banner		
J3380	Vedolizumab	Banner		
J3385	Velaglucerase alfa	Banner		
J3397	Vestronidase alfa-vjvk	Banner		
J3398	Voretigene neparovec-rzyl, 1 billion vector genomes	Banner		
J3399	onasemnogene abeparovec-xioi, per treatment, up to 5x10 ¹⁵ vector genomes	Banner		
J3490	Drugs Unclassified Injection when billed value exceeds \$400	Banner		
J3590	Drugs Unclassified Biologic Injection when billed value exceeds \$400	Banner		
J7168	Prothrombin complex kcentra	Banner		
J7169	Coagulation factor xa (recombinant), inactivated-zhzo (Andexxa)	Banner		
J7170	Emicizumab	Banner		
J7175	Factor X (human)	Banner		
J7179	Von Willebrand factor recombinant (Vonvendi)	Banner		
J7180	Factor XIII Antihemophilic Factor	Banner		
J7181	Factor XIII recombinant a-subunit	Banner		
J7182	Factor VIII recombinant (Novoeight)	Banner		
J7183	Von Willebrand Factor Complex, human (Wilate)	Banner		
J7185	Factor VIII recombinant (Xyntha)	Banner		
J7186	Antihemophilic VIII/Von Willebrand Factor Complex	Banner		
J7187	Von Willebrand Factor Complex (Humate-P)	Banner		
J7188	Factor VIII recombinant porcine (Obizur)	Banner		
J7189	Factor VIIA (Antihemophilic Factor, Recombinant)	Banner		

J7190	Factor VIII (Antihemophilic Factor, Human)	Banner		
J7191	Factor VIII (anti-hemophilic) porcine	Banner		
J7192	Factor VIII (Antihemophilic Factor, Recombinant) NOS	Banner		
J7193	Factor IX (Antihemophilic Factor, Purified, Nonrecombinant)	Banner		
J7194	Factor IX Complex	Banner		
J7195	Factor IX (Antihemophilic Factor, Recombinant) NOS	Banner		
J7198	Antiinhibitor	Banner		
J7199	Factor VIII porcine (Hyate C)	Banner		
J7200	Hemophilia Clotting Factor NOS	Banner		
J7201	Factor IX recombinant (Rixubis)	Banner		
J7202	Factor IX recombinant (Alprolix)	Banner		
J7203	Injection factor ix, (antihemophilic factor, recombinant), glycopegylated, (rebinyn), 1 iu	Banner		
J7204	Factor VIII, antihemophilic factor (recombinant), (esperoct), glycopegylated-exei, per iu	Banner		
J7205	Factor VIII FC Fusion protien recombinant	Banner		
J7207	Factor VIII pegylated	Banner		
J7208	Factor VIII pegylated aucl (Jivi)	Banner		
J7209	Factor VIII (Nuwiq)	Banner		
J7210	Factor VIII (Afstyla)	Banner		
J7211	Factor VIII (Kovaltry)	Banner		
J7212	Factor VIIa recomb (Sevenfact)	Banner		
J7311	Factor IX (Idelvion)	Banner		
J7312	Fluocinolone intravitreal implant (Retisert)	Banner		
J7313	Dexamethasone intravitreal implant (Ozurdex)	Banner		
J7314	Fluocinolone intravitreal implant (Illuvien)	Banner		
J7316	Ocriplasmin	Banner		
J7318	Hyaluronan or derivative (Durolane)* Preferred	Banner		
J7320	Hyaluronan or derivative (Genvisc)* Durolane, Gelsyn-3, Synvisc or Synvisc-One preferred	Banner		
J7321	Hyaluronan or derivative (Hyalgan or Supartz)* Durolane, Gelsyn-3, Synvisc or Synvisc-One preferred	Banner		
J7322	Hyaluronan Or Derivative (Hymovis)* Durolane, Gelsyn-3, Synvisc or Synvisc-One preferred	Banner		
J7323	Hyaluronan Or Derivative (Euflexxa)* Durolane, Gelsyn-3, Synvisc or Synvisc-One preferred	Banner		
J7324	Hyaluronan Or Derivative (Orthovisc)* Durolane, Gelsyn-3, Synvisc or Synvisc-One preferred	Banner		
J7325	Hyaluronan Or Derivative (Synvisc Or Synvisc-One)* Preferred	Banner		
J7326	Hyaluronan Or Derivative (Gel-One)* Durolane, Gelsyn-3, Synvisc or Synvisc-One preferred	Banner		
J7327	Hyaluronan Or Derivative (Monovisc)* Durolane, Gelsyn-3, Synvisc or Synvisc-One preferred	Banner		
J7328	Hyaluronan Or Derivative (Gel-Syn)* Preferred	Banner		
J7329	Hyaluronan or derivative (Trivisc)* Durolane, Gelsyn-3, Synvisc or Synvisc-One preferred	Banner		
J7331	Hyaluronan or derivative (Synjoynt)* Durolane, Gelsyn-3, Synvisc or Synvisc-One preferred	Banner		
J7332	Triluron* Durolane, Gelsyn-3, Synvisc or Synvisc-One preferred	Banner		
J7333	Hyaluronan or derivative (Visco-3)* Durolane, Gelsyn-3, Synvisc or Synvisc-One preferred	Banner		
J7335	Capsaicin 8% Patch	Banner		
J7336	Capsaicin 8% Patch, Per Sq Cm	Banner		
J7352	Afamelanotide implant (1 mg)	Banner		

