HP_ID	Year_Qtr	Service_Category	Procedure_Code	Procedure_Code_Type	Proc_Code_Description	Proc_Code_Change	New_Proc_Code
OHANBH	Q3 2025	At Risk Services	S9123	HCPCS	In-home psychiatric nursing	N	NA
OHANBH	Q3 2025	autism	0359T	CPT	Behavior identification assessment, by the physician or other qualified health care professional, face-to-face with patient and caregiver(s), includes administration of standardized and non-standardized tests, detailed behavioral history, patient observation and caregiver interview, interpretation of test results, discussion of findings and recommendations with the primary guardian(s)/caregiver(s), and preparation of report	N	NA
OHANBH	Q3 2025	autism	0364T	CPT	Adaptive behavior treatment by protocol, administered by technician, face-to-face with one patient; first 30 minutes of technician time	N	NA
OHANBH	Q3 2025	autism	0365T	CPT	Each additional 30 minutes of technician time (List separately in addition to code for primary	N	NA
OHANBH	Q3 2025	autism	0368T	CPT	Adaptive behavior treatment with protocol modification administered by physician or other qualified health care professional with one patient; first 30 minutes of patient face-to-face time	N	NA
OHANBH	Q3 2025	autism	97151	CPT	Behavior identification assessment, administered by a physician or other qualified healthcare professional, each 15 minutes of the physician's or other qualified healthcare professional's time face-to-face with patient and/or guardian(s)/caregiver(s) administering assessments and discussing findings and recommendations, and non-face-to-face analyzing past data, scoring/interpreting the assessment, and preparing the report/treatment plan	N	NA
OHANBH	Q3 2025	autism	97153	CPT	Adaptive behavior treatment by protocol, administered by technician under the direction of a physician or other qualified healthcare professional, face-to-face with one patient, each 15 minutes	N	NA
OHANBH	Q3 2025	autism	97154	CPT	Group adaptive behavior treatment by protocol, administered by technician under the direction of a physician or other qualified healthcare professional, face-to-face with two or more patients, each 15 minutes	N	NA
OHANBH	Q3 2025	autism	0362T	CPT	Exposure Behavioral Follow-up Assessment	N	NA
OHANBH	Q3 2025	autism	0373T	CPT	Exposure adaptive behavior treatment with protocol modification, In-Clinic	N	NA
OHANBH	Q3 2025	autism	97152	CPT	Behavior identification supporting assessment, administered by one technician under the direction of a physician or other qualified healthcare professional, face-to-face with the patient, each 15 minutes	N	NA
OHANBH	Q3 2025	autism	97155	CPT	Adaptive behavior treatment with protocol modification administered by physician or other qualified health care professional, which may include simultaneous direction of technician, face-to-face with one patient, each 15 minutes	N	NA
OHANBH	Q3 2025	autism	97156	CPT	Family adaptive behavior treatment guidance, administered by physician or other qualified health care professional (with or without the patient present), face-to-face with guardian(s)/caregiver(s), each 15 minutes	N	NA
OHANBH	Q3 2025	autism	97157	CPT	Multiple-family group adaptive behavior treatment guidance, administered by a physician or other qualified healthcare professional (without the patient present), face-to-face with multiple sets of guardians/caregivers, every 15 minutes	N	NA
OHANBH	Q3 2025	autism	97158	CPT	Group adaptive behavior treatment with protocol modification, administered by physician or other qualified health care professional face-to-face with multiple patients, each 15 minutes	N	NA
OHANBH	Q3 2025	Diagnostic Testing	96101	CPT	Psychological testing (includes psychodiagnostic assessment of emotionality, intellectual abilities, personality and psychopathology, eg, MMPI, Rorschach, WAIS), per hour of the psychologist’s or physician’s time, both face-to-face time administering tests to the patient and time interpreting these test results and preparing the report	N	NA
OHANBH	Q3 2025	Diagnostic Testing	96112	CPT	Developmental test administration (including assessment of fine and/or gross motor, language, cognitive level, social, memory and/or executive functions by standardized developmental instruments when performed), by physician or other qualified healthcare professional, with interpretation and report; first hour	N	NA
OHANBH	Q3 2025	Diagnostic Testing	96113	CPT	Developmental test administration (including assessment of fine and/or gross motor, language, cognitive level, social, memory and/or executive functions by standardized developmental instruments when performed), by physician or other qualified healthcare professional, with interpretation and report; each additional 30 minutes (List separately in addition to code for primary procedure)	N	NA
OHANBH	Q3 2025	Diagnostic Testing	96116	CPT	Neurobehavioral status exam w clin assess	N	NA
OHANBH	Q3 2025	Diagnostic Testing	96121	CPT	Neurobehavioral status exam (clinical assessment of thinking, reasoning and judgment, [eg, acquired knowledge, attention, language, memory, planning and problem solving, and visual spatial abilities]), by physician or other qualified healthcare professional, both face-to-face time with the patient and time interpreting test results and preparing the report; each additional hour (List separately in addition to code for primary procedure)	N	NA
OHANBH	Q3 2025	Diagnostic Testing	96130	CPT	Psychological testing evaluation services by physician or other qualified healthcare professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; first hour	N	NA
OHANBH	Q3 2025	Diagnostic Testing	96131	CPT	Psychological testing evaluation services by physician or other qualified healthcare professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; each additional hour (List separately in addition to code for primary procedure)	N	NA
OHANBH	Q3 2025	Diagnostic Testing	96132	CPT	Neuropsychological testing evaluation services by physician or other qualified healthcare professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; first hour	N	NA
OHANBH	Q3 2025	Diagnostic Testing	96133	CPT	Neuropsychological testing evaluation services by physician or other qualified healthcare professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; each additional hour (List separately in addition to code for primary procedure)	N	NA
OHANBH	Q3 2025	Diagnostic Testing	96136	CPT	Psychological or neuropsychological test administration and scoring by physician or other qualified healthcare professional, two or more tests, any method; first 30 minutes	N	NA
OHANBH	Q3 2025	Diagnostic Testing	96137	CPT	Psychological or neuropsychological test administration and scoring by physician or other qualified healthcare professional, two or more tests, any method; each additional 30 minutes (List separately in addition to code for primary procedure)	N	NA
OHANBH	Q3 2025	Diagnostic Testing	96138	CPT	Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; first 30 minutes	N	NA
OHANBH	Q3 2025	Diagnostic Testing	96139	CPT	Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; each additional 30 minutes (List separately in addition to code for primary procedure)	N	NA
OHANBH	Q3 2025	Diagnostic Testing	96146	CPT	Psychological or neuropsychological test administration, with single automated, standardized instrument via electronic platform, with automated result only	N	NA
OHANBH	Q3 2025	HCBS	S5108	HCPCS	Home care training to home care client, per 15 minutes	N	NA
OHANBH	Q3 2025	HCBS	S5110	HCPCS	Home care training, family; per 15 minutes	N	NA
OHANBH	Q3 2025	HCBS	S5130	HCPCS	Homemaker service, nos; per 15 minutes	N	NA
OHANBH	Q3 2025	HCBS	S5150	HCPCS	Unskilled respite care, not hospice; per 15 minutes	N	NA
OHANBH	Q3 2025	HCBS	S9122	HCPCS	Home health aide or certified nurse assistant, providing care in the home; per hour	N	NA
OHANBH	Q3 2025	Inpatient Hosp	99232	HCPCS	Subsequent Hospital Care - focused; moderate complexity	N	NA
OHANBH	Q3 2025	Inpatient Hosp	H0008	HCPCS	Alcohol and/or drug services; sub acute detoxification (outpatient)	N	NA
OHANBH	Q3 2025	Inpatient Hosp	H0009	HCPCS	Alcohol and/or drug services; acute detoxification (hospital inpatient)	N	NA
OHANBH	Q3 2025	Inpatient Hosp	H0010	HCPCS	Alcohol and/or drug services; sub-acute detoxification (residential addiction program inpatient)	N	NA
OHANBH	Q3 2025	Inpatient Hosp	H0011	HCPCS	Alcohol and/or drug services; acute detoxification (residential addiction program inpatient)	N	NA
OHANBH	Q3 2025	Inpatient Hosp	H0012	HCPCS	Alcohol and/or drug services; sub-acute detoxification (residential addiction program outpatient)	N	NA
OHANBH	Q3 2025	Inpatient Hosp	H0013	HCPCS	Alcohol and/or drug services; acute detoxification (residential addiction program outpatient)	N	NA
OHANBH	Q3 2025	Inpatient Hosp	H0017	HCPCS	Behavioral health; residential (hospital residential treatment program), without room and board; per diem	N	NA

OHANBH	Q3 2025	Inpatient Hosp	H0018	HCPCS	Behavioral health; short-term residential (non-hospital residential treatment program), without room and board; per diem	N	NA
OHANBH	Q3 2025	Inpatient Hosp	H0019	HCPCS	Behavioral health; long-term residential (non-medical, non-acute care in a residential treatment program where stay is typically longer than 30 days), without room and board; per diem	N	NA
OHANBH	Q3 2025	Inpatient Hosp	T2033	HCPCS	Psychiatric residential treatment facility - per diem	N	NA
OHANBH	Q3 2025	Inpatient Hosp	T2048	HCPCS	Behavioral health; long-term care residential (non-acute care in a residential treatment program community-based per diem)	N	NA
OHANBH	Q3 2025	Outpatient Hosp	90867	CPT	Therapeutic Repetitive Transcranial (TMS)	N	NA
OHANBH	Q3 2025	Outpatient Hosp	90868	CPT	Therapeutic Repetitive Transcranial (TMS)	N	NA
OHANBH	Q3 2025	Outpatient Hosp	90870	CPT	Electroconvulsive Therapy	N	NA
OHANBH	Q3 2025	Outpatient Hosp	G0410	HCPCS	Partial hospitalization	N	NA
OHANBH	Q3 2025	Outpatient Hosp	G0411	HCPCS	BH intensive outpatient substance abuse	N	NA
OHANBH	Q3 2025	Outpatient Hosp	H0011	HCPCS	Alcohol and/or drug services; acute detoxification (residential addiction program inpatient)	N	NA
OHANBH	Q3 2025	Outpatient Hosp	H0014	HCPCS	Alcohol and/or drug services; ambulatory detoxification	N	NA
OHANBH	Q3 2025	Outpatient Hosp	H0015	HCPCS	Alcohol and/or drug services; intensive outpatient treatment (treatment program that operates at least three hours/day and at least three days/week and is based on an individualized treatment plan) including assessment, counseling, crisis intervention, and activity therapies or education	N	NA
OHANBH	Q3 2025	Outpatient Hosp	H0035	HCPCS	Mental health partial hospitalization, treatment, less than 24 hours	N	NA
OHANBH	Q3 2025	Outpatient Hosp	H2012	HCPCS	Behavioral health day treatment; per hour	N	NA
OHANBH	Q3 2025	Outpatient Hosp	S9480	HCPCS	Intensive outpatient psychiatric services; per diem; in IL use 913 in combination with this code	N	NA
OHANBH	Q3 2025	Physician Services	90845	CPT	Psychoanalysis	N	NA
OHANBH	Q3 2025	Physician Services	90863	CPT	Pharmacologic management, add on code	N	NA
OHANBH	Q3 2025	Physician Services	96102	CPT	Psychological testing (includes psychodiagnostic assessment of emotionality, intellectual abilities, personality and psychopathology, e.g. MMPI, and WAIS), with qualified health care professional interpretation and report, administered by technician, per hour of technician time, face-to-face.	N	NA
OHANBH	Q3 2025	Physician Services	96119	CPT	Comprehensive assessment procedure designed to evaluate cognitive and behavioral changes in patients who have experienced trauma or illness affecting the nervous system.	N	NA
OHANBH	Q3 2025	Physician Services	96120	CPT	Evaluating cognitive functions associated with the brain’s frontal lobe, particularly in patients with various mental disorders.	N	NA
OHANBH	Q3 2025	Physician Services	96152	CPT	Health & Behavior individual intervention	N	NA
OHANBH	Q3 2025	Physician Services	96154	CPT	Health & Behavior Intervention with patient present	N	NA
OHANBH	Q3 2025	Physician Services	99350	CPT	Home visit, est patient	N	NA
OHANBH	Q3 2025	Physician Services	T1017	HCPCS	Targeted case management, each 15 minutes	N	NA
OHANBH	Q3 2025	Rehab Services	90880	CPT	Hypnotherapy	N	NA
OHANBH	Q3 2025	Rehab Services	90887	CPT	Interpretation or explanation of results of psych exam and procedures - Outpatient Collateral, 15 min.	N	NA
OHANBH	Q3 2025	Rehab Services	G2011	HCPCS	Alcohol and/or substance (other than tobacco) abuse structured assessment (e.g., audit, DAST), and brief intervention, 5-14 minutes	N	NA
OHANBH	Q3 2025	Rehab Services	G2077	HCPCS	Periodic assessment; assessing periodically by qualified personnel to determine the most appropriate combination of services and treatment (provision of the services by a Medicare-enrolled opioid treatment program); list separately in addition to code for primary procedure	N	NA
OHANBH	Q3 2025	Rehab Services	H0006	HCPCS	Alcohol and/or drug services; case management	N	NA
OHANBH	Q3 2025	Rehab Services	H0018	HCPCS	Behavioral health; short-term residential (non-hospital residential treatment program), without room and board; per diem	N	NA
OHANBH	Q3 2025	Rehab Services	H0020	HCPCS	Alcohol and/or drug services; methadone administration and/or service (provisions of the drug by a licensed program)	N	NA
OHANBH	Q3 2025	Rehab Services	H2000	HCPCS	Comprehensive multidisciplinary evaluation	N	NA
OHANBH	Q3 2025	Rehab Services	H2001	HCPCS	Rehab program half day	N	NA
OHANBH	Q3 2025	Rehab Services	H2011	HCPCS	Crisis Intervention Services; per 15 minutes	N	NA
OHANBH	Q3 2025	Rehab Services	H2012	HCPCS	Behavioral health day treatment; per hour	N	NA
OHANBH	Q3 2025	Rehab Services	H2014	HCPCS	Skills training and development; per 15 minutes	N	NA
OHANBH	Q3 2025	Rehab Services	H2015	HCPCS	Comprehensive community support services; per 15 minutes	N	NA
OHANBH	Q3 2025	Rehab Services	H2016	HCPCS	Comprehensive community support services; per diem	N	NA
OHANBH	Q3 2025	Rehab Services	H2017	HCPCS	Psychosocial rehabilitation services; per 15 minutes	N	NA
OHANBH	Q3 2025	Rehab Services	H2019	HCPCS	Therapeutic behavioral services; per 15 minutes	N	NA
OHANBH	Q3 2025	Rehab Services	H2020	HCPCS	Therapeutic behavioral services; per diem In NE Therapeutic group home	N	NA
OHANBH	Q3 2025	Rehab Services	H2021	HCPCS	Community-based wrap-around services; per 15 min	N	NA
OHANBH	Q3 2025	Rehab Services	H2028	HCPCS	Sexual offender treatment service, per 15 minutes	N	NA
OHANBH	Q3 2025	Rehab Services	H2030	HCPCS	Clubhouse services ; per 15 min	N	NA
OHANBH	Q3 2025	Rehab Services	H2031	HCPCS	Clubhouse services; per diem	N	NA
OHANBH	Q3 2025	Rehab Services	H2034	HCPCS	Alcohol and/or drug abuse halfway house services; per diem	N	NA
OHANBH	Q3 2025	Rehab Services	H2035	HCPCS	Alcohol and/or drug treatment program; per hour	N	NA
OHANBH	Q3 2025	Rehab Services	H2036	HCPCS	Alcohol and/or other drug treatment program; per diem	N	NA
OHANBH	Q3 2025	Rehab Services	H2037	HCPCS	Developmental delay prevention activities, dependent child of client, per 15 minutes	N	NA
OHANBH	Q3 2025	Rehab Services	T1006	HCPCS	Alcohol and/or substance abuse services, family/couple counseling	N	NA
OHANBH	Q3 2025	Rehab Services	T1007	HCPCS	Alcohol and/or substance abuse services, treatment plan development and/or modification	N	NA
OHANBH	Q3 2025	Other	90867	CPT	Therapeutic Repetitive Transcranial (TMS)	N	NA
OHANBH	Q3 2025	Other	90868	CPT	Therapeutic Repetitive Transcranial (TMS)	N	NA
OHANBH	Q3 2025	Other	90869	CPT	Therapeutic Repetitive Transcranial (TMS)	N	NA
OHANBH	Q3 2025	Other	90870	CPT	Electroconvulsive Therapy	N	NA
OHANBH	Q3 2025	Other	90880	CPT	Hypnotherapy	N	NA
OHANBH	Q3 2025	Other	H0038	HCPCS	Self-help/peer services; per 15 minutes	N	NA
OHANBH	Q3 2025	Other	H0043	HCPCS	Supported housing; per diem	N	NA
OHANBH	Q3 2025	Other	H0044	HCPCS	Supported housing, per month	N	NA
OHANBH	Q3 2025	Other	S9484	HCPCS	Crisis intervention mental health services; per hour	N	NA
OHANBH	Q3 2025	Other	S9485	HCPCS	Crisis intervention mental health services; per diem	N	NA
OHANBH	Q3 2025	Other	T1001	HCPCS	Nursing Assessment/Evaluation	N	NA
OHANBH	Q3 2025	Other	T1003	HCPCS	LPN/ LVN services, up to 15 minutes	N	NA
OHANBH	Q3 2025	Other	T1016	HCPCS	Case management, each 15 minutes	N	NA
OHANBH	Q3 2025	Other	T2015	HCPCS	Pre-vocational Services - per hour	N	NA
OHANBH	Q3 2025	Other	T2019	HCPCS	Supported Employment	N	NA
OHANBH	Q3 2025	Other	T2023	HCPCS	Targeted Case Management - per month	N	NA
OHANBH	Q3 2025	Other	T2024	HCPCS	Service Assessment Plan of Care Dev	N	NA
OHANBH	Q3 2025	Other	T2036	HCPCS	Therapeutic camping, overnight, waiver; each session	N	NA
OHANBH	Q3 2025	Other	T2037	HCPCS	Therapeutic camping, day, waiver; each session	N	NA

ALOHAC Q3 2025	Diagnostic Testing	0001U	CPT	RBC DNA HEA 35 AG 11 BLD GRP WHL BLD CMN ALLEL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0002U	CPT	ONC CLRCT QUAN 3 UR METABOLITES ALG ADNMTS PLP	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0003U	CPT	ONC OVARIAN ASSAY 5 PROTEINS SERUM ALG SCOR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0005U	CPT	ONCO PRST8 GENE XPRS PRFL 3 GENE UR ALG RSK SCOR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0007U	CPT	RX TEST PRESUMPTIVE URINE W/DEF CONFIRMATION	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0008U	CPT	HPYLORI DETECTION & ANTIBIOTIC RESISTANCE DNA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0009U	CPT	ONC BRST CA ERBB2 COPY NUMBER FISH AMP/NONAMP	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0010U	CPT	NFCT DS STRN TYP WHL GENOME SEQUENCING PR ISOL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0011U	CPT	RX MNTR DRUGS PRESENT LC-MS/MS ORAL FLUID PR DOS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0012M	CPT	ONC URTHL MRNA 5 GENES UR ALG RISK UROTHELIAL CA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0013M	CPT	ONC URTHL MRNA 5 GENES UR ALG RSK RECR URTHL CA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0016U	CPT	ONC HMTLMF NEO RNA BCR/ABL1 BLD/BNE MARROW	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0017M	CPT	ONC DLBCL MRNA FLUOR PRB HYBRDZTN 20 GENES ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0017U	CPT	ONC HMTLMF NEO JAK2 MUTATION DNA BLD/BNE MARROW	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0018M	CPT	TRNSPLJ RNL RJCTN MEAS CD154+T CLL WHL PRPH BLD	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0018U	CPT	ONC THYR 10 MICRORNA SEQ +/- RSLT MOD HI RSK MAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0019M	CPT	CV DS PLSM ALYS PRTN BMRK APTAMR-BSD MICRORA&ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0019U	CPT	ONC RNA WHL TRANSCIPTOME SEQ TISS PREDCT ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0021U	CPT	ONC PRST8 DETCJ 8 AUTOANTIBODIES ALG RSK SCOR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0022U	CPT	TGSAP NONSMALL CELL LUNG NEO DNA&RNA 23 GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0023U	CPT	ONC AML DNA GNTYP INT TANDEM DUP DETCJ/NONDETCJ	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0024U	CPT	GLYCA NUC MR SPECTROSCOPY QUANTITATIVE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0025U	CPT	TENOFOVIR LIQ CHROM TANDEM MASS SPECT UR QUAN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0026U	CPT	ONC THYR DNA&MRNA 112 GENES FNA NDUL ALG ALYS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0027U	CPT	JAK2 GENE ANALYSIS TRGT SEQ ALYS EXONS 12-15	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0029U	CPT	RX METAB ADVRS RX RXN & RSPSE TRGT SEQ ALYS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0030U	CPT	RX METAB WARFARIN RX RESPONSE TRGT SEQ ALYS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0031U	CPT	CYP1A2 GENE ANALYSIS COMMON VARIANTS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0032U	CPT	COMT GENE ANALYSIS C.472G>A VARIANT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0033U	CPT	HTR2A HTR2C GENE ANALYSIS COMMON VARIANTS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0034U	CPT	TPMT NUDT15 GENE ANALYSIS COMMON VARIANTS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0035U	CPT	NEURO CSF DETCJ PRION PRTN QUAKG CONF CONV QUAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0036U	CPT	EXOME TUMOR TISSUE & NORMAL SPECIMEN SEQ ALYS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0037U	CPT	TRGT GEN SEQ ALYS SLD ORGN NEO DNA 324 GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0040U	CPT	BCR/ABL1 GENE TLCJ ALYS MAJOR BP QUANTITATIVE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0045U	CPT	ONC BRST DUX CARC IS MRNA 12 GENES ALG RSK SCOR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0046U	CPT	FLT3 GENE INT TANDEM DUPL VARIANTS QUANTITATIVE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0047U	CPT	ONC PRST8 MRNA GEN XPRS PRFL 17 GEN ALG RSK SCOR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0048U	CPT	ONC SLD ORG NEO DNA 468 CANCER ASSOCIATED GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0049U	CPT	NPM1 GENE ANALYSIS QUANTITATIVE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0050U	CPT	TRGT GEN SEQ ALYS AML 194 GENE INTERROG SEQ VRNT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0051U	CPT	RX MNTR DRUGS PRESENT LC-MS/MS UR/BLD 31 RX PNL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0052U	CPT	LPOPRTN BLD W/5 MAJ CLASS AUTO PRFL UCENTRFUGTN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0054U	CPT	RX MNTR 14+ CLASS DRUGS & SBSTS CAPILLARY BLOOD	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0055U	CPT	CARD HRT TRNSPL 96 TARGET DNA SEQUENCES PLASMA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0058U	CPT	ONC MERKEL CELL CARC DETCJ ANTB SERUM QUAN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0059U	CPT	ONC MERKEL CELL CARC DETCJ ANTB SERUM REPRTD +/-	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0060U	CPT	TWN ZYG GEN TRGT SEQ ALYS CHRMS2 FTL DNA MAT BLD	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0061U	CPT	TC MEAS 5 BIOMARKERS W/SFDI MULTI-SPECTRAL ALYS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0062U	CPT	AI SLE IGG & IGM ALYS 80 BMRK SRM ALG RSK SCORE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0063U	CPT	NEURO AUTISM 32 AMINES PLSM ALG METAB SIGNATURE	N	NA

ALOHAC Q3 2025	Diagnostic Testing	0064U	CPT	ANTIBODY TREPONEMA PALLIDUM TOTAL & RPR IA QUAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0065U	CPT	SYPHILIS TST NON-TREPONEMAL ANTIBODY IA QUAL RPR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0067U	CPT	ONC BRST IMHCHEM PRTN XPRS PRFL 4 BMRK CA PRTN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0068U	CPT	CANDIDA SPECIES PANEL AMP PRB TQ W/QUAL REPORT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0069U	CPT	ONC CLRCT MICRORNA XPRS PRFL MIR-31-3P ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0070U	CPT	CYP2D6 GENE ANALYSIS COMMON & SELECT RARE VRNTS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0071U	CPT	CYP2D6 GENE ANALYSIS FULL GENE SEQUENCE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0072U	CPT	CYP2D6 GENE TRGT SEQ ALYS CYP2D6-2D7 HYBRID GENE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0073U	CPT	CYP2D6 GENE TRGT SEQ ALYS CYP2D7-2D6 HYBRID GENE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0074U	CPT	CYP2D6 TRGT SEQ ALYS NONDUP GENE DUPL/MLT TRANS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0075U	CPT	CYP2D6 GENE TRGT SEQ ALYS 5' GENE DUPL/MLT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0076U	CPT	CYP2D6 GENE TRGT SEQ ALYS 3' GENE DUPL/MLT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0077U	CPT	IG PARAPROTEIN QUAL IMPRCIP&MS BLD/UR W/ISOTYPE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0079U	CPT	CMPRTV DNA ALYS MLT SNPS UR&BUCCAL SPEC ID VERIF	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0080U	CPT	ONC LUNG 5 CLINICAL RISK FACTORS ALG PRBLTY MAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0082U	CPT	RX TST DEF 90+ RX/SBSTS UR REPRT PRES/ABS EA RX	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0083U	CPT	ONC RSPSE CHEMOTX RX MOTILITY CNTRST TOMOGRAPHY	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0084U	CPT	RBC DNA GNOTYP 10 BLD GRP PHNT PREDICT 37 RBC AG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0086U	CPT	NFCT DS BACT&FNG ORG ID BLD CUL RRNA FISH 6+TRGT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0087U	CPT	CARD HRT TRNSPL MRNA GEN XPRS PRFL 1283 GENE ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0088U	CPT	TRNSPLJ MED KDN ALGRFT REJ 1494 GENES ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0089U	CPT	ONC MLNMA GEN XPRS PRFL RTQPCR PRAME & LINC00518	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0090U	CPT	ONC CUTAN MLNMA MRNA GEN XPRS PRFL 23 GENES ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0091U	CPT	ONC CLRCT SCR CLL ENUM CRCG TUM CLL WHL BLD ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0092U	CPT	ONC LUNG 3 PRTN BMRK IA PLSM ALG RSK SCOR MALIG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0093U	CPT	RX MNTR 65 COM DRUGS LC-MS/MS UR DETC/NOT DETC	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0094U	CPT	GENOME RAPID SEQUENCE ANALYSIS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0095U	CPT	EE 2 PRTN BMRK MAJ BASIC PRTN ELISA EST DEV ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0096U	CPT	HPV HIGH RISK TYPES MALE URINE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0101U	CPT	HERED COLON CA DO GEN SEQ ALYS PANEL 15 GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0102U	CPT	HERED BRST CA RLTD DO GEN SEQ ALYS PNL 17 GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0103U	CPT	HERED OVARIAN CANCER GEN SEQ ALYS PANEL 24 GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0105U	CPT	NEPHROLOGY CKD ECLIA TUMOR NECROSIS ALG RKFD	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0106U	CPT	GASTRIC EMPTYING SERIAL COLLJ 7 TIMED BRTH SPEC	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0107U	CPT	C DIFF TOXIN ANTIGEN DETCJ IA TECH STOOL QUAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0108U	CPT	GI BARRETTS ESOPH QUAN IMMUNOLABEL 9 PRTN BMRK	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0109U	CPT	ID ASPERGILLUS DNA 4 SPECIES BLD LVG FLU/TISS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0110U	CPT	RX MNTR 1+ORAL ONC RX&SBSTS SRM/PLSM CAP/VEN BLD	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0111U	CPT	ONCOLOGY COLON CANCER TRGT KRAS&NRAS GENE ALYS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0112U	CPT	IADI TRGT SEQ ALYS 16S&18S RRNA GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0113U	CPT	ONCOLOGY PRST8 MEAS PCA3&TMPRSS2-ERG UR&PSA SRM	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0114U	CPT	GI BARRETTS ESOPHAGUS VIM&CCNA1 MTHYLTN ALYS ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0115U	CPT	RESPIR IADNA 18 VIRAL TYPE&SUBTYPE & 2 BACT TRGT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0116U	CPT	RX MNTR NZM IA 35+DRUGS LC-MS/MS ORAL FLUID ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0117U	CPT	PAIN MGMT ALYS 11 ENDOGENOUS ANALYTES URINE ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0118U	CPT	TRANSPLANTATION MED QUAN DON-DRV CLL-FR DNA PLSM	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0119U	CPT	CARDIOLOGY CERAMIDES LIQ CHROM TANDEM MS PLASMA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0120U	CPT	ONC B CLL LYMPHM MRNA GENE XPRSN PRFL 58 GEN ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0121U	CPT	SICKLE CELL DISEASE VCAM-1 WHOLE BLOOD	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0122U	CPT	SICKLE CELL DISEASE P-SELECTIN WHOLE BLOOD	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0123U	CPT	MCHNL FRGLTY RBC SHEAR STRS&SPECTRAL ALYS PRFLG	N	NA

ALOHAC Q3 2025	Diagnostic Testing	0129U	CPT	HEREDITARY BRST CA RLTD DO GEN SEQ&DEL/DUP PNL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0130U	CPT	HEREDITARY COLON CA DO TRGT MRNA SEQ ALYS PANEL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0131U	CPT	HERED BRST CA RLTD DO TRGT MRNA SEQ ALYS 13 GENE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0132U	CPT	HERED OVA CA RLTD DO TRGT MRNA SEQ ALYS 17 GENE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0133U	CPT	HERED PRST8 CA RLTD DO TRGT MRNA SEQ ALYS 11 GEN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0134U	CPT	HEREDITARY PAN CA TRGT MRNA SEQ ALYS 18 GENE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0135U	CPT	HEREDITARY GYN CA TRGT MRNA SEQ ALYS 12 GENE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0136U	CPT	ATM MRNA SEQUENCE ANALYSIS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0137U	CPT	PALB2 MRNA SEQUENCE ANALYSIS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0138U	CPT	BRCA1 BRCA2 MRNA SEQUENCE ANALYSIS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	1937	CPT	ANES PERQ IMG NJX DRG/ASPIR PX SPI/SP CRV/THRC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	1938	CPT	ANES PERQ IMG NJX DRG/ASPIR PX SPI/SP LMBR/SAC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	1939	CPT	ANES PERQ IMG DSTRJ PX NULYT AGT SPI/SP CRV/THRC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	1940	CPT	ANES PERQ IMG DSTRJ PX NULYT AGT SPI/SP LMBR/SAC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	1941	CPT	ANES PERQ IMG NEUROMD/NTRVRT PX SPI/SP CRV/THRC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	1942	CPT	ANES PERQ IMG NEUROMD/NTRVRT PX SPI/SP LMBR/SAC	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0228U	CPT	ONC PRST8 MULTIANAL MOLEC PRFL PHOTOMETRIC DETCJ	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0229U	CPT	BCAT1&IKZF1 PROMOTER METHYLATION ANALYSIS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0230U	CPT	AR FUL SEQ ALYS CHNG DELET DUPL XPNSJ INSJ VRNTS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0231U	CPT	CACNA1A FUL GEN ALY CHNG DELT DUP XPNSJ INSJ VRT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0232U	CPT	CSTB FUL GEN ALY CHNG DELET DUPL XPNSJ INSJ VRNT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0233U	CPT	FXN GENE ALYS CHNG DELET DUPL XPNSJ INSJ VRNTS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0234U	CPT	MECP2 FUL GEN ALYS CHANGES DELET DUPL INSJ VRNTS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0235U	CPT	PTEN FULL GEN ALYS CHANGES DELET DUPL INSJ VRNTS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0236U	CPT	SMN1&SMN2 FUL GEN ALYS CHNG DUPL&DELET&INSJ	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0237U	CPT	CARDIAC ION CHANNELOPATHIES GENOMIC SEQ ALYS PNL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0238U	CPT	ONC LYNCH SYNDROME GENOMIC DNA SEQUENCE ANALYSIS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0239U	CPT	TRGT GEN SEQ ALYS SLD ORGN NEO CLL-FR DNA 311+	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0242U	CPT	TRGT GEN SEQ ALYS PNL SOLID ORGN NEO DNA 55-74	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0243U	CPT	OB PE BIOCHEM ASY PLCNTL GRWTH FACTR MAT SRM ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0244U	CPT	ONC SOLID ORGN DNA COMPRE GENOMIC PRFLG 257 GENE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0245U	CPT	ONC THYR MUT ALYS 10 GEN 37 RNA FSN XPRSN 4 MRNA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0246U	CPT	RBC DNA GNOTYP 16 BLD GRP PHNT PREDICT 51 RBC AG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0247U	CPT	OB PRETERM BIRTH IBP4 SHBG QUAN MEAS MAT SRM PRS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0251U	CPT	HEPCIDIN-25 ELISA SERUM OR PLASMA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0257U	CPT	VLCAD LEUKOCYTE ENZYME ACTIVITY WHOLE BLOOD	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0258U	CPT	AI PSORIASIS MRNA GEN XPRSN PRFL 50-100 GEN ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0260U	CPT	RARE DS ID VRTJ INVRJ INSJ TLCJ OPT GENOME MAPG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0262U	CPT	ONC SOLID TUM GEN XPRSN PRFL RT-PCR 7 GEN PTHWY	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0264U	CPT	RARE DS ID VRTJ INVRJ INSJ TLCJ OPT GENOME MAPG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0265U	CPT	RARE DO WHL GENOME& MITOCHDRL DNA SEQ ALYS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0266U	CPT	UNXPLAIND CONST/OTH HERITABLE DO/SYND GEN XPRSN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0267U	CPT	RARE DO ID VARIATIONS OPT GEN MAP&WHL GEN SEQ	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0268U	CPT	HEM ATYP HEMOLYTIC UREMC SYND GEN SEQ ALY 15 GEN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0269U	CPT	HEM AUTO DOM CGEN THRMBCTPNA GEN SEQ ALYS 22 GEN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0270U	CPT	HEM CGEN COAGJ DO GENOMIC SEQ ALYS 20 GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0271U	CPT	HEM CGEN NEUTROPENIA GEN SEQ ALYS 24 GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0272U	CPT	HEM GEN BLD DO GEN SEQ ALYS 60 GENE&DUP/DEL PLAU	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0273U	CPT	HEM GEN HYPRFIBRNLYSIS DLYD BLD ALYS 9 GEN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0274U	CPT	HEM GEN PLTLT DO GEN SEQ ALY 62 GEN&DUP/DEL PLAU	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0275U	CPT	HEM HEPARIN INDUCD TRMBCTPNA PLTLT ANTB REAC SRM	N	NA

ALOHAC Q3 2025	Diagnostic Testing	0276U	CPT	HEM INH THROMBOCYTOPENIA GEN SEQ ALYS 42 GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0277U	CPT	HEM GEN PLTL FUNC DO GEN SEQ ALY 40&DUP/DEL PLAU	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0278U	CPT	HEM GEN THROMBOSIS GEN SEQ ALYS 14 GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0279U	CPT	HEM VW DS VW FACTOR & COLLAGEN III BINDING ELISA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0280U	CPT	HEM VW DS VW FACTOR & COLLAGEN IV BINDING ELISA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0281U	CPT	HEM VW DS VW PROPEPTIDE ELISA AG LEVEL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0282U	CPT	RBC DNA GNOTYP 12 BLD GRP PREDICT 44 RBC AG PHNT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0283U	CPT	VON WILLEBRAND FACTOR TYPE 2B PLASMA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0284U	CPT	VON WILLEBRAND FACTOR TYPE 2N FACTOR VIII PLASMA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0285U	CPT	ONC DS PROG&RSPSE MNTR RADJ CHEMOTX/OTH CA TX	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0286U	CPT	CEP72 NUDT15&TPMT GENE ANALYSIS COMMON VARIANTS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0287U	CPT	ONC THYR DNA&MRNA NEXT-GEN SEQ ALYS 112 GEN ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0288U	CPT	ONC LUNG MRNA QUAN PCR ALYS 11 GEN&3 REF GEN ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0289U	CPT	NEURO ALZHEIMER MRNA GEN XPRSN PRFL RNA SEQ 24	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0290U	CPT	PAIN MGMT MRNA GEN XPRSN PRFL RNA SEQ 36 GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0291U	CPT	PSYC MOOD DO MRNA GEN XPRSN PRFL RNA SEQ 144 GEN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0292U	CPT	PSYC STRS DO MRNA GEN XPRSN PRFL RNA SEQ 72 GEN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0293U	CPT	PSYC SUICDL IDEA MRNA GEN XPRSN PRFL RNA SEQ 54	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0294U	CPT	LNGVTY&MRTLTY RSK MRNA GEN XPRSN PRFL RNA 18 GEN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0295U	CPT	ONC BRST DUX CARC PRTN XPRSN PRFL IMHCHEM 7 PRTN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0296U	CPT	ONC ORL&/OROP CA GEN XPRSN PRFL RNA 20 MLEC FEAT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0297U	CPT	ONC PAN TUM WHL GEN SEQ PAIRED MAL&NML DNA SPEC	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0298U	CPT	ONC PAN TUM WHL TRNS SEQ PAIRED MAL&NML RNA SPEC	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0299U	CPT	ONC PAN TUM WHL GEN OPT MAPG MAL&NML DNA SPEC	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0300U	CPT	ONC PAN TUM WHL GEN SEQ&OPT GEN MAPG MAL&NML DNA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0301U	CPT	IADNA BARTONELLA HENSELAE & QUINTANA DDPCR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0302U	CPT	IADNA BRTNLA HNSLAE&QUINTN DDPCR FLWG LIQ NRCHMT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0303U	CPT	HEM RBC ADS NDOTHL/SUBNDOTHL ADS MOLEC HYPOXIC	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0304U	CPT	HEM RBC ADS NDOTHL/SUBNDOTHL ADS MOLEC NORMOXIC	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0305U	CPT	HEM RBC FNCLTY&DFRM FUNCJ SHEAR STRS WHL BLOOD	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0311U	CPT	NFCT DS BCT QUAN ANTMCRB SC MIC EA ORG ID	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0312U	CPT	AI DS SLE ALYS 8 IGG AUTOANT&2 CLL BOUND PRDCTS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0314U	CPT	ONC CUTAN MLNMA MRNA GEN XPRSN PRFL 35 GENES ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0315U	CPT	ONC CUTAN SQ CLL CARC MRNA GEN XPRSN PRFL 40 ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0316U	CPT	BORRELIA BURGDORFERI LYME DS OSPA PRTN EVAL UR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0326U	CPT	TRGT GEN SEQ ALYS SLD ORGN NEO CLL-FR DNA 83+	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0327U	CPT	FTL ANEUPLOIDY TRSMY DNA SEQ ALYS MAT PLSM RSK	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0328U	CPT	DRUG ASSAY DEF 120+ RX&METABOLITES UR W/LC-MS/MS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0329U	CPT	ONC NEOPLASIA XOME&TRNS SEQ ALYS DNA&RNA TUMOR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0330U	CPT	IADNA VAG PTHGN PNL 27 ORG AMP PROBE VAG SWAB	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0341U	CPT	FETAL ANEUPLOIDY DNA SEQUENCING COMPARATIVE ALYS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0355U	CPT	APOL1 RISK VARIANTS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0356U	CPT	ONC OROP/ANAL 17 BMRK DDPCR CELL FREE DNA ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0358U	CPT	NEURO MLD COG IMPAIRMNT ALYS B-AMYLOID 1-42&1-40	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0359U	CPT	ONC PRST8 CA ALYS ALL PSA STRUCTURAL ISOFORMS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0360U	CPT	ONCOLOGY LUNG ELISA 7 AUTOANTIBODIES PLASMA ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0361U	CPT	NEUROFILAMENT LIGHT CHAIN DIGITAL IA PLASMA QUAN	N	NA
ALOHAC Q3 2025	Autism Services	0362T	CPT	BEHAVIOR ID SUPPORT ASSMT EA 15 MIN TECH TIME	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0362U	CPT	ONC PAP THYR CA RNA SEQ 82CNT&10HSKP GEN FNA ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0363U	CPT	ONC URTHL MRNA GEN XPRSN PRFLG RT QUAN PCR 5 GEN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0364U	CPT	ONC HL NEO GEN SEQ ALYS ALG QUAN DMT CLNL SEQ	N	NA

ALOHAC Q3 2025	Diagnostic Testing	0365U	CPT	ONC BLDR 10 PRTN BMRK IA UR DX ALG HRBR URTHL CA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0366U	CPT	ONC BLDR ALYS 10 PRTN BMRK ALG PRB RECR BLDR CA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0367U	CPT	ONC BLDR 10PRTN BMRK ALG PRB CA FLWG TRURL RESCJ	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0368U	CPT	ONC CLRCT CA EVAL MUT&MTHYLTN MRK MULT QPCR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0369U	CPT	IADNA GI PTHGN 31ORG& ID 21 ARG MULT AMP PRB TQ	Y	D
ALOHAC Q3 2025	Diagnostic Testing	0369U	CPT	IADNA GI PTHGN 31ORG& ID 21 ARG MULT AMP PRB TQ	Y	D
ALOHAC Q3 2025	Diagnostic Testing	0370U	CPT	IADNA SURG WND PTHGN 34 MICROORG&ID 21 ARG	Y	D
ALOHAC Q3 2025	Diagnostic Testing	0370U	CPT	IADNA SURG WND PTHGN 34 MICROORG&ID 21 ARG	Y	D
ALOHAC Q3 2025	Diagnostic Testing	0371U	CPT	IADNA GU PTHGN SEMIQ ID DNA 16 BCT&1FNGL ORG UR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0372U	CPT	NFCT DS GU PTHGN ARG DETCJ MULT AMP PRB TQ UR	N	NA
ALOHAC Q3 2025	Autism Services	0373T	CPT	ADAPT BHV TX PRTCL MODIFICAJ EA 15 MIN TECH TIME	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0373U	CPT	IADNA RESP TRC NFCTJ 17 8 13&16 MULT AMP PRB TQ	Y	D
ALOHAC Q3 2025	Diagnostic Testing	0373U	CPT	IADNA RESP TRC NFCTJ 17 8 13&16 MULT AMP PRB TQ	Y	D
ALOHAC Q3 2025	Diagnostic Testing	0374U	CPT	IADNA GU PTHGN ID 21 ORG&21 ARG MULT AMP PRB TQ	Y	D
ALOHAC Q3 2025	Diagnostic Testing	0374U	CPT	IADNA GU PTHGN ID 21 ORG&21 ARG MULT AMP PRB TQ	Y	D
ALOHAC Q3 2025	Diagnostic Testing	0375U	CPT	ONC OVARIAN BIOCHEM ASSAY 7 PRTNS ALG RSK SCOR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0376U	CPT	ONC PRST8 CA IMG ALYS 128 HLOG FEAT&CLIN FCTR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0377U	CPT	CV DS QUAN ADV SRM/PLSM LPOPRTN PRFL NMR SPECT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0378U	CPT	RFC1 REPEAT XPNSJ VRNT ALY TRAD&REPEAT PRIME PCR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0379U	CPT	TGSAP SLD ORG NEO DNA 523&RNA 55 NEXT GNRJ SEQ	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0381U	CPT	MAPLE SYRUP UR DS MNTR BLD CARD SAMP QUAN MEAS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0382U	CPT	HYPERPHENYLALANINEMIA MNTR BLD CARD SAMP QUAN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0383U	CPT	TYROSINEMIA TYPE 1 MNTR BLD CARD SAMP QUAN MEAS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0384U	CPT	NEPH CKD RSK SCOR PREDICTIVE PRGSN HI STG KDN DS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0385U	CPT	NEPH CKD PLSM ALG RSK SCORE DIABETIC KDN DS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0387U	CPT	ONC MLNMA AMBRA1&LORICRIN IMHCHEM FFPE TISS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0388U	CPT	ONC NONSM CLL LNG CA NXT GNRJ SEQ 37 CA RLTD GEN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0389U	CPT	PED FEBRILE ILNES KAWASAKI DS IFI27&MCEP1 RNA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0390U	CPT	OB PREECLAMPSIA KDR ENDOGLIN&RBP4 IA SRM ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0391U	CPT	ONC SLD TUM DNA&RNA NXT GNJ SEQ FFPE TISS 437	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0392U	CPT	RX METAB GEN-RX IA VRNT ALYS 16 GENES CYP2D6	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0393U	CPT	NEURO PRKNSN CSF DETCJ MSFLD A-SYNCLN PRTN QUAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0394U	CPT	PFAS 16 PFAS COMPND LC MS/MS PLSM/SRM QUAN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0395U	CPT	ONC LUNG MULTIOMICS PLASMA ALG MAL RISK LNG NDUL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0398U	CPT	GI BARRETT ESOPH DNA MTHYLTN ALYS ALG DYSP/CA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0399U	CPT	NEURO CEREBRAL FOLATE DEFICIENCY SERUM QUAN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0400U	CPT	OB XPND CAR SCR 145 GEN NXT GNRJ SEQ FRAG ALYS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0401U	CPT	CRD C HRT DS 9 GEN 12 VRNTS TRGT VRNT GNOTYP ALG	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0402T	CPT	COLLAGEN CROSS-LINKING CORNEA&PACHYMETRY	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0402T	CPT	COLLAGEN CROSS-LINKING CORNEA&PACHYMETRY	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0403U	CPT	ONC PRST8 MRNA GEN XPRSN PRFLG 18GENS 1-CATCH UR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0404U	CPT	ONC BRST CA SEMIQ MEAS THYMIDINE KINASE ACTV IA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0405U	CPT	ONC PNCRTC 59 MTHYLTN HAPLOTYPE BLOCK MRK PLSM	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0406U	CPT	ONC LUNG FLOW CYTOMETRY SPUTUM 5 MARKERS ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0407U	CPT	NEPHROLOGY DIABETIC CKD MULT ECLIA PLASMA ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0409U	CPT	ONC SLD TUM DNA 80&RNA 36 GEN NEXT GNRJ SEQ PLSM	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0410U	CPT	ONC PNCRTC DNA WHL GN SEQ 5-HYDROXYMETHYLCYTOSN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0411U	CPT	PSYC GENOMIC ALYS PANEL VARIANT ALYS 15 GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0413U	CPT	ONC HL NEO OPT GEN MAPG CPY NMBR ALTERATIONS DNA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0414U	CPT	ONC LUNG AUGMNT ALG ALYS DGTZ WHOL SLD IMG 8 GEN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0415U	CPT	CV DS ACS IA ALG BLOOD 5 YEAR DEL RISK SCORE ACS	N	NA

ALOHAC Q3 2025	Diagnostic Testing	0417U	CPT	RARE DS WHL MITOCHDRL GEN SEQ ALYS 335 NUC GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0418U	CPT	ONC BRST AUGMNT ALG ALYS DGTZ WHOL SLD IMG 8FEAT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0419U	CPT	NEUROPSYCHIATRY GEN SEQ ALYS PNL VRNT ALY 13 GEN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0429U	CPT	HPV OROPHARYNGEAL SWAB 14 HIGH-RISK TYPES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0435U	CPT	ONC CHEMO CYTOX ASY CSC RX RSPSE MIN 14 RX/CMBN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0443U	CPT	NEUROFILAMENT LIGHT CHAIN ULTRSENS IA SERUM/CSF	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0444U	CPT	ONC SLD ORGN NEO TGSAP 361 GEN INTERROG DNA FFPE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0445U	CPT	ABETA42 & PTAU181 ECLIA CEREBRAL SPINAL FLUID	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0449U	CPT	CAR SCR SEV INH COND GENOMIC SEQ ALYS PNL 5 GEN	N	NA
ALOHAC Q3 2025	Other	0450U	CPT	ONC MM LC-MS/MS MONOCLONAL P-PRTN SEQ ALYS SERUM	N	NA
ALOHAC Q3 2025	Other	0451U	CPT	ONC MM LC-MS/MS PEPTIDE ION QUANTIFICATION SERUM	N	NA
ALOHAC Q3 2025	Other	0459U	CPT	ABETA42 & TTAU ECLIA CEREBRAL SPINAL FLUID RATIO	N	NA
ALOHAC Q3 2025	Other	0465U	CPT	ONC UROTHELIAL CARC DNA QMSP 2 GENES ALG ALYS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0478U	CPT	ONC NSCLC DNA&RNA DPCR ALYS 9 GENES FFPE TISSUE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0479U	CPT	TAU PHOSPHORYLATED PTAU217	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0480U	CPT	NFCT DS CSF METAGENOMIC NGS BIOINFORMATIC ALYS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0481U	CPT	IDH1 IDH2&TERT PROMOTER CNS TUMORS NGS S/D/I	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0485U	CPT	ONC SOL TUM CFDNA&RNA NGS IR GM CHIP TUM-DRV SNV	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0486U	CPT	ONC PAN SOL TUM NGS ALYS TUM MTHYLTN MRK CFCTDNA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0487U	CPT	ONC SOL TUM CFCDNA TGSAP 84GEN INTERROG SEQ VRNT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0488U	CPT	OB FTL AG NIPT CFDNA SEQ ALYS DETCJ FTL PRESENCE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0489U	CPT	OB SGNIPT CFDNA SEQ ALYS 1+ TRGT ID PTHGNC VRNT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0490U	CPT	ONC CUTAN/UVEAL MLNMA CTC SLCTN MC&ENUM CD146	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0491U	CPT	ONC SOLID TUMOR CTC SLCTN CD45&QUAN ER PRTN BMRK	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0492U	CPT	ONC SOL TUM CTC SLCTN CD45&QUAN PD-L1 PRTN BMRK	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0493U	CPT	TRNSPLJ MED QUANTIFICATION DD-CFDNA NGS PLASMA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0494U	CPT	RBC ANTIGEN FTL RHD GENE ALYS NGS CRCG CFDNA BLD	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0495U	CPT	ONC PRST8 ALYS CRCG PLSM PRTNS GERMLINE POLYG RS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0496U	CPT	ONC CLRCT CFDNA 8GENS MUT 7GENS MTHYLTN RT-PCR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0497U	CPT	ONC PRST8 MRNA GEN XPRSN PRFL RT-PCR 6GEN FFPE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0498U	CPT	ONC CLRCT NGS MUT DETCJ 43GEN&MTHYLTN PTRN 45GEN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0499U	CPT	ONC CLRCT&LNG DNA FFPE TISS NGS 8GENES MUT DETCJ	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0500U	CPT	AUTOINFLAM DS VEXAS SYND DNA UBA1 GENE MUT ALYS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0501U	CPT	ONC COLORECTAL BLOOD QUANTITATIVE MEAS CFDNA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0503U	CPT	NEURO ALZ DS BETA AMYL&TAU PRTN BLD LC-MS/MS ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0506U	CPT	GI BARRETTS ESOPHGL CELL DNA MTHYLTN ALYS NGS 89	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0507U	CPT	ONC OVARIAN DNA WHOLE GENOME SEQ W/5HMC NRCHMT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0508U	CPT	TRNSPLJ MED QUAN DD-CFDNA 40 SNPS PLASMA&URINE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0509U	CPT	TRNSPLJ MED QUAN DD-CFDNA<12 SNPS PREV ID PLASMA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0510U	CPT	ONC PNCRTC CA AUGMNT ALG ALYS 16GEN PREV SEQ RNA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0511U	CPT	ONC SOL TUM CELL CUL 3D MICROENVIR 36+ RX PANEL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0512U	CPT	ONC PRST8 AUGMNT ALG ALYS DGTZ WHL-SLIDE IMG MSI	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0513U	CPT	ONC PRST8 AUGMNT ALG ALYS IMG HLOG FEAT MSI&HRD	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0516U	CPT	RX METAB WHL BLD RXGENOMIC GNOTYP 40GENES&CYP2D6	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0517U	CPT	THER RX MNTR 80+ PSYCACTIV RX/SBST LC-MS/MS PLSM	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0518U	CPT	THER RX MNTR 90+ PAIN&MTL HLTH RX/SBSTS LC-MS/MS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0519U	CPT	THER RX MNTR MEDS PN/DEPRSN/ANXIETY 110+ RX/SBST	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0520U	CPT	THER RX MNTR 200+ RX/SBSTS LC-MS/MS PLASMA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0521U	CPT	RHEUMATOID FACTOR IGA&IGM CCP ANTB SR-A IA BLOOD	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0522U	CPT	CA VI PSP&SP1 IGG IGM&IGA ANTB CL SEMIQL BLOOD	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0523U	CPT	ONC SOLID TUMOR DNA QUAL NGS SNV 22GEN FFPE TISS	N	NA

ALOHAC Q3 2025	Diagnostic Testing	0524U	CPT	OB PREECLAMPSIA SFLT-1/PLGF RATIO IA SERUM/PLSM	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0525U	CPT	ONC SPHEROID CELL CUL 11-RX PANEL OVR/FLP/PERTL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0526U	CPT	NEFRO RENAL TRNSPL QUAN CXCL10 CHEMOKINES FCM UR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0529U	CPT	HEM VTE GW SNP F2&F5 GENE ALYS & LEIDEN VRNT SLV	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0530U	CPT	ONC PAN-SOL TUM CTDNA PLSM NGS 77 GEN 8 FUJN MSI	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0532U	CPT	RARE DS RAPID WHL GEN&MITOCHDRL DNA SEQ SNV SLV	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0533U	CPT	RX METAB ADVRS RX RXN&RSPSE GNOTYP 16 GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0534U	CPT	ONC PRST8 MIRNA SNP ALYS RT-PCR 32VRNT BUCC SWAB	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0535U	CPT	PFAS LC-MS/MS PLASMA/SERUM QUANTITATIVE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0536U	CPT	RBC AG FETAL RHD PCR ALYS EXON 4 RHD GENE&GAPDH	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0537U	CPT	ONC CLRCT CA ALYS CFDNA EPIG PTRN NGS >2500 DMR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0538U	CPT	ONC SOLID TUM NGTS ALYS FFPE DNA ALYS 600 GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0539U	CPT	ONC SOLID TUMOR CFCTDNA 152 GEN NGS INTERROG SNV	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0540U	CPT	TRNSPLJ MEDICINE QUAN DD-CFDNA NGS ALYS PLASMA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0541U	CPT	CV DS HDL RCT CEC LC-MS/MS 5HDL-BD APO SERUM ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0542U	CPT	NEFRO RENAL TRNSPL URINE NMR 84 UR METABOLITES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0543U	CPT	ONC SOL TUM NGS DNA FFPE TISS 517GEN INTEROG SNV	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0544U	CPT	NEFRO TRANSPLANT MNTR 48 VRNTS DPCR CFDNA PLASMA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0545U	CPT	ACHR ANTIBODY ID IMMUNOFLUORESCENCE LIVE CELLS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0546U	CPT	LOW DNS LRP4 ANTB ID IMMUNOFLUORESCENCE LIVE CLL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0547U	CPT	NEURFLMNT LIGHT CHAIN CLEIA PLASMA QUANTITATIVE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0548U	CPT	GLIAL FIBRILLARY ACIDIC PROTEIN CLEIA PLASMA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0549U	CPT	ONC URTHL DNA QUAN MTHYLTD RT PCR TRNA-CYS SIM2	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0550U	CPT	ONCOLOGY PROSTATE ELISA TOTAL&FREE PSA SERUM	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0551U	CPT	TAU PHOSPHORYL PTAU217 ULTRSENS DGTL PRTN DETCJ	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0552U	CPT	REPRDTVE MED PGA ALYS GDO TE BX LNKGE ALYS LOCUS	Y	A
ALOHAC Q3 2025	Changes	0552U	CPT	REPRDTVE MED PGA ALYS GDO TE BX LNKGE ALYS LOCUS	Y	A
ALOHAC Q3 2025	Diagnostic Testing	0553U	CPT	REPRDTVE MED PGA 24CHRMSM EMBRY TE STRUX REARGMT	Y	A
ALOHAC Q3 2025	Changes	0553U	CPT	REPRDTVE MED PGA 24CHRMSM EMBRY TE STRUX REARGMT	Y	A
ALOHAC Q3 2025	Changes	0554U	CPT	REPRDTVE MED PGA 24CHRMSM DNA TE BX QUALITY CTRL	Y	A
ALOHAC Q3 2025	Diagnostic Testing	0554U	CPT	REPRDTVE MED PGA 24CHRMSM DNA TE BX QUALITY CTRL	Y	A
ALOHAC Q3 2025	Changes	0555U	CPT	REPRDTVE MED PGA 24CHRMSMS EMBRY TE QUALITY CTRL	Y	A
ALOHAC Q3 2025	Diagnostic Testing	0555U	CPT	REPRDTVE MED PGA 24CHRMSMS EMBRY TE QUALITY CTRL	Y	A
ALOHAC Q3 2025	Diagnostic Testing	0558U	CPT	ONC COLORECTAL QUANTITATIVE ELISA BF7 AG SERUM	Y	A
ALOHAC Q3 2025	Changes	0558U	CPT	ONC COLORECTAL QUANTITATIVE ELISA BF7 AG SERUM	Y	A
ALOHAC Q3 2025	Diagnostic Testing	0559U	CPT	ONC BREAST QUANTITATIVE ELISA BF9 ANTIGEN SERUM	Y	A
ALOHAC Q3 2025	Changes	0559U	CPT	ONC BREAST QUANTITATIVE ELISA BF9 ANTIGEN SERUM	Y	A
ALOHAC Q3 2025	Diagnostic Testing	0560U	CPT	ONC MRD GEN SEQ ALYS CFDNA TUMOR TISS BL ASSMT	Y	A
ALOHAC Q3 2025	Changes	0560U	CPT	ONC MRD GEN SEQ ALYS CFDNA TUMOR TISS BL ASSMT	Y	A
ALOHAC Q3 2025	Changes	0561U	CPT	ONC MRD GEN SEQ ALYS CFDNA WHL BLD SBSQ ASSMT	Y	A
ALOHAC Q3 2025	Diagnostic Testing	0561U	CPT	ONC MRD GEN SEQ ALYS CFDNA WHL BLD SBSQ ASSMT	Y	A
ALOHAC Q3 2025	Diagnostic Testing	0562U	CPT	ONC SOL TUM TGSA 33 GENES DETC SNVS CFDNA PLASMA	Y	A
ALOHAC Q3 2025	Changes	0562U	CPT	ONC SOL TUM TGSA 33 GENES DETC SNVS CFDNA PLASMA	Y	A
ALOHAC Q3 2025	Diagnostic Testing	0565U	CPT	ONC HCC NGS MTHYLTN PTRN ASSAY DETC 6626 EPIGALT	Y	A
ALOHAC Q3 2025	Changes	0565U	CPT	ONC HCC NGS MTHYLTN PTRN ASSAY DETC 6626 EPIGALT	Y	A
ALOHAC Q3 2025	Diagnostic Testing	0566U	CPT	ONC LNG QPCR-BASED ALYS 13DMRS PLEURAL FLUID ALG	Y	A
ALOHAC Q3 2025	Changes	0566U	CPT	ONC LNG QPCR-BASED ALYS 13DMRS PLEURAL FLUID ALG	Y	A
ALOHAC Q3 2025	Diagnostic Testing	0567U	CPT	RARE DS WHL GENOME SEQ ALYS SRS&LRS SNVS INDELS	Y	A
ALOHAC Q3 2025	Changes	0567U	CPT	RARE DS WHL GENOME SEQ ALYS SRS&LRS SNVS INDELS	Y	A
ALOHAC Q3 2025	Diagnostic Testing	0568U	CPT	NEUROL DEMENTIA BAMYL PTAU NFL&GFAP ULTR-HI SMAD	Y	A
ALOHAC Q3 2025	Changes	0568U	CPT	NEUROL DEMENTIA BAMYL PTAU NFL&GFAP ULTR-HI SMAD	Y	A

ALOHAC Q3 2025	Changes	0569U	CPT	ONC SOLID TUMOR NGS ALYS TMM >20000 DMRS CFCTDNA	Y	A
ALOHAC Q3 2025	Diagnostic Testing	0569U	CPT	ONC SOLID TUMOR NGS ALYS TMM >20000 DMRS CFCTDNA	Y	A
ALOHAC Q3 2025	Diagnostic Testing	0570U	CPT	NEUROLOGY TBI ALYS GFAP&UCH-L1 IA WHL BLOOD/PLSM	Y	A
ALOHAC Q3 2025	Changes	0570U	CPT	NEUROLOGY TBI ALYS GFAP&UCH-L1 IA WHL BLOOD/PLSM	Y	A
ALOHAC Q3 2025	Changes	0571U	CPT	ONC SOL TUM DNA80&RNA10 GENS NGS PLSM SNV INDELS	Y	A
ALOHAC Q3 2025	Diagnostic Testing	0571U	CPT	ONC SOL TUM DNA80&RNA10 GENS NGS PLSM SNV INDELS	Y	A
ALOHAC Q3 2025	Changes	0572U	CPT	ONC PRST8 HT TELOMERE LNGTH QFISH WHL BLD DX ALG	Y	A
ALOHAC Q3 2025	Diagnostic Testing	0572U	CPT	ONC PRST8 HT TELOMERE LNGTH QFISH WHL BLD DX ALG	Y	A
ALOHAC Q3 2025	Diagnostic Testing	0573U	CPT	ONC PANCREAS 3BMRK GLUC CEA&GASTRICSIN PCLF ALG	Y	A
ALOHAC Q3 2025	Changes	0573U	CPT	ONC PANCREAS 3BMRK GLUC CEA&GASTRICSIN PCLF ALG	Y	A
ALOHAC Q3 2025	Outpatient Hosp	0620T	CPT	ENDOVASCULAR VENOUS ARTERIALIZATION TIBL/PRNL VN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0633T	CPT	CT BREAST W/3D RENDERING UNI WITHOUT CONTRAST	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0634T	CPT	CT BREAST W/3D RENDERING UNI WITH CONTRAST	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0635T	CPT	CT BRST W/3D RENDERING UNI WO CNTRST FLWD CNTRST	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0636T	CPT	CT BREAST W/3D RENDERING BI WITHOUT CONTRAST	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0637T	CPT	CT BREAST W/3D RENDERING BI WITH CONTRAST	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0638T	CPT	CT BRST W/3D RENDERING BI WO CNTRST FLWD CNTRST	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0639T	CPT	WIRELESS SKIN SNR THERMAL ANISOTROPY MEAS&ASSMT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0671T	CPT	INSJ ANT SGM DRG DEV TRAB MW W/O RES&CTRC RMVL1+	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0672T	CPT	NDOVAG CRYG COOLD RF REMDL TISS FML BLDR NCK&URT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0673T	CPT	ABLATION B9 THYROID NODULE PERQ LASER W/IMG GDN	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0674T	CPT	LAPS INSJ NEW/RPLCMT PERM ISDSS AGMNTJ CAR FUNCJ	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0675T	CPT	LAPS INSJ NEW/RPLCMT LEAD PERM ISDSS 1ST LEAD	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0676T	CPT	LAPS INSJ NEW/RPLCMT LEAD PERM ISDSS EA ADL LEAD	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0677T	CPT	LAPS REPOS LEAD PERM ISDSS 1ST REPOSITIONED LEAD	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0678T	CPT	LAPS REPOS LEAD PERM ISDSS EA ADDL REPOS LEAD	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0679T	CPT	LAPAROSCOPIC REMOVAL LEAD PERM ISDSS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0680T	CPT	INSJ/RPLCMT PULSE GENERATOR ONLY ISDSS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0681T	CPT	RELOCATION PULSE GENERATOR ONLY ISDSS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0682T	CPT	REMOVAL PULSE GENERATOR ONLY ISDSS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0683T	CPT	PROGRAMMING DEVICE EVALUATION IN PERSON ISDSS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0684T	CPT	PERIPROCEDURAL DEVICE EVALUATION IN PERSON ISDSS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0685T	CPT	INTERROGATION DEVICE EVALUATION IN PERSON ISDSS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0686T	CPT	HISTOTRIPSY MAL HEPATOCELLULAR TISS W/IMG GDN	N	NA
ALOHAC Q3 2025	Physician Services	0687T	CPT	TX AMBLYOPIA DEV SUPLY EDUCATIONAL SETUP 1ST SES	N	NA
ALOHAC Q3 2025	Physician Services	0688T	CPT	TX AMBLYOPIA ASSMT PERF PHYS/QHP W/REPORT CAL MO	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0689T	CPT	QUAN US TISS CHARAC I&R W/O DX US SAME ANAT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0690T	CPT	QUANTITATIVE US TISS CHARAC I&R W/DX US SM ANAT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0691T	CPT	AUTO ALYS XST CT VRT FX ASMT B1 DNS DATA PRP I&R	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0692T	CPT	THERAPEUTIC ULTRAFILTRATION	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0693T	CPT	COMPRE FUL BDY CPTR MRKRLS 3D KNMTC&KIN MTN ALYS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0694T	CPT	3D VOLUMETRIC IMG&RCNSTJ BRST/AX LYMPH NODE TISS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0695T	CPT	BDY SURF ACTIVATION MAPG PM/CVDFB LEADS TM IMPLT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0696T	CPT	BDY SURF ACTIVATION MAPG PM/CVDFB LEADS TM F/UP	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0697T	CPT	QUAN MR ALYS TIS COMPJ WO MRI SAME SESS MLT ORGN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0698T	CPT	QUAN MR ALYS TISS COMPOSITION W/MRI MLT ORGANS	N	NA
ALOHAC Q3 2025	Physician Services	0699T	CPT	INJECTION POSTERIOR CHAMBER EYE MEDICATION	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0700T	CPT	MOLECULAR FLUOR IMAGING SUSPICIOUS NEVUS 1ST LES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0701T	CPT	MOLECULAR FLUOR IMAGING SUSPICIOUS NEVUS EA ADDL	N	NA
ALOHAC Q3 2025	Physician Services	0704T	CPT	REM TX AMBLYOPIA DEV SUPPLY 1ST SETUP&PT EDUCAJ	N	NA
ALOHAC Q3 2025	Physician Services	0705T	CPT	REM TX AMBLYOPIA TCH SPRT MIN 18 TRAING HR EA 30	N	NA

ALOHAC Q3 2025	Physician Services	0706T	CPT	REM TX AMBLYOPIA I&R PHYS/QHP PER CALENDAR MONTH	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0707T	CPT	NJX BONE SUB MATRL INTO SUBCHONDRAL BONE DEFECT	N	NA
ALOHAC Q3 2025	Physician Services	0708T	CPT	INTRADERMAL CANCER IMMNTX PREP & 1ST INJECTION	N	NA
ALOHAC Q3 2025	Physician Services	0709T	CPT	INTRADERMAL CANCER IMMNTX EACH ADDL INJECTION	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0710T	CPT	N-INVAS ARTL PLAQ ALYS DATA PRP QUAN REVIEW I&R	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0711T	CPT	N-INVAS ARTL PLAQ ALYS DATA PREP & TRANSMISSION	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0712T	CPT	N-INVAS ARTL PLAQ ALYS QUAN STRUX&COMPOS VSL WAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0713T	CPT	N-INVAS ARTL PLAQ ALYS DATA REVIEW I&R	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0714T	CPT	TPLA B9 PROSTATIC HYPERPLASIA PRST8 VOL <50 ML	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0719T	CPT	PST VERTEBRAL JOINT RPLCMT LUMBAR SPI SINGLE SGM	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0721T	CPT	QUAN CT TISS CHARAC I&R W/O CNCRNT CT EXAM	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0722T	CPT	QUAN CT TISS CHARAC I&R W/CNCRNT CT EXAM	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0723T	CPT	QMRCP W/O DIAGNOSTIC MRI SM ANATOMY DRG SM SESS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0724T	CPT	QMRCP W/DIAGNOSTIC MRI SAME ANATOMY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0725T	CPT	VESTIBULAR DEVICE IMPLANTATION UNILATERAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0726T	CPT	REMOVAL IMPLANTED VESTIBULAR DEVICE UNILATERAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0727T	CPT	RMVL&RPLCMT IMPLANTED VESTIBULAR DEVICE UNI	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0728T	CPT	DX ALYS VESTIBULAR IMPLANT UNILATERAL 1ST PRGRMG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0729T	CPT	DX ALYS VESTIBULAR IMPLANT UNI SBSQ PRGRMG	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0730T	CPT	TRABECULOTOMY BY LASER INCLUDING OCT GUIDANCE	N	NA
ALOHAC Q3 2025	Physician Services	0732T	CPT	IMMUNOTHERAPY ADMN WITH ELECTROPORATION IM	N	NA
ALOHAC Q3 2025	Inpatient Hosp	0735T	CPT	PREPJ TUMOR CAVITY IORT CNCRNT W/PRIM CRANIOTOMY	N	NA
ALOHAC Q3 2025	Physician Services	0736T	CPT	COLONIC LAVAGE 35+L WATER W/INDUCED DEFECATION	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0737T	CPT	XENOGRAFT IMPLANTATION INTO ARTICULAR SURFACE	N	NA
ALOHAC Q3 2025	Physician Services	0739T	CPT	ABLATION MAL PRST8 TISS MAGNETIC FIELD INDUCTION	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0740T	CPT	REM AUTON ALG INSULIN DOSE 1ST SETUP& PT EDUCAJ	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0741T	CPT	REM AUTON ALG NSLN DOS CAL SW DATA COLL TRANSMIS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0742T	CPT	AQMBF SPECT W/EXERCISE/RX STRESS & REST	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0743T	CPT	BONE STRENGTH & FRACTURE RSK CNCRNT VRT FX ASSMT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0744T	CPT	INSERTION BIOPROSTHETIC VALVE OPEN FEMORAL VEIN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0745T	CPT	CAR FCL ABLTJ RADJ ARRHYT N-INVAS LOCLZJ & MAPG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0746T	CPT	CAR FCL ABLTJ RADJ ARRHYT CONV LOCLZJ & MAPG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0747T	CPT	CAR FCL ABLTJ RADJ ARRHYT DLVR RADJ THER	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0748T	CPT	NJX STEM CLL PRDCT PERIANAL PERIFISTULAR SFT TIS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0749T	CPT	B1 STR & FX RISK ASSESSMENT USING DXR-BMD ALYS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0765T	CPT	ASSTV ALG ECG RSK-BASED ASSMT RELATED PREV ECG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0766T	CPT	TC MAG STIMJ FCSD LW FRQ EMGNT PLS PN 1ST NERVE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0767T	CPT	TC MAG STIMJ FCSD LW FRQ EMGNT PLS PN EA ADD NRV	N	NA
ALOHAC Q3 2025	Other	0770T	CPT	VIRTUAL REALITY TECHNOLOGY TO ASSIST THERAPY	N	NA
ALOHAC Q3 2025	Other	0771T	CPT	VR PX DISSOC SVC SAME PHYS/QHP 1ST 15 MIN 5YR/>	N	NA
ALOHAC Q3 2025	Other	0772T	CPT	VR PX DISSOC SVC SAME PHYS/QHP EA ADDL 15 MIN	N	NA
ALOHAC Q3 2025	Other	0773T	CPT	VR PX DISSOC SVC OTH PHYS/QHP 1ST 15 MIN 5YR/>	N	NA
ALOHAC Q3 2025	Other	0774T	CPT	VR PX DISSOC SVC OTHER PHYS/QHP EA ADDL 15 MIN	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0776T	CPT	THERAPEUTIC INDUCTION OF INTRA-BRAIN HYPOTHERMIA	N	NA
ALOHAC Q3 2025	Other	0777T	CPT	R-T PRESSURE SENSING EPIDURAL GUIDANCE SYSTEM	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0778T	CPT	SMMG CNCRNT APPL IMU SNR MEAS ROM POST GAIT MUSC	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0779T	CPT	GI MYOELECTRICAL ACTIVITY STUDY STMCH-COLON I&R	N	NA
ALOHAC Q3 2025	Physician Services	0780T	CPT	INSTLJ FECAL MICROBIOTA SSP RCT NMA LWR GI TRC	N	NA
ALOHAC Q3 2025	Physician Services	0781T	CPT	BRNCHSC RF DSTRJ PULM NRV BI MAINSTEM BRONCHI	N	NA
ALOHAC Q3 2025	Physician Services	0782T	CPT	BRNCHSC RF DSTRJ PULM NRV UNI MAINSTEM BRONCHUS	N	NA
ALOHAC Q3 2025	Physician Services	0783T	CPT	TC AURICULAR NSTIMJ SETUP CALIBRATION &PT EDUCAJ	N	NA

ALOHAC Q3 2025	Physician Services	0784T	CPT	INSJ/RPLCMT PERQ ELTRD RA SPI W/INTEGRATED NSTIM	N	NA
ALOHAC Q3 2025	Physician Services	0785T	CPT	REVJ/RMVL NSTIM ELTRD RA SPI W/INTEGRATED NSTIM	N	NA
ALOHAC Q3 2025	Physician Services	0786T	CPT	INSJ/RPLCMT PERQ ELTRD RA SAC W/INTEGRATED NSTIM	N	NA
ALOHAC Q3 2025	Physician Services	0787T	CPT	REVJ/RMVL NSTIM ELTRD RA SAC W/INTEGRATED NSTIM	N	NA
ALOHAC Q3 2025	Physician Services	0788T	CPT	ELEC ALYS SMPL PRGRMG IINS SP/SAC NRV 1-3 PARAM	N	NA
ALOHAC Q3 2025	Physician Services	0789T	CPT	ELEC ALYS CPLX PRGRMG IINS SP/SAC NRV 4+PARAM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0790T	CPT	REVJ RPLCMT/RMVL TLMBR/LMBR VRT BODY TETHERING	N	NA
ALOHAC Q3 2025	Rehab Services	0791T	CPT	MOTOR COG SEMI-IMMRSV VR FACIL GAIT TRAING EA 15	N	NA
ALOHAC Q3 2025	Physician Services	0793T	CPT	PERQ TCAT THRM ABLTJ NERVES INNERVATING P-ART	N	NA
ALOHAC Q3 2025	Other	0794T	CPT	PT SPEC ALG RANKING PHARMACOONCOLOGIC TX OPTIONS	N	NA
ALOHAC Q3 2025	Physician Services	0795T	CPT	TCAT INSJ PERM DUAL CHAMBER LDLS PM COMPL SYS	N	NA
ALOHAC Q3 2025	Physician Services	0796T	CPT	TCAT INSJ PERM 2CHMBR LDLS PM R ATR PM COMPNT	N	NA
ALOHAC Q3 2025	Physician Services	0797T	CPT	TCAT INSJ PERM 2CHMBR LDLS PM R VENTR PM COMPNT	N	NA
ALOHAC Q3 2025	Physician Services	0798T	CPT	TCAT RMVL PERM DUAL CHAMBER LDLS PM COMPL SYS	N	NA
ALOHAC Q3 2025	Physician Services	0799T	CPT	TCAT RMVL PERM 2CHMBR LDLS PM R ATR PM COMPNT	N	NA
ALOHAC Q3 2025	Physician Services	0800T	CPT	TCAT RMVL PERM 2CHMBR LDLS PM R VENTR PM COMPNT	N	NA
ALOHAC Q3 2025	Physician Services	0801T	CPT	TCAT RMVL&RPLCMT PERM 2CHMBR LDLS PM 2CHMBR SYS	N	NA
ALOHAC Q3 2025	Physician Services	0802T	CPT	TCAT RMVL&RPLCMT PERM 2CHMBR LDLS PM R ATR CMPNT	N	NA
ALOHAC Q3 2025	Physician Services	0803T	CPT	TCAT RMVL&RPLCMT PRM 2CHMBR LDLS PM R VNTR CMPNT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0804T	CPT	PRGRMG DEV EVAL LDLS PM SYS 2CHMBR IN PERSON	N	NA
ALOHAC Q3 2025	Physician Services	0805T	CPT	TCAT SUPR&IVC PROSTC VLV IMPLTJ PERQ FEM VN APPR	N	NA
ALOHAC Q3 2025	Physician Services	0806T	CPT	TCAT SUPR&IVC PROSTC VLV IMPLTJ OPEN FEM VN APPR	N	NA
ALOHAC Q3 2025	Other	0810T	CPT	SUBRETINAL NJX RX AGT W/VTRC & 1+ RETINOTOMIES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0811T	CPT	REM MULTI DAY CPLX UROFLOWMETRY SETUP&PT EDUCAJ	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0812T	CPT	REM MULTI DAY CPLX UROFLOWMETRY DEV SPLY W/REPRT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0813T	CPT	EGD FLX TRNSORL VOL ADJMT NTRGSTR BARIATRIC BALO	N	NA
ALOHAC Q3 2025	Physician Services	0814T	CPT	PERQ NJX CALCIUM BIOD OSTEOCONDUCTIVE MATRL FEM	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0815T	CPT	US REMS B1 DNS&FX RSK ASSMT 1+SITE HIPS PLVS/SPI	N	NA
ALOHAC Q3 2025	Physician Services	0816T	CPT	OPEN INSJ/RPLCMT INTEGRATED NSTIMJ SYS PTN SUBQ	N	NA
ALOHAC Q3 2025	Physician Services	0817T	CPT	OPEN INSJ/RPLCMT INTEGRATED NSTIMJ SYS PTN SUBF	N	NA
ALOHAC Q3 2025	Physician Services	0818T	CPT	REVJ/RMVL INTEGRATED NSTIMJ SYS PTN SUBCUTANEOUS	N	NA
ALOHAC Q3 2025	Physician Services	0819T	CPT	REVJ/RMVL INTEGRATED NSTIMJ SYS PTN SUBFASCIAL	N	NA
ALOHAC Q3 2025	Physician Services	0820T	CPT	CONT IP MNTR&IVNTJ PSYCHEDELIC MED THERAPY 1ST	N	NA
ALOHAC Q3 2025	Physician Services	0821T	CPT	CONT IP MNTR&IVNTJ PSYCHEDELIC MED THERAPY 2ND	N	NA
ALOHAC Q3 2025	Physician Services	0822T	CPT	CONT IP MNTR&IVNTJ PSYCHEDELIC MED THERAPY STAFF	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0823T	CPT	TCAT INSJ PERM 1CHMBR LDLS PACEMAKER R ATRIAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0824T	CPT	TCAT RMVL PERM 1CHMBR LDLS PACEMAKER R ATRIAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0825T	CPT	TCAT RMVL&RPLCMT PERM 1CHMBR LDLS PM R ATRIAL	N	NA
ALOHAC Q3 2025	Physician Services	0826T	CPT	PRGRMG DEV EVAL LDLS PM SINGLE CAR CHAMBER IP	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0857T	CPT	OPTO-ACOUSTIC IMG BREAST UNI AUGMNT ALYS&REPRT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0858T	CPT	XTRNL TRNSCRANL MAG STIMJ MEAS EVOKD CRTCL PTNTL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0859T	CPT	NCNTC NR IFR SPECTRSC OTH/THN PAD EA ANTMC SITE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0860T	CPT	NCNTC NR IFR SPECTRSC SCR PAD W/PROV MANEUVERS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0861T	CPT	REMOVAL PG WCS LV PACING BOTH COMPONENTS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0862T	CPT	RELOCATION PG WCS LV PACG BATTERY COMPONENT ONLY	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0863T	CPT	RELOCATION PG WCS LV PACG TRANSMITTR COMPNT ONLY	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0864T	CPT	LOW INTENSITY ESWT CORPUS CAVERNOSUM LOW ENERGY	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0865T	CPT	QUAN MRI ALYS BRAIN W/O DIAGNOSTIC MRI SAME SESS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0866T	CPT	QUAN MRI ALYS BRAIN WITH DIAGNOSTIC MRI	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0867T	CPT	TPLA B9 PROSTATIC HYPERPLASIA PRST8 VOL>=50 ML	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0868T	CPT	HIGH-RESOLUTION GASTRIC ELECTROPHYSIOLOGY MAPG	N	NA

ALOHAC Q3 2025	Diagnostic Testing	0869T	CPT	NJX B1 SUB MATRL B1&/SFT TISSUE HW FIXJ AGMNTJ	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0870T	CPT	IMPLANTATION SUBQ PERITONEAL ASCITES PUMP SYS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0871T	CPT	REPLACEMENT SUBCUTANEOUS PERITONEAL ASCITES PUMP	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0872T	CPT	RPLCMT INDWELLING BLADDER & PERITONEAL CATHETERS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0873T	CPT	REVJ SUBQ IMPL PERITONEAL ASCITES PUMP SYSTEM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0874T	CPT	REMOVAL PERITONEAL ASCITES PUMP SYSTEM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0875T	CPT	PRGRMG SUBQ IMPL PERITONEAL ASCITES PUMP SYSTEM	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0877T	CPT	AUGMNT ALYS CH CT IMG DATA ILD WO CNCRNT CT EXAM	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0878T	CPT	AUGMNT ALYS CH CT IMG DATA ILD W/CNCRNT CT EXAM	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0879T	CPT	AUGMNT ALYS CH CT IMG DATA ILD DATA PREP&TRNSMS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0880T	CPT	AUGMNT ALYS CH CT IMG DATA ILD PHYS/QHP I&R	N	NA
ALOHAC Q3 2025	Other	0881T	CPT	CRTX ORAL CAVITY TEMP REGULATED FLU COOLING SYS	N	NA
ALOHAC Q3 2025	Physician Services	0882T	CPT	INTRAOP THER ESTIM PERIPHERAL NRV UXTR 1ST NERVE	N	NA
ALOHAC Q3 2025	Physician Services	0883T	CPT	INTRAOP THER ESTIM PERIPHERAL NRV UXTR EA ADDL	N	NA
ALOHAC Q3 2025	Physician Services	0888T	CPT	HISTOTRIPSY MALIGNANT RENAL TISSUE W/IMG GDN	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0901T	CPT	PLACEMENT BONE MARROW SAMPLING PORT W/IMG GDN	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0908T	CPT	OPEN IMPLTJ INT NEUROSTIMULATION SYS VAGUS NERVE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0909T	CPT	REPLACEMENT INT NEUROSTIMULATION SYS VAGUS NERVE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0910T	CPT	REMOVAL INT NEUROSTIMULATION SYS VAGUS NERVE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0911T	CPT	ELEC ALYS INT NSTIMJ SYS VAGUS NRV W/O PRGRMG	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0912T	CPT	ELEC ALYS INT NSTIMJ SYS VAGUS NRV W/SMPL PRGRMG	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0913T	CPT	PERQ TCAT THER RX DLVR NTRAC RX BALO 1 MAJ C ART	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0914T	CPT	PERQ TCAT THER RX DLVR NTRAC RX BALO SEPARATE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0915T	CPT	INSJ PERM CCM-D SYS PG&DUAL TRANSVNS ELTRDS/LDS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0916T	CPT	INSERTION PERM CCM-D SYSTEM PULSE GENERATOR ONLY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0917T	CPT	INSJ PERM CCM-D SYS 1 TRANSVNS LEAD ONLY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0918T	CPT	INSJ PERM CCM-D SYS DUAL TRANSVNS LEADS ONLY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0919T	CPT	REMOVAL PERM CCM-D SYSTEM PULSE GENERATOR ONLY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0920T	CPT	RMVL PERM CCM-D SYS 1 TRANSVNS PACING LEAD ONLY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0921T	CPT	RMVL PERM CCM-D SYS 1 TRANSVNS DFB LEAD ONLY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0922T	CPT	RMVL PERM CCM-D SYS DUAL TRANSVNS LEADS ONLY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0923T	CPT	RMVL&RPLCMT PERMANENT CCM-D PULSE GENERATOR ONLY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0924T	CPT	REPOSITIONING PREV IMPL CCM-D TRANSVNS ELTRD/LD	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0925T	CPT	RELOCATION SKIN POCKET IMPLANTED CCM-D PG	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0926T	CPT	PROGRAMMING DEVICE EVAL IMPL CCM-D SYS IN PERSON	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0927T	CPT	INTERROG DEV EVAL IMPL CCM-D SYSTEM IN PERSON	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0928T	CPT	REMOTE INTERROG DEV EVAL CCM-D SYS <90D PHYS/QHP	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0929T	CPT	REMOTE INTERROG DEV EVAL CCM-D SYS <90D TECH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0930T	CPT	ELECTROPHYSIOLOGIC EVAL CCM-D LEADS AT 1ST IMPL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0931T	CPT	ELECTROPHYSIOLOGIC EVAL CCM-D LEADS SEPARATE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0932T	CPT	N-INVAS DETCJ HEART FAILURE DRV AUGMNT ALYS ECHO	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0933T	CPT	TCAT IMPLT WRLS L ATR PRS SNR L-T L ATR PRS MNTR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0934T	CPT	REMOTE MNTR WIRELESS L ATRIAL PRESSURE SNR<30 D	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0935T	CPT	CYSTO W/RNL PEL SYMPATHETIC DNRVTJ RF ABLTJ BI	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0936T	CPT	PHOTOBIOMODULATION THERAPY RETINA SINGLE SESSION	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0937T	CPT	XTRNL ECG REC>15D<30D REC SCAN ALYS RVW&INTERPJ	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0938T	CPT	XTRNL ECG REC>15D<30D RECORDING	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0939T	CPT	XTRNL ECG REC>15D<30D SCANNING ANALYSIS W/REPORT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0940T	CPT	XTRNL ECG REC>15D<30D REVIEW&INTERPJ PHYS/QHP	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0941T	CPT	CYSTO FLX INSJ&XPNSJ PROSTATIC URTL SCAFFOLD	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0942T	CPT	CYSTO FLX RMVL&RPLCMT PROSTATIC URTL SCAFFOLD	N	NA

ALOHAC Q3 2025	Outpatient Hosp	0943T	CPT	CYSTO FLX REMOVAL PROSTATIC URETHRAL SCAFFOLD	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0944T	CPT	3D CONTOUR SIMULAJ TRGT LVR LES&MRGN MICRWV ABLT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0945T	CPT	INTRAOP ASMT ABNL TUM TIS IN-VIVO FLWG PRTL MAST	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0946T	CPT	ORTHOPEDIC IMPLT MVMT ALYS PAIRED CT TRGT STRUX	N	NA
ALOHAC Q3 2025	Outpatient Hosp	0947T	CPT	MRGFUS STRTCTC BLD-BRN BARR DISRPJ MBUBB RSN8TR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	0948T	CPT	REMOTE INTERROG DEV EVAL <90D CCM SYS PHYS/QHP	Y	A
ALOHAC Q3 2025	Changes	0948T	CPT	REMOTE INTERROG DEV EVAL <90D CCM SYS PHYS/QHP	Y	A
ALOHAC Q3 2025	Changes	0949T	CPT	REMOTE INTERROG DEV EVAL <90D CCM SYS TECH	Y	A
ALOHAC Q3 2025	Diagnostic Testing	0949T	CPT	REMOTE INTERROG DEV EVAL <90D CCM SYS TECH	Y	A
ALOHAC Q3 2025	Changes	0950T	CPT	ABLTJ B9 PRST8 TISSUE TRANSRECTAL HIFU W/US GDN	Y	A
ALOHAC Q3 2025	Physician Services	0950T	CPT	ABLTJ B9 PRST8 TISSUE TRANSRECTAL HIFU W/US GDN	Y	A
ALOHAC Q3 2025	Physician Services	0951T	CPT	TOTALLY IMPL AMEI INITIAL PLACEMENT	Y	A
ALOHAC Q3 2025	Changes	0951T	CPT	TOTALLY IMPL AMEI INITIAL PLACEMENT	Y	A
ALOHAC Q3 2025	Physician Services	0952T	CPT	TOTALLY IMPL AMEI REVISION/RPLCMT W/MSTDC	Y	A
ALOHAC Q3 2025	Changes	0952T	CPT	TOTALLY IMPL AMEI REVISION/RPLCMT W/MSTDC	Y	A
ALOHAC Q3 2025	Changes	0953T	CPT	TOTALLY IMPL AMEI REVISION/RPLCMT W/O MSTDC	Y	A
ALOHAC Q3 2025	Physician Services	0953T	CPT	TOTALLY IMPL AMEI REVISION/RPLCMT W/O MSTDC	Y	A
ALOHAC Q3 2025	Physician Services	0954T	CPT	TOTALLY IMPL AMEI RPLCMT SOUND PROCESSOR ONLY	Y	A
ALOHAC Q3 2025	Changes	0954T	CPT	TOTALLY IMPL AMEI RPLCMT SOUND PROCESSOR ONLY	Y	A
ALOHAC Q3 2025	Physician Services	0955T	CPT	TOTALLY IMPL AMEI REMOVAL	Y	A
ALOHAC Q3 2025	Changes	0955T	CPT	TOTALLY IMPL AMEI REMOVAL	Y	A
ALOHAC Q3 2025	Changes	0956T	CPT	PRTL CRNEC CH CRTJ&TUN ELTRD SUB-SCALP IMPL CEEG	Y	A
ALOHAC Q3 2025	Physician Services	0956T	CPT	PRTL CRNEC CH CRTJ&TUN ELTRD SUB-SCALP IMPL CEEG	Y	A
ALOHAC Q3 2025	Physician Services	0957T	CPT	REVJ SUB-SCALP IMPL ELTRD RA RCVR&TLMTR F/ELTRD	Y	A
ALOHAC Q3 2025	Changes	0957T	CPT	REVJ SUB-SCALP IMPL ELTRD RA RCVR&TLMTR F/ELTRD	Y	A
ALOHAC Q3 2025	Physician Services	0958T	CPT	RMVL SUB-SCALP IMPL ELTRD RA RCVR&TLMTR CEEG SYS	Y	A
ALOHAC Q3 2025	Changes	0958T	CPT	RMVL SUB-SCALP IMPL ELTRD RA RCVR&TLMTR CEEG SYS	Y	A
ALOHAC Q3 2025	Changes	0959T	CPT	RMVL/RPLCMT MAGNET COIL ASSEM CONN CEEG SYS	Y	A
ALOHAC Q3 2025	Physician Services	0959T	CPT	RMVL/RPLCMT MAGNET COIL ASSEM CONN CEEG SYS	Y	A
ALOHAC Q3 2025	Physician Services	0960T	CPT	RPLCMT SUB-SCALP IMPL ELTRD RA RCVR&TLMTR CEEG	Y	A
ALOHAC Q3 2025	Changes	0960T	CPT	RPLCMT SUB-SCALP IMPL ELTRD RA RCVR&TLMTR CEEG	Y	A
ALOHAC Q3 2025	Changes	0961T	CPT	SHORTWAVE IFR RADIATION IMG SURG PATH SPECIMEN	Y	A
ALOHAC Q3 2025	Physician Services	0961T	CPT	SHORTWAVE IFR RADIATION IMG SURG PATH SPECIMEN	Y	A
ALOHAC Q3 2025	Changes	0962T	CPT	ASSTV ALG ALYS ACOUS&ECG REC DETCJ CAR DYSF	Y	A
ALOHAC Q3 2025	Physician Services	0962T	CPT	ASSTV ALG ALYS ACOUS&ECG REC DETCJ CAR DYSF	Y	A
ALOHAC Q3 2025	Physician Services	0963T	CPT	ANOSCOPY DIR SBMCSL NJX BULKING AGT ANAL CANAL	Y	A
ALOHAC Q3 2025	Changes	0963T	CPT	ANOSCOPY DIR SBMCSL NJX BULKING AGT ANAL CANAL	Y	A
ALOHAC Q3 2025	Physician Services	0964T	CPT	I&CUST PREP JAW XPNSJ ORAL PROSTH 1 ARCH	Y	A
ALOHAC Q3 2025	Changes	0964T	CPT	I&CUST PREP JAW XPNSJ ORAL PROSTH 1 ARCH	Y	A
ALOHAC Q3 2025	Physician Services	0965T	CPT	I&CUST PREP JAW XPNSJ ORAL PROSTH DUAL ARCH N-FX	Y	A
ALOHAC Q3 2025	Changes	0965T	CPT	I&CUST PREP JAW XPNSJ ORAL PROSTH DUAL ARCH N-FX	Y	A
ALOHAC Q3 2025	Changes	0966T	CPT	I&CUST PREP JAW XPNSJ ORAL PROSTH DUAL ARCH FXD	Y	A
ALOHAC Q3 2025	Physician Services	0966T	CPT	I&CUST PREP JAW XPNSJ ORAL PROSTH DUAL ARCH FXD	Y	A
ALOHAC Q3 2025	Changes	0967T	CPT	TRANAL INSJ NDOLUMNL TEMP CLRCT ANAST PROTEC DEV	Y	A
ALOHAC Q3 2025	Physician Services	0967T	CPT	TRANAL INSJ NDOLUMNL TEMP CLRCT ANAST PROTEC DEV	Y	A
ALOHAC Q3 2025	Physician Services	0968T	CPT	INSERTION/RPLCMT EPICRANIAL NEUROSTIMULATOR SYS	Y	A
ALOHAC Q3 2025	Changes	0968T	CPT	INSERTION/RPLCMT EPICRANIAL NEUROSTIMULATOR SYS	Y	A
ALOHAC Q3 2025	Changes	0969T	CPT	REMOVAL EPICRANIAL NEUROSTIMULATOR SYSTEM	Y	A
ALOHAC Q3 2025	Physician Services	0969T	CPT	REMOVAL EPICRANIAL NEUROSTIMULATOR SYSTEM	Y	A
ALOHAC Q3 2025	Changes	0970T	CPT	ABLATION B9 BRST TUM PERQ LASER W/IMG GDN EA TUM	Y	A
ALOHAC Q3 2025	Physician Services	0970T	CPT	ABLATION B9 BRST TUM PERQ LASER W/IMG GDN EA TUM	Y	A

ALOHAC	Q3 2025	Changes	0971T	CPT	ABLATION MAL BRST TUM PERQ LASER W/IMG GDN UNI	Y A
ALOHAC	Q3 2025	Physician Services	0971T	CPT	ABLATION MAL BRST TUM PERQ LASER W/IMG GDN UNI	Y A
ALOHAC	Q3 2025	Changes	0972T	CPT	ASSTV ALG CLASSIFICATION BRN HLG N-INVAS M-S IMG	Y A
ALOHAC	Q3 2025	Physician Services	0972T	CPT	ASSTV ALG CLASSIFICATION BRN HLG N-INVAS M-S IMG	Y A
ALOHAC	Q3 2025	Physician Services	0973T	CPT	SLCTV NZMTC DBRDMT BRN ESCHAR REQ ANES T/A/L 1ST	Y A
ALOHAC	Q3 2025	Changes	0973T	CPT	SLCTV NZMTC DBRDMT BRN ESCHAR REQ ANES T/A/L 1ST	Y A
ALOHAC	Q3 2025	Physician Services	0974T	CPT	SLCTV NZMTC DBRDMT BRN ESCHAR REQ ANES T/A/L EA	Y A
ALOHAC	Q3 2025	Changes	0974T	CPT	SLCTV NZMTC DBRDMT BRN ESCHAR REQ ANES T/A/L EA	Y A
ALOHAC	Q3 2025	Changes	0975T	CPT	SLCTV NZMTC DBRDMT BRN ESCHAR ANES S/N/HF&/MD 1	Y A
ALOHAC	Q3 2025	Physician Services	0975T	CPT	SLCTV NZMTC DBRDMT BRN ESCHAR ANES S/N/HF&/MD 1	Y A
ALOHAC	Q3 2025	Physician Services	0976T	CPT	SLCTV NZMTC DBRDMT BRN ESCHAR ANES S/N/HF&/MD EA	Y A
ALOHAC	Q3 2025	Changes	0976T	CPT	SLCTV NZMTC DBRDMT BRN ESCHAR ANES S/N/HF&/MD EA	Y A
ALOHAC	Q3 2025	Physician Services	0977T	CPT	UPPER GI BLOOD DETECTION SENSOR CAPSULE I&R	Y A
ALOHAC	Q3 2025	Changes	0977T	CPT	UPPER GI BLOOD DETECTION SENSOR CAPSULE I&R	Y A
ALOHAC	Q3 2025	Physician Services	0978T	CPT	SBMCSL CRYOLYSIS THER SOFT PALT BASE TONGUE&TNSL	Y A
ALOHAC	Q3 2025	Changes	0978T	CPT	SBMCSL CRYOLYSIS THER SOFT PALT BASE TONGUE&TNSL	Y A
ALOHAC	Q3 2025	Changes	0979T	CPT	SBMCSL CRYOLYSIS THERAPY SOFT PALATE ONLY	Y A
ALOHAC	Q3 2025	Physician Services	0979T	CPT	SBMCSL CRYOLYSIS THERAPY SOFT PALATE ONLY	Y A
ALOHAC	Q3 2025	Physician Services	0980T	CPT	SBMCSL CRYOLYSIS THER BASE TONGUE&LINGUAL TONSIL	Y A
ALOHAC	Q3 2025	Changes	0980T	CPT	SBMCSL CRYOLYSIS THER BASE TONGUE&LINGUAL TONSIL	Y A
ALOHAC	Q3 2025	Physician Services	0981T	CPT	TCAT IMPL WRLS IVC SNR L-T HEMODYN MNTR	Y A
ALOHAC	Q3 2025	Changes	0981T	CPT	TCAT IMPL WRLS IVC SNR L-T HEMODYN MNTR	Y A
ALOHAC	Q3 2025	Physician Services	0982T	CPT	REM MNTR IMPL IVC SNR INITIAL SET-UP&PT EDUCAJ	Y A
ALOHAC	Q3 2025	Changes	0982T	CPT	REM MNTR IMPL IVC SNR INITIAL SET-UP&PT EDUCAJ	Y A
ALOHAC	Q3 2025	Changes	0983T	CPT	REMOTE MNTR IMPLANTED IVC SENSOR<30 D PHYS/QHP	Y A
ALOHAC	Q3 2025	Physician Services	0983T	CPT	REMOTE MNTR IMPLANTED IVC SENSOR<30 D PHYS/QHP	Y A
ALOHAC	Q3 2025	Changes	0984T	CPT	INTRAVASCULAR IMG XTRC CEREBRAL VSL OCT 1ST VSL	Y A
ALOHAC	Q3 2025	Physician Services	0984T	CPT	INTRAVASCULAR IMG XTRC CEREBRAL VSL OCT 1ST VSL	Y A
ALOHAC	Q3 2025	Physician Services	0985T	CPT	INTRAVASCULAR IMG XTRC CEREBRAL VSL OCT EA ADDL	Y A
ALOHAC	Q3 2025	Changes	0985T	CPT	INTRAVASCULAR IMG XTRC CEREBRAL VSL OCT EA ADDL	Y A
ALOHAC	Q3 2025	Changes	0986T	CPT	INTRAVASCULAR IMG ICR CEREBRAL VSL OCT 1ST VSL	Y A
ALOHAC	Q3 2025	Physician Services	0986T	CPT	INTRAVASCULAR IMG ICR CEREBRAL VSL OCT 1ST VSL	Y A
ALOHAC	Q3 2025	Changes	0987T	CPT	INTRAVASCULAR IMG ICR CEREBRAL VSL OCT EA ADDL	Y A
ALOHAC	Q3 2025	Physician Services	0987T	CPT	INTRAVASCULAR IMG ICR CEREBRAL VSL OCT EA ADDL	Y A
ALOHAC	Q3 2025	Outpatient Hosp	11755	CPT	BIOPSY NAIL UNIT SEPARATE PROCEDURE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	11901	CPT	INJECTION INTRALESIONAL >7 LESIONS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	11970	CPT	REPLACEMENT TISSUE EXPANDER W/PERMANENT IMPLANT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	11971	CPT	REMOVAL TISSUE EXPANDER W/O INSERTION IMPLANT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	14000	CPT	ADJACENT TISSUE TRANSFER/REARGMT TRUNK 10 SQCM/<	N NA
ALOHAC	Q3 2025	Outpatient Hosp	14001	CPT	ADJNT TIS TRANSFR/REARRANGE TRUNK 10.1-30.0 SQCM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	14020	CPT	ADJT TIS TRNSFR/REARGMT SCALP/ARM/LEG 10 SQ CM/<	N NA
ALOHAC	Q3 2025	Outpatient Hosp	14021	CPT	ADJT/REARRGMT SCALP/ARM/LEG 10.1-30.0 SQ CM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	14040	CPT	ADJT TIS TRNS/REARGMT F/C/C/M/N/A/G/H/F 10SQCM/<	N NA
ALOHAC	Q3 2025	Outpatient Hosp	14041	CPT	ADJT/REARGMT F/C/C/M/N/AX/G/H/F 10.1-30.0 SQ CM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	14060	CPT	ADJT TIS TRNSFR/REARRGMT E/N/E/L DFCT 10 SQ CM/<	N NA
ALOHAC	Q3 2025	Outpatient Hosp	14061	CPT	ADJT TIS REARGMT EYE/NOSE/EAR/LIP 10.1-30.0 SQCM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	14301	CPT	ADJNT TIS TRNSFR/REARGMT ANY AREA 30.1-60 SQ CM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	14302	CPT	ADJT TIS TRNSFR/REARGMT DEFEC EA ADDL 30 SQCM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	14350	CPT	FILLETED FINGER/TOE FLAP W/PREPJ RECIPIENT SITE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	15040	CPT	HARVEST SKIN TISSUE CLTR SKIN AGRFT 100 CM/<	N NA
ALOHAC	Q3 2025	Outpatient Hosp	15050	CPT	PINCH GRAFT 1/MLT SM ULCER TIP/OTH AR UP TO 2 CM	N NA

ALOHAC Q3 2025	Outpatient Hosp	15100	CPT	SPLT AGRFT T/A/L 1ST 100 SQCM/</1% BDY INFT/CHLD	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15101	CPT	SPLT AGRFT T/A/L EA ADD 100 SQCM/EA 1% INFT/CHLD	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15110	CPT	EPIDRM AGRFT T/A/L 1ST 100 SQCM/</1% INFT/CHLD	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15111	CPT	EPDRM AGRFT T/A/L EA ADD 100 SQCM/EA 1%INFT/CHLD	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15115	CPT	EPIDERMAL AGRFT F/S/N/H/F/G/M/DGT 1ST 100 SQCM/<	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15116	CPT	EPIDERMAL AGRFT F/S/N/H/F/G/M/DGT EA 100 SQCM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15120	CPT	SPLT AGRFT F/S/N/H/F/G/M/DGT 1ST 100 SQCM/</1%	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15121	CPT	SPLT AGRFT F/S/N/H/F/G/M/DGT EA 100 SQCM/EA 1%	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	15130	CPT	DERMAL AGRFT T/A/L 1ST 100 SQCM/</1%INFT/CHLD	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	15131	CPT	DERMAL AGRFT T/A/L EA ADD 100 SQCM/1% INFT/CHLD	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	15135	CPT	DERMAL AUTOGRAFT F/S/N/H/F/G/M/DGT 1ST 100 SQCM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	15136	CPT	DERMAL AGRFT F/S/N/H/F/G/M/DGT EA 100 SQCM/EA 1%	N	NA
ALOHAC Q3 2025	Physician Services	15150	CPT	TISS CLTR SKIN AUTOGRAFT T/A/L 1ST 25 SQ CM/<	N	NA
ALOHAC Q3 2025	Physician Services	15151	CPT	TISS CLTR SKIN AUTOGRAFT T/A/L ADDL 1-75 SQCM	N	NA
ALOHAC Q3 2025	Physician Services	15152	CPT	TISS CLTR SKIN AGRFT T/A/L EA ADD 100 SQCM/EA 1%	N	NA
ALOHAC Q3 2025	Physician Services	15155	CPT	TIS CLTR SKN AGRFT F/S/N/H/F/G/M/DGT 1ST 25SQCM/	N	NA
ALOHAC Q3 2025	Physician Services	15156	CPT	TIS CLTR SKN AGRFT F/S/N/H/F/G/M/DGT AD 1-75SQCM	N	NA
ALOHAC Q3 2025	Physician Services	15157	CPT	TIS CLTR SKN AGRFT F/S/N/H/F/G/M/DGT EACH ADDL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15200	CPT	FTH/GFT FREE W/DIRECT CLOSURE TRUNK 20 SQ CM/<	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15201	CPT	FTH/GFT FR W/DIR CLSR TRUNK EA ADDL 20 SQ CM	N	NA
ALOHAC Q3 2025	Physician Services	15221	CPT	FTH/GFT FR W/DIR CLSR S/A/L EA ADDL 20 SQ CM	N	NA
ALOHAC Q3 2025	Diagnostic Testing	15240	CPT	FTH/GFT FR DIR CLSR F/C/C/M/N/AX/G/H/F 20SQCM/<	N	NA
ALOHAC Q3 2025	Physician Services	15241	CPT	FTH/GFT FR W/DIR CLSR F/C/C/M/N/AX/G/H/F EA ADDL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15260	CPT	FTH/GFT FREE W/DIRECT CLOSURE N/E/E/L 20 SQ CM/<	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15261	CPT	FTH/GFT FREE W/DIR CLSR N/E/E/L EA ADDL 20 SQ CM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	15271	CPT	APP SKN SUB GRFT T/A/L AREA/100SQ CM /<1ST 25	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	15272	CPT	APP SKN SUB GRFT T/A/L AREA/100SQ CM EA ADL 25SC	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	15273	CPT	APP SKN SUBGRFT T/A/L AREA/100SQ CM 1ST 100SQ CM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	15274	CPT	APP SKN SUB GRFT T/A/L AREA>=100SCM ADL 100SQCM	N	NA
ALOHAC Q3 2025	Physician Services	15275	CPT	SUB GRFT F/S/N/H/F/G/M/D <100SQ CM 1ST 25 SQ CM	N	NA
ALOHAC Q3 2025	Physician Services	15276	CPT	SUB GRFT F/S/N/H/F/G/M/D<100SQ CM EA ADDL25SQ CM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15277	CPT	SUB GRFT F/S/N/H/F/G/M/D >= 100SCM 1ST 100SQ CM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15278	CPT	SUB GRFT F/S/N/H/F/G/M/D >= 100SCM ADL 100SQ CM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15570	CPT	FRMJ DIRECT/TUBED PEDICLE W/WO TRANSFER TRUNK	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15572	CPT	FRMJ DIRECT/TUBE PEDICLE W/WO TR SCALP ARMS/LEGS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15574	CPT	FRMJ DIR/TUBE PEDCL W/WOTR FH/CH/CH/M/N/AX/G/H/F	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15576	CPT	FRMJ DIRECT/TUBED PEDICLE W/WOTR E/N/E/L/NTRORAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15600	CPT	DELAY FLAP/SECTIONING FLAP TRUNK	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15610	CPT	DELAY FLAP/SECTIONING FLAP SCALP ARMS/LEGS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15620	CPT	DELAY FLAP/SECTIONING FLAP F/C/C/N/AX/G/H/F	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15630	CPT	DELAY FLAP/SCTJ FLAP EYELIDS NOSE EARS/LIPS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15650	CPT	TRANSFER ANY PEDICLE FLAP ANY LOCATION	N	NA
ALOHAC Q3 2025	Physician Services	15731	CPT	FOREHEAD FLAP W/PRESERVATION VASCULAR PEDICLE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	15733	CPT	MUSC MYOQ/FSCQ FLAP HEAD&NECK W/NAMED VASC PEDCL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15734	CPT	MUSC MYOCUTANEOUS/FASCIOCUTANEOUS FLAP TRUNK	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15736	CPT	MUSC MYOCUTANEOUS/FASCIOCUTANEOUS FLAP UXTR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15738	CPT	MUSC MYOCUTANEOUS/FASCIOCUTANEOUS FLAP LXTR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15740	CPT	FLAP ISLAND PEDICLE ANATOMIC NAMED AXIAL ARTERY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	15750	CPT	FLAP NEUROVASCULAR PEDICLE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	15756	CPT	FREE MUSCLE/MYOCUTANEOUS FLAP W/MVASC ANAST	N	NA
ALOHAC Q3 2025	Inpatient Hosp	15757	CPT	FREE SKIN FLAP W/MICROVASCULAR ANASTOMOSIS	N	NA

ALOHAC	Q3 2025	Inpatient Hosp	15758	CPT	FREE FASCIAL FLAP W/MICROVASCULAR ANASTOMOSIS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	15760	CPT	GRAFT COMPOSITE W/PRIMARY CLOSURE DONOR AREA	N NA
ALOHAC	Q3 2025	Diagnostic Testing	15769	CPT	GRAFTING OF AUTOLOGOUS SOFT TISS BY DIRECT EXC	N NA
ALOHAC	Q3 2025	Outpatient Hosp	15770	CPT	GRAFT DERMA-FAT-FASCIA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	15771	CPT	GRAFTING OF AUTOLOGOUS FAT BY LIPO 50 CC OR LESS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	15772	CPT	GRAFTING OF AUTOLOGOUS FAT BY LIPO EA ADDL 50 CC	N NA
ALOHAC	Q3 2025	Outpatient Hosp	15773	CPT	GRAFTING OF AUTOLOGOUS FAT BY LIPO 25 CC OR LESS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	15774	CPT	GRAFTING OF AUTOLOGOUS FAT BY LIPO EA ADDL 25 CC	N NA
ALOHAC	Q3 2025	Physician Services	15778	CPT	IMPL ABSRB MESH/PRSTH DLYD CLSR DFCT INFCTJ/TRMA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	15820	CPT	BLEPHAROPLASTY LOWER EYELID	N NA
ALOHAC	Q3 2025	Outpatient Hosp	15821	CPT	BLEPHAROPLASTY LOWER EYELID W/HERNIATED FAT PAD	N NA
ALOHAC	Q3 2025	Outpatient Hosp	15822	CPT	BLEPHAROPLASTY UPPER EYELID	N NA
ALOHAC	Q3 2025	Outpatient Hosp	15823	CPT	BLEPHAROPLASTY UPPER EYELID W/EXCESSIVE SKIN	N NA
ALOHAC	Q3 2025	Outpatient Hosp	15830	CPT	EXC EXCSV SKN ABD INFRAUMBILICAL PANNICULECTOMY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	15841	CPT	GRAFT FACIAL NERVE PARALYSIS FREE MUSCLE GRAFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	15842	CPT	GRF FACIAL NRV PALYSS FR MUSCLE FLAP MICROSURG	N NA
ALOHAC	Q3 2025	Outpatient Hosp	15845	CPT	GRF FACIAL NERVE PARALYSIS REGIONAL MUSCLE TR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	15847	CPT	EXCISION EXCESSIVE SKIN & SUBQ TISSUE ABDOMEN	N NA
ALOHAC	Q3 2025	Outpatient Hosp	16035	CPT	ESCHAROTOMY FIRST INCISION	N NA
ALOHAC	Q3 2025	Inpatient Hosp	16036	CPT	ESCHAROTOMY EACH ADDITIONAL INCISION	N NA
ALOHAC	Q3 2025	Physician Services	17106	CPT	DESTRUCTION CUTANEOUS VASC PROLIFERATIVE <10CM	N NA
ALOHAC	Q3 2025	Physician Services	17107	CPT	DSTRJ CUTANEOUS VASCULAR LESIONS 10.0-50.0 SQ CM	N NA
ALOHAC	Q3 2025	Physician Services	17108	CPT	DSTRJ CUTANEOUS VASCULAR LESIONS >50.0 SQ CM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	17340	CPT	CRYOTHERAPY CO2 SLUSH LIQUID N2 ACNE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	19300	CPT	MASTECTOMY FOR GYNECOMASTIA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	19301	CPT	MASTECTOMY PARTIAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	19302	CPT	MASTECTOMY PARTIAL W/AXILLARY LYMPHADENECTOMY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	19303	CPT	MASTECTOMY SIMPLE COMPLETE	N NA
ALOHAC	Q3 2025	Inpatient Hosp	19305	CPT	MAST RAD W/PECTORAL MUSCLES AXILLARY LYMPH NODES	N NA
ALOHAC	Q3 2025	Inpatient Hosp	19306	CPT	MAST RAD W/PECTORAL MUSC AX INT MAM LYMPH NODES	N NA
ALOHAC	Q3 2025	Outpatient Hosp	19307	CPT	MAST MODF RAD W/AX LYMPH NOD W/WO PECT/ALIS MIN	N NA
ALOHAC	Q3 2025	Outpatient Hosp	19316	CPT	MASTOPEXY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	19318	CPT	BREAST REDUCTION	N NA
ALOHAC	Q3 2025	Outpatient Hosp	19325	CPT	BREAST AUGMENTATION WITH IMPLANT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	19328	CPT	REMOVAL INTACT BREAST IMPLANT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	19330	CPT	RMVL RUPTURED BREAST IMPLANT W/IMPLANT CONTENTS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	19340	CPT	INSERTION BREAST IMPLANT SAME DAY OF MASTECTOMY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	19342	CPT	INSJ/RPLCMT BREAST IMPLANT SEP DAY MASTECTOMY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	19350	CPT	NIPPLE/AREOLA RECONSTRUCTION	N NA
ALOHAC	Q3 2025	Outpatient Hosp	19355	CPT	CORRECTION INVERTED NIPPLES	N NA
ALOHAC	Q3 2025	Outpatient Hosp	19357	CPT	TISSUE EXPANDER PLACEMENT BREAST RECONSTRUCTION	N NA
ALOHAC	Q3 2025	Inpatient Hosp	19361	CPT	BREAST RECONSTRUCTION W/LATISSIMUS DORSI FLAP	N NA
ALOHAC	Q3 2025	Inpatient Hosp	19364	CPT	BREAST RECONSTRUCTION W/FREE FLAP	N NA
ALOHAC	Q3 2025	Inpatient Hosp	19367	CPT	BREAST RECONSTRUCTION SINGLE PEDICLED TRAM FLAP	N NA
ALOHAC	Q3 2025	Inpatient Hosp	19368	CPT	BREAST RECONSTRUCTION 1PEDICLED TRAM FLAP ANAST	N NA
ALOHAC	Q3 2025	Inpatient Hosp	19369	CPT	BREAST RECONSTRUCTION BIPEDICLED TRAM FLAP	N NA
ALOHAC	Q3 2025	Outpatient Hosp	19370	CPT	REVISION PERI-IMPLANT CAPSULE BREAST	N NA
ALOHAC	Q3 2025	Outpatient Hosp	19371	CPT	PERI-IMPLANT CAPSULECTOMY BREAST COMPLETE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	19380	CPT	REVISION OF RECONSTRUCTED BREAST	N NA
ALOHAC	Q3 2025	Other	19396	CPT	PREPARATION MOULAGE CUSTOM BREAST IMPLANT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	20500	CPT	INJECTION SINUS TRACT THERAPEUTIC SEPARATE PROC	N NA

ALOHAC Q3 2025	Diagnostic Testing	20501	CPT	INJECTION SINUS TRACT DIAGNOSTIC	N	NA
ALOHAC Q3 2025	Diagnostic Testing	20560	CPT	NEEDLE INSERTION W/O INJECTION 1 OR 2 MUSCLES	N	NA
ALOHAC Q3 2025	Physician Services	20561	CPT	NEEDLE INSERTION W/O INJECTION 3 OR MORE MUSCLES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	20700	CPT	MANUAL PREP AND INSERTION DEEP DRUG DELIVERY DEV	N	NA
ALOHAC Q3 2025	Diagnostic Testing	20702	CPT	MANUAL PREP&INSJ INTRAMEDULLARY DRUG DLVR DEVICE	N	NA
ALOHAC Q3 2025	Physician Services	20704	CPT	MANUAL PREP&INSJ I-ARTIC DRUG DELIVERY DEVICE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	20900	CPT	BONE GRAFT ANY DONOR AREA MINOR/SMALL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	20902	CPT	BONE GRAFT ANY DONOR AREA MAJOR/LARGE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	20910	CPT	CARTILAGE GRAFT COSTOCHONDRAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	20912	CPT	CARTILAGE GRAFT NASAL SEPTUM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	20920	CPT	FASCIA LATA GRAFT BY STRIPPER	N	NA
ALOHAC Q3 2025	Outpatient Hosp	20922	CPT	FASCIA LATA GRAFT INCISION & AREA EXPOSURE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	20924	CPT	TENDON GRAFT FROM A DISTANCE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	20930	CPT	ALLOGRAFT FOR SPINE SURGERY ONLY MORSELIZED	N	NA
ALOHAC Q3 2025	Outpatient Hosp	20931	CPT	ALLOGRAFT FOR SPINE SURGERY ONLY STRUCTURAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	20932	CPT	OSTEOARTICULAR ALLOGRAFT W/ARTICULAR SURF & BONE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	20933	CPT	HEMICORTICAL INTERCALARY ALLOGRAFT PARTIAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	20934	CPT	INTERCALARY ALLOGRAFT COMPLETE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	20936	CPT	AUTOGRAFT SPINE SURGERY LOCAL FROM SAME INCISION	N	NA
ALOHAC Q3 2025	Outpatient Hosp	20937	CPT	AUTOGRAFT SPINE SURGERY MORSELIZED SEP INCISION	N	NA
ALOHAC Q3 2025	Outpatient Hosp	20938	CPT	AUTOGRAFT SPINE SURGERY BICORT/TRICORT SEP INC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	20939	CPT	BONE MARROW ASPIRATION BONE GRFG SPI SURG ONLY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	20950	CPT	MNTR INTERSTITIAL FLUID PRESSURE CMPRT SYNDROME	N	NA
ALOHAC Q3 2025	Inpatient Hosp	20955	CPT	BONE GRAFT MICROVASCULAR ANASTOMOSIS FIBULA	N	NA
ALOHAC Q3 2025	Inpatient Hosp	20956	CPT	BONE GRAFT MICROVASCULAR ANAST ILIAC CREST	N	NA
ALOHAC Q3 2025	Inpatient Hosp	20957	CPT	BONE GRAFT MICROVASCULAR ANAST METATARSAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	20962	CPT	BONE GRF W/MVASC ANAST OTH/THN ILIAC CREST/METAR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	20969	CPT	FREE OSTQ FLAP W/MVASC ANAST METAR/GREAT TOE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	20970	CPT	FREE OSTQ FLAP W/MVASC ANASTOMOSIS ILIAC CREST	N	NA
ALOHAC Q3 2025	Outpatient Hosp	20972	CPT	FREE OSTQ FLAP W/MVASC ANASTOMOSIS METATARSAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	20973	CPT	FR OSTQ FLAP W/MVASC ANAST GRT TOE W/WEB SPACE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	20974	CPT	ELECTRICAL STIMULATION BONE HEALING NONINVASIVE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	20975	CPT	ELECTRICAL STIMULATION BONE HEALING INVASIVE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	20979	CPT	LOW INTENSITY US STIMJ BONE HEALING NONINVASIVE	N	NA
ALOHAC Q3 2025	Other	20985	CPT	CPTR-ASST SURGICAL NAVIGATION IMAGE-LESS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	21010	CPT	ARTHROTOMY TEMPOROMANDIBULAR JOINT	N	NA
ALOHAC Q3 2025	Physician Services	21011	CPT	EXCISION TUMOR SOFT TISS FACE/SCALP SUBQ <2CM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	21012	CPT	EXCISION TUMOR SOFT TISS FACE/SCALP SUBQ 2 CM/>	N	NA
ALOHAC Q3 2025	Physician Services	21013	CPT	EXC TUMOR SOFT TISS FACE&SCALP SUBFASCIAL <2CM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	21014	CPT	EXC TUMOR SOFT TISS FACE&SCALP SUBFASCIAL 2 CM/>	N	NA
ALOHAC Q3 2025	Outpatient Hosp	21029	CPT	REMOVAL CONTOURING BENIGN TUMOR FACIAL BONE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	21030	CPT	EXC BENIGN TUMOR/CYST MAXL/ZYGOMA ENCL & CURTG	N	NA
ALOHAC Q3 2025	Outpatient Hosp	21031	CPT	EXCISION TORUS MANDIBULARIS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	21032	CPT	EXCISION MAXILLARY TORUS PALATINUS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	21040	CPT	EXCISION BENIGN TUMOR/CYST MANDIBLE ENCL & CURT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	21050	CPT	CONDYLECTOMY TEMPOROMANDIBULAR JOINT SPX	N	NA
ALOHAC Q3 2025	Outpatient Hosp	21060	CPT	MENISCECTOMY PRTL/COMPL TEMPOROMANDIBULAR JT SPX	N	NA
ALOHAC Q3 2025	Outpatient Hosp	21070	CPT	CORONOIDECTOMY SEPARATE PROCEDURE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	21073	CPT	MANIPULATION TMJ THERAPEUTIC REQUIRE ANESTHESIA	N	NA
ALOHAC Q3 2025	Outpatient Hosp	21076	CPT	IMPRESSION&PREPARATION SURGICAL OBTURATOR PROSTH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	21077	CPT	IMPRESSION & PREPARATION ORBITAL PROSTHESIS	N	NA

ALOHAC	Q3 2025	Outpatient Hosp	21079	CPT	IMPRESSION&PREPARATION INTERIM OBTURATOR PROSTH	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21080	CPT	IMPRESSION & PREPJ DEFINITIVE OBTURATOR PROSTH	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21081	CPT	IMPRESSION & PREPJ MANDIBULAR RESECTION PROSTH	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21082	CPT	IMPRESSION & PREPJ PALATAL AUGMENTATION PROSTH	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21083	CPT	IMPRESSION & PREPARATION PALATAL LIFT PROSTHESIS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21084	CPT	IMPRESSION & PREPARATION SPEECH AID PROSTHESIS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21085	CPT	IMPRESSION & PREPARATION ORAL SURGICAL SPLINT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21086	CPT	IMPRESSION & PREPARATION AURICULAR PROSTHESIS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21087	CPT	IMPRESSION & PREPARATION NASAL PROSTHESIS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21088	CPT	IMPRESSION & PREPARATION FACIAL PROSTHESIS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21100	CPT	APPL HALO APPLIANCE MAXILLOFACIAL FIXATION SPX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21116	CPT	INJECTION TEMPOROMANDIBULAR JOINT ARTHROGRAPHY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	21145	CPT	RCNSTJ MIDFACE LEFORT I 1 PIECE W/BONE GRAFTS	N NA
ALOHAC	Q3 2025	Inpatient Hosp	21146	CPT	RCNSTJ MIDFACE LEFORT I 2 PIECES W/BONE GRAFTS	N NA
ALOHAC	Q3 2025	Inpatient Hosp	21147	CPT	RCNSTJ MIDFACE LEFORT I 3/> PIECE W/BONE GRAFTS	N NA
ALOHAC	Q3 2025	Inpatient Hosp	21151	CPT	RCNSTJ MIDFACE LEFORT II W/BONE GRAFTS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21175	CPT	RCNSTJ BIFRONTAL SUPERIOR-LAT ORB RIMS & LWR FHD	N NA
ALOHAC	Q3 2025	Inpatient Hosp	21188	CPT	RCNSTJ MDFC OTH/THN LEFORT OSTEOT & BONE GRAFTS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21210	CPT	GRAFT BONE NASAL/MAXILLARY/MALAR AREAS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21215	CPT	GRAFT BONE MANDIBLE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21230	CPT	GRAFT RIB CRTLG AUTOGENOUS FACE/CHIN/NOSE/EAR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21235	CPT	GRAFT EAR CRTLG AUTOGENOUS NOSE/EAR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21240	CPT	ARTHRP TEMPOROMANDIBULAR JOINT W/WO AUTOGRAFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21242	CPT	ARTHROPLASTY TEMPOROMANDIBULAR JT W/ALLOGRAFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21243	CPT	ARTHRP TMPRMAND JOINT W/PROSTHETIC REPLACEMENT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21244	CPT	RCNSTJ MNDBL XTRORAL W/TRANSOSTEAL BONE PLATE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21245	CPT	RCNSTJ MNDBL/MAXL SUBPRIOSTEAL IMPLANT PARTIAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21246	CPT	RCNSTJ MNDBL/MAXL SUBPRIOSTEAL IMPLANT COMPLETE	N NA
ALOHAC	Q3 2025	Inpatient Hosp	21247	CPT	RCNSTJ MNDBLR CONDYLE W/BONE CARTLG AUTOGRAFTS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21248	CPT	RCNSTJ MANDIBLE/MAXL ENDOSTEAL IMPLANT PARTIAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21249	CPT	RCNSTJ MANDIBLE/MAXL ENDOSTEAL IMPLANT COMPLETE	N NA
ALOHAC	Q3 2025	Inpatient Hosp	21255	CPT	RCNSTJ ZYGMTC ARCH/GLENOID FOSSA W/BONE CARTLG	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21256	CPT	RECONSTRUCTION ORBIT W/OSTEOTOMIES & BONE GRAFTS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21260	CPT	PERIORBITAL OSTEOTOMIES BONE GRAFTS EXTRACRANIAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21261	CPT	PERIORBITAL OSTEOTOMIES W/BONE GRAFTS ICRA & XTR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21263	CPT	PERIORBITAL OSTEOTOMIES W/BONE GRAFTS W/FOREHEAD	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21267	CPT	ORBITAL REPOSITIONING W/BONE GRAFTS EXTRACRANIAL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	21268	CPT	ORBITAL REPOSITIONING W/BONE GRAFTS ICRA & XTRC	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21270	CPT	MALAR AUGMENTATION PROSTHETIC MATERIAL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	21510	CPT	INCISION DEEP OPENING BONE CORTEX THORAX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21552	CPT	EXC TUMOR SOFT TIS NECK/ANT THORAX SUBQ 3 CM/>	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21554	CPT	EXC TUMOR SOFT TISSUE NECK/THORAX SUBFASC 5 CM/>	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21555	CPT	EXC TUMOR SOFT TISSUE NECK/ANT THORAX SUBQ <3CM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21556	CPT	EXC TUMOR SOFT TISS NECK/THORAX SUBFASCIAL <5CM	N NA
ALOHAC	Q3 2025	Inpatient Hosp	21615	CPT	EXCISION 1ST &/CERVICAL RIB	N NA
ALOHAC	Q3 2025	Inpatient Hosp	21616	CPT	EXCISION 1ST &/CERVICAL RIB W/SYMPATHECTOMY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	21620	CPT	OSTECTOMY STERNUM PARTIAL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	21627	CPT	STERNAL DEBRIDEMENT	N NA
ALOHAC	Q3 2025	Inpatient Hosp	21630	CPT	RADICAL RESECTION STERNUM	N NA
ALOHAC	Q3 2025	Inpatient Hosp	21740	CPT	REPAIR PECTUS EXCAVATUM/CARINATUM OPEN	N NA
ALOHAC	Q3 2025	Outpatient Hosp	21920	CPT	BIOPSY SOFT TISSUE BACK/FLANK SUPERFICIAL	N NA

ALOHAC Q3 2025	Outpatient Hosp	21930	CPT	EXCISION TUMOR SOFT TISSUE BACK/FLANK SUBQ <3CM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	21931	CPT	EXCISION TUMOR SOFT TIS BACK/FLANK SUBQ 3 CM/>	N	NA
ALOHAC Q3 2025	Outpatient Hosp	21932	CPT	EXC TUMOR SOFT TISS BACK/FLANK SUBFASCIAL <5CM	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22010	CPT	I&D DEEP ABSCESS PST SPINE CRV THRC/CERVICOTHR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22015	CPT	I&D DEEP ABSCESS PST SPINE LUMBAR SAC/LUMBOSAC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22110	CPT	PRTL EXC VRT BDY B1Y LES W/O SPI CORD 1 SGM CRV	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22112	CPT	PRTL EXC VRT BDY B1Y LES W/O SPI CORD 1 SGM THRC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22114	CPT	PRTL EXC VRT BDY B1Y LES W/O SPI CORD 1 SGM LMBR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22116	CPT	PRTL EXC VRT BDY B1Y LES W/O SPI CORD 1 SGM EA	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22206	CPT	OSTEOTOMY SPINE POSTERIOR 3 COLUMN THORACIC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22207	CPT	OSTEOTOMY SPINE POSTERIOR 3 COLUMN LUMBAR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22208	CPT	OSTEOTOMY SPINE POSTERIOR 3 COLUMN EA ADDL SGM	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22210	CPT	OSTEOTOMY SPINE PST/PSTLAT APPR 1 VRT SGM CRV	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22212	CPT	OSTEOTOMY SPINE PST/PSTLAT APPR 1 VRT SGM THRC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22214	CPT	OSTEOTOMY SPINE PST/PSTLAT APPR 1 VRT SGM LMBR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22216	CPT	OSTEOT SPI PST/PSTLAT APPR 1 VRT SGM EA VRT SGM	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22220	CPT	OSTEOTOMY SPINE W/DSC ANT APPR 1 VRT SGM CRV	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22222	CPT	OSTEOTOMY SPINE W/DSC ANT APPR 1 VRT SGM THRC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22224	CPT	OSTEOTOMY SPINE W/DSC ANT APPR 1 VRT SGM LUMBAR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22226	CPT	OSTEOTOMY SPINE W/DSC ANT APPR 1 VRT SGM EA ADDL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22510	CPT	PERQ VERTEBROPLASTY UNI/BI INJX CERVICOTHORACIC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22511	CPT	PERQ VERTEBROPLASTY UNI/BI INJECTION LUMBOSACRAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22512	CPT	VERTEBROPLASTY EACH ADDL CERVICOTHOR/LUMBOSACRAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22513	CPT	PERQ VERT AGMNTJ CAVITY CRTJ UNI/BI CANNULATION	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22514	CPT	PERQ VERT AGMNTJ CAVITY CRTJ UNI/BI CANNULJ LMBR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22515	CPT	PERQ VERT AGMNTJ CAVITY CRTJ UNI/BI CANNULJ EACH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22526	CPT	PERQ INTRDSCL ELECTROTHRM ANNULOPLASTY 1 LEVEL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22527	CPT	PERQ INTRDSCL ELECTROTHRM ANNULOPLASTY ADDL LVL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22532	CPT	ARTHRODESIS LATERAL EXTRACAVITARY THORACIC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22533	CPT	ARTHRODESIS LATERAL EXTRACAVITARY LUMBAR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22534	CPT	ARTHRODESIS LAT EXTRACAVITARY EA ADDL THRC/LMBR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22548	CPT	ARTHRD ANT TRANSORL/XTRORAL C1-C2 W/WO EXC ODNTD	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22551	CPT	ARTHRD ANT INTERBODY DECOMPRESS CERVICAL BELW C2	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22552	CPT	ARTHRD ANT INTERDY CERVCL BELW C2 EA ADDL NTRSPC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22554	CPT	ARTHRD ANT INTERBODY MIN DSC CRV BELOW C2	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22556	CPT	ARTHRD ANT INTERBODY MIN DSC THORACIC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22558	CPT	ARTHRD ANT INTERBODY MIN DSC LUMBAR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22585	CPT	ARTHRD ANT NTRBD MIN DSC EA ADDL INTERSPACE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22586	CPT	ARTHRODESIS PRESACRAL NTRBDY DSC W/INSTRMJ L5-S1	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22590	CPT	ARTHRODESIS POSTERIOR CRANIOCERVICAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22595	CPT	ARTHRODESIS POSTERIOR ATLAS-AXIS C1-C2	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22600	CPT	ARTHRD PST/PSTLAT TQ 1NTRSPC CRV BELW C2 SEGMENT	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22610	CPT	ARTHRODESIS POSTERIOR/PSTLAT TQ 1NTRSPC THORACIC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22612	CPT	ARTHRODESIS POSTERIOR/PSTLAT TQ 1NTRSPC LUMBAR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22614	CPT	ARTHRODESIS PST/PSTLAT TQ 1NTRSPC EA ADDL NTRSPC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22630	CPT	ARTHRODESIS POSTERIOR INTERBODY 1 NTRSPC LUMBAR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22632	CPT	ARTHRODESIS POSTERIOR INTERBODY 1 NTRSPC EA ADDL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22633	CPT	ARTHRODESIS COMBINED TQ 1NTRSPC LUMBAR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22634	CPT	ARTHRODESIS CMBN TQ 1NTRSPC EACH ADDITIONAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22818	CPT	KYPHECTOMY SINGLE OR TWO SEGMENTS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22819	CPT	KYPHECTOMY 3 OR MORE SEGMENTS	N	NA

ALOHAC Q3 2025	Inpatient Hosp	22830	CPT	EXPLORATION SPINAL FUSION	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22836	CPT	ANT THORACIC VRT BODY TETHERING <7 VRT SEGMENTS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22837	CPT	ANT THORACIC VRT BODY TETHERING 8+ VRT SEGMENTS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22838	CPT	REVJ RPLCMT/RMVL THORACIC VRT BODY TETHERING	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22840	CPT	POSTERIOR NON-SEGMENTAL INSTRUMENTATION	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22841	CPT	INTERNAL SPINAL FIXATION WIRING SPINOUS PROCESS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22842	CPT	POSTERIOR SEGMENTAL INSTRUMENTATION 3-6 VRT SEG	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22843	CPT	POSTERIOR SEGMENTAL INSTRUMENTATION 7-12 VRT SEG	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22844	CPT	POSTERIOR SEGMENTAL INSTRUMENTATION 13/> VRT SE	N	NA
ALOHAC Q3 2025	Other	22845	CPT	ANTERIOR INSTRUMENTATION 2-3 VERTEBRAL SEGMENTS	N	NA
ALOHAC Q3 2025	Other	22846	CPT	ANTERIOR INSTRUMENTATION 4-7 VERTEBRAL SEGMENTS	N	NA
ALOHAC Q3 2025	Other	22847	CPT	ANTERIOR INSTRUMENTATION 8/> VERTEBRAL SEGMENTS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22848	CPT	PELVIC FIXATION OTHER THAN SACRUM	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22849	CPT	REINSERTION SPINAL FIXATION DEVICE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22853	CPT	INSJ BIOMCHN DEV INTERVERTEBRAL DSC SPC W/ARTHRD	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22854	CPT	INSJ BIOMCHN DEV VRT CORPECTOMY DEFECT W/ARTHRD	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22856	CPT	TOTAL DISC ARTHRP ANT SINGLE INTERSPACE CERVICAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22857	CPT	TOTAL DISC ARTHRP ANT SINGLE INTERSPACE LUMBAR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22858	CPT	TOTAL DISC ARTHRP ANT 2ND LEVEL CERVICAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22859	CPT	INSJ BIOMCHN DEV NTRVRT DISC SPACE W/O ARTHRD	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22860	CPT	TOTAL DISC ARTHRP ANT SECOND INTERSPACE LUMBAR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22861	CPT	REVJ W/RPLCMT TOT DISC ARTHRP ANT 1 NTRSPC CRV	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22862	CPT	REVJ W/RPLCMT TOT DISC ARTHRP ANT 1 NTRSPC LMBR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	22864	CPT	RMVL TOT DISC ARTHRP ANT 1 INTERSPACE CERVICAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22867	CPT	INSJ STABLJ DEV W/DCMPRN LUMBAR SINGLE LEVEL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22868	CPT	INSJ STABLJ DEV W/DCMPRN LUMBAR SECOND LEVEL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22869	CPT	INSJ STABLJ DEV W/O DCMPRN LUMBAR SINGLE LEVEL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22870	CPT	INSJ STABLJ DEV W/O DCMPRN LUMBAR SECOND LEVEL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22900	CPT	EXC TUMOR SOFT TISSUE ABDL WALL SUBFASCIAL <5CM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22901	CPT	EXC TUMOR SOFT TISSUE ABDL WALL SUBFASCIAL 5CM/>	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22902	CPT	EXC TUMOR SOFT TISSUE ABDOMINAL WALL SUBQ <3CM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	22903	CPT	EXC TUMOR SOFT TISSUE ABDOMINAL WALL SUBQ 3 CM/>	N	NA
ALOHAC Q3 2025	Outpatient Hosp	23000	CPT	REMOVAL SUBDELTOID CALCAREOUS DEPOSITS OPEN	N	NA
ALOHAC Q3 2025	Outpatient Hosp	23020	CPT	CAPSULAR CONTRACTURE RELEASE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	23065	CPT	BIOPSY SOFT TISSUE SHOULDER SUPERFICIAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	23066	CPT	BIOPSY SOFT TISSUE SHOULDER DEEP	N	NA
ALOHAC Q3 2025	Outpatient Hosp	23071	CPT	EXCISION TUMOR SOFT TISSUE SHOULDER SUBQ 3 CM/>	N	NA
ALOHAC Q3 2025	Outpatient Hosp	23073	CPT	EXC TUMOR SOFT TISSUE SHOULDER SUBFASCIAL 5 CM/>	N	NA
ALOHAC Q3 2025	Outpatient Hosp	23075	CPT	EXCISION TUMOR SOFT TISSUE SHOULDER SUBQ <3CM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	23076	CPT	EXC TUMOR SOFT TISS SHOULDER SUBFASC <5CM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	23077	CPT	RAD RESECTION TUMOR SOFT TISSUE SHOULDER <5CM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	23078	CPT	RAD RESECTION TUMOR SOFT TISSUE SHOULDER 5 CM/>	N	NA
ALOHAC Q3 2025	Outpatient Hosp	23100	CPT	ARTHROTOMY GLENOHUMERAL JOINT W/BIOPSY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	23101	CPT	ARTHRT ACROMCLAV/STRNCLAV JT W/BX&/EXC CRTLG	N	NA
ALOHAC Q3 2025	Outpatient Hosp	23105	CPT	ARTHRT GLENOHUMRL JT W/SYNOVECTOMY W/WO BIOPSY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	23106	CPT	ARTHRT GLENOHUMRL JT STRNCLAV JT W/SYNVCT W/WOBX	N	NA
ALOHAC Q3 2025	Outpatient Hosp	23107	CPT	ARTHRT GLENOHMRL JT W/JT EXPL W/WO RMVL LOOSE/FB	N	NA
ALOHAC Q3 2025	Outpatient Hosp	23130	CPT	ACROMIOPLASTY/ACROMIONECTOMY PRTL +-LIGAMENT RLS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	23140	CPT	EXC/CURTG BONE CYST/BENIGN TUMOR CLAV/SCAPULA	N	NA
ALOHAC Q3 2025	Outpatient Hosp	23145	CPT	EXC/CURTG BONE CST/B9 TUM CLAV/SCAPULA W/AGRFT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	23146	CPT	EXC/CURTG BONE CST/B9 TUM CLAV/SCAPULA W/ALGRFT	N	NA

ALOHAC	Q3 2025	Outpatient Hosp	23150	CPT	EXC/CURTG BONE CYST/BENIGN TUMOR PROX HUMERUS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	23155	CPT	EXC/CURTG BONE CYST/BENIGN TUM PROX HUM W/AGRFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	23156	CPT	EXC/CURTG BONE CYST/BENIGN TUM PROX HUM W/ALGRFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	23180	CPT	PARTIAL EXCISION BONE CLAVICLE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	23182	CPT	PARTIAL EXCISION BONE SCAPULA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	23184	CPT	PARTIAL EXCISION BONE PROXIMAL HUMERUS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	23190	CPT	OSTECTOMY SCAPULA PARTIAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	23195	CPT	RESECTION HUMERAL HEAD	N NA
ALOHAC	Q3 2025	Inpatient Hosp	23200	CPT	RADICAL RESECTION TUMOR CLAVICLE	N NA
ALOHAC	Q3 2025	Inpatient Hosp	23210	CPT	RADICAL RESECTION TUMOR SCAPULA	N NA
ALOHAC	Q3 2025	Inpatient Hosp	23220	CPT	RADICAL RESECTION BONE TUMOR PROXIMAL HUMERUS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	23395	CPT	MUSCLE TRANSFER SHOULDER/UPPER ARM SINGLE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	23397	CPT	MUSCLE TRANSFER SHOULDER/UPPER ARM MULTIPLE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	23400	CPT	SCAPULOPEXY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	23405	CPT	TENOTOMY SHOULDER AREA 1 TENDON	N NA
ALOHAC	Q3 2025	Outpatient Hosp	23406	CPT	TENOTOMY SHOULDER MULTIPLE THRU SAME INCISION	N NA
ALOHAC	Q3 2025	Outpatient Hosp	23415	CPT	CORACOACROMIAL LIGAMENT RELEAS W/WOACROMIOPLASTY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	23420	CPT	RECONSTRUCTION ROTATOR CUFF AVULSION CHRONIC	N NA
ALOHAC	Q3 2025	Outpatient Hosp	23430	CPT	TENODESIS LONG TENDON BICEPS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	23440	CPT	RESECTION/TRANSPLANTATION LONG TENDON BICEPS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	23470	CPT	ARTHROPLASTY GLENOHUMRL JT HEMIARTHROPLASTY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	23472	CPT	ARTHROPLASTY GLENOHUMERAL JOINT TOTAL SHOULDER	N NA
ALOHAC	Q3 2025	Outpatient Hosp	23473	CPT	REVIS SHOULDER ARTHRPLSTY HUMERAL/GLENOID COMPNT	N NA
ALOHAC	Q3 2025	Inpatient Hosp	23474	CPT	REVIS SHOULDER ARTHRPLSTY HUMERAL&GLENOID COMPNT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	23480	CPT	OSTEOTOMY CLAVICLE W/WO INTERNAL FIXATION	N NA
ALOHAC	Q3 2025	Outpatient Hosp	23485	CPT	OSTEOTOMY CLAV W/WO INT FIXJ W/BONE GRF NON/MAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	23490	CPT	PROPH TX W/WO METHYLMETHACRYLATE CLAVICLE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	23491	CPT	PROPH TX W/WO METHYLMETHACRYLATE PROX HUMERUS	N NA
ALOHAC	Q3 2025	Inpatient Hosp	23802	CPT	ARTHRODESIS GLENOHUMERAL JT W/AUTOGENOUS GRAFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	24006	CPT	ARTHRT ELBOW CAPSULAR EXCISION CAPSULAR RLS SPX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	24065	CPT	BIOPSY SOFT TISSUE UPPER ARM/ELBOW SUPERFICIAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	24066	CPT	BIOPSY SOFT TISSUE UPPER ARM/ELBOW AREA DEEP	N NA
ALOHAC	Q3 2025	Outpatient Hosp	24071	CPT	EXC TUMOR SOFT TISSUE UPPER ARM/ELBOW SUBQ 3CM/>	N NA
ALOHAC	Q3 2025	Outpatient Hosp	24073	CPT	EXC TUMOR SOFT TISS UPPER ARM/ELBW SUBFASC 5CM/>	N NA
ALOHAC	Q3 2025	Outpatient Hosp	24075	CPT	EXC TUMOR SOFT TISS UPPER ARM/ELBOW SUBQ <3CM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	24076	CPT	EXC TUMOR SOFT TISS UPR ARM/ELBOW SUBFASC <5CM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	24100	CPT	ARTHROTOMY ELBOW W/SYNOVIAL BIOPSY ONLY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	24101	CPT	ARTHRT ELBOW W/JT EXPL W/WOBX W/O RMVL LOOSE/FB	N NA
ALOHAC	Q3 2025	Outpatient Hosp	24102	CPT	ARTHROTOMY ELBOW W/SYNOVECTOMY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	24105	CPT	EXCISION OLECRANON BURSA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	24110	CPT	EXCISION/CURTG BONE CYST/BENIGN TUMOR HUMERUS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	24115	CPT	EXC/CURTG BONE CYST/BENIGN TUMOR HUMERUS W/AGRFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	24116	CPT	EXC/CURTG BONE CYST/BENIGN TUM HUMERUS W/ALGRFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	24120	CPT	EXC/CURTG BONE CYST/BENIGN TUMOR H/N RDS/OLECRN	N NA
ALOHAC	Q3 2025	Outpatient Hosp	24125	CPT	EXC/CURTG BONE CST/B9 TUM H/N RDS/OLECRN W/AGRFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	24126	CPT	EXC/CURTG BONE CST/B9 TUM H/N RDS/OLECRN W/ALGRT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	24130	CPT	EXCISION RADIAL HEAD	N NA
ALOHAC	Q3 2025	Outpatient Hosp	24140	CPT	PARTIAL EXCISION BONE HUMERUS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	24145	CPT	PARTIAL EXCISION BONE RADIAL HEAD/NECK	N NA
ALOHAC	Q3 2025	Outpatient Hosp	24147	CPT	PARTIAL EXCISION BONE OLECRANON PROCESS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	24149	CPT	RAD RESCJ CAPSL TISS&HTRTPC B1 ELBW CONTRCT RLS	N NA

ALOHAC Q3 2025	Outpatient Hosp	24150	CPT	RADICAL RESECTION TUMOR SHAFT/DISTAL HUMERUS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24152	CPT	RADICAL RESECTION TUMOR RADIAL HEAD/NECK	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24155	CPT	RESECTION ELBOW JOINT ARTHRECTOMY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24220	CPT	INJECTION PROCEDURE FOR ELBOW ARTHROGRAPHY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24301	CPT	MUSCLE/TENDON TRANSFER UPPER ARM/ELBOW SINGLE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24305	CPT	TENDON LENGTHENING UPPER ARM/ELBOW EA TENDON	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24310	CPT	TENOTOMY OPEN ELBOW TO SHOULDER EACH TENDON	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24320	CPT	TENOPLASTY ELBOW TO SHOULDER SINGLE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24330	CPT	FLEXOR-PLASTY ELBOW	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24331	CPT	FLEXOR-PLASTY ELBOW W/EXTENSOR ADVANCEMENT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24332	CPT	TENOLYSIS TRICEPS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24340	CPT	TENODESIS BICEPS TENDON ELBOW SEPARATE PROCEDURE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24357	CPT	TENOTOMY ELBOW LATERAL/MEDIAL PERCUTANEOUS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24358	CPT	TNOT ELBOW LATERAL/MEDIAL DEBRIDE OPEN	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24359	CPT	TNOT ELBOW LATERAL/MEDIAL DEBRIDE OPEN TDN RPR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24360	CPT	ARTHROPLASTY ELBOW W/MEMBRANE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24361	CPT	ARTHROPLASTY ELBOW W/DISTAL HUMRL PROSTC RPLCMT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24362	CPT	ARTHRP ELBOW W/IMPLT&FSCA LATA LIGAMENT RCNSTJ	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24363	CPT	ARTHRP ELBOW W/DISTAL HUM&PROX UR PROSTC RPLCM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24365	CPT	ARTHROPLASTY RADIAL HEAD	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24366	CPT	ARTHROPLASTY RADIAL HEAD W/IMPLANT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24370	CPT	REVIS ELBOW ARTHRPLSTY HUMERAL/ULNA COMPNT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24371	CPT	REVIS ELBOW ARTHRPLSTY HUMERAL&ULNA COMPNT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24400	CPT	OSTEOTOMY HUMERUS W/WO INTERNAL FIXATION	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24410	CPT	MLT OSTEOT W/RELIGNMT IMED ROD HUMERAL SHAFT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24420	CPT	OSTEOPLASTY HUMERUS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24430	CPT	REPAIR NON/MALUNION HUMERUS W/O GRAFT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24435	CPT	REPAIR NON/MALUNION HUMERUS W/ILIAC/OTH AGRFT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	24470	CPT	HEMIEPIPHYSEAL ARREST	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25000	CPT	INCISION EXTENSOR TENDON SHEATH WRIST	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25001	CPT	INCISION FLEXOR TENDON SHEATH WRIST	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25065	CPT	BIOPSY SOFT TISSUE FOREARM&/WRIST SUPERFICIAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25066	CPT	BIOPSY SOFT TISSUE FOREARM&/WRIST DEEP	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25071	CPT	EXC TUMOR SOFT TISS FOREARM AND/WRIST SUBQ 3CM/>	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25073	CPT	EXC TUMOR SFT TISS FOREARM&/WRIST SUBFASC 3CM/>	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25075	CPT	EXC TUMOR SOFT TISSUE FOREARM &/WRIST SUBQ <3CM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25076	CPT	EXC TUMOR SOFT TISS FOREARM&/WRIST SUBFASC <3CM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25100	CPT	ARTHROTOMY WRIST JOINT WITH BIOPSY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25101	CPT	ARTHRT WRST W/JT EXPL W/WO BX W/WO RMVL LOOSE/FB	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25105	CPT	ARTHROTOMY WRIST JOINT WITH SYNOVECTOMY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25107	CPT	ARTHROTOMY DSTL RADIOULNAR JOINT RPR CARTILAGE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25109	CPT	EXC TENDON FOREARM&/WRIST FLEXOR/EXTENSOR EA	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25110	CPT	EXCISION LESION TENDON SHEATH FOREARM&/WRIST	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25111	CPT	EXCISION GANGLION WRIST DORSAL/VOLAR PRIMARY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25112	CPT	EXCISION GANGLION WRIST DORSAL/VOLAR RECURRENT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25115	CPT	RAD EXC BURSA SYNVA WRST/F/ARM TDN SHTHS FLXRS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25116	CPT	RAD EXC BURSA SYNVA WRST/F/ARM TDN SHTHS XTNSRS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25118	CPT	SYNOVECTOMY EXTENSOR TENDON SHTH WRIST 1 CMPRT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25119	CPT	SYNVCT XTNSR TDN SHTH WRST 1 RESCJ DSTL ULNA	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25120	CPT	EXCISION/CURETTAGE CYST/TUMOR RADIUS/ULNA	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25125	CPT	EXC/CURTG CYST/TUMOR RADIUS/ULNA W/AUTOGRAFT	N	NA

ALOHAC	Q3 2025	Outpatient Hosp	25126	CPT	EXC/CURTG CYST/TUMOR RADIUS/ULNA W/ALLOGRAFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25130	CPT	EXCISION/CURETTAGE CYST/TUMOR CARPAL BONES	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25135	CPT	EXC/CURTG CYST/TUMOR CARPAL BONES W/AUTOGRAFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25136	CPT	EXC/CURTG CYST/TUMOR CARPAL BONES W/ALLOGRAFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25145	CPT	SEQUESTRECTOMY FOREARM &/WRIST	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25150	CPT	PARTIAL EXCISION BONE ULNA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25151	CPT	PARTIAL EXCISION BONE RADIUS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25170	CPT	RADICAL RESECTION TUMOR RADIUS OR ULNA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25210	CPT	CARPECTOMY 1 BONE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25215	CPT	CARPECTOMY ALL BONES PROXIMAL ROW	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25230	CPT	RADICAL STYLOIDECTOMY SEPARATE PROCEDURE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25240	CPT	EXCISION DISTAL ULNA PARTIAL/COMPLETE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25246	CPT	INJECTION WRIST ARTHROGRAPHY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25280	CPT	LNGTH/SHRT FLXR/XTNSR TDN F/ARM&/WRIST 1 EA TDN	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25290	CPT	TNOT FLXR/XTNSR TENDON FOREARM&/WRIST 1 EA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25295	CPT	TNOLS FLXR/XTNSR TENDON FOREARM&/WRIST 1 EA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25300	CPT	TENODESIS WRIST FLEXORS FINGERS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25301	CPT	TENODESIS WRIST EXTENSORS FINGERS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25310	CPT	TDN TRNSPLJ/TR FLXR/XTNSR F/ARM&/WRST 1 EA TDN	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25312	CPT	TDN TRNSPLJ/TR FLXR/XTNSR F/ARM&/WRST 1/TDN GR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25315	CPT	FLEXOR ORIGIN SLIDE FOREARM &/WRIST	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25316	CPT	FLEXOR ORIGIN SLIDE F/ARM&/WRST TENDON TRANSFE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25332	CPT	ARTHRP WRST W/WO INTERPOS W/WO XTRNL/INT FIXJ	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25337	CPT	RCNSTJ STABLJ DSTL U/DSTL JT 2 SOFT TISS STABLJ	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25350	CPT	OSTEOTOMY RADIUS DISTAL THIRD	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25355	CPT	OSTEOTOMY RADIUS MIDDLE/PROXIMAL THIRD	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25360	CPT	OSTEOTOMY ULNA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25365	CPT	OSTEOTOMY RADIUS & ULNA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25370	CPT	MLT OSTEOTOMIES W/RELIGNMT IMED ROD RADIUS/ULNA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25375	CPT	MLT OSTEOTOMIES W/RELIGNMT IMED ROD RADIUS&ULNA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25390	CPT	OSTEOPLASTY RADIUS/ULNA SHORTENING	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25391	CPT	OSTEOPLASTY RADIUS/ULNA LENGTHENING W/AUTOGRAFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25392	CPT	OSTEOPLASTY RADIUS & ULNA SHORTENING	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25393	CPT	OSTEOPLASTY RADIUS&ULNA LENGTHENING W/AUTOGRAF	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25394	CPT	OSTEOPLASTY CARPAL BONE SHORTENING	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25400	CPT	RPR NONUNION/MALUNION RADIUS/ULNA W/O AUTOGRAFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25405	CPT	RPR NONUNION/MALUNION RADIUS/ULNA W/AUTOGRAFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25415	CPT	RPR NONUNION/MALUNION RADIUS&ULNA W/O AUTOGRAF	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25420	CPT	RPR NONUNION/MALUNION RADIUS&ULNA W/AUTOGRAFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25425	CPT	REPAIR DEFECT W/AUTOGRAFT RADIUS/ULNA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25426	CPT	REPAIR DEFECT W/AUTOGRAFT RADIUS&ULNA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25430	CPT	INSERTION VASCULAR PEDICLE CARPAL BONE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25431	CPT	REPAIR NONUNION CARPAL BONE EACH BONE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25440	CPT	RPR NONUNION SCAPHOID CARPAL B1 W/WO RDL STYLODC	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25441	CPT	ARTHROPLASTY W/PROSTHETIC RPLCMT DISTAL RADIUS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25442	CPT	ARTHROPLASTY W/PROSTHETIC RPLCMT DISTAL ULNA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25443	CPT	ARTHROPLASTY W/PROSTHETIC RPLCMT SCAPHOID CARPAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25444	CPT	ARTHROPLASTY W/PROSTHETIC REPLACEMENT LUNATE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25445	CPT	ARTHROPLASTY W/PROSTHETIC REPLACEMENT TRAPEZIUM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25446	CPT	ARTHRP W/PROSTC RPLCMT DSTL RDS&PRTL/ENTIR CARPS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	25447	CPT	ARTHRP INTERCARPAL/CARP/MTCRPL JT INTERPOSITION	N NA

ALOHAC Q3 2025	Outpatient Hosp	25450	CPT	EPIPHYSL ARRST EPIPHYSIOD/STAPLING DSTL RDS/ULNA	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25455	CPT	EPIPHYSL ARRST EPIPHYSIOD/STAPLING DSTL RDS&ULNA	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25490	CPT	PROPH TX W/WO METHYLMETHACRYLATE RADIUS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25491	CPT	PROPH TX W/WO METHYLMETHACRYLATE ULNA	N	NA
ALOHAC Q3 2025	Outpatient Hosp	25492	CPT	PROPH TX W/WO METHYLMETHACRYLATE RADIUS&ULNA	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26040	CPT	FASCIOTOMY PALMAR PERCUTANEOUS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26045	CPT	FASCIOTOMY PALMAR OPEN PARTIAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26055	CPT	TENDON SHEATH INCISION	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26060	CPT	TENOTOMY PERCUTANEOUS SINGLE EACH DIGIT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26100	CPT	ARTHROTOMY BIOPSY CARP/MTCRPL JOINT EACH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26105	CPT	ARTHROTOMY BIOPSY MTCARPHLNGL JOINT EACH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26110	CPT	ARTHROTOMY BIOPSY INTERPHALANGEAL JOINT EACH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26111	CPT	EX TUM/VASC MALF SFT TISS HAND/FNGR SUBQ 1.5CM/>	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26113	CPT	EX TUM/VASC MAL SFT TIS HAND/FNGR SUBFSC 1.5CM/>	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26115	CPT	EXC TUM/VASC MAL SFT TISS HAND/FNGR SUBQ <1.5CM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26116	CPT	EXC TUM/VAS MAL SFT TIS HAND/FNGR SUBFASC<1.5CM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26121	CPT	FASCT PALM W/WO Z-PLASTY TISSUE REARGMT/SKN GRFT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26123	CPT	FASCT PRTL PALMAR 1 DGT PROX IPHAL JT W/WO RPR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26125	CPT	FASCT PRTL PALMR ADDL DGT PROX IPHAL JT W/WO RPR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26130	CPT	SYNOVECTOMY CARPOMETACARPAL JOINT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26135	CPT	SYNVCT MTCARPHLNGL JT W/INTRNSC RLS&XTNSR HOOD	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26140	CPT	SYNVCT PROX IPHAL JT W/XTNSR RCNSTJ EA IPHAL JT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26145	CPT	SYNVCT TDN SHTH RAD FLXR TDN PALM&/FNGR EA TDN	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26160	CPT	EXC LESION TDN SHTH/JT CAPSL HAND/FNGR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26170	CPT	EXCISION TENDON PALM FLEXOR/EXTENSOR SINGLE EACH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26180	CPT	EXCISION TENDON FINGER FLEXOR/EXTENSOR EACH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26185	CPT	SESAMOIDECTOMY THUMB/FINGER SEPARATE PROCEDURE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26200	CPT	EXCISION/CURETTAGE CYST/TUMOR METACARPAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26205	CPT	EXC/CURETTAGE CYST/TUMOR METACARPAL W/AUTOGRAFT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26210	CPT	EXCISION/CURETTAGE CYST/TUMOR PHALANX FINGER	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26215	CPT	EXC/CURETTAGE CYST/TUMOR PHALANX FINGER W/AGRAFT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26230	CPT	PARTIAL EXCISION BONE METACARPAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26235	CPT	PARTIAL EXCISION PROXIMAL/MIDDLE PHALANX FINGER	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26236	CPT	PARTIAL EXCISION DISTAL PHALANX FINGER	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26250	CPT	RADICAL RESECTION TUMOR METACARPAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26260	CPT	RAD RESECTION TUMOR PROX/MIDDLE PHALANX FINGER	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26262	CPT	RADICAL RESECTION TUMOR DISTAL PHALANX FINGER	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26350	CPT	RPR/ADVMNT FLXR TDN N/Z/2 W/O FR GRAFT EA TENDON	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26352	CPT	RPR/ADVMNT FLXR TDN N/Z/2 W/FR GRAFT EA TENDON	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26356	CPT	RPR/ADVMNT FLXR TDN ZONE 2 W/O FR GRFT EA TENDON	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26357	CPT	RPR/ADVMNT FLXR TDN ZONE 2 W/O FR GRFT EA TENDON	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26358	CPT	RPR/ADVMNT FLXR TDN ZONE 2 W/FR GRAFT EA TENDON	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26370	CPT	RPR/ADVMNT TDN W/NTC SUPFCIS TDN PRIM EA TDN	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26372	CPT	RPR/ADVMNT TDN W/NTC SUPFCIS TDN W/FREE GRAFT EA	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26373	CPT	RPR/ADVMNT TDN W/NTC SUPFCIS TDN W/O FREE GRF EA	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26390	CPT	EXC FLXR TDN W/IMPLTJ SYNTH ROD DLYD TDN GRF H/F	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26392	CPT	RMVL SYNTH ROD & INSJ FLXR TDN GRF H/F EA ROD	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26410	CPT	REPAIR EXTENSOR TENDON HAND W/O GRAFT EACH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26412	CPT	REPAIR EXTENSOR TENDON HAND W/GRAFT EACH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26415	CPT	EXC XTNSR TDN W/IMPLTJ SYNTH ROD DLYD GRF H/F EA	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26416	CPT	RMVL SYNTH ROD & INSJ XTNSR TDN GRF H/F EA ROD	N	NA

ALOHAC Q3 2025	Outpatient Hosp	26418	CPT	REPAIR EXTENSOR TENDON FINGER W/O GRAFT EACH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26420	CPT	REPAIR EXTENSOR TENDON FINGER W/GRAFT EACH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26426	CPT	RPR XTNSR TDN CNTRL SLIP TISS W/LAT BAND EA FNGR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26428	CPT	RPR XTNSR TDN CNTRL SLIP SEC W/FR GRFT EA FINGER	N	NA
ALOHAC Q3 2025	Physician Services	26432	CPT	CLTX DSTL XTNSR TDN INSJ W/WO PERCUTAN PINNING	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26437	CPT	REALIGNMENT EXTENSOR TENDON HAND EACH TENDON	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26440	CPT	TENOLYSIS FLEXOR TENDON PALM/FINGER EACH TENDON	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26442	CPT	TENOLYSIS FLEXOR TENDON PALM&FINGER EACH TENDO	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26445	CPT	TENOLYSIS EXTENSOR TENDON HAND/FINGER EACH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26449	CPT	TENOLYSIS CPLX XTNSR TENDON FINGER W/FOREARM EA	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26450	CPT	TENOTOMY FLEXOR PALM OPEN EACH TENDON	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26455	CPT	TENOTOMY FLEXOR FINGER OPEN EACH TENDON	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26460	CPT	TENOTOMY EXTENSOR HAND/FINGER OPEN EACH TENDON	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26471	CPT	TENODESIS PROXIMAL INTERPHALANGEAL JOINT EACH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26474	CPT	TENODESIS DISTAL JOINT EACH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26476	CPT	LENGTHENING TENDON EXTENSOR HAND/FINGER EACH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26477	CPT	SHORTENING TENDON EXTENSOR HAND/FINGER EACH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26478	CPT	LENGTHENING TENDON FLEXOR HAND/FINGER EACH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26479	CPT	SHORTENING TENDON FLEXOR HAND/FINGER EACH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26480	CPT	TR/TRNSPL TDN CARP/MTCRPL HAND W/O FR GRF EA TDN	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26483	CPT	TENDON TRANSFER TRANSPLANT CARP/MTCRPL GRAFT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26485	CPT	TRANSFER/TRANSPLANT TENDON PALMAR W/O GRAFT EACH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26489	CPT	TRANSFER/TRANSPLANT TENDON PALMAR W/GRAFT EACH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26490	CPT	OPPONENSPLASTY SUPFCIS TDN TR TYP EA TDN	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26492	CPT	OPPONENSPLASTY TDN TR W/GRF EA TDN	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26494	CPT	OPPONENSPLASTY HYPOTHENAR MUSC TR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26496	CPT	OPPONENSPLASTY OTHER METHODS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26497	CPT	TR TDN RESTORE INTRNSC FUNCJ RING&SM FNGR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26498	CPT	TR TDN RESTORE INTRNSC FUNCJ ALL 4 FNGRS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26499	CPT	CORRECTION CLAW FINGER OTHER METHODS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26500	CPT	RCNSTJ TENDON PULLEY EACH W/LOCAL TISSUES SPX	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26502	CPT	RCNSTJ TDN PULLEY EA TDN W/TDN/FSCAL GRF SPX	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26508	CPT	RELEASE THENAR MUSCLE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26510	CPT	CROSS INTRINSIC TRANSFER EACH TENDON	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26516	CPT	CAPSULODESIS MTCARPHLNGL JOINT SINGLE DIGIT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26517	CPT	CAPSULODESIS MTCARPHLNGL JOINT 2 DIGITS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26518	CPT	CAPSULODESIS MTCARPHLNGL JOINT 3/4 DIGITS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26520	CPT	CAPSULECTOMY/CAPSULOTOMY MTCARPHLNGL JOINT EACH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26525	CPT	CAPSULECTOMY/CAPSULOTOMY IPHAL JOINT EACH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26530	CPT	ARTHROPLASTY METACARPOPHALANGEAL JOINT EACH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26531	CPT	ARTHRP MTCARPHLNGL JT W/PROSTC IMPLT EA JT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26535	CPT	ARTHROPLASTY INTERPHALANGEAL JOINT EACH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26536	CPT	ARTHROPLASTY INTERPHALANGEAL JT W/PROSTHETIC EA	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26540	CPT	RPR COLTRL LIGM MTCARPHLNGL/IPHAL JT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26541	CPT	RCNSTJ COLTRL LIGM MTCARPHLNGL 1 W/TDN/FSCAL GRF	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26542	CPT	RCNSTJ COLTRL LIGM MTCARPHLNGL 1 W/LOCAL TISS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26545	CPT	RCNSTJ COLTRL LIGM IPHAL JT 1 W/GRF EA JT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26546	CPT	RPR NON-UNION MTCRPL/PHALANX	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26548	CPT	RPR & RCNSTJ FINGER VOLAR PLATE INTERPHALANGEAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	26550	CPT	POLLICIZATION DIGIT	N	NA
ALOHAC Q3 2025	Inpatient Hosp	26551	CPT	TR TOE-TO-HAND W/MVASC ANAST GRT TOE WRP/ARND	N	NA

ALOHAC	Q3 2025	Inpatient Hosp	26553	CPT	TR TOE-TO-HAND W/MVASC ANAST OTH/THN GRT TOE 1	N NA
ALOHAC	Q3 2025	Inpatient Hosp	26554	CPT	TR TOE-TO-HAND W/MVASC ANAST OTH/THN GRT TOE 2	N NA
ALOHAC	Q3 2025	Outpatient Hosp	26555	CPT	TR FNGR AXH POS W/O MVASC ANAST	N NA
ALOHAC	Q3 2025	Inpatient Hosp	26556	CPT	TRANSFER FREE TOE JOINT W/MVASC ANASTOMOSIS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	26560	CPT	REPAIR SYNDACTYLY EACH SPACE W/SKIN FLAPS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	26561	CPT	REPAIR SYNDACTYLY EACH SPACE W/SKIN FLAPS&GRAFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	26562	CPT	REPAIR SYNDACTYLY EACH SPACE COMPLEX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	26565	CPT	OSTEOTOMY METACARPAL EACH	N NA
ALOHAC	Q3 2025	Outpatient Hosp	26567	CPT	OSTEOTOMY PHALANX FINGER EACH	N NA
ALOHAC	Q3 2025	Outpatient Hosp	26568	CPT	OSTEOPLASTY LENGTHENING METACARPAL/PHALANX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	26580	CPT	REPAIR CLEFT HAND	N NA
ALOHAC	Q3 2025	Outpatient Hosp	26587	CPT	RCNSTJ POLYDACTYLOUS DIGIT SOFT TISSUE & BONE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	26590	CPT	REPAIR MACRODACTYLIA EACH DIGIT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	26591	CPT	REPAIR INTRINSIC MUSCLES HAND EACH MUSCLE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	26593	CPT	RELEASE INTRINSIC MUSCLES HAND EACH MUSCLE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	26596	CPT	EXC CONSTRICTING RING FNGR W/MLT Z-PLASTIES	N NA
ALOHAC	Q3 2025	Outpatient Hosp	26820	CPT	FUSION OPPOSITION THUMB W/AUTOGENOUS GRAFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27000	CPT	TENOTOMY ADDUCTOR HIP PERCUTANEOUS SPX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27001	CPT	TENOTOMY ADDUCTOR HIP OPEN	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27003	CPT	TX ADDUXOR SUBQ OPN W/OBTURATOR NEURECTOMY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27005	CPT	TENOTOMY HIP FLEXOR OPEN SEPARATE PROCEDURE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27006	CPT	TENOTOMY ABDUCTORS&/EXTENSOR HIP OPEN SPX	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27025	CPT	FASCIOTOMY HIP/THIGH ANY TYPE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27035	CPT	DNRVTJ HIP JT INTRAPEL/XTRPEL INTRA-ARTCLR BRNCH	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27036	CPT	CAPSLCTOMY/CAPSUL HIP W/RLS HIP FLXR MUSC	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27040	CPT	BIOPSY SOFT TISSUE PELVIS&HIP AREA SUPERFICIAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27041	CPT	BIOPSY SOFT TISSUE PELVIS&HIP DEEP/SUBFSCAL/IM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27043	CPT	EXCISION TUMOR SOFT TISSUE PELVIS&HIP SUBQ 3CM/>	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27045	CPT	EXC TUMOR SOFT TISSUE PELVIS & HIP SUBFASC 5CM/>	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27047	CPT	EXC TUMOR SOFT TISSUE PELVIS & HIP SUBQ <3CM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27048	CPT	EXC TUMOR SOFT TISSUE PELVIS & HIP SUBFASC <5CM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27049	CPT	RAD RESECT TUMOR SOFT TISSUE PELVIS & HIP <5 CM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27050	CPT	ARTHROTOMY W/BIOPSY SACROILIAC JOINT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27052	CPT	ARTHROTOMY W/BIOPSY HIP JOINT	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27054	CPT	ARTHROTOMY W/SYNOVECTOMY HIP JOINT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27059	CPT	RAD RESECTION TUMOR SOFT TISS PELVIS&HIP 5 CM/>	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27060	CPT	EXCISION ISCHIAL BURSA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27062	CPT	EXCISION TROCHANTERIC BURSA/CALCIFICATION	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27065	CPT	EXCISION BONE CYST/BNIGN TUMOR SUPERFICIAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27066	CPT	EXCISION BONE CYST/BENIGN TUMOR DEEP	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27067	CPT	EXC B1 CST/B9 TUM W/AGRFT REQ SEP INC	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27070	CPT	PARTIAL EXCISION SUPERFICIAL PELVIS	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27071	CPT	PARTIAL EXCISION DEEP PELVIS	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27075	CPT	RAD RESCT TUMOR WING OF ILIUM 1 PUBIC/ISCHIAL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27076	CPT	RAD RESCT TUMOR ILIUM ACETABULUM BOTH PUBIC	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27077	CPT	RADICAL RESCTION TUMOR INNOMINATE BONE TOTAL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27078	CPT	RAD RESCT TUMOR ISCHIAL TUBEROSITY&GRT TRCHNTR	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27090	CPT	REMOVAL HIP PROSTHESIS SEPARATE PROCEDURE	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27091	CPT	RMVL HIP PROSTH COMP W/TOT HIP PROSTH MMA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27093	CPT	INJECTION HIP ARTHROGRAPHY W/O ANESTHESIA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27095	CPT	INJECTION HIP ARTHROGRAPHY W/ANESTHESIA	N NA

ALOHAC	Q3 2025	Outpatient Hosp	27097	CPT	RELEASE/RECESSION HAMSTRING PROXIMAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27098	CPT	TRANSFER ADDUCTOR ISCHIUM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27100	CPT	TR XTRNL OBLQ MUSC TRCHNTR W/FSCAL/TDN XTN GRF	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27105	CPT	TR PARASPI MUSC HIP FASC/TDN XTN GRF	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27110	CPT	TRANSFER ILIOPSOAS GREATER TROCHANTER FEMUR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27111	CPT	TRANSFER ILIOPSOAS FEMORAL NECK	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27120	CPT	ACETABULOPLASTY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27122	CPT	ACETABULOPLASTY RESECTION FEMORAL HEAD	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27125	CPT	HEMIARTHROPLASTY HIP PARTIAL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27130	CPT	ARTHRP ACETBLR/PROX FEM PROSTC AGRFT/ALGRFT	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27132	CPT	CONV PREV HIP TOT HIP ARTHRP W/WO AGRFT/ALGRFT	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27134	CPT	REVJ TOT HIP ARTHRP BTH W/WO AGRFT/ALGRFT	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27137	CPT	REVJ TOT HIP ARTHRP ACTBLR W/WO AGRFT/ALGRFT	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27138	CPT	REVJ TOT HIP ARTHRP FEM ONLY W/WO ALGRFT	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27140	CPT	OSTEOTOMY&TRANSFER GREATER TROCHANTER SPX	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27146	CPT	OSTEOTOMY ILIAC ACETABULAR/INNOMINATE BONE	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27147	CPT	OSTEOTOMY ILIAC ACETABULAR/INNOMINATE HIP RDCTJ	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27151	CPT	OSTEOTOMY ILIAC ACETABULAR/INNOMINATE FEM OSTEOT	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27156	CPT	OSTEOT ILIAC ACTBLR/INNOMINATE BONE OSTEOT RDCTJ	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27158	CPT	OSTEOTOMY PELVIS BILATERAL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27161	CPT	OSTEOTOMY FEMORAL NECK SEPARATE PROCEDURE	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27165	CPT	OSTEOT INTERTRCHNTRIC/SUBTRCHNTRIC W/INT/XTRNL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27170	CPT	B1 GRF FEM H/N INTERTRCHNTRIC/SUBTRCHNTRIC AREA	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27175	CPT	TX SLP FEMORAL EPIPHYSIS TRCJ W/O REDUCTION	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27176	CPT	TX SLP FEM EPIPHYSIS SINGLE/MULTIPL PINNING SITU	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27185	CPT	EPIPHYSL ARRST EPIPHYSIOD/STAPLING TRCHNTR FEMUR	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27187	CPT	PROPH TX N/P/PLTWR W/WO MMA FEM NCK & PROX FEMUR	N NA
ALOHAC	Q3 2025	Physician Services	27278	CPT	ARTHRD SI JT PRQ W/PLMT IARTIC IMPLT WO TFXJ DEV	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27305	CPT	FASCIOTOMY ILIOTIBIAL OPEN	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27306	CPT	TENOTOMY PRQ ADDUCTOR/HAMSTRING 1 TENDON SPX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27307	CPT	TENOTOMY PRQ ADDUCTOR/HAMSTRING MULTIPLE TENDON	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27310	CPT	ARTHRT KNE W/EXPL DRG/RMVL FB	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27323	CPT	BIOPSY SOFT TISSUE THIGH/KNEE AREA SUPERFICIAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27324	CPT	BIOPSY SOFT TISSUE THIGH/KNEE AREA DEEP	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27325	CPT	NEURECTOMY HAMSTRING MUSCLE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27326	CPT	NEURECTOMY POPLITEAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27327	CPT	EXCISION TUMOR SOFT TISSUE THIGH/KNEE SUBQ <3CM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27328	CPT	EXC TUMOR SOFT TISSUE THIGH/KNEE SUBFASC <5CM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27329	CPT	RAD RESECT TUMOR SOFT TISSUE THIGH/KNEE <5CM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27330	CPT	ARTHROTOMY KNEE W/SYNOVIAL BIOPSY ONLY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27331	CPT	ARTHRT KNE W/JT EXPL BX/RMVL LOOSE/FB	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27332	CPT	ARTHRT W/EXC SEMILUNAR CRTLG KNEE MEDIAL/LAT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27333	CPT	ARTHRT W/EXC SEMILUNAR CRTLG KNEE MEDIAL&LAT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27334	CPT	ARTHROTOMY W/SYNOVECTOMY KNEE ANTERIOR/POSTERIOR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27335	CPT	ARTHRT W/SYNVCT KNE ANT&POST W/POP AREA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27337	CPT	EXCISON TUMOR SOFT TISSUE THIGH/KNEE SUBQ 3 CM/>	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27339	CPT	EXC TUMOR SOFT TISSUE THIGH/KNEE SUBFASC 5 CM/>	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27340	CPT	EXCISION PREPATELLAR BURSA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27345	CPT	EXCISION SYNOVIAL CYST POPLITEAL SPACE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27347	CPT	EXCISION LESION MENISCUS/CAPSULE KNEE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27350	CPT	PATELLECTOMY/HEMIPATELLECTOMY	N NA

ALOHAC	Q3 2025	Outpatient Hosp	27355	CPT	EXCISION/CURETTAGE CYST/TUMOR FEMUR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27356	CPT	EXCISION/CURETTAGE CYST/TUMOR FEMUR W/ALLOGRAFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27357	CPT	EXCISION/CURETTAGE CYST/TUMOR FEMUR W/AUTOGRAFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27358	CPT	EXCISION/CURETTAGE CYST/TUMOR FEMUR INT FIXATION	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27360	CPT	PRTL EXC BONE FEMUR PROX TIBIA&/FIBULA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27364	CPT	RAD RESECTION TUMOR SOFT TIS THIGH/KNEE 5 CM/>	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27365	CPT	RADICAL RESECTION TUMOR FEMOR OR KNEE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27390	CPT	TENOTOMY OPEN HAMSTRING KNEE HIP SINGLE TENDON	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27391	CPT	TENOTOMY OPN HAMSTRING KNEE HIP MULTIPLE 1 LEG	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27392	CPT	TENOTOMY OPEN HAMSTRING KNEE HIP MULTIPLE BI	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27393	CPT	LENGTHENING HAMSTRING TENDON SINGLE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27394	CPT	LENGTHENING HAMSTRING TENDON MULTIPLE 1 LEG	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27395	CPT	LENGTHENING HAMSTRING TENDON MULTIPLE BILATERAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27396	CPT	TRANSPLANT/TRANSFER THIGH XTNSR TO FLXR 1 TENDON	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27397	CPT	TRANSPLANT/TRANSFER THIGH XTNSR TO FLXR MULT TDN	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27400	CPT	TRANSFER TENDON/MUSCLE HAMSTRINGS FEMUR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27403	CPT	ARTHROTOMY W/MENISCUS REPAIR KNEE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27412	CPT	AUTOLOGOUS CHONDROCYTE IMPLANTATION KNEE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27415	CPT	OSTEOCHONDRAL ALLOGRAFT KNEE OPEN	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27416	CPT	OSTEOCHONDRAL AUTOGRAFT KNEE OPEN MOSAICPLASTY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27418	CPT	ANTERIOR TIBIAL TUBERCLEPLASTY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27425	CPT	LATERAL RETINACULAR RELEASE OPEN	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27430	CPT	QUADRICEPSPLASTY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27435	CPT	CAPSULOTOMY POSTERIOR CAPSULAR RELEASE KNEE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27437	CPT	ARTHROPLASTY PATELLA W/O PROSTHESIS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27438	CPT	ARTHROPLASTY PATELLA W/PROSTHESIS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27440	CPT	ARTHROPLASTY KNEE TIBIAL PLATEAU	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27441	CPT	ARTHRP KNEE TIBIAL PLATEAU DBRDMT&PRTL SYNVCT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27442	CPT	ARTHROPLASTY FEM CONDYLES/TIBIAL PLATEAU KNEE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27443	CPT	ARTHRP FEM CONDYLES/TIBL PLATU KNE DBRDMT&PRTL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27445	CPT	ARTHROPLASTY KNEE HINGE PROSTHESIS	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27446	CPT	ARTHRP KNEE CONDYLE&PLATEAU MEDIAL/LAT CMPRT	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27447	CPT	ARTHRP KNE CONDYLE&PLATU MEDIAL&LAT COMPARTMENTS	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27448	CPT	OSTEOTOMY FEMUR SHAFT/SUPRACONDYLAR W/O FIXATION	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27450	CPT	OSTEOTOMY FEMUR SHAFT/SUPRACONDYLAR W/FIXATION	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27454	CPT	OSTEOT MLT W/RELIGNMT IMED ROD FEM SHFT	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27455	CPT	OSTEOT PROX TIBIA FIB EXC/OSTEOT BEFORE EPIPHYSL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27457	CPT	OSTEOT PROX TIBIA FIB EXC/OSTEOT AFTER EPIPHYSL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27465	CPT	OSTEOPLASTY FEMUR SHORTENING EXCLUDING 64876	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27466	CPT	OSTEOPLASTY FEMUR LENGTHENING	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27468	CPT	OSTPL FEMUR CMBN LNGTH&SHRT W/FEMORAL SGM TRNSFR	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27470	CPT	RPR NON/MAL FEMUR DSTL H/N W/O GRF	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27472	CPT	RPR NON/MAL FEMUR DSTL H/N W/ILIAC/AUTOG BONE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27475	CPT	ARREST EPIPHYSEAL DISTAL FEMUR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27477	CPT	ARREST EPIPHYSEAL TIBIA & FIBULA PROXIMAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27479	CPT	ARRST EPIPHYSL CMBN DSTL FEMUR PROX TIBFIB	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27485	CPT	ARRST HEMIEPIPHYSL DSTL FEMUR/PROX TIBIA/FIBULA	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27486	CPT	REVJ TOTAL KNEE ARTHRP W/WO ALGRFT 1 COMPONENT	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27487	CPT	REVJ TOT KNEE ARTHRP FEM&ENTIRE TIBIAL COMPONE	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27488	CPT	RMVL PROSTH TOT KNEE PROSTH MMA W/WO INSJ SPACER	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27495	CPT	PROPH TX N/P/PLTWR W/WO METHYLMETHACRYLATE FEMUR	N NA

ALOHAC	Q3 2025	Outpatient Hosp	27605	CPT	TENOTOMY PRQ ACHILLES TENDON SPX LOCAL ANES	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27606	CPT	TENOTOMY PRQ ACHILLES TENDON SPX GENERAL ANES	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27612	CPT	ARTHRT PST CAPSUL RLS ANKLE W/WO ACHLL TDN LNGTH	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27613	CPT	BIOPSY SOFT TISSUE LEG/ANKLE AREA SUPERFICIAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27614	CPT	BIOPSY SOFT TISSUE LEG/ANKLE AREA DEEP	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27618	CPT	EXC TUMOR SOFT TISSUE LEG/ANKLE SUBQ <3CM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27619	CPT	EXC TUMOR SOFT TISSUE LEG/ANKLE SUBFASCIAL <5CM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27620	CPT	ARTHRT ANKLE W/EXPL W/WO BX W/WO RMVL LOOSE/FB	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27625	CPT	ARTHROTOMY W/SYNOVECTOMY ANKLE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27626	CPT	ARTHROTOMY W/SYNOVECTOMY ANKLE TENOSYNOVECTOMY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27630	CPT	EXCISION LESION TENDON SHEATH/CAPSULE LEG&/ANK	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27632	CPT	EXCISION TUMOR SOFT TISSUE LEG/ANKLE SUBQ 3 CM/>	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27634	CPT	EXC TUMOR SOFT TISSUE LEG/ANKLE SUBFASC 5 CM/>	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27635	CPT	EXCISION/CURETTAGE BONE CYST/TUMOR TIBIA/FIBULA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27637	CPT	EXC/CURETTAGE CYST/TUMOR TIBIA/FIBULA W/AGRAFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27638	CPT	EXC/CURETTAGE CYST/TUMOR TIBIA/FIBULA W/ALGRAFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27640	CPT	PARTIAL EXCISION BONE TIBIA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27641	CPT	PARTIAL EXCISION BONE FIBULA	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27645	CPT	RADICAL RESECTION OF TUMOR TIBIA	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27646	CPT	RADICAL RESECTION TUMOR BONE FIBULA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27647	CPT	RADICAL RESECTION OF TUMOR TALUS OR CALCANEUS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27648	CPT	INJECTION ANKLE ARTHROGRAPHY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27681	CPT	TNOLS FLXR/XTNSR TDN LEG&/ANKLE MLT TDN	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27685	CPT	LNGTH/SHRT TENDON LEG/ANKLE 1 TENDON SPX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27686	CPT	LNGTH/SHRT TDN LEG/ANKLE MLT TDN SAME INC EA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27687	CPT	GASTROCNEMIUS RECESSION	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27690	CPT	TR/TRNSPL 1 TDN W/MUSC REDIRION/REROUTING SUPFC	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27691	CPT	TR/TRNSPL 1 TDN W/MUSC REDIRION/REROUTING DP	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27692	CPT	TR/TRNSPL 1 TDN W/MUSC REDIRION/REROUTING EA TDN	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27700	CPT	ARTHROPLASTY ANKLE	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27702	CPT	ARTHROPLASTY ANKLE W/IMPLANT	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27703	CPT	ARTHROPLASTY ANKLE REVISION TOTAL ANKLE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27705	CPT	OSTEOTOMY TIBIA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27707	CPT	OSTEOTOMY FIBULA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27709	CPT	OSTEOTOMY TIBIA & FIBULA	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27712	CPT	OSTEOTOMY MULTIPLE W/RELIGNMT INTRAMEDULLARY ROD	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27715	CPT	OSTEOPLASTY TIBIA&FIBULA LENGTHENING/SHORTENING	N NA
ALOHAC	Q3 2025	Inpatient Hosp	27727	CPT	REPAIR CONGENITAL PSEUDARTHROSIS TIBIA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27730	CPT	ARREST EPIPHYSEAL OPEN DISTAL TIBIA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27732	CPT	ARREST EPIPHYSEAL OPEN DISTAL FIBULA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27734	CPT	ARREST EPIPHYSEAL OPEN DISTAL TIBIA&FIBULA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27740	CPT	ARREST EPIPHYSEAL ANY METHOD TIBIA & FIBULA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27742	CPT	ARRST EPIPHYSL ANY METH TIBFIB&DSTL FEMUR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	27745	CPT	PROPH TX N/P/PLTWR W/WO METHYLMETHACRYLATE TIBIA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28035	CPT	RELEASE TARSAL TUNNEL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28039	CPT	EXCISION TUMOR SOFT TIS FOOT/TOE SUBQ 1.5 CM/>	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28041	CPT	EXC TUMOR SOFT TISSUE FOOT/TOE SUBFASC 1.5 CM/>	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28043	CPT	EXCISION TUMOR SOFT TISSUE FOOT/TOE SUBQ <1.5CM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28045	CPT	EXC TUMOR SOFT TISSUE FOOT/TOE SUBFASC <1.5CM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28080	CPT	EXCISION INTERDIGITAL MORTON NEUROMA SINGLE EACH	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28086	CPT	SYNOVECTOMY TENDON SHEATH FOOT FLEXOR	N NA

ALOHAC	Q3 2025	Outpatient Hosp	28088	CPT	SYNOVECTOMY TENDON SHEATH FOOT EXTENSOR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28090	CPT	EXC LESION TENDON SHEATH/CAPSULE W/SYNVCT FOOT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28092	CPT	EXC LESION TENDON SHEATH/CAPSULE W/SYNVCT TOE EA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28100	CPT	EXCISION/CURETTAGE CYST/TUMOR TALUS/CALCANEUS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28102	CPT	EXC/CURTG CST/B9 TUM TALUS/CLCNS W/ILIAC/AGRFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28103	CPT	EXC/CURETTAGE CYST/TUMOR TALUS/CALCANEUS ALGRFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28104	CPT	EXC/CURTG BONE CYST/B9 TUMORTARSAL/METATARSAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28106	CPT	EXC/CURTG CST/B9 TUM TARSAL/METAR W/ILIAC/AGRFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28107	CPT	EXC/CURTG CST/B9 TUM TARSAL/METAR W/ALGRFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28108	CPT	EXC/CURTG CST/B9 TUM PHALANGES FOOT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28110	CPT	OSTECTOMY PRTL 5TH METAR HEAD SPX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28111	CPT	OSTECTOMY COMPLETE 1ST METATARSAL HEAD	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28112	CPT	OSTECTOMY COMPLETE OTHER METATARSAL HEAD 2/3/4	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28113	CPT	OSTECTOMY COMPLETE 5TH METATARSAL HEAD	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28114	CPT	OSTC COMPL ALL METAR HEADS W/PRTL PROX PHALANGC	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28116	CPT	OSTECTOMY TARSAL COALITION	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28118	CPT	OSTECTOMY CALCANEUS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28119	CPT	OSTECTOMY CALCANEUS SPUR W/WO PLNTAR FASCIAL RLS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28120	CPT	PARTIAL EXCISION BONE TALUS/CALCANEUS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28122	CPT	PRTL EXC B1 TARSAL/METAR B1 XCP TALUS/CALCANEUS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28124	CPT	PARTICAL EXCISION BONE PHALANX TOE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28126	CPT	RESECTION PARTIAL/COMPLETE PHALANGEAL BASE EACH	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28130	CPT	TALECTOMY ASTRAGALECTOMY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28140	CPT	METATARSECTOMY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28150	CPT	PHALANGECTOMY TOE EACH TOE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28153	CPT	RESECTION CONDYLE DISTAL END PHALANX EACH TOE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28160	CPT	HEMIPHALANGECTOMY/INTERPHALANGEAL JOINT EXC TOE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28171	CPT	RAD RESCJ TUMOR TARSAL EXCEPT TALUS/CALCANEUS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28173	CPT	RADICAL RESECTION TUMOR METATARSAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28175	CPT	RADICAL RESECTION TUMOR PHALANX OR TOE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28200	CPT	RPR TDN FLXR FOOT 1/2 W/O FREE GRAFG EACH TENDON	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28202	CPT	RPR TENDON FLXR FOOT SEC W/FREE GRAFT EA TENDON	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28208	CPT	REPAIR TENDON EXTENSOR FOOT 1/2 EACH TENDON	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28210	CPT	RPR TENDON XTNSR FOOT SEC W/FREE GRAFT EA TENDON	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28220	CPT	TENOLYSIS FLEXOR FOOT SINGLE TENDON	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28222	CPT	TENOLYSIS FLEXOR FOOT MULTIPLE TENDONS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28225	CPT	TENOLYSIS EXTENSOR FOOT SINGLE TENDON	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28226	CPT	TENOLYSIS EXTENSOR FOOT MULTIPLE TENDON	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28230	CPT	TX OPN TENDON FLEXOR FOOT SINGLE/MULT TENDON SPX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28232	CPT	TX OPEN TENDON FLEXOR TOE 1 TENDON SPX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28234	CPT	TENOTOMY OPEN EXTENSOR FOOT/TOE EACH TENDON	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28238	CPT	RCNSTJ PST TIBL TDN W/EXC ACCESSORY TARSL NAVCLR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28240	CPT	TENOTOMY LENGTHENING/RLS ABDUCTOR HALLUCIS MUSC	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28250	CPT	DIVISION PLANTAR FASCIA & MUSCLE SPX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28260	CPT	CAPSULOTOMY MIDFOOT MEDIAL RELEASE ONLY SPX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28261	CPT	CAPSULOTOMY MIDFOOT W/TENDON LENGTHENING	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28262	CPT	CAPSUL MIDFOOT W/PST TALOTIBL CAPSUL&TDN LNGTH	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28264	CPT	CAPSULOTOMY MIDTARSAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28270	CPT	CAPSUL MTTARPHLNGL JT W/WO TENORRHAPHY EA JT SPX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28272	CPT	CAPSULOTOMY IPHAL JOINT EACH JOINT SPX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	28280	CPT	SYNDACTYLIZATION TOES	N NA

ALOHAC Q3 2025	Outpatient Hosp	28285	CPT	CORRECTION HAMMERTOE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28286	CPT	CORRECTION COCK-UP 5TH TOE W/PLASTIC CLOSURE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28288	CPT	OSTC PRTL EXOSTC/CONDYLC METAR HEAD	N	NA
ALOHAC Q3 2025	Physician Services	28289	CPT	HALLUX RIGIDUS W/CHEILECTOMY 1ST MP JT W/O IMPLT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28291	CPT	HALLUX RIGIDUS W/CHEILECTOMY 1ST MP JT W/IMPLT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28292	CPT	CORRJ HLX VLGS BNCTY SESMDC RESCJ PROX PHLX BASE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28295	CPT	CORRJ HLX VLGS BNCTY SESMDC PROX METAR OSTEOT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28296	CPT	CORRJ HLX VLGS BNCTY SESMDC DSTL METAR OSTEOT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28297	CPT	CORRJ HLX VLGS BNCTY SESMDC JOINT ARTHRODESIS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28298	CPT	CORRJ HLX VLGS BNCTY SESMDC PROX PHLX OSTEOT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28299	CPT	CORRJ HLX VLGS BNCTY SESMDC W/DOUBLE OSTEOTOMY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28300	CPT	OSTEOTOMY CALCANEUS W/WO INTERNAL FIXATION	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28302	CPT	OSTEOTOMY TALUS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28304	CPT	OSTEOTOMY TARSAL BONES OTH/THN CALCANEUS/TALUS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28305	CPT	OSTEOT TARSAL OTH/THN CALCANEUS/TALUS W/AGRFT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28306	CPT	OSTEOT W/WO LNGTH SHRT/CORRJ 1ST METAR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28307	CPT	OSTEOT W/WO LNGTH SHRT/CORRJ METAR XCP 1ST TOE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28308	CPT	OSTEOT W/WO LNGTH SHRT/CORRJ METAR XCP 1ST EA	N	NA
ALOHAC Q3 2025	Physician Services	28309	CPT	OSTEOT W/WO LNGTH SHRT/ANGULAR CORRJ METAR MLT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28310	CPT	OSTEOT SHRT CORRJ PROX PHALANX 1ST TOE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28312	CPT	OSTEOT SHRT CORRJ OTH PHALANGES ANY TOE	N	NA
ALOHAC Q3 2025	Physician Services	28313	CPT	RCNSTJ ANGULAR DFRM TOE SOFT TISS PX ONLY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28315	CPT	SESAMOIDECTOMY FIRST TOE SPX	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28320	CPT	REPAIR NONUNION/MALUNION TARSAL BONES	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28322	CPT	RPR NON/MALUNION METARSAL W/WO BONE GRAFT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28340	CPT	RCNSTJ TOE MACRODACTYLY SOFT TISSUE RESECTION	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28341	CPT	RCNSTJ TOE MACRODACTYLY REQUIRING BONE RESECTION	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28344	CPT	RECONSTRUCTION TOE POLYDACTYLY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28345	CPT	RCNSTJ TOE SYNDACTYLY W/WO SKIN GRAFT EACH WEB	N	NA
ALOHAC Q3 2025	Outpatient Hosp	28360	CPT	RECONSTRUCTION CLEFT FOOT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	29800	CPT	ARTHRS TEMPOROMANDIBULR JT DX W/WO SYNVAL BX SPX	N	NA
ALOHAC Q3 2025	Outpatient Hosp	29804	CPT	ARTHROSCOPY TEMPOROMANDIBULAR JOINT SURGICAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	29805	CPT	DIAGNOSTIC ARTHROSCOPY SHOULDER +- SYNOVIAL BX	N	NA
ALOHAC Q3 2025	Outpatient Hosp	29806	CPT	SURGICAL ARTHROSCOPY SHOULDER CAPSULORRHAPHY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	29807	CPT	SURGICAL ARTHROSCOPY SHOULDER REPAIR SLAP LESION	N	NA
ALOHAC Q3 2025	Outpatient Hosp	29819	CPT	SURGICAL ARTHROSCOPY SHOULDER REMOVAL LOOSE/FB	N	NA
ALOHAC Q3 2025	Outpatient Hosp	29820	CPT	SURGICAL ARTHROSCOPY SHOULDER PRTL SYNOVECTOMY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	29821	CPT	SURGICAL ARTHROSCOPY SHOULDER COMPL SYNOVECTOMY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	29822	CPT	SURGICAL ARTHROSCOPY SHOULDER LMTD DBRDMT 1/2	N	NA
ALOHAC Q3 2025	Outpatient Hosp	29823	CPT	SURGICAL ARTHROSCOPY SHOULDER XTNSV DBRDMT 3+	N	NA
ALOHAC Q3 2025	Outpatient Hosp	29824	CPT	SURGICAL ARTHROSCOPY SHOULDER DSTL CLAVICULC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	29825	CPT	SURGICAL ARTHROSCOPY SHOULDER W/LSS&RESCJ ADS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	29826	CPT	SURGICAL ARTHROSCOPY SHO W/CORACOACRM LIGM RLS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	29827	CPT	SURGICAL ARTHROSCOPY SHOULDER W/ROTATOR CUFF RPR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	29828	CPT	SURGICAL ARTHROSCOPY SHOULDER BICEPS TENODESIS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	29830	CPT	ARTHROSCOPY ELBOW DIAG W/WO SYNOVIAL BIOPSY SPX	N	NA
ALOHAC Q3 2025	Outpatient Hosp	29834	CPT	ARTHROSCOPY ELBOW SURGICAL W/REMOVAL LOOSE/FB	N	NA
ALOHAC Q3 2025	Outpatient Hosp	29835	CPT	ARTHROSCOPY ELBOW SURGICAL SYNOVECTOMY PARTIAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	29836	CPT	ARTHROSCOPY ELBOW SURGICAL SYNOVECTOMY COMPLETE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	29837	CPT	ARTHROSCOPY ELBOW SURGICAL DEBRIDEMENT LIMITED	N	NA
ALOHAC Q3 2025	Outpatient Hosp	29838	CPT	ARTHROSCOPY ELBOW SURGICAL DEBRIDEMENT EXTENSIVE	N	NA

ALOHAC	Q3 2025	Outpatient Hosp	29840	CPT	ARTHROSCOPY WRIST DIAG W/WO SYNOVIAL BIOPSY SPX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29843	CPT	ARTHROSCOPY WRIST INFECTION LAVAGE&DRAINAGE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29844	CPT	ARTHROSCOPY WRIST SURGICAL SYNOVECTOMY PARTIAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29845	CPT	ARTHROSCOPY WRIST SURGICAL SYNOVECTOMY COMPLETE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29846	CPT	ARTHRS WRST EXC&/RPR TRIANG FIBROCART&/JOINT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29848	CPT	NDSC WRST SURG W/RLS TRANSVRS CARPL LIGM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29860	CPT	ARTHROSCOPY HIP DIAGNOSTIC W/WO SYNOVIAL BYP SPX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29862	CPT	ARTHRS HIP DEBRIDEMENT/SHAVING ARTICULAR CRTLG	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29863	CPT	ARTHROSCOPY HIP SURGICAL W/SYNOVECTOMY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29866	CPT	ARTHROSCOPY KNEE OSTEOCHONDRAL AGRFT MOSAICPLAST	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29867	CPT	ARTHROSCOPY KNEE OSTEOCHONDRAL ALLOGRAFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29868	CPT	ARTHROSCOPY KNEE MENISCAL TRNSPLJ MED/LAT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29870	CPT	ARTHROSCOPY KNEE DIAGNOSTIC W/WO SYNOVIAL BX SPX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29873	CPT	ARTHROSCOPY KNEE LATERAL RELEASE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29875	CPT	ARTHROSCOPY KNEE SYNOVECTOMY LIMITED SPX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29876	CPT	ARTHROSCOPY KNEE SYNOVECTOMY 2/>COMPARTMENTS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29877	CPT	ARTHRS KNEE DEBRIDEMENT/SHAVING ARTCLR CRTLG	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29879	CPT	ARTHRS KNEE ABRASION ARTHRP/MLT DRLG/MICROFX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29880	CPT	ARTHRS KNEE W/MENISCECTOMY MED&LAT W/SHAVING	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29881	CPT	ARTHRS KNE SURG W/MENISCECTOMY MED/LAT W/SHVG	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29882	CPT	ARTHROSCOPY KNEE W/MENISCUS RPR MEDIAL/LATERAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29883	CPT	ARTHROSCOPY KNEE W/MENISCUS RPR MEDIAL&LATERAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29884	CPT	ARTHROSCOPY KNEE W/LYSIS ADHESIONS W/WO MANJ SPX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29885	CPT	ARTHRS KNEE DRILL OSTEOCHONDRITIS DISSECANS GRFG	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29886	CPT	ARTHRS KNEE DRILLING OSTEOCHOND DISSECANS LESION	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29887	CPT	ARTHRS KNEE DRLG OSTEOCHOND DISSECANS INT FIXJ	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29888	CPT	ARTHRS AIDED ANT CRUCIATE LIGM RPR/AGMNTJ/RCNSTJ	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29889	CPT	ARTHRS AIDED PST CRUCIATE LIGM RPR/AGMNTJ/RCNSTJ	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29891	CPT	ARTHRS ANKLE EXC OSTCHNDRL DFCT W/DRLG DFCT	N NA
ALOHAC	Q3 2025	Physician Services	29893	CPT	ENDOSCOPIC PLANTAR FASCIOTOMY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29895	CPT	ARTHROSCOPY ANKLE SURGICAL SYNOVECTOMY PARTIAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29897	CPT	ARTHROSCOPY ANKLE SURGICAL DEBRIDEMENT LIMITED	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29898	CPT	ARTHROSCOPY ANKLE SURGICAL DEBRIDEMENT EXTENSIVE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29899	CPT	ARTHROSCOPY ANKLE SURGICAL W/ANKLE ARTHRODESIS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29900	CPT	ARTHROSCOPY METACARPOPHALANGEAL SYNOVIAL BIOPSY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29901	CPT	ARTHRS METACARPOPHALANGEAL JOINT DEBRIDEMENT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29902	CPT	ARTHRS MTCARPHLNGL JT W/RDCTJ UR COLTRL LIGM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29905	CPT	ARTHROSCOPY SUBTALAR JOINT WITH SYNOVECTOMY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29906	CPT	ARTHROSCOPY SUBTALAR JOINT WITH DEBRIDEMENT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29907	CPT	ARTHROSCOPY SUBTALAR JOINT SUBTALAR ARTHRODESIS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29914	CPT	ARTHROSCOPY HIP W/FEMOROPLASTY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29915	CPT	ARTHROSCOPY HIP W/ACETABULOPLASTY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	29916	CPT	ARTHROSCOPY HIP W/LABRAL REPAIR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	30110	CPT	EXCISION NASAL POLYP SIMPLE	N NA
ALOHAC	Q3 2025	Physician Services	30115	CPT	EXCISION NASAL POLYP EXTENSIVE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	30117	CPT	EXCISION/DESTRUCTION INTRANASAL LESION INT APPR	N NA
ALOHAC	Q3 2025	Physician Services	30118	CPT	EXCISION/DESTRUCTION INTRANASAL LESION XTRNL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	30120	CPT	EXCISION/SURGICAL PLANING SKIN NOSE RHINOPHYMA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	30124	CPT	EXCISION DERMOID CYST NOSE SIMPLE SUBCUTANEOUS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	30130	CPT	EXCISION INFERIOR TURBINATE PARTIAL/COMPLETE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	30140	CPT	SUBMUCOUS RESCJ INFERIOR TURBINATE PRTL/COMPL	N NA

ALOHAC Q3 2025	Outpatient Hosp	30150	CPT	RHINECTOMY PARTIAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	30160	CPT	RHINECTOMY TOTAL	N	NA
ALOHAC Q3 2025	Physician Services	30200	CPT	INJECTION TURBINATE THERAPEUTIC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	30220	CPT	INSERTION NASAL SEPTAL PROSTHESIS BUTTON	N	NA
ALOHAC Q3 2025	Outpatient Hosp	30310	CPT	REMOVAL FOREIGN BODY INTRANASAL GENERAL ANES	N	NA
ALOHAC Q3 2025	Outpatient Hosp	30320	CPT	RMVL FOREIGN BODY INTRANASAL LATERAL RHINOTOMY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	30460	CPT	RHINP DFRM W/COLUM LNGTH TIP ONLY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	30462	CPT	RHINP DFRM COLUM LNGTH TIP SEPTUM OSTEOT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	30465	CPT	REPAIR NASAL VESTIBULAR STENOSIS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	30520	CPT	SEPTOPLASTY/SUBMUCOUS RESECJ W/WO CARTILAGE GRF	N	NA
ALOHAC Q3 2025	Outpatient Hosp	30540	CPT	REPAIR CHOANAL ATRESIA INTRANASAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	30545	CPT	REPAIR CHOANAL ATRESIA TRANSPALATINE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	30560	CPT	LYSIS INTRANASAL SYNECHIA	N	NA
ALOHAC Q3 2025	Outpatient Hosp	30620	CPT	SEPTAL/OTHER INTRANASAL DERMATOPLASTY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	30801	CPT	ABLTJ SOFT TIS INFERIOR TURBINATES UNI/BI SUPFC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	30802	CPT	ABLTJ SOF TISS INF TURBS UNI/BI SUPFC INTRAMURAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31020	CPT	SINUSOTOMY MAXILLARY ANTROTOMY INTRANASAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31030	CPT	SINUSOTOMY MAXILLARY RAD W/O RMVL ANTROCH POLYPS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31032	CPT	SINUSOT MAX ANTRT RAD W/RMVL ANTROCH POLYPS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31050	CPT	SINUSOTOMY SPHENOID W/WO BIOPSY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31051	CPT	SINUSOT SPHENOID W/MUCOSAL STRIPPING/RMVL POLYP	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31070	CPT	SINUSOTOMY FRONTAL EXTERNAL SIMPLE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31075	CPT	SINUSOTOMY FRONTAL TRANSORBITAL UNILATERAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31080	CPT	SINUSOTOMY FRNT OBLITERATIVE W/O FLAP BROW INC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31081	CPT	SINUSOT FRNT OBLIT W/O OSTPL FLAP CORONAL INC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31084	CPT	SINUSOT FRNT OBLIT W/OSTPL FLAP BROW INC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31085	CPT	SINUSOT FRNT OBLIT W/OSTPL FLAP CORONAL INC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31086	CPT	SINUSOT FRNT NONOBLIT W/OSTPL FLAP BROW INC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31087	CPT	SINUSOT FRNT NONOBLIT W/OSTPL FLAP CORONAL INC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31090	CPT	SINUSOT UNI 3/> PARANSL SINUSES	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31200	CPT	ETHMOIDECTOMY INTRANASAL ANTERIOR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31201	CPT	ETHMOIDECTOMY INTRANASAL TOTAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31205	CPT	ETHMOIDECTOMY EXTRANASAL TOTAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	31225	CPT	MAXILLECTOMY W/O ORBITAL EXENTERATION	N	NA
ALOHAC Q3 2025	Inpatient Hosp	31230	CPT	MAXILLECTOMY W/ORBITAL EXENTERATION	N	NA
ALOHAC Q3 2025	Diagnostic Testing	31233	CPT	NASAL/SINUS ENDOSCOPY DX MAXILLARY SINUSOSCOPY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31235	CPT	NASAL/SINUS ENDOSCOPY DX SPHENOID SINUSOSCOPY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31237	CPT	NASAL/SINUS NDSC SURG W/BX POLYPC/DBRDMT SPX	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31238	CPT	NASAL/SINUS NDSC SURG W/CONTROL NASAL HEMORRHAGE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31239	CPT	NASAL/SINUS NDSC SURG W/DACRYOCYSTORHINOSTOMY	N	NA
ALOHAC Q3 2025	Physician Services	31240	CPT	NASAL/SINUS NDSC SURG W/CONCHA BULLOSA RESECTION	N	NA
ALOHAC Q3 2025	Physician Services	31242	CPT	NASAL/SINUS NDSC DSTRJ RF ABLATION PST NSL NRV	N	NA
ALOHAC Q3 2025	Physician Services	31243	CPT	NASAL/SINUS NDSC DSTRJ CRYOABLATION PST NSL NRV	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31253	CPT	NASAL/SINUS NDSC TOT W/FRNT SINS EXPL TISS RMVL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31254	CPT	NASAL/SINUS NDSC W/PARTIAL ETHMOIDECTOMY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31255	CPT	NASAL/SINUS NDSC W/TOTAL ETHOIDECTOMY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31256	CPT	NASAL/SINUS ENDOSCOPY W/MAXILLARY ANTROSTOMY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31257	CPT	NASAL/SINUS NDSC TOTAL WITH SPHENOIDOTOMY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31259	CPT	NASAL/SINUS NDSC TOT W/SPHENDT W/SPHEN TISS RMVL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31267	CPT	NSL/SINUS NDSC MAX ANTROST W/RMVL TISS MAX SINUS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31276	CPT	NASAL/SINUS NDSC W/RMVL TISS FROM FRONTAL SINUS	N	NA

ALOHAC	Q3 2025	Outpatient Hosp	31287	CPT	NASAL/SINUS ENDOSCOPY W/SPHENOIDOTOMY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31288	CPT	NSL/SINUS NDSC SPHENDT RMVL TISS SPHENOID SINUS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31292	CPT	NASAL/SINUS NDSC SURG MEDIAL/INF ORB WALL DCMPRN	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31293	CPT	NASAL/SINUS NDSC SURG MEDIAL&INF ORB WALL DCMPRN	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31294	CPT	NASAL/SINUS NDSC SURG W/OPTIC NERVE DCMPRN	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31295	CPT	NASAL/SINUS NDSC SURG W/DILATION MAXILLARY SINUS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31296	CPT	NASAL/SINUS NDSC SURG W/DILATION FRONTAL SINUS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31297	CPT	NASAL/SINUS NDSC SURG W/DILATION SPHENOID SINUS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31298	CPT	NASAL/SINUS NDSC SURG W/DILATION FRNT&SPHN SINUS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31300	CPT	LARYNGOTOMY W/RMVL TUMOR/LARYNGOCELE CORDECTOMY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	31360	CPT	LARYNGECTOMY TOTAL W/O RADICAL NECK DISSECTION	N NA
ALOHAC	Q3 2025	Inpatient Hosp	31365	CPT	LARYNGECTOMY TOTAL W/RADICAL NECK DISSECTION	N NA
ALOHAC	Q3 2025	Inpatient Hosp	31367	CPT	LARYNGECTOMY STOT SUPRAGLOTTIC W/O RAD NECK DSJ	N NA
ALOHAC	Q3 2025	Inpatient Hosp	31368	CPT	LARYNGECTOMY STOT SUPRAGLOTTIC W/RAD NCK DSJ	N NA
ALOHAC	Q3 2025	Inpatient Hosp	31370	CPT	PARTIAL LARYNGECTOMY HEMILARYGECTOMY HORIZONTAL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	31375	CPT	PARTIAL LARYNGECTOMY HEMILARYNG LATEROVERTICAL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	31380	CPT	PARTIAL LARYNGECTOMY HEMILARYNG ANTEROVERTICAL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	31382	CPT	PARTIAL LARYNG HEMILARYNG ANTERO-LATERO-VERTICAL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	31390	CPT	PHARYNGOLARYNGECTOMY W/RAD NECK DSJ W/O RCNSTJ	N NA
ALOHAC	Q3 2025	Inpatient Hosp	31395	CPT	PHARYNGOLARYNGECTOMY W/RAD NECK DSJ W/RCNSTJ	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31400	CPT	ARYTENOIDECTOMY/ARYTENOIDOPEXY XTRNL APPROACH	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31420	CPT	EPIGLOTTIDECTOMY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31505	CPT	LARYNGOSCOPY INDIRECT DIAGNOSTIC SPX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31510	CPT	LARYNGOSCOPY INDIRECT W/BIOPSY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31512	CPT	LARYNGOSCOPY INDIRECT W/REMOVAL LESION	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31513	CPT	LARYNGOSCOPY INDIRECT W/VOCAL CORD INJECTION	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31535	CPT	LARYNGOSCOPY DIRECT OPERATIVE W/BIOPSY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31536	CPT	LARYNGOSCOPY W/BIOPSY MICROSCOPE/TELESCOPE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31540	CPT	LARYNGOSCOPY EXC TUM&/STRIPPING CORDS/EPIGLOTT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31541	CPT	LARGSC EXC TUM&/STRPG CORDS/EPIGL MCRSCP/TLSCP	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31545	CPT	LARGSC MICRO/TELESCOPE RMVL LES VOCAL CORD FLAP	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31546	CPT	LARGSC MICRO/TELESCOPE RMVL LES VOCAL CORD GRAFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31554	CPT	LARYNGOPLASTY LARYNGEAL STEN W/STENT 12 YRS >	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31560	CPT	LARYNGOSCOPY DIRECT OPERATIVE W/ARYTENOIDECTOMY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31561	CPT	LARGSC ARYTENOIDECTOMY MICROSCOPE/TELESCOPE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31570	CPT	LARYNGOSCOPE INJECTION VOCAL CORD THERAPEUTIC	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31571	CPT	LARGSC W/NJX VOCAL CORD THER W/MICRO/TELESCOPE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31578	CPT	LARYNGOSCOPY FLEXIBLE RMVL LESION(S) NON-LASER	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31579	CPT	LARYNGOSCOPY FLX/RGD TELESCOPIC W/STROBOSCOPY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31580	CPT	LARYNGOPLASTY LARYN WEB W/KEEL STENT INSERTION	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31587	CPT	LARYNGOPLASTY CRICOID SPLIT W/O GRAFT PLACEMENT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31590	CPT	LARYNGEAL REINNERVATION NEUROMUSCULAR PEDICLE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31600	CPT	TRACHEOSTOMY PLANNED SEPARATE PROCEDURE	N NA
ALOHAC	Q3 2025	Inpatient Hosp	31601	CPT	TRACHEOSTOMY PLANNED UNDER 2 YEARS SPX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31610	CPT	TRACHEOSTOMY FENESTRATION W/SKIN FLAPS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31611	CPT	CONSTJ TRACHEOESOPHAGEAL FSTL&INSJ SP PROSTH	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31612	CPT	TRACHEAL PNXR PERQ W/TRANSTRACHEAL ASPIR&/NJX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31613	CPT	TRACHEOSTOMA REVJ SMPL W/O FLAP ROTATION	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31614	CPT	TRACHEOSTOMA REVJ CPLX W/FLAP ROTATION	N NA
ALOHAC	Q3 2025	Outpatient Hosp	31615	CPT	TRACHEOBRONCHOSCOPY THRU EST TRACHEOSTOMY INC	N NA
ALOHAC	Q3 2025	Diagnostic Testing	31625	CPT	BRONCHOSCOPY BRONCHIAL/ENDOBRNCL BX 1+ SITES	N NA

ALOHAC Q3 2025	Diagnostic Testing	31626	CPT	BRONCHOSCOPY W/PLMT FIDUCIAL MARKERS SINGLE/MULT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	31627	CPT	BRONCHOSCOPY W/CPTR-ASST IMAGE-GUIDED NAVIGATION	N	NA
ALOHAC Q3 2025	Diagnostic Testing	31628	CPT	BRONCHOSCOPY W/TRANSBRONCHIAL LUNG BX 1 LOBE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	31629	CPT	BRONCHOSCOPY NEEDLE BX TRACHEA MAIN STEM&/BRON	N	NA
ALOHAC Q3 2025	Diagnostic Testing	31631	CPT	BRONCHOSCOPY W/PLACEMENT TRACHEAL STENT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	31632	CPT	BRONCHOSCOPY W/TRANSBRONCHIAL LUNG BX EACH LOBE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	31633	CPT	BRONCHOSCOPY W/TRANSBRONCL NDL ASPIR BX EA LOBE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	31634	CPT	BRONCHOSCOPY BALLOON OCCLUSION	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31636	CPT	BRNCHSC W/PLACEMENT BRNCL STENT 1ST BRONCHUS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	31637	CPT	BRONCHOSCOPY EACH MAJOR BRONCHUS STENTED	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31638	CPT	BRNCHSC REVJ TRACHEAL/BRNCL STENT INS PREV SESS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	31640	CPT	BRONCHOSCOPY W/EXCISION TUMOR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31641	CPT	BRNCHSC W/DSTRJ TUM RELIEF STENOSIS OTH/THN EXC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31643	CPT	BRNCHSC W/PLMT CATH INTRCV RADIOELMNT APPL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	31645	CPT	BRONCHOSCOPY W/THER ASPIR TRACHBRNCL TREE 1ST	N	NA
ALOHAC Q3 2025	Diagnostic Testing	31646	CPT	BRONCHOSCOPY W/THER ASPIR TRACHBRNCL TREE SBSQ	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31647	CPT	BRNCHSC OCCLUSION&INSERT BRONCH VALVE INIT LOBE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31648	CPT	BRNCHSC REMOVAL BRONCHIAL VALVE INITIAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31649	CPT	BRNCHSC REMOVAL BRONCHIAL VALVE EA ADDL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31651	CPT	BRNCHSC OCCLUSION&INSERT BRONCH VALVE ADDL LOBE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31652	CPT	BRNCHSC EBUS GUIDED SAMPL 1/2 NODE STATION/STRUX	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31653	CPT	BRNCHSC EBUS GUIDED SAMPL 3/> NODE STATION/STRUX	N	NA
ALOHAC Q3 2025	Diagnostic Testing	31654	CPT	BRNSCHSC TNDSC EBUS DX/TX INTERVENTION PERPH LES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	31660	CPT	BRONCHOSCOPIC THERMOPLASTY ONE LOBE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	31661	CPT	BRONCHOSCOPIC THERMOPLASTY 2/> LOBES	N	NA
ALOHAC Q3 2025	Inpatient Hosp	31725	CPT	CATH ASPIR TRACHEOBRNCL FIBERSCOPE BEDSIDE SPX	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31730	CPT	TTRACH INTRO NDL WIRE DIL/STENT/TUBE O2 THER	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31750	CPT	TRACHEOPLASTY CERVICAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31755	CPT	TRACHEOPLASTY TRACHEOPHARYNGEAL FSTLJ EA STAGE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	31760	CPT	TRACHEOPLASTY INTRATHORACIC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	31766	CPT	CARINAL RECONSTRUCTION	N	NA
ALOHAC Q3 2025	Inpatient Hosp	31770	CPT	BRONCHOPLASTY GRAFT REPAIR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	31775	CPT	BRONCHOPLASTY EXCISION STENOSIS & ANASTOMOSIS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	31780	CPT	EXCISION TRACHEAL STENOSIS&ANASTOMOSIS CERVICA	N	NA
ALOHAC Q3 2025	Inpatient Hosp	31781	CPT	EXC TRACHEAL STENOSIS&ANAST CERVICOTHORACIC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31785	CPT	EXCISION TRACHEAL TUMOR/CARCINOMA CERVICAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	31786	CPT	EXCISION TRACHEAL TUMOR/CARCINOMA THORACIC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	31800	CPT	SUTURE TRACHEAL WOUND/INJURY CERVICAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	31805	CPT	SUTURE TRACHEAL WOUND/INJURY INTRATHORACIC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31820	CPT	SURG CLSR TRACHEOSTOMY/FISTULA W/O PLASTIC RPR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31825	CPT	SURG CLSR TRACHEOSTOMY/FISTULA W/PLASTIC RPR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	31830	CPT	REVISION TRACHEOSTOMY SCAR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32035	CPT	THORACOSTOMY W/RIB RESECTION EMPYEMA	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32036	CPT	THORACOSTOMY OPEN FLAP DRAINAGE EMPYEMA	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32096	CPT	THORACTOMY W/DX BX LUNG INFILTRATE UNILATERAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32097	CPT	THORACTOMY W/DX BX LUNG NODULE/MASS UNILATERAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32098	CPT	THORACOTOMY W/BIOPSY OF PLEURA	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32100	CPT	THORACOTOMY WITH EXPLORATION	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32110	CPT	THORCOM CTRL TRAUMTC HEMRRG&/RPR LNG TEAR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32120	CPT	THORACOTOMY POSTOPERATIVE COMPLICATIONS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32124	CPT	THORACOTOMY OPN INTRAPLEURAL PNEUMONOLYSIS	N	NA

ALOHAC Q3 2025	Inpatient Hosp	32140	CPT	THORCOM W/REMOVAL OF CYST	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32141	CPT	THORACOTOMY W/RESECTION BULLAE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32160	CPT	THORACOTOMY W/CARDIAC MASSAGE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32215	CPT	PLEURAL SCARIFICATION REPEAT PNEUMOTHORAX	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32220	CPT	DECORTICATION PULMONARY TOTAL SEPARATE PROCEDURE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32225	CPT	DECORTICATION PULMONARY PARTIAL SEPARATE PROC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32310	CPT	PLEURECTOMY PARIETAL SEPARATE PROCEDURE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32320	CPT	DECORTICATION & PARIETAL PLEURECTOMY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	32400	CPT	BIOPSY PLEURA PERCUTANEOUS NEEDLE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32440	CPT	REMOVAL OF LUNG PNEUMONECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32442	CPT	REMOVAL LUNG PNEUMONECTOMY RESXN SGMNT TRACHEA	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32445	CPT	REMOVAL LUNG PNEUMONECTOMY EXTRAPLEURAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32480	CPT	RMVL LUNG OTHER THAN PNEUMONECTOMY 1 LOBE LOBECT	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32482	CPT	RMVL LUNG OTHER THAN PNEUMONECT 2 LOBES BILOBEC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32484	CPT	RMVL LUNG OTHER THAN PNEUMONECT 1 SEGMENTECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32486	CPT	RMVL LUNG XCP TOT PNEUMONECTOMY SLEEVE LOBECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32488	CPT	RMVL LUNG OTHER/THAN PNUMEC COMPLETION PNUMEC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32491	CPT	RMVL LUNG OTH/THN PNUMEC RESXN-PLCTJ EMPHY LUNG	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32501	CPT	RESCJ&BRONCHOPLASTY PFRMD TM LOBEC/SGMECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32503	CPT	RESCJ APICAL LUNG TUMOR W/O CHEST WALL RCNSTJ	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32504	CPT	RESCJ APICAL LUNG TUMOR W/CHEST WALL RCNSTJ	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32505	CPT	THORACOTOMY W/THERAPEUTIC WEDGE RESEXN INITIAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32506	CPT	THORACOTOMY W/THERAP WEDGE RESEXN ADDL IPSILATRL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32507	CPT	THORACOTOMY W/DX WEDGE RESEXN & ANTOM LUNG RESE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32540	CPT	EXTRAPLEURAL ENUCLEATION EMPYEMA EMPYEMECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32650	CPT	THORACOSCOPY W/PLEURODESIS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32651	CPT	THORACOSCOPY W/PARTIAL PULMONARY DECORTICATION	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32652	CPT	THRSC TOT PULM DCRTCTJ INTRAPLEURAL PNEUMONOLSS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32653	CPT	THORACOSCOPY RMVL INTRAPLEURAL FB/FIBRIN DEPOSIT	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32654	CPT	THORACOSCOPY CONTROL TRAUMATIC HEMORRHAGE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32655	CPT	THORACOSCOPY W/RESECTION BULLAE W/WO PLEURAL PX	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32656	CPT	THORACOSCOPY W/PARIETAL PLEURECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32658	CPT	THORACOSCOPY W/RMVL CLOT/FB FROM PERICARDIAL SAC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32659	CPT	THRSC CRTJ PRCRD WINDOW/PRTL RESCJ PRCRD SAC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32661	CPT	THORACOSCOPY W/EXC PERICARDIAL CYST TUMOR/MASS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32662	CPT	THORACOSCOPY W/EXC MEDIASTINAL CYST TUMOR/MASS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32663	CPT	THORACOSCOPY W/LOBECTOMY SINGLE LOBE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32664	CPT	THORACOSCOPY W/THORACIC SYMPATHECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32665	CPT	THORACOSCOPY W/ESOPHAGOMYOTOMY HELLER TYPE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32666	CPT	THORACOSCOPY W/THERA WEDGE RESEXN INITIAL UNILAT	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32667	CPT	THORACOSCOPY W/THERA WEDGE RESEXN ADDL IPSILATRL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32668	CPT	THORACOSCOPY W/DX WEDGE RESEXN ANATO LUNG RESEXN	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32669	CPT	THORACOSCOPY W/SEGMENTECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32670	CPT	THORACOSCOPY W/BILOBECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32671	CPT	THORACOSCOPY W/PNEUMONECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32672	CPT	THORACOSCOPY W/RESEXN-PLICAJ EMPHYSEMA LUNG UNIL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32673	CPT	THORACOSCOPY RESEXN THYMUS UNI/BILATERAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32674	CPT	THORCOSCPY W/MEDIASTINL & REGIONL LYMPHDENECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32820	CPT	MAJOR RECONSTRUCTION CHEST WALL POSTTRAUMATIC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32900	CPT	RESECTION RIBS EXTRAPLEURAL ALL STAGES	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32905	CPT	THORACOPLASTY SCHEDE TYPE/EXTRAPLEURAL	N	NA

ALOHAC Q3 2025	Inpatient Hosp	32906	CPT	THORACOP SCHEDE TYP/XTRPLEURAL CLSR BRNCPLR FSTL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32940	CPT	PNEUMONOLYSIS XTRPRIOSTEAL W/FILLING/PACKING PX	N	NA
ALOHAC Q3 2025	Inpatient Hosp	32997	CPT	TOTAL LUNG LAVAGE UNILATERAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	33267	CPT	EXCLUSION LEFT ATRIAL APPENDAGE OPEN ANY METHOD	N	NA
ALOHAC Q3 2025	Inpatient Hosp	33268	CPT	EXCLUSION LAA OPEN TM STRNT/THRCM ANY METHOD	N	NA
ALOHAC Q3 2025	Inpatient Hosp	33269	CPT	EXCLUSION L ATR APPENDAGE THORACOSCOPIC ANY METH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	33270	CPT	INS/RPLCMNT PERM SUBQ IMPLTBL DFB W/SUBQ ELTRD	N	NA
ALOHAC Q3 2025	Outpatient Hosp	33271	CPT	INSJ OF SUBQ IMPLANTABLE DEFIBRILLATOR ELECTRODE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	33272	CPT	RMVL OF SUBQ IMPLANTABLE DEFIBRILLATOR ELECTRODE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	33273	CPT	REPOS PREVIOUSLY IMPLANTED SUBQ IMPLANTABLE DFB	N	NA
ALOHAC Q3 2025	Outpatient Hosp	33274	CPT	TCAT INSJ/RPL PERM LEADLESS PACEMAKER RV W/IMG	N	NA
ALOHAC Q3 2025	Outpatient Hosp	33275	CPT	TCAT REMOVAL PERM LEADLESS PM RIGHT VENTR W/IMG	N	NA
ALOHAC Q3 2025	Physician Services	33276	CPT	INSERTION PHRENIC NERVE STIMULATOR SYSTEM	N	NA
ALOHAC Q3 2025	Physician Services	33277	CPT	INSJ PHRENIC NRV STIMULATOR TRANSVNS SENSING LD	N	NA
ALOHAC Q3 2025	Physician Services	33278	CPT	REMOVAL PHRENIC NERVE STIMULATOR SYSTEM	N	NA
ALOHAC Q3 2025	Physician Services	33279	CPT	RMVL PHRNC NRV STIMULATOR TRANSVNS STIMJ/SNSG LD	N	NA
ALOHAC Q3 2025	Physician Services	33280	CPT	RMVL PHRENIC NRV STIMULATOR PULSE GENERATOR ONLY	N	NA
ALOHAC Q3 2025	Physician Services	33281	CPT	REPOSITIONING PHRENIC NRV STIMULATOR TRANSVNS LD	N	NA
ALOHAC Q3 2025	Physician Services	33287	CPT	RMVL&RPLCMT PHRENIC NRV STIMULATOR PLS GENERATOR	N	NA
ALOHAC Q3 2025	Physician Services	33288	CPT	RMVL&RPLCMT PHRNC NRV STIM TRNSVNS STIMJ/SNSG LD	N	NA
ALOHAC Q3 2025	Inpatient Hosp	33370	CPT	TRANSCATHETER PLACEMENT&SBSQ REMOVAL CEPD PERQ	N	NA
ALOHAC Q3 2025	Inpatient Hosp	33509	CPT	ENDOSCOPIC HARVEST UXTR ARTERY 1 SEGMENT CAB PX	N	NA
ALOHAC Q3 2025	Inpatient Hosp	33894	CPT	EVASC ST RPR COARCJ THRC/AA ACRS MAJ SIDE BRNCH	N	NA
ALOHAC Q3 2025	Inpatient Hosp	33895	CPT	EVASC ST RPR COARCJ THRC/AA XCRSG MAJ SIDE BRNCH	N	NA
ALOHAC Q3 2025	Inpatient Hosp	33897	CPT	PERQ TRANSLUMINAL ANGIOPLASTY NATIVE/RECR COA	N	NA
ALOHAC Q3 2025	Inpatient Hosp	33900	CPT	PERQ P-ART REVSC ST 1ST NML NATIVE CONNJ UNI	N	NA
ALOHAC Q3 2025	Inpatient Hosp	33901	CPT	PERQ P-ART REVSC ST 1ST NML NATIVE CONNJ BI	N	NA
ALOHAC Q3 2025	Inpatient Hosp	33902	CPT	PERQ P-ART REVSC ST 1ST ABNOR CONNJ UNILATERAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	33903	CPT	PERQ P-ART REVSC ST 1ST ABNORMAL CONNJ BILATERAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	33904	CPT	PERQ P-ART REVSC ST EA ADDL VSL/SEP LES NM/ABNL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35501	CPT	BYPASS W/VEIN COMMON-IPSILATERAL CAROTID	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35506	CPT	BYPASS W/VEIN CAROTID-SUBCLV/SUBCLAVIAN CAROTID	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35508	CPT	BYPASS W/VEIN CAROTID-VERTEBRAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35509	CPT	BYPASS W/VEIN CAROTID-CONTRALATERAL CAROTID	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35510	CPT	BYPASS W/VEIN CAROTID-BRACHIAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35511	CPT	BYPASS W/VEIN SUBCLAVIAN-SUBCLAVIAN	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35512	CPT	BYPASS W/VEIN SUBCLAVIAN-BRACHIAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35515	CPT	BYPASS W/VEIN SUBCLAVIAN-VERTEBRAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35516	CPT	BYPASS W/VEIN SUBCLAVIAN-AXILLARY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35518	CPT	BYPASS W/VEIN AXILLARY-AXILLARY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35521	CPT	BYPASS W/VEIN AXILLARY-FEMORAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35522	CPT	BYPASS W/VEIN AXILLARY-BRACHIAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35523	CPT	BYPASS W/VEIN BRACHIAL-ULNAR/-RADIAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35525	CPT	BYPASS W/VEIN BRACHIAL-BRACHIAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35526	CPT	BYPASS W/VEIN AORTOSUBCLAV/CAROTID/INNOMINATE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35531	CPT	BYPASS W/VEIN AORTOCELIAC/AORTOMESENTERIC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35533	CPT	BYPASS W/VEIN AXILLARY-FEMORAL-FEMORAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35535	CPT	BYPASS W/VEIN HEPATORENAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35536	CPT	BYPASS W/VEIN SPLENORENAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35537	CPT	BYPASS W/VEIN AORTOILIAC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35538	CPT	BYPASS W/VEIN AORTOBI-ILIAC	N	NA

ALOHAC Q3 2025	Inpatient Hosp	35539	CPT	BYPASS W/VEIN AORTOFEMORAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35540	CPT	BYPASS W/VEIN AORTOBIFEMORAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35556	CPT	BYPASS W/VEIN FEMORAL-POPLITEAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35558	CPT	BYPASS W/VEIN FEMORAL-FEMORAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35560	CPT	BYPASS W/VEIN AORTORENAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35563	CPT	BYPASS W/VEIN ILIOILIAC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35565	CPT	BYPASS W/VEIN ILIOFEMORAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35566	CPT	BYP FEM-ANT TIBL PST TIBL PRONEAL ART/OTH DSTL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35570	CPT	BYP TIBL-TIBL/PRONEAL-TIBL/TIBL/PRONEAL TRK-TIBL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35571	CPT	BYP W/VEIN POP-TIBL-PRONEAL ART/OTH DSTL VSL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	35572	CPT	HARVEST FEMPOP VEIN 1 SGM VASC RCNSTJ PX	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35583	CPT	IN-SITU VEIN BYPASS FEMORAL-POPLITEAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35585	CPT	IN-SITU FEM-ANT TIBL PST TIBL/PRONEAL ART	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35587	CPT	IN-SITU VEIN BYP POP-TIBL PRONEAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35600	CPT	OPEN HARVEST UPPER EXTREMITY ART 1 SEGMENT CAB	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35601	CPT	BYP OTH/THN VEIN COMMON-IPSILATERAL CAROTID	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35606	CPT	BYP OTH/THN VEIN CAROTID-SUBCLAVIAN	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35612	CPT	BYP OTH/THN VEIN SUBCLAVIAN-SUBCLAVIAN	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35616	CPT	BYP OTH/THN VEIN SUBCLAVIAN-AXILLARY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35621	CPT	BYP OTH/THN VEIN AXILLARY-FEMORAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35623	CPT	BYP OTH/THN VEIN AXILLARY-POPLITEAL/-TIBIAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35626	CPT	BYPASS NOT VEIN AORTOSUBCLA/CAROTID/INNOMINATE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35631	CPT	BYP OTH/THN VEIN AORTOCELIAC AORTOMSN AORTORNL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35632	CPT	BYPASS GRAFT W/OTHER THAN VEIN ILIO-CELIAC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35633	CPT	BYPASS GRAFT W/OTHER THAN VEIN ILIO-MESENTERIC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35634	CPT	BYPASS GRAFT W/OTHER THAN VEIN ILIORENAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35636	CPT	BYP OTH/THN VEIN SPLENORENAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35637	CPT	BYP OTH/THN VEIN AORTOILIAC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35638	CPT	BYP OTH/THN VEIN AORTOBI-ILIAC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35642	CPT	BYP OTH/THN VEIN CAROTID-VERTEBRAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35645	CPT	BYP OTH/THN VEIN SUBCLAVIAN-VERTEBRAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35646	CPT	BYP OTH/THN VEIN AORTOBIFEMORAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35647	CPT	BYP OTH/THN VEIN AORTOFEMORAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35650	CPT	BYP OTH/THN VEIN AXILLARY-AXILLARY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35654	CPT	BYP OTH/THN VEIN AXILLARY-FEMORAL-FEMORAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35656	CPT	BYP OTH/THN VEIN FEMORAL-POPLITEAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35661	CPT	BYP OTH/THN VEIN FEMORAL-FEMORAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35663	CPT	BYP OTH/THN VEIN ILIOILIAC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35665	CPT	BYP OTH/THN VEIN ILIOFEMORAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35666	CPT	BYP OTH/THN VEIN FEM-ANT TIBL PST TIBL/PRONEAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35671	CPT	BYP OTH/THN VEIN POPLITEAL-TIBIAL/-PERONEAL ART	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35681	CPT	BYPASS COMPOSITE GRAFT PROSTHETIC & VEIN	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35682	CPT	BYP AUTOG COMPOSIT 2 SEG VEINS FROM 2 LOCATIONS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35683	CPT	BYP AUTOG COMPOSIT 3/> SEG FROM 2/> LOCATION	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35691	CPT	TRPOS&/RIMPLTJ VERTEBRAL CAROTID ART	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35693	CPT	TRPOS&/RIMPLTJ VERTEBRAL SUBCLAVIAN ART	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35694	CPT	TRPOS&/RIMPLTJ SUBCLAVIAN CAROTID ART	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35695	CPT	TRPOS&/RIMPLTJ CAROTID SUBCLAVIAN ART	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35697	CPT	RIMPLTJ VISC ART INFRARNL AORTIC PROSTH EA ART	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35700	CPT	ROPRTJ > 1 MO AFTER ORIGINAL OPRATION	N	NA
ALOHAC Q3 2025	Inpatient Hosp	35701	CPT	EXPLORATION N/FLWD SURG NECK ARTERY	N	NA

ALOHAC	Q3 2025	Physician Services	36465	CPT	NJX NONCMPND SCLEROSANT SINGLE INCMPTNT VEIN	N NA
ALOHAC	Q3 2025	Physician Services	36466	CPT	NJX NONCMPND SCLEROSANT MULTIPLE INCMPTNT VEINS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	36468	CPT	INJECTIONS SCLEROSANT FOR SPIDER VEINS LIM/TRNK	N NA
ALOHAC	Q3 2025	Physician Services	36468	CPT	INJECTIONS SCLEROSANT FOR SPIDER VEINS LIM/TRNK	N NA
ALOHAC	Q3 2025	Outpatient Hosp	36470	CPT	INJECTION SCLEROSANT SINGLE INCMPTNT VEIN	N NA
ALOHAC	Q3 2025	Outpatient Hosp	36471	CPT	INJECTION SCLEROSANT MULTIPLE INCMPTNT VEINS	N NA
ALOHAC	Q3 2025	Physician Services	36471	CPT	INJECTION SCLEROSANT MULTIPLE INCMPTNT VEINS	N NA
ALOHAC	Q3 2025	Physician Services	36473	CPT	ENDOVEN ABLTJ INCMPTNT VEIN MCHNCHEM 1ST VEIN	N NA
ALOHAC	Q3 2025	Physician Services	36474	CPT	ENDOVEN ABLTJ INCMPTNT VEIN MCHNCHEM SBSQ VEINS	N NA
ALOHAC	Q3 2025	Physician Services	36475	CPT	ENDOVEN ABLTJ INCMPTNT VEIN XTR RF 1ST VEIN	N NA
ALOHAC	Q3 2025	Rehab Services	36475	CPT	ENDOVEN ABLTJ INCMPTNT VEIN XTR RF 1ST VEIN	N NA
ALOHAC	Q3 2025	Outpatient Hosp	36476	CPT	ENDOVEN ABLTJ INCMPTNT VEIN XTR RF 2ND+ VEINS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	36478	CPT	ENDOVEN ABLTJ INCMPTNT VEIN XTR LASER 1ST VEIN	N NA
ALOHAC	Q3 2025	Outpatient Hosp	36479	CPT	ENDOVEN ABLTJ INCMPTNT VEIN XTR LASER 2ND+ VEINS	N NA
ALOHAC	Q3 2025	Physician Services	36482	CPT	ENDOVEN ABLTI THER CHEM ADHESIVE 1ST VEIN	N NA
ALOHAC	Q3 2025	Physician Services	36483	CPT	ENDOVEN ABLTI THER CHEM ADHESIVE SBSQ VEIN	N NA
ALOHAC	Q3 2025	Physician Services	36836	CPT	PERQ AV FISTULA CREATION UXTR SINGLE ACCESS	N NA
ALOHAC	Q3 2025	Physician Services	36837	CPT	PERQ AV FISTULA CREATION UXTR SEP ACCESS SITES	N NA
ALOHAC	Q3 2025	Outpatient Hosp	37700	CPT	LIG&DIV LONG SAPH VEIN SAPHFEM JUNCT/INTERRUPJ	N NA
ALOHAC	Q3 2025	Outpatient Hosp	37718	CPT	LIG DIV & STRIPPING SHORT SAPHENOUS VEIN	N NA
ALOHAC	Q3 2025	Outpatient Hosp	37722	CPT	LIG DIV&STRPG LONG SAPH SAPHFEM JUNCT KNE/BELW	N NA
ALOHAC	Q3 2025	Outpatient Hosp	37735	CPT	LIG&DIV&COMPL STRPG LONG/SHRT SAPHENOUS VN W/EXC	N NA
ALOHAC	Q3 2025	Outpatient Hosp	37760	CPT	LIG PRFRATR VEINS SUBF RAD W/SKN GRAFT OPN 1 LEG	N NA
ALOHAC	Q3 2025	Outpatient Hosp	37761	CPT	LIG PRFRATR VEIN SUBFSCAL OPEN INCL US GID 1 LEG	N NA
ALOHAC	Q3 2025	Physician Services	37765	CPT	STAB PHLEBT VARICOSE VEINS 1 XTR 10-20 STAB INCS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	37765	CPT	STAB PHLEBT VARICOSE VEINS 1 XTR 10-20 STAB INCS	N NA
ALOHAC	Q3 2025	Physician Services	37766	CPT	STAB PHLEBT VARICOSE VEINS 1 XTR > 20 INCS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	37780	CPT	LIGJ & DIV SHORT SAPH VEIN SAPHENOPOP JUNCT SPX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	37785	CPT	LIGJ DIVJ &/EXCJ VARICOSE VEIN CLUSTER 1 LEG	N NA
ALOHAC	Q3 2025	Inpatient Hosp	37788	CPT	PENILE REVASCULARIZATION ARTERY W/WO VEIN GRAFT	N NA
ALOHAC	Q3 2025	Inpatient Hosp	38100	CPT	SPLENECTOMY TOTAL SEPARATE PROCEDURE	N NA
ALOHAC	Q3 2025	Inpatient Hosp	38101	CPT	SPLENECTOMY PARTIAL SEPARATE PROCEDURE	N NA
ALOHAC	Q3 2025	Inpatient Hosp	38102	CPT	SPLENC TOT EN BLOC EXTNSV DS CONJUNCT W/OTH PX	N NA
ALOHAC	Q3 2025	Diagnostic Testing	38225	CPT	CAR-T THERAPY HRVG BLD-DRV T LYMPHCYT PR DAY	N NA
ALOHAC	Q3 2025	Diagnostic Testing	38226	CPT	CAR-T THERAPY PREPJ BLD-DRV T LYMPHCYT F/TRNS	N NA
ALOHAC	Q3 2025	Physician Services	38227	CPT	CAR-T THERAPY RECEIPT & PREPJ CAR-T CELLS F/ADMN	N NA
ALOHAC	Q3 2025	Physician Services	38228	CPT	CAR-T THERAPY AUTOL CAR-T CELL ADMINISTRATION	N NA
ALOHAC	Q3 2025	Inpatient Hosp	38381	CPT	SUTR&/LIG THORACIC DUCT THORACIC APPROACH	N NA
ALOHAC	Q3 2025	Inpatient Hosp	38382	CPT	SUTR&/LIG THORACIC DUCT ABDOMINAL APPROACH	N NA
ALOHAC	Q3 2025	Inpatient Hosp	38562	CPT	LMTD LMPHADEC STAGING SPX PEL&PARA-AORTIC	N NA
ALOHAC	Q3 2025	Inpatient Hosp	38564	CPT	LMTD LMPHADEC STAGING SPX RPR AORTIC&/SPLENIC	N NA
ALOHAC	Q3 2025	Inpatient Hosp	38765	CPT	INGUINOFEM LMPHADEC SUPFC W/PEL LMPHADEC	N NA
ALOHAC	Q3 2025	Inpatient Hosp	38770	CPT	PEL LMPHADEC W/XTRNL ILIAC HYPOGSTR&OBTURATOR	N NA
ALOHAC	Q3 2025	Inpatient Hosp	38780	CPT	RPR TABDL LMPHADEC EXTNSV W/PEL AORTIC&RNL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	39200	CPT	RESECTION OF MEDIASTINAL CYST	N NA
ALOHAC	Q3 2025	Inpatient Hosp	39220	CPT	RESECTION MEDIASTINAL TUMOR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	40490	CPT	BIOPSY OF LIP	N NA
ALOHAC	Q3 2025	Outpatient Hosp	40500	CPT	VERMILIONECTOMY LIP SHV W/MUCOSAL ADVMNT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	40510	CPT	EXC LIP TRANSVRS WEDGE EXC W/PRIM CLSR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	40520	CPT	EXC LIP V-EXC W/PRIM DIR LINR CLSR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	40525	CPT	EXC LIP FULL THKNS RCNSTJ W/LOCAL FLAP	N NA

ALOHAC Q3 2025	Outpatient Hosp	40527	CPT	EXC LIP FULL THKNS RCNSTJ W/CROSS LIP FLAP	N	NA
ALOHAC Q3 2025	Outpatient Hosp	40530	CPT	RESCJ LIP > ONE-FOURTH W/O RCNSTJ	N	NA
ALOHAC Q3 2025	Outpatient Hosp	40650	CPT	REPAIR LIP FULL THICKNESS VERMILION ONLY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	40652	CPT	REPAIR LIP FULL THICKNESS <HALF VERTICAL HEIGHT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	40654	CPT	RPR LIP FTH OVER ONE-HALF VERT HEIGHT/COMPLEX	N	NA
ALOHAC Q3 2025	Physician Services	4066F	CPT	ELECTROCONVULSIVE THERAPY (ECT) PROVIDED	N	NA
ALOHAC Q3 2025	Outpatient Hosp	40700	CPT	PLSTC RPR CL LIP/NSL DFRM PRIM PRTL/COMPL UNI	N	NA
ALOHAC Q3 2025	Outpatient Hosp	40701	CPT	PLSTC RPR CL LIP/NSL DFRM PRIM BI 1 STG PX	N	NA
ALOHAC Q3 2025	Outpatient Hosp	40702	CPT	PLSTC RPR CL LIP/NSL DFRM PRIM BI 1 2 STGS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	40720	CPT	PLSTC RPR CL LIP/NSL DFRM SEC RECRTJ DFCT & RECL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	40761	CPT	PLSTC RPR CL LIP/NSL DFRM W/CROSS LIP PEDCL FLAP	N	NA
ALOHAC Q3 2025	Outpatient Hosp	40806	CPT	INCISION LABIAL FRENUM FRENOTOMY	N	NA
ALOHAC Q3 2025	Physician Services	40820	CPT	DSTRJ LES/SCAR VESTIBULE MOUTH PHYSICAL METHS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	40842	CPT	VESTIBULOPLASTY POSTERIOR UNILATERAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	40843	CPT	VESTIBULOPLASTY POSTERIOR BILATERAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	40844	CPT	VESTIBULOPLASTY ENTIRE ARCH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	40845	CPT	VESTIBULOPLASTY CPLX W/RIDGE XTN MUSC RPSG	N	NA
ALOHAC Q3 2025	Inpatient Hosp	41130	CPT	GLOSSECTOMY HEMIGLOSSECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	41135	CPT	GLOSSECTOMY PRTL W/UNI RADICAL NECK DSJ	N	NA
ALOHAC Q3 2025	Inpatient Hosp	41140	CPT	GLSSC COMPL/TOT W/WOTRACHS W/O RAD NECK DSJ	N	NA
ALOHAC Q3 2025	Inpatient Hosp	41145	CPT	GLSSC COMPL/TOT W/WO TRACHS W/UNI RAD NECK DSJ	N	NA
ALOHAC Q3 2025	Inpatient Hosp	41150	CPT	GLSSC COMPOSIT W/RESCJ FLOOR & MANDIBULAR RESCJ	N	NA
ALOHAC Q3 2025	Inpatient Hosp	41153	CPT	GLSSC COMPOSIT RESCJ FLOOR SUPRAHYOID NCK DSJ	N	NA
ALOHAC Q3 2025	Inpatient Hosp	41155	CPT	GLSSC COMPOSIT RESCJ FLR MNDBLR RESCJ & RAD NECK	N	NA
ALOHAC Q3 2025	Outpatient Hosp	41820	CPT	GINGIVECTOMY EXC GINGIVA EACH QUADRANT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	41821	CPT	OPRCULECTOMY EXC PRICORONAL TISSUE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	41822	CPT	EXC FIBROUS TUBEROSITIES DENTOALVEOLAR STRUXS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	41823	CPT	EXC OSS TUBEROSITIES DENTOALVEOLAR STRUXS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	41825	CPT	EXC LESION/TUMOR DENTOALVEOLAR STRUX W/O RPR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	41826	CPT	EXC LESION/TUMOR DENTOALVEOLAR STRUX W/SMPL RPR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	41870	CPT	PERIODONTAL MUCOSAL GRAFTING	N	NA
ALOHAC Q3 2025	Outpatient Hosp	41872	CPT	GINGIVOPLASTY EACH QUADRANT SPECIFY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	41874	CPT	ALVEOLOPLASTY EACH QUADRANT SPECIFY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	42104	CPT	EXC LESION PALATE UVULA W/O CLOSURE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	42106	CPT	EXC LESION PALATE UVULA W/SMPL PRIM CLOSURE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	42107	CPT	EXC LESION PALATE UVULA W/LOCAL FLAP CLOSURE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	42120	CPT	RESCJ PALATE/EXTENSIVE RESCJ LESION	N	NA
ALOHAC Q3 2025	Outpatient Hosp	42140	CPT	UVULECTOMY EXCISION UVULA	N	NA
ALOHAC Q3 2025	Outpatient Hosp	42145	CPT	PALATOPHARYNGOPLASTY	N	NA
ALOHAC Q3 2025	Physician Services	42160	CPT	DSTRJ LESION PALATE/UVULA THERMAL CRYO/CHEM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	42226	CPT	LENGTHENING PALATE & PHARYNGEAL FLAP	N	NA
ALOHAC Q3 2025	Outpatient Hosp	42227	CPT	LENGTHENING PALATE W/ISLAND FLAP	N	NA
ALOHAC Q3 2025	Outpatient Hosp	42235	CPT	REPAIR ANTERIOR PALATE W/VOMER FLAP	N	NA
ALOHAC Q3 2025	Outpatient Hosp	42260	CPT	REPAIR NASOLABIAL FISTULA	N	NA
ALOHAC Q3 2025	Outpatient Hosp	42280	CPT	MAXILLARY IMPRESJ PALATAL PROSTHESIS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	42281	CPT	INSJ PIN-RETAINED PALATAL PROSTHESIS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	42410	CPT	EXC PRTD TUM/PRTD GLND LAT LOBE W/O NRV DSJ	N	NA
ALOHAC Q3 2025	Outpatient Hosp	42415	CPT	EXC PRTD TUM/PRTD GLND LAT DSJ&PRSRV FACIAL NR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	42420	CPT	EXC PRTD TUM/PRTD GLND TOT DSJ&PRSRV FACIAL NR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	42425	CPT	EXCISION PAROTID TUMOR/GLAND TOTAL EN BLOC RMVL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	42426	CPT	EXC PRTD TUM/PRTD GLND TOT W/UNI RAD NCK DSJ	N	NA

ALOHAC Q3 2025	Outpatient Hosp	42440	CPT	EXCISION SUBMANDIBULAR SUBMAXILLARY GLAND	N	NA
ALOHAC Q3 2025	Outpatient Hosp	42450	CPT	EXISION OF SUBLINGUAL GLAND	N	NA
ALOHAC Q3 2025	Outpatient Hosp	42500	CPT	PLSTC RPR SALIVARY DUX SIALODOCHOPLASTY PRIM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	42505	CPT	PLSTC RPR SALIVARY DUX SIALODOCHOPLASTY SEC/COMP	N	NA
ALOHAC Q3 2025	Outpatient Hosp	42507	CPT	PAROTID DUCT DIVERSION BILATERAL WILKE PX	N	NA
ALOHAC Q3 2025	Outpatient Hosp	42509	CPT	PAROTID DUCT DVRJ BI W/EXC BOTH SUBMNDBLR GLANDS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	42510	CPT	PAROTID DUCT DVRJ BILATERAL WITH LIG BOTH DUCTS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	42953	CPT	PHARYNGOESOPHAGEAL REPAIR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	42975	CPT	DISE DYN EVAL SLEEP DISORDERED BREATHING FLX DX	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43135	CPT	DIVERTICULECTOMY HYPOPHARYNX/ESOPH THRC APPR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	43266	CPT	EGD ENDOSCOPIC STENT PLACEMENT W/WIRE& DILATION	N	NA
ALOHAC Q3 2025	Diagnostic Testing	43270	CPT	EGD ABLATE TUMOR POLYP/LESION W/DILATION& WIRE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	43273	CPT	ENDOSCOPIC PAPILLA CANNULATION BILE/PANCREATIC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43279	CPT	LAPS ESOPHAGOMYOTOMY W/FUNDOPLASTY IF PERFORMED	N	NA
ALOHAC Q3 2025	Outpatient Hosp	43280	CPT	LAPS SURG ESOPG/GSTR FUNDOPLASTY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43283	CPT	LAPS ESOPHAGEAL LENGTHENING ADDL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	43284	CPT	LAPS ESOPHGL SPHNCTR AGMNTJ PLMT DEV CRRPL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	43285	CPT	REMOVAL ESOPHAGEAL SPHINCTER AGMNTJ DEVICE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43300	CPT	ESPHGP CRV APPR W/O RPR TRACHEOESOPHGL FSTL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43305	CPT	ESPHGP CRV APPR W/RPR TRACHEOESOPHGL FSTL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43310	CPT	ESPHGP THRC APPR W/O RPR TRACHEOESOPHGL FSTL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43312	CPT	ESPHGP THRC APPR W/RPR TRACHEOESOPHGL FSTL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43313	CPT	ESPHGP CGEN DFCT THRC APPR W/O RPR FSTL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43314	CPT	ESPHGP CGEN DFCT THRC APPR W/RPR FSTL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43320	CPT	EGST W/WO VAGOTOMY&PYLOROPLASTY TABDL/TTHRC AP	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43325	CPT	ESOPG/GSTR FUNDOPLASTY W/FUNDIC PATCH	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43327	CPT	ESOPG/GSTR FUNDOPLASTY W/LAPAROTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43328	CPT	ESOPG/GSTR FUNDOPLASTY W/THORACOTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43330	CPT	ESOPHAGOMYOTOMY HELLER TYPE ABDOMINAL APPROACH	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43331	CPT	ESOPHAGOMYOTOMY HELLER TYPE THORACIC APPROACH	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43338	CPT	ESOPHAGUS LENGTHENING	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43340	CPT	ESOPHAGOJEJUNOSTOMY W/O TOT GSTRCT ABDL APPR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43341	CPT	ESOPHAGOJEJUNOSTOMY W/O TOT GSTRCT THRC APPR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43351	CPT	ESOPHAGOSTOMY FSTLJ ESOPH XTRNL THRC APPR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43352	CPT	ESOPHAGOSTOMY FSTLJ ESOPH XTRNL CRV APPR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43360	CPT	GI RCNSTJ PREV ESPHG/EXCLUSION W/STOMACH	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43361	CPT	GI RCNSTJ PREV ESPHG/EXCLUSION W/COLON SM INT	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43400	CPT	LIGATION DIRECT ESOPHAGEAL VARICES	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43405	CPT	LIG/STAPLING G-ESOP JUNCT PRE-ESOPHGL PRF8J	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43410	CPT	SUTR ESOPHGL WND/INJ CRV APPR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43415	CPT	SUTR ESOPHGL WND/INJ TTHRC/TABDL APPR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	43497	CPT	TRANSORAL LOWER ESOPHAGEAL MYOTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43520	CPT	PYLOROMYOTOMY CUTTING PYLORIC MUSC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43605	CPT	BIOPSY STOMACH LAPAROTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43620	CPT	GSTRCT TOT W/ESOPHAGOENTEROSTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43621	CPT	GSTRCT TOT W/ROUX-EN-Y RCNSTJ	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43622	CPT	GSTRCT TOT W/FRMJ INTSTINAL POUCH ANY TYPE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43631	CPT	GSTRCT PRTL DSTL W/GASTRODUODENOSTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43632	CPT	GSTRCT PRTL DSTL W/GASTROJEJUNOSTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43633	CPT	GSTRCT PRTL DSTL W/ROUX-EN-Y RCNSTJ	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43634	CPT	GSTRCT PRTL DSTL W/FRMJ INTSTINAL POUCH	N	NA

ALOHAC Q3 2025	Inpatient Hosp	43635	CPT	VAGOTOMY PFRMD W/PRTL DSTL GSTRCT	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43640	CPT	VGTMY W/PYLORPLSTY W/WO GASTROST TRUNCAL/SLCTV	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43641	CPT	VGTMY W/PYLOROPLASTY W/WO GASTROST PARIETAL CELL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43644	CPT	LAPS GSTR RSTCV PX W/BYP ROUX-EN-Y LIMB <150 CM	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43645	CPT	LAPS GSTR RSTCV PX W/BYP&SM INT RCNSTJ	N	NA
ALOHAC Q3 2025	Outpatient Hosp	43770	CPT	LAPS GASTRIC RESTRICTIVE PROCEDURE PLACE DEVICE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43771	CPT	LAPS GASTRIC RESTRICTIVE PX REVISION DEVICE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43772	CPT	LAPS GASTRIC RESTRICTIVE PX REMOVE DEVICE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43773	CPT	LAPS GASTRIC RESTRICTIVE PX REMOVE&RPLCMT DEVICE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43774	CPT	LAPS GASTRIC RESTRICTIVE PX REMOVE DEVICE & PORT	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43775	CPT	LAPS GSTRC RSTRICTIV PX LONGITUDINAL GASTRECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43800	CPT	PYLOROPLASTY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43810	CPT	GASTRODUODENOSTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43820	CPT	GASTROJEJUNOSTOMY W/O VAGOTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43825	CPT	GASTROJEJUNOSTOMY W/VAGOTOMY ANY TYPE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43832	CPT	GASTROSTOMY OPEN W/CONSTJ GASTRIC TUBE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43840	CPT	GASTRORRHAPHY SUTR PRF8 DUOL/GSTR ULCER WND/INJ	N	NA
ALOHAC Q3 2025	Outpatient Hosp	43842	CPT	GASTRIC RSTCV W/O BYP VERTICAL-BANDED GASTROPLY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43843	CPT	GSTR RSTCV W/O BYP OTH/THN VER-BANDED GSTP	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43845	CPT	GASTRIC RSTCV W/PRTL GASTRECTOMY 50-100 CM	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43846	CPT	GASTRIC RSTCV W/BYP W/SHORT LIMB 150 CM/<	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43847	CPT	GASTRIC RSTCV W/BYP W/SM INT RCNSTJ LIMIT ABSRPJ	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43848	CPT	REVISION OPEN GASTRIC RESTRICTIVE PX NOT DEVICE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43860	CPT	REVJ GSTR/JJ ANAST W/RCNSTJ W/O VGTMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43865	CPT	REVJ GSTR/JJ ANAST W/RCNSTJ W/VGTMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	43882	CPT	REVISION/RMVL GASTRIC NSTIM ELTRDE ANTRUM OPEN	N	NA
ALOHAC Q3 2025	Outpatient Hosp	43886	CPT	GSTR RSTCV PX OPN REVJ SUBQ PORT COMPONENT ONLY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	43887	CPT	GSTR RSTCV PX OPN RMVL SUBQ PORT COMPONENT ONLY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	43888	CPT	GSTR RSTCV OPN RMVL & RPLCMT SUBQ PORT	N	NA
ALOHAC Q3 2025	Inpatient Hosp	44005	CPT	ENTEROLSS FRING INTSTINAL ADHESION SPX	N	NA
ALOHAC Q3 2025	Inpatient Hosp	44010	CPT	DUODENOTOMY EXPLORATION/BX/FOREIGN BODY REMOVAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	44015	CPT	TUBE/NEEDLE CATH JEJUNOSTOMY ANY METHOD	N	NA
ALOHAC Q3 2025	Inpatient Hosp	44020	CPT	ENTEROTOMY SM INT OTH/THN DUO EXPL BX/FB RMVL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	44021	CPT	ENTEROTOMY SM INT OTH/THN DUO DCMPRN	N	NA
ALOHAC Q3 2025	Inpatient Hosp	44025	CPT	COLOTOMY EXPLORATION/BIOPSY/FOREIGN BODY REMOVAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	44055	CPT	CORRJ MALROTATION BANDS&/RDCTJ VOLVULUS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	44110	CPT	EXC 1/> SMALL/LARGE LESIONS INTESTINE ENTEROTOM	N	NA
ALOHAC Q3 2025	Inpatient Hosp	44111	CPT	EXC 1/> SM/LG LESIONS INTESTNE MULT ENTEROTOMIE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	44120	CPT	ENTRC RESCJ SMALL INTESTINE 1 RESCJ & ANAST	N	NA
ALOHAC Q3 2025	Inpatient Hosp	44121	CPT	ENTERECTOMY RESCJ SMALL INTESTINE EA RESCJ & ANA	N	NA
ALOHAC Q3 2025	Inpatient Hosp	44125	CPT	ENTERECTOMY RESCJ SMALL INTESTINE W/ENTEROSTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	44126	CPT	ENTRC RESCJ ATRESIA RESCJ & ANAST W/O TAPRING	N	NA
ALOHAC Q3 2025	Inpatient Hosp	44127	CPT	ENTRC RESCJ ATRESIA RESCJ & ANAST SGM W/TAPRING	N	NA
ALOHAC Q3 2025	Inpatient Hosp	44128	CPT	ENTRC RESCJ ATRESIA EA RESCJ & ANASTOMOSIS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	44130	CPT	ENTEROENTEROST ANAST INT W/WO CUTAN NTRSTM SPX	N	NA
ALOHAC Q3 2025	Other	44132	CPT	DONOR ENTERECTOMY OPEN CADAVER DONOR	N	NA
ALOHAC Q3 2025	Other	44133	CPT	DONOR ENTERECTOMY OPEN LIVING DONOR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	44137	CPT	RMVL TRNSPLED INTESTINAL ALLOGRAFT COMPL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	44139	CPT	MOBLJ SPLENIC FLXR PFRMD CONJUNCT W/PRTL COLCT	N	NA
ALOHAC Q3 2025	Inpatient Hosp	44140	CPT	COLECTOMY PARTIAL W/ANASTOMOSIS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	44141	CPT	COLECTOMY PRTL W/SKIN LEVEL CECOST/COLOSTOMY	N	NA

ALOHAC	Q3 2025	Inpatient Hosp	44143	CPT	COLECTOMY PRTL W/END COLOSTOMY & CLSR DSTL SGMT	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44144	CPT	COLECTOMY PRTL W/COLOST/ILEOST & MUCOFISTULA	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44145	CPT	COLECTOMY PRTL W/COLOPROCTOSTOMY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44146	CPT	COLECTOMY PRTL W/COLOPROCTOSTOMY & COLOSTOMY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44147	CPT	COLECTOMY PRTL ABDOMINAL & TRANSANAL APPROACH	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44150	CPT	COLCT TOT ABDL W/O PRCTECT W/ILEOST/ILEOPXTS	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44151	CPT	COLCT TOT ABDL W/O PRCTECT W/CONTINENT ILEOST	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44155	CPT	COLECTOMY TOT ABDL W/PROCTECTOMY W/ILEOSTOMY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44156	CPT	COLECTOMY TOT ABDL W/PROCTECTOMY W/CONTNT ILEOST	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44157	CPT	COLECTOMY TOT ABD W/PROCTECTOMY ILEOANAL ANAST	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44158	CPT	COLCT TTL ABD W/PRCTECT ILEOANAL ANAST & RSVR	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44160	CPT	COLECTOMY PRTL W/RMVL TERMINAL ILEUM & ILEOCOLOS	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44187	CPT	LAPAROSCOPY SURG ILEOSTOMY/JEJUNOSTOMY NON-TUBE	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44188	CPT	LAPAROSCOPY SURG COLOSTOMY/SKN LVL CECOSTOMY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44202	CPT	LAPS ENTERECT RESCJ 1 SMALL INTEST RESCJ & ANA	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44203	CPT	LAPAROSCOPY SMALL INTESTINE RESCJ & ANASTOMOSIS	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44204	CPT	LAPAROSCOPY COLECTOMY PARTIAL W/ANASTOMOSIS	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44205	CPT	LAPS COLECTOMY PRTL W/RMVL TERMINAL ILEUM	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44206	CPT	LAPS COLECTOMY PRTL W/END CLST & CLSR DSTL SGM	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44207	CPT	LAPS COLECTOMY PRTL W/COLOPXTSTMY LW ANAST	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44208	CPT	LAPS COLECTMY PRTL W/COLOPXTSTMY LW ANAST W/CLST	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44210	CPT	LAPS COLECTOMY TOT W/O PRCTECT W/ILEOST/ILEOPXTS	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44211	CPT	LAPS COLCT TTL ABD W/PRCTECT ILEOANAL ANASTOMSIS	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44212	CPT	LAPS COLECTOMY ABDL W/PROCTECTOMY W/ILEOSTOMY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44213	CPT	LAPS MOBLJ SPLENIC FLXR PFRMD W/PRTL COLECTOMY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44227	CPT	LAPS CLSR NTRSTM LG/SM INT W/RESCJ & ANASTOMOSIS	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44300	CPT	PLACEMENT ENTEROSTOMY/CECOSTOMY TUBE OPEN	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44310	CPT	ILEOSTOMY/JEJUNOSTOMY NON-TUBE	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44316	CPT	CONTINENT ILEOSTOMY KOCK PROCEDURE SPX	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44320	CPT	COLOSTOMY/SKIN LEVEL CECOSTOMY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44322	CPT	COLOSTOMY/SKN LVL CECOSTOMY W/MULT BXS SPX	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44700	CPT	EXCLUSION SM INT FROM PELVIS MESH/PROSTH/TISS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	44705	CPT	PREPARE FECAL MICROBIOTA FOR INSTILLATION	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44820	CPT	EXCISION LESION MESENTERY SEPARATE PROCEDURE	N NA
ALOHAC	Q3 2025	Inpatient Hosp	44850	CPT	SUTURE MESENTERY SEPARATE PROCEDURE	N NA
ALOHAC	Q3 2025	Inpatient Hosp	45110	CPT	PRCTECT COMPL CMBN ABDOMINOPRNL W/CLST	N NA
ALOHAC	Q3 2025	Inpatient Hosp	45111	CPT	PRCTECT PRTL RESCJ RECTUM TABDL APPR	N NA
ALOHAC	Q3 2025	Inpatient Hosp	45112	CPT	PRCTECT CMBN ABDOMINOPRNL PULL-THRU PX	N NA
ALOHAC	Q3 2025	Inpatient Hosp	45113	CPT	PRCTECT PRTL W/MUCOSEC ILEOANAL ANAST RSVR	N NA
ALOHAC	Q3 2025	Inpatient Hosp	45114	CPT	PRCTECT PRTL W/ANAST ABDL & TRANSSAC APPROACH	N NA
ALOHAC	Q3 2025	Inpatient Hosp	45116	CPT	PRCTECT PRTL W/ANAST TRANSSAC APPR ONLY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	45119	CPT	PRCTECT CMBN PULL-THRU W/RSVR W/NTRSTM	N NA
ALOHAC	Q3 2025	Inpatient Hosp	45120	CPT	PRCTECT COMPL W/PULL-THRU PX & ANASTOMOSIS	N NA
ALOHAC	Q3 2025	Inpatient Hosp	45121	CPT	PRCTECT COMPL W/STOT/TOT COLCT W/MLT BXS	N NA
ALOHAC	Q3 2025	Inpatient Hosp	45123	CPT	PRCTECT PRTL W/O ANAST PRNL APPR	N NA
ALOHAC	Q3 2025	Inpatient Hosp	45126	CPT	PELVIC EXENTERATION COLORECTAL MALIGNANCY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	45130	CPT	EXC RCT PROCIDENTIA W/ANAST PERINEAL APPROACH	N NA
ALOHAC	Q3 2025	Inpatient Hosp	45135	CPT	EXC RCT PROCIDENTIA W/ANAST ABDL & PRNL APPROACH	N NA
ALOHAC	Q3 2025	Inpatient Hosp	45136	CPT	EXC ILEOANAL RSVR W/ILEOSTOMY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	45395	CPT	LAPS PROCTECTOMY ABDOMINOPERINEAL W/COLOSTOMY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	45397	CPT	LAPS PROCTECTOMY COMBINED PULL-THRU W/RESERVOIR	N NA

ALOHAC Q3 2025	Inpatient Hosp	45400	CPT	LAPAROSCOPY PROCTOPEXY PROLAPSE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	45402	CPT	LAPAROSCOPY PROCTOPEXY PROLAPSE SIGMOID RESCJ	N	NA
ALOHAC Q3 2025	Inpatient Hosp	45540	CPT	PROCTOPEXY ABDOMINAL APPROACH	N	NA
ALOHAC Q3 2025	Inpatient Hosp	45550	CPT	PROCTOPEXY W/SIGMOID RESCJ ABDL APPR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	47100	CPT	BIOPSY LIVER WEDGE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	47120	CPT	HEPATECTOMY RESCJ PARTIAL LOBECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	47122	CPT	HEPATECTOMY RESCJ TRISEGMENTECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	47125	CPT	HEPATECTOMY RESCJ TOTAL LEFT LOBECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	47130	CPT	HEPATECTOMY RESCJ TOTAL RIGHT LOBECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	47380	CPT	ABLTJ OPN 1/> LVR TUM RF	N	NA
ALOHAC Q3 2025	Inpatient Hosp	47381	CPT	ABLTJ OPN 1/> LVR TUM CRYOSURG	N	NA
ALOHAC Q3 2025	Inpatient Hosp	47550	CPT	BILIARY NDSC INTRAOPERATIVE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	47701	CPT	PORTOENETEROSTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	47711	CPT	EXC BILE DUX TUM W/WO PRIM RPR XTRHEPATC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	47712	CPT	EXC BILE DUX TUM W/WO PRIM RPR INTRAHEPATC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	47715	CPT	EXCISION CHOLEDOCHAL CYST	N	NA
ALOHAC Q3 2025	Inpatient Hosp	47720	CPT	CHOLECYSTOENTEROSTOMY DIRECT	N	NA
ALOHAC Q3 2025	Inpatient Hosp	47721	CPT	CHOLECYSTOENTEROSTOMY W/GASTROENTEROSTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	47740	CPT	CHOLECYSTOENTEROSTOMY ROUX-EN-Y	N	NA
ALOHAC Q3 2025	Inpatient Hosp	47741	CPT	CHOLECSTONTRSTM ROUX-EN-Y W/GASTRONTRSTM	N	NA
ALOHAC Q3 2025	Inpatient Hosp	47760	CPT	ANAST XTRHEPATC BILIARY DUCTS & GI TRACT	N	NA
ALOHAC Q3 2025	Inpatient Hosp	47765	CPT	ANAST INTRAHEPATC DUCTS & GI TRACT	N	NA
ALOHAC Q3 2025	Inpatient Hosp	47780	CPT	ANAST ROUX-EN-Y XTRHEPATC BILIARY DUCTS & GI	N	NA
ALOHAC Q3 2025	Inpatient Hosp	47785	CPT	ANAST ROUX-EN-Y INTRAHEPATC BILIARY DUCTS & GI	N	NA
ALOHAC Q3 2025	Inpatient Hosp	47800	CPT	RCNSTJ PLSTC BILIARY DUCTS W/END-TO-END ANAST	N	NA
ALOHAC Q3 2025	Inpatient Hosp	47801	CPT	PLACEMENT CHOLEDOCHAL STENT	N	NA
ALOHAC Q3 2025	Inpatient Hosp	47900	CPT	SUTURE EXTRAHEPATIC BILE DUCT PRE-EXIST INJURY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	48100	CPT	BIOPSY PANCREAS OPEN	N	NA
ALOHAC Q3 2025	Inpatient Hosp	48105	CPT	RESECJ/DBRDMT PANCREAS NECROTIZING PANCREATITIS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	48120	CPT	EXCISION LESION PANCREAS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	48140	CPT	PNCRTECT DSTL STOT W/O PNCRTCOJEJUNOSTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	48145	CPT	PNCRTECT DSTL STOT W/PNCRTCOJEJUNOSTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	48146	CPT	PNCRTECT DSTL NR-TOT W/PRSRV DUO CHLD-TYP PX	N	NA
ALOHAC Q3 2025	Inpatient Hosp	48148	CPT	EXCISION AMPULLA VATER	N	NA
ALOHAC Q3 2025	Inpatient Hosp	48150	CPT	PNCRTECT PROX STOT W/PANCREATOJEJUNOSTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	48152	CPT	PNCRTECT WHIPPLE W/O PANCREATOJEJUNOSTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	48153	CPT	PNCRTECT W/PANCREATOJEJUNOSTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	48154	CPT	PNCRTECT PROX STOT W/O PANCREATOJEJUNOSTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	48155	CPT	PANCREATECTOMY TOTAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	48400	CPT	INJECTION INTRAOPERATIVE PANCREATOGRAPHY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	48520	CPT	INT ANAST PANCREATIC CYST GI TRACT DIRECT	N	NA
ALOHAC Q3 2025	Inpatient Hosp	48540	CPT	INT ANAST PANCREATIC CYST GI TRACT ROUX-EN-Y	N	NA
ALOHAC Q3 2025	Inpatient Hosp	48545	CPT	PANCREATORRHAPHY INJURY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	48547	CPT	DUOL EXCLUSION W/GASTROJEJUNOSTOMY PNCRTC INJ	N	NA
ALOHAC Q3 2025	Inpatient Hosp	48548	CPT	PANCREATICOJEJUNOSTOMY SIDE-TO-SIDE ANAST	N	NA
ALOHAC Q3 2025	Inpatient Hosp	49000	CPT	EXPLORATORY LAPAROTOMY CELIOTOMY W/WO BIOPSY SPX	N	NA
ALOHAC Q3 2025	Inpatient Hosp	49002	CPT	REOPENING RECENT LAPAROTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	49010	CPT	EXPL RETROPERITONEUM W/WO BX SPX	N	NA
ALOHAC Q3 2025	Inpatient Hosp	49186	CPT	OPEN EXC/DSTRJ INTRA-ABDL TUMOR/CST 5 CM OR LESS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	49187	CPT	OPEN EXC/DSTRJ INTRA-ABDL TUMOR/CST 5.1-10 CM	N	NA
ALOHAC Q3 2025	Inpatient Hosp	49188	CPT	OPEN EXC/DSTRJ INTRA-ABDL TUMOR/CST 10.1-20 CM	N	NA

ALOHAC Q3 2025	Inpatient Hosp	49189	CPT	OPEN EXC/DSTRJ INTRA-ABDL TUMOR/CST 20.1-30 CM	N	NA
ALOHAC Q3 2025	Inpatient Hosp	49190	CPT	OPEN EXC/DSTRJ INTRA-ABDL TUMOR/CYST >30 CM	N	NA
ALOHAC Q3 2025	Inpatient Hosp	49215	CPT	EXC PRESAC/SACROCOCCYGEAL TUMOR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	49255	CPT	OMNTC EPIPLOECTOMY RESCJ OMENTUM SPX	N	NA
ALOHAC Q3 2025	Inpatient Hosp	49412	CPT	PLACEMENT INTRSTL DEV OPN W/IMG GUID 1/MLT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	49591	CPT	RPR AA HERNIA 1ST < 3 CM REDUCIBLE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	49593	CPT	RPR AA HERNIA 1ST 3-10 CM REDUCIBLE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	49594	CPT	RPR AA HERNIA 1ST 3-10 CM NCRC8/STRANGULATED	N	NA
ALOHAC Q3 2025	Outpatient Hosp	49595	CPT	RPR AA HERNIA 1ST > 10 CM REDUCIBLE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	49596	CPT	RPR AA HERNIA 1ST > 10 CM NCRC8/STRANGULATED	N	NA
ALOHAC Q3 2025	Outpatient Hosp	49613	CPT	RPR AA HERNIA RECR < 3 CM REDUCIBLE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	49614	CPT	RPR AA HERNIA RECR < 3 CM NCRC8/STRANGULATED	N	NA
ALOHAC Q3 2025	Outpatient Hosp	49615	CPT	RPR AA HERNIA RECR 3-10 CM REDUCIBLE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	49616	CPT	RPR AA HERNIA RECR 3-10 CM NCRC8/STRANGULATED	N	NA
ALOHAC Q3 2025	Outpatient Hosp	49617	CPT	RPR AA HERNIA RECR > 10 CM REDUCIBLE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	49618	CPT	RPR AA HERNIA RECR > 10 CM NCRC8/STRANGULATED	N	NA
ALOHAC Q3 2025	Outpatient Hosp	49621	CPT	RPR PARASTOMAL HERNIA 1ST/RECR REDUCIBLE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	49622	CPT	RPR PARASTOMAL HRNA 1ST/RECR NCRC8/STRANGULATED	N	NA
ALOHAC Q3 2025	Outpatient Hosp	49623	CPT	RMVL NONINFCT MESH/PROSTH AA/PARASTOMAL HRNA RPR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	49904	CPT	OMENTAL FLAP EXTRA-ABDOMINAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	49905	CPT	OMENTAL FLAP INTRA-ABDOMINAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	49906	CPT	FREE OMENTAL FLAP W/MICROVASCULAR ANAST	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50010	CPT	RENAL EXPLORATION NOT NECESSITATING OTH SPEC PX	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50040	CPT	NEPHROSTOMY NEPHROTOMY W/DRAINAGE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50045	CPT	NEPHROTOMY W/EXPLORATION	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50100	CPT	TRNSXJ/REPOSITIONING ABERRANT RENAL VESSELS SPX	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50120	CPT	PYELOTOMY W/EXPLORATION	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50125	CPT	PYELOTOMY W/DRAINAGE PYELOSTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50130	CPT	PYELOTOMY WITH REMOVAL CALCULUS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50205	CPT	RENAL BIOPSY SURG EXPOSURE KIDNEY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50220	CPT	NEPHRECTOMY W/PRTL URETERECTOMY W/OPEN RIB RESCJ	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50225	CPT	NEPHRECTOMY W/PRTL URETERECT OPN RIB RESCJ COMPL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50230	CPT	NEPHRECTOMY W/PRTL URETERECT OPEN RIB RESCJ RAD	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50234	CPT	NEPHRECTOMY W/TOT URETERECT&BLDR CUFF SAME INC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50236	CPT	NEPHRECTOMY TOT URETEREC&BLDR CUFF SEPAR INCISN	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50240	CPT	NEPHRECTOMY PARTIAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50250	CPT	OPEN ABLATION 1/>RENAL MASS LESION CRYOSURGICAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50280	CPT	EXCISION/UNROOFING CYST KIDNEY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50290	CPT	EXCISION PERINEPHRIC CYST	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50400	CPT	PYELOPLASTY SIMPLE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50405	CPT	PYELOPLASTY COMPLICATED	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50525	CPT	CLSR NEPHROVISCERAL FISTULA W/VISC RPR ABDL APPR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50526	CPT	CLSR NEPHROVISCERAL FISTULA W/VISC RPR THRC APPR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50540	CPT	SYMPHYSIOTOMY HORSESHOE KDN W/WO PLOP UNI/BI	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50545	CPT	LAPAROSCOPY RADICAL NEPHRECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50546	CPT	LAPAROSCOPY NEPHRECTOMY W/PARTIAL URETERECT	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50547	CPT	LAPAROSCOPY DONOR NEPHRECTOMY LIVING DONOR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50548	CPT	LAPAROSCOPY NEPHRECTOMY W/TOTAL URETERECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50600	CPT	URTROTOMY W/EXPL/DRG SEPARATE PROCEDURE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50610	CPT	URTROLITHOTOMY UPPER ONE-THIRD URETER	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50620	CPT	URTROLITHOTOMY MIDDLE ONE-THIRD URETER	N	NA

ALOHAC Q3 2025	Inpatient Hosp	50630	CPT	URTROLITHOTOMY LOWER ONE-THIRD URETER	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50650	CPT	URETRECECTOMY W/BLADDER CUFF SEPARATE PROCEDURE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50660	CPT	URETERECTOMY TOT ECTOPIC URETER CMBN APPR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50700	CPT	URETEROPLASTY PLASTIC OPERATION URETER	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50715	CPT	URETEROLYSIS W/WORPSG URETER RETROPERIT FIBROSIS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50722	CPT	URETEROLYSIS FOR OVARIAN VEIN SYNDROME	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50725	CPT	URTROLSS RETROCAVAL URTR W/REANAST	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50728	CPT	REVJ UR-CUTAN ANAST RPR FSCAL DFCT & HERNIA	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50740	CPT	URETEROPYELOSTOMY ANAST URETER RENAL PELVIS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50750	CPT	URETEROCALYCOSTOMY ANAST URETER RENAL CALYX	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50760	CPT	URETEROURETEROSTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50770	CPT	TRANSURETEROURETEROSTOMY ANAST URETER CLAT URTR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50780	CPT	URETERONEOCYSTOSTOMY ANAST 1 URETER BLADDER	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50782	CPT	URETERONEOCYSTOSTOMY ANAST DUPLICATE URETER BLDR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50783	CPT	URETERONEOCYSTOSTOMY W/URETERAL TAILORING	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50785	CPT	URTRONEOCSTOST W/VESICO-PSOAS HITCH/BLDR FLAP	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50800	CPT	URETEROENTEROSTOMY ANAST URETER INTESTINE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50810	CPT	URETEROSIGMOIDOSTOMY W/SIGMOID BLADDER & COLOSTO	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50815	CPT	URETEROCOLON CONDUIT INTESTINE ANASTOMOSIS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50820	CPT	URETEROILEAL CONDUIT W/INTESTINE ANASTOMOSIS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50825	CPT	CONTINENT DVRJ W/INT ANAST ANY SGM SM&/LG INTSTN	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50830	CPT	URINARY UNIDIVERSION	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50840	CPT	RPLCMT ALL/PART URETER INTESTINE SGM W/ANAST	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50845	CPT	CUTANANEOUS APPENDICO-VESICOSTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50860	CPT	URETEROSTOMY TRANSPLANTATION URETER SKIN	N	NA
ALOHAC Q3 2025	Inpatient Hosp	50930	CPT	CLOSURE URETEROCUTANEOUS FISTULA W/VISC RPR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	51525	CPT	CYSTOTOMY EXCISE BLADDER DIVERTICULUM 1/MULTIPLE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	51530	CPT	CYSTOTOMY EXCISION BLADDER TUMOR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	51550	CPT	CYSTECTOMY PARTIAL SIMPLE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	51555	CPT	CYSTECTOMY PARTIAL COMPLICATED	N	NA
ALOHAC Q3 2025	Inpatient Hosp	51565	CPT	CSTC PRTL W/RIMPLTJ URTR IN BLDR URTRONEOCSTOST	N	NA
ALOHAC Q3 2025	Inpatient Hosp	51570	CPT	CYSTECTOMY COMPLETE SEPARATE PROCEDURE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	51575	CPT	CYSTECTOMY W/BI PELVIC LYMPHADENECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	51580	CPT	CYSTECTOMY W/URETEROSIGMOIDOSTOMY W/NODES	N	NA
ALOHAC Q3 2025	Inpatient Hosp	51585	CPT	CYSTECTOMY W/URETEROSIGMOID BI PELV LYMPH NODES	N	NA
ALOHAC Q3 2025	Inpatient Hosp	51590	CPT	CSTC COMPL W/URTROILEAL CONDUIT/BLDR W/INT ANAST	N	NA
ALOHAC Q3 2025	Inpatient Hosp	51595	CPT	CSTC COMPL W/CONDUIT/SIGMOID BLDR PEL LMPHADEC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	51596	CPT	CSTC COMPL W/CONTINENT DVRJ OPN NEOBLDR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	51597	CPT	PELVIC EXENTERATION COMPLETE MALIGNANCY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	51721	CPT	INSJ TRURL ABLTJ TRNSDCR DLVR THRM US PRST8 TISS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	51800	CPT	CSTOPLASTY/CSTOURTP PLSTC ANY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	51820	CPT	CSTOURTP W/UNI/BI URTRONEOCSTOST	N	NA
ALOHAC Q3 2025	Inpatient Hosp	51840	CPT	ANT VESICOURETHROPEXY/URETHROPEXY SMPL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	51841	CPT	ANT VESICOURETHROPEXY/URETHROPEXY COMP	N	NA
ALOHAC Q3 2025	Inpatient Hosp	51865	CPT	CYSTORRHAPHY SUTR BLDR WND INJ/RPT COMPLICATED	N	NA
ALOHAC Q3 2025	Inpatient Hosp	51900	CPT	CLSR VESICOVAGINAL FISTUL AABDL APPROACH	N	NA
ALOHAC Q3 2025	Inpatient Hosp	51920	CPT	CLOSURE VESICOUTERINE FISTULA	N	NA
ALOHAC Q3 2025	Inpatient Hosp	51925	CPT	CLSR VESICOUTERINE FISTULA W/HYSTERECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	51940	CPT	CLOSURE EXSTROPHY BLADDER	N	NA
ALOHAC Q3 2025	Inpatient Hosp	51960	CPT	ENTEROCYSTOPLASTY W/INTESTINAL ANASTOMOSIS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	51980	CPT	CUTANEOUS VESICOSTOMY	N	NA

ALOHAC	Q3 2025	Physician Services	52284	CPT	CYSTO W/DILAT RX BALO CATH URTL STRIX/STEN MALE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	52402	CPT	CSTO W/TRURL RESCJ/INC EJACULATORY DUXS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	52647	CPT	LASER COAGULATION OF PROSTATE FOR URINE FLOW	N NA
ALOHAC	Q3 2025	Outpatient Hosp	52648	CPT	LASER VAPORIZATION OF PROSTATE FOR URINE FLOW	N NA
ALOHAC	Q3 2025	Outpatient Hosp	53020	CPT	MEATOTOMY CUTTING MEATUS SPX EXCEPT INFANT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	53025	CPT	MEATOTOMY CUTTING MEATUS SPX INFANT	N NA
ALOHAC	Q3 2025	Inpatient Hosp	53415	CPT	URTP TRANSPUBIC/PRNL 1 STG RCNSTJ/RPR URT	N NA
ALOHAC	Q3 2025	Inpatient Hosp	53448	CPT	RMVL & RPLCMT NFLTBL NCK SPHNCTR THRU INFCT FLD	N NA
ALOHAC	Q3 2025	Outpatient Hosp	53451	CPT	PERIURETHRAL TPRNL ADJTBL BALO CNTNC DEV BI INSJ	N NA
ALOHAC	Q3 2025	Outpatient Hosp	53452	CPT	PERIURETHRL TPRNL ADJTBL BALO CNTNC DEV UNI INSJ	N NA
ALOHAC	Q3 2025	Outpatient Hosp	53453	CPT	PERIURETHRAL TPRNL ADJTBL BALO CNTNC DEV RMVL EA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	53454	CPT	PERIURETHRAL TPRNL ADJTBL BALO CNTNC DEV ADJMT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	53600	CPT	DILAT URETHRAL STRIX DILATOR MALE 1ST	N NA
ALOHAC	Q3 2025	Outpatient Hosp	53601	CPT	DILAT URETHRAL STRIX DILATOR MALE SBSQ	N NA
ALOHAC	Q3 2025	Outpatient Hosp	53605	CPT	DILAT URETHRAL STRIX/VESICAL NCK DILAT MALE ANES	N NA
ALOHAC	Q3 2025	Outpatient Hosp	53620	CPT	DILAT URETHRAL STRIX FILIFORM & FOLLWR MALE 1ST	N NA
ALOHAC	Q3 2025	Outpatient Hosp	53621	CPT	DILAT URETHRAL STRIX FILIFORM & FOLLWR MALE SBSQ	N NA
ALOHAC	Q3 2025	Outpatient Hosp	53865	CPT	CYSTO INSJ TEMP DEV ISCHMC RMDLG BLDR NECK&PRST8	N NA
ALOHAC	Q3 2025	Outpatient Hosp	53866	CPT	CATHJ RMVL TEMP DEV ISCHMC RMDLG BLDR NECK&PRST8	N NA
ALOHAC	Q3 2025	Physician Services	54057	CPT	DSTRJ LESION PENIS SIMPLE LASER	N NA
ALOHAC	Q3 2025	Physician Services	54060	CPT	DSTRJ LESION PENIS SIMPLE SURG EXCISION	N NA
ALOHAC	Q3 2025	Physician Services	54065	CPT	DSTRJ LESION PENIS EXTENSIVE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54100	CPT	BIOPSY PENIS SEPARATE PROCEDURE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54105	CPT	BIOPSY PENIS DEEP STRUCTURES	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54110	CPT	EXCISION OF PENILE PLAQUE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54111	CPT	EXC PENILE PLAQUE GRAFT &/5 CM LENGTH	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54112	CPT	EXC PENILE PLAQUE GRAFT > 5 CM LENGTH	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54115	CPT	REMOVAL FOREIGN BODY DEEP PENILE TISSUE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54164	CPT	FRENULOTOMY PENIS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54200	CPT	INJECTION PROCEDURE FOR PEYRONIE DISEASE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54205	CPT	INJECTION PX PEYRONIE DS W/SURG EXPOSURE PLAQUE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54220	CPT	IRRIGATION CORPORA CAVERNOSA PRIAPISM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54230	CPT	INJECTION PROCEDURE FOR CORPORA CAVERNOSOGRAPY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54231	CPT	DYNAMIC CAVERNOSOMETRY NJX VASOACTIVE DRUGS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54250	CPT	NOCTURNAL PENILE TUMESCENCE &/RIGIDITY TEST	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54300	CPT	PENIS STRAIGHTENING CHORDEE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54308	CPT	URETHROPLASTY 2ND STAGE HYPOSPADIAS RPR <3 CM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54312	CPT	URETHROPLASTY 2ND STAGE HYPOSPADIAS RPR > 3 CM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54316	CPT	URETHROPLASTY 2ND STAGE HYPOSPADIAS RPR SKIN GRF	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54318	CPT	URETHROPLASTY 3RD STG HYPOSPADIAS RPR RLS PENIS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54352	CPT	REVISION PRIOR HYPOSPADIAS REPAIR DSJ&EXC RCNSTJ	N NA
ALOHAC	Q3 2025	Physician Services	54360	CPT	PLASTIC RPR PENIS CORRECT ANGULATION	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54380	CPT	PLASTIC RPR PENIS EPISPADIAS DSTL SPHNCTR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54385	CPT	PLASTIC PENIS EPISPADIAS DSTL SPHNCTR W/INCONT	N NA
ALOHAC	Q3 2025	Inpatient Hosp	54390	CPT	PLASTIC RPR PENIS EPISPADIAS W/EXSTROPHY BLADDER	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54400	CPT	INSJ PENILE PROSTHESIS NON-INFLATABLE SEMI-RIGID	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54401	CPT	INSJ PENILE PROSTHESOS INFLATABLE SELF-CONTAINED	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54405	CPT	INSJ MULTI-COMPONENT INFLATABLE PENILE PROSTH	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54406	CPT	RMVL INFLATABLE PENILE PROSTH W/O RPLCMT PROSTH	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54408	CPT	RPR COMPONENT INFLATABLE PENILE PROSTHESIS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54410	CPT	RMVL & RPLCMT INFLATABLE PENILE PROSTH SAME SESS	N NA

ALOHAC	Q3 2025	Outpatient Hosp	54411	CPT	RMVL & RPLCMT NFLTBL PENILE PROSTH INFECTED FIEL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54415	CPT	RMVL NON-NFLTBL/NFLTBL PENILE PROSTH W/O RPLCMT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54416	CPT	RMVL & RPLCMT NON-NFLTBL/NFLTBL PENILE PROSTHESI	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54417	CPT	RMVL & RPLCMT PENILE PROSTHESIS INFECTED FIELD	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54420	CPT	CORPORA CAVERNOSA-SAPHENOUS VEIN SHUNT UNI/BI	N NA
ALOHAC	Q3 2025	Inpatient Hosp	54430	CPT	CORPORA CAVERNOSA-CORPUS SPONGIOSUM SHUNT UNI/BI	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54435	CPT	CORPORA CAVERNOSA-GLANS PENIS FSTLJ PRIAPISM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54440	CPT	PLASTIC OPERATION PENIS INJURY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54450	CPT	FORESKN MANJ W/LSS PREPUTIAL ADS&STRETCHING	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54500	CPT	BIOPSY TESTIS NEEDLE SEPARATE PROCEDURE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54505	CPT	BIOPSY TESTIS INCISIONAL SEPARATE PROCEDURE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54512	CPT	EXC XTRPARENCHYMAL LESION TESTIS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54520	CPT	ORCHIECTOMY SIMPLE SCROTAL/INGUINAL APPROACH	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54522	CPT	ORCHIECTOMY PARTIAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54530	CPT	ORCHIECTOMY RADICAL TUMOR INGUINAL APPROACH	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54550	CPT	EXPL UNDESCENDED TSTIS INGUN/SCROTAL AREA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54600	CPT	RDCTJ TORSION TSTIS W/WO FIXJ CLAT TESTIS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54620	CPT	FIXATION CONTRALATERAL TESTIS SEPARATE PROCEDURE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54640	CPT	ORCHIOPEXY INGUINAL OR SCROTAL APPROACH	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54670	CPT	SUTURE/REPAIR TESTICULAR INJURY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54690	CPT	LAPAROSCOPY SURGICAL ORCHIECTOMY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54692	CPT	LAPAROSCOPY ORCHIOPEXY INTRA-ABDOMINAL TESTIS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54700	CPT	I&D EPIDIDYMIS TSTIS&/SCROTAL SPACE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54800	CPT	BIOPSY EPIDIDYMIS NEEDLE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54830	CPT	EXCISION LOCAL LESION EPIDIDYMIS	N NA
ALOHAC	Q3 2025	Physician Services	54840	CPT	EXCISION SPERMATOCELE W/WO EPIDIDYMECTOMY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54860	CPT	EPIDIDYMECTOMY UNILATERAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54861	CPT	EPIDIDYMECTOMY BILATERAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54865	CPT	EXPLORATION EPIDIDYMIS W/WO BIOPSY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54900	CPT	EPIDIDYMOVASOSTOMY ANAST EPIDIDYMIS UNI	N NA
ALOHAC	Q3 2025	Outpatient Hosp	54901	CPT	EPIDIDYMOVASOSTOMY ANAST EPIDIDYMIS BI	N NA
ALOHAC	Q3 2025	Outpatient Hosp	55110	CPT	SCROTAL EXPLORATION	N NA
ALOHAC	Q3 2025	Outpatient Hosp	55150	CPT	RESECTION SCROTUM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	55175	CPT	SCROTOPLASTY SIMPLE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	55180	CPT	SCROTOPLASTY COMPLICATED	N NA
ALOHAC	Q3 2025	Outpatient Hosp	55200	CPT	VASOTOMY CANNULIZATION W/WO VAS INC UNI/BI SPX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	55250	CPT	VASECTOMY UNI/BI SPX W/POSTOP SEMEN EXAMS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	55300	CPT	VASOTOMY VASOGRAMS UNI/BI	N NA
ALOHAC	Q3 2025	Outpatient Hosp	55500	CPT	EXC HYDROCELE SPRMATIC CORD UNI SPX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	55520	CPT	EXC LESION SPERMATIC CORD SEPARATE PROCEDURE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	55600	CPT	VESICULOTOMY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	55605	CPT	VESICULOTOMY COMPLICATED	N NA
ALOHAC	Q3 2025	Inpatient Hosp	55650	CPT	VESICULECTOMY ANY APPROACH	N NA
ALOHAC	Q3 2025	Inpatient Hosp	55801	CPT	PROSTATECTOMY PERINEAL SUBTOTAL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	55810	CPT	PROSTATECTOMY PERINEAL RADICAL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	55812	CPT	PROSTATECTOMY PERINEAL RADICAL W/LYMPH NODE BX	N NA
ALOHAC	Q3 2025	Inpatient Hosp	55815	CPT	PROSTATECTOMY PERINEAL RAD W/BI PELVIC LYMPH EXC	N NA
ALOHAC	Q3 2025	Inpatient Hosp	55821	CPT	PROSTATECTOMY SUPRAPUBIC SUBTOTAL 1/2 STAGES	N NA
ALOHAC	Q3 2025	Inpatient Hosp	55831	CPT	PROSTATECTOMY RETROPUBIC SUBTOTAL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	55840	CPT	PROSTATECTOMY RETROPUBIC W/WO NERVE SPARING	N NA
ALOHAC	Q3 2025	Inpatient Hosp	55842	CPT	PROSTECT RETROPUBIC RAD W/WO NRV SPAR W/LYMPH BX	N NA

ALOHAC	Q3 2025	Inpatient Hosp	55845	CPT	PROSTECT RETROPUB RAD W/WO NRV SPAR & BI PLV LYM	N NA
ALOHAC	Q3 2025	Inpatient Hosp	55866	CPT	LAPS SURG PRST8ECT RPBIC RAD W/NRV SPARING ROBOT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	55867	CPT	LAPS SURG PRST8ECT SMPL STOT ROBOTIC ASSISTANCE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	55873	CPT	CRYOSURGICAL ABLATION PROSTATE W/US & MONITORI	N NA
ALOHAC	Q3 2025	Physician Services	55875	CPT	TRANSPERINEAL PLMT NDL/CATHS PROSTATE RADJ INSJ	N NA
ALOHAC	Q3 2025	Outpatient Hosp	55881	CPT	ABLATION TRANSURETHRAL PRST8 TISSUE W/THERMAL US	N NA
ALOHAC	Q3 2025	Outpatient Hosp	55882	CPT	ABLT TRURL PRST8 TIS THRM US INS TRURL US TRNSDC	N NA
ALOHAC	Q3 2025	Inpatient Hosp	56630	CPT	VULVECTOMY RADICAL PARTIAL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	56631	CPT	VULVECTOMY RAD PRTL UNI INGUINOFEM LMPHADECTOMY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	56632	CPT	VULVECTOMY RAD PRTL BI INGUINOFEM LMPHADECTOMY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	56633	CPT	VULVECTOMY RADICAL COMPLETE	N NA
ALOHAC	Q3 2025	Inpatient Hosp	56634	CPT	VULVECTOMY RAD COMPL UNI INGUINOFEM LYMPHADEC	N NA
ALOHAC	Q3 2025	Inpatient Hosp	56637	CPT	VULVECTOMY RAD COMPL BI INGUINOFEM LYMPHADEC	N NA
ALOHAC	Q3 2025	Inpatient Hosp	56640	CPT	VLVCTMY RAD COMPL INGUINOFEM ILIAC&PEL LYMPHADEC	N NA
ALOHAC	Q3 2025	Outpatient Hosp	57106	CPT	VAGINECTOMY PARTIAL REMOVAL VAGINAL WALL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	57107	CPT	VAGNC PRTL RMVL VAG WALL W/RMVL PARAVAGINAL TISS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	57109	CPT	VAGNC PRTL RMVL VAG WALL W/BI TOT PEL LYMPHADEC	N NA
ALOHAC	Q3 2025	Inpatient Hosp	57110	CPT	VAGINECTOMY COMPLETE REMOVAL VAGINAL WALL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	57111	CPT	VAGNC COMPL RMVL VAG WAL W/RMVL PARAVAGINAL TISS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	57220	CPT	PLASTIC URETHRAL SPHINCTER VAGINAL APPROACH	N NA
ALOHAC	Q3 2025	Outpatient Hosp	57230	CPT	PLASTIC REPAIR URETHROCELE	N NA
ALOHAC	Q3 2025	Inpatient Hosp	57270	CPT	REPAIR ENTEROCELE ABDOMINAL APPROACH SPX	N NA
ALOHAC	Q3 2025	Inpatient Hosp	57280	CPT	COLPOPEXY ABDOMINAL APPROACH	N NA
ALOHAC	Q3 2025	Outpatient Hosp	57288	CPT	SLING OPERATION STRESS INCONTINENCE	N NA
ALOHAC	Q3 2025	Inpatient Hosp	57305	CPT	CLSR RECTOVAGINAL FISTULA ABDOMINAL APPROACH	N NA
ALOHAC	Q3 2025	Inpatient Hosp	57307	CPT	CLSR RECTOVAG FSTL ABDL APPR W/CONCOMITANT CLST	N NA
ALOHAC	Q3 2025	Inpatient Hosp	57308	CPT	CLSR RECTOVAG FSTL TPRNL PRNL BDY RCNSTJ	N NA
ALOHAC	Q3 2025	Inpatient Hosp	57311	CPT	CLSR URETHROVAG FSTL W/BULBOCAVERNOSUS TRNSPL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	57400	CPT	DILATION VAGINA W/ANESTHESIA OTHER THAN LOCAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	57410	CPT	PELVIC EXAMINATION W/ANESTHESIA OTHER THAN LOCAL	N NA
ALOHAC	Q3 2025	Diagnostic Testing	57465	CPT	COMPUTER-AIDED MAPG CERVIX UTERI DRG COLPOSCOPY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	57720	CPT	TRACHELORRHAPHY PLSTC RPR UTERINE CERVIX VAG	N NA
ALOHAC	Q3 2025	Inpatient Hosp	58140	CPT	MYOMECTOMY 1-4 MYOMAS W/250 GM/< ABDOMINAL APPR	N NA
ALOHAC	Q3 2025	Inpatient Hosp	58146	CPT	MYOMECTOMY 5/> MYOMAS &/>250 GM ABDOMINA	N NA
ALOHAC	Q3 2025	Inpatient Hosp	58150	CPT	TOTAL ABDOMINAL HYSTERECT W/WO RMVL TUBE OVARY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	58152	CPT	TOT ABD HYST W/WO RMVL TUBE OVARY W/COLPURETHRXY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	58180	CPT	SUPRACERVICAL ABDL HYSTER W/WO RMVL TUBE OVARY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	58200	CPT	TOT ABD HYST W/PARAORTIC & PELVIC LYMPH NODE SAM	N NA
ALOHAC	Q3 2025	Inpatient Hosp	58210	CPT	RAD ABDL HYSTERECTOMY W/BI PELVIC LMPHADENECTOMY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	58240	CPT	PEL EXNTJ GYNECOLOGIC MAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	58260	CPT	VAGINAL HYSTERECTOMY UTERUS 250 GM/<	N NA
ALOHAC	Q3 2025	Outpatient Hosp	58262	CPT	VAG HYST 250 GM/< W/RMVL TUBE&/OVARY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	58263	CPT	VAG HYST 250 GM/< W/RMVL TUBE OVARY W/RPR NTRCL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	58267	CPT	VAG HYST 250 GM/< W/COLPO-URTCSTOPEXY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	58270	CPT	VAGINAL HYSTERECTOMY 250 GM/< W/RPR ENTEROCELE	N NA
ALOHAC	Q3 2025	Inpatient Hosp	58275	CPT	VAGINAL HYSTERECTOMY W/TOT/PRTL VAGINECTOMY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	58280	CPT	VAG HYSTER W/TOT/PRTL VAGINECT W/RPR ENTEROCELE	N NA
ALOHAC	Q3 2025	Inpatient Hosp	58285	CPT	VAGINAL HYSTERECTOMY RADICAL SCHAUTA OPERATION	N NA
ALOHAC	Q3 2025	Outpatient Hosp	58290	CPT	VAGINAL HYSTERECTOMY UTERUS > 250 GM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	58291	CPT	VAG HYST > 250 GM RMVL TUBE&/OVARY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	58292	CPT	VAG HYST > 250 GM RMVL TUBE&/OVARY W/RPR ENTRCLE	N NA

ALOHAC Q3 2025	Outpatient Hosp	58294	CPT	VAGINAL HYSTERECTOMY >250 GM RPR ENTEROCELE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	58400	CPT	UTERINE SUSPENSION W/WO SHORTENING LIGAMENTS SPX	N	NA
ALOHAC Q3 2025	Inpatient Hosp	58410	CPT	UTERINE SUSP W/WO SHORT LIGAMNTS W/SYMPATHECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	58520	CPT	HYSTERORRHAPHY REPAIR RUPT UTERUS NONOBSTETRICAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	58540	CPT	HYSTEROPLASTY RPR UTERINE ANOMALY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58541	CPT	LAPAROSCOPY SUPRACERVICAL HYSTERECTOMY 250 GM/<	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58542	CPT	LAPS SUPRACRV HYSTERECT 250 GM/< RMVL TUBE/OVAR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58543	CPT	LAPS SUPRACERVICAL HYSTERECTOMY >250	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58544	CPT	LAPS SUPRACRV HYSTEREC >250 G RMVL TUBE/OVARY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58545	CPT	LAPS MYOMECTOMY EXC 1-4 MYOMAS 250 GM/<	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58546	CPT	LAPS MYOMECTOMY EXC 5/> MYOMAS >250 GRAMS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	58548	CPT	LAPS W/RAD HYST W/BILAT LMPHADEC RMVL TUBE/OVARY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58550	CPT	LAPS VAGINAL HYSTERECTOMY UTERUS 250 GM/<	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58552	CPT	LAPS W/VAG HYSTERECT 250 GM/&RMVL TUBE&/OVARIES	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58553	CPT	LAPS W/VAGINAL HYSTERECTOMY > 250 GRAMS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58554	CPT	LAPS VAGINAL HYSTERECT > 250 GM RMVL TUBE&/OVAR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58555	CPT	HYSTEROSCOPY DIAGNOSTIC SEPARATE PROCEDURE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58559	CPT	HYSTEROSCOPY LYSIS INTRAUTERINE ADHESIONS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58560	CPT	HYSTEROSCOPY DIV/RESCJ INTRAUTERINE SEPTUM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58561	CPT	HYSTEROSCOPY REMOVAL LEIOMYOMATA	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58562	CPT	HYSTEROSCOPY REMOVAL IMPACTED FOREIGN BODY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58563	CPT	HYSTEROSCOPY ENDOMETRIAL ABLATION	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58565	CPT	HYSTEROSCOPY BI TUBE OCCLUSION W/PERM IMPLNTS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58570	CPT	LAPAROSCOPY W TOTAL HYSTERECTOMY UTERUS 250 GM/<	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58571	CPT	LAPS TOTAL HYSTERECT 250 GM/< W/RMVL TUBE/OVARY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58572	CPT	LAPAROSCOPY TOTAL HYSTERECTOMY UTERUS >250 GM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58573	CPT	LAPAROSCOPY TOT HYSTERECTOMY >250 G W/TUBE/OVAR	N	NA
ALOHAC Q3 2025	Physician Services	58580	CPT	TRANSCERVICAL ABLATION UTERINE FIBROID RF	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58600	CPT	LIG/TRNSXJ FLP TUBE ABDL/VAG APPR UNI/BI	N	NA
ALOHAC Q3 2025	Inpatient Hosp	58605	CPT	LIG/TRNSXJ FLP TUBE ABDL/VAG POSTPARTUM SPX	N	NA
ALOHAC Q3 2025	Inpatient Hosp	58611	CPT	LIG/TRNSXJ FALOPIAN TUBE CESAREAN DEL/ABDML SURG	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58615	CPT	OCCLUSION FLP TUBE DEV VAG/SUPRAPUBIC APPR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58670	CPT	LAPAROSCOPY FULGURATION OVIDUCTS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58671	CPT	LAPAROSCOPY W/PLMT OCCLUSION DEVICE OVIDUCTS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58672	CPT	LAPAROSCOPY FIMBRIOPLASTY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58673	CPT	LAPAROSCOPY SALPINGOSTOMY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58674	CPT	LAPS ABLTJ UTERINE FIBROIDS W/INTRAOP US GDN	N	NA
ALOHAC Q3 2025	Inpatient Hosp	58700	CPT	SALPINGECTOMY COMPLETE/PARTIAL UNI/BI SPX	N	NA
ALOHAC Q3 2025	Inpatient Hosp	58720	CPT	SALPINGO-OOPHORECTOMY COMPL/PRTL UNI/BI SPX	N	NA
ALOHAC Q3 2025	Inpatient Hosp	58740	CPT	LYSIS OF ADHESIONS SALPINX/OVARY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	58752	CPT	TUBOUTERINE IMPLANTATION	N	NA
ALOHAC Q3 2025	Inpatient Hosp	58760	CPT	FIMBRIOPLASTY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	58822	CPT	DRAINAGE OVARIAN ABSCESS ABDOMINAL APPROACH	N	NA
ALOHAC Q3 2025	Inpatient Hosp	58825	CPT	TRANSPOSITION OVARY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58920	CPT	WEDGE RESCJ/BISCTJ OVARY UNI/BI	N	NA
ALOHAC Q3 2025	Outpatient Hosp	58925	CPT	OVARIAN CYSTECTOMY UNI/BI	N	NA
ALOHAC Q3 2025	Inpatient Hosp	58940	CPT	OOPHORECTOMY PARTIAL/TOTAL UNI/BI	N	NA
ALOHAC Q3 2025	Inpatient Hosp	58943	CPT	OOPHORECTOMY PRTL/TOT UNI/BI OVARIAN MALIGNANCY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	58950	CPT	RESCJ OVARIAN/TUBAL/PERITONEAL MALIGNANCY W/BSO	N	NA
ALOHAC Q3 2025	Inpatient Hosp	58951	CPT	RESCJ PRIM PRTL MAL W/BSO & OMNTC TAH & LMPHAD	N	NA
ALOHAC Q3 2025	Inpatient Hosp	58952	CPT	RESCJ PRIM PRTL MAL W/BSO & OMNTC RAD DEBULKING	N	NA

ALOHAC Q3 2025	Inpatient Hosp	58953	CPT	BSO W/OMENTECTOMY TAH&RAD DEBULKING DISSECTION	N	NA
ALOHAC Q3 2025	Inpatient Hosp	58954	CPT	BSO W/OMENTECTOMY TAH DEBULKING W/LMPHADECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	58956	CPT	BSO W/TOT OMENTECTOMY & HYSTERECTOMY MALIGNANC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	58958	CPT	RESCJ RECR OVR TBL PP UTR MAL OMNTC PEL LMPHADEC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	58960	CPT	LAPT STG/RESTG OVARIAN TUBAL/PRIM MAL 2ND LOOK	N	NA
ALOHAC Q3 2025	Inpatient Hosp	59525	CPT	STOT/TOT HYSTERECTOMY AFTER CESAREAN DELIVERY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	60521	CPT	THYMECTOMY PRTL/TOT W/O RAD MEDSTNL DSJ SPX	N	NA
ALOHAC Q3 2025	Inpatient Hosp	60522	CPT	THYMECTOMY PRTL/TOT RAD MEDSTNL DSJ SPX	N	NA
ALOHAC Q3 2025	Inpatient Hosp	60540	CPT	ADRENALECTOMY W/EXPL W/WO BX ABDL/LMBR/DRSAL SPX	N	NA
ALOHAC Q3 2025	Inpatient Hosp	60545	CPT	ADRENALECTOMY EXPL W/EXC RETROPERTINEAL TUMOR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	60605	CPT	EXC CAROTID BODY TUMOR W EXC CAROTID ARTERY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	60650	CPT	LAPAROSCOPY ADRENALECTOMY PRTL/COMPL TABDL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	60660	CPT	ABLTJ 1/+THYROID NODULE 1 LOBE/ISTHMUS PERQ RF	N	NA
ALOHAC Q3 2025	Outpatient Hosp	60661	CPT	ABLTJ 1/+THYR NDUL ADDL LOBE PERQ RADIOFREQUENCY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61105	CPT	TWIST DRILL HOLE SUBDURAL/VENTRICULAR PUNCTURE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61107	CPT	TWIST DRILL HOLE IMPLT VENTRICULAR CATH/DEVICE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61108	CPT	TWIST DRILL HOLE EVAC&/DRG SUBDURAL HEMATOMA	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61120	CPT	BURR HOLE FOR VENTRICULAR PUNCTURE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61140	CPT	BURR HOLE/TREPHINE W/BX BRAIN/INTRACRNIAL LESION	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61150	CPT	BURR HOLE/TREPHINE W/DRG BRAIN ABSCESS/CYST	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61151	CPT	BURR HOLE/TREPHINE W/SBSQ TAPPING ICRA ABSC/CYST	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61154	CPT	BURR HOLE W/EVAC&/DRG HEMATOMA EXTRADURAL/SDRL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61156	CPT	BURR HOLE W/ASPIR HEMATOMA/CYST INTRACEREBRAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61210	CPT	BURR HOLE IMPLANT VENTRICULAR CATH/OTHER DEVICE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61250	CPT	BURR HOLE/TREPHINE STTL EXPL N/FLWD OTH SURG	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61253	CPT	BURR HOLE/TREPHINE INFRATENTORIAL UNI/BI	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61304	CPT	CRANIECTOMY/CRANIOTOMY EXPL SUPRATENTORIAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61305	CPT	CRANIECTOMY/CRANIOTOMY EXPL INFRATENTORIAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61312	CPT	CRNEC/CRNOT HMTMA SUPRATENTORIAL XDRL/SUBDURAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61313	CPT	CRNEC/CRNOT HMTMA SUPRATENTORIAL INTRACEREBRAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61314	CPT	CRNEC/CRNOT HMTMA INFRATENTORIAL XDRL/SDRL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61315	CPT	CRNEC/CRNOT HMTMA INFRATENTORIAL INTRACEREBELLAR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61316	CPT	INCISION&SUBCUTANEOUS PLMT CRANIAL BONE GRAFT	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61320	CPT	CRNEC/CRNOT DRG INTRACRANIAL ABSC SUPRATENTORIAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61321	CPT	CRNEC/CRNOT DRG INTRACRANIAL ABSC INFRATENTORIAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61322	CPT	CRNEC/CRNOT DCMPRV W/WO DURAPLASTY W/O LOBECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61323	CPT	CRNEC/CRNOT W/WO DURAPLASTY WITH LOBECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61333	CPT	EXPL ORBIT TRANSCRANIAL APPROACH W/RMVL LESION	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61340	CPT	SUBTEMPORAL CRANIAL DECOMPRESSION	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61343	CPT	CRNEC SUBOCCIPITAL CRV LAM DCMPRN MEDULLA & CORD	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61345	CPT	OTHER CRANIAL DECOMPRESSION POSTERIOR FOSSA	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61450	CPT	CRNEC STPL SCTJ COMPRESSION/DCMPRN GANGLION	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61458	CPT	CRNEC SOPL EXPLORATION/DECOMPRESSION CRANIAL NRV	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61460	CPT	CRANIECTOMY SUBOCCIPITAL SECTION 1/> CRANIAL NRV	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61500	CPT	CRANIECTOMY W/EXCISION TUMOR/OTH BONE LESION SKL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61501	CPT	CRANIECTOMY FOR OSTEOMYELITIS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61510	CPT	CRNEC TREPH BONE FLAP CRNOT EXC BRAIN TUMOR STTL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61512	CPT	CRNEC TREPH BONE FLAP CRNOT EXC MENINGIOMA STTL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61514	CPT	CRNEC TREPH BONE FLAP CRNOT EXC BRAIN ABSC STTL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61516	CPT	CRNEC TREPH BONE FLAP CRNOT EXC/FENEST CYST STTL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61517	CPT	IMPLTJ BRAIN INTRACAVITARY CHEMOTHERAPY AGENT	N	NA

ALOHAC Q3 2025	Inpatient Hosp	61518	CPT	CRNEC EXC BRAIN TUMOR INFRATENTORIAL/POST FOSSA	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61519	CPT	CRNEC EXC TUM INFRATENTOR/POST FOSSA MENINGIOMA	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61520	CPT	CRNEC TUM INFRATTL/POSTFOSSA CRBLOPNT ANGLE TUM	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61521	CPT	CRNEC TUM INFRATTL/PFOSSA MIDLINE TUM BASE SKULL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61522	CPT	CRNEC INFRATNTORIAL/POST FOSSA EXC BRAIN ABSCESS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61524	CPT	CRNEC INFRATNTOR/POSTFOSSA EXC/FENESTRATION CYST	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61526	CPT	CRNEC TRANSTEMPOR EXC CEREBELLOPONTINE ANGLE TUM	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61530	CPT	CRNEC EXC CEREBELLOPNTIN ANGLE TUM MID/POSTFOSSA	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61531	CPT	SUBDURAL IMPLTJ ELECTRODES SEIZURE MONITORING	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61533	CPT	CRANIOT SUBDURAL IMPLT ELCTRD SEIZURE MONITORING	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61534	CPT	CRANIOT EPILEPTOGENIC FOC W/O ELECTRCORTICOGRPHY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61535	CPT	CRANIOT RMVL EPID/SUBDURL ELCTRD W/O EXC TIS SPX	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61536	CPT	CRANIOT EPILEPTOGENIC FOCUS W/ELECTROCORTCOGRPHY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61537	CPT	CRANIOT TEMPORAL LOBE W/O ELECTROCORTICOGRAPHY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61538	CPT	CRANIOT LOBEC TEMPORAL LOBE W/ELECTROCORTCOGRPHY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61539	CPT	CRANIOT LOBECTOMY OTH/THN TEMPORAL LOBE W/ECOG	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61540	CPT	CRANIOT LOBECTOMY OTH/THN TEMPORAL LOBE W/O ECOG	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61541	CPT	CRANIOTOMY TRANSECTION CORPUS CALLOSUM	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61543	CPT	CRANIOTOMY PARTIAL/SUBTOTAL HEMISPHERECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61544	CPT	CRANIOTOMY EXCISION/COAGULATION CHOROID PLEXUS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61545	CPT	CRANIOTOMY EXCISION CRANIOPHARYNGIOMA	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61546	CPT	CRANIOT HYPOPHYSEC/EXC PITUITARY TUMOR ICRL APPR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61548	CPT	HYPOPHYSEC/EXC PITUITARY TUM TRANSNASAL/SEPTAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61550	CPT	CRANIECTOMY CRANIOSYNOSTOSIS 1 CRANIAL SUTURE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61552	CPT	CRANIECT CRANIOSYNOSTOSIS MULT CRANIAL SUTURES	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61556	CPT	CRANIEC CRANIOSYNOSTOSIS FRONT/PARIET BONE FLAP	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61557	CPT	CRANIECTOMY CRANIOSYNOSTOSIS BIFRONTAL BONE FLAP	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61558	CPT	XTN CRANIECT MULTIPLE SUTURE CRANIOSYNOSTOSIS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61559	CPT	XTN CRNEC MLT SUTR CRANIOSYNOSTOSIS W/BONE GRAFT	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61563	CPT	EXC BENIGN TUM CRANIAL BONE W/O OPTIC NRV DCMPRN	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61564	CPT	EXC BENIGN TUM CRANIAL BONE W/OPTIC NRV DCMPRN	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61566	CPT	CRANIOTOMY SELECTIVE AMYGDALOHIPPOCAMPECTOMY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61567	CPT	CRANIOTOMY MULTIPLE SUBPIAL TRANSECTIONS W/ECOG	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61575	CPT	TRNSRAL SKULL BSE/BR STEM/CORD BX/DCOMPR/EXC LES	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61576	CPT	TRNSRL SKUL BSE/BR STM/CORD BX/DCMP/ SPLT TONGUE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61580	CPT	CRANIOFACIAL ANT CRANIAL FOSSA W/O ORBITAL EXNTJ	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61581	CPT	CRANIOFACIAL ANT CRANIAL FOSSA W/ORBITAL EXNTJ	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61582	CPT	CRANFCL ANT CRANIAL FOSSA UNI/BI CRANIOT/OSTEOT	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61583	CPT	CRANFCL ANT CRANIAL FOSSA UNI/BIFRNTL ELEV LOBE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61584	CPT	ORBITOCRANIAL ANT CRANIAL FOSSA W/O ORBIT EXNTJ	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61585	CPT	ORBITOCRANIAL ANT CRANIAL FOSSA W/ORBITAL EXNTJ	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61586	CPT	BICORONAL TRANSZYGMTC&/LEFORT I W/O BONE GRFT	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61590	CPT	INFRATEMPORAL MID CRANIAL FOSSA W/WO DISARTICLTN	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61591	CPT	INFRATEMPO MID CRANIAL FOSSA W/WO DCOMPR&/MOBI	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61592	CPT	ORBITOCRNL APPR MID CRANIAL FOSSA TEMPORAL LOBE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61595	CPT	TRANSTEMP APPR POST CRAN FOSSA DCOMPR SINUS/NRV	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61596	CPT	TRANSCOCHLR POST CRNL FOSSA W/WO MOBIL NRV/ART	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61597	CPT	TRNSCONDLR POST CRNL FOSSA DCOMPR ART W/WO MOBIL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61598	CPT	TRANSPTRSAL POST CRNL FOSSA CLIVUS/FORAMN MAGNUM	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61600	CPT	RESCJ/EXC LES BASE ANT CRANIAL FOSSA EXTRADURAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	61601	CPT	RESCJ/EXC LES BASE ANT CRNL FOSSA INDRL W/WO GRF	N	NA

ALOHAC	Q3 2025	Inpatient Hosp	61605	CPT	RESCJ/EXC LES INFRATEMPOR FOSSA SPACE APEX XDRL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	61606	CPT	RESCJ/EXC LES ITPRL FOSSA SPACE APEX IDRL W/RPR	N NA
ALOHAC	Q3 2025	Inpatient Hosp	61607	CPT	RESCJ/EXC LES PARASELLAR SINUS CLIVUS/MSB XDRL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	61608	CPT	RESCJ/EXC LES PARASELLAR SINUS CLIVUS/MSB IDRL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	61611	CPT	TRNSXJ/LIG CAROTID ARTERY PETROUS CANAL W/O RPR	N NA
ALOHAC	Q3 2025	Inpatient Hosp	61613	CPT	OBLTRJ CAROTID ARYSM ARTVEN CAROTID FISTULA DSJ	N NA
ALOHAC	Q3 2025	Inpatient Hosp	61615	CPT	RESCJ/EXC LES BASE POST CRNL FOSSA JUG FRMN XDRL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	61616	CPT	RESCJ/EXC LES BASE PCF FORAMEN VRT BODIES IDRL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	61618	CPT	SECONDARY RPR DURA CSF LEAK FREE TISSUE GRAFT	N NA
ALOHAC	Q3 2025	Inpatient Hosp	61619	CPT	SEC RPR DURA CSF LEAK LOCAL/REGIONALIZED FLAP	N NA
ALOHAC	Q3 2025	Inpatient Hosp	61630	CPT	BALLOON ANGIOPLASTY INTRACRANIAL PERCUTANEOUS	N NA
ALOHAC	Q3 2025	Inpatient Hosp	61635	CPT	TCAT PLMT IV STENT ICRA W/BALO ANGIOP IF PFRMD	N NA
ALOHAC	Q3 2025	Outpatient Hosp	61715	CPT	MRGFUS STEREOTACTIC ABLATION TARGET INTRACRANIAL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	61735	CPT	CRTJ LES STRTCTC BURR SUBCORTICAL STRUX OTH/THN	N NA
ALOHAC	Q3 2025	Inpatient Hosp	61736	CPT	LITT LES ICR SINGLE TRAJECTORY 1 SIMPLE LESION	N NA
ALOHAC	Q3 2025	Inpatient Hosp	61737	CPT	LITT LES ICR MLT TRAJECTORIES MLT/CPLX LESIONS	N NA
ALOHAC	Q3 2025	Inpatient Hosp	61750	CPT	STEREOTACTIC BX ASPIR/EXC BURR INTRACRANIAL LES	N NA
ALOHAC	Q3 2025	Inpatient Hosp	61751	CPT	STRTCTC BX ASPIR/EXC BURR ICRA LESION W/CT&I/MR	N NA
ALOHAC	Q3 2025	Inpatient Hosp	61760	CPT	STRTCTC IMPLTJ ELTRD CEREBRUM SEIZURE MONITORING	N NA
ALOHAC	Q3 2025	Inpatient Hosp	61850	CPT	TWIST/BURR HOLE IMPLTJ NSTIM ELTRD CORTICAL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	61860	CPT	CRNEC/CRX IMPLTJ NSTIM ELTRD CERE CORTICAL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	61863	CPT	STRTCTC IMPLTJ NSTIM ELTRD W/O RECORD 1ST ARRAY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	61864	CPT	STRTCTC IMPLTJ NSTIM ELTRD W/O RECORD EA ARRAY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	61867	CPT	STRTCTC IMPLTJ NSTIM ELTRD W/RECORD 1ST ARRAY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	61868	CPT	STRTCTC IMPLTJ NSTIM ELTRD W/RECORD EA ARRAY	N NA
ALOHAC	Q3 2025	Physician Services	61889	CPT	INSERTION SKULL-MNTD CRANIAL NSTIM PG/RECEIVER	N NA
ALOHAC	Q3 2025	Physician Services	61891	CPT	REVJ/RPLCMT SKULL-MNTD CRANIAL NSTIM PG/RECEIVER	N NA
ALOHAC	Q3 2025	Physician Services	61892	CPT	REMOVAL SKULL-MNTD CRANIAL NSTIM PG/RCVR W/CRNOP	N NA
ALOHAC	Q3 2025	Inpatient Hosp	62140	CPT	CRANIOPLASTY SKULL DEFECT <5 CM DIAMETER	N NA
ALOHAC	Q3 2025	Inpatient Hosp	62141	CPT	CRANIOPLASTY SKULL DEFECT >5 CM DIAMETER	N NA
ALOHAC	Q3 2025	Inpatient Hosp	62142	CPT	RMVL BONE FLAP/PROSTHETIC PLATE SKULL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	62143	CPT	RPLCMT BONE FLAP/PROSTHETIC PLATE SKULL	N NA
ALOHAC	Q3 2025	Inpatient Hosp	62145	CPT	CRANIOPLASTY SKULL DEFECT REPARATIVE BRAIN SURG	N NA
ALOHAC	Q3 2025	Inpatient Hosp	62146	CPT	CRANIOPLASTY W/AUTOGRAFT <5 CM DIAMETER	N NA
ALOHAC	Q3 2025	Inpatient Hosp	62147	CPT	CRANIOPLASTY W/AUTOGRAFT > 5 CM DIAMETER	N NA
ALOHAC	Q3 2025	Inpatient Hosp	62148	CPT	INCISE&RETRIEVAL SUBQ CRANIOPLASTY BONE GRAFT	N NA
ALOHAC	Q3 2025	Inpatient Hosp	62161	CPT	NUNDSC ICRA DSJ ADS FENESTRATION SEPTUM CSTS	N NA
ALOHAC	Q3 2025	Inpatient Hosp	62162	CPT	NUNDSC ICRA FENESTEXC CYST W/VENTRIC CATH DRG	N NA
ALOHAC	Q3 2025	Inpatient Hosp	62164	CPT	NEUROENDOSCOPY ICRA W/RETRIEVAL FOREIGN BODY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	62165	CPT	NUNDSC ICRA EXC PITUITRY TUM TRNSNSL/SPHENOID	N NA
ALOHAC	Q3 2025	Inpatient Hosp	62180	CPT	VENTRICULOCISTERNOSTOMY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	62190	CPT	CRTJ SHUNT SARACH/SDRL-ATR-JUG-AUR	N NA
ALOHAC	Q3 2025	Inpatient Hosp	62192	CPT	CRTJ SHUNT SARACH/SDRL-PRTL-PLEURAL OTH	N NA
ALOHAC	Q3 2025	Inpatient Hosp	62200	CPT	VENTRICULOCISTERNOSTOMY 3RD VENTRICLE	N NA
ALOHAC	Q3 2025	Inpatient Hosp	62201	CPT	VENTRICULOCISTERNOSTOMY 3RD VNTRC NEURONDSC	N NA
ALOHAC	Q3 2025	Inpatient Hosp	62220	CPT	CRTJ SHUNT VENTRICULO-ATR-JUG-AUR	N NA
ALOHAC	Q3 2025	Inpatient Hosp	62223	CPT	CRTJ SHUNT VENTRICULO-PERITNEAL-PLEURAL TERMINUS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	62263	CPT	PRQ LYSIS EPIDURAL ADHESIONS MULT SESS 2/> DAYS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	62264	CPT	PRQ LYSIS EPIDURAL ADHESIONS MULT SESSIONS 1 DAY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	62267	CPT	PRQ ASPIR PULPOSUS/INTERVERTEBRAL DISC/PVRT TISS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	62269	CPT	BIOPSY SPINAL CORD PERCUTANEOUS NEEDLE	N NA

ALOHAC Q3 2025	Outpatient Hosp	62287	CPT	DCMPRN PX PERQ NUCLEUS PULPOSUS 1/MLT LVL LUMBAR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	62290	CPT	INJECTION PX DISCOGRAPHY EACH LEVEL LUMBAR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	62291	CPT	INJECTION PX DISCOGRPHY EA LVL CERVICAL/THORACIC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	62292	CPT	INJECTION PX CHEMONUCLEOLYSIS 1/MLT LUMBAR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	62294	CPT	NJX ARTERIAL OCCLUSION ARVEN MALFRMJ SPINAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	62350	CPT	IMPLTJ REVJ/RPSG ITHCL/EDRL CATH PMP W/O LAM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	62351	CPT	IMPLTJ REVJ/RPSG ITHCL/EDRL CATH W/LAM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	62355	CPT	RMVL PREVIOUSLY IMPLTED ITHCL/EDRL CATH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	62360	CPT	IMPLTJ/RPLCMT ITHCL/EDRL DRUG NFS SUBQ RSVR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	62361	CPT	IMPLTJ/RPLCMT FS NON-PRGRBL PUMP	N	NA
ALOHAC Q3 2025	Outpatient Hosp	62362	CPT	IMPLTJ/RPLCMT ITHCL/EDRL DRUG NFS PRGRBL PUMP	N	NA
ALOHAC Q3 2025	Physician Services	62367	CPT	ELECT ANLYS IMPLT ITHCL/EDRL PMP W/O REPRG/REFIL	N	NA
ALOHAC Q3 2025	Physician Services	62368	CPT	ELECT ANALYS IMPLT ITHCL/EDRL PUMP W/REPRGRMG	N	NA
ALOHAC Q3 2025	Physician Services	62369	CPT	ELECT ANLYS IMPLT ITHCL/EDRL PMP W/REPRG&REFIL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	62370	CPT	ELEC ANLYS IMPLT ITHCL/EDRL PMP W/REPR PHYS/QHP	N	NA
ALOHAC Q3 2025	Outpatient Hosp	62380	CPT	NDSC DCMPRN SPINAL CORD 1 W/LAMOT NTRSPC LUMBAR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63001	CPT	LAM W/O FACETEC FORAMOT/DSC 1/2 VRT SGM CRV	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63003	CPT	LAMINECTOMY W/O FFD 1/2 VERT SEG THORACIC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63005	CPT	LAMINECTOMY W/O FFD 1/2 VERT SEG LUMBAR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63011	CPT	LAMINECTOMY W/O FFD 1/2 VERT SEG SACRAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63012	CPT	LAMINECTOMY W/RMVL ABNORMAL FACETS LUMBAR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63015	CPT	LAMINECTOMY W/O FFD > 2 VERT SEG CERVICAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63016	CPT	LAMINECTOMY W/O FFD > 2 VERT SEG THORACIC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63017	CPT	LAMINECTOMY W/O FFD > 2 VERT SEG LUMBAR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63020	CPT	LAMNOTMY INCL W/DCMPRSN NRV ROOT 1 INTRSPC CERVC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63030	CPT	LAMNOTMY INCL W/DCMPRSN NRV ROOT 1 INTRSPC LUMBR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63035	CPT	LAMNOTMY W/DCMPRSN NRV EACH ADDL CRVCL/LMBR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63040	CPT	LAMOT PRTL FFD EXC DISC REEXPL 1 NTRSPC CERVICAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63042	CPT	LAMOT PRTL FFD EXC DISC REEXPL 1 NTRSPC LUMBAR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63043	CPT	LAMOT PRTL FFD EXC DISC REEXPL 1 NTRSPC EA CRV	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63044	CPT	LAMOT W/PRTL FFD HRNA8 REEXPL 1 NTRSPC EA LMBR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63045	CPT	LAM FACETECTOMY & FORAMOTOMY 1 VRT SGM CERVICAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63046	CPT	LAM FACETECTOMY & FORAMOTOMY 1 VRT SGM THORACIC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63047	CPT	LAM FACETECTOMY & FORAMOTOMY 1 VRT SGM LUMBAR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63048	CPT	LAM FACETECTOMY&FORAMOT 1 VRT SGM EA ADDL SGM	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63050	CPT	LAMOP CERVICAL W/DCMPRN SPI CORD 2/> VERT SEG	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63051	CPT	LAMOPLASTY CERVICAL DCMPRN CORD 2/> SEG RCNSTJ	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63052	CPT	LAM FACETEC/FORAMOT DRG ARTHRD LUMBAR 1 VRT SGM	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63053	CPT	LAM FACETEC/FORAMOT DRG ARTHRD LMBR EA ADDL SGM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63055	CPT	TRANSPEDICULAR DCMPRN SPINAL CORD 1 SEG THORACIC	N	NA
ALOHAC Q3 2025	Physician Services	63056	CPT	TRANSPEDICULAR DCMPRN SPINAL CORD 1 SEG LUMBAR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63057	CPT	TRANSPEDICULAR DCMPRN 1 SEG EA THORACIC/LUMBAR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63064	CPT	COSTOVERTEBRAL DCMPRN SPINAL CORD THORACIC 1 SEG	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63066	CPT	COSTOVERTEBRAL DCMPRN SPINE CORD THORACIC EA SEG	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63075	CPT	DISCECTOMY ANT DCMPRN CORD CERVICAL 1 NTRSPC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63076	CPT	DISCECTOMY ANT DCMPRN CORD CERVICAL EA NTRSPC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63077	CPT	DISCECTOMY ANT DCMPRN CORD THORACIC 1 NTRSPC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63078	CPT	DISCECTOMY ANT DCMPRN CORD THORACIC EA NTRSPC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63081	CPT	VERTEBRAL CORPECTOMY ANT DCMPRN CERVICAL 1 SEG	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63082	CPT	VERTEBRAL CORPECTOMY DCMPRN CERVICAL EA SEG	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63085	CPT	VERTEBRAL CORPECTOMY DCMPRN CORD THORACIC 1 SEG	N	NA

ALOHAC Q3 2025	Inpatient Hosp	63086	CPT	VERTEBRAL CORPECTOMY DCMPRN CORD THORACIC EA SEG	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63087	CPT	VCRPEC THORACOLMBR DCMPRN LWR THRC/LMBR 1 SEG	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63088	CPT	VCRPEC THORACOLMBR DCMPRN LWR THRC/LMBR EA SEG	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63090	CPT	VCRPEC TRANSPRTL/RPR DCMPRN THRC LMBR/SAC 1 SEG	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63091	CPT	VCRPEC TRANSPRTL/RPR DCMPRN THRC LMBR/SAC EA SEG	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63101	CPT	VERTEB CORPECT LAT XTRCAVITARY DCMPRN THRC 1 SEG	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63102	CPT	VERTEB CORPECT LAT XTRCAVITARY DCMPRN LMBR 1 SEG	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63103	CPT	VCRPEC LAT XTRCAVITARY DCMPRN THRC/LMBR EA SEG	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63170	CPT	LAM W/MYELOTOMY CERVICAL/THORACIC/THORACOLUMBAR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63172	CPT	LAM W/DRG INTRMEDULLARY CYST/SYRINX SUBARACHNOID	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63173	CPT	LAM W/DRG INTRMEDULRY CYST/SYRINX PRTL/PLEURAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63185	CPT	LAMINECTOMY W/RHIZOTOMY 1/2 SEGMENTS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63190	CPT	LAMINECTOMY W/RHIZOTOMY > 2 SEGMENTS	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63191	CPT	LAMINECTOMY W/SECTION SPINAL ACCESSORY NERVE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63197	CPT	LAM W/CORDOTOMY SCTJ SPINOTHALAMIC TRC 1STG THRC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63200	CPT	LAMINECTOMY RELEASE TETHERED SPINAL CORD LUMBAR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63250	CPT	LAM EXC/OCCLUSION AVM SPINAL CORD CERVICAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63251	CPT	LAM EXC/OCCLUSION AVM SPINAL CORD THORACIC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63252	CPT	LAM EXC/OCCLUSION AVM SPI CORD THORACOLUMBAR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63265	CPT	LAM EXC/EVAC ISPI LES OTH/THN NEO XDRL CERVICAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63266	CPT	LAM EXC/EVAC ISPI LES OTH/THN NEO XDRL THORACIC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63267	CPT	LAM EXC/EVAC ISPI LESION OTH/THN NEO XDRL LUMBAR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63268	CPT	LAM EXC/EVAC ISPI LES OTH/THN NEO XDRL SACRAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63270	CPT	LAM EXC ISPI LES OTH/THN NEO IDRL CERVICAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63271	CPT	LAM EXC ISPI LES OTH/THN NEO IDRL THORACIC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63272	CPT	LAM EXC ISPI LES OTH/THN NEO IDRL LUMBAR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63273	CPT	LAM EXC ISPI LES OTH/THN NEO IDRL SACRAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63275	CPT	LAMINECTOMY BX/EXC ISPI NEO XDRL CERVICAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63276	CPT	LAMINECTOMY BX/EXC ISPI NEO XDRL THORACIC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63277	CPT	LAMINECTOMY BX/EXC ISPI NEO XDRL LUMBAR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63278	CPT	LAMINECTOMY BX/EXC ISPI NEO XDRL SACRAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63280	CPT	LAM BX/EXC ISPI NEO IDRL XMED CERVICAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63281	CPT	LAM BX/EXC ISPI NEO IDRL XMED THORACIC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63282	CPT	LAM BX/EXC ISPI NEO IDRL XMED LUMBAR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63283	CPT	LAM BX/EXC ISPI NEO IDRL SACRAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63285	CPT	LAM BX/EXC ISPI NEO IDRL IMED CERVICAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63286	CPT	LAM BX/EXC ISPI NEO IDRL IMED THORACIC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63287	CPT	LAM BX/EXC ISPI NEO IDRL IMED THORACOLMBR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63290	CPT	LAM BX/EXC ISPI NEO XDRL-IDRL LES ANY LVL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63295	CPT	OSTPL RCNSTJ DORSAL SPI ELMNTS FLWG ISPI PX	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63300	CPT	VCRPEC LES 1 SGM XDRL CERVICAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63301	CPT	VCRPEC LES 1 SGM XDRL THORACIC TTHRC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63302	CPT	VCRPEC LES 1 SEG XDRL THRC THORACOLMBR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63303	CPT	VCRPEC LES 1 SEG XDRL LMBR/SAC TRANSPRTL/RPR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63304	CPT	VERTEBRAL CORPECTOMY EXC LES 1 SEG IDRL CERVICAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63305	CPT	VERTEBRAL CORPECTOMY LES 1 SEG IDRL THRC TTHRC	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63306	CPT	VERTEBRL CORPECT LES 1 SEG IDRL THRC THORACOLMBR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63307	CPT	VCRPEC LES 1 SEG IDRL LMBR/SAC TRANSPRTL/RPR	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63308	CPT	VERTEBRAL CORPECTOMY EXC INDRL LES EACH SEG	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63600	CPT	CREATION LES SPINAL CORD STEREOTACTIC METHOD PRQ	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63610	CPT	STRTCTC STIMJ SPI CORD PRQ SPX N/FLWD OTH SURG	N	NA

ALOHAC Q3 2025	Outpatient Hosp	63620	CPT	STEREOTACTIC RADIOSURGERY 1 SPINAL LESION	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63621	CPT	STEREOTACTIC RADIOSURGERY EA ADDL SPINAL LESION	N	NA
ALOHAC Q3 2025	Physician Services	63650	CPT	PRQ IMPLTJ NSTIM ELECTRODE ARRAY EPIDURAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63655	CPT	LAM IMPLTJ NSTIM ELTRDS PLATE/PADDLE EDRL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63663	CPT	REVJ INCL RPLCMT NSTIM ELTRD PRQ RA INCL FLUOR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63664	CPT	REVJ INCL RPLCMT NSTIM ELTRD PLT/PDLE INCL FLUOR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63685	CPT	INSJ/RPLCMT SPINAL NPG/RCVR POCKET CRTJ&CONNJ	N	NA
ALOHAC Q3 2025	Outpatient Hosp	63688	CPT	REVJ/RMVL IMPL SPI NPG/RCVR DTCH CONNJ ELTRD RA	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63700	CPT	REPAIR MENINGOCELE < 5 CM DIAMETER	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63702	CPT	REPAIR MENINGOCELE > 5 CM DIAMETER	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63704	CPT	REPAIR MYELOMENINGOCELE < 5 CM DIAMETER	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63706	CPT	REPAIR MYELOMENINGOCELE > 5 CM DIAMETER	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63710	CPT	DURAL GRAFT SPINAL	N	NA
ALOHAC Q3 2025	Inpatient Hosp	63740	CPT	CRTJ SHUNT LMBR SARACH-PRTL-PLEURAL/OTH W/LAM	N	NA
ALOHAC Q3 2025	Physician Services	64400	CPT	INJECTION AA&/STRD TRIGEMINAL NERVE EACH BRANCH	N	NA
ALOHAC Q3 2025	Outpatient Hosp	64408	CPT	INJECTION AA&/STRD VAGUS NERVE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	64416	CPT	INJECTION AA&/STRD BRACH PLEX CONT NFS CATH IMG	N	NA
ALOHAC Q3 2025	Outpatient Hosp	64417	CPT	INJECTION AA&/STRD AXILLARY NERVE W/IMG GDN	N	NA
ALOHAC Q3 2025	Outpatient Hosp	64418	CPT	INJECTION AA&/STRD SUPRASCAPULAR NERVE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	64420	CPT	INJECTION AA&/STRD INTERCOSTAL NRV SINGLE LVL	N	NA
ALOHAC Q3 2025	Physician Services	64421	CPT	INJECTION AA&/STRD INTERCOSTAL NRV EA ADDL LVL	N	NA
ALOHAC Q3 2025	Physician Services	64425	CPT	INJECTION AA&/STRD ILIOINGUINAL IH NERVES	N	NA
ALOHAC Q3 2025	Physician Services	64430	CPT	INJECTION AA&/STRD PUDENDAL NERVE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	64446	CPT	INJECTION AA&/STRD SCIATIC NRV CONT NFS CATH IMG	N	NA
ALOHAC Q3 2025	Physician Services	64448	CPT	INJECTION AA&/STRD FEMORAL NERVE CONT NFS CATH	N	NA
ALOHAC Q3 2025	Physician Services	64449	CPT	INJECTION AA&/STRD LUMBAR PLEXUS CONT NFS CATH	N	NA
ALOHAC Q3 2025	Physician Services	64451	CPT	INJECTION AA&/STRD NERVES NRVTG SI JOINT W/IMG	N	NA
ALOHAC Q3 2025	Outpatient Hosp	64454	CPT	INJECTION AA&/STRD GENICULAR NRV BRANCHES W/IMG	N	NA
ALOHAC Q3 2025	Outpatient Hosp	64455	CPT	NJX AA&/STRD PLANTAR COMMON DIGITAL NERVES	N	NA
ALOHAC Q3 2025	Outpatient Hosp	64461	CPT	PVB THORACIC SINGLE INJECTION SITE W/IMG GID	N	NA
ALOHAC Q3 2025	Physician Services	64462	CPT	PVB THORACIC SECOND & ADDL INJ SITE W/IMG GID	N	NA
ALOHAC Q3 2025	Outpatient Hosp	64463	CPT	PVB THORACIC CONT CATHETER INFUSION W/IMG GID	N	NA
ALOHAC Q3 2025	Inpatient Hosp	64466	CPT	THORACIC FASCIAL PLANE BLOCK UNI INJECTION	N	NA
ALOHAC Q3 2025	Inpatient Hosp	64467	CPT	THORACIC FASCIAL PLANE BLOCK UNI CONT INFUSION	N	NA
ALOHAC Q3 2025	Inpatient Hosp	64468	CPT	THORACIC FASCIAL PLANE BLOCK BI INJECTION	N	NA
ALOHAC Q3 2025	Inpatient Hosp	64469	CPT	THORACIC FASCIAL PLANE BLOCK BI CONT INFUSION	N	NA
ALOHAC Q3 2025	Inpatient Hosp	64473	CPT	LOWER XTR FASCIAL PLANE BLOCK UNI INJECTION	N	NA
ALOHAC Q3 2025	Inpatient Hosp	64474	CPT	LOWER XTR FASCIAL PLANE BLOCK UNI CONT INFUSION	N	NA
ALOHAC Q3 2025	Outpatient Hosp	64487	CPT	TAP BLOCK UNILATERAL BY CONTINUOUS INFUSION(S)	N	NA
ALOHAC Q3 2025	Outpatient Hosp	64488	CPT	TAP BLOCK BILATERAL BY INJECTION(S)	N	NA
ALOHAC Q3 2025	Physician Services	64489	CPT	TAP BLOCK BILATERAL BY CONTINUOUS INFUSION(S)	N	NA
ALOHAC Q3 2025	Outpatient Hosp	64505	CPT	INJECTION ANES AGENT SPHENOPALATINE GANGLION	N	NA
ALOHAC Q3 2025	Outpatient Hosp	64510	CPT	NJX ANES STELLATE GANGLION CRV SYMPATHETIC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	64517	CPT	INJECTION ANES SUPERIOR HYPOGASTRIC PLEXUS	N	NA
ALOHAC Q3 2025	Physician Services	64520	CPT	INJECTION ANES LMBR/THRC PARAVERTBRL SYMPATHETIC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	64530	CPT	INJX ANES CELIAC PLEXUS W/WO RADIOLOGIC MONITRNG	N	NA
ALOHAC Q3 2025	Outpatient Hosp	64553	CPT	PRQ IMPLTJ NEUROSTIMULATOR ELTRD CRANIAL NERVE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	64555	CPT	PRQ IMPLTJ NEUROSTIMULATOR ELTRD PERIPHERAL NRV	N	NA
ALOHAC Q3 2025	Outpatient Hosp	64561	CPT	PRQ IMPLTJ NEUROSTIM ELTRD SACRAL NRVE W/IMAGING	N	NA
ALOHAC Q3 2025	Physician Services	64566	CPT	POST TIB NEUROSTIMULATION PRQ NEEDLE ELECTRODE	N	NA
ALOHAC Q3 2025	Physician Services	64568	CPT	OPEN IMPLANTATION CRANIAL NERVE NEA & PULSE GEN	N	NA

ALOHAC	Q3 2025	Outpatient Hosp	64569	CPT	REVISION/REPLMT NEUROSTIMLATOR ELTRD CRANIAL NRV	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64570	CPT	REMOVAL CRNL NRV NSTIM ELTRDS & PULSE GENERATO	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64575	CPT	OPEN IMPLANTATION NEA PERIPHERAL NERVE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64580	CPT	OPEN IMPLANTATION NEA NEUROMUSCULAR	N NA
ALOHAC	Q3 2025	Physician Services	64581	CPT	OPEN IMPLANTATION NEA SACRAL NERVE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64582	CPT	OPEN IMPLTJ HPGLSL NRV NSTIM RA PG&RESPIR SENSOR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64583	CPT	REVJ/RPLCMT HPGLSL NERVE NSTIM RA PG&RESPIR SNR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64584	CPT	REMOVAL HYPOGLOSSAL NERVE NSTIM RA PG&RESPIR SNR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64585	CPT	REVJ/RMVL PERPH NEUROSTIMULATOR ELECTRODE ARRAY	N NA
ALOHAC	Q3 2025	Physician Services	64590	CPT	INS/RPLC PERPH SAC/GSTRC NPG/RCVR PCKT CRTJ&CONN	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64595	CPT	REV/RMV PRPH SAC/GSTRC NPG/RCV DTCH CONN ELTR RA	N NA
ALOHAC	Q3 2025	Physician Services	64596	CPT	INSJ/RPLCMT PERQ ELTRD RA PN W/INT NSTIM 1ST RA	N NA
ALOHAC	Q3 2025	Physician Services	64597	CPT	INSJ/RPLCMT PERQ ELTRD RA PN INT NSTIM EA ADD RA	N NA
ALOHAC	Q3 2025	Physician Services	64598	CPT	REVISION/REMOVAL NSTIM ELTRD ARRAY PN INT NSTIM	N NA
ALOHAC	Q3 2025	Physician Services	64600	CPT	DSTRJ TRIGEMINAL NRV SUPRAORB INFRAORB BRANCH	N NA
ALOHAC	Q3 2025	Physician Services	64605	CPT	DSTRJ NEUROLYTIC TRIGEMINAL NRV 2/3 DIV BRANCH	N NA
ALOHAC	Q3 2025	Physician Services	64610	CPT	DSTRJ NEURLYTIC TRIGEM NRV 2/3 DIV RADIO MONITOR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64611	CPT	CHEMODENERV PAROTID&SUBMANDIBL SALIVARY GLNDS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64612	CPT	CHEMODNRVTJ MUSC MUSC INNERVATED FACIAL NRV UNIL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64615	CPT	CHEMODERVATE FACIAL/TRIGEM/CERV MUSC MIGRAINE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64616	CPT	CHEMODENERVATION MUSCLE NECK UNILAT FOR DYSTONIA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64617	CPT	CHEMODENERVATION MUSCLE LARYNX UNILAT W/EMG	N NA
ALOHAC	Q3 2025	Physician Services	64620	CPT	DSTRJ NEUROLYTIC AGENT INTERCOSTAL NERVE	N NA
ALOHAC	Q3 2025	Physician Services	64624	CPT	DESTRUCTION NEUROLYTIC AGT GENICULAR NERVE W/IMG	N NA
ALOHAC	Q3 2025	Physician Services	64625	CPT	RADIOFREQUENCY ABLTJ NRV NRVTG SI JT W/IMG GDN	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64628	CPT	THERMAL DSTRJ INTRAOSSEOUS BVN 1ST 2 LMBR/SAC	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64629	CPT	THERMAL DSTRJ INTRAOSSEOUS BVN EA ADDL LMBR/SAC	N NA
ALOHAC	Q3 2025	Physician Services	64630	CPT	DSTRJ NEUROLYTIC AGENT PUDENDAL NERVE	N NA
ALOHAC	Q3 2025	Physician Services	64632	CPT	DSTRJ NEUROLYTIC PLANTAR COMMON DIGITAL NERVE	N NA
ALOHAC	Q3 2025	Physician Services	64633	CPT	DSTR NROLYTC AGNT PARVERTEB FCT SNGL CRVCL/THORA	N NA
ALOHAC	Q3 2025	Physician Services	64634	CPT	DSTR NROLYTC AGNT PARVERTEB FCT ADDL CRVCL/THORA	N NA
ALOHAC	Q3 2025	Physician Services	64635	CPT	DSTR NROLYTC AGNT PARVERTEB FCT SNGL LMBR/SACRAL	N NA
ALOHAC	Q3 2025	Physician Services	64636	CPT	DSTR NROLYTC AGNT PARVERTEB FCT ADDL LMBR/SACRAL	N NA
ALOHAC	Q3 2025	Physician Services	64640	CPT	DSTRJ NEUROLYTIC AGENT OTHER PERIPHERAL NERVE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64642	CPT	CHEMODENERVATION ONE EXTREMITY 1-4 MUSCLE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64643	CPT	CHEMODENERVATION 1 EXTREMITY EA ADDL 1-4 MUSCLE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64644	CPT	CHEMODENERVATION 1 EXTREMITY 5 OR MORE MUSCLES	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64645	CPT	CHEMODENERVATION 1 EXTREMITY EA ADDL 5/> MUSCLES	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64646	CPT	CHEMODENERVATION OF TRUNK MUSCLE 1-5 MUSCLES	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64647	CPT	CHEMODENERVATION OF TRUNK 6 OR MORE MUSCLES	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64650	CPT	CHEMODENERVATION ECCRINE GLANDS BOTH AXILLAE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64653	CPT	CHEMODENERVATION ECCRINE GLANDS OTH AREA PER DAY	N NA
ALOHAC	Q3 2025	Physician Services	64680	CPT	DSTRJ NEUROLYTIC W/WO RAD MONITOR CELIAC PLEXUS	N NA
ALOHAC	Q3 2025	Physician Services	64681	CPT	DSTRJ NULYT W/WORAD MNTR SUPRIOR HYPOGSTR PLEXUS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64702	CPT	NEUROPLASTY DIGITAL 1/BOTH SAME DIGIT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64704	CPT	NEUROPLASTY NERVE HAND/FOOT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64708	CPT	NEURP MAJOR PRPH NRV ARM/LEG OPN OTH/THN SPEC	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64712	CPT	NEURP MAJOR PRPH NRV OPN ARM/LEG SCIATIC NRV	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64713	CPT	NEURP MAJOR PRPH NRV OPN ARM/LEG BRACH PLEXUS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64714	CPT	NEURP MAJOR PRPH NRV OPN ARM/LEG LMBR PLEXUS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64716	CPT	NEUROPLASTY &/TRANSPOSITION CRANIAL NERVE	N NA

ALOHAC	Q3 2025	Outpatient Hosp	64718	CPT	NEUROPLASTY &/TRANSPOSITION ULNAR NERVE ELBOW	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64719	CPT	NEUROPLASTY &/TRANSPOSITION ULNAR NERVE WRIST	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64721	CPT	NEUROPLASTY &/TRANSPOS MEDIAN NRV CARPAL TUNNE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64722	CPT	DECOMPRESSION UNSPECIFIED NERVE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64726	CPT	DECOMPRESSION PLANTAR DIGITAL NERVE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64727	CPT	INTERNAL NEUROLYSIS REQ OPERATING MICROSCOPE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64732	CPT	TRANSECTION/AVULSION SUPRAORBITAL NERVE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64734	CPT	TRANSECTION/AVULSION INFRAORBITAL NERVE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64736	CPT	TRANSECTION/AVULSION MENTAL NERVE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64738	CPT	TRANSECTION/AVULSION INF ALVEOLAR NRV W/OSTEO	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64740	CPT	TRANSECTION/AVULSION LINGUAL NERVE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64742	CPT	TRANSECTION/AVULSION FACIAL NRV DIFFERENT/CMPL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64744	CPT	TRANSECTION/AVULSION GREATER OCCIPITAL NERVE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64746	CPT	TRANSECTION/AVULSION PHRENIC NERVE	N NA
ALOHAC	Q3 2025	Inpatient Hosp	64755	CPT	TRANSECTION/AVULSION VAGUS NERVES	N NA
ALOHAC	Q3 2025	Inpatient Hosp	64760	CPT	TRANSECTION/AVULSION VAGUS NERVE ABDOMINAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64763	CPT	TRNSXJ/AVLSN OBTURAT NRV XPELV W/WO TENOTOMY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64766	CPT	TRNSXJ/AVLSN OBTURAT NRV INPELV W/WO TENOTOMY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64771	CPT	TRANSECTION/AVULSION OTH CRANIAL NRV XDRL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64772	CPT	TRANSECTION/AVULSION OTH SPINAL NRV XDRL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64774	CPT	EXC NEUROMA CUTAN NRV SURGLY IDENTIFIABLE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64776	CPT	EXC NEUROMA DIGITAL NERVE 1 OR BOTH SAME DIGIT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64778	CPT	EXCISION NEUROMA DIGITAL NRV EA ADDL DIGIT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64782	CPT	EXC NEUROMA HAND/FOOT XCP DIGITAL NERVE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64783	CPT	EXC NEUROMA HAND/FOOT EA NRV XCP SM DGT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64784	CPT	EXC NEUROMA MAJOR PERIPHERAL NRV XCP SCIATIC	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64786	CPT	EXCISION NEUROMA SCIATIC NERVE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64787	CPT	IMPLANTATION NERVE END BONE/MUSCLE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64788	CPT	EXC NEUROFIBROMA/NEUROLEMMOMA CUTAN NRV	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64790	CPT	EXC NEUROFIBROMA/NEUROLEMMOMA MAJOR PRPH NRV	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64792	CPT	EXC NEUROFIBROMA/NEUROLEMMOMA EXTNSV	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64795	CPT	BIOPSY NERVE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64802	CPT	SYMPATHECTOMY CERVICAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64804	CPT	SYMPATHECTOMY CERVICOTHORACIC	N NA
ALOHAC	Q3 2025	Inpatient Hosp	64809	CPT	SYMPATHECTOMY THORACOLUMBAR	N NA
ALOHAC	Q3 2025	Inpatient Hosp	64818	CPT	SYMPATHECTOMY LUMBAR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64820	CPT	SYMPATHECTOMY DIGITAL ARTERIES EACH DIGIT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64821	CPT	SYMPATHECTOMY RADIAL ARTERY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64822	CPT	SYMPATHECTOMY ULNAR ARTERY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64823	CPT	SYMPATHECTOMY SUPERFICIAL PALMAR ARCH	N NA
ALOHAC	Q3 2025	Physician Services	64831	CPT	SUTURE DIGITAL NERVE HAND/FOOT 1 NERVE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64832	CPT	SUTR DIGITAL NRV HAND/FOOT EA DGTAL NRV	N NA
ALOHAC	Q3 2025	Physician Services	64834	CPT	SUTURE 1 NERVE HAND/FOOT COMMON SENSORY NERVE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64835	CPT	SUTURE 1 NERVE MEDIAN MOTOR THENAR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64836	CPT	SUTURE 1 NERVE ULNAR MOTOR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64837	CPT	SUTURE EACH ADDITIONAL NERVE HAND/FOOT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64840	CPT	SUTURE POSTERIOR TIBIAL NERVE	N NA
ALOHAC	Q3 2025	Physician Services	64856	CPT	SUTR PRPH NRV ARM/LEG XCP SCIATIC W/TRPOS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64857	CPT	SUTR PRPH NRV ARM/LEG XCP SCIATIC W/O TRPOS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64858	CPT	SUTURE SCIATIC NERVE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	64859	CPT	SUTURE EACH ADDITIONAL PERIPHERAL NERVE	N NA

ALOHAC Q3 2025	Outpatient Hosp	64861	CPT	SUTURE BRACHIAL PLEXUS	N	NA
ALOHAC Q3 2025	Physician Services	64862	CPT	SUTURE LUMBAR PLEXUS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	64864	CPT	SUTURE FACIAL NERVE EXTRACRANIAL	N	NA
ALOHAC Q3 2025	Physician Services	64865	CPT	SUTURE FACIAL NERVE INFRATEMPORAL W/WO GRAFT	N	NA
ALOHAC Q3 2025	Inpatient Hosp	64866	CPT	ANASTOMOSIS FACIAL-SPINAL ACCESSORY	N	NA
ALOHAC Q3 2025	Inpatient Hosp	64868	CPT	ANASTOMOSIS FACIAL HYPOGLOSSAL	N	NA
ALOHAC Q3 2025	Physician Services	64872	CPT	SUTURE NERVE REQ SECONDARY/DELAYED SUTURE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	64874	CPT	SUTURE NERVE REQ XTNSV MOBIL/TRPOS NERVE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	64876	CPT	SUTURE NERVE REQ SHORTENING BONE EXTREMITY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	65420	CPT	EXCISION/TRANSPOSITION PTERYGIUM W/O GRAFT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	65426	CPT	EXCISION/TRANSPOSITION PTERYGIUM W/GRAFG	N	NA
ALOHAC Q3 2025	Outpatient Hosp	65710	CPT	KERATOPLASTY ANTERIOR LAMELLAR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	65730	CPT	KERATOPLASTY PENTRG EXCEPT APHAKIA/PSEUDOPHAKIA	N	NA
ALOHAC Q3 2025	Outpatient Hosp	65750	CPT	KERATOPLASTY PENETRAING APHAKIA	N	NA
ALOHAC Q3 2025	Outpatient Hosp	65755	CPT	KERATOPLASTY PENETRATING PSEUDOPHAKIA	N	NA
ALOHAC Q3 2025	Outpatient Hosp	65756	CPT	KERATOPLASTY ENDOTHELIAL	N	NA
ALOHAC Q3 2025	Outpatient Hosp	65757	CPT	BACKBENCH PREPJ CORNEAL ENDOTHELIAL ALLOGRAFT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	65765	CPT	KERATOPHAKIA	N	NA
ALOHAC Q3 2025	Outpatient Hosp	65767	CPT	EPIKERATOPLASTY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	65770	CPT	KERATOPROSTHESIS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	65772	CPT	CRNL RELAXING INC CORRJ INDUCED ASTIGMATISM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	65775	CPT	CRNL WEDGE RESCJ CORRJ INDUCED ASTIGMATISM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	65778	CPT	PLACE AMNIOTIC MEMBRA OCULAR SURFACE W/O SUTURES	N	NA
ALOHAC Q3 2025	Physician Services	65778	CPT	PLACE AMNIOTIC MEMBRA OCULAR SURFACE W/O SUTURES	N	NA
ALOHAC Q3 2025	Outpatient Hosp	65779	CPT	PLACE AMNIOTIC MEMBRANE OCULAR SURFACE SUTURED	N	NA
ALOHAC Q3 2025	Outpatient Hosp	65780	CPT	OCULAR SURFACE RECONSTRUCTION AMNIOTIC MEMBRANE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	65781	CPT	OCULAR SURFACE RECONSTRUCTION LIMBAL ALLOGRAFT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	65782	CPT	OCCULAR SURFACE RECONSTRUCTION LIMBAL AUTOGRAFT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	65785	CPT	IMPLANTATION INTRASTROMAL CORNEAL RING SEGMENTS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	66500	CPT	IRIDOTOMY STAB INC SPX XCP TRANSFIXION	N	NA
ALOHAC Q3 2025	Outpatient Hosp	66505	CPT	IRIDOTOMY STAB INC SPX TRANSFIXION	N	NA
ALOHAC Q3 2025	Outpatient Hosp	66600	CPT	IRDEC CRNLSCLRL/CRNL SCTJ RMVL LES	N	NA
ALOHAC Q3 2025	Outpatient Hosp	66605	CPT	IRDEC CRNLSCLRL/CRNL SCTJ CYCLECTOMY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	66625	CPT	IRDEC CRNLSCLRL/CRNL SCTJ PRPH GLC SPX	N	NA
ALOHAC Q3 2025	Outpatient Hosp	66630	CPT	IRDEC CRNLSCLRL/CRNL SCTJ SECTOR GLC SPX	N	NA
ALOHAC Q3 2025	Outpatient Hosp	66635	CPT	IRDEC CRNLSCLRL/CRNL SCTJ OPTICAL SPX	N	NA
ALOHAC Q3 2025	Outpatient Hosp	66680	CPT	REPAIR IRIS CILIARY BODY	N	NA
ALOHAC Q3 2025	Physician Services	66682	CPT	SUTURE IRIS CILIARY BODY SPX RETRIEVAL SUTURE	N	NA
ALOHAC Q3 2025	Inpatient Hosp	66683	CPT	IMPLTJ IRIS PROSTHESIS W/SUTR FIXJ&RPR/RMVL IRIS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	66987	CPT	XCAPSL CTRC RMVL INSJ IO LENS PROSTH CPLX W/ECP	N	NA
ALOHAC Q3 2025	Outpatient Hosp	66989	CPT	XCAPSL CTRC RMVL INSJ IO LENS PRSTH CPLX INSJ 1+	N	NA
ALOHAC Q3 2025	Outpatient Hosp	66991	CPT	XCAPSL CTRC RMVL INSJ IO LENS PROSTH INSJ 1+	N	NA
ALOHAC Q3 2025	Outpatient Hosp	67311	CPT	STRABISMUS RECESSION/RESCJ 1 HRZNTL MUSC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	67312	CPT	STRABISMUS RECESSION/RESCJ 2 HRZNTL MUSC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	67314	CPT	STRABISMUS RECESSION/RESCJ 1 VER MUSC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	67318	CPT	STRABISMUS ANY SUPERIOR OBLIQUE MUSCLE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	67320	CPT	TRANSPOSITION PROCEDURE EXTRAOCULAR MUSC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	67331	CPT	STRABISMUS PREVIOUS EYE X INVOLVE EO MUSC	N	NA
ALOHAC Q3 2025	Outpatient Hosp	67334	CPT	STRABISMUS POST FIXJ SUTR TQ W/WO MUSC RECESSION	N	NA
ALOHAC Q3 2025	Outpatient Hosp	67335	CPT	PLACEMENT ADJUSTABLE SUTURE STRABISMUS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	67340	CPT	STRABISMUS EXPL&/RPR DETACHED EXTROCULAR MUSC	N	NA

ALOHAC	Q3 2025	Outpatient Hosp	67343	CPT	RLS XTNSV SCAR TISS W/O DETACHING EO MUSC SPX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	67345	CPT	CHEMODENERVATION EXTRAOCULAR MUSCLE	N NA
ALOHAC	Q3 2025	Physician Services	67516	CPT	SUPRACHOROIDAL SPACE NJX PHARMACOLOGIC AGENT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	67550	CPT	ORBITAL IMPLANT INSERTION	N NA
ALOHAC	Q3 2025	Outpatient Hosp	67560	CPT	ORBITAL IMPLANT REMOVAL/REVISION	N NA
ALOHAC	Q3 2025	Outpatient Hosp	67710	CPT	SEVERING TARSORRHAPHY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	67715	CPT	CANTHOTOMY SEPARATE PROCEDURE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	67880	CPT	CONSTJ INTERMARGIN ADHES/TARSORRH/CANTHORRHAPY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	67882	CPT	CONSTJ INTERMARGIN ADHES/TARSOR/CANTHOR W/TRPOS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	67900	CPT	REPAIR BROW PTOSIS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	67901	CPT	RPR BLEPHAROPTOSIS FRONTALIS MUSC SUTR/OTH MATRL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	67902	CPT	RPR BLEPHAROPT FRONTALIS MUSC AUTOL FASCAL SLING	N NA
ALOHAC	Q3 2025	Outpatient Hosp	67903	CPT	RPR BLEPHAROPTOSIS LEVATOR RESCJ/ADVMNT INTERNAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	67904	CPT	RPR BLEPHAROPTOSIS LEVATOR RESCJ/ADVMNT XTRNL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	67906	CPT	RPR BLEPHAROPTOSIS SUPERIOR RECTUS FASCIAL SLING	N NA
ALOHAC	Q3 2025	Outpatient Hosp	67908	CPT	RPR BLPOS CONJUNCTIVO-TARSO-MUSC-LEVATOR RESCJ	N NA
ALOHAC	Q3 2025	Outpatient Hosp	67909	CPT	REDUCTION OVERCORRECTION PTOSIS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	67911	CPT	CORRECTION LID RETRACTION	N NA
ALOHAC	Q3 2025	Outpatient Hosp	67912	CPT	CORRJ LAGOPHTHALMOS IMPLTJ UPR EYELID LID LOAD	N NA
ALOHAC	Q3 2025	Outpatient Hosp	68020	CPT	INCISION CONJUNCTIVA DRAINAGE OF CYST	N NA
ALOHAC	Q3 2025	Outpatient Hosp	68040	CPT	EXPRESSION CONJUNCTIVAL FOLLICLES	N NA
ALOHAC	Q3 2025	Outpatient Hosp	68200	CPT	SUBCONJUNCTIVAL INJECTION	N NA
ALOHAC	Q3 2025	Outpatient Hosp	68320	CPT	CONJUNCTIVOPLASTY W/GRF/XTNSV REARRANGEMENT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	68325	CPT	CONJUNCTIVOPLASTY W/BUCCAL MUC MEMB GRAFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	68326	CPT	CJP RCNSTJ CUL-DE-SAC BUCCAL GRF/XTNSV REARRGMT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	68328	CPT	CONJUNCTPL CUL-DE-SAC W/BUCCAL MUC MEMB GRAFT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	68360	CPT	CONJUNCTIVAL FLAP BRIDGE/PARTIAL SPX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	68362	CPT	CONJUNCTIVAL FLAP TOTAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	68371	CPT	HARVESTING CONJUNCIVAL ALLOGRAPHY LIVING DONOR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	68440	CPT	SNIP INCISION LACRIMAL PUNCTUM	N NA
ALOHAC	Q3 2025	Outpatient Hosp	68500	CPT	EXCISION LACRIMAL GLAND XCPT TUMOR TOTAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	68505	CPT	EXCISION LACRIMAL GLAND XCPT TUMOR PRTL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	68841	CPT	INSJ RX ELUTING IMPLT PUNCTAL DILAT LAC CANAL EA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	69140	CPT	EXCISION EXOSTOSIS EXTERNAL AUDITORY CANAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	69145	CPT	EXCISION SOFT TIS LESION EXTERNAL AUDITORY CANAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	69150	CPT	RAD EXC XTRNL AUDITORY CANAL LES W/O NCK DSJ	N NA
ALOHAC	Q3 2025	Inpatient Hosp	69155	CPT	RAD EXC XTRNL AUDITORY CANAL LES NCK DSJ	N NA
ALOHAC	Q3 2025	Outpatient Hosp	69310	CPT	RECONSTRUCTION EXTERNAL AUDITORY CANAL SPX	N NA
ALOHAC	Q3 2025	Outpatient Hosp	69320	CPT	RCNSTJ XTRNL AUD CANAL CONGENITAL ATRESIA 1 STG	N NA
ALOHAC	Q3 2025	Outpatient Hosp	69433	CPT	TYMPANOSTOMY LOCAL/TOPICAL ANESTHESIA	N NA
ALOHAC	Q3 2025	Outpatient Hosp	69501	CPT	TRANSMASTOID ANTROTOMY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	69502	CPT	MASTOIDECTOMY COMPLETE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	69505	CPT	MASTOIDECTOMY MODIFIED RADICAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	69511	CPT	MASTOIDECTOMY RADICAL	N NA
ALOHAC	Q3 2025	Outpatient Hosp	69530	CPT	PETROUS APICECTOMY RADICAL MASTOIDECTOMY	N NA
ALOHAC	Q3 2025	Inpatient Hosp	69535	CPT	RESCJ TEMPORAL BONE EXTERNAL APPROACH	N NA
ALOHAC	Q3 2025	Outpatient Hosp	69540	CPT	EXCISION AURAL POLYP	N NA
ALOHAC	Q3 2025	Inpatient Hosp	69554	CPT	EXCISION AURAL GLOMUS TUMOR EXTENDED	N NA
ALOHAC	Q3 2025	Outpatient Hosp	69601	CPT	REVJ MASTOIDECTOMY RSLTG COMPL MASTOIDECTOMY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	69602	CPT	REVJ MASTOIDECTOMY RSLTG MODF RAD MSTDC	N NA
ALOHAC	Q3 2025	Outpatient Hosp	69603	CPT	REVJ MASTOIDECTOMY RSLTG RAD MASTOIDECTOMY	N NA

ALOHAC Q3 2025	Outpatient Hosp	69604	CPT	REVJ MASTOIDECTOMY RSLTG TYMPANOPLASTY	N	NA
ALOHAC Q3 2025	Outpatient Hosp	69710	CPT	IMPLTJ/RPLCMT EMGNT BONE CNDJ DEV TEMPORAL BONE	N	NA
ALOHAC Q3 2025	Outpatient Hosp	69714	CPT	IMPL OI IMPLT SKULL PERQ ATTACHMENT ESP	N	NA
ALOHAC Q3 2025	Physician Services	69716	CPT	IMPL OI IMPLT SKULL MAG TC ATTACHMENT ESP<100	N	NA
ALOHAC Q3 2025	Outpatient Hosp	69717	CPT	RPLCMT OI IMPLT SKULL PERQ ATTACHMENT ESP	N	NA
ALOHAC Q3 2025	Physician Services	69719	CPT	RPLCMT OI IMPLT SKULL MAG TC ATTACHMENT ESP<100	N	NA
ALOHAC Q3 2025	Physician Services	69726	CPT	REMOVAL ENTIRE OI IMPLT SKL PERQ ATTACHMENT ESP	N	NA
ALOHAC Q3 2025	Physician Services	69727	CPT	REMOVAL ENTIRE OI IMPLT SKL MAG TC ATTCH ESP<100	N	NA
ALOHAC Q3 2025	Physician Services	69728	CPT	RMVL ENTIRE OI IMPLT SKL MAG TC ATTCH ESP>=100	N	NA
ALOHAC Q3 2025	Physician Services	69729	CPT	IMPL OI IMPLT SKULL MAG TC ATTACHMENT ESP>=100	N	NA
ALOHAC Q3 2025	Physician Services	69730	CPT	RPLCMT OI IMPLT SKULL MAG TC ATTACHMENT ESP>=100	N	NA
ALOHAC Q3 2025	Inpatient Hosp	69950	CPT	VESTIBULAR NRV SECTION TRANSCRANIAL APPROACH	N	NA
ALOHAC Q3 2025	Diagnostic Testing	70336	CPT	MRI TEMPOROMANDIBULAR JOINT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	70498	CPT	CT ANGIOGRAPHY NECK W/CONTRAST/NONCONTRAST	N	NA
ALOHAC Q3 2025	Diagnostic Testing	71275	CPT	CT ANGIOGRAPHY CHEST W/CONTRAST/NONCONTRAST	N	NA
ALOHAC Q3 2025	Diagnostic Testing	71550	CPT	MRI CHEST W/O CONTRAST MATERIAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	71551	CPT	MRI CHEST W/CONTRAST MATERIAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	71552	CPT	MRI CHEST W/O & W/CONTRAST MATERIAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	71555	CPT	MRA CHEST W/O & W/CONTRAST MATERIAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	72141	CPT	MRI SPINAL CANAL CERVICAL W/O CONTRAST MATRL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	72142	CPT	MRI SPINAL CANAL CERVICAL W/CONTRAST MATRL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	72146	CPT	MRI SPINAL CANAL THORACIC W/O CONTRAST MATRL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	72147	CPT	MRI SPINAL CANAL THORACIC W/CONTRAST MATRL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	72148	CPT	MRI SPINAL CANAL LUMBAR W/O CONTRAST MATERIAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	72149	CPT	MRI SPINAL CANAL LUMBAR W/CONTRAST MATERIAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	72156	CPT	MRI SPINAL CANAL CERVICAL W/O & W/CONTR MATRL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	72157	CPT	MRI SPINAL CANAL THORACIC W/O & W/CONTR MATRL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	72158	CPT	MRI SPINAL CANAL LUMBAR W/O & W/CONTR MATRL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	72159	CPT	MRA SPINAL CANAL W/WO CONTRAST MATERIAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	72191	CPT	CT ANGIOGRAPHY PELVIS W/CONTRAST/NONCONTRAST	N	NA
ALOHAC Q3 2025	Diagnostic Testing	72195	CPT	MRI PELVIS W/O CONTRAST MATERIAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	72196	CPT	MRI PELVIS W/CONTRAST MATERIAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	72197	CPT	MRI PELVIS W/O & W/CONTRAST MATERIAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	72198	CPT	MRA PELVIS W/WO CONTRAST MATERIAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	73206	CPT	CT ANGIOGRAPHY UPPER EXTREMITY	N	NA
ALOHAC Q3 2025	Diagnostic Testing	73218	CPT	MRI UPPER EXTREMITY OTH THAN JT W/O CONTR MATRL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	73219	CPT	MRI UPPER EXTREMITY OTH THAN JT W/CONTR MATRL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	73220	CPT	MRI UPPER EXTREM OTHER THAN JT W/O & W/CONTRAS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	73221	CPT	MRI ANY JT UPPER EXTREMITY W/O CONTRAST MATRL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	73222	CPT	MRI ANY JT UPPER EXTREMITY W/CONTRAST MATRL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	73223	CPT	MRI ANY JT UPPER EXTREMITY W/O & W/CONTR MATRL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	73225	CPT	MRA UPPER EXTREMITY W/WO CONTRAST MATERIAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	73706	CPT	CT ANGIOGRAPHY LOWER EXTREMITY	N	NA
ALOHAC Q3 2025	Diagnostic Testing	73718	CPT	MRI LOWER EXTREM OTH/THN JT W/O CONTR MATRL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	73719	CPT	MRI LOWER EXTREM OTH/THN JT W/CONTRAST MATRL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	73720	CPT	MRI LOWER EXTREM OTH/THN JT W/O & W/CONTR MATR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	73721	CPT	MRI ANY JT LOWER EXTREM W/O CONTRAST MATRL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	73722	CPT	MRI ANY JT LOWER EXTREM W/CONTRAST MATERIAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	73723	CPT	MRI ANY JT LOWER EXTREM W/O & W/CONTRAST MATRL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	73725	CPT	MRA LOWER EXTREMITY W/WO CONTRAST MATERIAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	74174	CPT	CTA ABD&PLVS W/CNTRST & IMG POSTPROCESSING	N	NA