J7402	Mometasone furoate sinus implant (Sinuva)	Banner		
J7605	Brovana* Perforomist preferred	Banner		
J7606	Perforomist* Preferred	Banner		
J7639	Dornase Alfa, Inhalation	Banner		
J7682	Tobramycin, Inhalation	Banner		
J7699	NOC Drugs, Inhalation Solution Administered Through DME	Banner		
J7799	NOC Drugs, Besides Inhalation Drugs, Administered Through DME	Banner		
J7886	Treprostinil, Inhalation	Banner		
J7999	Compounded Drugs not otherwise specified when billed value exceeds \$400	Banner		
J8655	Netupitant and palonosetron (Akyzeo)* Emend, Granisetron, or Ondansetron preferred NAN	Banner		
J8670	Varubi* Emend, Granisetron, or Ondansetron preferred NAN		eviCore	MED ONC
J9000	Doxorubicin HCL		eviCore	MED ONC
J9015	Aldesleukin		eviCore	MED ONC
J9017	Arsenic Trioxide		eviCore	MED ONC
J9019	Asparaginase		eviCore	MED ONC
J9022	Atezolizumab		eviCore	MED ONC
J9023	Avelumab		eviCore	MED ONC
J9025	Azacitidine		eviCore	MED ONC
J9027	Clofarabine		eviCore	MED ONC
J9030	BCG		eviCore	MED ONC
J9032	Belinostat		eviCore	MED ONC
J9033	Bendamustine		eviCore	MED ONC
J9034	Bendamustine HCL		eviCore	MED ONC
J9035	Avastin* Preferred		eviCore	MED ONC
J9037	Injection, belantamab mafodotin-blmf (0.5 mg)		eviCore	MED ONC
J9039	Blinatumomab		eviCore	MED ONC
J9040	Bleomycin		eviCore	MED ONC
J9041	Bortezomib		eviCore	MED ONC
J9042	Brentuximab Vedotin		eviCore	MED ONC
J9043	Cabazitaxel		eviCore	MED ONC
J9044	Bortezomib		eviCore	MED ONC
J9045	Carboplatin		eviCore	MED ONC
J9047	Carfilzomib		eviCore	MED ONC
J9050	Carmustine		eviCore	MED ONC
J9055	Cetuximab		eviCore	MED ONC
J9057	Copanlisib		eviCore	MED ONC
J9060	Cisplatin		eviCore	MED ONC
J9065	Cladribine		eviCore	MED ONC
J9070	Cyclophosphamide - inj		eviCore	MED ONC
J9098	Cytarabine-Liposome		eviCore	MED ONC
J9100	Cytarabine		eviCore	MED ONC
J9118	Calaspargase pegol-mknl (Asparlas)		eviCore	MED ONC
J9120	Dactinomycin		eviCore	MED ONC

J9130	Dacarbazine		eviCore	MED ONC
J9144	Daratumumab, hyaluronidase		eviCore	MED ONC
J9145	Daratumumab		eviCore	MED ONC
J9150	Daunorubicin		eviCore	MED ONC
J9153	Liposome-encapsulated combination of Daunorubicin and Cytarabine		eviCore	MED ONC
J9155	Degarelix		eviCore	MED ONC
J9171	Docetaxel		eviCore	MED ONC
J9173	Durvalumab		eviCore	MED ONC
J9176	Elotuzumab		eviCore	MED ONC
J9178	Epirubicin		eviCore	MED ONC
J9179	Eribulin mesylate		eviCore	MED ONC
J9181	Etoposide - inj		eviCore	MED ONC
J9185	Fludarabine Phosphate		eviCore	MED ONC
J9190	5-Fluorouracil		eviCore	MED ONC
J9198	Infugem* Gemcitabine preferred		eviCore	MED ONC
J9200	Floxuridine		eviCore	MED ONC
J9201	Gemcitabine* Preferred		eviCore	MED ONC
J9202	Goserelin acetate implant		eviCore	MED ONC
J9203	Gemtuzumab Ozogamicin		eviCore	MED ONC
J9205	Irinotecan Liposome		eviCore	MED ONC
J9206	Irinotecan		eviCore	MED ONC
J9207	Ixabepilone		eviCore	MED ONC
J9208	Ifosfamide		eviCore	MED ONC
J9211	Idarubicin HCL - inj		eviCore	MED ONC
J9216	Interferon, gamma-1b		eviCore	MED ONC
J9217	Leuprolide Acetate (7.5mg)		eviCore	MED ONC
J9218	Leuprolide Acetate (1mg)		eviCore	MED ONC
J9223	Inj. Lurbinectedin (0.1 mg)		eviCore	MED ONC
J9225	Histrelin Implant		eviCore	MED ONC
J9228	Ipilimumab		eviCore	MED ONC
J9229	Inotuzumab Ozogamicin		eviCore	MED ONC
J9230	Mechlorethamine HCL		eviCore	MED ONC
J9245	Melphalan HCL - inj		eviCore	MED ONC
J9247	Inj, melphalan flufen, 1 mg		eviCore	MED ONC
J9261	Nelarabine		eviCore	MED ONC
J9262	Omacetaxine		eviCore	MED ONC
J9263	Oxaliplatin		eviCore	MED ONC
J9264	Paclitaxel (albumin-bound)		eviCore	MED ONC
J9266	Pegaspargase		eviCore	MED ONC
J9267	Paclitaxel		eviCore	MED ONC
J9268	Pentostatin		eviCore	MED ONC
J9271	Pembrolizumab		eviCore	MED ONC
J9280	Mitomycin		eviCore	MED ONC