ALOHAC Q3 2025	Diagnostic Testing	74175	CPT	CTA ABDOMEN W/CONTRAST&IMG POSTPROCESSING	N	NA
ALOHAC Q3 2025	Diagnostic Testing	74181	CPT	MRI ABDOMEN W/O CONTRAST MATERIAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	74182	CPT	MRI ABDOMEN W/CONTRAST MATERIAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	74183	CPT	MRI ABDOMEN W/O CONTRAST FLWD BY W/CONTRAST	N	NA
ALOHAC Q3 2025	Diagnostic Testing	74185	CPT	MRA ABDOMEN W/WO CONTRAST MATERIAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	74712	CPT	FETAL MRI W/PLACNTL MATRNL PLVC IMG SING/1ST GES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	74713	CPT	FETAL MRI W/PLACNTL MATRNL PLVC IMG EA ADDL GES	N	NA
ALOHAC Q3 2025	Outpatient Hosp	76014	CPT	MR SAFETY IMPLANT&/FB ASSMT CLIN STAF 1ST 15 MIN	N	NA
ALOHAC Q3 2025	Outpatient Hosp	76015	CPT	MR SAFETY IMPLANT&/FB ASSMT CLIN STAFF EA ADD 30	N	NA
ALOHAC Q3 2025	Outpatient Hosp	76016	CPT	MR SAFETY DETERMINATION PHYSICIAN/OTHER QHP	N	NA
ALOHAC Q3 2025	Outpatient Hosp	76017	CPT	MR SAFETY MED PHYSICS XM CUSTOMIZATION PLNG&MNTR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	76018	CPT	MR SAFETY IMPLT ELECTRONICS PREPJ SUPVJ PHYS/QHP	N	NA
ALOHAC Q3 2025	Outpatient Hosp	76019	CPT	MR SAFETY IMPLANT POS&/IMMOBLJ SUPVJ PHYS/QHP	N	NA
ALOHAC Q3 2025	Diagnostic Testing	76391	CPT	MAGNETIC RESONANCE ELASTOGRAPHY	N	NA
ALOHAC Q3 2025	Diagnostic Testing	76883	CPT	US NRV&ACC STRUX 1 XTR COMPRE W/IMG PR EXTREMITY	N	NA
ALOHAC Q3 2025	Diagnostic Testing	76984	CPT	DX INTRAOPERATIVE THORACIC AORTA ULTRASOUND	N	NA
ALOHAC Q3 2025	Diagnostic Testing	76987	CPT	DX NTRAOP EPICAR CAR US CHD PLMT&MNP TRNSDCR I&R	N	NA
ALOHAC Q3 2025	Diagnostic Testing	76988	CPT	DX NTRAOP EPCAR CAR US CHD PLMT MNPJ&IMG ACQUISJ	N	NA
ALOHAC Q3 2025	Diagnostic Testing	76989	CPT	DX INTRAOP EPICAR CARDIAC US CHD I&R ONLY	N	NA
ALOHAC Q3 2025	Diagnostic Testing	77046	CPT	MRI BREAST WITHOUT CONTRAST MATERIAL UNILATERAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	77047	CPT	MRI BREAST WITHOUT CONTRAST MATERIAL BILATERAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	77048	CPT	MRI BREAST W/OUT&WITH CONTRAST W/CAD UNILATERAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	77049	CPT	MRI BREAST WITHOUT&WITH CONTRAST W/CAD BILATERAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	77089	CPT	TBS DXA/OTHER IMG CALCULATION W/I&R FX RISK	N	NA
ALOHAC Q3 2025	Diagnostic Testing	77090	CPT	TBS TECHL PREP&TRANSMIS DATA ALYS PFRMD ELSEWHR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	77091	CPT	TBS TECHNICAL CALCULATION ONLY	N	NA
ALOHAC Q3 2025	Diagnostic Testing	77092	CPT	TBS INTERPRETATION & REPORT FX RISK BY OTHER QHP	N	NA
ALOHAC Q3 2025	Diagnostic Testing	78600	CPT	BRAIN IMAGING <4 STATIC VIEWS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	78601	CPT	BRAIN IMAGING <4 STATIC VIEWS W/VASCULAR FLOW	N	NA
ALOHAC Q3 2025	Diagnostic Testing	78605	CPT	BRAIN IMAGING MINIMUM 4 STATIC VIEWS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	78606	CPT	BRAIN IMAGING MIN 4 STATIC VIEWS W VASCULAR FLOW	N	NA
ALOHAC Q3 2025	Diagnostic Testing	78608	CPT	BRAIN IMAGING PET METABOLIC EVALUATION	N	NA
ALOHAC Q3 2025	Diagnostic Testing	78609	CPT	BRAIN IMAGING PET PERFUSION EVALUATION	N	NA
ALOHAC Q3 2025	Diagnostic Testing	78610	CPT	BRAIN IMAGING VASCULAR FLOW ONLY	N	NA
ALOHAC Q3 2025	Diagnostic Testing	78630	CPT	CEREBROSPINAL FLUID FLOW W/O MATL CISTERNOGRAPHY	N	NA
ALOHAC Q3 2025	Diagnostic Testing	78635	CPT	CEREBROSPINAL FLUID FLOW W/O MATL VENTRICLGRAPHY	N	NA
ALOHAC Q3 2025	Diagnostic Testing	78645	CPT	CEREBROSPINAL FLUID FLOW W/O MATL SHUNT EVALTJ	N	NA
ALOHAC Q3 2025	Diagnostic Testing	78650	CPT	CEREBROSPINAL FLUID LEAK DETECTION&LOCALIZATIO	N	NA
ALOHAC Q3 2025	Diagnostic Testing	78660	CPT	RADIOPHARMACEUTICAL DACRYOCYSTOGRAPHY	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81105	CPT	HPA-1 GENOTYPING GENE ANALYSIS COMMON VARIANT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81106	CPT	HPA-2 GENOTYPING GENE ANALYSIS COMMON VARIANT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81107	CPT	HPA-3 GENOTYPING GENE ANALYSIS COMMON VARIANT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81108	CPT	HPA-4 GENOTYPING GENE ANALYSIS COMMON VARIANT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81109	CPT	HPA-5 GENOTYPING GENE ANALYSIS COMMON VARIANT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81110	CPT	HPA-6 GENOTYPING GENE ANALYSIS COMMON VARIANT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81111	CPT	HPA-9 GENOTYPING GENE ANALYSIS COMMON VARIANT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81112	CPT	HPA-15 GENOTYPING GENE ANALYSIS COMMON VARIANT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81120	CPT	IDH1 COMMON VARIANTS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81121	CPT	IDH2 COMMON VARIANTS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81162	CPT	BRCA1 BRCA2 GENE ALYS FULL SEQ FULL DUP/DEL ALYS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81163	CPT	BRCA1 BRCA2 GENE ANALYSIS FULL SEQUENCE ANALYSIS	N	NA

ALOHAC	Q3 2025	Diagnostic Testing	81164	CPT	BRCA1 BRCA2 GENE ANALYSIS FULL DUP/DEL ANALYSIS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81165	CPT	BRCA1 GENE ANALYSIS FULL SEQUENCE ANALYSIS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81166	CPT	BRCA1 GENE ANALYSIS FULL DUP/DEL ANALYSIS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81167	CPT	BRCA2 GENE ANALYSIS FULL DUP/DEL ANALYSIS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81168	CPT	CCND1/IGH TRANSLOCATION ALYS MAJOR BP QUAL&QUAN	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81170	CPT	ABL1 GENE ANALYSIS KINASE DOMAIN VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81171	CPT	AFF2 GENE ANALYSIS EVAL DETECT ABNORMAL ALLELES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81172	CPT	AFF2 GENE ANALYSIS CHARACTERIZATION OF ALLELES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81173	CPT	AR GENE ANALYSIS FULL GENE SEQUENCE	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81174	CPT	AR GENE ANALYSIS KNOWN FAMILIAL VARIANT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81175	CPT	ASXL1 GENE ANALYSIS FULL GENE SEQUENCE	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81176	CPT	ASXL1 GENE ANALYSIS TARGETED SEQ ANALYSIS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81177	CPT	ATN1 GENE ANALYSIS EVAL DETECT ABNORMAL ALLELES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81178	CPT	ATXN1 GENE ANALYSIS EVAL DETECT ABNORMAL ALLELES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81179	CPT	ATXN2 GENE ANALYSIS EVAL DETECT ABNORMAL ALLELES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81180	CPT	ATXN3 GENE ANALYSIS EVAL DETECT ABNORMAL ALLELES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81181	CPT	ATXN7 GENE ANALYSIS EVAL DETECT ABNORMAL ALLELES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81182	CPT	ATXN8OS GENE ANALYSIS EVAL DETECT ABNOR ALLELES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81183	CPT	ATXN10 GENE ANALYSIS EVAL DETC ABNORMAL ALLELES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81184	CPT	CACNA1A GENE ANALYSIS EVAL DETECT ABNOR ALLELES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81185	CPT	CACNA1A GENE ANALYSIS FULL GENE SEQUENCE	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81186	CPT	CACNA1A GENE ANALYSIS KNOWN FAMILIAL VARIANT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81187	CPT	CNBP GENE ANALYSIS EVAL DETECT ABNORMAL ALLELES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81188	CPT	CSTB GENE ANALYSIS EVAL DETECT ABNORMAL ALLELES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81189	CPT	CSTB GENE ANALYSIS FULL GENE SEQUENCE	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81190	CPT	CSTB GENE ANALYSIS KNOWN FAMILIAL VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81191	CPT	NTRK1 TRANSLOCATION ANALYSIS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81192	CPT	NTRK2 TRANSLOCATION ANALYSIS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81193	CPT	NTRK3 TRANSLOCATION ANALYSIS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81194	CPT	NTRK TRANSLOCATION ANALYSIS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81195	CPT	CYTOG GEN-WIDE ALYS HEM MAL STRUX VRNT&CNV OGM	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81200	CPT	ASPA GENE ANALYSIS COMMON VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81201	CPT	APC GENE ANALYSIS FULL GENE SEQUENCE	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81202	CPT	APC GENE ANALYSIS KNOWN FAMILIAL VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81203	CPT	APC GENE ANALYSIS DUPLICATION/DELETION VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81204	CPT	AR GENE ANALYSIS CHARACTERIZATION OF ALLELES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81205	CPT	BCKDHB GENE ANALYSIS COMMON VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81206	CPT	BCR/ABL1 MAJOR BREAKPNT QUALITATIVE/QUANTITATIVE	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81207	CPT	BCR/ABL1 MINOR BREAKPNT QUALITATIVE/QUANTITATIVE	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81208	CPT	BCR/ABL1 OTHER BREAKPNT QUALITATIVE/QUANTITATIVE	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81209	CPT	BLM GENE ANALYSIS 2281DEL6INS7 VARIANT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81210	CPT	BRAF GENE ANALYSIS V600 VARIANT(S)	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81212	CPT	BRCA1 BRCA 2 GEN ALYS 185DELAG 5385INSC 6174DELT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81215	CPT	BRCA1 GENE ANALYSIS KNOWN FAMILIAL VARIANT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81216	CPT	BRCA2 GENE ANALYSIS FULL SEQUENCE ANALYSIS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81217	CPT	BRCA2 GENE ANALYSIS KNOWN FAMILIAL VARIANT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81218	CPT	CEBPA GENE ANALYSIS FULL GENE SEQUENCE	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81219	CPT	CALR GENE ANALYSIS COMMON VARIANTS IN EXON 9	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81221	CPT	CFTR GENE ANALYSIS KNOWN FAMILIAL VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81222	CPT	CFTR GENE ANALYSIS DUPLICATION/DELETION VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81223	CPT	CFTR GENE ANALYSIS FULL GENE SEQUENCE	N NA

ALOHAC	Q3 2025	Diagnostic Testing	81224	CPT	CFTR GENE ANALYSIS INTRON 8 POLY-T ANALYSIS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81225	CPT	CYP2C19 GENE ANALYSIS COMMON VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81226	CPT	CYP2D6 GENE ANALYSIS COMMON VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81227	CPT	CYP2C9 GENE ANALYSIS COMMON VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81228	CPT	CYTOG ALYS CHRMOML ABNOR COPY NUMBER VRNT CGH	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81229	CPT	CYTOG ALYS CHRMOML ABNOR CPY NUMBER&SNP VRNT CGH	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81230	CPT	CYP3A4 GENE ANALYSIS COMMON VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81231	CPT	CYP3A5 GENE ANALYSIS COMMON VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81232	CPT	DPYD GENE ANALYSIS COMMON VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81233	CPT	BTK GENE ANALYSIS COMMON VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81234	CPT	DMPK GENE ANALYSIS EVAL DETECT ABNORMAL ALLELES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81235	CPT	EGFR GENE ANALYSIS COMMON VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81236	CPT	EZH2 GENE ANALYSIS FULL GENE SEQUENCE	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81237	CPT	EZH2 GENE ANALYSIS COMMON VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81238	CPT	F9 FULL GENE SEQUENCE	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81239	CPT	DMPK GENE ANALYSIS CHARACTERIZATION OF ALLELES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81240	CPT	F2 GENE ANALYSIS 20210G >A VARIANT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81241	CPT	F5 COAGULATION FACTOR V ANAL LEIDEN VARIANT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81242	CPT	FANCC GENE ANALYSIS COMMON VARIANT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81244	CPT	FMR1 GENE ANALYSIS CHARACTERIZATION OF ALLELES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81245	CPT	FLT3 GENE ANALYSIS INTERNAL TANDEM DUP VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81246	CPT	FLT3 GENE ANLYS TYROSINE KINASE DOMAIN VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81247	CPT	G6PD GENE ANALYSIS COMMON VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81248	CPT	G6PD GENE ANALYSIS KNOWN FAMILIAL VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81249	CPT	G6PD GENE ANALYSIS FULL GENE SEQUENCE	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81250	CPT	G6PC GENE ANALYSIS COMMON VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81251	CPT	GBA GLUCOSIDASE/BETA/ACID ANAL COMM VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81255	CPT	HEXA GENE ANALYSIS COMMON VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81256	CPT	HFE HEMOCHROMATOSIS GENE ANAL COMMON VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81257	CPT	HBA1/HBA2 GENE ANALYSIS COMMON DELETIONS/VARIANT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81258	CPT	HBA1/HBA2 GENE ANALYSIS KNOWN FAMILIAL VARIANT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81259	CPT	HBA1/HBA2 GENE ANALYSIS FULL GENE SEQUENCE	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81260	CPT	IKBKAP GENE ANALYSIS COMMON VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81261	CPT	IGH@ REARRANGE ABNORMAL CLONAL POP AMPLIFIED	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81262	CPT	IGH@ REARRANGE ABNORMAL CLONAL POP DIRECT PROBE	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81263	CPT	IGH@ VARIABLE REGION SOMATIC MUTATION ANALYSIS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81264	CPT	IGK@ GENE REARRANGE DETECT ABNORMAL CLONAL POP	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81265	CPT	COMPARATIVE ANAL STR MARKERS PATIENT&COMP SPEC	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81266	CPT	COMPARATIVE ANAL STR MARKERS EA ADDL SPECIMEN	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81267	CPT	CHIMERISM W/COMP TO BASELINE W/O CELL SELECTION	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81268	CPT	CHIMERISM W/COMP TO BASELINE W/CELL SELECTION EA	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81269	CPT	HBA1/HBA2 GENE ANALYSIS DUP/DEL VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81270	CPT	JAK2 GENE ANALYSIS P.VAL617PHE VARIANT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81271	CPT	HTT GENE ANALYSIS DETECT ABNORMAL ALLELES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81272	CPT	KIT GENE ANALYSIS TARGETED SEQUENCE ANALYSIS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81273	CPT	KIT GENE ANALYSIS D816 VARIANT(S)	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81274	CPT	HTT GENE ANALYSIS CHARACTERIZATION ALLELES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81275	CPT	KRAS GENE ANALYSIS VARIANTS IN EXON 2	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81276	CPT	KRAS GENE ANALYSIS ADDITIONAL VARIANT(S)	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81277	CPT	CYTOGENOMIC NEOPLASIA MICROARRAY ANALYSIS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81278	CPT	IGH@/BCL2 TLCJ ALYS MBR & MCR BP QUAL/QUAN	N NA

ALOHAC	Q3 2025	Diagnostic Testing	81279	CPT	JAK2 TARGETED SEQUENCE ANALYSIS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81283	CPT	IFNL3 GENE ANALYSIS RS12979860 VARIANT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81284	CPT	FXN GENE ANALYSIS EVAL DETECT ABNORMAL ALLELES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81285	CPT	FXN GENE ANALYSIS CHARACTERIZATION ALLELES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81286	CPT	FXN GENE ANALYSIS FULL GENE SEQUENCE	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81287	CPT	MGMT GENE PROMOTER METHYLATION ANALYSIS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81288	CPT	MLH1 GENE ANALYSIS PROMOTER METHYLATION ANALYSIS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81289	CPT	FXN GENE ANALYSIS KNOWN FAMILIAL VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81290	CPT	MCOLN1 MUCOLIPIN1 GENE ANALYSIS COMMON VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81291	CPT	MTHFR GENE ANALYSIS COMMON VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81292	CPT	MLH1 GENE ANALYSIS FULL SEQUENCE ANALYSIS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81293	CPT	MLH1 GENE ANALYSIS KNOWN FAMILIAL VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81294	CPT	MLH1 GENE ANALYSIS DUPLICATION/DELETION VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81295	CPT	MSH2 GENE ANALYSIS FULL SEQUENCE ANALYSIS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81296	CPT	MSH2 GENE ANALYSIS KNOWN FAMILIAL VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81297	CPT	MSH2 GENE ANALYSIS DUPLICATION/DELETION VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81298	CPT	MSH6 GENE ANALYSIS FULL SEQUENCE ANALYSIS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81299	CPT	MSH6 GENE ANALYSIS KNOWN FAMILIAL VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81300	CPT	MSH6 GENE ANALYSIS DUPLICATION/DELETION VARIA	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81301	CPT	MICROSATELLITE INSTAB ANAL MISMATCH REPAIR DEF	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81302	CPT	MECP2 GENE ANALYSIS FULL SEQUENCE	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81303	CPT	MECP2 GENE ANALYSIS KNOWN FAMILIAL VARIANT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81304	CPT	MECP2 GENE ANALYSIS DUPLICATION/DELETION VARIANT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81305	CPT	MYD88 GENE ANALYSIS P.LEU265 (L265P) VARIANT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81306	CPT	NUDT15 GENE ANALYSIS COMMON VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81307	CPT	PALB2 GENE ANALYSIS FULL GENE SEQUENCE	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81308	CPT	PALB2 GENE ANALYSIS KNOWN FAMILIAL VARIANT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81309	CPT	PIK3CA GENE ANALYSIS TARGETED SEQUENCE ANALYSIS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81310	CPT	NPM1 NUCLEOPHOSMIN GENE ANAL EXON 12 VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81311	CPT	NRAS GENE ANALYSIS VARIANTS IN EXON 2&3	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81312	CPT	PABPN1 GENE ANALYSIS EVAL DETC ABNORMAL ALLELES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81313	CPT	PCA3/KLK3 PROSTATE SPECIFIC ANTIGEN RATIO	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81314	CPT	PDGFRA GENE ANALYS TARGETED SEQUENCE ANALYS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81315	CPT	PML/RARALPHA COMMON BREAKPOINTS QUAL/QUANT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81316	CPT	PML/RARALPHA SINGLE BREAKPOINT QUAL/QUAN	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81317	CPT	PMS2 GENE ANALYSIS FULL SEQUENCE	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81318	CPT	PMS2 GENE ANALYSIS KNOWN FAMILIAL VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81319	CPT	PMS2 GENE ANALYSIS DUPLICATION/DELETION VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81320	CPT	PLCG2 GENE ANALYSIS COMMON VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81321	CPT	PTEN GENE ANALYSIS FULL SEQUENCE ANALYSIS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81322	CPT	PTEN GENE ANALYSIS KNOWN FAMILIAL VARIANT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81323	CPT	PTEN GENE ANALYSIS DUPLICATION/DELETION VARIANT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81327	CPT	SEPT9 GENE PROMOTER METHYLATION ANALYSIS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81328	CPT	SLCO1B1 GENE ANALYSIS COMMON VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81329	CPT	SMN1 GENE ANALYSIS DOSAGE/DELET ALYS W/SMN2 ALYS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81330	CPT	SMPD1 GENE ANALYSIS COMMON VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81331	CPT	SNRPN/UBE3A METHYLATION ANALYSIS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81332	CPT	SERPINA1 GENE ANALYSIS COMMON VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81333	CPT	TGFBI GENE ANALYSIS COMMON VARIANTS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81334	CPT	RUNX1 GENE ANALYSIS TARGETED SEQUENCE ANALYSIS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81335	CPT	TPMT GENE ANALAYSIS COMMON VARIANTS	N NA

ALOHAC Q3 2025	Diagnostic Testing	81336	CPT	SMN1 GENE ANALYSIS FULL GENE SEQUENCE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81337	CPT	SMN1 GENE ANALYSIS KNOWN FAMILIAL SEQ VARIANTS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81338	CPT	MPL GENE ANALYSIS COMMON VARIANTS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81339	CPT	MPL GENE ANALYSIS SEQUENCE ANALYSIS EXON 10	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81340	CPT	TRB@ REARRANGEMENT ANAL AMPLIFICATION METHOD	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81341	CPT	TRB@ REARRANGEMENT ANAL DIRECT PROBE METHODOLOGY	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81342	CPT	TRG@ GENE REARRANGEMENT ANALYSIS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81343	CPT	PPP2R2B GENE ANALYSIS EVAL DETC ABNORMAL ALLELES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81344	CPT	TBP GENE ANALYSIS EVAL DETECT ABNORMAL ALLELES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81345	CPT	TERT GENE ANALYSIS TARGETED SEQUENCE ANALYSIS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81346	CPT	TYMS GENE ANALYSIS COMMON VARIANTS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81347	CPT	SF3B1 GENE ANALYSIS COMMON VARIANTS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81348	CPT	SRSF2 GENE ANALYSIS COMMON VARIANTS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81349	CPT	CYTOG ALYS CHRMOML ABNOR LOW-PASS SEQ ALYS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81350	CPT	UGT1A1 GENE ANALYSIS COMMON VARIANTS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81351	CPT	TP53 GENE ANALYSIS FULL GENE SEQUENCE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81352	CPT	TP53 GENE ANALYSIS TARGETED SEQUENCE ANALYSIS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81353	CPT	TP53 GENE ANALYSIS KNOWN FAMILIAL VARIANT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81355	CPT	VKORC1 GENE ANALYSIS COMMON VARIANT(S)	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81357	CPT	U2AF1 GENE ANALYSIS COMMON VARIANTS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81360	CPT	ZRSR2 GENE ANALYSIS COMMON VARIANT(S)	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81361	CPT	HBB COMMON VARIANTS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81362	CPT	HBB KNOWN FAMILIAL VARIANTS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81363	CPT	HBB DUPLICATION/DELETION VARIANTS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81364	CPT	HBB FULL GENE SEQUENCE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81370	CPT	HLA CLASS I&II LOW HLA-A -B -C -DRB1/3/4/5&DQB	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81371	CPT	HLA I&LI LOW RESOLUTION HLA-A -B&-DRB1	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81372	CPT	HLA CLASS I TYPING LOW RESOLUTION COMPLETE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81373	CPT	HLA CLASS I TYPING LOW RESOLUTION ONE LOCUS EACH	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81374	CPT	HLA I LOW RESOLUTION ONE ANTIGEN EQUIVALENT EACH	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81375	CPT	HLA II LOW RESOLUTION HLA-DRB1/3/4/5 AND -DQB1	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81376	CPT	HLA CLASS II TYPING LOW RESOLUTION ONE LOCUS EA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81377	CPT	HLA II LOW RESOLUTION ONE ANTIGEN EQUIVALENT EA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81378	CPT	HLA I&II HIGH RESOLUTION HLA-A -B -C AND -DRB1	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81379	CPT	HLA CLASS I TYPING HIGH RESOLUTION COMPLETE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81380	CPT	HLA CLASS I TYPING HIGH RESOLUTION ONE LOCUS EA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81381	CPT	HLA I TYPING HIGH RESOLUTION 1 ALLELE/ALLELE GRP	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81382	CPT	HLA CLASS II TYPING HIGH RESOLUTION ONE LOCUS EA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81383	CPT	HLA II HIGH RESOLUTION 1 ALLELE/ALLELE GROUP	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81400	CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 1	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81401	CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 2	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81402	CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 3	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81403	CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 4	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81404	CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 5	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81405	CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 6	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81406	CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 7	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81407	CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 8	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81408	CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 9	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81410	CPT	AORTIC DYSFUNCTION/DILATION GENOMIC SEQ ANALYSIS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81411	CPT	AORTIC DYSFUNCTION/DILATION DUP/DEL ANALYSIS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81412	CPT	ASHKENAZI JEWISH ASSOC DSRDRS GEN SEQ ANAL 9 GEN	N	NA

ALOHAC Q3 2025	Diagnostic Testing	81413	CPT	CAR ION CHNNLPATH GENOMIC SEQ ALYS INC 10 GNS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81414	CPT	CAR ION CHNNLPATH DUP/DEL GN ALYS PANEL 2 GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81415	CPT	EXOME SEQUENCE ANALYSIS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81416	CPT	EXOME SEQUENCE ANALYSIS EACH COMPARATOR EXOME	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81417	CPT	EXOME RE-EVAL OF PREVIOUSLY OBTAINED EXOME SEQ	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81418	CPT	RX METAB GENOMIC SEQ ALYS PANEL AT LEAST 6 GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81419	CPT	EPILEPSY GENOMIC SEQUENCE ANALYSIS PANEL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81420	CPT	FETAL CHROMOSOMAL ANEUPLOIDY GENOMIC SEQ ANALYS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81422	CPT	FETAL CHROMOSOMAL MICRODELTJ GENOMIC SEQ ANALYS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81425	CPT	GENOME SEQUENCE ANALYSIS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81426	CPT	GENOME SEQUENCE ANALYSIS EACH COMPARATOR GENOME	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81427	CPT	GENOME RE-EVALUATION OF PREC OBTAINED GENOME SEQ	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81430	CPT	HEARING LOSS GENOMIC SEQUENCE ANALYSIS 60 GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81431	CPT	HEARING LOSS DUP/DEL ANALYSIS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81432	CPT	HEREDITARY BRST CA-RLATD DO GEN SEQ ALYS 5+ GEN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81434	CPT	HEREDITARY RTA DO GEN SEQ ALYS AT LEAST 15 GEN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81435	CPT	HEREDITARY COLON CA-RELATED DO GEN SEQ ALYS 5+	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81437	CPT	HERED NEUROEND TUM-RELATED DO GEN SEQ ALYS 5+	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81439	CPT	HEREDITARY CARDIOMYOPATHY GEN SEQ ANALYS 5 GEN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81440	CPT	NUCLEAR MITOCHONDRIAL 100 GENE GENOMIC SEQ	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81441	CPT	IBMFS SEQUENCE ANALYSIS PANEL AT LEAST 30 GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81442	CPT	NOONAN SPECTRUM DISORDERS GEN SEQ ANALYS 12 GEN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81443	CPT	GENETIC TESTING FOR SEVERE INHERITED CONDITIONS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81445	CPT	SOLID ORGAN NEOPLASM GSAP 5-50 DNA/DNA&RNA ALYS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81448	CPT	HEREDITARY PERIPHERAL NEUROPATHY GEN SEQ PNL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81449	CPT	SOLID ORGAN NEOPLASM GSAP 5-50 RNA ANALYSIS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81450	CPT	HEMATOLYMPHOID NEO/DO GSAP 5-50DNA/DNA&RNA ALYS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81451	CPT	HEMATOLYMPHOID NEO/DO GSAP 5-50 RNA ANALYSIS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81455	CPT	SO/HEMATOLYMPHOID NEO/DO 51/>GSAP DNA/DNA&RNA	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81456	CPT	SO/HEMATOLYMPHOID NEO/DO 51/>RNA ANALYSIS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81460	CPT	WHOLE MITOCHONDRIAL GENOME	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81465	CPT	WHOLE MITOCHONDRIAL GENOME ANALYSIS PANEL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81470	CPT	X-LINKED INTELLECTUAL DBLT GENOMIC SEQ ANALYS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81471	CPT	X-LINKED INTELLECTUAL DBLT DUP/DEL GENE ANALYS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81479	CPT	UNLISTED MOLECULAR PATHOLOGY PROCEDURE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81490	CPT	AUTOIMMUNE RHEUMATOID ARTHRITIS ALYS 12 BMRK	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81493	CPT	COR ART DISEASE MRNA GENE EXPRESSION 23 GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81503	CPT	ONCO (OVARIAN) BIOCHEMICAL ASSAY FIVE PROTEINS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81504	CPT	ONCOLOGY TISSUE OF ORIGIN SIMILAR SCOR ALGORITHM	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81507	CPT	FETAL ANEUPLOIDY 21 18 13 SEQ ANALY TRISOM RISK	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81513	CPT	NFCT DS BACTERAL VAGINOSIS RNA VAGINAL-FLUID ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81514	CPT	NFCT DS BCT VAGINOSIS&VAGINITIS DNA VAG FLU ALG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81518	CPT	ONCOLOGY BREAST MRNA GENE EXPRESSION 11 GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81519	CPT	ONCOLOGY BREAST MRNA GENE EXPRESSION 21 GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81520	CPT	ONC BREAST MRNA GENE XPRSN PRFL HYBRD 58 GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81521	CPT	ONC BREAST MRNA MICRORA GENE XPRSN PRFL 70 GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81522	CPT	ONCOLOGY BREAST MRNA GENE XPRSN PRFL 12 GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81523	CPT	ONC BRST MRNA NEXT GNRJ SEQ GEN XPRSN 70 CNT&31	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81525	CPT	ONCOLOGY COLON MRNA GENE EXPRESSION 12 GENES	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81528	CPT	ONCOLOGY COLORECTAL SCREENING QUAN 10 DNA MARKRS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	81529	CPT	ONC CUTAN MLNMA MRNA GENE XPRS PRFL 31 GENES ALG	N	NA

ALOHAC	Q3 2025	Diagnostic Testing	81535	CPT	ONCOLOGY GYNE LIVE TUM CELL CLTR&CHEMO RESP 1ST	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81536	CPT	ONCOLOGY GYNE LIVE TUM CELL CLTR&CHEMO RESP ADD	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81538	CPT	ONCOLOGY LUNG MS 8-PROTEIN SIGNATURE	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81540	CPT	ONCOLOGY TUM UNKNOWN ORIGIN MRNA 92 GENES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81541	CPT	ONC PRST8 MRNA GENE XPRSN PRFL RT-PCR 46 GENES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81542	CPT	ONC PRST8 MRNA MICRORA GENE XPRSN PRFL 22 GENES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81546	CPT	ONC THYR MRNA 10,196 GENES FINE NDL ASPIRATE ALG	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81551	CPT	ONC PRST8 PRMTR METHYLATION PRFL R-T PCR 3 GENES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81552	CPT	ONC UVEAL MLNMA MRNA GENE XPRSN PRFL 15 GENES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81554	CPT	PULM DS IPF MRNA 190 GENE TRANSBRONCHIAL BX ALG	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81558	CPT	TRNSPLJ REJ KDN MRNA GENE XPRSN PRFLG QPCR 139	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81560	CPT	TRNSPLJ PED LVR&BWL MES CD154+T CLL WHL PRPH BLD	N NA
ALOHAC	Q3 2025	Diagnostic Testing	81595	CPT	CARDIOLOGY HRT TRNSPL MRNA GENE EXPRESS 20 GENES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	82077	CPT	ASSAY OF ALCOHOL (ETHANOL) SPEC XCP UR&BREATH IA	N NA
ALOHAC	Q3 2025	Diagnostic Testing	82166	CPT	ASSAY OF ANTI-MULLERIAN HORMONE	N NA
ALOHAC	Q3 2025	Diagnostic Testing	82233	CPT	BETA-AMYLOID 1-40 (ABETA 40)	N NA
ALOHAC	Q3 2025	Diagnostic Testing	82234	CPT	BETA-AMYLOID 1-42 (ABETA 42)	N NA
ALOHAC	Q3 2025	Diagnostic Testing	82681	CPT	ASSAY OF DIRECT MEASUREMENT FREE ESTRADIOL	N NA
ALOHAC	Q3 2025	Diagnostic Testing	83006	CPT	GROWTH STIMULATION EXPRESSED GENE 2	N NA
ALOHAC	Q3 2025	Diagnostic Testing	83884	CPT	ASSAY NEUROFILAMENT LIGHT CHAIN	N NA
ALOHAC	Q3 2025	Diagnostic Testing	84393	CPT	TAU PHOSPHORYLATED EACH	N NA
ALOHAC	Q3 2025	Diagnostic Testing	84394	CPT	TOTAL TAU (TTAU)	N NA
ALOHAC	Q3 2025	Diagnostic Testing	86041	CPT	ACETYLCHOLINE RECEPTOR BINDING ANTIBODY	N NA
ALOHAC	Q3 2025	Diagnostic Testing	86042	CPT	ACETYLCHOLINE RECEPTOR BLOCKING ANTIBODY	N NA
ALOHAC	Q3 2025	Diagnostic Testing	86043	CPT	ACETYLCHOLINE RECEPTOR MODULATING ANTIBODY	N NA
ALOHAC	Q3 2025	Diagnostic Testing	86366	CPT	MUSCLE-SPECIFIC KINASE ANTIBODY	N NA
ALOHAC	Q3 2025	Diagnostic Testing	87467	CPT	HEPATITIS B SURFACE ANTIGEN QUANTITATIVE	N NA
ALOHAC	Q3 2025	Diagnostic Testing	87468	CPT	IADNA ANAPLASMA PHAGOCYTOPHILUM AMPLIFED PRB TQ	N NA
ALOHAC	Q3 2025	Diagnostic Testing	87469	CPT	IADNA BABESIA MICROTI AMPLIFIED PROBE TECHNIQUE	N NA
ALOHAC	Q3 2025	Diagnostic Testing	87478	CPT	IADNA BORRELIA MIYAMOTOI AMPLIFIED PRB TECHNIQUE	N NA
ALOHAC	Q3 2025	Diagnostic Testing	87484	CPT	IADNA EHRLICHIA CHAFFEENSIS AMPLIFIED PROBE TQ	N NA
ALOHAC	Q3 2025	Diagnostic Testing	87593	CPT	IADNA ORTHOPOXVIRUS AMPLIFIED PROBE TECHNIQUE EA	N NA
ALOHAC	Q3 2025	Other	90281	CPT	IMMUNE GLOBULIN IG HUMAN IM USE	N NA
ALOHAC	Q3 2025	Other	90283	CPT	IMMUNE GLOBULIN IGIV HUMAN IV USE	N NA
ALOHAC	Q3 2025	Other	90284	CPT	IMMUNE GLOBULIN HUMAN SUBQ INFUSION 100 MG EA	N NA
ALOHAC	Q3 2025	Diagnostic Testing	90291	CPT	CYTOMEGALOVIRUS IMMUNE GLOBULIN HUMAN IV	N NA
ALOHAC	Q3 2025	Physician Services	90378	CPT	RESPIRATORY SYNCYTIAL VIRUS IG IM 50 MG E	N NA
ALOHAC	Q3 2025	Preventative Services	90584	CPT	DENGUE VACC QUAD LIVE 2 DOSE SCHEDULE SUBQ USE	N NA
ALOHAC	Q3 2025	Preventative Services	90593	CPT	CHIKUNGUNYA VIRUS VACCINE RECOMBINANT FOR IM USE	N NA
ALOHAC	Q3 2025	Preventative Services	90611	CPT	SMALLPOX&MONKEYPOX VACC 0.5ML DOS FOR SUBQ USE	N NA
ALOHAC	Q3 2025	Other	90846	CPT	FAMILY PSYCHOTHERAPY W/O PATIENT PRESENT 50 MINS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	90867	CPT	REPET TMS TX INITIAL W/MAP/MOTR THRESHLD/DEL&M	N NA
ALOHAC	Q3 2025	Outpatient Hosp	90867	CPT	REPET TMS TX INITIAL W/MAP/MOTR THRESHLD/DEL&M	N NA
ALOHAC	Q3 2025	Outpatient Hosp	90868	CPT	THERAP REPETITIVE TMS TX SUBSEQ DELIVERY & MNG	N NA
ALOHAC	Q3 2025	Diagnostic Testing	90868	CPT	THERAP REPETITIVE TMS TX SUBSEQ DELIVERY & MNG	N NA
ALOHAC	Q3 2025	Physician Services	90869	CPT	REPET TMS TX SUBSEQ MOTR THRESHLD W/DELIV & MN	N NA
ALOHAC	Q3 2025	Physician Services	90870	CPT	ELECTROCONVULSIVE THERAPY	N NA
ALOHAC	Q3 2025	Diagnostic Testing	91013	CPT	ESOPHAGEAL MOTILITY STD W/I&R STIM/PERFUSION	N NA
ALOHAC	Q3 2025	Diagnostic Testing	91020	CPT	GASTRIC MOTILITY MANOMETRIC STUDIES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	91022	CPT	DUODENAL MOTILITY MANOMETRIC STUDY	N NA
ALOHAC	Q3 2025	Diagnostic Testing	91030	CPT	ESOPHAGUS ACID PERFUSION TEST ESOPHAGITIS	N NA

ALOHAC	Q3 2025	Diagnostic Testing	91034	CPT	GASTROESOPHAG REFLX TEST W/CATH PH ELTRD PLCMT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	91035	CPT	GASTROESOPHAG REFLX TEST W/TELEMTRY PH ELTRD	N NA
ALOHAC	Q3 2025	Diagnostic Testing	91037	CPT	GASTROESOPHAG REFLX TEST W/INTRLUML IMPED ELTRD	N NA
ALOHAC	Q3 2025	Diagnostic Testing	91038	CPT	ESOPHGL FUNCJ G-ESOP RFLX IMPD ELTRD PROLNG	N NA
ALOHAC	Q3 2025	Outpatient Hosp	91040	CPT	ESOPHGL BALO DISTENSION DX STD W/PROVOCATION	N NA
ALOHAC	Q3 2025	Diagnostic Testing	91110	CPT	GI TRC IMG INTRALUMINAL ESOPHAGUS-ILEUM W/I&R	N NA
ALOHAC	Q3 2025	Diagnostic Testing	91111	CPT	GI TRACT IMAGING INTRALUMINAL ESOPHAGUS WI&R	N NA
ALOHAC	Q3 2025	Diagnostic Testing	91112	CPT	GI TRANSIT & PRES MEAS WIRELESS CAPSULE W/INTERP	N NA
ALOHAC	Q3 2025	Diagnostic Testing	91113	CPT	GI TRACT IMAGING INTRALUMINAL COLON I&R	N NA
ALOHAC	Q3 2025	Diagnostic Testing	91117	CPT	COLON MOTILITY STDY MIN 6 HR CONT RECORD W/I&R	N NA
ALOHAC	Q3 2025	Diagnostic Testing	91122	CPT	ANORECTAL MANOMETRY	N NA
ALOHAC	Q3 2025	Diagnostic Testing	91132	CPT	ELECTROGASTROGRAPHY DX TRANSCUTANEOUS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	91133	CPT	ELECTROGASTROGRAPHY DX TRANSCUT W/PROVOCTVE TSTG	N NA
ALOHAC	Q3 2025	Rehab Services	92066	CPT	ORTHOPTIC TRAINING UNDER SUPERVISION OF PHYS/QHP	N NA
ALOHAC	Q3 2025	Diagnostic Testing	92137	CPT	CPTRIZD OPH DX IMG PST SGM UNI/BI RTA OCT ANGRPH	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	92310	CPT	RX&FITG C-LENS SUPVJ CRNL LENS OU XCPT APHK	N NA
ALOHAC	Q3 2025	Physician Services	92311	CPT	RX&FITG CONTACT LENS CORNEAL LENS APHAKIA 1 EYE	N NA
ALOHAC	Q3 2025	Physician Services	92312	CPT	RX&FITG CONTACT LENS CORNEAL LENS APHAKIA OU	N NA
ALOHAC	Q3 2025	Physician Services	92313	CPT	RX&FITG CONTACT LENS CORNEOSCLERAL LENS	N NA
ALOHAC	Q3 2025	Physician Services	92314	CPT	RX&FITG C-LENS TECH CRNL LENS OU XCPT APHAKIA	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	92315	CPT	RX&FITG C-LENS TECH CRNL LENS APHAKIA 1 EYE	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	92316	CPT	RX&FITG C-LENS TECH CRNL LENS APHAKIA BOTH EYES	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	92317	CPT	RX&FITG CONTACT LENS TECH CORNEOSCLERAL LENS	N NA
ALOHAC	Q3 2025	Physician Services	92325	CPT	MODIFICAJ CONTACT LENS SPX SUPVJ ADAPTATION	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	92326	CPT	REPLACEMENT OF CONTACT LENS	N NA
ALOHAC	Q3 2025	Rehab Services	92507	CPT	TX SPEECH LANG VOICE COMMJ&/AUD PROC DO INDIV	N NA
ALOHAC	Q3 2025	Physician Services	92508	CPT	TX SPEECH LANG VOICE COMMJ&/AUD PROC DO GROUP	N NA
ALOHAC	Q3 2025	Rehab Services	92521	CPT	EVALUATION OF SPEECH FLUENCY (STUTTER CLUTTER)	N NA
ALOHAC	Q3 2025	Rehab Services	92522	CPT	EVALUATION OF SPEECH SOUND PRODUCTION ARTICULATE	N NA
ALOHAC	Q3 2025	Rehab Services	92523	CPT	EVAL SPEECH SOUND PRODUCT LANGUAGE COMPREHENSION	N NA
ALOHAC	Q3 2025	Diagnostic Testing	92524	CPT	BEHAVIORAL & QUALIT ANALYSIS VOICE AND RESONANCE	N NA
ALOHAC	Q3 2025	Rehab Services	92526	CPT	TX SWALLOWING DYSFUNCTION&/ORAL FUNCJ FEEDING	N NA
ALOHAC	Q3 2025	Physician Services	92592	CPT	HEARING AID CHECK MONAURAL	N NA
ALOHAC	Q3 2025	Physician Services	92593	CPT	HEARING AID CHECK BINAURAL	N NA
ALOHAC	Q3 2025	Diagnostic Testing	92596	CPT	EAR PROTECTOR ATTENUATION MEASUREMENTS	N NA
ALOHAC	Q3 2025	Rehab Services	92597	CPT	EVAL&/FITG VOICE PROSTC DEV SUPLMNT ORAL SPEEC	N NA
ALOHAC	Q3 2025	Other	92605	CPT	EVAL RX N-SP-GEN AUGMT ALT COMMUN DEV F2F 1ST HR	N NA
ALOHAC	Q3 2025	Other	92606	CPT	THER SVC N-SP-GENRATJ DEV PRGRMG&MODIFICAJ	N NA
ALOHAC	Q3 2025	Rehab Services	92607	CPT	RX SP-GENRATJ AUGMNT&COMUNICAJ DEV 1ST HR	N NA
ALOHAC	Q3 2025	Rehab Services	92608	CPT	RX SP-GENRATJ AUGMNT&COMUNICAJ DEV EA 30 MIN	N NA
ALOHAC	Q3 2025	Rehab Services	92609	CPT	THER SP-GENRATJ DEV PRGRMG&MODIFICAJ	N NA
ALOHAC	Q3 2025	Rehab Services	92610	CPT	EVAL ORAL&PHARYNGEAL SWLNG FUNCJ	N NA
ALOHAC	Q3 2025	Diagnostic Testing	92612	CPT	FLEXIBLE ENDOSCOPIC EVAL SWALLOW C/V REC	N NA
ALOHAC	Q3 2025	Diagnostic Testing	92614	CPT	FLEXIBLE ENDOSCOPIC EVAL LARYN SENSORY C/V REC	N NA
ALOHAC	Q3 2025	Diagnostic Testing	92616	CPT	FLEXIBLE NDSC EVAL SWLNG&LARYN SENS C/V REC	N NA
ALOHAC	Q3 2025	Other	92618	CPT	EVAL RX N-SP-GEN AUGMT ALT COMMUN DEV ADD 30 MIN	N NA
ALOHAC	Q3 2025	Diagnostic Testing	92622	CPT	DX ALY PRGRMG&VERIF AUD OI SOUND PROCESSR 1ST 60	N NA
ALOHAC	Q3 2025	Diagnostic Testing	92623	CPT	DX ALY PRGRMG&VERIF AUD OI SOUND PROCESSR EA ADL	N NA
ALOHAC	Q3 2025	Diagnostic Testing	92650	CPT	AEP SCR AUDITORY POTENTIAL W/STIMULI AUTO ALYS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	92653	CPT	AEP NEURODIAGNOSTIC INTERPRETATION AND REPORT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	92972	CPT	PERCUTANEOUS TRANSLUMINAL CORONARY LITHOTRIPSY	N NA

ALOHAC Q3 2025	Physician Services	93150	CPT	THER ACTIVATION IMPL PHRENIC NRV STIMULATOR SYS	N	NA
ALOHAC Q3 2025	Physician Services	93151	CPT	INTERROG&PRGRMG IMPL PHRENIC NRV STIMULATOR SYS	N	NA
ALOHAC Q3 2025	Physician Services	93152	CPT	INTERROG&PRGRMG IPNSS DURING POLYSOMNOGRAPHY	N	NA
ALOHAC Q3 2025	Physician Services	93153	CPT	INTERROGATION WITHOUT PROGRAMMING IPNSS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	93245	CPT	EXTERNAL ECG REC>7D<15D SCAN ALYS REPORT R&I	N	NA
ALOHAC Q3 2025	Physician Services	93260	CPT	PRGRMG DEV EVAL IMPLANTABLE SUBQ LEAD DFB SYSTEM	N	NA
ALOHAC Q3 2025	Diagnostic Testing	93261	CPT	INTERROGATION EVAL F2F IMPLANT SUBQ LEAD DEFIB	N	NA
ALOHAC Q3 2025	Diagnostic Testing	93278	CPT	SIGNAL AVERAGED ELECTROCARDIOGRAPHY W/WO ECG	N	NA
ALOHAC Q3 2025	Physician Services	93292	CPT	INTERROGATION EVAL IN PERSON WR DEFIBRILLATOR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	93293	CPT	TRANSTELEPHONIC RHYTHM STRIP PACEMAKER EVAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	93319	CPT	3D ECHO IMG&PST-PXESSING TEE/TTE CGEN CAR ANOMAL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	93584	CPT	VENOGRAPHY CHD ANOMALOUS/PERSISTENT SVC NT DRG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	93585	CPT	VENOGRAPHY CHD AZYGOS/HEMIAZYGOS VENOUS SYSTEM	N	NA
ALOHAC Q3 2025	Diagnostic Testing	93586	CPT	VENOGRAPHY CHD CORONARY SINUS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	93587	CPT	VENOGRAPHY CHD VENOVENOUS COLTRL AT/ABOVE HRT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	93588	CPT	VENOGRAPHY CHD VENOVENOUS COLLATERAL BELOW HEART	N	NA
ALOHAC Q3 2025	Diagnostic Testing	93593	CPT	R HRT CATH CHD W/IMG CATH TRGT ZONE NML NT CONNJ	N	NA
ALOHAC Q3 2025	Diagnostic Testing	93594	CPT	R HRT CATH CHD W/IMG CATH TRGT ZON ABNL NT CONNJ	N	NA
ALOHAC Q3 2025	Diagnostic Testing	93595	CPT	L HRT CATH CHD IMG CATH TRGT ZON NML/ABNL NT CNJ	N	NA
ALOHAC Q3 2025	Diagnostic Testing	93596	CPT	R&L HRT CATH CHD IMG CATH TRGT ZONE NML NT CONNJ	N	NA
ALOHAC Q3 2025	Diagnostic Testing	93597	CPT	R&L HRT CATH CHD IMG CATH TRGT ZON ABNL NT CONNJ	N	NA
ALOHAC Q3 2025	Diagnostic Testing	93598	CPT	CAR OUTP MEAS DRG CAR CATH EVAL CGEN HRT DEFECT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	93896	CPT	VASOREACTIVITY STUDY W/TCD ICR ARTERIES COMPLETE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	93985	CPT	DUPLEX SCAN ARTL INFL&VEN O/F HEMO COMPL BI STD	N	NA
ALOHAC Q3 2025	Rehab Services	94625	CPT	PHYS/QHP SVCS OP PULM REHAB WO CONT OXIMTRY MNTR	N	NA
ALOHAC Q3 2025	Rehab Services	94626	CPT	PHYS/QHP SVCS OP PULM REHAB W/CONT OXIMTRY MNTR	N	NA
ALOHAC Q3 2025	Physician Services	94774	CPT	PEDIATRIC APNEA MONITOR ATTACHMENT PHYS I&R	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	94775	CPT	PEDIATRIC APNEA MONITOR ATTACHMENT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	94776	CPT	PEDIATRIC APNEA MONITOR ANALYSES COMPUTER	N	NA
ALOHAC Q3 2025	Diagnostic Testing	94777	CPT	PEDIATRIC APNEA MONITOR PHYS/QHP REVIEW	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	95249	CPT	CONT GLUC MONITORING PATIENT PROVIDED EQUIPMENT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95706	CPT	EEG W/O VIDEO BY TECH 2-12 HR INTERMITTENT MNTR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95707	CPT	EEG W/O VIDEO BY TECH 2-12HR CONTINUOUS R-T MNTR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95708	CPT	EEG W/O VID BY TECH EA INCR 12-26HR UNMONITORED	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95709	CPT	EEG W/O VID BY TECH EA INCR 12-26 HR INTMT MNTR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95710	CPT	EEG W/O VID TECH EA INCR 12-26 HR CONT R-T MNTR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95712	CPT	VEEG BY TECH 2-12 HR INTERMITTENT MONITORING	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95713	CPT	VEEG BY TECH 2-12 HR CONTINUOUS R-T MONITORING	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95714	CPT	VEEG BY TECH EA INCR 12-26 HR UNMONITORED	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95715	CPT	VEEG BY TECH EA INCR 12-26 HR INTERMITTENT MNTR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95716	CPT	VEEG BY TECH EA INCR 12-26 HR CONT R-T MNTR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95720	CPT	EEG PHYS/QHP EA INCR>12HR<26HR AFTER 24HR W/VEEG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95721	CPT	EEG COMPLETE STD PHYS/QHP>36 HR<60 HR W/O VIDEO	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95722	CPT	EEG COMPLETE STD PHYS/QHP>36 HR<60 HR W/VEEG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95723	CPT	EEG COMPLETE STD PHYS/QHP>60 HR<84 HR W/O VIDEO	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95724	CPT	EEG COMPLETE STD PHYS/QHP>60 HR<84 HR W/VEEG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95725	CPT	EEG COMPLETE STD PHYS/QHP>84 HR W/O VID	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95726	CPT	EEG COMPLETE STD PHYS/QHP>84 HR W/VEEG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95782	CPT	POLYSOM <6 YRS SLEEP STAGE 4/> ADDL PARAM ATTND	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95783	CPT	POLYSOM <6 YRS SLEEP W/CPAP/BILVL VENT 4/> PARAM	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95801	CPT	SLP STDY UNATND W/MIN HRT RATE/O2 SAT/RESP ANAL	N	NA

ALOHAC Q3 2025	Diagnostic Testing	95803	CPT	ACTIGRAPHY TESTING RECORDING ANALYSIS I&R	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95805	CPT	MLT SLEEP LATENCY/MAINT OF WAKEFULNESS TSTG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95806	CPT	SLEEP STD AIRFLOW HRT RATE&O2 SAT EFFORT UNATT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95807	CPT	SLEEP STD REC VNTJ RESPIR ECG/HRT RATE&O2 ATTN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95808	CPT	POLYSOM ANY AGE SLEEP STAGE 1-3 ADDL PARAM ATTND	N	NA
ALOHAC Q3 2025	Physician Services	95873	CPT	ELECTRICAL STIMULATION GUID W/CHEMODENERVATION	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95875	CPT	ISCHEMIC LIMB XERS TST SPEC ACQUISJ METAB	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95919	CPT	QUANTITATIVE PUPILLOMETRY PHYS/QHP I&R UNI/BI	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95921	CPT	TSTG ANS FUNCJ CARDIOVAGAL INNERVAJ PARASYMP	N	NA
ALOHAC Q3 2025	Rehab Services	95922	CPT	TSTG ANS FUNCJ VASOMOTOR ADRENERGIC INNERVAJ	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95923	CPT	TESTING AUTONOMIC NERVOUS SYSTEM FUNCTION	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95924	CPT	TSTG ANS FUNCJ PARASYMP&SYMP W/5 MIN PASIVE TILT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95925	CPT	SHORT-LATENCY SOMATOSENS EP STD UPR LIMBS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95926	CPT	SHORT-LATENCY SOMATOSENS EP STD LWR LIMBS	N	NA
ALOHAC Q3 2025	Physician Services	95927	CPT	SHORT-LATENCY SOMATOSENS EP STD TRNK/HEAD	N	NA
ALOHAC Q3 2025	Physician Services	95928	CPT	CTR MOTOR EP STD TRANSCRNL MOTOR STIMJ UPR LIMBS	N	NA
ALOHAC Q3 2025	Physician Services	95929	CPT	CTR MOTOR EP STD TRANSCRNL MOTOR STIMJ LWR LIMBS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95930	CPT	VISUAL EP TESTING CNS EXCEPT GLAUCOMA W/I&R	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95933	CPT	ORBICULARIS OCULI REFLX ELECTRODIAGNOSTIC TEST	N	NA
ALOHAC Q3 2025	Physician Services	95938	CPT	SHORT-LATENCY SOMATOSENS EP STD UPR & LOW LIMB	N	NA
ALOHAC Q3 2025	Physician Services	95939	CPT	CTR MOTR EP STD TRANSCRNL MOTR STIM UPR&LOW LI	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95965	CPT	MAGNETOENCEPHALOGRAPHY SPON BRAIN ACTIVITY	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95966	CPT	MAGNETOENCEPHALOGRAPY EVOKED FIELDS 1 MODALITY	N	NA
ALOHAC Q3 2025	Diagnostic Testing	95967	CPT	MAGNETOENCEPHALOGRAPY EVOKED FIELDS EACH ADDL	N	NA
ALOHAC Q3 2025	Other	95972	CPT	ELEC ALYS IMPLT NPGT CPLX SP/PN PRGRMG	N	NA
ALOHAC Q3 2025	Other	95976	CPT	ELEC ALYS IMPLT SMPL CN NPGT PRGRMG	N	NA
ALOHAC Q3 2025	Other	95977	CPT	ELEC ALYS IMPLT CPLX CN NPGT PRGRMG	N	NA
ALOHAC Q3 2025	Other	95983	CPT	ELEC ALYS IMPLT BRN NPGT PRGRMG 1ST 15 MIN	N	NA
ALOHAC Q3 2025	Other	95984	CPT	ELEC ALYS IMPLT BRN NPGT PRGRMG EA ADDL 15 MIN	N	NA
ALOHAC Q3 2025	Rehab Services	95992	CPT	CANALITH REPOSITIONING PROCEDURE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	96002	CPT	DYN SURF EMG WALKG/FUNCJAL ACTV 1-12 MUSC	N	NA
ALOHAC Q3 2025	Diagnostic Testing	96105	CPT	ASSESSMENT APHASIA W/INTERP & REPORT PER HOUR	N	NA
ALOHAC Q3 2025	Physician Services	96112	CPT	DEVELOPMENTAL TST ADMIN PHYS/QHP 1ST HOUR	N	NA
ALOHAC Q3 2025	Physician Services	96113	CPT	DEVELOPMENTAL TST ADMIN PHYS/QHP EA ADDL 30 MIN	N	NA
ALOHAC Q3 2025	Physician Services	96116	CPT	NEUROBEHAVIORAL STATUS XM PHYS/QHP 1ST HOUR	N	NA
ALOHAC Q3 2025	Physician Services	96121	CPT	NEUROBEHAVIORAL STATUS XM PHYS/QHP EA ADDL HOUR	N	NA
ALOHAC Q3 2025	Rehab Services	96125	CPT	STANDARDIZED COGNITIVE PERFORMANCE TESTING	N	NA
ALOHAC Q3 2025	Physician Services	96130	CPT	PSYCHOLOGICAL TST EVAL SVC PHYS/QHP FIRST HOUR	N	NA
ALOHAC Q3 2025	Behavioral Health	96130	CPT	PSYCHOLOGICAL TST EVAL SVC PHYS/QHP FIRST HOUR	N	NA
ALOHAC Q3 2025	Behavioral Health	96131	CPT	PSYCHOLOGICAL TST EVAL SVC PHYS/QHP EA ADDL HOUR	N	NA
ALOHAC Q3 2025	Physician Services	96131	CPT	PSYCHOLOGICAL TST EVAL SVC PHYS/QHP EA ADDL HOUR	N	NA
ALOHAC Q3 2025	Physician Services	96132	CPT	NEUROPSYCHOLOGICAL TST EVAL PHYS/QHP 1ST HOUR	N	NA
ALOHAC Q3 2025	Behavioral Health	96132	CPT	NEUROPSYCHOLOGICAL TST EVAL PHYS/QHP 1ST HOUR	N	NA
ALOHAC Q3 2025	Diagnostic Testing	96133	CPT	NEUROPSYCHOLOGICAL TST EVAL PHYS/QHP EA ADDL HR	N	NA
ALOHAC Q3 2025	Behavioral Health	96133	CPT	NEUROPSYCHOLOGICAL TST EVAL PHYS/QHP EA ADDL HR	N	NA
ALOHAC Q3 2025	Behavioral Health	96136	CPT	PSYL/NRPSYCL TST PHYS/QHP 2+ TST 1ST 30 MIN	N	NA
ALOHAC Q3 2025	Physician Services	96136	CPT	PSYL/NRPSYCL TST PHYS/QHP 2+ TST 1ST 30 MIN	N	NA
ALOHAC Q3 2025	Behavioral Health	96137	CPT	PSYCL/NRPSYCL TST PHYS/QHP 2+ TST EA ADDL 30 MIN	N	NA
ALOHAC Q3 2025	Physician Services	96137	CPT	PSYCL/NRPSYCL TST PHYS/QHP 2+ TST EA ADDL 30 MIN	N	NA
ALOHAC Q3 2025	Other	96138	CPT	PSYCL/NRPSYCL TST TECH 2+ TST 1ST 30 MIN	N	NA
ALOHAC Q3 2025	Diagnostic Testing	96139	CPT	PSYCL/NRPSYCL TST TECH 2+ TST EA ADDL 30 MIN	N	NA

ALOHAC Q3 2025	Diagnostic Testing	96146	CPT	PSYCL/NRPSYCL TST ELEC PLATFORM AUTO RESULT	N	NA
ALOHAC Q3 2025	Other	96377	CPT	APPL ON-BODY INJECTOR FOR TIMED SUBQ INJECTION	N	NA
ALOHAC Q3 2025	Outpatient Hosp	96547	CPT	INTRAOPERATIVE HIPEC PX FIRST 60 MINUTES	N	NA
ALOHAC Q3 2025	Outpatient Hosp	96548	CPT	INTRAOPERATIVE HIPEC PX EACH ADDL 30 MINUTES	N	NA
ALOHAC Q3 2025	Rehab Services	96900	CPT	ACTINOTHERAPY ULTRAVIOLET LIGHT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	96904	CPT	WHOLE BODY INTEGUMENTARY PHOTOGRAPHY	N	NA
ALOHAC Q3 2025	Other	96910	CPT	PHOTOCHEMOTX TAR&UVB/PETROLATUM/UVB	N	NA
ALOHAC Q3 2025	Physician Services	96912	CPT	PHOTOCHEMOTX PSORALENS&ULTRAVIOLET A PUVA	N	NA
ALOHAC Q3 2025	Physician Services	96913	CPT	PHOTOCHEMOTHERAPY DERMATOSES 4-8 HRS SUPERVISION	N	NA
ALOHAC Q3 2025	Physician Services	96920	CPT	EXCIMER LASER TX PSORIASIS TOT AREA <250 SQ CM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	96921	CPT	EXCIMER LASER TX PSORIASIS 250-500 SQ CM	N	NA
ALOHAC Q3 2025	Physician Services	96922	CPT	EXCIMER LASER TX PSORIASIS >500 SQ CM	N	NA
ALOHAC Q3 2025	Rehab Services	97010	CPT	APPLICATION MODALITY 1/> AREAS HOT/COLD PACKS	N	NA
ALOHAC Q3 2025	Rehab Services	97012	CPT	APPL MODALITY 1/> AREAS TRACTION MECHANICAL	N	NA
ALOHAC Q3 2025	Rehab Services	97014	CPT	APPL MODALITY 1/> AREAS ELEC STIMJ UNATTENDED	N	NA
ALOHAC Q3 2025	Rehab Services	97016	CPT	APPL MODALITY 1/> AREAS VASOPNEUMATIC DEVICES	N	NA
ALOHAC Q3 2025	Rehab Services	97018	CPT	APPL MODALITY 1/> AREAS PARAFFIN BATH	N	NA
ALOHAC Q3 2025	Rehab Services	97022	CPT	APPLICATION MODALITY 1/> AREAS WHIRLPOOL	N	NA
ALOHAC Q3 2025	Rehab Services	97024	CPT	APPLICATION MODALITY 1/> AREAS DIATHERMY	N	NA
ALOHAC Q3 2025	Rehab Services	97026	CPT	APPLICATION MODALITY 1/> AREAS INFRARED	N	NA
ALOHAC Q3 2025	Rehab Services	97028	CPT	APPL MODALITY 1/> AREAS ULTRAVIOLET	N	NA
ALOHAC Q3 2025	Rehab Services	97032	CPT	APPL MODALITY 1+ AREAS ESTIM EA 15 MIN	N	NA
ALOHAC Q3 2025	Rehab Services	97033	CPT	APPL MODALITY 1+ AREAS IONTOPHORESIS EA 15 MIN	N	NA
ALOHAC Q3 2025	Rehab Services	97034	CPT	APPL MODALITY 1+ AREAS CONTRAST BATHS EA 15 MIN	N	NA
ALOHAC Q3 2025	Rehab Services	97035	CPT	APPL MODALITY 1+ AREAS ULTRASOUND EA 15 MIN	N	NA
ALOHAC Q3 2025	Rehab Services	97036	CPT	APPL MODALITY 1+ AREAS HUBBARD TANK EA 15 MIN	N	NA
ALOHAC Q3 2025	Physician Services	97037	CPT	APPL MODALITY 1+ AREAS LLLT PO PAIN REDUCTION	N	NA
ALOHAC Q3 2025	Rehab Services	97039	CPT	UNLISTED MODALITY SPEC TYPE&TIME CONSTANT ATTN	N	NA
ALOHAC Q3 2025	Rehab Services	97110	CPT	THERAPEUTIC PX 1/> AREAS EACH 15 MIN EXERCISES	N	NA
ALOHAC Q3 2025	Rehab Services	97112	CPT	THER PX 1/> AREAS EACH 15 MIN NEUROMUSC REEDUCA	N	NA
ALOHAC Q3 2025	Rehab Services	97113	CPT	THER PX 1/> AREAS EACH 15 MIN AQUA THER W/XERSS	N	NA
ALOHAC Q3 2025	Rehab Services	97124	CPT	THER PX 1/> AREAS EACH 15 MINUTES MASSAGE	N	NA
ALOHAC Q3 2025	Physician Services	97139	CPT	UNLISTED THERAPEUTIC PROCEDURE SPECIFY	N	NA
ALOHAC Q3 2025	Rehab Services	97140	CPT	MANUAL THERAPY TQS 1/> REGIONS EACH 15 MINUTES	N	NA
ALOHAC Q3 2025	Rehab Services	97150	CPT	THERAPEUTIC PROCEDURES GROUP 2/> INDIVIDUALS	N	NA
ALOHAC Q3 2025	Behavioral Health	97151	CPT	BEHAVIOR ID ASSESSMENT BY PHYS/QHP EA 15 MIN	N	NA
ALOHAC Q3 2025	Autism Services	97151	CPT	BEHAVIOR ID ASSESSMENT BY PHYS/QHP EA 15 MIN	N	NA
ALOHAC Q3 2025	Behavioral Health	97152	CPT	BEHAVIOR ID SUPPORT ASSMT BY 1 TECH EA 15 MIN	N	NA
ALOHAC Q3 2025	Autism Services	97152	CPT	BEHAVIOR ID SUPPORT ASSMT BY 1 TECH EA 15 MIN	N	NA
ALOHAC Q3 2025	Autism Services	97153	CPT	ADAPTIVE BEHAVIOR TX BY PROTOCOL TECH EA 15 MIN	N	NA
ALOHAC Q3 2025	Behavioral Health	97153	CPT	ADAPTIVE BEHAVIOR TX BY PROTOCOL TECH EA 15 MIN	N	NA
ALOHAC Q3 2025	Behavioral Health	97154	CPT	GROUP ADAPTIVE BHV TX BY PROTOCOL TECH EA 15 MIN	N	NA
ALOHAC Q3 2025	Autism Services	97154	CPT	GROUP ADAPTIVE BHV TX BY PROTOCOL TECH EA 15 MIN	N	NA
ALOHAC Q3 2025	Autism Services	97155	CPT	ADAPT BHV TX PRTCL MODIFICAJ PHYS/QHP EA 15 MIN	N	NA
ALOHAC Q3 2025	Behavioral Health	97155	CPT	ADAPT BHV TX PRTCL MODIFICAJ PHYS/QHP EA 15 MIN	N	NA
ALOHAC Q3 2025	Behavioral Health	97156	CPT	FAMILY ADAPT BHV TX GDN PHYS/QHP EA 15 MIN	N	NA
ALOHAC Q3 2025	Autism Services	97156	CPT	FAMILY ADAPT BHV TX GDN PHYS/QHP EA 15 MIN	N	NA
ALOHAC Q3 2025	Behavioral Health	97157	CPT	MULTIPLE FAM GROUP BHV TX GDN PHYS/QHP EA 15 MIN	N	NA
ALOHAC Q3 2025	Autism Services	97157	CPT	MULTIPLE FAM GROUP BHV TX GDN PHYS/QHP EA 15 MIN	N	NA
ALOHAC Q3 2025	Autism Services	97158	CPT	GRP ADAPT BHV PRTCL MODIFCAJ PHYS/QHP EA 15 MIN	N	NA
ALOHAC Q3 2025	Behavioral Health	97158	CPT	GRP ADAPT BHV PRTCL MODIFCAJ PHYS/QHP EA 15 MIN	N	NA

ALOHAC Q3 2025	Rehab Services	97161	CPT	PHYSICAL THERAPY EVALUATION LOW COMPLEX 20 MINS	N	NA
ALOHAC Q3 2025	Rehab Services	97162	CPT	PHYSICAL THERAPY EVALUATION MOD COMPLEX 30 MINS	N	NA
ALOHAC Q3 2025	Rehab Services	97163	CPT	PHYSICAL THERAPY EVALUATION HIGH COMPLEX 45 MINS	N	NA
ALOHAC Q3 2025	Rehab Services	97164	CPT	PHYSICAL THERAPY RE-EVAL EST PLAN CARE 20 MINS	N	NA
ALOHAC Q3 2025	Rehab Services	97165	CPT	OCCUPATIONAL THERAPY EVAL LOW COMPLEX 30 MINS	N	NA
ALOHAC Q3 2025	Rehab Services	97166	CPT	OCCUPATIONAL THERAPY EVAL MOD COMPLEX 45 MINS	N	NA
ALOHAC Q3 2025	Rehab Services	97167	CPT	OCCUPATIONAL THERAPY EVAL HIGH COMPLEX 60 MINS	N	NA
ALOHAC Q3 2025	Rehab Services	97168	CPT	OCCUPATIONAL THER RE-EVAL EST PLAN CARE 30 MINS	N	NA
ALOHAC Q3 2025	Rehab Services	97530	CPT	THERAPEUT ACTVITY DIRECT PT CONTACT EACH 15 MIN	N	NA
ALOHAC Q3 2025	Rehab Services	97533	CPT	SENSORY INTEGRATIVE TECHNIQUES EACH 15 MINUTES	N	NA
ALOHAC Q3 2025	Rehab Services	97535	CPT	SELF-CARE/HOME MGMT TRAINING EACH 15 MINUTES	N	NA
ALOHAC Q3 2025	Other	97537	CPT	COMMUNITY/WORK REINTEGRATION TRAING EA 15 MIN	N	NA
ALOHAC Q3 2025	Rehab Services	97542	CPT	WHEELCHAIR MGMT EA 15 MIN	N	NA
ALOHAC Q3 2025	Physician Services	97602	CPT	RMVL DEVITAL TISS N-SLCTV DBRDMT W/O ANES 1 SESS	N	NA
ALOHAC Q3 2025	Physician Services	97605	CPT	NEGATIVE PRESSURE WOUND THERAPY DME <= 50 SQ CM	N	NA
ALOHAC Q3 2025	Physician Services	97606	CPT	NEGATIVE PRESSURE WOUND THERAPY DME >50 SQ CM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	97607	CPT	NEG PRESSURE WOUND THERAPY NON DME <= 50 SQ CM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	97608	CPT	NEG PRESSURE WOUND THERAPY NON DME >50 SQ CM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	97610	CPT	LOW FREQUENCY NON-THERMAL ULTRASOUND PER DAY	N	NA
ALOHAC Q3 2025	Rehab Services	97750	CPT	PHYSICAL PERFORMANCE TEST/MEAS W/REPRT EA 15 MIN	N	NA
ALOHAC Q3 2025	Rehab Services	97755	CPT	ASSTV TECHNOL ASSMT DIR CNTCT W/REPRT EA 15 MIN	N	NA
ALOHAC Q3 2025	Rehab Services	97761	CPT	PROSTHETICS TRAINING INITIAL ENCTR EA 15 MINS	N	NA
ALOHAC Q3 2025	Rehab Services	97763	CPT	ORTHOTICS/PROSTH MGMT &/TRAING SBSQ ENCTR 15 MIN	N	NA
ALOHAC Q3 2025	Physician Services	98925	CPT	OSTEOPATHIC MANIPULATIVE TX 1-2 BODY REGIONS	N	NA
ALOHAC Q3 2025	Physician Services	98926	CPT	OSTEOPATHIC MANIPULATIVE TX 3-4 BODY REGIONS	N	NA
ALOHAC Q3 2025	Physician Services	98927	CPT	OSTEOPATHIC MANIPULATIVE TX 5-6 BODY REGIONS	N	NA
ALOHAC Q3 2025	Physician Services	98928	CPT	OSTEOPATHIC MANIPULATIVE TX 7-8 BODY REGIONS	N	NA
ALOHAC Q3 2025	Physician Services	98929	CPT	OSTEOPATHIC MANIPULATIVE TX 9-10 BODY REGIONS	N	NA
ALOHAC Q3 2025	Rehab Services	98940	CPT	CHIROPRACTIC MANIPULATIVE TX SPINAL 1-2 REGIONS	N	NA
ALOHAC Q3 2025	Rehab Services	98941	CPT	CHIROPRACTIC MANIPULATIVE TX SPINAL 3-4 REGIONS	N	NA
ALOHAC Q3 2025	Rehab Services	98942	CPT	CHIROPRACTIC MANIPULATIVE TX SPINAL 5 REGIONS	N	NA
ALOHAC Q3 2025	Rehab Services	98943	CPT	CHIROPRACTIC MANIPLTV TX EXTRASPINAL 1/> REGION	N	NA
ALOHAC Q3 2025	Diagnostic Testing	98975	CPT	REMOTE THERAPEUTIC MNTR 1ST SET-UP&PT EDUCAJ EQP	N	NA
ALOHAC Q3 2025	Diagnostic Testing	98976	CPT	REM THER MNTR DEV SPLY DATA RESPIR SYS EA 30 D	N	NA
ALOHAC Q3 2025	Diagnostic Testing	98977	CPT	REM THER MNTR DEV SPLY DATA MUSCSKEL SYS EA 30 D	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	98978	CPT	REM THER MNTR DEV SPLY DATA COG BHV THER EA 30 D	N	NA
ALOHAC Q3 2025	Physician Services	98980	CPT	REMOTE THER MNTR TX MGMT PHYS/QHP 1ST 20 MIN	N	NA
ALOHAC Q3 2025	Physician Services	98981	CPT	REMOTE THER MNTR TX MGMT PHYS/QHP EA ADDL 20 MIN	N	NA
ALOHAC Q3 2025	Transport Services	99082	CPT	UNUSUAL TRAVEL	N	NA
ALOHAC Q3 2025	Physician Services	99183	CPT	PHYS/QHP ATTN&SUPVJ HYPRBARIC OXYGEN TX/SESSION	N	NA
ALOHAC Q3 2025	Other	99453	CPT	REM MNTR PHYSIOL PARAM 1ST SET UP PT EDUCAJ EQP	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	99454	CPT	REM MNTR PHYSIOL PARAM 1ST DEV SUPPLY EA 30 D	N	NA
ALOHAC Q3 2025	Other	99457	CPT	REMOTE PHYSIOLOGIC MONITORING 1ST 20 MIN MONTH	N	NA
ALOHAC Q3 2025	Other	99483	CPT	ASSMT & CARE PLANNING PT W/COGNITIVE IMPAIRMENT	N	NA
ALOHAC Q3 2025	Other	99484	CPT	CARE MGMT SERVICES BEHAVIORAL HLTH COND 20 MINS	N	NA
ALOHAC Q3 2025	Other	99487	CPT	COMPLEX CHRONIC CARE MGMT SVC 1ST 60 MIN CAL MO	N	NA
ALOHAC Q3 2025	Other	99489	CPT	CPLX CHRONIC CARE MGMT SVC EA ADDL 30 MIN CAL MO	N	NA
ALOHAC Q3 2025	Other	99492	CPT	1ST PSYCHIATRIC COLLAB CARE MGMT 1ST 70 MINS	N	NA
ALOHAC Q3 2025	Other	99493	CPT	SBSQ PSYCHIATRIC COLLAB CARE MGMT 1ST 60 MINS	N	NA
ALOHAC Q3 2025	Other	99494	CPT	1ST/SBSQ PSYCH COLLAB CARE MGMT EA ADDL 30 MINS	N	NA
ALOHAC Q3 2025	Home Health	99500	CPT	HOME VISIT PRENATAL MONITORING & ASSESSMENT	N	NA

ALOHAC Q3 2025	Home Health	99503	CPT	HOME VISIT RESPIRATORY THERAPY CARE	N	NA
ALOHAC Q3 2025	Home Health	99504	CPT	HOME VISIT MECHANICAL VENTILATION CARE	N	NA
ALOHAC Q3 2025	Home Health	99505	CPT	HOME VISIT STOMA CARE&MAINT CLST&CSTOST	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	99506	CPT	HOME VISIT INTRAMUSCULAR INJECTIONS	N	NA
ALOHAC Q3 2025	Home Health	99507	CPT	HOME VISIT CARE&MAINT CATH	N	NA
ALOHAC Q3 2025	Home Health	99509	CPT	HOME VISIT ASSISTANCE DAILY LIV&PRSONAL CARE	N	NA
ALOHAC Q3 2025	Other	99510	CPT	HOME VISIT INDIV FAM/MARRIAGE COUNSELING	N	NA
ALOHAC Q3 2025	Home Health	99511	CPT	HOME VISIT FECAL IMPACTION MGMT&ENEMA ADMN	N	NA
ALOHAC Q3 2025	Home Health	99512	CPT	HOME VISIT HEMODIALYSIS	N	NA
ALOHAC Q3 2025	Transport Services	A0090	HCPCS	NONEMERG TRNSPRT-MILE-VEH PROV IND W/VESTED INT	N	NA
ALOHAC Q3 2025	Transport Services	A0100	HCPCS	NONEMERGENCY TRANSPORTATION; TAXI	N	NA
ALOHAC Q3 2025	Transport Services	A0110	HCPCS	NONEMERG TRNSPRT&BUS INTRA-/INTERSTATE CARRIER	N	NA
ALOHAC Q3 2025	Transport Services	A0120	HCPCS	NONEMERG TRNSPRT: MINI-BUS MTN AREA/OTH SYS	N	NA
ALOHAC Q3 2025	Transport Services	A0130	HCPCS	NONEMERGENCY TRANSPORTATION: WHEELCHAIR VAN	N	NA
ALOHAC Q3 2025	Transport Services	A0140	HCPCS	NONEMERG TRNSPRT & AIR TRAVEL INTRA-/INTERSTATE	N	NA
ALOHAC Q3 2025	Transport Services	A0160	HCPCS	NONEMERG TRNSPRT: PER MILE-CASE/SOCIAL WORKER	N	NA
ALOHAC Q3 2025	Transport Services	A0170	HCPCS	TRANSPORTATION ANCILLARY: PARKING FEES TOLLS OTH	N	NA
ALOHAC Q3 2025	Transport Services	A0180	HCPCS	NONEMERG TRANSPORTATION: ANCILLARY: LODGNG-RECIP	N	NA
ALOHAC Q3 2025	Transport Services	A0190	HCPCS	NONEMERG TRANSPORTATION: ANCILLARY: MEALS-RECIP	N	NA
ALOHAC Q3 2025	Transport Services	A0200	HCPCS	NONEMERG TRANSPORTATION: ANCILLRY: LODGNG-ESCORT	N	NA
ALOHAC Q3 2025	Transport Services	A0210	HCPCS	NONEMERG TRANSPORTATION: ANCILLARY: MEALS-ESCORT	N	NA
ALOHAC Q3 2025	Transport Services	A0426	HCPCS	AMB SERVICE ALS NONEMERGENCY TRANSPORT LEVEL 1	N	NA
ALOHAC Q3 2025	Transport Services	A0428	HCPCS	AMBULANCE SERVICE BLS NONEMERGENCY TRANSPORT	N	NA
ALOHAC Q3 2025	Transport Services	A0434	HCPCS	SPECIALTY CARE TRANSPORT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A2012	HCPCS	SUPRATHEL PER SQ CM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A2030	HCPCS	MIRO3D FIBERS PER MILLIGRAM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A2031	HCPCS	MIRODRY WOUND MATRIX PER SQUARE CENTIMETER	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A2032	HCPCS	MYRIAD MATRIX PER SQUARE CENTIMETER	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A2033	HCPCS	MYRIAD MORCELLS 4 MILLIGRAMS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A2034	HCPCS	FOUNDATION DRS SOLO PER SQUARE CENTIMETER	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A2035	HCPCS	CORPLEX P OR THERACOR P OR ALLACOR P PER MG	N	NA
ALOHAC Q3 2025	Other	A4226	HCPCS	SPL MAINT INS IP DR ADJ USING TX CONT G SENS WK	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A4238	HCPCS	SPL ALW ADJ NI CGM 1 MONTH SUPPLY = 1 UOS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A4239	HCPCS	SPLY ALW NONADJUNC NONIMPL CGM 1 MO SPLY= 1 UOS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A4271	HCPCS	INTEGR LANCING & BS TEST CART HBGM Q 50 TESTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A4341	HCPCS	INDWELL IU DRAIN DEVC VLV PT INSRT REPLC ONLY EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A4342	HCPCS	ACC PT INS INDWELL IU DRN DEVC VLV REPLC ONLY EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A4436	HCPCS	IRRIGATION SUPPLY SLEEVE REUSABLE PER MONTH	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A4437	HCPCS	IRRIGATION SUPPLY SLEEVE DISPOSABLE PER MONTH	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A4438	HCPCS	ADH CLIP APP TO SKIN TO S EXT ELECL NS CTRL EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A4543	HCPCS	SUP TC ELEC NERVE STIM FOR NRV AUR REG PER MO	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A4544	HCPCS	ELECTRODE FOR EXTERNAL LW EXTREMITY NRV STIM RLS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A4545	HCPCS	SUPPLIES & ACCESSORIES FOR EXT TENS NEEDED 1 MO	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A4553	HCPCS	NON-DISPOSABLE UNDERPADS ALL SIZES	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A4554	HCPCS	DISPOSABLE UNDERPADS ALL SIZES	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A4560	HCPCS	NEUROMUSCULAR ELECTRICAL STIM DISP REPLC ONLY	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A4564	HCPCS	PESSARY DISPOSABLE ANY TYPE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A4575	HCPCS	TOPICAL HYPERBARIC OXYGEN CHAMBER DISPOSABLE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A4593	HCPCS	NEUROMOD STIM SYS ADJ TO REHAB TX REGIME CTRL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A4594	HCPCS	NEUROMODULT STIM SYS ADJT TO REH TX REGIME MP EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A4596	HCPCS	CES SYSTEM SUPPLIES & ACCESSORIES PER MONTH	N	NA

ALOHAC Q3 2025	HCBS	A4927	HCPCS	GLOVES NON-STERILE PER 100	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A4927	HCPCS	GLOVES NON-STERILE PER 100	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A6515	HCPCS	GRADIENT COMP WRAP ADJ STRAPS FULL LEG EACH CSTM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A6516	HCPCS	GRADIENT COMP WRAP ADJ STRAPS FOOT EACH CUSTOM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A6517	HCPCS	GRADIENT COMP WRAP ADJ STRAPS BELOW KNEE EA CSTM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A6518	HCPCS	GRADIENT COMP WRAP ADJ STRAPS ARM EACH CUSTOM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A6519	HCPCS	GRADIENT COMP GARMENT NOS FOR NIGHTTIME USE EACH	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A6530	HCPCS	GRADIENT COMPRESSION STK BELW KNEE 18-30 MMHG EA	N	NA
ALOHAC Q3 2025	HCBS	A6530	HCPCS	GRADIENT COMPRESSION STK BELW KNEE 18-30 MMHG EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A6532	HCPCS	GRADIENT COMP STK BLW KNEE 40-50MM HG SRG DSG EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A6533	HCPCS	GRADIENT COMPRESSION STK THIGH LEN 18-30 MMHG EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A6534	HCPCS	GRADIENT COMPRESSION STK THIGH LEN 30-40 MMHG EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A6535	HCPCS	GRADIENT COMP STK TH HIGH 40 MM HG/GREATER EACH	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A6536	HCPCS	GRADIENT COMPRS STK FULL LEN/CHAP 18-30 MMHG EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A6537	HCPCS	GRADIENT COMPRS STK FULL LEN/CHAP 30-40 MMHG EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A6538	HCPCS	GRADIENT COMPRESS STK FULL LENG/CHAP 40MM HG< EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A6539	HCPCS	GRADIENT COMPRESSION STK WAIST LEN 18-30 MMHG EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A6540	HCPCS	GRADIENT COMPRESSION STK WAIST LEN 30-40 MMHG EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A6541	HCPCS	GRADIENT COMPRESSION STK WAIST LENG 40 MM HG< EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A6544	HCPCS	GRADIENT COMPRESSION STOCKING GARTER BELT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A6549	HCPCS	GRADIENT COMPRESSION GMT NOS FOR DAYTIME USE EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A6550	HCPCS	WND CARE SET NEG PRSS WND TX ELEC PUMP SPL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A6590	HCPCS	EXTERNAL UI CATH; DISP WICKING MATL SP PER MO	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A6591	HCPCS	EXTERNAL URINARY CATH; NON-DISP SUCT PUMP PER MO	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A6611	HCPCS	GRADIENT COMP WRAP ADJ STRAPS ABOVE KNEE EA CSTM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A7000	HCPCS	CANISTER DISPOSABLE USED WITH SUCTION PUMP EACH	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A7021	HCPCS	SUP&ACC LUNG EXPNSN AWY CLR CONT HF OSC&NEB DVC	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A7049	HCPCS	EXPIRATORY PAP INTRANASAL RESISTANCE VALVE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A9277	HCPCS	TRANSMITTER; EXT USE WITH NONDME INTRSTL CGM	N	NA
ALOHAC Q3 2025	HCBS	A9277	HCPCS	TRANSMITTER; EXT USE WITH NONDME INTRSTL CGM	N	NA
ALOHAC Q3 2025	HCBS	A9278	HCPCS	RECEIVER; EXT USE NONDME INTRSTL SYSTEM CGM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A9278	HCPCS	RECEIVER; EXT USE NONDME INTRSTL SYSTEM CGM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	A9285	HCPCS	INVERSION/EVERSION CORRECTION DEVICE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	A9587	HCPCS	GALLIUM GA-68 DOTATATE DIAGNOSTIC 0.1 MILLICURIE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	A9588	HCPCS	FLUCICLOVINE F-18 DIAGNOSTIC 1 MILLICURIE	N	NA
ALOHAC Q3 2025	Other	A9590	HCPCS	IODINE I-131 IOBENGUANE 1 MCI	N	NA
ALOHAC Q3 2025	Diagnostic Testing	A9592	HCPCS	COPPER CU-64 DOTATATE DIAGNOSTIC 1 MCI	N	NA
ALOHAC Q3 2025	Diagnostic Testing	A9593	HCPCS	GALLIUM GA-68 PSMA-11 DIAGNOSTIC UCSF 1 MCI	N	NA
ALOHAC Q3 2025	Diagnostic Testing	A9594	HCPCS	GALLIUM GA-68 PSMA-11 DIAGNOSTIC UCLA 1 MCI	N	NA
ALOHAC Q3 2025	Diagnostic Testing	A9597	HCPCS	POSITRON EMISSION TOMOGRAPHY RP DX TUMOR ID NOC	N	NA
ALOHAC Q3 2025	Diagnostic Testing	A9598	HCPCS	POSITRON EMISSION TOMO RP DX NON-TUMOR ID NOC	N	NA
ALOHAC Q3 2025	Diagnostic Testing	A9602	HCPCS	FLUORODOPA F-18 DIAGNOSTIC PER MCI	N	NA
ALOHAC Q3 2025	Other	A9607	HCPCS	LUTETIUM LU 177 VIPIVOTIDE TETRAXETAN THER 1 MCI	N	NA
ALOHAC Q3 2025	Inpatient Hosp	A9615	HCPCS	INJECTION PEGULICIANINE 1 MG	N	NA
ALOHAC Q3 2025	Diagnostic Testing	A9800	HCPCS	GALLIUM GA-68 GOZETOTIDE DIAGNOSTIC 1 MCI	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	B4034	HCPCS	ENTERAL FEEDING SUPPLY KIT; SYRINGE FED PER DAY	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	B4035	HCPCS	ENTERAL FEEDING SUPPLY KIT; PUMP FED PER DAY	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	B4036	HCPCS	ENTERAL FEEDING SUPPLY KIT; GRAVITY FED PER DAY	N	NA
ALOHAC Q3 2025	HCBS	B4100	HCPCS	FOOD THICKENER ADMINISTERED ORALLY PER OUNCE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	B4100	HCPCS	FOOD THICKENER ADMINISTERED ORALLY PER OUNCE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	B4102	HCPCS	ENTRAL FORMULA ADLT REPL FLS&LYTES 500 ML = 1 U	N	NA

ALOHAC	Q3 2025	DME/Medical Supplies	B4103	HCPCS	ENTRAL FORMULA PED REPL FLS&LYTES 500 ML = 1 U	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4104	HCPCS	ADDITIVE FOR ENTERAL FORMULA	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4105	HCPCS	IN-LINE CART CTG DIG ENZYME ENTERAL FEEDING EA	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4149	HCPCS	ENTRAL F MANF BLNDRIZD NAT FOODS W/NUTRIENTS	N NA
ALOHAC	Q3 2025	HCBS	B4150	HCPCS	ENTRAL F NUTRITIONALLY CMPL W/INTACT NUTRIENTS	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4150	HCPCS	ENTRAL F NUTRITIONALLY CMPL W/INTACT NUTRIENTS	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4152	HCPCS	ENTRAL F NUTRITION CMPL CAL DENSE INTACT NUTRNTS	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4153	HCPCS	ENTRAL FORMULA NUTIONALLY CMPL HYDROLYZED PROTS	N NA
ALOHAC	Q3 2025	HCBS	B4154	HCPCS	ENTRAL F NUTRITION CMPL NO INHERITED DZ METAB	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4154	HCPCS	ENTRAL F NUTRITION CMPL NO INHERITED DZ METAB	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4155	HCPCS	ENTRAL F NUTRITIONALLY INCMPL/MODULAR NUTRIENTS	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4157	HCPCS	ENTRAL F NUTRITION CMPL INHERITED DZ METAB	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4158	HCPCS	ENTRAL F PED NUTRITION CMPL W/INTACT NUTRNTS	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4159	HCPCS	ENTRAL F PED NUTRITN CMPL SOY BASD INTCT NUTRNTS	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4160	HCPCS	ENTRAL F PED NUTRITION CMPL CAL DENSE NUTRNTS	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4161	HCPCS	ENTRAL F PED HYDROLYZED/AA&PEPTIDE CHAIN PROTS	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4162	HCPCS	ENTRAL F PED SPCL METAB NEEDS INHERITED DZ METAB	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4164	HCPCS	PARNTRAL NUTRITION SOL; CARBS 50%/LESS - HOM MIX	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4168	HCPCS	PARNTRAL NUTRITION SOL; AMINO ACID 3.5% -HOM MIX	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4172	HCPCS	PARNTRAL NUT SOL; AMINO ACID 5.5 THRU 7%-HOM MIX	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4176	HCPCS	PARNTRAL NUT SOL; AMINO ACID 7 THRU 8.5%-HOM MIX	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4178	HCPCS	PARNTRAL NUTRIT SOL; AMINO ACID > 85% - HOM MIX	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4180	HCPCS	PARNTRAL NUTRITION SOL; CARBS > 50% - HOME MIX	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4185	HCPCS	PARENTERAL NUTRITION SOL NOS 10 GRAMS LIPIDS	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4187	HCPCS	OMEGAVEN 10 G LIPIDS	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4189	HCPCS	PARNTRAL NUT SOL; AMINO ACID&CARB 10-51 GMS PROT	N NA
ALOHAC	Q3 2025	Home Health	B4189	HCPCS	PARNTRAL NUT SOL; AMINO ACID&CARB 10-51 GMS PROT	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4193	HCPCS	PARNTRAL NUT SOL; AMINO ACID&CARB 52-73 GMS PROT	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4197	HCPCS	PARNTRAL NUT SOL; AMINO ACID&CARB 74-100 GM PROT	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4199	HCPCS	PARNTRAL NUT SOL; AMINO ACID&CARB > 100 GMS PPAR	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4216	HCPCS	PARNTRAL NUTRITION; ADDITIVES - HOME MIX PER DAY	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4220	HCPCS	PARENTERAL NUTRITION SUPPLY KIT; PREMIX PER DAY	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4222	HCPCS	PARNTRAL NUTRITION SUPPLY KIT; HOME MIX PER DAY	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B4224	HCPCS	PARENTERAL NUTRITION ADMINISTRATION KIT PER DAY	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B5000	HCPCS	PARNTRAL NUT SOL; AMINO ACID&CARBS RENL-AMIROSYN	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B5100	HCPCS	PARENTERAL NUT SOL AMINO ACID AND CARBOHYDRATES	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B5200	HCPCS	PARNTRAL NUT SOL AMINO ACID&CARB STRSS-BR CHAIN	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B9002	HCPCS	ENTERAL NUTRITION INFUSION PUMP ANY TYPE	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B9004	HCPCS	PARENTERAL NUTRITION INFUSION PUMP PORTABLE	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B9006	HCPCS	PARENTERAL NUTRITION INFUSION PUMP STATIONARY	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	B9999	HCPCS	NOC FOR PARENTERAL SUPPLIES	N NA
ALOHAC	Q3 2025	Outpatient Hosp	C1062	HCPCS	INTRAVERTEBRAL BODY FRACTURE AUG WITH IMPLANT	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	C1734	HCPCS	ORTHOPEDIC/DEVC/DX MATRIX OPP BTB/SFT TISS-TO BN	N NA
ALOHAC	Q3 2025	Inpatient Hosp	C1735	HCPCS	CATHETER INTRAVASCULAR FOR RENAL DNV RADIOFREQ	N NA
ALOHAC	Q3 2025	Inpatient Hosp	C1736	HCPCS	CATHETER INTRAVASCULA FOR RENAL DENERVATION U/S	N NA
ALOHAC	Q3 2025	Inpatient Hosp	C1737	HCPCS	JOINT FUSION & FIXN DEVICE SACROILIAC & PELVIS	N NA
ALOHAC	Q3 2025	Outpatient Hosp	C1761	HCPCS	CATHETER TRANSLUMINAL IVASC LITHOTRIPSY COR	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	C1823	HCPCS	GENERATR NEUROSTIM NON-RECHRGABL TV S&STIM LEADS	N NA
ALOHAC	Q3 2025	Other	C1824	HCPCS	GENERATOR CARDIAC CONTRACTILITY MODULATION	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	C1825	HCPCS	GEN NEUROSTIM NONRCHRGBL W/CAR SIN BR STIM LEAD	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	C1826	HCPCS	GENERATOR NEUROSTIMULATOR RC BATT & CHARGING SYS	N NA

ALOHAC	Q3 2025	DME/Medical Supplies	C1827	HCPCS	GEN NS NON-RC IMPL STIM LEAD & EXT PRD STIM CTRL	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	C1831	HCPCS	INTERBODY CAGE ANT LATERAL/POSTERIOR PRSNL	N NA
ALOHAC	Q3 2025	Other	C1832	HCPCS	AGRFT SUSP INCL CELL PROC & APPL & ALL SYST COMP	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C1833	HCPCS	MNTR CARDIAC INC INTRACARDIAC LEAD &ALL SYS COMP	N NA
ALOHAC	Q3 2025	Other	C1839	HCPCS	IRIS PROSTHESIS	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	C1889	HCPCS	IMPLANTABLE/INSERTABLE DEVICE NOT OTRW CLASS	N NA
ALOHAC	Q3 2025	Other	C1890	HCPCS	NO IMPLANT/INSERTABLE DEVC USED W/DEVC-INT PROC	N NA
ALOHAC	Q3 2025	Outpatient Hosp	C1982	HCPCS	CATHETER, PRESSURE-GENERATING	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C2596	HCPCS	PROBE IMAGE GUIDED ROBOTIC WATERJET ABLATION	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	C7500	HCPCS	DEBR BN 1ST 20 SQ CM/> M PREP & INS D RX-DEL DEV	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C7503	HCPCS	OPEN BX/EXCISION DEEP CERV NODE INTRAOP ID SLN	N NA
ALOHAC	Q3 2025	Outpatient Hosp	C7504	HCPCS	PERQ VTP FIRST CT & ANY ADD CT/LS VERT BODIES	N NA
ALOHAC	Q3 2025	Outpatient Hosp	C7505	HCPCS	PERQ VTP FIRST LS & ANY ADD CT/LS VERT BODIES	N NA
ALOHAC	Q3 2025	Outpatient Hosp	C7506	HCPCS	ARTHRODESIS IPJS W/WITHOUT INTERNAL FIXATION	N NA
ALOHAC	Q3 2025	Outpatient Hosp	C7507	HCPCS	PERQ VA AUG 1ST THOR & ANY ADD THOR/L VA BODIES	N NA
ALOHAC	Q3 2025	Outpatient Hosp	C7508	HCPCS	PERQ VA AUG FIRST LMB & ANY ADD THOR/L VA BODIES	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C7509	HCPCS	BRONCHOSCOPY RGD/FLEX DX CW WHEN PERF CA IG NAV	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C7510	HCPCS	BRONCHOSCOPY RGD/FLEX BRON ALV LAVAGE CA IG NAV	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C7511	HCPCS	BRONCHOSCOPY COMPUTER-ASSISTED IMAGE-GUIDED NAV	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C7512	HCPCS	BRONCHOSCOPY TRANSENDO EBUS DUR BRONCHOSCOPIC	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C7513	HCPCS	DIALYSIS CIRC TBA CNTRL DLYS SEG PRFRM DLYS CIRC	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C7514	HCPCS	DLYS CIRC ATL CNTRL DLYS SEG&TRNSCTH PLCMNT IVAS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C7515	HCPCS	DLYS CIRC PERM EVAR EMB/OCCL MAIN CIRC/ANY AV	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C7516	HCPCS	CATH PLC COR ART EL IMG INIT COR VES/GR IVUS/OCT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C7517	HCPCS	CATH PLCMNT COR ART ILIAC &/ FEM ART ANGIOGRAPHY	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C7518	HCPCS	CATHETER PLCMNT COR ART CATH PLCMNT BYPASS GRAFT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C7519	HCPCS	CATHETER PLCMNT COR ART CATH PLCMNT BPG DUR CA	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C7520	HCPCS	CT PL COR A CATH PL BPG AG IL&/FA AG NS BIL/IPL	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C7521	HCPCS	CATH PLCMNT COR ART RHC EL IMG INIT COR VES/GRFT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C7522	HCPCS	CATHETER PLACEMENT CORONARY ARTERY RHC IV DV	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C7523	HCPCS	CATH PLCMNT COR ART LHC EL IMAG INIT COR VES/GR	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C7524	HCPCS	CATH PL COR A LHC IV DV&/P DRVD CFR MSMT DUR CA	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C7525	HCPCS	CATHETER PLCMNT COR ART CA LHC DUR DX EVAL &/ TI	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C7526	HCPCS	CATH PL COR ART CA LHC CATH PL BPG WITH BPG AG	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C7527	HCPCS	CATH PLCMNT COR ART CA RT&LHC DX EVAL&/THER INT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C7528	HCPCS	CATH PL COR ART CA RT&LHC IV DV&/P DERV CFR MSMT	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C7529	HCPCS	CATH PLCMNT COR ART CA RT&LHC PLCMNT BPG ANGIO	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C7530	HCPCS	DIALYSIS CIRC INTRO TBS PERIPHERAL DIALYSIS SEG	N NA
ALOHAC	Q3 2025	Outpatient Hosp	C7531	HCPCS	REVASC EVR FMRL PA UNI TRANSLUMINAL ANGIOPLASTY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	C7532	HCPCS	TRANSLUMINAL BALLOON ANGIOPLASTY INITIAL ARTERY	N NA
ALOHAC	Q3 2025	Outpatient Hosp	C7533	HCPCS	PERQ TL COR ANGIOPLASTY SINGLE MAJOR COR ART/BR	N NA
ALOHAC	Q3 2025	Outpatient Hosp	C7534	HCPCS	REVASCULARIZATION EVAR FMRL PA UNILATERAL ATH	N NA
ALOHAC	Q3 2025	Outpatient Hosp	C7535	HCPCS	REVASC EVAR FMRL PA UNI WITH TL STENT PLACEMENT	N NA
ALOHAC	Q3 2025	Outpatient Hosp	C7537	HCPCS	INSERTION NEW/REPLC PERM PCM ATRIAL TV ELECTRD	N NA
ALOHAC	Q3 2025	Outpatient Hosp	C7538	HCPCS	INSERTION NEW/REPLC PERM PCM VENT TV ELECTRODE	N NA
ALOHAC	Q3 2025	Outpatient Hosp	C7539	HCPCS	INSERTION NEW/REPLC PPM ATRIAL & VENT TV ELECTRD	N NA
ALOHAC	Q3 2025	Outpatient Hosp	C7540	HCPCS	REMOVAL PERM PM P GEN REPL PM P GEN D LEAD SYS	N NA
ALOHAC	Q3 2025	Diagnostic Testing	C7541	HCPCS	DIAGNOSTIC ERCP INCL COLL SPEC BY BRUSH/WASHING	N NA
ALOHAC	Q3 2025	Outpatient Hosp	C7542	HCPCS	ERCP WITH BIOPSY SINGLE/MX ENDO CANNULATION PAP	N NA
ALOHAC	Q3 2025	Outpatient Hosp	C7543	HCPCS	ERCP SPHINCTEROT/PAPILLOT ENDO CANNULATION PAP	N NA
ALOHAC	Q3 2025	Outpatient Hosp	C7544	HCPCS	ERCP WITH REMOVAL OF CALCULI/DEB FROM BILIARY/PD	N NA

ALOHAC	Q3 2025	Outpatient Hosp	C7550	HCPCS	CYSTURTHRSCPY BX ADJTV BLU LGT CYSTO FLUO IM AGT	N	NA
ALOHAC	Q3 2025	Outpatient Hosp	C7551	HCPCS	EXCISION MAJ PN NEUROMA NO SC IMP NE INTO BN/MSC	N	NA
ALOHAC	Q3 2025	Outpatient Hosp	C7552	HCPCS	CATHETER PLACEMENT COR ART CA; CATH PLCMNT BPG	N	NA
ALOHAC	Q3 2025	Outpatient Hosp	C7553	HCPCS	CATHETER PLCMT COR ART; RT & LT HEART CATH	N	NA
ALOHAC	Q3 2025	Outpatient Hosp	C7554	HCPCS	CYSTOURETHROSC ADJTV BLU LGT CYSTO FLUOR IMG AGT	N	NA
ALOHAC	Q3 2025	Outpatient Hosp	C7555	HCPCS	THYROIDECTOMY TOTAL/COMPLETE PARATHYROID AT	N	NA
ALOHAC	Q3 2025	Inpatient Hosp	C7563	HCPCS	TBA OPEN/PERC INITIAL ARTERY & ALL ADD ARTERIES	N	NA
ALOHAC	Q3 2025	Inpatient Hosp	C7564	HCPCS	PERCUTANEOUS TRANSLUMINAL MECH TB VEIN IV U/S	N	NA
ALOHAC	Q3 2025	Inpatient Hosp	C8000	HCPCS	SUPP DEV EXTRAVASCULAR FOR ARTERIOVENOUS FIST	N	NA
ALOHAC	Q3 2025	Diagnostic Testing	C8001	HCPCS	3D ANATOMICAL SEG IMG PREOP PLANNING DATA PREP	N	NA
ALOHAC	Q3 2025	Inpatient Hosp	C8003	HCPCS	IMPLANT MEDIAL KNEE EXTRAART IMPLANT SHOCK ABS	N	NA
ALOHAC	Q3 2025	Outpatient Hosp	C8004	HCPCS	SIMULATION ANGIOGRAM USE OF PRESSURE GEN CATH	N	NA
ALOHAC	Q3 2025	Outpatient Hosp	C8005	HCPCS	BRONCH RGD/FLEX NON THRM TRANSBRON ABL LES PEF E	N	NA
ALOHAC	Q3 2025	Diagnostic Testing	C8937	HCPCS	CMP-AID DETN INCL CMP ALG ANALYS BR MRI IMG DATA	N	NA
ALOHAC	Q3 2025	Other	C9046	HCPCS	COCAINE HYDROCHLORIDE NASAL SOL TOP ADMN 1 MG	N	NA
ALOHAC	Q3 2025	Other	C9047	HCPCS	INJECTION CAPLACIZUMAB-YHDP 1 MG	N	NA
ALOHAC	Q3 2025	Diagnostic Testing	C9067	HCPCS	GALLIUM GA-68 DOTATOC DIAGNOSTIC 0.01 MCI	N	NA
ALOHAC	Q3 2025	Other	C9088	HCPCS	INSTILL BUPIVACAINE & MELOXICAM 1 MG/0.03 MG	N	NA
ALOHAC	Q3 2025	Other	C9089	HCPCS	BUPIVACAINE COLLAGEN-MATRIX IMPLANT 1 MG	N	NA
ALOHAC	Q3 2025	Other	C9101	HCPCS	INJECTION OLICERIDINE 0.1 MG	N	NA
ALOHAC	Q3 2025	Other	C9143	HCPCS	COCAINE HYDROCHLORIDE NASAL SOLUTION 1 MG	N	NA
ALOHAC	Q3 2025	Other	C9144	HCPCS	INJECTION BUPIVACAINE 1 MG	N	NA
ALOHAC	Q3 2025	Other	C9145	HCPCS	INJECTION APREPITANT APONVIE 1 MG	N	NA
ALOHAC	Q3 2025	Physician Services	C9173	HCPCS	INJECTION FILGRASTIM-TXID NYPOZI BIOSIMILR 1 MCG	Y	D
ALOHAC	Q3 2025	Physician Services	C9173	HCPCS	INJECTION FILGRASTIM-TXID NYPOZI BIOSIMILR 1 MCG	Y	D
ALOHAC	Q3 2025	Physician Services	C9174	HCPCS	INJECTION DATOPOTAMAB DERUXTECAN 1 MG	N	NA
ALOHAC	Q3 2025	Physician Services	C9175	HCPCS	INJECTION TREOSULFAN 50 MG	N	NA
ALOHAC	Q3 2025	Other	C9257	HCPCS	INJECTION BEVACIZUMAB 0.25 MG	N	NA
ALOHAC	Q3 2025	Physician Services	C9300	HCPCS	INJECTION INDIGOTINDISULFONATE SODIUM 1 MG	Y	D
ALOHAC	Q3 2025	Physician Services	C9300	HCPCS	INJECTION INDIGOTINDISULFONATE SODIUM 1 MG	Y	D
ALOHAC	Q3 2025	Physician Services	C9301	HCPCS	OBECABTAGENE AUTOLEUCEL POS T CELLS Q THER D	Y	D
ALOHAC	Q3 2025	Physician Services	C9301	HCPCS	OBECABTAGENE AUTOLEUCEL POS T CELLS Q THER D	Y	D
ALOHAC	Q3 2025	Physician Services	C9302	HCPCS	INJECTION ZANIDATAMAB HRII 2 MG	Y	D
ALOHAC	Q3 2025	Physician Services	C9302	HCPCS	INJECTION ZANIDATAMAB HRII 2 MG	Y	D
ALOHAC	Q3 2025	Physician Services	C9303	HCPCS	INJECTION ZOLBETUXIMAB CLZB 1 MG	Y	D
ALOHAC	Q3 2025	Physician Services	C9303	HCPCS	INJECTION ZOLBETUXIMAB CLZB 1 MG	Y	D
ALOHAC	Q3 2025	Physician Services	C9304	HCPCS	INJECTION MARSTACIMAB HNCQ 0.5 MG	Y	D
ALOHAC	Q3 2025	Physician Services	C9304	HCPCS	INJECTION MARSTACIMAB HNCQ 0.5 MG	Y	D
ALOHAC	Q3 2025	Other	C9359	HCPCS	POROUS COLL MATRIX BONE FILLER PUTTY PER 0.5 CC	N	NA
ALOHAC	Q3 2025	Other	C9399	HCPCS	UNCLASSIFIED DRUGS OR BIOLOGICALS	N	NA
ALOHAC	Q3 2025	Other	C9462	HCPCS	INJECTION DELAFLOXACIN 1 MG	N	NA
ALOHAC	Q3 2025	Diagnostic Testing	C9738	HCPCS	ADJUNCTIVE BLUE LIGHT CYSTOSCOPY FLUO IMAG AGT	N	NA
ALOHAC	Q3 2025	Diagnostic Testing	C9751	HCPCS	BRONCHOSCOPY RIGID/FLEXIBLE TRANSBRON ABL LESION	N	NA
ALOHAC	Q3 2025	Diagnostic Testing	C9756	HCPCS	INTRAOPERATIVE NIR FLUOR LM OF LYM W/ADMIN ICG	N	NA
ALOHAC	Q3 2025	Outpatient Hosp	C9757	HCPCS	LAMINOTOMY DECOMP NERVE ROOT; 1 INTERSPACE LUMB	N	NA
ALOHAC	Q3 2025	Other	C9759	HCPCS	TRANSCATHETER IO BLOOD VESSEL MICROINFUSION TX	N	NA
ALOHAC	Q3 2025	Diagnostic Testing	C9760	HCPCS	NONRND NONBLINDED PROC NYHA CLASS II III IV HF;	N	NA
ALOHAC	Q3 2025	Diagnostic Testing	C9761	HCPCS	CS URS&/PYELOSCPY LITH & VAC ASPIR K COLL SYS&U	N	NA
ALOHAC	Q3 2025	Diagnostic Testing	C9762	HCPCS	CMRI MORPHOL & FUNC QUAN SEG DYSFUNC;STRAIN IMAG	N	NA
ALOHAC	Q3 2025	Diagnostic Testing	C9763	HCPCS	CMRI MORPHOL & FUNC QUAN SEG DYSFUNC;STRESS IMAG	N	NA
ALOHAC	Q3 2025	Outpatient Hosp	C9764	HCPCS	REV EVAR OPN/PERQ LE AA; NO TIB/PR;IV LITHOTRIP	N	NA

ALOHAC	Q3 2025	Physician Services	C9765	HCPCS	REV EVAR LE AA;IV LITHOTRIPSY & TL STENT PLCMT	N	NA
ALOHAC	Q3 2025	Outpatient Hosp	C9766	HCPCS	REV EVAC LE AA; IV LITHOTRIPSY & ATHERECTOMY	N	NA
ALOHAC	Q3 2025	Diagnostic Testing	C9768	HCPCS	ENDO UG DIR MSR HEP PORTOSYS PRESS GRAD ANY METH	N	NA
ALOHAC	Q3 2025	Outpatient Hosp	C9772	HCPCS	RVSC EVAR OPN/PERC TIB/PER ART IVASC LITHOTRIPSY	N	NA
ALOHAC	Q3 2025	Outpatient Hosp	C9773	HCPCS	RVSC EVAR OPEN/PC TIBIAL/PA;IVASC LITH & TL SP	N	NA
ALOHAC	Q3 2025	Outpatient Hosp	C9774	HCPCS	RVSC EVAR OPN/PERQ TIB/PER ART;IVASC LITH&ATHREC	N	NA
ALOHAC	Q3 2025	Physician Services	C9775	HCPCS	RVSC EVAR OPN/P TIB/PA;IVASC LITH&TL STNT PL&ATH	N	NA
ALOHAC	Q3 2025	Diagnostic Testing	C9776	HCPCS	IO NEAR-INFR FLUOR IMAG MAJ EXTRA-HEP BILE DUCT	N	NA
ALOHAC	Q3 2025	Diagnostic Testing	C9777	HCPCS	ESOPHAGEAL MUCOSAL INTEGR TST ELEC IMPD TO	N	NA
ALOHAC	Q3 2025	Diagnostic Testing	C9778	HCPCS	COLPOPEXY VAGINAL; MI EXTRAPERITONEAL APPROACH	N	NA
ALOHAC	Q3 2025	Outpatient Hosp	C9781	HCPCS	ARTHROSCOPY SHOULDER SURG; W/IMP SA SPACER	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	C9784	HCPCS	GASTRIC RESTR PROC ENDO SLV GP EGD & IL TUBE INS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	C9785	HCPCS	ENDO OUT REDTN GAS POUCH APPL ENDO & IL TUBE INS	N	NA
ALOHAC	Q3 2025	Other	C9792	HCPCS	BLIND/NONBLND PROC SYM NYHA CLASS II III IVA HF;	N	NA
ALOHAC	Q3 2025	Other	C9793	HCPCS	3D PREDICTIVE MODEL USING DATA FRM CCTA &/OR MRI	N	NA
ALOHAC	Q3 2025	Physician Services	C9797	HCPCS	VASCULAR EMB/OCCL PROC USE OF PRESS-GEN CATH	N	NA
ALOHAC	Q3 2025	Physician Services	C9804	HCPCS	ELASTOMERIC INFUSION PUMP NONOPIOID MED DEVICE	N	NA
ALOHAC	Q3 2025	Physician Services	C9806	HCPCS	ROTARY PERISTALTIC INFUS PUMP NONOPIOID MED DVC	N	NA
ALOHAC	Q3 2025	Physician Services	C9807	HCPCS	NERVE STIMULATOR PERC PERIPH NONOPIOID MED DVC	N	NA
ALOHAC	Q3 2025	Physician Services	C9808	HCPCS	NERVE CRYOABLATION PROBE NONOPIOID MEDICAL DVC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0118	HCPCS	CRUTCH SUBST LOWER LEG PLATFORM W/WO WHEELS EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0140	HCPCS	WALKER W/TRUNK SUPPORT ADJUSTBLE/FIX HT ANY TYPE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0144	HCPCS	WALKER ENCLOSED 4 SIDED FRAME WHEELD W/POST SEAT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0147	HCPCS	WALKER HEAVY DUTY MX BRAKE SYS VARIBLE WHL RSIST	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0152	HCPCS	WALKER BATTERY PWRD WHEELED FOLDING ADJ/FIXED HT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0170	HCPCS	COMMODE CHAIR INTGR SEAT LIFT MECH ELEC ANY TYPE	N	NA
ALOHAC	Q3 2025	HCBS	E0181	HCPCS	PWR PRESSURE REDUCING MATTRESS OVERLY/PAD PUMP	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0181	HCPCS	PWR PRESSURE REDUCING MATTRESS OVERLY/PAD PUMP	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0182	HCPCS	PUMP ALTERNATING PRESSURE PAD REPLACEMENT ONLY	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0183	HCPCS	PWR PRESS RDUC UNDERLAY/PAD ALTERNATING W/PUMP	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0185	HCPCS	GEL/GEL-LIKE PRSS PAD MATTRSS STD LEN&WDTH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0186	HCPCS	AIR PRESSURE MATTRESS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0187	HCPCS	WATER PRESSURE MATTRESS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0193	HCPCS	POWERED AIR FLOTATION BED	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0194	HCPCS	AIR FLUIDIZED BED	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0196	HCPCS	GEL PRESSURE MATTRESS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0197	HCPCS	AIR PRESS PAD MATTRSS STD MATTRSS LENGTH&WIDTH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0198	HCPCS	WATER PRESS PAD MATTRSS STD MATTRSS LENGTH&WIDTH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0201	HCPCS	PENILE CONTRACTURE DEV MANUAL >3 LBS TRXN FORCE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0202	HCPCS	PHOTOTHERAPY LIGHT WITH PHOTOMETER	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0217	HCPCS	WATER CIRCULATING HEAT PAD WITH PUMP	N	NA
ALOHAC	Q3 2025	HCBS	E0221	HCPCS	INFRARED HEATING PAD SYSTEM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0221	HCPCS	INFRARED HEATING PAD SYSTEM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0225	HCPCS	HYDROCOLLATOR UNIT INCLUDES PADS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0231	HCPCS	NON-CNTC WND WARMING DEVC W/WARMING CARD&COVR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0232	HCPCS	WOUND WARMING WOUND COVER	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0235	HCPCS	PARAFFIN BATH UNIT PORTABLE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0236	HCPCS	PUMP FOR WATER CIRCULATING PAD	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0239	HCPCS	HYDROCOLLATOR UNIT PORTABLE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0250	HCPCS	HOSP BED FIX HT W/ANY TYPE SIDE RAILS W/MATTRSS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0251	HCPCS	HOSP BED FIX HT W/ANY TYPE SIDE RAIL W/O MATTRSS	N	NA

ALOHAC	Q3 2025	DME/Medical Supplies	E0255	HCPCS	HOS BED VARIBL HT W/ANY TYPE SIDE RAIL W/MATTRSS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0256	HCPCS	HOS BED VARIBL HT ANY TYPE SIDE RAIL W/O MATTRSS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0260	HCPCS	HOS BED SEMI-ELEC W/ANY TYPE SIDE RAIL W/MATTRSS	N	NA
ALOHAC	Q3 2025	HCBS	E0260	HCPCS	HOS BED SEMI-ELEC W/ANY TYPE SIDE RAIL W/MATTRSS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0261	HCPCS	HOS BED SEMI-ELEC ANY TYPE SIDE RAIL W/O MATTRSS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0265	HCPCS	HOSP BED TOT ELEC W/ANY TYPE SIDE RAIL W/MATTRSS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0266	HCPCS	HOS BED TOT ELEC ANY TYPE SIDE RAIL W/O MATTRSS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0277	HCPCS	POWERED PRESSURE-REDUCING AIR MATTRESS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0290	HCPCS	HOSPITAL BED FIX HT WITHOUT SIDE RAILS W/MATTRSS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0291	HCPCS	HOSPITAL BED FIX HT W/O SIDE RAILS W/O MATTRSS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0292	HCPCS	HOSP BED VARIBL HT HI-LO W/O SIDE RAIL W/MATTRSS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0293	HCPCS	HOS BED VARIBL HT HI-LO W/O SIDE RAIL NO MATTRSS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0294	HCPCS	HOSPITAL BED SEMI-ELEC W/O SIDE RAILS W/MATTRSS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0295	HCPCS	HOSP BED SEMI-ELEC W/O SIDE RAILS W/O MATTRSS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0296	HCPCS	HOSPITAL BED TOTAL ELEC W/O SIDE RAILS W/MATTRSS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0297	HCPCS	HOSP BED TOTAL ELEC W/O SIDE RAILS W/O MATTRSS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0300	HCPCS	PED CRIB HOS GRADE FULLY ENC W/WO TOP ENC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0301	HCPCS	HOS BED HEVY DUTY XTRA WIDE W/WT CAPACTY>350 PDS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0302	HCPCS	HOS BED XTRA HEVY DUTY WT CAP>600 PDS W/O MTTRSS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0303	HCPCS	HOS BED HEVY DUTY W/WT CAP >350 PDS</=TO 600 PDS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0304	HCPCS	HOS BED EXTRA HEAVY DUTY WT CAP>600 PDS MATTRSS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0305	HCPCS	BEDSIDE RAILS HALF-LENGTH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0315	HCPCS	BED ACCESS: BOARD TABLE/SUPPORT DEVICE ANY TYPE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0316	HCPCS	SFTY ENCLOS FRME/CANOPY USE W/HOSP BED ANY TYPE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0371	HCPCS	NONPWR ADV PRSS RDUC OVRLAY MATTRSS STD LEN&WDTH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0372	HCPCS	PWR AIR OVRLAY MATTRSS STD MATTRSS LENGTH&WIDTH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0373	HCPCS	NONPOWERED ADVANCED PRESSURE REDUCING MATTRESS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0424	HCPCS	STATION COMPRS GASOUS O2 SYS RENT;FLWMTR HUMIDFR	N	NA
ALOHAC	Q3 2025	HCBS	E0424	HCPCS	STATION COMPRS GASOUS O2 SYS RENT;FLWMTR HUMIDFR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0425	HCPCS	STATION COMPRS GAS SYS PURCH; FLWMTR HUMIDFR NEB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0430	HCPCS	PRTBLE GASEOUS O2 SYS PURCH; FLWMTR HUMIDFR&MASK	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0431	HCPCS	PRTBLE GASEOUS O2 SYS RENT; FLWMTR HUMIDFR&MASK	N	NA
ALOHAC	Q3 2025	HCBS	E0431	HCPCS	PRTBLE GASEOUS O2 SYS RENT; FLWMTR HUMIDFR&MASK	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0433	HCPCS	PORTABL LIQUID OXYGEN SYS RENTAL; HOME LIQUEFIER	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0434	HCPCS	PRTBLE LQD O2 SYS RENT; RESRVOR HUMIDFR FLWMTR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0435	HCPCS	PRTBLE LQD O2 SYS PURCH; RESRVOR FLWMTR HUMIDFR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0439	HCPCS	STATION LQD O2 SYS RENT; FLWMTR HUMIDFR NEBULIZR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0440	HCPCS	STATION LQD O2 SYS PURCH;RESRVOR HUMIDFR NEBULZR	N	NA
ALOHAC	Q3 2025	HCBS	E0445	HCPCS	OXIMETER DEVICE MSR BLD O2 LEVLS NON-INVASV	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0445	HCPCS	OXIMETER DEVICE MSR BLD O2 LEVLS NON-INVASV	N	NA
ALOHAC	Q3 2025	Other	E0447	HCPCS	PRTB O C LQD 1 MO SPL=1 U PRSC AMT R/N EXCD 4LPM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0457	HCPCS	CHEST SHELL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0459	HCPCS	CHEST WRAP	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0462	HCPCS	ROCKING BED WITH OR WITHOUT SIDE RAILS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0465	HCPCS	HOME VENTILATOR ANY TYPE USED W/INVASIVE INTF	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0466	HCPCS	HOME VENTILATOR ANY TYPE USED W/NON-INVASV INTF	N	NA
ALOHAC	Q3 2025	HCBS	E0466	HCPCS	HOME VENTILATOR ANY TYPE USED W/NON-INVASV INTF	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0467	HCPCS	HOME VENTILATOR MULTI-FUNCTION RESPIRATORY DEVC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0468	HCPCS	HOME VENT DF RESP DVC PER ADD FUNC OF COUGH STIM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0469	HCPCS	LUNG EXPAN AIRWAY CLR CONT HF OSC & NEBUL DVC	N	NA
ALOHAC	Q3 2025	HCBS	E0470	HCPCS	RESP ASST DEVC BI-LEVL PRSS CAPABILITY W/O BACKU	N	NA

ALOHAC Q3 2025	DME/Medical Supplies	E0470	HCPCS	RESP ASST DEVC BI-LEVL PRSS CAPABILITY W/O BACKU	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0471	HCPCS	RAD BACKUP NON INV INTRFC NASAL/FACIAL MASK	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0472	HCPCS	RAD BACKUP INVASIVE INTERFACE TRACHEOSTOMY TUBE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0480	HCPCS	PERCUSSOR ELECTRIC OR PNEUMATIC HOME MODEL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0481	HCPCS	INTRAPULM PERCUSSIVE VENT SYSTEM&REL ACSSORIES	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0482	HCPCS	COUGH STIM DEVICE ALTRNAT POS&NEG ARWAY PRESS	N	NA
ALOHAC Q3 2025	HCBS	E0483	HCPCS	HF CW OS SYS FULL THOR REG RECV SIM EXT OS EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0483	HCPCS	HF CW OS SYS FULL THOR REG RECV SIM EXT OS EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0487	HCPCS	SPIROMETER ELECTRONIC INCLUDES ALL ACCESSORIES	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0490	HCPCS	PS & CE U O DVC/APPL NM ELECT STIM TNG MUSC REM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0491	HCPCS	ORAL DEVICE/APPL NM ELECT STIM TONGUE MUSCLE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0492	HCPCS	POWER SRC&CTRL ELEC ORAL DVC NEUMUSC ELC STM TNG	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0493	HCPCS	ORAL DVC NM ELC STIM TONGUE MUSC PWR S&C ELC 90D	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0500	HCPCS	IPPB MACH W/BUILT-IN NEBULIZATION; VALVS; PWR	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0530	HCPCS	ELEC POSITIONAL OSA TX W/SENSOR ALL COMP ACC ANY	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0550	HCPCS	HUMDIFIR DURBLE EXT SUPLMNTL DUR IPPB TX/O2 DEL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0565	HCPCS	COMPRS AIR PWR EQP NOT SLF-CONTAIND/CYL DRIVN	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0572	HCPCS	AROSL COMPRS ADJSTBL PRSS LGHT DUTY INTERMIT USE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0574	HCPCS	ULTRASONIC/ELEC AROSL GEN W/SMALL VOLUME NEB	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0575	HCPCS	NEBULIZER ULTRASONIC LARGE VOLUME	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0585	HCPCS	NEBULIZER WITH COMPRESSOR AND HEATER	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0600	HCPCS	RESP SUCTION PUMP HOME MODEL PRTBLE/STATION ELEC	N	NA
ALOHAC Q3 2025	HCBS	E0600	HCPCS	RESP SUCTION PUMP HOME MODEL PRTBLE/STATION ELEC	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0601	HCPCS	CONTINUOUS POSITIVE AIRWAY PRESSURE DEVICE	N	NA
ALOHAC Q3 2025	HCBS	E0601	HCPCS	CONTINUOUS POSITIVE AIRWAY PRESSURE DEVICE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0604	HCPCS	BREAST PUMP HEVY DUTY HOSP GRADE PISTON OP	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0606	HCPCS	POSTURAL DRAINAGE BOARD	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0610	HCPCS	PACEMKR MON CHECKS BATTRY DEPLET W/AUDIBL&VISIBL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0615	HCPCS	PACEMKR MON CHECKS BATTRY DEPLET W/DIGTL/VISIBL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0616	HCPCS	IMPL CARD EVENT RECORDR W/MEM ACTIVATOR&PROGMMER	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0617	HCPCS	EXTERNAL DEFIB W/INTEGRATED ECG ANALY	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0618	HCPCS	APNEA MONITOR WITHOUT RECORDING FEATURE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0619	HCPCS	APNEA MONITOR WITH RECORDING FEATURE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0620	HCPCS	SKIN PIERCING DEVICE CLCT CAPILLARY BLD LASER EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0625	HCPCS	PATIENT LIFT BATHROOM OR TOILET NOC	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0627	HCPCS	SEAT LIFT MECHANISM ELECTRIC ANY TYPE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0629	HCPCS	SEAT LIFT MECHANISM NON-ELECTRIC ANY TYPE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0630	HCPCS	PATIENT LIFT HYDRAULIC/MECH INCL SEAT SLING/PAD	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0635	HCPCS	PATIENT LIFT ELECTRIC WITH SEAT OR SLING	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0636	HCPCS	MX PSTN PT SUPP SYS INTGR LIFT PT ACSSIBLE CNTRL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0637	HCPCS	COMB SIT STAND FRAME/TABLE SYS SEATLIFT FEATURE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0638	HCPCS	STANDING FRAME/TABLE SYS ONE POSITION ANY SZ	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0639	HCPCS	PT LIFT MOVEABLE ROOM-ROOM W/DISASSMBL&REASSMBL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0640	HCPCS	PATIENT LIFT FIX SYS INCLUDES ALL CMPNTS/ACCESS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0641	HCPCS	STANDING FRAME/TABLE SYS MULTI-POSITION ANY SZ	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0642	HCPCS	STANDING FRAME/TABLE SYS MOBILE DYNAMIC ANY SZ	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0650	HCPCS	PNEUMATIC COMPRESSOR NONSEGMENTAL HOME MODEL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0651	HCPCS	PNEUMAT COMPRS SEG HOM MDL NO CALBRTD GRDNT PRSS	N	NA
ALOHAC Q3 2025	HCBS	E0651	HCPCS	PNEUMAT COMPRS SEG HOM MDL NO CALBRTD GRDNT PRSS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E0652	HCPCS	PNEUMAT COMPRS SEG HOM MDL W/CALBRTD GRADNT PRSS	N	NA
ALOHAC Q3 2025	HCBS	E0652	HCPCS	PNEUMAT COMPRS SEG HOM MDL W/CALBRTD GRADNT PRSS	N	NA

ALOHAC	Q3 2025	DME/Medical Supplies	E0656	HCPCS	SEG PNEUMAT APPLIANCE USE W/PNEUMAT COMPRS TRUNK	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0657	HCPCS	SEG PNEUMAT APPLIANCE USE W/PNEUMAT COMPRS CHEST	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0667	HCPCS	SEG PNEUMAT APPLINC W/PNEUMAT COMPRS FULL LEG	N NA
ALOHAC	Q3 2025	HCBS	E0667	HCPCS	SEG PNEUMAT APPLINC W/PNEUMAT COMPRS FULL LEG	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0668	HCPCS	SEG PNEUMAT APPLINC W/PNEUMAT COMPRS FULL ARM	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0670	HCPCS	SEG PNEU APPLINC PNEU COMPRS IN 2 FULL LEGS TRNK	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0671	HCPCS	SEGMENTAL GRADENT PRESS PNEUMAT APPLINC FULL LEG	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0672	HCPCS	SEGMENTAL GRADENT PRESS PNEUMAT APPLINC FULL ARM	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0675	HCPCS	PNEUMAT COMPRS DEVC HI PRSS RAPID INFLATION/DEFL	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0676	HCPCS	INTERMITTENT LIMB COMPRESSION DEVICE NOS	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0677	HCPCS	NONPNEUMATIC SEQUENTIAL COMP GARMENT TRUNK	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0682	HCPCS	NONPNEUMATIC SEQUENTIAL COMPRES GARMENT FULL ARM	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0683	HCPCS	NONPNEU NONSEQ PERISTALTIC WAVE CMPRSSN PUMP	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0691	HCPCS	UV LIGHT TX SYS BULB/LAMP TIMER; TX 2 SQ FT/LESS	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0692	HCPCS	UV LT TX SYS PANL W/BULB/LAMP TIMER 4 FT PANEL	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0693	HCPCS	UV LT TX SYS PANL W/BULBS/LAMPS TIMER 6 FT PANEL	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0694	HCPCS	UV MX DIR LT TX SYS 6 FT CABINET W/BULB/LAMP TMR	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0711	HCPCS	UE MED TUBING/LINES ENCL/COV DEVC RSTR ELBOW ROM	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0715	HCPCS	INTRAVAG DVC INTND TO STRENGTH PFM DUR KEGEL EX	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0716	HCPCS	SUPPL & ACCESS FOR IVAG DVC INTEND STRENGTH PFM	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0720	HCPCS	TENS DEVICE TWO LEAD LOCALIZED STIMULATION	N NA
ALOHAC	Q3 2025	HCBS	E0720	HCPCS	TENS DEVICE TWO LEAD LOCALIZED STIMULATION	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0721	HCPCS	TENS STIMULATES NERVES IN THE AURICULAR REGION	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0730	HCPCS	TENS DEVICE 4/MORE LEADS MULTI NERVE STIMULATION	N NA
ALOHAC	Q3 2025	HCBS	E0730	HCPCS	TENS DEVICE 4/MORE LEADS MULTI NERVE STIMULATION	N NA
ALOHAC	Q3 2025	HCBS	E0731	HCPCS	FORM-FITTING CONDUCTIVE GARMENT DELIV TENS/NMES	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0731	HCPCS	FORM-FITTING CONDUCTIVE GARMENT DELIV TENS/NMES	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0732	HCPCS	CRANIAL ELECTROTHERAPY STIMULATION SYST ANY TYPE	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0733	HCPCS	TRANSCUTN ELEC NRV STIM ELEC STIM TRIGEMINAL NRV	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0734	HCPCS	EXTERNAL UPPER LIMB TREMOR STIM PERIPH NRV WRIST	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0735	HCPCS	NONINVASIVE VAGUS NERVE STIMULATOR	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0736	HCPCS	TRANSCUTANEOUS TIBIAL NERVE STIMULATOR	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0737	HCPCS	TTNS CONTROLLED BY PHONE APPLICATION	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0738	HCPCS	UE REHAB SYS PROV AC ASST TO FACL MUSCLE RE-EDU	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0739	HCPCS	REHAB SYS INTERACT INTF PROV ACTV ASST RHB TX	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0740	HCPCS	NON-IMPL PELV FLR ELECTRICAL STIMULATOR CMPL SYS	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0743	HCPCS	EXTERNAL LOWER EXTREMITY NERVE STIM FOR RLS EA	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0744	HCPCS	NEUROMUSCULAR STIMULATOR FOR SCOLIOSIS	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0745	HCPCS	NEUROMUSCULAR STIMULATOR ELECTRONIC SHOCK UNIT	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0747	HCPCS	OSTOGNS STIM ELEC NONINVASV OTH THAN SP APPLIC	N NA
ALOHAC	Q3 2025	HCBS	E0747	HCPCS	OSTOGNS STIM ELEC NONINVASV OTH THAN SP APPLIC	N NA
ALOHAC	Q3 2025	HCBS	E0748	HCPCS	OSTOGNS STIMULATOR ELEC NONINVASV SPINAL APPLIC	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0748	HCPCS	OSTOGNS STIMULATOR ELEC NONINVASV SPINAL APPLIC	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0749	HCPCS	OSTEOGENESIS STIMULATOR ELEC SURGICALLY IMPL	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0755	HCPCS	ELECTRONIC SALIVARY REFLEX STIMULATOR	N NA
ALOHAC	Q3 2025	HCBS	E0760	HCPCS	OSTOGNS STIM LOW INTENS ULTRASOUND NON-INVASV	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0760	HCPCS	OSTOGNS STIM LOW INTENS ULTRASOUND NON-INVASV	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0761	HCPCS	NON-THRML PULS RADIOWAV ELECMAGNET ENRGY TX DEVC	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0762	HCPCS	TRANSCUT ELEC JOINT STIM DEVC SYS INCL ALL ACCSS	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0764	HCPCS	FUNC NEUROMUSC STIM MUSC AMBUL CMPT CNTRL SC INJ	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0766	HCPCS	ELEC STIM DVC U CANCER TX INCL ALL ACC ANY TYPE	N NA

ALOHAC	Q3 2025	DME/Medical Supplies	E0767	HCPCS	INTRABUC SC DEL OF AM RF EMF DVC FOR CANCER TX	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0770	HCPCS	FES TRANSQ STIM NERV&/MUSC GRP CMPL SYS NOS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0779	HCPCS	AMB INFUS PUMP MECH REUSABLE INFUS 8 HOURS/GT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0781	HCPCS	AMB INFUS PUMP 1/MX CHANNL W/ADMN EQP WORN BY PT	N	NA
ALOHAC	Q3 2025	HCBS	E0784	HCPCS	EXTERNAL AMBULATORY INFUSION PUMP INSULIN	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0784	HCPCS	EXTERNAL AMBULATORY INFUSION PUMP INSULIN	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0787	HCPCS	EXTERNAL AMB INFUS PUMP INSULIN DOS RATE ADJ	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0791	HCPCS	PARNTRAL INFUS PUMP STATIONRY SINGLE/MULTICHANEL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0849	HCPCS	TRACTION EQP CERV FREESTAND STAND/FRME PNEUMATIC	N	NA
ALOHAC	Q3 2025	HCBS	E0849	HCPCS	TRACTION EQP CERV FREESTAND STAND/FRME PNEUMATIC	N	NA
ALOHAC	Q3 2025	HCBS	E0855	HCPCS	CERVICAL TRACTION EQUIP NOT RQR ADD STAND/FRAME	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0855	HCPCS	CERVICAL TRACTION EQUIP NOT RQR ADD STAND/FRAME	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0910	HCPCS	TRAPEZ BAR KNOWN AS PT HLPR ATTCH BED W/GRAB BAR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0911	HCPCS	TRAPEZ BAR HEVY DUTY PT WT >250 LBS BED GRAB BAR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0912	HCPCS	TRAPEZ BAR HEVY DUTY PT WT > 250 LBS FREE STAND	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0920	HCPCS	FRACTURE FRAME ATTACHED TO BED INCLUDES WEIGHTS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0930	HCPCS	FRACTURE FRAME FREESTANDING INCLUDES WEIGHTS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0935	HCPCS	CONTINUOUS PASSIVE MOT EXERCISE DEVC KNEE ONLY	N	NA
ALOHAC	Q3 2025	HCBS	E0935	HCPCS	CONTINUOUS PASSIVE MOT EXERCISE DEVC KNEE ONLY	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0940	HCPCS	TRAPEZE BAR FREESTANDING COMPLETE WITH GRAB BAR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0941	HCPCS	GRAVITY ASSISTED TRACTION DEVICE ANY TYPE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0946	HCPCS	FRACTURE FRAME DUAL W/CROSS BARS ATTACHED TO BED	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0947	HCPCS	FRACTURE FRAME ATTCH COMPLEX PELVIC TRACTION	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0948	HCPCS	FRACTURE FRAME ATTCH COMPLEX CERVICAL TRACTION	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0958	HCPCS	MANUAL WHLCHAIR ACCESS 1-ARM DRIVE ATTACHMENT EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0968	HCPCS	COMMODE SEAT WHEELCHAIR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0983	HCPCS	MNL WC ACSS PWR AO CVT MNL WC MTR WC JS CNTRL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0984	HCPCS	MNL WC ACSS PWR AO CVT MNL WC MTR WC TILLR CNTRL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0986	HCPCS	MANUAL WHEELCHAIR ACCESSORY POWER ASSIST SYSTEM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E0988	HCPCS	MANUAL WC ACCESSORY LEVR-ACTIVATD WHL DRIVE PAIR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1002	HCPCS	WHEELCHAIR ACCESS POWER SEATING SYSTEM TILT ONLY	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1003	HCPCS	WC ACSS PWR SEAT SYS RECLINE W/O SHEAR RDUC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1004	HCPCS	WC ACSS PWR SEAT SYS RECLINE W/MECH SHEAR RDUC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1005	HCPCS	WC ACSS PWR SEAT SYS RECLINE W/PWR SHEAR RDUC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1006	HCPCS	WC ACSS PWR SEAT SYS TILT&RECLINE NO SHEAR RDUC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1007	HCPCS	WC ACSS PWR SEAT TILT&RECLINE MECH SHEAR RDUC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1008	HCPCS	WC ACSS PWR SEAT TILT&RECLINE W/PWR SHEAR RDUC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1010	HCPCS	WC ACCSS ADD PWR SEAT SYS PWR LEG ELEV SYS PAIR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1012	HCPCS	WC ACCSS PWR SEAT SYS CNTR MNT PWR ELEV LEG EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1014	HCPCS	RECLIN BACK ADDITION PEDIATRIC SIZE WHEELCHAIR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1022	HCPCS	WHEELCHAIR TRANSPORTATION SECUREMENT SYS ANY TYP	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1023	HCPCS	WHEELCHAIR TRANSIT SECUR SYS INCL ALL COMP & ACC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1029	HCPCS	WHEELCHAIR ACCESSORY VENTILATOR TRAY FIXED	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1030	HCPCS	WHEELCHAIR ACCESSORY VENTILATOR TRAY GIMBALED	N	NA
ALOHAC	Q3 2025	HCBS	E1031	HCPCS	ROLLABOUT CHAIR ANY&ALL TYPES W/CASTERS 5 IN/GT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1031	HCPCS	ROLLABOUT CHAIR ANY&ALL TYPES W/CASTERS 5 IN/GT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1032	HCPCS	W/C ACC M SWAWY RET/REM MTG HW JS/OTH DRV CTRL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1033	HCPCS	W/C ACC MAN SWAWY RET/REM MTG HW HEADREST CUSH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1034	HCPCS	W/C ACC MAN SWAWY RET/REM MTG HW TRNK/HIP SUP	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1035	HCPCS	MULTI-PSTN PT TRNSF SYS W/SEAT PT WT </= 300 LBS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1036	HCPCS	MULTI-PSTN PT TRNSF SYS EXTRA WIDE PT >300 LBS	N	NA

ALOHAC Q3 2025	DME/Medical Supplies	E1037	HCPCS	TRANSPORT CHAIR PEDIATRIC SIZE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1038	HCPCS	TRNSPRT CHAIR ADLT SZ PT WT CAP TO&INCL 300 LBS	N	NA
ALOHAC Q3 2025	HCBS	E1038	HCPCS	TRNSPRT CHAIR ADLT SZ PT WT CAP TO&INCL 300 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1039	HCPCS	TRNSPRT CHAIR ADLT SZ HEVY DUTY PT WT CAP>300 LB	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1050	HCPCS	FULL RECLIN WHLCHAIR; FIX FULL-LEN ARMS LEGRESTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1060	HCPCS	FULL RECLIN WHLCHAIR; DTACHBLE ARMS LEGRESTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1070	HCPCS	FULLY RECLIN WHLCHAIR; DTACHBLE ARMS FOOTRESTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1083	HCPCS	HEMI-W/C; FIXED FULL-LEN ARMS DETACHBLE LEGREST	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1084	HCPCS	HEMI-WHLCHAIR; DTACHBLE ARMS DESK/FULL LEGRESTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1085	HCPCS	HEMI-WHLCHAIR; FIX FULL ARMS DTACHBLE FOOTRESTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1086	HCPCS	HEMI-WHLCHAIR; DTACHBLE ARMS DESK/FULL FOOTRESTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1087	HCPCS	HI-STRGTH LGHTWT WHLCHAIR; FIX ARMS DTACH LEGRST	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1088	HCPCS	HI-STRGTH LGHTWT WHLCHAIR; DTACHBL ARMS LEGRESTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1089	HCPCS	HI-STRGTH LGHTWT WHLCHAIR; FIX ARM DTACH FOOTRST	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1090	HCPCS	HI-STRGTH LGHTWT WHLCHAIR; DTACHBL ARMS FOOTREST	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1092	HCPCS	WIDE HEVY-DUTY WHLCHAIR; DTACHBLE ARMS LEGRESTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1093	HCPCS	WIDE HEVY-DUTY WHLCHAIR; DTACHBLE ARMS FOOTRESTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1100	HCPCS	SEMI-RECLIN WHLCHAIR; FIX ARMS DTACHBLE LEGRESTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1110	HCPCS	SEMI-RECLIN WHLCHAIR; DTACHBLE ARMS ELEV LEGREST	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1130	HCPCS	STD WHLCHAIR; FIX FULL-LEN ARMS DTACHBL FOOTRSTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1140	HCPCS	WHLCHAIR; DTACHBLE ARMS DTACHBLE FOOTRESTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1150	HCPCS	WHLCHAIR; DTACHBLE ARMS DTACHBLE ELEV LEGRESTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1160	HCPCS	WHLCHAIR; FIX FULL-LEN ARMS DTACHBL ELEV LEGRSTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1161	HCPCS	MANUAL ADULT SIZE WHEELCHAIR INCLUDES TILT SPACE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1170	HCPCS	AMPUTEE WHLCHAIR; FIX FULL ARMS DTACHBL LEGRESTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1171	HCPCS	AMPUTEE WHLCHAIR; FIX FULL ARMS W/O FOOT/LEGREST	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1172	HCPCS	AMPUTEE WHLCHAIR; DTACHBL ARMS W/O FOOT/LEGRESTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1180	HCPCS	AMPUTEE WHLCHAIR; DTACHBL ARMS DTACHBL FOOTRESTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1190	HCPCS	AMPUTEE WHLCHAIR; DTACHBL ARMS DTACHBL LEGRESTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1195	HCPCS	HEVY DUTY WHLCHAIR; FIX FULL ARMS DTACHBL LEGRST	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1200	HCPCS	AMPUTEE WHLCHAIR; FIX FULL ARMS DTACHBL FOOTRSTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1220	HCPCS	WHEELCHAIR; SPECIALLY SIZED OR CONSTRUCTED	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1221	HCPCS	WHEELCHAIR WITH FIXED ARM FOOTRESTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1222	HCPCS	WHEELCHAIR WITH FIXED ARM ELEVATING LEGRESTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1223	HCPCS	WHEELCHAIR WITH DETACHABLE ARMS FOOTRESTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1224	HCPCS	WHEELCHAIR W/DETACHABLE ARMS ELEVATING LEGRESTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1225	HCPCS	WHLCHAIR ACCESS MANUAL SEMIRECLINING BACK EACH	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1228	HCPCS	SPECIAL BACK HEIGHT FOR WHEELCHAIR	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1229	HCPCS	WHEELCHAIR PEDIATRIC SIZE NOS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1230	HCPCS	PWR OPERATED VEH SPEC BRAND NAME & MODEL NUMBER	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1232	HCPCS	WC PED SZ TILT-IN-SPACE FOLD ADJUSTBL W/SEAT SYS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1233	HCPCS	WC PED SZ TILT-IN-SPACE RIGD ADJUSTBL W/O SEAT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1234	HCPCS	WC PED SZ TILT-IN-SPACE FOLD ADJUSTBL W/O SEAT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1235	HCPCS	WHLCHAIR PED SIZE RIGD ADJUSTBL W/SEATING SYSTEM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1236	HCPCS	WHLCHAIR PED SIZE FOLD ADJUSTBL W/SEATING SYSTEM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1237	HCPCS	WHLCHAIR PED SZ RIGD ADJUSTBL W/O SEATING SYSTEM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1238	HCPCS	WHLCHAIR PED SZ FOLD ADJUSTBL W/O SEATING SYSTEM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1239	HCPCS	POWER WHEELCHAIR PEDIATRIC SIZE NOS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1240	HCPCS	LGHTWT WHLCHAIR; DTACHBLE ARMS DTACHBLE LEGREST	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1250	HCPCS	LGHTWT WHLCHAIR; FIX FULL ARMS DTACHBL FOOTRESTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E1260	HCPCS	LGHTWT WHLCHAIR; DTACHBL ARMS DTACHBL FOOTRESTS	N	NA

ALOHAC	Q3 2025	DME/Medical Supplies	E1270	HCPCS	LGHTWT WHLCHAIR; FIX ARMS DTACHBLE ELEV LEGRESTS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1280	HCPCS	HEVY-DUTY WHLCHAIR; DTACHBLE ARMS ELEV LEGRESTS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1285	HCPCS	HEVY-DUTY WHLCHAIR; FIX ARMS DTACHBLE FOOTRESTS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1290	HCPCS	HEVY-DUTY WC DTCHBL ARMS SWNG AWAY DTCHBL FTRST	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1295	HCPCS	HEVY-DUTY WHLCHAIR; FIX FULL ARMS ELEV LEGRESTS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1296	HCPCS	SPECIAL WHEELCHAIR SEAT HEIGHT FROM FLOOR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1298	HCPCS	SPECIAL WHLCHAIR SEAT DEPTH &OR WIDTH CONSTRUCT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1300	HCPCS	WHIRLPOOL PORTABLE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1301	HCPCS	WHIRLPOOL TUB WALK-IN PORTABLE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1310	HCPCS	WHIRLPOOL NONPORTABLE	N	NA
ALOHAC	Q3 2025	HCBS	E1390	HCPCS	O2 CONC 1 DEL PORT 85%/>02 CONC AT PRSC FLW RATE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1390	HCPCS	O2 CONC 1 DEL PORT 85%/>02 CONC AT PRSC FLW RATE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1391	HCPCS	O2 CONC 2 DEL PORT 85%/>O2 CONC PRSC FLW RATE EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1392	HCPCS	PORTABLE OXYGEN CONCENTRATOR RENTAL	N	NA
ALOHAC	Q3 2025	HCBS	E1392	HCPCS	PORTABLE OXYGEN CONCENTRATOR RENTAL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1405	HCPCS	OXYGEN&WATER VAPOR ENRICHING SYS W/HEATED DELIV	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1406	HCPCS	OXYGEN&WATR VAPOR ENRICHING SYS W/O HEATED DELIV	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1629	HCPCS	TABLO HEMODIALYSIS SYS FOR BILLABLE DIALYSIS SVC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1700	HCPCS	JAW MOTION REHABILITATION SYSTEM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1800	HCPCS	DYN ADJUSTBL ELB EXT & FLX DEVC SFT INTRFCE MATL	N	NA
ALOHAC	Q3 2025	HCBS	E1800	HCPCS	DYN ADJUSTBL ELB EXT & FLX DEVC SFT INTRFCE MATL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1801	HCPCS	STATIC PROG STR/PT ACTUAL SERIAL STR ELBOW DVC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1802	HCPCS	DYN ADJUSTBL FORARM PRON/SUPIN DEVC INTRFCE MATL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1803	HCPCS	DYNAMIC ADJUSTABLE ELBOW EXTENSION ONLY DEVICE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1804	HCPCS	DYNAMIC ADJUSTABLE ELBOW FLEXION ONLY DEVICE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1805	HCPCS	DYN ADJUSTBL WRIST EXT & FLX DEVC INTERFCE MATL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1806	HCPCS	STATIC PROGRESSIVE STRETCH WRIST DEVICE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1807	HCPCS	DYNAMIC ADJUSTABLE WRIST EXTENSION ONLY DEVICE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1808	HCPCS	DYNAMIC ADJUSTABLE WRIST FLEXION ONLY DEVICE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1810	HCPCS	DYN ADJUSTBL KNEE EXT & FLX DEVC INTERFCE MATL	N	NA
ALOHAC	Q3 2025	HCBS	E1810	HCPCS	DYN ADJUSTBL KNEE EXT & FLX DEVC INTERFCE MATL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1811	HCPCS	STATIC PROG STR/PT ACTUAL SERIAL STR KNEE DVC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1812	HCPCS	DYN KNEE EXT/FLEX DEVC W/ACTV RESISTANCE CONTROL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1813	HCPCS	DYNAMIC ADJUSTABLE KNEE EXTENSION ONLY DEVICE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1814	HCPCS	DYNAMIC ADJUSTABLE KNEE FLEXION ONLY DEVICE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1815	HCPCS	DYN ADJ ANKLE EXT & FLEX DEVC SOFT INTF MATL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1816	HCPCS	STATIC PROG STR/PT ACTUAL SERIAL STR ANKLE DVC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1818	HCPCS	STATIC PROG STR/PT ACTUAL SERIAL STR FOREARM DVC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1822	HCPCS	DYNAMIC ADJUSTABLE ANKLE EXTENSION ONLY DEVICE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1823	HCPCS	DYNAMIC ADJUSTABLE ANKLE FLEXION ONLY DEVICE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1825	HCPCS	DYN ADJUSTBL FNGR EXT & FLX DEVC SFT INTRFCE MAT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1826	HCPCS	DYNAMIC ADJUSTABLE FINGER EXTENSION ONLY DEVICE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1827	HCPCS	DYNAMIC ADJUSTABLE FINGER FLEXION ONLY DEVICE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1828	HCPCS	DYNAMIC ADJUSTABLE TOE EXTENSION ONLY DEVICE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1829	HCPCS	DYNAMIC ADJUSTABLE TOE FLEXION ONLY DEVICE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1830	HCPCS	DYN ADJUSTBL TOE EXT & FLX DEVC SFT INTRFCE MATL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1831	HCPCS	STATIC PROGRESSIVE STRETCH TOE DEVICE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1832	HCPCS	STATIC PROGRESSIVE STRETCH FINGER DVC EXTENSION	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1840	HCPCS	DYN ADJUSTBL SHLDR FLX/ABDCT/ROT DEVC SFT MATL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E1841	HCPCS	STATIC PROG STR/PT ACTUAL SER STR SHOULDER DVC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2000	HCPCS	GASTR SUCTION PUMP HOM MODEL PRTBLE/STATION ELEC	N	NA

ALOHAC	Q3 2025	DME/Medical Supplies	E2001	HCPCS	SP HOM MDL PTBL/STNRY ELEC ANY TYPE USE EXT MS	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2100	HCPCS	BLD GLU MONITOR W/INTEGRATED VOICE SYNTHESIZER	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2102	HCPCS	ADJUNCTIVE NONIMPLANTED CGM/RECEIVER	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2103	HCPCS	NONADJUNCTIVE NONIMPLANTED CGM/RECEIVER	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2104	HCPCS	HBGM USE INTEGRATED LANCING/BS TESTING CARTRIDGE	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2120	HCPCS	PULSE GEN SYS TYMPANIC TX INNR EAR ENDOLYMPH FL	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2202	HCPCS	MANUAL WC ACSS NONSTD SEAT FRME WIDTH 24-27 IN	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2203	HCPCS	MANUAL WC ACSS NONSTD SEAT FRME DEPTH 20 < 22 IN	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2204	HCPCS	MANUAL WC ACSS NONSTD SEAT FRME DEPTH 22-25 IN	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2227	HCPCS	MANUAL WC ACCESS GEAR REDUCTION DRIVE WHEEL EACH	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2228	HCPCS	MNL WC ACCESS WHEEL BRAKING SYS&LOCK COMPLETE EA	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2298	HCPCS	COMPLEX REHAB PWR WC ACC PWR SEAT EL SYS ANY TYP	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2301	HCPCS	WHEELCHAIR ACCESSORY POWER STANDING SYS ANY TYPE	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2310	HCPCS	PWR WC ACSS ELEC CNCT BETWN WC CNTRLLER&ONE PWR	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2311	HCPCS	PWR WC ACSS ELEC CNCT BETWN WC CNTRLLER&TWO/MORE	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2312	HCPCS	POWER WC ACCESS HAND OR CHIN CONTROL INTERFACE	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2313	HCPCS	POWER WC ACCESS HARNESS UPGRADE EXP CONTROLLR EA	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2321	HCPCS	PWR WC ACSS HND CNTRL REMOT JOYSTCK NO PRPRTNL	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2322	HCPCS	PWR WC ACSS HND CNTRL MX MECH SWTCH NO PRPRTNL	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2325	HCPCS	PWR WC ACSS SIP&PUFF INTERFCE NONPROPRTNAL	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2326	HCPCS	PWR WC ACSS BREATH TUBE KIT SIP&PUFF INTERFCE	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2327	HCPCS	PWR WC ACSS HEAD CNTRL INTERFCE MECH PROPRTNAL	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2328	HCPCS	PWR WC ACSS HEAD CNTRL/EXT CNTRL ELEC PRPRTNL	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2329	HCPCS	PWR WC ACSS HEAD CNTRL CNTC SWTCH MECH NOPRPRTNL	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2330	HCPCS	PWR WC ACCSS HEAD PROX SWITCH MECH NONPRPRTNL	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2331	HCPCS	PWR WC ACSS ATTENDANT CONTROL PROPROTIONAL	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2340	HCPCS	POWER WC ACCESS NONSTAND SEAT FRAME WD 20-23 IN	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2341	HCPCS	PWR WC ACSS NONSTD SEAT FRME WIDTH 24-27 IN	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2342	HCPCS	PWR WC ACSS NONSTD SEAT FRME DEPTH 20/21 IN	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2343	HCPCS	PWR WC ACSS NONSTD SEAT FRME DEPTH 22-25 IN	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2351	HCPCS	PWR WC ACSS ELEC INTERFCE OPERATE SPCH GEN DEVC	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2358	HCPCS	PWR WC ACCESS GRP 34 NONSEALED LEAD ACID BATT EA	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2368	HCPCS	POWER WHEELCHAIR CMPNT MOTOR REPLACEMENT ONLY	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2369	HCPCS	POWER WC CMPNNT DRIVE WHEEL GEAR BOX REPL ONLY	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2370	HCPCS	PWR WC COMP INT DR WHL MTR&GR BOX COMB REPL ONLY	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2373	HCPCS	PWR WC MINI-PROPORTIONAL COMPACT REMOTE JOYSTICK	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2374	HCPCS	PWR WC STANDARD REMOTE JOYSTICK REPLACEMENT ONLY	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2375	HCPCS	PWR WC NONEXPNDABLE CONTROLLER REPLACEMENT ONLY	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2376	HCPCS	PWR WC EXPANDABLE CONTROLLER REPLACEMENT ONLY	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2377	HCPCS	PWR WC EXPANDABLE CONTROLLER UPGRADE INIT ISSUE	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2378	HCPCS	POWER WHEELCHAIR COMPONENT ACTUATOR REPLACE ONLY	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2397	HCPCS	POWER WHLCHAIR ACCESSORY LITHIUM-BASED BATTRY EA	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2398	HCPCS	WHEELCHAIR ACCESSORY DYNAMIC POS HARDWARE BACK	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2402	HCPCS	NEG PRESS WOUND THERAPY ELEC PUMP STATION/PRTBLE	N NA
ALOHAC	Q3 2025	HCBS	E2402	HCPCS	NEG PRESS WOUND THERAPY ELEC PUMP STATION/PRTBLE	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2502	HCPCS	SPCH GEN DEVC DIGTIZD>8 MINS <= 20 MINS REC TIME	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2504	HCPCS	SPCH GEN DEVC DIGTIZD>20 MINS</=40 MINS REC TIME	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2506	HCPCS	SPEECH GEN DEVICE DIGITIZED >40 MINS REC TIME	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2508	HCPCS	SPCH GEN DEVC SYNTHSIZD REQ MESS SPELL & CNTCT	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2510	HCPCS	SPCH GEN DEVC SYNTHESIZD MX METH MESS&DEVC ACCSS	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	E2513	HCPCS	ACCESSORY FOR SPEECH GENERATING DVC EMG SENSOR	N NA

ALOHAC Q3 2025	DME/Medical Supplies	E2614	HCPCS	PSTN WC BACK CUSHN POST WIDTH 22 IN/> ANY HEIGHT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E2616	HCPCS	PSTN WC BACK CUSHN POSTLAT WIDTH 22 IN/> ANY HT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E2620	HCPCS	PSTN WC BACK CUSHN PLANAR LAT SUPP WDTH <22 IN	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E2621	HCPCS	PSTN WC BACK CUSHN PLANAR LAT SUPP WDTH 22 IN/>	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E2626	HCPCS	WC ACCESS SHLDR ELB MOBIL ARM SUPP WC ADJUSTBLE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E2627	HCPCS	WC ACCESS SHLDR ELB M ARM SUPP ADJUSTBL RANCHO	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E2628	HCPCS	WC ACCESS SHLDR ELB MOBIL ARM SUPP WC RECLINING	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E2629	HCPCS	WC ACCESS SHLDR ELB M ARM SUPP FRICTION ARM SUPP	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E2630	HCPCS	WC ACCESS SHLDR ELB MOBIL MONOSUSP ARM HAND SUPP	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E2631	HCPCS	WC ACCESS ADD MOBILE ARM SUPPORT ELEV PROX ARM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E3000	HCPCS	SPEECH VOL MODULAT SYS ANY TYPE INC ALL COMP&ACC	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	E3200	HCPCS	GAIT MODULATION SYSTEM RHYTHMIC AUDITORY STIM	N	NA
ALOHAC Q3 2025	Other	G0068	HCPCS	PROF SRVC ADM ANTI-INFEC PM ADM CD IND HM E 15 M	N	NA
ALOHAC Q3 2025	Other	G0069	HCPCS	PROF SRVC ADM SUBQ IMT ADM CAL DA IND HM EA 15 M	N	NA
ALOHAC Q3 2025	Home Health	G0070	HCPCS	PROF SRVC ADM CHEMO ADM CAL DA IND HOME EA 15 M	N	NA
ALOHAC Q3 2025	Other	G0076	HCPCS	BRIEF CARE MANAGEMENT HOME VISIT NEW PATIENT	N	NA
ALOHAC Q3 2025	Home Health	G0077	HCPCS	LIMITED CARE MANAGEMENT HOME VISIT NEW PATIENT	N	NA
ALOHAC Q3 2025	Home Health	G0078	HCPCS	MODERATE CARE MANAGEMENT HOME VISIT FOR NEW PT	N	NA
ALOHAC Q3 2025	Other	G0079	HCPCS	COMPREHENSIVE CARE MGMT HOME VISIT NEW PATIENT	N	NA
ALOHAC Q3 2025	Home Health	G0080	HCPCS	EXTENSIVE CARE MANAGEMENT HOME VISIT FOR NEW PT	N	NA
ALOHAC Q3 2025	Other	G0081	HCPCS	BRIEF CARE MANAGEMENT HOME VISIT FOR EXISTING PT	N	NA
ALOHAC Q3 2025	Home Health	G0082	HCPCS	LIMITED CARE MANAGEMENT HOME VISIT FOR EXIST PT	N	NA
ALOHAC Q3 2025	Home Health	G0083	HCPCS	MODERATE CARE MANAGEMENT HOME VISIT FOR EXIST PT	N	NA
ALOHAC Q3 2025	Other	G0084	HCPCS	COMPREHENSIVE CARE MGMT HOME VISIT FOR XST PT	N	NA
ALOHAC Q3 2025	Home Health	G0085	HCPCS	EXTENSIVE CARE MANAGEMENT HOME VISIT FOR EXST PT	N	NA
ALOHAC Q3 2025	Home Health	G0086	HCPCS	LIMITED CARE MANAGEMENT HOME CARE PLAN OVERSIGHT	N	NA
ALOHAC Q3 2025	Other	G0087	HCPCS	COMPREHENSIVE CARE MGMT HOME CARE PLAN OVERSIGHT	N	NA
ALOHAC Q3 2025	Other	G0138	HCPCS	INTRAVENOUS INFUSION CIPAGLUCOSIDASE ALFA-ATGA	N	NA
ALOHAC Q3 2025	Home Health	G0151	HCPCS	SERVICE PHYS THERAP HOME HLTH/HOSPICE EA 15 MIN	N	NA
ALOHAC Q3 2025	Home Health	G0152	HCPCS	SERVICE OCCUP THERAP HOME HLTH/HOSPICE EA 15 MIN	N	NA
ALOHAC Q3 2025	Home Health	G0153	HCPCS	SRVC SPCH&LANG PATH HOME HLTH/HOSPICE EA 15 MIN	N	NA
ALOHAC Q3 2025	Home Health	G0155	HCPCS	SRVC CLINICAL SOCIAL WORKER HH/HOSPICE EA 15 MIN	N	NA
ALOHAC Q3 2025	Home Health	G0156	HCPCS	SRVC HH/HOSPICE AIDE IN HH/HOSPICE SET EA 15 MIN	N	NA
ALOHAC Q3 2025	Home Health	G0157	HCPCS	SERVICES PT ASSIST HOME HEALTH/HOSPICE EA 15 MIN	N	NA
ALOHAC Q3 2025	Home Health	G0158	HCPCS	SERVICE OT ASSIST HOME HEALTH/HOSPICE EA 15 MIN	N	NA
ALOHAC Q3 2025	Home Health	G0159	HCPCS	SERVICES PT HOME HEALTH EST/DEL PT MP EA 15 MINS	N	NA
ALOHAC Q3 2025	Home Health	G0160	HCPCS	SERVICES OT HOME HEALTH EST/DEL OT MP EA 15 MINS	N	NA
ALOHAC Q3 2025	Home Health	G0161	HCPCS	SERVICE SLP HH EST/DEL SPCH-LANG PATH MP EA 15 M	N	NA
ALOHAC Q3 2025	Home Health	G0162	HCPCS	SKILLED SERVICE RN M&E PLAN OF CARE; EA 15 MINS	N	NA
ALOHAC Q3 2025	Rehab Services	G0166	HCPCS	EXTERNAL COUNTERPULSATION PER TREATMENT SESSION	N	NA
ALOHAC Q3 2025	Other	G0175	HCPCS	SCHED INTERDISCIPLINARY TEAM CONF W/PT PRESENT	N	NA
ALOHAC Q3 2025	Physician Services	G0176	HCPCS	ACTV TX REL CARE&TX PTS DISABL MENTL HLTH-SESS	N	NA
ALOHAC Q3 2025	Other	G0177	HCPCS	TRN&ED REL CARE&TX PTS DISABL MENTL HLTH-SESS	N	NA
ALOHAC Q3 2025	Home Health	G0179	HCPCS	PHYS/ALLOWED PRAC RE-CERT MCR-COV HHS UND HH POC	N	NA
ALOHAC Q3 2025	Home Health	G0180	HCPCS	PHYS/ALLOWED PRAC CERT MCR-COV HHS UNDER HH POC	N	NA
ALOHAC Q3 2025	Home Health	G0181	HCPCS	PHYS/ALW PRAC SUP PT RCV MCR-COV SVCS PROV P HHA	N	NA
ALOHAC Q3 2025	Other	G0182	HCPCS	PHYS SUPV PT UNDER MEDICARE-APPROVED HOSPICE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	G0183	HCPCS	QUANTITATIVE SOFTWARE MEASUREMENTS CARDIAC VOL	N	NA
ALOHAC Q3 2025	Diagnostic Testing	G0219	HCPCS	PET IMAG WHOLE BODY; MELANOMA NON-COVR INDICATS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	G0235	HCPCS	PET IMAGING ANY SITE NOT OTHERWISE SPECIFIED	N	NA
ALOHAC Q3 2025	Other	G0237	HCPCS	MUSCLES FACE TO FACE ONE ON ONE EACH 15 MINUTES	N	NA

ALOHAC Q3 2025	Other	G0238	HCPCS	TX PROC IMPRV RESP FUNCT NOT G0237 FCE-FCE 15MIN	N	NA
ALOHAC Q3 2025	Other	G0239	HCPCS	TX PROC IMPRV RESP FUNCT/INCR RESP MUSC 2/> IND	N	NA
ALOHAC Q3 2025	HCBS	G0248	HCPCS	DEMO HOME INR MON PT W/MECH HT VALVE CAF/VTE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	G0248	HCPCS	DEMO HOME INR MON PT W/MECH HT VALVE CAF/VTE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	G0249	HCPCS	PRVS TEST MATL & EQUIP HOME INR MON; ONCE A WEEK	N	NA
ALOHAC Q3 2025	Diagnostic Testing	G0250	HCPCS	PHYS REV INTEPR & PT MGMT HOME INR MON; 1 A WEEK	N	NA
ALOHAC Q3 2025	Diagnostic Testing	G0252	HCPCS	PET IMAG INIT DX BREST CA&/SURG PLAN NOT COV MCR	N	NA
ALOHAC Q3 2025	Other	G0269	HCPCS	PLCMT OCCL DEVC VENUS/ART POST SURG/INTRVNL PROC	N	NA
ALOHAC Q3 2025	Other	G0276	HCPCS	PILD/PLACEBO CONTROL CLIN TR	N	NA
ALOHAC Q3 2025	Outpatient Hosp	G0277	HCPCS	HPO UND PRESS FULL BODY CHMBR PER 30 MIN INT	N	NA
ALOHAC Q3 2025	Physician Services	G0289	HCPCS	SCOPE KNEE REMV FB/SHAV TM OTH SURG DIFF CMPRTMT	N	NA
ALOHAC Q3 2025	Other	G0293	HCPCS	NONCOVR SURG CONSC SEDAT ANES-MCR QUAL TRIAL-DAY	N	NA
ALOHAC Q3 2025	Other	G0294	HCPCS	NONCOVR PROC NO ANES/LOC ANES-MCR QUAL TRIAL-DAY	N	NA
ALOHAC Q3 2025	Other	G0295	HCPCS	ELECMAGNET TX 1/>AREA WND CARE NOT G0329/OTH USE	N	NA
ALOHAC Q3 2025	Home Health	G0299	HCPCS	DIRECT SNS RN HOME HEALTH/HOSPICE SET EA 15 MIN	N	NA
ALOHAC Q3 2025	Home Health	G0300	HCPCS	DIRECT SNS LPN HOME HLTH/HOSPICE SET EA 15 MIN	N	NA
ALOHAC Q3 2025	Physician Services	G0302	HCPCS	PRE-OP PULM SURG SRVC PREP LVRS CMPL COURSE SRVC	N	NA
ALOHAC Q3 2025	Physician Services	G0303	HCPCS	PRE-OP PULM SURG SRVC PREP LVRS 10-15 DA SRVC	N	NA
ALOHAC Q3 2025	Other	G0304	HCPCS	PRE-OP PULM SURG PREP LVRS 1-9 DA SRVC	N	NA
ALOHAC Q3 2025	Physician Services	G0305	HCPCS	POST-D/C PULM SURG AFTER LVRS MINI 6 DAYS SRVC	N	NA
ALOHAC Q3 2025	Diagnostic Testing	G0306	HCPCS	COMPLETE CBC AUTOMATED&AUTOMATED WBC DIFF COUNT	N	NA
ALOHAC Q3 2025	Diagnostic Testing	G0307	HCPCS	COMPLETE CBC AUTOMATED	N	NA
ALOHAC Q3 2025	Other	G0329	HCPCS	ELECMAGNET TX ULCERS NOT HEALING 30 DAYS CARE	N	NA
ALOHAC Q3 2025	Other	G0330	HCPCS	FAC SVCS DNTL REHAB PROC ON PT WHO RQRS MON ANES	N	NA
ALOHAC Q3 2025	Other	G0337	HCPCS	HOSPICE EVALUATION & CNSL SERVICES PREELECTION	N	NA
ALOHAC Q3 2025	Diagnostic Testing	G0339	HCPCS	IMAGE GUID ROBOTIC ACCEL BASE SRS CMPL TX 1 SESS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	G0340	HCPCS	IMAGE GUID ROBOTIC ACCL SRS FRAC TX LES 2-5 SESS	N	NA
ALOHAC Q3 2025	Other	G0372	HCPCS	PHYS SRVC RQR TO EST & DOC NEED PWR MOBIL DEVC	N	NA
ALOHAC Q3 2025	Other	G0398	HCPCS	HST W/TYPE II PRTBLE MON UNATTENDED MIN 7 CH	N	NA
ALOHAC Q3 2025	Other	G0400	HCPCS	HST W/TYPE IV PRTBLE MON UNATTENDED MIN 3 CH	N	NA
ALOHAC Q3 2025	Other	G0409	HCPCS	SOCL WRK & PSYCH SRVC EA 15 MIN FACE-TO-FACE IND	N	NA
ALOHAC Q3 2025	Other	G0410	HCPCS	GRP PSYCHOTX NOT MX FAM GP PART HSP/OP 45-50 MIN	N	NA
ALOHAC Q3 2025	Other	G0411	HCPCS	INTERACTV GRP PSYCHOTX PARTIAL HOSP/OP 45-50 MIN	N	NA
ALOHAC Q3 2025	Other	G0420	HCPCS	FACE TO FACE EDU SRVC OF CKD; IND PER SESS 1 HR	N	NA
ALOHAC Q3 2025	Other	G0421	HCPCS	FACE TO FACE EDU SRVC OF CKD; GRP PER SESS 1 HR	N	NA
ALOHAC Q3 2025	Rehab Services	G0422	HCPCS	INTENSIVE CARD REHAB; W/WO CONT ECG MON W/EXER	N	NA
ALOHAC Q3 2025	Rehab Services	G0423	HCPCS	INTENSIVE CARD REHAB; W/WO CONT ECG MON W/O EXER	N	NA
ALOHAC Q3 2025	Other	G0445	HCPCS	HIGH INTENS BHV CNSL PREV STI; IND ED SEX BHV;	N	NA
ALOHAC Q3 2025	Home Health	G0493	HCPCS	SKILLED SERVICES RN OBV & ASMT PT COND EA 15 MIN	N	NA
ALOHAC Q3 2025	Other	G0494	HCPCS	SKILLED SRVC LPN OBS & ASMT PT COND EA 15 MIN	N	NA
ALOHAC Q3 2025	Home Health	G0495	HCPCS	SKD SRVC RN TRAIN&/EDU PT/FAM HH/HOSPC EA 15 MIN	N	NA
ALOHAC Q3 2025	Home Health	G0496	HCPCS	SKD SRVC LPN TRAIN&/EDU PT/FAM HH/HOSPC E 15 MIN	N	NA
ALOHAC Q3 2025	Other	G0506	HCPCS	COMP ASMT OF & CARE PLNG PT RQR CC MGMT SRVC	N	NA
ALOHAC Q3 2025	Other	G0516	HCPCS	INSERTION NON-BIODEGRADABLE RX DELIVERY IMPL 4/>	N	NA
ALOHAC Q3 2025	Outpatient Hosp	G0532	HCPCS	TAKE-HOME SPLY NASAL NALMEFENE HCL;NASAL SPRAYS;	N	NA
ALOHAC Q3 2025	Outpatient Hosp	G0535	HCPCS	PATIENT NAV SRV PROV DIR/REF; EA ADD 30 MIN SRV	N	NA
ALOHAC Q3 2025	Outpatient Hosp	G0536	HCPCS	PEER REC SUP SRV PRVD DIR/REF; EA ADD 30 MIN SRV	N	NA
ALOHAC Q3 2025	Outpatient Hosp	G0537	HCPCS	ADMINISTRATION ASCVD RISK ASSESSMENT EVERY 12 MO	N	NA
ALOHAC Q3 2025	Outpatient Hosp	G0538	HCPCS	ASCVD RISK MGMT SRV; CLIN STAFF TIME; PER CAL MO	N	NA
ALOHAC Q3 2025	Outpatient Hosp	G0539	HCPCS	CAREGIVER TRAINING FACE-TO-FACE; INITIAL 30 MINS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	G0540	HCPCS	CAREGIVER TRAINING FACE-TO-FACE; EA ADD 15 MINS	N	NA

ALOHAC Q3 2025	Outpatient Hosp	G0541	HCPCS	CAREGIVER TRAINING NO PT PRSNT FTF; INIT 30 MIN	N	NA
ALOHAC Q3 2025	Outpatient Hosp	G0542	HCPCS	CAREGIVER TRNG NO PT PRSNT FTF; EA ADD 15 MINS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	G0543	HCPCS	GROUP CAREGIV TRNG NO PT PRSNT MX SETS CAREGIV	N	NA
ALOHAC Q3 2025	Outpatient Hosp	G0552	HCPCS	SUPPLY DGTL MENTAL HEALTH TX DVC PER CRS OF TX	N	NA
ALOHAC Q3 2025	Outpatient Hosp	G0553	HCPCS	FIRST 20 MIN MO TX DMHT DVC PT/CG DUR CAL MO	N	NA
ALOHAC Q3 2025	Outpatient Hosp	G0554	HCPCS	EACH ADD 20 MIN MO TX DMHT DVC PT/CG DUR CAL MO	N	NA
ALOHAC Q3 2025	Outpatient Hosp	G0555	HCPCS	PROVISION REPLC PT ELEC SYS HOME PULM AP MON	N	NA
ALOHAC Q3 2025	Outpatient Hosp	G0562	HCPCS	THERAPEUTIC RAD SIM-AIDED FLD STG; COMP PET-CT	N	NA
ALOHAC Q3 2025	Outpatient Hosp	G0563	HCPCS	SBRT TX DEL POSITRON EMISSION-BASED DELIVERY	N	NA
ALOHAC Q3 2025	Diagnostic Testing	G0566	HCPCS	3D RADIODEN VAL BN IMG ALGO DERIV FROM PREV MRI	N	NA
ALOHAC Q3 2025	Outpatient Hosp	G0567	HCPCS	INFECTIOUS AGT DETECTION NUCLEIC ACID; HEP C SCR	N	NA
ALOHAC Q3 2025	Other	G2000	HCPCS	BLINDED ADMINISTRATION OF CONVULSIVE TX PROC	N	NA
ALOHAC Q3 2025	Other	G2011	HCPCS	ALCOHOL &/SUBST MISUSE ST ASMT & BRF INT 5-14 M	N	NA
ALOHAC Q3 2025	Other	G2020	HCPCS	SERVICES FOR HIGH INTENSITY CLINICAL SRVC ASSOC	N	NA
ALOHAC Q3 2025	Other	G2082	HCPCS	OFF/OTH OP E&M EST PT PROV 56 MG ESKETAMINE N SA	N	NA
ALOHAC Q3 2025	Other	G2083	HCPCS	OFF/OTH OP E&M EST PT PROV>56 MG ESKETAMINE N SA	N	NA
ALOHAC Q3 2025	Home Health	G2168	HCPCS	SERVICES PRFRM BY PT ASST HH SETTING EA 15 MIN	N	NA
ALOHAC Q3 2025	Home Health	G2169	HCPCS	SERVICES PRFRM BY OT ASST HH SETTING EA 15 MIN	N	NA
ALOHAC Q3 2025	Other	G2172	HCPCS	ALL INCL PMT FOR SRVC REL HI COORD & INT OUD TX	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	G2215	HCPCS	TAKE HM SPLY NSL NLX 2PK LST SEP ADD CD PRIM PCR	N	NA
ALOHAC Q3 2025	Other	G2216	HCPCS	TAKE HOME SPLY INJ NLXLIST SEP ADD CD PRIM PROC	N	NA
ALOHAC Q3 2025	Physician Services	G3002	HCPCS	CPM&TX MO BDL REQ INIT FTF AL 30 M; 1ST 30 MIN	N	NA
ALOHAC Q3 2025	Physician Services	G3003	HCPCS	EACH ADD 15 MIN CPM & TX BY PHYS/OTH QHCP PER CM	N	NA
ALOHAC Q3 2025	Rehab Services	H0011	HCPCS	ALCOHOL &/ DRUG SERVICES; ACUTE DTOX RES PROG IP	N	NA
ALOHAC Q3 2025	Rehab Services	H0018	HCPCS	BHVAL HEALTH; SHORT-TERM RES W/O ROOM&BOARD-DIEM	N	NA
ALOHAC Q3 2025	Rehab Services	H0019	HCPCS	BHVAL HEALTH; LONG-TERM RES W/O ROOM&BOARD-DIEM	N	NA
ALOHAC Q3 2025	Rehab Services	H0035	HCPCS	MENTAL HEALTH PARTIAL HOSP TX < 24 HOURS	N	NA
ALOHAC Q3 2025	Behavioral Health	H0035	HCPCS	MENTAL HEALTH PARTIAL HOSP TX < 24 HOURS	N	NA
ALOHAC Q3 2025	Other	H0045	HCPCS	RESPITE CARE SERVICES NOT IN THE HOME PER DIEM	N	NA
ALOHAC Q3 2025	Other	H0051	HCPCS	TRADITIONAL HEALING SERVICE	N	NA
ALOHAC Q3 2025	Other	H2012	HCPCS	BEHAVIORAL HEALTH DAY TREATMENT PER HOUR	N	NA
ALOHAC Q3 2025	Rehab Services	H2036	HCPCS	ALCOHOL &OR OTH DRUG TREATMENT PROGRAM PER DIEM	N	NA
ALOHAC Q3 2025	Other	H2040	HCPCS	COORDINATED SC TEAM-BASED FIRST EP PSY PER MONTH	N	NA
ALOHAC Q3 2025	Other	H2041	HCPCS	COORDINATED SC TEAM-BASED FIRST EP PSY PER ENC	N	NA
ALOHAC Q3 2025	HCBS	K0001	HCPCS	STANDARD WHEELCHAIR	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0001	HCPCS	STANDARD WHEELCHAIR	N	NA
ALOHAC Q3 2025	HCBS	K0002	HCPCS	STANDARD HEMI WHEELCHAIR	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0002	HCPCS	STANDARD HEMI WHEELCHAIR	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0003	HCPCS	LIGHTWEIGHT WHEELCHAIR	N	NA
ALOHAC Q3 2025	HCBS	K0003	HCPCS	LIGHTWEIGHT WHEELCHAIR	N	NA
ALOHAC Q3 2025	HCBS	K0004	HCPCS	HIGH STRENGTH LIGHTWEIGHT WHEELCHAIR	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0004	HCPCS	HIGH STRENGTH LIGHTWEIGHT WHEELCHAIR	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0005	HCPCS	ULTRALIGHTWEIGHT WHEELCHAIR	N	NA
ALOHAC Q3 2025	HCBS	K0006	HCPCS	HEAVY-DUTY WHEELCHAIR	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0006	HCPCS	HEAVY-DUTY WHEELCHAIR	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0007	HCPCS	EXTRA HEAVY-DUTY WHEELCHAIR	N	NA
ALOHAC Q3 2025	HCBS	K0007	HCPCS	EXTRA HEAVY-DUTY WHEELCHAIR	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0008	HCPCS	CUSTOM MANUAL WHEELCHAIR/BASE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0009	HCPCS	OTHER MANUAL WHEELCHAIR/BASE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0010	HCPCS	STANDARD-WEIGHT FRAME MOTORIZED/POWER WHEELCHAIR	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0011	HCPCS	STD-WT FRME MOTRIZD/PWR WHLCHAIR W/PROG CNTRL	N	NA

ALOHAC Q3 2025	DME/Medical Supplies	K0012	HCPCS	LIGHTWEIGHT PORTABLE MOTORIZED/POWER WHEELCHAIR	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0013	HCPCS	CUSTOM MOTORIZED/POWER WHEELCHAIR BASE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0014	HCPCS	OTHER MOTORIZED/POWER WHEELCHAIR BASE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0455	HCPCS	INFUSION PUMP UNINTERRUPTED PARENTERAL ADMIN MED	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0606	HCPCS	AUTO EXT DEFIB W/INTGR ECG ANALY GARMENT TYPE	N	NA
ALOHAC Q3 2025	HCBS	K0606	HCPCS	AUTO EXT DEFIB W/INTGR ECG ANALY GARMENT TYPE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0609	HCPCS	REPL ELEC W/AUTO EXT DEFIB GARMNT TYPE ONLY EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0730	HCPCS	CONTROLLED DOSE INHALATION DRUG DELIVERY SYSTEM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0738	HCPCS	PORTABLE GASEOUS O2 SYS RENTAL; HOME COMPRESSOR	N	NA
ALOHAC Q3 2025	HCBS	K0738	HCPCS	PORTABLE GASEOUS O2 SYS RENTAL; HOME COMPRESSOR	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0739	HCPCS	REPR/SRVC DME NOT O2 RQR TECH CMPNT PER 15 MINS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0743	HCPCS	SUCTION PUMP HOME MODEL PORTABLE FOR USE WOUNDS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0800	HCPCS	PWR OP VEH GRP 1 STD PT WT CAP TO & INCL 300 LBS	N	NA
ALOHAC Q3 2025	HCBS	K0801	HCPCS	PWR OP VEH GRP 1 HEAVY DUTY PT 301 TO 450 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0801	HCPCS	PWR OP VEH GRP 1 HEAVY DUTY PT 301 TO 450 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0802	HCPCS	PWR OP VEH GRP 1 VERY HEAVY DUTY PT 451-600 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0806	HCPCS	PWR OP VEH GRP 2 STD PT WT CAP TO & INCL 300 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0807	HCPCS	PWR OP VEH GRP 2 HEAVY DUTY PT 301 TO 450 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0808	HCPCS	PWR OP VEH GRP 2 VERY HEAVY DUTY PT 451-600 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0812	HCPCS	POWER OPERATED VEHICLE NOT OTHERWISE CLASSIFIED	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0813	HCPCS	PWR WC GRP 1 STD PORT SLING SEAT PT TO 300 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0814	HCPCS	PWR WC GRP 1 STD PORT CAPT CHAIR PT TO 300 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0815	HCPCS	PWR WC GRP 1 STD SLING SEAT PT UP TO &= 300 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0816	HCPCS	PWR WC GRP 1 STD CAPTAINS CHAIR PT TO &=300 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0820	HCPCS	PWR WC GRP 2 STD PORT SLING SEAT PT TO &=300 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0821	HCPCS	PWR WC GRP 2 STD PORT CAPT CHAIR PT TO &=300 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0822	HCPCS	PWR WC GRP 2 STD SLING SEAT PT TO &=300 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0823	HCPCS	PWR WC GRP 2 STD CAPTAINS CHAIR PT TO &=300 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0824	HCPCS	PWR WC GRP 2 HEVY DUTY SLING SEAT PT 301-450 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0825	HCPCS	PWR WC GRP 2 HEVY DUTY CAPT CHAIR PT 301-450 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0826	HCPCS	PWR WC GRP 2 VRY HVY DTY SLNG SEAT PT 451-600 LB	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0827	HCPCS	PWR WC GRP 2 VRY HVY DTY CAPT CHR PT 451-600 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0828	HCPCS	PWR WC GRP 2 XTRA HVY DUTY SLING SEAT PT 601LB/>	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0829	HCPCS	PWR WC GRP 2 XTRA HVY DUTY CHAIR PT 601 LBS/>	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0830	HCPCS	PWR WC GRP 2 STD SEAT ELEV SLING PT TO &=300 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0831	HCPCS	PWR WC GRP 2 STD SEAT ELEV CAP CHR PT TO 300 LB	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0835	HCPCS	PWR WC GRP 2 STD 1 PWR SLING SEAT PT TO 300 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0836	HCPCS	PWR WC GRP 2 STD 1 PWR CAPT CHAIR PT TO 300 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0837	HCPCS	PWR WC GRP 2 HVY 1 PWR SLING SEAT PT 301-450 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0838	HCPCS	PWR WC GRP 2 HVY 1 PWR CAPT CHAIR PT 301-450 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0839	HCPCS	PWR WC GRP 2 VRY HVY 1 PWR SLING PT 451-600 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0840	HCPCS	PWR WC GRP 2 XTRA HVY 1 PWR SLING PT 601 LBS/>	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0841	HCPCS	PWR WC GRP 2 MX PWR SLING SEAT PT TO &=300 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0842	HCPCS	PWR WC GRP 2 STD MX PWR CAPT CHR PT TO &=300 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0843	HCPCS	PWR WC GRP 2 HVY MX PWR SLNG SEAT PT 301-450 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0848	HCPCS	PWR WC GRP 3 STD SLING SEAT PT TO & = 300 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0849	HCPCS	PWR WC GRP 3 STD CAPTAIN CHAIR PT TO & = 300 LBS	N	NA
ALOHAC Q3 2025	HCBS	K0850	HCPCS	PWR WC GRP 3 HVY DUTY SLING SEAT PT 301-450 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0850	HCPCS	PWR WC GRP 3 HVY DUTY SLING SEAT PT 301-450 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0851	HCPCS	PWR WC GRP 3 HVY DUTY CAPT CHAIR PT 301-450 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0852	HCPCS	PWR WC GRP 3 V HVY DUTY SLING SEAT PT 451-600 LB	N	NA

ALOHAC Q3 2025	DME/Medical Supplies	K0853	HCPCS	PWR WC GRP 3 HVY DUTY CAPT CHAIR PT 451-600 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0854	HCPCS	PWR WC GRP 3 XTRA HVY DTY SLNG SEAT PT 601 LBS/>	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0855	HCPCS	PWR WC GRP 3X HVY DTY CHR PT WT CAP 601 LB/>	N	NA
ALOHAC Q3 2025	HCBS	K0856	HCPCS	PWR WC GRP 3 STD 1 PWR SLING SEAT PT TO &=300 LB	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0856	HCPCS	PWR WC GRP 3 STD 1 PWR SLING SEAT PT TO &=300 LB	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0857	HCPCS	PWR WC GRP 3 STD 1 PWR CAPT CHAIR PT TO &=300 LB	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0858	HCPCS	PWR WC GRP 3 HD 1 PWR SLING SEAT PT 301-450 LBS	N	NA
ALOHAC Q3 2025	HCBS	K0858	HCPCS	PWR WC GRP 3 HD 1 PWR SLING SEAT PT 301-450 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0859	HCPCS	PWR WC GRP 3 HD 1 PWR CAPT CHAIR PT 301-450 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0860	HCPCS	PWR WC GRP 3 V HD 1 PWR SLING SEAT PT 451-600 LB	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0861	HCPCS	PWR WC GRP 3 STD MX PWR SLNG SEAT PT TO &=300 LB	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0862	HCPCS	PWR WC GRP 3 HD MX PWR SLING SEAT PT 301-450 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0863	HCPCS	PWR WC GRP 3 V HD MX PWR SLNG SEAT PT 451-600 LB	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0864	HCPCS	PWR WC GRP 3 XTR HD MX PWR SLNG SEAT PT 601 LB/>	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0868	HCPCS	PWR WC GRP 4 STD SLING SEAT PT TO & = 300 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0869	HCPCS	PWR WC GRP 4 STD CAPTAIN CHAIR PT TO & = 300 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0870	HCPCS	PWR WC GRP 4 HVY DUTY SLING SEAT PT 301-450 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0871	HCPCS	PWR WC GRP 4 V HVY DUTY SLING SEAT PT 451-600 LB	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0877	HCPCS	PWR WC GRP 4 STD 1 PWR SLING SEAT PT TO &=300 LB	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0878	HCPCS	PWR WC GRP 4 STD 1 PWR CAPT CHAIR PT TO &=300 LB	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0879	HCPCS	PWR WC GRP 4 HD 1 PWR SLING SEAT PT 301-450 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0880	HCPCS	PWR WC GRP 4 V HD 1 PWR SLING SEAT PT 451-600 LB	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0884	HCPCS	PWR WC GRP 4 STD MX PWR SLNG SEAT PT TO &=300 LB	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0885	HCPCS	PWR WC GRP 4 STD MX PWR CAPT CHR PT TO &=300 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0886	HCPCS	PWR WC GRP 4 HD MX PWR SLING SEAT PT 301-450 LBS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0890	HCPCS	PWR WC GRP 5 PED 1 PWR SLING SEAT PT TO &=125 LB	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0891	HCPCS	PWR WC GRP 5 PED MX PWR SLNG SEAT PT TO &=125 LB	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0898	HCPCS	POWER WHEELCHAIR NOT OTHERWISE CLASSIFIED	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0899	HCPCS	PWR MOBILTY DVC NOT CODED DME PDAC/NOT MEET CRIT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K0900	HCPCS	CUSTOMIZED DME OTHER THAN WHEELCHAIR	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K1004	HCPCS	LOW FREQ US DIATHERMY TREATMENT DVC FOR HOME USE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K1007	HCPCS	BIL HKAFO DEVC PWR INCL PELV COMP UP KNEE JOINTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K1027	HCPCS	ORAL DEV/APPL RED U AW COL WO F MCH HNG CSTM FAB	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K1030	HCPCS	EXT RCHG SYS BAT USE IM CARD CCM GEN REPLC ONLY	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	K1036	HCPCS	SUPPLIES & ACCESSORIES LOW FREQ US DIA TX DVC PM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L0112	HCPCS	CRANIL CERV ORTHOS CONGN TORTICOLLIS TYPE CUSTOM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L0170	HCPCS	CERVICAL COLLAR MOLDED TO PATIENT MODEL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L0180	HCPCS	CERV MX POST COLLAR OCCIP/MAND SUPPORTS ADJUSTBL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L0190	HCPCS	CERV MX POST COLLR OCCIP/MAND SUPP ADJ CERV BARS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L0200	HCPCS	CERV MX POST COLLR OCCIP/MAND ADJ CERV&THOR EXT	N	NA
ALOHAC Q3 2025	HCBS	L0200	HCPCS	CERV MX POST COLLR OCCIP/MAND ADJ CERV&THOR EXT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L0458	HCPCS	TLSO TRIPLANAR 2 RIGD SHELL ANT TO XIPHOID PRFAB	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L0460	HCPCS	TLSO TRIPLANAR 2 SHELL ANT TO STERNL NOTCH PRFAB	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L0462	HCPCS	TLSO TRIPLANAR 3 SHELL ANT TO STERNL NOTCH PRFAB	N	NA
ALOHAC Q3 2025	HCBS	L0464	HCPCS	TLSO TRIPLANAR 4 SHELL ANT TO STERNL NOTCH PRFAB	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L0464	HCPCS	TLSO TRIPLANAR 4 SHELL ANT TO STERNL NOTCH PRFAB	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L0470	HCPCS	TLSO TRIPLANAR POST FRME&ANT APRON W/STRAP PRFAB	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L0472	HCPCS	TLSO TRIPLANAR HYPREXT RIGD ANT&LAT FRME PRFAB	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L0480	HCPCS	TLSO TRIPLANAR 1 PIECE W/O INTERFCE LINER CSTM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L0482	HCPCS	TLSO TRIPLANAR 1 PIECE W/INTERFCE LINER CSTM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L0484	HCPCS	TLSO TRIPLANAR 2 PIECE W/O INTERFCE LINER CSTM	N	NA

ALOHAC	Q3 2025	DME/Medical Supplies	L0486	HCPCS	TLSO TRIPLANAR 2 PIECE W/INTERFCE LINER CSTM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L0488	HCPCS	TLSO TRIPLANAR 1 PIECE W/INTERFCE LINER PRFAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L0636	HCPCS	LSO SAGITTAL-CORONL CNTRL FLEX RIGID POST CUSTOM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L0638	HCPCS	LUMB-SACRAL ORTHOS SAG-COR CNTRL RIGD A&P CUSTOM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L0640	HCPCS	LSO SAGITTAL-CORONAL RIGID SHELL/PANEL CUSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L0650	HCPCS	LSO SAGITTAL-CORONAL CONTRL RIGD ANT POST PANELS	N	NA
ALOHAC	Q3 2025	HCBS	L0650	HCPCS	LSO SAGITTAL-CORONAL CONTRL RIGD ANT POST PANELS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L0651	HCPCS	LSO SAGITTAL-CORONAL CONTROL RIGD SHELLS/PANELS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L0700	HCPCS	CTLSO ANT-POSTERIOR-LAT CONTROL MOLDED PT MODEL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L0710	HCPCS	CTLSO ANT-POST-LAT CNTRL MOLD PT-INTRFCE MATL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L0720	HCPCS	CTLSO ANTERIOR POSTERIOR LAT CNTRL PREFAB ITEM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L0810	HCPCS	HALO PROC CERV HALO INCORPORATED IN JACKET VEST	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L0820	HCPCS	HALO PROC CERV HALO INC IN PLASTR BDY JACKET	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L0830	HCPCS	HALO PROC CERV HALO INC IN MLWAKEE TYPE ORTHOSIS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L0859	HCPCS	ADD HALO PROC MRI COMPAT SYS RINGS&PINS ANY MATL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L0978	HCPCS	AXILLARY CRUTCH EXTENSION	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1000	HCPCS	CTLSO INCLUSIVE FURNISHING INIT ORTHOS INCL MDL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1005	HCPCS	TENSION BASED SCOLIOSIS ORTHOSIS&ACCESSORY PADS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1006	HCPCS	SCOLIOSIS ORTHOSIS SAGITTAL-CORONAL CONTROL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1110	HCPCS	ADD CTLSO/SCOLIOS RING FLNGE MOLD PT MDL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1200	HCPCS	TLSO INCLUSIVE FURNISHING INITIAL ORTHOSIS ONLY	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1230	HCPCS	ADDITION TO TLSO MILWAUKEE TYPE SUPERSTRUCTURE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1300	HCPCS	OTH SCOLIOSIS PROC BODY JACKET MOLDED PT MODEL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1310	HCPCS	OTH SCOLIOSIS PROC POSTOPERATIVE BODY JACKET	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1320	HCPCS	THORACIC PC ORTHOSIS STERNAL COMP CUSTOM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1653	HCPCS	HIP ORTHOSIS BIL TH CUFFS ADJ ABD SPRD BAR ADLT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1680	HCPCS	HIP ORTHOS DYN PELV CONTROL THIGH CUFF CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1681	HCPCS	HO BIL HIP JTS & TH CUFFS ADJ FLEX CTRL HIP JNT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1685	HCPCS	HIP ORTHOS ABDCT CNTRL POSTOP HIP ABDCT CSTM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1686	HCPCS	HIP ORTHOS ABDUCT CNTRL POSTOP HIP PRFAB-FIT&ADJ	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1690	HCPCS	COMB BIL LUMBO-SAC HIP FEM ORTHOS PRFB W/FIT&ADJ	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1700	HCPCS	LEGG PERTHES ORTHOSIS TORONTO CUSTOM FABRICATED	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1710	HCPCS	LEGG PERTHES ORTHOSIS NEWINGTON CUSTOM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1720	HCPCS	LEGG PERTHES ORTHOSIS TRILAT TACHDIJAN CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1730	HCPCS	LEGG PERTHES ORTHOSIS SCOTTISH RITE CUSTOM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1755	HCPCS	LEGG PERTHES ORTHOSIS PATTEN BOTTOM CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1821	HCPCS	KNEE ORTHOSIS ELAS WITH CONDYLAR PADS AND JOINTS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1834	HCPCS	KO WITHOUT KNEE JOINT RIGID CUSTOM FABRICATED	N	NA
ALOHAC	Q3 2025	HCBS	L1840	HCPCS	KO DEROTATION MEDIAL-LATERAL ACL CUSTOM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1840	HCPCS	KO DEROTATION MEDIAL-LATERAL ACL CUSTOM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1844	HCPCS	KNEE ORTHOSIS SINGLE UPRIGHT THIGH & CALF CUSTOM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1846	HCPCS	KNEE ORTHOSIS DOUBLE UPRIGHT THIGH & CALF CUSTOM	N	NA
ALOHAC	Q3 2025	HCBS	L1846	HCPCS	KNEE ORTHOSIS DOUBLE UPRIGHT THIGH & CALF CUSTOM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1851	HCPCS	KNEE ORTHOSIS SINGLE UPRIGHT THIGH AND CALF	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1852	HCPCS	KNEE ORTHOSIS DOUBLE UPRIGHT THIGH AND CALF	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1860	HCPCS	KNEE ORTHOS MOD SUPRACONDYLR PROS SOCKT CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1904	HCPCS	ANKLE ORTH ANKLE GAUNTLET/SIMILAR CUSTOM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1907	HCPCS	ANKLE ORTHOSIS SUPRAMALLEOLAR WITH STRAPS CUSTOM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1910	HCPCS	AFO POST 1 BAR CLASP ATTCH SHOE COUNTER PRFAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1932	HCPCS	ANKLE FO RIGID ANT TIB TC FIBER/=MATL CUSTOM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1933	HCPCS	AFO RGD ANT TIB SECT TTL CO FIB/=MATL PREFAB OTS	N	NA

ALOHAC	Q3 2025	HCBS	L1940	HCPCS	ANK FT ORTHOSIS PLASTIC/OTH MATERIAL CUSTOM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1940	HCPCS	ANK FT ORTHOSIS PLASTIC/OTH MATERIAL CUSTOM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1945	HCPCS	AFO MOLD PT MDL PLSTC RIGD ANT TIBL SECT CSTM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1950	HCPCS	ANKLE FOOT ORTHOSIS SPIRAL PLASTIC CUSTOM-FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1951	HCPCS	ANKLE FOOT ORTHOSIS SPIRAL PREFABRICATED CUSTOM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1952	HCPCS	AFO SPIRAL PLASTIC/OTH MATL PREFAB OFF THE SHELF	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1960	HCPCS	AFO POSTERIOR SOLID ANK PLASTIC CUSTOM FAB	N	NA
ALOHAC	Q3 2025	HCBS	L1960	HCPCS	AFO POSTERIOR SOLID ANK PLASTIC CUSTOM FAB	N	NA
ALOHAC	Q3 2025	HCBS	L1970	HCPCS	AFO PLASTIC WITH ANKLE JOINT CUSTOM FABRICATED	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1970	HCPCS	AFO PLASTIC WITH ANKLE JOINT CUSTOM FABRICATED	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1980	HCPCS	AFO 1 UPRT FREE PLANTR DORSIFLX SOLID STIRUP FAB	N	NA
ALOHAC	Q3 2025	HCBS	L1990	HCPCS	AFO DBL UPRT PLANTR DORSIFLX SOLID STIRUP CSTM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L1990	HCPCS	AFO DBL UPRT PLANTR DORSIFLX SOLID STIRUP CSTM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2000	HCPCS	KAFO 1 UPRT FREE KNEE FREE ANK SOLID STIRUP CSTM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2005	HCPCS	KAFO ANY MATL AUTO LOCK&SWNG RLSE W/ANK JNT CSTM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2006	HCPCS	KAF DVC ANY MATERIAL ADJUSTABILITY CUSTOM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2010	HCPCS	KAFO 1 UPRT SOLID STIRUP W/O KNEE JNT CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2020	HCPCS	KAFO DBL UPRT SOLID STIRUP THI&CALF CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2030	HCPCS	KAFO DBL UPRT SOLID STIRUP W/O KNEE JNT CSTM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2034	HCPCS	KAFO PLASTIC MED LAT ROTAT CNTRL CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2036	HCPCS	KAFO FULL PLASTIC DOUBLE UPRIGHT CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2037	HCPCS	KAFO FULL PLASTIC SINGLE UPRIGHT CUSTOM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2038	HCPCS	KAFO FULL PLASTIC MX-AXIS ANKLE CUSTOM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2050	HCPCS	HKAFO TORSION CNTRL BIL TORSION CABLES CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2060	HCPCS	HKAFO TORSION CNTRL BIL TORSION BALL BEAR CSTM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2080	HCPCS	HKAFO TORSION CNTRL UNI TORSION CABLE CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2090	HCPCS	HKAFO UNI TORSION CABLE BALL BEAR CSTM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2106	HCPCS	AFO FX ORTHOSIS TIB FX CAST THERMOPLSTC CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2108	HCPCS	AFO FX ORTHOSIS TIB FX CAST ORTHOSIS CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2112	HCPCS	AFO FX ORTHO TIB FX ORTHO SFT PRFAB W/FIT & ADJ	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2114	HCPCS	AFO TIBL FX ORTHOS SEMI-RIGD PRFAB W/FIT & ADJ	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2116	HCPCS	AFO TIB FX ORTHOSIS RIGID PRFAB W/FIT & ADJ	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2126	HCPCS	KAFO FEM FX CAST ORTHOSIS THERMOPLSTC CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2128	HCPCS	KAFO FX ORTHOSIS FEM FX CAST ORTHOSIS CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2132	HCPCS	KAFO FEM FX CAST ORTHOSIS SFT PRFAB W/FIT & ADJ	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2134	HCPCS	KAFO FEM FX CAST ORTHOS SEMI-RIGD PRFAB FIT&ADJ	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2136	HCPCS	KAFO FEM FX CAST ORTHOSIS RIGD PRFAB W/FIT & ADJ	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2192	HCPCS	ADD LW EXT ORTHOSIS HIP JNT THI FLNGE&PELV BELT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2250	HCPCS	ADD LOW EXTREM FT PLATE MOLD PT MDL STIRUP ATTCH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2260	HCPCS	ADDITION LOWER EXTREM REINFORCED SOLID STIRRUP	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2280	HCPCS	ADDITION TO LOWER EXTREMITY MOLDED INNER BOOT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2300	HCPCS	ADDITION LOW EXTREM ABDUCT BAR JOINTED ADJUSTBLE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2330	HCPCS	ADD LOW EXT LACER MOLD PT MDL CSTM ORTHOSIS ONLY	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2340	HCPCS	ADD LOW EXTREM PRETIBL SHELL MOLDED PT MODEL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2350	HCPCS	ADD LOW EXTREM PROSTHETIC TYPE SOCKT MOLD PT MDL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2370	HCPCS	ADDITION TO LOWER EXTREMITY PATTEN BOTTOM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2500	HCPCS	ADD LW EXTRM THI/WT BEAR GLUTL/ISCH WT BEAR RING	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2510	HCPCS	ADD LW EXTRM THI/WT BEAR QUADRI-LAT BRIM MOLD PT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2520	HCPCS	ADD LW EXTRM THI/WT BEAR QUADRI-LAT BRIM CSTM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2525	HCPCS	ADD LW EXTRM ISCH M-L BRIM MOLD PT MDL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2526	HCPCS	ADD LW EXTRM ISCH M-L BRIM CSTM FIT	N	NA

ALOHAC	Q3 2025	DME/Medical Supplies	L2530	HCPCS	ADD LOW EXTREM THIGH/WEIGHT BEAR LACER NONMOLDED	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2540	HCPCS	ADD LOW EXTREM THI/WEIGHT BEAR LACER MOLD PT MDL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2550	HCPCS	ADD LOW EXTREM THIGH/WEIGHT BEAR HIGH ROLL CUFF	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2570	HCPCS	ADD LW EXT PELV HIP JNT CLEVIS TYPE TWO PSTN JNT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2580	HCPCS	ADDITION LOWER EXTREM PELV CONTROL PELV SLING	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2600	HCPCS	ADD LW EXT PELV HIP JNT CLEVIS/THRUST BEAR FREE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2610	HCPCS	ADD LW EXT PELV HIP JNT CLEVIS/THRUST BEAR LOCK	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2620	HCPCS	ADD LOW EXTREM PELV CNTRL HIP JOINT HEVY-DUTY EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2622	HCPCS	ADD LOW EXTRM PELV CNTRL HIP JNT ADJUSTBL FLX EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2624	HCPCS	ADD LW EXTRM PELV HIP JNT ADJ FLX EXT ABDUCT EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2627	HCPCS	ADD LW EXT PELV PLSTC MOLD PT MDL HIP JNT&CABLES	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2628	HCPCS	ADD LW EXT PELV METL FRME RECIP HIP JNT&CABLES	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L2640	HCPCS	ADDITION LOW EXTREM PELV CONTROL BAND & BELT BIL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3161	HCPCS	FOOT ADDUCTUS POSITIONING DEVICE ADJUSTABLE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3250	HCPCS	ORTHOPED FTWEAR CSTM MOLD REMV INNR MOLD PROSTH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3671	HCPCS	SHOULDER ORTHOSIS JOINT DESIGN W/O JNTS CUSTOM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3674	HCPCS	SHOULDER ORTHOSIS ABDUCT PSTN THOR COMP CUSTOM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3720	HCPCS	EO DBL UPRT W/FORARM/ARM CUFF FREE MOT CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3730	HCPCS	EO DBL UPRT W/CUFF EXT/FLX ASST CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3740	HCPCS	EO DBL UPRT W/CUFF ADJ LOCK W/ACTV CNTRL CSTM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3760	HCPCS	ELBOW ORTHOSIS ADJ POS LOCKING JOINT PREFAB ITEM	N	NA
ALOHAC	Q3 2025	HCBS	L3760	HCPCS	ELBOW ORTHOSIS ADJ POS LOCKING JOINT PREFAB ITEM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3763	HCPCS	EWHO RIGID W/O JOINTS CUSTOM FABRICATED	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3764	HCPCS	EWHO INCL 1/MORE NONTORSION JOINTS CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3765	HCPCS	EWHFO RIGID W/O JOINTS CUSTOM FABRICATED	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3766	HCPCS	EWHFO INCL 1/MORE NONTORSION JOINTS CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3808	HCPCS	WRIST HAND FINGER ORTHOSIS RIGID W/O JNT; CUSTOM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3891	HCPCS	ADD UP EXT JNT WRIST/ELB CSTM FAB ORTHOT ONLY EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3900	HCPCS	WHFO DYN FLEXOR HINGE WRST/FNGR DRIVEN CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3901	HCPCS	WHFO DYN FLEXOR HINGE CABLE DRIVEN CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3904	HCPCS	WHFO EXTERNAL POWERED ELECTRIC CUSTOM FABRICATED	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3905	HCPCS	WHO INCL 1/MORE NONTORSION JOINTS CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3906	HCPCS	WHO W/O JNT MAY INCL SFT INTRFCE STRAPS CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3961	HCPCS	SEWHO SHOULDER CAP DESIGN W/O JOINTS CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3962	HCPCS	SEWHO ABDUCT PSTN ERBS PALS DESN PRFAB W/FIT&ADJ	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3967	HCPCS	SEWHO ABDUCTION POSITIONING W/O JOINTS CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3971	HCPCS	SEWHO SHOULDER CAP DESIGN CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3973	HCPCS	SEWHO ABDUCT PSTN THOR CMPNT&SUPP BAR CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3975	HCPCS	SEWHFO SHOULDER CAP DESIGN W/O JOINTS CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3976	HCPCS	SEWHFO ABDUCT PSTN THOR CMPNT W/O JOINTS CUS FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3977	HCPCS	SEWHFO SHOULD CAP DESIGN CUSTOM FAB ELASTIC BAND	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3978	HCPCS	SEWHFO ABDUCT PSTN THOR CMPNT&SUPP BAR CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L3981	HCPCS	UPPER EXTREMITY FX ORTHOSIS HUMERAL PREF STRAPS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L4000	HCPCS	REPLACE GIRDLE FOR SPINAL ORTHOSIS CTLSO OR SO	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L4010	HCPCS	REPLACE TRILATERAL SOCKET BRIM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L4020	HCPCS	REPLACE QUADRILAT SOCKET BRIM MOLDED PT MODEL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L4030	HCPCS	REPLACE QUADRILATERAL SOCKET BRIM CUSTOM FITTED	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L4040	HCPCS	REPLACE MOLDED THI LACER CSTM FAB ORTHOSIS ONLY	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L4045	HCPCS	REPLACE NONMOLD THI LACER CSTM FAB ORTHOSIS ONLY	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L4050	HCPCS	REPLACE MOLDED CALF LACER CSTM FAB ORTHOSIS ONLY	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L4055	HCPCS	REPLACE NONMOLD CALF LACER CSTM FAB ORTHOS ONLY	N	NA

ALOHAC Q3 2025	DME/Medical Supplies	L4060	HCPCS	REPLACE HIGH ROLL CUFF	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L4070	HCPCS	REPLACE PROXIMAL AND DISTAL UPRIGHT FOR KAFO	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L4130	HCPCS	REPLACE PRETIBIAL SHELL	N	NA
ALOHAC Q3 2025	HCBS	L4631	HCPCS	AFO WALK BOOT TYP ROCKR BOTTM ANT TIB SHELL CSTM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L4631	HCPCS	AFO WALK BOOT TYP ROCKR BOTTM ANT TIB SHELL CSTM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5010	HCPCS	PARTIAL FT MOLDED SOCKET ANK HEIGHT W/TOE FILLER	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5020	HCPCS	PART FT MOLDED SOCKET TIB TUBERCLE HT W/TOE FIL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5050	HCPCS	ANKLE SYMES MOLDED SOCKET SACH FOOT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5060	HCPCS	ANK SYMES METL FRME MOLD LEATHR SOCKT ARTIC ANK	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5100	HCPCS	BELOW KNEE MOLDED SOCKET SHIN SACH FOOT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5105	HCPCS	BELOW KNEE PLSTC SOCKT JNT&THIGH LACER SACH FOOT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5150	HCPCS	KNEE DISRTC MOLD SOCKT EXT KNEE JNT SHIN SACH FT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5160	HCPCS	KNEE DISARTIC MOLD SOCKT BENT KNEE EXT KNEE JNT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5200	HCPCS	ABOVE KNEE MOLD SOCKT 1 AXIS CONSTANT FRICTION	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5210	HCPCS	ABOVE KNEE SHRT PROSTH NO KNEE JNT NO ANK JNT EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5220	HCPCS	ABOVE KNEE SHORT PROSTH W/ARTIC ANK/FOOT DYN	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5230	HCPCS	ABOVE KNEE PROXIMAL FEM FOCAL DEFIC SACH FOOT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5250	HCPCS	HIP DISARTIC CANADIAN TYPE; MOLD SOCKT HIP JNT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5270	HCPCS	HIP DISRTC TILT TABLE; MOLD SCKT LOCK HIP JNT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5280	HCPCS	HEMIPELVECT CANADIAN TYPE; MOLD SOCKT HIP JNT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5301	HCPCS	BELOW KNEE MOLD SOCKET SHIN SACH FT ENDOSKEL SYS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5312	HCPCS	KNEE DISARTIC MOLD SOCKET 1 AXIS KNEE SACH FOOT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5321	HCPCS	ABOVE KNEE OPEN END SACH FT ENDO SYS 1 AXIS KNEE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5331	HCPCS	JOINT SINGLE AXIS KNEE SACH FOOT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5341	HCPCS	SINGLE AXIS KNEE SACH FOOT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5400	HCPCS	IMMED PSTSRG/ERLY FIT APPLY RIGD DRSS W/1 CHG BK	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5410	HCPCS	IMMD POSTSURG APPL RIGD DRS BK W/EA ADD CAST CHG	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5420	HCPCS	IMMED POSTSURG INIT RIGD DRESS 1 CHG AK/KNEE	N	NA
ALOHAC Q3 2025	Physician Services	L5430	HCPCS	IMMED POSTSURG INIT RIGD DRSG AK EA ADD CAST CHG	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5450	HCPCS	IMMED POSTSURG APPLIC NONWT BEAR RIGD BELW KNEE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5460	HCPCS	IMMED POSTSURG APPLIC NONWT BEAR RIGD ABOVE KNEE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5500	HCPCS	INIT BELOW KNEE PTB SOCKET NON-ALIGN DIR FORMED	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5505	HCPCS	INIT ABVE KNEE-DISARTC ISCH LEVL SOCKT NON-ALIGN	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5510	HCPCS	PREP BELOW KNEE PTB SOCKET NON-ALIGN MOLD MODEL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5520	HCPCS	PREP BK PTB SCKT NON-ALIGN THERMOPLSTC/=DIR FORM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5530	HCPCS	PREP BK PTB SCKT NON-ALIGN THERMOPLSTC/=MOLD MDL	N	NA
ALOHAC Q3 2025	HCBS	L5530	HCPCS	PREP BK PTB SCKT NON-ALIGN THERMOPLSTC/=MOLD MDL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5535	HCPCS	PREP BELOW KNEE PTB NON-ALIGN PRFAB ADJ OPEN END	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5540	HCPCS	PREP BK PTB SCKT NON-ALIGN LAMNATD SCKT MOLD MDL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5560	HCPCS	PREP AK-DISRTC ISCH LEVL PLASTER SOCKET MOLD MDL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5570	HCPCS	PREP AK-DISRTC ISCH LEVL THERMOPLSTC/=DIR FORMED	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5580	HCPCS	PREP AK DISARTIC NON-ALIGN THERMOPLSTC/=MOLD MDL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5585	HCPCS	PREP AK-DISARTC NON-ALIGN PRFAB ADJ OPN END SCKT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5590	HCPCS	PREP AK-DISARTIC NON-ALIGN LAMINATED SOCKET MOLD	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5595	HCPCS	PREP HIP DISARTIC-HEMIPELVECT THERMOPLSTC/=MOLD	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5600	HCPCS	PREP HIP DISARTIC-HEMIPELVECT LAMINATD SCKT MOLD	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5610	HCPCS	ADD LW EXTRM ENDO SYS ABVE KNEE HYDRACADENCE SYS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5611	HCPCS	ADD LW EXTRM ENDO AK-DISRTC 4-BAR LINK W/FRICT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5613	HCPCS	ADD LOW EXTRM ENDO AK-DISARTIC 4-BAR W/HYDRAULIC	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5614	HCPCS	ADD LOW EXT EXOSKEL SYS AK-DISARTC 4-BAR PNEUMAT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L5615	HCPCS	ADD ENDOSKEL KNEE-SHIN SYS 4 BAR LINK/MULTIAXIAL	N	NA

ALOHAC	Q3 2025	DME/Medical Supplies	L5616	HCPCS	ADD LOW EXTRM ENDO AK UNIVERSAL MXPLX SYS FRICT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5617	HCPCS	ADD LOW EXTREMITY QUICK CHG SLF-ALIGN U AK/BK EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5618	HCPCS	ADDITION TO LOWER EXTREMITY TEST SOCKET SYMES	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5620	HCPCS	ADDITION LOWER EXTREMITY TEST SOCKET BELOW KNEE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5622	HCPCS	ADDITION LOWER EXTREM TEST SOCKET KNEE DISARTIC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5624	HCPCS	ADDITION LOWER EXTREMITY TEST SOCKET ABOVE KNEE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5626	HCPCS	ADDITION LOWER EXTREM TEST SOCKET HIP DISARTIC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5628	HCPCS	ADDITION LOWER EXTREM TEST SOCKET HEMIPELVECTOMY	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5629	HCPCS	ADDITION LOWER EXTREM BELOW KNEE ACRYLIC SOCKET	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5630	HCPCS	ADD LOW EXTREM SYMES TYPE EXPANDABLE WALL SOCKT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5631	HCPCS	ADD LOW EXT ABVE KNEE/KNEE DISARTIC ACRYLC SOCKT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5632	HCPCS	ADD LOW EXTREM SYMES TYPE PTB BRIM DESIGN SOCKT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5634	HCPCS	ADD LOW EXTREM SYMES TYPE POST OPENING SOCKT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5636	HCPCS	ADDITION LOW EXTREM SYMES TYPE MED OPENING SOCKT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5637	HCPCS	ADDITION LOWER EXTREMITY BELOW KNEE TOTAL CONTCT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5638	HCPCS	ADDITION LOWER EXTREM BELOW KNEE LEATHER SOCKET	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5639	HCPCS	ADDITION LOWER EXTREMITY BELOW KNEE WOOD SOCKET	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5640	HCPCS	ADDITION LOWER EXTREM KNEE DISARTIC LEATHR SOCKT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5642	HCPCS	ADDITION LOWER EXTREM ABOVE KNEE LEATHER SOCKET	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5643	HCPCS	ADD LW EXT HIP DISARTIC FLX INNR SOCKT EXT FRAME	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5644	HCPCS	ADDITION LOWER EXTREMITY ABOVE KNEE WOOD SOCKET	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5645	HCPCS	ADD LW EXT BELW KNEE FLXIBLE INNR SOCKT EXT FRME	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5646	HCPCS	ADD LOW EXT BELOW KNEE AIR FL GEL/= CUSHN SOCKT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5647	HCPCS	ADDITION LOWER EXTREM BELOW KNEE SUCTION SOCKET	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5648	HCPCS	ADD LOW EXT ABOVE KNEE AIR FL GEL/= CUSHN SOCKET	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5649	HCPCS	ADD LW EXT ISCHIAL CONTAINMENT/NARROW M-L SOCKET	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5650	HCPCS	ADD LOW EXT TOTAL CONTACT ABVE KNEE/KNEE DISARTC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5651	HCPCS	ADD LW EXT ABVE KNEE FLXIBLE INNR SOCKT EXT FRME	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5652	HCPCS	ADD LOW EXTREM SUCTN SUSP ABV KNEE/KNEE DISARTIC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5653	HCPCS	ADD LOW EXTREM KNEE DISARTIC XPNDABLE WALL SOCKT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5654	HCPCS	ADDITION TO LOWER EXTREMITY SOCKET INSERT SYMES	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5655	HCPCS	ADDITION LOWER EXTREM SOCKET INSERT BELOW KNEE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5656	HCPCS	ADDITION LOWER EXTREM SOCKT INSERT KNEE DISARTIC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5658	HCPCS	ADDITION LOWER EXTREM SOCKET INSERT ABOVE KNEE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5661	HCPCS	ADD LOW EXTREM SOCKT INSERT MULTIDUROMETER SYMES	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5665	HCPCS	ADD LOW EXTRM SOCKT INSRT MXIDUROMETER BELW KNEE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5666	HCPCS	ADDITION LOWER EXTREM BELOW KNEE CUFF SUSPENSION	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5668	HCPCS	ADDITION LOW EXTREM BELOW KNEE MOLDED DIST CUSHN	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5670	HCPCS	ADD LOW EXTREM BELOW KNEE MOLD SUPRACONDYLR SUSP	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5671	HCPCS	ADD LOWER EXTRM BELOW/ABOVE KNEE SUSP LOCK MECH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5672	HCPCS	ADD LOWER EXTREM BELOW KNEE REMV MED BRIM SUSP	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5673	HCPCS	ADD LWR EXT BK/AK CUSTOM FAB FOR USE W/LKG MECH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5676	HCPCS	ADD LOWER EXTREM BELW KNEE KNEE JNT 1 AXIS PAIR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5677	HCPCS	ADD LOW EXTREM BELW KNEE KNEE JNT POLYCNTRC PAIR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5678	HCPCS	ADDITION LOW EXTREM BELOW KNEE JOINT COVERS PAIR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5679	HCPCS	ADD LWR EXT BK/AK CUST FAB NOT FOR USE LKG MECH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5680	HCPCS	ADD LOW EXTREM BELOW KNEE THIGH LACER NONMOLDED	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5681	HCPCS	ADD LW EXT BK/AK CST INS CNG/ATYP TRAUM AMP INIT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5682	HCPCS	ADD LW EXTRM BELW KNEE THI LACER GLUTL/ISCH MOLD	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5683	HCPCS	ADD LW EXTR BK/AK CST FAB NO CNGN/TRAUM AMP INIT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5684	HCPCS	ADDITION LOWER EXTREMITY BELOW KNEE FORK STRAP	N	NA

ALOHAC	Q3 2025	DME/Medical Supplies	L5685	HCPCS	ADD LOW EXT PROS BELW KNEE SUSP/SEAL SLEEVE EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5686	HCPCS	ADDITION LOWER EXTREMITY BELOW KNEE BK BACK CHCK	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5688	HCPCS	ADD LOWER EXTREMITY BELOW KNEE WAIST BELT WEBBNG	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5690	HCPCS	ADD LOW EXTREM BELOW KNEE WAIST BELT PADD& LINED	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5692	HCPCS	ADD LOW EXTREM ABVE KNEE PELV CONTROL BELT LIGHT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5694	HCPCS	ADD LOW EXTREM ABVE KNEE PELV CNTRL BELT PADD&LN	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5695	HCPCS	ADD LOW EXTRM ABOVE KNEE PELV CNTRL SLV NEOPRENE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5696	HCPCS	ADD LOW EXTREM ABOVE KNEE/KNEE DISARTIC PELV JNT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5697	HCPCS	ADD LOW EXTREM ABVE KNEE/KNEE DISARTIC PELV BAND	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5698	HCPCS	ADD LOW EXTRMITY AK/KNEE DISRTC SILESIAN BANDGE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5699	HCPCS	ALL LOWER EXTREMITY PROSTHESES SHOULDER HARNESS	N	NA
ALOHAC	Q3 2025	HCBS	L5700	HCPCS	REPLACEMENT SOCKET BELOW KNEE BK MOLDED PT MODEL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5700	HCPCS	REPLACEMENT SOCKET BELOW KNEE BK MOLDED PT MODEL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5701	HCPCS	REPL SOCKT ABOVE KNEE/KNEE DISARTIC W/ATTCH PLAT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5702	HCPCS	REPLCMT SOCKT HIP DISARTIC W/HIP JNT MOLD PT MDL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5703	HCPCS	ANKLE SYMES MOLD PT MODEL SACH FOOT REPL ONLY	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5704	HCPCS	CUSTOM SHAPED PROTECTIVE COVER BELOW KNEE BK	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5705	HCPCS	CUSTOM SHAPED PROTECTIVE COVER ABOVE KNEE AK	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5706	HCPCS	CUSTOM SHAPED PROTECTIVE COVER KNEE DISARTIC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5707	HCPCS	CUSTOM SHAPED PROTECTIVE COVER HIP DISARTIC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5710	HCPCS	ADD EXOSKEL KNEE-SHIN SYSTEM 1 AXIS MANUAL LOCK	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5711	HCPCS	ADD EXOSKEL KNEE-SHIN 1 AXIS MNL LOCK ULTRA-LGHT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5712	HCPCS	ADD EXOSKEL KNEE-SHIN 1 AXIS FRICT SWING CNTRL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5714	HCPCS	ADD EXOSKEL KNEE-SHIN VARIBL FRICT SWING CNTRL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5716	HCPCS	ADD EXOSKEL KNEE-SHIN POLYCNTRC MECH STANCE LOCK	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5718	HCPCS	ADD EXOSKL KNEE-SHIN POLYCNTRC FRICT SWING CNTRL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5722	HCPCS	ADD EXOSKEL KNEE-SHIN PNEUMAT SWING FRICT CNTRL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5724	HCPCS	ADD EXOSKEL KNEE-SHIN FLUID SWING PHASE CNTRL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5726	HCPCS	ADD EXOSKEL KNEE-SHIN EXT JOINT FL SWING CNTRL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5728	HCPCS	ADD EXOSKEL KNEE-SHIN FLUID SWING&STANCE CNTRL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5780	HCPCS	ADD EXOSKL KNEE-SHIN PNEUMAT/HYDRA PNEUMAT CNTRL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5781	HCPCS	ADD LW LIMB PROS RESIDUL LIMB VOL MGMT SYS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5782	HCPCS	ADD LW LIMB PROS RESIDUL LIMB MGMT SYS HEVY DUTY	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5783	HCPCS	ADD LWR EXT MECH RESIDUAL LIMB VOLUME MGMT SYS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5785	HCPCS	ADD EXOSKEL SYSTEM BELW KNEE ULTRA-LGHT MATERIAL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5790	HCPCS	ADD EXOSKEL SYSTEM ABVE KNEE ULTRA-LGHT MATERIAL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5795	HCPCS	ADD EXOSKEL SYSTEM HIP DISARTIC ULTRA-LGHT MATL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5810	HCPCS	ADD ENDOSKEL KNEE-SHIN SYSTEM 1 AXIS MANUAL LOCK	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5811	HCPCS	ADD ENDOSKEL KNEE-SHIN MNL LOCK ULTRA-LGHT MATL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5812	HCPCS	ADD ENDOSKEL KNEE-SHIN FRICT SWING&STANCE CNTRL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5814	HCPCS	ADD ENDOSKEL KNEE-SHIN HYDRAULIC SWING MECH LOCK	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5816	HCPCS	ADD ENDOSKEL KNEE-SHIN MECH STANCE PHASE LOCK	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5818	HCPCS	ADD ENDOSKEL KNEE-SHIN FRICT SWING&STANCE CNTRL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5822	HCPCS	ADD ENDOSKEL KNEE-SHIN PNEUMAT SWING FRICT CNTRL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5824	HCPCS	ADD ENDOSKEL KNEE-SHIN FLUID SWING PHASE CNTRL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5826	HCPCS	ADD ENDO KNEE-SHIN HYDRAUL SWNG MIN HI ACTV FRME	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5827	HCPCS	ENDOSKEL KN SHIN SGL AX ELMCH SW & ST PHS CNTRL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5828	HCPCS	ADD ENDO KNEE-SHIN FL SWING&STANCE PHASE CNTRL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5830	HCPCS	ADD ENDOSKEL KNEE-SHIN PNEUMAT/SWING PHASE CNTRL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5840	HCPCS	ADD ENDO KNEE-SHIN 4-BAR LINK/MX-AXIAL PNEUMAT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5841	HCPCS	ADD ENDOSKEL KNEE-SHIN SYS PNEU SW & ST PH CTRL	N	NA

ALOHAC	Q3 2025	DME/Medical Supplies	L5845	HCPCS	ADD ENDOSKEL KNEE-SHIN STANCE FLX FEATUR ADJ	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5848	HCPCS	ADD ENDOSKEL KNEE-SHIN SYS FLUID STANCE EXTENSN	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5850	HCPCS	ADD ENDOSKEL SYS AK/HIP DISARTIC KNEE EXT ASST	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5855	HCPCS	ADD ENDOSKEL SYS HIP DISARTIC MECH HIP EXT ASST	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5856	HCPCS	ADD LOW EXT PROS KNEE-SHIN SYS SWING&STANCE PHSE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5857	HCPCS	ADD LOW EXT PROS KNEE-SHIN SYS SWING PHASE ONLY	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5858	HCPCS	ADD LW EXT PROS KNEE SHIN SYS STANCE PHASE ONLY	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5859	HCPCS	ADD LOW EXT PROS KN-SHIN PROG FLX/EXT ANY MOTOR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5910	HCPCS	ADD ENDOSKEL SYSTEM BELOW KNEE ALIGNABLE SYSTEM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5920	HCPCS	ADD ENDOSKEL SYS AK/HIP DISARTIC ALIGNABLE SYSTM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5925	HCPCS	ADD ENDOSKEL AK-DISARTIC/HIP DISARTIC MNL LOCK	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5926	HCPCS	ADD TO LE PROSTH ENDOSKEL KD AK HD ROT U ANY TYP	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5930	HCPCS	ADD ENDOSKEL SYSTEM HIGH ACTV KNEE CONTROL FRAME	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5940	HCPCS	ADD ENDOSKEL SYSTEM BELOW KNEE ULTRA-LGHT MATL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5950	HCPCS	ADD ENDOSKEL SYSTEM ABVE KNEE AK ULTRA-LGHT MATL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5960	HCPCS	ADD ENDOSKEL SYSTEM HIP DISARTIC ULTRA-LGHT MATL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5961	HCPCS	ADD ENDO SYS POLYCNTRC HIP JOINT ROTATION CNTRL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5962	HCPCS	ADD ENDOSKEL BK FLXIBLE PROTVE OUTR SURF COVRING	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5964	HCPCS	ADD ENDOSKEL AK FLEXIBLE PROTVE OUTR SURF COVER	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5966	HCPCS	ADD ENDO HIP DISRTC FLXIBL PROTVE OUTR SURF COVR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5968	HCPCS	ADD LW LIMB PROSTH MX-AXIAL ANK W/SWING PHASE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5969	HCPCS	ADDITION ENDOSKELETAL ANKLE-FOOT/ANK PWR ASSIST	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5970	HCPCS	ALL LOW EXTREM PROSTH FT EXTERNAL KEEL SACH FOOT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5971	HCPCS	ALL LOWER EXTREM PROS SACH FOOT REPLACEMENT ONLY	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5972	HCPCS	ALL LOWER EXTREMITY PROSTHESES FOOT FLEX KEEL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5973	HCPCS	ENDOSKEL ANK FOOT SYS MICRPROCSS CONTROL PWR SRC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5974	HCPCS	ALL LOWER EXTREM PROSTH FT SINGLE AXIS ANK/FOOT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5975	HCPCS	ALL LW EXTRM PRSTH COMB 1 AXIS ANK&FLXBL KEEL FT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5976	HCPCS	ALL LOWER EXTREM PROSTHESES ENERGY STORING FOOT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5978	HCPCS	ALL LOWER EXTREM PROSTH FT MULTI-AXIAL ANK/FOOT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5979	HCPCS	ALL LW EXTRM PRSTH MX-AXL ANK DYN RSPN FT 1 PECE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5980	HCPCS	ALL LOWER EXTREMITY PROSTHESES FLEX-FOOT SYSTEM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5981	HCPCS	ALL LOWER EXTREM PROSTH FLEX-WALK SYSTEM/EQUAL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5982	HCPCS	ALL EXOSKEL LOW EXTREM PROSTH AXIAL ROTAT UNIT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5984	HCPCS	ALL ENDOSKEL LOW EXT PROSTH AXIAL ROTAT UNIT ADJ	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5985	HCPCS	ALL ENDOSKEL LOW EXTREM PROSTH DYN PROSTH PYLN	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5986	HCPCS	ALL LOW EXTREM PROSTH MULTI-AXIAL ROTATION UNIT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5987	HCPCS	ALL LW XTRM PRSTH SHNK FT SYS W/VRTCL LOAD PYLN	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5988	HCPCS	ADD LW LIMB PROSTH VERTCL SHOCK RDUC PYLN FEATUR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5990	HCPCS	ADD LOW EXTREM PROSTH USER ADJUSTBLE HEEL HT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5991	HCPCS	ADDITION LWR EXT PROSTHESES OI EXTRNL PROS CONN	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L5999	HCPCS	LOWER EXTREMITY PROSTHESIS NOS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6000	HCPCS	PARTIAL HAND THUMB REMAINING	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6010	HCPCS	PARTIAL HAND LITTLE & OR RING FINGER REMAINING	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6020	HCPCS	PARTIAL HAND NO FINGER REMAINING	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6026	HCPCS	TRANSCARPAL/MC/PART HAND DISARTICULATION PROS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6028	HCPCS	PART HND F&THMB PROS AMP MCP NO INSRT DESC L6692	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6029	HCPCS	UPPER EXT ADD TEST SCKT/INTERFACE PRTL HND FNGR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6030	HCPCS	UPPER EXTREMITY ADDITION EXT FRAME PRTL HND FNGR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6031	HCPCS	REPLACEMENT SCKT/INTERFACE PRTL HND FNGR MOLDED	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6032	HCPCS	ADD UPR EXT PROS PART HND F UL MATL TI CO FIB/=	N	NA

ALOHAC	Q3 2025	DME/Medical Supplies	L6033	HCPCS	ADDITION UPPER EXT PROS PARTIAL HND ACRYLIC MATL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6037	HCPCS	IM POST SUR/EA FTG APP RGD DRSG&1 C CHG PAR HND	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6050	HCPCS	WRST DISARTIC MOLD SOCKET FLEX ELB HNG TRICP PAD	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6055	HCPCS	WRST DISARTIC MOLD SOCKT W/XPNDABLE INTERFCE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6100	HCPCS	BELW ELB MOLD SOCKT FLXIBLE ELB HINGE TRICP PAD	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6110	HCPCS	BELOW ELBOW MOLDED SOCKET	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6120	HCPCS	BELW ELB MOLD DBL WALL SCKT STEP-UP HNG 1/2 CUFF	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6130	HCPCS	BELW ELB STUMP ACTVATD LOCK HINGE HALF CUFF	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6200	HCPCS	ELB DISARTC MOLD SOCKT OUTSIDE LOCK HINGE FORARM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6205	HCPCS	ELB DISARTC MOLD SCKT W/XPND INTRFCE LOCK FORARM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6250	HCPCS	ABVE ELB MOLD DBL WALL SCKT INTRL LCK ELB FORARM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6300	HCPCS	SHLDR DISARTIC MOLD SOCKET INTRL LOCK ELB FORARM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6310	HCPCS	SHOULDER DISARTIC PASSIVE REST COMPLETE PROSTH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6320	HCPCS	SHOULDER DISART PASSIVE REST SHOULDER CAP ONLY	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6350	HCPCS	INTERSCAP THOR HUM SECT INTRL LOCK ELB FORARM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6360	HCPCS	INTERSCAPULAR THOR PASSIVE REST CMPL PROSTH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6370	HCPCS	INTERSCAPULAR THOR PASSIVE REST SHLDR CAP ONLY	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6380	HCPCS	IMMED POSTSURG RIGD DRSG 1 CAST CHG WRST DISRTC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6382	HCPCS	IMMED POSTSURG RIGD DRSG 1 CAST CHG ELB DISARTIC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6384	HCPCS	IMMED POSTSURG RIGD DRSG 1 CAST CHG SHLDR DISRTC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6386	HCPCS	IMMED POSTSURG/EARLY FIT EA ADD CAST CHG&REALIGN	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6388	HCPCS	IMMED POSTSURG/EARLY FIT APPLIC RIGID DRESS ONLY	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6400	HCPCS	BE MOLD SCKT ENDOSKEL SYS W/SFT PROSTH TISS SHAP	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6450	HCPCS	ELB DISRTC MOLD SCKT ENDOSKEL W/SFT PROSTH TISS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6500	HCPCS	ABVE ELB MOLD SCKT ENDOSKEL W/SFT PROSTH TISS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6550	HCPCS	SHLDR DISRTC MOLD SCKT ENDOSKEL W/SFT PROS TISS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6570	HCPCS	INTRSCAP THOR MOLD SCKT ENDOSKEL W/SFT PROS TISS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6580	HCPCS	PREP WRST DISRTC/BELW ELB 1 WALL PLSTC SCKT MOLD	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6582	HCPCS	PREP WRST DISRTC/BELW ELB 1 WALL SCKT DIR FORMED	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6584	HCPCS	PREP ELB DISRTC/ABVE ELB 1 WALL PLSTC SOCKT MOLD	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6586	HCPCS	PREP ELB DISRTC/ABVE ELB 1 WALL SOCKT DIR FORMED	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6588	HCPCS	PREP SHLDR DISRTC THOR 1 WALL PLSTC SCKT MOLD	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6590	HCPCS	PREP SHLDR DISRTC THOR 1 WALL SOCKET DIR FORM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6600	HCPCS	UPPER EXTREMITY ADDITIONS POLYCENTRIC HINGE PAIR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6605	HCPCS	UPPER EXTREMITY ADD SINGLE PIVOT HINGE PAIR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6610	HCPCS	UPPER EXTREMITY ADD FLEXIBLE METAL HINGE PAIR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6611	HCPCS	ADD UPPER EXT PROS EXTERNAL PWR ADDITIONAL SWTCH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6615	HCPCS	UPPER EXTREM ADD DISCONNECT LOCKING WRST UNIT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6616	HCPCS	UP EXTREM ADD DISCNCT INSERT LOCK WRST U EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6620	HCPCS	UPPER EXT ADD FLEX/EXT WRIST UNIT W/WO FRICTION	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6621	HCPCS	UP EXTREM PROS ADD FLEXION/EXTENSION WRIST	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6623	HCPCS	UP EXT ADD SPRNG ASST ROTATL WRST U W/LATCH RLSE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6624	HCPCS	UPPER EXTREMITY ADD FLX/EXT ROTATION WRIST UNIT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6625	HCPCS	UPPER EXTREM ADD ROTATION WRST UNIT W/CABLE LOCK	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6628	HCPCS	UP EXTRM ADD QUICK DISCNCT HOOK OTTO BOCK/=	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6629	HCPCS	UP EXTRM ADD QUICK DISCNCT LAMINATION COLLR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6630	HCPCS	UPPER EXTREM ADDITION STAINLESS STEEL ANY WRIST	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6632	HCPCS	UPPER EXTREM ADDITION LATEX SUSPENSION SLEEVE EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6635	HCPCS	UPPER EXTREMITY ADDITION LIFT ASSIST FOR ELBOW	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6637	HCPCS	UPPER EXTREMITY ADDITION NUDGE CONTROL ELB LOCK	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6638	HCPCS	UP EXT ADD PROS ELEC LOCK ONLY W/MNL PWR ELB	N	NA

ALOHAC	Q3 2025	DME/Medical Supplies	L6640	HCPCS	UPPER EXTREMITY ADD SHOULDER ABDUCT JOINT PAIR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6641	HCPCS	UPPER EXTREM ADD EXCURSIONUPPER EXTREM ADD EXCUR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6642	HCPCS	UPPER EXTREM ADD EXCURSION AMPLIFIER LEVER TYPE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6645	HCPCS	UPPER EXTREM ADDITION SHLDR FLEX-ABDUCT JOINT EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6646	HCPCS	UP EXT ADD SHLDR JNT MX PSTN W/BDY/EXT PWR SYS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6647	HCPCS	UP EXTREM ADD SHLDR LOCK MECH BDY PWR ACTUATOR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6648	HCPCS	UP EXTREM ADD SHLDR LOCK MECH EXT PWR ACTUATOR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6650	HCPCS	UPPER EXTREM ADDITION SHLDR UNIVERSAL JOINT EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6655	HCPCS	UPPER EXTREM ADD STANDARD CONTROL CABLE EXTRA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6660	HCPCS	UPPER EXTREM ADDITION HEAVY DUTY CONTROL CABLE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6665	HCPCS	UPPER EXTREM ADDITION TEFLON/EQUAL CABLE LINING	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6670	HCPCS	UPPER EXTREMITY ADDITION HOOK HAND CABLE ADAPTER	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6672	HCPCS	UPPER EXTREM ADD HARNESS CHST/SHLUPPER EXTREM AD	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6675	HCPCS	UPPER EXTREMITY ADD HARNESS SINGLE CABLE DESIGN	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6676	HCPCS	UPPER EXTREMITY ADD HARNESS DUAL CABLE DESIGN	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6677	HCPCS	UP EXT ADD HARNESS 3 CNTRL SIMULTAN OP DEVC&ELB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6680	HCPCS	UP EXTREM ADD TST SOCKT WRST DISARTIC/BELW ELB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6682	HCPCS	UPPER EXTREM ADD TST SOCKT ELB DISARTIC/ABVE ELB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6684	HCPCS	UP EXTRM ADD TST SCKT SHLDR DISRTC/INTRSCAP THOR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6686	HCPCS	UPPER EXTREMITY ADDITION SUCTION SOCKET	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6687	HCPCS	UP EXTRM ADD FRME TYPE SCKT BELW ELB/WRST DISRTC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6688	HCPCS	UP EXTRM ADD FRME TYPE SOCKT ABVE ELB/ELB DISRTC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6689	HCPCS	UPPER EXTREM ADD FRAME TYPE SOCKT SHLDR DISARTIC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6690	HCPCS	UPPER EXTREM ADD FRAME TYPE SOCKT INTERSCAP-THOR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6691	HCPCS	UPPER EXTREMITY ADDITION REMOVABLE INSERT EACH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6692	HCPCS	UPPER EXT ADD SIL GEL INSERT/=L W/WO LKG MECH EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6693	HCPCS	UPPER EXTREM ADD LOCK ELB FORARM COUNTERBALANCE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6694	HCPCS	ADD UP EXT PROS BELW/ABVE ELB CSTM W/LOCK MECH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6695	HCPCS	ADD UP EXT PROS BELW/ABVE ELB CSTM W/O LOCK MECH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6696	HCPCS	ADD UP EXT PROS ELB CSTM CNGN/TRAUMAT AMP INIT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6697	HCPCS	ADD UP EXT PROS ELB CSTM NOT CNGN/TRAUM AMP INIT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6698	HCPCS	ADDN TO UPR EXT PROS LOCK MECH EXCLUD SKT INSERT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6700	HCPCS	UPPER EXT ADD EXTRNL PWR FTR MYOELEC CTRL MOD	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6703	HCPCS	TERMINAL DEVICE PASSIVE HND/MITT ANY MATERIAL SZ	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6704	HCPCS	TERMINAL DEVICE SPORT/RECREATIONAL/WORK ATTACH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6706	HCPCS	TERMINAL DEVICE HOOK MECH VOLUNTARY OPENING	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6707	HCPCS	TERMINAL DEVICE HOOK MECH VOLUNTARY CLOSING	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6708	HCPCS	TERMINAL DEVICE HAND MECH VOLUNTARY OPENING	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6709	HCPCS	TERMINAL DEVICE HAND MECH VOLUNTARY CLOSING	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6711	HCPCS	TERM DVC HOOK MECH VOL OPN ANY MATL ANY SZ PED	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6712	HCPCS	TERM DVC HOOK MECH VOL CLOS ANY MATL ANY SZ PED	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6713	HCPCS	TERM DVC HAND MECH VOL OPN ANY MATL ANY SIZE PED	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6714	HCPCS	TERM DEVC HAND MECH VOL CLOS ANY MATL ANY SZ PED	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6715	HCPCS	TERM DEV MX ARTIC DIGIT W/MOTORS INIT ISSUE/REPL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6721	HCPCS	TERM DEVC HOOK/HND HVY-DUTY MECH VOL OPN ANY SZ	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6722	HCPCS	TERM DEVC HOOK/HAND HVY-DUTY MECH VOL CLOS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6805	HCPCS	ADDITION TERMINAL DEVICE MODIFIER WRIST UNIT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6810	HCPCS	ADDITION TERMINAL DEVICE PRECISION PINCH DEVICE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6880	HCPCS	ELEC HAND SWTCH/MYOELEC CNTRL INDEP ARTC DIG MTR	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6881	HCPCS	AUTOMATIC GRASP ADD UPPER LIMB ELEC PROSTH DEVC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6882	HCPCS	MICRPRROCSS CNTRL FEATUR ADD UP LIMB PROSTH DEVC	N	NA

ALOHAC	Q3 2025	DME/Medical Supplies	L6883	HCPCS	REPL SOCKET BE/WD MOLDED TO PATIENT MODEL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6884	HCPCS	REPL SOCKET ABOVE ELBOW/ELBOW DISART MOLD TO PT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6885	HCPCS	REPL SOCKET SD/INTERSCAPULAR THOR MOLD PT MODEL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6890	HCPCS	ADD UP EXT PROSTH GLOV TERM DEVC PRFAB W/FIT&ADJ	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6895	HCPCS	ADD UP EXT PROSTH GLOV TERM DEVC MATL CSTM FAB	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6900	HCPCS	HAND REST PART HAND W/GLOVE THUMB/1 FNGR REMAIN	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6905	HCPCS	HAND REST PART HAND W/GLOVE MX FNGR REMAIN	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6910	HCPCS	HAND REST PART HAND W/GLOVE NO FNGR REMAIN	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6915	HCPCS	HAND RESTORATION REPLACEMENT GLOVE FOR ABOVE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6920	HCPCS	WRST DISARTIC OTTO BOCK/=SWTCH CNTRL TERM DEVICE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6925	HCPCS	WRST DISARTIC OTTO BOCK/=MYOELEC CNTRL TERM DEVC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6930	HCPCS	BELOW ELBOW OTTO BOCK/=SWITCH CNTRL TERM DEVICE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6935	HCPCS	BELOW ELBOW OTTO BOCK/=MYOELEC CNTRL TERM DEVICE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6940	HCPCS	ELBOW DISARTIC OTTO BOCK/=SWITCH CNTRL TERM DEVC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6945	HCPCS	ELB DISARTIC OTTO BOCK/=MYOELEC CNTRL TERM DEVC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6950	HCPCS	ABOVE ELBOW OTTO BOCK/=SWITCH CNTRL TERM DEVC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6955	HCPCS	ABOVE ELBOW OTTO BOCK/=MYOELEC CNTRL TERM DEVC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6960	HCPCS	SHLDR DISARTIC OTTO BOCK/=SWTCH CNTRL TERM DEVC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6965	HCPCS	SHOULDR DISARTIC OTTO BOCK/=MYOELEC CNTRL TERM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6970	HCPCS	INTERSCAP-THOR OTTO BOCK/=SWTCH CNTRL TERM DEVC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L6975	HCPCS	INTERSCAP-THOR OTTO BOCK/=MYOELEC CNTRL TERM DVC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7007	HCPCS	ELECTRIC HAND SWITCH/MYOELECTRIC CONTROL ADULT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7008	HCPCS	ELECTRIC HAND SWITCH/MYOELECTRIC CNTRL PEDIATRIC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7009	HCPCS	ELECTRIC HOOK SWITCH/MYOELECTRIC CONTROL ADULT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7040	HCPCS	PREHENSILE ACTUATOR SWITCH CONTROLLED	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7045	HCPCS	ELEC HOOK SWITCH/MYOELECTRIC CONTOL PEDIATRIC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7170	HCPCS	ELECTRONIC ELBOW HOSMER/EQUAL SWITCH CONTROLLED	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7180	HCPCS	ELEC ELB MICROPRC SEQENTIAL CNTRL ELB&TERM DEVC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7181	HCPCS	ELEC ELB MICROPRC SIMULTAN CNTRL ELB&TERM DEVC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7185	HCPCS	ELEC ELB ADOLES VRITY VILLAGE/EQUAL SWITCH CNTRL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7186	HCPCS	ELEC ELB CHILD VRITY VILLAGE/EQUAL SWITCH CNTRL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7190	HCPCS	ELEC ELB ADOLES VRITY VILLAGE/= MYOELEC CNTRL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7191	HCPCS	ELEC ELB CHLD VRITY VILL/= MYOELECTRNICALY CNTRL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7259	HCPCS	ELECTRONIC WRIST ROTATOR ANY TYPE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7360	HCPCS	SIX VOLT BATTERY EACH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7362	HCPCS	BATTERY CHARGER SIX VOLT EACH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7364	HCPCS	TWELVE VOLT BATTERY EACH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7366	HCPCS	BATTERY CHARGER 12 VOLT EACH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7367	HCPCS	LITHIUM ION BATTERY RECHARGEABLE REPLACEMENT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7368	HCPCS	LITHIUM ION BATTERY CHARGER REPLACEMENT ONLY	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7400	HCPCS	ADD UP EXTREM PROS BELOW ELB/WD ULTRALIGHT MATL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7401	HCPCS	ADD UP EXTREM PROS AE DISART ULTRALIGHT MATL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7402	HCPCS	ADD UP EXT PROS SD/INTRSCAPULR THOR ULTRALT MATL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7403	HCPCS	ADD UP EXTREM PROS BE/WRIST DISART ACRYLIC MATL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7404	HCPCS	ADD UP EXTREM PROS ABOVE ELB DISART ACRYLIC MATL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7405	HCPCS	ADD UP EXTREM PROS SD/INTERSCAP THOR ACRYLC MATL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7406	HCPCS	ADD UP EXT PROS ADJ MECH RES LIMB VOL MGMT SYS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7499	HCPCS	UPPER EXTREMITY PROSTHESIS NOS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7510	HCPCS	REPR PROSTHETIC DEVICE REPR/REPLACE MINOR PARTS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7520	HCPCS	REPAIR PROSTHETIC DEVICE LABOR CMPNT PER 15 MIN	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L7600	HCPCS	PROSTHETIC DONNING SLEEVE ANY MATERIAL EACH	N	NA

ALOHAC	Q3 2025	DME/Medical Supplies	L7902	HCPCS	TENSION RING VAC ERECTION DEVC REPLACE ONLY EACH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8000	HCPCS	BREAST PROS MASTECTOMY BRA W/O INTEG PROS FORM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8001	HCPCS	BREAST PROS MASTECT BRA W/INTEG BREAST FORM UNI	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8002	HCPCS	BREAST PROS MASTECT BRA W/INTEG BREAST FORM BIL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8015	HCPCS	EXT BRST PROS GARMNT W/MASTECT FORM POST-MASTECT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8020	HCPCS	BREAST PROSTHESIS MASTECTOMY FORM	N	NA
ALOHAC	Q3 2025	HCBS	L8030	HCPCS	BREAST PROSTH SILICONE/EQUAL W/O INTEGRAL ADHES	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8030	HCPCS	BREAST PROSTH SILICONE/EQUAL W/O INTEGRAL ADHES	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8031	HCPCS	BREAST PROSTHESIS SILICONE/EQUAL W/NTEGRAL ADHES	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8032	HCPCS	NIPPLE PROSTHESIS PREFAB REUSABLE ANY TYPE EACH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8033	HCPCS	NIPPLE PROSTH CSTM FAB REUSABL ANY MATL ANY T EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8035	HCPCS	CSTM BREAST PROSTH POST MASTECT MOLDED PT MODEL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8039	HCPCS	BREAST PROSTHESIS NOT OTHERWISE SPECIFIED	N	NA
ALOHAC	Q3 2025	Other	L8040	HCPCS	NASAL PROSTHESIS PROVIDED BY A NON-PHYSICIAN	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8041	HCPCS	MIDFACIAL PROSTHESIS PROVIDED BY A NON-PHYSICIAN	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8042	HCPCS	ORBITAL PROSTHESIS PROVIDED BY A NON-PHYSICIAN	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8043	HCPCS	UPPER FACIAL PROSTHESIS PROVIDED A NON-PHYSICIAN	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8044	HCPCS	HEMI-FACIAL PROSTHESIS PROVIDED A NON-PHYSICIAN	N	NA
ALOHAC	Q3 2025	Other	L8045	HCPCS	AURICULAR PROSTHESIS PROVIDED BY A NON-PHYSICIAN	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8046	HCPCS	PARTIAL FACIAL PROSTHESIS PROVIDED NON-PHYSICIAN	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8047	HCPCS	NASAL SEPTAL PROSTHESIS PROVIDED A NON-PHYSICIAN	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8048	HCPCS	UNS MAXILLOFCE PROSTH BR PROVIDED NON-PHYSICIAN	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8049	HCPCS	REP/MOD MAXLOFCE PROSTH LABR EA 15 MIN NON-MD	N	NA
ALOHAC	Q3 2025	Other	L8300	HCPCS	TRUSS SINGLE WITH STANDARD PAD	N	NA
ALOHAC	Q3 2025	Other	L8310	HCPCS	TRUSS DOUBLE WITH STANDARD PADS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8320	HCPCS	TRUSS ADDITION TO STANDARD PAD WATER PAD	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8330	HCPCS	TRUSS ADDITION TO STANDARD PAD SCROTAL PAD	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8400	HCPCS	PROSTHETIC SHEATH BELOW KNEE EACH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8410	HCPCS	PROSTHETIC SHEATH ABOVE KNEE EACH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8415	HCPCS	PROSTHETIC SHEATH UPPER LIMB EACH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8417	HCPCS	PROSTH SHEATH/SOCK W/GEL CUSHION LAY BK/AK EACH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8420	HCPCS	PROSTHETIC SOCK MULTIPLE PLY BELOW KNEE BK EACH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8430	HCPCS	PROSTHETIC SOCK MULTIPLE PLY ABOVE KNEE AK EACH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8435	HCPCS	PROSTHETIC SOCK MULTIPLE PLY UPPER LIMB EACH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8440	HCPCS	PROSTHETIC SHRINKER BELOW KNEE BK EACH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8460	HCPCS	PROSTHETIC SHRINKER ABOVE KNEE AK EACH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8465	HCPCS	PROSTHETIC SHRINKER UPPER LIMB EACH	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8470	HCPCS	PROSTHETIC SOCK SINGLE PLY FITTING BELOW KNEE EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8480	HCPCS	PROSTHETIC SOCK SINGLE PLY FITTING ABOVE KNEE EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8485	HCPCS	PROSTHETIC SOCK SINGLE PLY FITTING UPPER LIMB EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8499	HCPCS	UNLISTED PROC MISCELLANEOUS PROSTHETIC SERVICES	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8500	HCPCS	ARTIFICIAL LARYNX ANY TYPE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8501	HCPCS	TRACHEOSTOMY SPEAKING VALVE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8505	HCPCS	ARTFICL LARYNX REPLCMT BATTRY/ACCESS ANY TYPE	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8507	HCPCS	TRACHEO-ESOPH VOICE PROSTH PT INSRT ANY TYPE EA	N	NA
ALOHAC	Q3 2025	Physician Services	L8509	HCPCS	TRACHEO-ESOPH VOICE PROSTH INSRT LIC HEALTH PROV	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8510	HCPCS	VOICE AMPLIFIER	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8511	HCPCS	INSRT INDWLL TRACHEOESOPH PROS W/WO VALV REPLCMT	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8512	HCPCS	GELATIN CAPS/EQUVALNT W/TRACHEOESOPH VOICE PROS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8513	HCPCS	CLEANING DEVC USED W/TRACHEOESOPH VOICE PROS PIP	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8514	HCPCS	TRACHEOESOPH PUNCTURE DILAT REPLACEMENT ONLY EA	N	NA

ALOHAC Q3 2025	DME/Medical Supplies	L8515	HCPCS	GELATIN CAP APPLIC DEVC TRACHOESOPH VOICE PROSTH	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8600	HCPCS	IMPLANTABLE BREAST PROSTHESIS SILICONE OR EQUAL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8604	HCPCS	INJECTABLE BULKING AGENT URINARY TRACT 1 ML	N	NA
ALOHAC Q3 2025	Other	L8606	HCPCS	INJ BULK AGT SYNTH IMPL URIN TRACT 1 ML SYRINGE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8607	HCPCS	INJ BULKING AGT VOCAL CORD MEDIALIZATION 0.1 ML	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8608	HCPCS	MISC EXT COMP SPL/ACSS FOR ARGUS II RET PROS SYS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8609	HCPCS	ARTIFICIAL CORNEA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8610	HCPCS	OCULAR IMPLANT	N	NA
ALOHAC Q3 2025	Other	L8612	HCPCS	AQUEOUS SHUNT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8613	HCPCS	OSSICULA IMPLANT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8614	HCPCS	COCHLEAR DEVICE INCLUDES ALL INT&EXT COMPONENTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8615	HCPCS	HEADSET/HEADPIECE COCHLEAR IMPLANT DEVICE REPL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8616	HCPCS	MICROPHONE COCHLEAR IMPLANT DEVICE REPLACEMENT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8617	HCPCS	TRANSMITTING COIL COCHLEAR IMPLANT DEVICE REPL	N	NA
ALOHAC Q3 2025	Other	L8618	HCPCS	TRNSMT CBL USE CI DEVC/AUD OSSEOINTG DEVC REPL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8619	HCPCS	COCHLEAR IMPL EXT SPEECH PROCESSR/CONTROLLR REPL	N	NA
ALOHAC Q3 2025	HCBS	L8619	HCPCS	COCHLEAR IMPL EXT SPEECH PROCESSR/CONTROLLR REPL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8621	HCPCS	ZINC AIR BATT COCHLR IMPL&AUD SD PROC REPL EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8622	HCPCS	ALKALIN BATTRY COCHLEAR IMPL DEVC ANY SZ REPL EA	N	NA
ALOHAC Q3 2025	Other	L8623	HCPCS	LITHIUM ION BATTERY OTH THAN EAR LEVEL REPL EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8624	HCPCS	LIB CI/AUD OSSEOINTEG DEVC SP EAR LEVEL REPL EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8627	HCPCS	COCHLEAR IMPL EXT SPEECH PROCESSR COMPONENT REPL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8628	HCPCS	COCHLEAR IMPLANT EXT CONTROLLER COMPONENT REPL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8629	HCPCS	TRANSMITTING COIL CABLE COCHLEAR IMPL DEV REPL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8630	HCPCS	METACARPOPHALANGEAL JOINT IMPLANT	N	NA
ALOHAC Q3 2025	Other	L8631	HCPCS	MPJ REPLCMT TWO/MORE PECES METL CERAM-LIKE MATL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8641	HCPCS	METATARSAL JOINT IMPLANT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8642	HCPCS	HALLUX IMPLANT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8658	HCPCS	INTERPHALANGEAL JOINT SPACER SILICONE/EQUAL EACH	N	NA
ALOHAC Q3 2025	Other	L8659	HCPCS	IP FNGR JNT REPL TWO/MORE PECES METL CERAM-LIKE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8670	HCPCS	VASCULAR GRAFT MATERIAL SYNTHETIC IMPLANT	N	NA
ALOHAC Q3 2025	Rehab Services	L8678	HCPCS	ELECTRICAL STIM SUP EXT USE W/I NEUROSTIM PER MO	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8679	HCPCS	IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR ANY	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8680	HCPCS	IMPLANTABLE NEUROSTIMULATOR ELECTRODE EACH	N	NA
ALOHAC Q3 2025	HCBS	L8680	HCPCS	IMPLANTABLE NEUROSTIMULATOR ELECTRODE EACH	N	NA
ALOHAC Q3 2025	Physician Services	L8680	HCPCS	IMPLANTABLE NEUROSTIMULATOR ELECTRODE EACH	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8681	HCPCS	PT PROG W/IMPL PROG NEUROSTM PULSE GEN REPL ONLY	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8682	HCPCS	IMPLANTABLE NEUROSTIMULATOR RADIOFREQ RECEIVER	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8683	HCPCS	RF TRNSMT USE W/IMPLANTABLE NEUROSTIM RF RECV	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8684	HCPCS	RF TRNSMT IMPL SCRL NEURO BOWEL BLADDR MGMT REPL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8685	HCPCS	IMPLANT NEUROSTIM 1 ARRAY RECHARGEABLE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8686	HCPCS	IMPLANT NEUROSTIM 1 ARRAY NON-RECHARGEABLE	N	NA
ALOHAC Q3 2025	Physician Services	L8687	HCPCS	IMPLANT NEUROSTIM 2 ARRAY RECHARGEABLE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8688	HCPCS	IMPLANT NEUROSTIM 2 ARRAY NON-RECHARGEABLE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8690	HCPCS	AUDITORY OSSEOINTEGRATED DEVC INT/EXT COMPONENTS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8691	HCPCS	AUD OI DEVC EXT SP EXCL TRNSDUCR/ACTUATR REPL EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8692	HCPCS	AUDITORY OSSEOINTEGRATED DEV EXT SOUND BODY WORN	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8693	HCPCS	AUD OSSEOINTEGRATED DEVC ABUT LENGTH REPL ONLY	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8694	HCPCS	AUD OSSEOINTEG DEVC TRANSDUCER/ACTR REPL ONLY EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	L8698	HCPCS	MISC COMP SPL/ACCESS FOR USE WITH TOT AH SYSTEM	N	NA
ALOHAC Q3 2025	Outpatient Hosp	L8699	HCPCS	PROSTHETIC IMPLANT NOT OTHERWISE SPECIFIED	N	NA

ALOHAC	Q3 2025	DME/Medical Supplies	L8701	HCPCS	PWR UE ROM ASST DVC ELB WR HND WITH SNGL/DBL UPR	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8702	HCPCS	PWR UE ROM ASST DVC ELB WR HND FNGR SNGL/DBL UPR	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8720	HCPCS	EXT LE SENS PROS CUT STIM MR PROX TO ANKLE Q LEG	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	L8721	HCPCS	RECEPTOR SOLE FOR USE W/ L8720 REPLACEMENT EACH	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	L9900	HCPCS	ORTHO&PROS SPL ACSS&/SRVC CMPNT OTH HCPCS L CODE	N NA
ALOHAC	Q3 2025	Other	M0248	HCPCS	IV INF SOTROVIMAB INC INF & POST ADM MON H/RES;	Y D
ALOHAC	Q3 2025	Other	M0248	HCPCS	IV INF SOTROVIMAB INC INF & POST ADM MON H/RES;	Y D
ALOHAC	Q3 2025	Other	P9025	HCPCS	PLASMA CRYOPRECIPITATE RED PATHOGEN REDUC EA UN	N NA
ALOHAC	Q3 2025	Diagnostic Testing	P9026	HCPCS	CRYOPRECIPIT FIBRINOGEN CMPL PATHGEN REDUC EA UN	N NA
ALOHAC	Q3 2025	Other	P9027	HCPCS	RBC LEU REDUCED OXYGEN/CO2 REDUCED EACH UNIT	N NA
ALOHAC	Q3 2025	Other	Q0081	HCPCS	INFUS TX USING OTH THAN CHEMOTHERAPEUTC RX VISIT	N NA
ALOHAC	Q3 2025	Other	Q0138	HCPCS	INJ FERUMOXYTOL TX IRON DEF ANEMIA 1 MG NON-ESRD	N NA
ALOHAC	Q3 2025	Other	Q0139	HCPCS	INJ FERUMOXYTOL TX IRON DEF ANEMIA 1 MG FOR ESRD	N NA
ALOHAC	Q3 2025	Physician Services	Q0155	HCPCS	DRO SYNDROS 0.1 MG ORAL FDA-APRVD RX ANTI-EMETIC	N NA
ALOHAC	Q3 2025	Other	Q0162	HCPCS	ONDANSETRON 1 MG ORL NOT EXCEED 48 HR DOSE REG	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q0477	HCPCS	PWR MODULE PT CABLE ELEC/PNEUMATIC VAD REPL ONLY	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q0480	HCPCS	DRIVER FOR USE WITH PNEUMATIC VAD REPL ONLY	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q0481	HCPCS	MICROPROCESSOR CNTRL UNIT FOR ELEC VAD REPL ONLY	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q0482	HCPCS	MICROPROCESSOR CU FOR ELEC/PNEUMAT VAD REPL ONL	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q0483	HCPCS	MONITOR/DISPLAY MODULE FOR ELEC VAD REPL ONLY	N NA
ALOHAC	Q3 2025	Other	Q0484	HCPCS	MONITOR FOR ELEC OR ELEC/PNEUMAT VAD REPL ONLY	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q0488	HCPCS	POWER PACK BASE FOR USE W/ELEC VAD REPL ONLY	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q0489	HCPCS	POWER PACK BASE FOR ELEC/PNEUMAT VAD REPL ONLY	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q0490	HCPCS	EMERGENCY POWER SOURCE FOR ELEC VAD REPL ONLY	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q0491	HCPCS	EMERG POWER SRC FOR ELEC/PNEUMAT VAD REPL ONLY	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q0495	HCPCS	BATT CHRGR ELEC OR ELEC/PNEUMAT VAD REPL ONLY	N NA
ALOHAC	Q3 2025	Other	Q0513	HCPCS	PHRM DISPENSING FEE INHALATION RX; PER 30 DAYS	N NA
ALOHAC	Q3 2025	Other	Q0514	HCPCS	PHRM DISPENSING FEE INHALATION RX; PER 90 DAYS	N NA
ALOHAC	Q3 2025	Other	Q0515	HCPCS	INJECTION SERMORELIN ACETATE 1 MICROGRAM	N NA
ALOHAC	Q3 2025	Other	Q2026	HCPCS	INJECTION RADIESSE 0.1ML	N NA
ALOHAC	Q3 2025	Other	Q2028	HCPCS	INJECTION SCULPTRA 0.5 MG	N NA
ALOHAC	Q3 2025	Other	Q2041	HCPCS	KTE-C19 TO 200 M A ANTI-CD19 CAR POS T CE P TD	N NA
ALOHAC	Q3 2025	Other	Q2042	HCPCS	TISAGENLECLEUCEL TO 600 M CAR-POS VI T CE PER TD	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q2043	HCPCS	SIPULEUCEL-T AUTO CD54+	N NA
ALOHAC	Q3 2025	Diagnostic Testing	Q2053	HCPCS	BREXUCABTAGENE AUTOLCL AU ANTI-CD19 CAR P V T C	N NA
ALOHAC	Q3 2025	Other	Q2054	HCPCS	LM >=110 MIL AUTOL ANTI-CD19 CAR-POS VIABL TC	N NA
ALOHAC	Q3 2025	Other	Q2055	HCPCS	IDECABTAGENE VICLEUCEL AUTO BCMA DIR CAR-POS TC	N NA
ALOHAC	Q3 2025	Other	Q2056	HCPCS	CILTA CEL TO 100 M AUTO BCMA DIR CAR-POS TC DOSE	N NA
ALOHAC	Q3 2025	Physician Services	Q2057	HCPCS	AFAMITRESGENE AUTOLEUCEL PER THERAPEUTIC DOSE	N NA
ALOHAC	Q3 2025	Other	Q3027	HCPCS	INJECTION INTERFERON BETA-1A 1 MCG IM USE	N NA
ALOHAC	Q3 2025	Other	Q3028	HCPCS	INJECTION INTERFERON BETA-1A 1 MCG SUBQ USE	N NA
ALOHAC	Q3 2025	Other	Q4074	HCPCS	ILOPROST INHAL SOL THRU DME UNIT DOSE TO 20 MCG	N NA
ALOHAC	Q3 2025	Other	Q4081	HCPCS	INJ EPOETIN ALFA 100 UNITS FOR ESRD ON DIALYSIS	N NA
ALOHAC	Q3 2025	Other	Q4082	HCPCS	DRUG OR BIOLOGICAL NOC PART B DRUG CAP	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4101	HCPCS	APLIGRAF PER SQ CM	N NA
ALOHAC	Q3 2025	HCBS	Q4101	HCPCS	APLIGRAF PER SQ CM	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4106	HCPCS	DERMAGRAFT PER SQ CM	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4132	HCPCS	GRAFIX CORE AND GRAFIXPL CORE PER SQUARE CM	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4133	HCPCS	GRAFIX PRM GRAFIXPL PRM STRAVIX & STRAVIXPL P SC	N NA
ALOHAC	Q3 2025	Outpatient Hosp	Q4133	HCPCS	GRAFIX PRM GRAFIXPL PRM STRAVIX & STRAVIXPL P SC	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4152	HCPCS	DERMAPURE PER SQUARE CENTIMETER	N NA

ALOHAC	Q3 2025	DME/Medical Supplies	Q4153	HCPCS	DERMAVEST AND PLURIVEST PER SQ CM	N	NA
ALOHAC	Q3 2025	Other	Q4154	HCPCS	BIOVANCE PER SQUARE CENTIMETER	N	NA
ALOHAC	Q3 2025	Other	Q4155	HCPCS	NEOXFLO OR CLARIXFLO 1 MG	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4156	HCPCS	NEOX 100 OR CLARIX 100 PER SQUARE CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4157	HCPCS	REVITALON PER SQUARE CENTIMETER	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4158	HCPCS	KERECIS OMEGA3 PER SQUARE CM	N	NA
ALOHAC	Q3 2025	Other	Q4159	HCPCS	AFFINITY PER SQUARE CENTIMETER	N	NA
ALOHAC	Q3 2025	Other	Q4160	HCPCS	NUSHIELD PER SQUARE CENTIMETER	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4161	HCPCS	BIO-CONNEKT WOUND MATRIX PER SQUARE CENTIMETER	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4162	HCPCS	WOUNDEX FLOW BIOSKIN FLOW 0.5 CC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4163	HCPCS	WOUNDEX BIOSKIN PER SQUARE CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4164	HCPCS	HELICOLL PER SQUARE CENTIMETER	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4165	HCPCS	KERAMATRIX OR KERASORB PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4176	HCPCS	NEOPATCH OR THERION 1 SQ CM	N	NA
ALOHAC	Q3 2025	Other	Q4177	HCPCS	FLOWERAMNIOFLO 0.1 CC	N	NA
ALOHAC	Q3 2025	Other	Q4178	HCPCS	FLOWERAMNIOPATCH PER SQUARE CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4179	HCPCS	FLOWERDERM PER SQUARE CM	N	NA
ALOHAC	Q3 2025	Other	Q4180	HCPCS	REVITA PER SQUARE CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4181	HCPCS	AMNIO WOUND PER SQUARE CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4182	HCPCS	TRANSCYTE PER SQUARE CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4186	HCPCS	EPIFIX PER SQ CM	N	NA
ALOHAC	Q3 2025	Other	Q4195	HCPCS	PURAPLY PER SQ CM	N	NA
ALOHAC	Q3 2025	Other	Q4196	HCPCS	PURAPLY AM PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4205	HCPCS	MEMBRANE GRAFT OR MEMBRANE WRAP PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4206	HCPCS	FLUID FLOW OR FLUID GF 1 CC	N	NA
ALOHAC	Q3 2025	Other	Q4208	HCPCS	NOVAFIX PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4209	HCPCS	SURGRAFT PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4211	HCPCS	AMNION BIO OR AXOBIOMEMBRANE PER SQ CM	N	NA
ALOHAC	Q3 2025	Other	Q4212	HCPCS	ALLOGEN PER CC	N	NA
ALOHAC	Q3 2025	Other	Q4213	HCPCS	ASCENT 0.5 MG	N	NA
ALOHAC	Q3 2025	Other	Q4214	HCPCS	CELLESTA CORD PER SQ CM	N	NA
ALOHAC	Q3 2025	Other	Q4215	HCPCS	AXOLOTL AMBIENT OR AXOLOTL CRYO 0.1 MG	N	NA
ALOHAC	Q3 2025	Other	Q4216	HCPCS	ARTACENT CORD PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4217	HCPCS	WNDFIX BIOWND WNDFIX+BIOWND+WNDFIX X+/X+ P SC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4218	HCPCS	SURGICORD PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4219	HCPCS	SURGIGRAFT-DUAL PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4220	HCPCS	BELLACELL HD OR SUREDERM PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4221	HCPCS	AMNIO WRAP2 PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4222	HCPCS	PROGENAMATRIX PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4226	HCPCS	MYOWN SKIN INCL HARVEST & PREP PROC PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4227	HCPCS	AMNIOCORETM PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4229	HCPCS	COGENEX AMNIOTIC MEMBRANE PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4230	HCPCS	COGENEX FLOWABLE AMNION PER 0.5 CC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4232	HCPCS	CORPLEX PER SQ CM	N	NA
ALOHAC	Q3 2025	Other	Q4233	HCPCS	SURFACTOR OR NUDYN PER 0.5 CC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4234	HCPCS	XCELLERATE PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4235	HCPCS	AMNIOREPAIR OR ALTIPLY PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4236	HCPCS	CAREPATCH PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4237	HCPCS	CRYO-CORD PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4238	HCPCS	DERM-MAXX PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4239	HCPCS	AMNIO-MAXX OR AMNIO-MAXX LITE PER SQ CM	N	NA

ALOHAC	Q3 2025	DME/Medical Supplies	Q4240	HCPCS	CORECYTE FOR TOPICAL USE ONLY PER 0.5 CC	N	NA
ALOHAC	Q3 2025	Other	Q4241	HCPCS	POLYCYTE FOR TOPICAL USE ONLY PER 0.5 CC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4242	HCPCS	AMNIOCYTE PLUS PER 0.5 CC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4245	HCPCS	AMNIOTEXT PER CC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4246	HCPCS	CORETEXT OR PROTEXT PER CC	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4247	HCPCS	AMNIOTEXT PATCH PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4248	HCPCS	DERMACYTE AMNIOTIC MEMBRANE ALLOGRAFT PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4249	HCPCS	AMNIPLY FOR TOPICAL USE ONLY PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4250	HCPCS	AMNIOAMP-MP PER SQ CM	N	NA
ALOHAC	Q3 2025	Other	Q4251	HCPCS	VIM PER SQ CM	N	NA
ALOHAC	Q3 2025	Other	Q4252	HCPCS	VENDAJE PER SQ CM	N	NA
ALOHAC	Q3 2025	Other	Q4253	HCPCS	ZENITH AMNIOTIC MEMBRANE PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4254	HCPCS	NOVAFIX DL PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4255	HCPCS	REGUARD FOR TOPICAL USE ONLY PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4262	HCPCS	DUAL LAYER IMPAX MEMBRANE PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4263	HCPCS	SURGRAFT TL PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4264	HCPCS	COCOON MEMBRANE PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4279	HCPCS	VENDAJE AC PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4285	HCPCS	NUDYN DL OR NUDYN DL MESH PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4286	HCPCS	NUDYN SL OR NUDYN SLW PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4287	HCPCS	DERMABIND DL PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4288	HCPCS	DERMABIND CH PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4289	HCPCS	REVOSHIELD+ AMNIOTIC BARRIER PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4290	HCPCS	MEMBRANE WRAP-HYDRO TM PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4291	HCPCS	LAMELLAS XT PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4292	HCPCS	LAMELLAS PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4293	HCPCS	ACESSO DL PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4294	HCPCS	AMNIO QUAD-CORE PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4295	HCPCS	AMNIO TRI-CORE AMNIOTIC PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4296	HCPCS	REBOUND MATRIX PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4297	HCPCS	EMERGE MATRIX PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4298	HCPCS	AMNICORE PRO PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4299	HCPCS	AMNICORE PRO+ PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4300	HCPCS	ACESSO TL PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4301	HCPCS	ACTIVATE MATRIX PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4302	HCPCS	COMPLETE ACA PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4303	HCPCS	COMPLETE AA PER SQ CM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q4304	HCPCS	GRAFIX PLUS PER SQ CM	N	NA
ALOHAC	Q3 2025	Changes	Q5098	HCPCS	INJECT USTEKINUMAB SRLF IMULDOSA BIOSIMILAR 1 MG	Y	A
ALOHAC	Q3 2025	Physician Services	Q5098	HCPCS	INJECT USTEKINUMAB SRLF IMULDOSA BIOSIMILAR 1 MG	Y	A
ALOHAC	Q3 2025	Physician Services	Q5099	HCPCS	INJ USTEKINUMAB STBA STEQEYMA BIOSIMILAR 1 MG	N	NA
ALOHAC	Q3 2025	Physician Services	Q5100	HCPCS	INJ USTEKINUMAB KFCE YESINTEK BIOSIMILAR 1 MG	N	NA
ALOHAC	Q3 2025	Other	Q5101	HCPCS	INJECTION FILGRASTIM BIOSIMILAR 1 MCG	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q5103	HCPCS	INJECTION INFLIXIMAB-DYYB BIOSIMILAR 10 MG	N	NA
ALOHAC	Q3 2025	Other	Q5104	HCPCS	INJECTION INFLIXIMAB-ABDA BIOSIMILAR 10 MG	N	NA
ALOHAC	Q3 2025	Other	Q5105	HCPCS	INJECTION EPOETIN ALFA-EPBX BIOSIMILAR 100 UNITS	N	NA
ALOHAC	Q3 2025	Other	Q5106	HCPCS	INJECTION EPOETIN ALFA-EPBX BIOSIMILAR 1000 U	N	NA
ALOHAC	Q3 2025	Other	Q5107	HCPCS	INJECTION BEVACIZUMAB-AWWB BIOSIMILAR 10 MG	N	NA
ALOHAC	Q3 2025	Other	Q5108	HCPCS	INJECTION PEGFILGRASTIM-JMDB BIOSIMILAR 0.5 MG	N	NA
ALOHAC	Q3 2025	Other	Q5109	HCPCS	INJECTION INFLIXIMAB-QBTX BIOSIMILAR 10 MG	N	NA
ALOHAC	Q3 2025	Other	Q5110	HCPCS	INJECTION FILGRASTIM-AAFI BIOSIMILAR 1 MCG	N	NA

ALOHAC	Q3 2025	Other	Q5111	HCPCS	INJECTION PEGFILGRASTIM-CBQV BIOSIMILAR 0.5 MG	N	NA
ALOHAC	Q3 2025	Other	Q5112	HCPCS	INJECTION TRASTUZUMAB-DTTB BIOSIMILAR 10 MG	N	NA
ALOHAC	Q3 2025	Other	Q5113	HCPCS	INJECTION TRASTUZUMAB-PKRB BIOSIMILAR 10 MG	N	NA
ALOHAC	Q3 2025	Other	Q5114	HCPCS	INJECTION TRASTUZUMAB-DKST BIOSIMILAR 10 MG	N	NA
ALOHAC	Q3 2025	Other	Q5115	HCPCS	INJECTION RITUXIMAB-ABBS BIOSIMILAR 10 MG	N	NA
ALOHAC	Q3 2025	Other	Q5116	HCPCS	INJECTION TRASTUZUMAB-QYYP BIOSIMILAR 10 MG	N	NA
ALOHAC	Q3 2025	Other	Q5117	HCPCS	INJECTION TRASTUZUMAB-ANNS BIOSIMILAR 10 MG	N	NA
ALOHAC	Q3 2025	Other	Q5118	HCPCS	INJECTION BEVACIZUMAB-BVZR BIOSIMILAR 10 MG	N	NA
ALOHAC	Q3 2025	Other	Q5119	HCPCS	INJ RITUXIMAB-PVVR BIOSIMILAR RUXIENCE 10 MG	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	Q5120	HCPCS	INJECTION PEGFILGRASTIM-BMEZ BIOSIMILAR 0.5 MG	N	NA
ALOHAC	Q3 2025	Other	Q5121	HCPCS	INJ INFLIXIMAB-AXXQ BIOSIMILAR AVSOLA 10 MG	N	NA
ALOHAC	Q3 2025	Other	Q5122	HCPCS	INJECTION PEGFILGRASTIM-APGF BIOSIMILAR 0.5 MG	N	NA
ALOHAC	Q3 2025	Other	Q5123	HCPCS	INJECTION RITUXIMAB-ARRX BIOSIMILAR 10 MG	N	NA
ALOHAC	Q3 2025	Other	Q5124	HCPCS	INJECTION RANIBIZUMAB-NUNA BS BYOOVIZ 0.1 MG	N	NA
ALOHAC	Q3 2025	Other	Q5125	HCPCS	INJECTION FILGRASTIM-AYOW BIOSIMILAR 1 MCG	N	NA
ALOHAC	Q3 2025	Other	Q5126	HCPCS	INJ BEVACIZUMAB-MALY BIOSIMILAR (ALYMSYS) 10 MG	N	NA
ALOHAC	Q3 2025	Other	Q5127	HCPCS	INJECTION PEG-FPGK STIMUFEND BIOSIMILAR 0.5 MG	N	NA
ALOHAC	Q3 2025	Other	Q5128	HCPCS	INJECTION RANIBIZUMAB-EQRN BIOSIMILAR 0.1 MG	N	NA
ALOHAC	Q3 2025	Other	Q5129	HCPCS	INJECTION BEVACIZUMAB-ADCD BIOSIMILAR 10 MG	N	NA
ALOHAC	Q3 2025	Other	Q5130	HCPCS	INJECTION PEG-PBBK FYLNETRA BIOSIMILAR 0.5 MG	N	NA
ALOHAC	Q3 2025	Other	Q5133	HCPCS	INJECTION TOCILIZUMAB-BAVI BIOSIMILAR 1 MG	N	NA
ALOHAC	Q3 2025	Other	Q5134	HCPCS	INJECTION NATALIZUMAB-SZTN BIOSIMILAR 1 MG	N	NA
ALOHAC	Q3 2025	Other	Q5135	HCPCS	INJECTN TOCILIZUMAB-AAZG TYENNE BIOSIMILAR 1 MG	N	NA
ALOHAC	Q3 2025	Other	Q5136	HCPCS	INJECTION DENOSUMAB-BBDZ BIOSIMILAR 1 MG	N	NA
ALOHAC	Q3 2025	Other	Q5138	HCPCS	INJECTION USTEKINUMAB-AUUB WEZLANA BS IV 1 MG	N	NA
ALOHAC	Q3 2025	Physician Services	Q5146	HCPCS	INJECTION TRASTUZUMAB-STRF HERCESSI BS 10 MG	N	NA
ALOHAC	Q3 2025	Physician Services	Q5147	HCPCS	INJECTION AFLIBERCEPT AYYH PAVBLU BS 1 MG	N	NA
ALOHAC	Q3 2025	Physician Services	Q5148	HCPCS	INJECTION FILGRASTIM TXID NYPOZI BS 1 MCG	N	NA
ALOHAC	Q3 2025	Physician Services	Q5149	HCPCS	INJECTION AFLIBERCEPT ABZV ENZEEVU BS 1 MG	N	NA
ALOHAC	Q3 2025	Physician Services	Q5150	HCPCS	INJECTION AFLIBERCEPT MRBB AHZANTIVE BS 1 MG	N	NA
ALOHAC	Q3 2025	Physician Services	Q5151	HCPCS	INJECTION ECULIZUMAB AAGH EPYSQLI BS 2 MG	N	NA
ALOHAC	Q3 2025	Physician Services	Q5152	HCPCS	INJECTION ECULIZUMAB AEEB BKEMV BIOSIMILAR 2 MG	N	NA
ALOHAC	Q3 2025	Changes	Q5153	HCPCS	INJ AFLIBERCEPT YSZY OPUVIZ BIOSIMILAR 1 MG	Y	A
ALOHAC	Q3 2025	Physician Services	Q5153	HCPCS	INJ AFLIBERCEPT YSZY OPUVIZ BIOSIMILAR 1 MG	Y	A
ALOHAC	Q3 2025	Other	Q9004	HCPCS	DEPART VETERANS AFFAIR WHOLE HEALTH PARTNER SERV	N	NA
ALOHAC	Q3 2025	Other	Q9968	HCPCS	INJ NONRADIATIVE NONCONTRAST VIZ ADJUNCT 1 MG	N	NA
ALOHAC	Q3 2025	Other	Q9969	HCPCS	TC-99M NON-HEU FULL COST REC ADD-ON PER STDY DOS	N	NA
ALOHAC	Q3 2025	Other	Q9982	HCPCS	FLUTEMETAMOL F18 DX P STUDY DO TO 5 MILLICURIES	N	NA
ALOHAC	Q3 2025	Other	Q9983	HCPCS	FLORBETABEN F18 DX P STDY DO TO 8.1 MILLICURIES	N	NA
ALOHAC	Q3 2025	Other	Q9991	HCPCS	INJECTION BUPRENORPHINE EXT-RLSE </= TO 100 MG	N	NA
ALOHAC	Q3 2025	Other	Q9992	HCPCS	INJECTION BUPRENORPHINE EXTENDED-RELEASE >100 MG	N	NA
ALOHAC	Q3 2025	Physician Services	Q9997	HCPCS	INJECTION USTEKINUMAB-TTWE PYZCHIVA IV 1 MG	N	NA
ALOHAC	Q3 2025	Physician Services	Q9998	HCPCS	INJECTION USTEKINUMAB-AEKN SELARSDI BS	N	NA
ALOHAC	Q3 2025	Physician Services	Q9999	HCPCS	INJECTION USTEKINUMAB AAUZ OTULFI BS 1 MG	N	NA
ALOHAC	Q3 2025	Other	S0145	HCPCS	INJ PEGYLATED INTERFERON ALFA2A 180 MCG PER ML	N	NA
ALOHAC	Q3 2025	Other	S0148	HCPCS	INJECTION PEGYLATED INTERFERON ALFA-2B 10 MCG	N	NA
ALOHAC	Q3 2025	Other	S0189	HCPCS	TESTOSTERONE PELLET 75 MG	N	NA
ALOHAC	Q3 2025	Transport Services	S0209	HCPCS	WHEELCHAIR VAN MILEAGE PER MILE	N	NA
ALOHAC	Q3 2025	Transport Services	S0215	HCPCS	NON-EMERGENCY TRANSPORTATION; PER MILE	N	NA
ALOHAC	Q3 2025	Other	S0311	HCPCS	COMP MGMT & CARE COORD ADVANCED ILL PER CAL MO	Y	A
ALOHAC	Q3 2025	Changes	S0311	HCPCS	COMP MGMT & CARE COORD ADVANCED ILL PER CAL MO	Y	A

ALOHAC Q3 2025	DME/Medical Supplies	S0500	HCPCS	DISPOSABLE CONTACT LENS PER LENS	N	NA
ALOHAC Q3 2025	HCBS	S0500	HCPCS	DISPOSABLE CONTACT LENS PER LENS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	S0580	HCPCS	POLYCARBONATE LENS	N	NA
ALOHAC Q3 2025	Home Health	S5035	HCPCS	HOME INFUS THERAPY ROUTINE SERVICE INFUS DEVICE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	S5036	HCPCS	HOME INFUSION THERAPY REPAIR OF INFUSION DEVICE	N	NA
ALOHAC Q3 2025	HCBS	S5101	HCPCS	DAY CARE SERVICES ADULT; PER HALF DAY	N	NA
ALOHAC Q3 2025	HCBS	S5102	HCPCS	DAY CARE SERVICES ADULT; PER DIEM	N	NA
ALOHAC Q3 2025	HCBS	S5105	HCPCS	DAY CARE SRVC CENTER-BASED; SRVC NOT W/PROGM FEE	N	NA
ALOHAC Q3 2025	At Risk Services	S5105	HCPCS	DAY CARE SRVC CENTER-BASED; SRVC NOT W/PROGM FEE	N	NA
ALOHAC Q3 2025	Home Health	S5109	HCPCS	HOME CARE TRAINING HOME CARE CLIENT PER SESSION	N	NA
ALOHAC Q3 2025	Autism Services	S5110	HCPCS	HOME CARE TRAINING FAMILY; PER 15 MINUTES	N	NA
ALOHAC Q3 2025	Autism Services	S5111	HCPCS	HOME CARE TRAINING FAMILY; PER SESSION	N	NA
ALOHAC Q3 2025	Home Health	S5115	HCPCS	HOME CARE TRAINING NON-FAMILY; PER 15 MINUTES	N	NA
ALOHAC Q3 2025	Home Health	S5116	HCPCS	HOME CARE TRAINING NON-FAMILY; PER SESSION	N	NA
ALOHAC Q3 2025	At Risk Services	S5125	HCPCS	ATTENDANT CARE SERVICES; PER 15 MINUTES	N	NA
ALOHAC Q3 2025	At Risk Services	S5130	HCPCS	HOMEMAKER SERVICE NOS; PER 15 MINUTES	N	NA
ALOHAC Q3 2025	At Risk Services	S5135	HCPCS	COMPANION CARE ADULT ; PER 15 MINUTES	N	NA
ALOHAC Q3 2025	At Risk Services	S5140	HCPCS	FOSTER CARE ADULT; PER DIEM	N	NA
ALOHAC Q3 2025	HCBS	S5150	HCPCS	UNSKILLED RESPITE CARE NOT HOSPICE; PER 15 MIN	N	NA
ALOHAC Q3 2025	HCBS	S5151	HCPCS	UNSKILLED RESPITE CARE NOT HOSPICE; PER DIEM	N	NA
ALOHAC Q3 2025	At Risk Services	S5160	HCPCS	EMERGENCY RESPONSE SYSTEM; INSTALLATION&TESTING	N	NA
ALOHAC Q3 2025	At Risk Services	S5161	HCPCS	EMERGENCY RESPONSE SYSTEM; SERVICE FEE PER MONTH	N	NA
ALOHAC Q3 2025	At Risk Services	S5162	HCPCS	EMERGENCY RESPONSE SYSTEM; PURCHASE ONLY	N	NA
ALOHAC Q3 2025	HCBS	S5165	HCPCS	HOME MODIFICATIONS; PER SERVICE	N	NA
ALOHAC Q3 2025	At Risk Services	S5170	HCPCS	HOME DELIV MEALS INCLUDING PREPARATION; PER MEAL	N	NA
ALOHAC Q3 2025	At Risk Services	S5185	HCPCS	MED REMINDER SERVICE NON-FACE-TO-FACE; MONTH	N	NA
ALOHAC Q3 2025	Home Health	S5497	HCPCS	HOME INFUS TX CATH CARE/MAINT NOC; PER DIEM	N	NA
ALOHAC Q3 2025	Physician Services	S5498	HCPCS	HOME INFUS TX CATH CARE/MAINT SIMPLE PER DIEM	N	NA
ALOHAC Q3 2025	Home Health	S5501	HCPCS	HOME INFUS TX CATH CARE/MAINT COMPLEX PER DIEM	N	NA
ALOHAC Q3 2025	Other	S5502	HCPCS	HOME INFUS TX CATH CARE IMPL ACCESS DEVC DIEM	N	NA
ALOHAC Q3 2025	Home Health	S5518	HCPCS	HOME INFUSION THERAPY ALL SPL NECES CATH REPAIR	N	NA
ALOHAC Q3 2025	Home Health	S5520	HCPCS	HOME INFUSION TX ALL SPL NECES PICC LINE INSERT	N	NA
ALOHAC Q3 2025	Home Health	S5521	HCPCS	HOME INFUS TX ALL SPL NECES MIDLINE CATH INSERT	N	NA
ALOHAC Q3 2025	Home Health	S5522	HCPCS	HOME INFUS TX INSERT PICC NRS SRVC ONLY	N	NA
ALOHAC Q3 2025	Other	S5523	HCPCS	HOME INFUS TX INSERT MIDLINE CVC NRS SRVC ONLY	N	NA
ALOHAC Q3 2025	At Risk Services	S9122	HCPCS	HOM HLTH AIDE/CERT NURSE ASST PROV CARE HOM;-HR	N	NA
ALOHAC Q3 2025	At Risk Services	S9123	HCPCS	NURSING CARE THE HOME; REGISTERED NURSE PER HOUR	N	NA
ALOHAC Q3 2025	At Risk Services	S9124	HCPCS	NURSING CARE IN THE HOME; BY LPN PER HOUR	N	NA
ALOHAC Q3 2025	Home Health	S9325	HCPCS	HIT PAIN MANAGEMENT INFUSION; PER DIEM	N	NA
ALOHAC Q3 2025	Physician Services	S9326	HCPCS	HIT CONT PAIN MGMT INFUS; CARE COORD PER DIEM	N	NA
ALOHAC Q3 2025	Physician Services	S9327	HCPCS	HIT INTERMIT PAIN MGMT INFUS; CARE COORD DIEM	N	NA
ALOHAC Q3 2025	Home Health	S9328	HCPCS	HIT IMPLANTED PUMP PAIN MGMT INFUS; PER DIEM	N	NA
ALOHAC Q3 2025	Home Health	S9329	HCPCS	HOME INFUSION TX CHEMOTHERAPY INFUSION; PER DIEM	N	NA
ALOHAC Q3 2025	Physician Services	S9330	HCPCS	HIT CONT CHEMOTHAPY INFUS; CARE COORD PER DIEM	N	NA
ALOHAC Q3 2025	Home Health	S9335	HCPCS	HOM TX HD; ADMIN PROF PHRM SRVC SPL&EQP PER DIEM	N	NA
ALOHAC Q3 2025	Home Health	S9336	HCPCS	HOME INFUS TX CONT ANTICOAGULANT INFUS TX DIEM	N	NA
ALOHAC Q3 2025	Home Health	S9339	HCPCS	HOME THERAPY; PERITONEAL DIALYSIS PER DIEM	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	S9340	HCPCS	HOME THERAPY; ENTERAL NUTRITION; PER DIEM	N	NA
ALOHAC Q3 2025	Home Health	S9341	HCPCS	HOME TX; ENTERAL NUTRITION VIA GRAVITY; PER DIEM	N	NA
ALOHAC Q3 2025	Home Health	S9342	HCPCS	HOME TX; ENTERAL NUTRITION VIA PUMP; PER DIEM	N	NA
ALOHAC Q3 2025	Home Health	S9343	HCPCS	HOME TX; ENTERAL NUTRITION VIA BOLUS; PER DIEM	N	NA

ALOHAC	Q3 2025	Home Health	S9345	HCPCS	HOME INFUSION TX ANTI-HEMOPHILIC AGENT; PER DIEM	N NA
ALOHAC	Q3 2025	Other	S9346	HCPCS	HOME INFUS TX ALPHA-1-PROTEINASE INHIBITOR; DIEM	N NA
ALOHAC	Q3 2025	Home Health	S9347	HCPCS	HIT UNINTRPED LNG-TERM CNTRL RATE IV/SUBQ;-DIEM	N NA
ALOHAC	Q3 2025	Home Health	S9348	HCPCS	HIT SYMPATHOMIMETIC/INOTROPIC AGENT PER DIEM	N NA
ALOHAC	Q3 2025	Other	S9349	HCPCS	HOME INFUSION THERAPY TOCOLYTIC; PER DIEM	N NA
ALOHAC	Q3 2025	Other	S9351	HCPCS	HOME INFUSION THERAPY CONT ANTI-EMETIC; PER DIEM	N NA
ALOHAC	Q3 2025	Home Health	S9353	HCPCS	HOME INFUSION THERAPY CONT INSULIN; PER DIEM	N NA
ALOHAC	Q3 2025	Home Health	S9355	HCPCS	HOME INFUSION THERAPY CHELATION; PER DIEM	N NA
ALOHAC	Q3 2025	Home Health	S9357	HCPCS	HOME INFUSION TX ENZYME REPL IV TX; PER DIEM	N NA
ALOHAC	Q3 2025	Home Health	S9359	HCPCS	HIT ANTI-TUMOR NECROS FACTOR IV TX; PER DIEM	N NA
ALOHAC	Q3 2025	Home Health	S9361	HCPCS	HOME INFUSION THERAPY DIURETIC IV TX; PER DIEM	N NA
ALOHAC	Q3 2025	Other	S9363	HCPCS	HIT ANTI-SPASMOTIC TX; CARE SPL&EQP PER DIEM	N NA
ALOHAC	Q3 2025	Other	S9364	HCPCS	HIT TOTAL PARENTERAL NUTRITION; CARE COORD DIEM	N NA
ALOHAC	Q3 2025	Home Health	S9365	HCPCS	HOM INFUS TX TPN; 1 LITER-DAY DIEM	N NA
ALOHAC	Q3 2025	Home Health	S9366	HCPCS	HIT TPN; > 1 LITER BUT NOT > 2 LITERS-DA-DIEM	N NA
ALOHAC	Q3 2025	Home Health	S9367	HCPCS	HIT TPN; > 2 LITERS BUT NOT > 3 LITERS-DA -DIEM	N NA
ALOHAC	Q3 2025	Other	S9368	HCPCS	HIT TOTAL PARENTERAL NUTRIT; > 3 LITERS-DA -DIEM	N NA
ALOHAC	Q3 2025	Home Health	S9370	HCPCS	HOME THERAPY INTERMITTENT ANTI-EMETIC INJ TX;	N NA
ALOHAC	Q3 2025	Home Health	S9372	HCPCS	HOME THERAPY; INTERMITTENT ANTICOAGULANT INJ TX;	N NA
ALOHAC	Q3 2025	Home Health	S9373	HCPCS	HOME INFUSION THERAPY HYDRATION TX; PER DIEM	N NA
ALOHAC	Q3 2025	Home Health	S9374	HCPCS	HOME INFUSION THERAPY HYDRATION TX; 1 LITER DAY	N NA
ALOHAC	Q3 2025	Home Health	S9375	HCPCS	HIT HYDRATION TX; >1 LITER NO>2 LITERS DAY	N NA
ALOHAC	Q3 2025	Home Health	S9376	HCPCS	HIT HYDRATION TX; >2 LITERS NO>3 LITERS DAY	N NA
ALOHAC	Q3 2025	Home Health	S9377	HCPCS	HOME INFUS THERAPY HYDRATION TX; >3 LITERS DAY	N NA
ALOHAC	Q3 2025	Home Health	S9379	HCPCS	HOME INFUSION THERAPY INFUSION THERAPY NOC; DIEM	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	S9432	HCPCS	MEDICAL FOODS FOR NONINBORN ERRORS OF METABOLISM	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	S9433	HCPCS	MED FOOD NUTR CMPL ORAL 100% NUTRITNL INTAKE	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	S9434	HCPCS	MOD SOLID FOOD SUPPLEMENTS INBORN ERRORS METAB	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	S9435	HCPCS	MEDICAL FOODS FOR INBORN ERRORS OF METABOLISM	N NA
ALOHAC	Q3 2025	Home Health	S9497	HCPCS	HIT ABX ANTIVIRAL/ANTIFUNGAL TX; Q3 HRS DIEM	N NA
ALOHAC	Q3 2025	Physician Services	S9500	HCPCS	HIT ABX ANTIVIRAL/ANTIFUNGAL TX; Q24 HRS DIEM	N NA
ALOHAC	Q3 2025	Home Health	S9501	HCPCS	HIT ABX ANTIVIRAL/ANTIFUNGAL TX; Q12 HRS DIEM	N NA
ALOHAC	Q3 2025	Physician Services	S9502	HCPCS	HIT ABX ANTIVIRAL/ANTIFUNGAL; Q8 HRS PER DIEM	N NA
ALOHAC	Q3 2025	Home Health	S9503	HCPCS	HIT ANTIBIOTC ANTIVIRAL/ANTIFUNGAL; Q6 HRS; DIEM	N NA
ALOHAC	Q3 2025	Home Health	S9504	HCPCS	HIT ABX ANTIVIRAL/ANTIFUNGAL; Q4 HRS; PER DIEM	N NA
ALOHAC	Q3 2025	Home Health	S9562	HCPCS	HOME INJ TX PLV/OTHER MAB FOR RSV PER DIEM	N NA
ALOHAC	Q3 2025	Transport Services	S9977	HCPCS	MEALS PER DIEM NOT OTHERWISE SPECIFIED	N NA
ALOHAC	Q3 2025	Other	T1005	HCPCS	RESPITE CARE SERVICES UP TO 15 MINUTES	N NA
ALOHAC	Q3 2025	Other	T1010	HCPCS	MEALS FOR IND REC ALCOHOL&/SUBSTANCE ABUSE SRVC	N NA
ALOHAC	Q3 2025	Other	T1013	HCPCS	SIGN LANGUAGE/ORAL INTEPR SERVICES PER 15 MIN	N NA
ALOHAC	Q3 2025	HCBS	T1019	HCPCS	PERSONAL CARE SERVICES PER 15 MINUTES	N NA
ALOHAC	Q3 2025	Home Health	T1030	HCPCS	NURSING CARE THE HOME REGISTERED NURSE PER DIEM	N NA
ALOHAC	Q3 2025	Other	T2001	HCPCS	NON-EMERG TRANSPORTATION; PT ATTENDANT/ESCORT	N NA
ALOHAC	Q3 2025	Transport Services	T2001	HCPCS	NON-EMERG TRANSPORTATION; PT ATTENDANT/ESCORT	N NA
ALOHAC	Q3 2025	Transport Services	T2002	HCPCS	NON-EMERGENCY TRANSPORTATION; PER DIEM	N NA
ALOHAC	Q3 2025	Transport Services	T2003	HCPCS	NON-EMERGENCY TRANSPORTATION; ENCOUNTER/TRIP	N NA
ALOHAC	Q3 2025	Transport Services	T2005	HCPCS	NONEMERGENCY TRANSPORTATION; STRETCHER VAN	N NA
ALOHAC	Q3 2025	Transport Services	T2007	HCPCS	TRNSPRT WAIT TIME AIR AMB&NON-EMERG VEH 1/2 HR	N NA
ALOHAC	Q3 2025	HCBS	T2022	HCPCS	CASE MANAGEMENT; PER MONTH	N NA
ALOHAC	Q3 2025	DME/Medical Supplies	T2028	HCPCS	SPECIALIZED SUPPLY NOT OTH SPECIFIED WAIVER	N NA
ALOHAC	Q3 2025	HCBS	T2028	HCPCS	SPECIALIZED SUPPLY NOT OTH SPECIFIED WAIVER	N NA

ALOHAC Q3 2025	Other	T2029	HCPCS	SPECIALIZED MEDICAL EQUIPMENT NOS WAIVER	N	NA
ALOHAC Q3 2025	Other	T2031	HCPCS	ASSISTED LIVING WAIVER; PER DIEM	N	NA
ALOHAC Q3 2025	Other	T2033	HCPCS	RESIDENTIAL CARE NOS WAIVER; PER DIEM	N	NA
ALOHAC Q3 2025	Other	T2038	HCPCS	COMMUNITY TRANSITION WAIVER; PER SERVICE	N	NA
ALOHAC Q3 2025	Transport Services	T2049	HCPCS	NON-EMERG TRNSPRT; STRETCHER VAN MILEAGE; MILE	N	NA
ALOHAC Q3 2025	Other	T2101	HCPCS	HUMAN BREAST MILK PROCESSING STORAGE&DSTRB ONLY	N	NA
ALOHAC Q3 2025	HCBS	T4521	HCPCS	ADLT SIZED DISPBL INCONT PROD BRF/DIAPER SM EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	T4521	HCPCS	ADLT SIZED DISPBL INCONT PROD BRF/DIAPER SM EA	N	NA
ALOHAC Q3 2025	HCBS	T4522	HCPCS	ADLT SIZED DISPBL INCONT PROD BRF/DIAPER MED EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	T4522	HCPCS	ADLT SIZED DISPBL INCONT PROD BRF/DIAPER MED EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	T4523	HCPCS	ADLT SIZED DISPBL INCONT PROD BRF/DIAPER LG EA	N	NA
ALOHAC Q3 2025	HCBS	T4523	HCPCS	ADLT SIZED DISPBL INCONT PROD BRF/DIAPER LG EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	T4524	HCPCS	ADLT SZD DISPBL INCONT PROD BRF/DIAPER X-LG EA	N	NA
ALOHAC Q3 2025	HCBS	T4524	HCPCS	ADLT SZD DISPBL INCONT PROD BRF/DIAPER X-LG EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	T4525	HCPCS	ADLT SZD DISPBL INCONT PROD UNDWEAR/PULLON SM EA	N	NA
ALOHAC Q3 2025	HCBS	T4525	HCPCS	ADLT SZD DISPBL INCONT PROD UNDWEAR/PULLON SM EA	N	NA
ALOHAC Q3 2025	HCBS	T4526	HCPCS	ADLT SZD DISPBL INCONT PROD UNDWEAR MED EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	T4526	HCPCS	ADLT SZD DISPBL INCONT PROD UNDWEAR MED EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	T4527	HCPCS	ADLT SZD DISPBL INCONT PROD UNDWEAR/PULLON LG EA	N	NA
ALOHAC Q3 2025	HCBS	T4527	HCPCS	ADLT SZD DISPBL INCONT PROD UNDWEAR/PULLON LG EA	N	NA
ALOHAC Q3 2025	HCBS	T4528	HCPCS	ADLT SZD DISPBL INCONT PROD UNDWEAR XTRA LG EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	T4528	HCPCS	ADLT SZD DISPBL INCONT PROD UNDWEAR XTRA LG EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	T4529	HCPCS	PED SZD DISPBL INCONT PROD BRF/DIAPER SM/MED EA	N	NA
ALOHAC Q3 2025	HCBS	T4529	HCPCS	PED SZD DISPBL INCONT PROD BRF/DIAPER SM/MED EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	T4530	HCPCS	PED SZD DISPBL INCONT PROD BRF/DIAPER LG SZ EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	T4531	HCPCS	PED SZD DISPBL INCONT PROD UNDWEAR SM/MED EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	T4532	HCPCS	PED SZD DISPBL INCONT PROD UNDWEAR/PULLON LG EA	N	NA
ALOHAC Q3 2025	HCBS	T4532	HCPCS	PED SZD DISPBL INCONT PROD UNDWEAR/PULLON LG EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	T4533	HCPCS	YOUTH SIZED DISPBL INCONT PRODUCT BRF/DIAPER EA	N	NA
ALOHAC Q3 2025	HCBS	T4533	HCPCS	YOUTH SIZED DISPBL INCONT PRODUCT BRF/DIAPER EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	T4534	HCPCS	YOUTH SZD DISPBL INCONT PROD UNDWEAR/PULLON EA	N	NA
ALOHAC Q3 2025	HCBS	T4534	HCPCS	YOUTH SZD DISPBL INCONT PROD UNDWEAR/PULLON EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	T4535	HCPCS	DISPBL LINER/SHIELD/GUARD/PAD/UNDGRMNT INCONT EA	N	NA
ALOHAC Q3 2025	HCBS	T4535	HCPCS	DISPBL LINER/SHIELD/GUARD/PAD/UNDGRMNT INCONT EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	T4536	HCPCS	INCONT PROD PROTVE UNDWEAR/PULLON REUSBL SIZE EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	T4537	HCPCS	INCONT PROD PROTVE UNDPAD REUSABLE BED SIZE EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	T4539	HCPCS	INCONTINENCE PRODUCT DIAPER/BRF REUSABLE SIZE EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	T4540	HCPCS	INCONT PROD PROTVE UNDPAD REUSABLE CHAIR SIZE EA	N	NA
ALOHAC Q3 2025	HCBS	T4541	HCPCS	INCONTINENCE PRODUCT DISPOSABLE UNDPAD LARGE EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	T4541	HCPCS	INCONTINENCE PRODUCT DISPOSABLE UNDPAD LARGE EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	T4542	HCPCS	INCONTINENCE PRODUCT DISPBL UNDPAD SMALL SIZE EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	T4543	HCPCS	ADULT SIZE DISP INCONTINENCE PROD ABOVE XL EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	T4544	HCPCS	ADULT SIZE DISPBL INCONT PULLUP ABVE EXTRA LG EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	T4545	HCPCS	INCONTINENCE PRODUCT DISPOSABLE PENILE WRAP EACH	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2200	HCPCS	SPHERE BIFOCL PLANO TO PLUS/MINUS 4.00D PER LENS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2201	HCPCS	SPHERE BIFOCAL +/- 4.12 TO +/- 7.00D PER LENS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2202	HCPCS	SPHERE BIFOCL +/- 7.12 TO +/- 20.00D PER LENS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2203	HCPCS	BIFOCL PLANO +/- 4.00D SPHER 0.12-2.00D CYL-EA	N	NA
ALOHAC Q3 2025	HCBS	V2203	HCPCS	BIFOCL PLANO +/- 4.00D SPHER 0.12-2.00D CYL-EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2204	HCPCS	BIFOCL PLANO +/- 4.00D SPHER 2.12-4.00D CYL-EA	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2205	HCPCS	BIFOCL PLANO +/- 4.00D SPHER 4.25-6.00D CYL-EA	N	NA

ALOHAC	Q3 2025	DME/Medical Supplies	V2206	HCPCS	BIFOCL PLANO +/- 4.00D SPHER OVR 6.00D CYL-EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2207	HCPCS	BIFOCL +/-4.25-+/-7.00D SPHER 0.12-2.00D CYL-EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2208	HCPCS	BIFOCL +/-4.25-+/-7.00D SPHER 2.12-4.00D CYL-EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2209	HCPCS	BIFOCL +/-4.25-+/-7.00D SPHER 4.25-6.00D CYL-EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2210	HCPCS	BIFOCL +/-4.25-+/-7.00D SPHER OVR 6.00D CYL-LENS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2211	HCPCS	BIFOCL +/-7.25-+/-12.00D SPHER 0.25-2.25D CYL-EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2212	HCPCS	BIFOCL +/-7.25-+/-12.00D SPHER 2.25-4.00D CYL-EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2213	HCPCS	BIFOCL +/-7.25-+/-12.00D SPHER 4.25-6.00D CYL-EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2214	HCPCS	BIFOCAL SPHERE OVER +/-12.00D PER LENS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2215	HCPCS	LENTICULAR PER LENS BIFOCAL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2218	HCPCS	ANISEIKONIC PER LENS BIFOCAL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2219	HCPCS	BIFOCAL SEG WIDTH OVER 28MM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2220	HCPCS	BIFOCAL ADD OVER 3.25D	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2221	HCPCS	LENTICULAR LENS PER LENS BIFOCAL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2299	HCPCS	SPECIALTY BIFOCAL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2300	HCPCS	SPHERE TRIFOCAL PLANO OR +/-4.00D PER LENS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2301	HCPCS	SPHERE TRIFOCAL +/- 4.12 TO +/- 7.00D PER LENS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2302	HCPCS	SPHERE TRIFOCAL +/- 7.12 TO +/- 20.00 PER LENS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2303	HCPCS	TRIFOCL PLANO +/-4.00D SPHER 0.12-2.00D CYL EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2304	HCPCS	TRIFOCL PLANO +/-4.00D SPHER 2.25-4.00D CYL EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2305	HCPCS	TRIFOCL PLANO +/-4.00D SPHER 4.25-6.00 CYL EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2306	HCPCS	TRIFOCL PLANO +/-4.00D SPHER OVR 6.00D CYL EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2307	HCPCS	TRIFOCL +/-4.25-+/-7.00D SPHER 0.12-2.00D CYL EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2308	HCPCS	TRIFOCL +/-4.25-+/-7.00D SPHER 2.12-4.00D CYL EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2309	HCPCS	TRIFOCL +/-4.25-+/-7.00D SPHER 4.25-6.00D CYL EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2310	HCPCS	TRIFOCL +/-4.25-+/-7.00D SPHER OVR 6.00D CYL EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2311	HCPCS	TRIFOCL +/-7.25-+/-12.00D SPHER 0.25-2.25D CYL E	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2312	HCPCS	TRIFOCL +/-7.25-+/-12.00D SPHER 2.25-4.00D CYL E	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2313	HCPCS	TRIFOCL+/-7.25-+/-12.00D SPHER 4.25-6.00D CYL EA	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2314	HCPCS	TRIFOCL SPHER OVER +/-12.00D PER LENS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2315	HCPCS	LENTICULAR PER LENS TRIFOCAL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2318	HCPCS	ANISEIKONIC LENS TRIFOCAL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2319	HCPCS	TRIFOCAL SEG WIDTH OVER 28 MM	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2320	HCPCS	TRIFOCAL ADD OVER 3.25D	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2321	HCPCS	LENTICULAR LENS PER LENS TRIFOCAL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2399	HCPCS	SPECIALTY TRIFOCAL	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2500	HCPCS	CONTACT LENS PMMA SPHERICAL PER LENS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2501	HCPCS	CONTACT LENS PMMA TORIC/PRISM BALLAST PER LENS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2502	HCPCS	CONTACT LENS PMMA BIFOCAL PER LENS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2503	HCPCS	CONTACT LENS PMMA COLOR VISION DEFIC PER LENS	N	NA
ALOHAC	Q3 2025	HCBS	V2510	HCPCS	CONTACT LENS GAS PERMEABLE SPHERICAL PER LENS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2510	HCPCS	CONTACT LENS GAS PERMEABLE SPHERICAL PER LENS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2511	HCPCS	CNTC LENS GAS PERMEABLE TORIC PRISM BALLST-LENS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2512	HCPCS	CONTACT LENS GAS PERMEABLE BIFOCAL PER LENS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2513	HCPCS	CNTC LENS GAS PERMEABLE EXTENDED WEAR PER LENS	N	NA
ALOHAC	Q3 2025	HCBS	V2520	HCPCS	CONTACT LENS HYDROPHILIC SPHERICAL PER LENS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2520	HCPCS	CONTACT LENS HYDROPHILIC SPHERICAL PER LENS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2521	HCPCS	CNTC LENS HYDROPHIL TORIC/PRISM BALLST PER LENS	N	NA
ALOHAC	Q3 2025	HCBS	V2521	HCPCS	CNTC LENS HYDROPHIL TORIC/PRISM BALLST PER LENS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2522	HCPCS	CONTACT LENS HYDROPHILIC BIFOCAL PER LENS	N	NA
ALOHAC	Q3 2025	DME/Medical Supplies	V2523	HCPCS	CONTACT LENS HYDROPHILIC EXTENDED WEAR PER LENS	N	NA

ALOHAC Q3 2025	DME/Medical Supplies	V2524	HCPCS	CONTACT LENS HPI SPH PC ADDITIVE PER LENS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2530	HCPCS	CONTACT LENS SCLERAL GAS IMPERMEABLE PER LENS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2531	HCPCS	CONTACT LENS SCLERAL GAS PERMEABLE PER LENS	N	NA
ALOHAC Q3 2025	HCBS	V2599	HCPCS	CONTACT LENS OTHER TYPE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2599	HCPCS	CONTACT LENS OTHER TYPE	N	NA
ALOHAC Q3 2025	Diagnostic Testing	V2700	HCPCS	BALANCE LENS PER LENS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2702	HCPCS	DELUXE LENS FEATURE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2710	HCPCS	SLAB OFF PRISM GLASS OR PLASTIC PER LENS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2715	HCPCS	PRISM PER LENS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2718	HCPCS	PRESS-ON LENS FRESNELL PRISM PER LENS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2730	HCPCS	SPECIAL BASE CURVE GLASS OR PLASTIC PER LENS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2744	HCPCS	TINT PHOTOCHROMATIC PER LENS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2745	HCPCS	ADD LENS; TINT COLOR SOLID EXCLD PHOTOCHRMATC	N	NA
ALOHAC Q3 2025	HCBS	V2745	HCPCS	ADD LENS; TINT COLOR SOLID EXCLD PHOTOCHRMATC	N	NA
ALOHAC Q3 2025	HCBS	V2750	HCPCS	ANTIREFLECTIVE COATING PER LENS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2750	HCPCS	ANTIREFLECTIVE COATING PER LENS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2755	HCPCS	U-V LENS PER LENS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2760	HCPCS	SCRATCH RESISTANT COATING PER LENS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2761	HCPCS	MIRROR COAT TYPE SOLID GRADENT/= LENS MATL-LENS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2762	HCPCS	POLARIZATION ANY LENS MATERIAL PER LENS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2770	HCPCS	OCCLUDER LENS PER LENS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2780	HCPCS	OVERSIZE LENS PER LENS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2781	HCPCS	PROGRESSIVE LENS PER LENS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2782	HCPCS	LENS INDX 1.54-1.65 PLSTC/1.60-1.79 GLASS LENS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2783	HCPCS	LENS INDX >/= 1.66 PLSTC/>/= 1.80 GLASS LENS	N	NA
ALOHAC Q3 2025	HCBS	V2783	HCPCS	LENS INDX >/= 1.66 PLSTC/>/= 1.80 GLASS LENS	N	NA
ALOHAC Q3 2025	Other	V2785	HCPCS	PROCESSING PRES&TRANSPORTING CORNEAL TISSUE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2786	HCPCS	SPECIALTY OCCUPATIONAL MULTIFOCAL LENS PER LENS	N	NA
ALOHAC Q3 2025	Diagnostic Testing	V2787	HCPCS	ASTIGMATISM CORRECTING FUNCTION INTRAOCULAR LENS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2788	HCPCS	PRESBYOPIA CORRECTION FUNCTION INTRAOCULAR LENS	N	NA
ALOHAC Q3 2025	Outpatient Hosp	V2790	HCPCS	AMNIOTIC MEMBRANE SURGICAL RECONSTRUCT PER PROC	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V2797	HCPCS	VISN SPL ACSS &/ SRVC CMPNT ANOTHER HCPCS CODE	N	NA
ALOHAC Q3 2025	Physician Services	V5010	HCPCS	ASSESSMENT FOR HEARING AID	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5011	HCPCS	FITTING/ORIENTATION/CHECKING OF HEARING AID	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5014	HCPCS	REPAIR/MODIFICATION OF A HEARING AID	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5020	HCPCS	CONFORMITY EVALUATION	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5030	HCPCS	HEARING AID MONAURAL BODY WORN AIR CONDUCTION	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5040	HCPCS	HEARING AID MONAURAL BODY WORN BONE CONDUCTION	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5050	HCPCS	HEARING AID MONAURAL IN THE EAR	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5060	HCPCS	HEARING AID MONAURAL BEHIND THE EAR	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5070	HCPCS	GLASSES AIR CONDUCTION	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5080	HCPCS	GLASSES BONE CONDUCTION	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5095	HCPCS	SEMI-IMPLANTABLE MIDDLE EAR HEARING PROSTHESIS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5100	HCPCS	HEARING AID BILATERAL BODY WORN	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5120	HCPCS	BINAURAL BODY	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5130	HCPCS	BINAURAL IN THE EAR	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5140	HCPCS	BINAURAL BEHIND THE EAR	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5150	HCPCS	BINAURAL GLASSES	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5171	HCPCS	HEARING AID CONTRALAT ROUT DEVICE MONAURAL ITE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5172	HCPCS	HEARING AID CONTRALAT ROUT DEVICE MONAURAL ICT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5181	HCPCS	HEARING AID CONTRALATERAL ROUT DVC MONAURAL BTE	N	NA

ALOHAC Q3 2025	DME/Medical Supplies	V5190	HCPCS	HEARING AID CONTRALATERAL RTE MONAURAL GLASSES	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5211	HCPCS	HEARING AID CONTRALAT ROUT SYS BINAURAL ITE/ITE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5212	HCPCS	HEARING AID CONTRALAT ROUT SYS BINAURAL ITE/ITC	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5213	HCPCS	HEARING AID CONTRALAT ROUT SYS BINAURAL ITE/BTE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5214	HCPCS	HEARING AID CONTRALAT ROUT SYS BINAURAL ITC/ITC	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5215	HCPCS	HEARING AID CONTRALAT ROUT SYS BINAURAL ITC/BTE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5221	HCPCS	HEARING AID CONTRALAT ROUT SYS BINAURAL BTE/BTE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5230	HCPCS	HEARING AID CONTRALAT RTE SYS BINAURAL GLASSES	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5242	HCPCS	HEARING AID ANALOG MONAURAL CIC	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5243	HCPCS	HEARING AID ANALOG MONAURAL ITC	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5244	HCPCS	HEARING AID DIGTLLY PROG ANALOG MONAURAL CIC	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5245	HCPCS	HEARING AID DIGTLLY PROG ANALOG MONAURAL ITC	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5246	HCPCS	HEARING AID DIGTLLY PROG ANALOG MONAURAL ITE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5247	HCPCS	HEARING AID DIGTLLY PROG ANALOG MONAURAL BTE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5248	HCPCS	HEARING AID ANALOG BINAURAL CIC	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5249	HCPCS	HEARING AID ANALOG BINAURAL ITC	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5250	HCPCS	HEARING AID DIGTLLY PROG ANALOG BINAURAL CIC	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5251	HCPCS	HEARING AID DIGTLLY PROG ANALOG BINAURAL ITC	N	NA
ALOHAC Q3 2025	HCBS	V5251	HCPCS	HEARING AID DIGTLLY PROG ANALOG BINAURAL ITC	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5252	HCPCS	HEARING AID DIGITALLY PROGRAMMABLE BINAURAL ITE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5253	HCPCS	HEARING AID DIGITALLY PROGRAMMABLE BINAURAL BTE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5254	HCPCS	HEARING AID DIGITAL MONAURAL CIC	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5255	HCPCS	HEARING AID DIGITAL MONAURAL ITC	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5256	HCPCS	HEARING AID DIGITAL MONAURAL ITE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5257	HCPCS	HEARING AID DIGITAL MONAURAL BTE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5258	HCPCS	HEARING AID DIGITAL BINAURAL CIC	N	NA
ALOHAC Q3 2025	HCBS	V5259	HCPCS	HEARING AID DIGITAL BINAURAL ITC	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5259	HCPCS	HEARING AID DIGITAL BINAURAL ITC	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5260	HCPCS	HEARING AID DIGITAL BINAURAL ITE	N	NA
ALOHAC Q3 2025	HCBS	V5261	HCPCS	HEARING AID DIGITAL BINAURAL BTE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5261	HCPCS	HEARING AID DIGITAL BINAURAL BTE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5262	HCPCS	HEARING AID DISPOSABLE ANY TYPE MONAURAL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5263	HCPCS	HEARING AID DISPOSABLE ANY TYPE BINAURAL	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5268	HCPCS	ASSTIVE LISTENING DEVICE TEL AMPLIFIER ANY TYPE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5269	HCPCS	ASSISTIVE LISTENING DEVICE ALERTING ANY TYPE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5270	HCPCS	ASSTIVE LISTENING DEVICE TELEVISN AMPLIFIER TYPE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5271	HCPCS	ASSTIVE LISTENING DEVC TELEVISN CAPTION DECODER	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5272	HCPCS	ASSISTIVE LISTENING DEVICE TDD	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5273	HCPCS	ASSTIVE LISTENING DEVICE USE W/COCHLEAR IMPLANT	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5274	HCPCS	ASSISTIVE LEARNING DEVICE NOS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5281	HCPCS	ASSIST LIST DEVC PERS FM/DM SYS MONAURL ANY TYPE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5282	HCPCS	ASSIST LIST DEVC PERS FM/DM SYS BINAURL ANY TYPE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5283	HCPCS	ASSIST LIST DEVC PERS FM/DM NCK LOOP INDUCT RECV	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5284	HCPCS	ASSIST LIST DEVICE PERS FM/DM EAR LEVEL RECEIVER	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5285	HCPCS	ASSIST LIST DEVC PERS FM/DM DIR AUDIO INPUT RECV	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5286	HCPCS	ASSIST LISTEN DEVC PERS BLUE TOOTH FM/DM RECEIVR	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5287	HCPCS	ASSISTIVE LISTENING DEVC PERS FM/DM RECEIVER NOS	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5288	HCPCS	ASSIST LISTEN DEVC PERS FM/DM TRANSMITTER ALD	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5289	HCPCS	ASSIST LIST DEVC PERS FM/DM ADPTR/BOOT CPLG RECV	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5290	HCPCS	ASSIST LISTEN DEVC TRANSMITT MICROPHONE ANY TYPE	N	NA
ALOHAC Q3 2025	DME/Medical Supplies	V5298	HCPCS	HEARING AID NOT OTHERWISE CLASSIFIED	N	NA

ALOHAC	Q3 2025	DME/Medical Supplies	V5336	HCPCS	REPAIR/MOD AUGMENTATIV COMMUNICAT SYSTEM/DEVICE	N	NA
ALOHAC	Q3 2025	Diagnostic Testing	V5362	HCPCS	SPEECH SCREENING	N	NA
ALOHAC	Q3 2025	Diagnostic Testing	V5363	HCPCS	LANGUAGE SCREENING	N	NA
ALOHAC	Q3 2025	Diagnostic Testing	V5364	HCPCS	DYSPHAGIA SCREENING	N	NA

HP_ID	Year_Qtr	Service_Category	Procedure_Code	Procedure_Code_Type	Proc_Code_Description
HMSAAA	Q3 2025	At Risk Services	S5125	HCPCS	ATTENDANT CARE SERVICES; PER 15 MINUTES
HMSAAA	Q3 2025	At Risk Services	S9122	HCPCS	HOME HEALTH AIDE OR CERTIFIED NURSE ASSISTANT, PROVIDING CARE IN THE HOME; PER HOUR
HMSAAA	Q3 2025	At Risk Services	S9123	HCPCS	NURSING CARE, IN THE HOME; BY REGISTERED NURSE, PER HOUR (USE FOR GENERAL NURSING CARE ONLY, NOT TO BE USED WHEN CPT CODES 99500-99602 CAN BE USED)
HMSAAA	Q3 2025	Autism Services	97151	CPT	BEHAVIOR IDENTIFICATION ASSESSMENT, ADMINISTERED BY A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, EACH 15 MINUTES OF THE PHYSICIAN'S OR OTH
HMSAAA	Q3 2025	Autism Services	97153	CPT	ADAPTIVE BEHAVIOR TREATMENT BY PROTOCOL, ADMINISTERED BY TECHNICIAN UNDER THE DIRECTION OF A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL,
HMSAAA	Q3 2025	Autism Services	97154	CPT	GROUP ADAPTIVE BEHAVIOR TREATMENT BY PROTOCOL, ADMINISTERED BY TECHNICIAN UNDER THE DIRECTION OF A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESS
HMSAAA	Q3 2025	Autism Services	0362T	CPT	BEHAVIOR IDENTIFICATION SUPPORTING ASSESSMENT, EACH 15 MINUTES OF TECHNICIANS' TIME FACE-TO-FACE WITH A PATIENT, REQUIRING THE FOLLOWING COMPONENTS
HMSAAA	Q3 2025	Autism Services	0373T	CPT	ADAPTIVE BEHAVIOR TREATMENT WITH PROTOCOL MODIFICATION, EACH 15 MINUTES OF TECHNICIANS' TIME FACE-TO-FACE WITH A PATIENT, REQUIRING THE FOLLOWING CO
HMSAAA	Q3 2025	Autism Services	97152	CPT	BEHAVIOR IDENTIFICATION-SUPPORTING ASSESSMENT, ADMINISTERED BY ONE TECHNICIAN UNDER THE DIRECTION OF A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PRO
HMSAAA	Q3 2025	Autism Services	97155	CPT	ADAPTIVE BEHAVIOR TREATMENT WITH PROTOCOL MODIFICATION, ADMINISTERED BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, WHICH MAY INCLUDE S
HMSAAA	Q3 2025	Autism Services	97156	CPT	FAMILY ADAPTIVE BEHAVIOR TREATMENT GUIDANCE, ADMINISTERED BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL (WITH OR WITHOUT THE PATIENT PRES
HMSAAA	Q3 2025	Autism Services	97157	CPT	MULTIPLE-FAMILY GROUP ADAPTIVE BEHAVIOR TREATMENT GUIDANCE, ADMINISTERED BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL (WITHOUT THE PATI
HMSAAA	Q3 2025	Autism Services	97158	CPT	GROUP ADAPTIVE BEHAVIOR TREATMENT WITH PROTOCOL MODIFICATION, ADMINISTERED BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, FACE-TO-FACE
HMSAAA	Q3 2025	Diagnostic Testing	73721	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF LOWER EXTREMITY; WITHOUT CONTRAST MATERIAL
HMSAAA	Q3 2025	Diagnostic Testing	77080	CPT	DUAL-ENERGY X-RAY ABSORPTIOMETRY (DXA), BONE DENSITY STUDY, 1 OR MORE SITES; AXIAL SKELETON (EG, HIPS, PELVIS, SPINE)
HMSAAA	Q3 2025	Diagnostic Testing	77371	CPT	RADIATION TREATMENT DELIVERY, STEREOTACTIC RADIOSURGERY (SRS), COMPLETE COURSE OF TREATMENT OF CRANIAL LESION(S) CONSISTING OF 1 SESSION; MULTI-SOURC
HMSAAA	Q3 2025	Diagnostic Testing	81200	CPT	ASPA (ASPARTOACYLASE) (EG, CANAVAN DISEASE) GENE ANALYSIS, COMMON VARIANTS (EG, E285A, Y231X)
HMSAAA	Q3 2025	Diagnostic Testing	81201	CPT	APC (ADENOMATOUS POLYPOSIS COLI) (EG, FAMILIAL ADENOMATOSIS POLYPOSIS [FAP], ATTENUATED FAP) GENE ANALYSIS; FULL GENE SEQUENCE
HMSAAA	Q3 2025	Diagnostic Testing	81223	CPT	CFTR (CYSTIC FIBROSIS TRANSMEMBRANE CONDUCTANCE REGULATOR) (EG, CYSTIC FIBROSIS) GENE ANALYSIS; FULL GENE SEQUENCE
HMSAAA	Q3 2025	Diagnostic Testing	81225	CPT	CYP2C19 (CYTOCHROME P450, FAMILY 2, SUBFAMILY C, POLYPEPTIDE 19) (EG, DRUG METABOLISM), GENE ANALYSIS, COMMON VARIANTS (EG, *2, *3, *4, *8, *17)
HMSAAA	Q3 2025	Diagnostic Testing	81229	CPT	CYTOGENOMIC (GENOME-WIDE) ANALYSIS FOR CONSTITUTIONAL CHROMOSOMAL ABNORMALITIES; INTERROGATION OF GENOMIC REGIONS FOR COPY NUMBER AND SINGLE
HMSAAA	Q3 2025	Diagnostic Testing	81241	CPT	F5 (COAGULATION FACTOR V) (EG, HEREDITARY HYPERCOAGULABILITY) GENE ANALYSIS, LEIDEN VARIANT
HMSAAA	Q3 2025	Diagnostic Testing	81243	CPT	FMR1 (FRAGILE X MESSENGER RIBONUCLEOPROTEIN 1) (EG, FRAGILE X SYNDROME, X-LINKED INTELLECTUAL DISABILITY [XLID]) GENE ANALYSIS; EVALUATION TO DETECT ABNO
HMSAAA	Q3 2025	Diagnostic Testing	81256	CPT	HFE (HEMOCHROMATOSIS) (EG, HEREDITARY HEMOCHROMATOSIS) GENE ANALYSIS, COMMON VARIANTS (EG, C282Y, H63D)
HMSAAA	Q3 2025	Diagnostic Testing	81257	CPT	HBA1/HBA2 (ALPHA GLOBIN 1 AND ALPHA GLOBIN 2) (EG, ALPHA THALASSEMIA, HB BART HYDROPS FETALIS SYNDROME, HBH DISEASE), GENE ANALYSIS; COMMON DELETIONS
HMSAAA	Q3 2025	Diagnostic Testing	81292	CPT	MLH1 (MUTL HOMOLOG 1, COLON CANCER, NONPOLYPOSIS TYPE 2) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANALYSIS; FULL SEQ
HMSAAA	Q3 2025	Diagnostic Testing	81400	CPT	MOLECULAR PATHOLOGY PROCEDURE, LEVEL 1 (EG, IDENTIFICATION OF SINGLE GERMLINE VARIANT [EG, SNP] BY TECHNIQUES SUCH AS RESTRICTION ENZYME DIGESTION OR
HMSAAA	Q3 2025	Diagnostic Testing	81401	CPT	MOLECULAR PATHOLOGY PROCEDURE, LEVEL 2 (EG, 2-10 SNPS, 1 METHYLATED VARIANT, OR 1 SOMATIC VARIANT [TYPICALLY USING NONSEQUENCING TARGET VARIANT ANAL
HMSAAA	Q3 2025	Diagnostic Testing	81404	CPT	MOLECULAR PATHOLOGY PROCEDURE, LEVEL 5 (EG, ANALYSIS OF 2-5 EXONS BY DNA SEQUENCE ANALYSIS, MUTATION SCANNING OR DUPLICATION/DELETION VARIANTS OF 6
HMSAAA	Q3 2025	Diagnostic Testing	81405	CPT	MOLECULAR PATHOLOGY PROCEDURE, LEVEL 6 (EG, ANALYSIS OF 6-10 EXONS BY DNA SEQUENCE ANALYSIS, MUTATION SCANNING OR DUPLICATION/DELETION VARIANTS OF
HMSAAA	Q3 2025	Diagnostic Testing	81406	CPT	MOLECULAR PATHOLOGY PROCEDURE, LEVEL 7 (EG, ANALYSIS OF 11-25 EXONS BY DNA SEQUENCE ANALYSIS, MUTATION SCANNING OR DUPLICATION/DELETION VARIANTS O
HMSAAA	Q3 2025	Diagnostic Testing	81408	CPT	MOLECULAR PATHOLOGY PROCEDURE, LEVEL 9 (EG, ANALYSIS OF >50 EXONS IN A SINGLE GENE BY DNA SEQUENCE ANALYSIS) ABCA4 (ATP-BINDING CASSETTE, SUB-FAMILY A
HMSAAA	Q3 2025	Diagnostic Testing	81415	CPT	EXOME (EG, UNEXPLAINED CONSTITUTIONAL OR HERITABLE DISORDER OR SYNDROME); SEQUENCE ANALYSIS
HMSAAA	Q3 2025	Diagnostic Testing	81479	CPT	UNLISTED MOLECULAR PATHOLOGY PROCEDURE
HMSAAA	Q3 2025	Diagnostic Testing	95783	CPT	POLYSOMNOGRAPHY; YOUNGER THAN 6 YEARS, SLEEP STAGING WITH 4 OR MORE ADDITIONAL PARAMETERS OF SLEEP, WITH INITIATION OF CONTINUOUS POSITIVE AIRWAY PR
HMSAAA	Q3 2025	Diagnostic Testing	95805	CPT	MULTIPLE SLEEP LATENCY OR MAINTENANCE OF WAKEFULNESS TESTING, RECORDING, ANALYSIS AND INTERPRETATION OF PHYSIOLOGICAL MEASUREMENTS OF SLEEP DURIN
HMSAAA	Q3 2025	Diagnostic Testing	95806	CPT	SLEEP STUDY, UNATTENDED, SIMULTANEOUS RECORDING OF, HEART RATE, OXYGEN SATURATION, RESPIRATORY AIRFLOW, AND RESPIRATORY EFFORT (EG, THORACOABDOMI
HMSAAA	Q3 2025	Diagnostic Testing	95810	CPT	POLYSOMNOGRAPHY; AGE 6 YEARS OR OLDER, SLEEP STAGING WITH 4 OR MORE ADDITIONAL PARAMETERS OF SLEEP, ATTENDED BY A TECHNOLOGIST
HMSAAA	Q3 2025	Diagnostic Testing	95811	CPT	POLYSOMNOGRAPHY; AGE 6 YEARS OR OLDER, SLEEP STAGING WITH 4 OR MORE ADDITIONAL PARAMETERS OF SLEEP, WITH INITIATION OF CONTINUOUS POSITIVE AIRWAY PRE
HMSAAA	Q3 2025	Diagnostic Testing	0080U	CPT	ONCOLOGY (LUNG), MASS SPECTROMETRIC ANALYSIS OF GALECTIN-3-BINDING PROTEIN AND SCAVENGER RECEPTOR CYSTEINE-RICH TYPE 1 PROTEIN M130, WITH FIVE CLINI
HMSAAA	Q3 2025	Diagnostic Testing	0222U	CPT	RED CELL ANTIGEN (RH BLOOD GROUP) GENOTYPING (RHD AND RHCE), GENE ANALYSIS, NEXT-GENERATION SEQUENCING, RH PROXIMAL PROMOTER, EXONS 1-10, PORTIONS
HMSAAA	Q3 2025	Diagnostic Testing	0359U	CPT	ONCOLOGY (PROSTATE CANCER), ANALYSIS OF ALL PROSTATE-SPECIFIC ANTIGEN (PSA) STRUCTURAL ISOFORMS BY PHASE SEPARATION AND IMMUNOASSAY, PLASMA, ALGOR
HMSAAA	Q3 2025	Diagnostic Testing	0439U	CPT	CARDIOLOGY (CORONARY HEART DISEASE [CHD]), DNA, ANALYSIS OF 5 SINGLE-NUCLEOTIDE POLYMORPHISMS (SNPS) (RS11716050 [LOC105376934], RS6560711 [WDR37], R
					CARDIOLOGY (CORONARY HEART DISEASE [CHD]), DNA, ANALYSIS OF 10 SINGLE-NUCLEOTIDE POLYMORPHISMS (SNPS) (RS710987 [LINC010019], RS1333048 [CDKN2B-AS1],
					METHYLATION MARKERS (CG03725309 [SARS1], CG12586707 [CXCL1, CG04988978 [MPO], CG17901584 [DHCR24-DT], CG21161138 [AHRR], AND CG12655112
HMSAAA	Q3 2025	Diagnostic Testing	0440U	CPT	[EHD4]), QPCR AND DIGITAL PCR, WHOLE BLOOD, ALGORITHM REPORTED AS DETECTED OR NOT DETECTED FOR CHD
					ONCOLOGY (SOLID ORGAN NEOPLASIA), TARGETED GENOMIC SEQUENCE ANALYSIS PANEL OF 361 GENES, INTERROGATION FOR GENE FUSIONS, TRANSLOCATIONS, OR OTHE
HMSAAA	Q3 2025	Diagnostic Testing	0444U	CPT	(FFPE) TUMOR TISSUE, REPORT OF CLINICALLY SIGNIFICANT VARIANT(S)
HMSAAA	Q3 2025	Diagnostic Testing	0448U	CPT	OBSTETRICS (PRE-IMPLANTATION GENETIC TESTING), EVALUATION OF 300000 DNA SINGLE-NUCLEOTIDE POLYMORPHISMS (SNPS) BY MICROARRAY, EMBRYONIC TISSUE, ALGO
					CARRIER SCREENING FOR SEVERE INHERITED CONDITIONS (EG, CYSTIC
					FIBROSIS, SPINAL MUSCULAR ATROPHY,
					BETA HEMOGLOBINOPATHIES
					[INCLUDING SICKLE CELL DISEASE],
					ALPHA THALASSEMIA), REGARDLESS OF
					RACE OR SELF-IDENTIFIED ANCESTRY,
					GENOMIC SEQUENCE ANALYSIS
					PANEL, MUST INCLUDE ANALYSIS OF 5
					GENES (CFTR, SMN1, HBB,
HMSAAA	Q3 2025	Diagnostic Testing	0449U	CPT	HBA1, HBA2)
HMSAAA	Q3 2025	Diagnostic Testing	0460U	CPT	ONCOLOGY, WHOLE BLOOD OR BUCCAL, DNA SINGLE-NUCLEOTIDE POLYMORPHISM (SNP) GENOTYPING BY REAL-TIME PCR OF 24 GENES, WITH VARIANT ANALYSIS AND REPO
HMSAAA	Q3 2025	Diagnostic Testing	0461U	CPT	ONCOLOGY, PHARMACOGENOMIC ANALYSIS OF SINGLE-NUCLEOTIDE POLYMORPHISM (SNP) GENOTYPING BY REAL-TIME PCR OF 24 GENES, WHOLE BLOOD OR BUCCAL SWA
HMSAAA	Q3 2025	Diagnostic Testing	0465U	CPT	ONCOLOGY (UROTHELIAL CARCINOMA), DNA, QUANTITATIVE METHYLATION-SPECIFIC PCR OF 2 GENES (ONECUT2, VIM), ALGORITHMIC ANALYSIS REPORTED AS POSITIVE OR N
HMSAAA	Q3 2025	Diagnostic Testing	0469U	CPT	RARE DISEASES (CONSTITUTIONAL/HERITABLE DISORDERS), WHOLE GENOME SEQUENCE ANALYSIS FOR CHROMOSOMAL ABNORMALITIES, COPY NUMBER VARIANTS, DUPLICA
HMSAAA	Q3 2025	Diagnostic Testing	0470U	CPT	ONCOLOGY (OROPHARYNGEAL), DETECTION OF MINIMAL RESIDUAL DISEASE BY NEXT-GENERATION SEQUENCING (NGS) BASED QUANTITATIVE EVALUATION OF 8 DNA TARGET
HMSAAA	Q3 2025	Diagnostic Testing	0471U	CPT	ONCOLOGY (COLORECTAL CANCER), QUALITATIVE REAL-TIME PCR OF 35 VARIANTS OF KRAS AND NRAS GENES (EXONS 2, 3, 4), FORMALIN-FIXED PARAFFIN-EMBEDDED (FFPE),
HMSAAA	Q3 2025	Diagnostic Testing	0473U	CPT	ONCOLOGY (SOLID TUMOR), NEXT-GENERATION SEQUENCING (NGS) OF DNA FROM FORMALIN-FIXED PARAFFIN-EMBEDDED (FFPE) TISSUE WITH COMPARATIVE SEQUENCE AN
HMSAAA	Q3 2025	Diagnostic Testing	0474U	CPT	HEREDITARY PAN-CANCER (EG, HEREDITARY SARCOMAS, HEREDITARY ENDOCRINE TUMORS, HEREDITARY NEUROENDOCRINE TUMORS, HEREDITARY CUTANEOUS MELANOMA
HMSAAA	Q3 2025	Diagnostic Testing	0475U	CPT	HEREDITARY PROSTATE CANCER-RELATED DISORDERS, GENOMIC SEQUENCE ANALYSIS PANEL USING NEXT-GENERATION SEQUENCING (NGS), SANGER SEQUENCING, MULTIP
HMSAAA	Q3 2025	Diagnostic Testing	0478U	CPT	ONCOLOGY (NON-SMALL CELL LUNG CANCER), DNA AND RNA, DIGITAL PCR ANALYSIS OF 9 GENES (EGFR, KRAS, BRAF, ALK, ROS1, RET, NTRK 1/2/3, ERBB2, AND MET) IN FORM
HMSAAA	Q3 2025	Diagnostic Testing	0481U	CPT	IDH1 (ISOCITRATE DEHYDROGENASE 1 [NADP+]), IDH2 (ISOCITRATE DEHYDROGENASE 2 [NADP+]), AND TERT (TELOMERASE REVERSE TRANSCRIPTASE) PROMOTER (EG, CENTRA
HMSAAA	Q3 2025	Diagnostic Testing	0487U	CPT	ONCOLOGY (SOLID TUMOR), CELL-FREE CIRCULATING DNA, TARGETED GENOMIC SEQUENCE ANALYSIS PANEL OF 84 GENES, INTERROGATION FOR SEQUENCE VARIANTS, ANE
HMSAAA	Q3 2025	Diagnostic Testing	0488U	CPT	OBSTETRICS (FETAL ANTIGEN NONINVASIVE PRENATAL TEST), CELL-FREE DNA SEQUENCE ANALYSIS FOR DETECTION OF FETAL PRESENCE OR ABSENCE OF 1 OR MORE OF THE
HMSAAA	Q3 2025	Diagnostic Testing	0489U	CPT	OBSTETRICS (SINGLE-GENE NONINVASIVE PRENATAL TEST), CELL-FREE DNA SEQUENCE ANALYSIS OF 1 OR MORE TARGETS (EG, CFTR, SMN1, HBB, HBA1, HBA2) TO IDENTIFY PA
HMSAAA	Q3 2025	Diagnostic Testing	0493U	CPT	TRANSPLANTATION MEDICINE, QUANTIFICATION OF DONOR-DERIVED CELL-FREE DNA (CFDNA) USING NEXT-GENERATION SEQUENCING, PLASMA, REPORTED AS PERCENTAGE
HMSAAA	Q3 2025	Diagnostic Testing	0494U	CPT	RED BLOOD CELL ANTIGEN (FETAL RHD GENE ANALYSIS), NEXT-GENERATION SEQUENCING OF CIRCULATING CELL-FREE DNA (CFDNA) OF BLOOD IN PREGNANT INDIVIDUALS K
HMSAAA	Q3 2025	Diagnostic Testing	0508U	CPT	TRANSPLANTATION MEDICINE, QUANTIFICATION OF DONOR-DERIVED CELL-FREE DNA USING 40 SINGLE-NUCLEOTIDE POLYMORPHISMS (SNPS), PLASMA, AND URINE, INITIAL
HMSAAA	Q3 2025	Diagnostic Testing	0509U	CPT	TRANSPLANTATION MEDICINE, QUANTIFICATION OF DONOR-DERIVED CELL-FREE DNA USING UP TO 12 SINGLE-NUCLEOTIDE POLYMORPHISMS (SNPS) PREVIOUSLY IDENTIFIED
HMSAAA	Q3 2025	Diagnostic Testing	33206	CPT	INSERTION OF NEW OR REPLACEMENT OF PERMANENT PACEMAKER WITH TRANSVENOUS ELECTRODE(S); ATRIAL
HMSAAA	Q3 2025	Diagnostic Testing	33207	CPT	INSERTION OF NEW OR REPLACEMENT OF PERMANENT PACEMAKER WITH TRANSVENOUS ELECTRODE(S); VENTRICULAR
HMSAAA	Q3 2025	Diagnostic Testing	33208	CPT	INSERTION OF NEW OR REPLACEMENT OF PERMANENT PACEMAKER WITH TRANSVENOUS ELECTRODE(S); ATRIAL AND VENTRICULAR
HMSAAA	Q3 2025	Diagnostic Testing	33212	CPT	INSERTION OF PACEMAKER PULSE GENERATOR ONLY; WITH EXISTING SINGLE LEAD
HMSAAA	Q3 2025	Diagnostic Testing	33213	CPT	INSERTION OF PACEMAKER PULSE GENERATOR ONLY; WITH EXISTING DUAL LEADS
HMSAAA	Q3 2025	Diagnostic Testing	33221	CPT	INSERTION OF PACEMAKER PULSE GENERATOR ONLY; WITH EXISTING MULTIPLE LEADS
HMSAAA	Q3 2025	Diagnostic Testing	33224	CPT	INSERTION OF PACING ELECTRODE, CARDIAC VENOUS SYSTEM, FOR LEFT VENTRICULAR PACING, WITH ATTACHMENT TO PREVIOUSLY PLACED PACEMAKER OR IMPLANTABLE D
HMSAAA	Q3 2025	Diagnostic Testing	33225	CPT	INSERTION OF PACING ELECTRODE, CARDIAC VENOUS SYSTEM, FOR LEFT VENTRICULAR PACING, AT TIME OF INSERTION OF IMPLANTABLE DEFIBRILLATOR OR PACEMAKER PUL
HMSAAA	Q3 2025	Diagnostic Testing	33230	CPT	INSERTION OF IMPLANTABLE DEFIBRILLATOR PULSE GENERATOR ONLY; WITH EXISTING DUAL LEADS
HMSAAA	Q3 2025	Diagnostic Testing	33231	CPT	INSERTION OF IMPLANTABLE DEFIBRILLATOR PULSE GENERATOR ONLY; WITH EXISTING MULTIPLE LEADS
HMSAAA	Q3 2025	Diagnostic Testing	33240	CPT	INSERTION OF IMPLANTABLE DEFIBRILLATOR PULSE GENERATOR ONLY; WITH EXISTING SINGLE LEAD
HMSAAA	Q3 2025	Diagnostic Testing	33249	CPT	INSERTION OR REPLACEMENT OF PERMANENT IMPLANTABLE DEFIBRILLATOR SYSTEM, WITH TRANSVENOUS LEAD(S), SINGLE OR DUAL CHAMBER
HMSAAA	Q3 2025	Diagnostic Testing	33285	CPT	INSERTION, SUBCUTANEOUS CARDIAC RHYTHM MONITOR, INCLUDING PROGRAMMING
HMSAAA	Q3 2025	Diagnostic Testing	36465	CPT	INJECTION OF NON-COMPOUNDED FOAM SCLEROSANT WITH ULTRASOUND COMPRESSION MANEUVERS TO GUIDE DISPERSION OF THE INJECTATE, INCLUSIVE OF ALL IMAGIN
HMSAAA	Q3 2025	Diagnostic Testing	36466	CPT	INJECTION OF NON-COMPOUNDED FOAM SCLEROSANT WITH ULTRASOUND COMPRESSION MANEUVERS TO GUIDE DISPERSION OF THE INJECTATE, INCLUSIVE OF ALL IMAGIN

HMSAAA	Q3 2025	Diagnostic Testing	36473	CPT	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, INCLUSIVE OF ALL IMAGING GUIDANCE AND MONITORING, PERCUTANEOUS, MECHANOCHEMICAL; FIR
HMSAAA	Q3 2025	Diagnostic Testing	36474	CPT	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, INCLUSIVE OF ALL IMAGING GUIDANCE AND MONITORING, PERCUTANEOUS, MECHANOCHEMICAL; SU
HMSAAA	Q3 2025	Diagnostic Testing	36476	CPT	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, INCLUSIVE OF ALL IMAGING GUIDANCE AND MONITORING, PERCUTANEOUS, RADIOFREQUENCY; SUBS
HMSAAA	Q3 2025	Diagnostic Testing	36479	CPT	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, INCLUSIVE OF ALL IMAGING GUIDANCE AND MONITORING, PERCUTANEOUS, LASER; SUBSEQUENT VEIN
HMSAAA	Q3 2025	Diagnostic Testing	36482	CPT	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, BY TRANSCATHETER DELIVERY OF A CHEMICAL ADHESIVE (EG, CYANOACRYLATE) REMOTE FROM THE AC
HMSAAA	Q3 2025	Diagnostic Testing	36483	CPT	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, BY TRANSCATHETER DELIVERY OF A CHEMICAL ADHESIVE (EG, CYANOACRYLATE) REMOTE FROM THE AC
HMSAAA	Q3 2025	Diagnostic Testing	37761	CPT	LIGATION OF PERFORATOR VEIN(S), SUBFASCIAL, OPEN, INCLUDING ULTRASOUND GUIDANCE, WHEN PERFORMED, 1 LEG
HMSAAA	Q3 2025	Diagnostic Testing	37766	CPT	STAB PHLEBECTOMY OF VARICOSE VEINS, 1 EXTREMITY; MORE THAN 20 INCISIONS
HMSAAA	Q3 2025	Diagnostic Testing	37799	CPT	UNLISTED PROCEDURE, VASCULAR SURGERY
HMSAAA	Q3 2025	Diagnostic Testing	61796	CPT	STEREOTACTIC RADIOSURGERY (PARTICLE BEAM, GAMMA RAY, OR LINEAR ACCELERATOR); 1 SIMPLE CRANIAL LESION
HMSAAA	Q3 2025	Diagnostic Testing	61797	CPT	STEREOTACTIC RADIOSURGERY (PARTICLE BEAM, GAMMA RAY, OR LINEAR ACCELERATOR); EACH ADDITIONAL CRANIAL LESION, SIMPLE (LIST SEPARATELY IN ADDITION TO COD
HMSAAA	Q3 2025	Diagnostic Testing	61798	CPT	STEREOTACTIC RADIOSURGERY (PARTICLE BEAM, GAMMA RAY, OR LINEAR ACCELERATOR); 1 COMPLEX CRANIAL LESION
HMSAAA	Q3 2025	Diagnostic Testing	61799	CPT	STEREOTACTIC RADIOSURGERY (PARTICLE BEAM, GAMMA RAY, OR LINEAR ACCELERATOR); EACH ADDITIONAL CRANIAL LESION, COMPLEX (LIST SEPARATELY IN ADDITION TO C
HMSAAA	Q3 2025	Diagnostic Testing	61800	CPT	APPLICATION OF STEREOTACTIC HEADFRAME FOR STEREOTACTIC RADIOSURGERY (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
HMSAAA	Q3 2025	Diagnostic Testing	63620	CPT	STEREOTACTIC RADIOSURGERY (PARTICLE BEAM, GAMMA RAY, OR LINEAR ACCELERATOR); 1 SPINAL LESION
HMSAAA	Q3 2025	Diagnostic Testing	63621	CPT	STEREOTACTIC RADIOSURGERY (PARTICLE BEAM, GAMMA RAY, OR LINEAR ACCELERATOR); EACH ADDITIONAL SPINAL LESION (LIST SEPARATELY IN ADDITION TO CODE FOR PR
HMSAAA	Q3 2025	Diagnostic Testing	70336	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, TEMPOROMANDIBULAR JOINT(S)
HMSAAA	Q3 2025	Diagnostic Testing	70450	CPT	COMPUTED TOMOGRAPHY, HEAD OR BRAIN; WITHOUT CONTRAST MATERIAL
HMSAAA	Q3 2025	Diagnostic Testing	70460	CPT	COMPUTED TOMOGRAPHY, HEAD OR BRAIN; WITH CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	70470	CPT	COMPUTED TOMOGRAPHY, HEAD OR BRAIN; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
HMSAAA	Q3 2025	Diagnostic Testing	70480	CPT	COMPUTED TOMOGRAPHY, ORBIT, SELLA, OR POSTERIOR FOSSA OR OUTER, MIDDLE, OR INNER EAR; WITHOUT CONTRAST MATERIAL
HMSAAA	Q3 2025	Diagnostic Testing	70481	CPT	COMPUTED TOMOGRAPHY, ORBIT, SELLA, OR POSTERIOR FOSSA OR OUTER, MIDDLE, OR INNER EAR; WITH CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	70482	CPT	COMPUTED TOMOGRAPHY, ORBIT, SELLA, OR POSTERIOR FOSSA OR OUTER, MIDDLE, OR INNER EAR; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) A
HMSAAA	Q3 2025	Diagnostic Testing	70486	CPT	COMPUTED TOMOGRAPHY, MAXILLOFACIAL AREA; WITHOUT CONTRAST MATERIAL
HMSAAA	Q3 2025	Diagnostic Testing	70487	CPT	COMPUTED TOMOGRAPHY, MAXILLOFACIAL AREA; WITH CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	70488	CPT	COMPUTED TOMOGRAPHY, MAXILLOFACIAL AREA; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
HMSAAA	Q3 2025	Diagnostic Testing	70490	CPT	COMPUTED TOMOGRAPHY, SOFT TISSUE NECK; WITHOUT CONTRAST MATERIAL
HMSAAA	Q3 2025	Diagnostic Testing	70491	CPT	COMPUTED TOMOGRAPHY, SOFT TISSUE NECK; WITH CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	70492	CPT	COMPUTED TOMOGRAPHY, SOFT TISSUE NECK; WITHOUT CONTRAST MATERIAL FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
HMSAAA	Q3 2025	Diagnostic Testing	70496	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, HEAD, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED, AND IMAGE POSTPROCESSING
HMSAAA	Q3 2025	Diagnostic Testing	70498	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, NECK, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED, AND IMAGE POSTPROCESSING
HMSAAA	Q3 2025	Diagnostic Testing	70540	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ORBIT, FACE, AND/OR NECK; WITHOUT CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	70542	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ORBIT, FACE, AND/OR NECK; WITH CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	70543	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ORBIT, FACE, AND/OR NECK; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SEQUE
HMSAAA	Q3 2025	Diagnostic Testing	70544	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, HEAD; WITHOUT CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	70545	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, HEAD; WITH CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	70546	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, HEAD; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SEQUENCES
HMSAAA	Q3 2025	Diagnostic Testing	70547	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, NECK; WITHOUT CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	70548	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, NECK; WITH CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	70549	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, NECK; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SEQUENCES
HMSAAA	Q3 2025	Diagnostic Testing	70551	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM); WITHOUT CONTRAST MATERIAL
HMSAAA	Q3 2025	Diagnostic Testing	70552	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM); WITH CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	70553	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM); WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SEQ
HMSAAA	Q3 2025	Diagnostic Testing	70554	CPT	MAGNETIC RESONANCE IMAGING, BRAIN, FUNCTIONAL MRI; INCLUDING TEST SELECTION AND ADMINISTRATION OF REPETITIVE BODY PART MOVEMENT AND/OR VISUAL STIMU
HMSAAA	Q3 2025	Diagnostic Testing	70555	CPT	MAGNETIC RESONANCE IMAGING, BRAIN, FUNCTIONAL MRI; REQUIRING PHYSICIAN OR PSYCHOLOGIST ADMINISTRATION OF ENTIRE NEUROFUNCTIONAL TESTING
HMSAAA	Q3 2025	Diagnostic Testing	71250	CPT	COMPUTED TOMOGRAPHY, THORAX, DIAGNOSTIC; WITHOUT CONTRAST MATERIAL
HMSAAA	Q3 2025	Diagnostic Testing	71260	CPT	COMPUTED TOMOGRAPHY, THORAX, DIAGNOSTIC; WITH CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	71270	CPT	COMPUTED TOMOGRAPHY, THORAX, DIAGNOSTIC; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
HMSAAA	Q3 2025	Diagnostic Testing	71271	CPT	COMPUTED TOMOGRAPHY, THORAX, LOW DOSE FOR LUNG CANCER SCREENING, WITHOUT CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	71275	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, CHEST (NONCORONARY), WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED, AND IMAGE POSTPR
HMSAAA	Q3 2025	Diagnostic Testing	71550	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, CHEST (EG, FOR EVALUATION OF HILAR AND MEDIASTINAL LYMPHADENOPATHY); WITHOUT CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	71551	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, CHEST (EG, FOR EVALUATION OF HILAR AND MEDIASTINAL LYMPHADENOPATHY); WITH CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	71552	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, CHEST (EG, FOR EVALUATION OF HILAR AND MEDIASTINAL LYMPHADENOPATHY); WITHOUT CONTRAST MATERIAL(S), FOLLOW
HMSAAA	Q3 2025	Diagnostic Testing	71555	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, CHEST (EXCLUDING MYOCARDIUM), WITH OR WITHOUT CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	72125	CPT	COMPUTED TOMOGRAPHY, CERVICAL SPINE; WITHOUT CONTRAST MATERIAL
HMSAAA	Q3 2025	Diagnostic Testing	72126	CPT	COMPUTED TOMOGRAPHY, CERVICAL SPINE; WITH CONTRAST MATERIAL
HMSAAA	Q3 2025	Diagnostic Testing	72127	CPT	COMPUTED TOMOGRAPHY, CERVICAL SPINE; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
HMSAAA	Q3 2025	Diagnostic Testing	72128	CPT	COMPUTED TOMOGRAPHY, THORACIC SPINE; WITHOUT CONTRAST MATERIAL
HMSAAA	Q3 2025	Diagnostic Testing	72129	CPT	COMPUTED TOMOGRAPHY, THORACIC SPINE; WITH CONTRAST MATERIAL
HMSAAA	Q3 2025	Diagnostic Testing	72130	CPT	COMPUTED TOMOGRAPHY, THORACIC SPINE; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
HMSAAA	Q3 2025	Diagnostic Testing	72131	CPT	COMPUTED TOMOGRAPHY, LUMBAR SPINE; WITHOUT CONTRAST MATERIAL
HMSAAA	Q3 2025	Diagnostic Testing	72132	CPT	COMPUTED TOMOGRAPHY, LUMBAR SPINE; WITH CONTRAST MATERIAL
HMSAAA	Q3 2025	Diagnostic Testing	72133	CPT	COMPUTED TOMOGRAPHY, LUMBAR SPINE; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
HMSAAA	Q3 2025	Diagnostic Testing	72141	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, CERVICAL; WITHOUT CONTRAST MATERIAL
HMSAAA	Q3 2025	Diagnostic Testing	72142	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, CERVICAL; WITH CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	72146	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, THORACIC; WITHOUT CONTRAST MATERIAL
HMSAAA	Q3 2025	Diagnostic Testing	72147	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, THORACIC; WITH CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	72148	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, LUMBAR; WITHOUT CONTRAST MATERIAL
HMSAAA	Q3 2025	Diagnostic Testing	72149	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, LUMBAR; WITH CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	72156	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SEQUI
HMSAAA	Q3 2025	Diagnostic Testing	72157	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SEQUI
HMSAAA	Q3 2025	Diagnostic Testing	72158	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SEQUI
HMSAAA	Q3 2025	Diagnostic Testing	72159	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, SPINAL CANAL AND CONTENTS, WITH OR WITHOUT CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	72191	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, PELVIS, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED, AND IMAGE POSTPROCESSING
HMSAAA	Q3 2025	Diagnostic Testing	72192	CPT	COMPUTED TOMOGRAPHY, PELVIS; WITHOUT CONTRAST MATERIAL
HMSAAA	Q3 2025	Diagnostic Testing	72193	CPT	COMPUTED TOMOGRAPHY, PELVIS; WITH CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	72194	CPT	COMPUTED TOMOGRAPHY, PELVIS; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
HMSAAA	Q3 2025	Diagnostic Testing	72195	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, PELVIS; WITHOUT CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	72196	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, PELVIS; WITH CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	72197	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, PELVIS; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SEQUENCES
HMSAAA	Q3 2025	Diagnostic Testing	72198	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, PELVIS, WITH OR WITHOUT CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	73200	CPT	COMPUTED TOMOGRAPHY, UPPER EXTREMITY; WITHOUT CONTRAST MATERIAL
HMSAAA	Q3 2025	Diagnostic Testing	73201	CPT	COMPUTED TOMOGRAPHY, UPPER EXTREMITY; WITH CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	73202	CPT	COMPUTED TOMOGRAPHY, UPPER EXTREMITY; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
HMSAAA	Q3 2025	Diagnostic Testing	73206	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, UPPER EXTREMITY, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED, AND IMAGE POSTPROCESS
HMSAAA	Q3 2025	Diagnostic Testing	73218	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, UPPER EXTREMITY, OTHER THAN JOINT; WITHOUT CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	73219	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, UPPER EXTREMITY, OTHER THAN JOINT; WITH CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	73220	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, UPPER EXTREMITY, OTHER THAN JOINT; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL(S) AND FURTH
HMSAAA	Q3 2025	Diagnostic Testing	73221	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF UPPER EXTREMITY; WITHOUT CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	73222	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF UPPER EXTREMITY; WITH CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	73223	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF UPPER EXTREMITY; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SE
HMSAAA	Q3 2025	Diagnostic Testing	73225	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, UPPER EXTREMITY, WITH OR WITHOUT CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	73700	CPT	COMPUTED TOMOGRAPHY, LOWER EXTREMITY; WITHOUT CONTRAST MATERIAL

HMSAAA	Q3 2025	Diagnostic Testing	73701	CPT	COMPUTED TOMOGRAPHY, LOWER EXTREMITY; WITH CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	73702	CPT	COMPUTED TOMOGRAPHY, LOWER EXTREMITY; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
HMSAAA	Q3 2025	Diagnostic Testing	73706	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, LOWER EXTREMITY, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED, AND IMAGE POSTPROCES
HMSAAA	Q3 2025	Diagnostic Testing	73718	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, LOWER EXTREMITY OTHER THAN JOINT; WITHOUT CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	73719	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, LOWER EXTREMITY OTHER THAN JOINT; WITH CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	73720	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, LOWER EXTREMITY OTHER THAN JOINT; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL(S) AND FURTH
HMSAAA	Q3 2025	Diagnostic Testing	73722	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF LOWER EXTREMITY; WITH CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	73723	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF LOWER EXTREMITY; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER S
HMSAAA	Q3 2025	Diagnostic Testing	73725	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, LOWER EXTREMITY, WITH OR WITHOUT CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	74150	CPT	COMPUTED TOMOGRAPHY, ABDOMEN; WITHOUT CONTRAST MATERIAL
HMSAAA	Q3 2025	Diagnostic Testing	74160	CPT	COMPUTED TOMOGRAPHY, ABDOMEN; WITH CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	74170	CPT	COMPUTED TOMOGRAPHY, ABDOMEN; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
HMSAAA	Q3 2025	Diagnostic Testing	74174	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, ABDOMEN AND PELVIS, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED, AND IMAGE POSTPRO
HMSAAA	Q3 2025	Diagnostic Testing	74175	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, ABDOMEN, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED, AND IMAGE POSTPROCESSING
HMSAAA	Q3 2025	Diagnostic Testing	74176	CPT	COMPUTED TOMOGRAPHY, ABDOMEN AND PELVIS; WITHOUT CONTRAST MATERIAL
HMSAAA	Q3 2025	Diagnostic Testing	74177	CPT	COMPUTED TOMOGRAPHY, ABDOMEN AND PELVIS; WITH CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	74178	CPT	COMPUTED TOMOGRAPHY, ABDOMEN AND PELVIS; WITHOUT CONTRAST MATERIAL IN ONE OR BOTH BODY REGIONS, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SE
HMSAAA	Q3 2025	Diagnostic Testing	74181	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ABDOMEN; WITHOUT CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	74182	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ABDOMEN; WITH CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	74183	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ABDOMEN; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY WITH CONTRAST MATERIAL(S) AND FURTHER SEQUENCES
HMSAAA	Q3 2025	Diagnostic Testing	74185	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, ABDOMEN, WITH OR WITHOUT CONTRAST MATERIAL(S)
HMSAAA	Q3 2025	Diagnostic Testing	74261	CPT	COMPUTED TOMOGRAPHIC (CT) COLONOGRAPHY, DIAGNOSTIC, INCLUDING IMAGE POSTPROCESSING; WITHOUT CONTRAST MATERIAL
HMSAAA	Q3 2025	Diagnostic Testing	74262	CPT	COMPUTED TOMOGRAPHIC (CT) COLONOGRAPHY, DIAGNOSTIC, INCLUDING IMAGE POSTPROCESSING; WITH CONTRAST MATERIAL(S) INCLUDING NON-CONTRAST IMAGES, IF
HMSAAA	Q3 2025	Diagnostic Testing	75557	CPT	CARDIAC MAGNETIC RESONANCE IMAGING FOR MORPHOLOGY AND FUNCTION WITHOUT CONTRAST MATERIAL;
HMSAAA	Q3 2025	Diagnostic Testing	75559	CPT	CARDIAC MAGNETIC RESONANCE IMAGING FOR MORPHOLOGY AND FUNCTION WITHOUT CONTRAST MATERIAL; WITH STRESS IMAGING
HMSAAA	Q3 2025	Diagnostic Testing	75561	CPT	CARDIAC MAGNETIC RESONANCE IMAGING FOR MORPHOLOGY AND FUNCTION WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SEQU
HMSAAA	Q3 2025	Diagnostic Testing	75563	CPT	CARDIAC MAGNETIC RESONANCE IMAGING FOR MORPHOLOGY AND FUNCTION WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SEQU
HMSAAA	Q3 2025	Diagnostic Testing	75565	CPT	CARDIAC MAGNETIC RESONANCE IMAGING FOR VELOCITY FLOW MAPPING (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
HMSAAA	Q3 2025	Diagnostic Testing	75571	CPT	COMPUTED TOMOGRAPHY, HEART, WITHOUT CONTRAST MATERIAL, WITH QUANTITATIVE EVALUATION OF CORONARY CALCIUM
HMSAAA	Q3 2025	Diagnostic Testing	75572	CPT	COMPUTED TOMOGRAPHY, HEART, WITH CONTRAST MATERIAL, FOR EVALUATION OF CARDIAC STRUCTURE AND MORPHOLOGY (INCLUDING 3D IMAGE POSTPROCESSING, ASS
HMSAAA	Q3 2025	Diagnostic Testing	75573	CPT	COMPUTED TOMOGRAPHY, HEART, WITH CONTRAST MATERIAL, FOR EVALUATION OF CARDIAC STRUCTURE AND MORPHOLOGY IN THE SETTING OF CONGENITAL HEART DISEAS
HMSAAA	Q3 2025	Diagnostic Testing	75574	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, HEART, CORONARY ARTERIES AND BYPASS GRAFTS (WHEN PRESENT), WITH CONTRAST MATERIAL, INCLUDING 3D IMAGE POSTPRO
HMSAAA	Q3 2025	Diagnostic Testing	75635	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, ABDOMINAL AORTA AND BILATERAL ILIOFEMORAL LOWER EXTREMITY RUNOFF, WITH CONTRAST MATERIAL(S), INCLUDING NONCO
HMSAAA	Q3 2025	Diagnostic Testing	76380	CPT	COMPUTED TOMOGRAPHY, LIMITED OR LOCALIZED FOLLOW-UP STUDY
HMSAAA	Q3 2025	Diagnostic Testing	76390	CPT	MAGNETIC RESONANCE SPECTROSCOPY
HMSAAA	Q3 2025	Diagnostic Testing	76497	CPT	UNLISTED COMPUTED TOMOGRAPHY PROCEDURE (EG, DIAGNOSTIC, INTERVENTIONAL)
HMSAAA	Q3 2025	Diagnostic Testing	76498	CPT	UNLISTED MAGNETIC RESONANCE PROCEDURE (EG, DIAGNOSTIC, INTERVENTIONAL)
HMSAAA	Q3 2025	Diagnostic Testing	77046	CPT	MAGNETIC RESONANCE IMAGING, BREAST, WITHOUT CONTRAST MATERIAL; UNILATERAL
HMSAAA	Q3 2025	Diagnostic Testing	77047	CPT	MAGNETIC RESONANCE IMAGING, BREAST, WITHOUT CONTRAST MATERIAL; BILATERAL
HMSAAA	Q3 2025	Diagnostic Testing	77048	CPT	MAGNETIC RESONANCE IMAGING, BREAST, WITHOUT AND WITH CONTRAST MATERIAL(S), INCLUDING COMPUTER-AIDED DETECTION (CAD REAL-TIME LESION DETECTION, CHA
HMSAAA	Q3 2025	Diagnostic Testing	77049	CPT	MAGNETIC RESONANCE IMAGING, BREAST, WITHOUT AND WITH CONTRAST MATERIAL(S), INCLUDING COMPUTER-AIDED DETECTION (CAD REAL-TIME LESION DETECTION, CHA
HMSAAA	Q3 2025	Diagnostic Testing	77078	CPT	COMPUTED TOMOGRAPHY, BONE MINERAL DENSITY STUDY, 1 OR MORE SITES, AXIAL SKELETON (EG, HIPS, PELVIS, SPINE)
HMSAAA	Q3 2025	Diagnostic Testing	77081	CPT	DUAL-ENERGY X-RAY ABSORPTIOMETRY (DXA), BONE DENSITY STUDY, 1 OR MORE SITES; APPENDICULAR SKELETON (PERIPHERAL) (EG, RADIUS, WRIST, HEEL)
HMSAAA	Q3 2025	Diagnostic Testing	77084	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BONE MARROW BLOOD SUPPLY
HMSAAA	Q3 2025	Diagnostic Testing	77372	CPT	RADIATION TREATMENT DELIVERY, STEREOTACTIC RADIOSURGERY (SRS), COMPLETE COURSE OF TREATMENT OF CRANIAL LESION(S) CONSISTING OF 1 SESSION; LINEAR ACCE
HMSAAA	Q3 2025	Diagnostic Testing	77373	CPT	STEREOTACTIC BODY RADIATION THERAPY, TREATMENT DELIVERY, PER FRACTION TO 1 OR MORE LESIONS, INCLUDING IMAGE GUIDANCE, ENTIRE COURSE NOT TO EXCEED 5 FI
HMSAAA	Q3 2025	Diagnostic Testing	77432	CPT	STEREOTACTIC RADIATION TREATMENT MANAGEMENT OF CRANIAL LESION(S) (COMPLETE COURSE OF TREATMENT CONSISTING OF 1 SESSION)
HMSAAA	Q3 2025	Diagnostic Testing	77435	CPT	STEREOTACTIC BODY RADIATION THERAPY, TREATMENT MANAGEMENT, PER TREATMENT COURSE, TO 1 OR MORE LESIONS, INCLUDING IMAGE GUIDANCE, ENTIRE COURSE NOT
HMSAAA	Q3 2025	Diagnostic Testing	78429	CPT	MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), METABOLIC EVALUATION STUDY (INCLUDING VENTRICULAR WALL MOTION[S] AND/OR EJECTION FRACTION[
HMSAAA	Q3 2025	Diagnostic Testing	78430	CPT	MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), PERFUSION STUDY (INCLUDING VENTRICULAR WALL MOTION[S] AND/OR EJECTION FRACTION[S], WHEN PER
HMSAAA	Q3 2025	Diagnostic Testing	78431	CPT	MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), PERFUSION STUDY (INCLUDING VENTRICULAR WALL MOTION[S] AND/OR EJECTION FRACTION[S], WHEN PER
HMSAAA	Q3 2025	Diagnostic Testing	78432	CPT	MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), COMBINED PERFUSION WITH METABOLIC EVALUATION STUDY (INCLUDING VENTRICULAR WALL MOTION[S]
HMSAAA	Q3 2025	Diagnostic Testing	78433	CPT	MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), COMBINED PERFUSION WITH METABOLIC EVALUATION STUDY (INCLUDING VENTRICULAR WALL MOTION[S]
HMSAAA	Q3 2025	Diagnostic Testing	78434	CPT	ABSOLUTE QUANTITATION OF MYOCARDIAL BLOOD FLOW (AQMBF), POSITRON EMISSION TOMOGRAPHY (PET), REST AND PHARMACOLOGIC STRESS (LIST SEPARATELY IN ADDI
HMSAAA	Q3 2025	Diagnostic Testing	78451	CPT	MYOCARDIAL PERFUSION IMAGING, TOMOGRAPHIC (SPECT) (INCLUDING ATTENUATION CORRECTION, QUALITATIVE OR QUANTITATIVE WALL MOTION, EJECTION FRACTION BY
HMSAAA	Q3 2025	Diagnostic Testing	78452	CPT	MYOCARDIAL PERFUSION IMAGING, TOMOGRAPHIC (SPECT) (INCLUDING ATTENUATION CORRECTION, QUALITATIVE OR QUANTITATIVE WALL MOTION, EJECTION FRACTION BY
HMSAAA	Q3 2025	Diagnostic Testing	78453	CPT	MYOCARDIAL PERFUSION IMAGING, PLANAR (INCLUDING QUALITATIVE OR QUANTITATIVE WALL MOTION, EJECTION FRACTION BY FIRST PASS OR GATED TECHNIQUE, ADDITION
HMSAAA	Q3 2025	Diagnostic Testing	78454	CPT	MYOCARDIAL PERFUSION IMAGING, PLANAR (INCLUDING QUALITATIVE OR QUANTITATIVE WALL MOTION, EJECTION FRACTION BY FIRST PASS OR GATED TECHNIQUE, ADDITION
HMSAAA	Q3 2025	Diagnostic Testing	78459	CPT	MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), METABOLIC EVALUATION STUDY (INCLUDING VENTRICULAR WALL MOTION[S] AND/OR EJECTION FRACTION[
HMSAAA	Q3 2025	Diagnostic Testing	78466	CPT	MYOCARDIAL IMAGING, INFARCT AVID, PLANAR; QUALITATIVE OR QUANTITATIVE
HMSAAA	Q3 2025	Diagnostic Testing	78468	CPT	MYOCARDIAL IMAGING, INFARCT AVID, PLANAR; WITH EJECTION FRACTION BY FIRST PASS TECHNIQUE
HMSAAA	Q3 2025	Diagnostic Testing	78469	CPT	MYOCARDIAL IMAGING, INFARCT AVID, PLANAR; TOMOGRAPHIC SPECT WITH OR WITHOUT QUANTIFICATION
HMSAAA	Q3 2025	Diagnostic Testing	78472	CPT	CARDIAC BLOOD POOL IMAGING, GATED EQUILIBRIUM; PLANAR, SINGLE STUDY AT REST OR STRESS (EXERCISE AND/OR PHARMACOLOGIC), WALL MOTION STUDY PLUS EJECTIO
HMSAAA	Q3 2025	Diagnostic Testing	78473	CPT	CARDIAC BLOOD POOL IMAGING, GATED EQUILIBRIUM; MULTIPLE STUDIES, WALL MOTION STUDY PLUS EJECTION FRACTION, AT REST AND STRESS (EXERCISE AND/OR PHARMA
HMSAAA	Q3 2025	Diagnostic Testing	78481	CPT	CARDIAC BLOOD POOL IMAGING (PLANAR), FIRST PASS TECHNIQUE; SINGLE STUDY, AT REST OR WITH STRESS (EXERCISE AND/OR PHARMACOLOGIC), WALL MOTION STUDY PL
HMSAAA	Q3 2025	Diagnostic Testing	78483	CPT	CARDIAC BLOOD POOL IMAGING (PLANAR), FIRST PASS TECHNIQUE; MULTIPLE STUDIES, AT REST AND WITH STRESS (EXERCISE AND/OR PHARMACOLOGIC), WALL MOTION STU
HMSAAA	Q3 2025	Diagnostic Testing	78491	CPT	MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), PERFUSION STUDY (INCLUDING VENTRICULAR WALL MOTION[S] AND/OR EJECTION FRACTION[S], WHEN PER
HMSAAA	Q3 2025	Diagnostic Testing	78492	CPT	MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), PERFUSION STUDY (INCLUDING VENTRICULAR WALL MOTION[S] AND/OR EJECTION FRACTION[S], WHEN PER
HMSAAA	Q3 2025	Diagnostic Testing	78494	CPT	CARDIAC BLOOD POOL IMAGING, GATED EQUILIBRIUM, SPECT, AT REST, WALL MOTION STUDY PLUS EJECTION FRACTION, WITH OR WITHOUT QUANTITATIVE PROCESSING
HMSAAA	Q3 2025	Diagnostic Testing	78496	CPT	CARDIAC BLOOD POOL IMAGING, GATED EQUILIBRIUM, SINGLE STUDY, AT REST, WITH RIGHT VENTRICULAR EJECTION FRACTION BY FIRST PASS TECHNIQUE (LIST SEPARATELY I
HMSAAA	Q3 2025	Diagnostic Testing	78499	CPT	UNLISTED CARDIOVASCULAR PROCEDURE, DIAGNOSTIC NUCLEAR MEDICINE
HMSAAA	Q3 2025	Diagnostic Testing	78608	CPT	BRAIN IMAGING, POSITRON EMISSION TOMOGRAPHY (PET); METABOLIC EVALUATION
HMSAAA	Q3 2025	Diagnostic Testing	78609	CPT	BRAIN IMAGING, POSITRON EMISSION TOMOGRAPHY (PET); PERFUSION EVALUATION
HMSAAA	Q3 2025	Diagnostic Testing	78803	CPT	RADIOPHARMACEUTICAL LOCALIZATION OF TUMOR, INFLAMMATORY PROCESS OR DISTRIBUTION OF RADIOPHARMACEUTICAL AGENT(S) (INCLUDES VASCULAR FLOW AND BLO
HMSAAA	Q3 2025	Diagnostic Testing	78811	CPT	POSITRON EMISSION TOMOGRAPHY (PET) IMAGING; LIMITED AREA (EG, CHEST, HEAD/NECK)
HMSAAA	Q3 2025	Diagnostic Testing	78812	CPT	POSITRON EMISSION TOMOGRAPHY (PET) IMAGING; SKULL BASE TO MID-THIGH
HMSAAA	Q3 2025	Diagnostic Testing	78813	CPT	POSITRON EMISSION TOMOGRAPHY (PET) IMAGING; WHOLE BODY
HMSAAA	Q3 2025	Diagnostic Testing	78814	CPT	POSITRON EMISSION TOMOGRAPHY (PET) WITH CONCURRENTLY ACQUIRED COMPUTED TOMOGRAPHY (CT) FOR ATTENUATION CORRECTION AND ANATOMICAL LOCALIZATION
HMSAAA	Q3 2025	Diagnostic Testing	78815	CPT	POSITRON EMISSION TOMOGRAPHY (PET) WITH CONCURRENTLY ACQUIRED COMPUTED TOMOGRAPHY (CT) FOR ATTENUATION CORRECTION AND ANATOMICAL LOCALIZATION
HMSAAA	Q3 2025	Diagnostic Testing	78816	CPT	POSITRON EMISSION TOMOGRAPHY (PET) WITH CONCURRENTLY ACQUIRED COMPUTED TOMOGRAPHY (CT) FOR ATTENUATION CORRECTION AND ANATOMICAL LOCALIZATION
HMSAAA	Q3 2025	Diagnostic Testing	81299	CPT	MSH6 (MUTS HOMOLOG 6 [E. COLI]) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANALYSIS; KNOWN FAMILIAL VARIANTS
HMSAAA	Q3 2025	Diagnostic Testing	81381	CPT	HLA CLASS I TYPING, HIGH RESOLUTION (IE, ALLELES OR ALLELE GROUPS); ONE ALLELE OR ALLELE GROUP (EG, B*57:01P), EACH
HMSAAA	Q3 2025	Diagnostic Testing	81411	CPT	AORTIC DYSFUNCTION OR DILATION (EG, MARFAN SYNDROME, LOEYS DIETZ SYNDROME, EHLER DANLOS SYNDROME TYPE IV, ARTERIAL TORTUOSITY SYNDROME); DUPLICATIO
HMSAAA	Q3 2025	Diagnostic Testing	81457	CPT	SOLID ORGAN NEOPLASM, GENOMIC SEQUENCE ANALYSIS PANEL, INTERROGATION FOR SEQUENCE VARIANTS; DNA ANALYSIS, MICROSATELLITE INSTABILITY
HMSAAA	Q3 2025	Diagnostic Testing	81458	CPT	SOLID ORGAN NEOPLASM, GENOMIC SEQUENCE ANALYSIS PANEL, INTERROGATION FOR SEQUENCE VARIANTS; DNA ANALYSIS, COPY NUMBER VARIANTS AND MICROSATELLIT
HMSAAA	Q3 2025	Diagnostic Testing	81459	CPT	SOLID ORGAN NEOPLASM, GENOMIC SEQUENCE ANALYSIS PANEL, INTERROGATION FOR SEQUENCE VARIANTS; DNA ANALYSIS OR COMBINED DNA AND RNA ANALYSIS, COPY N
HMSAAA	Q3 2025	Diagnostic Testing	81462	CPT	SOLID ORGAN NEOPLASM, GENOMIC SEQUENCE ANALYSIS PANEL, CELL-FREE NUCLEIC ACID (EG, PLASMA), INTERROGATION FOR SEQUENCE VARIANTS; DNA ANALYSIS OR CO
HMSAAA	Q3 2025	Diagnostic Testing	81463	CPT	SOLID ORGAN NEOPLASM, GENOMIC SEQUENCE ANALYSIS PANEL, CELL-FREE NUCLEIC ACID (EG, PLASMA), INTERROGATION FOR SEQUENCE VARIANTS; DNA ANALYSIS, COPY
HMSAAA	Q3 2025	Diagnostic Testing	81464	CPT	SOLID ORGAN NEOPLASM, GENOMIC SEQUENCE ANALYSIS PANEL, CELL-FREE NUCLEIC ACID (EG, PLASMA), INTERROGATION FOR SEQUENCE VARIANTS; DNA ANALYSIS OR CO
HMSAAA	Q3 2025	Diagnostic Testing	88267	CPT	CHROMOSOME ANALYSIS, AMNIOTIC FLUID OR CHORIONIC VILLUS, COUNT 15 CELLS, 1 KARYOTYPE, WITH BANDING
HMSAAA	Q3 2025	Diagnostic Testing	93229	CPT	EXTERNAL MOBILE CARDIOVASCULAR TELEMETRY WITH ELECTROCARDIOGRAPHIC RECORDING, CONCURRENT COMPUTERIZED REAL TIME DATA ANALYSIS AND GREATER THAN
HMSAAA	Q3 2025	Diagnostic Testing	93320	CPT	DOPPLER ECHOCARDIOGRAPHY, PULSED WAVE AND/OR CONTINUOUS WAVE WITH SPECTRAL DISPLAY (LIST SEPARATELY IN ADDITION TO CODES FOR ECHOCARDIOGRAPHIC
HMSAAA	Q3 2025	Diagnostic Testing	93321	CPT	DOPPLER ECHOCARDIOGRAPHY, PULSED WAVE AND/OR CONTINUOUS WAVE WITH SPECTRAL DISPLAY (LIST SEPARATELY IN ADDITION TO CODES FOR ECHOCARDIOGRAPHIC