J9281	Mitomycin instillation		eviCore	MED ONC
J9285	Olaratumab		eviCore	MED ONC
J9293	Mitoxantrone HCL		eviCore	MED ONC
J9295	Necitumumab		eviCore	MED ONC
J9299	Nivolumab		eviCore	MED ONC
J9301	Obinutuzumab		eviCore	MED ONC
J9302	Ofatumumab		eviCore	MED ONC
J9303	Panitumumab		eviCore	MED ONC
J9305	Pemetrexed		eviCore	MED ONC
J9306	Pertuzumab		eviCore	MED ONC
J9307	Pralatrexate		eviCore	MED ONC
J9308	Ramucirumab		eviCore	MED ONC
J9309	Polatuzumab vedotin-piiq		eviCore	MED ONC
J9311	Rituximab and hyaluronidase human (Hycela)* Ruxience and Trexima preferred		eviCore	MED ONC
J9312	Rituximab (Rituxan)* Ruxience and Trexima preferred		eviCore	MED ONC
J9316	Pertuzu, trastuzu (10 mg)		eviCore	MED ONC
J9317	Sacituzumab govitecan-hziy		eviCore	MED ONC
J9318	Romidepsin non-Lyophilized		eviCore	MED ONC
J9319	Romidepsin		eviCore	MED ONC
J9320	Streptozocin		eviCore	MED ONC
J9325	Talimogene laherparepvec		eviCore	MED ONC
J9328	Temozolomide		eviCore	MED ONC
J9330	Temsirolimus		eviCore	MED ONC
J9340	Thiotepa		eviCore	MED ONC
J9348	Injection, naxitamab-gqgk (1 mg)		eviCore	MED ONC
J9349	Injection, tafasitamab-cxix (2 mg)		eviCore	MED ONC
J9351	Topotecan		eviCore	MED ONC
J9352	Trabectedin		eviCore	MED ONC
J9353	Injection, margetuximab-cmkb (5 mg)		eviCore	MED ONC
J9354	Ado-Trastuzumab emtansine		eviCore	MED ONC
J9355	Trastuzumab* Kanjinti and Trazimera preferred		eviCore	MED ONC
J9356	Herceptin Hylecta* Kanjinti and Trazimera preferred		eviCore	MED ONC
J9357	Valrubicin		eviCore	MED ONC
J9360	Vinblastine		eviCore	MED ONC
J9370	Vincristine sulfate		eviCore	MED ONC
J9371	Vincristine sulfate Liposome		eviCore	MED ONC
J9390	Vinorelbine		eviCore	MED ONC
J9395	Fulvestrant		eviCore	MED ONC
J9400	Zivafibercept		eviCore	MED ONC
J9600	Porfimer Sodium		eviCore	MED ONC
J9999	Not otherwise classified chemotherapy drug when billed value exceeds \$400		eviCore	MED ONC
Q0138	Ferumoxytol, non-esrd	Banner		
Q2017	Teniposide		eviCore	MED ONC