HMSAAA	Q3 2025	Diagnostic Testing		93325	CPT	DOPPLER ECHOCARDIOGRAPHY COLOR FLOW VELOCITY MAPPING (LIST SEPARATELY IN ADDITION TO CODES FOR ECHOCARDIOGRAPHY)
HMSAAA	Q3 2025	Diagnostic Testing		93350	CPT	ECHOCARDIOGRAPHY, TRANSTHORACIC, REAL-TIME WITH IMAGE DOCUMENTATION (2D), INCLUDES M-MODE RECORDING, WHEN PERFORMED, DURING REST AND CARDIOVA
HMSAAA	Q3 2025	Diagnostic Testing		93351	CPT	ECHOCARDIOGRAPHY, TRANSTHORACIC, REAL-TIME WITH IMAGE DOCUMENTATION (2D), INCLUDES M-MODE RECORDING, WHEN PERFORMED, DURING REST AND CARDIOVA
HMSAAA	Q3 2025	Diagnostic Testing		93352	CPT	USE OF ECHOCARDIOGRAPHIC CONTRAST AGENT DURING STRESS ECHOCARDIOGRAPHY (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
HMSAAA	Q3 2025	Diagnostic Testing		93356	CPT	MYOCARDIAL STRAIN IMAGING USING SPECKLE TRACKING-DERIVED ASSESSMENT OF MYOCARDIAL MECHANICS (LIST SEPARATELY IN ADDITION TO CODES FOR ECHOCARDIOG
HMSAAA	Q3 2025	Diagnostic Testing		93452	CPT	LEFT HEART CATHETERIZATION INCLUDING INTRAPROCEDURAL INJECTION(S) FOR LEFT VENTRICULOGRAPHY, IMAGING SUPERVISION AND INTERPRETATION, WHEN PERFORM
HMSAAA	Q3 2025	Diagnostic Testing		93453	CPT	COMBINED RIGHT AND LEFT HEART CATHETERIZATION INCLUDING INTRAPROCEDURAL INJECTION(S) FOR LEFT VENTRICULOGRAPHY, IMAGING SUPERVISION AND INTERPRETA
HMSAAA	Q3 2025	Diagnostic Testing		93454	CPT	CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY, IMAGING SU
HMSAAA	Q3 2025	Diagnostic Testing		93455	CPT	CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY, IMAGING SU
HMSAAA	Q3 2025	Diagnostic Testing		93456	CPT	CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY, IMAGING SU
HMSAAA	Q3 2025	Diagnostic Testing		93457	CPT	CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY, IMAGING SU
HMSAAA	Q3 2025	Diagnostic Testing		93458	CPT	CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY, IMAGING SU
HMSAAA	Q3 2025	Diagnostic Testing		93459	CPT	CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY, IMAGING SU
HMSAAA	Q3 2025	Diagnostic Testing		93460	CPT	CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY, IMAGING SU
HMSAAA	Q3 2025	Diagnostic Testing		93461	CPT	CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY, IMAGING SU
HMSAAA	Q3 2025	Diagnostic Testing		93462	CPT	LEFT HEART CATHETERIZATION BY TRANSSEPTAL PUNCTURE THROUGH INTACT SEPTUM OR BY TRANSAPICAL PUNCTURE (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY
HMSAAA	Q3 2025	Diagnostic Testing		93463	CPT	PHARMACOLOGIC AGENT ADMINISTRATION (EG, INHALED NITRIC OXIDE, INTRAVENOUS INFUSION OF NITROPRUSSIDE, DOBUTAMINE, MILRINONE, OR OTHER AGENT) INCLUDI
HMSAAA	Q3 2025	Diagnostic Testing		93464	CPT	PHYSIOLOGIC EXERCISE STUDY (EG, BICYCLE OR ARM ERGOMETRY) INCLUDING ASSESSING HEMODYNAMIC MEASUREMENTS BEFORE AND AFTER (LIST SEPARATELY IN ADDITIO
HMSAAA	Q3 2025	Diagnostic Testing		93565	CPT	INJECTION PROCEDURE DURING CARDIAC CATHETERIZATION INCLUDING IMAGING SUPERVISION, INTERPRETATION, AND REPORT; FOR SELECTIVE LEFT VENTRICULAR OR LEFT
HMSAAA	Q3 2025	Diagnostic Testing		93566	CPT	INJECTION PROCEDURE DURING CARDIAC CATHETERIZATION INCLUDING IMAGING SUPERVISION, INTERPRETATION, AND REPORT; FOR SELECTIVE RIGHT VENTRICULAR OR RIG
HMSAAA	Q3 2025	Diagnostic Testing		93567	CPT	INJECTION PROCEDURE DURING CARDIAC CATHETERIZATION INCLUDING IMAGING SUPERVISION, INTERPRETATION, AND REPORT; FOR SUPRAVALVULAR AORTOGRAPHY (LIST
HMSAAA	Q3 2025	Diagnostic Testing		93568	CPT	INJECTION PROCEDURE DURING CARDIAC CATHETERIZATION INCLUDING IMAGING SUPERVISION, INTERPRETATION, AND REPORT; FOR NONSELECTIVE PULMONARY ARTERIAL
HMSAAA	Q3 2025	Diagnostic Testing		95782	CPT	POLYSOMNOGRAPHY; YOUNGER THAN 6 YEARS, SLEEP STAGING WITH 4 OR MORE ADDITIONAL PARAMETERS OF SLEEP, ATTENDED BY A TECHNOLOGIST
HMSAAA	Q3 2025	Diagnostic Testing		95800	CPT	SLEEP STUDY, UNATTENDED, SIMULTANEOUS RECORDING; HEART RATE, OXYGEN SATURATION, RESPIRATORY ANALYSIS (EG, BY AIRFLOW OR PERIPHERAL ARTERIAL TONE), AN
HMSAAA	Q3 2025	Diagnostic Testing		95801	CPT	SLEEP STUDY, UNATTENDED, SIMULTANEOUS RECORDING; MINIMUM OF HEART RATE, OXYGEN SATURATION, AND RESPIRATORY ANALYSIS (EG, BY AIRFLOW OR PERIPHERAL AR
HMSAAA	Q3 2025	Diagnostic Testing	G0235		HCPCS	PET IMAGING, ANY SITE, NOT OTHERWISE SPECIFIED
HMSAAA	Q3 2025	Diagnostic Testing	G0339		HCPCS	IMAGE-GUIDED ROBOTIC LINEAR ACCELERATOR-BASED STEREOTACTIC RADIOSURGERY, COMPLETE COURSE OF THERAPY IN ONE SESSION OR FIRST SESSION OF FRACTIONATI
HMSAAA	Q3 2025	Diagnostic Testing	G0340		HCPCS	IMAGE-GUIDED ROBOTIC LINEAR ACCELERATOR-BASED STEREOTACTIC RADIOSURGERY, DELIVERY INCLUDING COLLIMATOR CHANGES AND CUSTOM PLUGGING, FRACTIONAT
HMSAAA	Q3 2025	Diagnostic Testing	G0398		HCPCS	HOME SLEEP STUDY TEST (HST) WITH TYPE II PORTABLE MONITOR, UNATTENDED; MINIMUM OF 7 CHANNELS: EEG, EOG, EMG, ECG/HEART RATE, AIRFLOW, RESPIRATORY EFFO
HMSAAA	Q3 2025	Diagnostic Testing	G0399		HCPCS	HOME SLEEP TEST (HST) WITH TYPE III PORTABLE MONITOR, UNATTENDED; MINIMUM OF 4 CHANNELS: 2 RESPIRATORY MOVEMENT/AIRFLOW, 1 ECG/HEART RATE AND 1 OXYGE
HMSAAA	Q3 2025	Diagnostic Testing	G0400		HCPCS	HOME SLEEP TEST (HST) WITH TYPE IV PORTABLE MONITOR, UNATTENDED; MINIMUM OF 3 CHANNELS
HMSAAA	Q3 2025	Diagnostic Testing	S3854		HCPCS	GENE EXPRESSION PROFILING PANEL FOR USE IN THE MANAGEMENT OF BREAST CANCER TREATMENT
HMSAAA	Q3 2025	Diagnostic Testing	S8037		HCPCS	MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY (MRCP)
HMSAAA	Q3 2025	Diagnostic Testing	S8042		HCPCS	MAGNETIC RESONANCE IMAGING (MRI), LOW-FIELD
HMSAAA	Q3 2025	Diagnostic Testing	S8092		HCPCS	ELECTRON BEAM COMPUTED TOMOGRAPHY (ALSO KNOWN AS ULTRAFAST CT, CINE CT)
HMSAAA	Q3 2025	DME/Medical Supplies	A4335		HCPCS	INCONTINENCE SUPPLY; MISCELLANEOUS
HMSAAA	Q3 2025	DME/Medical Supplies	A4927		HCPCS	GLOVES, NON-STERILE, PER 100
HMSAAA	Q3 2025	DME/Medical Supplies	A9276		HCPCS	SENSOR; INVASIVE (E.G., SUBCUTANEOUS), DISPOSABLE, FOR USE WITH NON-DURABLE MEDICAL EQUIPMENT INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM, ON
HMSAAA	Q3 2025	DME/Medical Supplies	A9277		HCPCS	TRANSMITTER; EXTERNAL, FOR USE WITH NON-DURABLE MEDICAL EQUIPMENT INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM
HMSAAA	Q3 2025	DME/Medical Supplies	A9278		HCPCS	RECEIVER (MONITOR); EXTERNAL, FOR USE WITH NON-DURABLE MEDICAL EQUIPMENT INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM
HMSAAA	Q3 2025	DME/Medical Supplies	E0260		HCPCS	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS, WITH MATTRESS
HMSAAA	Q3 2025	DME/Medical Supplies	E0424		HCPCS	STATIONARY COMPRESSED GASEOUS OXYGEN SYSTEM, RENTAL; INCLUDES CONTAINER, CONTENTS, REGULATOR, FLOWMETER, HUMIDIFIER, NEBULIZER, CANNULA OR MASK,
HMSAAA	Q3 2025	DME/Medical Supplies	E0431		HCPCS	PORTABLE GASEOUS OXYGEN SYSTEM, RENTAL; INCLUDES PORTABLE CONTAINER, REGULATOR, FLOWMETER, HUMIDIFIER, CANNULA OR MASK, AND TUBING
HMSAAA	Q3 2025	DME/Medical Supplies	E0445		HCPCS	OXIMETER DEVICE FOR MEASURING BLOOD OXYGEN LEVELS NON-INVASIVELY
HMSAAA	Q3 2025	DME/Medical Supplies	E0470		HCPCS	RESPIRATORY ASSIST DEVICE, BI-LEVEL PRESSURE CAPABILITY, WITHOUT BACKUP RATE FEATURE, USED WITH NONINVASIVE INTERFACE, E.G., NASAL OR FACIAL MASK (INTERM
HMSAAA	Q3 2025	DME/Medical Supplies	E0483		HCPCS	HIGH FREQUENCY CHEST WALL OSCILLATION SYSTEM, WITH FULL ANTERIOR AND/OR POSTERIOR THORACIC REGION RECEIVING SIMULTANEOUS EXTERNAL OSCILLATION, INC
HMSAAA	Q3 2025	DME/Medical Supplies	E0784		HCPCS	EXTERNAL AMBULATORY INFUSION PUMP, INSULIN
HMSAAA	Q3 2025	DME/Medical Supplies	E1390		HCPCS	OXYGEN CONCENTRATOR, SINGLE DELIVERY PORT, CAPABLE OF DELIVERING 85 PERCENT OR GREATER OXYGEN CONCENTRATION AT THE PRESCRIBED FLOW RATE
HMSAAA	Q3 2025	DME/Medical Supplies	E1392		HCPCS	PORTABLE OXYGEN CONCENTRATOR, RENTAL
HMSAAA	Q3 2025	DME/Medical Supplies	E1399		HCPCS	DURABLE MEDICAL EQUIPMENT, MISCELLANEOUS
HMSAAA	Q3 2025	DME/Medical Supplies	K0001		HCPCS	STANDARD WHEELCHAIR
HMSAAA	Q3 2025	DME/Medical Supplies	K0002		HCPCS	STANDARD HEMI (LOW SEAT) WHEELCHAIR
HMSAAA	Q3 2025	DME/Medical Supplies	K0003		HCPCS	LIGHTWEIGHT WHEELCHAIR
HMSAAA	Q3 2025	DME/Medical Supplies	K0004		HCPCS	HIGH STRENGTH, LIGHTWEIGHT WHEELCHAIR
HMSAAA	Q3 2025	DME/Medical Supplies	K0006		HCPCS	HEAVY DUTY WHEELCHAIR
HMSAAA	Q3 2025	DME/Medical Supplies	K0007		HCPCS	EXTRA HEAVY DUTY WHEELCHAIR
HMSAAA	Q3 2025	DME/Medical Supplies	K0738		HCPCS	PORTABLE GASEOUS OXYGEN SYSTEM, RENTAL; HOME COMPRESSOR USED TO FILL PORTABLE OXYGEN CYLINDERS; INCLUDES PORTABLE CONTAINERS, REGULATOR, FLOWME
HMSAAA	Q3 2025	DME/Medical Supplies	K0801		HCPCS	POWER OPERATED VEHICLE, GROUP 1 HEAVY DUTY, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0850		HCPCS	POWER WHEELCHAIR, GROUP 3 HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0856		HCPCS	POWER WHEELCHAIR, GROUP 3 STANDARD, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0858		HCPCS	POWER WHEELCHAIR, GROUP 3 HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT 301 TO 450 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	L0464		HCPCS	TLSO, TRIPLANAR CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, FOUR RIGID PLASTIC SHELLS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATE
HMSAAA	Q3 2025	DME/Medical Supplies	L0627		HCPCS	LUMBAR ORTHOSIS, SAGITTAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR PANELS, POSTERIOR EXTENDS FROM L-1 TO BELOW L-5 VERTEBRA, PRODUCES INTRACAVITAR
HMSAAA	Q3 2025	DME/Medical Supplies	L0637		HCPCS	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR FRAME/PANELS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTIO
HMSAAA	Q3 2025	DME/Medical Supplies	L0642		HCPCS	LUMBAR ORTHOSIS, SAGITTAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR PANELS, POSTERIOR EXTENDS FROM L-1 TO BELOW L-5 VERTEBRA, PRODUCES INTRACAVITAR
HMSAAA	Q3 2025	DME/Medical Supplies	L0650		HCPCS	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR FRAME/PANEL(S), POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCT
HMSAAA	Q3 2025	DME/Medical Supplies	L1843		HCPCS	KNEE ORTHOSIS, SINGLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC), MEDIAL-LATERAL AND ROTATION CO
HMSAAA	Q3 2025	DME/Medical Supplies	L1845		HCPCS	KNEE ORTHOSIS, DOUBLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC), MEDIAL-LATERAL AND ROTATION C
HMSAAA	Q3 2025	DME/Medical Supplies	L1846		HCPCS	KNEE ORTHOSIS, DOUBLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC), MEDIAL-LATERAL AND ROTATION C
HMSAAA	Q3 2025	DME/Medical Supplies	L8619		HCPCS	COCHLEAR IMPLANT, EXTERNAL SPEECH PROCESSOR AND CONTROLLER, INTEGRATED SYSTEM, REPLACEMENT
HMSAAA	Q3 2025	DME/Medical Supplies	L8680		HCPCS	IMPLANTABLE NEUROSTIMULATOR ELECTRODE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	Q4101		HCPCS	APLIGRAF, PER SQUARE CENTIMETER
HMSAAA	Q3 2025	DME/Medical Supplies	T4521		HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, SMALL, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	T4522		HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, MEDIUM, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	T4523		HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, LARGE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	T4524		HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, EXTRA LARGE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	T4525		HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, SMALL SIZE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	T4526		HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, MEDIUM SIZE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	T4527		HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, LARGE SIZE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	T4528		HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, EXTRA LARGE SIZE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	T4529		HCPCS	PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, SMALL/MEDIUM SIZE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	T4532		HCPCS	PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, LARGE SIZE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	T4533		HCPCS	YOUTH SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	T4534		HCPCS	YOUTH SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	T4535		HCPCS	DISPOSABLE LINER/SHIELD/GUARD/PAD/UNDERGARMENT, FOR INCONTINENCE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	T4541		HCPCS	INCONTINENCE PRODUCT, DISPOSABLE UNDERPAD, LARGE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	V2510		HCPCS	CONTACT LENS, GAS PERMEABLE, SPHERICAL, PER LENS
HMSAAA	Q3 2025	DME/Medical Supplies	V2520		HCPCS	CONTACT LENS, HYDROPHILIC, SPHERICAL, PER LENS
HMSAAA	Q3 2025	DME/Medical Supplies	V2521		HCPCS	CONTACT LENS, HYDROPHILIC, TORIC, OR PRISM BALLAST, PER LENS
HMSAAA	Q3 2025	DME/Medical Supplies	V2599		HCPCS	CONTACT LENS, OTHER TYPE
HMSAAA	Q3 2025	DME/Medical Supplies	V2784		HCPCS	LENS, POLYCARBONATE OR EQUAL, ANY INDEX, PER LENS
HMSAAA	Q3 2025	DME/Medical Supplies	V5251		HCPCS	HEARING AID, DIGITALLY PROGRAMMABLE ANALOG, BINAURAL, ITC
HMSAAA	Q3 2025	DME/Medical Supplies	V5259		HCPCS	HEARING AID, DIGITAL, BINAURAL, ITC

HMSAAA	Q3 2025	DME/Medical Supplies	V5261	HCPCS	HEARING AID, DIGITAL, BINAURAL, BTE
HMSAAA	Q3 2025	DME/Medical Supplies	V5264	HCPCS	EAR MOLD/INSERT, NOT DISPOSABLE, ANY TYPE
HMSAAA	Q3 2025	DME/Medical Supplies	0446T	CPT	CREATION OF SUBCUTANEOUS POCKET WITH INSERTION OF IMPLANTABLE INTERSTITIAL GLUCOSE SENSOR, INCLUDING SYSTEM ACTIVATION AND PATIENT TRAINING
HMSAAA	Q3 2025	DME/Medical Supplies	0447T	CPT	REMOVAL OF IMPLANTABLE INTERSTITIAL GLUCOSE SENSOR FROM SUBCUTANEOUS POCKET VIA INCISION
HMSAAA	Q3 2025	DME/Medical Supplies	0448T	CPT	REMOVAL OF IMPLANTABLE INTERSTITIAL GLUCOSE SENSOR WITH CREATION OF SUBCUTANEOUS POCKET AT DIFFERENT ANATOMIC SITE AND INSERTION OF NEW IMPLANTABL
HMSAAA	Q3 2025	DME/Medical Supplies	A4224	HCPCS	SUPPLIES FOR MAINTENANCE OF INSULIN INFUSION CATHETER, PER WEEK
HMSAAA	Q3 2025	DME/Medical Supplies	A4225	HCPCS	SUPPLIES FOR EXTERNAL INSULIN INFUSION PUMP, SYRINGE TYPE CARTRIDGE, STERILE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	A4226	HCPCS	SUPPLIES FOR MAINTENANCE OF INSULIN INFUSION PUMP WITH DOSAGE RATE ADJUSTMENT USING THERAPEUTIC CONTINUOUS GLUCOSE SENSING, PER WEEK
HMSAAA	Q3 2025	DME/Medical Supplies	A4232	HCPCS	SYRINGE WITH NEEDLE FOR EXTERNAL INSULIN PUMP, STERILE, 3 CC
HMSAAA	Q3 2025	DME/Medical Supplies	A4606	HCPCS	OXYGEN PROBE FOR USE WITH OXIMETER DEVICE, REPLACEMENT
HMSAAA	Q3 2025	DME/Medical Supplies	A7025	HCPCS	HIGH FREQUENCY CHEST WALL OSCILLATION SYSTEM VEST, REPLACEMENT FOR USE WITH PATIENT OWNED EQUIPMENT, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	A7026	HCPCS	HIGH FREQUENCY CHEST WALL OSCILLATION SYSTEM HOSE, REPLACEMENT FOR USE WITH PATIENT OWNED EQUIPMENT, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	A9274	HCPCS	EXTERNAL AMBULATORY INSULIN DELIVERY SYSTEM, DISPOSABLE, EACH, INCLUDES ALL SUPPLIES AND ACCESSORIES
HMSAAA	Q3 2025	DME/Medical Supplies	E0250	HCPCS	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITH MATTRESS
HMSAAA	Q3 2025	DME/Medical Supplies	E0251	HCPCS	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS
HMSAAA	Q3 2025	DME/Medical Supplies	E0255	HCPCS	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITH MATTRESS
HMSAAA	Q3 2025	DME/Medical Supplies	E0256	HCPCS	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS
HMSAAA	Q3 2025	DME/Medical Supplies	E0261	HCPCS	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS
HMSAAA	Q3 2025	DME/Medical Supplies	E0265	HCPCS	HOSPITAL BED, TOTAL ELECTRIC (HEAD, FOOT AND HEIGHT ADJUSTMENTS), WITH ANY TYPE SIDE RAILS, WITH MATTRESS
HMSAAA	Q3 2025	DME/Medical Supplies	E0266	HCPCS	HOSPITAL BED, TOTAL ELECTRIC (HEAD, FOOT AND HEIGHT ADJUSTMENTS), WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS
HMSAAA	Q3 2025	DME/Medical Supplies	E0290	HCPCS	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITH MATTRESS
HMSAAA	Q3 2025	DME/Medical Supplies	E0291	HCPCS	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITHOUT MATTRESS
HMSAAA	Q3 2025	DME/Medical Supplies	E0292	HCPCS	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITH MATTRESS
HMSAAA	Q3 2025	DME/Medical Supplies	E0293	HCPCS	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITHOUT MATTRESS
HMSAAA	Q3 2025	DME/Medical Supplies	E0294	HCPCS	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITH MATTRESS
HMSAAA	Q3 2025	DME/Medical Supplies	E0295	HCPCS	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITHOUT MATTRESS
HMSAAA	Q3 2025	DME/Medical Supplies	E0296	HCPCS	HOSPITAL BED, TOTAL ELECTRIC (HEAD, FOOT AND HEIGHT ADJUSTMENTS), WITHOUT SIDE RAILS, WITH MATTRESS
HMSAAA	Q3 2025	DME/Medical Supplies	E0297	HCPCS	HOSPITAL BED, TOTAL ELECTRIC (HEAD, FOOT AND HEIGHT ADJUSTMENTS), WITHOUT SIDE RAILS, WITHOUT MATTRESS
HMSAAA	Q3 2025	DME/Medical Supplies	E0301	HCPCS	HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350 POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITH
HMSAAA	Q3 2025	DME/Medical Supplies	E0302	HCPCS	HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS
HMSAAA	Q3 2025	DME/Medical Supplies	E0303	HCPCS	HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350 POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITH
HMSAAA	Q3 2025	DME/Medical Supplies	E0304	HCPCS	HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITH MATTRESS
HMSAAA	Q3 2025	DME/Medical Supplies	E0328	HCPCS	HOSPITAL BED, PEDIATRIC, MANUAL, 360 DEGREE SIDE ENCLOSURES, TOP OF HEADBOARD, FOOTBOARD AND SIDE RAILS UP TO 24 INCHES ABOVE THE SPRING, INCLUDES MAT
HMSAAA	Q3 2025	DME/Medical Supplies	E0329	HCPCS	HOSPITAL BED, PEDIATRIC, ELECTRIC OR SEMI-ELECTRIC, 360 DEGREE SIDE ENCLOSURES, TOP OF HEADBOARD, FOOTBOARD AND SIDE RAILS UP TO 24 INCHES ABOVE THE SP
HMSAAA	Q3 2025	DME/Medical Supplies	E0434	HCPCS	PORTABLE LIQUID OXYGEN SYSTEM, RENTAL; INCLUDES PORTABLE CONTAINER, SUPPLY RESERVOIR, HUMIDIFIER, FLOWMETER, REFILL ADAPTOR, CONTENTS GAUGE, CANNUL
HMSAAA	Q3 2025	DME/Medical Supplies	E0439	HCPCS	STATIONARY LIQUID OXYGEN SYSTEM, RENTAL; INCLUDES CONTAINER, CONTENTS, REGULATOR, FLOWMETER, HUMIDIFIER, NEBULIZER, CANNULA OR MASK, & TUBING
HMSAAA	Q3 2025	DME/Medical Supplies	E0447	HCPCS	PORTABLE OXYGEN CONTENTS, LIQUID, 1 MONTH'S SUPPLY = 1 UNIT, PRESCRIBED AMOUNT AT REST OR NIGHTTIME EXCEEDS 4 LITERS PER MINUTE (LPM)
HMSAAA	Q3 2025	DME/Medical Supplies	E0471	HCPCS	RESPIRATORY ASSIST DEVICE, BI-LEVEL PRESSURE CAPABILITY, WITH BACK-UP RATE FEATURE, USED WITH NONINVASIVE INTERFACE, E.G., NASAL OR FACIAL MASK (INTERMITTE
HMSAAA	Q3 2025	DME/Medical Supplies	E0482	HCPCS	COUGH STIMULATING DEVICE, ALTERNATING POSITIVE AND NEGATIVE AIRWAY PRESSURE
HMSAAA	Q3 2025	DME/Medical Supplies	E0486	HCPCS	ORAL DEVICE/APPLIANCE USED TO REDUCE UPPER AIRWAY COLLAPSIBILITY, ADJUSTABLE OR NON-ADJUSTABLE, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT
HMSAAA	Q3 2025	DME/Medical Supplies	E0618	HCPCS	APNEA MONITOR, WITHOUT RECORDING FEATURE
HMSAAA	Q3 2025	DME/Medical Supplies	E0619	HCPCS	APNEA MONITOR, WITH RECORDING FEATURE
HMSAAA	Q3 2025	DME/Medical Supplies	E0625	HCPCS	PATIENT LIFT, BATHROOM OR TOILET, NOT OTHERWISE CLASSIFIED
HMSAAA	Q3 2025	DME/Medical Supplies	E0637	HCPCS	COMBINATION SIT TO STAND FRAME/TABLE SYSTEM, ANY SIZE INCLUDING PEDIATRIC, WITH SEAT LIFT FEATURE, WITH OR WITHOUT WHEELS
HMSAAA	Q3 2025	DME/Medical Supplies	E0638	HCPCS	STANDING FRAME/TABLE SYSTEM, ONE POSITION (E.G., UPRIGHT, SUPINE OR PRONE STANDER), ANY SIZE INCLUDING PEDIATRIC, WITH OR WITHOUT WHEELS
HMSAAA	Q3 2025	DME/Medical Supplies	E0641	HCPCS	STANDING FRAME/TABLE SYSTEM, MULTI-POSITION (E.G., THREE-WAY STANDER), ANY SIZE INCLUDING PEDIATRIC, WITH OR WITHOUT WHEELS
HMSAAA	Q3 2025	DME/Medical Supplies	E0642	HCPCS	STANDING FRAME/TABLE SYSTEM, MOBILE (DYNAMIC STANDER), ANY SIZE INCLUDING PEDIATRIC
HMSAAA	Q3 2025	DME/Medical Supplies	E0787	HCPCS	EXTERNAL AMBULATORY INFUSION PUMP, INSULIN, DOSAGE RATE ADJUSTMENT USING THERAPEUTIC CONTINUOUS GLUCOSE SENSING
HMSAAA	Q3 2025	DME/Medical Supplies	E0986	HCPCS	MANUAL WHEELCHAIR ACCESSORY, PUSH-RIM ACTIVATED POWER ASSIST SYSTEM
HMSAAA	Q3 2025	DME/Medical Supplies	E1353	HCPCS	REGULATOR
HMSAAA	Q3 2025	DME/Medical Supplies	E1391	HCPCS	OXYGEN CONCENTRATOR, DUAL DELIVERY PORT, CAPABLE OF DELIVERING 85 PERCENT OR GREATER OXYGEN CONCENTRATION AT THE PRESCRIBED FLOW RATE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	E1405	HCPCS	OXYGEN AND WATER VAPOR ENRICHING SYSTEM WITH HEATED DELIVERY
HMSAAA	Q3 2025	DME/Medical Supplies	E1406	HCPCS	OXYGEN AND WATER VAPOR ENRICHING SYSTEM WITHOUT HEATED DELIVERY
HMSAAA	Q3 2025	DME/Medical Supplies	E8000	HCPCS	GAIT TRAINER, PEDIATRIC SIZE, POSTERIOR SUPPORT, INCLUDES ALL ACCESSORIES AND COMPONENTS
HMSAAA	Q3 2025	DME/Medical Supplies	E8001	HCPCS	GAIT TRAINER, PEDIATRIC SIZE, UPRIGHT SUPPORT, INCLUDES ALL ACCESSORIES AND COMPONENTS
HMSAAA	Q3 2025	DME/Medical Supplies	E8002	HCPCS	GAIT TRAINER, PEDIATRIC SIZE, ANTERIOR SUPPORT, INCLUDES ALL ACCESSORIES AND COMPONENTS
HMSAAA	Q3 2025	DME/Medical Supplies	J0222	HCPCS	INJECTION, PATISIRAN, 0.1 MG
HMSAAA	Q3 2025	DME/Medical Supplies	J0223	HCPCS	INJECTION, GIVOSIRAN, 0.5 MG
HMSAAA	Q3 2025	DME/Medical Supplies	J0224	HCPCS	INJECTION, LUMASIRAN, 0.5 MG
HMSAAA	Q3 2025	DME/Medical Supplies	J0225	HCPCS	INJECTION, VUTRISIRAN, 1 MG
HMSAAA	Q3 2025	DME/Medical Supplies	J1817	HCPCS	INSULIN FOR ADMINISTRATION THROUGH DME (I.E., INSULIN PUMP) PER 50 UNITS
HMSAAA	Q3 2025	DME/Medical Supplies	J7170	HCPCS	INJECTION, EMICIZUMAB-KXWH, 0.5 MG
HMSAAA	Q3 2025	DME/Medical Supplies	J7182	HCPCS	INJECTION, FACTOR VIII, (ANTIHEMOPHILIC FACTOR, RECOMBINANT), (NOVOEIGHT), PER IU
HMSAAA	Q3 2025	DME/Medical Supplies	J7185	HCPCS	INJECTION, FACTOR VIII (ANTIHEMOPHILIC FACTOR, RECOMBINANT) (XYNTHA), PER I.U.
HMSAAA	Q3 2025	DME/Medical Supplies	J7186	HCPCS	INJECTION, ANTIHEMOPHILIC FACTOR VIII/VON WILLEBRAND FACTOR COMPLEX (HUMAN), PER FACTOR VIII I.U.
HMSAAA	Q3 2025	DME/Medical Supplies	J7187	HCPCS	INJECTION, VON WILLEBRAND FACTOR COMPLEX (HUMATE-P), PER IU VWF:RCO
HMSAAA	Q3 2025	DME/Medical Supplies	J7189	HCPCS	FACTOR VIIA (ANTIHEMOPHILIC FACTOR, RECOMBINANT), (NOVOSEVEN RT), 1 MICROGRAM
HMSAAA	Q3 2025	DME/Medical Supplies	J7190	HCPCS	FACTOR VIII (ANTIHEMOPHILIC FACTOR, HUMAN) PER I.U.
HMSAAA	Q3 2025	DME/Medical Supplies	J7192	HCPCS	FACTOR VIII (ANTIHEMOPHILIC FACTOR, RECOMBINANT) PER I.U., NOT OTHERWISE SPECIFIED
HMSAAA	Q3 2025	DME/Medical Supplies	J7193	HCPCS	FACTOR IX (ANTIHEMOPHILIC FACTOR, PURIFIED, NON-RECOMBINANT) PER I.U.
HMSAAA	Q3 2025	DME/Medical Supplies	J7194	HCPCS	FACTOR IX, COMPLEX, PER I.U.
HMSAAA	Q3 2025	DME/Medical Supplies	J7195	HCPCS	INJECTION, FACTOR IX (ANTIHEMOPHILIC FACTOR, RECOMBINANT) PER IU, NOT OTHERWISE SPECIFIED
HMSAAA	Q3 2025	DME/Medical Supplies	J7198	HCPCS	ANTI-INHIBITOR, PER I.U.
HMSAAA	Q3 2025	DME/Medical Supplies	J7200	HCPCS	INJECTION, FACTOR IX, (ANTIHEMOPHILIC FACTOR, RECOMBINANT), RIXUBIS, PER IU
HMSAAA	Q3 2025	DME/Medical Supplies	J7201	HCPCS	INJECTION, FACTOR IX, FC FUSION PROTEIN, (RECOMBINANT), ALPROLIX, 1 I.U.
HMSAAA	Q3 2025	DME/Medical Supplies	J7202	HCPCS	INJECTION, FACTOR IX, ALBUMIN FUSION PROTEIN, (RECOMBINANT), IDELVION, 1 I.U.
HMSAAA	Q3 2025	DME/Medical Supplies	J7203	HCPCS	INJECTION FACTOR IX, (ANTIHEMOPHILIC FACTOR, RECOMBINANT), GLYCOPEGYLATED, (REBINYN), 1 IU
HMSAAA	Q3 2025	DME/Medical Supplies	J7204	HCPCS	INJECTION, FACTOR VIII, ANTIHEMOPHILIC FACTOR (RECOMBINANT), (ESPEROCT), GLYCOPEGYLATED-EXEI, PER IU
HMSAAA	Q3 2025	DME/Medical Supplies	J7205	HCPCS	INJECTION, FACTOR VIII FC FUSION PROTEIN (RECOMBINANT), PER IU
HMSAAA	Q3 2025	DME/Medical Supplies	J7207	HCPCS	INJECTION, FACTOR VIII, (ANTIHEMOPHILIC FACTOR, RECOMBINANT), PEGYLATED, 1 I.U.
HMSAAA	Q3 2025	DME/Medical Supplies	J7208	HCPCS	INJECTION, FACTOR VIII, (ANTIHEMOPHILIC FACTOR, RECOMBINANT), PEGYLATED-AUCL, (JIVI), 1 I.U.
HMSAAA	Q3 2025	DME/Medical Supplies	J7209	HCPCS	INJECTION, FACTOR VIII, (ANTIHEMOPHILIC FACTOR, RECOMBINANT), (NUWIQ), 1 I.U.
HMSAAA	Q3 2025	DME/Medical Supplies	J7210	HCPCS	INJECTION, FACTOR VIII, (ANTIHEMOPHILIC FACTOR, RECOMBINANT), (AFSTYLA), 1 I.U.
HMSAAA	Q3 2025	DME/Medical Supplies	J7211	HCPCS	INJECTION, FACTOR VIII, (ANTIHEMOPHILIC FACTOR, RECOMBINANT), (KOVALTRY), 1 I.U.
HMSAAA	Q3 2025	DME/Medical Supplies	J7212	HCPCS	FACTOR VIIA (ANTIHEMOPHILIC FACTOR, RECOMBINANT)-JNCW (SEVENFACT), 1 MICROGRAM
HMSAAA	Q3 2025	DME/Medical Supplies	J7214	HCPCS	INJECTION, FACTOR VIII/VON WILLEBRAND FACTOR COMPLEX, RECOMBINANT (ALTUVIIIO), PER FACTOR VIII I.U.
HMSAAA	Q3 2025	DME/Medical Supplies	J7351	HCPCS	INJECTION, BIMATOPROST, INTRACAMERAL IMPLANT, 1 MICROGRAM
HMSAAA	Q3 2025	DME/Medical Supplies	J8999	HCPCS	PRESCRIPTION DRUG, ORAL, CHEMOTHERAPEUTIC, NOS
HMSAAA	Q3 2025	DME/Medical Supplies	K0005	HCPCS	ULTRALIGHTWEIGHT WHEELCHAIR
HMSAAA	Q3 2025	DME/Medical Supplies	K0008	HCPCS	CUSTOM MANUAL WHEELCHAIR/BASE
HMSAAA	Q3 2025	DME/Medical Supplies	K0009	HCPCS	OTHER MANUAL WHEELCHAIR/BASE
HMSAAA	Q3 2025	DME/Medical Supplies	K0013	HCPCS	CUSTOM MOTORIZED/POWER WHEELCHAIR BASE
HMSAAA	Q3 2025	DME/Medical Supplies	K0108	HCPCS	WHEELCHAIR COMPONENT OR ACCESSORY, NOT OTHERWISE SPECIFIED

HMSAAA	Q3 2025	DME/Medical Supplies	K0800	HCPCS	POWER OPERATED VEHICLE, GROUP 1 STANDARD, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0802	HCPCS	POWER OPERATED VEHICLE, GROUP 1 VERY HEAVY DUTY, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0806	HCPCS	POWER OPERATED VEHICLE, GROUP 2 STANDARD, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0807	HCPCS	POWER OPERATED VEHICLE, GROUP 2 HEAVY DUTY, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0808	HCPCS	POWER OPERATED VEHICLE, GROUP 2 VERY HEAVY DUTY, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0812	HCPCS	POWER OPERATED VEHICLE, NOT OTHERWISE CLASSIFIED
HMSAAA	Q3 2025	DME/Medical Supplies	K0813	HCPCS	POWER WHEELCHAIR, GROUP 1 STANDARD, PORTABLE, SLING/SOLID SEAT AND BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0814	HCPCS	POWER WHEELCHAIR, GROUP 1 STANDARD, PORTABLE, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0815	HCPCS	POWER WHEELCHAIR, GROUP 1 STANDARD, SLING/SOLID SEAT AND BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0816	HCPCS	POWER WHEELCHAIR, GROUP 1 STANDARD, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0820	HCPCS	POWER WHEELCHAIR, GROUP 2 STANDARD, PORTABLE, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0821	HCPCS	POWER WHEELCHAIR, GROUP 2 STANDARD, PORTABLE, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0822	HCPCS	POWER WHEELCHAIR, GROUP 2 STANDARD, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0823	HCPCS	POWER WHEELCHAIR, GROUP 2 STANDARD, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0824	HCPCS	POWER WHEELCHAIR, GROUP 2 HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0825	HCPCS	POWER WHEELCHAIR, GROUP 2 HEAVY DUTY, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0826	HCPCS	POWER WHEELCHAIR, GROUP 2 VERY HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0827	HCPCS	POWER WHEELCHAIR, GROUP 2 VERY HEAVY DUTY, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0828	HCPCS	POWER WHEELCHAIR, GROUP 2 EXTRA HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 601 POUNDS OR MORE
HMSAAA	Q3 2025	DME/Medical Supplies	K0829	HCPCS	POWER WHEELCHAIR, GROUP 2 EXTRA HEAVY DUTY, CAPTAINS CHAIR, PATIENT WEIGHT 601 POUNDS OR MORE
HMSAAA	Q3 2025	DME/Medical Supplies	K0830	HCPCS	POWER WHEELCHAIR, GROUP 2 STANDARD, SEAT ELEVATOR, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0831	HCPCS	POWER WHEELCHAIR, GROUP 2 STANDARD, SEAT ELEVATOR, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0835	HCPCS	POWER WHEELCHAIR, GROUP 2 STANDARD, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0836	HCPCS	POWER WHEELCHAIR, GROUP 2 STANDARD, SINGLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0837	HCPCS	POWER WHEELCHAIR, GROUP 2 HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0838	HCPCS	POWER WHEELCHAIR, GROUP 2 HEAVY DUTY, SINGLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0839	HCPCS	POWER WHEELCHAIR, GROUP 2 VERY HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0840	HCPCS	POWER WHEELCHAIR, GROUP 2 EXTRA HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 601 POUNDS OR MORE
HMSAAA	Q3 2025	DME/Medical Supplies	K0841	HCPCS	POWER WHEELCHAIR, GROUP 2 STANDARD, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0842	HCPCS	POWER WHEELCHAIR, GROUP 2 STANDARD, MULTIPLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0843	HCPCS	POWER WHEELCHAIR, GROUP 2 HEAVY DUTY, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0848	HCPCS	POWER WHEELCHAIR, GROUP 3 STANDARD, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0849	HCPCS	POWER WHEELCHAIR, GROUP 3 STANDARD, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0851	HCPCS	POWER WHEELCHAIR, GROUP 3 HEAVY DUTY, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0852	HCPCS	POWER WHEELCHAIR, GROUP 3 VERY HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0853	HCPCS	POWER WHEELCHAIR, GROUP 3 VERY HEAVY DUTY, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0854	HCPCS	POWER WHEELCHAIR, GROUP 3 EXTRA HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 601 POUNDS OR MORE
HMSAAA	Q3 2025	DME/Medical Supplies	K0855	HCPCS	POWER WHEELCHAIR, GROUP 3 EXTRA HEAVY DUTY, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 601 POUNDS OR MORE
HMSAAA	Q3 2025	DME/Medical Supplies	K0857	HCPCS	POWER WHEELCHAIR, GROUP 3 STANDARD, SINGLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0859	HCPCS	POWER WHEELCHAIR, GROUP 3 HEAVY DUTY, SINGLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0860	HCPCS	POWER WHEELCHAIR, GROUP 3 VERY HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0861	HCPCS	POWER WHEELCHAIR, GROUP 3 STANDARD, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0862	HCPCS	POWER WHEELCHAIR, GROUP 3 HEAVY DUTY, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0863	HCPCS	POWER WHEELCHAIR, GROUP 3 VERY HEAVY DUTY, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0864	HCPCS	POWER WHEELCHAIR, GROUP 3 EXTRA HEAVY DUTY, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 601 POUNDS OR MORE
HMSAAA	Q3 2025	DME/Medical Supplies	K0868	HCPCS	POWER WHEELCHAIR, GROUP 4 STANDARD, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0869	HCPCS	POWER WHEELCHAIR, GROUP 4 STANDARD, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0870	HCPCS	POWER WHEELCHAIR, GROUP 4 HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0871	HCPCS	POWER WHEELCHAIR, GROUP 4 VERY HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0877	HCPCS	POWER WHEELCHAIR, GROUP 4 STANDARD, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0878	HCPCS	POWER WHEELCHAIR, GROUP 4 STANDARD, SINGLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0879	HCPCS	POWER WHEELCHAIR, GROUP 4 HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0880	HCPCS	POWER WHEELCHAIR, GROUP 4 VERY HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT 451 TO 600 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0884	HCPCS	POWER WHEELCHAIR, GROUP 4 STANDARD, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0885	HCPCS	POWER WHEELCHAIR, GROUP 4 STANDARD, MULTIPLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0886	HCPCS	POWER WHEELCHAIR, GROUP 4 HEAVY DUTY, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0890	HCPCS	POWER WHEELCHAIR, GROUP 5 PEDIATRIC, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 125 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0891	HCPCS	POWER WHEELCHAIR, GROUP 5 PEDIATRIC, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 125 POUNDS
HMSAAA	Q3 2025	DME/Medical Supplies	K0898	HCPCS	POWER WHEELCHAIR, NOT OTHERWISE CLASSIFIED
HMSAAA	Q3 2025	DME/Medical Supplies	K0900	HCPCS	CUSTOMIZED DURABLE MEDICAL EQUIPMENT, OTHER THAN WHEELCHAIR
HMSAAA	Q3 2025	DME/Medical Supplies	L0456	HCPCS	TLSO, FLEXIBLE, PROVIDES TRUNK SUPPORT, THORACIC REGION, RIGID POSTERIOR PANEL AND SOFT ANTERIOR APRON, EXTENDS FROM THE SACROCOCCYGEAL JUNCTION AN
HMSAAA	Q3 2025	DME/Medical Supplies	L0457	HCPCS	TLSO, FLEXIBLE, PROVIDES TRUNK SUPPORT, THORACIC REGION, RIGID POSTERIOR PANEL AND SOFT ANTERIOR APRON, EXTENDS FROM THE SACROCOCCYGEAL JUNCTION AN
HMSAAA	Q3 2025	DME/Medical Supplies	L0458	HCPCS	TLSO, TRIPLANAR CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, TWO RIGID PLASTIC SHELLS, POSTERIOR EXTENDS FROM THE SACROCOCCYGEAL JUNCTION AND TERMIN
HMSAAA	Q3 2025	DME/Medical Supplies	L0460	HCPCS	TLSO, TRIPLANAR CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, TWO RIGID PLASTIC SHELLS, POSTERIOR EXTENDS FROM THE SACROCOCCYGEAL JUNCTION AND TERMIN
HMSAAA	Q3 2025	DME/Medical Supplies	L0462	HCPCS	TLSO, TRIPLANAR CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, THREE RIGID PLASTIC SHELLS, POSTERIOR EXTENDS FROM THE SACROCOCCYGEAL JUNCTION AND TERM
HMSAAA	Q3 2025	DME/Medical Supplies	L0466	HCPCS	TLSO, SAGITTAL CONTROL, RIGID POSTERIOR FRAME AND FLEXIBLE SOFT ANTERIOR APRON WITH STRAPS, CLOSURES AND PADDING, RESTRICTS GROSS TRUNK MOTION IN SAG
HMSAAA	Q3 2025	DME/Medical Supplies	L0467	HCPCS	TLSO, SAGITTAL CONTROL, RIGID POSTERIOR FRAME AND FLEXIBLE SOFT ANTERIOR APRON WITH STRAPS, CLOSURES AND PADDING, RESTRICTS GROSS TRUNK MOTION IN SAG
HMSAAA	Q3 2025	DME/Medical Supplies	L0468	HCPCS	TLSO, SAGITTAL-CORONAL CONTROL, RIGID POSTERIOR FRAME AND FLEXIBLE SOFT ANTERIOR APRON WITH STRAPS, CLOSURES AND PADDING, EXTENDS FROM SACROCOCCY
HMSAAA	Q3 2025	DME/Medical Supplies	L0469	HCPCS	TLSO, SAGITTAL-CORONAL CONTROL, RIGID POSTERIOR FRAME AND FLEXIBLE SOFT ANTERIOR APRON WITH STRAPS, CLOSURES AND PADDING, EXTENDS FROM SACROCOCCY
HMSAAA	Q3 2025	DME/Medical Supplies	L0470	HCPCS	TLSO, TRIPLANAR CONTROL, RIGID POSTERIOR FRAME AND FLEXIBLE SOFT ANTERIOR APRON WITH STRAPS, CLOSURES AND PADDING, EXTENDS FROM SACROCOCCYGEAL JUN
HMSAAA	Q3 2025	DME/Medical Supplies	L0472	HCPCS	TLSO, TRIPLANAR CONTROL, HYPEREXTENSION, RIGID ANTERIOR AND LATERAL FRAME EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH WITH TWO ANTERIOR COMPONE
HMSAAA	Q3 2025	DME/Medical Supplies	L0480	HCPCS	TLSO, TRIPLANAR CONTROL, ONE PIECE RIGID PLASTIC SHELL WITHOUT INTERFACE LINER, WITH MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCY
HMSAAA	Q3 2025	DME/Medical Supplies	L0482	HCPCS	TLSO, TRIPLANAR CONTROL, ONE PIECE RIGID PLASTIC SHELL WITH INTERFACE LINER, MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUN
HMSAAA	Q3 2025	DME/Medical Supplies	L0484	HCPCS	TLSO, TRIPLANAR CONTROL, TWO PIECE RIGID PLASTIC SHELL WITHOUT INTERFACE LINER, WITH MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCY
HMSAAA	Q3 2025	DME/Medical Supplies	L0486	HCPCS	TLSO, TRIPLANAR CONTROL, TWO PIECE RIGID PLASTIC SHELL WITH INTERFACE LINER, MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUN
HMSAAA	Q3 2025	DME/Medical Supplies	L0488	HCPCS	TLSO, TRIPLANAR CONTROL, ONE PIECE RIGID PLASTIC SHELL WITH INTERFACE LINER, MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUN
HMSAAA	Q3 2025	DME/Medical Supplies	L0491	HCPCS	TLSO, SAGITTAL-CORONAL CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, TWO RIGID PLASTIC SHELLS, POSTERIOR EXTENDS FROM THE SACROCOCCYGEAL JUNCTION AN
HMSAAA	Q3 2025	DME/Medical Supplies	L0492	HCPCS	TLSO, SAGITTAL-CORONAL CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, THREE RIGID PLASTIC SHELLS, POSTERIOR EXTENDS FROM THE SACROCOCCYGEAL JUNCTION A
HMSAAA	Q3 2025	DME/Medical Supplies	L0631	HCPCS	LUMBAR-SACRAL ORTHOSIS, SAGITTAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR PANELS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA
HMSAAA	Q3 2025	DME/Medical Supplies	L0635	HCPCS	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, LUMBAR FLEXION, RIGID POSTERIOR FRAME/PANEL(S), LATERAL ARTICULATING DESIGN TO FLEX THE LUMBAR SPI
HMSAAA	Q3 2025	DME/Medical Supplies	L0636	HCPCS	LUMBAR SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, LUMBAR FLEXION, RIGID POSTERIOR FRAME/PANELS, LATERAL ARTICULATING DESIGN TO FLEX THE LUMBAR SPINE
HMSAAA	Q3 2025	DME/Medical Supplies	L0638	HCPCS	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR FRAME/PANELS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTIO
HMSAAA	Q3 2025	DME/Medical Supplies	L0639	HCPCS	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, RIGID SHELL(S)/PANEL(S), POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, ANTERIO
HMSAAA	Q3 2025	DME/Medical Supplies	L0640	HCPCS	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, RIGID SHELL(S)/PANEL(S), POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, ANTERIO
HMSAAA	Q3 2025	DME/Medical Supplies	L0648	HCPCS	LUMBAR-SACRAL ORTHOSIS, SAGITTAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR PANELS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA
HMSAAA	Q3 2025	DME/Medical Supplies	L0651	HCPCS	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, RIGID SHELL(S)/PANEL(S), POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, ANTERIO
HMSAAA	Q3 2025	DME/Medical Supplies	L0978	HCPCS	AXILLARY CRUTCH EXTENSION
HMSAAA	Q3 2025	DME/Medical Supplies	L1000	HCPCS	CERVICAL-THORACIC-LUMBAR-SACRAL ORTHOSIS (CTLSO) (MILWAUKEE), INCLUSIVE OF FURNISHING INITIAL ORTHOSIS, INCLUDING MODEL
HMSAAA	Q3 2025	DME/Medical Supplies	L1005	HCPCS	TENSION BASED SCOLIOSIS ORTHOSIS AND ACCESSORY PADS, INCLUDES FITTING AND ADJUSTMENT
HMSAAA	Q3 2025	DME/Medical Supplies	L1110	HCPCS	ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, RING FLANGE, PLASTIC OR LEATHER, MOLDED TO PATIENT MODEL
HMSAAA	Q3 2025	DME/Medical Supplies	L1200	HCPCS	THORACIC-LUMBAR-SACRAL-ORTHOSIS (TLSO), INCLUSIVE OF FURNISHING INITIAL ORTHOSIS ONLY
HMSAAA	Q3 2025	DME/Medical Supplies	L1230	HCPCS	ADDITION TO TLSO, (LOW PROFILE), MILWAUKEE TYPE SUPERSTRUCTURE
HMSAAA	Q3 2025	DME/Medical Supplies	L1300	HCPCS	OTHER SCOLIOSIS PROCEDURE, BODY JACKET MOLDED TO PATIENT MODEL

HMSAAA	Q3 2025	DME/Medical Supplies	L1310	HCPCS	OTHER SCOLIOSIS PROCEDURE, POST-OPERATIVE BODY JACKET
HMSAAA	Q3 2025	DME/Medical Supplies	L1844	HCPCS	KNEE ORTHOSIS, SINGLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC), MEDIAL-LATERAL AND ROTATION CO
HMSAAA	Q3 2025	DME/Medical Supplies	L1851	HCPCS	KNEE ORTHOSIS (KO), SINGLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC), MEDIAL-LATERAL AND ROTATIO
HMSAAA	Q3 2025	DME/Medical Supplies	L1852	HCPCS	KNEE ORTHOSIS (KO), DOUBLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC), MEDIAL-LATERAL AND ROTATIO
HMSAAA	Q3 2025	DME/Medical Supplies	L8627	HCPCS	COCHLEAR IMPLANT, EXTERNAL SPEECH PROCESSOR, COMPONENT, REPLACEMENT
HMSAAA	Q3 2025	DME/Medical Supplies	L8628	HCPCS	COCHLEAR IMPLANT, EXTERNAL CONTROLLER COMPONENT, REPLACEMENT
HMSAAA	Q3 2025	DME/Medical Supplies	T4530	HCPCS	PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, LARGE SIZE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	T4531	HCPCS	PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, SMALL/MEDIUM SIZE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	T4536	HCPCS	INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, REUSABLE, ANY SIZE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	T4537	HCPCS	INCONTINENCE PRODUCT, PROTECTIVE UNDERPAD, REUSABLE, BED SIZE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	T4539	HCPCS	INCONTINENCE PRODUCT, DIAPER/BRIEF, REUSABLE, ANY SIZE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	T4540	HCPCS	INCONTINENCE PRODUCT, PROTECTIVE UNDERPAD, REUSABLE, CHAIR SIZE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	T4542	HCPCS	INCONTINENCE PRODUCT, DISPOSABLE UNDERPAD, SMALL SIZE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	T4543	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE BRIEF/DIAPER, ABOVE EXTRA LARGE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	T4544	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, ABOVE EXTRA LARGE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	V2500	HCPCS	CONTACT LENS, PMMA, SPHERICAL, PER LENS
HMSAAA	Q3 2025	DME/Medical Supplies	V2501	HCPCS	CONTACT LENS, PMMA, TORIC OR PRISM BALLAST, PER LENS
HMSAAA	Q3 2025	DME/Medical Supplies	V2503	HCPCS	CONTACT LENS, PMMA, COLOR VISION DEFICIENCY, PER LENS
HMSAAA	Q3 2025	DME/Medical Supplies	V2511	HCPCS	CONTACT LENS, GAS PERMEABLE, TORIC, PRISM BALLAST, PER LENS
HMSAAA	Q3 2025	DME/Medical Supplies	V2513	HCPCS	CONTACT LENS, GAS PERMEABLE, EXTENDED WEAR, PER LENS
HMSAAA	Q3 2025	DME/Medical Supplies	V2523	HCPCS	CONTACT LENS, HYDROPHILIC, EXTENDED WEAR, PER LENS
HMSAAA	Q3 2025	DME/Medical Supplies	V2530	HCPCS	CONTACT LENS, SCLERAL, GAS IMPERMEABLE, PER LENS (FOR CONTACT LENS MODIFICATION, SEE 92325)
HMSAAA	Q3 2025	DME/Medical Supplies	V2531	HCPCS	CONTACT LENS, SCLERAL, GAS PERMEABLE, PER LENS (FOR CONTACT LENS MODIFICATION, SEE 92325)
HMSAAA	Q3 2025	DME/Medical Supplies	V2600	HCPCS	HAND HELD LOW VISION AIDS AND OTHER NONSPECTACLE MOUNTED AIDS
HMSAAA	Q3 2025	DME/Medical Supplies	V2610	HCPCS	SINGLE LENS SPECTACLE MOUNTED LOW VISION AIDS
HMSAAA	Q3 2025	DME/Medical Supplies	V2615	HCPCS	TELESCOPIC AND OTHER COMPOUND LENS SYSTEM, INCLUDING DISTANCE VISION TELESCOPIC, NEAR VISION TELESCOPES AND COMPOUND MICROSCOPIC LENS SYSTEM
HMSAAA	Q3 2025	DME/Medical Supplies	V2623	HCPCS	PROSTHETIC EYE, PLASTIC, CUSTOM
HMSAAA	Q3 2025	DME/Medical Supplies	V2624	HCPCS	POLISHING/RESURFACING OF OCULAR PROSTHESIS
HMSAAA	Q3 2025	DME/Medical Supplies	V2625	HCPCS	ENLARGEMENT OF OCULAR PROSTHESIS
HMSAAA	Q3 2025	DME/Medical Supplies	V2626	HCPCS	REDUCTION OF OCULAR PROSTHESIS
HMSAAA	Q3 2025	DME/Medical Supplies	V2627	HCPCS	SCLERAL COVER SHELL
HMSAAA	Q3 2025	DME/Medical Supplies	V2628	HCPCS	FABRICATION AND FITTING OF OCULAR CONFORMER
HMSAAA	Q3 2025	DME/Medical Supplies	V2629	HCPCS	PROSTHETIC EYE, OTHER TYPE
HMSAAA	Q3 2025	DME/Medical Supplies	V5030	HCPCS	HEARING AID, MONAURAL, BODY WORN, AIR CONDUCTION
HMSAAA	Q3 2025	DME/Medical Supplies	V5040	HCPCS	HEARING AID, MONAURAL, BODY WORN, BONE CONDUCTION
HMSAAA	Q3 2025	DME/Medical Supplies	V5050	HCPCS	HEARING AID, MONAURAL, IN THE EAR
HMSAAA	Q3 2025	DME/Medical Supplies	V5060	HCPCS	HEARING AID, MONAURAL, BEHIND THE EAR
HMSAAA	Q3 2025	DME/Medical Supplies	V5070	HCPCS	GLASSES, AIR CONDUCTION
HMSAAA	Q3 2025	DME/Medical Supplies	V5080	HCPCS	GLASSES, BONE CONDUCTION
HMSAAA	Q3 2025	DME/Medical Supplies	V5090	HCPCS	DISPENSING FEE, UNSPECIFIED HEARING AID
HMSAAA	Q3 2025	DME/Medical Supplies	V5095	HCPCS	SEMI-IMPLANTABLE MIDDLE EAR HEARING PROSTHESIS
HMSAAA	Q3 2025	DME/Medical Supplies	V5100	HCPCS	HEARING AID, BILATERAL, BODY WORN
HMSAAA	Q3 2025	DME/Medical Supplies	V5110	HCPCS	DISPENSING FEE, BILATERAL
HMSAAA	Q3 2025	DME/Medical Supplies	V5120	HCPCS	BINAURAL, BODY
HMSAAA	Q3 2025	DME/Medical Supplies	V5130	HCPCS	BINAURAL, IN THE EAR
HMSAAA	Q3 2025	DME/Medical Supplies	V5140	HCPCS	BINAURAL, BEHIND THE EAR
HMSAAA	Q3 2025	DME/Medical Supplies	V5150	HCPCS	BINAURAL, GLASSES
HMSAAA	Q3 2025	DME/Medical Supplies	V5160	HCPCS	DISPENSING FEE, BINAURAL
HMSAAA	Q3 2025	DME/Medical Supplies	V5170	HCPCS	HEARING AID, CROS, IN THE EAR
HMSAAA	Q3 2025	DME/Medical Supplies	V5180	HCPCS	HEARING AID, CROS, BEHIND THE EAR
HMSAAA	Q3 2025	DME/Medical Supplies	V5190	HCPCS	HEARING AID, CONTRALATERAL ROUTING, MONAURAL, GLASSES
HMSAAA	Q3 2025	DME/Medical Supplies	V5200	HCPCS	DISPENSING FEE, CONTRALATERAL, MONAURAL
HMSAAA	Q3 2025	DME/Medical Supplies	V5210	HCPCS	HEARING AID, BICROS, IN THE EAR
HMSAAA	Q3 2025	DME/Medical Supplies	V5220	HCPCS	HEARING AID, BICROS, BEHIND THE EAR
HMSAAA	Q3 2025	DME/Medical Supplies	V5230	HCPCS	HEARING AID, CONTRALATERAL ROUTING SYSTEM, BINAURAL, GLASSES
HMSAAA	Q3 2025	DME/Medical Supplies	V5240	HCPCS	DISPENSING FEE, CONTRALATERAL ROUTING SYSTEM, BINAURAL
HMSAAA	Q3 2025	DME/Medical Supplies	V5241	HCPCS	DISPENSING FEE, MONAURAL HEARING AID, ANY TYPE
HMSAAA	Q3 2025	DME/Medical Supplies	V5242	HCPCS	HEARING AID, ANALOG, MONAURAL, CIC (COMPLETELY IN THE EAR CANAL)
HMSAAA	Q3 2025	DME/Medical Supplies	V5243	HCPCS	HEARING AID, ANALOG, MONAURAL, ITC (IN THE CANAL)
HMSAAA	Q3 2025	DME/Medical Supplies	V5244	HCPCS	HEARING AID, DIGITALLY PROGRAMMABLE ANALOG, MONAURAL, CIC
HMSAAA	Q3 2025	DME/Medical Supplies	V5245	HCPCS	HEARING AID, DIGITALLY PROGRAMMABLE, ANALOG, MONAURAL, ITC
HMSAAA	Q3 2025	DME/Medical Supplies	V5246	HCPCS	HEARING AID, DIGITALLY PROGRAMMABLE ANALOG, MONAURAL, ITE (IN THE EAR)
HMSAAA	Q3 2025	DME/Medical Supplies	V5247	HCPCS	HEARING AID, DIGITALLY PROGRAMMABLE ANALOG, MONAURAL, BTE (BEHIND THE EAR)
HMSAAA	Q3 2025	DME/Medical Supplies	V5248	HCPCS	HEARING AID, ANALOG, BINAURAL, CIC
HMSAAA	Q3 2025	DME/Medical Supplies	V5249	HCPCS	HEARING AID, ANALOG, BINAURAL, ITC
HMSAAA	Q3 2025	DME/Medical Supplies	V5250	HCPCS	HEARING AID, DIGITALLY PROGRAMMABLE ANALOG, BINAURAL, CIC
HMSAAA	Q3 2025	DME/Medical Supplies	V5252	HCPCS	HEARING AID, DIGITALLY PROGRAMMABLE, BINAURAL, ITE
HMSAAA	Q3 2025	DME/Medical Supplies	V5253	HCPCS	HEARING AID, DIGITALLY PROGRAMMABLE, BINAURAL, BTE
HMSAAA	Q3 2025	DME/Medical Supplies	V5254	HCPCS	HEARING AID, DIGITAL, MONAURAL, CIC
HMSAAA	Q3 2025	DME/Medical Supplies	V5255	HCPCS	HEARING AID, DIGITAL, MONAURAL, ITC
HMSAAA	Q3 2025	DME/Medical Supplies	V5256	HCPCS	HEARING AID, DIGITAL, MONAURAL, ITE
HMSAAA	Q3 2025	DME/Medical Supplies	V5257	HCPCS	HEARING AID, DIGITAL, MONAURAL, BTE
HMSAAA	Q3 2025	DME/Medical Supplies	V5258	HCPCS	HEARING AID, DIGITAL, BINAURAL, CIC
HMSAAA	Q3 2025	DME/Medical Supplies	V5260	HCPCS	HEARING AID, DIGITAL, BINAURAL, ITE
HMSAAA	Q3 2025	DME/Medical Supplies	V5262	HCPCS	HEARING AID, DISPOSABLE, ANY TYPE, MONAURAL
HMSAAA	Q3 2025	DME/Medical Supplies	V5263	HCPCS	HEARING AID, DISPOSABLE, ANY TYPE, BINAURAL
HMSAAA	Q3 2025	DME/Medical Supplies	V5265	HCPCS	EAR MOLD/INSERT, DISPOSABLE, ANY TYPE
HMSAAA	Q3 2025	DME/Medical Supplies	V5266	HCPCS	BATTERY FOR USE IN HEARING DEVICE
HMSAAA	Q3 2025	DME/Medical Supplies	V5267	HCPCS	HEARING AID OR ASSISTIVE LISTENING DEVICE/SUPPLIES/ACCESSORIES, NOT OTHERWISE SPECIFIED
HMSAAA	Q3 2025	HCBS	A4335	HCPCS	INCONTINENCE SUPPLY; MISCELLANEOUS
HMSAAA	Q3 2025	HCBS	A4927	HCPCS	GLOVES, NON-STERILE, PER 100
HMSAAA	Q3 2025	HCBS	A9276	HCPCS	SENSOR; INVASIVE (E.G., SUBCUTANEOUS), DISPOSABLE, FOR USE WITH NON-DURABLE MEDICAL EQUIPMENT INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM, ON
HMSAAA	Q3 2025	HCBS	A9277	HCPCS	TRANSMITTER; EXTERNAL, FOR USE WITH NON-DURABLE MEDICAL EQUIPMENT INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM
HMSAAA	Q3 2025	HCBS	A9278	HCPCS	RECEIVER (MONITOR); EXTERNAL, FOR USE WITH NON-DURABLE MEDICAL EQUIPMENT INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM
HMSAAA	Q3 2025	HCBS	E0260	HCPCS	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS, WITH MATTRESS
HMSAAA	Q3 2025	HCBS	E0424	HCPCS	STATIONARY COMPRESSED GASEOUS OXYGEN SYSTEM, RENTAL; INCLUDES CONTAINER, CONTENTS, REGULATOR, FLOWMETER, HUMIDIFIER, NEBULIZER, CANNULA OR MASK,
HMSAAA	Q3 2025	HCBS	E0431	HCPCS	PORTABLE GASEOUS OXYGEN SYSTEM, RENTAL; INCLUDES PORTABLE CONTAINER, REGULATOR, FLOWMETER, HUMIDIFIER, CANNULA OR MASK, AND TUBING
HMSAAA	Q3 2025	HCBS	E0445	HCPCS	OXIMETER DEVICE FOR MEASURING BLOOD OXYGEN LEVELS NON-INVASIVELY
HMSAAA	Q3 2025	HCBS	E0470	HCPCS	RESPIRATORY ASSIST DEVICE, BI-LEVEL PRESSURE CAPABILITY, WITHOUT BACKUP RATE FEATURE, USED WITH NONINVASIVE INTERFACE, E.G., NASAL OR FACIAL MASK (INTERM
HMSAAA	Q3 2025	HCBS	E0483	HCPCS	HIGH FREQUENCY CHEST WALL OSCILLATION SYSTEM, WITH FULL ANTERIOR AND/OR POSTERIOR THORACIC REGION RECEIVING SIMULTANEOUS EXTERNAL OSCILLATION, INC
HMSAAA	Q3 2025	HCBS	E0784	HCPCS	EXTERNAL AMBULATORY INFUSION PUMP, INSULIN
HMSAAA	Q3 2025	HCBS	E1390	HCPCS	OXYGEN CONCENTRATOR, SINGLE DELIVERY PORT, CAPABLE OF DELIVERING 85 PERCENT OR GREATER OXYGEN CONCENTRATION AT THE PRESCRIBED FLOW RATE
HMSAAA	Q3 2025	HCBS	E1392	HCPCS	PORTABLE OXYGEN CONCENTRATOR, RENTAL

HMSAAA	Q3 2025	HCBS	E1399	HCPCS	DURABLE MEDICAL EQUIPMENT, MISCELLANEOUS
HMSAAA	Q3 2025	HCBS	K0001	HCPCS	STANDARD WHEELCHAIR
HMSAAA	Q3 2025	HCBS	K0002	HCPCS	STANDARD HEMI (LOW SEAT) WHEELCHAIR
HMSAAA	Q3 2025	HCBS	K0003	HCPCS	LIGHTWEIGHT WHEELCHAIR
HMSAAA	Q3 2025	HCBS	K0004	HCPCS	HIGH STRENGTH, LIGHTWEIGHT WHEELCHAIR
HMSAAA	Q3 2025	HCBS	K0006	HCPCS	HEAVY DUTY WHEELCHAIR
HMSAAA	Q3 2025	HCBS	K0007	HCPCS	EXTRA HEAVY DUTY WHEELCHAIR
HMSAAA	Q3 2025	HCBS	K0738	HCPCS	PORTABLE GASEOUS OXYGEN SYSTEM, RENTAL; HOME COMPRESSOR USED TO FILL PORTABLE OXYGEN CYLINDERS; INCLUDES PORTABLE CONTAINERS, REGULATOR, FLOWME
HMSAAA	Q3 2025	HCBS	K0801	HCPCS	POWER OPERATED VEHICLE, GROUP 1 HEAVY DUTY, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
HMSAAA	Q3 2025	HCBS	K0850	HCPCS	POWER WHEELCHAIR, GROUP 3 HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
HMSAAA	Q3 2025	HCBS	K0856	HCPCS	POWER WHEELCHAIR, GROUP 3 STANDARD, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
HMSAAA	Q3 2025	HCBS	K0858	HCPCS	POWER WHEELCHAIR, GROUP 3 HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT 301 TO 450 POUNDS
HMSAAA	Q3 2025	HCBS	L0464	HCPCS	TLSO, TRIPLANAR CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, FOUR RIGID PLASTIC SHELLS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATE
HMSAAA	Q3 2025	HCBS	L0627	HCPCS	LUMBAR ORTHOSIS, SAGITTAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR PANELS, POSTERIOR EXTENDS FROM L-1 TO BELOW L-5 VERTEBRA, PRODUCES INTRACAVITAR
HMSAAA	Q3 2025	HCBS	L0637	HCPCS	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR FRAME/PANELS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTIO
HMSAAA	Q3 2025	HCBS	L0642	HCPCS	LUMBAR ORTHOSIS, SAGITTAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR PANELS, POSTERIOR EXTENDS FROM L-1 TO BELOW L-5 VERTEBRA, PRODUCES INTRACAVITAR
HMSAAA	Q3 2025	HCBS	L0650	HCPCS	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR FRAME/PANEL(S), POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCT
HMSAAA	Q3 2025	HCBS	L1843	HCPCS	KNEE ORTHOSIS, SINGLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC), MEDIAL-LATERAL AND ROTATION CO
HMSAAA	Q3 2025	HCBS	L1845	HCPCS	KNEE ORTHOSIS, DOUBLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC), MEDIAL-LATERAL AND ROTATION CO
HMSAAA	Q3 2025	HCBS	L1846	HCPCS	KNEE ORTHOSIS, DOUBLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC), MEDIAL-LATERAL AND ROTATION CO
HMSAAA	Q3 2025	HCBS	L8619	HCPCS	COCHLEAR IMPLANT, EXTERNAL SPEECH PROCESSOR AND CONTROLLER, INTEGRATED SYSTEM, REPLACEMENT
HMSAAA	Q3 2025	HCBS	L8680	HCPCS	IMPLANTABLE NEUROSTIMULATOR ELECTRODE, EACH
HMSAAA	Q3 2025	HCBS	Q4101	HCPCS	APLIGRAF, PER SQUARE CENTIMETER
HMSAAA	Q3 2025	HCBS	T4521	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, SMALL, EACH
HMSAAA	Q3 2025	HCBS	T4522	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, MEDIUM, EACH
HMSAAA	Q3 2025	HCBS	T4523	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, LARGE, EACH
HMSAAA	Q3 2025	HCBS	T4525	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, SMALL SIZE, EACH
HMSAAA	Q3 2025	HCBS	T4526	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, MEDIUM SIZE, EACH
HMSAAA	Q3 2025	HCBS	T4527	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, LARGE SIZE, EACH
HMSAAA	Q3 2025	HCBS	T4528	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, EXTRA LARGE SIZE, EACH
HMSAAA	Q3 2025	HCBS	T4529	HCPCS	PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, SMALL/MEDIUM SIZE, EACH
HMSAAA	Q3 2025	HCBS	T4532	HCPCS	PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, LARGE SIZE, EACH
HMSAAA	Q3 2025	HCBS	T4533	HCPCS	YOUTH SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, EACH
HMSAAA	Q3 2025	HCBS	T4535	HCPCS	DISPOSABLE LINER/SHIELD/GUARD/PAD/UNDERGARMENT, FOR INCONTINENCE, EACH
HMSAAA	Q3 2025	HCBS	T4541	HCPCS	INCONTINENCE PRODUCT, DISPOSABLE UNDERPAD, LARGE, EACH
HMSAAA	Q3 2025	HCBS	V2510	HCPCS	CONTACT LENS, GAS PERMEABLE, SPHERICAL, PER LENS
HMSAAA	Q3 2025	HCBS	V2521	HCPCS	CONTACT LENS, HYDROPHILIC, TORIC, OR PRISM BALLAST, PER LENS
HMSAAA	Q3 2025	HCBS	V2784	HCPCS	LENS, POLYCARBONATE OR EQUAL, ANY INDEX, PER LENS
HMSAAA	Q3 2025	HCBS	V5261	HCPCS	HEARING AID, DIGITAL, BINAURAL, BTE
HMSAAA	Q3 2025	HCBS	V5264	HCPCS	EAR MOLD/INSERT, NOT DISPOSABLE, ANY TYPE
HMSAAA	Q3 2025	Home Health	B5100	HCPCS	PARENTERAL NUTRITION SOLUTION COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS, INCLUDING PREPARATION, AN
HMSAAA	Q3 2025	Home Health	B4193	HCPCS	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS, INCLUDING PREPARATION, AI
HMSAAA	Q3 2025	Home Health	B4197	HCPCS	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS AND VITAMINS, INCLUDING PREPARATION, AN
HMSAAA	Q3 2025	Home Health	B4199	HCPCS	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS AND VITAMINS, INCLUDING PREPARATION, AN
HMSAAA	Q3 2025	Home Health	B5000	HCPCS	PARENTERAL NUTRITION SOLUTION COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS, INCLUDING PREPARATION, AN
HMSAAA	Q3 2025	Home Health	B5200	HCPCS	PARENTERAL NUTRITION SOLUTION COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS, INCLUDING PREPARATION, AN
HMSAAA	Q3 2025	Home Health	B9999	HCPCS	NOC FOR PARENTERAL SUPPLIES
HMSAAA	Q3 2025	Home Health	S9364	HCPCS	HOME INFUSION THERAPY, TOTAL PARENTERAL NUTRITION (TPN); ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSA
HMSAAA	Q3 2025	Home Health	S9365	HCPCS	HOME INFUSION THERAPY, TOTAL PARENTERAL NUTRITION (TPN); ONE LITER PER DAY, ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATIO
HMSAAA	Q3 2025	Home Health	S9366	HCPCS	HOME INFUSION THERAPY, TOTAL PARENTERAL NUTRITION (TPN); MORE THAN ONE LITER BUT NO MORE THAN TWO LITERS PER DAY, ADMINISTRATIVE SERVICES, PROFESSIONA
HMSAAA	Q3 2025	Home Health	S9367	HCPCS	HOME INFUSION THERAPY, TOTAL PARENTERAL NUTRITION (TPN); MORE THAN TWO LITERS BUT NO MORE THAN THREE LITERS PER DAY, ADMINISTRATIVE SERVICES, PROFESSIO
HMSAAA	Q3 2025	Home Health	S9368	HCPCS	HOME INFUSION THERAPY, TOTAL PARENTERAL NUTRITION (TPN); MORE THAN THREE LITERS PER DAY, ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE
HMSAAA	Q3 2025	Home Health	B4189	HCPCS	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS, INCLUDING PREPARATION, AI
HMSAAA	Q3 2025	Inpatient Hosp		33361	CPT	TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; PERCUTANEOUS FEMORAL ARTERY APPROACH
HMSAAA	Q3 2025	Inpatient Hosp		33362	CPT	TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; OPEN FEMORAL ARTERY APPROACH
HMSAAA	Q3 2025	Inpatient Hosp		33363	CPT	TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; OPEN AXILLARY ARTERY APPROACH
HMSAAA	Q3 2025	Inpatient Hosp		33364	CPT	TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; OPEN ILIAC ARTERY APPROACH
HMSAAA	Q3 2025	Inpatient Hosp		33365	CPT	TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; TRANSAORTIC APPROACH (EG, MEDIAN STERNOTOMY, MEDIASTINOTOMY)
HMSAAA	Q3 2025	Inpatient Hosp		33366	CPT	TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; TRANSAPICAL EXPOSURE (EG, LEFT THORACOTOMY)
HMSAAA	Q3 2025	Inpatient Hosp		33367	CPT	TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; CARDIOPULMONARY BYPASS SUPPORT WITH PERCUTANEOUS PERIPHERAL ARTERIAL AN
HMSAAA	Q3 2025	Inpatient Hosp		33368	CPT	TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; CARDIOPULMONARY BYPASS SUPPORT WITH OPEN PERIPHERAL ARTERIAL AND VENOUS
HMSAAA	Q3 2025	Inpatient Hosp		33369	CPT	TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; CARDIOPULMONARY BYPASS SUPPORT WITH CENTRAL ARTERIAL AND VENOUS CANNULA
HMSAAA	Q3 2025	Inpatient Hosp		38225	CPT	CHIMERIC ANTIGEN RECEPTOR T-CELL (CAR-T) THERAPY; HARVESTING OF BLOOD-DERIVED T LYMPHOCYTES FOR DEVELOPMENT OF GENETICALLY MODIFIED AUTOLOGOUS CA
HMSAAA	Q3 2025	Inpatient Hosp		38226	CPT	CHIMERIC ANTIGEN RECEPTOR T-CELL (CAR-T) THERAPY; PREPARATION OF BLOOD-DERIVED T LYMPHOCYTES FOR TRANSPORTATION (EG, CRYOPRESERVATION, STORAGE)
HMSAAA	Q3 2025	Inpatient Hosp		38227	CPT	CHIMERIC ANTIGEN RECEPTOR T-CELL (CAR-T) THERAPY; RECEIPT AND PREPARATION OF CAR-T CELLS FOR ADMINISTRATION
HMSAAA	Q3 2025	Inpatient Hosp		38228	CPT	CHIMERIC ANTIGEN RECEPTOR T-CELL (CAR-T) THERAPY; CAR-T CELL ADMINISTRATION, AUTOLOGOUS
HMSAAA	Q3 2025	Inpatient Hosp		61624	CPT	TRANSCATHETER PERMANENT OCCLUSION OR EMBOLIZATION (EG, FOR TUMOR DESTRUCTION, TO ACHIEVE HEMOSTASIS, TO OCCLUDE A VASCULAR MALFORMATION), PERCU
HMSAAA	Q3 2025	Inpatient Hosp		61630	CPT	BALLOON ANGIOPLASTY, INTRACRANIAL (EG, ATHEROSCLEROTIC STENOSIS), PERCUTANEOUS
HMSAAA	Q3 2025	Inpatient Hosp		61635	CPT	TRANSCATHETER PLACEMENT OF INTRAVASCULAR STENT(S), INTRACRANIAL (EG, ATHEROSCLEROTIC STENOSIS), INCLUDING BALLOON ANGIOPLASTY, IF PERFORMED
HMSAAA	Q3 2025	Inpatient Hosp		61645	CPT	PERCUTANEOUS ARTERIAL TRANSLUMINAL MECHANICAL THROMBECTOMY AND/OR INFUSION FOR THROMBOLYSIS, INTRACRANIAL, ANY METHOD, INCLUDING DIAGNOSTIC AN
HMSAAA	Q3 2025	Inpatient Hosp	J3393		HCPCS	INJECTION, BETIBEGLOGENE AUTOTEMCEL, PER TREATMENT
HMSAAA	Q3 2025	Inpatient Hosp	J3394		HCPCS	INJECTION, LOVOTIBEGLOGENE AUTOTEMCEL, PER TREATMENT
HMSAAA	Q3 2025	Inpatient Hosp		55970	CPT	INTERSEX SURGERY; MALE TO FEMALE
HMSAAA	Q3 2025	Outpatient Hosp	0402T		CPT	COLLAGEN CROSS-LINKING OF CORNEA, INCLUDING REMOVAL OF THE CORNEAL EPITHELIUM, WHEN PERFORMED, AND INTRAOPERATIVE PACHYMETRY, WHEN PERFORMED
HMSAAA	Q3 2025	Outpatient Hosp		19303	CPT	MASTECTOMY, SIMPLE, COMPLETE
HMSAAA	Q3 2025	Outpatient Hosp		19318	CPT	BREAST REDUCTION
HMSAAA	Q3 2025	Outpatient Hosp		36468	CPT	INJECTION(S) OF SCLEROSANT FOR SPIDER VEINS (TELANGIECTASIA), LIMB OR TRUNK
HMSAAA	Q3 2025	Outpatient Hosp		36470	CPT	INJECTION OF SCLEROSANT; SINGLE INCOMPETENT VEIN (OTHER THAN TELANGIECTASIA)
HMSAAA	Q3 2025	Outpatient Hosp		36471	CPT	INJECTION OF SCLEROSANT; MULTIPLE INCOMPETENT VEINS (OTHER THAN TELANGIECTASIA), SAME LEG
HMSAAA	Q3 2025	Outpatient Hosp		36478	CPT	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, INCLUSIVE OF ALL IMAGING GUIDANCE AND MONITORING, PERCUTANEOUS, LASER; FIRST VEIN TREATE
HMSAAA	Q3 2025	Outpatient Hosp		37765	CPT	STAB PHLEBECTOMY OF VARICOSE VEINS, 1 EXTREMITY; 10-20 STAB INCISIONS
HMSAAA	Q3 2025	Outpatient Hosp		77301	CPT	INTENSITY MODULATED RADIOTHERAPY PLAN, INCLUDING DOSE-VOLUME HISTOGRAMS FOR TARGET AND CRITICAL STRUCTURE PARTIAL TOLERANCE SPECIFICATIONS
HMSAAA	Q3 2025	Outpatient Hosp		90867	CPT	THERAPEUTIC REPETITIVE TRANSCRANIAL MAGNETIC STIMULATION (TMS) TREATMENT; INITIAL, INCLUDING CORTICAL MAPPING, MOTOR THRESHOLD DETERMINATION, DELIVE
HMSAAA	Q3 2025	Outpatient Hosp		90868	CPT	THERAPEUTIC REPETITIVE TRANSCRANIAL MAGNETIC STIMULATION (TMS) TREATMENT; SUBSEQUENT DELIVERY AND MANAGEMENT, PER SESSION
HMSAAA	Q3 2025	Outpatient Hosp	Q4133		HCPCS	GRAFIX PRIME, GRAFIXPL PRIME, STRAVIX AND STRAVIXPL, PER SQUARE CENTIMETER
HMSAAA	Q3 2025	Outpatient Hosp		802	CPT	ANESTHESIA FOR PROCEDURES ON LOWER ANTERIOR ABDOMINAL WALL; PANNICULECTOMY
HMSAAA	Q3 2025	Outpatient Hosp	0446T		CPT	CREATION OF SUBCUTANEOUS POCKET WITH INSERTION OF IMPLANTABLE INTERSTITIAL GLUCOSE SENSOR, INCLUDING SYSTEM ACTIVATION AND PATIENT TRAINING
HMSAAA	Q3 2025	Outpatient Hosp	0447T		CPT	REMOVAL OF IMPLANTABLE INTERSTITIAL GLUCOSE SENSOR FROM SUBCUTANEOUS POCKET VIA INCISION
HMSAAA	Q3 2025	Outpatient Hosp	0448T		CPT	REMOVAL OF IMPLANTABLE INTERSTITIAL GLUCOSE SENSOR WITH CREATION OF SUBCUTANEOUS POCKET AT DIFFERENT ANATOMIC SITE AND INSERTION OF NEW IMPLANTABL
HMSAAA	Q3 2025	Outpatient Hosp	0449T		CPT	INSERTION OF AQUEOUS DRAINAGE DEVICE, WITHOUT EXTRAOCULAR RESERVOIR, INTERNAL APPROACH, INTO THE SUBCONJUNCTIVAL SPACE; INITIAL DEVICE
HMSAAA	Q3 2025	Outpatient Hosp	0671T		CPT	INSERTION OF ANTERIOR SEGMENT AQUEOUS DRAINAGE DEVICE INTO THE TRABECULAR MESHWORK, WITHOUT EXTERNAL RESERVOIR, AND WITHOUT CONCOMITANT CATARA
HMSAAA	Q3 2025	Outpatient Hosp		11920	CPT	TATTOOING, INTRADERMAL INTRODUCTION OF INSOLUBLE OPAQUE PIGMENTS TO CORRECT COLOR DEFECTS OF SKIN, INCLUDING MICROPIGMENTATION; 6.0 SQ CM OR LESS
HMSAAA	Q3 2025	Outpatient Hosp		11921	CPT	TATTOOING, INTRADERMAL INTRODUCTION OF INSOLUBLE OPAQUE PIGMENTS TO CORRECT COLOR DEFECTS OF SKIN, INCLUDING MICROPIGMENTATION; 6.1 TO 20.0 SQ CM

HMSAAA	Q3 2025	Outpatient Hosp	11922	CPT	TATTOOING, INTRADERMAL INTRODUCTION OF INSOLUBLE OPAQUE PIGMENTS TO CORRECT COLOR DEFECTS OF SKIN, INCLUDING MICROPIGMENTATION; EACH ADDITIONAL
HMSAAA	Q3 2025	Outpatient Hosp	11960	CPT	INSERTION OF TISSUE EXPANDER(S) FOR OTHER THAN BREAST, INCLUDING SUBSEQUENT EXPANSION
HMSAAA	Q3 2025	Outpatient Hosp	11970	CPT	REPLACEMENT OF TISSUE EXPANDER WITH PERMANENT IMPLANT
HMSAAA	Q3 2025	Outpatient Hosp	11971	CPT	REMOVAL OF TISSUE EXPANDER WITHOUT INSERTION OF IMPLANT
HMSAAA	Q3 2025	Outpatient Hosp	15750	CPT	FLAP; NEUROVASCULAR PEDICLE
HMSAAA	Q3 2025	Outpatient Hosp	15760	CPT	GRAFT; COMPOSITE (EG, FULL THICKNESS OF EXTERNAL EAR OR NASAL ALA), INCLUDING PRIMARY CLOSURE, DONOR AREA
HMSAAA	Q3 2025	Outpatient Hosp	15770	CPT	GRAFT; DERMA-FAT-FASCIA
HMSAAA	Q3 2025	Outpatient Hosp	15786	CPT	ABRASION; SINGLE LESION (EG, KERATOSIS, SCAR)
HMSAAA	Q3 2025	Outpatient Hosp	15787	CPT	ABRASION; EACH ADDITIONAL 4 LESIONS OR LESS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
HMSAAA	Q3 2025	Outpatient Hosp	15830	CPT	EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY); ABDOMEN, INFRAUMBILICAL PANNICULECTOMY
HMSAAA	Q3 2025	Outpatient Hosp	15832	CPT	EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY); THIGH
HMSAAA	Q3 2025	Outpatient Hosp	15833	CPT	EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY); LEG
HMSAAA	Q3 2025	Outpatient Hosp	15834	CPT	EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY); HIP
HMSAAA	Q3 2025	Outpatient Hosp	15835	CPT	EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY); BUTTOCK
HMSAAA	Q3 2025	Outpatient Hosp	15836	CPT	EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY); ARM
HMSAAA	Q3 2025	Outpatient Hosp	15837	CPT	EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY); FOREARM OR HAND
HMSAAA	Q3 2025	Outpatient Hosp	15838	CPT	EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY); SUBMENTAL FAT PAD
HMSAAA	Q3 2025	Outpatient Hosp	15839	CPT	EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY); OTHER AREA
HMSAAA	Q3 2025	Outpatient Hosp	15847	CPT	EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY), ABDOMEN (EG, ABDOMINOPLASTY) (INCLUDES UMBILICAL TRANSPOSITION AND FASCIAL PL
HMSAAA	Q3 2025	Outpatient Hosp	17106	CPT	DESTRUCTION OF CUTANEOUS VASCULAR PROLIFERATIVE LESIONS (EG, LASER TECHNIQUE); LESS THAN 10 SQ CM
HMSAAA	Q3 2025	Outpatient Hosp	17107	CPT	DESTRUCTION OF CUTANEOUS VASCULAR PROLIFERATIVE LESIONS (EG, LASER TECHNIQUE); 10.0 TO 50.0 SQ CM
HMSAAA	Q3 2025	Outpatient Hosp	17108	CPT	DESTRUCTION OF CUTANEOUS VASCULAR PROLIFERATIVE LESIONS (EG, LASER TECHNIQUE); OVER 50.0 SQ CM
HMSAAA	Q3 2025	Outpatient Hosp	19296	CPT	PLACEMENT OF RADIOTHERAPY AFTERLOADING EXPANDABLE CATHETER (SINGLE OR MULTICHANNEL) INTO THE BREAST FOR INTERSTITIAL RADIOELEMENT APPLICATION FOLL
HMSAAA	Q3 2025	Outpatient Hosp	19297	CPT	PLACEMENT OF RADIOTHERAPY AFTERLOADING EXPANDABLE CATHETER (SINGLE OR MULTICHANNEL) INTO THE BREAST FOR INTERSTITIAL RADIOELEMENT APPLICATION FOLL
HMSAAA	Q3 2025	Outpatient Hosp	19298	CPT	PLACEMENT OF RADIOTHERAPY AFTER LOADING BRACHYTHERAPY CATHETERS (MULTIPLE TUBE AND BUTTON TYPE) INTO THE BREAST FOR INTERSTITIAL RADIOELEMENT APPLIC
HMSAAA	Q3 2025	Outpatient Hosp	19300	CPT	MASTECTOMY FOR GYNECOMASTIA
HMSAAA	Q3 2025	Outpatient Hosp	19316	CPT	MASTOPEXY
HMSAAA	Q3 2025	Outpatient Hosp	19325	CPT	BREAST AUGMENTATION WITH IMPLANT
HMSAAA	Q3 2025	Outpatient Hosp	19328	CPT	REMOVAL OF INTACT BREAST IMPLANT
HMSAAA	Q3 2025	Outpatient Hosp	19330	CPT	REMOVAL OF RUPTURED BREAST IMPLANT, INCLUDING IMPLANT CONTENTS (EG, SALINE, SILICONE GEL)
HMSAAA	Q3 2025	Outpatient Hosp	19340	CPT	INSERTION OF BREAST IMPLANT ON SAME DAY OF MASTECTOMY (IE, IMMEDIATE)
HMSAAA	Q3 2025	Outpatient Hosp	19342	CPT	INSERTION OR REPLACEMENT OF BREAST IMPLANT ON SEPARATE DAY FROM MASTECTOMY
HMSAAA	Q3 2025	Outpatient Hosp	19350	CPT	NIPPLE/AREOLA RECONSTRUCTION
HMSAAA	Q3 2025	Outpatient Hosp	19355	CPT	CORRECTION OF INVERTED NIPPLES
HMSAAA	Q3 2025	Outpatient Hosp	19357	CPT	TISSUE EXPANDER PLACEMENT IN BREAST RECONSTRUCTION, INCLUDING SUBSEQUENT EXPANSION(S)
HMSAAA	Q3 2025	Outpatient Hosp	19361	CPT	BREAST RECONSTRUCTION; WITH LATISSIMUS DORSI FLAP
HMSAAA	Q3 2025	Outpatient Hosp	19364	CPT	BREAST RECONSTRUCTION; WITH FREE FLAP (EG, FTRAM, DIEP, SIEA, GAP FLAP)
HMSAAA	Q3 2025	Outpatient Hosp	19367	CPT	BREAST RECONSTRUCTION; WITH SINGLE-PEDICLED TRANSVERSE RECTUS ABDOMINIS MYOCUTANEOUS (TRAM) FLAP
HMSAAA	Q3 2025	Outpatient Hosp	19368	CPT	BREAST RECONSTRUCTION; WITH SINGLE-PEDICLED TRANSVERSE RECTUS ABDOMINIS MYOCUTANEOUS (TRAM) FLAP, REQUIRING SEPARATE MICROVASCULAR ANASTOMOSIS
HMSAAA	Q3 2025	Outpatient Hosp	19369	CPT	BREAST RECONSTRUCTION; WITH BIPEDICLED TRANSVERSE RECTUS ABDOMINIS MYOCUTANEOUS (TRAM) FLAP
HMSAAA	Q3 2025	Outpatient Hosp	19370	CPT	REVISION OF PERI-IMPLANT CAPSULE, BREAST, INCLUDING CAPSULOTOMY, CAPSULORRHAPHY, AND/OR PARTIAL CAPSULECTOMY
HMSAAA	Q3 2025	Outpatient Hosp	19371	CPT	PERI-IMPLANT CAPSULECTOMY, BREAST, COMPLETE, INCLUDING REMOVAL OF ALL INTRACAPSULAR CONTENTS
HMSAAA	Q3 2025	Outpatient Hosp	19380	CPT	REVISION OF RECONSTRUCTED BREAST (EG, SIGNIFICANT REMOVAL OF TISSUE, RE-ADVANCEMENT AND/OR RE-INSET OF FLAPS IN AUTOLOGOUS RECONSTRUCTION OR SIGNI
HMSAAA	Q3 2025	Outpatient Hosp	19396	CPT	PREPARATION OF MOULAGE FOR CUSTOM BREAST IMPLANT
HMSAAA	Q3 2025	Outpatient Hosp	20555	CPT	PLACEMENT OF NEEDLES OR CATHETERS INTO MUSCLE AND/OR SOFT TISSUE FOR SUBSEQUENT INTERSTITIAL RADIOELEMENT APPLICATION (AT THE TIME OF OR SUBSEQUENT
HMSAAA	Q3 2025	Outpatient Hosp	20912	CPT	CARTILAGE GRAFT; NASAL SEPTUM
HMSAAA	Q3 2025	Outpatient Hosp	21120	CPT	GENIOPLASTY; AUGMENTATION (AUTOGRAFT, ALLOGRAFT, PROSTHETIC MATERIAL)
HMSAAA	Q3 2025	Outpatient Hosp	21121	CPT	GENIOPLASTY; SLIDING OSTEOTOMY, SINGLE PIECE
HMSAAA	Q3 2025	Outpatient Hosp	21122	CPT	GENIOPLASTY; SLIDING OSTEOTOMIES, 2 OR MORE OSTEOTOMIES (EG, WEDGE EXCISION OR BONE WEDGE REVERSAL FOR ASYMMETRICAL CHIN)
HMSAAA	Q3 2025	Outpatient Hosp	21123	CPT	GENIOPLASTY; SLIDING, AUGMENTATION WITH INTERPOSITIONAL BONE GRAFTS (INCLUDES OBTAINING AUTOGRAFTS)
HMSAAA	Q3 2025	Outpatient Hosp	21125	CPT	AUGMENTATION, MANDIBULAR BODY OR ANGLE; PROSTHETIC MATERIAL
HMSAAA	Q3 2025	Outpatient Hosp	21127	CPT	AUGMENTATION, MANDIBULAR BODY OR ANGLE; WITH BONE GRAFT, ONLAY OR INTERPOSITIONAL (INCLUDES OBTAINING AUTOGRAFT)
HMSAAA	Q3 2025	Outpatient Hosp	21137	CPT	REDUCTION FOREHEAD; CONTOURING ONLY
HMSAAA	Q3 2025	Outpatient Hosp	21138	CPT	REDUCTION FOREHEAD; CONTOURING AND APPLICATION OF PROSTHETIC MATERIAL OR BONE GRAFT (INCLUDES OBTAINING AUTOGRAFT)
HMSAAA	Q3 2025	Outpatient Hosp	21139	CPT	REDUCTION FOREHEAD; CONTOURING AND SETBACK OF ANTERIOR FRONTAL SINUS WALL
HMSAAA	Q3 2025	Outpatient Hosp	21141	CPT	RECONSTRUCTION MIDFACE, LEFORT I; SINGLE PIECE, SEGMENT MOVEMENT IN ANY DIRECTION (EG, FOR LONG FACE SYNDROME), WITHOUT BONE GRAFT
HMSAAA	Q3 2025	Outpatient Hosp	21142	CPT	RECONSTRUCTION MIDFACE, LEFORT I; 2 PIECES, SEGMENT MOVEMENT IN ANY DIRECTION, WITHOUT BONE GRAFT
HMSAAA	Q3 2025	Outpatient Hosp	21143	CPT	RECONSTRUCTION MIDFACE, LEFORT I; 3 OR MORE PIECES, SEGMENT MOVEMENT IN ANY DIRECTION, WITHOUT BONE GRAFT
HMSAAA	Q3 2025	Outpatient Hosp	21145	CPT	RECONSTRUCTION MIDFACE, LEFORT I; SINGLE PIECE, SEGMENT MOVEMENT IN ANY DIRECTION, REQUIRING BONE GRAFTS (INCLUDES OBTAINING AUTOGRAFTS)
HMSAAA	Q3 2025	Outpatient Hosp	21146	CPT	RECONSTRUCTION MIDFACE, LEFORT I; 2 PIECES, SEGMENT MOVEMENT IN ANY DIRECTION, REQUIRING BONE GRAFTS (INCLUDES OBTAINING AUTOGRAFTS) (EG, UNGRAFTED
HMSAAA	Q3 2025	Outpatient Hosp	21147	CPT	RECONSTRUCTION MIDFACE, LEFORT I; 3 OR MORE PIECES, SEGMENT MOVEMENT IN ANY DIRECTION, REQUIRING BONE GRAFTS (INCLUDES OBTAINING AUTOGRAFTS) (EG, UN
HMSAAA	Q3 2025	Outpatient Hosp	21150	CPT	RECONSTRUCTION MIDFACE, LEFORT II; ANTERIOR INTRUSION (EG, TREACHER-COLLINS SYNDROME)
HMSAAA	Q3 2025	Outpatient Hosp	21151	CPT	RECONSTRUCTION MIDFACE, LEFORT II; ANY DIRECTION, REQUIRING BONE GRAFTS (INCLUDES OBTAINING AUTOGRAFTS)
HMSAAA	Q3 2025	Outpatient Hosp	21154	CPT	RECONSTRUCTION MIDFACE, LEFORT III (EXTRACRANIAL), ANY TYPE, REQUIRING BONE GRAFTS (INCLUDES OBTAINING AUTOGRAFTS); WITHOUT LEFORT I
HMSAAA	Q3 2025	Outpatient Hosp	21155	CPT	RECONSTRUCTION MIDFACE, LEFORT III (EXTRACRANIAL), ANY TYPE, REQUIRING BONE GRAFTS (INCLUDES OBTAINING AUTOGRAFTS); WITH LEFORT I
HMSAAA	Q3 2025	Outpatient Hosp	21159	CPT	RECONSTRUCTION MIDFACE, LEFORT III (EXTRA AND INTRACRANIAL) WITH FOREHEAD ADVANCEMENT (EG, MONO BLOC), REQUIRING BONE GRAFTS (INCLUDES OBTAINING AU
HMSAAA	Q3 2025	Outpatient Hosp	21160	CPT	RECONSTRUCTION MIDFACE, LEFORT III (EXTRA AND INTRACRANIAL) WITH FOREHEAD ADVANCEMENT (EG, MONO BLOC), REQUIRING BONE GRAFTS (INCLUDES OBTAINING AU
HMSAAA	Q3 2025	Outpatient Hosp	21172	CPT	RECONSTRUCTION SUPERIOR-LATERAL ORBITAL RIM AND LOWER FOREHEAD, ADVANCEMENT OR ALTERATION, WITH OR WITHOUT GRAFTS (INCLUDES OBTAINING AUTOGRAFT
HMSAAA	Q3 2025	Outpatient Hosp	21175	CPT	RECONSTRUCTION, BIFRONTAL, SUPERIOR-LATERAL ORBITAL RIMS AND LOWER FOREHEAD, ADVANCEMENT OR ALTERATION (EG, PLAGIOCEPHALY, TRIGONOCEPHALY, BRACH
HMSAAA	Q3 2025	Outpatient Hosp	21179	CPT	RECONSTRUCTION, ENTIRE OR MAJORITY OF FOREHEAD AND/OR SUPRAORBITAL RIMS; WITH GRAFTS (ALLOGRAFT OR PROSTHETIC MATERIAL)
HMSAAA	Q3 2025	Outpatient Hosp	21180	CPT	RECONSTRUCTION, ENTIRE OR MAJORITY OF FOREHEAD AND/OR SUPRAORBITAL RIMS; WITH AUTOGRAFT (INCLUDES OBTAINING GRAFTS)
HMSAAA	Q3 2025	Outpatient Hosp	21188	CPT	RECONSTRUCTION MIDFACE, OSTEOTOMIES (OTHER THAN LEFORT TYPE) AND BONE GRAFTS (INCLUDES OBTAINING AUTOGRAFTS)
HMSAAA	Q3 2025	Outpatient Hosp	21193	CPT	RECONSTRUCTION OF MANDIBULAR RAMI, HORIZONTAL, VERTICAL, C, OR L OSTEOTOMY; WITHOUT BONE GRAFT
HMSAAA	Q3 2025	Outpatient Hosp	21194	CPT	RECONSTRUCTION OF MANDIBULAR RAMI, HORIZONTAL, VERTICAL, C, OR L OSTEOTOMY; WITH BONE GRAFT (INCLUDES OBTAINING GRAFT)
HMSAAA	Q3 2025	Outpatient Hosp	21195	CPT	RECONSTRUCTION OF MANDIBULAR RAMI AND/OR BODY, SAGITTAL SPLIT; WITHOUT INTERNAL RIGID FIXATION
HMSAAA	Q3 2025	Outpatient Hosp	21196	CPT	RECONSTRUCTION OF MANDIBULAR RAMI AND/OR BODY, SAGITTAL SPLIT; WITH INTERNAL RIGID FIXATION
HMSAAA	Q3 2025	Outpatient Hosp	21198	CPT	OSTEOTOMY, MANDIBLE, SEGMENTAL;
HMSAAA	Q3 2025	Outpatient Hosp	21199	CPT	OSTEOTOMY, MANDIBLE, SEGMENTAL; WITH GENIOGLOSSUS ADVANCEMENT
HMSAAA	Q3 2025	Outpatient Hosp	21206	CPT	OSTEOTOMY, MAXILLA, SEGMENTAL (EG, WASSMUND OR SCHUCHARD)
HMSAAA	Q3 2025	Outpatient Hosp	21208	CPT	OSTEOPLASTY, FACIAL BONES; AUGMENTATION (AUTOGRAFT, ALLOGRAFT, OR PROSTHETIC IMPLANT)
HMSAAA	Q3 2025	Outpatient Hosp	21209	CPT	OSTEOPLASTY, FACIAL BONES; REDUCTION
HMSAAA	Q3 2025	Outpatient Hosp	21210	CPT	GRAFT, BONE; NASAL, MAXILLARY OR MALAR AREAS (INCLUDES OBTAINING GRAFT)
HMSAAA	Q3 2025	Outpatient Hosp	21215	CPT	GRAFT, BONE; MANDIBLE (INCLUDES OBTAINING GRAFT)
HMSAAA	Q3 2025	Outpatient Hosp	21230	CPT	GRAFT; RIB CARTILAGE, AUTOGENOUS, TO FACE, CHIN, NOSE OR EAR (INCLUDES OBTAINING GRAFT)
HMSAAA	Q3 2025	Outpatient Hosp	21235	CPT	GRAFT; EAR CARTILAGE, AUTOGENOUS, TO NOSE OR EAR (INCLUDES OBTAINING GRAFT)
HMSAAA	Q3 2025	Outpatient Hosp	21244	CPT	RECONSTRUCTION OF MANDIBLE, EXTRAORAL, WITH TRANSOSTEAL BONE PLATE (EG, MANDIBULAR STAPLE BONE PLATE)
HMSAAA	Q3 2025	Outpatient Hosp	21245	CPT	RECONSTRUCTION OF MANDIBLE OR MAXILLA, SUBPERIOSTEAL IMPLANT; PARTIAL
HMSAAA	Q3 2025	Outpatient Hosp	21246	CPT	RECONSTRUCTION OF MANDIBLE OR MAXILLA, SUBPERIOSTEAL IMPLANT; COMPLETE
HMSAAA	Q3 2025	Outpatient Hosp	21247	CPT	RECONSTRUCTION OF MANDIBULAR CONDYLE WITH BONE AND CARTILAGE AUTOGRAFTS (INCLUDES OBTAINING GRAFTS) (EG, FOR HEMIFACIAL MICROSOMIA)
HMSAAA	Q3 2025	Outpatient Hosp	21248	CPT	RECONSTRUCTION OF MANDIBLE OR MAXILLA, ENDOSTEAL IMPLANT (EG, BLADE, CYLINDER); PARTIAL
HMSAAA	Q3 2025	Outpatient Hosp	21249	CPT	RECONSTRUCTION OF MANDIBLE OR MAXILLA, ENDOSTEAL IMPLANT (EG, BLADE, CYLINDER); COMPLETE
HMSAAA	Q3 2025	Outpatient Hosp	21255	CPT	RECONSTRUCTION OF ZYGOMATIC ARCH AND GLENOID FOSSA WITH BONE AND CARTILAGE (INCLUDES OBTAINING AUTOGRAFTS)
HMSAAA	Q3 2025	Outpatient Hosp	21270	CPT	MALAR AUGMENTATION, PROSTHETIC MATERIAL

HMSAAA	Q3 2025	Outpatient Hosp	21275	CPT	SECONDARY REVISION OF ORBITOCRANIOFACIAL RECONSTRUCTION
HMSAAA	Q3 2025	Outpatient Hosp	21280	CPT	MEDIAL CANTHOPEXY (SEPARATE PROCEDURE)
HMSAAA	Q3 2025	Outpatient Hosp	21282	CPT	LATERAL CANTHOPEXY
HMSAAA	Q3 2025	Outpatient Hosp	21740	CPT	RECONSTRUCTIVE REPAIR OF PECTUS EXCAVATUM OR CARINATUM; OPEN
HMSAAA	Q3 2025	Outpatient Hosp	30150	CPT	RHINECTOMY; PARTIAL
HMSAAA	Q3 2025	Outpatient Hosp	30160	CPT	RHINECTOMY; TOTAL
HMSAAA	Q3 2025	Outpatient Hosp	30400	CPT	RHINOPLASTY, PRIMARY; LATERAL AND ALAR CARTILAGES AND/OR ELEVATION OF NASAL TIP
HMSAAA	Q3 2025	Outpatient Hosp	30410	CPT	RHINOPLASTY, PRIMARY; COMPLETE, EXTERNAL PARTS INCLUDING BONY PYRAMID, LATERAL AND ALAR CARTILAGES, AND/OR ELEVATION OF NASAL TIP
HMSAAA	Q3 2025	Outpatient Hosp	30420	CPT	RHINOPLASTY, PRIMARY; INCLUDING MAJOR SEPTAL REPAIR
HMSAAA	Q3 2025	Outpatient Hosp	30430	CPT	RHINOPLASTY, SECONDARY; MINOR REVISION (SMALL AMOUNT OF NASAL TIP WORK)
HMSAAA	Q3 2025	Outpatient Hosp	30435	CPT	RHINOPLASTY, SECONDARY; INTERMEDIATE REVISION (BONY WORK WITH OSTEOTOMIES)
HMSAAA	Q3 2025	Outpatient Hosp	30450	CPT	RHINOPLASTY, SECONDARY; MAJOR REVISION (NASAL TIP WORK AND OSTEOTOMIES)
HMSAAA	Q3 2025	Outpatient Hosp	30620	CPT	SEPTAL OR OTHER INTRANASAL DERMATOPLASTY (DOES NOT INCLUDE OBTAINING GRAFT)
HMSAAA	Q3 2025	Outpatient Hosp	31643	CPT	BRONCHOSCOPY, RIGID OR FLEXIBLE, INCLUDING FLUOROSCOPIC GUIDANCE, WHEN PERFORMED; WITH PLACEMENT OF CATHETER(S) FOR INTRACAVITARY RADIOELEMENT A
HMSAAA	Q3 2025	Outpatient Hosp	37788	CPT	PENILE REVASCULARIZATION, ARTERY, WITH OR WITHOUT VEIN GRAFT
HMSAAA	Q3 2025	Outpatient Hosp	37790	CPT	PENILE VENOUS OCCLUSIVE PROCEDURE
HMSAAA	Q3 2025	Outpatient Hosp	40820	CPT	DESTRUCTION OF LESION OR SCAR OF VESTIBULE OF MOUTH BY PHYSICAL METHODS (EG, LASER, THERMAL, CRYO, CHEMICAL)
HMSAAA	Q3 2025	Outpatient Hosp	41019	CPT	PLACEMENT OF NEEDLES, CATHETERS, OR OTHER DEVICE(S) INTO THE HEAD AND/OR NECK REGION (PERCUTANEOUS, TRANSORAL, OR TRANSNASAL) FOR SUBSEQUENT INTER
HMSAAA	Q3 2025	Outpatient Hosp	41510	CPT	SUTURE OF TONGUE TO LIP FOR MICROGNATHIA (DOUGLAS TYPE PROCEDURE)
HMSAAA	Q3 2025	Outpatient Hosp	53420	CPT	URETHROPLASTY, 2-STAGE RECONSTRUCTION OR REPAIR OF PROSTATIC OR MEMBRANOUS URETHRA; FIRST STAGE
HMSAAA	Q3 2025	Outpatient Hosp	53425	CPT	URETHROPLASTY, 2-STAGE RECONSTRUCTION OR REPAIR OF PROSTATIC OR MEMBRANOUS URETHRA; SECOND STAGE
HMSAAA	Q3 2025	Outpatient Hosp	53430	CPT	URETHROPLASTY, RECONSTRUCTION OF FEMALE URETHRA
HMSAAA	Q3 2025	Outpatient Hosp	54125	CPT	AMPUTATION OF PENIS; COMPLETE
HMSAAA	Q3 2025	Outpatient Hosp	54400	CPT	INSERTION OF PENILE PROSTHESIS; NON-INFLATABLE (SEMI-RIGID)
HMSAAA	Q3 2025	Outpatient Hosp	54401	CPT	INSERTION OF PENILE PROSTHESIS; INFLATABLE (SELF-CONTAINED)
HMSAAA	Q3 2025	Outpatient Hosp	54405	CPT	INSERTION OF MULTI-COMPONENT, INFLATABLE PENILE PROSTHESIS, INCLUDING PLACEMENT OF PUMP, CYLINDERS, AND RESERVOIR
HMSAAA	Q3 2025	Outpatient Hosp	54406	CPT	REMOVAL OF ALL COMPONENTS OF A MULTI-COMPONENT, INFLATABLE PENILE PROSTHESIS WITHOUT REPLACEMENT OF PROSTHESIS
HMSAAA	Q3 2025	Outpatient Hosp	54408	CPT	REPAIR OF COMPONENT(S) OF A MULTI-COMPONENT, INFLATABLE PENILE PROSTHESIS
HMSAAA	Q3 2025	Outpatient Hosp	54410	CPT	REMOVAL AND REPLACEMENT OF ALL COMPONENT(S) OF A MULTI-COMPONENT, INFLATABLE PENILE PROSTHESIS AT THE SAME OPERATIVE SESSION
HMSAAA	Q3 2025	Outpatient Hosp	54411	CPT	REMOVAL AND REPLACEMENT OF ALL COMPONENTS OF A MULTI-COMPONENT INFLATABLE PENILE PROSTHESIS THROUGH AN INFECTED FIELD AT THE SAME OPERATIVE SESSI
HMSAAA	Q3 2025	Outpatient Hosp	54415	CPT	REMOVAL OF NON-INFLATABLE (SEMI-RIGID) OR INFLATABLE (SELF-CONTAINED) PENILE PROSTHESIS, WITHOUT REPLACEMENT OF PROSTHESIS
HMSAAA	Q3 2025	Outpatient Hosp	54416	CPT	REMOVAL AND REPLACEMENT OF NON-INFLATABLE (SEMI-RIGID) OR INFLATABLE (SELF-CONTAINED) PENILE PROSTHESIS AT THE SAME OPERATIVE SESSION
HMSAAA	Q3 2025	Outpatient Hosp	54417	CPT	REMOVAL AND REPLACEMENT OF NON-INFLATABLE (SEMI-RIGID) OR INFLATABLE (SELF-CONTAINED) PENILE PROSTHESIS THROUGH AN INFECTED FIELD AT THE SAME OPERAT
HMSAAA	Q3 2025	Outpatient Hosp	54520	CPT	ORCHIECTOMY, SIMPLE (INCLUDING SUBCAPSULAR), WITH OR WITHOUT TESTICULAR PROSTHESIS, SCROTAL OR INGUINAL APPROACH
HMSAAA	Q3 2025	Outpatient Hosp	54690	CPT	LAPAROSCOPY, SURGICAL; ORCHIECTOMY
HMSAAA	Q3 2025	Outpatient Hosp	55175	CPT	SCROTOPLASTY; SIMPLE
HMSAAA	Q3 2025	Outpatient Hosp	55180	CPT	SCROTOPLASTY; COMPLICATED
HMSAAA	Q3 2025	Outpatient Hosp	55866	CPT	LAPAROSCOPY, SURGICAL PROSTATECTOMY, RETROPUBIC RADICAL, INCLUDING NERVE SPARING, INCLUDES ROBOTIC ASSISTANCE, WHEN PERFORMED
HMSAAA	Q3 2025	Outpatient Hosp	55899	CPT	UNLISTED PROCEDURE, MALE GENITAL SYSTEM
HMSAAA	Q3 2025	Outpatient Hosp	55980	CPT	INTERSEX SURGERY; FEMALE TO MALE
HMSAAA	Q3 2025	Outpatient Hosp	56625	CPT	VULVECTOMY SIMPLE; COMPLETE
HMSAAA	Q3 2025	Outpatient Hosp	56800	CPT	PLASTIC REPAIR OF INTROITUS
HMSAAA	Q3 2025	Outpatient Hosp	56805	CPT	CLITOROPLASTY FOR INTERSEX STATE
HMSAAA	Q3 2025	Outpatient Hosp	56810	CPT	PERINEOPLASTY, REPAIR OF PERINEUM, NONOBSTETRICAL (SEPARATE PROCEDURE)
HMSAAA	Q3 2025	Outpatient Hosp	57106	CPT	VAGINECTOMY, PARTIAL REMOVAL OF VAGINAL WALL;
HMSAAA	Q3 2025	Outpatient Hosp	57107	CPT	VAGINECTOMY, PARTIAL REMOVAL OF VAGINAL WALL; WITH REMOVAL OF PARAVAGINAL TISSUE (RADICAL VAGINECTOMY)
HMSAAA	Q3 2025	Outpatient Hosp	57110	CPT	VAGINECTOMY, COMPLETE REMOVAL OF VAGINAL WALL;
HMSAAA	Q3 2025	Outpatient Hosp	57111	CPT	VAGINECTOMY, COMPLETE REMOVAL OF VAGINAL WALL; WITH REMOVAL OF PARAVAGINAL TISSUE (RADICAL VAGINECTOMY)
HMSAAA	Q3 2025	Outpatient Hosp	57155	CPT	INSERTION OF UTERINE TANDEM AND/OR VAGINAL OVOIDS FOR CLINICAL BRACHYTHERAPY
HMSAAA	Q3 2025	Outpatient Hosp	57156	CPT	INSERTION OF A VAGINAL RADIATION AFTERLOADING APPARATUS FOR CLINICAL BRACHYTHERAPY
HMSAAA	Q3 2025	Outpatient Hosp	57291	CPT	CONSTRUCTION OF ARTIFICIAL VAGINA; WITHOUT GRAFT
HMSAAA	Q3 2025	Outpatient Hosp	57292	CPT	CONSTRUCTION OF ARTIFICIAL VAGINA; WITH GRAFT
HMSAAA	Q3 2025	Outpatient Hosp	57295	CPT	REVISION (INCLUDING REMOVAL) OF PROSTHETIC VAGINAL GRAFT; VAGINAL APPROACH
HMSAAA	Q3 2025	Outpatient Hosp	57296	CPT	REVISION (INCLUDING REMOVAL) OF PROSTHETIC VAGINAL GRAFT; OPEN ABDOMINAL APPROACH
HMSAAA	Q3 2025	Outpatient Hosp	57335	CPT	VAGINOPLASTY FOR INTERSEX STATE
HMSAAA	Q3 2025	Outpatient Hosp	57426	CPT	REVISION (INCLUDING REMOVAL) OF PROSTHETIC VAGINAL GRAFT, LAPAROSCOPIC APPROACH
HMSAAA	Q3 2025	Outpatient Hosp	58150	CPT	TOTAL ABDOMINAL HYSTERECTOMY (CORPUS AND CERVIX), WITH OR WITHOUT REMOVAL OF TUBE(S), WITH OR WITHOUT REMOVAL OF OVARY(S);
HMSAAA	Q3 2025	Outpatient Hosp	58180	CPT	SUPRACERVICAL ABDOMINAL HYSTERECTOMY (SUBTOTAL HYSTERECTOMY), WITH OR WITHOUT REMOVAL OF TUBE(S), WITH OR WITHOUT REMOVAL OF OVARY(S)
HMSAAA	Q3 2025	Outpatient Hosp	58260	CPT	VAGINAL HYSTERECTOMY, FOR UTERUS 250 G OR LESS;
HMSAAA	Q3 2025	Outpatient Hosp	58262	CPT	VAGINAL HYSTERECTOMY, FOR UTERUS 250 G OR LESS; WITH REMOVAL OF TUBE(S), AND/OR OVARY(S)
HMSAAA	Q3 2025	Outpatient Hosp	58275	CPT	VAGINAL HYSTERECTOMY, WITH TOTAL OR PARTIAL VAGINECTOMY;
HMSAAA	Q3 2025	Outpatient Hosp	58280	CPT	VAGINAL HYSTERECTOMY, WITH TOTAL OR PARTIAL VAGINECTOMY; WITH REPAIR OF ENTEROCELE
HMSAAA	Q3 2025	Outpatient Hosp	58285	CPT	VAGINAL HYSTERECTOMY, RADICAL (SCHAUTA TYPE OPERATION)
HMSAAA	Q3 2025	Outpatient Hosp	58290	CPT	VAGINAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 G;
HMSAAA	Q3 2025	Outpatient Hosp	58291	CPT	VAGINAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 G; WITH REMOVAL OF TUBE(S) AND/OR OVARY(S)
HMSAAA	Q3 2025	Outpatient Hosp	58346	CPT	INSERTION OF HEYMAN CAPSULES FOR CLINICAL BRACHYTHERAPY
HMSAAA	Q3 2025	Outpatient Hosp	58541	CPT	LAPAROSCOPY, SURGICAL, SUPRACERVICAL HYSTERECTOMY, FOR UTERUS 250 G OR LESS;
HMSAAA	Q3 2025	Outpatient Hosp	58542	CPT	LAPAROSCOPY, SURGICAL, SUPRACERVICAL HYSTERECTOMY, FOR UTERUS 250 G OR LESS; WITH REMOVAL OF TUBE(S) AND/OR OVARY(S)
HMSAAA	Q3 2025	Outpatient Hosp	58543	CPT	LAPAROSCOPY, SURGICAL, SUPRACERVICAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 G;
HMSAAA	Q3 2025	Outpatient Hosp	58544	CPT	LAPAROSCOPY, SURGICAL, SUPRACERVICAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 G; WITH REMOVAL OF TUBE(S) AND/OR OVARY(S)
HMSAAA	Q3 2025	Outpatient Hosp	58550	CPT	LAPAROSCOPY, SURGICAL, WITH VAGINAL HYSTERECTOMY, FOR UTERUS 250 G OR LESS;
HMSAAA	Q3 2025	Outpatient Hosp	58552	CPT	LAPAROSCOPY, SURGICAL, WITH VAGINAL HYSTERECTOMY, FOR UTERUS 250 G OR LESS; WITH REMOVAL OF TUBE(S) AND/OR OVARY(S)
HMSAAA	Q3 2025	Outpatient Hosp	58553	CPT	LAPAROSCOPY, SURGICAL, WITH VAGINAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 G;
HMSAAA	Q3 2025	Outpatient Hosp	58554	CPT	LAPAROSCOPY, SURGICAL, WITH VAGINAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 G; WITH REMOVAL OF TUBE(S) AND/OR OVARY(S)
HMSAAA	Q3 2025	Outpatient Hosp	58570	CPT	LAPAROSCOPY, SURGICAL, WITH TOTAL HYSTERECTOMY, FOR UTERUS 250 G OR LESS;
HMSAAA	Q3 2025	Outpatient Hosp	58571	CPT	LAPAROSCOPY, SURGICAL, WITH TOTAL HYSTERECTOMY, FOR UTERUS 250 G OR LESS; WITH REMOVAL OF TUBE(S) AND/OR OVARY(S)
HMSAAA	Q3 2025	Outpatient Hosp	58572	CPT	LAPAROSCOPY, SURGICAL, WITH TOTAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 G;
HMSAAA	Q3 2025	Outpatient Hosp	58573	CPT	LAPAROSCOPY, SURGICAL, WITH TOTAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 G; WITH REMOVAL OF TUBE(S) AND/OR OVARY(S)
HMSAAA	Q3 2025	Outpatient Hosp	58661	CPT	LAPAROSCOPY, SURGICAL; WITH REMOVAL OF ADNEXAL STRUCTURES (PARTIAL OR TOTAL OOPHORECTOMY AND/OR SALPINGECTOMY)
HMSAAA	Q3 2025	Outpatient Hosp	58720	CPT	SALPINGO-OOPHORECTOMY, COMPLETE OR PARTIAL, UNILATERAL OR BILATERAL (SEPARATE PROCEDURE)
HMSAAA	Q3 2025	Outpatient Hosp	58940	CPT	OOPHORECTOMY, PARTIAL OR TOTAL, UNILATERAL OR BILATERAL;
HMSAAA	Q3 2025	Outpatient Hosp	61885	CPT	INSERTION OR REPLACEMENT OF CRANIAL NEUROSTIMULATOR PULSE GENERATOR OR RECEIVER, DIRECT OR INDUCTIVE COUPLING; WITH CONNECTION TO A SINGLE ELECTR
HMSAAA	Q3 2025	Outpatient Hosp	61886	CPT	INSERTION OR REPLACEMENT OF CRANIAL NEUROSTIMULATOR PULSE GENERATOR OR RECEIVER, DIRECT OR INDUCTIVE COUPLING; WITH CONNECTION TO 2 OR MORE ELECT
HMSAAA	Q3 2025	Outpatient Hosp	63650	CPT	PERCUTANEOUS IMPLANTATION OF NEUROSTIMULATOR ELECTRODE ARRAY, EPIDURAL
HMSAAA	Q3 2025	Outpatient Hosp	63655	CPT	LAMINECTOMY FOR IMPLANTATION OF NEUROSTIMULATOR ELECTRODES, PLATE/PADDLE, EPIDURAL
HMSAAA	Q3 2025	Outpatient Hosp	63685	CPT	INSERTION OR REPLACEMENT OF SPINAL NEUROSTIMULATOR PULSE GENERATOR OR RECEIVER, REQUIRING POCKET CREATION AND CONNECTION BETWEEN ELECTRODE ARR
HMSAAA	Q3 2025	Outpatient Hosp	64553	CPT	PERCUTANEOUS IMPLANTATION OF NEUROSTIMULATOR ELECTRODE ARRAY; CRANIAL NERVE
HMSAAA	Q3 2025	Outpatient Hosp	64568	CPT	OPEN IMPLANTATION OF CRANIAL NERVE (EG, VAGUS NERVE) NEUROSTIMULATOR ELECTRODE ARRAY AND PULSE GENERATOR
HMSAAA	Q3 2025	Outpatient Hosp	64569	CPT	REVISION OR REPLACEMENT OF CRANIAL NERVE (EG, VAGUS NERVE) NEUROSTIMULATOR ELECTRODE ARRAY, INCLUDING CONNECTION TO EXISTING PULSE GENERATOR
HMSAAA	Q3 2025	Outpatient Hosp	64570	CPT	REMOVAL OF CRANIAL NERVE (EG, VAGUS NERVE) NEUROSTIMULATOR ELECTRODE ARRAY AND PULSE GENERATOR
HMSAAA	Q3 2025	Outpatient Hosp	66030	CPT	INJECTION, ANTERIOR CHAMBER OF EYE (SEPARATE PROCEDURE); MEDICATION
HMSAAA	Q3 2025	Outpatient Hosp	66174	CPT	TRANSLUMINAL DILATION OF AQUEOUS OUTFLOW CANAL (EG, CANALOPLASTY); WITHOUT RETENTION OF DEVICE OR STENT
HMSAAA	Q3 2025	Outpatient Hosp	66175	CPT	TRANSLUMINAL DILATION OF AQUEOUS OUTFLOW CANAL (EG, CANALOPLASTY); WITH RETENTION OF DEVICE OR STENT

HMSAAA	Q3 2025	Outpatient Hosp	66989	CPT	EXTRACAPSULAR CATARACT REMOVAL WITH INSERTION OF INTRAOCULAR LENS PROSTHESIS (1-STAGE PROCEDURE), MANUAL OR MECHANICAL TECHNIQUE (EG, IRRIGATION A
HMSAAA	Q3 2025	Outpatient Hosp	66991	CPT	EXTRACAPSULAR CATARACT REMOVAL WITH INSERTION OF INTRAOCULAR LENS PROSTHESIS (1 STAGE PROCEDURE), MANUAL OR MECHANICAL TECHNIQUE (EG, IRRIGATION A
HMSAAA	Q3 2025	Outpatient Hosp	67218	CPT	DESTRUCTION OF LOCALIZED LESION OF RETINA (EG, MACULAR EDEMA, TUMORS), 1 OR MORE SESSIONS; RADIATION BY IMPLANTATION OF SOURCE (INCLUDES REMOVAL OF S
HMSAAA	Q3 2025	Outpatient Hosp	67299	CPT	UNLISTED PROCEDURE, POSTERIOR SEGMENT
HMSAAA	Q3 2025	Outpatient Hosp	67900	CPT	REPAIR OF BROW PTOSIS (SUPRACILIARY, MID-FOREHEAD OR CORONAL APPROACH)
HMSAAA	Q3 2025	Outpatient Hosp	67901	CPT	REPAIR OF BLEPHAROPTOSIS; FRONTALIS MUSCLE TECHNIQUE WITH SUTURE OR OTHER MATERIAL (EG, BANKED FASCIA)
HMSAAA	Q3 2025	Outpatient Hosp	67902	CPT	REPAIR OF BLEPHAROPTOSIS; FRONTALIS MUSCLE TECHNIQUE WITH AUTOLOGOUS FASCIAL SLING (INCLUDES OBTAINING FASCIA)
HMSAAA	Q3 2025	Outpatient Hosp	67903	CPT	REPAIR OF BLEPHAROPTOSIS; (TARSO) LEVATOR RESECTION OR ADVANCEMENT, INTERNAL APPROACH
HMSAAA	Q3 2025	Outpatient Hosp	67904	CPT	REPAIR OF BLEPHAROPTOSIS; (TARSO) LEVATOR RESECTION OR ADVANCEMENT, EXTERNAL APPROACH
HMSAAA	Q3 2025	Outpatient Hosp	67906	CPT	REPAIR OF BLEPHAROPTOSIS; SUPERIOR RECTUS TECHNIQUE WITH FASCIAL SLING (INCLUDES OBTAINING FASCIA)
HMSAAA	Q3 2025	Outpatient Hosp	67908	CPT	REPAIR OF BLEPHAROPTOSIS; CONJUNCTIVO-TARSO-MULLER'S MUSCLE-LEVATOR RESECTION (EG, FASANELLA-SERVAT TYPE)
HMSAAA	Q3 2025	Outpatient Hosp	67909	CPT	REDUCTION OF OVERCORRECTION OF PTOSIS
HMSAAA	Q3 2025	Outpatient Hosp	67911	CPT	CORRECTION OF LID RETRACTION
HMSAAA	Q3 2025	Outpatient Hosp	69300	CPT	OTOPLASTY, PROTRUDING EAR, WITH OR WITHOUT SIZE REDUCTION
HMSAAA	Q3 2025	Outpatient Hosp	77261	CPT	THERAPEUTIC RADIOLOGY TREATMENT PLANNING; SIMPLE
HMSAAA	Q3 2025	Outpatient Hosp	77262	CPT	THERAPEUTIC RADIOLOGY TREATMENT PLANNING; INTERMEDIATE
HMSAAA	Q3 2025	Outpatient Hosp	77263	CPT	THERAPEUTIC RADIOLOGY TREATMENT PLANNING; COMPLEX
HMSAAA	Q3 2025	Outpatient Hosp	77280	CPT	THERAPEUTIC RADIOLOGY SIMULATION-AIDED FIELD SETTING; SIMPLE
HMSAAA	Q3 2025	Outpatient Hosp	77285	CPT	THERAPEUTIC RADIOLOGY SIMULATION-AIDED FIELD SETTING; INTERMEDIATE
HMSAAA	Q3 2025	Outpatient Hosp	77290	CPT	THERAPEUTIC RADIOLOGY SIMULATION-AIDED FIELD SETTING; COMPLEX
HMSAAA	Q3 2025	Outpatient Hosp	77299	CPT	UNLISTED PROCEDURE, THERAPEUTIC RADIOLOGY CLINICAL TREATMENT PLANNING
HMSAAA	Q3 2025	Outpatient Hosp	77316	CPT	BRACHYTHERAPY ISODOSE PLAN; SIMPLE (CALCULATION[S] MADE FROM 1 TO 4 SOURCES, OR REMOTE AFTERLOADING BRACHYTHERAPY, 1 CHANNEL), INCLUDES BASIC DOSI
HMSAAA	Q3 2025	Outpatient Hosp	77317	CPT	BRACHYTHERAPY ISODOSE PLAN; INTERMEDIATE (CALCULATION[S] MADE FROM 5 TO 10 SOURCES, OR REMOTE AFTERLOADING BRACHYTHERAPY, 2-12 CHANNELS), INCLUDES
HMSAAA	Q3 2025	Outpatient Hosp	77318	CPT	BRACHYTHERAPY ISODOSE PLAN; COMPLEX (CALCULATION[S] MADE FROM OVER 10 SOURCES, OR REMOTE AFTERLOADING BRACHYTHERAPY, OVER 12 CHANNELS), INCLUDES
HMSAAA	Q3 2025	Outpatient Hosp	77338	CPT	MULTI-LEAF COLLIMATOR (MLC) DEVICE(S) FOR INTENSITY MODULATED RADIATION THERAPY (IMRT), DESIGN AND CONSTRUCTION PER IMRT PLAN
HMSAAA	Q3 2025	Outpatient Hosp	77385	CPT	INTENSITY MODULATED RADIATION TREATMENT DELIVERY (IMRT), INCLUDES GUIDANCE AND TRACKING, WHEN PERFORMED; SIMPLE
HMSAAA	Q3 2025	Outpatient Hosp	77386	CPT	INTENSITY MODULATED RADIATION TREATMENT DELIVERY (IMRT), INCLUDES GUIDANCE AND TRACKING, WHEN PERFORMED; COMPLEX
HMSAAA	Q3 2025	Outpatient Hosp	77387	CPT	GUIDANCE FOR LOCALIZATION OF TARGET VOLUME FOR DELIVERY OF RADIATION TREATMENT, INCLUDES INTRAFRACTION TRACKING, WHEN PERFORMED
HMSAAA	Q3 2025	Outpatient Hosp	77399	CPT	UNLISTED PROCEDURE, MEDICAL RADIATION PHYSICS, DOSIMETRY AND TREATMENT DEVICES, AND SPECIAL SERVICES
HMSAAA	Q3 2025	Outpatient Hosp	77499	CPT	UNLISTED PROCEDURE, THERAPEUTIC RADIOLOGY TREATMENT MANAGEMENT
HMSAAA	Q3 2025	Outpatient Hosp	77520	CPT	PROTON TREATMENT DELIVERY; SIMPLE, WITHOUT COMPENSATION
HMSAAA	Q3 2025	Outpatient Hosp	77522	CPT	PROTON TREATMENT DELIVERY; SIMPLE, WITH COMPENSATION
HMSAAA	Q3 2025	Outpatient Hosp	77523	CPT	PROTON TREATMENT DELIVERY; INTERMEDIATE
HMSAAA	Q3 2025	Outpatient Hosp	77525	CPT	PROTON TREATMENT DELIVERY; COMPLEX
HMSAAA	Q3 2025	Outpatient Hosp	77750	CPT	INFUSION OR INSTILLATION OF RADIOELEMENT SOLUTION (INCLUDES 3-MONTH FOLLOW-UP CARE)
HMSAAA	Q3 2025	Outpatient Hosp	77761	CPT	INTRACAVITARY RADIATION SOURCE APPLICATION; SIMPLE
HMSAAA	Q3 2025	Outpatient Hosp	77762	CPT	INTRACAVITARY RADIATION SOURCE APPLICATION; INTERMEDIATE
HMSAAA	Q3 2025	Outpatient Hosp	77763	CPT	INTRACAVITARY RADIATION SOURCE APPLICATION; COMPLEX
HMSAAA	Q3 2025	Outpatient Hosp	77767	CPT	REMOTE AFTERLOADING HIGH DOSE RATE RADIONUCLIDE SKIN SURFACE BRACHYTHERAPY, INCLUDES BASIC DOSIMETRY, WHEN PERFORMED; LESION DIAMETER UP TO 2.0 CM
HMSAAA	Q3 2025	Outpatient Hosp	77768	CPT	REMOTE AFTERLOADING HIGH DOSE RATE RADIONUCLIDE SKIN SURFACE BRACHYTHERAPY, INCLUDES BASIC DOSIMETRY, WHEN PERFORMED; LESION DIAMETER OVER 2.0 CM
HMSAAA	Q3 2025	Outpatient Hosp	77770	CPT	REMOTE AFTERLOADING HIGH DOSE RATE RADIONUCLIDE INTERSTITIAL OR INTRACAVITARY BRACHYTHERAPY, INCLUDES BASIC DOSIMETRY, WHEN PERFORMED; 1 CHANNEL
HMSAAA	Q3 2025	Outpatient Hosp	77771	CPT	REMOTE AFTERLOADING HIGH DOSE RATE RADIONUCLIDE INTERSTITIAL OR INTRACAVITARY BRACHYTHERAPY, INCLUDES BASIC DOSIMETRY, WHEN PERFORMED; 2-12 CHANN
HMSAAA	Q3 2025	Outpatient Hosp	77772	CPT	REMOTE AFTERLOADING HIGH DOSE RATE RADIONUCLIDE INTERSTITIAL OR INTRACAVITARY BRACHYTHERAPY, INCLUDES BASIC DOSIMETRY, WHEN PERFORMED; OVER 12 CHA
HMSAAA	Q3 2025	Outpatient Hosp	77778	CPT	INTERSTITIAL RADIATION SOURCE APPLICATION, COMPLEX, INCLUDES SUPERVISION, HANDLING, LOADING OF RADIATION SOURCE, WHEN PERFORMED
HMSAAA	Q3 2025	Outpatient Hosp	77789	CPT	SURFACE APPLICATION OF LOW DOSE RATE RADIONUCLIDE SOURCE
HMSAAA	Q3 2025	Outpatient Hosp	77790	CPT	SUPERVISION, HANDLING, LOADING OF RADIATION SOURCE
HMSAAA	Q3 2025	Outpatient Hosp	95976	CPT	ELECTRONIC ANALYSIS OF IMPLANTED NEUROSTIMULATOR PULSE GENERATOR/TRANSMITTER (EG, CONTACT GROUP[S], INTERLEAVING, AMPLITUDE, PULSE WIDTH, FREQUENC
HMSAAA	Q3 2025	Outpatient Hosp	95977	CPT	ELECTRONIC ANALYSIS OF IMPLANTED NEUROSTIMULATOR PULSE GENERATOR/TRANSMITTER (EG, CONTACT GROUP[S], INTERLEAVING, AMPLITUDE, PULSE WIDTH, FREQUENC
HMSAAA	Q3 2025	Outpatient Hosp	96405	CPT	CHEMOTHERAPY ADMINISTRATION; INTRALESIONAL, UP TO AND INCLUDING 7 LESIONS
HMSAAA	Q3 2025	Outpatient Hosp	96406	CPT	CHEMOTHERAPY ADMINISTRATION; INTRALESIONAL, MORE THAN 7 LESIONS
HMSAAA	Q3 2025	Outpatient Hosp	96921	CPT	EXCIMER LASER TREATMENT FOR PSORIASIS; 250 SQ CM TO 500 SQ CM
HMSAAA	Q3 2025	Outpatient Hosp	96922	CPT	EXCIMER LASER TREATMENT FOR PSORIASIS; OVER 500 SQ CM
HMSAAA	Q3 2025	Outpatient Hosp	A9513	HCPCS	LUTETIUM LU 177, DOTATATE, THERAPEUTIC, 1 MILLICURIE
HMSAAA	Q3 2025	Outpatient Hosp	C1767	HCPCS	GENERATOR, NEUROSTIMULATOR (IMPLANTABLE), NON-RECHARGEABLE
HMSAAA	Q3 2025	Outpatient Hosp	C1778	HCPCS	LEAD, NEUROSTIMULATOR (IMPLANTABLE)
HMSAAA	Q3 2025	Outpatient Hosp	C1787	HCPCS	PATIENT PROGRAMMER, NEUROSTIMULATOR
HMSAAA	Q3 2025	Outpatient Hosp	C1789	HCPCS	PROSTHESIS, BREAST (IMPLANTABLE)
HMSAAA	Q3 2025	Outpatient Hosp	C1813	HCPCS	PROSTHESIS, PENILE, INFLATABLE
HMSAAA	Q3 2025	Outpatient Hosp	C1820	HCPCS	GENERATOR, NEUROSTIMULATOR (IMPLANTABLE), WITH RECHARGEABLE BATTERY AND CHARGING SYSTEM
HMSAAA	Q3 2025	Outpatient Hosp	C1822	HCPCS	GENERATOR, NEUROSTIMULATOR (IMPLANTABLE), HIGH FREQUENCY, WITH RECHARGEABLE BATTERY AND CHARGING SYSTEM
HMSAAA	Q3 2025	Outpatient Hosp	C1883	HCPCS	ADAPTER/EXTENSION, PACING LEAD OR NEUROSTIMULATOR LEAD (IMPLANTABLE)
HMSAAA	Q3 2025	Outpatient Hosp	C1897	HCPCS	LEAD, NEUROSTIMULATOR TEST KIT (IMPLANTABLE)
HMSAAA	Q3 2025	Outpatient Hosp	C2616	HCPCS	BRACHYTHERAPY SOURCE, NON-STRANDED, YTTRIUM-90, PER SOURCE
HMSAAA	Q3 2025	Outpatient Hosp	C2622	HCPCS	PROSTHESIS, PENILE, NON-INFLATABLE
HMSAAA	Q3 2025	Outpatient Hosp	G0563	HCPCS	STEREOTACTIC BODY RADIATION THERAPY, TREATMENT DELIVERY, PER FRACTION TO 1 OR MORE LESIONS, INCLUDING IMAGE GUIDANCE AND REAL-TIME POSITRON EMISSION
HMSAAA	Q3 2025	Outpatient Hosp	G0564	HCPCS	CREATION OF SUBCUTANEOUS POCKET WITH INSERTION OF 365 DAY IMPLANTABLE INTERSTITIAL GLUCOSE SENSOR, INCLUDING SYSTEM ACTIVATION AND PATIENT TRAINING
HMSAAA	Q3 2025	Outpatient Hosp	G0565	HCPCS	REMOVAL OF IMPLANTABLE INTERSTITIAL GLUCOSE SENSOR WITH CREATION OF SUBCUTANEOUS POCKET AT DIFFERENT ANATOMIC SITE AND INSERTION OF NEW 365 DAY IMP
HMSAAA	Q3 2025	Outpatient Hosp	G6015	HCPCS	INTENSITY MODULATED TREATMENT DELIVERY, SINGLE OR MULTIPLE FIELDS/ARCS,VIA NARROW SPATIALLY AND TEMPORALLY MODULATED BEAMS, BINARY, DYNAMIC MLC, PE
HMSAAA	Q3 2025	Outpatient Hosp	G6016	HCPCS	COMPENSATOR-BASED BEAM MODULATION TREATMENT DELIVERY OF INVERSE PLANNED TREATMENT USING 3 OR MORE HIGH RESOLUTION (MILLED OR CAST) COMPENSATOR
HMSAAA	Q3 2025	Outpatient Hosp	G6017	HCPCS	INTRA-FRACTION LOCALIZATION AND TRACKING OF TARGET OR PATIENT MOTION DURING DELIVERY OF RADIATION THERAPY (EG,3D POSITIONAL TRACKING, GATING, 3D SURFA
HMSAAA	Q3 2025	Outpatient Hosp	J1411	HCPCS	INJECTION, ETRANACOGENE DEZAPARVOVEC-DRLB, PER THERAPEUTIC DOSE
HMSAAA	Q3 2025	Outpatient Hosp	J1440	HCPCS	FECAL MICROBIOTA, LIVE - JSLM, 1 ML
HMSAAA	Q3 2025	Outpatient Hosp	J2787	HCPCS	RIBOFLAVIN 5'-PHOSPHATE, OPHTHALMIC SOLUTION, UP TO 3 ML
HMSAAA	Q3 2025	Outpatient Hosp	J3398	HCPCS	INJECTION, VORETIGENE NEPARVOVEC-RZYL, 1 BILLION VECTOR GENOMES
HMSAAA	Q3 2025	Outpatient Hosp	J3399	HCPCS	INJECTION, ONASEMNOGENE ABEPARVOVEC-XIOI, PER TREATMENT, UP TO 5X10^15 VECTOR GENOMES
HMSAAA	Q3 2025	Outpatient Hosp	J3401	HCPCS	BEREMAGENE GEPERPAVEC-SVDT FOR TOPICAL ADMINISTRATION, CONTAINING NOMINAL 5 X 10^9 PFU/ML VECTOR GENOMES, PER 0.1 ML
HMSAAA	Q3 2025	Outpatient Hosp	J3590	HCPCS	UNCLASSIFIED BIOLOGICS
HMSAAA	Q3 2025	Outpatient Hosp	L8499	HCPCS	UNLISTED PROCEDURE FOR MISCELLANEOUS PROSTHETIC SERVICES
HMSAAA	Q3 2025	Outpatient Hosp	L8600	HCPCS	IMPLANTABLE BREAST PROSTHESIS, SILICONE OR EQUAL
HMSAAA	Q3 2025	Outpatient Hosp	L8679	HCPCS	IMPLANTABLE NEUROSTIMULATOR, PULSE GENERATOR, ANY TYPE
HMSAAA	Q3 2025	Outpatient Hosp	L8681	HCPCS	PATIENT PROGRAMMER (EXTERNAL) FOR USE WITH IMPLANTABLE PROGRAMMABLE NEUROSTIMULATOR PULSE GENERATOR, REPLACEMENT ONLY
HMSAAA	Q3 2025	Outpatient Hosp	L8682	HCPCS	IMPLANTABLE NEUROSTIMULATOR RADIOFREQUENCY RECEIVER
HMSAAA	Q3 2025	Outpatient Hosp	L8683	HCPCS	RADIOFREQUENCY TRANSMITTER (EXTERNAL) FOR USE WITH IMPLANTABLE NEUROSTIMULATOR RADIOFREQUENCY RECEIVER
HMSAAA	Q3 2025	Outpatient Hosp	L8684	HCPCS	RADIOFREQUENCY TRANSMITTER (EXTERNAL) FOR USE WITH IMPLANTABLE SACRAL ROOT NEUROSTIMULATOR RECEIVER FOR BOWEL AND BLADDER MANAGEMENT, REPLACEM
HMSAAA	Q3 2025	Outpatient Hosp	L8685	HCPCS	IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR, SINGLE ARRAY, RECHARGEABLE, INCLUDES EXTENSION
HMSAAA	Q3 2025	Outpatient Hosp	L8686	HCPCS	IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR, SINGLE ARRAY, NON-RECHARGEABLE, INCLUDES EXTENSION
HMSAAA	Q3 2025	Outpatient Hosp	L8687	HCPCS	IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR, DUAL ARRAY, RECHARGEABLE, INCLUDES EXTENSION
HMSAAA	Q3 2025	Outpatient Hosp	L8688	HCPCS	IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR, DUAL ARRAY, NON-RECHARGEABLE, INCLUDES EXTENSION
HMSAAA	Q3 2025	Outpatient Hosp	L8689	HCPCS	EXTERNAL RECHARGING SYSTEM FOR BATTERY (INTERNAL) FOR USE WITH IMPLANTABLE NEUROSTIMULATOR, REPLACEMENT ONLY
HMSAAA	Q3 2025	Outpatient Hosp	Q2041	HCPCS	AXICABTAGENE CILOLEUCEL, UP TO 200 MILLION AUTOLOGOUS ANTI-CD19 CAR POSITIVE VIABLE T CELLS, INCLUDING LEUKAPHERESIS AND DOSE PREPARATION PROCEDURES
HMSAAA	Q3 2025	Outpatient Hosp	Q2042	HCPCS	TISAGENLECLEUCEL, UP TO 600 MILLION CAR-POSITIVE VIABLE T CELLS, INCLUDING LEUKAPHERESIS AND DOSE PREPARATION PROCEDURES, PER THERAPEUTIC DOSE
HMSAAA	Q3 2025	Outpatient Hosp	Q3001	HCPCS	RADIOELEMENTS FOR BRACHYTHERAPY, ANY TYPE, EACH
HMSAAA	Q3 2025	Outpatient Hosp	Q4100	HCPCS	SKIN SUBSTITUTE, NOT OTHERWISE SPECIFIED

HMSAAA	Q3 2025	Outpatient Hosp	Q4102	HCPCS	OASIS WOUND MATRIX, PER SQUARE CENTIMETER
HMSAAA	Q3 2025	Outpatient Hosp	Q4105	HCPCS	INTEGRA DERMAL REGENERATION TEMPLATE (DRT) OR INTEGRA OMNIGRAFT DERMAL REGENERATION MATRIX, PER SQUARE CENTIMETER
HMSAAA	Q3 2025	Outpatient Hosp	Q4106	HCPCS	DERMAGRAFT, PER SQUARE CENTIMETER
HMSAAA	Q3 2025	Outpatient Hosp	Q4116	HCPCS	ALLODERM, PER SQUARE CENTIMETER
HMSAAA	Q3 2025	Outpatient Hosp	Q4121	HCPCS	THERASKIN, PER SQUARE CENTIMETER
HMSAAA	Q3 2025	Outpatient Hosp	Q4122	HCPCS	DERMACELL, DERMACELL AWM OR DERMACELL AWM POROUS, PER SQUARE CENTIMETER
HMSAAA	Q3 2025	Outpatient Hosp	Q4124	HCPCS	OASIS ULTRA TRI-LAYER WOUND MATRIX, PER SQUARE CENTIMETER
HMSAAA	Q3 2025	Outpatient Hosp	Q4128	HCPCS	FLEX HD, OR ALLOPATCH HD, PER SQUARE CENTIMETER
HMSAAA	Q3 2025	Outpatient Hosp	Q4130	HCPCS	STRATTICE TM, PER SQUARE CENTIMETER
HMSAAA	Q3 2025	Outpatient Hosp	Q4132	HCPCS	GRAFIX CORE AND GRAFIXPL CORE, PER SQUARE CENTIMETER
HMSAAA	Q3 2025	Outpatient Hosp	Q4145	HCPCS	EPIFIX, INJECTABLE, 1 MG
HMSAAA	Q3 2025	Outpatient Hosp	Q4151	HCPCS	AMNIOBAND OR GUARDIAN, PER SQUARE CENTIMETER
HMSAAA	Q3 2025	Outpatient Hosp	Q4154	HCPCS	BIOVANCE, PER SQUARE CENTIMETER
HMSAAA	Q3 2025	Outpatient Hosp	Q4159	HCPCS	AFFINITY, PER SQUARE CENTIMETER
HMSAAA	Q3 2025	Outpatient Hosp	Q4168	HCPCS	AMNIOBAND, 1 MG
HMSAAA	Q3 2025	Outpatient Hosp	Q4186	HCPCS	EPIFIX, PER SQUARE CENTIMETER
HMSAAA	Q3 2025	Outpatient Hosp	Q4187	HCPCS	EPICORD, PER SQUARE CENTIMETER
HMSAAA	Q3 2025	Outpatient Hosp	Q4283	HCPCS	BIOVANCE TRI-LAYER OR BIOVANCE 3L, PER SQUARE CENTIMETER
HMSAAA	Q3 2025	Outpatient Hosp	S2095	HCPCS	TRANSCATHETER OCCLUSION OR EMBOLIZATION FOR TUMOR DESTRUCTION, PERCUTANEOUS, ANY METHOD, USING YTTRIUM-90 MICROSPHERES
HMSAAA	Q3 2025	Physician Services	0095T	CPT	REMOVAL OF TOTAL DISC ARTHROPLASTY (ARTIFICIAL DISC), ANTERIOR APPROACH, EACH ADDITIONAL INTERSPACE, CERVICAL (LIST SEPARATELY IN ADDITION TO CODE FOR PI
HMSAAA	Q3 2025	Physician Services	0098T	CPT	REVISION INCLUDING REPLACEMENT OF TOTAL DISC ARTHROPLASTY (ARTIFICIAL DISC), ANTERIOR APPROACH, EACH ADDITIONAL INTERSPACE, CERVICAL (LIST SEPARATELY IN
HMSAAA	Q3 2025	Physician Services	0213T	CPT	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEAL) JOINT (OR NERVES INNERVATING THAT JOINT) WITH ULTRASOUND GUIDANCE,
HMSAAA	Q3 2025	Physician Services	0214T	CPT	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEAL) JOINT (OR NERVES INNERVATING THAT JOINT) WITH ULTRASOUND GUIDANCE,
HMSAAA	Q3 2025	Physician Services	0215T	CPT	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEAL) JOINT (OR NERVES INNERVATING THAT JOINT) WITH ULTRASOUND GUIDANCE,
HMSAAA	Q3 2025	Physician Services	0216T	CPT	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEAL) JOINT (OR NERVES INNERVATING THAT JOINT) WITH ULTRASOUND GUIDANCE,
HMSAAA	Q3 2025	Physician Services	0217T	CPT	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEAL) JOINT (OR NERVES INNERVATING THAT JOINT) WITH ULTRASOUND GUIDANCE,
HMSAAA	Q3 2025	Physician Services	0218T	CPT	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEAL) JOINT (OR NERVES INNERVATING THAT JOINT) WITH ULTRASOUND GUIDANCE,
HMSAAA	Q3 2025	Physician Services	0820T	CPT	CONTINUOUS IN-PERSON MONITORING AND INTERVENTION (EG, PSYCHOTHERAPY, CRISIS INTERVENTION), AS NEEDED, DURING PSYCHEDELIC MEDICATION THERAPY; FIRST P
HMSAAA	Q3 2025	Physician Services	0821T	CPT	CONTINUOUS IN-PERSON MONITORING AND INTERVENTION (EG, PSYCHOTHERAPY, CRISIS INTERVENTION), AS NEEDED, DURING PSYCHEDELIC MEDICATION THERAPY; SECON
HMSAAA	Q3 2025	Physician Services	0822T	CPT	CONTINUOUS IN-PERSON MONITORING AND INTERVENTION (EG, PSYCHOTHERAPY, CRISIS INTERVENTION), AS NEEDED, DURING PSYCHEDELIC MEDICATION THERAPY; CLINIC
HMSAAA	Q3 2025	Physician Services	22533	CPT	ARTHRODESIS, LATERAL EXTRACAVITARY TECHNIQUE, INCLUDING MINIMAL DISCECTOMY TO PREPARE INTERSPACE (OTHER THAN FOR DECOMPRESSION); LUMBAR
HMSAAA	Q3 2025	Physician Services	22534	CPT	ARTHRODESIS, LATERAL EXTRACAVITARY TECHNIQUE, INCLUDING MINIMAL DISCECTOMY TO PREPARE INTERSPACE (OTHER THAN FOR DECOMPRESSION); THORACIC OR LUME
HMSAAA	Q3 2025	Physician Services	22548	CPT	ARTHRODESIS, ANTERIOR TRANSORAL OR EXTRAORAL TECHNIQUE, CLIVUS-C1-C2 (ATLAS-AXIS), WITH OR WITHOUT EXCISION OF ODONTOID PROCESS
HMSAAA	Q3 2025	Physician Services	22551	CPT	ARTHRODESIS, ANTERIOR INTERBODY, INCLUDING DISC SPACE PREPARATION, DISCECTOMY, OSTEOPHYTECTOMY AND DECOMPRESSION OF SPINAL CORD AND/OR NERVE RO
HMSAAA	Q3 2025	Physician Services	22552	CPT	ARTHRODESIS, ANTERIOR INTERBODY, INCLUDING DISC SPACE PREPARATION, DISCECTOMY, OSTEOPHYTECTOMY AND DECOMPRESSION OF SPINAL CORD AND/OR NERVE RO
HMSAAA	Q3 2025	Physician Services	22554	CPT	ARTHRODESIS, ANTERIOR INTERBODY TECHNIQUE, INCLUDING MINIMAL DISCECTOMY TO PREPARE INTERSPACE (OTHER THAN FOR DECOMPRESSION); CERVICAL BELOW C2
HMSAAA	Q3 2025	Physician Services	22558	CPT	ARTHRODESIS, ANTERIOR INTERBODY TECHNIQUE, INCLUDING MINIMAL DISCECTOMY TO PREPARE INTERSPACE (OTHER THAN FOR DECOMPRESSION); LUMBAR
HMSAAA	Q3 2025	Physician Services	22585	CPT	ARTHRODESIS, ANTERIOR INTERBODY TECHNIQUE, INCLUDING MINIMAL DISCECTOMY TO PREPARE INTERSPACE (OTHER THAN FOR DECOMPRESSION); EACH ADDITIONAL INTE
HMSAAA	Q3 2025	Physician Services	22590	CPT	ARTHRODESIS, POSTERIOR TECHNIQUE, CRANIOCERVICAL (OCCIPUT-C2)
HMSAAA	Q3 2025	Physician Services	22595	CPT	ARTHRODESIS, POSTERIOR TECHNIQUE, ATLAS-AXIS (C1-C2)
HMSAAA	Q3 2025	Physician Services	22600	CPT	ARTHRODESIS, POSTERIOR OR POSTEROLATERAL TECHNIQUE, SINGLE INTERSPACE; CERVICAL BELOW C2 SEGMENT
HMSAAA	Q3 2025	Physician Services	22612	CPT	ARTHRODESIS, POSTERIOR OR POSTEROLATERAL TECHNIQUE, SINGLE INTERSPACE; LUMBAR (WITH LATERAL TRANSVERSE TECHNIQUE, WHEN PERFORMED)
HMSAAA	Q3 2025	Physician Services	22614	CPT	ARTHRODESIS, POSTERIOR OR POSTEROLATERAL TECHNIQUE, SINGLE INTERSPACE; EACH ADDITIONAL INTERSPACE (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PR
HMSAAA	Q3 2025	Physician Services	22630	CPT	ARTHRODESIS, POSTERIOR INTERBODY TECHNIQUE, INCLUDING LAMINECTOMY AND/OR DISCECTOMY TO PREPARE INTERSPACE (OTHER THAN FOR DECOMPRESSION), SINGLE
HMSAAA	Q3 2025	Physician Services	22632	CPT	ARTHRODESIS, POSTERIOR INTERBODY TECHNIQUE, INCLUDING LAMINECTOMY AND/OR DISCECTOMY TO PREPARE INTERSPACE (OTHER THAN FOR DECOMPRESSION), SINGLE
HMSAAA	Q3 2025	Physician Services	22633	CPT	ARTHRODESIS, COMBINED POSTERIOR OR POSTEROLATERAL TECHNIQUE WITH POSTERIOR INTERBODY TECHNIQUE INCLUDING LAMINECTOMY AND/OR DISCECTOMY SUFFICI
HMSAAA	Q3 2025	Physician Services	22634	CPT	ARTHRODESIS, COMBINED POSTERIOR OR POSTEROLATERAL TECHNIQUE WITH POSTERIOR INTERBODY TECHNIQUE INCLUDING LAMINECTOMY AND/OR DISCECTOMY SUFFICI
HMSAAA	Q3 2025	Physician Services	22856	CPT	TOTAL DISC ARTHROPLASTY (ARTIFICIAL DISC), ANTERIOR APPROACH, INCLUDING DISCECTOMY WITH END PLATE PREPARATION (INCLUDES OSTEOPHYTECTOMY FOR NERVE R
HMSAAA	Q3 2025	Physician Services	22858	CPT	TOTAL DISC ARTHROPLASTY (ARTIFICIAL DISC), ANTERIOR APPROACH, INCLUDING DISCECTOMY WITH END PLATE PREPARATION (INCLUDES OSTEOPHYTECTOMY FOR NERVE R
HMSAAA	Q3 2025	Physician Services	22861	CPT	REVISION INCLUDING REPLACEMENT OF TOTAL DISC ARTHROPLASTY (ARTIFICIAL DISC), ANTERIOR APPROACH, SINGLE INTERSPACE; CERVICAL
HMSAAA	Q3 2025	Physician Services	22864	CPT	REMOVAL OF TOTAL DISC ARTHROPLASTY (ARTIFICIAL DISC), ANTERIOR APPROACH, SINGLE INTERSPACE; CERVICAL
HMSAAA	Q3 2025	Physician Services	23120	CPT	CLAVICULECTOMY; PARTIAL
HMSAAA	Q3 2025	Physician Services	23125	CPT	CLAVICULECTOMY; TOTAL
HMSAAA	Q3 2025	Physician Services	23130	CPT	ACROMIOPLASTY OR ACROMIONECTOMY, PARTIAL, WITH OR WITHOUT CORACOACROMIAL LIGAMENT RELEASE
HMSAAA	Q3 2025	Physician Services	23405	CPT	TENOTOMY, SHOULDER AREA; SINGLE TENDON
HMSAAA	Q3 2025	Physician Services	23410	CPT	REPAIR OF RUPTURED MUSCULOTENDINOUS CUFF (EG, ROTATOR CUFF) OPEN; ACUTE
HMSAAA	Q3 2025	Physician Services	23412	CPT	REPAIR OF RUPTURED MUSCULOTENDINOUS CUFF (EG, ROTATOR CUFF) OPEN; CHRONIC
HMSAAA	Q3 2025	Physician Services	23415	CPT	CORACOACROMIAL LIGAMENT RELEASE, WITH OR WITHOUT ACROMIOPLASTY
HMSAAA	Q3 2025	Physician Services	23420	CPT	RECONSTRUCTION OF COMPLETE SHOULDER (ROTATOR) CUFF AVULSION, CHRONIC (INCLUDES ACROMIOPLASTY)
HMSAAA	Q3 2025	Physician Services	23430	CPT	TENODESIS OF LONG TENDON OF BICEPS
HMSAAA	Q3 2025	Physician Services	23450	CPT	CAPSULORRHAPHY, ANTERIOR; PUTTI-PLATT PROCEDURE OR MAGNUSON TYPE OPERATION
HMSAAA	Q3 2025	Physician Services	23455	CPT	CAPSULORRHAPHY, ANTERIOR; WITH LABRAL REPAIR (EG, BANKART PROCEDURE)
HMSAAA	Q3 2025	Physician Services	23460	CPT	CAPSULORRHAPHY, ANTERIOR, ANY TYPE; WITH BONE BLOCK
HMSAAA	Q3 2025	Physician Services	23462	CPT	CAPSULORRHAPHY, ANTERIOR, ANY TYPE; WITH CORACOID PROCESS TRANSFER
HMSAAA	Q3 2025	Physician Services	23465	CPT	CAPSULORRHAPHY, GLENOHUMERAL JOINT, POSTERIOR, WITH OR WITHOUT BONE BLOCK
HMSAAA	Q3 2025	Physician Services	23466	CPT	CAPSULORRHAPHY, GLENOHUMERAL JOINT, ANY TYPE MULTIDIRECTIONAL INSTABILITY
HMSAAA	Q3 2025	Physician Services	23470	CPT	ARTHROPLASTY, GLENOHUMERAL JOINT; HEMIARTHROPLASTY
HMSAAA	Q3 2025	Physician Services	23472	CPT	ARTHROPLASTY, GLENOHUMERAL JOINT; TOTAL SHOULDER (GLENOID AND PROXIMAL HUMERAL REPLACEMENT (EG, TOTAL SHOULDER))
HMSAAA	Q3 2025	Physician Services	23473	CPT	REVISION OF TOTAL SHOULDER ARTHROPLASTY, INCLUDING ALLOGRAFT WHEN PERFORMED; HUMERAL OR GLENOID COMPONENT
HMSAAA	Q3 2025	Physician Services	23474	CPT	REVISION OF TOTAL SHOULDER ARTHROPLASTY, INCLUDING ALLOGRAFT WHEN PERFORMED; HUMERAL AND GLENOID COMPONENT
HMSAAA	Q3 2025	Physician Services	23700	CPT	MANIPULATION UNDER ANESTHESIA, SHOULDER JOINT, INCLUDING APPLICATION OF FIXATION APPARATUS (DISLOCATION EXCLUDED)
HMSAAA	Q3 2025	Physician Services	27096	CPT	INJECTION PROCEDURE FOR SACROILIAC JOINT, ANESTHETIC/STEROID, WITH IMAGE GUIDANCE (FLUOROSCOPY OR CT) INCLUDING ARTHROGRAPHY WHEN PERFORMED
HMSAAA	Q3 2025	Physician Services	27130	CPT	ARTHROPLASTY, ACETABULAR AND PROXIMAL FEMORAL PROSTHETIC REPLACEMENT (TOTAL HIP ARTHROPLASTY), WITH OR WITHOUT AUTOGRAFT OR ALLOGRAFT
HMSAAA	Q3 2025	Physician Services	27132	CPT	CONVERSION OF PREVIOUS HIP SURGERY TO TOTAL HIP ARTHROPLASTY, WITH OR WITHOUT AUTOGRAFT OR ALLOGRAFT
HMSAAA	Q3 2025	Physician Services	27134	CPT	REVISION OF TOTAL HIP ARTHROPLASTY; BOTH COMPONENTS, WITH OR WITHOUT AUTOGRAFT OR ALLOGRAFT
HMSAAA	Q3 2025	Physician Services	27137	CPT	REVISION OF TOTAL HIP ARTHROPLASTY; ACETABULAR COMPONENT ONLY, WITH OR WITHOUT AUTOGRAFT OR ALLOGRAFT
HMSAAA	Q3 2025	Physician Services	27138	CPT	REVISION OF TOTAL HIP ARTHROPLASTY; FEMORAL COMPONENT ONLY, WITH OR WITHOUT ALLOGRAFT
HMSAAA	Q3 2025	Physician Services	27332	CPT	ARTHROTOMY, WITH EXCISION OF SEMILUNAR CARTILAGE (MENISCECTOMY) KNEE; MEDIAL OR LATERAL
HMSAAA	Q3 2025	Physician Services	27333	CPT	ARTHROTOMY, WITH EXCISION OF SEMILUNAR CARTILAGE (MENISCECTOMY) KNEE; MEDIAL AND LATERAL
HMSAAA	Q3 2025	Physician Services	27403	CPT	ARTHROTOMY WITH MENISCUS REPAIR, KNEE
HMSAAA	Q3 2025	Physician Services	27405	CPT	REPAIR, PRIMARY, TORN LIGAMENT AND/OR CAPSULE, KNEE; COLLATERAL
HMSAAA	Q3 2025	Physician Services	27407	CPT	REPAIR, PRIMARY, TORN LIGAMENT AND/OR CAPSULE, KNEE; CRUCIATE
HMSAAA	Q3 2025	Physician Services	27409	CPT	REPAIR, PRIMARY, TORN LIGAMENT AND/OR CAPSULE, KNEE; COLLATERAL AND CRUCIATE LIGAMENTS
HMSAAA	Q3 2025	Physician Services	27412	CPT	AUTOLOGOUS CHONDROCYTE IMPLANTATION, KNEE
HMSAAA	Q3 2025	Physician Services	27415	CPT	OSTEOCHONDRAL ALLOGRAFT, KNEE, OPEN
HMSAAA	Q3 2025	Physician Services	27416	CPT	OSTEOCHONDRAL AUTOGRAFT(S), KNEE, OPEN (EG, MOSAICPLASTY) (INCLUDES HARVESTING OF AUTOGRAFT[S])
HMSAAA	Q3 2025	Physician Services	27418	CPT	ANTERIOR TIBIAL TUBERCLEPLASTY (EG, MAQUET TYPE PROCEDURE)
HMSAAA	Q3 2025	Physician Services	27420	CPT	RECONSTRUCTION OF DISLOCATING PATELLA; (EG, HAUSER TYPE PROCEDURE)
HMSAAA	Q3 2025	Physician Services	27422	CPT	RECONSTRUCTION OF DISLOCATING PATELLA; WITH EXTENSOR REALIGNMENT AND/OR MUSCLE ADVANCEMENT OR RELEASE (EG, CAMPBELL, GOLDWAITE TYPE PROCEDURE)
HMSAAA	Q3 2025	Physician Services	27424	CPT	RECONSTRUCTION OF DISLOCATING PATELLA; WITH PATELLECTOMY
HMSAAA	Q3 2025	Physician Services	27425	CPT	LATERAL RETINACULAR RELEASE, OPEN
HMSAAA	Q3 2025	Physician Services	27427	CPT	LIGAMENTOUS RECONSTRUCTION (AUGMENTATION), KNEE; EXTRA-ARTICULAR
HMSAAA	Q3 2025	Physician Services	27428	CPT	LIGAMENTOUS RECONSTRUCTION (AUGMENTATION), KNEE; INTRA-ARTICULAR (OPEN)

HMSAAA	Q3 2025	Physician Services	27429	CPT	LIGAMENTOUS RECONSTRUCTION (AUGMENTATION), KNEE; INTRA-ARTICULAR (OPEN) AND EXTRA-ARTICULAR
HMSAAA	Q3 2025	Physician Services	27438	CPT	ARTHROPLASTY, PATELLA; WITH PROSTHESIS
HMSAAA	Q3 2025	Physician Services	27446	CPT	ARTHROPLASTY, KNEE, CONDYLE AND PLATEAU; MEDIAL OR LATERAL COMPARTMENT
HMSAAA	Q3 2025	Physician Services	27447	CPT	ARTHROPLASTY, KNEE, CONDYLE AND PLATEAU; MEDIAL AND LATERAL COMPARTMENTS WITH OR WITHOUT PATELLA RESURFACING (TOTAL KNEE ARTHROPLASTY)
HMSAAA	Q3 2025	Physician Services	27486	CPT	REVISION OF TOTAL KNEE ARTHROPLASTY, WITH OR WITHOUT ALLOGRAFT; 1 COMPONENT
HMSAAA	Q3 2025	Physician Services	27487	CPT	REVISION OF TOTAL KNEE ARTHROPLASTY, WITH OR WITHOUT ALLOGRAFT; FEMORAL AND ENTIRE TIBIAL COMPONENT
HMSAAA	Q3 2025	Physician Services	27488	CPT	REMOVAL OF PROSTHESIS, INCLUDING TOTAL KNEE PROSTHESIS, METHYLMETHACRYLATE WITH OR WITHOUT INSERTION OF SPACER, KNEE
HMSAAA	Q3 2025	Physician Services	27570	CPT	MANIPULATION OF KNEE JOINT UNDER GENERAL ANESTHESIA (INCLUDES APPLICATION OF TRACTION OR OTHER FIXATION DEVICES)
HMSAAA	Q3 2025	Physician Services	29805	CPT	ARTHROSCOPY, SHOULDER, DIAGNOSTIC, WITH OR WITHOUT SYNOVIAL BIOPSY (SEPARATE PROCEDURE)
HMSAAA	Q3 2025	Physician Services	29806	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; CAPSULORRHAPHY
HMSAAA	Q3 2025	Physician Services	29807	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; REPAIR OF SLAP LESION
HMSAAA	Q3 2025	Physician Services	29819	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; WITH REMOVAL OF LOOSE BODY OR FOREIGN BODY
HMSAAA	Q3 2025	Physician Services	29820	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; SYNOVECTOMY, PARTIAL
HMSAAA	Q3 2025	Physician Services	29821	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; SYNOVECTOMY, COMPLETE
HMSAAA	Q3 2025	Physician Services	29822	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; DEBRIDEMENT, LIMITED, 1 OR 2 DISCRETE STRUCTURES (EG, HUMERAL BONE, HUMERAL ARTICULAR CARTILAGE, GLENOID BONE, GLE
HMSAAA	Q3 2025	Physician Services	29823	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; DEBRIDEMENT, EXTENSIVE, 3 OR MORE DISCRETE STRUCTURES (EG, HUMERAL BONE, HUMERAL ARTICULAR CARTILAGE, GLENOID BON
HMSAAA	Q3 2025	Physician Services	29824	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; DISTAL CLAVICULECTOMY INCLUDING DISTAL ARTICULAR SURFACE (MUMFORD PROCEDURE)
HMSAAA	Q3 2025	Physician Services	29825	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; WITH LYSIS AND RESECTION OF ADHESIONS, WITH OR WITHOUT MANIPULATION
HMSAAA	Q3 2025	Physician Services	29826	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; DECOMPRESSION OF SUBACROMIAL SPACE WITH PARTIAL ACROMIOPLASTY, WITH CORACOACROMIAL LIGAMENT (IE, ARCH) RELEASE,
HMSAAA	Q3 2025	Physician Services	29827	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; WITH ROTATOR CUFF REPAIR
HMSAAA	Q3 2025	Physician Services	29828	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; BICEPS TENODESIS
HMSAAA	Q3 2025	Physician Services	29860	CPT	ARTHROSCOPY, HIP, DIAGNOSTIC WITH OR WITHOUT SYNOVIAL BIOPSY (SEPARATE PROCEDURE)
HMSAAA	Q3 2025	Physician Services	29861	CPT	ARTHROSCOPY, HIP, SURGICAL; WITH REMOVAL OF LOOSE BODY OR FOREIGN BODY
HMSAAA	Q3 2025	Physician Services	29862	CPT	ARTHROSCOPY, HIP, SURGICAL; WITH DEBRIDEMENT/SHAVING OF ARTICULAR CARTILAGE (CHONDROPLASTY), ABRASION ARTHROPLASTY, AND/OR RESECTION OF LABRUM
HMSAAA	Q3 2025	Physician Services	29863	CPT	ARTHROSCOPY, HIP, SURGICAL; WITH SYNOVECTOMY
HMSAAA	Q3 2025	Physician Services	29866	CPT	ARTHROSCOPY, KNEE, SURGICAL; OSTEOCHONDRAL AUTOGRAFT(S) (EG, MOSAICPLASTY) (INCLUDES HARVESTING OF THE AUTOGRAFT[S])
HMSAAA	Q3 2025	Physician Services	29867	CPT	ARTHROSCOPY, KNEE, SURGICAL; OSTEOCHONDRAL ALLOGRAFT (EG, MOSAICPLASTY)
HMSAAA	Q3 2025	Physician Services	29868	CPT	ARTHROSCOPY, KNEE, SURGICAL; MENISCAL TRANSPLANTATION (INCLUDES ARTHROTOMY FOR MENISCAL INSERTION), MEDIAL OR LATERAL
HMSAAA	Q3 2025	Physician Services	29870	CPT	ARTHROSCOPY, KNEE, DIAGNOSTIC, WITH OR WITHOUT SYNOVIAL BIOPSY (SEPARATE PROCEDURE)
HMSAAA	Q3 2025	Physician Services	29873	CPT	ARTHROSCOPY, KNEE, SURGICAL; WITH LATERAL RELEASE
HMSAAA	Q3 2025	Physician Services	29874	CPT	ARTHROSCOPY, KNEE, SURGICAL; FOR REMOVAL OF LOOSE BODY OR FOREIGN BODY (EG, OSTEOCHONDRITIS DISSECANS FRAGMENTATION, CHONDRAL FRAGMENTATION)
HMSAAA	Q3 2025	Physician Services	29875	CPT	ARTHROSCOPY, KNEE, SURGICAL; SYNOVECTOMY, LIMITED (EG, PLICA OR SHELF RESECTION) (SEPARATE PROCEDURE)
HMSAAA	Q3 2025	Physician Services	29876	CPT	ARTHROSCOPY, KNEE, SURGICAL; SYNOVECTOMY, MAJOR, 2 OR MORE COMPARTMENTS (EG, MEDIAL OR LATERAL)
HMSAAA	Q3 2025	Physician Services	29877	CPT	ARTHROSCOPY, KNEE, SURGICAL; DEBRIDEMENT/SHAVING OF ARTICULAR CARTILAGE (CHONDROPLASTY)
HMSAAA	Q3 2025	Physician Services	29879	CPT	ARTHROSCOPY, KNEE, SURGICAL; ABRASION ARTHROPLASTY (INCLUDES CHONDROPLASTY WHERE NECESSARY) OR MULTIPLE DRILLING OR MICROFRACTURE
HMSAAA	Q3 2025	Physician Services	29880	CPT	ARTHROSCOPY, KNEE, SURGICAL; WITH MENISCECTOMY (MEDIAL AND LATERAL, INCLUDING ANY MENISCAL SHAVING) INCLUDING DEBRIDEMENT/SHAVING OF ARTICULAR CA
HMSAAA	Q3 2025	Physician Services	29881	CPT	ARTHROSCOPY, KNEE, SURGICAL; WITH MENISCECTOMY (MEDIAL OR LATERAL, INCLUDING ANY MENISCAL SHAVING) INCLUDING DEBRIDEMENT/SHAVING OF ARTICULAR CART
HMSAAA	Q3 2025	Physician Services	29882	CPT	ARTHROSCOPY, KNEE, SURGICAL; WITH MENISCUS REPAIR (MEDIAL OR LATERAL)
HMSAAA	Q3 2025	Physician Services	29883	CPT	ARTHROSCOPY, KNEE, SURGICAL; WITH MENISCUS REPAIR (MEDIAL AND LATERAL)
HMSAAA	Q3 2025	Physician Services	29884	CPT	ARTHROSCOPY, KNEE, SURGICAL; WITH LYSIS OF ADHESIONS, WITH OR WITHOUT MANIPULATION (SEPARATE PROCEDURE)
HMSAAA	Q3 2025	Physician Services	29888	CPT	ARTHROSCOPICALLY AIDED ANTERIOR CRUCIATE LIGAMENT REPAIR/AUGMENTATION OR RECONSTRUCTION
HMSAAA	Q3 2025	Physician Services	29889	CPT	ARTHROSCOPICALLY AIDED POSTERIOR CRUCIATE LIGAMENT REPAIR/AUGMENTATION OR RECONSTRUCTION
HMSAAA	Q3 2025	Physician Services	29914	CPT	ARTHROSCOPY, HIP, SURGICAL; WITH FEMOROPLASTY (IE, TREATMENT OF CAM LESION)
HMSAAA	Q3 2025	Physician Services	29915	CPT	ARTHROSCOPY, HIP, SURGICAL; WITH ACETABULOPLASTY (IE, TREATMENT OF PINCER LESION)
HMSAAA	Q3 2025	Physician Services	29916	CPT	ARTHROSCOPY, HIP, SURGICAL; WITH LABRAL REPAIR
HMSAAA	Q3 2025	Physician Services	62320	CPT	INJECTION(S), OF DIAGNOSTIC OR THERAPEUTIC SUBSTANCE(S) (EG, ANESTHETIC, ANTISPASMODIC, OPIOID, STEROID, OTHER SOLUTION), NOT INCLUDING NEUROLYTIC SUBS
HMSAAA	Q3 2025	Physician Services	62321	CPT	INJECTION(S), OF DIAGNOSTIC OR THERAPEUTIC SUBSTANCE(S) (EG, ANESTHETIC, ANTISPASMODIC, OPIOID, STEROID, OTHER SOLUTION), NOT INCLUDING NEUROLYTIC SUBS
HMSAAA	Q3 2025	Physician Services	62322	CPT	INJECTION(S), OF DIAGNOSTIC OR THERAPEUTIC SUBSTANCE(S) (EG, ANESTHETIC, ANTISPASMODIC, OPIOID, STEROID, OTHER SOLUTION), NOT INCLUDING NEUROLYTIC SUBS
HMSAAA	Q3 2025	Physician Services	62323	CPT	INJECTION(S), OF DIAGNOSTIC OR THERAPEUTIC SUBSTANCE(S) (EG, ANESTHETIC, ANTISPASMODIC, OPIOID, STEROID, OTHER SOLUTION), NOT INCLUDING NEUROLYTIC SUBS
HMSAAA	Q3 2025	Physician Services	62380	CPT	ENDOSCOPIC DECOMPRESSION OF SPINAL CORD, NERVE ROOT(S), INCLUDING LAMINOTOMY, PARTIAL FACETECTOMY, FORAMINOTOMY, DISCECTOMY AND/OR EXCISION OF
HMSAAA	Q3 2025	Physician Services	63001	CPT	LAMINECTOMY WITH EXPLORATION AND/OR DECOMPRESSION OF SPINAL CORD AND/OR CAUDA EQUINA, WITHOUT FACETECTOMY, FORAMINOTOMY OR DISCECTOMY (EG, SP
HMSAAA	Q3 2025	Physician Services	63005	CPT	LAMINECTOMY WITH EXPLORATION AND/OR DECOMPRESSION OF SPINAL CORD AND/OR CAUDA EQUINA, WITHOUT FACETECTOMY, FORAMINOTOMY OR DISCECTOMY (EG, SP
HMSAAA	Q3 2025	Physician Services	63012	CPT	LAMINECTOMY WITH REMOVAL OF ABNORMAL FACETS AND/OR PARS INTER-ARTICULARIS WITH DECOMPRESSION OF CAUDA EQUINA AND NERVE ROOTS FOR SPONDYLOLISTH
HMSAAA	Q3 2025	Physician Services	63015	CPT	LAMINECTOMY WITH EXPLORATION AND/OR DECOMPRESSION OF SPINAL CORD AND/OR CAUDA EQUINA, WITHOUT FACETECTOMY, FORAMINOTOMY OR DISCECTOMY (EG, SP
HMSAAA	Q3 2025	Physician Services	63017	CPT	LAMINECTOMY WITH EXPLORATION AND/OR DECOMPRESSION OF SPINAL CORD AND/OR CAUDA EQUINA, WITHOUT FACETECTOMY, FORAMINOTOMY OR DISCECTOMY (EG, SP
HMSAAA	Q3 2025	Physician Services	63020	CPT	LAMINOTOMY (HEMILAMINECTOMY), WITH DECOMPRESSION OF NERVE ROOT(S), INCLUDING PARTIAL FACETECTOMY, FORAMINOTOMY AND/OR EXCISION OF HERNIATED INTE
HMSAAA	Q3 2025	Physician Services	63030	CPT	LAMINOTOMY (HEMILAMINECTOMY), WITH DECOMPRESSION OF NERVE ROOT(S), INCLUDING PARTIAL FACETECTOMY, FORAMINOTOMY AND/OR EXCISION OF HERNIATED INTE
HMSAAA	Q3 2025	Physician Services	63035	CPT	LAMINOTOMY (HEMILAMINECTOMY), WITH DECOMPRESSION OF NERVE ROOT(S), INCLUDING PARTIAL FACETECTOMY, FORAMINOTOMY AND/OR EXCISION OF HERNIATED INTE
HMSAAA	Q3 2025	Physician Services	63040	CPT	LAMINOTOMY (HEMILAMINECTOMY), WITH DECOMPRESSION OF NERVE ROOT(S), INCLUDING PARTIAL FACETECTOMY, FORAMINOTOMY AND/OR EXCISION OF HERNIATED INTE
HMSAAA	Q3 2025	Physician Services	63042	CPT	LAMINOTOMY (HEMILAMINECTOMY), WITH DECOMPRESSION OF NERVE ROOT(S), INCLUDING PARTIAL FACETECTOMY, FORAMINOTOMY AND/OR EXCISION OF HERNIATED INTE
HMSAAA	Q3 2025	Physician Services	63043	CPT	LAMINOTOMY (HEMILAMINECTOMY), WITH DECOMPRESSION OF NERVE ROOT(S), INCLUDING PARTIAL FACETECTOMY, FORAMINOTOMY AND/OR EXCISION OF HERNIATED INTE
HMSAAA	Q3 2025	Physician Services	63044	CPT	LAMINOTOMY (HEMILAMINECTOMY), WITH DECOMPRESSION OF NERVE ROOT(S), INCLUDING PARTIAL FACETECTOMY, FORAMINOTOMY AND/OR EXCISION OF HERNIATED INTE
HMSAAA	Q3 2025	Physician Services	63045	CPT	LAMINECTOMY, FACETECTOMY AND FORAMINOTOMY (UNILATERAL OR BILATERAL WITH DECOMPRESSION OF SPINAL CORD, CAUDA EQUINA AND/OR NERVE ROOT[S], [EG, SPIN
HMSAAA	Q3 2025	Physician Services	63047	CPT	LAMINECTOMY, FACETECTOMY AND FORAMINOTOMY (UNILATERAL OR BILATERAL WITH DECOMPRESSION OF SPINAL CORD, CAUDA EQUINA AND/OR NERVE ROOT[S], [EG, SPIN
HMSAAA	Q3 2025	Physician Services	63048	CPT	LAMINECTOMY, FACETECTOMY AND FORAMINOTOMY (UNILATERAL OR BILATERAL WITH DECOMPRESSION OF SPINAL CORD, CAUDA EQUINA AND/OR NERVE ROOT[S], [EG, SPIN
HMSAAA	Q3 2025	Physician Services	63050	CPT	LAMINOPLASTY, CERVICAL, WITH DECOMPRESSION OF THE SPINAL CORD, 2 OR MORE VERTEBRAL SEGMENTS;
HMSAAA	Q3 2025	Physician Services	63051	CPT	LAMINOPLASTY, CERVICAL, WITH DECOMPRESSION OF THE SPINAL CORD, 2 OR MORE VERTEBRAL SEGMENTS; WITH RECONSTRUCTION OF THE POSTERIOR BONY ELEMENTS (I
HMSAAA	Q3 2025	Physician Services	63056	CPT	TRANSPEDICULAR APPROACH WITH DECOMPRESSION OF SPINAL CORD, EQUINA AND/OR NERVE ROOT(S) (EG, HERNIATED INTERVERTEBRAL DISC), SINGLE SEGMENT; LUMBAI
HMSAAA	Q3 2025	Physician Services	63057	CPT	TRANSPEDICULAR APPROACH WITH DECOMPRESSION OF SPINAL CORD, EQUINA AND/OR NERVE ROOT(S) (EG, HERNIATED INTERVERTEBRAL DISC), SINGLE SEGMENT; EACH A
HMSAAA	Q3 2025	Physician Services	63075	CPT	DISCECTOMY, ANTERIOR, WITH DECOMPRESSION OF SPINAL CORD AND/OR NERVE ROOT(S), INCLUDING OSTEOPHYTECTOMY; CERVICAL, SINGLE INTERSPACE
HMSAAA	Q3 2025	Physician Services	63076	CPT	DISCECTOMY, ANTERIOR, WITH DECOMPRESSION OF SPINAL CORD AND/OR NERVE ROOT(S), INCLUDING OSTEOPHYTECTOMY; CERVICAL, EACH ADDITIONAL INTERSPACE (LIS
HMSAAA	Q3 2025	Physician Services	64479	CPT	INJECTION(S), ANESTHETIC AGENT(S) AND/OR STEROID; TRANSFORAMINAL EPIDURAL, WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT), CERVICAL OR THORACIC, SINGLE LE
HMSAAA	Q3 2025	Physician Services	64480	CPT	INJECTION(S), ANESTHETIC AGENT(S) AND/OR STEROID; TRANSFORAMINAL EPIDURAL, WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT), CERVICAL OR THORACIC, EACH ADD
HMSAAA	Q3 2025	Physician Services	64483	CPT	INJECTION(S), ANESTHETIC AGENT(S) AND/OR STEROID; TRANSFORAMINAL EPIDURAL, WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT), LUMBAR OR SACRAL, SINGLE LEVEL
HMSAAA	Q3 2025	Physician Services	64484	CPT	INJECTION(S), ANESTHETIC AGENT(S) AND/OR STEROID; TRANSFORAMINAL EPIDURAL, WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT), LUMBAR OR SACRAL, EACH ADDITIO
HMSAAA	Q3 2025	Physician Services	64490	CPT	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEAL) JOINT (OR NERVES INNERVATING THAT JOINT) WITH IMAGE GUIDANCE (FLUOR
HMSAAA	Q3 2025	Physician Services	64491	CPT	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEAL) JOINT (OR NERVES INNERVATING THAT JOINT) WITH IMAGE GUIDANCE (FLUOR
HMSAAA	Q3 2025	Physician Services	64492	CPT	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEAL) JOINT (OR NERVES INNERVATING THAT JOINT) WITH IMAGE GUIDANCE (FLUOR
HMSAAA	Q3 2025	Physician Services	64493	CPT	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEAL) JOINT (OR NERVES INNERVATING THAT JOINT) WITH IMAGE GUIDANCE (FLUOR
HMSAAA	Q3 2025	Physician Services	64494	CPT	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEAL) JOINT (OR NERVES INNERVATING THAT JOINT) WITH IMAGE GUIDANCE (FLUOR
HMSAAA	Q3 2025	Physician Services	64495	CPT	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEAL) JOINT (OR NERVES INNERVATING THAT JOINT) WITH IMAGE GUIDANCE (FLUOR
HMSAAA	Q3 2025	Physician Services	64633	CPT	DESTRUCTION BY NEUROLYTIC AGENT, PARAVERTEBRAL FACET JOINT NERVE(S), WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT); CERVICAL OR THORACIC, SINGLE FACET JO
HMSAAA	Q3 2025	Physician Services	64634	CPT	DESTRUCTION BY NEUROLYTIC AGENT, PARAVERTEBRAL FACET JOINT NERVE(S), WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT); CERVICAL OR THORACIC, EACH ADDITIONA
HMSAAA	Q3 2025	Physician Services	64635	CPT	DESTRUCTION BY NEUROLYTIC AGENT, PARAVERTEBRAL FACET JOINT NERVE(S), WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT); LUMBAR OR SACRAL, SINGLE FACET JOINT
HMSAAA	Q3 2025	Physician Services	64636	CPT	DESTRUCTION BY NEUROLYTIC AGENT, PARAVERTEBRAL FACET JOINT NERVE(S), WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT); LUMBAR OR SACRAL, EACH ADDITIONAL FA
HMSAAA	Q3 2025	Physician Services	90869	CPT	THERAPEUTIC REPETITIVE TRANSCRANIAL MAGNETIC STIMULATION (TMS) TREATMENT; SUBSEQUENT MOTOR THRESHOLD RE-DETERMINATION WITH DELIVERY AND MANAGEM
HMSAAA	Q3 2025	Physician Services	95976	CPT	ELECTRONIC ANALYSIS OF IMPLANTED NEUROSTIMULATOR PULSE GENERATOR/TRANSMITTER (EG, CONTACT GROUP[S], INTERLEAVING, AMPLITUDE, PULSE WIDTH, FREQUEN
HMSAAA	Q3 2025	Physician Services	95977	CPT	ELECTRONIC ANALYSIS OF IMPLANTED NEUROSTIMULATOR PULSE GENERATOR/TRANSMITTER (EG, CONTACT GROUP[S], INTERLEAVING, AMPLITUDE, PULSE WIDTH, FREQUEN
HMSAAA	Q3 2025	Physician Services	G0260	HCPCS	INJECTION PROCEDURE FOR SACROILIAC JOINT; PROVISION OF ANESTHETIC, STEROID AND/OR OTHER THERAPEUTIC AGENT, WITH OR WITHOUT ARTHROGRAPHY
HMSAAA	Q3 2025	Physician Services	G0289	HCPCS	ARTHROSCOPY, KNEE, SURGICAL, FOR REMOVAL OF LOOSE BODY, FOREIGN BODY, DEBRIDEMENT/SHAVING OF ARTICULAR CARTILAGE (CHONDROPLASTY) AT THE TIME OF OT
HMSAAA	Q3 2025	Physician Services	S2118	HCPCS	METAL-ON-METAL TOTAL HIP RESURFACING, INCLUDING ACETABULAR AND FEMORAL COMPONENTS
HMSAAA	Q3 2025	Preventative Services		97803 CPT	MEDICAL NUTRITION THERAPY; RE-ASSESSMENT AND INTERVENTION, INDIVIDUAL, FACE-TO-FACE WITH THE PATIENT, EACH 15 MINUTES
HMSAAA	Q3 2025	Rehab Services		36475 CPT	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, INCLUSIVE OF ALL IMAGING GUIDANCE AND MONITORING, PERCUTANEOUS, RADIOFREQUENCY; FIRST

HMSAAA	Q3 2025	Rehab Services		92507	CPT	TREATMENT OF SPEECH, LANGUAGE, VOICE, COMMUNICATION, AND/OR AUDITORY PROCESSING DISORDER; INDIVIDUAL
HMSAAA	Q3 2025	Rehab Services		92526	CPT	TREATMENT OF SWALLOWING DYSFUNCTION AND/OR ORAL FUNCTION FOR FEEDING
HMSAAA	Q3 2025	Rehab Services		92630	CPT	AUDITORY REHABILITATION; PRELINGUAL HEARING LOSS
HMSAAA	Q3 2025	Rehab Services		92609	CPT	THERAPEUTIC SERVICES FOR THE USE OF SPEECH-GENERATING DEVICE, INCLUDING PROGRAMMING AND MODIFICATION
HMSAAA	Q3 2025	Rehab Services		92633	CPT	AUDITORY REHABILITATION; POSTLINGUAL HEARING LOSS
HMSAAA	Q3 2025	Rehab Services		94625	CPT	PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL SERVICES FOR OUTPATIENT PULMONARY REHABILITATION; WITHOUT CONTINUOUS OXIMETRY MONITORING (P
HMSAAA	Q3 2025	Rehab Services		94626	CPT	PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL SERVICES FOR OUTPATIENT PULMONARY REHABILITATION; WITH CONTINUOUS OXIMETRY MONITORING (PER S
HMSAAA	Q3 2025	Rehab Services		97012	CPT	APPLICATION OF A MODALITY TO 1 OR MORE AREAS; TRACTION, MECHANICAL
HMSAAA	Q3 2025	Rehab Services		97016	CPT	APPLICATION OF A MODALITY TO 1 OR MORE AREAS; VASOPNEUMATIC DEVICES
HMSAAA	Q3 2025	Rehab Services		97018	CPT	APPLICATION OF A MODALITY TO 1 OR MORE AREAS; PARAFFIN BATH
HMSAAA	Q3 2025	Rehab Services		97022	CPT	APPLICATION OF A MODALITY TO 1 OR MORE AREAS; WHIRLPOOL
HMSAAA	Q3 2025	Rehab Services		97024	CPT	APPLICATION OF A MODALITY TO 1 OR MORE AREAS; DIATHERMY (EG, MICROWAVE)
HMSAAA	Q3 2025	Rehab Services		97032	CPT	APPLICATION OF A MODALITY TO 1 OR MORE AREAS; ELECTRICAL STIMULATION (MANUAL), EACH 15 MINUTES
HMSAAA	Q3 2025	Rehab Services		97034	CPT	APPLICATION OF A MODALITY TO 1 OR MORE AREAS; CONTRAST BATHS, EACH 15 MINUTES
HMSAAA	Q3 2025	Rehab Services		97035	CPT	APPLICATION OF A MODALITY TO 1 OR MORE AREAS; ULTRASOUND, EACH 15 MINUTES
HMSAAA	Q3 2025	Rehab Services		97036	CPT	APPLICATION OF A MODALITY TO 1 OR MORE AREAS; HUBBARD TANK, EACH 15 MINUTES
HMSAAA	Q3 2025	Rehab Services		97039	CPT	UNLISTED MODALITY (SPECIFY TYPE AND TIME IF CONSTANT ATTENDANCE)
HMSAAA	Q3 2025	Rehab Services		97110	CPT	THERAPEUTIC PROCEDURE, 1 OR MORE AREAS, EACH 15 MINUTES; THERAPEUTIC EXERCISES TO DEVELOP STRENGTH AND ENDURANCE, RANGE OF MOTION AND FLEXIBILITY
HMSAAA	Q3 2025	Rehab Services		97112	CPT	THERAPEUTIC PROCEDURE, 1 OR MORE AREAS, EACH 15 MINUTES; NEUROMUSCULAR REEDUCATION OF MOVEMENT, BALANCE, COORDINATION, KINESTHETIC SENSE, POSTU
HMSAAA	Q3 2025	Rehab Services		97113	CPT	THERAPEUTIC PROCEDURE, 1 OR MORE AREAS, EACH 15 MINUTES; AQUATIC THERAPY WITH THERAPEUTIC EXERCISES
HMSAAA	Q3 2025	Rehab Services		97116	CPT	THERAPEUTIC PROCEDURE, 1 OR MORE AREAS, EACH 15 MINUTES; GAIT TRAINING (INCLUDES STAIR CLIMBING)
HMSAAA	Q3 2025	Rehab Services		97124	CPT	THERAPEUTIC PROCEDURE, 1 OR MORE AREAS, EACH 15 MINUTES; MASSAGE, INCLUDING EFFLEURAGE, PETRISSAGE AND/OR TAPOTEMENT (STROKING, COMPRESSION, PERC
HMSAAA	Q3 2025	Rehab Services		97129	CPT	THERAPEUTIC INTERVENTIONS THAT FOCUS ON COGNITIVE FUNCTION (EG, ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMAT
HMSAAA	Q3 2025	Rehab Services		97130	CPT	THERAPEUTIC INTERVENTIONS THAT FOCUS ON COGNITIVE FUNCTION (EG, ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMAT
HMSAAA	Q3 2025	Rehab Services		97139	CPT	UNLISTED THERAPEUTIC PROCEDURE (SPECIFY)
HMSAAA	Q3 2025	Rehab Services		97140	CPT	MANUAL THERAPY TECHNIQUES (EG, MOBILIZATION/ MANIPULATION, MANUAL LYMPHATIC DRAINAGE, MANUAL TRACTION), 1 OR MORE REGIONS, EACH 15 MINUTES
HMSAAA	Q3 2025	Rehab Services		97530	CPT	THERAPEUTIC ACTIVITIES, DIRECT (ONE-ON-ONE) PATIENT CONTACT (USE OF DYNAMIC ACTIVITIES TO IMPROVE FUNCTIONAL PERFORMANCE), EACH 15 MINUTES
HMSAAA	Q3 2025	Rehab Services		97542	CPT	WHEELCHAIR MANAGEMENT (EG, ASSESSMENT, FITTING, TRAINING), EACH 15 MINUTES
HMSAAA	Q3 2025	Rehab Services		97760	CPT	ORTHOTIC(S) MANAGEMENT AND TRAINING (INCLUDING ASSESSMENT AND FITTING WHEN NOT OTHERWISE REPORTED), UPPER EXTREMITY(IES), LOWER EXTREMITY(IES) AND/
HMSAAA	Q3 2025	Rehab Services		97761	CPT	PROSTHETIC(S) TRAINING, UPPER AND/OR LOWER EXTREMITY(IES), INITIAL PROSTHETIC(S) ENCOUNTER, EACH 15 MINUTES
HMSAAA	Q3 2025	Rehab Services		97763	CPT	ORTHOTIC(S)/PROSTHETIC(S) MANAGEMENT AND/OR TRAINING, UPPER EXTREMITY(IES), LOWER EXTREMITY(IES), AND/OR TRUNK, SUBSEQUENT ORTHOTIC(S)/PROSTHETIC(S)
HMSAAA	Q3 2025	Rehab Services		97799	CPT	UNLISTED PHYSICAL MEDICINE/REHABILITATION SERVICE OR PROCEDURE
HMSAAA	Q3 2025	Rehab Services	G0237		HCPCS	THERAPEUTIC PROCEDURES TO INCREASE STRENGTH OR ENDURANCE OF RESPIRATORY MUSCLES, FACE TO FACE, ONE ON ONE, EACH 15 MINUTES (INCLUDES MONITORING)
HMSAAA	Q3 2025	Rehab Services	G0238		HCPCS	THERAPEUTIC PROCEDURES TO IMPROVE RESPIRATORY FUNCTION, OTHER THAN DESCRIBED BY G0237, ONE ON ONE, FACE TO FACE, PER 15 MINUTES (INCLUDES MONITORIN
HMSAAA	Q3 2025	Rehab Services	G0239		HCPCS	THERAPEUTIC PROCEDURES TO IMPROVE RESPIRATORY FUNCTION OR INCREASE STRENGTH OR ENDURANCE OF RESPIRATORY MUSCLES, TWO OR MORE INDIVIDUALS (INCLU
HMSAAA	Q3 2025	Rehab Services	G0283		HCPCS	ELECTRICAL STIMULATION (UNATTENDED), TO ONE OR MORE AREAS FOR INDICATION(S) OTHER THAN WOUND CARE, AS PART OF A THERAPY PLAN OF CARE
HMSAAA	Q3 2025	Rehab Services	S8950		HCPCS	COMPLEX LYMPHEDEMA THERAPY, EACH 15 MINUTES
HMSAAA	Q3 2025	Transport Services	A0430		HCPCS	AMBULANCE SERVICE, CONVENTIONAL AIR SERVICES, TRANSPORT, ONE WAY (FIXED WING)
HMSAAA	Q3 2025	Transport Services	A0435		HCPCS	FIXED WING AIR MILEAGE, PER STATUTE MILE
HMSAAA	Q3 2025	Behavioral Health		90867	CPT	THERAPEUTIC REPETITIVE TRANSCRANIAL MAGNETIC STIMULATION (TMS) TREATMENT; INITIAL, INCLUDING CORTICAL MAPPING, MOTOR THRESHOLD DETERMINATION, DELIVE
HMSAAA	Q3 2025	Behavioral Health		90868	CPT	THERAPEUTIC REPETITIVE TRANSCRANIAL MAGNETIC STIMULATION (TMS) TREATMENT; SUBSEQUENT DELIVERY AND MANAGEMENT, PER SESSION
HMSAAA	Q3 2025	Behavioral Health		90869	CPT	THERAPEUTIC REPETITIVE TRANSCRANIAL MAGNETIC STIMULATION (TMS) TREATMENT; SUBSEQUENT MOTOR THRESHOLD RE-DETERMINATION WITH DELIVERY AND MANAGEM
HMSAAA	Q3 2025	Behavioral Health	G2082		HCPCS	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT THAT REQUIRES THE SUPERVISION OF A PHYSICIAN OR OTHER QU
HMSAAA	Q3 2025	Behavioral Health	G2083		HCPCS	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT THAT REQUIRES THE SUPERVISION OF A PHYSICIAN OR OTHER QU
HMSAAA	Q3 2025	Behavioral Health	H0010		HCPCS	ALCOHOL AND/OR DRUG SERVICES; SUB-ACUTE DETOXIFICATION (RESIDENTIAL ADDICTION PROGRAM INPATIENT)
HMSAAA	Q3 2025	Behavioral Health	H0037		HCPCS	COMMUNITY PSYCHIATRIC SUPPORTIVE TREATMENT PROGRAM, PER DIEM
HMSAAA	Q3 2025	Other	0001U		CPT	RED BLOOD CELL ANTIGEN TYPING, DNA, HUMAN ERYTHROCYTE ANTIGEN GENE ANALYSIS OF 35 ANTIGENS FROM 11 BLOOD GROUPS, UTILIZING WHOLE BLOOD, COMMON RE
HMSAAA	Q3 2025	Other	0005U		CPT	ONCOLOGY (PROSTATE) GENE EXPRESSION PROFILE BY REAL-TIME RT-PCR OF 3 GENES (ERG, PCA3, AND SPDEF), URINE, ALGORITHM REPORTED AS RISK SCORE
HMSAAA	Q3 2025	Other	0016U		CPT	ONCOLOGY (HEMATOLYMPHOID NEOPLASIA), RNA, BCR/ABL1 MAJOR AND MINOR BREAKPOINT FUSION TRANSCRIPTS, QUANTITATIVE PCR AMPLIFICATION, BLOOD OR BONE M
HMSAAA	Q3 2025	Other		170	CPT	ANESTHESIA FOR INTRAORAL PROCEDURES, INCLUDING BIOPSY; NOT OTHERWISE SPECIFIED
HMSAAA	Q3 2025	Other	0017U		CPT	ONCOLOGY (HEMATOLYMPHOID NEOPLASIA), JAK2 MUTATION, DNA, PCR AMPLIFICATION OF EXONS 12-14 AND SEQUENCE ANALYSIS, BLOOD OR BONE MARROW, REPORT OF
HMSAAA	Q3 2025	Other	0022U		CPT	TARGETED GENOMIC SEQUENCE ANALYSIS PANEL, NON-SMALL CELL LUNG NEOPLASIA, DNA AND RNA ANALYSIS, 23 GENES, INTERROGATION FOR SEQUENCE VARIANTS AND F
HMSAAA	Q3 2025	Other	0023U		CPT	ONCOLOGY (ACUTE MYELOGENOUS LEUKEMIA), DNA, GENOTYPING OF INTERNAL TANDEM DUPLICATION, P.D835, P.I836, USING MONONUCLEAR CELLS, REPORTED AS DETEC
HMSAAA	Q3 2025	Other	0026U		CPT	ONCOLOGY (THYROID), DNA AND MRNA OF 112 GENES, NEXT-GENERATION SEQUENCING, FINE NEEDLE ASPIRATE OF THYROID NODULE, ALGORITHMIC ANALYSIS REPORTED A
HMSAAA	Q3 2025	Other	0027U		CPT	JAK2 (JANUS KINASE 2) (EG, MYELOPROLIFERATIVE DISORDER) GENE ANALYSIS, TARGETED SEQUENCE ANALYSIS EXONS 12-15
HMSAAA	Q3 2025	Other	0030U		CPT	DRUG METABOLISM (WARFARIN DRUG RESPONSE), TARGETED SEQUENCE ANALYSIS (IE, CYP2C9, CYP4F2, VKORC1, RS12777823)
HMSAAA	Q3 2025	Other	0034U		CPT	TPMT (THIOPURINE S-METHYLTRANSFERASE), NUDT15 (NUDIX HYDROXYLASE 15)(EG, THIOPURINE METABOLISM), GENE ANALYSIS, COMMON VARIANTS (IE, TPMT *2, *3A, *3B,
HMSAAA	Q3 2025	Other	0037U		CPT	TARGETED GENOMIC SEQUENCE ANALYSIS, SOLID ORGAN NEOPLASM, DNA ANALYSIS OF 324 GENES, INTERROGATION FOR SEQUENCE VARIANTS, GENE COPY NUMBER AMPL
HMSAAA	Q3 2025	Other	0040U		CPT	BCR/ABL1 (T(9;22)) (EG, CHRONIC MYELOGENOUS LEUKEMIA) TRANSLOCATION ANALYSIS, MAJOR BREAKPOINT, QUANTITATIVE
HMSAAA	Q3 2025	Other	0046U		CPT	FLT3 (FMS-RELATED TYROSINE KINASE 3) (EG, ACUTE MYELOID LEUKEMIA) INTERNAL TANDEM DUPLICATION (ITD) VARIANTS, QUANTITATIVE
HMSAAA	Q3 2025	Other	0047U		CPT	ONCOLOGY (PROSTATE), MRNA, GENE EXPRESSION PROFILING BY REAL-TIME RT-PCR OF 17 GENES (12 CONTENT AND 5 HOUSEKEEPING), UTILIZING FORMALIN-FIXED PARAFFI
HMSAAA	Q3 2025	Other	0048U		CPT	ONCOLOGY (SOLID ORGAN NEOPLASIA), DNA, TARGETED SEQUENCING OF PROTEIN-CODING EXONS OF 468 CANCER-ASSOCIATED GENES, INCLUDING INTERROGATION FOR S
HMSAAA	Q3 2025	Other	0049U		CPT	NPM1 (NUCLEOPHOSMIN) (EG, ACUTE MYELOID LEUKEMIA) GENE ANALYSIS, QUANTITATIVE
HMSAAA	Q3 2025	Other	0080U		CPT	ONCOLOGY (LUNG), MASS SPECTROMETRIC ANALYSIS OF GALECTIN-3-BINDING PROTEIN AND SCAVENGER RECEPTOR CYSTEINE-RICH TYPE 1 PROTEIN M130, WITH FIVE CLINI
HMSAAA	Q3 2025	Other	0084U		CPT	RED BLOOD CELL ANTIGEN TYPING, DNA, GENOTYPING OF 10 BLOOD GROUPS WITH PHENOTYPE PREDICTION OF 37 RED BLOOD CELL ANTIGENS
HMSAAA	Q3 2025	Other	0089U		CPT	ONCOLOGY (MELANOMA), GENE EXPRESSION PROFILING BY RTQPCR, PRAME AND LINC00518, SUPERFICIAL COLLECTION USING ADHESIVE PATCH(ES)
HMSAAA	Q3 2025	Other	0101U		CPT	HEREDITARY COLON CANCER DISORDERS (EG, LYNCH SYNDROME, PTEN HAMARTOMA SYNDROME, COWDEN SYNDROME, FAMILIAL ADENOMATOSIS POLYPOSIS), GENOMIC SE
HMSAAA	Q3 2025	Other	0102U		CPT	HEREDITARY BREAST CANCER-RELATED DISORDERS (EG, HEREDITARY BREAST CANCER, HEREDITARY OVARIAN CANCER, HEREDITARY ENDOMETRIAL CANCER), GENOMIC SEQU
HMSAAA	Q3 2025	Other	0103U		CPT	HEREDITARY OVARIAN CANCER (EG, HEREDITARY OVARIAN CANCER, HEREDITARY ENDOMETRIAL CANCER), GENOMIC SEQUENCE ANALYSIS PANEL UTILIZING A COMBINATION
HMSAAA	Q3 2025	Other	0111U		CPT	ONCOLOGY (COLON CANCER), TARGETED KRAS (CODONS 12, 13, AND 61) AND NRAS (CODONS 12, 13, AND 61) GENE ANALYSIS UTILIZING FORMALIN-FIXED PARAFFIN-EMBED
HMSAAA	Q3 2025	Other	0118U		CPT	TRANSPLANTATION MEDICINE, QUANTIFICATION OF DONOR-DERIVED CELL-FREE DNA USING WHOLE GENOME NEXT-GENERATION SEQUENCING, PLASMA, REPORTED AS PERC
HMSAAA	Q3 2025	Other	0129U		CPT	HEREDITARY BREAST CANCER–RELATED DISORDERS (EG, HEREDITARY BREAST CANCER, HEREDITARY OVARIAN CANCER, HEREDITARY ENDOMETRIAL CANCER), GENOMIC SEQU
HMSAAA	Q3 2025	Other	0155U		CPT	ONCOLOGY (BREAST CANCER), DNA, PIK3CA (PHOSPHATIDYLINOSITOL-4,5-BISPHOSPHATE 3-KINASE, CATALYTIC SUBUNIT ALPHA) (EG, BREAST CANCER) GENE ANALYSIS (IE, F
HMSAAA	Q3 2025	Other	0169U		CPT	NUDT15 (NUDIX HYDROLASE 15) AND TPMT (THIOPURINE S-METHYLTRANSFERASE) (EG, DRUG METABOLISM) GENE ANALYSIS, COMMON VARIANTS
HMSAAA	Q3 2025	Other	0171U		CPT	TARGETED GENOMIC SEQUENCE ANALYSIS PANEL, ACUTE MYELOID LEUKEMIA, MYELODYSPLASTIC SYNDROME, AND MYELOPROLIFERATIVE NEOPLASMS, DNA ANALYSIS, 23 GE
HMSAAA	Q3 2025	Other	0172U		CPT	ONCOLOGY (SOLID TUMOR AS INDICATED BY THE LABEL), SOMATIC MUTATION ANALYSIS OF BRCA1 (BRCA1, DNA REPAIR ASSOCIATED), BRCA2 (BRCA2, DNA REPAIR ASSOCIATI
HMSAAA	Q3 2025	Other	0177U		CPT	ONCOLOGY (BREAST CANCER), DNA, PIK3CA (PHOSPHATIDYLINOSITOL-4,5-BISPHOSPHATE 3- KINASE CATALYTIC SUBUNIT ALPHA) GENE ANALYSIS OF 11 GENE VARIANTS UTIL
HMSAAA	Q3 2025	Other	0179U		CPT	ONCOLOGY (NON-SMALL CELL LUNG CANCER), CELL-FREE DNA, TARGETED SEQUENCE ANALYSIS OF 23 GENES (SINGLE NUCLEOTIDE VARIATIONS, INSERTIONS AND DELETION
HMSAAA	Q3 2025	Other	0180U		CPT	RED CELL ANTIGEN (ABO BLOOD GROUP) GENOTYPING (ABO), GENE ANALYSIS SANGER/CHAIN TERMINATION/CONVENTIONAL SEQUENCING, ABO (ABO, ALPHA 1-3-N- ACETYL
HMSAAA	Q3 2025	Other	0181U		CPT	RED CELL ANTIGEN (COLTON BLOOD GROUP) GENOTYPING (CO), GENE ANALYSIS, AQP1 (AQUAPORIN 1 [COLTON BLOOD GROUP]) EXON 1
HMSAAA	Q3 2025	Other	0182U		CPT	RED CELL ANTIGEN (CROMER BLOOD GROUP) GENOTYPING (CROM), GENE ANALYSIS, CD55 (CD55 MOLECULE [CROMER BLOOD GROUP]) EXONS 1-10
HMSAAA	Q3 2025	Other	0183U		CPT	RED CELL ANTIGEN (DIEGO BLOOD GROUP) GENOTYPING (DI), GENE ANALYSIS, SLC4A1 (SOLUTE CARRIER FAMILY 4 MEMBER 1 [DIEGO BLOOD GROUP]) EXON 19
HMSAAA	Q3 2025	Other	0184U		CPT	RED CELL ANTIGEN (DOMBROCK BLOOD GROUP) GENOTYPING (DO), GENE ANALYSIS, ART4 (ADP-RIBOSYLTRANSFERASE 4 [DOMBROCK BLOOD GROUP]) EXON 2
HMSAAA	Q3 2025	Other	0185U		CPT	RED CELL ANTIGEN (H BLOOD GROUP) GENOTYPING (FUT1), GENE ANALYSIS, FUT1 (FUCOSYLTRANSFERASE 1 [H BLOOD GROUP]) EXON 4
HMSAAA	Q3 2025	Other	0186U		CPT	RED CELL ANTIGEN (H BLOOD GROUP) GENOTYPING (FUT2), GENE ANALYSIS, FUT2 (FUCOSYLTRANSFERASE 2) EXON 2
HMSAAA	Q3 2025	Other	0187U		CPT	RED CELL ANTIGEN (DUFFY BLOOD GROUP) GENOTYPING (FY), GENE ANALYSIS, ACKR1 (ATYPICAL CHEMOKINE RECEPTOR 1 [DUFFY BLOOD GROUP]) EXONS 1-2
HMSAAA	Q3 2025	Other	0188U		CPT	RED CELL ANTIGEN (GERBICH BLOOD GROUP) GENOTYPING (GE), GENE ANALYSIS, GYPC (GLYCOPHORIN C [GERBICH BLOOD GROUP]) EXONS 1-4
HMSAAA	Q3 2025	Other	0189U		CPT	RED CELL ANTIGEN (MNS BLOOD GROUP) GENOTYPING (GYPA), GENE ANALYSIS, GYPA (GLYCOPHORIN A [MNS BLOOD GROUP]) INTRONS 1, 5, EXON 2
HMSAAA	Q3 2025	Other	0190U		CPT	RED CELL ANTIGEN (MNS BLOOD GROUP) GENOTYPING (GYPB), GENE ANALYSIS, GYPB (GLYCOPHORIN B [MNS BLOOD GROUP]) INTRONS 1, 5, PSEUDOEXON 3
HMSAAA	Q3 2025	Other	0191U		CPT	RED CELL ANTIGEN (INDIAN BLOOD GROUP) GENOTYPING (IN), GENE ANALYSIS, CD44 (CD44 MOLECULE [INDIAN BLOOD GROUP]) EXONS 2, 3, 6
HMSAAA	Q3 2025	Other	0192U		CPT	RED CELL ANTIGEN (KIDD BLOOD GROUP) GENOTYPING (JK), GENE ANALYSIS, SLC14A1 (SOLUTE CARRIER FAMILY 14 MEMBER 1 [KIDD BLOOD GROUP]) GENE PROMOTER, EXON
HMSAAA	Q3 2025	Other	0193U		CPT	RED CELL ANTIGEN (JR BLOOD GROUP) GENOTYPING (JR), GENE ANALYSIS, ABCG2 (ATP BINDING CASSETTE SUBFAMILY G MEMBER 2 [JUNIOR BLOOD GROUP]) EXONS 2- 26
HMSAAA	Q3 2025	Other	0194U		CPT	RED CELL ANTIGEN (KELL BLOOD GROUP) GENOTYPING (KEL), GENE ANALYSIS, KEL (KELL METALLO-ENDOPEPTIDASE [KELL BLOOD GROUP]) EXON 8

HMSAAA	Q3 2025	Other	0195U	CPT	KLF1 (KRUPPEL-LIKE FACTOR 1), TARGETED SEQUENCING (IE, EXON 13)
HMSAAA	Q3 2025	Other	0196U	CPT	RED CELL ANTIGEN (LUTHERAN BLOOD GROUP) GENOTYPING (LU), GENE ANALYSIS, BCAM (BASAL CELL ADHESION MOLECULE [LUTHERAN BLOOD GROUP]) EXON 3
HMSAAA	Q3 2025	Other	0197U	CPT	RED CELL ANTIGEN (LANDSTEINER-WIENER BLOOD GROUP) GENOTYPING (LW), GENE ANALYSIS, ICAM4 (INTERCELLULAR ADHESION MOLECULE 4 [LANDSTEINER-WIENER BLO
HMSAAA	Q3 2025	Other	0198U	CPT	RED CELL ANTIGEN (RH BLOOD GROUP) GENOTYPING (RHD AND RHCE), GENE ANALYSIS SANGER/CHAIN TERMINATION/CONVENTIONAL SEQUENCING, RHD (RH BLOOD GROU
HMSAAA	Q3 2025	Other	0199U	CPT	RED CELL ANTIGEN (SCIANNA BLOOD GROUP) GENOTYPING (SC), GENE ANALYSIS, ERMAP (ERYTHROBLAST MEMBRANE ASSOCIATED PROTEIN [SCIANNA BLOOD GROUP]) EXON
HMSAAA	Q3 2025	Other	0200U	CPT	RED CELL ANTIGEN (KX BLOOD GROUP) GENOTYPING (XK), GENE ANALYSIS, XK (X- LINKED KX BLOOD GROUP) EXONS 1-3
HMSAAA	Q3 2025	Other	0201U	CPT	RED CELL ANTIGEN (YT BLOOD GROUP) GENOTYPING (YT), GENE ANALYSIS, ACHE (ACETYLCHOLINESTERASE [CARTWRIGHT BLOOD GROUP]) EXON 2
HMSAAA	Q3 2025	Other	0211U	CPT	ONCOLOGY (PAN-TUMOR), DNA AND RNA BY NEXT-GENERATION SEQUENCING, UTILIZING FORMALIN-FIXED PARAFFIN-EMBEDDED TISSUE, INTERPRETATIVE REPORT FOR SINGL
HMSAAA	Q3 2025	Other	0221U	CPT	RED CELL ANTIGEN (ABO BLOOD GROUP) GENOTYPING (ABO), GENE ANALYSIS, NEXT-GENERATION SEQUENCING, ABO (ABO, ALPHA 1-3-N-ACETYLGALACTOSAMINYLTRANSFE
HMSAAA	Q3 2025	Other	0222U	CPT	RED CELL ANTIGEN (RH BLOOD GROUP) GENOTYPING (RHD AND RHCE), GENE ANALYSIS, NEXT-GENERATION SEQUENCING, RH PROXIMAL PROMOTER, EXONS 1-10, PORTIONS
HMSAAA	Q3 2025	Other	0230U	CPT	AR (ANDROGEN RECEPTOR) (EG, SPINAL AND BULBAR MUSCULAR ATROPHY, KENNEDY DISEASE, X CHROMOSOME INACTIVATION), FULL SEQUENCE ANALYSIS, INCLUDING SMA
HMSAAA	Q3 2025	Other	0231U	CPT	CACNA1A (CALCIUM VOLTAGE-GATED CHANNEL SUBUNIT ALPHA 1A) (EG, SPINOCEREBELLAR ATAXIA), FULL GENE ANALYSIS, INCLUDING SMALL SEQUENCE CHANGES IN EXON
HMSAAA	Q3 2025	Other	0232U	CPT	CSTB (CYSTATIN B) (EG, PROGRESSIVE MYOCLONIC EPILEPSY TYPE 1A, UNVERRICHT-LUNDBORG DISEASE), FULL GENE ANALYSIS, INCLUDING SMALL SEQUENCE CHANGES IN
HMSAAA	Q3 2025	Other	0233U	CPT	FXN (FRATAXIN) (EG, FRIEDREICH ATAXIA), GENE ANALYSIS, INCLUDING SMALL SEQUENCE CHANGES IN EXONIC AND INTRONIC REGIONS, DELETIONS, DUPLICATIONS, SHORT
HMSAAA	Q3 2025	Other	0234U	CPT	MECP2 (METHYL CPG BINDING PROTEIN 2) (EG, RETT SYNDROME), FULL GENE ANALYSIS, INCLUDING SMALL SEQUENCE CHANGES IN EXONIC AND INTRONIC REGIONS, DELETI
HMSAAA	Q3 2025	Other	0235U	CPT	PTEN (PHOSPHATASE AND TENSIN HOMOLOG) (EG, COWDEN SYNDROME, PTEN HAMARTOMA TUMOR SYNDROME), FULL GENE ANALYSIS, INCLUDING SMALL SEQUENCE CHAN
HMSAAA	Q3 2025	Other	0236U	CPT	SMN1 (SURVIVAL OF MOTOR NEURON 1, TELOMERIC) AND SMN2 (SURVIVAL OF MOTOR NEURON 2, CENTROMERIC) (EG, SPINAL MUSCULAR ATROPHY) FULL GENE ANALYSIS, IN
HMSAAA	Q3 2025	Other	0237U	CPT	CARDIAC ION CHANNELOPATHIES (EG, BRUGADA SYNDROME, LONG QT SYNDROME, SHORT QT SYNDROME, CATECHOLAMINERGIC POLYMORPHIC VENTRICULAR TACHYCARD
HMSAAA	Q3 2025	Other	0238U	CPT	ONCOLOGY (LYNCH SYNDROME), GENOMIC DNA SEQUENCE ANALYSIS OF MLHI, MSH2, MSH6, PMS2, AND EPCAM, INCLUDING SMALL SEQUENCE CHANGES IN EXONIC AND IN
HMSAAA	Q3 2025	Other	0239U	CPT	TARGETED GENOMIC SEQUENCE ANALYSIS PANEL, SOLID ORGAN NEOPLASM, CELL-FREE DNA, ANALYSIS OF 311 OR MORE GENES, INTERROGATION FOR SEQUENCE VARIANTS
HMSAAA	Q3 2025	Other	0242U	CPT	TARGETED GENOMIC SEQUENCE ANALYSIS PANEL, SOLID ORGAN NEOPLASM, CELL-FREE CIRCULATING DNA ANALYSIS OF 55-74 GENES, INTERROGATION FOR SEQUENCE VAR
HMSAAA	Q3 2025	Other	0244U	CPT	ONCOLOGY (SOLID ORGAN), DNA, COMPREHENSIVE GENOMIC PROFILING, 257 GENES, INTERROGATION FOR SINGLE-NUCLEOTIDE VARIANTS, INSERTIONS/DELETIONS, COPY
HMSAAA	Q3 2025	Other	0245U	CPT	ONCOLOGY (THYROID), MUTATION ANALYSIS OF 10 GENES AND 37 RNA FUSIONS AND EXPRESSION OF 4 MRNA MARKERS USING NEXT-GENERATION SEQUENCING, FINE NEEDL
HMSAAA	Q3 2025	Other	0246U	CPT	RED BLOOD CELL ANTIGEN TYPING, DNA, GENOTYPING OF AT LEAST 16 BLOOD GROUPS WITH PHENOTYPE PREDICTION OF AT LEAST 51 RED BLOOD CELL ANTIGENS
HMSAAA	Q3 2025	Other	0250U	CPT	ONCOLOGY (SOLID ORGAN NEOPLASM), TARGETED GENOMIC SEQUENCE DNA ANALYSIS OF 505 GENES, INTERROGATION FOR SOMATIC ALTERATIONS (SNVS [SINGLE NUCLEO
HMSAAA	Q3 2025	Other	0252U	CPT	FETAL ANEUPLOIDY SHORT TANDEM–REPEAT COMPARATIVE ANALYSIS, FETAL DNA FROM PRODUCTS OF CONCEPTION, REPORTED AS NORMAL (EUPLOIDY), MONOSOMY, TRISO
HMSAAA	Q3 2025	Other	0268U	CPT	HEMATOLOGY (ATYPICAL HEMOLYTIC UREMIC SYNDROME [AHUS]), GENOMIC SEQUENCE ANALYSIS OF 15 GENES, BLOOD, BUCCAL SWAB, OR AMNIOTIC FLUID
HMSAAA	Q3 2025	Other	0269U	CPT	HEMATOLOGY (AUTOSOMAL DOMINANT CONGENITAL THROMBOCYTOPENIA), GENOMIC SEQUENCE ANALYSIS OF 22 GENES, BLOOD, BUCCAL SWAB, OR AMNIOTIC FLUID
HMSAAA	Q3 2025	Other	0270U	CPT	HEMATOLOGY (CONGENITAL COAGULATION DISORDERS), GENOMIC SEQUENCE ANALYSIS OF 20 GENES, BLOOD, BUCCAL SWAB, OR AMNIOTIC FLUID
HMSAAA	Q3 2025	Other	0271U	CPT	HEMATOLOGY (CONGENITAL NEUTROPENIA), GENOMIC SEQUENCE ANALYSIS OF 24 GENES, BLOOD, BUCCAL SWAB, OR AMNIOTIC FLUID
HMSAAA	Q3 2025	Other	0272U	CPT	HEMATOLOGY (GENETIC BLEEDING DISORDERS), GENOMIC SEQUENCE ANALYSIS OF 60 GENES AND DUPLICATION/DELETION OF PLAU, BLOOD, BUCCAL SWAB, OR AMNIOTIC
HMSAAA	Q3 2025	Other	0273U	CPT	HEMATOLOGY (GENETIC HYPERFIBRINOLYSIS, DELAYED BLEEDING), GENOMIC SEQUENCE ANALYSIS OF 8 GENES (F13A1, F13B, FGA, FGB, FGG, SERPINA1, SERPINE1, SERPINF
HMSAAA	Q3 2025	Other	0274U	CPT	HEMATOLOGY (GENETIC PLATELET DISORDERS), GENOMIC SEQUENCE ANALYSIS OF 62 GENES AND DUPLICATION/DELETION OF PLAU, BLOOD, BUCCAL SWAB, OR AMNIOTIC F
HMSAAA	Q3 2025	Other	0276U	CPT	HEMATOLOGY (INHERITED THROMBOCYTOPENIA), GENOMIC SEQUENCE ANALYSIS OF 42 GENES, BLOOD, BUCCAL SWAB, OR AMNIOTIC FLUID
HMSAAA	Q3 2025	Other	0277U	CPT	HEMATOLOGY (GENETIC PLATELET FUNCTION DISORDER), GENOMIC SEQUENCE ANALYSIS OF 40 GENES AND DUPLICATION/DELETION OF PLAU, BLOOD, BUCCAL SWAB, OR AM
HMSAAA	Q3 2025	Other	0282U	CPT	RED BLOOD CELL ANTIGEN TYPING, DNA, GENOTYPING OF 12 BLOOD GROUP SYSTEM GENES TO PREDICT 44 RED BLOOD CELL ANTIGEN PHENOTYPES
HMSAAA	Q3 2025	Other	0287U	CPT	ONCOLOGY (THYROID), DNA AND MRNA, NEXT-GENERATION SEQUENCING ANALYSIS OF 112 GENES, FINE NEEDLE ASPIRATE OR FORMALIN-FIXED PARAFFIN-EMBEDDED (FFPE
HMSAAA	Q3 2025	Other	0326U	CPT	TARGETED GENOMIC SEQUENCE ANALYSIS PANEL, SOLID ORGAN NEOPLASM, CELL-FREE CIRCULATING DNA ANALYSIS OF 83 OR MORE GENES, INTERROGATION FOR SEQUENC
HMSAAA	Q3 2025	Other		17380 CPT	ELECTROLYSIS EPILATION, EACH 30 MINUTES
HMSAAA	Q3 2025	Other		81120 CPT	IDH1 (ISOCITRATE DEHYDROGENASE 1 [NADP+], SOLUBLE) (EG, GLIOMA), COMMON VARIANTS (EG, R132H, R132C)
HMSAAA	Q3 2025	Other		81121 CPT	IDH2 (ISOCITRATE DEHYDROGENASE 2 [NADP+], MITOCHONDRIAL) (EG, GLIOMA), COMMON VARIANTS (EG, R140W, R172M)
HMSAAA	Q3 2025	Other		81161 CPT	DMD (DYSTROPHIN) (EG, DUCHENNE/BECKER MUSCULAR DYSTROPHY) DELETION ANALYSIS, AND DUPLICATION ANALYSIS, IF PERFORMED
HMSAAA	Q3 2025	Other		81162 CPT	BRCA1 (BRCA1, DNA REPAIR ASSOCIATED), BRCA2 (BRCA2, DNA REPAIR ASSOCIATED) (EG, HEREDITARY BREAST AND OVARIAN CANCER) GENE ANALYSIS; FULL SEQUENCE ANA
HMSAAA	Q3 2025	Other		81163 CPT	BRCA1 (BRCA1, DNA REPAIR ASSOCIATED), BRCA2 (BRCA2, DNA REPAIR ASSOCIATED) (EG, HEREDITARY BREAST AND OVARIAN CANCER) GENE ANALYSIS; FULL SEQUENCE ANA
HMSAAA	Q3 2025	Other		81164 CPT	BRCA1 (BRCA1, DNA REPAIR ASSOCIATED), BRCA2 (BRCA2, DNA REPAIR ASSOCIATED) (EG, HEREDITARY BREAST AND OVARIAN CANCER) GENE ANALYSIS; FULL DUPLICATION/D
HMSAAA	Q3 2025	Other		81165 CPT	BRCA1 (BRCA1, DNA REPAIR ASSOCIATED) (EG, HEREDITARY BREAST AND OVARIAN CANCER) GENE ANALYSIS; FULL SEQUENCE ANALYSIS
HMSAAA	Q3 2025	Other		81166 CPT	BRCA1 (BRCA1, DNA REPAIR ASSOCIATED) (EG, HEREDITARY BREAST AND OVARIAN CANCER) GENE ANALYSIS; FULL DUPLICATION/DELETION ANALYSIS (IE, DETECTION OF LARG
HMSAAA	Q3 2025	Other		81167 CPT	BRCA2 (BRCA2, DNA REPAIR ASSOCIATED) (EG, HEREDITARY BREAST AND OVARIAN CANCER) GENE ANALYSIS; FULL DUPLICATION/DELETION ANALYSIS (IE, DETECTION OF LARG
HMSAAA	Q3 2025	Other		81168 CPT	CCND1/IGH (T(11;14)) (EG, MANTLE CELL LYMPHOMA) TRANSLOCATION ANALYSIS, MAJOR BREAKPOINT, QUALITATIVE AND QUANTITATIVE, IF PERFORMED
HMSAAA	Q3 2025	Other		81170 CPT	ABL1 (ABL PROTO-ONCOGENE 1, NON-RECEPTOR TYROSINE KINASE) (EG, ACQUIRED IMATINIB TYROSINE KINASE INHIBITOR RESISTANCE), GENE ANALYSIS, VARIANTS IN THE KI
HMSAAA	Q3 2025	Other		81171 CPT	AFF2 (ALF TRANSCRIPTION ELONGATION FACTOR 2 [FMR2]) (EG, FRAGILE X INTELLECTUAL DISABILITY 2 [FRAXE]) GENE ANALYSIS; EVALUATION TO DETECT ABNORMAL (EG, EXP
HMSAAA	Q3 2025	Other		81172 CPT	AFF2 (ALF TRANSCRIPTION ELONGATION FACTOR 2 [FMR2]) (EG, FRAGILE X INTELLECTUAL DISABILITY 2 [FRAXE]) GENE ANALYSIS; CHARACTERIZATION OF ALLELES (EG, EXPAND
HMSAAA	Q3 2025	Other		81173 CPT	AR (ANDROGEN RECEPTOR) (EG, SPINAL AND BULBAR MUSCULAR ATROPHY, KENNEDY DISEASE, X CHROMOSOME INACTIVATION) GENE ANALYSIS; FULL GENE SEQUENCE
HMSAAA	Q3 2025	Other		81175 CPT	ASXL1 (ADDITIONAL SEX COMBS LIKE 1, TRANSCRIPTIONAL REGULATOR) (EG, MYELODYSPLASTIC SYNDROME, MYELOPROLIFERATIVE NEOPLASMS, CHRONIC MYELOMONOCYT
HMSAAA	Q3 2025	Other		81176 CPT	ASXL1 (ADDITIONAL SEX COMBS LIKE 1, TRANSCRIPTIONAL REGULATOR) (EG, MYELODYSPLASTIC SYNDROME, MYELOPROLIFERATIVE NEOPLASMS, CHRONIC MYELOMONOCYT
HMSAAA	Q3 2025	Other		81177 CPT	ATN1 (ATROPHIN 1) (EG, DENTATORUBRAL-PALLIDOLUYSIAN ATROPHY) GENE ANALYSIS, EVALUATION TO DETECT ABNORMAL (EG, EXPANDED) ALLELES
HMSAAA	Q3 2025	Other		81178 CPT	ATXN1 (ATAXIN 1) (EG, SPINOCEREBELLAR ATAXIA) GENE ANALYSIS, EVALUATION TO DETECT ABNORMAL (EG, EXPANDED) ALLELES
HMSAAA	Q3 2025	Other		81179 CPT	ATXN2 (ATAXIN 2) (EG, SPINOCEREBELLAR ATAXIA) GENE ANALYSIS, EVALUATION TO DETECT ABNORMAL (EG, EXPANDED) ALLELES
HMSAAA	Q3 2025	Other		81180 CPT	ATXN3 (ATAXIN 3) (EG, SPINOCEREBELLAR ATAXIA, MACHADO-JOSEPH DISEASE) GENE ANALYSIS, EVALUATION TO DETECT ABNORMAL (EG, EXPANDED) ALLELES
HMSAAA	Q3 2025	Other		81181 CPT	ATXN7 (ATAXIN 7) (EG, SPINOCEREBELLAR ATAXIA) GENE ANALYSIS, EVALUATION TO DETECT ABNORMAL (EG, EXPANDED) ALLELES
HMSAAA	Q3 2025	Other		81182 CPT	ATXN8OS (ATXN8 OPPOSITE STRAND [NON-PROTEIN CODING]) (EG, SPINOCEREBELLAR ATAXIA) GENE ANALYSIS, EVALUATION TO DETECT ABNORMAL (EG, EXPANDED) ALLELES
HMSAAA	Q3 2025	Other		81183 CPT	ATXN10 (ATAXIN 10) (EG, SPINOCEREBELLAR ATAXIA) GENE ANALYSIS, EVALUATION TO DETECT ABNORMAL (EG, EXPANDED) ALLELES
HMSAAA	Q3 2025	Other		81184 CPT	CACNA1A (CALCIUM VOLTAGE-GATED CHANNEL SUBUNIT ALPHA1 A) (EG, SPINOCEREBELLAR ATAXIA) GENE ANALYSIS; EVALUATION TO DETECT ABNORMAL (EG, EXPANDED) AL
HMSAAA	Q3 2025	Other		81185 CPT	CACNA1A (CALCIUM VOLTAGE-GATED CHANNEL SUBUNIT ALPHA1 A) (EG, SPINOCEREBELLAR ATAXIA) GENE ANALYSIS; FULL GENE SEQUENCE
HMSAAA	Q3 2025	Other		81187 CPT	CNBP (CCHC-TYPE ZINC FINGER NUCLEIC ACID BINDING PROTEIN) (EG, MYOTONIC DYSTROPHY TYPE 2) GENE ANALYSIS, EVALUATION TO DETECT ABNORMAL (EG, EXPANDED)
HMSAAA	Q3 2025	Other		81188 CPT	CSTB (CYSTATIN B) (EG, UNVERRICHT-LUNDBORG DISEASE) GENE ANALYSIS; EVALUATION TO DETECT ABNORMAL (EG, EXPANDED) ALLELES
HMSAAA	Q3 2025	Other		81189 CPT	CSTB (CYSTATIN B) (EG, UNVERRICHT-LUNDBORG DISEASE) GENE ANALYSIS; FULL GENE SEQUENCE
HMSAAA	Q3 2025	Other		81190 CPT	CSTB (CYSTATIN B) (EG, UNVERRICHT-LUNDBORG DISEASE) GENE ANALYSIS; KNOWN FAMILIAL VARIANT(S)
HMSAAA	Q3 2025	Other		81191 CPT	NTRK1 (NEUROTROPHIC RECEPTOR TYROSINE KINASE 1) (EG, SOLID TUMORS) TRANSLOCATION ANALYSIS
HMSAAA	Q3 2025	Other		81192 CPT	NTRK2 (NEUROTROPHIC RECEPTOR TYROSINE KINASE 2) (EG, SOLID TUMORS) TRANSLOCATION ANALYSIS
HMSAAA	Q3 2025	Other		81193 CPT	NTRK3 (NEUROTROPHIC RECEPTOR TYROSINE KINASE 3) (EG, SOLID TUMORS) TRANSLOCATION ANALYSIS
HMSAAA	Q3 2025	Other		81194 CPT	NTRK (NEUROTROPHIC RECEPTOR TYROSINE KINASE 1, 2, AND 3) (EG, SOLID TUMORS) TRANSLOCATION ANALYSIS
HMSAAA	Q3 2025	Other		81200 CPT	ASPA (ASPARTOACYLASE) (EG, CANAVAN DISEASE) GENE ANALYSIS, COMMON VARIANTS (EG, E285A, Y231X)
HMSAAA	Q3 2025	Other		81201 CPT	APC (ADENOMATOUS POLYPOSIS COLI) (EG, FAMILIAL ADENOMATOSIS POLYPOSIS [FAP], ATTENUATED FAP) GENE ANALYSIS; FULL GENE SEQUENCE
HMSAAA	Q3 2025	Other		81202 CPT	APC (ADENOMATOUS POLYPOSIS COLI) (EG, FAMILIAL ADENOMATOSIS POLYPOSIS [FAP], ATTENUATED FAP) GENE ANALYSIS; KNOWN FAMILIAL VARIANTS
HMSAAA	Q3 2025	Other		81203 CPT	APC (ADENOMATOUS POLYPOSIS COLI) (EG, FAMILIAL ADENOMATOSIS POLYPOSIS [FAP], ATTENUATED FAP) GENE ANALYSIS; DUPLICATION/DELETION VARIANTS
HMSAAA	Q3 2025	Other		81204 CPT	AR (ANDROGEN RECEPTOR) (EG, SPINAL AND BULBAR MUSCULAR ATROPHY, KENNEDY DISEASE, X CHROMOSOME INACTIVATION) GENE ANALYSIS; CHARACTERIZATION OF ALL
HMSAAA	Q3 2025	Other		81205 CPT	BCKDHB (BRANCHED-CHAIN KETO ACID DEHYDROGENASE E1, BETA POLYPEPTIDE) (EG, MAPLE SYRUP URINE DISEASE) GENE ANALYSIS, COMMON VARIANTS (EG, R183P, G278
HMSAAA	Q3 2025	Other		81206 CPT	BCR/ABL1 (T(9;22)) (EG, CHRONIC MYELOGENOUS LEUKEMIA) TRANSLOCATION ANALYSIS; MAJOR BREAKPOINT, QUALITATIVE OR QUANTITATIVE
HMSAAA	Q3 2025	Other		81207 CPT	BCR/ABL1 (T(9;22)) (EG, CHRONIC MYELOGENOUS LEUKEMIA) TRANSLOCATION ANALYSIS; MINOR BREAKPOINT, QUALITATIVE OR QUANTITATIVE
HMSAAA	Q3 2025	Other		81208 CPT	BCR/ABL1 (T(9;22)) (EG, CHRONIC MYELOGENOUS LEUKEMIA) TRANSLOCATION ANALYSIS; OTHER BREAKPOINT, QUALITATIVE OR QUANTITATIVE
HMSAAA	Q3 2025	Other		81209 CPT	BLM (BLOOM SYNDROME, RECQ HELICASE-LIKE) (EG, BLOOM SYNDROME) GENE ANALYSIS, 2281DEL6INS7 VARIANT
HMSAAA	Q3 2025	Other		81210 CPT	BRAF (B-RAF PROTO-ONCOGENE, SERINE/THREONINE KINASE) (EG, COLON CANCER, MELANOMA), GENE ANALYSIS, V600 VARIANT(S)
HMSAAA	Q3 2025	Other		81212 CPT	BRCA1 (BRCA1, DNA REPAIR ASSOCIATED), BRCA2 (BRCA2, DNA REPAIR ASSOCIATED) (EG, HEREDITARY BREAST AND OVARIAN CANCER) GENE ANALYSIS; 185DELAG, 5385INSC
HMSAAA	Q3 2025	Other		81215 CPT	BRCA1 (BRCA1, DNA REPAIR ASSOCIATED) (EG, HEREDITARY BREAST AND OVARIAN CANCER) GENE ANALYSIS; KNOWN FAMILIAL VARIANT
HMSAAA	Q3 2025	Other		81216 CPT	BRCA2 (BRCA2, DNA REPAIR ASSOCIATED) (EG, HEREDITARY BREAST AND OVARIAN CANCER) GENE ANALYSIS; FULL SEQUENCE ANALYSIS
HMSAAA	Q3 2025	Other		81217 CPT	BRCA2 (BRCA2, DNA REPAIR ASSOCIATED) (EG, HEREDITARY BREAST AND OVARIAN CANCER) GENE ANALYSIS; KNOWN FAMILIAL VARIANT
HMSAAA	Q3 2025	Other		81218 CPT	CEBPA (CCAAT/ENHANCER BINDING PROTEIN [C/EBP], ALPHA) (EG, ACUTE MYELOID LEUKEMIA), GENE ANALYSIS, FULL GENE SEQUENCE
HMSAAA	Q3 2025	Other		81219 CPT	CALR (CALRETICULIN) (EG, MYELOPROLIFERATIVE DISORDERS), GENE ANALYSIS, COMMON VARIANTS IN EXON 9
HMSAAA	Q3 2025	Other		81220 CPT	CFTR (CYSTIC FIBROSIS TRANSMEMBRANE CONDUCTANCE REGULATOR) (EG, CYSTIC FIBROSIS) GENE ANALYSIS; COMMON VARIANTS (EG, ACMG/ACOG GUIDELINES)
HMSAAA	Q3 2025	Other		81221 CPT	CFTR (CYSTIC FIBROSIS TRANSMEMBRANE CONDUCTANCE REGULATOR) (EG, CYSTIC FIBROSIS) GENE ANALYSIS; KNOWN FAMILIAL VARIANTS
HMSAAA	Q3 2025	Other		81222 CPT	CFTR (CYSTIC FIBROSIS TRANSMEMBRANE CONDUCTANCE REGULATOR) (EG, CYSTIC FIBROSIS) GENE ANALYSIS; DUPLICATION/DELETION VARIANTS
HMSAAA	Q3 2025	Other		81223 CPT	CFTR (CYSTIC FIBROSIS TRANSMEMBRANE CONDUCTANCE REGULATOR) (EG, CYSTIC FIBROSIS) GENE ANALYSIS; FULL GENE SEQUENCE

HMSAAA	Q3 2025	Other	81224	CPT
HMSAAA	Q3 2025	Other	81225	CPT
HMSAAA	Q3 2025	Other	81226	CPT
HMSAAA	Q3 2025	Other	81227	CPT
HMSAAA	Q3 2025	Other	81228	CPT
HMSAAA	Q3 2025	Other	81229	CPT
HMSAAA	Q3 2025	Other	81231	CPT
HMSAAA	Q3 2025	Other	81232	CPT
HMSAAA	Q3 2025	Other	81233	CPT
HMSAAA	Q3 2025	Other	81234	CPT
HMSAAA	Q3 2025	Other	81235	CPT
HMSAAA	Q3 2025	Other	81236	CPT
HMSAAA	Q3 2025	Other	81237	CPT
HMSAAA	Q3 2025	Other	81238	CPT
HMSAAA	Q3 2025	Other	81239	CPT
HMSAAA	Q3 2025	Other	81240	CPT
HMSAAA	Q3 2025	Other	81241	CPT
HMSAAA	Q3 2025	Other	81242	CPT
HMSAAA	Q3 2025	Other	81243	CPT
HMSAAA	Q3 2025	Other	81244	CPT
HMSAAA	Q3 2025	Other	81245	CPT
HMSAAA	Q3 2025	Other	81246	CPT
HMSAAA	Q3 2025	Other	81247	CPT
HMSAAA	Q3 2025	Other	81249	CPT
HMSAAA	Q3 2025	Other	81250	CPT
HMSAAA	Q3 2025	Other	81251	CPT
HMSAAA	Q3 2025	Other	81252	CPT
HMSAAA	Q3 2025	Other	81254	CPT
HMSAAA	Q3 2025	Other	81255	CPT
HMSAAA	Q3 2025	Other	81256	CPT
HMSAAA	Q3 2025	Other	81257	CPT
HMSAAA	Q3 2025	Other	81259	CPT
HMSAAA	Q3 2025	Other	81260	CPT
HMSAAA	Q3 2025	Other	81265	CPT
HMSAAA	Q3 2025	Other	81266	CPT
HMSAAA	Q3 2025	Other	81269	CPT
HMSAAA	Q3 2025	Other	81270	CPT
HMSAAA	Q3 2025	Other	81271	CPT
HMSAAA	Q3 2025	Other	81272	CPT
HMSAAA	Q3 2025	Other	81273	CPT
HMSAAA	Q3 2025	Other	81274	CPT
HMSAAA	Q3 2025	Other	81275	CPT
HMSAAA	Q3 2025	Other	81276	CPT
HMSAAA	Q3 2025	Other	81277	CPT
HMSAAA	Q3 2025	Other	81278	CPT
HMSAAA	Q3 2025	Other	81279	CPT
HMSAAA	Q3 2025	Other	81283	CPT
HMSAAA	Q3 2025	Other	81284	CPT
HMSAAA	Q3 2025	Other	81285	CPT
HMSAAA	Q3 2025	Other	81286	CPT
HMSAAA	Q3 2025	Other	81287	CPT
HMSAAA	Q3 2025	Other	81288	CPT
HMSAAA	Q3 2025	Other	81290	CPT
HMSAAA	Q3 2025	Other	81292	CPT
HMSAAA	Q3 2025	Other	81293	CPT
HMSAAA	Q3 2025	Other	81294	CPT
HMSAAA	Q3 2025	Other	81295	CPT
HMSAAA	Q3 2025	Other	81296	CPT
HMSAAA	Q3 2025	Other	81297	CPT
HMSAAA	Q3 2025	Other	81298	CPT
HMSAAA	Q3 2025	Other	81299	CPT
HMSAAA	Q3 2025	Other	81300	CPT
HMSAAA	Q3 2025	Other	81301	CPT
HMSAAA	Q3 2025	Other	81302	CPT
HMSAAA	Q3 2025	Other	81304	CPT
HMSAAA	Q3 2025	Other	81305	CPT
HMSAAA	Q3 2025	Other	81306	CPT
HMSAAA	Q3 2025	Other	81307	CPT
HMSAAA	Q3 2025	Other	81308	CPT
HMSAAA	Q3 2025	Other	81309	CPT
HMSAAA	Q3 2025	Other	81310	CPT
HMSAAA	Q3 2025	Other	81311	CPT
HMSAAA	Q3 2025	Other	81312	CPT
HMSAAA	Q3 2025	Other	81314	CPT
HMSAAA	Q3 2025	Other	81315	CPT
HMSAAA	Q3 2025	Other	81316	CPT
HMSAAA	Q3 2025	Other	81317	CPT
HMSAAA	Q3 2025	Other	81318	CPT
HMSAAA	Q3 2025	Other	81319	CPT
HMSAAA	Q3 2025	Other	81320	CPT
HMSAAA	Q3 2025	Other	81321	CPT
HMSAAA	Q3 2025	Other	81322	CPT
HMSAAA	Q3 2025	Other	81323	CPT
HMSAAA	Q3 2025	Other	81324	CPT
HMSAAA	Q3 2025	Other	81325	CPT
HMSAAA	Q3 2025	Other	81328	CPT
HMSAAA	Q3 2025	Other	81329	CPT
HMSAAA	Q3 2025	Other	81330	CPT
HMSAAA	Q3 2025	Other	81331	CPT
HMSAAA	Q3 2025	Other	81333	CPT
HMSAAA	Q3 2025	Other	81334	CPT
HMSAAA	Q3 2025	Other	81335	CPT
HMSAAA	Q3 2025	Other	81336	CPT

CFTR (CYSTIC FIBROSIS TRANSMEMBRANE CONDUCTANCE REGULATOR) (EG, CYSTIC FIBROSIS) GENE ANALYSIS; INTRON 8 POLY-T ANALYSIS (EG, MALE INFERTILITY)
CYP2C19 (CYTOCHROME P450, FAMILY 2, SUBFAMILY C, POLYPEPTIDE 19) (EG, DRUG METABOLISM), GENE ANALYSIS, COMMON VARIANTS (EG, *2, *3, *4, *8, *17)
CYP2D6 (CYTOCHROME P450, FAMILY 2, SUBFAMILY D, POLYPEPTIDE 6) (EG, DRUG METABOLISM), GENE ANALYSIS, COMMON VARIANTS (EG, *2, *3, *4, *5, *6, *9, *10, *17, *1
CYP2C9 (CYTOCHROME P450, FAMILY 2, SUBFAMILY C, POLYPEPTIDE 9) (EG, DRUG METABOLISM), GENE ANALYSIS, COMMON VARIANTS (EG, *2, *3, *5, *6)
CYTOGENOMIC (GENOME-WIDE) ANALYSIS FOR CONSTITUTIONAL CHROMOSOMAL ABNORMALITIES; INTERROGATION OF GENOMIC REGIONS FOR COPY NUMBER VARIANTS, C
CYTOGENOMIC (GENOME-WIDE) ANALYSIS FOR CONSTITUTIONAL CHROMOSOMAL ABNORMALITIES; INTERROGATION OF GENOMIC REGIONS FOR COPY NUMBER AND SINGLE
CYP3A5 (CYTOCHROME P450 FAMILY 3 SUBFAMILY A MEMBER 5) (EG, DRUG METABOLISM), GENE ANALYSIS, COMMON VARIANTS (EG, *2, *3, *4, *5, *6, *7)
DPYD (DIHYDROPYRIMIDINE DEHYDROGENASE) (EG, 5-FLUOROURACIL/5-FU AND CAPECITABINE DRUG METABOLISM), GENE ANALYSIS, COMMON VARIANT(S) (EG, *2A, *4, *5,
BTK (BRUTON'S TYROSINE KINASE) (EG, CHRONIC LYMPHOCYTIC LEUKEMIA) GENE ANALYSIS, COMMON VARIANTS (EG, C481S, C481R, C481F)
DMPK (DM1 PROTEIN KINASE) (EG, MYOTONIC DYSTROPHY TYPE 1) GENE ANALYSIS; EVALUATION TO DETECT ABNORMAL (EXPANDED) ALLELES
EGFR (EPIDERMAL GROWTH FACTOR RECEPTOR) (EG, NON-SMALL CELL LUNG CANCER) GENE ANALYSIS, COMMON VARIANTS (EG, EXON 19 LREA DELETION, L858R, T790M, G7
EZH2 (ENHANCER OF ZESTE 2 POLYCOMB REPRESSIVE COMPLEX 2 SUBUNIT) (EG, MYELODYSPLASTIC SYNDROME, MYELOPROLIFERATIVE NEOPLASMS) GENE ANALYSIS, FULL
EZH2 (ENHANCER OF ZESTE 2 POLYCOMB REPRESSIVE COMPLEX 2 SUBUNIT) (EG, DIFFUSE LARGE B-CELL LYMPHOMA) GENE ANALYSIS, COMMON VARIANT(S) (EG, CODON 646
F9 (COAGULATION FACTOR IX) (EG, HEMOPHILIA B), FULL GENE SEQUENCE
DMPK (DM1 PROTEIN KINASE) (EG, MYOTONIC DYSTROPHY TYPE 1) GENE ANALYSIS; CHARACTERIZATION OF ALLELES (EG, EXPANDED SIZE)
F2 (PROTHROMBIN, COAGULATION FACTOR II) (EG, HEREDITARY HYPERCOAGULABILITY) GENE ANALYSIS, 20210G>A VARIANT
F5 (COAGULATION FACTOR V) (EG, HEREDITARY HYPERCOAGULABILITY) GENE ANALYSIS, LEIDEN VARIANT
FANCC (FANCONI ANEMIA, COMPLEMENTATION GROUP C) (EG, FANCONI ANEMIA, TYPE C) GENE ANALYSIS, COMMON VARIANT (EG, IVS4+4A>T)
FMR1 (FRAGILE X MESSENGER RIBONUCLEOPROTEIN 1) (EG, FRAGILE X SYNDROME, X-LINKED INTELLECTUAL DISABILITY [XLID]) GENE ANALYSIS; EVALUATION TO DETECT ABNO
FMR1 (FRAGILE X MESSENGER RIBONUCLEOPROTEIN 1) (EG, FRAGILE X SYNDROME, X-LINKED INTELLECTUAL DISABILITY [XLID]) GENE ANALYSIS; CHARACTERIZATION OF ALLEL
FLT3 (FMS-RELATED TYROSINE KINASE 3) (EG, ACUTE MYELOID LEUKEMIA), GENE ANALYSIS; INTERNAL TANDEM DUPLICATION (ITD) VARIANTS (IE, EXONS 14, 15)
FLT3 (FMS-RELATED TYROSINE KINASE 3) (EG, ACUTE MYELOID LEUKEMIA), GENE ANALYSIS; TYROSINE KINASE DOMAIN (TKD) VARIANTS (EG, D835, I836)
G6PD (GLUCOSE-6-PHOSPHATE DEHYDROGENASE) (EG, HEMOLYTIC ANEMIA, JAUNDICE), GENE ANALYSIS; COMMON VARIANT(S) (EG, A, A-)
G6PD (GLUCOSE-6-PHOSPHATE DEHYDROGENASE) (EG, HEMOLYTIC ANEMIA, JAUNDICE), GENE ANALYSIS; FULL GENE SEQUENCE
G6PC (GLUCOSE-6-PHOSPHATASE, CATALYTIC SUBUNIT) (EG, GLYCOGEN STORAGE DISEASE, TYPE 1A, VON GIERKE DISEASE) GENE ANALYSIS, COMMON VARIANTS (EG, R83C,
GBA (GLUCOSIDASE, BETA, ACID) (EG, GAUCHER DISEASE) GENE ANALYSIS, COMMON VARIANTS (EG, N370S, 84GG, L444P, IVS2+1G>A)
GJB2 (GAP JUNCTION PROTEIN, BETA 2, 26KDA, CONNEXIN 26) (EG, NONSYNDROMIC HEARING LOSS) GENE ANALYSIS; FULL GENE SEQUENCE
GJB6 (GAP JUNCTION PROTEIN, BETA 6, 30KDA, CONNEXIN 30) (EG, NONSYNDROMIC HEARING LOSS) GENE ANALYSIS, COMMON VARIANTS (EG, 309KB [DEL(GJB6-D13S1830)]
HEXA (HEXOSAMINIDASE A [ALPHA POLYPEPTIDE]) (EG, TAY-SACHS DISEASE) GENE ANALYSIS, COMMON VARIANTS (EG, 1278INSTATC, 1421+1G>C, G269S)
HFE (HEMOCHROMATOSIS) (EG, HEREDITARY HEMOCHROMATOSIS) GENE ANALYSIS, COMMON VARIANTS (EG, C282Y, H63D)
HBA1/HBA2 (ALPHA GLOBIN 1 AND ALPHA GLOBIN 2) (EG, ALPHA THALASSEMIA, HB BART HYDROPS FETALIS SYNDROME, HBH DISEASE), GENE ANALYSIS; COMMON DELETIONS
HBA1/HBA2 (ALPHA GLOBIN 1 AND ALPHA GLOBIN 2) (EG, ALPHA THALASSEMIA, HB BART HYDROPS FETALIS SYNDROME, HBH DISEASE), GENE ANALYSIS; FULL GENE SEQUENC
IKBKAP (INHIBITOR OF KAPPA LIGHT POLYPEPTIDE GENE ENHANCER IN B-CELLS, KINASE COMPLEX-ASSOCIATED PROTEIN) (EG, FAMILIAL DYSAUTONOMIA) GENE ANALYSIS, CO
COMPARATIVE ANALYSIS USING SHORT TANDEM REPEAT (STR) MARKERS; PATIENT AND COMPARATIVE SPECIMEN (EG, PRE-TRANSPLANT RECIPIENT AND DONOR GERMLINE TES
COMPARATIVE ANALYSIS USING SHORT TANDEM REPEAT (STR) MARKERS; EACH ADDITIONAL SPECIMEN (EG, ADDITIONAL CORD BLOOD DONOR, ADDITIONAL FETAL SAMPLES F
HBA1/HBA2 (ALPHA GLOBIN 1 AND ALPHA GLOBIN 2) (EG, ALPHA THALASSEMIA, HB BART HYDROPS FETALIS SYNDROME, HBH DISEASE), GENE ANALYSIS; DUPLICATION/DELETI
JAK2 (JANUS KINASE 2) (EG, MYELOPROLIFERATIVE DISORDER) GENE ANALYSIS, P.VAL617PHE (V617F) VARIANT
HTT (HUNTINGTIN) (EG, HUNTINGTON DISEASE) GENE ANALYSIS; EVALUATION TO DETECT ABNORMAL (EG, EXPANDED) ALLELES
KIT (V-KIT HARDY-ZUCKERMAN 4 FELINE SARCOMA VIRAL ONCOGENE HOMOLOG) (EG, GASTROINTESTINAL STROMAL TUMOR [GIST], ACUTE MYELOID LEUKEMIA, MELANOMA), C
KIT (V-KIT HARDY-ZUCKERMAN 4 FELINE SARCOMA VIRAL ONCOGENE HOMOLOG) (EG, MASTOCYTOSIS), GENE ANALYSIS, D816 VARIANT(S)
HTT (HUNTINGTIN) (EG, HUNTINGTON DISEASE) GENE ANALYSIS; CHARACTERIZATION OF ALLELES (EG, EXPANDED SIZE)
KRAS (KIRSTEN RAT SARCOMA VIRAL ONCOGENE HOMOLOG) (EG, CARCINOMA) GENE ANALYSIS; VARIANTS IN EXON 2 (EG, CODONS 12 AND 13)
KRAS (KIRSTEN RAT SARCOMA VIRAL ONCOGENE HOMOLOG) (EG, CARCINOMA) GENE ANALYSIS; ADDITIONAL VARIANT(S) (EG, CODON 61, CODON 146)
CYTOGENOMIC NEOPLASIA (GENOME-WIDE) MICROARRAY ANALYSIS, INTERROGATION OF GENOMIC REGIONS FOR COPY NUMBER AND LOSS-OF-HETEROZYGOSITY VARIANTS
IGH@/BCL2 (T(14;18)) (EG, FOLLICULAR LYMPHOMA) TRANSLOCATION ANALYSIS, MAJOR BREAKPOINT REGION (MBR) AND MINOR CLUSTER REGION (MCR) BREAKPOINTS, QUA
JAK2 (JANUS KINASE 2) (EG, MYELOPROLIFERATIVE DISORDER) TARGETED SEQUENCE ANALYSIS (EG, EXONS 12 AND 13)
IFNL3 (INTERFERON, LAMBDA 3) (EG, DRUG RESPONSE), GENE ANALYSIS, RS12979860 VARIANT
FXN (FRATAXIN) (EG, FRIEDREICH ATAXIA) GENE ANALYSIS; EVALUATION TO DETECT ABNORMAL (EXPANDED) ALLELES
FXN (FRATAXIN) (EG, FRIEDREICH ATAXIA) GENE ANALYSIS; CHARACTERIZATION OF ALLELES (EG, EXPANDED SIZE)
FXN (FRATAXIN) (EG, FRIEDREICH ATAXIA) GENE ANALYSIS; FULL GENE SEQUENCE
MGMT (O-6-METHYLGUANINE-DNA METHYLTRANSFERASE) (EG, GLIOBLASTOMA MULTIFORME) PROMOTER METHYLATION ANALYSIS
MLH1 (MUTL HOMOLOG 1, COLON CANCER, NONPOLYPOSIS TYPE 2) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANALYSIS; PROMOT
MCOLN1 (MUCOLIPIN 1) (EG, MUCOLIPIDOSIS, TYPE IV) GENE ANALYSIS, COMMON VARIANTS (EG, IVS3-2A>G, DEL6.4KB)
MLH1 (MUTL HOMOLOG 1, COLON CANCER, NONPOLYPOSIS TYPE 2) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANALYSIS; FULL SEQ
MLH1 (MUTL HOMOLOG 1, COLON CANCER, NONPOLYPOSIS TYPE 2) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANALYSIS; KNOWN
MLH1 (MUTL HOMOLOG 1, COLON CANCER, NONPOLYPOSIS TYPE 2) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANALYSIS; DUPLICA
MSH2 (MUTS HOMOLOG 2, COLON CANCER, NONPOLYPOSIS TYPE 1) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANALYSIS; FULL SEQ
MSH2 (MUTS HOMOLOG 2, COLON CANCER, NONPOLYPOSIS TYPE 1) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANALYSIS; KNOWN
MSH2 (MUTS HOMOLOG 2, COLON CANCER, NONPOLYPOSIS TYPE 1) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANALYSIS; DUPLICA
MSH6 (MUTS HOMOLOG 6 [E. COLI]) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANALYSIS; FULL SEQUENCE ANALYSIS
MSH6 (MUTS HOMOLOG 6 [E. COLI]) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANALYSIS; KNOWN FAMILIAL VARIANTS
MSH6 (MUTS HOMOLOG 6 [E. COLI]) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANALYSIS; DUPLICATION/DELETION VARIANTS
MICROSATELLITE INSTABILITY ANALYSIS (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) OF MARKERS FOR MISMATCH REPAIR DEFICIENCY (EG,
MECP2 (METHYL CPG BINDING PROTEIN 2) (EG, RETT SYNDROME) GENE ANALYSIS; FULL SEQUENCE ANALYSIS
MECP2 (METHYL CPG BINDING PROTEIN 2) (EG, RETT SYNDROME) GENE ANALYSIS; DUPLICATION/DELETION VARIANTS
MYD88 (MYELOID DIFFERENTIATION PRIMARY RESPONSE 88) (EG, WALDENSTROM'S MACROGLOBULINEMIA, LYMPHOPLASMACYTIC LEUKEMIA) GENE ANALYSIS, P.LEU265PRO
NUDT15 (NUDIX HYDROLASE 15) (EG, DRUG METABOLISM) GENE ANALYSIS, COMMON VARIANT(S) (EG, *2, *3, *4, *5, *6)
PALB2 (PARTNER AND LOCALIZER OF BRCA2) (EG, BREAST AND PANCREATIC CANCER) GENE ANALYSIS; FULL GENE SEQUENCE
PALB2 (PARTNER AND LOCALIZER OF BRCA2) (EG, BREAST AND PANCREATIC CANCER) GENE ANALYSIS; KNOWN FAMILIAL VARIANT
PIK3CA (PHOSPHATIDYLINOSITOL-4, 5-BIPHOSPHATE 3-KINASE, CATALYTIC SUBUNIT ALPHA) (EG, COLORECTAL AND BREAST CANCER) GENE ANALYSIS, TARGETED SEQUENCE
NPM1 (NUCLEOPHOSMIN) (EG, ACUTE MYELOID LEUKEMIA) GENE ANALYSIS, EXON 12 VARIANTS
NRAS (NEUROBLASTOMA RAS VIRAL [V-RAS] ONCOGENE HOMOLOG) (EG, COLORECTAL CARCINOMA), GENE ANALYSIS, VARIANTS IN EXON 2 (EG, CODONS 12 AND 13) AND EXO
PABPN1 (POLY[A] BINDING PROTEIN NUCLEAR 1) (EG, OCULOPHARYNGEAL MUSCULAR DYSTROPHY) GENE ANALYSIS, EVALUATION TO DETECT ABNORMAL (EG, EXPANDED) ALL
PDGFRA (PLATELET-DERIVED GROWTH FACTOR RECEPTOR, ALPHA POLYPEPTIDE) (EG, GASTROINTESTINAL STROMAL TUMOR [GIST]), GENE ANALYSIS, TARGETED SEQUENCE AN
PML/RARALPHA, (T(15;17)), (PROMYELOCYTIC LEUKEMIA/RETINOIC ACID RECEPTOR ALPHA) (EG, PROMYELOCYTIC LEUKEMIA) TRANSLOCATION ANALYSIS; COMMON BREAKPO
PML/RARALPHA, (T(15;17)), (PROMYELOCYTIC LEUKEMIA/RETINOIC ACID RECEPTOR ALPHA) (EG, PROMYELOCYTIC LEUKEMIA) TRANSLOCATION ANALYSIS; SINGLE BREAKPOIN
PMS2 (POSTMEIOTIC SEGREGATION INCREASED 2 [S. CEREVISIAE]) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANALYSIS; FULL SEQU
PMS2 (POSTMEIOTIC SEGREGATION INCREASED 2 [S. CEREVISIAE]) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANALYSIS; KNOWN FA
PMS2 (POSTMEIOTIC SEGREGATION INCREASED 2 [S. CEREVISIAE]) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANALYSIS; DUPLICATI
PLCG2 (PHOSPHOLIPASE C GAMMA 2) (EG, CHRONIC LYMPHOCYTIC LEUKEMIA) GENE ANALYSIS, COMMON VARIANTS (EG, R665W, S707F, L845F)
PTEN (PHOSPHATASE AND TENSIN HOMOLOG) (EG, COWDEN SYNDROME, PTEN HAMARTOMA TUMOR SYNDROME) GENE ANALYSIS; FULL SEQUENCE ANALYSIS
PTEN (PHOSPHATASE AND TENSIN HOMOLOG) (EG, COWDEN SYNDROME, PTEN HAMARTOMA TUMOR SYNDROME) GENE ANALYSIS; KNOWN FAMILIAL VARIANT
PTEN (PHOSPHATASE AND TENSIN HOMOLOG) (EG, COWDEN SYNDROME, PTEN HAMARTOMA TUMOR SYNDROME) GENE ANALYSIS; DUPLICATION/DELETION VARIANT
PMP22 (PERIPHERAL MYELIN PROTEIN 22) (EG, CHARCOT-MARIE-TOOTH, HEREDITARY NEUROPATHY WITH LIABILITY TO PRESSURE PALSIES) GENE ANALYSIS; DUPLICATION/DE
PMP22 (PERIPHERAL MYELIN PROTEIN 22) (EG, CHARCOT-MARIE-TOOTH, HEREDITARY NEUROPATHY WITH LIABILITY TO PRESSURE PALSIES) GENE ANALYSIS; FULL SEQUENCE A
SLCO1B1 (SOLUTE CARRIER ORGANIC ANION TRANSPORTER FAMILY, MEMBER 1B1) (EG, ADVERSE DRUG REACTION), GENE ANALYSIS, COMMON VARIANT(S) (EG, *5)
SMN1 (SURVIVAL OF MOTOR NEURON 1, TELOMERIC) (EG, SPINAL MUSCULAR ATROPHY) GENE ANALYSIS; DOSAGE/DELETION ANALYSIS (EG, CARRIER TESTING), INCLUDES SM
SMPD1 (SPHINGOMYELIN PHOSPHODIESTERASE 1, ACID LYSOSOMAL) (EG, NIEMANN-PICK DISEASE, TYPE A) GENE ANALYSIS, COMMON VARIANTS (EG, R496L, L302P, FSP330)
SNRPN/UBE3A (SMALL NUCLEAR RIBONUCLEOPROTEIN POLYPEPTIDE N AND UBIQUITIN PROTEIN LIGASE E3A) (EG, PRADER-WILLI SYNDROME AND/OR ANGELMAN SYNDROME
TGFBI (TRANSFORMING GROWTH FACTOR BETA-INDUCED) (EG, CORNEAL DYSTROPHY) GENE ANALYSIS, COMMON VARIANTS (EG, R124H, R124C, R124L, R555W, R555Q)
RUNX1 (RUNT RELATED TRANSCRIPTION FACTOR 1) (EG, ACUTE MYELOID LEUKEMIA, FAMILIAL PLATELET DISORDER WITH ASSOCIATED MYELOID MALIGNANCY) GENE ANALYSIS
TPMT (THIOPURINE S-METHYLTRANSFERASE) (EG, DRUG METABOLISM), GENE ANALYSIS, COMMON VARIANTS (EG, *2, *3)
SMN1 (SURVIVAL OF MOTOR NEURON 1, TELOMERIC) (EG, SPINAL MUSCULAR ATROPHY) GENE ANALYSIS; FULL GENE SEQUENCE

HMSAAA	Q3 2025	Other	81338	CPT	MPL (MPL PROTO-ONCOGENE, THROMBOPOIETIN RECEPTOR) (EG, MYELOPROLIFERATIVE DISORDER) GENE ANALYSIS; COMMON VARIANTS (EG, W515A, W515K, W515L, W515
HMSAAA	Q3 2025	Other	81339	CPT	MPL (MPL PROTO-ONCOGENE, THROMBOPOIETIN RECEPTOR) (EG, MYELOPROLIFERATIVE DISORDER) GENE ANALYSIS; SEQUENCE ANALYSIS, EXON 10
HMSAAA	Q3 2025	Other	81343	CPT	PPP2R2B (PROTEIN PHOSPHATASE 2 REGULATORY SUBUNIT BBETA) (EG, SPINOCEREBELLAR ATAXIA) GENE ANALYSIS, EVALUATION TO DETECT ABNORMAL (EG, EXPANDED) ALL
HMSAAA	Q3 2025	Other	81344	CPT	TBP (TATA BOX BINDING PROTEIN) (EG, SPINOCEREBELLAR ATAXIA) GENE ANALYSIS, EVALUATION TO DETECT ABNORMAL (EG, EXPANDED) ALLELES
HMSAAA	Q3 2025	Other	81345	CPT	TERT (TELOMERASE REVERSE TRANSCRIPTASE) (EG, THYROID CARCINOMA, GLIOBLASTOMA MULTIFORME) GENE ANALYSIS, TARGETED SEQUENCE ANALYSIS (EG, PROMOTER R
HMSAAA	Q3 2025	Other	81346	CPT	TYMS (THYMIDYLATE SYNTHETASE) (EG, 5-FLUOROURACIL/5-FU DRUG METABOLISM), GENE ANALYSIS, COMMON VARIANT(S) (EG, TANDEM REPEAT VARIANT)
HMSAAA	Q3 2025	Other	81347	CPT	SF3B1 (SPLICING FACTOR [3B] SUBUNIT B1) (EG, MYELODYSPLASTIC SYNDROME/ACUTE MYELOID LEUKEMIA) GENE ANALYSIS, COMMON VARIANTS (EG, A672T, E622D, L833F,
HMSAAA	Q3 2025	Other	81348	CPT	SRSF2 (SERINE AND ARGININE-RICH SPLICING FACTOR 2) (EG, MYELODYSPLASTIC SYNDROME, ACUTE MYELOID LEUKEMIA) GENE ANALYSIS, COMMON VARIANTS (EG, P95H, P9
HMSAAA	Q3 2025	Other	81349	CPT	CYTOGENOMIC (GENOME-WIDE) ANALYSIS FOR CONSTITUTIONAL CHROMOSOMAL ABNORMALITIES; INTERROGATION OF GENOMIC REGIONS FOR COPY NUMBER AND LOSS-O
HMSAAA	Q3 2025	Other	81350	CPT	UGT1A1 (UDP GLUCURONOSYLTRANSFERASE 1 FAMILY, POLYPEPTIDE A1) (EG, DRUG METABOLISM, HEREDITARY UNCONJUGATED HYPERBILIRUBINEMIA [GILBERT SYNDROME]
HMSAAA	Q3 2025	Other	81351	CPT	TP53 (TUMOR PROTEIN 53) (EG, LI-FRAUMENI SYNDROME) GENE ANALYSIS; FULL GENE SEQUENCE
HMSAAA	Q3 2025	Other	81352	CPT	TP53 (TUMOR PROTEIN 53) (EG, LI-FRAUMENI SYNDROME) GENE ANALYSIS; TARGETED SEQUENCE ANALYSIS (EG, 4 ONCOLOGY)
HMSAAA	Q3 2025	Other	81353	CPT	TP53 (TUMOR PROTEIN 53) (EG, LI-FRAUMENI SYNDROME) GENE ANALYSIS; KNOWN FAMILIAL VARIANT
HMSAAA	Q3 2025	Other	81355	CPT	VKORC1 (VITAMIN K EPOXIDE REDUCTASE COMPLEX, SUBUNIT 1) (EG, WARFARIN METABOLISM), GENE ANALYSIS, COMMON VARIANT(S) (EG, -1639G>A, C.173+1000C>T)
HMSAAA	Q3 2025	Other	81357	CPT	U2AF1 (U2 SMALL NUCLEAR RNA AUXILIARY FACTOR 1) (EG, MYELODYSPLASTIC SYNDROME, ACUTE MYELOID LEUKEMIA) GENE ANALYSIS, COMMON VARIANTS (EG, S34F, S34Y,
HMSAAA	Q3 2025	Other	81360	CPT	ZRSR2 (ZINC FINGER CCCH-TYPE, RNA BINDING MOTIF AND SERINE/ARGININE-RICH 2) (EG, MYELODYSPLASTIC SYNDROME, ACUTE MYELOID LEUKEMIA) GENE ANALYSIS, COM
HMSAAA	Q3 2025	Other	81361	CPT	HBB (HEMOGLOBIN, SUBUNIT BETA) (EG, SICKLE CELL ANEMIA, BETA THALASSEMIA, HEMOGLOBINOPATHY); COMMON VARIANT(S) (EG, HBS, HBC, HBE)
HMSAAA	Q3 2025	Other	81363	CPT	HBB (HEMOGLOBIN, SUBUNIT BETA) (EG, SICKLE CELL ANEMIA, BETA THALASSEMIA, HEMOGLOBINOPATHY); DUPLICATION/DELETION VARIANT(S)
HMSAAA	Q3 2025	Other	81364	CPT	HBB (HEMOGLOBIN, SUBUNIT BETA) (EG, SICKLE CELL ANEMIA, BETA THALASSEMIA, HEMOGLOBINOPATHY); FULL GENE SEQUENCE
HMSAAA	Q3 2025	Other	81400	CPT	MOLECULAR PATHOLOGY PROCEDURE, LEVEL 1 (EG, IDENTIFICATION OF SINGLE GERMLINE VARIANT [EG, SNP] BY TECHNIQUES SUCH AS RESTRICTION ENZYME DIGESTION OR
HMSAAA	Q3 2025	Other	81401	CPT	MOLECULAR PATHOLOGY PROCEDURE, LEVEL 2 (EG, 2-10 SNPS, 1 METHYLATED VARIANT, OR 1 SOMATIC VARIANT [TYPICALLY USING NONSEQUENCING TARGET VARIANT ANAL
HMSAAA	Q3 2025	Other	81402	CPT	MOLECULAR PATHOLOGY PROCEDURE, LEVEL 3 (EG, >10 SNPS, 2-10 METHYLATED VARIANTS, OR 2-10 SOMATIC VARIANTS [TYPICALLY USING NON-SEQUENCING TARGET VARIA
HMSAAA	Q3 2025	Other	81403	CPT	MOLECULAR PATHOLOGY PROCEDURE, LEVEL 4 (EG, ANALYSIS OF SINGLE EXON BY DNA SEQUENCE ANALYSIS, ANALYSIS OF >10 AMPLICONS USING MULTIPLEX PCR IN 2 OR M
HMSAAA	Q3 2025	Other	81404	CPT	MOLECULAR PATHOLOGY PROCEDURE, LEVEL 5 (EG, ANALYSIS OF 2-5 EXONS BY DNA SEQUENCE ANALYSIS, MUTATION SCANNING OR DUPLICATION/DELETION VARIANTS OF 6
HMSAAA	Q3 2025	Other	81405	CPT	MOLECULAR PATHOLOGY PROCEDURE, LEVEL 6 (EG, ANALYSIS OF 6-10 EXONS BY DNA SEQUENCE ANALYSIS, MUTATION SCANNING OR DUPLICATION/DELETION VARIANTS OF
HMSAAA	Q3 2025	Other	81406	CPT	MOLECULAR PATHOLOGY PROCEDURE, LEVEL 7 (EG, ANALYSIS OF 11-25 EXONS BY DNA SEQUENCE ANALYSIS, MUTATION SCANNING OR DUPLICATION/DELETION VARIANTS O
HMSAAA	Q3 2025	Other	81407	CPT	MOLECULAR PATHOLOGY PROCEDURE, LEVEL 8 (EG, ANALYSIS OF 26-50 EXONS BY DNA SEQUENCE ANALYSIS, MUTATION SCANNING OR DUPLICATION/DELETION VARIANTS O
HMSAAA	Q3 2025	Other	81408	CPT	MOLECULAR PATHOLOGY PROCEDURE, LEVEL 9 (EG, ANALYSIS OF >50 EXONS IN A SINGLE GENE BY DNA SEQUENCE ANALYSIS) ABCA4 (ATP-BINDING CASSETTE, SUB-FAMILY A
HMSAAA	Q3 2025	Other	81410	CPT	AORTIC DYSFUNCTION OR DILATION (EG, MARFAN SYNDROME, LOEYS DIETZ SYNDROME, EHLER DANLOS SYNDROME TYPE IV, ARTERIAL TORTUOSITY SYNDROME); GENOMIC S
HMSAAA	Q3 2025	Other	81411	CPT	AORTIC DYSFUNCTION OR DILATION (EG, MARFAN SYNDROME, LOEYS DIETZ SYNDROME, EHLER DANLOS SYNDROME TYPE IV, ARTERIAL TORTUOSITY SYNDROME); DUPLICATIO
HMSAAA	Q3 2025	Other	81412	CPT	ASHKENAZI JEWISH ASSOCIATED DISORDERS (EG, BLOOM SYNDROME, CANAVAN DISEASE, CYSTIC FIBROSIS, FAMILIAL DYSAUTONOMIA, FANCONI ANEMIA GROUP C, GAUCHE
HMSAAA	Q3 2025	Other	81413	CPT	CARDIAC ION CHANNELOPATHIES (EG, BRUGADA SYNDROME, LONG QT SYNDROME, SHORT QT SYNDROME, CATECHOLAMINERGIC POLYMORPHIC VENTRICULAR TACHYCARD
HMSAAA	Q3 2025	Other	81414	CPT	CARDIAC ION CHANNELOPATHIES (EG, BRUGADA SYNDROME, LONG QT SYNDROME, SHORT QT SYNDROME, CATECHOLAMINERGIC POLYMORPHIC VENTRICULAR TACHYCARD
HMSAAA	Q3 2025	Other	81415	CPT	EXOME (EG, UNEXPLAINED CONSTITUTIONAL OR HERITABLE DISORDER OR SYNDROME); SEQUENCE ANALYSIS
HMSAAA	Q3 2025	Other	81416	CPT	EXOME (EG, UNEXPLAINED CONSTITUTIONAL OR HERITABLE DISORDER OR SYNDROME); SEQUENCE ANALYSIS, EACH COMPARATOR EXOME (EG, PARENTS, SIBLINGS) (LIST SEP
HMSAAA	Q3 2025	Other	81417	CPT	EXOME (EG, UNEXPLAINED CONSTITUTIONAL OR HERITABLE DISORDER OR SYNDROME); RE-EVALUATION OF PREVIOUSLY OBTAINED EXOME SEQUENCE (EG, UPDATED KNOWL
HMSAAA	Q3 2025	Other	81419	CPT	EPILEPSY GENOMIC SEQUENCE ANALYSIS PANEL, MUST INCLUDE ANALYSES FOR ALDH7A1, CACNA1A, CDKL5, CHD2, GABRG2, GRIN2A, KCNQ2, MECP2, PCDH19, POLG, PRRT
HMSAAA	Q3 2025	Other	81430	CPT	HEARING LOSS (EG, NONSYNDROMIC HEARING LOSS, USHER SYNDROME, PENDRED SYNDROME); GENOMIC SEQUENCE ANALYSIS PANEL, MUST INCLUDE SEQUENCING OF AT
HMSAAA	Q3 2025	Other	81431	CPT	HEARING LOSS (EG, NONSYNDROMIC HEARING LOSS, USHER SYNDROME, PENDRED SYNDROME); DUPLICATION/DELETION ANALYSIS PANEL, MUST INCLUDE COPY NUMBER A
HMSAAA	Q3 2025	Other	81432	CPT	HEREDITARY BREAST CANCER-RELATED DISORDERS (EG, HEREDITARY BREAST CANCER, HEREDITARY OVARIAN CANCER, HEREDITARY ENDOMETRIAL CANCER, HEREDITARY PAN
HMSAAA	Q3 2025	Other	81434	CPT	HEREDITARY RETINAL DISORDERS (EG, RETINITIS PIGMENTOSA, LEBER CONGENITAL AMAUROSIS, CONE-ROD DYSTROPHY), GENOMIC SEQUENCE ANALYSIS PANEL, MUST INCL
HMSAAA	Q3 2025	Other	81435	CPT	HEREDITARY COLON CANCER-RELATED DISORDERS (EG, LYNCH SYNDROME, PTEN HAMARTOMA SYNDROME, COWDEN SYNDROME, FAMILIAL ADENOMATOSIS POLYPOSIS), GE
HMSAAA	Q3 2025	Other	81437	CPT	HEREDITARY NEUROENDOCRINE TUMOR-RELATED DISORDERS (EG, MEDULLARY THYROID CARCINOMA, PARATHYROID CARCINOMA, MALIGNANT PHEOCHROMOCYTOMA OR P
HMSAAA	Q3 2025	Other	81439	CPT	HEREDITARY CARDIOMYOPATHY (EG, HYPERTROPHIC CARDIOMYOPATHY, DILATED CARDIOMYOPATHY, ARRHYTHMOGENIC RIGHT VENTRICULAR CARDIOMYOPATHY), GENOMI
HMSAAA	Q3 2025	Other	81442	CPT	NOONAN SPECTRUM DISORDERS (EG, NOONAN SYNDROME, CARDIO-FACIO-CUTANEOUS SYNDROME, COSTELLO SYNDROME, LEOPARD SYNDROME, NOONAN-LIKE SYNDROM
HMSAAA	Q3 2025	Other	81443	CPT	GENETIC TESTING FOR SEVERE INHERITED CONDITIONS (EG, CYSTIC FIBROSIS, ASHKENAZI JEWISH-ASSOCIATED DISORDERS [EG, BLOOM SYNDROME, CANAVAN DISEASE, FAN
HMSAAA	Q3 2025	Other	81445	CPT	SOLID ORGAN NEOPLASM, GENOMIC SEQUENCE ANALYSIS PANEL, 5-50 GENES, INTERROGATION FOR SEQUENCE VARIANTS AND COPY NUMBER VARIANTS OR REARRANGEME
HMSAAA	Q3 2025	Other	81448	CPT	HEREDITARY PERIPHERAL NEUROPATHIES (EG, CHARCOT-MARIE-TOOTH, SPASTIC PARAPLEGIA), GENOMIC SEQUENCE ANALYSIS PANEL, MUST INCLUDE SEQUENCING OF AT L
HMSAAA	Q3 2025	Other	81450	CPT	HEMATOLYMPHOID NEOPLASM OR DISORDER, GENOMIC SEQUENCE ANALYSIS PANEL, 5-50 GENES, INTERROGATION FOR SEQUENCE VARIANTS, AND COPY NUMBER VARIANTS
HMSAAA	Q3 2025	Other	81455	CPT	SOLID ORGAN OR HEMATOLYMPHOID NEOPLASM OR DISORDER, 51 OR GREATER GENES, GENOMIC SEQUENCE ANALYSIS PANEL, INTERROGATION FOR SEQUENCE VARIANTS A
HMSAAA	Q3 2025	Other	81460	CPT	WHOLE MITOCHONDRIAL GENOME (EG, LEIGH SYNDROME, MITOCHONDRIAL ENCEPHALOMYOPATHY, LACTIC ACIDOSIS, AND STROKE-LIKE EPISODES [MELAS], MYOCLONIC EP
HMSAAA	Q3 2025	Other	81465	CPT	WHOLE MITOCHONDRIAL GENOME LARGE DELETION ANALYSIS PANEL (EG, KEARNS-SAYRE SYNDROME, CHRONIC PROGRESSIVE EXTERNAL OPHTHALMOPLEGIA), INCLUDING
HMSAAA	Q3 2025	Other	81479	CPT	UNLISTED MOLECULAR PATHOLOGY PROCEDURE
HMSAAA	Q3 2025	Other	81518	CPT	ONCOLOGY (BREAST), MRNA, GENE EXPRESSION PROFILING BY REAL-TIME RT-PCR OF 11 GENES (7 CONTENT AND 4 HOUSEKEEPING), UTILIZING FORMALIN-FIXED PARAFFIN-E
HMSAAA	Q3 2025	Other	81519	CPT	ONCOLOGY (BREAST), MRNA, GENE EXPRESSION PROFILING BY REAL-TIME RT-PCR OF 21 GENES, UTILIZING FORMALIN-FIXED PARAFFIN-EMBEDDED TISSUE, ALGORITHM REPO
HMSAAA	Q3 2025	Other	81520	CPT	ONCOLOGY (BREAST), MRNA GENE EXPRESSION PROFILING BY HYBRID CAPTURE OF 58 GENES (50 CONTENT AND 8 HOUSEKEEPING), UTILIZING FORMALIN-FIXED PARAFFIN-EM
HMSAAA	Q3 2025	Other	81521	CPT	ONCOLOGY (BREAST), MRNA, MICROARRAY GENE EXPRESSION PROFILING OF 70 CONTENT GENES AND 465 HOUSEKEEPING GENES, UTILIZING FRESH FROZEN OR FORMALIN-F
HMSAAA	Q3 2025	Other	81522	CPT	ONCOLOGY (BREAST), MRNA, GENE EXPRESSION PROFILING BY RT-PCR OF 12 GENES (8 CONTENT AND 4 HOUSEKEEPING), UTILIZING FORMALIN-FIXED PARAFFIN-EMBEDDED T
HMSAAA	Q3 2025	Other	81523	CPT	ONCOLOGY (BREAST), MRNA, NEXT-GENERATION SEQUENCING GENE EXPRESSION PROFILING OF 70 CONTENT GENES AND 31 HOUSEKEEPING GENES, UTILIZING FORMALIN-F
HMSAAA	Q3 2025	Other	81542	CPT	ONCOLOGY (PROSTATE), MRNA, MICROARRAY GENE EXPRESSION PROFILING OF 22 CONTENT GENES, UTILIZING FORMALIN-FIXED PARAFFIN-EMBEDDED TISSUE, ALGORITHM R
HMSAAA	Q3 2025	Other	81546	CPT	ONCOLOGY (THYROID), MRNA, GENE EXPRESSION ANALYSIS OF 10,196 GENES, UTILIZING FINE NEEDLE ASPIRATE, ALGORITHM REPORTED AS A CATEGORICAL RESULT (EG, BEN
HMSAAA	Q3 2025	Other	81552	CPT	ONCOLOGY (UVEAL MELANOMA), MRNA, GENE EXPRESSION PROFILING BY REAL-TIME RT-PCR OF 15 GENES (12 CONTENT AND 3 HOUSEKEEPING), UTILIZING FINE NEEDLE ASP
HMSAAA	Q3 2025	Other	81595	CPT	CARDIOLOGY (HEART TRANSPLANT), MRNA, GENE EXPRESSION PROFILING BY REAL-TIME QUANTITATIVE PCR OF 20 GENES (11 CONTENT AND 9 HOUSEKEEPING), UTILIZING SU
HMSAAA	Q3 2025	Other	81599	CPT	UNLISTED MULTIANALYTE ASSAY WITH ALGORITHMIC ANALYSIS
HMSAAA	Q3 2025	Other	84999	CPT	UNLISTED CHEMISTRY PROCEDURE
HMSAAA	Q3 2025	Other	88240	CPT	CRYOPRESERVATION, FREEZING AND STORAGE OF CELLS, EACH CELL LINE
HMSAAA	Q3 2025	Other	88241	CPT	THAWING AND EXPANSION OF FROZEN CELLS, EACH ALIQUOT
HMSAAA	Q3 2025	Other	88245	CPT	CHROMOSOME ANALYSIS FOR BREAKAGE SYNDROMES; BASELINE SISTER CHROMATID EXCHANGE (SCE), 20-25 CELLS
HMSAAA	Q3 2025	Other	88248	CPT	CHROMOSOME ANALYSIS FOR BREAKAGE SYNDROMES; BASELINE BREAKAGE, SCORE 50-100 CELLS, COUNT 20 CELLS, 2 KARYOTYPES (EG, FOR ATAXIA TELANGIECTASIA, FANC
HMSAAA	Q3 2025	Other	88249	CPT	CHROMOSOME ANALYSIS FOR BREAKAGE SYNDROMES; SCORE 100 CELLS, CLASTOGEN STRESS (EG, DIEPOXYBUTANE, MITOMYCIN C, IONIZING RADIATION, UV RADIATION)
HMSAAA	Q3 2025	Other	88261	CPT	CHROMOSOME ANALYSIS; COUNT 5 CELLS, 1 KARYOTYPE, WITH BANDING
HMSAAA	Q3 2025	Other	88262	CPT	CHROMOSOME ANALYSIS; COUNT 15-20 CELLS, 2 KARYOTYPES, WITH BANDING
HMSAAA	Q3 2025	Other	88263	CPT	CHROMOSOME ANALYSIS; COUNT 45 CELLS FOR MOSAICISM, 2 KARYOTYPES, WITH BANDING
HMSAAA	Q3 2025	Other	88264	CPT	CHROMOSOME ANALYSIS; ANALYZE 20-25 CELLS
HMSAAA	Q3 2025	Other	88269	CPT	CHROMOSOME ANALYSIS, IN SITU FOR AMNIOTIC FLUID CELLS, COUNT CELLS FROM 6-12 COLONIES, 1 KARYOTYPE, WITH BANDING
HMSAAA	Q3 2025	Other	88271	CPT	MOLECULAR CYTOGENETICS; DNA PROBE, EACH (EG, FISH)
HMSAAA	Q3 2025	Other	88272	CPT	MOLECULAR CYTOGENETICS; CHROMOSOMAL IN SITU HYBRIDIZATION, ANALYZE 3-5 CELLS (EG, FOR DERIVATIVES AND MARKERS)
HMSAAA	Q3 2025	Other	88273	CPT	MOLECULAR CYTOGENETICS; CHROMOSOMAL IN SITU HYBRIDIZATION, ANALYZE 10-30 CELLS (EG, FOR MICRODELETIONS)
HMSAAA	Q3 2025	Other	88274	CPT	MOLECULAR CYTOGENETICS; INTERPHASE IN SITU HYBRIDIZATION, ANALYZE 25-99 CELLS
HMSAAA	Q3 2025	Other	88275	CPT	MOLECULAR CYTOGENETICS; INTERPHASE IN SITU HYBRIDIZATION, ANALYZE 100-300 CELLS
HMSAAA	Q3 2025	Other	88280	CPT	CHROMOSOME ANALYSIS; ADDITIONAL KARYOTYPES, EACH STUDY
HMSAAA	Q3 2025	Other	88283	CPT	CHROMOSOME ANALYSIS; ADDITIONAL SPECIALIZED BANDING TECHNIQUE (EG, NOR, C-BANDING)
HMSAAA	Q3 2025	Other	88285	CPT	CHROMOSOME ANALYSIS; ADDITIONAL CELLS COUNTED, EACH STUDY
HMSAAA	Q3 2025	Other	88289	CPT	CHROMOSOME ANALYSIS; ADDITIONAL HIGH RESOLUTION STUDY
HMSAAA	Q3 2025	Other	88291	CPT	CYTOGENETICS AND MOLECULAR CYTOGENETICS, INTERPRETATION AND REPORT
HMSAAA	Q3 2025	Other	89240	CPT	UNLISTED MISCELLANEOUS PATHOLOGY TEST
HMSAAA	Q3 2025	Other	97802	CPT	MEDICAL NUTRITION THERAPY; INITIAL ASSESSMENT AND INTERVENTION, INDIVIDUAL, FACE-TO-FACE WITH THE PATIENT, EACH 15 MINUTES
HMSAAA	Q3 2025	Other	97804	CPT	MEDICAL NUTRITION THERAPY; GROUP (2 OR MORE INDIVIDUAL(S)), EACH 30 MINUTES
HMSAAA	Q3 2025	Other	G0151	HCPCS	SERVICES PERFORMED BY A QUALIFIED PHYSICAL THERAPIST IN THE HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES
HMSAAA	Q3 2025	Other	G0152	HCPCS	SERVICES PERFORMED BY A QUALIFIED OCCUPATIONAL THERAPIST IN THE HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES
HMSAAA	Q3 2025	Other	G0153	HCPCS	SERVICES PERFORMED BY A QUALIFIED SPEECH-LANGUAGE PATHOLOGIST IN THE HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES
HMSAAA	Q3 2025	Other	G0155	HCPCS	SERVICES OF CLINICAL SOCIAL WORKER IN HOME HEALTH OR HOSPICE SETTINGS, EACH 15 MINUTES
HMSAAA	Q3 2025	Other	G0156	HCPCS	SERVICES OF HOME HEALTH/HOSPICE AIDE IN HOME HEALTH OR HOSPICE SETTINGS, EACH 15 MINUTES

HMSAAA	Q3 2025	Other	G0157	HCPCS	SERVICES PERFORMED BY A QUALIFIED PHYSICAL THERAPIST ASSISTANT IN THE HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES
HMSAAA	Q3 2025	Other	G0158	HCPCS	SERVICES PERFORMED BY A QUALIFIED OCCUPATIONAL THERAPIST ASSISTANT IN THE HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES
HMSAAA	Q3 2025	Other	G0159	HCPCS	SERVICES PERFORMED BY A QUALIFIED PHYSICAL THERAPIST, IN THE HOME HEALTH SETTING, IN THE ESTABLISHMENT OR DELIVERY OF A SAFE AND EFFECTIVE PHYSICAL THERA
HMSAAA	Q3 2025	Other	G0299	HCPCS	DIRECT SKILLED NURSING SERVICES OF A REGISTERED NURSE (RN) IN THE HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES
HMSAAA	Q3 2025	Other	G0300	HCPCS	DIRECT SKILLED NURSING SERVICES OF A LICENSED PRACTICAL NURSE (LPN) IN THE HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES
HMSAAA	Q3 2025	Other	G0495	HCPCS	SKILLED SERVICES OF A REGISTERED NURSE (RN), IN THE TRAINING AND/OR EDUCATION OF A PATIENT OR FAMILY MEMBER, IN THE HOME HEALTH OR HOSPICE SETTING, EACH
HMSAAA	Q3 2025	Other	G9143	HCPCS	WARFARIN RESPONSIVENESS TESTING BY GENETIC TECHNIQUE USING ANY METHOD, ANY NUMBER OF SPECIMEN(S)
HMSAAA	Q3 2025	Other	J0585	HCPCS	INJECTION, ONABOTULINUMTOXINA, 1 UNIT
HMSAAA	Q3 2025	Other	J3392	HCPCS	INJECTION, EXAGAMGLOGENE AUTOTEMCEL, PER TREATMENT
HMSAAA	Q3 2025	Other	J3590	HCPCS	UNCLASSIFIED BIOLOGICS
HMSAAA	Q3 2025	Other	Q2053	HCPCS	BREXUCABTAGENE AUTOLEUCEL, UP TO 200 MILLION AUTOLOGOUS ANTI-CD19 CAR POSITIVE VIABLE T CELLS, INCLUDING LEUKAPHERESIS AND DOSE PREPARATION PROCED
HMSAAA	Q3 2025	Other	Q2055	HCPCS	IDECABTAGENE VICLEUCEL, UP TO 510 MILLION AUTOLOGOUS B-CELL MATURATION ANTIGEN (BCMA) DIRECTED CAR-POSITIVE T CELLS, INCLUDING LEUKAPHERESIS AND DOS
HMSAAA	Q3 2025	Other	Q2056	HCPCS	CILTACABTAGENE AUTOLEUCEL, UP TO 100 MILLION AUTOLOGOUS B-CELL MATURATION ANTIGEN (BCMA) DIRECTED CAR-POSITIVE T CELLS, INCLUDING LEUKAPHERESIS AND
HMSAAA	Q3 2025	Other	S3840	HCPCS	DNA ANALYSIS FOR GERMLINE MUTATIONS OF THE RET PROTO-ONCOGENE FOR SUSCEPTIBILITY TO MULTIPLE ENDOCRINE NEOPLASIA TYPE 2
HMSAAA	Q3 2025	Other	S3844	HCPCS	DNA ANALYSIS OF THE CONNEXIN 26 GENE (GJB2) FOR SUSCEPTIBILITY TO CONGENITAL, PROFOUND DEAFNESS
HMSAAA	Q3 2025	Other	S3845	HCPCS	GENETIC TESTING FOR ALPHA-THALASSEMIA
HMSAAA	Q3 2025	Other	S3846	HCPCS	GENETIC TESTING FOR HEMOGLOBIN E BETA-THALASSEMIA
HMSAAA	Q3 2025	Other	S3849	HCPCS	GENETIC TESTING FOR NIEMANN-PICK DISEASE
HMSAAA	Q3 2025	Other	S3854	HCPCS	GENE EXPRESSION PROFILING PANEL FOR USE IN THE MANAGEMENT OF BREAST CANCER TREATMENT
HMSAAA	Q3 2025	Other	S3861	HCPCS	GENETIC TESTING, SODIUM CHANNEL, VOLTAGE-GATED, TYPE V, ALPHA SUBUNIT (SCN5A) AND VARIANTS FOR SUSPECTED BRUGADA SYNDROME
HMSAAA	Q3 2025	Other	S3865	HCPCS	COMPREHENSIVE GENE SEQUENCE ANALYSIS FOR HYPERTROPHIC CARDIOMYOPATHY
HMSAAA	Q3 2025	Other	S3866	HCPCS	GENETIC ANALYSIS FOR A SPECIFIC GENE MUTATION FOR HYPERTROPHIC CARDIOMYOPATHY (HCM) IN AN INDIVIDUAL WITH A KNOWN HCM MUTATION IN THE FAMILY
HMSAAA	Q3 2025	Other	S3870	HCPCS	COMPARATIVE GENOMIC HYBRIDIZATION (CGH) MICROARRAY TESTING FOR DEVELOPMENTAL DELAY, AUTISM SPECTRUM DISORDER AND/OR INTELLECTUAL DISABILITY
HMSAAA	Q3 2025	Other	S9131	HCPCS	PHYSICAL THERAPY; IN THE HOME, PER DIEM
HMSAAA	Q3 2025	Other	S9470	HCPCS	NUTRITIONAL COUNSELING, DIETITIAN VISIT
HMSAAA	Q3 2025	Rehab Services	97014	CPT	APPLICATION OF A MODALITY TO 1 OR MORE AREAS; ELECTRICAL STIMULATION (UNATTENDED)
HMSAAA	Q3 2025	Rehab Services	97535	CPT	SELF-CARE/HOME MANAGEMENT TRAINING (EG, ACTIVITIES OF DAILY LIVING (ADL) AND COMPENSATORY TRAINING, MEAL PREPARATION, SAFETY PROCEDURES, AND INSTRUCT
HMSAAA	Q3 2025	Rehab Services	97750	CPT	PHYSICAL PERFORMANCE TEST OR MEASUREMENT (EG, MUSCULOSKELETAL, FUNCTIONAL CAPACITY), WITH WRITTEN REPORT, EACH 15 MINUTES
HMSAAA	Q3 2025	DME/Medical Supplies	94660	CPT	CONTINUOUS POSITIVE AIRWAY PRESSURE VENTILATION (CPAP), INITIATION AND MANAGEMENT
HMSAAA	Q3 2025	DME/Medical Supplies	A4287	HCPCS	DISPOSABLE COLLECTION AND STORAGE BAG FOR BREAST MILK, ANY SIZE, ANY TYPE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	A9279	HCPCS	MONITORING FEATURE/DEVICE, STAND-ALONE OR INTEGRATED, ANY TYPE, INCLUDES ALL ACCESSORIES, COMPONENTS AND ELECTRONICS, NOT OTHERWISE CLASSIFIED
HMSAAA	Q3 2025	DME/Medical Supplies	A9900	HCPCS	MISCELLANEOUS DME SUPPLY, ACCESSORY, AND/OR SERVICE COMPONENT OF ANOTHER HCPCS CODE
HMSAAA	Q3 2025	DME/Medical Supplies	A9999	HCPCS	HCPCS: MISCELLANEOUS DME SUPPLY OR ACCESSORY, NOT OTHERWISE SPECIFIED; IRF PPS: DEFAULT CODE - USED FOR INFORMATIONAL-ONLY MANAGED CARE CLAIMS
HMSAAA	Q3 2025	DME/Medical Supplies	E0181	HCPCS	POWERED PRESSURE REDUCING MATTRESS OVERLAY/PAD, ALTERNATING, WITH PUMP, INCLUDES HEAVY DUTY
HMSAAA	Q3 2025	DME/Medical Supplies	E0182	HCPCS	PUMP FOR ALTERNATING PRESSURE PAD, FOR REPLACEMENT ONLY
HMSAAA	Q3 2025	DME/Medical Supplies	E0184	HCPCS	DRY PRESSURE MATTRESS
HMSAAA	Q3 2025	DME/Medical Supplies	E0185	HCPCS	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH
HMSAAA	Q3 2025	DME/Medical Supplies	E0186	HCPCS	AIR PRESSURE MATTRESS
HMSAAA	Q3 2025	DME/Medical Supplies	E0187	HCPCS	WATER PRESSURE MATTRESS
HMSAAA	Q3 2025	DME/Medical Supplies	E0188	HCPCS	SYNTHETIC SHEEPSKIN PAD
HMSAAA	Q3 2025	DME/Medical Supplies	E0189	HCPCS	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE
HMSAAA	Q3 2025	DME/Medical Supplies	E0193	HCPCS	POWERED AIR FLOTATION BED (LOW AIR LOSS THERAPY)
HMSAAA	Q3 2025	DME/Medical Supplies	E0194	HCPCS	AIR FLUIDIZED BED
HMSAAA	Q3 2025	DME/Medical Supplies	E0196	HCPCS	GEL PRESSURE MATTRESS
HMSAAA	Q3 2025	DME/Medical Supplies	E0197	HCPCS	AIR PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH
HMSAAA	Q3 2025	DME/Medical Supplies	E0198	HCPCS	WATER PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH
HMSAAA	Q3 2025	DME/Medical Supplies	E0199	HCPCS	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH
HMSAAA	Q3 2025	DME/Medical Supplies	E0371	HCPCS	NONPOWERED ADVANCED PRESSURE REDUCING OVERLAY FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH
HMSAAA	Q3 2025	DME/Medical Supplies	E0372	HCPCS	POWERED AIR OVERLAY FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH
HMSAAA	Q3 2025	DME/Medical Supplies	E0373	HCPCS	NONPOWERED ADVANCED PRESSURE REDUCING MATTRESS
HMSAAA	Q3 2025	DME/Medical Supplies	E0465	HCPCS	HOME VENTILATOR, ANY TYPE, USED WITH INVASIVE INTERFACE, (E.G., TRACHEOSTOMY TUBE)
HMSAAA	Q3 2025	DME/Medical Supplies	E0466	HCPCS	HOME VENTILATOR, ANY TYPE, USED WITH NON-INVASIVE INTERFACE, (E.G., MASK, CHEST SHELL)
HMSAAA	Q3 2025	DME/Medical Supplies	E0467	HCPCS	HOME VENTILATOR, MULTI-FUNCTION RESPIRATORY DEVICE, ALSO PERFORMS ANY OR ALL OF THE ADDITIONAL FUNCTIONS OF OXYGEN CONCENTRATION, DRUG NEBULIZATIO
HMSAAA	Q3 2025	DME/Medical Supplies	E0472	HCPCS	RESPIRATORY ASSIST DEVICE, BI-LEVEL PRESSURE CAPABILITY, WITH BACKUP RATE FEATURE, USED WITH INVASIVE INTERFACE, E.G., TRACHEOSTOMY TUBE (INTERMITTENT ASS
HMSAAA	Q3 2025	DME/Medical Supplies	E0485	HCPCS	ORAL DEVICE/APPLIANCE USED TO REDUCE UPPER AIRWAY COLLAPSIBILITY, ADJUSTABLE OR NON-ADJUSTABLE, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT
HMSAAA	Q3 2025	DME/Medical Supplies	E0604	HCPCS	BREAST PUMP, HOSPITAL GRADE, ELECTRIC (AC AND / OR DC), ANY TYPE
HMSAAA	Q3 2025	DME/Medical Supplies	E0650	HCPCS	PNEUMATIC COMPRESSOR, NON-SEGMENTAL HOME MODEL
HMSAAA	Q3 2025	DME/Medical Supplies	E0651	HCPCS	PNEUMATIC COMPRESSOR, SEGMENTAL HOME MODEL WITHOUT CALIBRATED GRADIENT PRESSURE
HMSAAA	Q3 2025	DME/Medical Supplies	E0652	HCPCS	PNEUMATIC COMPRESSOR, SEGMENTAL HOME MODEL WITH CALIBRATED GRADIENT PRESSURE
HMSAAA	Q3 2025	DME/Medical Supplies	E0675	HCPCS	PNEUMATIC COMPRESSION DEVICE, HIGH PRESSURE, RAPID INFLATION/DEFLATION CYCLE, FOR ARTERIAL INSUFFICIENCY (UNILATERAL OR BILATERAL SYSTEM)
HMSAAA	Q3 2025	DME/Medical Supplies	E0747	HCPCS	OSTEOGENESIS STIMULATOR, ELECTRICAL, NON-INVASIVE, OTHER THAN SPINAL APPLICATIONS
HMSAAA	Q3 2025	DME/Medical Supplies	E0748	HCPCS	OSTEOGENESIS STIMULATOR, ELECTRICAL, NON-INVASIVE, SPINAL APPLICATIONS
HMSAAA	Q3 2025	DME/Medical Supplies	E0760	HCPCS	OSTEOGENESIS STIMULATOR, LOW INTENSITY ULTRASOUND, NON-INVASIVE
HMSAAA	Q3 2025	DME/Medical Supplies	E0762	HCPCS	TRANSCUTANEOUS ELECTRICAL JOINT STIMULATION DEVICE SYSTEM, INCLUDES ALL ACCESSORIES
HMSAAA	Q3 2025	DME/Medical Supplies	E0764	HCPCS	FUNCTIONAL NEUROMUSCULAR STIMULATION, TRANSCUTANEOUS STIMULATION OF SEQUENTIAL MUSCLE GROUPS OF AMBULATION WITH COMPUTER CONTROL, USED FOR W
HMSAAA	Q3 2025	DME/Medical Supplies	E0983	HCPCS	MANUAL WHEELCHAIR ACCESSORY, POWER ADD-ON TO CONVERT MANUAL WHEELCHAIR TO MOTORIZED WHEELCHAIR, JOYSTICK CONTROL
HMSAAA	Q3 2025	DME/Medical Supplies	E0984	HCPCS	MANUAL WHEELCHAIR ACCESSORY, POWER ADD-ON TO CONVERT MANUAL WHEELCHAIR TO MOTORIZED WHEELCHAIR, TILLER CONTROL
HMSAAA	Q3 2025	DME/Medical Supplies	E1083	HCPCS	HEMI-WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEG REST
HMSAAA	Q3 2025	DME/Medical Supplies	E1084	HCPCS	HEMI-WHEELCHAIR, DETACHABLE ARMS DESK OR FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEG RESTS
HMSAAA	Q3 2025	DME/Medical Supplies	E1085	HCPCS	HEMI-WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE FOOT RESTS
HMSAAA	Q3 2025	DME/Medical Supplies	E1087	HCPCS	HIGH STRENGTH LIGHTWEIGHT WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEG RESTS
HMSAAA	Q3 2025	DME/Medical Supplies	E1088	HCPCS	HIGH STRENGTH LIGHTWEIGHT WHEELCHAIR, DETACHABLE ARMS DESK OR FULL LENGTH, SWING AWAY DETACHABLE ELEVATING LEG RESTS
HMSAAA	Q3 2025	DME/Medical Supplies	E1089	HCPCS	HIGH STRENGTH LIGHTWEIGHT WHEELCHAIR, FIXED LENGTH ARMS, SWING AWAY DETACHABLE FOOTREST
HMSAAA	Q3 2025	DME/Medical Supplies	E1090	HCPCS	HIGH STRENGTH LIGHTWEIGHT WHEELCHAIR, DETACHABLE ARMS DESK OR FULL LENGTH, SWING AWAY DETACHABLE FOOT RESTS
HMSAAA	Q3 2025	DME/Medical Supplies	E1092	HCPCS	WIDE HEAVY DUTY WHEEL CHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH), SWING AWAY DETACHABLE ELEVATING LEG RESTS
HMSAAA	Q3 2025	DME/Medical Supplies	E1093	HCPCS	WIDE HEAVY DUTY WHEELCHAIR, DETACHABLE ARMS DESK OR FULL LENGTH ARMS, SWING AWAY DETACHABLE FOOTRESTS
HMSAAA	Q3 2025	DME/Medical Supplies	E1100	HCPCS	SEMI-RECLINING WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEG RESTS
HMSAAA	Q3 2025	DME/Medical Supplies	E1110	HCPCS	SEMI-RECLINING WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) ELEVATING LEG REST
HMSAAA	Q3 2025	DME/Medical Supplies	E1130	HCPCS	STANDARD WHEELCHAIR, FIXED FULL LENGTH ARMS, FIXED OR SWING AWAY DETACHABLE FOOTRESTS
HMSAAA	Q3 2025	DME/Medical Supplies	E1140	HCPCS	WHEELCHAIR, DETACHABLE ARMS, DESK OR FULL LENGTH, SWING AWAY DETACHABLE FOOTRESTS
HMSAAA	Q3 2025	DME/Medical Supplies	E1150	HCPCS	WHEELCHAIR, DETACHABLE ARMS, DESK OR FULL LENGTH SWING AWAY DETACHABLE ELEVATING LEGRESTS
HMSAAA	Q3 2025	DME/Medical Supplies	E1160	HCPCS	WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEGRESTS
HMSAAA	Q3 2025	DME/Medical Supplies	E1161	HCPCS	MANUAL ADULT SIZE WHEELCHAIR, INCLUDES TILT IN SPACE
HMSAAA	Q3 2025	DME/Medical Supplies	E1170	HCPCS	AMPUTEE WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEGRESTS
HMSAAA	Q3 2025	DME/Medical Supplies	E1171	HCPCS	AMPUTEE WHEELCHAIR, FIXED FULL LENGTH ARMS, WITHOUT FOOTRESTS OR LEGREST
HMSAAA	Q3 2025	DME/Medical Supplies	E1172	HCPCS	AMPUTEE WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) WITHOUT FOOTRESTS OR LEGREST
HMSAAA	Q3 2025	DME/Medical Supplies	E1180	HCPCS	AMPUTEE WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) SWING AWAY DETACHABLE FOOTRESTS
HMSAAA	Q3 2025	DME/Medical Supplies	E1190	HCPCS	AMPUTEE WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) SWING AWAY DETACHABLE ELEVATING LEGRESTS
HMSAAA	Q3 2025	DME/Medical Supplies	E1195	HCPCS	HEAVY DUTY WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEGRESTS
HMSAAA	Q3 2025	DME/Medical Supplies	E1200	HCPCS	AMPUTEE WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE FOOTREST
HMSAAA	Q3 2025	DME/Medical Supplies	E1220	HCPCS	WHEELCHAIR; SPECIALLY SIZED OR CONSTRUCTED, (INDICATE BRAND NAME, MODEL NUMBER, IF ANY) AND JUSTIFICATION
HMSAAA	Q3 2025	DME/Medical Supplies	E1221	HCPCS	WHEELCHAIR WITH FIXED ARM, FOOTRESTS
HMSAAA	Q3 2025	DME/Medical Supplies	E1222	HCPCS	WHEELCHAIR WITH FIXED ARM, ELEVATING LEGRESTS

HMSAAA	Q3 2025	DME/Medical Supplies	E1223	HCPCS	WHEELCHAIR WITH DETACHABLE ARMS, FOOTRESTS
HMSAAA	Q3 2025	DME/Medical Supplies	E1224	HCPCS	WHEELCHAIR WITH DETACHABLE ARMS, ELEVATING LEGRESTS
HMSAAA	Q3 2025	DME/Medical Supplies	E1229	HCPCS	WHEELCHAIR, PEDIATRIC SIZE, NOT OTHERWISE SPECIFIED
HMSAAA	Q3 2025	DME/Medical Supplies	E1230	HCPCS	POWER OPERATED VEHICLE (THREE OR FOUR WHEEL NONHIGHWAY) SPECIFY BRAND NAME AND MODEL NUMBER
HMSAAA	Q3 2025	DME/Medical Supplies	E1231	HCPCS	WHEELCHAIR, PEDIATRIC SIZE, TILT-IN-SPACE, RIGID, ADJUSTABLE, WITH SEATING SYSTEM
HMSAAA	Q3 2025	DME/Medical Supplies	E1232	HCPCS	WHEELCHAIR, PEDIATRIC SIZE, TILT-IN-SPACE, FOLDING, ADJUSTABLE, WITH SEATING SYSTEM
HMSAAA	Q3 2025	DME/Medical Supplies	E1233	HCPCS	WHEELCHAIR, PEDIATRIC SIZE, TILT-IN-SPACE, RIGID, ADJUSTABLE, WITHOUT SEATING SYSTEM
HMSAAA	Q3 2025	DME/Medical Supplies	E1234	HCPCS	WHEELCHAIR, PEDIATRIC SIZE, TILT-IN-SPACE, FOLDING, ADJUSTABLE, WITHOUT SEATING SYSTEM
HMSAAA	Q3 2025	DME/Medical Supplies	E1235	HCPCS	WHEELCHAIR, PEDIATRIC SIZE, RIGID, ADJUSTABLE, WITH SEATING SYSTEM
HMSAAA	Q3 2025	DME/Medical Supplies	E1236	HCPCS	WHEELCHAIR, PEDIATRIC SIZE, FOLDING, ADJUSTABLE, WITH SEATING SYSTEM
HMSAAA	Q3 2025	DME/Medical Supplies	E1237	HCPCS	WHEELCHAIR, PEDIATRIC SIZE, RIGID, ADJUSTABLE, WITHOUT SEATING SYSTEM
HMSAAA	Q3 2025	DME/Medical Supplies	E1238	HCPCS	WHEELCHAIR, PEDIATRIC SIZE, FOLDING, ADJUSTABLE, WITHOUT SEATING SYSTEM
HMSAAA	Q3 2025	DME/Medical Supplies	E1239	HCPCS	POWER WHEELCHAIR, PEDIATRIC SIZE, NOT OTHERWISE SPECIFIED
HMSAAA	Q3 2025	DME/Medical Supplies	E1240	HCPCS	LIGHTWEIGHT WHEELCHAIR, DETACHABLE ARMS, (DESK OR FULL LENGTH) SWING AWAY DETACHABLE, ELEVATING LEGREST
HMSAAA	Q3 2025	DME/Medical Supplies	E1250	HCPCS	LIGHTWEIGHT WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE FOOTREST
HMSAAA	Q3 2025	DME/Medical Supplies	E1260	HCPCS	LIGHTWEIGHT WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) SWING AWAY DETACHABLE FOOTREST
HMSAAA	Q3 2025	DME/Medical Supplies	E1270	HCPCS	LIGHTWEIGHT WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEGRESTS
HMSAAA	Q3 2025	DME/Medical Supplies	E1280	HCPCS	HEAVY DUTY WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) ELEVATING LEGRESTS
HMSAAA	Q3 2025	DME/Medical Supplies	E1285	HCPCS	HEAVY DUTY WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE FOOTREST
HMSAAA	Q3 2025	DME/Medical Supplies	E1290	HCPCS	HEAVY DUTY WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) SWING AWAY DETACHABLE FOOTREST
HMSAAA	Q3 2025	DME/Medical Supplies	E1295	HCPCS	HEAVY DUTY WHEELCHAIR, FIXED FULL LENGTH ARMS, ELEVATING LEGREST
HMSAAA	Q3 2025	DME/Medical Supplies	E1296	HCPCS	SPECIAL WHEELCHAIR SEAT HEIGHT FROM FLOOR
HMSAAA	Q3 2025	DME/Medical Supplies	E1297	HCPCS	SPECIAL WHEELCHAIR SEAT DEPTH, BY UPHOLSTERY
HMSAAA	Q3 2025	DME/Medical Supplies	E1298	HCPCS	SPECIAL WHEELCHAIR SEAT DEPTH AND/OR WIDTH, BY CONSTRUCTION
HMSAAA	Q3 2025	DME/Medical Supplies	E1699	HCPCS	DIALYSIS EQUIPMENT, NOT OTHERWISE SPECIFIED
HMSAAA	Q3 2025	DME/Medical Supplies	E2500	HCPCS	SPEECH GENERATING DEVICE, DIGITIZED SPEECH, USING PRE-RECORDED MESSAGES, LESS THAN OR EQUAL TO 8 MINUTES RECORDING TIME
HMSAAA	Q3 2025	DME/Medical Supplies	E2502	HCPCS	SPEECH GENERATING DEVICE, DIGITIZED SPEECH, USING PRE-RECORDED MESSAGES, GREATER THAN 8 MINUTES BUT LESS THAN OR EQUAL TO 20 MINUTES RECORDING TIME
HMSAAA	Q3 2025	DME/Medical Supplies	E2504	HCPCS	SPEECH GENERATING DEVICE, DIGITIZED SPEECH, USING PRE-RECORDED MESSAGES, GREATER THAN 20 MINUTES BUT LESS THAN OR EQUAL TO 40 MINUTES RECORDING TIME
HMSAAA	Q3 2025	DME/Medical Supplies	E2506	HCPCS	SPEECH GENERATING DEVICE, DIGITIZED SPEECH, USING PRE-RECORDED MESSAGES, GREATER THAN 40 MINUTES RECORDING TIME
HMSAAA	Q3 2025	DME/Medical Supplies	E2508	HCPCS	SPEECH GENERATING DEVICE, SYNTHESIZED SPEECH, REQUIRING MESSAGE FORMULATION BY SPELLING AND ACCESS BY PHYSICAL CONTACT WITH THE DEVICE
HMSAAA	Q3 2025	DME/Medical Supplies	E2510	HCPCS	SPEECH GENERATING DEVICE, SYNTHESIZED SPEECH, PERMITTING MULTIPLE METHODS OF MESSAGE FORMULATION AND MULTIPLE METHODS OF DEVICE ACCESS
HMSAAA	Q3 2025	DME/Medical Supplies	E2511	HCPCS	SPEECH GENERATING SOFTWARE PROGRAM, FOR PERSONAL COMPUTER OR PERSONAL DIGITAL ASSISTANT
HMSAAA	Q3 2025	DME/Medical Supplies	E2512	HCPCS	ACCESSORY FOR SPEECH GENERATING DEVICE, MOUNTING SYSTEM
HMSAAA	Q3 2025	DME/Medical Supplies	E2599	HCPCS	ACCESSORY FOR SPEECH GENERATING DEVICE, NOT OTHERWISE CLASSIFIED
HMSAAA	Q3 2025	DME/Medical Supplies	K0010	HCPCS	STANDARD - WEIGHT FRAME MOTORIZED/POWER WHEELCHAIR
HMSAAA	Q3 2025	DME/Medical Supplies	K0011	HCPCS	STANDARD - WEIGHT FRAME MOTORIZED/POWER WHEELCHAIR WITH PROGRAMMABLE CONTROL PARAMETERS FOR SPEED ADJUSTMENT, TREMOR DAMPENING, ACCELERATIO
HMSAAA	Q3 2025	DME/Medical Supplies	K0012	HCPCS	LIGHTWEIGHT PORTABLE MOTORIZED/POWER WHEELCHAIR
HMSAAA	Q3 2025	DME/Medical Supplies	K0014	HCPCS	OTHER MOTORIZED/POWER WHEELCHAIR BASE
HMSAAA	Q3 2025	DME/Medical Supplies	K0553	HCPCS	SUPPLY ALLOWANCE FOR THERAPEUTIC CONTINUOUS GLUCOSE MONITOR (CGM), INCLUDES ALL SUPPLIES AND ACCESSORIES, 1 MONTH SUPPLY = 1 UNIT OF SERVICE
HMSAAA	Q3 2025	DME/Medical Supplies	K0554	HCPCS	RECEIVER (MONITOR), DEDICATED, FOR USE WITH THERAPEUTIC GLUCOSE CONTINUOUS MONITOR SYSTEM
HMSAAA	Q3 2025	DME/Medical Supplies	K1024	HCPCS	NON-PNEUMATIC COMPRESSION CONTROLLER WITH SEQUENTIAL CALIBRATED GRADIENT PRESSURE
HMSAAA	Q3 2025	DME/Medical Supplies	K1025	HCPCS	NON-PNEUMATIC SEQUENTIAL COMPRESSION GARMENT, FULL ARM
HMSAAA	Q3 2025	DME/Medical Supplies	K1031	HCPCS	NON-PNEUMATIC COMPRESSION CONTROLLER WITHOUT CALIBRATED GRADIENT PRESSURE
HMSAAA	Q3 2025	DME/Medical Supplies	K1032	HCPCS	NON-PNEUMATIC SEQUENTIAL COMPRESSION GARMENT, FULL LEG
HMSAAA	Q3 2025	DME/Medical Supplies	K1033	HCPCS	NON-PNEUMATIC SEQUENTIAL COMPRESSION GARMENT, HALF LEG
HMSAAA	Q3 2025	DME/Medical Supplies	L0641	HCPCS	LUMBAR ORTHOSIS, SAGITTAL CONTROL, WITH RIGID POSTERIOR PANEL(S), POSTERIOR EXTENDS FROM L-1 TO BELOW L-5 VERTEBRA, PRODUCES INTRACAVITARY PRESSURE T
HMSAAA	Q3 2025	DME/Medical Supplies	L0643	HCPCS	LUMBAR-SACRAL ORTHOSIS, SAGITTAL CONTROL, WITH RIGID POSTERIOR PANEL(S), POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, PRODUCES
HMSAAA	Q3 2025	DME/Medical Supplies	L0700	HCPCS	CERVICAL-THORACIC-LUMBAR-SACRAL-ORTHOSES (CTLSO), ANTERIOR-POSTERIOR-LATERAL CONTROL, MOLDED TO PATIENT MODEL, (MINERVA TYPE)
HMSAAA	Q3 2025	DME/Medical Supplies	L0710	HCPCS	CTLSO, ANTERIOR-POSTERIOR-LATERAL-CONTROL, MOLDED TO PATIENT MODEL, WITH INTERFACE MATERIAL, (MINERVA TYPE)
HMSAAA	Q3 2025	DME/Medical Supplies	L1685	HCPCS	HIP ORTHOSIS, ABDUCTION CONTROL OF HIP JOINT, POSTOPERATIVE HIP ABDUCTION TYPE, CUSTOM FABRICATED
HMSAAA	Q3 2025	DME/Medical Supplies	L1686	HCPCS	HIP ORTHOSIS, ABDUCTION CONTROL OF HIP JOINT, POSTOPERATIVE HIP ABDUCTION TYPE, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT
HMSAAA	Q3 2025	DME/Medical Supplies	L1832	HCPCS	KNEE ORTHOSIS, ADJUSTABLE KNEE JOINTS (UNICENTRIC OR POLYCENTRIC), POSITIONAL ORTHOSIS, RIGID SUPPORT, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, N
HMSAAA	Q3 2025	DME/Medical Supplies	L1833	HCPCS	KNEE ORTHOSIS, ADJUSTABLE KNEE JOINTS (UNICENTRIC OR POLYCENTRIC), POSITIONAL ORTHOSIS, RIGID SUPPORT, PREFABRICATED, OFF-THE SHELF
HMSAAA	Q3 2025	DME/Medical Supplies	L1834	HCPCS	KNEE ORTHOSIS, WITHOUT KNEE JOINT, RIGID, CUSTOM FABRICATED
HMSAAA	Q3 2025	DME/Medical Supplies	L1840	HCPCS	KNEE ORTHOSIS, DEROTATION, MEDIAL-LATERAL, ANTERIOR CRUCIATE LIGAMENT, CUSTOM FABRICATED
HMSAAA	Q3 2025	DME/Medical Supplies	L1847	HCPCS	KNEE ORTHOSIS, DOUBLE UPRIGHT WITH ADJUSTABLE JOINT, WITH INFLATABLE AIR SUPPORT CHAMBER(S), PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, A
HMSAAA	Q3 2025	DME/Medical Supplies	L1848	HCPCS	KNEE ORTHOSIS, DOUBLE UPRIGHT WITH ADJUSTABLE JOINT, WITH INFLATABLE AIR SUPPORT CHAMBER(S), PREFABRICATED, OFF-THE-SHELF
HMSAAA	Q3 2025	DME/Medical Supplies	L1860	HCPCS	KNEE ORTHOSIS, MODIFICATION OF SUPRACONDYLAR PROSTHETIC SOCKET, CUSTOM FABRICATED (SK)
HMSAAA	Q3 2025	DME/Medical Supplies	L1907	HCPCS	ANKLE ORTHOSIS, SUPRAMALLEOLAR WITH STRAPS, WITH OR WITHOUT INTERFACE/PADS, CUSTOM FABRICATED
HMSAAA	Q3 2025	DME/Medical Supplies	L1930	HCPCS	ANKLE FOOT ORTHOSIS, PLASTIC OR OTHER MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT
HMSAAA	Q3 2025	DME/Medical Supplies	L1932	HCPCS	ANKLE FOOT ORTHOSIS, RIGID ANTERIOR TIBIAL SECTION, TOTAL CARBON FIBER OR EQUAL MATERIAL, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEM
HMSAAA	Q3 2025	DME/Medical Supplies	L1933	HCPCS	ANKLE FOOT ORTHOSIS, RIGID ANTERIOR TIBIAL SECTION, TOTAL CARBON FIBER OR EQUAL MATERIAL, PREFABRICATED, OFF-THE-SHELF
HMSAAA	Q3 2025	DME/Medical Supplies	L1940	HCPCS	ANKLE FOOT ORTHOSIS, PLASTIC OR OTHER MATERIAL, CUSTOM FABRICATED
HMSAAA	Q3 2025	DME/Medical Supplies	L1945	HCPCS	ANKLE FOOT ORTHOSIS, PLASTIC, RIGID ANTERIOR TIBIAL SECTION (FLOOR REACTION), CUSTOM FABRICATED
HMSAAA	Q3 2025	DME/Medical Supplies	L1950	HCPCS	ANKLE FOOT ORTHOSIS, SPIRAL, (INSTITUTE OF REHABILITATIVE MEDICINE TYPE), PLASTIC, CUSTOM FABRICATED
HMSAAA	Q3 2025	DME/Medical Supplies	L1951	HCPCS	ANKLE FOOT ORTHOSIS, SPIRAL, (INSTITUTE OF REHABILITATIVE MEDICINE TYPE), PLASTIC OR OTHER MATERIAL, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDE
HMSAAA	Q3 2025	DME/Medical Supplies	L1952	HCPCS	ANKLE FOOT ORTHOSIS, SPIRAL, (INSTITUTE OF REHABILITATIVE MEDICINE TYPE), PLASTIC OR OTHER MATERIAL, PREFABRICATED, OFF-THE-SHELF
HMSAAA	Q3 2025	DME/Medical Supplies	L1960	HCPCS	ANKLE FOOT ORTHOSIS, POSTERIOR SOLID ANKLE, PLASTIC, CUSTOM FABRICATED
HMSAAA	Q3 2025	DME/Medical Supplies	L1970	HCPCS	ANKLE FOOT ORTHOSIS, PLASTIC WITH ANKLE JOINT, CUSTOM FABRICATED
HMSAAA	Q3 2025	DME/Medical Supplies	L1971	HCPCS	ANKLE FOOT ORTHOSIS, PLASTIC OR OTHER MATERIAL WITH ANKLE JOINT, WITH OR WITHOUT DORSIFLEXION ASSIST, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT
HMSAAA	Q3 2025	DME/Medical Supplies	L1980	HCPCS	ANKLE FOOT ORTHOSIS, SINGLE UPRIGHT FREE PLANTAR DORSIFLEXION, SOLID STIRRUP, CALF BAND/CUFF (SINGLE BAR 'BK' ORTHOSIS), CUSTOM FABRICATED
HMSAAA	Q3 2025	DME/Medical Supplies	L1990	HCPCS	ANKLE FOOT ORTHOSIS, DOUBLE UPRIGHT FREE PLANTAR DORSIFLEXION, SOLID STIRRUP, CALF BAND/CUFF (DOUBLE BAR 'BK' ORTHOSIS), CUSTOM FABRICATED
HMSAAA	Q3 2025	DME/Medical Supplies	L2005	HCPCS	KNEE ANKLE FOOT ORTHOSIS, ANY MATERIAL, SINGLE OR DOUBLE UPRIGHT, STANCE CONTROL, AUTOMATIC LOCK AND SWING PHASE RELEASE, ANY TYPE ACTIVATION, INCLUD
HMSAAA	Q3 2025	DME/Medical Supplies	L2036	HCPCS	KNEE ANKLE FOOT ORTHOSIS, FULL PLASTIC, DOUBLE UPRIGHT, WITH OR WITHOUT FREE MOTION KNEE, WITH OR WITHOUT FREE MOTION ANKLE, CUSTOM FABRICATED
HMSAAA	Q3 2025	DME/Medical Supplies	L2250	HCPCS	ADDITION TO LOWER EXTREMITY, FOOT PLATE, MOLDED TO PATIENT MODEL, STIRRUP ATTACHMENT
HMSAAA	Q3 2025	DME/Medical Supplies	L2280	HCPCS	ADDITION TO LOWER EXTREMITY, MOLDED INNER BOOT
HMSAAA	Q3 2025	DME/Medical Supplies	L2300	HCPCS	ADDITION TO LOWER EXTREMITY, ABDUCTION BAR (BILATERAL HIP INVOLVEMENT), JOINTED, ADJUSTABLE
HMSAAA	Q3 2025	DME/Medical Supplies	L2330	HCPCS	ADDITION TO LOWER EXTREMITY, LACER MOLDED TO PATIENT MODEL, FOR CUSTOM FABRICATED ORTHOSIS ONLY
HMSAAA	Q3 2025	DME/Medical Supplies	L2340	HCPCS	ADDITION TO LOWER EXTREMITY, PRE-TIBIAL SHELL, MOLDED TO PATIENT MODEL
HMSAAA	Q3 2025	DME/Medical Supplies	L2350	HCPCS	ADDITION TO LOWER EXTREMITY, PROSTHETIC TYPE, (BK) SOCKET, MOLDED TO PATIENT MODEL, (USED FOR 'PTB' 'AFO' ORTHOSES)
HMSAAA	Q3 2025	DME/Medical Supplies	L3230	HCPCS	ORTHOPEDIC FOOTWEAR, CUSTOM SHOE, DEPTH INLAY, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L3330	HCPCS	LIFT, ELEVATION, METAL EXTENSION (SKATE)
HMSAAA	Q3 2025	DME/Medical Supplies	L3678	HCPCS	SHOULDER ORTHOSIS, SHOULDER JOINT DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, PREFABRICATED, OFF-THE-SHELF
HMSAAA	Q3 2025	DME/Medical Supplies	L3806	HCPCS	WRIST HAND FINGER ORTHOSIS, INCLUDES ONE OR MORE NONTORSION JOINT(S), TURNBUCKLES, ELASTIC BANDS/SPRINGS, MAY INCLUDE SOFT INTERFACE MATERIAL, STRAP
HMSAAA	Q3 2025	DME/Medical Supplies	L3808	HCPCS	WRIST HAND FINGER ORTHOSIS, RIGID WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE MATERIAL; STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT
HMSAAA	Q3 2025	DME/Medical Supplies	L3900	HCPCS	WRIST HAND FINGER ORTHOSIS, DYNAMIC FLEXOR HINGE, RECIPROCAL WRIST EXTENSION/ FLEXION, FINGER FLEXION/EXTENSION, WRIST OR FINGER DRIVEN, CUSTOM FABR
HMSAAA	Q3 2025	DME/Medical Supplies	L3901	HCPCS	WRIST HAND FINGER ORTHOSIS, DYNAMIC FLEXOR HINGE, RECIPROCAL WRIST EXTENSION/ FLEXION, FINGER FLEXION/EXTENSION, CABLE DRIVEN, CUSTOM FABRICATED
HMSAAA	Q3 2025	DME/Medical Supplies	L3904	HCPCS	WRIST HAND FINGER ORTHOSIS, EXTERNAL POWERED, ELECTRIC, CUSTOM FABRICATED
HMSAAA	Q3 2025	DME/Medical Supplies	L3905	HCPCS	WRIST HAND ORTHOSIS, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INC
HMSAAA	Q3 2025	DME/Medical Supplies	L3906	HCPCS	WRIST HAND ORTHOSIS, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT
HMSAAA	Q3 2025	DME/Medical Supplies	L3916	HCPCS	WRIST HAND ORTHOSIS, INCLUDES ONE OR MORE NONTORSION JOINT(S), ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, PREFABRICATED, OFF-TH
HMSAAA	Q3 2025	DME/Medical Supplies	L3921	HCPCS	HAND FINGER ORTHOSIS, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, IN
HMSAAA	Q3 2025	DME/Medical Supplies	L4631	HCPCS	ANKLE FOOT ORTHOSIS, WALKING BOOT TYPE, VARUS/VALGUS CORRECTION, ROCKER BOTTOM, ANTERIOR TIBIAL SHELL, SOFT INTERFACE, CUSTOM ARCH SUPPORT, PLASTIC

HMSAAA	Q3 2025	DME/Medical Supplies	L5000	HCPCS	PARTIAL FOOT, SHOE INSERT WITH LONGITUDINAL ARCH, TOE FILLER
HMSAAA	Q3 2025	DME/Medical Supplies	L5010	HCPCS	PARTIAL FOOT, MOLDED SOCKET, ANKLE HEIGHT, WITH TOE FILLER
HMSAAA	Q3 2025	DME/Medical Supplies	L5020	HCPCS	PARTIAL FOOT, MOLDED SOCKET, TIBIAL TUBERCLE HEIGHT, WITH TOE FILLER
HMSAAA	Q3 2025	DME/Medical Supplies	L5050	HCPCS	ANKLE, SYMES, MOLDED SOCKET, SACH FOOT
HMSAAA	Q3 2025	DME/Medical Supplies	L5060	HCPCS	ANKLE, SYMES, METAL FRAME, MOLDED LEATHER SOCKET, ARTICULATED ANKLE/FOOT
HMSAAA	Q3 2025	DME/Medical Supplies	L5100	HCPCS	BELOW KNEE, MOLDED SOCKET, SHIN, SACH FOOT
HMSAAA	Q3 2025	DME/Medical Supplies	L5105	HCPCS	BELOW KNEE, PLASTIC SOCKET, JOINTS AND THIGH LACER, SACH FOOT
HMSAAA	Q3 2025	DME/Medical Supplies	L5150	HCPCS	KNEE DISARTICULATION (OR THROUGH KNEE), MOLDED SOCKET, EXTERNAL KNEE JOINTS, SHIN, SACH FOOT
HMSAAA	Q3 2025	DME/Medical Supplies	L5160	HCPCS	KNEE DISARTICULATION (OR THROUGH KNEE), MOLDED SOCKET, BENT KNEE CONFIGURATION, EXTERNAL KNEE JOINTS, SHIN, SACH FOOT
HMSAAA	Q3 2025	DME/Medical Supplies	L5200	HCPCS	ABOVE KNEE, MOLDED SOCKET, SINGLE AXIS CONSTANT FRICTION KNEE, SHIN, SACH FOOT
HMSAAA	Q3 2025	DME/Medical Supplies	L5210	HCPCS	ABOVE KNEE, SHORT PROSTHESIS, NO KNEE JOINT ('STUBBIES'), WITH FOOT BLOCKS, NO ANKLE JOINTS, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L5220	HCPCS	ABOVE KNEE, SHORT PROSTHESIS, NO KNEE JOINT ('STUBBIES'), WITH ARTICULATED ANKLE/FOOT, DYNAMICALLY ALIGNED, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L5230	HCPCS	ABOVE KNEE, FOR PROXIMAL FEMORAL FOCAL DEFICIENCY, CONSTANT FRICTION KNEE, SHIN, SACH FOOT
HMSAAA	Q3 2025	DME/Medical Supplies	L5250	HCPCS	HIP DISARTICULATION, CANADIAN TYPE; MOLDED SOCKET, HIP JOINT, SINGLE AXIS CONSTANT FRICTION KNEE, SHIN, SACH FOOT
HMSAAA	Q3 2025	DME/Medical Supplies	L5270	HCPCS	HIP DISARTICULATION, TILT TABLE TYPE; MOLDED SOCKET, LOCKING HIP JOINT, SINGLE AXIS CONSTANT FRICTION KNEE, SHIN, SACH FOOT
HMSAAA	Q3 2025	DME/Medical Supplies	L5280	HCPCS	HEMIPELVECTOMY, CANADIAN TYPE; MOLDED SOCKET, HIP JOINT, SINGLE AXIS CONSTANT FRICTION KNEE, SHIN, SACH FOOT
HMSAAA	Q3 2025	DME/Medical Supplies	L5301	HCPCS	BELOW KNEE, MOLDED SOCKET, SHIN, SACH FOOT, ENDOSKELETAL SYSTEM
HMSAAA	Q3 2025	DME/Medical Supplies	L5312	HCPCS	KNEE DISARTICULATION (OR THROUGH KNEE), MOLDED SOCKET, SINGLE AXIS KNEE, PYLON, SACH FOOT, ENDOSKELETAL SYSTEM
HMSAAA	Q3 2025	DME/Medical Supplies	L5321	HCPCS	ABOVE KNEE, MOLDED SOCKET, OPEN END, SACH FOOT, ENDOSKELETAL SYSTEM, SINGLE AXIS KNEE
HMSAAA	Q3 2025	DME/Medical Supplies	L5331	HCPCS	HIP DISARTICULATION, CANADIAN TYPE, MOLDED SOCKET, ENDOSKELETAL SYSTEM, HIP JOINT, SINGLE AXIS KNEE, SACH FOOT
HMSAAA	Q3 2025	DME/Medical Supplies	L5341	HCPCS	HEMIPELVECTOMY, CANADIAN TYPE, MOLDED SOCKET, ENDOSKELETAL SYSTEM, HIP JOINT, SINGLE AXIS KNEE, SACH FOOT
HMSAAA	Q3 2025	DME/Medical Supplies	L5400	HCPCS	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING, INCLUDING FITTING, ALIGNMENT, SUSPENSION, AND ONE CAST CHANGE, BELOW KN
HMSAAA	Q3 2025	DME/Medical Supplies	L5410	HCPCS	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING, INCLUDING FITTING, ALIGNMENT AND SUSPENSION, BELOW KNEE, EACH ADDITIONA
HMSAAA	Q3 2025	DME/Medical Supplies	L5420	HCPCS	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING, INCLUDING FITTING, ALIGNMENT AND SUSPENSION AND ONE CAST CHANGE 'AK' OR
HMSAAA	Q3 2025	DME/Medical Supplies	L5430	HCPCS	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING, INCL. FITTING, ALIGNMENT AND SUPENSION, 'AK' OR KNEE DISARTICULATION, EACH A
HMSAAA	Q3 2025	DME/Medical Supplies	L5450	HCPCS	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF NON-WEIGHT BEARING RIGID DRESSING, BELOW KNEE
HMSAAA	Q3 2025	DME/Medical Supplies	L5460	HCPCS	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF NON-WEIGHT BEARING RIGID DRESSING, ABOVE KNEE
HMSAAA	Q3 2025	DME/Medical Supplies	L5500	HCPCS	INITIAL, BELOW KNEE 'PTB' TYPE SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, PLASTER SOCKET, DIRECT FORMED
HMSAAA	Q3 2025	DME/Medical Supplies	L5505	HCPCS	INITIAL, ABOVE KNEE - KNEE DISARTICULATION, ISCHIAL LEVEL SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, PLASTER SOCKET, DIRECT FORMED
HMSAAA	Q3 2025	DME/Medical Supplies	L5510	HCPCS	PREPARATORY, BELOW KNEE 'PTB' TYPE SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, PLASTER SOCKET, MOLDED TO MODEL
HMSAAA	Q3 2025	DME/Medical Supplies	L5520	HCPCS	PREPARATORY, BELOW KNEE 'PTB' TYPE SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, THERMOPLASTIC OR EQUAL, DIRECT FORMED
HMSAAA	Q3 2025	DME/Medical Supplies	L5530	HCPCS	PREPARATORY, BELOW KNEE 'PTB' TYPE SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, THERMOPLASTIC OR EQUAL, MOLDED TO MODEL
HMSAAA	Q3 2025	DME/Medical Supplies	L5535	HCPCS	PREPARATORY, BELOW KNEE 'PTB' TYPE SOCKET, NON-ALIGNABLE SYSTEM, NO COVER, SACH FOOT, PREFABRICATED, ADJUSTABLE OPEN END SOCKET
HMSAAA	Q3 2025	DME/Medical Supplies	L5540	HCPCS	PREPARATORY, BELOW KNEE 'PTB' TYPE SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, LAMINATED SOCKET, MOLDED TO MODEL
HMSAAA	Q3 2025	DME/Medical Supplies	L5560	HCPCS	PREPARATORY, ABOVE KNEE- KNEE DISARTICULATION, ISCHIAL LEVEL SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, PLASTER SOCKET, MOLDED TO MOD
HMSAAA	Q3 2025	DME/Medical Supplies	L5570	HCPCS	PREPARATORY, ABOVE KNEE - KNEE DISARTICULATION, ISCHIAL LEVEL SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, THERMOPLASTIC OR EQUAL, DIRECT
HMSAAA	Q3 2025	DME/Medical Supplies	L5580	HCPCS	PREPARATORY, ABOVE KNEE - KNEE DISARTICULATION ISCHIAL LEVEL SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, THERMOPLASTIC OR EQUAL, MOLDE
HMSAAA	Q3 2025	DME/Medical Supplies	L5585	HCPCS	PREPARATORY, ABOVE KNEE - KNEE DISARTICULATION, ISCHIAL LEVEL SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, PREFABRICATED ADJUSTABLE OPEN
HMSAAA	Q3 2025	DME/Medical Supplies	L5590	HCPCS	PREPARATORY, ABOVE KNEE - KNEE DISARTICULATION ISCHIAL LEVEL SOCKET, NON-ALIGNABLE SYSTEM, PYLON NO COVER, SACH FOOT, LAMINATED SOCKET, MOLDED TO MO
HMSAAA	Q3 2025	DME/Medical Supplies	L5595	HCPCS	PREPARATORY, HIP DISARTICULATION-HEMIPELVECTOMY, PYLON, NO COVER, SACH FOOT, THERMOPLASTIC OR EQUAL, MOLDED TO PATIENT MODEL
HMSAAA	Q3 2025	DME/Medical Supplies	L5600	HCPCS	PREPARATORY, HIP DISARTICULATION-HEMIPELVECTOMY, PYLON, NO COVER, SACH FOOT, LAMINATED SOCKET, MOLDED TO PATIENT MODEL
HMSAAA	Q3 2025	DME/Medical Supplies	L5610	HCPCS	ADDITION TO LOWER EXTREMITY, ENDOSKELETAL SYSTEM, ABOVE KNEE, HYDRACADENCE SYSTEM
HMSAAA	Q3 2025	DME/Medical Supplies	L5611	HCPCS	ADDITION TO LOWER EXTREMITY, ENDOSKELETAL SYSTEM, ABOVE KNEE - KNEE DISARTICULATION, 4 BAR LINKAGE, WITH FRICTION SWING PHASE CONTROL
HMSAAA	Q3 2025	DME/Medical Supplies	L5613	HCPCS	ADDITION TO LOWER EXTREMITY, ENDOSKELETAL SYSTEM, ABOVE KNEE-KNEE DISARTICULATION, 4 BAR LINKAGE, WITH HYDRAULIC SWING PHASE CONTROL
HMSAAA	Q3 2025	DME/Medical Supplies	L5614	HCPCS	ADDITION TO LOWER EXTREMITY, EXOSKELETAL SYSTEM, ABOVE KNEE-KNEE DISARTICULATION, 4 BAR LINKAGE, WITH PNEUMATIC SWING PHASE CONTROL
HMSAAA	Q3 2025	DME/Medical Supplies	L5616	HCPCS	ADDITION TO LOWER EXTREMITY, ENDOSKELETAL SYSTEM, ABOVE KNEE, UNIVERSAL MULTIPLEX SYSTEM, FRICTION SWING PHASE CONTROL
HMSAAA	Q3 2025	DME/Medical Supplies	L5617	HCPCS	ADDITION TO LOWER EXTREMITY, QUICK CHANGE SELF-ALIGNING UNIT, ABOVE KNEE OR BELOW KNEE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L5618	HCPCS	ADDITION TO LOWER EXTREMITY, TEST SOCKET, SYMES
HMSAAA	Q3 2025	DME/Medical Supplies	L5620	HCPCS	ADDITION TO LOWER EXTREMITY, TEST SOCKET, BELOW KNEE
HMSAAA	Q3 2025	DME/Medical Supplies	L5622	HCPCS	ADDITION TO LOWER EXTREMITY, TEST SOCKET, KNEE DISARTICULATION
HMSAAA	Q3 2025	DME/Medical Supplies	L5624	HCPCS	ADDITION TO LOWER EXTREMITY, TEST SOCKET, ABOVE KNEE
HMSAAA	Q3 2025	DME/Medical Supplies	L5626	HCPCS	ADDITION TO LOWER EXTREMITY, TEST SOCKET, HIP DISARTICULATION
HMSAAA	Q3 2025	DME/Medical Supplies	L5628	HCPCS	ADDITION TO LOWER EXTREMITY, TEST SOCKET, HEMIPELVECTOMY
HMSAAA	Q3 2025	DME/Medical Supplies	L5629	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, ACRYLIC SOCKET
HMSAAA	Q3 2025	DME/Medical Supplies	L5630	HCPCS	ADDITION TO LOWER EXTREMITY, SYMES TYPE, EXPANDABLE WALL SOCKET
HMSAAA	Q3 2025	DME/Medical Supplies	L5631	HCPCS	ADDITION TO LOWER EXTREMITY, ABOVE KNEE OR KNEE DISARTICULATION, ACRYLIC SOCKET
HMSAAA	Q3 2025	DME/Medical Supplies	L5632	HCPCS	ADDITION TO LOWER EXTREMITY, SYMES TYPE, 'PTB' BRIM DESIGN SOCKET
HMSAAA	Q3 2025	DME/Medical Supplies	L5634	HCPCS	ADDITION TO LOWER EXTREMITY, SYMES TYPE, POSTERIOR OPENING (CANADIAN) SOCKET
HMSAAA	Q3 2025	DME/Medical Supplies	L5636	HCPCS	ADDITION TO LOWER EXTREMITY, SYMES TYPE, MEDIAL OPENING SOCKET
HMSAAA	Q3 2025	DME/Medical Supplies	L5637	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, TOTAL CONTACT
HMSAAA	Q3 2025	DME/Medical Supplies	L5638	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, LEATHER SOCKET
HMSAAA	Q3 2025	DME/Medical Supplies	L5639	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, WOOD SOCKET
HMSAAA	Q3 2025	DME/Medical Supplies	L5640	HCPCS	ADDITION TO LOWER EXTREMITY, KNEE DISARTICULATION, LEATHER SOCKET
HMSAAA	Q3 2025	DME/Medical Supplies	L5642	HCPCS	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, LEATHER SOCKET
HMSAAA	Q3 2025	DME/Medical Supplies	L5643	HCPCS	ADDITION TO LOWER EXTREMITY, HIP DISARTICULATION, FLEXIBLE INNER SOCKET, EXTERNAL FRAME
HMSAAA	Q3 2025	DME/Medical Supplies	L5644	HCPCS	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, WOOD SOCKET
HMSAAA	Q3 2025	DME/Medical Supplies	L5645	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, FLEXIBLE INNER SOCKET, EXTERNAL FRAME
HMSAAA	Q3 2025	DME/Medical Supplies	L5646	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, AIR, FLUID, GEL OR EQUAL, CUSHION SOCKET
HMSAAA	Q3 2025	DME/Medical Supplies	L5647	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE SUCTION SOCKET
HMSAAA	Q3 2025	DME/Medical Supplies	L5648	HCPCS	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, AIR, FLUID, GEL OR EQUAL, CUSHION SOCKET
HMSAAA	Q3 2025	DME/Medical Supplies	L5649	HCPCS	ADDITION TO LOWER EXTREMITY, ISCHIAL CONTAINMENT/NARROW M-L SOCKET
HMSAAA	Q3 2025	DME/Medical Supplies	L5650	HCPCS	ADDITIONS TO LOWER EXTREMITY, TOTAL CONTACT, ABOVE KNEE OR KNEE DISARTICULATION SOCKET
HMSAAA	Q3 2025	DME/Medical Supplies	L5651	HCPCS	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, FLEXIBLE INNER SOCKET, EXTERNAL FRAME
HMSAAA	Q3 2025	DME/Medical Supplies	L5652	HCPCS	ADDITION TO LOWER EXTREMITY, SUCTION SUSPENSION, ABOVE KNEE OR KNEE DISARTICULATION SOCKET
HMSAAA	Q3 2025	DME/Medical Supplies	L5653	HCPCS	ADDITION TO LOWER EXTREMITY, KNEE DISARTICULATION, EXPANDABLE WALL SOCKET
HMSAAA	Q3 2025	DME/Medical Supplies	L5654	HCPCS	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, SYMES, (KEMBLO, PELITE, ALIPLAST, PLASTAZOTE OR EQUAL)
HMSAAA	Q3 2025	DME/Medical Supplies	L5655	HCPCS	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, BELOW KNEE (KEMBLO, PELITE, ALIPLAST, PLASTAZOTE OR EQUAL)
HMSAAA	Q3 2025	DME/Medical Supplies	L5656	HCPCS	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, KNEE DISARTICULATION (KEMBLO, PELITE, ALIPLAST, PLASTAZOTE OR EQUAL)
HMSAAA	Q3 2025	DME/Medical Supplies	L5658	HCPCS	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, ABOVE KNEE (KEMBLO, PELITE, ALIPLAST, PLASTAZOTE OR EQUAL)
HMSAAA	Q3 2025	DME/Medical Supplies	L5661	HCPCS	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, MULTI-DUROMETER SYMES
HMSAAA	Q3 2025	DME/Medical Supplies	L5665	HCPCS	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, MULTI-DUROMETER, BELOW KNEE
HMSAAA	Q3 2025	DME/Medical Supplies	L5666	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, CUFF SUSPENSION
HMSAAA	Q3 2025	DME/Medical Supplies	L5668	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, MOLDED DISTAL CUSHION
HMSAAA	Q3 2025	DME/Medical Supplies	L5670	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, MOLDED SUPRACONDYLAR SUSPENSION ('PTS' OR SIMILAR)
HMSAAA	Q3 2025	DME/Medical Supplies	L5671	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE / ABOVE KNEE SUSPENSION LOCKING MECHANISM (SHUTTLE, LANYARD OR EQUAL), EXCLUDES SOCKET INSERT
HMSAAA	Q3 2025	DME/Medical Supplies	L5672	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, REMOVABLE MEDIAL BRIM SUSPENSION
HMSAAA	Q3 2025	DME/Medical Supplies	L5673	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE/ABOVE KNEE, CUSTOM FABRICATED FROM EXISTING MOLD OR PREFABRICATED, SOCKET INSERT, SILICONE GEL, ELASTOMERIC
HMSAAA	Q3 2025	DME/Medical Supplies	L5676	HCPCS	ADDITIONS TO LOWER EXTREMITY, BELOW KNEE, KNEE JOINTS, SINGLE AXIS, PAIR
HMSAAA	Q3 2025	DME/Medical Supplies	L5677	HCPCS	ADDITIONS TO LOWER EXTREMITY, BELOW KNEE, KNEE JOINTS, POLYCENTRIC, PAIR
HMSAAA	Q3 2025	DME/Medical Supplies	L5678	HCPCS	ADDITIONS TO LOWER EXTREMITY, BELOW KNEE, JOINT COVERS, PAIR
HMSAAA	Q3 2025	DME/Medical Supplies	L5679	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE/ABOVE KNEE, CUSTOM FABRICATED FROM EXISTING MOLD OR PREFABRICATED, SOCKET INSERT, SILICONE GEL, ELASTOMERIC
HMSAAA	Q3 2025	DME/Medical Supplies	L5680	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, THIGH LACER, NONMOLDED
HMSAAA	Q3 2025	DME/Medical Supplies	L5681	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE/ABOVE KNEE, CUSTOM FABRICATED SOCKET INSERT FOR CONGENITAL OR ATYPICAL TRAUMATIC AMPUTEE, SILICONE GEL, ELAS

HMSAAA	Q3 2025	DME/Medical Supplies	L5682	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, THIGH LACER, GLUTEAL/ISCHIAL, MOLDED
HMSAAA	Q3 2025	DME/Medical Supplies	L5683	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE/ABOVE KNEE, CUSTOM FABRICATED SOCKET INSERT FOR OTHER THAN CONGENITAL OR ATYPICAL TRAUMATIC AMPUTEE, SILICO
HMSAAA	Q3 2025	DME/Medical Supplies	L5684	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, FORK STRAP
HMSAAA	Q3 2025	DME/Medical Supplies	L5685	HCPCS	ADDITION TO LOWER EXTREMITY PROSTHESIS, BELOW KNEE, SUSPENSION/SEALING SLEEVE, WITH OR WITHOUT VALVE, ANY MATERIAL, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L5686	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, BACK CHECK (EXTENSION CONTROL)
HMSAAA	Q3 2025	DME/Medical Supplies	L5688	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, WAIST BELT, WEBBING
HMSAAA	Q3 2025	DME/Medical Supplies	L5690	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, WAIST BELT, PADDED AND LINED
HMSAAA	Q3 2025	DME/Medical Supplies	L5692	HCPCS	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, PELVIC CONTROL BELT, LIGHT
HMSAAA	Q3 2025	DME/Medical Supplies	L5694	HCPCS	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, PELVIC CONTROL BELT, PADDED AND LINED
HMSAAA	Q3 2025	DME/Medical Supplies	L5695	HCPCS	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, PELVIC CONTROL, SLEEVE SUSPENSION, NEOPRENE OR EQUAL, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L5696	HCPCS	ADDITION TO LOWER EXTREMITY, ABOVE KNEE OR KNEE DISARTICULATION, PELVIC JOINT
HMSAAA	Q3 2025	DME/Medical Supplies	L5697	HCPCS	ADDITION TO LOWER EXTREMITY, ABOVE KNEE OR KNEE DISARTICULATION, PELVIC BAND
HMSAAA	Q3 2025	DME/Medical Supplies	L5698	HCPCS	ADDITION TO LOWER EXTREMITY, ABOVE KNEE OR KNEE DISARTICULATION, SILESIAN BANDAGE
HMSAAA	Q3 2025	DME/Medical Supplies	L5699	HCPCS	ALL LOWER EXTREMITY PROSTHESES, SHOULDER HARNESS
HMSAAA	Q3 2025	DME/Medical Supplies	L5700	HCPCS	REPLACEMENT, SOCKET, BELOW KNEE, MOLDED TO PATIENT MODEL
HMSAAA	Q3 2025	DME/Medical Supplies	L5701	HCPCS	REPLACEMENT, SOCKET, ABOVE KNEE/KNEE DISARTICULATION, INCLUDING ATTACHMENT PLATE, MOLDED TO PATIENT MODEL
HMSAAA	Q3 2025	DME/Medical Supplies	L5702	HCPCS	REPLACEMENT, SOCKET, HIP DISARTICULATION, INCLUDING HIP JOINT, MOLDED TO PATIENT MODEL
HMSAAA	Q3 2025	DME/Medical Supplies	L5703	HCPCS	ANKLE, SYMES, MOLDED TO PATIENT MODEL, SOCKET WITHOUT SOLID ANKLE CUSHION HEEL (SACH) FOOT, REPLACEMENT ONLY
HMSAAA	Q3 2025	DME/Medical Supplies	L5704	HCPCS	CUSTOM SHAPED PROTECTIVE COVER, BELOW KNEE
HMSAAA	Q3 2025	DME/Medical Supplies	L5705	HCPCS	CUSTOM SHAPED PROTECTIVE COVER, ABOVE KNEE
HMSAAA	Q3 2025	DME/Medical Supplies	L5706	HCPCS	CUSTOM SHAPED PROTECTIVE COVER, KNEE DISARTICULATION
HMSAAA	Q3 2025	DME/Medical Supplies	L5707	HCPCS	CUSTOM SHAPED PROTECTIVE COVER, HIP DISARTICULATION
HMSAAA	Q3 2025	DME/Medical Supplies	L5710	HCPCS	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, MANUAL LOCK
HMSAAA	Q3 2025	DME/Medical Supplies	L5711	HCPCS	ADDITIONS EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, MANUAL LOCK, ULTRA-LIGHT MATERIAL
HMSAAA	Q3 2025	DME/Medical Supplies	L5712	HCPCS	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FRICTION SWING AND STANCE PHASE CONTROL (SAFETY KNEE)
HMSAAA	Q3 2025	DME/Medical Supplies	L5714	HCPCS	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, VARIABLE FRICTION SWING PHASE CONTROL
HMSAAA	Q3 2025	DME/Medical Supplies	L5716	HCPCS	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, POLYCENTRIC, MECHANICAL STANCE PHASE LOCK
HMSAAA	Q3 2025	DME/Medical Supplies	L5718	HCPCS	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, POLYCENTRIC, FRICTION SWING AND STANCE PHASE CONTROL
HMSAAA	Q3 2025	DME/Medical Supplies	L5722	HCPCS	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, PNEUMATIC SWING, FRICTION STANCE PHASE CONTROL
HMSAAA	Q3 2025	DME/Medical Supplies	L5724	HCPCS	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FLUID SWING PHASE CONTROL
HMSAAA	Q3 2025	DME/Medical Supplies	L5726	HCPCS	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, EXTERNAL JOINTS FLUID SWING PHASE CONTROL
HMSAAA	Q3 2025	DME/Medical Supplies	L5728	HCPCS	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FLUID SWING AND STANCE PHASE CONTROL
HMSAAA	Q3 2025	DME/Medical Supplies	L5780	HCPCS	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, PNEUMATIC/HYDRA PNEUMATIC SWING PHASE CONTROL
HMSAAA	Q3 2025	DME/Medical Supplies	L5781	HCPCS	ADDITION TO LOWER LIMB PROSTHESIS, VACUUM PUMP, RESIDUAL LIMB VOLUME MANAGEMENT AND MOISTURE EVACUATION SYSTEM
HMSAAA	Q3 2025	DME/Medical Supplies	L5782	HCPCS	ADDITION TO LOWER LIMB PROSTHESIS, VACUUM PUMP, RESIDUAL LIMB VOLUME MANAGEMENT AND MOISTURE EVACUATION SYSTEM, HEAVY DUTY
HMSAAA	Q3 2025	DME/Medical Supplies	L5785	HCPCS	ADDITION, EXOSKELETAL SYSTEM, BELOW KNEE, ULTRA-LIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)
HMSAAA	Q3 2025	DME/Medical Supplies	L5790	HCPCS	ADDITION, EXOSKELETAL SYSTEM, ABOVE KNEE, ULTRA-LIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)
HMSAAA	Q3 2025	DME/Medical Supplies	L5795	HCPCS	ADDITION, EXOSKELETAL SYSTEM, HIP DISARTICULATION, ULTRA-LIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)
HMSAAA	Q3 2025	DME/Medical Supplies	L5810	HCPCS	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, MANUAL LOCK
HMSAAA	Q3 2025	DME/Medical Supplies	L5811	HCPCS	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, MANUAL LOCK, ULTRA-LIGHT MATERIAL
HMSAAA	Q3 2025	DME/Medical Supplies	L5812	HCPCS	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FRICTION SWING AND STANCE PHASE CONTROL (SAFETY KNEE)
HMSAAA	Q3 2025	DME/Medical Supplies	L5814	HCPCS	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, POLYCENTRIC, HYDRAULIC SWING PHASE CONTROL, MECHANICAL STANCE PHASE LOCK
HMSAAA	Q3 2025	DME/Medical Supplies	L5816	HCPCS	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, POLYCENTRIC, MECHANICAL STANCE PHASE LOCK
HMSAAA	Q3 2025	DME/Medical Supplies	L5818	HCPCS	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, POLYCENTRIC, FRICTION SWING, AND STANCE PHASE CONTROL
HMSAAA	Q3 2025	DME/Medical Supplies	L5822	HCPCS	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, PNEUMATIC SWING, FRICTION STANCE PHASE CONTROL
HMSAAA	Q3 2025	DME/Medical Supplies	L5824	HCPCS	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FLUID SWING PHASE CONTROL
HMSAAA	Q3 2025	DME/Medical Supplies	L5826	HCPCS	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, HYDRAULIC SWING PHASE CONTROL, WITH MINIATURE HIGH ACTIVITY FRAME
HMSAAA	Q3 2025	DME/Medical Supplies	L5828	HCPCS	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FLUID SWING AND STANCE PHASE CONTROL
HMSAAA	Q3 2025	DME/Medical Supplies	L5830	HCPCS	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, PNEUMATIC/ SWING PHASE CONTROL
HMSAAA	Q3 2025	DME/Medical Supplies	L5840	HCPCS	ADDITION, ENDOSKELETAL KNEE/SHIN SYSTEM, 4-BAR LINKAGE OR MULTIAXIAL, PNEUMATIC SWING PHASE CONTROL
HMSAAA	Q3 2025	DME/Medical Supplies	L5845	HCPCS	ADDITION, ENDOSKELETAL, KNEE-SHIN SYSTEM, STANCE FLEXION FEATURE, ADJUSTABLE
HMSAAA	Q3 2025	DME/Medical Supplies	L5848	HCPCS	ADDITION TO ENDOSKELETAL KNEE-SHIN SYSTEM, FLUID STANCE EXTENSION, DAMPENING FEATURE, WITH OR WITHOUT ADJUSTABILITY
HMSAAA	Q3 2025	DME/Medical Supplies	L5850	HCPCS	ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE OR HIP DISARTICULATION, KNEE EXTENSION ASSIST
HMSAAA	Q3 2025	DME/Medical Supplies	L5855	HCPCS	ADDITION, ENDOSKELETAL SYSTEM, HIP DISARTICULATION, MECHANICAL HIP EXTENSION ASSIST
HMSAAA	Q3 2025	DME/Medical Supplies	L5856	HCPCS	ADDITION TO LOWER EXTREMITY PROSTHESIS, ENDOSKELETAL KNEE-SHIN SYSTEM, MICROPROCESSOR CONTROL FEATURE, SWING AND STANCE PHASE, INCLUDES ELECTRON
HMSAAA	Q3 2025	DME/Medical Supplies	L5857	HCPCS	ADDITION TO LOWER EXTREMITY PROSTHESIS, ENDOSKELETAL KNEE-SHIN SYSTEM, MICROPROCESSOR CONTROL FEATURE, SWING PHASE ONLY, INCLUDES ELECTRONIC SEN
HMSAAA	Q3 2025	DME/Medical Supplies	L5858	HCPCS	ADDITION TO LOWER EXTREMITY PROSTHESIS, ENDOSKELETAL KNEE SHIN SYSTEM, MICROPROCESSOR CONTROL FEATURE, STANCE PHASE ONLY, INCLUDES ELECTRONIC SEN
HMSAAA	Q3 2025	DME/Medical Supplies	L5859	HCPCS	ADDITION TO LOWER EXTREMITY PROSTHESIS, ENDOSKELETAL KNEE-SHIN SYSTEM, POWERED AND PROGRAMMABLE FLEXION/EXTENSION ASSIST CONTROL, INCLUDES ANY TY
HMSAAA	Q3 2025	DME/Medical Supplies	L5910	HCPCS	ADDITION, ENDOSKELETAL SYSTEM, BELOW KNEE, ALIGNABLE SYSTEM
HMSAAA	Q3 2025	DME/Medical Supplies	L5920	HCPCS	ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE OR HIP DISARTICULATION, ALIGNABLE SYSTEM
HMSAAA	Q3 2025	DME/Medical Supplies	L5925	HCPCS	ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE, KNEE DISARTICULATION OR HIP DISARTICULATION, MANUAL LOCK
HMSAAA	Q3 2025	DME/Medical Supplies	L5930	HCPCS	ADDITION, ENDOSKELETAL SYSTEM, HIGH ACTIVITY KNEE CONTROL FRAME
HMSAAA	Q3 2025	DME/Medical Supplies	L5940	HCPCS	ADDITION, ENDOSKELETAL SYSTEM, BELOW KNEE, ULTRA-LIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)
HMSAAA	Q3 2025	DME/Medical Supplies	L5950	HCPCS	ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE, ULTRA-LIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)
HMSAAA	Q3 2025	DME/Medical Supplies	L5960	HCPCS	ADDITION, ENDOSKELETAL SYSTEM, HIP DISARTICULATION, ULTRA-LIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)
HMSAAA	Q3 2025	DME/Medical Supplies	L5961	HCPCS	ADDITION, ENDOSKELETAL SYSTEM, POLYCENTRIC HIP JOINT, PNEUMATIC OR HYDRAULIC CONTROL, ROTATION CONTROL, WITH OR WITHOUT FLEXION AND/OR EXTENSION C
HMSAAA	Q3 2025	DME/Medical Supplies	L5962	HCPCS	ADDITION, ENDOSKELETAL SYSTEM, BELOW KNEE, FLEXIBLE PROTECTIVE OUTER SURFACE COVERING SYSTEM
HMSAAA	Q3 2025	DME/Medical Supplies	L5964	HCPCS	ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE, FLEXIBLE PROTECTIVE OUTER SURFACE COVERING SYSTEM
HMSAAA	Q3 2025	DME/Medical Supplies	L5966	HCPCS	ADDITION, ENDOSKELETAL SYSTEM, HIP DISARTICULATION, FLEXIBLE PROTECTIVE OUTER SURFACE COVERING SYSTEM
HMSAAA	Q3 2025	DME/Medical Supplies	L5968	HCPCS	ADDITION TO LOWER LIMB PROSTHESIS, MULTIAXIAL ANKLE WITH SWING PHASE ACTIVE DORSIFLEXION FEATURE
HMSAAA	Q3 2025	DME/Medical Supplies	L5969	HCPCS	ADDITION, ENDOSKELETAL ANKLE-FOOT OR ANKLE SYSTEM, POWER ASSIST, INCLUDES ANY TYPE MOTOR(S)
HMSAAA	Q3 2025	DME/Medical Supplies	L5970	HCPCS	ALL LOWER EXTREMITY PROSTHESES, FOOT, EXTERNAL KEEL, SACH FOOT
HMSAAA	Q3 2025	DME/Medical Supplies	L5971	HCPCS	ALL LOWER EXTREMITY PROSTHESIS, SOLID ANKLE CUSHION HEEL (SACH) FOOT, REPLACEMENT ONLY
HMSAAA	Q3 2025	DME/Medical Supplies	L5972	HCPCS	ALL LOWER EXTREMITY PROSTHESES, FOOT, FLEXIBLE KEEL
HMSAAA	Q3 2025	DME/Medical Supplies	L5973	HCPCS	ENDOSKELETAL ANKLE FOOT SYSTEM, MICROPROCESSOR CONTROLLED FEATURE, DORSIFLEXION AND/OR PLANTAR FLEXION CONTROL, INCLUDES POWER SOURCE
HMSAAA	Q3 2025	DME/Medical Supplies	L5974	HCPCS	ALL LOWER EXTREMITY PROSTHESES, FOOT, SINGLE AXIS ANKLE/FOOT
HMSAAA	Q3 2025	DME/Medical Supplies	L5975	HCPCS	ALL LOWER EXTREMITY PROSTHESIS, COMBINATION SINGLE AXIS ANKLE AND FLEXIBLE KEEL FOOT
HMSAAA	Q3 2025	DME/Medical Supplies	L5976	HCPCS	ALL LOWER EXTREMITY PROSTHESES, ENERGY STORING FOOT (SEATTLE CARBON COPY II OR EQUAL)
HMSAAA	Q3 2025	DME/Medical Supplies	L5978	HCPCS	ALL LOWER EXTREMITY PROSTHESES, FOOT, MULTIAXIAL ANKLE/FOOT
HMSAAA	Q3 2025	DME/Medical Supplies	L5979	HCPCS	ALL LOWER EXTREMITY PROSTHESIS, MULTI-AXIAL ANKLE, DYNAMIC RESPONSE FOOT, ONE PIECE SYSTEM
HMSAAA	Q3 2025	DME/Medical Supplies	L5980	HCPCS	ALL LOWER EXTREMITY PROSTHESES, FLEX FOOT SYSTEM
HMSAAA	Q3 2025	DME/Medical Supplies	L5981	HCPCS	ALL LOWER EXTREMITY PROSTHESES, FLEX-WALK SYSTEM OR EQUAL
HMSAAA	Q3 2025	DME/Medical Supplies	L5982	HCPCS	ALL EXOSKELETAL LOWER EXTREMITY PROSTHESES, AXIAL ROTATION UNIT
HMSAAA	Q3 2025	DME/Medical Supplies	L5984	HCPCS	ALL ENDOSKELETAL LOWER EXTREMITY PROSTHESIS, AXIAL ROTATION UNIT, WITH OR WITHOUT ADJUSTABILITY
HMSAAA	Q3 2025	DME/Medical Supplies	L5985	HCPCS	ALL ENDOSKELETAL LOWER EXTREMITY PROSTHESES, DYNAMIC PROSTHETIC PYLON
HMSAAA	Q3 2025	DME/Medical Supplies	L5986	HCPCS	ALL LOWER EXTREMITY PROSTHESES, MULTI-AXIAL ROTATION UNIT ('MCP' OR EQUAL)
HMSAAA	Q3 2025	DME/Medical Supplies	L5987	HCPCS	ALL LOWER EXTREMITY PROSTHESIS, SHANK FOOT SYSTEM WITH VERTICAL LOADING PYLON
HMSAAA	Q3 2025	DME/Medical Supplies	L5988	HCPCS	ADDITION TO LOWER LIMB PROSTHESIS, VERTICAL SHOCK REDUCING PYLON FEATURE
HMSAAA	Q3 2025	DME/Medical Supplies	L5990	HCPCS	ADDITION TO LOWER EXTREMITY PROSTHESIS, USER ADJUSTABLE HEEL HEIGHT
HMSAAA	Q3 2025	DME/Medical Supplies	L5999	HCPCS	LOWER EXTREMITY PROSTHESIS, NOT OTHERWISE SPECIFIED
HMSAAA	Q3 2025	DME/Medical Supplies	L6000	HCPCS	PARTIAL HAND, THUMB REMAINING
HMSAAA	Q3 2025	DME/Medical Supplies	L6010	HCPCS	PARTIAL HAND, LITTLE AND/OR RING FINGER REMAINING
HMSAAA	Q3 2025	DME/Medical Supplies	L6020	HCPCS	PARTIAL HAND, NO FINGER REMAINING