Q2041	Axicabtagene ciloleucel (Yescarta)	Banner		
Q2043	Sipuleucel-T		eviCore	MED ONC
Q2049	Doxorubicin HCL liposomal (Lipodox)	Banner		
Q2050	Doxorubicin HCL liposomal NOS		eviCore	MED ONC
Q2053	Brexucabtagene autoleucel	Banner		
Q5101	Filgrastim-sndz (Zarxio)* Preferred		eviCore	MED ONC
Q5103	Infliximab (Inflectra)* Preferred	Banner		
Q5104	Infliximab (Renflexis)* Avsola and Inflectra preferred	Banner		
Q5106	Epoetin alfa-epbx (Retacrit)* Preferred		eviCore	MED ONC
Q5107	Mvasi* Avastin preferred		eviCore	MED ONC
Q5108	Pegfilgrastim-jmdb (Fulphila)* Neulasta and Ziextenzo preferred		eviCore	MED ONC
Q5109	Infliximab-qbtx (Ixifi)	Banner		
Q5110	Filgrastim-aafi (Nivestym)* Zarxio preferred		eviCore	MED ONC
Q5111	Pegfilgrastim-cbqv (Udenyca)* Neulasta and Ziextenzo preferred		eviCore	MED ONC
Q5112	Trastuzumab-dkst (Ontruzant)* Kanjinti and Trazimera preferred		eviCore	MED ONC
Q5113	Trastuzumab-pkrb (Herzuma)* Kanjinti and Trazimera preferred		eviCore	MED ONC
Q5114	Trastuzumab-dkst (Ogivri)* Kanjinti and Trazimera preferred		eviCore	MED ONC
Q5115	Truxima* Preferred		eviCore	MED ONC
Q5118	Zirabev* Avastin preferred		eviCore	MED ONC
Q5119	Ruxience* Preferred		eviCore	MED ONC
Q5120	pegfilgrastim-bmez (Ziextenzo)* Preferred		eviCore	MED ONC
Q5121	infliximab-axxq, biosimilar, (Avsola)* Preferred	Banner		
Q5122	Injection, pegfilgrastim-apgf, biosimilar, (Nyvepria)* Neulasta and Ziextenzo preferred		eviCore	MED ONC
Q5123	Injection, rituximab-arrx, biosimilar, (Riabni)* Ruxience and Trexima preferred		eviCore	MED ONC
E0255	Hospital bed, hi-lo	Banner		
E0256	Hospital bed, variable height	Banner		
E0277	Powered pres-redu air mattrs	Banner		
E0290	Hospital bed, fixed height	Banner		
E0291	Hospital bed, fixed height	Banner		
E0292	Hospital bed, variable height	Banner		
E0293	Hospital bed, variable height	Banner		
E0294	Hospital bed, semi-electric	Banner		
E0295	Hospital bed, semi-electric	Banner		
E0296	Hospital bed, total electric	Banner		
E0297	Hospital bed, total electric	Banner		
E0300	Enclosed ped crib hosp grade	Banner		

Code	Description	Items Processed	Items Processed	eviCore List Name
E0301	Hosp bed hvy duty, extra wide > 350 lb.	Banner		
E0302	Ex hd hosp bed > 600 lbs	Banner		
E0303	Hosp bed, hvy duty, extra wide, > 350 lb	Banner		
E0304	Hosp bed xtra hvy dty x wide	Banner		
E0328	Hosp bed, ped manual	Banner		
E0329	Hosp bed, ped electric	Banner		
E0372	Powered air mattress overlay	Banner		
E0462	Rocking bed	Banner		
E0470	RAD w/o backup non-inv intfc	Banner		
E0471	RAD w/backup non inv intrfc	Banner		
E0472	RAD w backup invasive intrfc	Banner		
E0483	Chest compression gen system	Banner		
E0486	Oral device/appliance cusfab	Banner		
E0500	IPPB machine with nebulization	Banner		
E0601	Cont airway pressure device	Banner		
E0636	PT support & positioning sys	Banner		
E0637	Combination sit to stand frame/table system	Banner		
E0650	Pneuma compressor non-segment	Banner		
E0651	Pneum compressor segmental	Banner		
E0652	Pneum compres w/cal pressure	Banner		
E0656	Segmental pneumatic trunk	Banner		
E0657	Segmental pneumatic chest	Banner		
E0667	Seg pneumatic appl full leg	Banner		
E0668	Seg pneumatic appl full arm	Banner		
E0670	Seg pneum int legs/trunk	Banner		
E0671	Pressure pneum appl full leg	Banner		
E0672	Pressure pneum appl full arm	Banner		
E0673	Segmental gradient pressure, half leg	Banner		
E0675	Pneumatic compression device	Banner		
E0676	Intermittant limb compression device	Banner		
E0691	Uvl pnl 2 sq ft or less	Banner		
E0692	Uvl sys panel 4 ft	Banner		
E0693	Uvl sys panel 6 ft	Banner		
E0694	Uvl md cabinet sys 6 ft	Banner		
E0744	Neuromuscular stim for scoliosis	Banner		
E0747	Elec osteogen stim not spine	Banner		
E0760	Osteogen ultrasound stimitor	Banner		
E0779	Ambulatory infusion pump	Banner		
E0781	Ambulatory infusion pump	Banner		