HMSAAA	Q3 2025	DME/Medical Supplies	L6029	HCPCS	UPPER EXTREMITY ADDITION, TEST SOCKET/INTERFACE, PARTIAL HAND INCLUDING FINGERS
HMSAAA	Q3 2025	DME/Medical Supplies	L6030	HCPCS	UPPER EXTREMITY ADDITION, EXTERNAL FRAME, PARTIAL HAND INCLUDING FINGERS
HMSAAA	Q3 2025	DME/Medical Supplies	L6031	HCPCS	REPLACEMENT SOCKET/INTERFACE, PARTIAL HAND INCLUDING FINGERS, MOLDED TO PATIENT MODEL, FOR USE WITH OR WITHOUT EXTERNAL POWER
HMSAAA	Q3 2025	DME/Medical Supplies	L6032	HCPCS	ADDITION TO UPPER EXTREMITY PROSTHESIS, PARTIAL HAND INCLUDING FINGERS, ULTRALIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)
HMSAAA	Q3 2025	DME/Medical Supplies	L6033	HCPCS	ADDITION TO UPPER EXTREMITY PROSTHESIS, PARTIAL HAND INCLUDING FINGERS, ACRYLIC MATERIAL
HMSAAA	Q3 2025	DME/Medical Supplies	L6050	HCPCS	WRIST DISARTICULATION, MOLDED SOCKET, FLEXIBLE ELBOW HINGES, TRICEPS PAD
HMSAAA	Q3 2025	DME/Medical Supplies	L6055	HCPCS	WRIST DISARTICULATION, MOLDED SOCKET WITH EXPANDABLE INTERFACE, FLEXIBLE ELBOW HINGES, TRICEPS PAD
HMSAAA	Q3 2025	DME/Medical Supplies	L6100	HCPCS	BELOW ELBOW, MOLDED SOCKET, FLEXIBLE ELBOW HINGE, TRICEPS PAD
HMSAAA	Q3 2025	DME/Medical Supplies	L6110	HCPCS	BELOW ELBOW, MOLDED SOCKET, (MUENSTER OR NORTHWESTERN SUSPENSION TYPES)
HMSAAA	Q3 2025	DME/Medical Supplies	L6120	HCPCS	BELOW ELBOW, MOLDED DOUBLE WALL SPLIT SOCKET, STEP-UP HINGES, HALF CUFF
HMSAAA	Q3 2025	DME/Medical Supplies	L6130	HCPCS	BELOW ELBOW, MOLDED DOUBLE WALL SPLIT SOCKET, STUMP ACTIVATED LOCKING HINGE, HALF CUFF
HMSAAA	Q3 2025	DME/Medical Supplies	L6200	HCPCS	ELBOW DISARTICULATION, MOLDED SOCKET, OUTSIDE LOCKING HINGE, FOREARM
HMSAAA	Q3 2025	DME/Medical Supplies	L6205	HCPCS	ELBOW DISARTICULATION, MOLDED SOCKET WITH EXPANDABLE INTERFACE, OUTSIDE LOCKING HINGES, FOREARM
HMSAAA	Q3 2025	DME/Medical Supplies	L6250	HCPCS	ABOVE ELBOW, MOLDED DOUBLE WALL SOCKET, INTERNAL LOCKING ELBOW, FOREARM
HMSAAA	Q3 2025	DME/Medical Supplies	L6300	HCPCS	SHOULDER DISARTICULATION, MOLDED SOCKET, SHOULDER BULKHEAD, HUMERAL SECTION, INTERNAL LOCKING ELBOW, FOREARM
HMSAAA	Q3 2025	DME/Medical Supplies	L6310	HCPCS	SHOULDER DISARTICULATION, PASSIVE RESTORATION (COMPLETE PROSTHESIS)
HMSAAA	Q3 2025	DME/Medical Supplies	L6320	HCPCS	SHOULDER DISARTICULATION, PASSIVE RESTORATION (SHOULDER CAP ONLY)
HMSAAA	Q3 2025	DME/Medical Supplies	L6350	HCPCS	INTERSCAPULAR THORACIC, MOLDED SOCKET, SHOULDER BULKHEAD, HUMERAL SECTION, INTERNAL LOCKING ELBOW, FOREARM
HMSAAA	Q3 2025	DME/Medical Supplies	L6360	HCPCS	INTERSCAPULAR THORACIC, PASSIVE RESTORATION (COMPLETE PROSTHESIS)
HMSAAA	Q3 2025	DME/Medical Supplies	L6370	HCPCS	INTERSCAPULAR THORACIC, PASSIVE RESTORATION (SHOULDER CAP ONLY)
HMSAAA	Q3 2025	DME/Medical Supplies	L6380	HCPCS	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING, INCLUDING FITTING ALIGNMENT AND SUSPENSION OF COMPONENTS, AND ONE CAS
HMSAAA	Q3 2025	DME/Medical Supplies	L6382	HCPCS	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING INCLUDING FITTING ALIGNMENT AND SUSPENSION OF COMPONENTS, AND ONE CAST
HMSAAA	Q3 2025	DME/Medical Supplies	L6384	HCPCS	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING INCLUDING FITTING ALIGNMENT AND SUSPENSION OF COMPONENTS, AND ONE CAST
HMSAAA	Q3 2025	DME/Medical Supplies	L6386	HCPCS	IMMEDIATE POST SURGICAL OR EARLY FITTING, EACH ADDITIONAL CAST CHANGE AND REALIGNMENT
HMSAAA	Q3 2025	DME/Medical Supplies	L6388	HCPCS	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF RIGID DRESSING ONLY
HMSAAA	Q3 2025	DME/Medical Supplies	L6400	HCPCS	BELOW ELBOW, MOLDED SOCKET, ENDOSKELETAL SYSTEM, INCLUDING SOFT PROSTHETIC TISSUE SHAPING
HMSAAA	Q3 2025	DME/Medical Supplies	L6450	HCPCS	ELBOW DISARTICULATION, MOLDED SOCKET, ENDOSKELETAL SYSTEM, INCLUDING SOFT PROSTHETIC TISSUE SHAPING
HMSAAA	Q3 2025	DME/Medical Supplies	L6500	HCPCS	ABOVE ELBOW, MOLDED SOCKET, ENDOSKELETAL SYSTEM, INCLUDING SOFT PROSTHETIC TISSUE SHAPING
HMSAAA	Q3 2025	DME/Medical Supplies	L6550	HCPCS	SHOULDER DISARTICULATION, MOLDED SOCKET, ENDOSKELETAL SYSTEM, INCLUDING SOFT PROSTHETIC TISSUE SHAPING
HMSAAA	Q3 2025	DME/Medical Supplies	L6570	HCPCS	INTERSCAPULAR THORACIC, MOLDED SOCKET, ENDOSKELETAL SYSTEM, INCLUDING SOFT PROSTHETIC TISSUE SHAPING
HMSAAA	Q3 2025	DME/Medical Supplies	L6580	HCPCS	PREPARATORY, WRIST DISARTICULATION OR BELOW ELBOW, SINGLE WALL PLASTIC SOCKET, FRICTION WRIST, FLEXIBLE ELBOW HINGES, FIGURE OF EIGHT HARNESS, HUMERA
HMSAAA	Q3 2025	DME/Medical Supplies	L6582	HCPCS	PREPARATORY, WRIST DISARTICULATION OR BELOW ELBOW, SINGLE WALL SOCKET, FRICTION WRIST, FLEXIBLE ELBOW HINGES, FIGURE OF EIGHT HARNESS, HUMERAL CUFF,
HMSAAA	Q3 2025	DME/Medical Supplies	L6584	HCPCS	PREPARATORY, ELBOW DISARTICULATION OR ABOVE ELBOW, SINGLE WALL PLASTIC SOCKET, FRICTION WRIST, LOCKING ELBOW, FIGURE OF EIGHT HARNESS, FAIR LEAD CABL
HMSAAA	Q3 2025	DME/Medical Supplies	L6586	HCPCS	PREPARATORY, ELBOW DISARTICULATION OR ABOVE ELBOW, SINGLE WALL SOCKET, FRICTION WRIST, LOCKING ELBOW, FIGURE OF EIGHT HARNESS, FAIR LEAD CABLE CONTR
HMSAAA	Q3 2025	DME/Medical Supplies	L6588	HCPCS	PREPARATORY, SHOULDER DISARTICULATION OR INTERSCAPULAR THORACIC, SINGLE WALL PLASTIC SOCKET, SHOULDER JOINT, LOCKING ELBOW, FRICTION WRIST, CHEST ST
HMSAAA	Q3 2025	DME/Medical Supplies	L6590	HCPCS	PREPARATORY, SHOULDER DISARTICULATION OR INTERSCAPULAR THORACIC, SINGLE WALL SOCKET, SHOULDER JOINT, LOCKING ELBOW, FRICTION WRIST, CHEST STRAP, FAI
HMSAAA	Q3 2025	DME/Medical Supplies	L6600	HCPCS	UPPER EXTREMITY ADDITIONS, POLYCENTRIC HINGE, PAIR
HMSAAA	Q3 2025	DME/Medical Supplies	L6605	HCPCS	UPPER EXTREMITY ADDITIONS, SINGLE PIVOT HINGE, PAIR
HMSAAA	Q3 2025	DME/Medical Supplies	L6610	HCPCS	UPPER EXTREMITY ADDITIONS, FLEXIBLE METAL HINGE, PAIR
HMSAAA	Q3 2025	DME/Medical Supplies	L6611	HCPCS	ADDITION TO UPPER EXTREMITY PROSTHESIS, EXTERNAL POWERED, ADDITIONAL SWITCH, ANY TYPE
HMSAAA	Q3 2025	DME/Medical Supplies	L6615	HCPCS	UPPER EXTREMITY ADDITION, DISCONNECT LOCKING WRIST UNIT
HMSAAA	Q3 2025	DME/Medical Supplies	L6616	HCPCS	UPPER EXTREMITY ADDITION, ADDITIONAL DISCONNECT INSERT FOR LOCKING WRIST UNIT, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L6620	HCPCS	UPPER EXTREMITY ADDITION, FLEXION/EXTENSION WRIST UNIT, WITH OR WITHOUT FRICTION
HMSAAA	Q3 2025	DME/Medical Supplies	L6621	HCPCS	UPPER EXTREMITY PROSTHESIS ADDITION, FLEXION/EXTENSION WRIST WITH OR WITHOUT FRICTION, FOR USE WITH EXTERNAL POWERED TERMINAL DEVICE
HMSAAA	Q3 2025	DME/Medical Supplies	L6623	HCPCS	UPPER EXTREMITY ADDITION, SPRING ASSISTED ROTATIONAL WRIST UNIT WITH LATCH RELEASE
HMSAAA	Q3 2025	DME/Medical Supplies	L6624	HCPCS	UPPER EXTREMITY ADDITION, FLEXION/EXTENSION AND ROTATION WRIST UNIT
HMSAAA	Q3 2025	DME/Medical Supplies	L6625	HCPCS	UPPER EXTREMITY ADDITION, ROTATION WRIST UNIT WITH CABLE LOCK
HMSAAA	Q3 2025	DME/Medical Supplies	L6628	HCPCS	UPPER EXTREMITY ADDITION, QUICK DISCONNECT HOOK ADAPTER, OTTO BOCK OR EQUAL
HMSAAA	Q3 2025	DME/Medical Supplies	L6629	HCPCS	UPPER EXTREMITY ADDITION, QUICK DISCONNECT LAMINATION COLLAR WITH COUPLING PIECE, OTTO BOCK OR EQUAL
HMSAAA	Q3 2025	DME/Medical Supplies	L6630	HCPCS	UPPER EXTREMITY ADDITION, STAINLESS STEEL, ANY WRIST
HMSAAA	Q3 2025	DME/Medical Supplies	L6632	HCPCS	UPPER EXTREMITY ADDITION, LATEX SUSPENSION SLEEVE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L6635	HCPCS	UPPER EXTREMITY ADDITION, LIFT ASSIST FOR ELBOW
HMSAAA	Q3 2025	DME/Medical Supplies	L6637	HCPCS	UPPER EXTREMITY ADDITION, NUDGE CONTROL ELBOW LOCK
HMSAAA	Q3 2025	DME/Medical Supplies	L6638	HCPCS	UPPER EXTREMITY ADDITION TO PROSTHESIS, ELECTRIC LOCKING FEATURE, ONLY FOR USE WITH MANUALLY POWERED ELBOW
HMSAAA	Q3 2025	DME/Medical Supplies	L6640	HCPCS	UPPER EXTREMITY ADDITIONS, SHOULDER ABDUCTION JOINT, PAIR
HMSAAA	Q3 2025	DME/Medical Supplies	L6641	HCPCS	UPPER EXTREMITY ADDITION, EXCURSION AMPLIFIER, PULLEY TYPE
HMSAAA	Q3 2025	DME/Medical Supplies	L6642	HCPCS	UPPER EXTREMITY ADDITION, EXCURSION AMPLIFIER, LEVER TYPE
HMSAAA	Q3 2025	DME/Medical Supplies	L6645	HCPCS	UPPER EXTREMITY ADDITION, SHOULDER FLEXION-ABDUCTION JOINT, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L6646	HCPCS	UPPER EXTREMITY ADDITION, SHOULDER JOINT, MULTIPOSITIONAL LOCKING, FLEXION, ADJUSTABLE ABDUCTION FRICTION CONTROL, FOR USE WITH BODY POWERED OR EXTE
HMSAAA	Q3 2025	DME/Medical Supplies	L6647	HCPCS	UPPER EXTREMITY ADDITION, SHOULDER LOCK MECHANISM, BODY POWERED ACTUATOR
HMSAAA	Q3 2025	DME/Medical Supplies	L6648	HCPCS	UPPER EXTREMITY ADDITION, SHOULDER LOCK MECHANISM, EXTERNAL POWERED ACTUATOR
HMSAAA	Q3 2025	DME/Medical Supplies	L6650	HCPCS	UPPER EXTREMITY ADDITION, SHOULDER UNIVERSAL JOINT, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L6655	HCPCS	UPPER EXTREMITY ADDITION, STANDARD CONTROL CABLE, EXTRA
HMSAAA	Q3 2025	DME/Medical Supplies	L6660	HCPCS	UPPER EXTREMITY ADDITION, HEAVY DUTY CONTROL CABLE
HMSAAA	Q3 2025	DME/Medical Supplies	L6665	HCPCS	UPPER EXTREMITY ADDITION, TEFLON, OR EQUAL, CABLE LINING
HMSAAA	Q3 2025	DME/Medical Supplies	L6670	HCPCS	UPPER EXTREMITY ADDITION, HOOK TO HAND, CABLE ADAPTER
HMSAAA	Q3 2025	DME/Medical Supplies	L6672	HCPCS	UPPER EXTREMITY ADDITION, HARNESS, CHEST OR SHOULDER, SADDLE TYPE
HMSAAA	Q3 2025	DME/Medical Supplies	L6675	HCPCS	UPPER EXTREMITY ADDITION, HARNESS, (E.G., FIGURE OF EIGHT TYPE), SINGLE CABLE DESIGN
HMSAAA	Q3 2025	DME/Medical Supplies	L6676	HCPCS	UPPER EXTREMITY ADDITION, HARNESS, (E.G., FIGURE OF EIGHT TYPE), DUAL CABLE DESIGN
HMSAAA	Q3 2025	DME/Medical Supplies	L6677	HCPCS	UPPER EXTREMITY ADDITION, HARNESS, TRIPLE CONTROL, SIMULTANEOUS OPERATION OF TERMINAL DEVICE AND ELBOW
HMSAAA	Q3 2025	DME/Medical Supplies	L6680	HCPCS	UPPER EXTREMITY ADDITION, TEST SOCKET, WRIST DISARTICULATION OR BELOW ELBOW
HMSAAA	Q3 2025	DME/Medical Supplies	L6682	HCPCS	UPPER EXTREMITY ADDITION, TEST SOCKET, ELBOW DISARTICULATION OR ABOVE ELBOW
HMSAAA	Q3 2025	DME/Medical Supplies	L6684	HCPCS	UPPER EXTREMITY ADDITION, TEST SOCKET, SHOULDER DISARTICULATION OR INTERSCAPULAR THORACIC
HMSAAA	Q3 2025	DME/Medical Supplies	L6686	HCPCS	UPPER EXTREMITY ADDITION, SUCTION SOCKET
HMSAAA	Q3 2025	DME/Medical Supplies	L6687	HCPCS	UPPER EXTREMITY ADDITION, FRAME TYPE SOCKET, BELOW ELBOW OR WRIST DISARTICULATION
HMSAAA	Q3 2025	DME/Medical Supplies	L6688	HCPCS	UPPER EXTREMITY ADDITION, FRAME TYPE SOCKET, ABOVE ELBOW OR ELBOW DISARTICULATION
HMSAAA	Q3 2025	DME/Medical Supplies	L6689	HCPCS	UPPER EXTREMITY ADDITION, FRAME TYPE SOCKET, SHOULDER DISARTICULATION
HMSAAA	Q3 2025	DME/Medical Supplies	L6690	HCPCS	UPPER EXTREMITY ADDITION, FRAME TYPE SOCKET, INTERSCAPULAR-THORACIC
HMSAAA	Q3 2025	DME/Medical Supplies	L6691	HCPCS	UPPER EXTREMITY ADDITION, REMOVABLE INSERT, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L6692	HCPCS	UPPER EXTREMITY ADDITION, SILICONE GEL INSERT OR EQUAL, WITH OR WITHOUT LOCKING MECHANISM, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L6693	HCPCS	UPPER EXTREMITY ADDITION, LOCKING ELBOW, FOREARM COUNTERBALANCE
HMSAAA	Q3 2025	DME/Medical Supplies	L6694	HCPCS	ADDITION TO UPPER EXTREMITY PROSTHESIS, BELOW ELBOW/ABOVE ELBOW, CUSTOM FABRICATED FROM EXISTING MOLD OR PREFABRICATED, SOCKET INSERT, SILICONE GE
HMSAAA	Q3 2025	DME/Medical Supplies	L6695	HCPCS	ADDITION TO UPPER EXTREMITY PROSTHESIS, BELOW ELBOW/ABOVE ELBOW, CUSTOM FABRICATED FROM EXISTING MOLD OR PREFABRICATED, SOCKET INSERT, SILICONE GE
HMSAAA	Q3 2025	DME/Medical Supplies	L6696	HCPCS	ADDITION TO UPPER EXTREMITY PROSTHESIS, BELOW ELBOW/ABOVE ELBOW, CUSTOM FABRICATED SOCKET INSERT FOR CONGENITAL OR ATYPICAL TRAUMATIC AMPUTEE, SIL
HMSAAA	Q3 2025	DME/Medical Supplies	L6697	HCPCS	ADDITION TO UPPER EXTREMITY PROSTHESIS, BELOW ELBOW/ABOVE ELBOW, CUSTOM FABRICATED SOCKET INSERT FOR OTHER THAN CONGENITAL OR ATYPICAL TRAUMATIC A
HMSAAA	Q3 2025	DME/Medical Supplies	L6698	HCPCS	ADDITION TO UPPER EXTREMITY PROSTHESIS, LOCK MECHANISM, EXCLUDES SOCKET INSERT
HMSAAA	Q3 2025	DME/Medical Supplies	L6703	HCPCS	TERMINAL DEVICE, PASSIVE HAND/MITT, ANY MATERIAL, ANY SIZE
HMSAAA	Q3 2025	DME/Medical Supplies	L6704	HCPCS	TERMINAL DEVICE, SPORT/RECREATIONAL/WORK ATTACHMENT, ANY MATERIAL, ANY SIZE
HMSAAA	Q3 2025	DME/Medical Supplies	L6706	HCPCS	TERMINAL DEVICE, HOOK, MECHANICAL, VOLUNTARY OPENING, ANY MATERIAL, ANY SIZE, LINED OR UNLINED
HMSAAA	Q3 2025	DME/Medical Supplies	L6707	HCPCS	TERMINAL DEVICE, HOOK, MECHANICAL, VOLUNTARY CLOSING, ANY MATERIAL, ANY SIZE, LINED OR UNLINED
HMSAAA	Q3 2025	DME/Medical Supplies	L6708	HCPCS	TERMINAL DEVICE, HAND, MECHANICAL, VOLUNTARY OPENING, ANY MATERIAL, ANY SIZE
HMSAAA	Q3 2025	DME/Medical Supplies	L6709	HCPCS	TERMINAL DEVICE, HAND, MECHANICAL, VOLUNTARY CLOSING, ANY MATERIAL, ANY SIZE
HMSAAA	Q3 2025	DME/Medical Supplies	L6711	HCPCS	TERMINAL DEVICE, HOOK, MECHANICAL, VOLUNTARY OPENING, ANY MATERIAL, ANY SIZE, LINED OR UNLINED, PEDIATRIC

HMSAAA	Q3 2025	DME/Medical Supplies	L6712	HCPCS	TERMINAL DEVICE, HOOK, MECHANICAL, VOLUNTARY CLOSING, ANY MATERIAL, ANY SIZE, LINED OR UNLINED, PEDIATRIC
HMSAAA	Q3 2025	DME/Medical Supplies	L6713	HCPCS	TERMINAL DEVICE, HAND, MECHANICAL, VOLUNTARY OPENING, ANY MATERIAL, ANY SIZE, PEDIATRIC
HMSAAA	Q3 2025	DME/Medical Supplies	L6714	HCPCS	TERMINAL DEVICE, HAND, MECHANICAL, VOLUNTARY CLOSING, ANY MATERIAL, ANY SIZE, PEDIATRIC
HMSAAA	Q3 2025	DME/Medical Supplies	L6715	HCPCS	TERMINAL DEVICE, MULTIPLE ARTICULATING DIGIT, INCLUDES MOTOR(S), INITIAL ISSUE OR REPLACEMENT
HMSAAA	Q3 2025	DME/Medical Supplies	L6721	HCPCS	TERMINAL DEVICE, HOOK OR HAND, HEAVY DUTY, MECHANICAL, VOLUNTARY OPENING, ANY MATERIAL, ANY SIZE, LINED OR UNLINED
HMSAAA	Q3 2025	DME/Medical Supplies	L6722	HCPCS	TERMINAL DEVICE, HOOK OR HAND, HEAVY DUTY, MECHANICAL, VOLUNTARY CLOSING, ANY MATERIAL, ANY SIZE, LINED OR UNLINED
HMSAAA	Q3 2025	DME/Medical Supplies	L6805	HCPCS	ADDITION TO TERMINAL DEVICE, MODIFIER WRIST UNIT
HMSAAA	Q3 2025	DME/Medical Supplies	L6810	HCPCS	ADDITION TO TERMINAL DEVICE, PRECISION PINCH DEVICE
HMSAAA	Q3 2025	DME/Medical Supplies	L6880	HCPCS	ELECTRIC HAND, SWITCH OR MYOELECTRIC CONTROLLED, INDEPENDENTLY ARTICULATING DIGITS, ANY GRASP PATTERN OR COMBINATION OF GRASP PATTERNS, INCLUDES M
HMSAAA	Q3 2025	DME/Medical Supplies	L6881	HCPCS	AUTOMATIC GRASP FEATURE, ADDITION TO UPPER LIMB ELECTRIC PROSTHETIC TERMINAL DEVICE
HMSAAA	Q3 2025	DME/Medical Supplies	L6882	HCPCS	MICROPROCESSOR CONTROL FEATURE, ADDITION TO UPPER LIMB PROSTHETIC TERMINAL DEVICE
HMSAAA	Q3 2025	DME/Medical Supplies	L6883	HCPCS	REPLACEMENT SOCKET, BELOW ELBOW/WRIST DISARTICULATION, MOLDED TO PATIENT MODEL, FOR USE WITH OR WITHOUT EXTERNAL POWER
HMSAAA	Q3 2025	DME/Medical Supplies	L6884	HCPCS	REPLACEMENT SOCKET, ABOVE ELBOW/ELBOW DISARTICULATION, MOLDED TO PATIENT MODEL, FOR USE WITH OR WITHOUT EXTERNAL POWER
HMSAAA	Q3 2025	DME/Medical Supplies	L6885	HCPCS	REPLACEMENT SOCKET, SHOULDER DISARTICULATION/INTERSCAPULAR THORACIC, MOLDED TO PATIENT MODEL, FOR USE WITH OR WITHOUT EXTERNAL POWER
HMSAAA	Q3 2025	DME/Medical Supplies	L6890	HCPCS	ADDITION TO UPPER EXTREMITY PROSTHESIS, GLOVE FOR TERMINAL DEVICE, ANY MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT
HMSAAA	Q3 2025	DME/Medical Supplies	L6895	HCPCS	ADDITION TO UPPER EXTREMITY PROSTHESIS, GLOVE FOR TERMINAL DEVICE, ANY MATERIAL, CUSTOM FABRICATED
HMSAAA	Q3 2025	DME/Medical Supplies	L6900	HCPCS	HAND RESTORATION (CASTS, SHADING AND MEASUREMENTS INCLUDED), PARTIAL HAND, WITH GLOVE, THUMB OR ONE FINGER REMAINING
HMSAAA	Q3 2025	DME/Medical Supplies	L6905	HCPCS	HAND RESTORATION (CASTS, SHADING AND MEASUREMENTS INCLUDED), PARTIAL HAND, WITH GLOVE, MULTIPLE FINGERS REMAINING
HMSAAA	Q3 2025	DME/Medical Supplies	L6910	HCPCS	HAND RESTORATION (CASTS, SHADING AND MEASUREMENTS INCLUDED), PARTIAL HAND, WITH GLOVE, NO FINGERS REMAINING
HMSAAA	Q3 2025	DME/Medical Supplies	L6915	HCPCS	HAND RESTORATION (SHADING, AND MEASUREMENTS INCLUDED), REPLACEMENT GLOVE FOR ABOVE
HMSAAA	Q3 2025	DME/Medical Supplies	L6920	HCPCS	WRIST DISARTICULATION, EXTERNAL POWER, SELF-SUSPENDED INNER SOCKET, REMOVABLE FOREARM SHELL, OTTO BOCK OR EQUAL, SWITCH, CABLES, TWO BATTERIES AND
HMSAAA	Q3 2025	DME/Medical Supplies	L6925	HCPCS	WRIST DISARTICULATION, EXTERNAL POWER, SELF-SUSPENDED INNER SOCKET, REMOVABLE FOREARM SHELL, OTTO BOCK OR EQUAL ELECTRODES, CABLES, TWO BATTERIES A
HMSAAA	Q3 2025	DME/Medical Supplies	L6930	HCPCS	BELOW ELBOW, EXTERNAL POWER, SELF-SUSPENDED INNER SOCKET, REMOVABLE FOREARM SHELL, OTTO BOCK OR EQUAL SWITCH, CABLES, TWO BATTERIES AND ONE CHAR
HMSAAA	Q3 2025	DME/Medical Supplies	L6935	HCPCS	BELOW ELBOW, EXTERNAL POWER, SELF-SUSPENDED INNER SOCKET, REMOVABLE FOREARM SHELL, OTTO BOCK OR EQUAL ELECTRODES, CABLES, TWO BATTERIES AND ONE
HMSAAA	Q3 2025	DME/Medical Supplies	L6940	HCPCS	ELBOW DISARTICULATION, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE HUMERAL SHELL, OUTSIDE LOCKING HINGES, FOREARM, OTTO BOCK OR EQUAL SWITCH,
HMSAAA	Q3 2025	DME/Medical Supplies	L6945	HCPCS	ELBOW DISARTICULATION, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE HUMERAL SHELL, OUTSIDE LOCKING HINGES, FOREARM, OTTO BOCK OR EQUAL ELECTRO
HMSAAA	Q3 2025	DME/Medical Supplies	L6950	HCPCS	ABOVE ELBOW, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE HUMERAL SHELL, INTERNAL LOCKING ELBOW, FOREARM, OTTO BOCK OR EQUAL SWITCH, CABLES, T
HMSAAA	Q3 2025	DME/Medical Supplies	L6955	HCPCS	ABOVE ELBOW, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE HUMERAL SHELL, INTERNAL LOCKING ELBOW, FOREARM, OTTO BOCK OR EQUAL ELECTRODES, CABL
HMSAAA	Q3 2025	DME/Medical Supplies	L6960	HCPCS	SHOULDER DISARTICULATION, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE SHOULDER SHELL, SHOULDER BULKHEAD, HUMERAL SECTION, MECHANICAL ELBOW
HMSAAA	Q3 2025	DME/Medical Supplies	L6965	HCPCS	SHOULDER DISARTICULATION, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE SHOULDER SHELL, SHOULDER BULKHEAD, HUMERAL SECTION, MECHANICAL ELBOW
HMSAAA	Q3 2025	DME/Medical Supplies	L6970	HCPCS	INTERSCAPULAR-THORACIC, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE SHOULDER SHELL, SHOULDER BULKHEAD, HUMERAL SECTION, MECHANICAL ELBOW,
HMSAAA	Q3 2025	DME/Medical Supplies	L6975	HCPCS	INTERSCAPULAR-THORACIC, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE SHOULDER SHELL, SHOULDER BULKHEAD, HUMERAL SECTION, MECHANICAL ELBOW,
HMSAAA	Q3 2025	DME/Medical Supplies	L7007	HCPCS	ELECTRIC HAND, SWITCH OR MYOELECTRIC CONTROLLED, ADULT
HMSAAA	Q3 2025	DME/Medical Supplies	L7008	HCPCS	ELECTRIC HAND, SWITCH OR MYOELECTRIC, CONTROLLED, PEDIATRIC
HMSAAA	Q3 2025	DME/Medical Supplies	L7009	HCPCS	ELECTRIC HOOK, SWITCH OR MYOELECTRIC CONTROLLED, ADULT
HMSAAA	Q3 2025	DME/Medical Supplies	L7040	HCPCS	PREHENSILE ACTUATOR, SWITCH CONTROLLED
HMSAAA	Q3 2025	DME/Medical Supplies	L7045	HCPCS	ELECTRIC HOOK, SWITCH OR MYOELECTRIC CONTROLLED, PEDIATRIC
HMSAAA	Q3 2025	DME/Medical Supplies	L7170	HCPCS	ELECTRONIC ELBOW, HOSMER OR EQUAL, SWITCH CONTROLLED
HMSAAA	Q3 2025	DME/Medical Supplies	L7180	HCPCS	ELECTRONIC ELBOW, MICROPROCESSOR SEQUENTIAL CONTROL OF ELBOW AND TERMINAL DEVICE
HMSAAA	Q3 2025	DME/Medical Supplies	L7181	HCPCS	ELECTRONIC ELBOW, MICROPROCESSOR SIMULTANEOUS CONTROL OF ELBOW AND TERMINAL DEVICE
HMSAAA	Q3 2025	DME/Medical Supplies	L7185	HCPCS	ELECTRONIC ELBOW, ADOLESCENT, VARIETY VILLAGE OR EQUAL, SWITCH CONTROLLED
HMSAAA	Q3 2025	DME/Medical Supplies	L7186	HCPCS	ELECTRONIC ELBOW, CHILD, VARIETY VILLAGE OR EQUAL, SWITCH CONTROLLED
HMSAAA	Q3 2025	DME/Medical Supplies	L7190	HCPCS	ELECTRONIC ELBOW, ADOLESCENT, VARIETY VILLAGE OR EQUAL, MYOELECTRONICALLY CONTROLLED
HMSAAA	Q3 2025	DME/Medical Supplies	L7191	HCPCS	ELECTRONIC ELBOW, CHILD, VARIETY VILLAGE OR EQUAL, MYOELECTRONICALLY CONTROLLED
HMSAAA	Q3 2025	DME/Medical Supplies	L7360	HCPCS	SIX VOLT BATTERY, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L7362	HCPCS	BATTERY CHARGER, SIX VOLT, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L7364	HCPCS	TWELVE VOLT BATTERY, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L7366	HCPCS	BATTERY CHARGER, TWELVE VOLT, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L7367	HCPCS	LITHIUM ION BATTERY, RECHARGEABLE, REPLACEMENT
HMSAAA	Q3 2025	DME/Medical Supplies	L7368	HCPCS	LITHIUM ION BATTERY CHARGER, REPLACEMENT ONLY
HMSAAA	Q3 2025	DME/Medical Supplies	L7400	HCPCS	ADDITION TO UPPER EXTREMITY PROSTHESIS, BELOW ELBOW/WRIST DISARTICULATION, ULTRALIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)
HMSAAA	Q3 2025	DME/Medical Supplies	L7401	HCPCS	ADDITION TO UPPER EXTREMITY PROSTHESIS, ABOVE ELBOW DISARTICULATION, ULTRALIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)
HMSAAA	Q3 2025	DME/Medical Supplies	L7402	HCPCS	ADDITION TO UPPER EXTREMITY PROSTHESIS, SHOULDER DISARTICULATION/INTERSCAPULAR THORACIC, ULTRALIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)
HMSAAA	Q3 2025	DME/Medical Supplies	L7403	HCPCS	ADDITION TO UPPER EXTREMITY PROSTHESIS, BELOW ELBOW/WRIST DISARTICULATION, ACRYLIC MATERIAL
HMSAAA	Q3 2025	DME/Medical Supplies	L7404	HCPCS	ADDITION TO UPPER EXTREMITY PROSTHESIS, ABOVE ELBOW DISARTICULATION, ACRYLIC MATERIAL
HMSAAA	Q3 2025	DME/Medical Supplies	L7405	HCPCS	ADDITION TO UPPER EXTREMITY PROSTHESIS, SHOULDER DISARTICULATION/INTERSCAPULAR THORACIC, ACRYLIC MATERIAL
HMSAAA	Q3 2025	DME/Medical Supplies	L7499	HCPCS	UPPER EXTREMITY PROSTHESIS, NOT OTHERWISE SPECIFIED
HMSAAA	Q3 2025	DME/Medical Supplies	L7510	HCPCS	REPAIR OF PROSTHETIC DEVICE, REPAIR OR REPLACE MINOR PARTS
HMSAAA	Q3 2025	DME/Medical Supplies	L7520	HCPCS	REPAIR PROSTHETIC DEVICE, LABOR COMPONENT, PER 15 MINUTES
HMSAAA	Q3 2025	DME/Medical Supplies	L7600	HCPCS	PROSTHETIC DONNING SLEEVE, ANY MATERIAL, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L8400	HCPCS	PROSTHETIC SHEATH, BELOW KNEE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L8410	HCPCS	PROSTHETIC SHEATH, ABOVE KNEE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L8415	HCPCS	PROSTHETIC SHEATH, UPPER LIMB, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L8417	HCPCS	PROSTHETIC SHEATH/SOCK, INCLUDING A GEL CUSHION LAYER, BELOW KNEE OR ABOVE KNEE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L8420	HCPCS	PROSTHETIC SOCK, MULTIPLE PLY, BELOW KNEE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L8430	HCPCS	PROSTHETIC SOCK, MULTIPLE PLY, ABOVE KNEE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L8440	HCPCS	PROSTHETIC SHRINKER, BELOW KNEE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L8460	HCPCS	PROSTHETIC SHRINKER, ABOVE KNEE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L8465	HCPCS	PROSTHETIC SHRINKER, UPPER LIMB, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L8470	HCPCS	PROSTHETIC SOCK, SINGLE PLY, FITTING, BELOW KNEE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L8480	HCPCS	PROSTHETIC SOCK, SINGLE PLY, FITTING, ABOVE KNEE, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L8614	HCPCS	COCHLEAR DEVICE, INCLUDES ALL INTERNAL AND EXTERNAL COMPONENTS
HMSAAA	Q3 2025	DME/Medical Supplies	L8615	HCPCS	HEADSET/HEADPIECE FOR USE WITH COCHLEAR IMPLANT DEVICE, REPLACEMENT
HMSAAA	Q3 2025	DME/Medical Supplies	L8616	HCPCS	MICROPHONE FOR USE WITH COCHLEAR IMPLANT DEVICE, REPLACEMENT
HMSAAA	Q3 2025	DME/Medical Supplies	L8617	HCPCS	TRANSMITTING COIL FOR USE WITH COCHLEAR IMPLANT DEVICE, REPLACEMENT
HMSAAA	Q3 2025	DME/Medical Supplies	L8618	HCPCS	TRANSMITTER CABLE FOR USE WITH COCHLEAR IMPLANT DEVICE OR AUDITORY OSSEOINTEGRATED DEVICE, REPLACEMENT
HMSAAA	Q3 2025	DME/Medical Supplies	L8621	HCPCS	ZINC AIR BATTERY FOR USE WITH COCHLEAR IMPLANT DEVICE AND AUDITORY OSSEOINTEGRATED SOUND PROCESSORS, REPLACEMENT, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L8622	HCPCS	ALKALINE BATTERY FOR USE WITH COCHLEAR IMPLANT DEVICE, ANY SIZE, REPLACEMENT, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L8623	HCPCS	LITHIUM ION BATTERY FOR USE WITH COCHLEAR IMPLANT DEVICE SPEECH PROCESSOR, OTHER THAN EAR LEVEL, REPLACEMENT, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L8624	HCPCS	LITHIUM ION BATTERY FOR USE WITH COCHLEAR IMPLANT OR AUDITORY OSSEOINTEGRATED DEVICE SPEECH PROCESSOR, EAR LEVEL, REPLACEMENT, EACH
HMSAAA	Q3 2025	DME/Medical Supplies	L8690	HCPCS	AUDITORY OSSEOINTEGRATED DEVICE, INCLUDES ALL INTERNAL AND EXTERNAL COMPONENTS
HMSAAA	Q3 2025	DME/Medical Supplies	L8692	HCPCS	AUDITORY OSSEOINTEGRATED DEVICE, EXTERNAL SOUND PROCESSOR, USED WITHOUT OSSEOINTEGRATION, BODY WORN, INCLUDES HEADBAND OR OTHER MEANS OF EXTE
HMSAAA	Q3 2025	DME/Medical Supplies	L8693	HCPCS	AUDITORY OSSEOINTEGRATED DEVICE ABUTMENT, ANY LENGTH, REPLACEMENT ONLY
HMSAAA	Q3 2025	DME/Medical Supplies	L8695	HCPCS	EXTERNAL RECHARGING SYSTEM FOR BATTERY (EXTERNAL) FOR USE WITH IMPLANTABLE NEUROSTIMULATOR, REPLACEMENT ONLY
HMSAAA	Q3 2025	DME/Medical Supplies	L9900	HCPCS	ORTHOTIC AND PROSTHETIC SUPPLY, ACCESSORY, AND/OR SERVICE COMPONENT OF ANOTHER HCPCS "L" CODE
HMSAAA	Q3 2025	DME/Medical Supplies	V5268	HCPCS	ASSISTIVE LISTENING DEVICE, TELEPHONE AMPLIFIER, ANY TYPE
HMSAAA	Q3 2025	DME/Medical Supplies	V5269	HCPCS	ASSISTIVE LISTENING DEVICE, ALERTING, ANY TYPE
HMSAAA	Q3 2025	DME/Medical Supplies	V5270	HCPCS	ASSISTIVE LISTENING DEVICE, TELEVISION AMPLIFIER, ANY TYPE
HMSAAA	Q3 2025	DME/Medical Supplies	V5271	HCPCS	ASSISTIVE LISTENING DEVICE, TELEVISION CAPTION DECODER
HMSAAA	Q3 2025	DME/Medical Supplies	V5272	HCPCS	ASSISTIVE LISTENING DEVICE, TDD
HMSAAA	Q3 2025	DME/Medical Supplies	V5273	HCPCS	ASSISTIVE LISTENING DEVICE, FOR USE WITH COCHLEAR IMPLANT
HMSAAA	Q3 2025	DME/Medical Supplies	V5274	HCPCS	ASSISTIVE LISTENING DEVICE, NOT OTHERWISE SPECIFIED
HMSAAA	Q3 2025	DME/Medical Supplies	V5275	HCPCS	EAR IMPRESSION, EACH

HMSAAA	Q3 2025	DME/Medical Supplies	V5281	HCPCS	ASSISTIVE LISTENING DEVICE, PERSONAL FM/DM SYSTEM, MONAURAL, (1 RECEIVER, TRANSMITTER, MICROPHONE), ANY TYPE
HMSAAA	Q3 2025	DME/Medical Supplies	V5282	HCPCS	ASSISTIVE LISTENING DEVICE, PERSONAL FM/DM SYSTEM, BINAURAL, (2 RECEIVERS, TRANSMITTER, MICROPHONE), ANY TYPE
HMSAAA	Q3 2025	DME/Medical Supplies	V5283	HCPCS	ASSISTIVE LISTENING DEVICE, PERSONAL FM/DM NECK, LOOP INDUCTION RECEIVER
HMSAAA	Q3 2025	DME/Medical Supplies	V5284	HCPCS	ASSISTIVE LISTENING DEVICE, PERSONAL FM/DM, EAR LEVEL RECEIVER
HMSAAA	Q3 2025	DME/Medical Supplies	V5285	HCPCS	ASSISTIVE LISTENING DEVICE, PERSONAL FM/DM, DIRECT AUDIO INPUT RECEIVER
HMSAAA	Q3 2025	DME/Medical Supplies	V5286	HCPCS	ASSISTIVE LISTENING DEVICE, PERSONAL BLUE TOOTH FM/DM RECEIVER
HMSAAA	Q3 2025	DME/Medical Supplies	V5287	HCPCS	ASSISTIVE LISTENING DEVICE, PERSONAL FM/DM RECEIVER, NOT OTHERWISE SPECIFIED
HMSAAA	Q3 2025	DME/Medical Supplies	V5288	HCPCS	ASSISTIVE LISTENING DEVICE, PERSONAL FM/DM TRANSMITTER ASSISTIVE LISTENING DEVICE
HMSAAA	Q3 2025	DME/Medical Supplies	V5289	HCPCS	ASSISTIVE LISTENING DEVICE, PERSONAL FM/DM ADAPTER/BOOT COUPLING DEVICE FOR RECEIVER, ANY TYPE
HMSAAA	Q3 2025	DME/Medical Supplies	V5290	HCPCS	ASSISTIVE LISTENING DEVICE, TRANSMITTER MICROPHONE, ANY TYPE
HMSAAA	Q3 2025	DME/Medical Supplies	V5298	HCPCS	HEARING AID, NOT OTHERWISE CLASSIFIED
HMSAAA	Q3 2025	DME/Medical Supplies	V5299	HCPCS	HEARING SERVICE, MISCELLANEOUS
HMSAAA	Q3 2025	DME/Medical Supplies	V5336	HCPCS	REPAIR/MODIFICATION OF AUGMENTATIVE COMMUNICATIVE SYSTEM OR DEVICE (EXCLUDES ADAPTIVE HEARING AID)
HMSAAA	Q3 2025	Diagnostic Testing	0698T	CPT	QUANTITATIVE MAGNETIC RESONANCE FOR ANALYSIS OF TISSUE COMPOSITION (EG, FAT, IRON, WATER CONTENT), INCLUDING MULTIPARAMETRIC DATA ACQUISITION, DATA P
HMSAAA	Q3 2025	Diagnostic Testing	0722T	CPT	QUANTITATIVE COMPUTED TOMOGRAPHY (CT) TISSUE CHARACTERIZATION, INCLUDING INTERPRETATION AND REPORT, OBTAINED WITH CONCURRENT CT EXAMINATION OF AN
HMSAAA	Q3 2025	Diagnostic Testing	0742T	CPT	ABSOLUTE QUANTITATION OF MYOCARDIAL BLOOD FLOW (AQMBF), SINGLE-PHOTON EMISSION COMPUTED TOMOGRAPHY (SPECT), WITH EXERCISE OR PHARMACOLOGIC STR
HMSAAA	Q3 2025	Outpatient Hosp	0784T	CPT	INSERTION OR REPLACEMENT OF PERCUTANEOUS ELECTRODE ARRAY, SPINAL, WITH INTEGRATED NEUROSTIMULATOR, INCLUDING IMAGING GUIDANCE, WHEN PERFORMED
HMSAAA	Q3 2025	Outpatient Hosp	0785T	CPT	REVISION OR REMOVAL OF NEUROSTIMULATOR ELECTRODE ARRAY, SPINAL, WITH INTEGRATED NEUROSTIMULATOR
HMSAAA	Q3 2025	Outpatient Hosp	0786T	CPT	INSERTION OR REPLACEMENT OF PERCUTANEOUS ELECTRODE ARRAY, SACRAL, WITH INTEGRATED NEUROSTIMULATOR, INCLUDING IMAGING GUIDANCE, WHEN PERFORMED
HMSAAA	Q3 2025	Outpatient Hosp	0787T	CPT	REVISION OR REMOVAL OF NEUROSTIMULATOR ELECTRODE ARRAY, SACRAL, WITH INTEGRATED NEUROSTIMULATOR
HMSAAA	Q3 2025	Diagnostic Testing	0788T	CPT	ELECTRONIC ANALYSIS WITH SIMPLE PROGRAMMING OF IMPLANTED INTEGRATED NEUROSTIMULATION SYSTEM (EG, ELECTRODE ARRAY AND RECEIVER), INCLUDING CONTACT
HMSAAA	Q3 2025	Diagnostic Testing	0789T	CPT	ELECTRONIC ANALYSIS WITH COMPLEX PROGRAMMING OF IMPLANTED INTEGRATED NEUROSTIMULATION SYSTEM (EG, ELECTRODE ARRAY AND RECEIVER), INCLUDING CONTA
HMSAAA	Q3 2025	Physician Services	17999	CPT	UNLISTED PROCEDURE, SKIN, MUCOUS MEMBRANE AND SUBCUTANEOUS TISSUE
HMSAAA	Q3 2025	Outpatient Hosp	29885	CPT	ARTHROSCOPY, KNEE, SURGICAL; DRILLING FOR OSTEOCHONDRITIS DISSECANS WITH BONE GRAFTING, WITH OR WITHOUT INTERNAL FIXATION (INCLUDING DEBRIDEMENT O
HMSAAA	Q3 2025	Outpatient Hosp	29886	CPT	ARTHROSCOPY, KNEE, SURGICAL; DRILLING FOR INTACT OSTEOCHONDRITIS DISSECANS LESION
HMSAAA	Q3 2025	Outpatient Hosp	29887	CPT	ARTHROSCOPY, KNEE, SURGICAL; DRILLING FOR INTACT OSTEOCHONDRITIS DISSECANS LESION WITH INTERNAL FIXATION
HMSAAA	Q3 2025	Inpatient Hosp	53400	CPT	URETHROPLASTY; FIRST STAGE, FOR FISTULA, DIVERTICULUM, OR STRICTURE (EG, JOHANNSEN TYPE)
HMSAAA	Q3 2025	Inpatient Hosp	53405	CPT	URETHROPLASTY; SECOND STAGE (FORMATION OF URETHRA), INCLUDING URINARY DIVERSION
HMSAAA	Q3 2025	Inpatient Hosp	53410	CPT	URETHROPLASTY, 1-STAGE RECONSTRUCTION OF MALE ANTERIOR URETHRA
HMSAAA	Q3 2025	Inpatient Hosp	53415	CPT	URETHROPLASTY, TRANSPUBIC OR PERINEAL, 1-STAGE, FOR RECONSTRUCTION OR REPAIR OF PROSTATIC OR MEMBRANOUS URETHRA
HMSAAA	Q3 2025	Outpatient Hosp	64582	CPT	OPEN IMPLANTATION OF HYPOGLOSSAL NERVE NEUROSTIMULATOR ARRAY, PULSE GENERATOR, AND DISTAL RESPIRATORY SENSOR ELECTRODE OR ELECTRODE ARRAY
HMSAAA	Q3 2025	Outpatient Hosp	64583	CPT	REVISION OR REPLACEMENT OF HYPOGLOSSAL NERVE NEUROSTIMULATOR ARRAY AND DISTAL RESPIRATORY SENSOR ELECTRODE OR ELECTRODE ARRAY, INCLUDING CONNE
HMSAAA	Q3 2025	Outpatient Hosp	64584	CPT	REMOVAL OF HYPOGLOSSAL NERVE NEUROSTIMULATOR ARRAY, PULSE GENERATOR, AND DISTAL RESPIRATORY SENSOR ELECTRODE OR ELECTRODE ARRAY
HMSAAA	Q3 2025	Outpatient Hosp	78830	CPT	RADIOPHARMACEUTICAL LOCALIZATION OF TUMOR, INFLAMMATORY PROCESS OR DISTRIBUTION OF RADIOPHARMACEUTICAL AGENT(S) (INCLUDES VASCULAR FLOW AND BLO
HMSAAA	Q3 2025	Outpatient Hosp	78831	CPT	RADIOPHARMACEUTICAL LOCALIZATION OF TUMOR, INFLAMMATORY PROCESS OR DISTRIBUTION OF RADIOPHARMACEUTICAL AGENT(S) (INCLUDES VASCULAR FLOW AND BLO
HMSAAA	Q3 2025	Outpatient Hosp	78832	CPT	RADIOPHARMACEUTICAL LOCALIZATION OF TUMOR, INFLAMMATORY PROCESS OR DISTRIBUTION OF RADIOPHARMACEUTICAL AGENT(S) (INCLUDES VASCULAR FLOW AND BLO
HMSAAA	Q3 2025	Diagnostic Testing	78835	CPT	RADIOPHARMACEUTICAL QUANTIFICATION MEASUREMENT(S) SINGLE AREA (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
HMSAAA	Q3 2025	DME/Medical Supplies	B4164	HCPCS	PARENTERAL NUTRITION SOLUTION: CARBOHYDRATES (DEXTROSE), 50% OR LESS (500 ML = 1 UNIT) - HOME MIX
HMSAAA	Q3 2025	DME/Medical Supplies	B4165	HCPCS	IDENTIFY TPN FORMULA USING HCPCS "B" CODES
HMSAAA	Q3 2025	DME/Medical Supplies	B4166	HCPCS	IDENTIFY TPN FORMULA USING HCPCS "B" CODES
HMSAAA	Q3 2025	DME/Medical Supplies	B4167	HCPCS	IDENTIFY TPN FORMULA USING HCPCS "B" CODES
HMSAAA	Q3 2025	DME/Medical Supplies	B4168	HCPCS	PARENTERAL NUTRITION SOLUTION; AMINO ACID, 3.5%, (500 ML = 1 UNIT) - HOME MIX
HMSAAA	Q3 2025	DME/Medical Supplies	B4169	HCPCS	IDENTIFY TPN FORMULA USING HCPCS "B" CODES
HMSAAA	Q3 2025	DME/Medical Supplies	B4170	HCPCS	IDENTIFY TPN FORMULA USING HCPCS "B" CODES
HMSAAA	Q3 2025	DME/Medical Supplies	B4171	HCPCS	IDENTIFY TPN FORMULA USING HCPCS "B" CODES
HMSAAA	Q3 2025	DME/Medical Supplies	B4172	HCPCS	PARENTERAL NUTRITION SOLUTION; AMINO ACID, 5.5% THROUGH 7%, (500 ML = 1 UNIT) - HOME MIX
HMSAAA	Q3 2025	DME/Medical Supplies	B4173	HCPCS	IDENTIFY TPN FORMULA USING HCPCS "B" CODES
HMSAAA	Q3 2025	DME/Medical Supplies	B4174	HCPCS	IDENTIFY TPN FORMULA USING HCPCS "B" CODES
HMSAAA	Q3 2025	DME/Medical Supplies	B4175	HCPCS	IDENTIFY TPN FORMULA USING HCPCS "B" CODES
HMSAAA	Q3 2025	DME/Medical Supplies	B4176	HCPCS	PARENTERAL NUTRITION SOLUTION; AMINO ACID, 7% THROUGH 8.5%, (500 ML = 1 UNIT) - HOME MIX
HMSAAA	Q3 2025	DME/Medical Supplies	B4177	HCPCS	IDENTIFY TPN FORMULA USING HCPCS "B" CODES
HMSAAA	Q3 2025	DME/Medical Supplies	B4178	HCPCS	PARENTERAL NUTRITION SOLUTION: AMINO ACID, GREATER THAN 8.5% (500 ML = 1 UNIT) - HOME MIX
HMSAAA	Q3 2025	DME/Medical Supplies	B4179	HCPCS	IDENTIFY TPN FORMULA USING HCPCS "B" CODES
HMSAAA	Q3 2025	DME/Medical Supplies	B4180	HCPCS	PARENTERAL NUTRITION SOLUTION; CARBOHYDRATES (DEXTROSE), GREATER THAN 50% (500 ML = 1 UNIT) - HOME MIX
HMSAAA	Q3 2025	DME/Medical Supplies	B4185	HCPCS	PARENTERAL NUTRITION SOLUTION, NOT OTHERWISE SPECIFIED, 10 GRAMS LIPIDS
HMSAAA	Q3 2025	DME/Medical Supplies	B4186	HCPCS	PARENTERAL NUTRITION SOLUTION; LIPIDS, 20% WITH ADMINISTRATION SET (500 ML = 1 UNIT)
HMSAAA	Q3 2025	DME/Medical Supplies	B4187	HCPCS	OMEGAVEN, 10 GRAMS LIPIDS
HMSAAA	Q3 2025	DME/Medical Supplies	B4188	HCPCS	IDENTIFY TPN FORMULA USING HCPCS "B" CODES
HMSAAA	Q3 2025	DME/Medical Supplies	B4190	HCPCS	IDENTIFY TPN FORMULA USING HCPCS "B" CODES
HMSAAA	Q3 2025	DME/Medical Supplies	B4191	HCPCS	IDENTIFY TPN FORMULA USING HCPCS "B" CODES
HMSAAA	Q3 2025	DME/Medical Supplies	B4192	HCPCS	IDENTIFY TPN FORMULA USING HCPCS "B" CODES
HMSAAA	Q3 2025	DME/Medical Supplies	B4194	HCPCS	IDENTIFY TPN FORMULA USING HCPCS "B" CODES
HMSAAA	Q3 2025	DME/Medical Supplies	B4195	HCPCS	IDENTIFY TPN FORMULA USING HCPCS "B" CODES
HMSAAA	Q3 2025	DME/Medical Supplies	B4196	HCPCS	IDENTIFY TPN FORMULA USING HCPCS "B" CODES
HMSAAA	Q3 2025	DME/Medical Supplies	B4198	HCPCS	IDENTIFY TPN FORMULA USING HCPCS "B" CODES
HMSAAA	Q3 2025	DME/Medical Supplies	B4216	HCPCS	PARENTERAL NUTRITION; ADDITIVES (VITAMINS, TRACE ELEMENTS, HEPARIN, ELECTROLYTES), HOME MIX, PER DAY
HMSAAA	Q3 2025	DME/Medical Supplies	C9399	HCPCS	UNCLASSIFIED DRUGS OR BIOLOGICALS
HMSAAA	Q3 2025	Other	J1412	HCPCS	INJECTION, VALOCTOCOGENE ROXAPARVOVEC-RVOX, PER ML, CONTAINING NOMINAL 2 X 10^13 VECTOR GENOMES
HMSAAA	Q3 2025	Behavioral Health	J1632	HCPCS	INJECTION, BREXANOLONE, 1 MG
HMSAAA	Q3 2025	Other	Q2054	HCPCS	LISOCABTAGENE MARALEUCEL, UP TO 110 MILLION AUTOLOGOUS ANTI-CD19 CAR-POSITIVE VIABLE T CELLS, INCLUDING LEUKAPHERESIS AND DOSE PREPARATION PROCEDU
HMSAAA	Q3 2025	Outpatient Hosp	Q4107	HCPCS	GRAFTJACKET, PER SQUARE CENTIMETER
HMSAAA	Q3 2025	Outpatient Hosp	Q4114	HCPCS	INTEGRA FLOWABLE WOUND MATRIX, INJECTABLE, 1 CC
HMSAAA	Q3 2025	Behavioral Health	S0013	HCPCS	ESKETAMINE, NASAL SPRAY, 1 MG
HMSAAA	Q3 2025	Behavioral Health	H0011	HCPCS	ALCOHOL AND/OR DRUG SERVICES; ACUTE DETOXIFICATION (RESIDENTIAL ADDICTION PROGRAM INPATIENT)
HMSAAA	Q3 2025	Outpatient Hosp	55880	CPT	ABLATION OF MALIGNANT PROSTATE TISSUE, TRANSRECTAL, WITH HIGH INTENSITY-FOCUSED ULTRASOUND (HIFU), INCLUDING ULTRASOUND GUIDANCE
HMSAAA	Q3 2025	Other	66179	CPT	AQUEOUS SHUNT TO EXTRAOCULAR EQUATORIAL PLATE RESERVOIR, EXTERNAL APPROACH; WITHOUT GRAFT
HMSAAA	Q3 2025	Outpatient Hosp	15819	CPT	CERVICOPLASTY
HMSAAA	Q3 2025	Outpatient Hosp	19324	CPT	MAMMOPLASTY, AUGMENTATION; WITHOUT PROSTHETIC IMPLANT
HMSAAA	Q3 2025	Physician Services	43644	CPT	LAPAROSCOPY, SURGICAL GASTRIC RESTRICTIVE PROCEDURE; WITH GASTRIC BYPASS AND ROUZEN-Y GASTROENTEROSTOMY (ROUX LIMB 150 CM OR LESS)
HMSAAA	Q3 2025	Physician Services	43645	CPT	LAPAROSCOPY, SURGICAL GASTRIC RESTRICTIVE PROCEDURE; WITH GASTRIC BYPASS AND SMALL INTESTINE RECONSTRUCTION TO LIMIT ABSORPTION
HMSAAA	Q3 2025	Physician Services	43770	CPT	LAPAROSCOPY, SURGICAL GASTRIC RESTRICTIVE PROCEDURE; PLACEMENT OF ADJUSTABLE GASTRIC RESTRICTIVE DEVICE (E.G., GASTRIC BAND AND SUBCUTANEOUS PORT C
HMSAAA	Q3 2025	Physician Services	43771	CPT	LAPAROSCOPY, SURGICAL GASTRIC RESTRICTIVE PROCEDURE; REVISION OF ADJUSTABLE GASTRIC RESTRICTIVE DEVICE COMPONENT ONLY
HMSAAA	Q3 2025	Physician Services	43772	CPT	LAPAROSCOPY, SURGICAL GASTRIC RESTRICTIVE PROCEDURE; REMOVAL OF ADJUSTABLE GASTRIC RESTRICTIVE DEVICE COMPONENT ONLY
HMSAAA	Q3 2025	Physician Services	43773	CPT	LAPAROSCOPY, SURGICAL GASTRIC RESTRICTIVE PROCEDURE; REMOVAL AND REPLACEMENT OF ADJUSTABLE GASTRIC RESTRICTIVE DEVICE COMPONENT
HMSAAA	Q3 2025	Physician Services	43774	CPT	LAPAROSCOPY, SURGICAL GASTRIC RESTRICTIVE PROCEDURE; REMOVAL OF ADJUSTABLE GASTRIC RESTRICTIVE DEVICE SUBCUTANEOUS PORT COMPONENTS
HMSAAA	Q3 2025	Physician Services	43775	CPT	LAPAROSCOPY, SURGICAL GASTRIC RESTRICTIVE PROCEDURE; LONGITUDINAL GASTRECTOMY (I.E., SLEEVE GASTRECTOMY)
HMSAAA	Q3 2025	Physician Services	43845	CPT	GASTRIC RESTRICTIVE PROCEDURE WITH PARTIAL GASTRECTOMY, PYLORUS-PRESERVING DUODENOILEOSTOMY AND ILEOILEOSTOMY (50 TO 100 CM COMMON CHANNEL) TO
HMSAAA	Q3 2025	Physician Services	43846	CPT	GASTRIC RESTRICTIVE PROCEDURE, WITH GASTRIC BYPASS FOR MORBID OBESITY; WITH SHORT LIMB (150 CM OR LESS) ROUX-EN-Y GASTROENTEROSTOMY
HMSAAA	Q3 2025	Physician Services	43847	CPT	GASTRIC RESTRICTIVE PROCEDURE, WITH GASTRIC BYPASS FOR MORBID OBESITY; WITH SMALL INTESTINE RECONSTRUCTION TO LIMIT ABSORPTION
HMSAAA	Q3 2025	Physician Services	43848	CPT	REVISION, OPEN, OF GASTRIC RESTRICTIVE PROCEDURE FOR MORBID OBESITY, OTHER THAN ADJUSTABLE GASTRIC RESTRICTIVE DEVICE (SEPARATE PROCEDURE)
HMSAAA	Q3 2025	Physician Services	43886	CPT	GASTRIC RESTRICTIVE PROCEDURE, OPEN; REVISION OF SUBCUTANEOUS PORT COMPONENT ONLY
HMSAAA	Q3 2025	Physician Services	43887	CPT	GASTRIC RESTRICTIVE PROCEDURE, OPEN; REMOVAL OF SUBCUTANEOUS PORT COMPONENT ONLY
HMSAAA	Q3 2025	Physician Services	43888	CPT	GASTRIC RESTRICTIVE PROCEDURE, OPEN; REMOVAL AND REPLACEMENT OF SUBCUTANEOUS PORT COMPONENT ONLY

HMSAAA	Q3 2025	Physician Services		43999	CPT	UNLISTED PROCEDURE, STOMACH
HMSAAA	Q3 2025	Rehab Services		97550	CPT	CAREGIVER TRAINING IN STRATEGIES AND TECHNIQUES TO FACILITATE THE PATIENT’S FUNCTIONAL PERFORMANCE IN THE HOME OR COMMUNITY (EG, ACTIVITIES OF DAILY LIV
HMSAAA	Q3 2025	Rehab Services		97551	CPT	CAREGIVER TRAINING IN STRATEGIES AND TECHNIQUES TO FACILITATE THE PATIENT’S FUNCTIONAL PERFORMANCE IN THE HOME OR COMMUNITY (EG, ACTIVITIES OF DAILY LIV
HMSAAA	Q3 2025	Rehab Services		97552	CPT	GROUP CAREGIVER TRAINING IN STRATEGIES AND TECHNIQUES TO FACILITATE THE PATIENT'S FUNCTIONAL PERFORMANCE IN THE HOME OR COMMUNITY (EG, ACTIVITIES OF D
HMSAAA	Q3 2025	Physician Services	S2083		HCPCS	ADJUSTMENT OF GASTRIC BAND DIAMETER VIA SUBCUTANEOUS PORT BY INJECTION OR ASPIRATION OF SALINE
HMSAAA	Q3 2025	Other		81433	CPT	HRDTRY BRST CA-RLATD DSORDRS
HMSAAA	Q3 2025	Other		81436	CPT	HEREDITARY COLON CA DSORDRS
HMSAAA	Q3 2025	Other		81438	CPT	HEREDTRY NURONDCRN TUM DSRDR
HMSAAA	Q3 2025	Other	0204U		CPT	ONC THYR MRNA XPRSN ALYS 593

HP_ID	Year_Qtr	Service_Category	Procedure_Code	Procedure_Code_Type	Proc_Code_Description
OHANAA	Q3 2025	At Risk Services	S5105	HCPCS	DAY CARE SERVICES, CENTER-BASED; SERVICES NOT INCLUDED IN PROGRAM FEE, PER DIEM
OHANAA	Q3 2025	At Risk Services	S5125	HCPCS	ATTENDANT CARE SERVICES; PER 15 MINUTES
OHANAA	Q3 2025	At Risk Services	S5161	HCPCS	EMERGENCY RESPONSE SYSTEM; SERVICE FEE, PER MONTH (EXCLUDES INSTALLATION AND TESTING)
OHANAA	Q3 2025	At Risk Services	S9122	HCPCS	HOME HEALTH AIDE OR CERTIFIED NURSE ASSISTANT, PROVIDING CARE IN THE HOME; PER HOUR
OHANAA	Q3 2025	At Risk Services	S9123	HCPCS	NURSING CARE, IN THE HOME; BY REGISTERED NURSE, PER HOUR (USE FOR GENERAL NURSING CARE ONLY, NOT TO BE USED WHEN CPT CODES 99500-
OHANAA	Q3 2025	Autism Services	97151	CPT	BEHAVIOR IDENTIFICATION ASSESSMENT, ADMINISTERED BY A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, EACH 15 MINUTES OF THE PHYSICIAN'S OR OTHER QUAL
OHANAA	Q3 2025	Autism Services	97153	CPT	ADAPTIVE BEHAVIOR TREATMENT BY PROTOCOL, ADMINISTERED BY TECHNICIAN UNDER THE DIRECTION OF A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, FACE-TO
OHANAA	Q3 2025	Autism Services	97154	CPT	GROUP ADAPTIVE BEHAVIOR TREATMENT BY PROTOCOL, ADMINISTERED BY TECHNICIAN UNDER THE DIRECTION OF A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL,
OHANAA	Q3 2025	Behavioral Health	0889T	CPT	PERSONALIZED TARGET DEVELOPMENT ARHFCMRIGTBS
OHANAA	Q3 2025	Behavioral Health	0890T	CPT	ARHFCMRIGTBS 1ST MOTOR THRESHOLD DETER 1ST TX D
OHANAA	Q3 2025	Behavioral Health	0891T	CPT	ARHFCMRIGTBS SUBSEQUENT TREATMENT DAY
OHANAA	Q3 2025	Behavioral Health	0892T	CPT	ARHFCMRIGTBS SBSQ MOTOR THRESHLD REDETER PR TX D
OHANAA	Q3 2025	Diagnostic Testing	87913	CPT	NFCT AGENT GENOTYPE ALYS NUCLEIC ACID SARSCOV2
OHANAA	Q3 2025	Diagnostic Testing	0019M	CPT	CV DS PLSM ALYS PRTN BMRK APTAMR-BSD MICRORA AND ALG
OHANAA	Q3 2025	Diagnostic Testing	0020M	CPT	ONC CNS ALYS 30000 DNA METHYLATION LOCI TUM TISS
OHANAA	Q3 2025	Diagnostic Testing	0248U	CPT	ONC BRAIN SPHRD CLL CUL 12 RX PNL TUMOR RESPONSE
OHANAA	Q3 2025	Diagnostic Testing	0249U	CPT	ONC BRST SEMIQ ALYS 32 PHSPRTN AND PRTN ANALYTE ALG
OHANAA	Q3 2025	Diagnostic Testing	0250U	CPT	ONC SLD ORG NEO TRGT GEN SEQ DNA ALYS 505 GENES
OHANAA	Q3 2025	Diagnostic Testing	0251U	CPT	HEPCIDIN-25 ELISA SERUM OR PLASMA
OHANAA	Q3 2025	Diagnostic Testing	0252U	CPT	FTL ANEUPLOIDY STR CMPRTV ALYS FTL DNA PRDC CNCP
OHANAA	Q3 2025	Diagnostic Testing	0253U	CPT	REPRDTVE MED RNA 238 GEN NXT GEN SEQ ENDMT TISS
OHANAA	Q3 2025	Diagnostic Testing	0254U	CPT	REPRDTVE MED ALYS 24 CHRMSM EMBRY AND MITOCHDRL DNA
OHANAA	Q3 2025	Diagnostic Testing	0306U	CPT	ONC MRD NEXT-GNRJ TRGT SEQ ALYS CLL-FR DNA 1ST
OHANAA	Q3 2025	Diagnostic Testing	0307U	CPT	ONC MRD NEXT-GNRJ TRGT SEQ ALYS CLL-FR DNA SBSQ
OHANAA	Q3 2025	Diagnostic Testing	0308U	CPT	CRD CAD ALYS 3 PRTN PLSM ALG RSK OBSTRUCTIVE CAD
OHANAA	Q3 2025	Diagnostic Testing	0309U	CPT	CRD CV DS ALYS 4 PRTN PLSM ALG RSK MAJ CAR EVENT
OHANAA	Q3 2025	Diagnostic Testing	0310U	CPT	PED VSCLTS KD ALYS 3 BMRK PLSM ALG RSK SCORE KD
OHANAA	Q3 2025	Diagnostic Testing	0311U	CPT	NFCT DS BCT QUAN ANTMCRB SC MIC EA ORG ID
OHANAA	Q3 2025	Diagnostic Testing	0312U	CPT	AI DS SLE ALYS 8 IGG AUTOANT AND 2 CLL BOUND PRDCTS
OHANAA	Q3 2025	Diagnostic Testing	0313U	CPT	ONC PNCRS DNA AND MRNA NXT-GNRJ SEQ ALYS 74 GEN AND CEA
OHANAA	Q3 2025	Diagnostic Testing	0314U	CPT	ONC CUTAN MLNMA MRNA GEN XPRSN PRFL 35 GENES ALG
OHANAA	Q3 2025	Diagnostic Testing	0315U	CPT	ONC CUTAN SQ CLL CARC MRNA GEN XPRSN PRFL 40 ALG
OHANAA	Q3 2025	Diagnostic Testing	0316U	CPT	BORRELIA BURGDORFERI LYME DS OSPA PRTN EVAL UR
OHANAA	Q3 2025	Diagnostic Testing	0317U	CPT	ONC LUNG CA 4-PRB FISH ASY WHL BLD PREDICTIV ALG
OHANAA	Q3 2025	Diagnostic Testing	0318U	CPT	PED WHL GENOME MTHYLTN ALYS MICRORA 50+GENES BLD
OHANAA	Q3 2025	Diagnostic Testing	0319U	CPT	NEPH RNL TRNSPL RNA PRETRNSPL PERPH BLD ALG
OHANAA	Q3 2025	Diagnostic Testing	0320U	CPT	NEPH RNL TRNSPL RNA POSTTRNSPL PERPH BLD ALG
OHANAA	Q3 2025	Diagnostic Testing	0321U	CPT	IADNA GU PTHGN 20BCT AND FNGL ORG AND ID 16 ABX RSIST GN
OHANAA	Q3 2025	Diagnostic Testing	0322U	CPT	NEURO ASD QUAN MEAS 14 ACYL CARNITINES AND METABLT
OHANAA	Q3 2025	Diagnostic Testing	0323U	CPT	IADNA CNS PATHOGEN NEXT-GENERATION SEQUENCING
OHANAA	Q3 2025	Diagnostic Testing	0326U	CPT	TRGT GEN SEQ ALYS SLD ORGN NEO CLL-FR DNA 83+
OHANAA	Q3 2025	Diagnostic Testing	0327U	CPT	FTL ANEUPLOIDY TRSMY DNA SEQ ALYS MAT PLSM RSK
OHANAA	Q3 2025	Diagnostic Testing	0328U	CPT	DRUG ASSAY DEF 120+ RX AND METABOLITES UR W/LC-MS/MS
OHANAA	Q3 2025	Diagnostic Testing	0329U	CPT	ONC NEOPLASIA XOME AND TRNS SEQ ALYS DNA AND RNA TUMOR
OHANAA	Q3 2025	Diagnostic Testing	0330U	CPT	IADNA VAG PTHGN PNL 27 ORG AMP PROBE VAG SWAB
OHANAA	Q3 2025	Diagnostic Testing	0331U	CPT	ONC HL NEO OPT GEN MAPPING W/DNA BLD/BONE MARROW
OHANAA	Q3 2025	Diagnostic Testing	0333U	CPT	ONC LVR SRVLNC HCC ALYS METHYLTN PATTERNS CFDNA
OHANAA	Q3 2025	Diagnostic Testing	0334U	CPT	ONC SLD ORGN TGSA FFPE TUM TISS DNA 84/+ GEN
OHANAA	Q3 2025	Diagnostic Testing	0335U	CPT	RARE DISEASES WHOLE GENOME SEQ ALYS FETAL SAMPLE
OHANAA	Q3 2025	Diagnostic Testing	0336U	CPT	RARE DISEASES WHOLE GENOME SEQ ALYS BLOOD/SALIVA
OHANAA	Q3 2025	Diagnostic Testing	0339U	CPT	ONC PROSTATE MRNA XPRSN PRFLG HOXC6 AND DLX1 RT-PCR
OHANAA	Q3 2025	Diagnostic Testing	0340U	CPT	ONC PAN CANCER ANALYSIS MRD FROM PLASMA
OHANAA	Q3 2025	Diagnostic Testing	0341U	CPT	FETAL ANEUPLOIDY DNA SEQUENCING COMPARATIVE ALYS
OHANAA	Q3 2025	Diagnostic Testing	0343U	CPT	ONC PRST8 XOME BASED ALYS 442 SNCRNA RT-QPCR UR
OHANAA	Q3 2025	Diagnostic Testing	0345U	CPT	PSYC GENOMIC ALYS PANEL VARIANT ALYS 15 GENES
OHANAA	Q3 2025	Diagnostic Testing	0347U	CPT	RX METAB/PCX DNA 16 GENE VRNT ALYS AND REPRTD PHNT
OHANAA	Q3 2025	Diagnostic Testing	0348U	CPT	RX METAB/PCX DNA 25 GENE VRNT ALYS AND REPRTD PHNT
OHANAA	Q3 2025	Diagnostic Testing	0349U	CPT	RX METAB/PCX DNA 27 GEN VRNT ALYS AND PHNT GEN-RX IA
OHANAA	Q3 2025	Diagnostic Testing	0350U	CPT	RX METAB/PCX DNA 27 GENE VRNT ALYS AND REPRTD PHNT
OHANAA	Q3 2025	Diagnostic Testing	0353U	CPT	IADNA CHLMYD TRCHMTS AND NEISSRA GONORR MULT AMP PRB
OHANAA	Q3 2025	Diagnostic Testing	0403U	CPT	ONC PROSTATE MRNA GENE XPRSN PRFLG 18 URINE ALG
OHANAA	Q3 2025	Diagnostic Testing	0405U	CPT	ONC PNCRTC 59 MTHYLTN HAPLOTYPE BLOCK MRK PLSM
OHANAA	Q3 2025	Diagnostic Testing	0406U	CPT	ONC LUNG FLOW CYTOMETRY SPUTUM 5 MARKERS ALG
OHANAA	Q3 2025	Diagnostic Testing	0407U	CPT	NEPHROLOGY DIABETIC CKD MULT ECLIA PLASMA ALG
OHANAA	Q3 2025	Diagnostic Testing	0409U	CPT	ONC SLD TUM DNA 80 AND RNA 36 GEN NEXT GNRJ SEQ PLSM
OHANAA	Q3 2025	Diagnostic Testing	0410U	CPT	ONC PNCRTC DNA WHL GN SEQ 5-HYDROXYMETHYLCYTOSN
OHANAA	Q3 2025	Diagnostic Testing	0411U	CPT	PSYC GENOMIC ALYS PANEL VARIANT ALYS 15 GENES
OHANAA	Q3 2025	Diagnostic Testing	0412U	CPT	BETA AMYLOID AB42/40 IMPRCIP QUAN LC-MS/MS ALG
OHANAA	Q3 2025	Diagnostic Testing	0413U	CPT	ONC HL NEO OPT GEN MAPG CPY NMBR ALTERATIONS DNA
OHANAA	Q3 2025	Diagnostic Testing	0414U	CPT	ONC LUNG AUGMNT ALG ALYS DGTZ WHOL SLD IMG 8 GEN
OHANAA	Q3 2025	Diagnostic Testing	0415U	CPT	CV DS ACS IA ALG BLOOD 5 YEAR DEL RISK SCORE ACS
OHANAA	Q3 2025	Diagnostic Testing	0417U	CPT	RARE DS WHL MITOCHDRL GEN SEQ ALYS 335 NUC GENES
OHANAA	Q3 2025	Diagnostic Testing	0418U	CPT	ONC BRST AUGMNT ALG ALYS DGTZ WHOL SLD IMG 8FEAT
OHANAA	Q3 2025	Diagnostic Testing	0419U	CPT	NEUROPSYCHIATRY GEN SEQ ALYS PNL VRNT ALY 13 GEN
OHANAA	Q3 2025	Diagnostic Testing	0439U	CPT	CRD CHD DNA ALYS 5 SNP 3 DNA MTHYLTN MRK QPCR
OHANAA	Q3 2025	Diagnostic Testing	0440U	CPT	CRD CHD DNA ALYS 10 SNP 6 DNA MTHYLTN MRK QPCR
OHANAA	Q3 2025	Diagnostic Testing	0443U	CPT	NEUROFILAMENT LIGHT CHAIN ULTRSENS IA SERUM/CSF
OHANAA	Q3 2025	Diagnostic Testing	0444U	CPT	ONC SLD ORGN NEO TGSAP 361 GEN INTERROG DNA FFPE
OHANAA	Q3 2025	Diagnostic Testing	0449U	CPT	CAR SCR SEV INH COND GENOMIC SEQ ALYS PNL 5 GEN
OHANAA	Q3 2025	Diagnostic Testing	0450U	CPT	ONC MM LC-MS/MS MONOCLONAL P-PRTN SEQ ALYS SERUM
OHANAA	Q3 2025	Diagnostic Testing	0451U	CPT	ONC MM LC-MS/MS PEPTIDE ION QUANTIFICATION SERUM
OHANAA	Q3 2025	Diagnostic Testing	0452U	CPT	ONC BLADDER MTHYL PENK DNA DETCJ LTE-QMSP URINE
OHANAA	Q3 2025	Diagnostic Testing	0453U	CPT	ONC CLRCT CA CFDNA MTHYLTN BSD QUAN PCR ASY PLSM
OHANAA	Q3 2025	Diagnostic Testing	0454U	CPT	RARE DS ID VRTJ INVRJ INSJ TLCJ OPT GENOME MAPG
OHANAA	Q3 2025	Diagnostic Testing	0457U	CPT	PFAS 9 PFAS COMPOUNDS LC-MS/MS PLASMA/SERUM QUAN
OHANAA	Q3 2025	Diagnostic Testing	0458U	CPT	ONC BREAST CA S100 A8&A9 ELISA TEAR FLUID ALG
OHANAA	Q3 2025	Diagnostic Testing	0459U	CPT	ABETA42 & TTAU ECLIA CEREBRAL SPINAL FLUID RATIO
OHANAA	Q3 2025	Diagnostic Testing	0460U	CPT	ONC WHL BLD/BUCCAL DNA SNP GNOTYP RT-PCR 24 GENE
OHANAA	Q3 2025	Diagnostic Testing	0461U	CPT	ONC RX-GENOMIC ALYS SNP GNOTYP RT-PCR 24 GENES
OHANAA	Q3 2025	Diagnostic Testing	0462U	CPT	MELATONIN LVL TEST SLEEP STUDY 7/9 SAMPLE ELISA
OHANAA	Q3 2025	Diagnostic Testing	0463U	CPT	ONC CERVIX MRNA GENXPRSN 14 BMRK E6&E7 HPV NASBA
OHANAA	Q3 2025	Diagnostic Testing	0465U	CPT	ONC UROTHELIAL CARC DNA QMSP 2 GENES ALG ALYS
OHANAA	Q3 2025	Diagnostic Testing	0466U	CPT	CRD CAD DNA GWAS 564856 SNP TRGT VARIANT GNOTYP
OHANAA	Q3 2025	Diagnostic Testing	0467U	CPT	ONC BLDR DNA NGS 60 GEN&WHL GENOME ANEUP UR ALG
OHANAA	Q3 2025	Diagnostic Testing	0468U	CPT	HEP NASH MIR-34A-5P A2M YKL40 HBA1C SRM&WHL BLD
OHANAA	Q3 2025	Diagnostic Testing	0469U	CPT	RARE DS WHL GENOM SEQ ALYS CHRMOML ABNR FTL SAMP
OHANAA	Q3 2025	Diagnostic Testing	0470U	CPT	ONC OROP DETCJ MRD NGS QUAN EVAL 8DNA CFHPV16&18

OHANAA	Q3 2025	Diagnostic Testing	0472U	CPT	CA VI PSP&SP1 ANTB ELISA SEMIQL BLD SJOGREN SYND
OHANAA	Q3 2025	Diagnostic Testing	0473U	CPT	ONC SOLID TUMOR NGS DNA FFPE TISS BLD/SLV 648GEN
OHANAA	Q3 2025	Diagnostic Testing	0474U	CPT	HERED PAN CA GSAP 88 GENES 20DUP/DEL NGS BLD/SLV
OHANAA	Q3 2025	Diagnostic Testing	0475U	CPT	HERED PRST8 CA-RLTD DO GSAP NGS CGH EVAL 23 GENE
OHANAA	Q3 2025	Diagnostic Testing	28299	CPT	CORRECTION, HALLUX VALGUS (BUNION), WITH OR WITHOUT SESAMOIDECTOMY; BY DOUBLE OSTEOTOMY
OHANAA	Q3 2025	Diagnostic Testing	38204	CPT	MANAGEMENT OF RECIPIENT HEMATOPOIETIC PROGENITOR CELL DONOR SEARCH AND CELL ACQUISITION
OHANAA	Q3 2025	Diagnostic Testing	70336	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, TEMPOROMANDIBULAR JOINT(S)
OHANAA	Q3 2025	Diagnostic Testing	70450	CPT	COMPUTED TOMOGRAPHY, HEAD OR BRAIN; WITHOUT CONTRAST MATERIAL
OHANAA	Q3 2025	Diagnostic Testing	70460	CPT	COMPUTED TOMOGRAPHY, HEAD OR BRAIN; WITH CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	70470	CPT	COMPUTED TOMOGRAPHY, HEAD OR BRAIN; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
OHANAA	Q3 2025	Diagnostic Testing	70480	CPT	COMPUTED TOMOGRAPHY, ORBIT, SELLA, OR POSTERIOR FOSSA OR OUTER, MIDDLE, OR INNER EAR; WITHOUT CONTRAST MATERIAL
OHANAA	Q3 2025	Diagnostic Testing	70481	CPT	COMPUTED TOMOGRAPHY, ORBIT, SELLA, OR POSTERIOR FOSSA OR OUTER, MIDDLE, OR INNER EAR; WITH CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	70482	CPT	COMPUTED TOMOGRAPHY, ORBIT, SELLA, OR POSTERIOR FOSSA OR OUTER, MIDDLE, OR INNER EAR; WITHOUT CONTRAST MATERIAL, FOLLOWED
OHANAA	Q3 2025	Diagnostic Testing	70486	CPT	COMPUTED TOMOGRAPHY, MAXILLOFACIAL AREA; WITHOUT CONTRAST MATERIAL
OHANAA	Q3 2025	Diagnostic Testing	70487	CPT	COMPUTED TOMOGRAPHY, MAXILLOFACIAL AREA; WITH CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	70488	CPT	COMPUTED TOMOGRAPHY, MAXILLOFACIAL AREA; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
OHANAA	Q3 2025	Diagnostic Testing	70496	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, HEAD, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED, AND IMAGE P
OHANAA	Q3 2025	Diagnostic Testing	70498	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, NECK, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED, AND IMAGE P
OHANAA	Q3 2025	Diagnostic Testing	70540	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ORBIT, FACE, AND/OR NECK; WITHOUT CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	70542	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ORBIT, FACE, AND/OR NECK; WITH CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	70543	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ORBIT, FACE, AND/OR NECK; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATE
OHANAA	Q3 2025	Diagnostic Testing	70544	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, HEAD; WITHOUT CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	70545	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, HEAD; WITH CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	70546	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, HEAD; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SEQUENCES
OHANAA	Q3 2025	Diagnostic Testing	70547	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, NECK; WITHOUT CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	70548	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, NECK; WITH CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	70549	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, NECK; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SEQUENCES
OHANAA	Q3 2025	Diagnostic Testing	70551	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM); WITHOUT CONTRAST MATERIAL
OHANAA	Q3 2025	Diagnostic Testing	70553	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM); WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MAT
OHANAA	Q3 2025	Diagnostic Testing	70554	CPT	MAGNETIC RESONANCE IMAGING, BRAIN, FUNCTIONAL MRI; INCLUDING TEST SELECTION AND ADMINISTRATION OF REPETITIVE BODY PART MOV
OHANAA	Q3 2025	Diagnostic Testing	71250	CPT	COMPUTED TOMOGRAPHY, THORAX, DIAGNOSTIC; WITHOUT CONTRAST MATERIAL
OHANAA	Q3 2025	Diagnostic Testing	71275	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, CHEST (NONCORONARY), WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORM
OHANAA	Q3 2025	Diagnostic Testing	71550	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, CHEST (EG, FOR EVALUATION OF HILAR AND MEDIASTINAL LYMPHADENOPATHY); WITHOUT CONT
OHANAA	Q3 2025	Diagnostic Testing	71551	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, CHEST (EG, FOR EVALUATION OF HILAR AND MEDIASTINAL LYMPHADENOPATHY); WITH CONTRAS
OHANAA	Q3 2025	Diagnostic Testing	71552	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, CHEST (EG, FOR EVALUATION OF HILAR AND MEDIASTINAL LYMPHADENOPATHY); WITHOUT CONT
OHANAA	Q3 2025	Diagnostic Testing	71555	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, CHEST (EXCLUDING MYOCARDIUM), WITH OR WITHOUT CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	72125	CPT	COMPUTED TOMOGRAPHY, CERVICAL SPINE; WITHOUT CONTRAST MATERIAL
OHANAA	Q3 2025	Diagnostic Testing	72126	CPT	COMPUTED TOMOGRAPHY, CERVICAL SPINE; WITH CONTRAST MATERIAL
OHANAA	Q3 2025	Diagnostic Testing	72127	CPT	COMPUTED TOMOGRAPHY, CERVICAL SPINE; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
OHANAA	Q3 2025	Diagnostic Testing	72128	CPT	COMPUTED TOMOGRAPHY, THORACIC SPINE; WITHOUT CONTRAST MATERIAL
OHANAA	Q3 2025	Diagnostic Testing	72129	CPT	COMPUTED TOMOGRAPHY, THORACIC SPINE; WITH CONTRAST MATERIAL
OHANAA	Q3 2025	Diagnostic Testing	72130	CPT	COMPUTED TOMOGRAPHY, THORACIC SPINE; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
OHANAA	Q3 2025	Diagnostic Testing	72131	CPT	COMPUTED TOMOGRAPHY, LUMBAR SPINE; WITHOUT CONTRAST MATERIAL
OHANAA	Q3 2025	Diagnostic Testing	72141	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, CERVICAL; WITHOUT CONTRAST MATERIAL
OHANAA	Q3 2025	Diagnostic Testing	72142	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, CERVICAL; WITH CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	72146	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, THORACIC; WITHOUT CONTRAST MATERIAL
OHANAA	Q3 2025	Diagnostic Testing	72148	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, LUMBAR; WITHOUT CONTRAST MATERIAL
OHANAA	Q3 2025	Diagnostic Testing	72149	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, LUMBAR; WITH CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	72156	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERI
OHANAA	Q3 2025	Diagnostic Testing	72158	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERI
OHANAA	Q3 2025	Diagnostic Testing	72191	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, PELVIS, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED, AND IMAGE
OHANAA	Q3 2025	Diagnostic Testing	72192	CPT	COMPUTED TOMOGRAPHY, PELVIS; WITHOUT CONTRAST MATERIAL
OHANAA	Q3 2025	Diagnostic Testing	72193	CPT	COMPUTED TOMOGRAPHY, PELVIS; WITH CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	72194	CPT	COMPUTED TOMOGRAPHY, PELVIS; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
OHANAA	Q3 2025	Diagnostic Testing	72195	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, PELVIS; WITHOUT CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	72196	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, PELVIS; WITH CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	72197	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, PELVIS; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHE
OHANAA	Q3 2025	Diagnostic Testing	72198	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, PELVIS, WITH OR WITHOUT CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	73200	CPT	COMPUTED TOMOGRAPHY, UPPER EXTREMITY; WITHOUT CONTRAST MATERIAL
OHANAA	Q3 2025	Diagnostic Testing	73201	CPT	COMPUTED TOMOGRAPHY, UPPER EXTREMITY; WITH CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	73202	CPT	COMPUTED TOMOGRAPHY, UPPER EXTREMITY; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
OHANAA	Q3 2025	Diagnostic Testing	73206	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, UPPER EXTREMITY, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED,
OHANAA	Q3 2025	Diagnostic Testing	73218	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, UPPER EXTREMITY, OTHER THAN JOINT; WITHOUT CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	73219	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, UPPER EXTREMITY, OTHER THAN JOINT; WITH CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	73220	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, UPPER EXTREMITY, OTHER THAN JOINT; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONT
OHANAA	Q3 2025	Diagnostic Testing	73221	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF UPPER EXTREMITY; WITHOUT CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	73222	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF UPPER EXTREMITY; WITH CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	73223	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF UPPER EXTREMITY; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST
OHANAA	Q3 2025	Diagnostic Testing	73700	CPT	COMPUTED TOMOGRAPHY, LOWER EXTREMITY; WITHOUT CONTRAST MATERIAL
OHANAA	Q3 2025	Diagnostic Testing	73701	CPT	COMPUTED TOMOGRAPHY, LOWER EXTREMITY; WITH CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	73702	CPT	COMPUTED TOMOGRAPHY, LOWER EXTREMITY; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
OHANAA	Q3 2025	Diagnostic Testing	73706	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, LOWER EXTREMITY, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED,
OHANAA	Q3 2025	Diagnostic Testing	73718	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, LOWER EXTREMITY OTHER THAN JOINT; WITHOUT CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	73719	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, LOWER EXTREMITY OTHER THAN JOINT; WITH CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	73720	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, LOWER EXTREMITY OTHER THAN JOINT; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTR
OHANAA	Q3 2025	Diagnostic Testing	73721	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF LOWER EXTREMITY; WITHOUT CONTRAST MATERIAL
OHANAA	Q3 2025	Diagnostic Testing	73723	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF LOWER EXTREMITY; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST
OHANAA	Q3 2025	Diagnostic Testing	73725	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, LOWER EXTREMITY, WITH OR WITHOUT CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	74150	CPT	COMPUTED TOMOGRAPHY, ABDOMEN; WITHOUT CONTRAST MATERIAL
OHANAA	Q3 2025	Diagnostic Testing	74160	CPT	COMPUTED TOMOGRAPHY, ABDOMEN; WITH CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	74170	CPT	COMPUTED TOMOGRAPHY, ABDOMEN; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
OHANAA	Q3 2025	Diagnostic Testing	74174	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, ABDOMEN AND PELVIS, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED, AND I
OHANAA	Q3 2025	Diagnostic Testing	74176	CPT	COMPUTED TOMOGRAPHY, ABDOMEN AND PELVIS; WITHOUT CONTRAST MATERIAL
OHANAA	Q3 2025	Diagnostic Testing	74177	CPT	COMPUTED TOMOGRAPHY, ABDOMEN AND PELVIS; WITH CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	74178	CPT	COMPUTED TOMOGRAPHY, ABDOMEN AND PELVIS; WITHOUT CONTRAST MATERIAL IN ONE OR BOTH BODY REGIONS, FOLLOWED BY CONTRAST MATERIAL(S) A
OHANAA	Q3 2025	Diagnostic Testing	74182	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ABDOMEN; WITH CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	74183	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ABDOMEN; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY WITH CONTRAST MATERIAL(S) AND
OHANAA	Q3 2025	Diagnostic Testing	74185	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, ABDOMEN, WITH OR WITHOUT CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Diagnostic Testing	74261	CPT	COMPUTED TOMOGRAPHIC (CT) COLONOGRAPHY, DIAGNOSTIC, INCLUDING IMAGE POSTPROCESSING; WITHOUT CONTRAST MATERIAL
OHANAA	Q3 2025	Diagnostic Testing	74712	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, FETAL, INCLUDING PLACENTAL AND MATERNAL PELVIC IMAGING WHEN PERFORMED; SINGLE OR FIRST GE
OHANAA	Q3 2025	Diagnostic Testing	74713	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, FETAL, INCLUDING PLACENTAL AND MATERNAL PELVIC IMAGING WHEN PERFORMED; EACH ADDITIONAL GE
OHANAA	Q3 2025	Diagnostic Testing	75559	CPT	CARDIAC MAGNETIC RESONANCE IMAGING FOR MORPHOLOGY AND FUNCTION WITHOUT CONTRAST MATERIAL; WITH STRESS IMAGING
OHANAA	Q3 2025	Diagnostic Testing	75563	CPT	CARDIAC MAGNETIC RESONANCE IMAGING FOR MORPHOLOGY AND FUNCTION WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL
OHANAA	Q3 2025	Diagnostic Testing	75571	CPT	COMPUTED TOMOGRAPHY, HEART, WITHOUT CONTRAST MATERIAL, WITH QUANTITATIVE EVALUATION OF CORONARY CALCIUM
OHANAA	Q3 2025	Diagnostic Testing	75572	CPT	COMPUTED TOMOGRAPHY, HEART, WITH CONTRAST MATERIAL, FOR EVALUATION OF CARDIAC STRUCTURE AND MORPHOLOGY (INCLUDING 3D IMAGE POSTPRO
OHANAA	Q3 2025	Diagnostic Testing	75573	CPT	COMPUTED TOMOGRAPHY, HEART, WITH CONTRAST MATERIAL, FOR EVALUATION OF CARDIAC STRUCTURE AND MORPHOLOGY IN THE SETTING OF CONGENITA
OHANAA	Q3 2025	Diagnostic Testing	76391	CPT	MAGNETIC RESONANCE (EG, VIBRATION) ELASTOGRAPHY
OHANAA	Q3 2025	Diagnostic Testing	76801	CPT	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND MATERNAL EVALUATION, FIRST TRIMESTER (< 14 WEEK

OHANAA	Q3 2025	Diagnostic Testing	76802		CPT	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND MATERNAL EVALUATION, FIRST TRIMESTER (< 14 WEEK
OHANAA	Q3 2025	Diagnostic Testing	76805		CPT	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND MATERNAL EVALUATION, AFTER FIRST TRIMESTER (> O
OHANAA	Q3 2025	Diagnostic Testing	76810		CPT	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND MATERNAL EVALUATION, AFTER FIRST TRIMESTER (> O
OHANAA	Q3 2025	Diagnostic Testing	76811		CPT	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND MATERNAL EVALUATION PLUS DETAILED FETAL ANATOMI
OHANAA	Q3 2025	Diagnostic Testing	76812		CPT	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND MATERNAL EVALUATION PLUS DETAILED FETAL ANATOMI
OHANAA	Q3 2025	Diagnostic Testing	76813		CPT	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FIRST TRIMESTER FETAL NUCHAL TRANSLUCENCY MEASUREMENT, TR
OHANAA	Q3 2025	Diagnostic Testing	76815		CPT	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, LIMITED (EG, FETAL HEART BEAT, PLACENTAL LOCATION, FETAL
OHANAA	Q3 2025	Diagnostic Testing	76816		CPT	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FOLLOW-UP (EG, RE-EVALUATION OF FETAL SIZE BY MEASURING S
OHANAA	Q3 2025	Diagnostic Testing	76999		CPT	UNLISTED ULTRASOUND PROCEDURE (EG, DIAGNOSTIC, INTERVENTIONAL)
OHANAA	Q3 2025	Diagnostic Testing	77046		CPT	MAGNETIC RESONANCE IMAGING, BREAST, WITHOUT CONTRAST MATERIAL; UNILATERAL
OHANAA	Q3 2025	Diagnostic Testing	77047		CPT	MAGNETIC RESONANCE IMAGING, BREAST, WITHOUT CONTRAST MATERIAL; BILATERAL
OHANAA	Q3 2025	Diagnostic Testing	77048		CPT	MAGNETIC RESONANCE IMAGING, BREAST, WITHOUT AND WITH CONTRAST MATERIAL(S), INCLUDING COMPUTER-AIDED DETECTION (CAD REAL-TIME LESION DETECTION, CHARACTERIZ
OHANAA	Q3 2025	Diagnostic Testing	77049		CPT	MAGNETIC RESONANCE IMAGING, BREAST, WITHOUT AND WITH CONTRAST MATERIAL(S), INCLUDING COMPUTER-AIDED DETECTION (CAD REAL-TIME LESION DETECTION, CHARACTERIZ
OHANAA	Q3 2025	Diagnostic Testing		77371	CPT	RADIATION TREATMENT DELIVERY, STEREOTACTIC RADIOSURGERY (SRS), COMPLETE COURSE OF TREATMENT OF CRANIAL LESION(S) CONSISTIN
OHANAA	Q3 2025	Diagnostic Testing	78813		CPT	POSITRON EMISSION TOMOGRAPHY (PET) IMAGING; WHOLE BODY
OHANAA	Q3 2025	Diagnostic Testing	78815		CPT	POSITRON EMISSION TOMOGRAPHY (PET) WITH CONCURRENTLY ACQUIRED COMPUTED TOMOGRAPHY (CT) FOR ATTENUATION CORRECTION AND ANAT
OHANAA	Q3 2025	Diagnostic Testing	78816		CPT	POSITRON EMISSION TOMOGRAPHY (PET) WITH CONCURRENTLY ACQUIRED COMPUTED TOMOGRAPHY (CT) FOR ATTENUATION CORRECTION AND ANAT
OHANAA	Q3 2025	Diagnostic Testing	81105		CPT	HUMAN PLATELET ANTIGEN 1 GENOTYPING (HPA-1), ITGB3 (INTEGRIN, BETA 3 [PLATELET GLYCOPROTEIN IIIA], ANTIGEN CD61 [GPIIIA]) (EG, NEONATAL ALLOIMMUNE THROMBOCYTOPEN
OHANAA	Q3 2025	Diagnostic Testing	81106		CPT	HUMAN PLATELET ANTIGEN 2 GENOTYPING (HPA-2), GP1BA (GLYCOPROTEIN IB [PLATELET], ALPHA POLYPEPTIDE [GPIBA]) (EG, NEONATAL ALLOIMMUNE THROMBOCYTOPENIA [NAIT], PO
OHANAA	Q3 2025	Diagnostic Testing	81107		CPT	HUMAN PLATELET ANTIGEN 3 GENOTYPING (HPA-3), ITGA2B (INTEGRIN, ALPHA 2B [PLATELET GLYCOPROTEIN IIB OF IIB/IIIA COMPLEX], ANTIGEN CD41 [GPIIB]) (EG, NEONATAL ALLOIMMU
OHANAA	Q3 2025	Diagnostic Testing	81108		CPT	HUMAN PLATELET ANTIGEN 4 GENOTYPING (HPA-4), ITGB3 (INTEGRIN, BETA 3 [PLATELET GLYCOPROTEIN IIIA], ANTIGEN CD61 [GPIIIA]) (EG, NEONATAL ALLOIMMUNE THROMBOCYTOPEN
OHANAA	Q3 2025	Diagnostic Testing	81109		CPT	HUMAN PLATELET ANTIGEN 5 GENOTYPING (HPA-5), ITGA2 (INTEGRIN, ALPHA 2 [CD49B, ALPHA 2 SUBUNIT OF VLA-2 RECEPTOR] [GPIA]) (EG, NEONATAL ALLOIMMUNE THROMBOCYTOPE
OHANAA	Q3 2025	Diagnostic Testing	81110		CPT	HUMAN PLATELET ANTIGEN 6 GENOTYPING (HPA-6W), ITGB3 (INTEGRIN, BETA 3 [PLATELET GLYCOPROTEIN IIIA, ANTIGEN CD61] [GPIIIA]) (EG, NEONATAL ALLOIMMUNE THROMBOCYTOPE
OHANAA	Q3 2025	Diagnostic Testing	81111		CPT	HUMAN PLATELET ANTIGEN 9 GENOTYPING (HPA-9W), ITGA2B (INTEGRIN, ALPHA 2B [PLATELET GLYCOPROTEIN IIB OF IIB/IIIA COMPLEX, ANTIGEN CD41] [GPIIB]) (EG, NEONATAL ALLOIM
OHANAA	Q3 2025	Diagnostic Testing	81112		CPT	HUMAN PLATELET ANTIGEN 15 GENOTYPING (HPA-15), CD109 (CD109 MOLECULE) (EG, NEONATAL ALLOIMMUNE THROMBOCYTOPENIA [NAIT], POST-TRANSFUSION PURPURA), GENE AN
OHANAA	Q3 2025	Diagnostic Testing	81120		CPT	IDH1 (ISOCITRATE DEHYDROGENASE 1 [NADP+], SOLUBLE) (EG, GLIOMA), COMMON VARIANTS (EG, R132H, R132C)
OHANAA	Q3 2025	Diagnostic Testing	81121		CPT	IDH2 (ISOCITRATE DEHYDROGENASE 2 [NADP+], MITOCHONDRIAL) (EG, GLIOMA), COMMON VARIANTS (EG, R140W, R172M)
OHANAA	Q3 2025	Diagnostic Testing	81162		CPT	BRCA1 (BRCA1, DNA REPAIR ASSOCIATED), BRCA2 (BRCA2, DNA REPAIR ASSOCIATED) (EG, HEREDITARY BREAST AND OVARIAN CANCER) GENE ANALYSIS; FULL SEQUENCE ANALYSIS AN
OHANAA	Q3 2025	Diagnostic Testing	81163		CPT	BRCA1 (BRCA1, DNA REPAIR ASSOCIATED), BRCA2 (BRCA2, DNA REPAIR ASSOCIATED) (EG, HEREDITARY BREAST AND OVARIAN CANCER) GENE ANALYSIS; FULL SEQUENCE ANALYSIS
OHANAA	Q3 2025	Diagnostic Testing	81173		CPT	AR (ANDROGEN RECEPTOR) (EG, SPINAL AND BULBAR MUSCULAR ATROPHY, KENNEDY DISEASE, X CHROMOSOME INACTIVATION) GENE ANALYSIS; FULL GENE SEQUENCE
OHANAA	Q3 2025	Diagnostic Testing	81181		CPT	ATXN7 (ATAXIN 7) (EG, SPINOCEREBELLAR ATAXIA) GENE ANALYSIS, EVALUATION TO DETECT ABNORMAL (EG, EXPANDED) ALLELES
OHANAA	Q3 2025	Diagnostic Testing	81185		CPT	CACNA1A (CALCIUM VOLTAGE-GATED CHANNEL SUBUNIT ALPHA1 A) (EG, SPINOCEREBELLAR ATAXIA) GENE ANALYSIS; FULL GENE SEQUENCE
OHANAA	Q3 2025	Diagnostic Testing	81194		CPT	NTRK (NEUROTROPHIC-TROPOMYOSIN RECEPTOR TYROSINE KINASE 1, 2, AND 3) (EG, SOLID TUMORS) TRANSLOCATION ANALYSIS
OHANAA	Q3 2025	Diagnostic Testing		81200	CPT	ASPA (ASPARTOACYLASE) (EG, CANAVAN DISEASE) GENE ANALYSIS, COMMON VARIANTS (EG, E285A, Y231X)
OHANAA	Q3 2025	Diagnostic Testing		81201	CPT	APC (ADENOMATOUS POLYPOSIS COLI) (EG, FAMILIAL ADENOMATOSIS POLYPOSIS [FAP], ATTENUATED FAP) GENE ANALYSIS; FULL GENE SEQUENCE
OHANAA	Q3 2025	Diagnostic Testing	81202		CPT	APC (ADENOMATOUS POLYPOSIS COLI) (EG, FAMILIAL ADENOMATOSIS POLYPOSIS [FAP], ATTENUATED FAP) GENE ANALYSIS; KNOWN FAMILIAL VARIANT
OHANAA	Q3 2025	Diagnostic Testing	81203		CPT	APC (ADENOMATOUS POLYPOSIS COLI) (EG, FAMILIAL ADENOMATOSIS POLYPOSIS [FAP], ATTENUATED FAP) GENE ANALYSIS; DUPLICATION/DELETION V
OHANAA	Q3 2025	Diagnostic Testing	81205		CPT	BCKDHB (BRANCHED-CHAIN KETO ACID DEHYDROGENASE E1, BETA POLYPEPTIDE) (EG, MAPLE SYRUP URINE DISEASE) GENE ANALYSIS, COMMON VARIANT
OHANAA	Q3 2025	Diagnostic Testing	81206		CPT	BCR/ABL1 (T(9;22)) (EG, CHRONIC MYELOGENOUS LEUKEMIA) TRANSLOCATION ANALYSIS; MAJOR BREAKPOINT, QUALITATIVE OR QUANTITATIVE
OHANAA	Q3 2025	Diagnostic Testing	81207		CPT	BCR/ABL1 (T(9;22)) (EG, CHRONIC MYELOGENOUS LEUKEMIA) TRANSLOCATION ANALYSIS; MINOR BREAKPOINT, QUALITATIVE OR QUANTITATIVE
OHANAA	Q3 2025	Diagnostic Testing	81208		CPT	BCR/ABL1 (T(9;22)) (EG, CHRONIC MYELOGENOUS LEUKEMIA) TRANSLOCATION ANALYSIS; OTHER BREAKPOINT, QUALITATIVE OR QUANTITATIVE
OHANAA	Q3 2025	Diagnostic Testing	81210		CPT	BRAF (B-RAF PROTO-ONCOGENE, SERINE/THREONINE KINASE) (EG, COLON CANCER, MELANOMA), GENE ANALYSIS, V600 VARIANT(S)
OHANAA	Q3 2025	Diagnostic Testing	81219		CPT	CALR (CALRETICULIN) (EG, MYELOPROLIFERATIVE DISORDERS), GENE ANALYSIS, COMMON VARIANTS IN EXON 9
OHANAA	Q3 2025	Diagnostic Testing	81220		CPT	CFTR (CYSTIC FIBROSIS TRANSMEMBRANE CONDUCTANCE REGULATOR) (EG, CYSTIC FIBROSIS) GENE ANALYSIS; COMMON VARIANTS (EG, ACMG/ACOG GUI
OHANAA	Q3 2025	Diagnostic Testing		81223	CPT	CFTR (CYSTIC FIBROSIS TRANSMEMBRANE CONDUCTANCE REGULATOR) (EG, CYSTIC FIBROSIS) GENE ANALYSIS; FULL GENE SEQUENCE
OHANAA	Q3 2025	Diagnostic Testing		81225	CPT	CYP2C19 (CYTOCHROME P450, FAMILY 2, SUBFAMILY C, POLYPEPTIDE 19) (EG, DRUG METABOLISM), GENE ANALYSIS, COMMON VARIANTS (EG, *2, *3
OHANAA	Q3 2025	Diagnostic Testing	81226		CPT	CYP2D6 (CYTOCHROME P450, FAMILY 2, SUBFAMILY D, POLYPEPTIDE 6) (EG, DRUG METABOLISM), GENE ANALYSIS, COMMON VARIANTS (EG, *2, *3,
OHANAA	Q3 2025	Diagnostic Testing	81227		CPT	CYP2C9 (CYTOCHROME P450, FAMILY 2, SUBFAMILY C, POLYPEPTIDE 9) (EG, DRUG METABOLISM), GENE ANALYSIS, COMMON VARIANTS (EG, *2, *3,
OHANAA	Q3 2025	Diagnostic Testing		81229	CPT	CYTOGENOMIC CONSTITUTIONAL (GENOME-WIDE) MICROARRAY ANALYSIS; INTERROGATION OF GENOMIC REGIONS FOR COPY NUMBER AND SINGLE NUCLEOTI
OHANAA	Q3 2025	Diagnostic Testing	81230		CPT	CYP3A4 (CYTOCHROME P450 FAMILY 3 SUBFAMILY A MEMBER 4) (EG, DRUG METABOLISM), GENE ANALYSIS, COMMON VARIANT(S) (EG, *2, *22)
OHANAA	Q3 2025	Diagnostic Testing	81231		CPT	CYP3A5 (CYTOCHROME P450 FAMILY 3 SUBFAMILY A MEMBER 5) (EG, DRUG METABOLISM), GENE ANALYSIS, COMMON VARIANTS (EG, *2, *3, *4, *5, *6, *7)
OHANAA	Q3 2025	Diagnostic Testing	81235		CPT	EGFR (EPIDERMAL GROWTH FACTOR RECEPTOR) (EG, NON-SMALL CELL LUNG CANCER) GENE ANALYSIS, COMMON VARIANTS (EG, EXON 19 LREA DELETION
OHANAA	Q3 2025	Diagnostic Testing	81240		CPT	F2 (PROTHROMBIN, COAGULATION FACTOR II) (EG, HEREDITARY HYPERCOAGULABILITY) GENE ANALYSIS, 20210G>A VARIANT
OHANAA	Q3 2025	Diagnostic Testing		81241	CPT	F5 (COAGULATION FACTOR V) (EG, HEREDITARY HYPERCOAGULABILITY) GENE ANALYSIS, LEIDEN VARIANT
OHANAA	Q3 2025	Diagnostic Testing		81243	CPT	FMR1 (FRAGILE X MENTAL RETARDATION 1) (EG, FRAGILE X MENTAL RETARDATION) GENE ANALYSIS; EVALUATION TO DETECT ABNORMAL (EG, EXPANDE
OHANAA	Q3 2025	Diagnostic Testing	81244		CPT	FMR1 (FRAGILE X MENTAL RETARDATION 1) (EG, FRAGILE X MENTAL RETARDATION) GENE ANALYSIS; CHARACTERIZATION OF ALLELES (EG, EXPANDED SIZE AND PROMOTER METHYLATION
OHANAA	Q3 2025	Diagnostic Testing	81245		CPT	FLT3 (FMS-RELATED TYROSINE KINASE 3) (EG, ACUTE MYELOID LEUKEMIA), GENE ANALYSIS; INTERNAL TANDEM DUPLICATION (ITD) VARIANTS (IE, EXONS 14, 15)
OHANAA	Q3 2025	Diagnostic Testing	81252		CPT	GJB2 (GAP JUNCTION PROTEIN, BETA 2, 26KDA, CONNEXIN 26) (EG, NONSYNDROMIC HEARING LOSS) GENE ANALYSIS; FULL GENE SEQUENCE
OHANAA	Q3 2025	Diagnostic Testing		81256	CPT	HFE (HEMOCHROMATOSIS) (EG, HEREDITARY HEMOCHROMATOSIS) GENE ANALYSIS, COMMON VARIANTS (EG, C282Y, H63D)
OHANAA	Q3 2025	Diagnostic Testing		81257	CPT	HBA1/HBA2 (ALPHA GLOBIN 1 AND ALPHA GLOBIN 2) (EG, ALPHA THALASSEMIA, HB BART HYDROPS FETALIS SYNDROME, HBH DISEASE), GENE ANALYSIS; COMMON DELETIONS OR VARIA
OHANAA	Q3 2025	Diagnostic Testing	81263		CPT	IGH@ (IMMUNOGLOBULIN HEAVY CHAIN LOCUS) (EG, LEUKEMIA AND LYMPHOMA, B-CELL), VARIABLE REGION SOMATIC MUTATION ANALYSIS
OHANAA	Q3 2025	Diagnostic Testing	81265		CPT	COMPARATIVE ANALYSIS USING SHORT TANDEM REPEAT (STR) MARKERS; PATIENT AND COMPARATIVE SPECIMEN (EG, PRE-TRANSPLANT RECIPIENT AND D
OHANAA	Q3 2025	Diagnostic Testing	81270		CPT	JAK2 (JANUS KINASE 2) (EG, MYELOPROLIFERATIVE DISORDER) GENE ANALYSIS, P.VAL617PHE (V617F) VARIANT
OHANAA	Q3 2025	Diagnostic Testing	81272		CPT	KIT (V-KIT HARDY-ZUCKERMAN 4 FELINE SARCOMA VIRAL ONCOGENE HOMOLOG) (EG, GASTROINTESTINAL STROMAL TUMOR [GIST], ACUTE MYELOID LEUK
OHANAA	Q3 2025	Diagnostic Testing	81273		CPT	KIT (V-KIT HARDY-ZUCKERMAN 4 FELINE SARCOMA VIRAL ONCOGENE HOMOLOG) (EG, MASTOCYTOSIS), GENE ANALYSIS, D816 VARIANT(S)
OHANAA	Q3 2025	Diagnostic Testing	81275		CPT	KRAS (KIRSTEN RAT SARCOMA VIRAL ONCOGENE HOMOLOG) (EG, CARCINOMA) GENE ANALYSIS; VARIANTS IN EXON 2 (EG, CODONS 12 AND 13)
OHANAA	Q3 2025	Diagnostic Testing	81276		CPT	KRAS (KIRSTEN RAT SARCOMA VIRAL ONCOGENE HOMOLOG) (EG, CARCINOMA) GENE ANALYSIS; ADDITIONAL VARIANT(S) (EG, CODON 61, CODON 146)
OHANAA	Q3 2025	Diagnostic Testing	81279		CPT	JAK2 (JANUS KINASE 2) (EG, MYELOPROLIFERATIVE DISORDER) TARGETED SEQUENCE ANALYSIS (EG, EXONS 12 AND 13)
OHANAA	Q3 2025	Diagnostic Testing	81286		CPT	FXN (FRATAXIN) (EG, FRIEDREICH ATAXIA) GENE ANALYSIS; FULL GENE SEQUENCE
OHANAA	Q3 2025	Diagnostic Testing		81291	CPT	MTHFR (5,10-METHYLENETETRAHYDROFOLATE REDUCTASE) (EG, HEREDITARY HYPERCOAGULABILITY) GENE ANALYSIS, COMMON VARIANTS (EG, 677T, 129
OHANAA	Q3 2025	Diagnostic Testing		81292	CPT	MLH1 (MUTL HOMOLOG 1, COLON CANCER, NONPOLYPOSIS TYPE 2) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANA
OHANAA	Q3 2025	Diagnostic Testing	81294		CPT	MLH1 (MUTL HOMOLOG 1, COLON CANCER, NONPOLYPOSIS TYPE 2) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANA
OHANAA	Q3 2025	Diagnostic Testing	81295		CPT	MSH2 (MUTS HOMOLOG 2, COLON CANCER, NONPOLYPOSIS TYPE 1) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANA
OHANAA	Q3 2025	Diagnostic Testing	81297		CPT	MSH2 (MUTS HOMOLOG 2, COLON CANCER, NONPOLYPOSIS TYPE 1) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANA
OHANAA	Q3 2025	Diagnostic Testing	81298		CPT	MSH6 (MUTS HOMOLOG 6 [E. COLI]) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANALYSIS; FULL SEQUENCE ANAL
OHANAA	Q3 2025	Diagnostic Testing	81300		CPT	MSH6 (MUTS HOMOLOG 6 [E. COLI]) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANALYSIS; DUPLICATION/DELETI
OHANAA	Q3 2025	Diagnostic Testing	81301		CPT	MICROSATELLITE INSTABILITY ANALYSIS (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) OF MARKERS FOR MISMATCH REPAI
OHANAA	Q3 2025	Diagnostic Testing	81302		CPT	MECP2 (METHYL CPG BINDING PROTEIN 2) (EG, RETT SYNDROME) GENE ANALYSIS; FULL SEQUENCE ANALYSIS
OHANAA	Q3 2025	Diagnostic Testing	81307		CPT	PALB2 (PARTNER AND LOCALIZER OF BRCA2) (EG, BREAST AND PANCREATIC CANCER) GENE ANALYSIS; FULL GENE SEQUENCE
OHANAA	Q3 2025	Diagnostic Testing	81309		CPT	PIK3CA (PHOSPHATIDYLINOSITOL-4, 5-BIPHOSPHATE 3-KINASE, CATALYTIC SUBUNIT ALPHA) (EG, COLORECTAL AND BREAST CANCER) GENE ANALYSIS, TARGETED SEQUENCE ANALYSIS
OHANAA	Q3 2025	Diagnostic Testing	81311		CPT	NRAS (NEUROBLASTOMA RAS VIRAL [V-RAS] ONCOGENE HOMOLOG) (EG, COLORECTAL CARCINOMA), GENE ANALYSIS, VARIANTS IN EXON 2 (EG, CODONS
OHANAA	Q3 2025	Diagnostic Testing	81312		CPT	PABPN1 (POLY[A] BINDING PROTEIN NUCLEAR 1) (EG, OCULOPHARYNGEAL MUSCULAR DYSTROPHY) GENE ANALYSIS, EVALUATION TO DETECT ABNORMAL (EG, EXPANDED) ALLELES
OHANAA	Q3 2025	Diagnostic Testing	81314		CPT	PDGFRA (PLATELET-DERIVED GROWTH FACTOR RECEPTOR, ALPHA POLYPEPTIDE) (EG, GASTROINTESTINAL STROMAL TUMOR [GIST]), GENE ANALYSIS, TA
OHANAA	Q3 2025	Diagnostic Testing	81317		CPT	PMS2 (POSTMEIOTIC SEGREGATION INCREASED 2 [S. CEREVISIAE]) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE A
OHANAA	Q3 2025	Diagnostic Testing	81319		CPT	PMS2 (POSTMEIOTIC SEGREGATION INCREASED 2 [S. CEREVISIAE]) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE A
OHANAA	Q3 2025	Diagnostic Testing	81321		CPT	PTEN (PHOSPHATASE AND TENSIN HOMOLOG) (EG, COWDEN SYNDROME, PTEN HAMARTOMA TUMOR SYNDROME) GENE ANALYSIS; FULL SEQUENCE ANALYSIS
OHANAA	Q3 2025	Diagnostic Testing	81324		CPT	PMP22 (PERIPHERAL MYELIN PROTEIN 22) (EG, CHARCOT-MARIE-TOOTH, HEREDITARY NEUROPATHY WITH LIABILITY TO PRESSURE PALSIES) GENE ANAL
OHANAA	Q3 2025	Diagnostic Testing	81329		CPT	SMN1 (SURVIVAL OF MOTOR NEURON 1, TELOMERIC) (EG, SPINAL MUSCULAR ATROPHY) GENE ANALYSIS; DOSAGE/DELETION ANALYSIS (EG, CARRIER TESTING), INCLUDES SMN2 (SURVI
OHANAA	Q3 2025	Diagnostic Testing	81339		CPT	MPL (MPL PROTO-ONCOGENE, THROMBOPOIETIN RECEPTOR) (EG, MYELOPROLIFERATIVE DISORDER) GENE ANALYSIS; SEQUENCE ANALYSIS, EXON 10
OHANAA	Q3 2025	Diagnostic Testing	81343		CPT	PPP2R2B (PROTEIN PHOSPHATASE 2 REGULATORY SUBUNIT BBETA) (EG, SPINOCEREBELLAR ATAXIA) GENE ANALYSIS, EVALUATION TO DETECT ABNORMAL (EG, EXPANDED) ALLELES
OHANAA	Q3 2025	Diagnostic Testing	81344		CPT	TBP (TATA BOX BINDING PROTEIN) (EG, SPINOCEREBELLAR ATAXIA) GENE ANALYSIS, EVALUATION TO DETECT ABNORMAL (EG, EXPANDED) ALLELES
OHANAA	Q3 2025	Diagnostic Testing	81351		CPT	TP53 (TUMOR PROTEIN 53) (EG, LI-FRAUMENI SYNDROME) GENE ANALYSIS; FULL GENE SEQUENCE
OHANAA	Q3 2025	Diagnostic Testing	81361		CPT	HBB (HEMOGLOBIN, SUBUNIT BETA) (EG, SICKLE CELL ANEMIA, BETA THALASSEMIA, HEMOGLOBINOPATHY); COMMON VARIANT(S) (EG, HBS, HBC, HBE)
OHANAA	Q3 2025	Diagnostic Testing	81362		CPT	HBB (HEMOGLOBIN, SUBUNIT BETA) (EG, SICKLE CELL ANEMIA, BETA THALASSEMIA, HEMOGLOBINOPATHY); KNOWN FAMILIAL VARIANT(S)
OHANAA	Q3 2025	Diagnostic Testing		81400	CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 1
OHANAA	Q3 2025	Diagnostic Testing		81401	CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 2
OHANAA	Q3 2025	Diagnostic Testing	81402		CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 3
OHANAA	Q3 2025	Diagnostic Testing	81403		CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 4

OHANAA	Q3 2025	Diagnostic Testing		81404	CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 5
OHANAA	Q3 2025	Diagnostic Testing		81405	CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 6
OHANAA	Q3 2025	Diagnostic Testing		81406	CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 7
OHANAA	Q3 2025	Diagnostic Testing	81407		CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 8
OHANAA	Q3 2025	Diagnostic Testing		81408	CPT	MOLECULAR PATHOLOGY PROCEDURE, LEVEL 9 (EG, ANALYSIS OF > 50 EXONS IN A SINGLE GENE BY DNA SEQUENCE ANALYSIS) FBN1 (FIBRILLIN 1) (
OHANAA	Q3 2025	Diagnostic Testing		81415	CPT	EXOME (EG, UNEXPLAINED CONSTITUTIONAL OR HERITABLE DISORDER OR SYNDROME); SEQUENCE ANALYSIS
OHANAA	Q3 2025	Diagnostic Testing	81416		CPT	EXOME (EG, UNEXPLAINED CONSTITUTIONAL OR HERITABLE DISORDER OR SYNDROME); SEQUENCE ANALYSIS, EACH COMPARATOR EXOME (EG, PARENTS, SIBLINGS) (LIST SEPARATELY
OHANAA	Q3 2025	Diagnostic Testing	81420		CPT	FETAL CHROMOSOMAL ANEUPLOIDY (EG, TRISOMY 21, MONOSOMY X) GENOMIC SEQUENCE ANALYSIS PANEL, CIRCULATING CELL-FREE FETAL DNA IN MATERNAL BLOOD, MUST INCLUD
OHANAA	Q3 2025	Diagnostic Testing	81422		CPT	FETAL CHROMOSOMAL MICRODELETION(S) GENOMIC SEQUENCE ANALYSIS (EG, DIGEORGE SYNDROME, CRI-DU-CHAT SYNDROME), CIRCULATING CELL-FREE FETAL DNA IN MATERNAL
OHANAA	Q3 2025	Diagnostic Testing	81445		CPT	TARGETED GENOMIC SEQUENCE ANALYSIS PANEL, SOLID ORGAN NEOPLASM, DNA ANALYSIS, AND RNA ANALYSIS WHEN PERFORMED, 5-50 GENES (EG, ALK, BRAF, CDKN2A, EGFR, ERBE
OHANAA	Q3 2025	Diagnostic Testing	81448		CPT	HEREDITARY PERIPHERAL NEUROPATHIES (EG, CHARCOT-MARIE-TOOTH, SPASTIC PARAPLEGIA), GENOMIC SEQUENCE ANALYSIS PANEL, MUST INCLUDE SEQUENCING OF AT LEAST 5 PE
OHANAA	Q3 2025	Diagnostic Testing	81450		CPT	TARGETED GENOMIC SEQUENCE ANALYSIS PANEL, HEMATOLYMPHOID NEOPLASM OR DISORDER, DNA ANALYSIS, AND RNA ANALYSIS WHEN PERFORMED, 5-50 GENES (EG, BRAF, CEBP
OHANAA	Q3 2025	Diagnostic Testing		81479	CPT	UNLISTED MOLECULAR PATHOLOGY PROCEDURE
OHANAA	Q3 2025	Diagnostic Testing	81599		CPT	UNLISTED MULTIANALYTE ASSAY WITH ALGORITHMIC ANALYSIS
OHANAA	Q3 2025	Diagnostic Testing	88240		CPT	CRYOPRESERVATION, FREEZING AND STORAGE OF CELLS, EACH CELL LINE
OHANAA	Q3 2025	Diagnostic Testing	88261		CPT	CHROMOSOME ANALYSIS; COUNT 5 CELLS, 1 KARYOTYPE, WITH BANDING
OHANAA	Q3 2025	Diagnostic Testing	88262		CPT	CHROMOSOME ANALYSIS; COUNT 15-20 CELLS, 2 KARYOTYPES, WITH BANDING
OHANAA	Q3 2025	Diagnostic Testing	88267		CPT	CHROMOSOME ANALYSIS, AMNIOTIC FLUID OR CHORIONIC VILLUS, COUNT 15 CELLS, 1 KARYOTYPE, WITH BANDING
OHANAA	Q3 2025	Diagnostic Testing	88269		CPT	CHROMOSOME ANALYSIS, IN SITU FOR AMNIOTIC FLUID CELLS, COUNT CELLS FROM 6-12 COLONIES, 1 KARYOTYPE, WITH BANDING
OHANAA	Q3 2025	Diagnostic Testing	88271		CPT	MOLECULAR CYTOGENETICS; DNA PROBE, EACH (EG, FISH)
OHANAA	Q3 2025	Diagnostic Testing	88273		CPT	MOLECULAR CYTOGENETICS; CHROMOSOMAL IN SITU HYBRIDIZATION, ANALYZE 10-30 CELLS (EG, FOR MICRODELETIONS)
OHANAA	Q3 2025	Diagnostic Testing	88274		CPT	MOLECULAR CYTOGENETICS; INTERPHASE IN SITU HYBRIDIZATION, ANALYZE 25-99 CELLS
OHANAA	Q3 2025	Diagnostic Testing	88280		CPT	CHROMOSOME ANALYSIS; ADDITIONAL KARYOTYPES, EACH STUDY
OHANAA	Q3 2025	Diagnostic Testing	88285		CPT	CHROMOSOME ANALYSIS; ADDITIONAL CELLS COUNTED, EACH STUDY
OHANAA	Q3 2025	Diagnostic Testing	88291		CPT	CYTOGENETICS AND MOLECULAR CYTOGENETICS, INTERPRETATION AND REPORT
OHANAA	Q3 2025	Diagnostic Testing	96130		CPT	PSYCHOLOGICAL TESTING EVALUATION SERVICES BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, INCLUDING INTEGRATION OF PATIENT DATA, INTERPRETATION OF
OHANAA	Q3 2025	Diagnostic Testing	96131		CPT	PSYCHOLOGICAL TESTING EVALUATION SERVICES BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, INCLUDING INTEGRATION OF PATIENT DATA, INTERPRETATION OF
OHANAA	Q3 2025	Diagnostic Testing	96132		CPT	NEUROPSYCHOLOGICAL TESTING EVALUATION SERVICES BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, INCLUDING INTEGRATION OF PATIENT DATA, INTERPRETAT
OHANAA	Q3 2025	Diagnostic Testing	96133		CPT	NEUROPSYCHOLOGICAL TESTING EVALUATION SERVICES BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, INCLUDING INTEGRATION OF PATIENT DATA, INTERPRETAT
OHANAA	Q3 2025	Diagnostic Testing	96136		CPT	PSYCHOLOGICAL OR NEUROPSYCHOLOGICAL TEST ADMINISTRATION AND SCORING BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, TWO OR MORE TESTS, ANY MET
OHANAA	Q3 2025	Diagnostic Testing	96137		CPT	PSYCHOLOGICAL OR NEUROPSYCHOLOGICAL TEST ADMINISTRATION AND SCORING BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, TWO OR MORE TESTS, ANY ME
OHANAA	Q3 2025	Diagnostic Testing	96138		CPT	PSYCHOLOGICAL OR NEUROPSYCHOLOGICAL TEST ADMINISTRATION AND SCORING BY TECHNICIAN, TWO OR MORE TESTS, ANY METHOD; FIRST 30 MINUTES
OHANAA	Q3 2025	Diagnostic Testing	96139		CPT	PSYCHOLOGICAL OR NEUROPSYCHOLOGICAL TEST ADMINISTRATION AND SCORING BY TECHNICIAN, TWO OR MORE TESTS, ANY METHOD; EACH ADDITIONAL 30 MINUTES (LIST SEPARA
OHANAA	Q3 2025	Diagnostic Testing	C9507		HCPCS	FR FRZ P HT COVID-19 CONV FRZ WI 8 HRS COLL EA U
OHANAA	Q3 2025	Diagnostic Testing	J1453		HCPCS	INJECTION, FOSAPREPITANT, 1 MG
OHANAA	Q3 2025	Diagnostic Testing	J1459		HCPCS	(INJECTION, IMMUNE GLOBULIN (PRIVIGEN), INTRAVENOUS, NON-LYOPHILIZED (E.G. LIQUID 500 MG).
OHANAA	Q3 2025	Diagnostic Testing	J1745		HCPCS	INJECTION, INFLIXIMAB, 10 MG
OHANAA	Q3 2025	Diagnostic Testing	J9045		HCPCS	CARBOPLATIN, 50 MG
OHANAA	Q3 2025	Diagnostic Testing	J9305		HCPCS	INJECTION, PEMETREXED, 10 MG
OHANAA	Q3 2025	Diagnostic Testing	S8037		HCPCS	MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY (MRCP)
OHANAA	Q3 2025	DME Medical Supplies		64632	CPT	DESTRUCTION BY NEUROLYTIC AGENT; PLANTAR COMMON DIGITAL NERVE
OHANAA	Q3 2025	DME Medical Supplies		94660	CPT	CONTINUOUS POSITIVE AIRWAY PRESSURE VENTILATION (CPAP), INITIATION AND MANAGEMENT
OHANAA	Q3 2025	DME Medical Supplies	A2022		HCPCS	INNOVABURN OR INNOVAMATRIX XL PER SQ CM
OHANAA	Q3 2025	DME Medical Supplies	A2023		HCPCS	INNOVAMATRIX PD 1 MG
OHANAA	Q3 2025	DME Medical Supplies	A2024		HCPCS	RESOLVE MATRIX PER SQ CM
OHANAA	Q3 2025	DME Medical Supplies	A2025		HCPCS	MIRO3D PER CU CM
OHANAA	Q3 2025	DME Medical Supplies	A4211		HCPCS	SUPPLIES FOR SELF-ADMINISTERED INJECTIONS
OHANAA	Q3 2025	DME Medical Supplies	A4213		HCPCS	SYRINGE, STERILE, 20 CC OR GREATER, EACH
OHANAA	Q3 2025	DME Medical Supplies	A4215		HCPCS	NEEDLE, STERILE, ANY SIZE, EACH
OHANAA	Q3 2025	DME Medical Supplies	A4216		HCPCS	STERILE WATER, SALINE AND/OR DEXTROSE, DILUENT/FLUSH, 10 ML
OHANAA	Q3 2025	DME Medical Supplies	A4217		HCPCS	STERILE WATER/SALINE, 500 ML
OHANAA	Q3 2025	DME Medical Supplies	A4221		HCPCS	SUPPLIES FOR MAINTENANCE OF NON-INSULIN DRUG INFUSION CATHETER, PER WEEK (LIST DRUGS SEPARATELY)
OHANAA	Q3 2025	DME Medical Supplies	A4222		HCPCS	INFUSION SUPPLIES FOR EXTERNAL DRUG INFUSION PUMP, PER CASSETTE OR BAG (LIST DRUGS SEPARATELY)
OHANAA	Q3 2025	DME Medical Supplies	A4223		HCPCS	INFUSION SUPPLIES NOT USED WITH EXTERNAL INFUSION PUMP, PER CASSETTE OR BAG (LIST DRUGS SEPARATELY)
OHANAA	Q3 2025	DME Medical Supplies	A4230		HCPCS	INFUSION SET FOR EXTERNAL INSULIN PUMP, NONNEEDLE CANNULA TYPE
OHANAA	Q3 2025	DME Medical Supplies	A4232		HCPCS	SYRINGE WITH NEEDLE FOR EXTERNAL INSULIN PUMP, STERILE, 3 CC
OHANAA	Q3 2025	DME Medical Supplies	A4245		HCPCS	ALCOHOL WIPES, PER BOX
OHANAA	Q3 2025	DME Medical Supplies	A4246		HCPCS	BETADINE OR PHISOHEX SOLUTION, PER PINT
OHANAA	Q3 2025	DME Medical Supplies	A4247		HCPCS	BETADINE OR IODINE SWABS/WIPES, PER BOX
OHANAA	Q3 2025	DME Medical Supplies	A4253		HCPCS	BLOOD GLUCOSE TEST OR REAGENT STRIPS FOR HOME BLOOD GLUCOSE MONITOR, PER 50 STRIPS
OHANAA	Q3 2025	DME Medical Supplies	A4259		HCPCS	LANCETS, PER BOX OF 100
OHANAA	Q3 2025	DME Medical Supplies	A4270		HCPCS	DISPOSABLE ENDOSCOPE SHEATH, EACH
OHANAA	Q3 2025	DME Medical Supplies	A4305		HCPCS	DISPOSABLE DRUG DELIVERY SYSTEM, FLOW RATE OF 50 ML OR GREATER PER HOUR
OHANAA	Q3 2025	DME Medical Supplies	A4310		HCPCS	INSERTION TRAY WITHOUT DRAINAGE BAG AND WITHOUT CATHETER (ACCESSORIES ONLY)
OHANAA	Q3 2025	DME Medical Supplies	A4315		HCPCS	INSERTION TRAY WITH DRAINAGE BAG WITH INDWELLING CATHETER, FOLEY TYPE, 2-WAY, ALL SILICONE
OHANAA	Q3 2025	DME Medical Supplies	A4322		HCPCS	IRRIGATION SYRINGE, BULB OR PISTON, EACH
OHANAA	Q3 2025	DME Medical Supplies	A4331		HCPCS	EXTENSION DRAINAGE TUBING, ANY TYPE, ANY LENGTH, WITH CONNECTOR/ADAPTOR, FOR USE WITH URINARY LEG BAG OR UROSTOMY POUCH, EACH
OHANAA	Q3 2025	DME Medical Supplies	A4332		HCPCS	LUBRICANT, INDIVIDUAL STERILE PACKET, EACH
OHANAA	Q3 2025	DME Medical Supplies	A4335		HCPCS	INCONTINENCE SUPPLY; MISCELLANEOUS
OHANAA	Q3 2025	DME Medical Supplies	A4338		HCPCS	INDWELLING CATHETER; FOLEY TYPE, 2-WAY LATEX WITH COATING (TEFLON, SILICONE, SILICONE ELASTOMER, OR HYDROPHILIC, ETC.), EACH
OHANAA	Q3 2025	DME Medical Supplies	A4344		HCPCS	INDWELLING CATHETER, FOLEY TYPE, 2-WAY, ALL SILICONE, EACH
OHANAA	Q3 2025	DME Medical Supplies	A4351		HCPCS	INTERMITTENT URINARY CATHETER; STRAIGHT TIP, WITH OR WITHOUT COATING (TEFLON, SILICONE, SILICONE ELASTOMER, OR HYDROPHILIC
OHANAA	Q3 2025	DME Medical Supplies	A4352		HCPCS	INTERMITTENT URINARY CATHETER; COUDE (CURVED) TIP, WITH OR WITHOUT COATING (TEFLON, SILICONE, SILICONE ELASTOMERIC
OHANAA	Q3 2025	DME Medical Supplies	A4353		HCPCS	INTERMITTENT URINARY CATHETER, WITH INSERTION SUPPLIES
OHANAA	Q3 2025	DME Medical Supplies	A4354		HCPCS	INSERTION TRAY WITH DRAINAGE BAG BUT WITHOUT CATHETER
OHANAA	Q3 2025	DME Medical Supplies	A4357		HCPCS	BEDSIDE DRAINAGE BAG, DAY OR NIGHT, WITH OR WITHOUT ANTIREFLUX DEVICE, WITH OR WITHOUT TUBE, EACH
OHANAA	Q3 2025	DME Medical Supplies	A4358		HCPCS	URINARY DRAINAGE BAG, LEG OR ABDOMEN, VINYL, WITH OR WITHOUT TUBE, WITH STRAPS, EACH
OHANAA	Q3 2025	DME Medical Supplies	A4362		HCPCS	SKIN BARRIER; SOLID, 4 X 4 OR EQUIVALENT; EACH
OHANAA	Q3 2025	DME Medical Supplies	A4366		HCPCS	OSTOMY VENT, ANY TYPE, EACH
OHANAA	Q3 2025	DME Medical Supplies	A4371		HCPCS	OSTOMY SKIN BARRIER, POWDER, PER OZ
OHANAA	Q3 2025	DME Medical Supplies	A4385		HCPCS	OSTOMY SKIN BARRIER, SOLID 4 X 4 OR EQUIVALENT, EXTENDED WEAR, WITHOUT BUILT-IN CONVEXITY, EACH
OHANAA	Q3 2025	DME Medical Supplies	A4388		HCPCS	OSTOMY POUCH, DRAINABLE, WITH EXTENDED WEAR BARRIER ATTACHED, (1 PIECE), EACH
OHANAA	Q3 2025	DME Medical Supplies	A4390		HCPCS	OSTOMY POUCH, DRAINABLE, WITH EXTENDED WEAR BARRIER ATTACHED, WITH BUILT-IN CONVEXITY (1 PIECE), EACH
OHANAA	Q3 2025	DME Medical Supplies	A4393		HCPCS	OSTOMY POUCH, URINARY, WITH EXTENDED WEAR BARRIER ATTACHED, WITH BUILT-IN CONVEXITY (1 PIECE), EACH
OHANAA	Q3 2025	DME Medical Supplies	A4394		HCPCS	OSTOMY DEODORANT, WITH OR WITHOUT LUBRICANT, FOR USE IN OSTOMY POUCH, PER FL OZ
OHANAA	Q3 2025	DME Medical Supplies	A4402		HCPCS	LUBRICANT, PER OZ
OHANAA	Q3 2025	DME Medical Supplies	A4406		HCPCS	OSTOMY SKIN BARRIER, PECTIN-BASED, PASTE, PER OZ
OHANAA	Q3 2025	DME Medical Supplies	A4407		HCPCS	OSTOMY SKIN BARRIER, W FLANGE (SOLID, FLEXIBLE, OR ACCORDION), EXTENDED WEAR, W BUILT-IN CONVEXITY, 4 X 4 IN OR SMALLER, EACH
OHANAA	Q3 2025	DME Medical Supplies	A4414		HCPCS	OSTOMY SKIN BARRIER, WITH FLANGE (SOLID, FLEXIBLE OR ACCORDION), WITHOUT BUILT-IN CONVEXITY, 4 X 4 IN OR SMALLER, EACH
OHANAA	Q3 2025	DME Medical Supplies	A4425		HCPCS	OSTOMY POUCH, DRAINABLE; FOR USE ON BARRIER WITH NONLOCKING FLANGE, WITH FILTER (2-PIECE SYSTEM), EACH
OHANAA	Q3 2025	DME Medical Supplies	A4450		HCPCS	TAPE, NONWATERPROOF, PER 18 SQ IN
OHANAA	Q3 2025	DME Medical Supplies	A4452		HCPCS	TAPE, WATERPROOF, PER 18 SQ IN
OHANAA	Q3 2025	DME Medical Supplies	A4456		HCPCS	ADHESIVE REMOVER, WIPES, ANY TYPE, EACH
OHANAA	Q3 2025	DME Medical Supplies	A4463		HCPCS	SURGICAL DRESSING HOLDER, REUSABLE, EACH
OHANAA	Q3 2025	DME Medical Supplies	A4483		HCPCS	MOISTURE EXCHANGER, DISPOSABLE, FOR USE WITH INVASIVE MECHANICAL VENTILATION
OHANAA	Q3 2025	DME Medical Supplies	A4550		HCPCS	SURGICAL TRAYS
OHANAA	Q3 2025	DME Medical Supplies	A4554		HCPCS	DISPOSABLE UNDERPADS, ALL SIZES
OHANAA	Q3 2025	DME Medical Supplies	A4565		HCPCS	SLINGS

OHANAA	Q3 2025	DME Medical Supplies	A4595	HCPCS	ELECTRICAL STIMULATOR SUPPLIES, 2 LEAD, PER MONTH, (E.G., TENS, NMES)
OHANAA	Q3 2025	DME Medical Supplies	A4602	HCPCS	REPLACEMENT BATTERY FOR EXTERNAL INFUSION PUMP OWNED BY PATIENT, LITHIUM, 1.5 VOLT, EACH
OHANAA	Q3 2025	DME Medical Supplies	A4606	HCPCS	OXYGEN PROBE FOR USE WITH OXIMETER DEVICE, REPLACEMENT
OHANAA	Q3 2025	DME Medical Supplies	A4623	HCPCS	TRACHEOSTOMY, INNER CANNULA
OHANAA	Q3 2025	DME Medical Supplies	A4624	HCPCS	TRACHEAL SUCTION CATHETER, ANY TYPE OTHER THAN CLOSED SYSTEM, EACH
OHANAA	Q3 2025	DME Medical Supplies	A4625	HCPCS	TRACHEOSTOMY CARE KIT FOR NEW TRACHEOSTOMY
OHANAA	Q3 2025	DME Medical Supplies	A4628	HCPCS	OROPHARYNGEAL SUCTION CATHETER, EACH
OHANAA	Q3 2025	DME Medical Supplies	A4649	HCPCS	SURGICAL SUPPLY; MISCELLANEOUS
OHANAA	Q3 2025	DME Medical Supplies	A4657	HCPCS	SYRINGE, WITH OR WITHOUT NEEDLE, EACH
OHANAA	Q3 2025	DME Medical Supplies	A4670	HCPCS	AUTOMATIC BLOOD PRESSURE MONITOR
OHANAA	Q3 2025	DME Medical Supplies	A4927	HCPCS	GLOVES, NONSTERILE, PER 100
OHANAA	Q3 2025	DME Medical Supplies	A5054	HCPCS	OSTOMY POUCH, CLOSED; FOR USE ON BARRIER WITH FLANGE (2 PIECE), EACH
OHANAA	Q3 2025	DME Medical Supplies	A5063	HCPCS	OSTOMY POUCH, DRAINABLE FOR USE ON BARRIER WITH FLANGE (2-PIECE SYSTEM), EACH
OHANAA	Q3 2025	DME Medical Supplies	A5120	HCPCS	SKIN BARRIER, WIPES OR SWABS, EACH
OHANAA	Q3 2025	DME Medical Supplies	A5500	HCPCS	FOR DIABETICS ONLY, FITTING (INCLUDING FOLLOW-UP), CUSTOM PREPARATION AND SUPPLY OF OFF-THE-SHELF DEPTH-INLAY SHOE
OHANAA	Q3 2025	DME Medical Supplies	A5501	HCPCS	FOR DIABETICS ONLY, FITTING (INCLUDING FOLLOW-UP), CUSTOM PREPARATION AND SUPPLY OF SHOE MOLDED FROM CAST(S) OF PATIENT'S
OHANAA	Q3 2025	DME Medical Supplies	A5512	HCPCS	FOR DIABETICS ONLY, MULTIPLE DENSITY INSERT, DIRECT FORMED, MOLDED TO FOOT AFTER EXTERNAL HEAT SOURCE OF 230 DEGREES
OHANAA	Q3 2025	DME Medical Supplies	A5513	HCPCS	FOR DIABETICS ONLY, MULTIPLE DENSITY INSERT, CUSTOM MOLDED FROM MODEL OF PATIENT'S FOOT, TOTAL CONTACT WITH PATIENT'S FOOT
OHANAA	Q3 2025	DME Medical Supplies	A5514	HCPCS	DIAB ONLY MX DEN INSRT DIRECT CARV CUSTOM FAB EA
OHANAA	Q3 2025	DME Medical Supplies	A6010	HCPCS	COLLAGEN BASED WOUND FILLER, DRY FORM, STERILE, PER G OF COLLAGEN
OHANAA	Q3 2025	DME Medical Supplies	A6021	HCPCS	COLLAGEN DRESSING, STERILE, SIZE 16 SQ IN OR LESS, EACH
OHANAA	Q3 2025	DME Medical Supplies	A6022	HCPCS	COLLAGEN DRESSING, STERILE, SIZE MORE THAN 16 SQ IN BUT LESS THAN OR EQUAL TO 48 SQ IN, EACH
OHANAA	Q3 2025	DME Medical Supplies	A6023	HCPCS	COLLAGEN DRESSING, STERILE, SIZE MORE THAN 48 SQ IN, EACH
OHANAA	Q3 2025	DME Medical Supplies	A6196	HCPCS	ALGINATE OR OTHER FIBER GELLING DRESSING, WOUND COVER, STERILE, PAD SIZE 16 SQ IN OR LESS, EACH DRESSING
OHANAA	Q3 2025	DME Medical Supplies	A6197	HCPCS	ALGINATE OR OTHER FIBER GELLING DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 16 SQ IN BUT LESS THAN OR EQUAL TO 48 SQ IN
OHANAA	Q3 2025	DME Medical Supplies	A6199	HCPCS	ALGINATE OR OTHER FIBER GELLING DRESSING, WOUND FILLER, STERILE, PER 6 IN
OHANAA	Q3 2025	DME Medical Supplies	A6209	HCPCS	FOAM DRESSING, WOUND COVER, STERILE, PAD SIZE 16 SQ IN OR LESS, WITHOUT ADHESIVE BORDER, EACH DRESSING
OHANAA	Q3 2025	DME Medical Supplies	A6210	HCPCS	FOAM DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 16 SQ IN BUT LESS THAN OR EQUAL TO 48 SQ IN, WITHOUT ADHESIVE BORDER
OHANAA	Q3 2025	DME Medical Supplies	A6211	HCPCS	FOAM DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 48 SQ IN, WITHOUT ADHESIVE BORDER, EACH DRESSING
OHANAA	Q3 2025	DME Medical Supplies	A6212	HCPCS	FOAM DRESSING, WOUND COVER, STERILE, PAD SIZE 16 SQ. IN. OR LESS, WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING
OHANAA	Q3 2025	DME Medical Supplies	A6213	HCPCS	FOAM DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 16 SQ IN BUT LESS THAN OR EQUAL TO 48 SQ IN, WITH ANY SIZE
OHANAA	Q3 2025	DME Medical Supplies	A6216	HCPCS	GAUZE, NONIMPREGNATED, NONSTERILE, PAD SIZE 16 SQ IN OR LESS, WITHOUT ADHESIVE BORDER, EACH DRESSING
OHANAA	Q3 2025	DME Medical Supplies	A6219	HCPCS	GAUZE, NONIMPREGNATED, STERILE, PAD SIZE 16 SQ IN OR LESS, WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING
OHANAA	Q3 2025	DME Medical Supplies	A6220	HCPCS	GAUZE, NONIMPREGNATED, STERILE, PAD SIZE MORE THAN 16 SQ IN BUT LESS THAN OR EQUAL TO 48 SQ IN, WITH ANY SIZE ADHESIVE BORDER
OHANAA	Q3 2025	DME Medical Supplies	A6222	HCPCS	GAUZE, IMPREGNATED WITH OTHER THAN WATER, NORMAL SALINE, OR HYDROGEL, STERILE, PAD SIZE 16 SQ IN OR LESS, WITHOUT ADHESIVE
OHANAA	Q3 2025	DME Medical Supplies	A6223	HCPCS	GAUZE, IMPREGNATED WITH OTHER THAN WATER, NORMAL SALINE, OR HYDROGEL, STERILE, PAD SIZE MORE THAN 16 SQ IN, BUT LESS
OHANAA	Q3 2025	DME Medical Supplies	A6234	HCPCS	HYDROCOLLOID DRESSING, WOUND COVER, STERILE, PAD SIZE 16 SQ IN OR LESS, WITHOUT ADHESIVE BORDER, EACH DRESSING
OHANAA	Q3 2025	DME Medical Supplies	A6235	HCPCS	HYDROCOLLOID DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 16 SQ IN BUT LESS THAN OR EQUAL TO 48 SQ IN, WITHOUT
OHANAA	Q3 2025	DME Medical Supplies	A6248	HCPCS	HYDROGEL DRESSING, WOUND FILLER, GEL, PER FL OZ
OHANAA	Q3 2025	DME Medical Supplies	A6250	HCPCS	SKIN SEALANTS, PROTECTANTS, MOISTURIZERS, OINTMENTS, ANY TYPE, ANY SIZE
OHANAA	Q3 2025	DME Medical Supplies	A6252	HCPCS	SPECIALTY ABSORPTIVE DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 16 SQ IN BUT LESS THAN OR EQUAL TO 48 SQ IN
OHANAA	Q3 2025	DME Medical Supplies	A6253	HCPCS	SPECIALTY ABSORPTIVE DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 48 SQ IN, WITHOUT ADHESIVE BORDER, EACH DRESSING
OHANAA	Q3 2025	DME Medical Supplies	A6254	HCPCS	SPECIALTY ABSORPTIVE DRESSING, WOUND COVER, STERILE, PAD SIZE 16 SQ IN OR LESS, WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING
OHANAA	Q3 2025	DME Medical Supplies	A6255	HCPCS	SPECIALTY ABSORPTIVE DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 16 SQ IN BUT LESS THAN OR EQUAL TO 48 SQ IN
OHANAA	Q3 2025	DME Medical Supplies	A6257	HCPCS	TRANSPARENT FILM, STERILE, 16 SQ IN OR LESS, EACH DRESSING
OHANAA	Q3 2025	DME Medical Supplies	A6260	HCPCS	WOUND CLEANSERS, ANY TYPE, ANY SIZE
OHANAA	Q3 2025	DME Medical Supplies	A6261	HCPCS	WOUND FILLER, GEL/PASTE, PER FL OZ, NOT OTHERWISE SPECIFIED
OHANAA	Q3 2025	DME Medical Supplies	A6266	HCPCS	GAUZE, IMPREGNATED, OTHER THAN WATER, NORMAL SALINE, OR ZINC PASTE, STERILE, ANY WIDTH, PER LINEAR YD
OHANAA	Q3 2025	DME Medical Supplies	A6402	HCPCS	GAUZE, NONIMPREGNATED, STERILE, PAD SIZE 16 SQ IN OR LESS, WITHOUT ADHESIVE BORDER, EACH DRESSING
OHANAA	Q3 2025	DME Medical Supplies	A6403	HCPCS	GAUZE, NONIMPREGNATED, STERILE, PAD SIZE MORE THAN 16 SQ IN, LESS THAN OR EQUAL TO 48 SQ IN, WITHOUT ADHESIVE BORDER
OHANAA	Q3 2025	DME Medical Supplies	A6407	HCPCS	PACKING STRIPS, NONIMPREGNATED, STERILE, UP TO 2 IN IN WIDTH, PER LINEAR YD
OHANAA	Q3 2025	DME Medical Supplies	A6443	HCPCS	CONFORMING BANDAGE, NONELASTIC, KNITTED/WOVEN, NONSTERILE, WIDTH GREATER THAN OR EQUAL TO 3 IN AND LESS THAN 5 IN, PER YD
OHANAA	Q3 2025	DME Medical Supplies	A6446	HCPCS	CONFORMING BANDAGE, NONELASTIC, KNITTED/WOVEN, STERILE, WIDTH GREATER THAN OR EQUAL TO 3 IN AND LESS THAN 5 IN, PER YD
OHANAA	Q3 2025	DME Medical Supplies	A6448	HCPCS	LIGHT COMPRESSION BANDAGE, ELASTIC, KNITTED/WOVEN, WIDTH LESS THAN 3 IN, PER YD
OHANAA	Q3 2025	DME Medical Supplies	A6449	HCPCS	LIGHT COMPRESSION BANDAGE, ELASTIC, KNITTED/WOVEN, WIDTH GREATER THAN OR EQUAL TO 3 IN AND LESS THAN 5 IN, PER YD
OHANAA	Q3 2025	DME Medical Supplies	A6450	HCPCS	LIGHT COMPRESSION BANDAGE, ELASTIC, KNITTED/WOVEN, WIDTH GREATER THAN OR EQUAL TO 5 IN, PER YD
OHANAA	Q3 2025	DME Medical Supplies	A6453	HCPCS	SELF-ADHERENT BANDAGE, ELASTIC, NONKNITTED/NONWOVEN, WIDTH LESS THAN 3 IN, PER YD
OHANAA	Q3 2025	DME Medical Supplies	A6454	HCPCS	SELF-ADHERENT BANDAGE, ELASTIC, NONKNITTED/NONWOVEN, WIDTH GREATER THAN OR EQUAL TO 3 IN AND LESS THAN 5 IN, PER YD
OHANAA	Q3 2025	DME Medical Supplies	A6457	HCPCS	TUBULAR DRESSING WITH OR WITHOUT ELASTIC, ANY WIDTH, PER LINEAR YD
OHANAA	Q3 2025	DME Medical Supplies	A6504	HCPCS	COMPRESSION BURN GARMENT, GLOVE TO WRIST, CUSTOM FABRICATED
OHANAA	Q3 2025	DME Medical Supplies	A6507	HCPCS	COMPRESSION BURN GARMENT, FOOT TO KNEE LENGTH, CUSTOM FABRICATED
OHANAA	Q3 2025	DME Medical Supplies	A6512	HCPCS	COMPRESSION BURN GARMENT, NOT OTHERWISE CLASSIFIED
OHANAA	Q3 2025	DME Medical Supplies	A6530	HCPCS	GRADIENT COMPRESSION STOCKING, BELOW KNEE, 18-30 MM HG, EACH
OHANAA	Q3 2025	DME Medical Supplies	A6531	HCPCS	GRADIENT COMPRESSION STOCKING, BELOW KNEE, 30-40 MM HG, EACH
OHANAA	Q3 2025	DME Medical Supplies	A6532	HCPCS	GRADIENT COMPRESSION STOCKING, BELOW KNEE, 40-50 MM HG, EACH
OHANAA	Q3 2025	DME Medical Supplies	A6545	HCPCS	GRADIENT COMPRESSION WRAP, NONELASTIC, BELOW KNEE, 30-50 MM HG, EACH
OHANAA	Q3 2025	DME Medical Supplies	A6550	HCPCS	WOUND CARE SET, FOR NEGATIVE PRESSURE WOUND THERAPY ELECTRICAL PUMP, INCLUDES ALL SUPPLIES AND ACCESSORIES
OHANAA	Q3 2025	DME Medical Supplies	A7000	HCPCS	CANISTER, DISPOSABLE, USED WITH SUCTION PUMP, EACH
OHANAA	Q3 2025	DME Medical Supplies	A7002	HCPCS	TUBING, USED WITH SUCTION PUMP, EACH
OHANAA	Q3 2025	DME Medical Supplies	A7003	HCPCS	ADMINISTRATION SET, WITH SMALL VOLUME NONFILTERED PNEUMATIC NEBULIZER, DISPOSABLE
OHANAA	Q3 2025	DME Medical Supplies	A7005	HCPCS	ADMINISTRATION SET, WITH SMALL VOLUME NONFILTERED PNEUMATIC NEBULIZER, NONDISPOSABLE
OHANAA	Q3 2025	DME Medical Supplies	A7015	HCPCS	AEROSOL MASK, USED WITH DME NEBULIZER
OHANAA	Q3 2025	DME Medical Supplies	A7020	HCPCS	INTERFACE FOR COUGH STIMULATING DEVICE, INCLUDES ALL COMPONENTS, REPLACEMENT ONLY
OHANAA	Q3 2025	DME Medical Supplies	A7030	HCPCS	FULL FACE MASK USED WITH POSITIVE AIRWAY PRESSURE DEVICE, EACH
OHANAA	Q3 2025	DME Medical Supplies	A7031	HCPCS	FACE MASK INTERFACE, REPLACEMENT FOR FULL FACE MASK, EACH
OHANAA	Q3 2025	DME Medical Supplies	A7032	HCPCS	CUSHION FOR USE ON NASAL MASK INTERFACE, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	A7033	HCPCS	PILLOW FOR USE ON NASAL CANNULA TYPE INTERFACE, REPLACEMENT ONLY, PAIR
OHANAA	Q3 2025	DME Medical Supplies	A7044	HCPCS	ORAL INTERFACE USED WITH POSITIVE AIRWAY PRESSURE DEVICE, EACH
OHANAA	Q3 2025	DME Medical Supplies	A7048	HCPCS	VACUUM DRAINAGE COLLECTION UNIT AND TUBING KIT, INCLUDING ALL SUPPLIES NEEDED FOR COLLECTION UNIT CHANGE, FOR USE WITH
OHANAA	Q3 2025	DME Medical Supplies	A7507	HCPCS	FILTER HOLDER AND INTEGRATED FILTER WITHOUT ADHESIVE, FOR USE IN A TRACHEOSTOMA HEAT AND MOISTURE EXCHANGE SYSTEM, EACH
OHANAA	Q3 2025	DME Medical Supplies	A7508	HCPCS	HOUSING AND INTEGRATED ADHESIVE, FOR USE IN A TRACHEOSTOMA HEAT AND MOISTURE EXCHANGE SYSTEM AND/OR WITH A TRACHEOSTOMA VALVE
OHANAA	Q3 2025	DME Medical Supplies	A7520	HCPCS	TRACHEOSTOMY/LARYNGECTOMY TUBE, NONCUFFED, POLYVINYLCHLORIDE (PVC), SILICONE OR EQUAL, EACH
OHANAA	Q3 2025	DME Medical Supplies	A7523	HCPCS	TRACHEOSTOMY SHOWER PROTECTOR, EACH
OHANAA	Q3 2025	DME Medical Supplies	A7526	HCPCS	TRACHEOSTOMY TUBE COLLAR/HOLDER, EACH
OHANAA	Q3 2025	DME Medical Supplies	A8000	HCPCS	HELMET, PROTECTIVE, SOFT, PREFABRICATED, INCLUDES ALL COMPONENTS AND ACCESSORIES
OHANAA	Q3 2025	DME Medical Supplies	A8001	HCPCS	HELMET, PROTECTIVE, HARD, PREFABRICATED, INCLUDES ALL COMPONENTS AND ACCESSORIES
OHANAA	Q3 2025	DME Medical Supplies	A9156	HCPCS	ORAL MUCOADHESIVE ANY TYPE PER 1 ML
OHANAA	Q3 2025	DME Medical Supplies	A9268	HCPCS	PROGRAMMER FOR TRANSIENT ORALLY INGESTED CAPSULE
OHANAA	Q3 2025	DME Medical Supplies	A9269	HCPCS	PROGRMMABLE TSNT ORALLY ING CAP USE EXT PROG PM
OHANAA	Q3 2025	DME Medical Supplies	A9270	HCPCS	NONCOVERED ITEM OR SERVICE
OHANAA	Q3 2025	DME Medical Supplies	A9274	HCPCS	EXTERNAL AMBULATORY INSULIN DELIVERY SYSTEM, DISPOSABLE, EACH, INCLUDES ALL SUPPLIES AND ACCESSORIES
OHANAA	Q3 2025	DME Medical Supplies	A9276	HCPCS	SENSOR; INVASIVE (E.G., SUBCUTANEOUS), DISPOSABLE, FOR USE WITH INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM
OHANAA	Q3 2025	DME Medical Supplies	A9277	HCPCS	TRANSMITTER; EXTERNAL, FOR USE WITH INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM
OHANAA	Q3 2025	DME Medical Supplies	A9278	HCPCS	RECEIVER (MONITOR); EXTERNAL, FOR USE WITH INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM
OHANAA	Q3 2025	DME Medical Supplies	A9279	HCPCS	MONITORING FEATURE/DEVICE, STAND-ALONE OR INTEGRATED, ANY TYPE, INCLUDES ALL ACCESSORIES, COMPONENTS AND ELECTRONICS
OHANAA	Q3 2025	DME Medical Supplies	A9292	HCPCS	PRESCRIPTN DGTL VIS TX SW-ONLY FDA CL PER CRS TX
OHANAA	Q3 2025	DME Medical Supplies	A9900	HCPCS	MISCELLANEOUS DME SUPPLY, ACCESSORY, AND/OR SERVICE COMPONENT OF ANOTHER HCPCS CODE
OHANAA	Q3 2025	DME Medical Supplies	A9901	HCPCS	DME DELIVERY, SET UP, AND/OR DISPENSING SERVICE COMPONENT OF ANOTHER HCPCS CODE

OHANAA	Q3 2025	DME Medical Supplies	A9999	HCPCS	MISCELLANEOUS DME SUPPLY OR ACCESSORY, NOT OTHERWISE SPECIFIED
OHANAA	Q3 2025	DME Medical Supplies	B4035	HCPCS	ENTERAL FEEDING SUPPLY KIT; PUMP FED, PER DAY, INCLUDES BUT NOT LIMITED TO FEEDING/FLUSHING SYRINGE, ADMINISTRATION SET TUBING
OHANAA	Q3 2025	DME Medical Supplies	B4036	HCPCS	ENTERAL FEEDING SUPPLY KIT; GRAVITY FED, PER DAY, INCLUDES BUT NOT LIMITED TO FEEDING/FLUSHING SYRINGE, ADMINISTRATION
OHANAA	Q3 2025	DME Medical Supplies	B4081	HCPCS	NASOGASTRIC TUBING WITH STYLET
OHANAA	Q3 2025	DME Medical Supplies	B4087	HCPCS	GASTROSTOMY/JEJUNOSTOMY TUBE, STANDARD, ANY MATERIAL, ANY TYPE, EACH
OHANAA	Q3 2025	DME Medical Supplies	B4088	HCPCS	GASTROSTOMY/JEJUNOSTOMY TUBE, LOW-PROFILE, ANY MATERIAL, ANY TYPE, EACH
OHANAA	Q3 2025	DME Medical Supplies	B4100	HCPCS	FOOD THICKENER, ADMINISTERED ORALLY, PER OZ
OHANAA	Q3 2025	DME Medical Supplies	B4148	HCPCS	ENTERAL FEEDING SPLY KIT; ELASTOMERC CTRL FED PD
OHANAA	Q3 2025	DME Medical Supplies	B4150	HCPCS	ENTERAL FORMULA, NUTRITIONALLY COMPLETE WITH INTACT NUTRIENTS, INCLUDES PROTEINS, FATS, CARBOHYDRATES, VITAMINS AND MINERALS
OHANAA	Q3 2025	DME Medical Supplies	B4152	HCPCS	ENTERAL FORMULA, NUTRITIONALLY COMPLETE, CALORICALLY DENSE (EQUAL TO OR GREATER THAN 1.5 KCAL/ML) WITH INTACT NUTRIENTS
OHANAA	Q3 2025	DME Medical Supplies	B4153	HCPCS	ENTERAL FORMULA, NUTRITIONALLY COMPLETE, HYDROLYZED PROTEINS (AMINO ACIDS AND PEPTIDE CHAIN), INCLUDES FATS, CARBOHYDRATES
OHANAA	Q3 2025	DME Medical Supplies	B4154	HCPCS	ENTERAL FORMULA, NUTRITIONALLY COMPLETE, FOR SPECIAL METABOLIC NEEDS, EXCLUDES INHERITED DISEASE OF METABOLISM
OHANAA	Q3 2025	DME Medical Supplies	B4155	HCPCS	ENTERAL FORMULA, NUTRITIONALLY INCOMPLETE/MODULAR NUTRIENTS, INCLUDES SPECIFIC NUTRIENTS, CARBOHYDRATES (E.G.
OHANAA	Q3 2025	DME Medical Supplies	B4160	HCPCS	ENTERAL FORMULA, FOR PEDIATRICS, NUTRITIONALLY COMPLETE CALORICALLY DENSE (EQUAL TO OR GREATER THAN 0.7 KCAL/ML) WITH
OHANAA	Q3 2025	DME Medical Supplies	B4161	HCPCS	ENTERAL FORMULA, FOR PEDIATRICS, HYDROLYZED/AMINO ACIDS AND PEPTIDE CHAIN PROTEINS, INCLUDES FATS, CARBOHYDRATES
OHANAA	Q3 2025	DME Medical Supplies	B4185	HCPCS	PARENTERAL NUTRITION SOLUTION, PER 10 GRAMS LIPIDS
OHANAA	Q3 2025	DME Medical Supplies	B4187	HCPCS	OMEGAVEN 10 G LIPIDS
OHANAA	Q3 2025	DME Medical Supplies	B4193	HCPCS	PARENTERAL NUTRITION SOLUTION: COMPOUNDED AMINO ACID AND CARBOHYDRATES W ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS
OHANAA	Q3 2025	DME Medical Supplies	B4197	HCPCS	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATES W ELECTROLYTES, TRACE ELEMENTS AND VITAMINS
OHANAA	Q3 2025	DME Medical Supplies	B9002	HCPCS	ENTERAL NUTRITION INFUSION PUMP, ANY TYPE
OHANAA	Q3 2025	DME Medical Supplies	B9998	HCPCS	NOC FOR ENTERAL SUPPLIES
OHANAA	Q3 2025	DME Medical Supplies	E0100	HCPCS	CANE, INCLUDES CANES OF ALL MATERIALS, ADJUSTABLE OR FIXED, WITH TIP
OHANAA	Q3 2025	DME Medical Supplies	E0105	HCPCS	CANE, QUAD OR 3-PRONG, INCLUDES CANES OF ALL MATERIALS, ADJUSTABLE OR FIXED, WITH TIPS
OHANAA	Q3 2025	DME Medical Supplies	E0143	HCPCS	WALKER, FOLDING, WHEELED, ADJUSTABLE OR FIXED HEIGHT
OHANAA	Q3 2025	DME Medical Supplies	E0144	HCPCS	WALKER, ENCLOSED, 4 SIDED FRAMED, RIGID OR FOLDING, WHEELED WITH POSTERIOR SEAT
OHANAA	Q3 2025	DME Medical Supplies	E0147	HCPCS	WALKER, HEAVY-DUTY, MULTIPLE BRAKING SYSTEM, VARIABLE WHEEL RESISTANCE
OHANAA	Q3 2025	DME Medical Supplies	E0149	HCPCS	WALKER, HEAVY-DUTY, WHEELED, RIGID OR FOLDING, ANY TYPE
OHANAA	Q3 2025	DME Medical Supplies	E0154	HCPCS	PLATFORM ATTACHMENT, WALKER, EACH
OHANAA	Q3 2025	DME Medical Supplies	E0156	HCPCS	SEAT ATTACHMENT, WALKER
OHANAA	Q3 2025	DME Medical Supplies	E0159	HCPCS	BRAKE ATTACHMENT FOR WHEELED WALKER, REPLACEMENT, EACH
OHANAA	Q3 2025	DME Medical Supplies	E0163	HCPCS	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS
OHANAA	Q3 2025	DME Medical Supplies	E0165	HCPCS	COMMODE CHAIR, MOBILE OR STATIONARY, WITH DETACHABLE ARMS
OHANAA	Q3 2025	DME Medical Supplies	E0168	HCPCS	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY-DUTY, STATIONARY OR MOBILE, WITH OR WITHOUT ARMS, ANY TYPE, EACH
OHANAA	Q3 2025	DME Medical Supplies	E0170	HCPCS	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, ELECTRIC, ANY TYPE
OHANAA	Q3 2025	DME Medical Supplies	E0181	HCPCS	POWERED PRESSURE REDUCING MATTRESS OVERLAY/PAD, ALTERNATING, WITH PUMP, INCLUDES HEAVY-DUTY
OHANAA	Q3 2025	DME Medical Supplies	E0184	HCPCS	DRY PRESSURE MATTRESS
OHANAA	Q3 2025	DME Medical Supplies	E0185	HCPCS	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH
OHANAA	Q3 2025	DME Medical Supplies	E0186	HCPCS	AIR PRESSURE MATTRESS
OHANAA	Q3 2025	DME Medical Supplies	E0191	HCPCS	HEEL OR ELBOW PROTECTOR, EACH
OHANAA	Q3 2025	DME Medical Supplies	E0197	HCPCS	AIR PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH
OHANAA	Q3 2025	DME Medical Supplies	E0210	HCPCS	ELECTRIC HEAT PAD, STANDARD
OHANAA	Q3 2025	DME Medical Supplies	E0240	HCPCS	BATH/SHOWER CHAIR, WITH OR WITHOUT WHEELS, ANY SIZE
OHANAA	Q3 2025	DME Medical Supplies	E0242	HCPCS	BATHTUB RAIL, FLOOR BASE
OHANAA	Q3 2025	DME Medical Supplies	E0244	HCPCS	RAISED TOILET SEAT
OHANAA	Q3 2025	DME Medical Supplies	E0245	HCPCS	TUB STOOL OR BENCH
OHANAA	Q3 2025	DME Medical Supplies	E0247	HCPCS	TRANSFER BENCH FOR TUB OR TOILET WITH OR WITHOUT COMMODE OPENING
OHANAA	Q3 2025	DME Medical Supplies	E0248	HCPCS	TRANSFER BENCH, HEAVY-DUTY, FOR TUB OR TOILET WITH OR WITHOUT COMMODE OPENING
OHANAA	Q3 2025	DME Medical Supplies	E0255	HCPCS	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITH MATTRESS
OHANAA	Q3 2025	DME Medical Supplies	E0260	HCPCS	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS, WITH MATTRESS
OHANAA	Q3 2025	DME Medical Supplies	E0261	HCPCS	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS
OHANAA	Q3 2025	DME Medical Supplies	E0265	HCPCS	HOSPITAL BED, TOTAL ELECTRIC (HEAD, FOOT, AND HEIGHT ADJUSTMENTS), WITH ANY TYPE SIDE RAILS, WITH MATTRESS
OHANAA	Q3 2025	DME Medical Supplies	E0271	HCPCS	MATTRESS, INNERSPRING
OHANAA	Q3 2025	DME Medical Supplies	E0272	HCPCS	MATTRESS, FOAM RUBBER
OHANAA	Q3 2025	DME Medical Supplies	E0274	HCPCS	OVER-BED TABLE
OHANAA	Q3 2025	DME Medical Supplies	E0277	HCPCS	POWERED PRESSURE-REDUCING AIR MATTRESS
OHANAA	Q3 2025	DME Medical Supplies	E0295	HCPCS	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITHOUT MATTRESS
OHANAA	Q3 2025	DME Medical Supplies	E0301	HCPCS	HOSPITAL BED, HEAVY-DUTY, EXTRA WIDE, W WEIGHT CAPACITY GREATER THAN 350 POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS
OHANAA	Q3 2025	DME Medical Supplies	E0302	HCPCS	HOSPITAL BED, EXTRA HEAVY-DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600 POUNDS, WITH ANY TYPE SIDE RAILS
OHANAA	Q3 2025	DME Medical Supplies	E0303	HCPCS	HOSPITAL BED, HEAVY-DUTY, EXTRA WIDE, W WEIGHT CAPACITY GREATER THAN 350 POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS
OHANAA	Q3 2025	DME Medical Supplies	E0305	HCPCS	BEDSIDE RAILS, HALF-LENGTH
OHANAA	Q3 2025	DME Medical Supplies	E0310	HCPCS	BEDSIDE RAILS, FULL-LENGTH
OHANAA	Q3 2025	DME Medical Supplies	E0325	HCPCS	URINAL; MALE, JUG-TYPE, ANY MATERIAL
OHANAA	Q3 2025	DME Medical Supplies	E0372	HCPCS	POWERED AIR OVERLAY FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH
OHANAA	Q3 2025	DME Medical Supplies	E0424	HCPCS	STATIONARY COMPRESSED GASEOUS OXYGEN SYSTEM, RENTAL; INCLUDES CONTAINER, CONTENTS, REGULATOR, FLOWMETER, HUMIDIFIER
OHANAA	Q3 2025	DME Medical Supplies	E0431	HCPCS	PORTABLE GASEOUS OXYGEN SYSTEM, RENTAL; INCLUDES PORTABLE CONTAINER, REGULATOR, FLOWMETER, HUMIDIFIER, CANNULA OR MASK, AND TUBING
OHANAA	Q3 2025	DME Medical Supplies	E0443	HCPCS	PORTABLE OXYGEN CONTENTS, GASEOUS, 1 MONTH'S SUPPLY = 1 UNIT
OHANAA	Q3 2025	DME Medical Supplies	E0445	HCPCS	OXIMETER DEVICE FOR MEASURING BLOOD OXYGEN LEVELS NONINVASIVELY
OHANAA	Q3 2025	DME Medical Supplies	E0465	HCPCS	HOME VENTILATOR, ANY TYPE, USED WITH INVASIVE INTERFACE, (E.G., TRACHEOSTOMY TUBE)
OHANAA	Q3 2025	DME Medical Supplies	E0466	HCPCS	HOME VENTILATOR, ANY TYPE, USED WITH NONINVASIVE INTERFACE, (E.G., MASK, CHEST SHELL)
OHANAA	Q3 2025	DME Medical Supplies	E0470	HCPCS	RESPIRATORY ASSIST DEVICE, BI-LEVEL PRESSURE CAPABILITY, WITHOUT BACKUP RATE FEATURE, USED WITH NONINVASIVE INTERFACE
OHANAA	Q3 2025	DME Medical Supplies	E0471	HCPCS	RESPIRATORY ASSIST DEVICE, BI-LEVEL PRESSURE CAPABILITY, WITH BACK-UP RATE FEATURE, USED WITH NONINVASIVE INTERFACE
OHANAA	Q3 2025	DME Medical Supplies	E0482	HCPCS	COUGH STIMULATING DEVICE, ALTERNATING POSITIVE AND NEGATIVE AIRWAY PRESSURE
OHANAA	Q3 2025	DME Medical Supplies	E0483	HCPCS	HIGH FREQUENCY CHEST WALL OSCILLATION AIR-PULSE GENERATOR SYSTEM, (INCLUDES HOSES AND VEST), EACH
OHANAA	Q3 2025	DME Medical Supplies	E0490	HCPCS	PS & CE U O DVC/APPL NM ELECT STIM TNG MUSC REM
OHANAA	Q3 2025	DME Medical Supplies	E0491	HCPCS	ORAL DEVICE/APPL NM ELECT STIM TONGUE MUSCLE
OHANAA	Q3 2025	DME Medical Supplies	E0550	HCPCS	HUMIDIFIER, DURABLE FOR EXTENSIVE SUPPLEMENTAL HUMIDIFICATION DURING IPPB TREATMENTS OR OXYGEN DELIVERY
OHANAA	Q3 2025	DME Medical Supplies	E0561	HCPCS	HUMIDIFIER, NONHEATED, USED WITH POSITIVE AIRWAY PRESSURE DEVICE
OHANAA	Q3 2025	DME Medical Supplies	E0562	HCPCS	HUMIDIFIER, HEATED, USED WITH POSITIVE AIRWAY PRESSURE DEVICE
OHANAA	Q3 2025	DME Medical Supplies	E0565	HCPCS	COMPRESSOR, AIR POWER SOURCE FOR EQUIPMENT WHICH IS NOT SELF-CONTAINED OR CYLINDER DRIVEN
OHANAA	Q3 2025	DME Medical Supplies	E0570	HCPCS	NEBULIZER, WITH COMPRESSOR
OHANAA	Q3 2025	DME Medical Supplies	E0600	HCPCS	RESPIRATORY SUCTION PUMP, HOME MODEL, PORTABLE OR STATIONARY, ELECTRIC
OHANAA	Q3 2025	DME Medical Supplies	E0601	HCPCS	CONTINUOUS POSITIVE AIRWAY PRESSURE (CPAP) DEVICE
OHANAA	Q3 2025	DME Medical Supplies	E0603	HCPCS	BREAST PUMP, ELECTRIC (AC AND/OR DC), ANY TYPE
OHANAA	Q3 2025	DME Medical Supplies	E0621	HCPCS	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON
OHANAA	Q3 2025	DME Medical Supplies	E0630	HCPCS	PATIENT LIFT, HYDRAULIC OR MECHANICAL, INCLUDES ANY SEAT, SLING, STRAP(S), OR PAD(S)
OHANAA	Q3 2025	DME Medical Supplies	E0635	HCPCS	PATIENT LIFT, ELECTRIC, WITH SEAT OR SLING
OHANAA	Q3 2025	DME Medical Supplies	E0638	HCPCS	STANDING FRAME/TABLE SYSTEM, ONE POSITION (E.G., UPRIGHT, SUPINE OR PRONE STANDER), ANY SIZE INCLUDING PEDIATRIC
OHANAA	Q3 2025	DME Medical Supplies	E0651	HCPCS	PNEUMATIC COMPRESSOR, SEGMENTAL HOME MODEL WITHOUT CALIBRATED GRADIENT PRESSURE
OHANAA	Q3 2025	DME Medical Supplies	E0652	HCPCS	PNEUMATIC COMPRESSOR, SEGMENTAL HOME MODEL WITH CALIBRATED GRADIENT PRESSURE
OHANAA	Q3 2025	DME Medical Supplies	E0667	HCPCS	SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, FULL LEG
OHANAA	Q3 2025	DME Medical Supplies	E0668	HCPCS	SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, FULL ARM
OHANAA	Q3 2025	DME Medical Supplies	E0669	HCPCS	SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, HALF LEG
OHANAA	Q3 2025	DME Medical Supplies	E0670	HCPCS	SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, INTEGRATED, 2 FULL LEGS AND TRUNK
OHANAA	Q3 2025	DME Medical Supplies	E0693	HCPCS	ULTRAVIOLET LIGHT THERAPY SYSTEM PANEL, INCLUDES BULBS/LAMPS, TIMER AND EYE PROTECTION, 6 FT PANEL
OHANAA	Q3 2025	DME Medical Supplies	E0720	HCPCS	TRANSCUTANEOUS ELECTRICAL NERVE STIMULATION (TENS) DEVICE, 2 LEAD, LOCALIZED STIMULATION
OHANAA	Q3 2025	DME Medical Supplies	E0730	HCPCS	TRANSCUTANEOUS ELECTRICAL NERVE STIMULATION (TENS) DEVICE, 4 OR MORE LEADS, FOR MULTIPLE NERVE STIMULATION
OHANAA	Q3 2025	DME Medical Supplies	E0747	HCPCS	OSTEOGENESIS STIMULATOR, ELECTRICAL, NONINVASIVE, OTHER THAN SPINAL APPLICATIONS
OHANAA	Q3 2025	DME Medical Supplies	E0748	HCPCS	OSTEOGENESIS STIMULATOR, ELECTRICAL, NONINVASIVE, SPINAL APPLICATIONS