Code	Description	Items Processed	Items Processed	eviCore List Name
E0782	Non-programble infusion pump	Banner		
E0783	Programmable infusion pump	Banner		
E0784	Ext amb infusn pump insulin	Banner		
E0791	Parenteral infusion pump sta	Banner		
E0935	CPM for knee only	Banner		
E0936	CPM for use other than knee	Banner		
E0984	Add pwr tiller	Banner		
E0986	Man w/c push-rim pow assist	Banner		
E0988	Lever-activated wheel drive	Banner		
E1002	Pwr seat tilt	Banner		
E1003	Pwr seat recline	Banner		
E1004	WC Accessory, power seating, recline only	Banner		
E1005	Pwr seat recline pwr	Banner		
E1006	Pwr seat combo w/o shear	Banner		
E1007	Pwr seat combo w/shear	Banner		
E1008	Pwr seat combo pwr shear	Banner		
E1010	Add pwr leg elevation	Banner		
E1014	Reclining back add ped w/c	Banner		
E1029	W/c vent tray fixed	Banner		
E1030	W/c vent tray gimbaled	Banner		
E1161	Manual adult wc w tiltinspac	Banner		
E1230	Power operated vehicle	Banner		
E1240	Lightweight Wheelchair detachable arms	Banner		
E1260	Lightweight Wheelchair detachable arms	Banner		
E1280	Heavy duty wheelchair, detachable arms	Banner		
E1285	Heavy duty wheelchair	Banner		
E1290	Heavy duty wheelchair, detachable arms	Banner		
E1295	Heavy duty wheelchair fixed arms	Banner		
E1310	Whirlpool Non-portable	Banner		
E1399	Durable medical equipment, miscellaneous	Banner		
E2310	Electro connect btw control	Banner		
E2311	Electro connect btw 2 sys	Banner		
E2312	Mini-prop remote joystick	Banner		
E2313	PWC harness, expand control	Banner		
E2321	Hand interface joystick	Banner		
E2322	Mult mech switches	Banner		
E2325	Sip and puff interface	Banner		
E2327	Head control interface mech	Banner		
E2328	Head/extremity control inter	Banner		

Code	Description	Items Processed	Items Processed	eviCore List Name
E2329	Head control Nonproportional	Banner		
E2330	Head control proximity switc	Banner		
E2351	Electronic SGD interface	Banner		
E2368	Pwr wc drivewheel motor repl	Banner		
E2369	Pwr wc drivewheel gear repl	Banner		
E2370	Pwr wc dr wh motor/gear comb	Banner		
E2373	Hand/chin ctrl spec joystick	Banner		
E2374	Hand/chin ctrl std joystick	Banner		
E2375	Non-expandable controller	Banner		
E2376	Expandable controller, repl	Banner		
E2377	Expandable controller, initl	Banner		
E2397	Pwc acc, lith-based battery	Banner		
E2402	Neg press wound therapy pump	Banner		
E2629	Friction dampening arm supp	Banner		
K0005	Ultralightweight wheelchair	Banner		
K0006	Heavy Duty Wheelchair	Banner		
K0007	Extra Heavy Duty Wheelchair	Banner		
K0008	Custom Manual Wheelchair base	Banner		
K0009	Other Manual Wheelchair base	Banner		
K0010	Stnd wt frame power whlchr	Banner		
K0011	Stnd wt pwr whlchr w control	Banner		
K0012	Ltwt portbl power whlchr	Banner		
K0606	AED garment w elec analysis	Banner		
K0609	Repl electrode for AED	Banner		
K0730	Ctrl dose inh drug deliv sys	Banner		
K0800	POV group 1 std up to 300lbs	Banner		
K0801	POV group 1 hd 301-450 lbs	Banner		
K0802	POV group 1 vhd 451-600 lbs	Banner		
K0806	POV group 2 std up to 300lbs	Banner		
K0807	POV group 2 hd 301-450 lbs	Banner		
K0808	POV group 2 vhd 451-600 lbs	Banner		
K0812	POV, not otherwise specified	Banner		
K0813	PWC gp 1 std port seat/back	Banner		
K0814	PWC gp 1 std port cap chair	Banner		
K0815	PWC gp 1 std seat/back	Banner		
K0816	PWC gp 1 std cap chair	Banner		
K0820	PWC gp 2 std port seat/back	Banner		
K0821	PWC gp 2 std port cap chair	Banner		
K0822	PWC gp 2 std seat/back	Banner		

Code	Description	Items Processed	Items Processed	eviCore List Name
K0823	PWC gp 2 std cap chair	Banner		
K0824	PWC gp 2 hd seat/back	Banner		
K0825	PWC gp 2 hd cap chair	Banner		
K0826	PWC gp 2 vhd seat/back	Banner		
K0827	PWC gp vhd cap chair	Banner		
K0828	PWC gp 2 xtra hd seat/back	Banner		
K0829	PWC gp 2 xtra hd cap chair	Banner		
K0831	PWC, gp 2 std seat elevator cap chair	Banner		
K0835	PWC gp2 std sing pow opt s/b	Banner		
K0836	PWC gp2 std sing pow opt cap	Banner		
K0837	PWC gp 2 hd sing pow opt s/b	Banner		
K0838	PWC gp 2 hd sing pow opt cap	Banner		
K0839	PWC gp2 vhd sing pow opt s/b	Banner		
K0840	PWC gp2 xhd sing pow opt s/b	Banner		
K0841	PWC gp2 std mult pow opt s/b	Banner		
K0842	PWC gp2 std mult pow opt cap	Banner		
K0843	PWC gp2 hd mult pow opt s/b	Banner		
K0848	PWC gp 3 std seat/back	Banner		
K0849	PWC gp 3 std cap chair	Banner		
K0850	PWC gp 3 hd seat/back	Banner		
K0851	PWC gp 3 hd cap chair	Banner		
K0852	PWC gp 3 vhd seat/back	Banner		
K0853	PWC gp 3 vhd cap chair	Banner		
K0854	PWC gp 3 xhd seat/back	Banner		
K0855	PWC gp 3 xhd cap chair	Banner		
K0856	PWC gp3 std sing pow opt s/b	Banner		
K0857	PWC gp3 std sing pow opt cap	Banner		
K0858	PWC gp3 hd sing pow opt s/b	Banner		
K0859	PWC gp3 hd sing pow opt cap	Banner		
K0860	PWC gp3 vhd sing pow opt s/b	Banner		
K0861	PWC gp3 std mult pow opt s/b	Banner		
K0862	PWC gp3 hd mult pow opt s/b	Banner		
K0863	PWC gp3 vhd mult pow opt s/b	Banner		
K0864	PWC gp3 xhd mult pow opt s/b	Banner		
K0868	PWC. Grp 4, std, up to 300 lb.	Banner		
K0869	PWC, Gp 4, Std Cap Chair up to 300 lb.	Banner		
K0870	PWC, gp 4, Hvy Duty, 301-450 lb.	Banner		
K0871	PWC, gp 4, Hvy Duty, 451-600 lb.	Banner		
K0877	PWC, gp 4, single power up to 300 lb.	Banner		

Code	Description	Items Processed	Items Processed	eviCore List Name
K0878	PWC gp 4, single power cap chair up to 300 lb.	Banner		
K0879	PWC, hvy duty, single power, 301-450 lb.	Banner		
K0880	PWC, gp 4 very hvy duty, single power, 451-600 lb.	Banner		
K0884	PWC, gp 4, mult. Power, up to 300 lb.	Banner		
K0885	PWC gp 4, mult power cap chair up to 300 lb.	Banner		
K0886	PWC gp 4, hvy duty mult. Power, cap 301-450 lb.	Banner		
K0890	PWC gp 5, single power ped up to 125 lb.	Banner		
K0891	PWC gp 5 ped, mult. Power up to 125 lb.	Banner		
K0898	PWC not otherwise specified	Banner		
K0899	Power mobility device, not coded or does not meet	Banner		
L0112	Cranial cervical orthosis	Banner		
L0480	TLSO rigid plastic custom fa	Banner		
L0482	TLSO rigid lined custom fab	Banner		
L0484	TLSO rigid plastic cust fab	Banner		
L0486	TLSO rigidlined cust fab two	Banner		
L0700	Ctlso a-p-l control molded	Banner		
L0710	Ctlso a-p-l control w/ inter	Banner		
L0810	Halo cervical into jckt vest	Banner		
L0820	Halo cervical into body jack	Banner		
L0830	Halo cerv into milwaukee typ	Banner		
L1000	Ctlso milwauke initial model	Banner		
L1005	Tension based scoliosis orth	Banner		
L1300	Body jacket mold to patient	Banner		
L1310	Post-operative body jacket	Banner		
L1680	Pelvic & hip control thigh c	Banner		
L1685	Post-op hip abduct custom fa	Banner		
L1690	Combination bilateral HO	Banner		
L1700	Leg perthes orth toronto typ	Banner		
L1710	Legg perthes orth newington	Banner		
L1720	Legg perthes orthosis trilat	Banner		
L1730	Legg perthes orth scottish r	Banner		
L1755	Legg perthes patten bottom t	Banner		
L1844	Ko w/adj jt rot cntrl molded	Banner		
L1846	Ko w adj flex/ext rotat mold	Banner		
L2000	Kafo sing fre stirr thi/calf	Banner		
L2005	KAFO sng/dbl mechanical act	Banner		
L2020	Kafo dbl solid stirrup band/	Banner		
L2030	Kafo dbl solid stirrup w/o j	Banner		
L2034	KAFO pla sin up w/wo k/a cus	Banner		

Code	Description	Items Processed	Items Processed	eviCore List Name
L2036	Kafo plas doub free knee mol	Banner		
L2037	Kafo plas sing free knee mol	Banner		
L2038	Kafo w/o joint multi-axis an	Banner		
L2126	Kafo fem fx cast thermoplas	Banner		
L2128	Kafo fem fx cast molded to p	Banner		
L3904	Whfo electric custom fitted	Banner		
L3961	SEWHO cap design w/o jnts CF	Banner		
L3967	SEWHO airplane w/o jnts CF	Banner		
L3971	SEWHO cap design w/jnt(s) CF	Banner		
L3973	SEWHO airplane w/jnt(s) CF	Banner		
L3975	SEWHFO cap design w/o jnt CF	Banner		
L3976	SEWHFO airplane w/o jnts CF	Banner		
L3977	SEWHFO cap desgn w/jnt(s) CF	Banner		
L3978	SEWHFO airplane w/jnt(s) CF	Banner		
L4000	Repl girdle milwaukee orth	Banner		
L5150	Mold sckt ext knee shin sach	Banner		
L5160	Mold socket bent knee shin s	Banner		
L5200	Kne sing axis fric shin sach	Banner		
L5210	No knee/ankle joints w/ ft b	Banner		
L5220	No knee joint with artic ali	Banner		
L5230	Fem focal defic constant fri	Banner		
L5250	Hip canad sing axi cons fric	Banner		
L5270	Tilt table locking hip sing	Banner		
L5280	Hemipelvect canad sing axis	Banner		
L5301	BK mold socket SACH ft endo	Banner		
L5312	Knee disart, SACH ft, endo	Banner		
L5321	AK open end SACH	Banner		
L5331	Hip disart canadian SACH ft	Banner		
L5341	Hemipelvectomy canadian SACH	Banner		
L5400	Postop dress & 1 cast chg bk	Banner		
L5420	Postop dsg & 1 cast chg ak/d	Banner		
L5500	Init bk ptb plaster direct	Banner		
L5505	Init ak ischal plstr direct	Banner		
L5510	Prep BK ptb plaster molded	Banner		
L5520	Perp BK ptb thermopls direct	Banner		
L5530	Prep BK ptb thermopls molded	Banner		
L5535	Prep BK ptb open end socket	Banner		
L5540	Prep BK ptb laminated socket	Banner		
L5560	Prep AK ischial plast molded	Banner		

Code	Description	Items Processed	Items Processed	eviCore List Name
L5570	Prep AK ischial direct form	Banner		
L5580	Prep AK ischial thermo mold	Banner		
L5585	Prep AK ischial open end	Banner		
L5590	Prep AK ischial laminated	Banner		
L5595	Hip disartic sac thermopls	Banner		
L5600	Hip disartic sac laminat mold	Banner		
L5610	Above knee hydraulic	Banner		
L5611	Ak 4 bar link w/fric swing	Banner		
L5613	Ak 4 bar link w/hydraulic	Banner		
L5614	4-bar link above knee w/swng	Banner		
L5616	Ak univ multiplex sys frict	Banner		
L5617	AK/BK self-aligning unit ea	Banner		
L5639	Below knee wood socket	Banner		
L5643	Hip flex inner socket ext fr	Banner		
L5649	Isch containment/narrow m-l so	Banner		
L5681	Intl custom cong/latyp insert	Banner		
L5683	Initial custom socket insert	Banner		
L5703	Symes ankle w/o (SACH) foot	Banner		
L5707	Custom shape cvr hip disartic	Banner		
L5724	Knee-shin exo fluid swing ph	Banner		
L5726	Knee-shin ext jnts fld swg e	Banner		
L5728	Knee-shin fluid swg & stance	Banner		
L5780	Knee-shin pneum/hydraulic pneum	Banner		
L5781	Lower limb pros vacuum pump	Banner		
L5782	HD low limb pros vacuum pump	Banner		
L5818	Endo knee-shin frct swg & st	Banner		
L5822	Endo knee-shin pneum swg frc	Banner		
L5824	Endo knee-shin fluid swing p	Banner		
L5826	Miniature knee joint	Banner		
L5828	Endo knee-shin fluid swg/sta	Banner		
L5830	Endo knee-shin pneum/swg pha	Banner		
L5840	Multi-axial knee/shin system	Banner		
L5845	Knee-shin sys stance flexion	Banner		
L5856	Elec knee-shin swing/stance	Banner		
L5857	Elec knee-shin swing only	Banner		
L5858	Stance phase only	Banner		
L5930	High activity knee frame	Banner		
L5966	Hip flexible cover system	Banner		
L5968	Multiaxial ankle w dorsiflex	Banner		

Code	Description	Items Processed	Items Processed	eviCore List Name
L5979	Multi-axial ankle/ft prosth	Banner		
L5980	Flex foot system	Banner		
L5981	Flex-walk sys low ext prosth	Banner		
L5987	Shank ft w vert load pylon	Banner		
L5988	Vertical shock reducing pylo	Banner		
L5990	User adjustable heel height	Banner		
L6000	Part hand thumb rem	Banner		
L6010	Part hand little/ring	Banner		
L6050	Wrst MLd sck flx hng tri pad	Banner		
L6055	Wrst mold sock w/exp interfa	Banner		
L6100	Elb mold sock flex hinge pad	Banner		
L6110	Elbow mold sock suspension t	Banner		
L6120	Elbow mold doub splt soc ste	Banner		
L6130	Elbow stump activated lock h	Banner		
L6200	Elbow mold outsid lock hinge	Banner		
L6205	Elbow molded w/ expand inter	Banner		
L6250	Elbow inter loc elbow forarm	Banner		
L6300	Shlder disart int lock elbow	Banner		
L6310	Shoulder passive restor comp	Banner		
L6320	Shoulder passive restor cap	Banner		
L6350	Thoracic intern lock elbow	Banner		
L6360	Thoracic passive restor comp	Banner		
L6370	Thoracic passive restor cap	Banner		
L6380	Postop dsg cast chg wrst/elb	Banner		
L6382	Postop dsg cast chg elb dis/	Banner		
L6384	Postop dsg cast chg shlder/t	Banner		
L6386	Postop ea cast chg & realign	Banner		
L6400	Below elbow prosth tiss shap	Banner		
L6450	Elb disart prosth tiss shap	Banner		
L6500	Above elbow prosth tiss shap	Banner		
L6550	Shldr disar prosth tiss shap	Banner		
L6570	Scap thorac prosth tiss shap	Banner		
L6580	Wrist/elbow bowden cable mol	Banner		
L6582	Wrist/elbow bowden cbl dir f	Banner		
L6584	Elbow fair lead cable molded	Banner		
L6586	Elbow fair lead cable dir fo	Banner		
L6588	Shdr fair lead cable molded	Banner		
L6590	Shdr fair lead cable direct	Banner		
L6621	Flex/ext wrist w/wo friction	Banner		

Code	Description	Items Processed	Items Processed	eviCore List Name
L6624	Flex/ext/rotation wrist unit	Banner		
L6638	Elec lock on manual pw elbow	Banner		
L6646	Multipo locking shoulder jnt	Banner		
L6648	Ext pwrld shlder lock/unlock	Banner		
L6693	Lockingelbow forearm cntrbal	Banner		
L6696	Cus elbo skt in for con/atyp	Banner		
L6697	Cus elbo skt in not con/atyp	Banner		
L6707	Term dev mech hook vol close	Banner		
L6709	Term dev mech hand vol close	Banner		
L6713	Ped term dev, hand, vol open	Banner		
L6714	Ped term dev, hand, vol clos	Banner		
L6721	Hook/hand, hvy dty, vol open	Banner		
L6722	Hook/hand, hvy dty, vol clos	Banner		
L6881	Term dev auto grasp feature	Banner		
L6882	Microprocessor control uplmb	Banner		
L6883	Replc sockt below e/w disa	Banner		
L6884	Replc sockt above elbow disa	Banner		
L6885	Replc sockt shldr dis/interc	Banner		
L6900	Hand restorat thumb/1 finger	Banner		
L6905	Hand restoration multiple fi	Banner		
L6910	Hand restoration no fingers	Banner		
L6920	Wrist disarticul switch ctrl	Banner		
L6925	Wrist disart myoelectronic c	Banner		
L6930	Below elbow switch control	Banner		
L6935	Below elbow myoelectronic ct	Banner		
L6940	Elbow disarticulation switch	Banner		
L6945	Elbow disart myoelectronic c	Banner		
L6950	Above elbow switch control	Banner		
L6955	Above elbow myoelectronic ct	Banner		
L6960	Shldr disartic switch contro	Banner		
L6965	Shldr disartic myoelectronic	Banner		
L6970	Interscapular-thor switch ct	Banner		
L6975	Interscap-thor myoelectronic	Banner		
L7007	Adult electric hand	Banner		
L7009	Adult electric hook	Banner		
L7040	Prehensile actuator	Banner		
L7170	Electronic elbow hosmer swit	Banner		
L7180	Electronic elbow sequential	Banner		
L7181	Electronic elbo simultaneous	Banner		

Code	Description	Items Processed	Items Processed	eviCore List Name
L7185	Electron elbow adolescent sw	Banner		
L7190	Elbow adolescent myoelectron	Banner		
L8035	Custom breast prosthesis	Banner		
L8040	Nasal prosthesis	Banner		
L8041	Midfacial prosthesis	Banner		
L8042	Orbital prosthesis	Banner		
L8043	Upper facial prosthesis	Banner		
L8044	Hemi-facial prosthesis	Banner		
L8045	Auricular prosthesis	Banner		
L8046	Partial facial prosthesis	Banner		
L8047	Nasal septal prosthesis	Banner		
L8609	Artificial cornea	Banner		
L8614	Cochlear device	Banner		
L8627	CID ext speech process repl	Banner		
L8628	CID ext controller repl	Banner		
L8631	MCP joint repl 2 pc or more	Banner		
L8659	Interphalangeal joint repl	Banner		
L8670	Vascular graft, synthetic	Banner		
L8679	Implantable neurostimulator, pulse generator, any type	Banner		
L8686	Implantable neurostimulator, pulse generator, single array, non-rechargeable	Banner		
L8689	External recharg sys intern	Banner		
L8690	Aud osseo dev, int/ext comp	Banner		
L8691	Osseointegrated snd proc rpl	Banner		
L8692	Non-osseointegrated snd proc	Banner		
L8693	Aud osseo dev, abutment	Banner		
L8699	Prosthetic implant NOS	Banner		
V2627	Scleral cover shell	Banner		
V5030	Body-worn hearing aid air	Banner		
V5040	Body-worn hearing aid bone	Banner		
V5050	Hearing aid monaural in ear	Banner		
V5060	Behind ear hearing aid	Banner		
V5080	Glasses bone conduction	Banner		
V5095	Implant mid ear hearing pros	Banner		