OHANAA	Q3 2025	DME Medical Supplies	E0760	HCPCS	OSTEOGENESIS STIMULATOR, LOW INTENSITY ULTRASOUND, NONINVASIVE
OHANAA	Q3 2025	DME Medical Supplies	E0766	HCPCS	ELECTRICAL STIMULATION DEVICE USED FOR CANCER TREATMENT, INCLUDES ALL ACCESSORIES, ANY TYPE
OHANAA	Q3 2025	DME Medical Supplies	E0776	HCPCS	IV POLE
OHANAA	Q3 2025	DME Medical Supplies	E0781	HCPCS	AMBULATORY INFUSION PUMP, SINGLE OR MULTIPLE CHANNELS, ELECTRIC OR BATTERY OPERATED, WITH ADMINISTRATIVE EQUIPMENT
OHANAA	Q3 2025	DME Medical Supplies	E0784	HCPCS	EXTERNAL AMBULATORY INFUSION PUMP, INSULIN
OHANAA	Q3 2025	DME Medical Supplies	E0856	HCPCS	CERVICAL TRACTION DEVICE, WITH INFLATABLE AIR BLADDER(S)
OHANAA	Q3 2025	DME Medical Supplies	E0910	HCPCS	TRAPEZE BARS, ALSO KNOWN AS PATIENT HELPER, ATTACHED TO BED, WITH GRAB BAR
OHANAA	Q3 2025	DME Medical Supplies	E0912	HCPCS	TRAPEZE BAR, HEAVY-DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS, FREESTANDING, COMPLETE WITH GRAB BAR
OHANAA	Q3 2025	DME Medical Supplies	E0940	HCPCS	TRAPEZE BAR, FREESTANDING, COMPLETE WITH GRAB BAR
OHANAA	Q3 2025	DME Medical Supplies	E0950	HCPCS	WHEELCHAIR ACCESSORY, TRAY, EACH
OHANAA	Q3 2025	DME Medical Supplies	E0952	HCPCS	TOE LOOP/HOLDER, ANY TYPE, EACH
OHANAA	Q3 2025	DME Medical Supplies	E0953	HCPCS	WHEELCHAIR ACCESSORY, LATERAL THIGH OR KNEE SUPPORT, ANY TYPE INCLUDING FIXED MOUNTING HARDWARE, EACH
OHANAA	Q3 2025	DME Medical Supplies	E0954	HCPCS	WHEELCHAIR ACCESSORY, FOOT BOX, ANY TYPE, INCLUDES ATTACHMENT AND MOUNTING HARDWARE, EACH FOOT
OHANAA	Q3 2025	DME Medical Supplies	E0955	HCPCS	WHEELCHAIR ACCESSORY, HEADREST, CUSHIONED, ANY TYPE, INCLUDING FIXED MOUNTING HARDWARE, EACH
OHANAA	Q3 2025	DME Medical Supplies	E0956	HCPCS	WHEELCHAIR ACCESSORY, LATERAL TRUNK OR HIP SUPPORT, ANY TYPE, INCLUDING FIXED MOUNTING HARDWARE, EACH
OHANAA	Q3 2025	DME Medical Supplies	E0957	HCPCS	WHEELCHAIR ACCESSORY, MEDIAL THIGH SUPPORT, ANY TYPE, INCLUDING FIXED MOUNTING HARDWARE, EACH
OHANAA	Q3 2025	DME Medical Supplies	E0958	HCPCS	MANUAL WHEELCHAIR ACCESSORY, ONE-ARM DRIVE ATTACHMENT, EACH
OHANAA	Q3 2025	DME Medical Supplies	E0959	HCPCS	MANUAL WHEELCHAIR ACCESSORY, ADAPTER FOR AMPUTEE, EACH
OHANAA	Q3 2025	DME Medical Supplies	E0961	HCPCS	MANUAL WHEELCHAIR ACCESSORY, WHEEL LOCK BRAKE EXTENSION (HANDLE), EACH
OHANAA	Q3 2025	DME Medical Supplies	E0966	HCPCS	MANUAL WHEELCHAIR ACCESSORY, HEADREST EXTENSION, EACH
OHANAA	Q3 2025	DME Medical Supplies	E0970	HCPCS	NO. 2 FOOTPLATES, EXCEPT FOR ELEVATING LEGREST
OHANAA	Q3 2025	DME Medical Supplies	E0971	HCPCS	MANUAL WHEELCHAIR ACCESSORY, ANTITIPPING DEVICE, EACH
OHANAA	Q3 2025	DME Medical Supplies	E0974	HCPCS	MANUAL WHEELCHAIR ACCESSORY, ANTIROLLBACK DEVICE, EACH
OHANAA	Q3 2025	DME Medical Supplies	E0981	HCPCS	WHEELCHAIR ACCESSORY, SEAT UPHOLSTERY, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	E0982	HCPCS	WHEELCHAIR ACCESSORY, BACK UPHOLSTERY, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	E0986	HCPCS	MANUAL WHEELCHAIR ACCESSORY, PUSH-RIM ACTIVATED POWER ASSIST SYSTEM
OHANAA	Q3 2025	DME Medical Supplies	E0990	HCPCS	WHEELCHAIR ACCESSORY, ELEVATING LEGREST, COMPLETE ASSEMBLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	E0992	HCPCS	MANUAL WHEELCHAIR ACCESSORY, SOLID SEAT INSERT
OHANAA	Q3 2025	DME Medical Supplies	E0995	HCPCS	WHEELCHAIR ACCESSORY, CALF REST/PAD, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	E1002	HCPCS	WHEELCHAIR ACCESSORY, POWER SEATING SYSTEM, TILT ONLY
OHANAA	Q3 2025	DME Medical Supplies	E1007	HCPCS	WHEELCHAIR ACCESSORY, POWER SEATING SYSTEM, COMBINATION TILT AND RECLINE, WITH MECHANICAL SHEAR REDUCTION
OHANAA	Q3 2025	DME Medical Supplies	E1010	HCPCS	WHEELCHAIR ACCESSORY, ADDITION TO POWER SEATING SYSTEM, POWER LEG ELEVATION SYSTEM, INCLUDING LEGREST, PAIR
OHANAA	Q3 2025	DME Medical Supplies	E1012	HCPCS	WHEELCHAIR ACCESSORY, ADDITION TO POWER SEATING SYSTEM, CENTER MOUNT POWER ELEVATING LEG REST/PLATFORM, COMPLETE SYSTEM
OHANAA	Q3 2025	DME Medical Supplies	E1014	HCPCS	RECLINING BACK, ADDITION TO PEDIATRIC SIZE WHEELCHAIR
OHANAA	Q3 2025	DME Medical Supplies	E1015	HCPCS	SHOCK ABSORBER FOR MANUAL WHEELCHAIR, EACH
OHANAA	Q3 2025	DME Medical Supplies	E1020	HCPCS	RESIDUAL LIMB SUPPORT SYSTEM FOR WHEELCHAIR, ANY TYPE
OHANAA	Q3 2025	DME Medical Supplies	E1028	HCPCS	WHEELCHAIR ACCESSORY, MANUAL SWINGAWAY, RETRACTABLE OR REMOVABLE MOUNTING HARDWARE FOR JOYSTICK, OTHER CONTROL INTERFACE
OHANAA	Q3 2025	DME Medical Supplies	E1031	HCPCS	ROLLABOUT CHAIR, ANY AND ALL TYPES WITH CASTORS 5 IN OR GREATER
OHANAA	Q3 2025	DME Medical Supplies	E1038	HCPCS	TRANSPORT CHAIR, ADULT SIZE, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
OHANAA	Q3 2025	DME Medical Supplies	E1070	HCPCS	FULLY-RECLINING WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL-LENGTH) SWING-AWAY DETACHABLE FOOTREST
OHANAA	Q3 2025	DME Medical Supplies	E1130	HCPCS	STANDARD WHEELCHAIR, FIXED FULL-LENGTH ARMS, FIXED OR SWING-AWAY DETACHABLE FOOTRESTS
OHANAA	Q3 2025	DME Medical Supplies	E1140	HCPCS	WHEELCHAIR, DETACHABLE ARMS, DESK OR FULL-LENGTH, SWING-AWAY DETACHABLE FOOTRESTS
OHANAA	Q3 2025	DME Medical Supplies	E1161	HCPCS	MANUAL ADULT SIZE WHEELCHAIR, INCLUDES TILT IN SPACE
OHANAA	Q3 2025	DME Medical Supplies	E1225	HCPCS	WHEELCHAIR ACCESSORY, MANUAL SEMI-RECLINING BACK, (RECLINE GREATER THAN 15 DEGREES, BUT LESS THAN 80 DEGREES), EACH
OHANAA	Q3 2025	DME Medical Supplies	E1226	HCPCS	WHEELCHAIR ACCESSORY, MANUAL FULLY RECLINING BACK, (RECLINE GREATER THAN 80 DEGREES), EACH
OHANAA	Q3 2025	DME Medical Supplies	E1232	HCPCS	WHEELCHAIR, PEDIATRIC SIZE, TILT-IN-SPACE, FOLDING, ADJUSTABLE, WITH SEATING SYSTEM
OHANAA	Q3 2025	DME Medical Supplies	E1233	HCPCS	WHEELCHAIR, PEDIATRIC SIZE, TILT-IN-SPACE, RIGID, ADJUSTABLE, WITHOUT SEATING SYSTEM
OHANAA	Q3 2025	DME Medical Supplies	E1234	HCPCS	WHEELCHAIR, PEDIATRIC SIZE, TILT-IN-SPACE, FOLDING, ADJUSTABLE, WITHOUT SEATING SYSTEM
OHANAA	Q3 2025	DME Medical Supplies	E1235	HCPCS	WHEELCHAIR, PEDIATRIC SIZE, RIGID, ADJUSTABLE, WITH SEATING SYSTEM
OHANAA	Q3 2025	DME Medical Supplies	E1236	HCPCS	WHEELCHAIR, PEDIATRIC SIZE, FOLDING, ADJUSTABLE, WITH SEATING SYSTEM
OHANAA	Q3 2025	DME Medical Supplies	E1238	HCPCS	WHEELCHAIR, PEDIATRIC SIZE, FOLDING, ADJUSTABLE, WITHOUT SEATING SYSTEM
OHANAA	Q3 2025	DME Medical Supplies	E1260	HCPCS	LIGHTWEIGHT WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL-LENGTH) SWING-AWAY DETACHABLE FOOTREST
OHANAA	Q3 2025	DME Medical Supplies	E1297	HCPCS	SPECIAL WHEELCHAIR SEAT DEPTH, BY UPHOLSTERY
OHANAA	Q3 2025	DME Medical Supplies	E1356	HCPCS	OXYGEN ACCESSORY, BATTERY PACK/CARTRIDGE FOR PORTABLE CONCENTRATOR, ANY TYPE, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	E1372	HCPCS	IMMERSION EXTERNAL HEATER FOR NEBULIZER
OHANAA	Q3 2025	DME Medical Supplies	E1390	HCPCS	OXYGEN CONCENTRATOR, SINGLE DELIVERY PORT, CAPABLE OF DELIVERING 85 PERCENT OR GREATER OXYGEN CONCENTRATION AT THE
OHANAA	Q3 2025	DME Medical Supplies	E1392	HCPCS	PORTABLE OXYGEN CONCENTRATOR, RENTAL
OHANAA	Q3 2025	DME Medical Supplies	E1399	HCPCS	DURABLE MEDICAL EQUIPMENT, MISCELLANEOUS
OHANAA	Q3 2025	DME Medical Supplies	E1810	HCPCS	DYNAMIC ADJUSTABLE KNEE EXTENSION/FLEXION DEVICE, INCLUDES SOFT INTERFACE MATERIAL
OHANAA	Q3 2025	DME Medical Supplies	E1815	HCPCS	DYNAMIC ADJUSTABLE ANKLE EXTENSION/FLEXION DEVICE, INCLUDES SOFT INTERFACE MATERIAL
OHANAA	Q3 2025	DME Medical Supplies	E2201	HCPCS	MANUAL WHEELCHAIR ACCESSORY, NONSTANDARD SEAT FRAME, WIDTH GREATER THAN OR EQUAL TO 20 IN AND LESS THAN 24 IN
OHANAA	Q3 2025	DME Medical Supplies	E2203	HCPCS	MANUAL WHEELCHAIR ACCESSORY, NONSTANDARD SEAT FRAME DEPTH, 20 TO LESS THAN 22 IN
OHANAA	Q3 2025	DME Medical Supplies	E2205	HCPCS	MANUAL WHEELCHAIR ACCESSORY, HANDRIM WITHOUT PROJECTIONS (INCLUDES ERGONOMIC OR CONTOURED), ANY TYPE, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2206	HCPCS	MANUAL WHEELCHAIR ACCESSORY, WHEEL LOCK ASSEMBLY, COMPLETE, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2207	HCPCS	WHEELCHAIR ACCESSORY, CRUTCH AND CANE HOLDER, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2209	HCPCS	ACCESSORY, ARM TROUGH, WITH OR WITHOUT HAND SUPPORT, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2210	HCPCS	WHEELCHAIR ACCESSORY, BEARINGS, ANY TYPE, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2212	HCPCS	MANUAL WHEELCHAIR ACCESSORY, TUBE FOR PNEUMATIC PROPULSION TIRE, ANY SIZE, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2214	HCPCS	MANUAL WHEELCHAIR ACCESSORY, PNEUMATIC CASTER TIRE, ANY SIZE, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2220	HCPCS	MANUAL WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) PROPULSION TIRE, ANY SIZE, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2221	HCPCS	MANUAL WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) CASTER TIRE (REMOVABLE), ANY SIZE, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2224	HCPCS	MANUAL WHEELCHAIR ACCESSORY, PROPULSION WHEEL EXCLUDES TIRE, ANY SIZE, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2225	HCPCS	MANUAL WHEELCHAIR ACCESSORY, CASTER WHEEL EXCLUDES TIRE, ANY SIZE, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2226	HCPCS	MANUAL WHEELCHAIR ACCESSORY, CASTER FORK, ANY SIZE, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2228	HCPCS	MANUAL WHEELCHAIR ACCESSORY, WHEEL BRAKING SYSTEM AND LOCK, COMPLETE, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2292	HCPCS	SEAT, PLANAR, FOR PEDIATRIC SIZE WHEELCHAIR INCLUDING FIXED ATTACHING HARDWARE
OHANAA	Q3 2025	DME Medical Supplies	E2293	HCPCS	BACK, CONTOURED, FOR PEDIATRIC SIZE WHEELCHAIR INCLUDING FIXED ATTACHING HARDWARE
OHANAA	Q3 2025	DME Medical Supplies	E2294	HCPCS	SEAT, CONTOURED, FOR PEDIATRIC SIZE WHEELCHAIR INCLUDING FIXED ATTACHING HARDWARE
OHANAA	Q3 2025	DME Medical Supplies	E2301	HCPCS	WHEELCHAIR ACCESSORY, POWER STANDING SYSTEM, ANY TYPE
OHANAA	Q3 2025	DME Medical Supplies	E2310	HCPCS	POWER WHEELCHAIR ACCESSORY, ELECTRONIC CONNECTION BETWEEN WHEELCHAIR CONTROLLER AND ONE POWER SEATING SYSTEM MOTOR
OHANAA	Q3 2025	DME Medical Supplies	E2311	HCPCS	POWER WHEELCHAIR ACCESSORY, ELECTRONIC CONNECTION BETWEEN WHEELCHAIR CONTROLLER AND 2 OR MORE POWER SEATING SYSTEM MOTORS
OHANAA	Q3 2025	DME Medical Supplies	E2312	HCPCS	POWER WHEELCHAIR ACCESSORY, HAND OR CHIN CONTROL INTERFACE, MINI-PROPORTIONAL REMOTE JOYSTICK, PROPORTIONAL, INCLUDING
OHANAA	Q3 2025	DME Medical Supplies	E2313	HCPCS	POWER WHEELCHAIR ACCESSORY, HARNESS FOR UPGRADE TO EXPANDABLE CONTROLLER, INCLUDING ALL FASTENERS, CONNECTORS AND MOUNTING
OHANAA	Q3 2025	DME Medical Supplies	E2323	HCPCS	POWER WHEELCHAIR ACCESSORY, SPECIALTY JOYSTICK HANDLE FOR HAND CONTROL INTERFACE, PREFABRICATED
OHANAA	Q3 2025	DME Medical Supplies	E2330	HCPCS	POWER WHEELCHAIR ACCESSORY, HEAD CONTROL INTERFACE, PROXIMITY SWITCH MECHANISM, NONPROPORTIONAL, INCLUDING ALL RELATED
OHANAA	Q3 2025	DME Medical Supplies	E2331	HCPCS	POWER WHEELCHAIR ACCESSORY, ATTENDANT CONTROL, PROPORTIONAL, INCLUDING ALL RELATED ELECTRONICS AND FIXED MOUNTING HARDWARE
OHANAA	Q3 2025	DME Medical Supplies	E2359	HCPCS	POWER WHEELCHAIR ACCESSORY, GROUP 34 SEALED LEAD ACID BATTERY, EACH (E.G., GEL CELL, ABSORBED GLASS MAT)
OHANAA	Q3 2025	DME Medical Supplies	E2361	HCPCS	POWER WHEELCHAIR ACCESSORY, 22 NF SEALED LEAD ACID BATTERY, EACH (E.G., GEL CELL, ABSORBED GLASSMAT)
OHANAA	Q3 2025	DME Medical Supplies	E2363	HCPCS	POWER WHEELCHAIR ACCESSORY, GROUP 24 SEALED LEAD ACID BATTERY, EACH (E.G., GEL CELL, ABSORBED GLASSMAT)
OHANAA	Q3 2025	DME Medical Supplies	E2365	HCPCS	POWER WHEELCHAIR ACCESSORY, U-1 SEALED LEAD ACID BATTERY, EACH (E.G., GEL CELL, ABSORBED GLASSMAT)
OHANAA	Q3 2025	DME Medical Supplies	E2366	HCPCS	POWER WHEELCHAIR ACCESSORY, BATTERY CHARGER, SINGLE MODE, FOR USE WITH ONLY ONE BATTERY TYPE, SEALED OR NONSEALED, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2367	HCPCS	POWER WHEELCHAIR ACCESSORY, BATTERY CHARGER, DUAL MODE, FOR USE WITH EITHER BATTERY TYPE, SEALED OR NONSEALED, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2370	HCPCS	POWER WHEELCHAIR COMPONENT, INTEGRATED DRIVE WHEEL MOTOR AND GEAR BOX COMBINATION, REPLACEMENT ONLY
OHANAA	Q3 2025	DME Medical Supplies	E2374	HCPCS	POWER WHEELCHAIR ACCESSORY, HAND OR CHIN CONTROL INTERFACE, STANDARD REMOTE JOYSTICK (NOT INCLUDING CONTROLLER)
OHANAA	Q3 2025	DME Medical Supplies	E2375	HCPCS	POWER WHEELCHAIR ACCESSORY, NONEXPANDABLE CONTROLLER, INCLUDING ALL RELATED ELECTRONICS AND MOUNTING HARDWARE, REPLACEMENT ONLY
OHANAA	Q3 2025	DME Medical Supplies	E2376	HCPCS	POWER WHEELCHAIR ACCESSORY, EXPANDABLE CONTROLLER, INCLUDING ALL RELATED ELECTRONICS AND MOUNTING HARDWARE, REPLACEMENT ONLY
OHANAA	Q3 2025	DME Medical Supplies	E2377	HCPCS	POWER WHEELCHAIR ACCESSORY, EXPANDABLE CONTROLLER, INCLUDING ALL RELATED ELECTRONICS AND MOUNTING HARDWARE, UPGRADE
OHANAA	Q3 2025	DME Medical Supplies	E2378	HCPCS	POWER WHEELCHAIR COMPONENT, ACTUATOR, REPLACEMENT ONLY

OHANAA	Q3 2025	DME Medical Supplies	E2381	HCPCS	POWER WHEELCHAIR ACCESSORY, PNEUMATIC DRIVE WHEEL TIRE, ANY SIZE, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2383	HCPCS	POWER WHEELCHAIR ACCESSORY, INSERT FOR PNEUMATIC DRIVE WHEEL TIRE (REMOVABLE), ANY TYPE, ANY SIZE, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2386	HCPCS	POWER WHEELCHAIR ACCESSORY, FOAM FILLED DRIVE WHEEL TIRE, ANY SIZE, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2387	HCPCS	POWER WHEELCHAIR ACCESSORY, FOAM FILLED CASTER TIRE, ANY SIZE, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2388	HCPCS	POWER WHEELCHAIR ACCESSORY, FOAM DRIVE WHEEL TIRE, ANY SIZE, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2389	HCPCS	POWER WHEELCHAIR ACCESSORY, FOAM CASTER TIRE, ANY SIZE, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2391	HCPCS	POWER WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) CASTER TIRE (REMOVABLE), ANY SIZE, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2392	HCPCS	POWER WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) CASTER TIRE WITH INTEGRATED WHEEL, ANY SIZE, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2394	HCPCS	POWER WHEELCHAIR ACCESSORY, DRIVE WHEEL EXCLUDES TIRE, ANY SIZE, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2395	HCPCS	POWER WHEELCHAIR ACCESSORY, CASTER WHEEL EXCLUDES TIRE, ANY SIZE, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2396	HCPCS	POWER WHEELCHAIR ACCESSORY, CASTER FORK, ANY SIZE, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2402	HCPCS	NEGATIVE PRESSURE WOUND THERAPY ELECTRICAL PUMP, STATIONARY OR PORTABLE
OHANAA	Q3 2025	DME Medical Supplies	E2510	HCPCS	SPEECH GENERATING DEVICE, SYNTHESIZED SPEECH, PERMITTING MULTIPLE METHODS OF MESSAGE FORMULATION AND MULTIPLE METHODS
OHANAA	Q3 2025	DME Medical Supplies	E2512	HCPCS	ACCESSORY FOR SPEECH GENERATING DEVICE, MOUNTING SYSTEM
OHANAA	Q3 2025	DME Medical Supplies	E2599	HCPCS	ACCESSORY FOR SPEECH GENERATING DEVICE, NOT OTHERWISE CLASSIFIED
OHANAA	Q3 2025	DME Medical Supplies	E2601	HCPCS	GENERAL USE WHEELCHAIR SEAT CUSHION, WIDTH LESS THAN 22 IN, ANY DEPTH
OHANAA	Q3 2025	DME Medical Supplies	E2602	HCPCS	GENERAL USE WHEELCHAIR SEAT CUSHION, WIDTH 22 IN OR GREATER, ANY DEPTH
OHANAA	Q3 2025	DME Medical Supplies	E2603	HCPCS	SKIN PROTECTION WHEELCHAIR SEAT CUSHION, WIDTH LESS THAN 22 IN, ANY DEPTH
OHANAA	Q3 2025	DME Medical Supplies	E2605	HCPCS	POSITIONING WHEELCHAIR SEAT CUSHION, WIDTH LESS THAN 22 IN, ANY DEPTH
OHANAA	Q3 2025	DME Medical Supplies	E2607	HCPCS	SKIN PROTECTION AND POSITIONING WHEELCHAIR SEAT CUSHION, WIDTH LESS THAN 22 IN, ANY DEPTH
OHANAA	Q3 2025	DME Medical Supplies	E2608	HCPCS	SKIN PROTECTION AND POSITIONING WHEELCHAIR SEAT CUSHION, WIDTH 22 IN OR GREATER, ANY DEPTH
OHANAA	Q3 2025	DME Medical Supplies	E2609	HCPCS	CUSTOM FABRICATED WHEELCHAIR SEAT CUSHION, ANY SIZE
OHANAA	Q3 2025	DME Medical Supplies	E2611	HCPCS	GENERAL USE WHEELCHAIR BACK CUSHION, WIDTH LESS THAN 22 IN, ANY HEIGHT, INCLUDING ANY TYPE MOUNTING HARDWARE
OHANAA	Q3 2025	DME Medical Supplies	E2612	HCPCS	GENERAL USE WHEELCHAIR BACK CUSHION, WIDTH 22 IN OR GREATER, ANY HEIGHT, INCLUDING ANY TYPE MOUNTING HARDWARE
OHANAA	Q3 2025	DME Medical Supplies	E2615	HCPCS	POSITIONING WHEELCHAIR BACK CUSHION, POSTERIOR-LATERAL, WIDTH LESS THAN 22 IN, ANY HEIGHT, INCLUDING ANY TYPE MOUNTING HARDWARE
OHANAA	Q3 2025	DME Medical Supplies	E2617	HCPCS	CUSTOM FABRICATED WHEELCHAIR BACK CUSHION, ANY SIZE, INCLUDING ANY TYPE MOUNTING HARDWARE
OHANAA	Q3 2025	DME Medical Supplies	E2619	HCPCS	REPLACEMENT COVER FOR WHEELCHAIR SEAT CUSHION OR BACK CUSHION, EACH
OHANAA	Q3 2025	DME Medical Supplies	E2621	HCPCS	POSITIONING WHEELCHAIR BACK CUSHION, PLANAR BACK WITH LATERAL SUPPORTS, WIDTH 22 IN OR GREATER, ANY HEIGHT, INCLUDING
OHANAA	Q3 2025	DME Medical Supplies	E2622	HCPCS	SKIN PROTECTION WHEELCHAIR SEAT CUSHION, ADJUSTABLE, WIDTH LESS THAN 22 IN, ANY DEPTH
OHANAA	Q3 2025	DME Medical Supplies	E2623	HCPCS	SKIN PROTECTION WHEELCHAIR SEAT CUSHION, ADJUSTABLE, WIDTH 22 IN OR GREATER, ANY DEPTH
OHANAA	Q3 2025	DME Medical Supplies	E2625	HCPCS	SKIN PROTECTION AND POSITIONING WHEELCHAIR SEAT CUSHION, ADJUSTABLE, WIDTH 22 IN OR GREATER, ANY DEPTH
OHANAA	Q3 2025	DME Medical Supplies	J3490	HCPCS	UNCLASSIFIED DRUGS
OHANAA	Q3 2025	DME Medical Supplies	K0001	HCPCS	STANDARD WHEELCHAIR
OHANAA	Q3 2025	DME Medical Supplies	K0002	HCPCS	STANDARD HEMI (LOW SEAT) WHEELCHAIR
OHANAA	Q3 2025	DME Medical Supplies	K0003	HCPCS	LIGHTWEIGHT WHEELCHAIR
OHANAA	Q3 2025	DME Medical Supplies	K0004	HCPCS	HIGH STRENGTH, LIGHTWEIGHT WHEELCHAIR
OHANAA	Q3 2025	DME Medical Supplies	K0005	HCPCS	ULTRALIGHTWEIGHT WHEELCHAIR
OHANAA	Q3 2025	DME Medical Supplies	K0006	HCPCS	HEAVY-DUTY WHEELCHAIR
OHANAA	Q3 2025	DME Medical Supplies	K0007	HCPCS	EXTRA HEAVY-DUTY WHEELCHAIR
OHANAA	Q3 2025	DME Medical Supplies	K0015	HCPCS	DETACHABLE, NONADJUSTABLE HEIGHT ARMREST, EACH
OHANAA	Q3 2025	DME Medical Supplies	K0017	HCPCS	DETACHABLE, ADJUSTABLE HEIGHT ARMREST, BASE, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	K0019	HCPCS	ARM PAD, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	K0040	HCPCS	ADJUSTABLE ANGLE FOOTPLATE, EACH
OHANAA	Q3 2025	DME Medical Supplies	K0042	HCPCS	STANDARD SIZE FOOTPLATE, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	K0043	HCPCS	FOOTREST, LOWER EXTENSION TUBE, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	K0044	HCPCS	FOOTREST, UPPER HANGER BRACKET, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	K0045	HCPCS	FOOTREST, COMPLETE ASSEMBLY, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	K0047	HCPCS	ELEVATING LEGREST, UPPER HANGER BRACKET, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	K0052	HCPCS	SWINGAWAY, DETACHABLE FOOTRESTS, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	K0053	HCPCS	ELEVATING FOOTRESTS, ARTICULATING (TELESCOPING), EACH
OHANAA	Q3 2025	DME Medical Supplies	K0056	HCPCS	SEAT HEIGHT LESS THAN 17 IN OR EQUAL TO OR GREATER THAN 21 IN FOR A HIGH-STRENGTH, LIGHTWEIGHT, OR ULTRALIGHTWEIGHT WHEELCHAIR
OHANAA	Q3 2025	DME Medical Supplies	K0065	HCPCS	SPOKE PROTECTORS, EACH
OHANAA	Q3 2025	DME Medical Supplies	K0070	HCPCS	REAR WHEEL ASSEMBLY, COMPLETE, WITH PNEUMATIC TIRE, SPOKES OR MOLDED, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	K0077	HCPCS	FRONT CASTER ASSEMBLY, COMPLETE, WITH SOLID TIRE, REPLACEMENT ONLY, EACH
OHANAA	Q3 2025	DME Medical Supplies	K0108	HCPCS	WHEELCHAIR COMPONENT OR ACCESSORY, NOT OTHERWISE SPECIFIED
OHANAA	Q3 2025	DME Medical Supplies	K0195	HCPCS	ELEVATING LEGRESTS, PAIR (FOR USE WITH CAPPED RENTAL WHEELCHAIR BASE)
OHANAA	Q3 2025	DME Medical Supplies	K0462	HCPCS	TEMPORARY REPLACEMENT FOR PATIENT-OWNED EQUIPMENT BEING REPAIRED, ANY TYPE
OHANAA	Q3 2025	DME Medical Supplies	K0606	HCPCS	AUTOMATIC EXTERNAL DEFIBRILLATOR, WITH INTEGRATED ELECTROCARDIOGRAM ANALYSIS, GARMENT TYPE
OHANAA	Q3 2025	DME Medical Supplies	K0669	HCPCS	WHEELCHAIR ACCESSORY, WHEELCHAIR SEAT OR BACK CUSHION, DOES NOT MEET SPECIFIC CODE CRITERIA OR NO WRITTEN CODING VERIFICATION
OHANAA	Q3 2025	DME Medical Supplies	K0733	HCPCS	POWER WHEELCHAIR ACCESSORY, 12 TO 24 AMP HOUR SEALED LEAD ACID BATTERY, EACH (E.G., GEL CELL, ABSORBED GLASSMAT)
OHANAA	Q3 2025	DME Medical Supplies	K0738	HCPCS	PORTABLE GASEOUS OXYGEN SYSTEM, RENTAL; HOME COMPRESSOR USED TO FILL PORTABLE OXYGEN CYLINDERS; INCLUDES PORTABLE CONTAINERS
OHANAA	Q3 2025	DME Medical Supplies	K0739	HCPCS	REPAIR OR NONROUTINE SERVICE FOR DURABLE MEDICAL EQUIPMENT OTHER THAN OXYGEN EQUIPMENT REQUIRING THE SKILL OF A TECHNICIAN
OHANAA	Q3 2025	DME Medical Supplies	K0800	HCPCS	POWER OPERATED VEHICLE, GROUP 1 STANDARD, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
OHANAA	Q3 2025	DME Medical Supplies	K0801	HCPCS	POWER OPERATED VEHICLE, GROUP 1 HEAVY-DUTY, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
OHANAA	Q3 2025	DME Medical Supplies	K0802	HCPCS	POWER OPERATED VEHICLE, GROUP 1 VERY HEAVY-DUTY, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS
OHANAA	Q3 2025	DME Medical Supplies	K0813	HCPCS	POWER WHEELCHAIR, GROUP 1 STANDARD, PORTABLE, SLING/SOLID SEAT AND BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
OHANAA	Q3 2025	DME Medical Supplies	K0822	HCPCS	POWER WHEELCHAIR, GROUP 2 STANDARD, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
OHANAA	Q3 2025	DME Medical Supplies	K0823	HCPCS	POWER WHEELCHAIR, GROUP 2 STANDARD, CAPTAIN'S CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
OHANAA	Q3 2025	DME Medical Supplies	K0825	HCPCS	POWER WHEELCHAIR, GROUP 2 HEAVY-DUTY, CAPTAIN'S CHAIR, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
OHANAA	Q3 2025	DME Medical Supplies	K0827	HCPCS	POWER WHEELCHAIR, GROUP 2 VERY HEAVY-DUTY, CAPTAIN'S CHAIR, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS
OHANAA	Q3 2025	DME Medical Supplies	K0848	HCPCS	POWER WHEELCHAIR, GROUP 3 STANDARD, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
OHANAA	Q3 2025	DME Medical Supplies	K0849	HCPCS	POWER WHEELCHAIR, GROUP 3 STANDARD, CAPTAIN'S CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
OHANAA	Q3 2025	DME Medical Supplies	K0852	HCPCS	POWER WHEELCHAIR, GROUP 3 VERY HEAVY-DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS
OHANAA	Q3 2025	DME Medical Supplies	K0856	HCPCS	POWER WHEELCHAIR, GROUP 3 STANDARD, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING
OHANAA	Q3 2025	DME Medical Supplies	K0861	HCPCS	POWER WHEELCHAIR, GROUP 3 STANDARD, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND
OHANAA	Q3 2025	DME Medical Supplies	K0862	HCPCS	POWER WHEELCHAIR, GROUP 3 HEAVY-DUTY, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
OHANAA	Q3 2025	DME Medical Supplies	K0899	HCPCS	POWER MOBILITY DEVICE, NOT CODED BY DME PDAC OR DOES NOT MEET CRITERIA
OHANAA	Q3 2025	DME Medical Supplies	K1036	HCPCS	SUPPLIES & ACCESSORIES LOW FREQ US DIA TX DVC PM
OHANAA	Q3 2025	DME Medical Supplies	L0120	HCPCS	CERVICAL, FLEXIBLE, NONADJUSTABLE, PREFABRICATED, OFF-THE-SHELF (FOAM COLLAR)
OHANAA	Q3 2025	DME Medical Supplies	L0174	HCPCS	CERVICAL, COLLAR, SEMI-RIGID, THERMOPLASTIC FOAM, TWO PIECE WITH THORACIC EXTENSION, PREFABRICATED, OFF-THE-SHELF
OHANAA	Q3 2025	DME Medical Supplies	L0460	HCPCS	TLSO, TRIPLANAR CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, TWO RIGID PLASTIC SHELLS, POSTERIOR EXTENDS FROM THE SACROCOCCYGEAL
OHANAA	Q3 2025	DME Medical Supplies	L0464	HCPCS	THORACIC-LUMBAR-SACRAL ORTHOTIC (TLSO), TRIPLANAR CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, 4 RIGID PLASTIC SHELLS
OHANAA	Q3 2025	DME Medical Supplies	L0472	HCPCS	THORACIC-LUMBAR-SACRAL ORTHOTIC (TLSO), TRIPLANAR CONTROL, HYPEREXTENSION, RIGID ANTERIOR AND LATERAL FRAME EXTENDS
OHANAA	Q3 2025	DME Medical Supplies	L0482	HCPCS	THORACIC-LUMBAR-SACRAL ORTHOTIC (TLSO), TRIPLANAR CONTROL, 1 PIECE RIGID PLASTIC SHELL W INTERFACE LINER, MULTIPLE
OHANAA	Q3 2025	DME Medical Supplies	L0486	HCPCS	THORACIC-LUMBAR-SACRAL ORTHOTIC (TLSO), TRIPLANAR CONTROL, 2 PIECE RIGID PLASTIC SHELL W INTERFACE LINER, MULTIPLE
OHANAA	Q3 2025	DME Medical Supplies	L0624	HCPCS	SACROILIAC ORTHOTIC, PROVIDES PELVIC-SACRAL SUPPORT, WITH RIGID OR SEMI-RIGID PANELS PLACED OVER THE SACRUM AND ABDOMEN
OHANAA	Q3 2025	DME Medical Supplies	L0627	HCPCS	LUMBAR ORTHOSIS, SAGITTAL CONTROL, W RIGID ANTERIOR AND POSTERIOR PANELS, POSTERIOR EXTENDS FROM L-1 TO BELOW L-5 VERTEBRA
OHANAA	Q3 2025	DME Medical Supplies	L0631	HCPCS	LUMBAR-SACRAL ORTHOSIS, SAGITTAL CONTROL, W RIGID ANTERIOR AND POSTERIOR PANELS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL
OHANAA	Q3 2025	DME Medical Supplies	L0637	HCPCS	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR FRAME/PANELS, POSTERIOR EXTENDS
OHANAA	Q3 2025	DME Medical Supplies	L0648	HCPCS	LUMBAR-SACRAL ORTHOSIS, SAGITTAL CONTROL, W RIGID ANTERIOR AND POSTERIOR PANELS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL
OHANAA	Q3 2025	DME Medical Supplies	L0650	HCPCS	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR FRAME/PANEL(S), POSTERIOR EXTENDS
OHANAA	Q3 2025	DME Medical Supplies	L0984	HCPCS	PROTECTIVE BODY SOCK, PREFABRICATED, OFF-THE-SHELF, EACH
OHANAA	Q3 2025	DME Medical Supplies	L1060	HCPCS	ADDITION TO CERVICAL-THORACIC-LUMBAR-SACRAL ORTHOTIC (CTLSO) OR SCOLIOSIS ORTHOTIC, THORACIC PAD
OHANAA	Q3 2025	DME Medical Supplies	L1200	HCPCS	THORACIC-LUMBAR-SACRAL ORTHOTIC (TLSO), INCLUSIVE OF FURNISHING INITIAL ORTHOTIC ONLY
OHANAA	Q3 2025	DME Medical Supplies	L1210	HCPCS	ADDITION TO THORACIC-LUMBAR-SACRAL ORTHOTIC (TLSO), (LOW PROFILE), LATERAL THORACIC EXTENSION
OHANAA	Q3 2025	DME Medical Supplies	L1240	HCPCS	ADDITION TO THORACIC-LUMBAR-SACRAL ORTHOTIC (TLSO), (LOW PROFILE), LUMBAR DEROTATION PAD
OHANAA	Q3 2025	DME Medical Supplies	L1260	HCPCS	ADDITION TO THORACIC-LUMBAR-SACRAL ORTHOTIC (TLSO), (LOW PROFILE), ANTERIOR THORACIC DEROTATION PAD
OHANAA	Q3 2025	DME Medical Supplies	L1290	HCPCS	ADDITION TO THORACIC-LUMBAR-SACRAL ORTHOTIC (TLSO), (LOW PROFILE), LATERAL TROCHANTERIC PAD

OHANAA	Q3 2025	DME Medical Supplies	L1300	HCPCS	OTHER SCOLIOSIS PROCEDURE, BODY JACKET MOLDED TO PATIENT MODEL
OHANAA	Q3 2025	DME Medical Supplies	L1499	HCPCS	SPINAL ORTHOTIC, NOT OTHERWISE SPECIFIED
OHANAA	Q3 2025	DME Medical Supplies	L1660	HCPCS	HIP ORTHOTIC (HO), ABDUCTION CONTROL OF HIP JOINTS, STATIC, PLASTIC, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT
OHANAA	Q3 2025	DME Medical Supplies	L1681	HCPCS	HO BIL HIP JTS & TH CUFFS ADJ FLEX CTRL HIP JNT
OHANAA	Q3 2025	DME Medical Supplies	L1686	HCPCS	HIP ORTHOTIC (HO), ABDUCTION CONTROL OF HIP JOINT, POSTOPERATIVE HIP ABDUCTION TYPE, PREFAB, INCLUDES FITTING AND ADJUSTMENT
OHANAA	Q3 2025	DME Medical Supplies	L1810	HCPCS	KNEE ORTHOSIS, ELASTIC WITH JOINTS, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE
OHANAA	Q3 2025	DME Medical Supplies	L1820	HCPCS	KNEE ORTHOTIC, ELASTIC WITH CONDYLAR PADS AND JOINTS, WITH OR WITHOUT PATELLAR CONTROL, PREFABRICATED, INCLUDES FITTING
OHANAA	Q3 2025	DME Medical Supplies	L1830	HCPCS	KNEE ORTHOSIS, IMMOBILIZER, CANVAS LONGITUDINAL, PREFABRICATED, OFF-THE-SHELF
OHANAA	Q3 2025	DME Medical Supplies	L1832	HCPCS	KNEE ORTHOSIS, ADJUSTABLE KNEE JOINTS (UNICENTRIC OR POLYCENTRIC), POSITIONAL ORTHOSIS, RIGID SUPPORT, PREFAB ITEM
OHANAA	Q3 2025	DME Medical Supplies	L1833	HCPCS	KNEE ORTHOSIS, ADJUSTABLE KNEE JOINTS (UNICENTRIC OR POLYCENTRIC), POSITIONAL ORTHOSIS, RIGID SUPPORT, PREFAB, OFF-THE SHELF
OHANAA	Q3 2025	DME Medical Supplies	L1834	HCPCS	KNEE ORTHOTIC (KO), WITHOUT KNEE JOINT, RIGID, CUSTOM FABRICATED
OHANAA	Q3 2025	DME Medical Supplies	L1843	HCPCS	KNEE ORTHOSIS, SINGLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC)
OHANAA	Q3 2025	DME Medical Supplies	L1844	HCPCS	KNEE ORTHOTIC (KO), SINGLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC)
OHANAA	Q3 2025	DME Medical Supplies	L1845	HCPCS	KNEE ORTHOSIS, DOUBLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC)
OHANAA	Q3 2025	DME Medical Supplies	L1846	HCPCS	KNEE ORTHOTIC, DOUBLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC)
OHANAA	Q3 2025	DME Medical Supplies	L1851	HCPCS	KNEE ORTHOSIS (KO), SINGLE UPRIGHT, THIGH AND CALF, W ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC)
OHANAA	Q3 2025	DME Medical Supplies	L1852	HCPCS	KNEE ORTHOSIS (KO), DOUBLE UPRIGHT, THIGH AND CALF, W ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC)
OHANAA	Q3 2025	DME Medical Supplies	L1860	HCPCS	KNEE ORTHOTIC (KO), MODIFICATION OF SUPRACONDYLAR PROSTHETIC SOCKET, CUSTOM FABRICATED (SK)
OHANAA	Q3 2025	DME Medical Supplies	L1902	HCPCS	ANKLE ORTHOSIS, ANKLE GAUNTLET OR SIMILAR, WITH OR WITHOUT JOINTS, PREFABRICATED, OFF-THE-SHELF
OHANAA	Q3 2025	DME Medical Supplies	L1906	HCPCS	ANKLE FOOT ORTHOSIS, MULTILIGAMENTOUS ANKLE SUPPORT, PREFABRICATED, OFF-THE-SHELF
OHANAA	Q3 2025	DME Medical Supplies	L1907	HCPCS	ANKLE ORTHOSIS, SUPRAMALLEOLAR WITH STRAPS, WITH OR WITHOUT INTERFACE/PADS, CUSTOM FABRICATED
OHANAA	Q3 2025	DME Medical Supplies	L1920	HCPCS	ANKLE-FOOT ORTHOTIC (AFO), SINGLE UPRIGHT WITH STATIC OR ADJUSTABLE STOP (PHELPS OR PERLSTEIN TYPE), CUSTOM FABRICATED
OHANAA	Q3 2025	DME Medical Supplies	L1930	HCPCS	ANKLE-FOOT ORTHOTIC (AFO), PLASTIC OR OTHER MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT
OHANAA	Q3 2025	DME Medical Supplies	L1932	HCPCS	ANKLE-FOOT ORTHOTIC (AFO), RIGID ANTERIOR TIBIAL SECTION, TOTAL CARBON FIBER OR EQUAL MATERIAL, PREFAB, INCLUDES FITTING
OHANAA	Q3 2025	DME Medical Supplies	L1940	HCPCS	ANKLE-FOOT ORTHOTIC (AFO), PLASTIC OR OTHER MATERIAL, CUSTOM FABRICATED
OHANAA	Q3 2025	DME Medical Supplies	L1950	HCPCS	ANKLE-FOOT ORTHOTIC (AFO), SPIRAL, (INSTITUTE OF REHABILITATIVE MEDICINE TYPE), PLASTIC, CUSTOM FABRICATED
OHANAA	Q3 2025	DME Medical Supplies	L1951	HCPCS	ANKLE-FOOT ORTHOTIC (AFO), SPIRAL, (INSTITUTE OF REHABILITATIVE MEDICINE TYPE), PLASTIC OR OTH MATERIAL, PREFAB
OHANAA	Q3 2025	DME Medical Supplies	L1960	HCPCS	ANKLE-FOOT ORTHOTIC (AFO), POSTERIOR SOLID ANKLE, PLASTIC, CUSTOM FABRICATED
OHANAA	Q3 2025	DME Medical Supplies	L1970	HCPCS	ANKLE-FOOT ORTHOTIC (AFO), PLASTIC WITH ANKLE JOINT, CUSTOM FABRICATED
OHANAA	Q3 2025	DME Medical Supplies	L1971	HCPCS	ANKLE-FOOT ORTHOTIC (AFO), PLASTIC OR OTHER MATERIAL WITH ANKLE JOINT, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT
OHANAA	Q3 2025	DME Medical Supplies	L2036	HCPCS	KNEE-ANKLE-FOOT ORTHOTIC (KAFO), FULL PLASTIC, DOUBLE UPRIGHT, W OR WOUT FREE MOTION KNEE, W OR WOUT FREE MOTION ANKLE, CUST FAB
OHANAA	Q3 2025	DME Medical Supplies	L2200	HCPCS	ADDITION TO LOWER EXTREMITY, LIMITED ANKLE MOTION, EACH JOINT
OHANAA	Q3 2025	DME Medical Supplies	L2210	HCPCS	ADDITION TO LOWER EXTREMITY, DORSIFLEXION ASSIST (PLANTAR FLEXION RESIST), EACH JOINT
OHANAA	Q3 2025	DME Medical Supplies	L2220	HCPCS	ADDITION TO LOWER EXTREMITY, DORSIFLEXION AND PLANTAR FLEXION ASSIST/RESIST, EACH JOINT
OHANAA	Q3 2025	DME Medical Supplies	L2232	HCPCS	ADDITION TO LOWER EXTREMITY ORTHOTIC, ROCKER BOTTOM FOR TOTAL CONTACT ANKLE-FOOT ORTHOTIC (AFO), FOR CUSTOM FABRICATED
OHANAA	Q3 2025	DME Medical Supplies	L2250	HCPCS	ADDITION TO LOWER EXTREMITY, FOOT PLATE, MOLDED TO PATIENT MODEL, STIRRUP ATTACHMENT
OHANAA	Q3 2025	DME Medical Supplies	L2280	HCPCS	ADDITION TO LOWER EXTREMITY, MOLDED INNER BOOT
OHANAA	Q3 2025	DME Medical Supplies	L2300	HCPCS	ADDITION TO LOWER EXTREMITY, ABDUCTION BAR (BILATERAL HIP INVOLVEMENT), JOINTED, ADJUSTABLE
OHANAA	Q3 2025	DME Medical Supplies	L2330	HCPCS	ADDITION TO LOWER EXTREMITY, LACER MOLDED TO PATIENT MODEL, FOR CUSTOM FABRICATED ORTHOTIC ONLY
OHANAA	Q3 2025	DME Medical Supplies	L2340	HCPCS	ADDITION TO LOWER EXTREMITY, PRETIBIAL SHELL, MOLDED TO PATIENT MODEL
OHANAA	Q3 2025	DME Medical Supplies	L2350	HCPCS	ADDITION TO LOWER EXTREMITY, PROSTHETIC TYPE, (BK) SOCKET, MOLDED TO PATIENT MODEL, (USED FOR PTB, AFO ORTHOSES)
OHANAA	Q3 2025	DME Medical Supplies	L2397	HCPCS	ADDITION TO LOWER EXTREMITY ORTHOTIC, SUSPENSION SLEEVE
OHANAA	Q3 2025	DME Medical Supplies	L2405	HCPCS	ADDITION TO KNEE JOINT, DROP LOCK, EACH
OHANAA	Q3 2025	DME Medical Supplies	L2525	HCPCS	ADDITION TO LOWER EXTREMITY, THIGH/WEIGHT BEARING, ISCHIAL CONTAINMENT/NARROW M-L BRIM MOLDED TO PATIENT MODEL
OHANAA	Q3 2025	DME Medical Supplies	L2750	HCPCS	ADDITION TO LOWER EXTREMITY ORTHOTIC, PLATING CHROME OR NICKEL, PER BAR
OHANAA	Q3 2025	DME Medical Supplies	L2755	HCPCS	ADDITION TO LOWER EXTREMITY ORTHOTIC, HIGH STRENGTH, LIGHTWEIGHT MATERIAL, ALL HYBRID LAMINATION/PREPREG COMPOSITE
OHANAA	Q3 2025	DME Medical Supplies	L2768	HCPCS	ORTHOTIC SIDE BAR DISCONNECT DEVICE, PER BAR
OHANAA	Q3 2025	DME Medical Supplies	L2785	HCPCS	ADDITION TO LOWER EXTREMITY ORTHOTIC, DROP LOCK RETAINER, EACH
OHANAA	Q3 2025	DME Medical Supplies	L2810	HCPCS	ADDITION TO LOWER EXTREMITY ORTHOTIC, KNEE CONTROL, CONDYLAR PAD
OHANAA	Q3 2025	DME Medical Supplies	L2820	HCPCS	ADDITION TO LOWER EXTREMITY ORTHOTIC, SOFT INTERFACE FOR MOLDED PLASTIC, BELOW KNEE SECTION
OHANAA	Q3 2025	DME Medical Supplies	L2830	HCPCS	ADDITION TO LOWER EXTREMITY ORTHOTIC, SOFT INTERFACE FOR MOLDED PLASTIC, ABOVE KNEE SECTION
OHANAA	Q3 2025	DME Medical Supplies	L2840	HCPCS	ADDITION TO LOWER EXTREMITY ORTHOTIC, TIBIAL LENGTH SOCK, FRACTURE OR EQUAL, EACH
OHANAA	Q3 2025	DME Medical Supplies	L2850	HCPCS	ADDITION TO LOWER EXTREMITY ORTHOTIC, FEMORAL LENGTH SOCK, FRACTURE OR EQUAL, EACH
OHANAA	Q3 2025	DME Medical Supplies	L2999	HCPCS	LOWER EXTREMITY ORTHOTIC, NOT OTHERWISE SPECIFIED
OHANAA	Q3 2025	DME Medical Supplies	L3000	HCPCS	FOOT, INSERT, REMOVABLE, MOLDED TO PATIENT MODEL, 'UCB' TYPE, BERKELEY SHELL, EACH
OHANAA	Q3 2025	DME Medical Supplies	L3010	HCPCS	FOOT INSERT, REMOVABLE, MOLDED TO PATIENT MODEL, LONGITUDINAL ARCH SUPPORT, EACH
OHANAA	Q3 2025	DME Medical Supplies	L3020	HCPCS	FOOT INSERT, REMOVABLE, MOLDED TO PATIENT MODEL, LONGITUDINAL/METATARSAL SUPPORT, EACH
OHANAA	Q3 2025	DME Medical Supplies	L3170	HCPCS	FOOT, PLASTIC, SILICONE OR EQUAL, HEEL STABILIZER, PREFABRICATED, OFF-THE-SHELF, EACH
OHANAA	Q3 2025	DME Medical Supplies	L3221	HCPCS	ORTHOPEDIC FOOTWEAR, MENS SHOE, DEPTH INLAY, EACH
OHANAA	Q3 2025	DME Medical Supplies	L3222	HCPCS	ORTHOPEDIC FOOTWEAR, MENS SHOE, HIGHTOP, DEPTH INLAY, EACH
OHANAA	Q3 2025	DME Medical Supplies	L3260	HCPCS	SURGICAL BOOT/SHOE, EACH
OHANAA	Q3 2025	DME Medical Supplies	L3300	HCPCS	LIFT, ELEVATION, HEEL, TAPERED TO METATARSALS, PER IN
OHANAA	Q3 2025	DME Medical Supplies	L3310	HCPCS	LIFT, ELEVATION, HEEL AND SOLE, NEOPRENE, PER IN
OHANAA	Q3 2025	DME Medical Supplies	L3332	HCPCS	LIFT, ELEVATION, INSIDE SHOE, TAPERED, UP TO ONE-HALF IN
OHANAA	Q3 2025	DME Medical Supplies	L3334	HCPCS	LIFT, ELEVATION, HEEL, PER IN
OHANAA	Q3 2025	DME Medical Supplies	L3350	HCPCS	HEEL WEDGE
OHANAA	Q3 2025	DME Medical Supplies	L3670	HCPCS	SHOULDER ORTHOSIS, ACROMIO/CLAVICULAR (CANVAS AND WEBBING TYPE), PREFABRICATED, OFF-THE-SHELF
OHANAA	Q3 2025	DME Medical Supplies	L3702	HCPCS	ELBOW ORTHOTIC (EO), WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT
OHANAA	Q3 2025	DME Medical Supplies	L3760	HCPCS	ELBOW ORTHOSIS (EO), WITH ADJUSTABLE POSITION LOCKING JOINT(S), PREFABRICATED, ITEM THAT HAS BEEN TRIMMED, BENT
OHANAA	Q3 2025	DME Medical Supplies	L3760	HCPCS	ELBOW ORTHOSIS (EO), WITH ADJUSTABLE POSITION LOCKING JOINT(S), PREFABRICATED, ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO
OHANAA	Q3 2025	DME Medical Supplies	L3807	HCPCS	WRIST HAND FINGER ORTHOSIS, WITHOUT JOINT(S), PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED
OHANAA	Q3 2025	DME Medical Supplies	L3906	HCPCS	WRIST-HAND ORTHOSIS (WHO), WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT
OHANAA	Q3 2025	DME Medical Supplies	L3908	HCPCS	WRIST HAND ORTHOSIS, WRIST EXTENSION CONTROL COCK-UP, NON MOLDED, PREFABRICATED, OFF-THE-SHELF
OHANAA	Q3 2025	DME Medical Supplies	L3924	HCPCS	HAND FINGER ORTHOSIS, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, PREFABRICATED, OFF-THE-SHELF
OHANAA	Q3 2025	DME Medical Supplies	L3933	HCPCS	FINGER ORTHOTIC (FO), WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT
OHANAA	Q3 2025	DME Medical Supplies	L3960	HCPCS	SHOULDER-ELBOW-WRIST-HAND ORTHOTIC (SEWHO), ABDUCTION POSITIONING, AIRPLANE DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT
OHANAA	Q3 2025	DME Medical Supplies	L3999	HCPCS	UPPER LIMB ORTHOTIC, NOT OTHERWISE SPECIFIED
OHANAA	Q3 2025	DME Medical Supplies	L4002	HCPCS	REPLACEMENT STRAP, ANY ORTHOTIC, INCLUDES ALL COMPONENTS, ANY LENGTH, ANY TYPE
OHANAA	Q3 2025	DME Medical Supplies	L4205	HCPCS	REPAIR OF ORTHOTIC DEVICE, LABOR COMPONENT, PER 15 MINUTES
OHANAA	Q3 2025	DME Medical Supplies	L4210	HCPCS	REPAIR OF ORTHOTIC DEVICE, REPAIR OR REPLACE MINOR PARTS
OHANAA	Q3 2025	DME Medical Supplies	L4350	HCPCS	ANKLE CONTROL ORTHOSIS, STIRRUP STYLE, RIGID, INCLUDES ANY TYPE INTERFACE (E.G., PNEUMATIC, GEL), PREFABRICATED, OFF-THE-SHELF
OHANAA	Q3 2025	DME Medical Supplies	L4360	HCPCS	WALKING BOOT, PNEUMATIC AND/OR VACUUM, WITH OR WITHOUT JOINTS, WITH OR WITHOUT INTERFACE MATERIAL, PREFABRICATED ITEM
OHANAA	Q3 2025	DME Medical Supplies	L4361	HCPCS	WALKING BOOT, PNEUMATIC AND/OR VACUUM, WITH OR WITHOUT JOINTS, WITH OR WITHOUT INTERFACE MATERIAL, PREFABRICATED, OFF-THE-SHELF
OHANAA	Q3 2025	DME Medical Supplies	L4386	HCPCS	WALKING BOOT, NON-PNEUMATIC, WITH OR WITHOUT JOINTS, WITH OR WITHOUT INTERFACE MATERIAL, PREFABRICATED ITEM THAT HAS
OHANAA	Q3 2025	DME Medical Supplies	L4387	HCPCS	WALKING BOOT, NON-PNEUMATIC, WITH OR WITHOUT JOINTS, WITH OR WITHOUT INTERFACE MATERIAL, PREFABRICATED, OFF-THE-SHELF
OHANAA	Q3 2025	DME Medical Supplies	L4392	HCPCS	REPLACEMENT, SOFT INTERFACE MATERIAL, STATIC AFO
OHANAA	Q3 2025	DME Medical Supplies	L4396	HCPCS	STATIC OR DYNAMIC ANKLE FOOT ORTHOSIS, INCL SOFT INTERFACE MATERIAL, ADJUSTABLE FOR FIT, FOR POSITIONING, MAY BE USED
OHANAA	Q3 2025	DME Medical Supplies	L4631	HCPCS	ANKLE FOOT ORTHOSIS, WALKING BOOT TYPE, VARUS/VALGUS CORRECTION, ROCKER BOTTOM, ANTERIOR TIBIAL SHELL, SOFT INTERFACE, CUSTOM ARCH SUPPORT, PLASTIC OR OTHE
OHANAA	Q3 2025	DME Medical Supplies	L5000	HCPCS	PARTIAL FOOT, SHOE INSERT WITH LONGITUDINAL ARCH, TOE FILLER
OHANAA	Q3 2025	DME Medical Supplies	L5020	HCPCS	PARTIAL FOOT, MOLDED SOCKET, TIBIAL TUBERCLE HEIGHT, WITH TOE FILLER
OHANAA	Q3 2025	DME Medical Supplies	L5050	HCPCS	ANKLE, SYMES, MOLDED SOCKET, SACH FOOT
OHANAA	Q3 2025	DME Medical Supplies	L5100	HCPCS	BELOW KNEE, MOLDED SOCKET, SHIN, SACH FOOT
OHANAA	Q3 2025	DME Medical Supplies	L5301	HCPCS	BELOW KNEE, MOLDED SOCKET, SHIN, SACH FOOT, ENDOSKELETAL SYSTEM
OHANAA	Q3 2025	DME Medical Supplies	L5321	HCPCS	ABOVE KNEE, MOLDED SOCKET, OPEN END, SACH FOOT, ENDOSKELETAL SYSTEM, SINGLE AXIS KNEE
OHANAA	Q3 2025	DME Medical Supplies	L5530	HCPCS	PREPARATORY, BELOW KNEE PTB TYPE SOCKET, NONALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, THERMOPLASTIC OR EQUAL, MOLDED TO MODEL
OHANAA	Q3 2025	DME Medical Supplies	L5580	HCPCS	PREPARATORY, ABOVE KNEE, KNEE DISARTICULATION, ISCHIAL LEVEL SOCKET, NONALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT
OHANAA	Q3 2025	DME Medical Supplies	L5611	HCPCS	ADDITION TO LOWER EXTREMITY, ENDOSKELETAL SYSTEM, ABOVE KNEE, KNEE DISARTICULATION, 4-BAR LINKAGE, WITH FRICTION SWING
OHANAA	Q3 2025	DME Medical Supplies	L5618	HCPCS	ADDITION TO LOWER EXTREMITY, TEST SOCKET, SYMES

OHANAA	Q3 2025	DME Medical Supplies	L5620	HCPCS	ADDITION TO LOWER EXTREMITY, TEST SOCKET, BELOW KNEE
OHANAA	Q3 2025	DME Medical Supplies	L5624	HCPCS	ADDITION TO LOWER EXTREMITY, TEST SOCKET, ABOVE KNEE
OHANAA	Q3 2025	DME Medical Supplies	L5629	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, ACRYLIC SOCKET
OHANAA	Q3 2025	DME Medical Supplies	L5632	HCPCS	ADDITION TO LOWER EXTREMITY, SYMES TYPE, PTB BRIM DESIGN SOCKET
OHANAA	Q3 2025	DME Medical Supplies	L5636	HCPCS	ADDITION TO LOWER EXTREMITY, SYMES TYPE, MEDIAL OPENING SOCKET
OHANAA	Q3 2025	DME Medical Supplies	L5637	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, TOTAL CONTACT
OHANAA	Q3 2025	DME Medical Supplies	L5639	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, WOOD SOCKET
OHANAA	Q3 2025	DME Medical Supplies	L5643	HCPCS	ADDITION TO LOWER EXTREMITY, HIP DISARTICULATION, FLEXIBLE INNER SOCKET, EXTERNAL FRAME
OHANAA	Q3 2025	DME Medical Supplies	L5645	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, FLEXIBLE INNER SOCKET, EXTERNAL FRAME
OHANAA	Q3 2025	DME Medical Supplies	L5647	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, SUCTION SOCKET
OHANAA	Q3 2025	DME Medical Supplies	L5649	HCPCS	ADDITION TO LOWER EXTREMITY, ISCHIAL CONTAINMENT/NARROW M-L SOCKET
OHANAA	Q3 2025	DME Medical Supplies	L5650	HCPCS	ADDITIONS TO LOWER EXTREMITY, TOTAL CONTACT, ABOVE KNEE OR KNEE DISARTICULATION SOCKET
OHANAA	Q3 2025	DME Medical Supplies	L5651	HCPCS	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, FLEXIBLE INNER SOCKET, EXTERNAL FRAME
OHANAA	Q3 2025	DME Medical Supplies	L5652	HCPCS	ADDITION TO LOWER EXTREMITY, SUCTION SUSPENSION, ABOVE KNEE OR KNEE DISARTICULATION SOCKET
OHANAA	Q3 2025	DME Medical Supplies	L5653	HCPCS	ADDITION TO LOWER EXTREMITY, KNEE DISARTICULATION, EXPANDABLE WALL SOCKET
OHANAA	Q3 2025	DME Medical Supplies	L5655	HCPCS	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, BELOW KNEE (KEMBLO, PELITE, ALIPLAST, PLASTAZOTE OR EQUAL)
OHANAA	Q3 2025	DME Medical Supplies	L5665	HCPCS	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, MULTIDUROMETER, BELOW KNEE
OHANAA	Q3 2025	DME Medical Supplies	L5666	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, CUFF SUSPENSION
OHANAA	Q3 2025	DME Medical Supplies	L5668	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, MOLDED DISTAL CUSHION
OHANAA	Q3 2025	DME Medical Supplies	L5671	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE/ABOVE KNEE SUSPENSION LOCKING MECHANISM (SHUTTLE, LANYARD, OR EQUAL)
OHANAA	Q3 2025	DME Medical Supplies	L5672	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, REMOVABLE MEDIAL BRIM SUSPENSION
OHANAA	Q3 2025	DME Medical Supplies	L5673	HCPCS	ADDITION TO LOWER EXTREM, FOR USE W LOCKING MECHANISM, BELOW KNEE/ABOVE KNEE, CUST FAB FROM EXISTING MOLD OR PREFAB
OHANAA	Q3 2025	DME Medical Supplies	L5676	HCPCS	ADDITIONS TO LOWER EXTREMITY, BELOW KNEE, KNEE JOINTS, SINGLE AXIS, PAIR
OHANAA	Q3 2025	DME Medical Supplies	L5678	HCPCS	ADDITIONS TO LOWER EXTREMITY, BELOW KNEE, JOINT COVERS, PAIR
OHANAA	Q3 2025	DME Medical Supplies	L5679	HCPCS	ADDITION TO LOWER EXTREM, NOT FOR USE W LOCKING MECHANISM, BELOW KNEE/ABOVE KNEE, CUST FAB FROM EXISTING MOLD OR PREFAB
OHANAA	Q3 2025	DME Medical Supplies	L5680	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, THIGH LACER, NONMOLDED
OHANAA	Q3 2025	DME Medical Supplies	L5684	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, FORK STRAP
OHANAA	Q3 2025	DME Medical Supplies	L5685	HCPCS	ADDITION TO LOWER EXTREMITY PROSTHESIS, BELOW KNEE, SUSPENSION/SEALING SLEEVE, WITH OR WITHOUT VALVE, ANY MATERIAL, EACH
OHANAA	Q3 2025	DME Medical Supplies	L5686	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, BACK CHECK (EXTENSION CONTROL)
OHANAA	Q3 2025	DME Medical Supplies	L5690	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, WAIST BELT, PADDED AND LINED
OHANAA	Q3 2025	DME Medical Supplies	L5700	HCPCS	REPLACEMENT, SOCKET, BELOW KNEE, MOLDED TO PATIENT MODEL
OHANAA	Q3 2025	DME Medical Supplies	L5701	HCPCS	REPLACEMENT, SOCKET, ABOVE KNEE/KNEE DISARTICULATION, INCLUDING ATTACHMENT PLATE, MOLDED TO PATIENT MODEL
OHANAA	Q3 2025	DME Medical Supplies	L5702	HCPCS	REPLACEMENT, SOCKET, HIP DISARTICULATION, INCLUDING HIP JOINT, MOLDED TO PATIENT MODEL
OHANAA	Q3 2025	DME Medical Supplies	L5704	HCPCS	CUSTOM SHAPED PROTECTIVE COVER, BELOW KNEE
OHANAA	Q3 2025	DME Medical Supplies	L5707	HCPCS	CUSTOM SHAPED PROTECTIVE COVER, HIP DISARTICULATION
OHANAA	Q3 2025	DME Medical Supplies	L5781	HCPCS	ADDITION TO LOWER LIMB PROSTHESIS, VACUUM PUMP, RESIDUAL LIMB VOLUME MANAGEMENT AND MOISTURE EVACUATION SYSTEM
OHANAA	Q3 2025	DME Medical Supplies	L5785	HCPCS	ADDITION, EXOSKELETAL SYSTEM, BELOW KNEE, ULTRA-LIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)
OHANAA	Q3 2025	DME Medical Supplies	L5810	HCPCS	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, MANUAL LOCK
OHANAA	Q3 2025	DME Medical Supplies	L5812	HCPCS	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FRICTION SWING AND STANCE PHASE CONTROL (SAFETY KNEE)
OHANAA	Q3 2025	DME Medical Supplies	L5828	HCPCS	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FLUID SWING AND STANCE PHASE CONTROL
OHANAA	Q3 2025	DME Medical Supplies	L5845	HCPCS	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, STANCE FLEXION FEATURE, ADJUSTABLE
OHANAA	Q3 2025	DME Medical Supplies	L5850	HCPCS	ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE OR HIP DISARTICULATION, KNEE EXTENSION ASSIST
OHANAA	Q3 2025	DME Medical Supplies	L5910	HCPCS	ADDITION, ENDOSKELETAL SYSTEM, BELOW KNEE, ALIGNABLE SYSTEM
OHANAA	Q3 2025	DME Medical Supplies	L5920	HCPCS	ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE OR HIP DISARTICULATION, ALIGNABLE SYSTEM
OHANAA	Q3 2025	DME Medical Supplies	L5925	HCPCS	ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE, KNEE DISARTICULATION OR HIP DISARTICULATION, MANUAL LOCK
OHANAA	Q3 2025	DME Medical Supplies	L5940	HCPCS	ADDITION, ENDOSKELETAL SYSTEM, BELOW KNEE, ULTRA-LIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)
OHANAA	Q3 2025	DME Medical Supplies	L5950	HCPCS	ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE, ULTRA-LIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)
OHANAA	Q3 2025	DME Medical Supplies	L5962	HCPCS	ADDITION, ENDOSKELETAL SYSTEM, BELOW KNEE, FLEXIBLE PROTECTIVE OUTER SURFACE COVERING SYSTEM
OHANAA	Q3 2025	DME Medical Supplies	L5964	HCPCS	ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE, FLEXIBLE PROTECTIVE OUTER SURFACE COVERING SYSTEM
OHANAA	Q3 2025	DME Medical Supplies	L5968	HCPCS	ADDITION TO LOWER LIMB PROSTHESIS, MULTIAXIAL ANKLE WITH SWING PHASE ACTIVE DORSIFLEXION FEATURE
OHANAA	Q3 2025	DME Medical Supplies	L5971	HCPCS	ALL LOWER EXTREMITY PROSTHESES, SOLID ANKLE CUSHION HEEL (SACH) FOOT, REPLACEMENT ONLY
OHANAA	Q3 2025	DME Medical Supplies	L5972	HCPCS	ALL LOWER EXTREMITY PROSTHESES, FOOT, FLEXIBLE KEEL
OHANAA	Q3 2025	DME Medical Supplies	L5979	HCPCS	ALL LOWER EXTREMITY PROSTHESES, MULTIAXIAL ANKLE, DYNAMIC RESPONSE FOOT, ONE PIECE SYSTEM
OHANAA	Q3 2025	DME Medical Supplies	L5981	HCPCS	ALL LOWER EXTREMITY PROSTHESES, FLEX-WALK SYSTEM OR EQUAL
OHANAA	Q3 2025	DME Medical Supplies	L5984	HCPCS	ALL ENDOSKELETAL LOWER EXTREMITY PROSTHESES, AXIAL ROTATION UNIT, WITH OR WITHOUT ADJUSTABILITY
OHANAA	Q3 2025	DME Medical Supplies	L5986	HCPCS	ALL LOWER EXTREMITY PROSTHESES, MULTIAXIAL ROTATION UNIT (MCP OR EQUAL)
OHANAA	Q3 2025	DME Medical Supplies	L5987	HCPCS	ALL LOWER EXTREMITY PROSTHESES, SHANK FOOT SYSTEM WITH VERTICAL LOADING PYLON
OHANAA	Q3 2025	DME Medical Supplies	L5988	HCPCS	ADDITION TO LOWER LIMB PROSTHESIS, VERTICAL SHOCK REDUCING PYLON FEATURE
OHANAA	Q3 2025	DME Medical Supplies	L5991	HCPCS	ADDITION LWR EXT PROSTHESES OI EXTRNL PROS CONN
OHANAA	Q3 2025	DME Medical Supplies	L7510	HCPCS	REPAIR OF PROSTHETIC DEVICE, REPAIR OR REPLACE MINOR PARTS
OHANAA	Q3 2025	DME Medical Supplies	L7520	HCPCS	REPAIR PROSTHETIC DEVICE, LABOR COMPONENT, PER 15 MINUTES
OHANAA	Q3 2025	DME Medical Supplies	L8000	HCPCS	BREAST PROSTHESIS, MASTECTOMY BRA, WITHOUT INTEGRATED BREAST PROSTHESIS FORM, ANY SIZE, ANY TYPE
OHANAA	Q3 2025	DME Medical Supplies	L8030	HCPCS	BREAST PROSTHESIS, SILICONE OR EQUAL, WITHOUT INTEGRAL ADHESIVE
OHANAA	Q3 2025	DME Medical Supplies	L8300	HCPCS	TRUSS, SINGLE WITH STANDARD PAD
OHANAA	Q3 2025	DME Medical Supplies	L8400	HCPCS	PROSTHETIC SHEATH, BELOW KNEE, EACH
OHANAA	Q3 2025	DME Medical Supplies	L8410	HCPCS	PROSTHETIC SHEATH, ABOVE KNEE, EACH
OHANAA	Q3 2025	DME Medical Supplies	L8420	HCPCS	PROSTHETIC SOCK, MULTIPLE PLY, BELOW KNEE, EACH
OHANAA	Q3 2025	DME Medical Supplies	L8430	HCPCS	PROSTHETIC SOCK, MULTIPLE PLY, ABOVE KNEE, EACH
OHANAA	Q3 2025	DME Medical Supplies	L8440	HCPCS	PROSTHETIC SHRINKER, BELOW KNEE, EACH
OHANAA	Q3 2025	DME Medical Supplies	L8460	HCPCS	PROSTHETIC SHRINKER, ABOVE KNEE, EACH
OHANAA	Q3 2025	DME Medical Supplies	L8470	HCPCS	PROSTHETIC SOCK, SINGLE PLY, FITTING, BELOW KNEE, EACH
OHANAA	Q3 2025	DME Medical Supplies	L8480	HCPCS	PROSTHETIC SOCK, SINGLE PLY, FITTING, ABOVE KNEE, EACH
OHANAA	Q3 2025	DME Medical Supplies	L8500	HCPCS	ARTIFICIAL LARYNX, ANY TYPE
OHANAA	Q3 2025	DME Medical Supplies	L8501	HCPCS	TRACHEOSTOMY SPEAKING VALVE
OHANAA	Q3 2025	DME Medical Supplies	L8615	HCPCS	HEADSET/HEADPIECE FOR USE WITH COCHLEAR IMPLANT DEVICE, REPLACEMENT
OHANAA	Q3 2025	DME Medical Supplies	L8616	HCPCS	MICROPHONE FOR USE WITH COCHLEAR IMPLANT DEVICE, REPLACEMENT
OHANAA	Q3 2025	DME Medical Supplies	L8619	HCPCS	COCHLEAR IMPLANT, EXTERNAL SPEECH PROCESSOR AND CONTROLLER, INTEGRATED SYSTEM, REPLACEMENT
OHANAA	Q3 2025	DME Medical Supplies	L8624	HCPCS	LITHIUM ION BATTERY FOR USE WITH COCHLEAR IMPLANT OR AUDITORY OSSEOINTEGRATED DEVICE SPEECH PROCESSOR, EAR LEVEL
OHANAA	Q3 2025	DME Medical Supplies	L8680	HCPCS	IMPLANTABLE NEUROSTIMULATOR ELECTRODE, EACH
OHANAA	Q3 2025	DME Medical Supplies	L8690	HCPCS	AUDITORY OSSEOINTEGRATED DEVICE, INCLUDES ALL INTERNAL AND EXTERNAL COMPONENTS
OHANAA	Q3 2025	DME Medical Supplies	L8692	HCPCS	AUDITORY OSSEOINTEGRATED DEVICE, EXTERNAL SOUND PROCESSOR, USED WITHOUT OSSEOINTEGRATION, BODY WORN, INCLUDES HEADBAND
OHANAA	Q3 2025	DME Medical Supplies	Q4101	HCPCS	APLIGRAF, PER SQ CM
OHANAA	Q3 2025	DME Medical Supplies	Q4107	HCPCS	GRAFTJACKET, PER SQ CM
OHANAA	Q3 2025	DME Medical Supplies	Q4285	HCPCS	NUDYN DL OR NUDYN DL MESH PER SQ CM
OHANAA	Q3 2025	DME Medical Supplies	Q4286	HCPCS	NUDYN SL OR NUDYN SLW PER SQ CM
OHANAA	Q3 2025	DME Medical Supplies	S1040	HCPCS	CRANIAL REMOLDING ORTHOTIC, PEDIATRIC, RIGID, WITH SOFT INTERFACE MATERIAL, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT(S)
OHANAA	Q3 2025	DME Medical Supplies	S5185	HCPCS	MEDICATION REMINDER SERVICE, NON-FACE-TO-FACE; PER MONTH
OHANAA	Q3 2025	DME Medical Supplies	S8186	HCPCS	SWIVEL ADAPTOR
OHANAA	Q3 2025	DME Medical Supplies	S9501	HCPCS	HOME INFUSION THERAPY, ANTIBIOTIC, ANTIVIRAL, OR ANTIFUNGAL THERAPY; ONCE EVERY 12 HOURS; ADMINISTRATIVE SERVICES, PROFESSIONAL
OHANAA	Q3 2025	DME Medical Supplies	T2028	HCPCS	SPECIALIZED SUPPLY, NOT OTHERWISE SPECIFIED, WAIVER
OHANAA	Q3 2025	DME Medical Supplies	T4521	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, SMALL, EACH
OHANAA	Q3 2025	DME Medical Supplies	T4522	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, MEDIUM, EACH
OHANAA	Q3 2025	DME Medical Supplies	T4523	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, LARGE, EACH
OHANAA	Q3 2025	DME Medical Supplies	T4524	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, EXTRA LARGE, EACH
OHANAA	Q3 2025	DME Medical Supplies	T4525	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, SMALL SIZE, EACH
OHANAA	Q3 2025	DME Medical Supplies	T4526	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, MEDIUM SIZE, EACH
OHANAA	Q3 2025	DME Medical Supplies	T4527	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, LARGE SIZE, EACH
OHANAA	Q3 2025	DME Medical Supplies	T4528	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, EXTRA LARGE SIZE, EACH

OHANAA	Q3 2025	DME Medical Supplies	T4530		HCPCS	PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, LARGE SIZE, EACH
OHANAA	Q3 2025	DME Medical Supplies	T4531		HCPCS	PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, SMALL/MEDIUM SIZE, EACH
OHANAA	Q3 2025	DME Medical Supplies	T4533		HCPCS	YOUTH SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, EACH
OHANAA	Q3 2025	DME Medical Supplies	T4534		HCPCS	YOUTH SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, EACH
OHANAA	Q3 2025	DME Medical Supplies	T4535		HCPCS	DISPOSABLE LINER/SHIELD/GUARD/PAD/UNDERGARMENT, FOR INCONTINENCE, EACH
OHANAA	Q3 2025	DME Medical Supplies	T4536		HCPCS	INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, REUSABLE, ANY SIZE, EACH
OHANAA	Q3 2025	DME Medical Supplies	T4537		HCPCS	INCONTINENCE PRODUCT, PROTECTIVE UNDERPAD, REUSABLE, BED SIZE, EACH
OHANAA	Q3 2025	DME Medical Supplies	T4540		HCPCS	INCONTINENCE PRODUCT, PROTECTIVE UNDERPAD, REUSABLE, CHAIR SIZE, EACH
OHANAA	Q3 2025	DME Medical Supplies	T4541		HCPCS	INCONTINENCE PRODUCT, DISPOSABLE UNDERPAD, LARGE, EACH
OHANAA	Q3 2025	DME Medical Supplies	T4542		HCPCS	INCONTINENCE PRODUCT, DISPOSABLE UNDERPAD, SMALL SIZE, EACH
OHANAA	Q3 2025	DME Medical Supplies	T4543		HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE BRIEF/DIAPER, ABOVE EXTRA LARGE, EACH
OHANAA	Q3 2025	DME Medical Supplies	T4544		HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, ABOVE EXTRA LARGE, EACH
OHANAA	Q3 2025	DME Medical Supplies	V2623		HCPCS	PROSTHETIC EYE, PLASTIC, CUSTOM
OHANAA	Q3 2025	DME Medical Supplies	V2628		HCPCS	FABRICATION AND FITTING OF OCULAR CONFORMER
OHANAA	Q3 2025	DME Medical Supplies	V5011		HCPCS	FITTING/ORIENTATION/CHECKING OF HEARING AID
OHANAA	Q3 2025	DME Medical Supplies	V5261		HCPCS	HEARING AID, DIGITAL, BINAURAL, BTE
OHANAA	Q3 2025	DME Medical Supplies	V5264		HCPCS	EAR MOLD/INSERT, NOT DISPOSABLE, ANY TYPE
OHANAA	Q3 2025	DME Medical Supplies	V5266		HCPCS	BATTERY FOR USE IN HEARING DEVICE
OHANAA	Q3 2025	HCBS		99342	CPT	HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT, WHICH REQUIRES THESE 3 KEY COMPONENTS: AN EXPANDED PROBLEM
OHANAA	Q3 2025	HCBS	A4335		HCPCS	INCONTINENCE SUPPLY; MISCELLANEOUS
OHANAA	Q3 2025	HCBS	A4595		HCPCS	ELECTRICAL STIMULATOR SUPPLIES, 2 LEAD, PER MONTH, (E.G., TENS, NMES)
OHANAA	Q3 2025	HCBS	A4670		HCPCS	AUTOMATIC BLOOD PRESSURE MONITOR
OHANAA	Q3 2025	HCBS	A4927		HCPCS	GLOVES, NONSTERILE, PER 100
OHANAA	Q3 2025	HCBS	A5500		HCPCS	FOR DIABETICS ONLY, FITTING (INCLUDING FOLLOW-UP), CUSTOM PREPARATION AND SUPPLY OF OFF-THE-SHELF DEPTH-INLAY SHOE
OHANAA	Q3 2025	HCBS	A5512		HCPCS	FOR DIABETICS ONLY, MULTIPLE DENSITY INSERT, DIRECT FORMED, MOLDED TO FOOT AFTER EXTERNAL HEAT SOURCE OF 230 DEGREES
OHANAA	Q3 2025	HCBS	A6196		HCPCS	ALGINATE OR OTHER FIBER GELLING DRESSING, WOUND COVER, STERILE, PAD SIZE 16 SQ IN OR LESS, EACH DRESSING
OHANAA	Q3 2025	HCBS	A6197		HCPCS	ALGINATE OR OTHER FIBER GELLING DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 16 SQ IN BUT LESS THAN OR EQUAL TO 48 SQ IN
OHANAA	Q3 2025	HCBS	A6253		HCPCS	SPECIALTY ABSORPTIVE DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 48 SQ IN, WITHOUT ADHESIVE BORDER, EACH DRESSING
OHANAA	Q3 2025	HCBS	A6512		HCPCS	COMPRESSION BURN GARMENT, NOT OTHERWISE CLASSIFIED
OHANAA	Q3 2025	HCBS	A6530		HCPCS	GRADIENT COMPRESSION STOCKING, BELOW KNEE, 18-30 MM HG, EACH
OHANAA	Q3 2025	HCBS	A7030		HCPCS	FULL FACE MASK USED WITH POSITIVE AIRWAY PRESSURE DEVICE, EACH
OHANAA	Q3 2025	HCBS	A9270		HCPCS	NONCOVERED ITEM OR SERVICE
OHANAA	Q3 2025	HCBS	A9276		HCPCS	SENSOR; INVASIVE (E.G., SUBCUTANEOUS), DISPOSABLE, FOR USE WITH INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM
OHANAA	Q3 2025	HCBS	A9277		HCPCS	TRANSMITTER; EXTERNAL, FOR USE WITH INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM
OHANAA	Q3 2025	HCBS	A9278		HCPCS	RECEIVER (MONITOR); EXTERNAL, FOR USE WITH INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM
OHANAA	Q3 2025	HCBS	B4100		HCPCS	FOOD THICKENER, ADMINISTERED ORALLY, PER OZ
OHANAA	Q3 2025	HCBS	B4150		HCPCS	ENTERAL FORMULA, NUTRITIONALLY COMPLETE WITH INTACT NUTRIENTS, INCLUDES PROTEINS, FATS, CARBOHYDRATES, VITAMINS AND MINERALS
OHANAA	Q3 2025	HCBS	B4154		HCPCS	ENTERAL FORMULA, NUTRITIONALLY COMPLETE, FOR SPECIAL METABOLIC NEEDS, EXCLUDES INHERITED DISEASE OF METABOLISM
OHANAA	Q3 2025	HCBS	E0156		HCPCS	SEAT ATTACHMENT, WALKER
OHANAA	Q3 2025	HCBS	E0181		HCPCS	POWERED PRESSURE REDUCING MATTRESS OVERLAY/PAD, ALTERNATING, WITH PUMP, INCLUDES HEAVY-DUTY
OHANAA	Q3 2025	HCBS	E0210		HCPCS	ELECTRIC HEAT PAD, STANDARD
OHANAA	Q3 2025	HCBS	E0245		HCPCS	TUB STOOL OR BENCH
OHANAA	Q3 2025	HCBS	E0260		HCPCS	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS, WITH MATTRESS
OHANAA	Q3 2025	HCBS	E0424		HCPCS	STATIONARY COMPRESSED GASEOUS OXYGEN SYSTEM, RENTAL; INCLUDES CONTAINER, CONTENTS, REGULATOR, FLOWMETER, HUMIDIFIER
OHANAA	Q3 2025	HCBS	E0431		HCPCS	PORTABLE GASEOUS OXYGEN SYSTEM, RENTAL; INCLUDES PORTABLE CONTAINER, REGULATOR, FLOWMETER, HUMIDIFIER, CANNULA OR MASK, AND TUBING
OHANAA	Q3 2025	HCBS	E0445		HCPCS	OXIMETER DEVICE FOR MEASURING BLOOD OXYGEN LEVELS NONINVASIVELY
OHANAA	Q3 2025	HCBS	E0466		HCPCS	HOME VENTILATOR, ANY TYPE, USED WITH NONINVASIVE INTERFACE, (E.G., MASK, CHEST SHELL)
OHANAA	Q3 2025	HCBS	E0470		HCPCS	RESPIRATORY ASSIST DEVICE, BI-LEVEL PRESSURE CAPABILITY, WITHOUT BACKUP RATE FEATURE, USED WITH NONINVASIVE INTERFACE
OHANAA	Q3 2025	HCBS	E0483		HCPCS	HIGH FREQUENCY CHEST WALL OSCILLATION AIR-PULSE GENERATOR SYSTEM, (INCLUDES HOSES AND VEST), EACH
OHANAA	Q3 2025	HCBS	E0600		HCPCS	RESPIRATORY SUCTION PUMP, HOME MODEL, PORTABLE OR STATIONARY, ELECTRIC
OHANAA	Q3 2025	HCBS	E0601		HCPCS	CONTINUOUS POSITIVE AIRWAY PRESSURE (CPAP) DEVICE
OHANAA	Q3 2025	HCBS	E0652		HCPCS	PNEUMATIC COMPRESSOR, SEGMENTAL HOME MODEL WITH CALIBRATED GRADIENT PRESSURE
OHANAA	Q3 2025	HCBS	E0720		HCPCS	TRANSCUTANEOUS ELECTRICAL NERVE STIMULATION (TENS) DEVICE, 2 LEAD, LOCALIZED STIMULATION
OHANAA	Q3 2025	HCBS	E0730		HCPCS	TRANSCUTANEOUS ELECTRICAL NERVE STIMULATION (TENS) DEVICE, 4 OR MORE LEADS, FOR MULTIPLE NERVE STIMULATION
OHANAA	Q3 2025	HCBS	E0747		HCPCS	OSTEOGENESIS STIMULATOR, ELECTRICAL, NONINVASIVE, OTHER THAN SPINAL APPLICATIONS
OHANAA	Q3 2025	HCBS	E0748		HCPCS	OSTEOGENESIS STIMULATOR, ELECTRICAL, NONINVASIVE, SPINAL APPLICATIONS
OHANAA	Q3 2025	HCBS	E0760		HCPCS	OSTEOGENESIS STIMULATOR, LOW INTENSITY ULTRASOUND, NONINVASIVE
OHANAA	Q3 2025	HCBS	E0784		HCPCS	EXTERNAL AMBULATORY INFUSION PUMP, INSULIN
OHANAA	Q3 2025	HCBS	E1031		HCPCS	ROLLABOUT CHAIR, ANY AND ALL TYPES WITH CASTORS 5 IN OR GREATER
OHANAA	Q3 2025	HCBS	E1038		HCPCS	TRANSPORT CHAIR, ADULT SIZE, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
OHANAA	Q3 2025	HCBS	E1390		HCPCS	OXYGEN CONCENTRATOR, SINGLE DELIVERY PORT, CAPABLE OF DELIVERING 85 PERCENT OR GREATER OXYGEN CONCENTRATION AT THE
OHANAA	Q3 2025	HCBS	E1392		HCPCS	PORTABLE OXYGEN CONCENTRATOR, RENTAL
OHANAA	Q3 2025	HCBS	E1399		HCPCS	DURABLE MEDICAL EQUIPMENT, MISCELLANEOUS
OHANAA	Q3 2025	HCBS	E1810		HCPCS	DYNAMIC ADJUSTABLE KNEE EXTENSION/FLEXION DEVICE, INCLUDES SOFT INTERFACE MATERIAL
OHANAA	Q3 2025	HCBS	E2402		HCPCS	NEGATIVE PRESSURE WOUND THERAPY ELECTRICAL PUMP, STATIONARY OR PORTABLE
OHANAA	Q3 2025	HCBS	G9004		HCPCS	COORDINATED CARE FEE, RISK ADJUSTED LOW, INITIAL
OHANAA	Q3 2025	HCBS	J3490		HCPCS	UNCLASSIFIED DRUGS
OHANAA	Q3 2025	HCBS	K0001		HCPCS	STANDARD WHEELCHAIR
OHANAA	Q3 2025	HCBS	K0002		HCPCS	STANDARD HEMI (LOW SEAT) WHEELCHAIR
OHANAA	Q3 2025	HCBS	K0003		HCPCS	LIGHTWEIGHT WHEELCHAIR
OHANAA	Q3 2025	HCBS	K0004		HCPCS	HIGH STRENGTH, LIGHTWEIGHT WHEELCHAIR
OHANAA	Q3 2025	HCBS	K0006		HCPCS	HEAVY-DUTY WHEELCHAIR
OHANAA	Q3 2025	HCBS	K0007		HCPCS	EXTRA HEAVY-DUTY WHEELCHAIR
OHANAA	Q3 2025	HCBS	K0462		HCPCS	TEMPORARY REPLACEMENT FOR PATIENT-OWNED EQUIPMENT BEING REPAIRED, ANY TYPE
OHANAA	Q3 2025	HCBS	K0606		HCPCS	AUTOMATIC EXTERNAL DEFIBRILLATOR, WITH INTEGRATED ELECTROCARDIOGRAM ANALYSIS, GARMENT TYPE
OHANAA	Q3 2025	HCBS	K0738		HCPCS	PORTABLE GASEOUS OXYGEN SYSTEM, RENTAL; HOME COMPRESSOR USED TO FILL PORTABLE OXYGEN CYLINDERS; INCLUDES PORTABLE CONTAINERS
OHANAA	Q3 2025	HCBS	K0801		HCPCS	POWER OPERATED VEHICLE, GROUP 1 HEAVY-DUTY, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
OHANAA	Q3 2025	HCBS	K0856		HCPCS	POWER WHEELCHAIR, GROUP 3 STANDARD, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING
OHANAA	Q3 2025	HCBS	L0174		HCPCS	CERVICAL, COLLAR, SEMI-RIGID, THERMOPLASTIC FOAM, TWO PIECE WITH THORACIC EXTENSION, PREFABRICATED, OFF-THE-SHELF
OHANAA	Q3 2025	HCBS	L0464		HCPCS	THORACIC-LUMBAR-SACRAL ORTHOTIC (TLSO), TRIPLANAR CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, 4 RIGID PLASTIC SHELLS
OHANAA	Q3 2025	HCBS	L0627		HCPCS	LUMBAR ORTHOSIS, SAGITTAL CONTROL, W RIGID ANTERIOR AND POSTERIOR PANELS, POSTERIOR EXTENDS FROM L-1 TO BELOW L-5 VERTEBRA
OHANAA	Q3 2025	HCBS	L0637		HCPCS	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR FRAME/PANELS, POSTERIOR EXTENDS
OHANAA	Q3 2025	HCBS	L0650		HCPCS	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR FRAME/PANEL(S), POSTERIOR EXTENDS
OHANAA	Q3 2025	HCBS	L1499		HCPCS	SPINAL ORTHOTIC, NOT OTHERWISE SPECIFIED
OHANAA	Q3 2025	HCBS	L1810		HCPCS	KNEE ORTHOSIS, ELASTIC WITH JOINTS, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE
OHANAA	Q3 2025	HCBS	L1820		HCPCS	KNEE ORTHOTIC, ELASTIC WITH CONDYLAR PADS AND JOINTS, WITH OR WITHOUT PATELLAR CONTROL, PREFABRICATED, INCLUDES FITTING
OHANAA	Q3 2025	HCBS	L1832		HCPCS	KNEE ORTHOSIS, ADJUSTABLE KNEE JOINTS (UNICENTRIC OR POLYCENTRIC), POSITIONAL ORTHOSIS, RIGID SUPPORT, PREFAB ITEM
OHANAA	Q3 2025	HCBS	L1833		HCPCS	KNEE ORTHOSIS, ADJUSTABLE KNEE JOINTS (UNICENTRIC OR POLYCENTRIC), POSITIONAL ORTHOSIS, RIGID SUPPORT, PREFAB, OFF-THE SHELF
OHANAA	Q3 2025	HCBS	L1843		HCPCS	KNEE ORTHOSIS, SINGLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC)
OHANAA	Q3 2025	HCBS	L1845		HCPCS	KNEE ORTHOSIS, DOUBLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC)
OHANAA	Q3 2025	HCBS	L1846		HCPCS	KNEE ORTHOTIC, DOUBLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC)
OHANAA	Q3 2025	HCBS	L1906		HCPCS	ANKLE FOOT ORTHOSIS, MULTILIGAMENTOUS ANKLE SUPPORT, PREFABRICATED, OFF-THE-SHELF
OHANAA	Q3 2025	HCBS	L1940		HCPCS	ANKLE-FOOT ORTHOTIC (AFO), PLASTIC OR OTHER MATERIAL, CUSTOM FABRICATED
OHANAA	Q3 2025	HCBS	L1960		HCPCS	ANKLE-FOOT ORTHOTIC (AFO), POSTERIOR SOLID ANKLE, PLASTIC, CUSTOM FABRICATED
OHANAA	Q3 2025	HCBS	L1970		HCPCS	ANKLE-FOOT ORTHOTIC (AFO), PLASTIC WITH ANKLE JOINT, CUSTOM FABRICATED
OHANAA	Q3 2025	HCBS	L1971		HCPCS	ANKLE-FOOT ORTHOTIC (AFO), PLASTIC OR OTHER MATERIAL WITH ANKLE JOINT, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT
OHANAA	Q3 2025	HCBS	L2397		HCPCS	ADDITION TO LOWER EXTREMITY ORTHOTIC, SUSPENSION SLEEVE
OHANAA	Q3 2025	HCBS	L2820		HCPCS	ADDITION TO LOWER EXTREMITY ORTHOTIC, SOFT INTERFACE FOR MOLDED PLASTIC, BELOW KNEE SECTION

OHANAA	Q3 2025	HCBS	L3020	HCPCS	FOOT INSERT, REMOVABLE, MOLDED TO PATIENT MODEL, LONGITUDINAL/METATARSAL SUPPORT, EACH
OHANAA	Q3 2025	HCBS	L3807	HCPCS	WRIST HAND FINGER ORTHOSIS, WITHOUT JOINT(S), PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED
OHANAA	Q3 2025	HCBS	L3908	HCPCS	WRIST HAND ORTHOSIS, WRIST EXTENSION CONTROL COCK-UP, NON MOLDED, PREFABRICATED, OFF-THE-SHELF
OHANAA	Q3 2025	HCBS	L3984	HCPCS	UPPER EXTREMITY FRACTURE ORTHOTIC, WRIST, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT
OHANAA	Q3 2025	HCBS	L4350	HCPCS	ANKLE CONTROL ORTHOSIS, STIRRUP STYLE, RIGID, INCLUDES ANY TYPE INTERFACE (E.G., PNEUMATIC, GEL), PREFABRICATED, OFF-THE-SHELF
OHANAA	Q3 2025	HCBS	L4360	HCPCS	WALKING BOOT, PNEUMATIC AND/OR VACUUM, WITH OR WITHOUT JOINTS, WITH OR WITHOUT INTERFACE MATERIAL, PREFABRICATED ITEM
OHANAA	Q3 2025	HCBS	L4361	HCPCS	WALKING BOOT, PNEUMATIC AND/OR VACUUM, WITH OR WITHOUT JOINTS, WITH OR WITHOUT INTERFACE MATERIAL, PREFABRICATED, OFF-THE-SHELF
OHANAA	Q3 2025	HCBS	L4396	HCPCS	STATIC OR DYNAMIC ANKLE FOOT ORTHOSIS, INCL SOFT INTERFACE MATERIAL, ADJUSTABLE FOR FIT, FOR POSITIONING, MAY BE USED
OHANAA	Q3 2025	HCBS	L5530	HCPCS	PREPARATORY, BELOW KNEE PTB TYPE SOCKET, NONALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, THERMOPLASTIC OR EQUAL, MOLDED TO MODEL
OHANAA	Q3 2025	HCBS	L5700	HCPCS	REPLACEMENT, SOCKET, BELOW KNEE, MOLDED TO PATIENT MODEL
OHANAA	Q3 2025	HCBS	L8030	HCPCS	BREAST PROSTHESIS, SILICONE OR EQUAL, WITHOUT INTEGRAL ADHESIVE
OHANAA	Q3 2025	HCBS	L8619	HCPCS	COCHLEAR IMPLANT, EXTERNAL SPEECH PROCESSOR AND CONTROLLER, INTEGRATED SYSTEM, REPLACEMENT
OHANAA	Q3 2025	HCBS	L8680	HCPCS	IMPLANTABLE NEUROSTIMULATOR ELECTRODE, EACH
OHANAA	Q3 2025	HCBS	Q4101	HCPCS	APLIGRAF, PER SQ CM
OHANAA	Q3 2025	HCBS	Q5001	HCPCS	HOSPICE OR HOME HEALTH CARE PROVIDED IN PATIENT'S HOME OR RESIDENCE
OHANAA	Q3 2025	HCBS	Q5004	HCPCS	HOSPICE CARE PROVIDED IN SKILLED NURSING FACILITY (SNF)
OHANAA	Q3 2025	HCBS	S5102	HCPCS	DAY CARE SERVICES, ADULT; PER DIEM
OHANAA	Q3 2025	HCBS	S5130	HCPCS	HOMEMAKER SERVICE, NOS; PER 15 MINUTES
OHANAA	Q3 2025	HCBS	S5135	HCPCS	COMPANION CARE, ADULT (E.G., IADL/ADL); PER 15 MINUTES
OHANAA	Q3 2025	HCBS	S5140	HCPCS	FOSTER CARE, ADULT; PER DIEM
OHANAA	Q3 2025	HCBS	S5160	HCPCS	EMERGENCY RESPONSE SYSTEM; INSTALLATION AND TESTING
OHANAA	Q3 2025	HCBS	S5170	HCPCS	HOME DELIVERED MEALS, INCLUDING PREPARATION; PER MEAL
OHANAA	Q3 2025	HCBS	T1019	HCPCS	PERSONAL CARE SERVICES, PER 15 MINUTES, NOT FOR AN INPATIENT OR RESIDENT OF A HOSPITAL, NURSING FACILITY, ICF/MR OR IMD, PART OF
OHANAA	Q3 2025	HCBS	T2022	HCPCS	CASE MANAGEMENT, PER MONTH
OHANAA	Q3 2025	HCBS	T2028	HCPCS	SPECIALIZED SUPPLY, NOT OTHERWISE SPECIFIED, WAIVER
OHANAA	Q3 2025	HCBS	T2033	HCPCS	RESIDENTIAL CARE, NOT OTHERWISE SPECIFIED (NOS), WAIVER; PER DIEM
OHANAA	Q3 2025	HCBS	T4521	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, SMALL, EACH
OHANAA	Q3 2025	HCBS	T4522	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, MEDIUM, EACH
OHANAA	Q3 2025	HCBS	T4523	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, LARGE, EACH
OHANAA	Q3 2025	HCBS	T4525	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, SMALL SIZE, EACH
OHANAA	Q3 2025	HCBS	T4526	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, MEDIUM SIZE, EACH
OHANAA	Q3 2025	HCBS	T4527	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, LARGE SIZE, EACH
OHANAA	Q3 2025	HCBS	T4528	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, EXTRA LARGE SIZE, EACH
OHANAA	Q3 2025	HCBS	T4533	HCPCS	YOUTH SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, EACH
OHANAA	Q3 2025	HCBS	T4535	HCPCS	DISPOSABLE LINER/SHIELD/GUARD/PAD/UNDERGARMENT, FOR INCONTINENCE, EACH
OHANAA	Q3 2025	HCBS	T4541	HCPCS	INCONTINENCE PRODUCT, DISPOSABLE UNDERPAD, LARGE, EACH
OHANAA	Q3 2025	HCBS	V5261	HCPCS	HEARING AID, DIGITAL, BINAURAL, BTE
OHANAA	Q3 2025	HCBS	V5264	HCPCS	EAR MOLD/INSERT, NOT DISPOSABLE, ANY TYPE
OHANAA	Q3 2025	Home Health	99601	CPT	HOME INFUSION/SPECIALTY DRUG ADMINISTRATION, PER VISIT (UP TO 2 HOURS);
OHANAA	Q3 2025	Home Health	99602	CPT	HOME INFUSION/SPECIALTY DRUG ADMINISTRATION, PER VISIT (UP TO 2 HOURS); EACH ADDITIONAL HOUR (LIST SEPARATELY IN ADDITION
OHANAA	Q3 2025	Home Health	B4189	HCPCS	PARENTERAL NUTRITION SOLUTION: COMPOUNDED AMINO ACID AND CARBOHYDRATES W ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS
OHANAA	Q3 2025	Home Health	G0151	HCPCS	SERVICES PERFORMED BY A QUALIFIED PHYSICAL THERAPIST IN THE HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES
OHANAA	Q3 2025	Home Health	G0152	HCPCS	SERVICES PERFORMED BY A QUALIFIED OCCUPATIONAL THERAPIST IN THE HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES
OHANAA	Q3 2025	Home Health	G0153	HCPCS	SERVICES PERFORMED BY A QUALIFIED SPEECH-LANGUAGE PATHOLOGIST IN THE HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES
OHANAA	Q3 2025	Home Health	G0155	HCPCS	SERVICES OF CLINICAL SOCIAL WORKER IN HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES
OHANAA	Q3 2025	Home Health	G0156	HCPCS	SERVICES OF HOME HEALTH / HOSPICE AIDE IN HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES
OHANAA	Q3 2025	Home Health	G0157	HCPCS	SERVICES PERFORMED BY A QUALIFIED PHYSICAL THERAPIST ASSISTANT IN THE HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES
OHANAA	Q3 2025	Home Health	G0158	HCPCS	SERVICES PERFORMED BY A QUALIFIED OCCUPATIONAL THERAPIST ASSISTANT IN THE HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES
OHANAA	Q3 2025	Home Health	G0299	HCPCS	DIRECT SKILLED NURSING SERVICES OF A REGISTERED NURSE (RN) IN THE HOME HEALTH OR HOSPICE SETTINGS, EACH 15 MINUTES
OHANAA	Q3 2025	Home Health	G0300	HCPCS	DIRECT SKILLED NURSING SERVICES OF A LICENSED PRACTICAL NURSE (LPN) IN THE HOME HEALTH OR HOSPICE SETTINGS, EACH 15 MINUTES
OHANAA	Q3 2025	Home Health	G0493	HCPCS	SKILLED SERVICES RN OBV & ASMT PT COND EA 15 MIN
OHANAA	Q3 2025	Home Health	G0495	HCPCS	SKD SRVC RN TRAIN&/EDU PT/FAM HH/HOSPC EA 15 MIN
OHANAA	Q3 2025	Home Health	G0529	HCPCS	IN-HOME RESPITE CARE 4-HOUR UNIT
OHANAA	Q3 2025	Home Health	G2168	HCPCS	SERVICES PRFRM BY PT ASST HH SETTING EA 15 MIN
OHANAA	Q3 2025	Home Health	G2169	HCPCS	SERVICES PRFRM BY OT ASST HH SETTING EA 15 MIN
OHANAA	Q3 2025	Home Health	J0696	HCPCS	INJECTION, CEFTRIAXONE SODIUM, PER 250 MG
OHANAA	Q3 2025	Home Health	S5497	HCPCS	HOME INFUSION THERAPY, CATHETER CARE/MAINTENANCE, NOT OTHERWISE CLASSIFIED; INCLUDES ADMINISTRATIVE SERVICES PROFESSIONAL PHARMACY
OHANAA	Q3 2025	Home Health	S5498	HCPCS	HOME INFUSION THERAPY, CATHETER CARE/MAINTENANCE, SIMPLE (SINGLE LUMEN), INCLUDES ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY
OHANAA	Q3 2025	Home Health	S9124	HCPCS	NURSING CARE, IN THE HOME; BY LICENSED PRACTICAL NURSE, PER HOUR
OHANAA	Q3 2025	Home Health	S9338	HCPCS	HOME INFUSION THERAPY, IMMUNOTHERAPY, ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION & ALL NECESSARY
OHANAA	Q3 2025	Home Health	S9340	HCPCS	HOME THERAPY; ENTERAL NUTRITION; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUP
OHANAA	Q3 2025	Home Health	S9342	HCPCS	HOME THERAPY; ENTERAL NUTRITION VIA PUMP; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NEC
OHANAA	Q3 2025	Home Health	S9343	HCPCS	HOME THERAPY; ENTERAL NUTRITION VIA BOLUS; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL
OHANAA	Q3 2025	Home Health	S9359	HCPCS	HOME INFUSION THERAPY, ANTITUMOR NECROSIS FACTOR INTRAVENOUS THERAPY; (E.G., INFLIXIMAB); ADMINISTRATIVE SERVICES, PROFESSIONAL
OHANAA	Q3 2025	Home Health	S9365	HCPCS	HOME INFUSION THERAPY, TOTAL PARENTERAL NUTRITION (TPN); 1 LITER PER DAY, ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES
OHANAA	Q3 2025	Home Health	S9366	HCPCS	HOME INFUSION THERAPY, TOTAL PARENTERAL NUTRITION (TPN); MORE THAN 1 LITER BUT NO MORE THAN 2 LITERS PER DAY, ADMINISTRATIVE SERV
OHANAA	Q3 2025	Home Health	S9373	HCPCS	HOME INFUSION THERAPY, HYDRATION THERAPY; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NEC
OHANAA	Q3 2025	Home Health	S9379	HCPCS	HOME INFUSION THERAPY, INFUSION THERAPY, NOT OTHERWISE CLASSIFIED; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE
OHANAA	Q3 2025	Home Health	S9484	HCPCS	CRISIS INTERVENTION MENTAL HEALTH SERVICES, PER HOUR
OHANAA	Q3 2025	Home Health	S9494	HCPCS	HOME INFUSION THERAPY, ANTIBIOTIC, ANTIVIRAL, OR ANTIFUNGAL THERAPY; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE
OHANAA	Q3 2025	Home Health	S9500	HCPCS	HOME INFUSION THERAPY, ANTIBIOTIC, ANTIVIRAL, OR ANTIFUNGAL THERAPY; ONCE EVERY 24 HOURS; ADMINISTRATIVE SERVICES, PROFESSIONAL
OHANAA	Q3 2025	Home Health	S9502	HCPCS	HOME INFUSION THERAPY, ANTIBIOTIC, ANTIVIRAL, OR ANTIFUNGAL THERAPY; ONCE EVERY 8 HOURS, ADMINISTRATIVE SVCS, PROFESSIONAL PHAMACY
OHANAA	Q3 2025	Home Health	T2031	HCPCS	ASSISTED LIVING; WAIVER, PER DIEM
OHANAA	Q3 2025	Inpatient Hosp	55970	CPT	INTERSEX SURGERY; MALE TO FEMALE
OHANAA	Q3 2025	Inpatient Hosp	0643T	CPT	TRANSCATHETER L VENTR RESTORATION DEVICE IMPLTJ
OHANAA	Q3 2025	Inpatient Hosp	0644T	CPT	TCAT RMVL/DEBULK ICAR MASS SUCTION DEVICE PERQ
OHANAA	Q3 2025	Inpatient Hosp	0645T	CPT	TCAT IMPLANTATION CORONARY SINUS REDUCTION DEV
OHANAA	Q3 2025	Inpatient Hosp	0646T	CPT	TTVI/RPLCMT PROSTC VLV PERQ W/R HRT CATH AND ANGRPH
OHANAA	Q3 2025	Inpatient Hosp	0656T	CPT	ANTERIOR VERTEBRAL BODY TETHERING <7VRT SEGMENTS
OHANAA	Q3 2025	Inpatient Hosp	0657T	CPT	ANTERIOR VERTEBRAL BODY TETHERING 8+VRT SEGMENTS
OHANAA	Q3 2025	Inpatient Hosp	0659T	CPT	TCAT INTRA-C NFS SUPERSAT O2 W/PERQ C REVSC AMI
OHANAA	Q3 2025	Inpatient Hosp	0665T	CPT	DONOR HYSTERECTOMY OPEN FROM LIVING DONOR
OHANAA	Q3 2025	Inpatient Hosp	0666T	CPT	DONOR HYSTERECTOMY LAPS/ROBOTIC FROM LIV DONOR
OHANAA	Q3 2025	Inpatient Hosp	0667T	CPT	DONOR HYST RCP UTER ALGRFT TRNSPLJ CDVR/LIV
OHANAA	Q3 2025	Inpatient Hosp	0668T	CPT	BACKBENCH PREP CDVR/LIV DONOR UTERINE ALLOGRAFT
OHANAA	Q3 2025	Inpatient Hosp	0669T	CPT	BCKBNCH RCNSTJ CDVR/LIV DON UTER ALGRFT VEN ANST
OHANAA	Q3 2025	Inpatient Hosp	0670T	CPT	BCKBNCH RCNSTJ CDVR/LIV DON UTER ALGRFT ART ANST
OHANAA	Q3 2025	Inpatient Hosp	0867T	CPT	TPLA B9 PROSTATIC HYPERPLASIA PRST8 VOL>=50 ML
OHANAA	Q3 2025	Inpatient Hosp	0868T	CPT	HIGH-RESOLUTION GASTRIC ELECTROPHYSIOLOGY MAPG
OHANAA	Q3 2025	Inpatient Hosp	0870T	CPT	IMPLANTATION SUBQ PERITONEAL ASCITES PUMP SYS
OHANAA	Q3 2025	Inpatient Hosp	0871T	CPT	REPLACEMENT SUBCUTANEOUS PERITONEAL ASCITES PUMP
OHANAA	Q3 2025	Inpatient Hosp	0872T	CPT	RPLCMT INDWELLING BLADDER & PERITONEAL CATHETERS
OHANAA	Q3 2025	Inpatient Hosp	0873T	CPT	REVJ SUBQ IMPL PERITONEAL ASCITES PUMP SYSTEM
OHANAA	Q3 2025	Inpatient Hosp	0874T	CPT	REMOVAL PERITONEAL ASCITES PUMP SYSTEM
OHANAA	Q3 2025	Inpatient Hosp	0876T	CPT	DUPLEX SCAN HEMODIALYSIS FISTULA CPTR AIDED LMTD
OHANAA	Q3 2025	Inpatient Hosp	0877T	CPT	AUGMNT ALYS CH CT IMG DATA ILD WO CNCRNT CT EXAM
OHANAA	Q3 2025	Inpatient Hosp	0878T	CPT	AUGMNT ALYS CH CT IMG DATA ILD W/CNCRNT CT EXAM
OHANAA	Q3 2025	Inpatient Hosp	0879T	CPT	AUGMNT ALYS CH CT IMG DATA ILD DATA PREP&TRNSMS

OHANAA	Q3 2025	Inpatient Hosp	0880T	CPT	AUGMNT ALYS CH CT IMG DATA ILD PHYS/QHP I&R
OHANAA	Q3 2025	Inpatient Hosp	0881T	CPT	CRTX ORAL CAVITY TEMP REGULATED FLU COOLING SYS
OHANAA	Q3 2025	Inpatient Hosp	0884T	CPT	ESPHGSC FLX TRNSORL 1ST TNDSC DILAT RX BALO CATH
OHANAA	Q3 2025	Inpatient Hosp	0885T	CPT	COLSC FLX TRNSORL 1ST TNDSC DILAT RX BALO CATH
OHANAA	Q3 2025	Inpatient Hosp	0886T	CPT	SGMDSC FLX TRNSORL 1ST TNDSC DILAT RX BALO CATH
OHANAA	Q3 2025	Inpatient Hosp	0888T	CPT	HISTOTRIPSY MALIGNANT RENAL TISSUE W/IMG GDN
OHANAA	Q3 2025	Inpatient Hosp	0893T	CPT	N-INVAS ASSMT BLD OXY GAS XCHNG EFF&CARDRESP I&R
OHANAA	Q3 2025	Inpatient Hosp	0897T	CPT	N-INVAS AUGMNT ARRHYT ALYS QUAN CAR ARRHYT SIMUL
OHANAA	Q3 2025	Inpatient Hosp	0898T	CPT	NONINVASIVE PROSTATE CANCER ESTIMATION MAP
OHANAA	Q3 2025	Inpatient Hosp	0899T	CPT	N-INVAS DETER AQMBF AUGMNT ALG ALYS DATASET CMR
OHANAA	Q3 2025	Inpatient Hosp	0900T	CPT	N-INVAS EST AQMBF ASSITIVE ALG ALYS DATASET CMR
OHANAA	Q3 2025	Inpatient Hosp	11446	CPT	EXCISION, OTHER BENIGN LESION INCLUDING MARGINS, EXCEPT SKIN TAG (UNLESS LISTED ELSEWHERE), FACE, EARS, EYELIDS, NOSE, LIP
OHANAA	Q3 2025	Inpatient Hosp	11604	CPT	EXCISION, MALIGNANT LESION INCLUDING MARGINS, TRUNK, ARMS, OR LEGS; EXCISED DIAMETER 3.1 TO 4.0 CM
OHANAA	Q3 2025	Inpatient Hosp	11646	CPT	EXCISION, MALIGNANT LESION INCLUDING MARGINS, FACE, EARS, EYELIDS, NOSE, LIPS; EXCISED DIAMETER OVER 4.0 CM
OHANAA	Q3 2025	Inpatient Hosp	15004	CPT	SURGICAL PREPARATION OR CREATION OF RECIPIENT SITE BY EXCISION OF OPEN WOUNDS, BURN ESCHAR, OR SCAR (INCLUDING SUBCUTANEOU
OHANAA	Q3 2025	Inpatient Hosp	15005	CPT	SURGICAL PREPARATION OR CREATION OF RECIPIENT SITE BY EXCISION OF OPEN WOUNDS, BURN ESCHAR, OR SCAR (INCLUDING SUBCUTANEOU
OHANAA	Q3 2025	Inpatient Hosp	15101	CPT	SPLIT-THICKNESS AUTOGRAFT, TRUNK, ARMS, LEGS; EACH ADDITIONAL 100 SQ CM, OR EACH ADDITIONAL 1% OF BODY AREA OF INFANTS AND
OHANAA	Q3 2025	Inpatient Hosp	15120	CPT	SPLIT-THICKNESS AUTOGRAFT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HANDS, FEET, AND/OR MULTIPLE DIGITS
OHANAA	Q3 2025	Inpatient Hosp	15121	CPT	SPLIT-THICKNESS AUTOGRAFT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HANDS, FEET, AND/OR MULTIPLE DIGITS
OHANAA	Q3 2025	Inpatient Hosp	15734	CPT	MUSCLE, MYOCUTANEOUS, OR FASCIOCUTANEOUS FLAP; TRUNK
OHANAA	Q3 2025	Inpatient Hosp	15757	CPT	FREE SKIN FLAP WITH MICROVASCULAR ANASTOMOSIS
OHANAA	Q3 2025	Inpatient Hosp	15860	CPT	INTRAVENOUS INJECTION OF AGENT (EG, FLUORESCEIN) TO TEST VASCULAR FLOW IN FLAP OR GRAFT
OHANAA	Q3 2025	Inpatient Hosp	15937	CPT	EXCISION, SACRAL PRESSURE ULCER, IN PREPARATION FOR MUSCLE OR MYOCUTANEOUS FLAP OR SKIN GRAFT CLOSURE; WITH OSTECTOMY
OHANAA	Q3 2025	Inpatient Hosp	20650	CPT	INSERTION OF WIRE OR PIN WITH APPLICATION OF SKELETAL TRACTION, INCLUDING REMOVAL (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Inpatient Hosp	20661	CPT	APPLICATION OF HALO, INCLUDING REMOVAL; CRANIAL
OHANAA	Q3 2025	Inpatient Hosp	20664	CPT	APPLICATION OF HALO, INCLUDING REMOVAL, CRANIAL, 6 OR MORE PINS PLACED, FOR THIN SKULL OSTEOLOGY (EG, PEDIATRIC PATIENTS,
OHANAA	Q3 2025	Inpatient Hosp	20692	CPT	APPLICATION OF A MULTIPLANE (PINS OR WIRES IN MORE THAN ONE PLANE), UNILATERAL, EXTERNAL FIXATION SYSTEM (EG, ILIZAROV, MO
OHANAA	Q3 2025	Inpatient Hosp	20930	CPT	ALLOGRAFT FOR SPINE SURGERY ONLY; MORSELIZED (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
OHANAA	Q3 2025	Inpatient Hosp	20936	CPT	AUTOGRAFT FOR SPINE SURGERY ONLY (INCLUDES HARVESTING THE GRAFT); LOCAL (EG, RIBS, SPINOUS PROCESS, OR LAMINAR FRAGMENTS)
OHANAA	Q3 2025	Inpatient Hosp	20969	CPT	FREE OSTEOCUTANEOUS FLAP WITH MICROVASCULAR ANASTOMOSIS; OTHER THAN ILIAC CREST, METATARSAL, OR GREAT TOE
OHANAA	Q3 2025	Inpatient Hosp	21175	CPT	RECONSTRUCTION, BIFRONTAL, SUPERIOR-LATERAL ORBITAL RIMS AND LOWER FOREHEAD, ADVANCEMENT OR ALTERATION (EG, PLAGIOCEPHALY,
OHANAA	Q3 2025	Inpatient Hosp	21182	CPT	RECONSTRUCTION OF ORBITAL WALLS, RIMS, FOREHEAD, NASOETHMOID COMPLEX FOLLOWING INTRA- AND EXTRACRANIAL EXCISION OF BENIGN
OHANAA	Q3 2025	Inpatient Hosp	21627	CPT	STERNAL DEBRIDEMENT
OHANAA	Q3 2025	Inpatient Hosp	22015	CPT	INCISION AND DRAINAGE, OPEN, OF DEEP ABSCESS (SUBFASCIAL), POSTERIOR SPINE; LUMBAR, SACRAL, OR LUMBOSACRAL
OHANAA	Q3 2025	Inpatient Hosp	22206	CPT	OSTEOTOMY OF SPINE, POSTERIOR OR POSTEROLATERAL APPROACH, THREE COLUMNS, ONE VERTEBRAL SEGMENT (EG, PEDICLE/VERTEBRAL BODY
OHANAA	Q3 2025	Inpatient Hosp	22212	CPT	OSTEOTOMY OF SPINE, POSTERIOR OR POSTEROLATERAL APPROACH, ONE VERTEBRAL SEGMENT; THORACIC
OHANAA	Q3 2025	Inpatient Hosp	22214	CPT	OSTEOTOMY OF SPINE, POSTERIOR OR POSTEROLATERAL APPROACH, ONE VERTEBRAL SEGMENT; LUMBAR
OHANAA	Q3 2025	Inpatient Hosp	22216	CPT	OSTEOTOMY OF SPINE, POSTERIOR OR POSTEROLATERAL APPROACH, ONE VERTEBRAL SEGMENT; EACH ADDITIONAL VERTEBRAL SEGMENT (LIST S
OHANAA	Q3 2025	Inpatient Hosp	22325	CPT	OPEN TREATMENT AND/OR REDUCTION OF VERTEBRAL FRACTURE(S) AND/OR DISLOCATION(S), POSTERIOR APPROACH, ONE FRACTURED VERTEBRA
OHANAA	Q3 2025	Inpatient Hosp	22533	CPT	ARTHRODESIS, LATERAL EXTRACAVITARY TECHNIQUE, INCLUDING MINIMAL DISCECTOMY TO PREPARE INTERSPACE (OTHER THAN FOR DECOMPRES
OHANAA	Q3 2025	Inpatient Hosp	22554	CPT	ARTHRODESIS, ANTERIOR INTERBODY TECHNIQUE, INCLUDING MINIMAL DISCECTOMY TO PREPARE INTERSPACE (OTHER THAN FOR DECOMPRESSIO
OHANAA	Q3 2025	Inpatient Hosp	22585	CPT	ARTHRODESIS, ANTERIOR INTERBODY TECHNIQUE, INCLUDING MINIMAL DISCECTOMY TO PREPARE INTERSPACE (OTHER THAN FOR DECOMPRESSIO
OHANAA	Q3 2025	Inpatient Hosp	22595	CPT	ARTHRODESIS, POSTERIOR TECHNIQUE, ATLAS-AXIS (C1-C2)
OHANAA	Q3 2025	Inpatient Hosp	22612	CPT	ARTHRODESIS, POSTERIOR OR POSTEROLATERAL TECHNIQUE, SINGLE LEVEL; LUMBAR (WITH OR WITHOUT LATERAL TRANSVERSE TECHNIQUE)
OHANAA	Q3 2025	Inpatient Hosp	22630	CPT	ARTHRODESIS, POSTERIOR INTERBODY TECHNIQUE, INCLUDING LAMINECTOMY AND/OR DISCECTOMY TO PREPARE INTERSPACE (OTHER THAN FOR
OHANAA	Q3 2025	Inpatient Hosp	22632	CPT	ARTHRODESIS, POSTERIOR INTERBODY TECHNIQUE, INCLUDING LAMINECTOMY AND/OR DISCECTOMY TO PREPARE INTERSPACE (OTHER THAN FOR
OHANAA	Q3 2025	Inpatient Hosp	22633	CPT	ARTHRODESIS, COMBINED POSTERIOR OR POSTEROLATERAL TECHNIQUE WITH POSTERIOR INTERBODY TECHNIQUE INCLUDING LAMINECTOMY AND/OR DISCEC
OHANAA	Q3 2025	Inpatient Hosp	22800	CPT	ARTHRODESIS, POSTERIOR, FOR SPINAL DEFORMITY, WITH OR WITHOUT CAST; UP TO 6 VERTEBRAL SEGMENTS
OHANAA	Q3 2025	Inpatient Hosp	22802	CPT	ARTHRODESIS, POSTERIOR, FOR SPINAL DEFORMITY, WITH OR WITHOUT CAST; 7 TO 12 VERTEBRAL SEGMENTS
OHANAA	Q3 2025	Inpatient Hosp	22804	CPT	ARTHRODESIS, POSTERIOR, FOR SPINAL DEFORMITY, WITH OR WITHOUT CAST; 13 OR MORE VERTEBRAL SEGMENTS
OHANAA	Q3 2025	Inpatient Hosp	22810	CPT	ARTHRODESIS, ANTERIOR, FOR SPINAL DEFORMITY, WITH OR WITHOUT CAST; 4 TO 7 VERTEBRAL SEGMENTS
OHANAA	Q3 2025	Inpatient Hosp	22840	CPT	POSTERIOR NON-SEGMENTAL INSTRUMENTATION (EG, HARRINGTON ROD TECHNIQUE, PEDICLE FIXATION ACROSS ONE INTERSPACE, ATLANTOAXIA
OHANAA	Q3 2025	Inpatient Hosp	22842	CPT	POSTERIOR SEGMENTAL INSTRUMENTATION (EG, PEDICLE FIXATION, DUAL RODS WITH MULTIPLE HOOKS AND SUBLAMINAR WIRES); 3 TO 6 VER
OHANAA	Q3 2025	Inpatient Hosp	22843	CPT	POSTERIOR SEGMENTAL INSTRUMENTATION (EG, PEDICLE FIXATION, DUAL RODS WITH MULTIPLE HOOKS AND SUBLAMINAR WIRES); 7 TO 12 VE
OHANAA	Q3 2025	Inpatient Hosp	22844	CPT	POSTERIOR SEGMENTAL INSTRUMENTATION (EG, PEDICLE FIXATION, DUAL RODS WITH MULTIPLE HOOKS AND SUBLAMINAR WIRES); 13 OR MORE
OHANAA	Q3 2025	Inpatient Hosp	22846	CPT	ANTERIOR INSTRUMENTATION; 4 TO 7 VERTEBRAL SEGMENTS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
OHANAA	Q3 2025	Inpatient Hosp	22848	CPT	PELVIC FIXATION (ATTACHMENT OF CAUDAL END OF INSTRUMENTATION TO PELVIC BONY STRUCTURES) OTHER THAN SACRUM (LIST SEPARATELY
OHANAA	Q3 2025	Inpatient Hosp	22849	CPT	REINSERTION OF SPINAL FIXATION DEVICE
OHANAA	Q3 2025	Inpatient Hosp	22854	CPT	INSERTION OF INTERVERTEBRAL BIOMECHANICAL DEVICE(S) (EG, SYNTHETIC CAGE, MESH) WITH INTEGRAL ANTERIOR INSTRUMENTATION FOR DEVICE ANCHORING (EG, SCREWS, FLAN
OHANAA	Q3 2025	Inpatient Hosp	22855	CPT	REMOVAL OF ANTERIOR INSTRUMENTATION
OHANAA	Q3 2025	Inpatient Hosp	22857	CPT	TOTAL DISC ARTHROPLASTY (ARTIFICIAL DISC), ANTERIOR APPROACH, INCLUDING DISCECTOMY TO PREPARE INTERSPACE (OTHER THAN FOR D
OHANAA	Q3 2025	Inpatient Hosp	22859	CPT	INSERTION OF INTERVERTEBRAL BIOMECHANICAL DEVICE(S) (EG, SYNTHETIC CAGE, MESH, METHYLMETHACRYLATE) TO INTERVERTEBRAL DISC SPACE OR VERTEBRAL BODY DEFECT WIT
OHANAA	Q3 2025	Inpatient Hosp	22861	CPT	REVJ RPLCMT DISC ARTHROPLASTY ANT 1 NTRSPC CRV REVISION INCLUDING REPLACEMENT OF TOTAL DISC ARTHROPLASTY (ARTIFICIAL DISC), ANTER
OHANAA	Q3 2025	Inpatient Hosp	22900	CPT	EXCISION, ABDOMINAL WALL TUMOR, SUBFASCIAL (EG, DESMOID)
OHANAA	Q3 2025	Inpatient Hosp	22901	CPT	EXCISION, TUMOR, SOFT TISSUE OF ABDOMINAL WALL, SUBFASCIAL (EG, INTRAMUSCULAR); 5 CM OR GREATER
OHANAA	Q3 2025	Inpatient Hosp	24341	CPT	REPAIR, TENDON OR MUSCLE, UPPER ARM OR ELBOW, EACH TENDON OR MUSCLE, PRIMARY OR SECONDARY (EXCLUDES ROTATOR CUFF)
OHANAA	Q3 2025	Inpatient Hosp	24665	CPT	OPEN TREATMENT OF RADIAL HEAD OR NECK FRACTURE, INCLUDES INTERNAL FIXATION OR RADIAL HEAD EXCISION, WHEN PERFORMED;
OHANAA	Q3 2025	Inpatient Hosp	26477	CPT	SHORTENING OF TENDON, EXTENSOR, HAND OR FINGER, EACH TENDON
OHANAA	Q3 2025	Inpatient Hosp	26478	CPT	LENGTHENING OF TENDON, FLEXOR, HAND OR FINGER, EACH TENDON
OHANAA	Q3 2025	Inpatient Hosp	26850	CPT	ARTHRODESIS, METACARPOPHALANGEAL JOINT, WITH OR WITHOUT INTERNAL FIXATION;
OHANAA	Q3 2025	Inpatient Hosp	27006	CPT	TENOTOMY, ABDUCTORS AND/OR EXTENSOR(S) OF HIP, OPEN (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Inpatient Hosp	27043	CPT	EXCISION, TUMOR, SOFT TISSUE OF PELVIS AND HIP AREA, SUBCUTANEOUS; 3 CM OR GREATER
OHANAA	Q3 2025	Inpatient Hosp	27095	CPT	INJECTION PROCEDURE FOR HIP ARTHROGRAPHY; WITH ANESTHESIA
OHANAA	Q3 2025	Inpatient Hosp	27134	CPT	REVISION OF TOTAL HIP ARTHROPLASTY; BOTH COMPONENTS, WITH OR WITHOUT AUTOGRAFT OR ALLOGRAFT
OHANAA	Q3 2025	Inpatient Hosp	27137	CPT	REVISION OF TOTAL HIP ARTHROPLASTY; ACETABULAR COMPONENT ONLY, WITH OR WITHOUT AUTOGRAFT OR ALLOGRAFT
OHANAA	Q3 2025	Inpatient Hosp	27138	CPT	REVISION OF TOTAL HIP ARTHROPLASTY; FEMORAL COMPONENT ONLY, WITH OR WITHOUT ALLOGRAFT
OHANAA	Q3 2025	Inpatient Hosp	27146	CPT	OSTEOTOMY, ILIAC, ACETABULAR OR INNOMINATE BONE;
OHANAA	Q3 2025	Inpatient Hosp	27147	CPT	OSTEOTOMY, ILIAC, ACETABULAR OR INNOMINATE BONE; WITH OPEN REDUCTION OF HIP
OHANAA	Q3 2025	Inpatient Hosp	27165	CPT	OSTEOTOMY, INTERTROCHANTERIC OR SUBTROCHANTERIC INCLUDING INTERNAL OR EXTERNAL FIXATION AND/OR CAST
OHANAA	Q3 2025	Inpatient Hosp	27236	CPT	OPEN TREATMENT OF FEMORAL FRACTURE, PROXIMAL END, NECK, INTERNAL FIXATION OR PROSTHETIC REPLACEMENT
OHANAA	Q3 2025	Inpatient Hosp	27258	CPT	OPEN TREATMENT OF SPONTANEOUS HIP DISLOCATION (DEVELOPMENTAL, INCLUDING CONGENITAL OR PATHOLOGICAL), REPLACEMENT OF FEMORA
OHANAA	Q3 2025	Inpatient Hosp	27299	CPT	UNLISTED PROCEDURE, PELVIS OR HIP JOINT
OHANAA	Q3 2025	Inpatient Hosp	27355	CPT	EXCISION OR CURETTAGE OF BONE CYST OR BENIGN TUMOR OF FEMUR;
OHANAA	Q3 2025	Inpatient Hosp	27394	CPT	LENGTHENING OF HAMSTRING TENDON; MULTIPLE TENDONS, ONE LEG
OHANAA	Q3 2025	Inpatient Hosp	27422	CPT	RECONSTRUCTION OF DISLOCATING PATELLA; WITH EXTENSOR REALIGNMENT AND/OR MUSCLE ADVANCEMENT OR RELEASE (EG, CAMPBELL, GOLDW
OHANAA	Q3 2025	Inpatient Hosp	27450	CPT	OSTEOTOMY, FEMUR, SHAFT OR SUPRACONDYLAR; WITH FIXATION
OHANAA	Q3 2025	Inpatient Hosp	27455	CPT	OSTEOTOMY, PROXIMAL TIBIA, INCLUDING FIBULAR EXCISION OR OSTEOTOMY (INCLUDES CORRECTION OF GENU VARUS (BOWLEG) OR GENU VAL
OHANAA	Q3 2025	Inpatient Hosp	27470	CPT	REPAIR, NONUNION OR MALUNION, FEMUR, DISTAL TO HEAD AND NECK; WITHOUT GRAFT (EG, COMPRESSION TECHNIQUE)
OHANAA	Q3 2025	Inpatient Hosp	27472	CPT	REPAIR, NONUNION OR MALUNION, FEMUR, DISTAL TO HEAD AND NECK; WITH ILIAC OR OTHER AUTOGENOUS BONE GRAFT (INCLUDES OBTAININ
OHANAA	Q3 2025	Inpatient Hosp	27475	CPT	ARREST, EPIPHYSEAL, ANY METHOD (EG, EPIPHYSIODESIS); DISTAL FEMUR
OHANAA	Q3 2025	Inpatient Hosp	27485	CPT	ARREST, HEMIEPIPHYSEAL, DISTAL FEMUR OR PROXIMAL TIBIA OR FIBULA (EG, GENU VARUS OR VALGUS)
OHANAA	Q3 2025	Inpatient Hosp	27488	CPT	REMOVAL OF PROSTHESIS, INCLUDING TOTAL KNEE PROSTHESIS, METHYLMETHACRYLATE WITH OR WITHOUT INSERTION OF SPACER, KNEE
OHANAA	Q3 2025	Inpatient Hosp	27590	CPT	AMPUTATION, THIGH, THROUGH FEMUR, ANY LEVEL;
OHANAA	Q3 2025	Inpatient Hosp	27606	CPT	TENOTOMY, PERCUTANEOUS, ACHILLES TENDON (SEPARATE PROCEDURE); GENERAL ANESTHESIA
OHANAA	Q3 2025	Inpatient Hosp	27685	CPT	LENGTHENING OR SHORTENING OF TENDON, LEG OR ANKLE; SINGLE TENDON (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Inpatient Hosp	27686	CPT	LENGTHENING OR SHORTENING OF TENDON, LEG OR ANKLE; MULTIPLE TENDONS (THROUGH SAME INCISION), EACH
OHANAA	Q3 2025	Inpatient Hosp	27690	CPT	TRANSFER OR TRANSPLANT OF SINGLE TENDON (WITH MUSCLE REDIRECTION OR REROUTING); SUPERFICIAL (EG, ANTERIOR TIBIAL EXTENSORS
OHANAA	Q3 2025	Inpatient Hosp	27880	CPT	AMPUTATION, LEG, THROUGH TIBIA AND FIBULA;

OHANAA	Q3 2025	Inpatient Hosp	28230	CPT	TENOTOMY, OPEN, TENDON FLEXOR; FOOT, SINGLE OR MULTIPLE TENDON(S) (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Inpatient Hosp	28270	CPT	CAPSULOTOMY; METATARSOPHALANGEAL JOINT, WITH OR WITHOUT TENORRHAPHY, EACH JOINT (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Inpatient Hosp	28300	CPT	OSTEOTOMY; CALCANEUS (EG, DWYER OR CHAMBERS TYPE PROCEDURE), WITH OR WITHOUT INTERNAL FIXATION
OHANAA	Q3 2025	Inpatient Hosp	28735	CPT	ARTHRODESIS, MIDTARSAL OR TARSOMETATARSAL, MULTIPLE OR TRANSVERSE; WITH OSTEOTOMY (EG, FLATFOOT CORRECTION)
OHANAA	Q3 2025	Inpatient Hosp	28810	CPT	AMPUTATION, METATARSAL, WITH TOE, SINGLE
OHANAA	Q3 2025	Inpatient Hosp	29325	CPT	APPLICATION OF HIP SPICA CAST; ONE AND ONE-HALF SPICA OR BOTH LEGS
OHANAA	Q3 2025	Inpatient Hosp	31290	CPT	NASAL/SINUS ENDOSCOPY, SURGICAL, WITH REPAIR OF CEREBROSPINAL FLUID LEAK; ETHMOID REGION
OHANAA	Q3 2025	Inpatient Hosp	31360	CPT	LARYNGECTOMY; TOTAL, WITHOUT RADICAL NECK DISSECTION
OHANAA	Q3 2025	Inpatient Hosp	31505	CPT	LARYNGOSCOPY, INDIRECT; DIAGNOSTIC (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Inpatient Hosp	31525	CPT	LARYNGOSCOPY DIRECT, WITH OR WITHOUT TRACHEOSCOPY; DIAGNOSTIC, EXCEPT NEWBORN
OHANAA	Q3 2025	Inpatient Hosp	31526	CPT	LARYNGOSCOPY DIRECT, WITH OR WITHOUT TRACHEOSCOPY; DIAGNOSTIC, WITH OPERATING MICROSCOPE OR TELESCOPE
OHANAA	Q3 2025	Inpatient Hosp	31600	CPT	TRACHEOSTOMY, PLANNED (SEPARATE PROCEDURE);
OHANAA	Q3 2025	Inpatient Hosp	31631	CPT	BRONCHOSCOPY, RIGID OR FLEXIBLE, WITH OR WITHOUT FLUOROSCOPIC GUIDANCE; WITH PLACEMENT OF TRACHEAL STENT(S) (INCLUDES TRAC
OHANAA	Q3 2025	Inpatient Hosp	31750	CPT	TRACHEOPLASTY; CERVICAL
OHANAA	Q3 2025	Inpatient Hosp	31825	CPT	SURGICAL CLOSURE TRACHEOSTOMY OR FISTULA; WITH PLASTIC REPAIR
OHANAA	Q3 2025	Inpatient Hosp	32100	CPT	THORACOTOMY, MAJOR; WITH EXPLORATION AND BIOPSY
OHANAA	Q3 2025	Inpatient Hosp	32141	CPT	THORACOTOMY, MAJOR; WITH EXCISION-PLICATION OF BULLAE, WITH OR WITHOUT ANY PLEURAL PROCEDURE
OHANAA	Q3 2025	Inpatient Hosp	32440	CPT	REMOVAL OF LUNG, TOTAL PNEUMONECTOMY;
OHANAA	Q3 2025	Inpatient Hosp	32480	CPT	REMOVAL OF LUNG, OTHER THAN TOTAL PNEUMONECTOMY; SINGLE LOBE (LOBECTOMY)
OHANAA	Q3 2025	Inpatient Hosp	32484	CPT	REMOVAL OF LUNG, OTHER THAN TOTAL PNEUMONECTOMY; SINGLE SEGMENT (SEGMENTECTOMY)
OHANAA	Q3 2025	Inpatient Hosp	32505	CPT	THORACOTOMY; WITH THERAPEUTIC WEDGE RESECTION (EG, MASS, NODULE), INITIAL
OHANAA	Q3 2025	Inpatient Hosp	32507	CPT	THORACOTOMY; WITH DIAGNOSTIC WEDGE RESECTION FOLLOWED BY ANATOMIC LUNG RESECTION (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY
OHANAA	Q3 2025	Inpatient Hosp	32650	CPT	THORACOSCOPY, SURGICAL; WITH PLEURODESIS (EG, MECHANICAL OR CHEMICAL)
OHANAA	Q3 2025	Inpatient Hosp	32662	CPT	THORACOSCOPY, SURGICAL; WITH EXCISION OF MEDIASTINAL CYST, TUMOR, OR MASS
OHANAA	Q3 2025	Inpatient Hosp	32663	CPT	THORACOSCOPY, SURGICAL; WITH LOBECTOMY, TOTAL OR SEGMENTAL
OHANAA	Q3 2025	Inpatient Hosp	32666	CPT	THORACOSCOPY, SURGICAL; WITH THERAPEUTIC WEDGE RESECTION (EG, MASS, NODULE), INITIAL UNILATERAL
OHANAA	Q3 2025	Inpatient Hosp	32667	CPT	THORACOSCOPY, SURGICAL; WITH THERAPEUTIC WEDGE RESECTION (EG, MASS OR NODULE), EACH ADDITIONAL RESECTION, IPSILATERAL (LIST SEPARA
OHANAA	Q3 2025	Inpatient Hosp	32668	CPT	THORACOSCOPY, SURGICAL; WITH DIAGNOSTIC WEDGE RESECTION FOLLOWED BY ANATOMIC LUNG RESECTION (LIST SEPARATELY IN ADDITION TO CODE F
OHANAA	Q3 2025	Inpatient Hosp	32669	CPT	THORACOSCOPY, SURGICAL; WITH REMOVAL OF A SINGLE LUNG SEGMENT (SEGMENTECTOMY)
OHANAA	Q3 2025	Inpatient Hosp	32670	CPT	THORACOSCOPY, SURGICAL; WITH REMOVAL OF 2 LOBES (BILOBECTOMY)
OHANAA	Q3 2025	Inpatient Hosp	32671	CPT	THORACOSCOPY, SURGICAL; WITH REMOVAL OF LUNG (PNEUMONECTOMY)
OHANAA	Q3 2025	Inpatient Hosp	32674	CPT	THORACOSCOPY, SURGICAL; WITH MEDIASTINAL AND REGIONAL LYMPHADENECTOMY (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
OHANAA	Q3 2025	Inpatient Hosp	33025	CPT	CREATION OF PERICARDIAL WINDOW OR PARTIAL RESECTION FOR DRAINAGE
OHANAA	Q3 2025	Inpatient Hosp	33223	CPT	RELOCATION OF SKIN POCKET FOR IMPLANTABLE DEFIBRILLATOR
OHANAA	Q3 2025	Inpatient Hosp	33241	CPT	REMOVAL OF IMPLANTABLE DEFIBRILLATOR PULSE GENERATOR ONLY
OHANAA	Q3 2025	Inpatient Hosp	33244	CPT	REMOVAL OF SINGLE OR DUAL CHAMBER IMPLANTABLE DEFIBRILLATOR ELECTRODE(S); BY TRANSVENOUS EXTRACTION
OHANAA	Q3 2025	Inpatient Hosp	33259	CPT	OPERATIVE TISSUE ABLATION AND RECONSTRUCTION OF ATRIA, PERFORMED AT THE TIME OF OTHER CARDIAC PROCEDURE(S), EXTENSIVE (EG,
OHANAA	Q3 2025	Inpatient Hosp	33305	CPT	REPAIR OF CARDIAC WOUND; WITH CARDIOPULMONARY BYPASS
OHANAA	Q3 2025	Inpatient Hosp	33310	CPT	CARDIOTOMY, EXPLORATORY (INCLUDES REMOVAL OF FOREIGN BODY, ATRIAL OR VENTRICULAR THROMBUS); WITHOUT BYPASS
OHANAA	Q3 2025	Inpatient Hosp	33315	CPT	CARDIOTOMY, EXPLORATORY (INCLUDES REMOVAL OF FOREIGN BODY, ATRIAL OR VENTRICULAR THROMBUS); WITH CARDIOPULMONARY BYPASS
OHANAA	Q3 2025	Inpatient Hosp	33340	CPT	PERCUTANEOUS TRANSCATHETER CLOSURE OF THE LEFT ATRIAL APPENDAGE WITH ENDOCARDIAL IMPLANT, INCLUDING FLUOROSCOPY, TRANSSEPTAL PUNCTURE, CATHETER PLACEN
OHANAA	Q3 2025	Inpatient Hosp	33361	CPT	TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; PERCUTANEOUS FEMORAL ARTERY APPROACH
OHANAA	Q3 2025	Inpatient Hosp	33362	CPT	TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; OPEN FEMORAL ARTERY APPROACH
OHANAA	Q3 2025	Inpatient Hosp	33363	CPT	TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; OPEN AXILLARY ARTERY APPROACH
OHANAA	Q3 2025	Inpatient Hosp	33364	CPT	TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; OPEN ILIAC ARTERY APPROACH
OHANAA	Q3 2025	Inpatient Hosp	33365	CPT	TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; TRANSAORTIC APPROACH (EG, MEDIAN STERNOTOMY, MEDIASTINOT
OHANAA	Q3 2025	Inpatient Hosp	33366	CPT	TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; TRANSAPICAL EXPOSURE (EG, LEFT THORACOTOMY)
OHANAA	Q3 2025	Inpatient Hosp	33405	CPT	REPLACEMENT, AORTIC VALVE, WITH CARDIOPULMONARY BYPASS; WITH PROSTHETIC VALVE OTHER THAN HOMOGRAFT OR STENTLESS VALVE
OHANAA	Q3 2025	Inpatient Hosp	33418	CPT	TRANSCATHETER MITRAL VALVE REPAIR, PERCUTANEOUS APPROACH, INCLUDING TRANSSEPTAL PUNCTURE WHEN PERFORMED; INITIAL PROSTHESIS
OHANAA	Q3 2025	Inpatient Hosp	33419	CPT	TRANSCATHETER MITRAL VALVE REPAIR, PERCUTANEOUS APPROACH, INCLUDING TRANSSEPTAL PUNCTURE WHEN PERFORMED; ADDITIONAL PROSTHESIS(ES) DURING SAME SESSION
OHANAA	Q3 2025	Inpatient Hosp	33426	CPT	VALVULOPLASTY, MITRAL VALVE, WITH CARDIOPULMONARY BYPASS; WITH PROSTHETIC RING
OHANAA	Q3 2025	Inpatient Hosp	33427	CPT	VALVULOPLASTY, MITRAL VALVE, WITH CARDIOPULMONARY BYPASS; RADICAL RECONSTRUCTION, WITH OR WITHOUT RING
OHANAA	Q3 2025	Inpatient Hosp	33430	CPT	REPLACEMENT, MITRAL VALVE, WITH CARDIOPULMONARY BYPASS
OHANAA	Q3 2025	Inpatient Hosp	33464	CPT	VALVULOPLASTY, TRICUSPID VALVE; WITH RING INSERTION
OHANAA	Q3 2025	Inpatient Hosp	33465	CPT	REPLACEMENT, TRICUSPID VALVE, WITH CARDIOPULMONARY BYPASS
OHANAA	Q3 2025	Inpatient Hosp	33502	CPT	REPAIR OF ANOMALOUS CORONARY ARTERY FROM PULMONARY ARTERY ORIGIN; BY LIGATION
OHANAA	Q3 2025	Inpatient Hosp	33508	CPT	ENDOSCOPY, SURGICAL, INCLUDING VIDEO-ASSISTED HARVEST OF VEIN(S) FOR CORONARY ARTERY BYPASS PROCEDURE (LIST SEPARATELY IN
OHANAA	Q3 2025	Inpatient Hosp	33510	CPT	CORONARY ARTERY BYPASS, VEIN ONLY; SINGLE CORONARY VENOUS GRAFT
OHANAA	Q3 2025	Inpatient Hosp	33511	CPT	CORONARY ARTERY BYPASS, VEIN ONLY; TWO CORONARY VENOUS GRAFTS
OHANAA	Q3 2025	Inpatient Hosp	33512	CPT	CORONARY ARTERY BYPASS, VEIN ONLY; THREE CORONARY VENOUS GRAFTS
OHANAA	Q3 2025	Inpatient Hosp	33513	CPT	CORONARY ARTERY BYPASS, VEIN ONLY; FOUR CORONARY VENOUS GRAFTS
OHANAA	Q3 2025	Inpatient Hosp	33514	CPT	CORONARY ARTERY BYPASS, VEIN ONLY; FIVE CORONARY VENOUS GRAFTS
OHANAA	Q3 2025	Inpatient Hosp	33516	CPT	CORONARY ARTERY BYPASS, VEIN ONLY; SIX OR MORE CORONARY VENOUS GRAFTS
OHANAA	Q3 2025	Inpatient Hosp	33518	CPT	CORONARY ARTERY BYPASS, USING VENOUS GRAFT(S) AND ARTERIAL GRAFT(S); TWO VENOUS GRAFTS (LIST SEPARATELY IN ADDITION TO COD
OHANAA	Q3 2025	Inpatient Hosp	33519	CPT	CORONARY ARTERY BYPASS, USING VENOUS GRAFT(S) AND ARTERIAL GRAFT(S); THREE VENOUS GRAFTS (LIST SEPARATELY IN ADDITION TO C
OHANAA	Q3 2025	Inpatient Hosp	33521	CPT	CORONARY ARTERY BYPASS, USING VENOUS GRAFT(S) AND ARTERIAL GRAFT(S); FOUR VENOUS GRAFTS (LIST SEPARATELY IN ADDITION TO CO
OHANAA	Q3 2025	Inpatient Hosp	33533	CPT	CORONARY ARTERY BYPASS, USING ARTERIAL GRAFT(S); SINGLE ARTERIAL GRAFT
OHANAA	Q3 2025	Inpatient Hosp	33534	CPT	CORONARY ARTERY BYPASS, USING ARTERIAL GRAFT(S); TWO CORONARY ARTERIAL GRAFTS
OHANAA	Q3 2025	Inpatient Hosp	33535	CPT	CORONARY ARTERY BYPASS, USING ARTERIAL GRAFT(S); THREE CORONARY ARTERIAL GRAFTS
OHANAA	Q3 2025	Inpatient Hosp	33617	CPT	REPAIR OF COMPLEX CARDIAC ANOMALIES (EG, SINGLE VENTRICLE) BY MODIFIED FONTAN PROCEDURE
OHANAA	Q3 2025	Inpatient Hosp	33641	CPT	REPAIR ATRIAL SEPTAL DEFECT, SECUNDUM, WITH CARDIOPULMONARY BYPASS, WITH OR WITHOUT PATCH
OHANAA	Q3 2025	Inpatient Hosp	33670	CPT	REPAIR OF COMPLETE ATRIOVENTRICULAR CANAL, WITH OR WITHOUT PROSTHETIC VALVE
OHANAA	Q3 2025	Inpatient Hosp	33675	CPT	CLOSURE OF MULTIPLE VENTRICULAR SEPTAL DEFECTS;
OHANAA	Q3 2025	Inpatient Hosp	33681	CPT	CLOSURE OF SINGLE VENTRICULAR SEPTAL DEFECT, WITH OR WITHOUT PATCH;
OHANAA	Q3 2025	Inpatient Hosp	33692	CPT	COMPLETE REPAIR TETRALOGY OF FALLOT WITHOUT PULMONARY ATRESIA;
OHANAA	Q3 2025	Inpatient Hosp	33697	CPT	COMPLETE REPAIR TETRALOGY OF FALLOT WITH PULMONARY ATRESIA INCLUDING CONSTRUCTION OF CONDUIT FROM RIGHT VENTRICLE TO PULMO
OHANAA	Q3 2025	Inpatient Hosp	33851	CPT	EXCISION OF COARCTATION OF AORTA, WITH OR WITHOUT ASSOCIATED PATENT DUCTUS ARTERIOSUS; REPAIR USING EITHER LEFT SUBCLAVIAN
OHANAA	Q3 2025	Inpatient Hosp	33883	CPT	PLACEMENT OF PROXIMAL EXTENSION PROSTHESIS FOR ENDOVASCULAR REPAIR OF DESCENDING THORACIC AORTA (EG, ANEURYSM, PSEUDOANEUR
OHANAA	Q3 2025	Inpatient Hosp	33917	CPT	REPAIR OF PULMONARY ARTERY STENOSIS BY RECONSTRUCTION WITH PATCH OR GRAFT
OHANAA	Q3 2025	Inpatient Hosp	34701	CPT	ENDOVASCULAR REPAIR OF INFRARENAL AORTA BY DEPLOYMENT OF AN AORTO-AORTIC TUBE ENDOGRAFT INCLUDING PRE-PROCEDURE SIZING AND DEVICE SELECTION, ALL NONSELE
OHANAA	Q3 2025	Inpatient Hosp	34702	CPT	ENDOVASCULAR REPAIR OF INFRARENAL AORTA BY DEPLOYMENT OF AN AORTO-AORTIC TUBE ENDOGRAFT INCLUDING PRE-PROCEDURE SIZING AND DEVICE SELECTION, ALL NONSELE
OHANAA	Q3 2025	Inpatient Hosp	34703	CPT	ENDOVASCULAR REPAIR OF INFRARENAL AORTA AND/OR ILIAC ARTERY(IES) BY DEPLOYMENT OF AN AORTO-UNI-ILIAC ENDOGRAFT INCLUDING PRE-PROCEDURE SIZING AND DEVICE SE
OHANAA	Q3 2025	Inpatient Hosp	34704	CPT	ENDOVASCULAR REPAIR OF INFRARENAL AORTA AND/OR ILIAC ARTERY(IES) BY DEPLOYMENT OF AN AORTO-UNI-ILIAC ENDOGRAFT INCLUDING PRE-PROCEDURE SIZING AND DEVICE SE
OHANAA	Q3 2025	Inpatient Hosp	34705	CPT	ENDOVASCULAR REPAIR OF INFRARENAL AORTA AND/OR ILIAC ARTERY(IES) BY DEPLOYMENT OF AN AORTO-BI-ILIAC ENDOGRAFT INCLUDING PRE-PROCEDURE SIZING AND DEVICE SELE
OHANAA	Q3 2025	Inpatient Hosp	34706	CPT	ENDOVASCULAR REPAIR OF INFRARENAL AORTA AND/OR ILIAC ARTERY(IES) BY DEPLOYMENT OF AN AORTO-BI-ILIAC ENDOGRAFT INCLUDING PRE-PROCEDURE SIZING AND DEVICE SELE
OHANAA	Q3 2025	Inpatient Hosp	34707	CPT	ENDOVASCULAR REPAIR OF ILIAC ARTERY BY DEPLOYMENT OF AN ILIO-ILIAC TUBE ENDOGRAFT INCLUDING PRE-PROCEDURE SIZING AND DEVICE SELECTION, ALL NONSELECTIVE CATH
OHANAA	Q3 2025	Inpatient Hosp	34708	CPT	ENDOVASCULAR REPAIR OF ILIAC ARTERY BY DEPLOYMENT OF AN ILIO-ILIAC TUBE ENDOGRAFT INCLUDING PRE-PROCEDURE SIZING AND DEVICE SELECTION, ALL NONSELECTIVE CATH
OHANAA	Q3 2025	Inpatient Hosp	34812	CPT	OPEN FEMORAL ARTERY EXPOSURE FOR DELIVERY OF ENDOVASCULAR PROSTHESIS, BY GROIN INCISION, UNILATERAL (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDU
OHANAA	Q3 2025	Inpatient Hosp	35011	CPT	DIRECT REPAIR OF ANEURYSM, PSEUDOANEURYSM, OR EXCISION (PARTIAL OR TOTAL) AND GRAFT INSERTION, WITH OR WITHOUT PATCH GRAFT
OHANAA	Q3 2025	Inpatient Hosp	35256	CPT	REPAIR BLOOD VESSEL WITH VEIN GRAFT; LOWER EXTREMITY
OHANAA	Q3 2025	Inpatient Hosp	35301	CPT	THROMBOENDARTERECTOMY, INCLUDING PATCH GRAFT, IF PERFORMED; CAROTID, VERTEBRAL, SUBCLAVIAN, BY NECK INCISION
OHANAA	Q3 2025	Inpatient Hosp	35302	CPT	THROMBOENDARTERECTOMY, INCLUDING PATCH GRAFT, IF PERFORMED; SUPERFICIAL FEMORAL ARTERY
OHANAA	Q3 2025	Inpatient Hosp	35355	CPT	THROMBOENDARTERECTOMY, INCLUDING PATCH GRAFT, IF PERFORMED; ILIOFEMORAL
OHANAA	Q3 2025	Inpatient Hosp	35371	CPT	THROMBOENDARTERECTOMY, INCLUDING PATCH GRAFT, IF PERFORMED; COMMON FEMORAL
OHANAA	Q3 2025	Inpatient Hosp	35372	CPT	THROMBOENDARTERECTOMY, INCLUDING PATCH GRAFT, IF PERFORMED; DEEP (PROFUNDA) FEMORAL
OHANAA	Q3 2025	Inpatient Hosp	35516	CPT	BYPASS GRAFT, WITH VEIN; SUBCLAVIAN-AXILLARY
OHANAA	Q3 2025	Inpatient Hosp	35525	CPT	BYPASS GRAFT, WITH VEIN; BRACHIAL-BRACHIAL
OHANAA	Q3 2025	Inpatient Hosp	35556	CPT	BYPASS GRAFT, WITH VEIN; FEMORAL-POPLITEAL

OHANAA	Q3 2025	Inpatient Hosp	35558	CPT	BYPASS GRAFT, WITH VEIN; FEMORAL-FEMORAL
OHANAA	Q3 2025	Inpatient Hosp	35566	CPT	BYPASS GRAFT, WITH VEIN; FEMORAL-ANTERIOR TIBIAL, POSTERIOR TIBIAL, PERONEAL ARTERY OR OTHER DISTAL VESSELS
OHANAA	Q3 2025	Inpatient Hosp	35572	CPT	HARVEST OF FEMOROPOPLITEAL VEIN, ONE SEGMENT, FOR VASCULAR RECONSTRUCTION PROCEDURE (EG, AORTIC, VENA CAVAL, CORONARY, PER
OHANAA	Q3 2025	Inpatient Hosp	35585	CPT	IN-SITU VEIN BYPASS; FEMORAL-ANTERIOR TIBIAL, POSTERIOR TIBIAL, OR PERONEAL ARTERY
OHANAA	Q3 2025	Inpatient Hosp	35600	CPT	HARVEST OF UPPER EXTREMITY ARTERY, ONE SEGMENT, FOR CORONARY ARTERY BYPASS PROCEDURE (LIST SEPARATELY IN ADDITION TO CODE
OHANAA	Q3 2025	Inpatient Hosp	35656	CPT	BYPASS GRAFT, WITH OTHER THAN VEIN; FEMORAL-POPLITEAL
OHANAA	Q3 2025	Inpatient Hosp	35903	CPT	EXCISION OF INFECTED GRAFT; EXTREMITY
OHANAA	Q3 2025	Inpatient Hosp	36010	CPT	INTRODUCTION OF CATHETER, SUPERIOR OR INFERIOR VENA CAVA
OHANAA	Q3 2025	Inpatient Hosp	36558	CPT	INSERTION OF TUNNELED CENTRALLY INSERTED CENTRAL VENOUS CATHETER, WITHOUT SUBCUTANEOUS PORT OR PUMP; AGE 5 YEARS OR OLDER
OHANAA	Q3 2025	Inpatient Hosp	36563	CPT	INSERTION OF TUNNELED CENTRALLY INSERTED CENTRAL VENOUS ACCESS DEVICE WITH SUBCUTANEOUS PUMP
OHANAA	Q3 2025	Inpatient Hosp	36571	CPT	INSERTION OF PERIPHERALLY INSERTED CENTRAL VENOUS ACCESS DEVICE, WITH SUBCUTANEOUS PORT; AGE 5 YEARS OR OLDER
OHANAA	Q3 2025	Inpatient Hosp	36830	CPT	CREATION OF ARTERIOVENOUS FISTULA BY OTHER THAN DIRECT ARTERIOVENOUS ANASTOMOSIS (SEPARATE PROCEDURE); NONAUTOGENOUS GRAFT
OHANAA	Q3 2025	Inpatient Hosp	37224	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL, POPLITEAL ARTERY(S), UNILATERAL; WITH TRANSLUMINAL ANGIOPLASTY
OHANAA	Q3 2025	Inpatient Hosp	37227	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL, POPLITEAL ARTERY(S), UNILATERAL; WITH TRANSLUMINAL STENT PLACEMENT
OHANAA	Q3 2025	Inpatient Hosp	37235	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL/PERONEAL ARTERY, UNILATERAL, EACH ADDITIONAL VESSEL; WITH TRANSLUMIN
OHANAA	Q3 2025	Inpatient Hosp	37237	CPT	TRANSCATHETER PLACEMENT OF AN INTRAVASCULAR STENT(S) (EXCEPT LOWER EXTREMITY, CERVICAL CAROTID, EXTRACRANIAL VERTEBRAL OR INTRATHO
OHANAA	Q3 2025	Inpatient Hosp	37238	CPT	TRANSCATHETER PLACEMENT OF AN INTRAVASCULAR STENT(S), OPEN OR PERCUTANEOUS, INCLUDING RADIOLOGICAL SUPERVISION AND INTERPRETATION
OHANAA	Q3 2025	Inpatient Hosp	37239	CPT	TRANSCATHETER PLACEMENT OF AN INTRAVASCULAR STENT(S), OPEN OR PERCUTANEOUS, INCLUDING RADIOLOGICAL SUPERVISION AND INTERPRETATION
OHANAA	Q3 2025	Inpatient Hosp	37241	CPT	VASCULAR EMBOLIZATION OR OCCLUSION, INCLUSIVE OF ALL RADIOLOGICAL SUPERVISION AND INTERPRETATION, INTRAPROCEDURAL ROADMAPPING, AND
OHANAA	Q3 2025	Inpatient Hosp	37248	CPT	TRANSLUMINAL BALLOON ANGIOPLASTY (EXCEPT DIALYSIS CIRCUIT), OPEN OR PERCUTANEOUS, INCLUDING ALL IMAGING AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NE
OHANAA	Q3 2025	Inpatient Hosp	37617	CPT	LIGATION, MAJOR ARTERY (EG, POST-TRAUMATIC, RUPTURE); ABDOMEN
OHANAA	Q3 2025	Inpatient Hosp	38100	CPT	SPLENECTOMY; TOTAL (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Inpatient Hosp	38101	CPT	SPLENECTOMY; PARTIAL (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Inpatient Hosp	38120	CPT	LAPAROSCOPY, SURGICAL, SPLENECTOMY
OHANAA	Q3 2025	Inpatient Hosp	38220	CPT	DIAGNOSTIC BONE MARROW; ASPIRATION(S)
OHANAA	Q3 2025	Inpatient Hosp	38221	CPT	DIAGNOSTIC BONE MARROW; BIOPSY(IES)
OHANAA	Q3 2025	Inpatient Hosp	38240	CPT	BONE MARROW OR BLOOD-DERIVED PERIPHERAL STEM CELL TRANSPLANTATION; ALLOGENIC
OHANAA	Q3 2025	Inpatient Hosp	38542	CPT	DISSECTION, DEEP JUGULAR NODE(S)
OHANAA	Q3 2025	Inpatient Hosp	38571	CPT	LAPAROSCOPY, SURGICAL; WITH BILATERAL TOTAL PELVIC LYMPHADENECTOMY
OHANAA	Q3 2025	Inpatient Hosp	38720	CPT	CERVICAL LYMPHADENECTOMY (COMPLETE)
OHANAA	Q3 2025	Inpatient Hosp	38724	CPT	CERVICAL LYMPHADENECTOMY (MODIFIED RADICAL NECK DISSECTION)
OHANAA	Q3 2025	Inpatient Hosp	39010	CPT	MEDIASTINOTOMY WITH EXPLORATION, DRAINAGE, REMOVAL OF FOREIGN BODY, OR BIOPSY; TRANSTHORACIC APPROACH, INCLUDING EITHER TR
OHANAA	Q3 2025	Inpatient Hosp	41130	CPT	GLOSSECTOMY; HEMIGLOSSECTOMY
OHANAA	Q3 2025	Inpatient Hosp	41150	CPT	GLOSSECTOMY; COMPOSITE PROCEDURE WITH RESECTION FLOOR OF MOUTH AND MANDIBULAR RESECTION, WITHOUT RADICAL NECK DISSECTION
OHANAA	Q3 2025	Inpatient Hosp	43191	CPT	ESOPHAGOSCOPY, RIGID, TRANSORAL; DIAGNOSTIC, INCLUDING COLLECTION OF SPECIMEN(S) BY BRUSHING OR WASHING WHEN PERFORMED (SEPARATE P
OHANAA	Q3 2025	Inpatient Hosp	43611	CPT	EXCISION, LOCAL; MALIGNANT TUMOR OF STOMACH
OHANAA	Q3 2025	Inpatient Hosp	43620	CPT	GASTRECTOMY, TOTAL; WITH ESOPHAGOENTEROSTOMY
OHANAA	Q3 2025	Inpatient Hosp	43631	CPT	GASTRECTOMY, PARTIAL, DISTAL; WITH GASTRODUODENOSTOMY
OHANAA	Q3 2025	Inpatient Hosp	43633	CPT	GASTRECTOMY, PARTIAL, DISTAL; WITH ROUX-EN-Y RECONSTRUCTION
OHANAA	Q3 2025	Inpatient Hosp	43644	CPT	LAPAROSCOPY, SURGICAL, GASTRIC RESTRICTIVE PROCEDURE; WITH GASTRIC BYPASS AND ROUX-EN-Y GASTROENTEROSTOMY (ROUX LIMB 150 C
OHANAA	Q3 2025	Inpatient Hosp	43653	CPT	LAPAROSCOPY, SURGICAL; GASTROSTOMY, WITHOUT CONSTRUCTION OF GASTRIC TUBE (EG, STAMM PROCEDURE) (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Inpatient Hosp	43659	CPT	UNLISTED LAPAROSCOPY PROCEDURE, STOMACH
OHANAA	Q3 2025	Inpatient Hosp	43775	CPT	LAPAROSCOPY, SURGICAL, GASTRIC RESTRICTIVE PROCEDURE; LONGITUDINAL GASTRECTOMY (IE, SLEEVE GASTRECTOMY)
OHANAA	Q3 2025	Inpatient Hosp	43870	CPT	CLOSURE OF GASTROSTOMY, SURGICAL
OHANAA	Q3 2025	Inpatient Hosp	44120	CPT	ENTERECTOMY, RESECTION OF SMALL INTESTINE; SINGLE RESECTION AND ANASTOMOSIS
OHANAA	Q3 2025	Inpatient Hosp	44121	CPT	ENTERECTOMY, RESECTION OF SMALL INTESTINE; EACH ADDITIONAL RESECTION AND ANASTOMOSIS (LIST SEPARATELY IN ADDITION TO CODE
OHANAA	Q3 2025	Inpatient Hosp	44139	CPT	MOBILIZATION (TAKE-DOWN) OF SPLENIC FLEXURE PERFORMED IN CONJUNCTION WITH PARTIAL COLECTOMY (LIST SEPARATELY IN ADDITION T
OHANAA	Q3 2025	Inpatient Hosp	44140	CPT	COLECTOMY, PARTIAL; WITH ANASTOMOSIS
OHANAA	Q3 2025	Inpatient Hosp	44144	CPT	COLECTOMY, PARTIAL; WITH RESECTION, WITH COLOSTOMY OR ILEOSTOMY AND CREATION OF MUCOFISTULA
OHANAA	Q3 2025	Inpatient Hosp	44145	CPT	COLECTOMY, PARTIAL; WITH COLOPROCTOSTOMY (LOW PELVIC ANASTOMOSIS)
OHANAA	Q3 2025	Inpatient Hosp	44146	CPT	COLECTOMY, PARTIAL; WITH COLOPROCTOSTOMY (LOW PELVIC ANASTOMOSIS), WITH COLOSTOMY
OHANAA	Q3 2025	Inpatient Hosp	44150	CPT	COLECTOMY, TOTAL, ABDOMINAL, WITHOUT PROCTECTOMY; WITH ILEOSTOMY OR ILEOPROCTOSTOMY
OHANAA	Q3 2025	Inpatient Hosp	44155	CPT	COLECTOMY, TOTAL, ABDOMINAL, WITH PROCTECTOMY; WITH ILEOSTOMY
OHANAA	Q3 2025	Inpatient Hosp	44156	CPT	COLECTOMY, TOTAL, ABDOMINAL, WITH PROCTECTOMY; WITH CONTINENT ILEOSTOMY
OHANAA	Q3 2025	Inpatient Hosp	44157	CPT	COLECTOMY, TOTAL, ABDOMINAL, WITH PROCTECTOMY; WITH ILEOANAL ANASTOMOSIS, INCLUDES LOOP ILEOSTOMY, AND RECTAL MUCOSECTOMY,
OHANAA	Q3 2025	Inpatient Hosp	44158	CPT	COLECTOMY, TOTAL, ABDOMINAL, WITH PROCTECTOMY; WITH ILEOANAL ANASTOMOSIS, CREATION OF ILEAL RESERVOIR (S OR J), INCLUDES L
OHANAA	Q3 2025	Inpatient Hosp	44160	CPT	COLECTOMY, PARTIAL, WITH REMOVAL OF TERMINAL ILEUM WITH ILEOCOLOSTOMY
OHANAA	Q3 2025	Inpatient Hosp	44187	CPT	LAPAROSCOPY, SURGICAL; ILEOSTOMY OR JEJUNOSTOMY, NON-TUBE
OHANAA	Q3 2025	Inpatient Hosp	44188	CPT	LAPAROSCOPY, SURGICAL, COLOSTOMY OR SKIN LEVEL CECOSTOMY
OHANAA	Q3 2025	Inpatient Hosp	44204	CPT	LAPAROSCOPY, SURGICAL; COLECTOMY, PARTIAL, WITH ANASTOMOSIS
OHANAA	Q3 2025	Inpatient Hosp	44205	CPT	LAPAROSCOPY, SURGICAL; COLECTOMY, PARTIAL, WITH REMOVAL OF TERMINAL ILEUM WITH ILEOCOLOSTOMY
OHANAA	Q3 2025	Inpatient Hosp	44206	CPT	LAPAROSCOPY, SURGICAL; COLECTOMY, PARTIAL, WITH END COLOSTOMY AND CLOSURE OF DISTAL SEGMENT (HARTMANN TYPE PROCEDURE)
OHANAA	Q3 2025	Inpatient Hosp	44207	CPT	LAPAROSCOPY, SURGICAL; COLECTOMY, PARTIAL, WITH ANASTOMOSIS, WITH COLOPROCTOSTOMY (LOW PELVIC ANASTOMOSIS)
OHANAA	Q3 2025	Inpatient Hosp	44208	CPT	LAPAROSCOPY, SURGICAL; COLECTOMY, PARTIAL, WITH ANASTOMOSIS, WITH COLOPROCTOSTOMY (LOW PELVIC ANASTOMOSIS) WITH COLOSTOMY
OHANAA	Q3 2025	Inpatient Hosp	44213	CPT	LAPAROSCOPY, SURGICAL, MOBILIZATION (TAKE-DOWN) OF SPLENIC FLEXURE PERFORMED IN CONJUNCTION WITH PARTIAL COLECTOMY (LIST S
OHANAA	Q3 2025	Inpatient Hosp	44227	CPT	LAPAROSCOPY, SURGICAL, CLOSURE OF ENTEROSTOMY, LARGE OR SMALL INTESTINE, WITH RESECTION AND ANASTOMOSIS
OHANAA	Q3 2025	Inpatient Hosp	44300	CPT	PLACEMENT, ENTEROSTOMY OR CECOSTOMY, TUBE OPEN (EG, FOR FEEDING OR DECOMPRESSION) (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Inpatient Hosp	44310	CPT	ILEOSTOMY OR JEJUNOSTOMY, NON-TUBE
OHANAA	Q3 2025	Inpatient Hosp	44320	CPT	COLOSTOMY OR SKIN LEVEL CECOSTOMY;
OHANAA	Q3 2025	Inpatient Hosp	44615	CPT	INTESTINAL STRICTUROPLASTY (ENTEROTOMY AND ENTERORRHAPHY) WITH OR WITHOUT DILATION, FOR INTESTINAL OBSTRUCTION
OHANAA	Q3 2025	Inpatient Hosp	44620	CPT	CLOSURE OF ENTEROSTOMY, LARGE OR SMALL INTESTINE;
OHANAA	Q3 2025	Inpatient Hosp	44625	CPT	CLOSURE OF ENTEROSTOMY, LARGE OR SMALL INTESTINE; WITH RESECTION AND ANASTOMOSIS OTHER THAN COLORECTAL
OHANAA	Q3 2025	Inpatient Hosp	44626	CPT	CLOSURE OF ENTEROSTOMY, LARGE OR SMALL INTESTINE; WITH RESECTION AND COLORECTAL ANASTOMOSIS (EG, CLOSURE OF HARTMANN TYPE
OHANAA	Q3 2025	Inpatient Hosp	44660	CPT	CLOSURE OF ENTEROVESICAL FISTULA; WITHOUT INTESTINAL OR BLADDER RESECTION
OHANAA	Q3 2025	Inpatient Hosp	45110	CPT	PROCTECTOMY; COMPLETE, COMBINED ABDOMINOPERINEAL, WITH COLOSTOMY
OHANAA	Q3 2025	Inpatient Hosp	45300	CPT	PROCTOSIGMOIDOSCOPY, RIGID; DIAGNOSTIC, WITH OR WITHOUT COLLECTION OF SPECIMEN(S) BY BRUSHING OR WASHING (SEPARATE PROCEDU
OHANAA	Q3 2025	Inpatient Hosp	45395	CPT	LAPAROSCOPY, SURGICAL; PROCTECTOMY, COMPLETE, COMBINED ABDOMINOPERINEAL, WITH COLOSTOMY
OHANAA	Q3 2025	Inpatient Hosp	46040	CPT	INCISION AND DRAINAGE OF ISCHIORECTAL AND/OR PERIRECTAL ABSCESS (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Inpatient Hosp	46900	CPT	DESTRUCTION OF LESION(S), ANUS (EG, CONDYLOMA, PAPILLOMA, MOLLUSCUM CONTAGIOSUM, HERPETIC VESICLE), SIMPLE; CHEMICAL
OHANAA	Q3 2025	Inpatient Hosp	46910	CPT	DESTRUCTION OF LESION(S), ANUS (EG, CONDYLOMA, PAPILLOMA, MOLLUSCUM CONTAGIOSUM, HERPETIC VESICLE), SIMPLE; ELECTRODESICCA
OHANAA	Q3 2025	Inpatient Hosp	46916	CPT	DESTRUCTION OF LESION(S), ANUS (EG, CONDYLOMA, PAPILLOMA, MOLLUSCUM CONTAGIOSUM, HERPETIC VESICLE), SIMPLE; CRYOSURGERY
OHANAA	Q3 2025	Inpatient Hosp	46917	CPT	DESTRUCTION OF LESION(S), ANUS (EG, CONDYLOMA, PAPILLOMA, MOLLUSCUM CONTAGIOSUM, HERPETIC VESICLE), SIMPLE; LASER SURGERY
OHANAA	Q3 2025	Inpatient Hosp	46922	CPT	DESTRUCTION OF LESION(S), ANUS (EG, CONDYLOMA, PAPILLOMA, MOLLUSCUM CONTAGIOSUM, HERPETIC VESICLE), SIMPLE; SURGICAL EXCIS
OHANAA	Q3 2025	Inpatient Hosp	46924	CPT	DESTRUCTION OF LESION(S), ANUS (EG, CONDYLOMA, PAPILLOMA, MOLLUSCUM CONTAGIOSUM, HERPETIC VESICLE), EXTENSIVE (EG, LASER S
OHANAA	Q3 2025	Inpatient Hosp	47120	CPT	HEPATECTOMY, RESECTION OF LIVER; PARTIAL LOBECTOMY
OHANAA	Q3 2025	Inpatient Hosp	47562	CPT	LAPAROSCOPY, SURGICAL; CHOLECYSTECTOMY
OHANAA	Q3 2025	Inpatient Hosp	47563	CPT	LAPAROSCOPY, SURGICAL; CHOLECYSTECTOMY WITH CHOLANGIOGRAPHY
OHANAA	Q3 2025	Inpatient Hosp	47600	CPT	CHOLECYSTECTOMY;
OHANAA	Q3 2025	Inpatient Hosp	47715	CPT	EXCISION OF CHOLEDOCHAL CYST
OHANAA	Q3 2025	Inpatient Hosp	48140	CPT	PANCREATECTOMY, DISTAL SUBTOTAL, WITH OR WITHOUT SPLENECTOMY; WITHOUT PANCREATICOJEJUNOSTOMY
OHANAA	Q3 2025	Inpatient Hosp	48150	CPT	PANCREATECTOMY, PROXIMAL SUBTOTAL WITH TOTAL DUODENECTOMY, PARTIAL GASTRECTOMY, CHOLEDOCHOENTEROSTOMY AND GASTROJEJUNOSTOM
OHANAA	Q3 2025	Inpatient Hosp	49000	CPT	EXPLORATORY LAPAROTOMY, EXPLORATORY CELIOTOMY WITH OR WITHOUT BIOPSY(S) (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Inpatient Hosp	49215	CPT	EXCISION OF PRESACRAL OR SACROCOCCYGEAL TUMOR
OHANAA	Q3 2025	Inpatient Hosp	49425	CPT	INSERTION OF PERITONEAL-VENOUS SHUNT
OHANAA	Q3 2025	Inpatient Hosp	49450	CPT	REPLACEMENT OF GASTROSTOMY OR CECOSTOMY (OR OTHER COLONIC) TUBE, PERCUTANEOUS, UNDER FLUOROSCOPIC GUIDANCE INCLUDING CONTR
OHANAA	Q3 2025	Inpatient Hosp	49491	CPT	REPAIR, INITIAL INGUINAL HERNIA, PRETERM INFANT (YOUNGER THAN 37 WEEKS GESTATION AT BIRTH), PERFORMED FROM BIRTH UP TO 50
OHANAA	Q3 2025	Inpatient Hosp	49492	CPT	REPAIR, INITIAL INGUINAL HERNIA, PRETERM INFANT (YOUNGER THAN 37 WEEKS GESTATION AT BIRTH), PERFORMED FROM BIRTH UP TO 50
OHANAA	Q3 2025	Inpatient Hosp	49566	CPT	REPAIR RECURRENT INCISIONAL OR VENTRAL HERNIA; INCARCERATED OR STRANGULATED

OHANAA	Q3 2025	Inpatient Hosp	49655	CPT	LAPS RPR INCISIONAL HERNIA NCRC8/STRANGULATED LAPAROSCOPY, SURGICAL, REPAIR, INCISIONAL HERNIA (INCLUDES MESH INSERTION, WHEN PE
OHANAA	Q3 2025	Inpatient Hosp	49656	CPT	LAPS RPR RECURRENT INCISIONAL HERNIA REDUCIBLE LAPAROSCOPY, SURGICAL, REPAIR, RECURRENT INCISIONAL HERNIA (INCLUDES MESH INSERTIO
OHANAA	Q3 2025	Inpatient Hosp	49657	CPT	LAPS RPR RECURRENT INCAL HRNA NCRC8/STRANGULATEDLAPAROSCOPY, SURGICAL, REPAIR, RECURRENT INCISIONAL HERNIA (INCLUDES MESH INSERTIO
OHANAA	Q3 2025	Inpatient Hosp	50200	CPT	RENAL BIOPSY; PERCUTANEOUS, BY TROCAR OR NEEDLE
OHANAA	Q3 2025	Inpatient Hosp	50220	CPT	NEPHRECTOMY, INCLUDING PARTIAL URETERECTOMY, ANY OPEN APPROACH INCLUDING RIB RESECTION;
OHANAA	Q3 2025	Inpatient Hosp	50230	CPT	NEPHRECTOMY, INCLUDING PARTIAL URETERECTOMY, ANY OPEN APPROACH INCLUDING RIB RESECTION; RADICAL, WITH REGIONAL LYMPHADENEC
OHANAA	Q3 2025	Inpatient Hosp	50240	CPT	NEPHRECTOMY, PARTIAL
OHANAA	Q3 2025	Inpatient Hosp	50280	CPT	EXCISION OR UNROOFING OF CYST(S) OF KIDNEY
OHANAA	Q3 2025	Inpatient Hosp	50380	CPT	RENAL AUTOTRANSPLANTATION, REIMPLANTATION OF KIDNEY
OHANAA	Q3 2025	Inpatient Hosp	50400	CPT	PYELOPLASTY (FOLEY Y-PYELOPLASTY), PLASTIC OPERATION ON RENAL PELVIS, WITH OR WITHOUT PLASTIC OPERATION ON URETER, NEPHROP
OHANAA	Q3 2025	Inpatient Hosp	50543	CPT	LAPAROSCOPY, SURGICAL; PARTIAL NEPHRECTOMY
OHANAA	Q3 2025	Inpatient Hosp	50544	CPT	LAPAROSCOPY, SURGICAL; PYELOPLASTY
OHANAA	Q3 2025	Inpatient Hosp	50545	CPT	LAPAROSCOPY, SURGICAL; RADICAL NEPHRECTOMY (INCLUDES REMOVAL OF GEROTA'S FASCIA AND SURROUNDING FATTY TISSUE, REMOVAL OF R
OHANAA	Q3 2025	Inpatient Hosp	50546	CPT	LAPAROSCOPY, SURGICAL; NEPHRECTOMY, INCLUDING PARTIAL URETERECTOMY
OHANAA	Q3 2025	Inpatient Hosp	50548	CPT	LAPAROSCOPY, SURGICAL; NEPHRECTOMY WITH TOTAL URETERECTOMY
OHANAA	Q3 2025	Inpatient Hosp	50592	CPT	ABLATION, ONE OR MORE RENAL TUMOR(S), PERCUTANEOUS, UNILATERAL, RADIOFREQUENCY
OHANAA	Q3 2025	Inpatient Hosp	50785	CPT	URETERONEOCYSTOSTOMY; WITH VESICO-PSOAS HITCH OR BLADDER FLAP
OHANAA	Q3 2025	Inpatient Hosp	50860	CPT	URETEROSTOMY, TRANSPLANTATION OF URETER TO SKIN
OHANAA	Q3 2025	Inpatient Hosp	50947	CPT	LAPAROSCOPY, SURGICAL; URETERONEOCYSTOSTOMY WITH CYSTOSCOPY AND URETERAL STENT PLACEMENT
OHANAA	Q3 2025	Inpatient Hosp	51050	CPT	CYSTOLITHOTOMY, CYSTOTOMY WITH REMOVAL OF CALCULUS, WITHOUT VESICAL NECK RESECTION
OHANAA	Q3 2025	Inpatient Hosp	51590	CPT	CYSTECTOMY, COMPLETE, WITH URETEROILEAL CONDUIT OR SIGMOID BLADDER, INCLUDING INTESTINE ANASTOMOSIS;
OHANAA	Q3 2025	Inpatient Hosp	51595	CPT	CYSTECTOMY, COMPLETE, WITH URETEROILEAL CONDUIT OR SIGMOID BLADDER, INCLUDING INTESTINE ANASTOMOSIS; WITH BILATERAL PELVIC
OHANAA	Q3 2025	Inpatient Hosp	51999	CPT	UNLISTED LAPAROSCOPY PROCEDURE, BLADDER
OHANAA	Q3 2025	Inpatient Hosp	53400	CPT	URETHROPLASTY; FIRST STAGE, FOR FISTULA, DIVERTICULUM, OR STRICTURE (EG, JOHANNSEN TYPE)
OHANAA	Q3 2025	Inpatient Hosp	54162	CPT	LYSIS OR EXCISION OF PENILE POST-CIRCUMCISION ADHESIONS
OHANAA	Q3 2025	Inpatient Hosp	55840	CPT	PROSTATECTOMY, RETROPUBIC RADICAL, WITH OR WITHOUT NERVE SPARING;
OHANAA	Q3 2025	Inpatient Hosp	55845	CPT	PROSTATECTOMY, RETROPUBIC RADICAL, WITH OR WITHOUT NERVE SPARING; WITH BILATERAL PELVIC LYMPHADENECTOMY, INCLUDING EXTERNA
OHANAA	Q3 2025	Inpatient Hosp	55866	CPT	LAPAROSCOPY, SURGICAL PROSTATECTOMY, RETROPUBIC RADICAL, INCLUDING NERVE SPARING
OHANAA	Q3 2025	Inpatient Hosp	55899	CPT	UNLISTED PROCEDURE, MALE GENITAL SYSTEM
OHANAA	Q3 2025	Inpatient Hosp	56632	CPT	VULVECTOMY, RADICAL, PARTIAL; WITH BILATERAL INGUINOFEMORAL LYMPHADENECTOMY
OHANAA	Q3 2025	Inpatient Hosp	57110	CPT	VAGINECTOMY, COMPLETE REMOVAL OF VAGINAL WALL;
OHANAA	Q3 2025	Inpatient Hosp	58140	CPT	MYOMECTOMY, EXCISION OF FIBROID TUMOR(S) OF UTERUS, 1 TO 4 INTRAMURAL MYOMA(S) WITH TOTAL WEIGHT OF 250 G OR LESS AND/OR R
OHANAA	Q3 2025	Inpatient Hosp	58146	CPT	MYOMECTOMY, EXCISION OF FIBROID TUMOR(S) OF UTERUS, 5 OR MORE INTRAMURAL MYOMAS AND/OR INTRAMURAL MYOMAS WITH TOTAL WEIGHT
OHANAA	Q3 2025	Inpatient Hosp	58275	CPT	VAGINAL HYSTERECTOMY, WITH TOTAL OR PARTIAL VAGINECTOMY;
OHANAA	Q3 2025	Inpatient Hosp	58575	CPT	LAPAROSCOPY, SURGICAL, TOTAL HYSTERECTOMY FOR RESECTION OF MALIGNANCY (TUMOR DEBULKING), WITH OMENTECTOMY INCLUDING SALPINGO-OOPHORECTOMY, UNILATERA
OHANAA	Q3 2025	Inpatient Hosp	58605	CPT	LIGATION OR TRANSECTION OF FALLOPIAN TUBE(S), ABDOMINAL OR VAGINAL APPROACH, POSTPARTUM, UNILATERAL OR BILATERAL, DURING S
OHANAA	Q3 2025	Inpatient Hosp	58740	CPT	LYSIS OF ADHESIONS (SALPINGOLYSIS, OVARIOLYSIS)
OHANAA	Q3 2025	Inpatient Hosp	58951	CPT	RESECTION (INITIAL) OF OVARIAN, TUBAL OR PRIMARY PERITONEAL MALIGNANCY WITH BILATERAL SALPINGO-OOPHORECTOMY AND OMENTECTOM
OHANAA	Q3 2025	Inpatient Hosp	58952	CPT	RESECTION (INITIAL) OF OVARIAN, TUBAL OR PRIMARY PERITONEAL MALIGNANCY WITH BILATERAL SALPINGO-OOPHORECTOMY AND OMENTECTOM
OHANAA	Q3 2025	Inpatient Hosp	58953	CPT	BILATERAL SALPINGO-OOPHORECTOMY WITH OMENTECTOMY, TOTAL ABDOMINAL HYSTERECTOMY AND RADICAL DISSECTION FOR DEBULKING;
OHANAA	Q3 2025	Inpatient Hosp	58954	CPT	BILATERAL SALPINGO-OOPHORECTOMY WITH OMENTECTOMY, TOTAL ABDOMINAL HYSTERECTOMY AND RADICAL DISSECTION FOR DEBULKING; WITH
OHANAA	Q3 2025	Inpatient Hosp	58956	CPT	BILATERAL SALPINGO-OOPHORECTOMY WITH TOTAL OMENTECTOMY, TOTAL ABDOMINAL HYSTERECTOMY FOR MALIGNANCY
OHANAA	Q3 2025	Inpatient Hosp	58958	CPT	RESECTION (TUMOR DEBULKING) OF RECURRENT OVARIAN, TUBAL, PRIMARY PERITONEAL, UTERINE MALIGNANCY (INTRA-ABDOMINAL, RETROPER
OHANAA	Q3 2025	Inpatient Hosp	58960	CPT	LAPAROTOMY, FOR STAGING OR RESTAGING OF OVARIAN, TUBAL, OR PRIMARY PERITONEAL MALIGNANCY (SECOND LOOK), WITH OR WITHOUT OM
OHANAA	Q3 2025	Inpatient Hosp	58999	CPT	UNLISTED PROCEDURE, FEMALE GENITAL SYSTEM (NONOBSTETRICAL)
OHANAA	Q3 2025	Inpatient Hosp	59400	CPT	ROUTINE OBSTETRIC CARE INCLUDING ANTEPARTUM CARE, VAGINAL DELIVERY (WITH OR WITHOUT EPISIOTOMY, AND/OR FORCEPS) AND POSTPA
OHANAA	Q3 2025	Inpatient Hosp	59409	CPT	VAGINAL DELIVERY ONLY (WITH OR WITHOUT EPISIOTOMY AND/OR FORCEPS);
OHANAA	Q3 2025	Inpatient Hosp	59410	CPT	VAGINAL DELIVERY ONLY (WITH OR WITHOUT EPISIOTOMY AND/OR FORCEPS); INCLUDING POSTPARTUM CARE
OHANAA	Q3 2025	Inpatient Hosp	59425	CPT	ANTEPARTUM CARE ONLY; 4-6 VISITS
OHANAA	Q3 2025	Inpatient Hosp	59426	CPT	ANTEPARTUM CARE ONLY; 7 OR MORE VISITS
OHANAA	Q3 2025	Inpatient Hosp	59510	CPT	ROUTINE OBSTETRIC CARE INCLUDING ANTEPARTUM CARE, CESAREAN DELIVERY, AND POSTPARTUM CARE
OHANAA	Q3 2025	Inpatient Hosp	59514	CPT	CESAREAN DELIVERY ONLY;
OHANAA	Q3 2025	Inpatient Hosp	59610	CPT	ROUTINE OBSTETRIC CARE INCLUDING ANTEPARTUM CARE, VAGINAL DELIVERY (WITH OR WITHOUT EPISIOTOMY, AND/OR FORCEPS) AND POSTPA
OHANAA	Q3 2025	Inpatient Hosp	59612	CPT	VAGINAL DELIVERY ONLY, AFTER PREVIOUS CESAREAN DELIVERY (WITH OR WITHOUT EPISIOTOMY AND/OR FORCEPS);
OHANAA	Q3 2025	Inpatient Hosp	59614	CPT	VAGINAL DELIVERY ONLY, AFTER PREVIOUS CESAREAN DELIVERY (WITH OR WITHOUT EPISIOTOMY AND/OR FORCEPS); INCLUDING POSTPARTUM
OHANAA	Q3 2025	Inpatient Hosp	59618	CPT	ROUTINE OBSTETRIC CARE INCLUDING ANTEPARTUM CARE, CESAREAN DELIVERY, AND POSTPARTUM CARE, FOLLOWING ATTEMPTED VAGINAL DELI
OHANAA	Q3 2025	Inpatient Hosp	59620	CPT	CESAREAN DELIVERY ONLY, FOLLOWING ATTEMPTED VAGINAL DELIVERY AFTER PREVIOUS CESAREAN DELIVERY;
OHANAA	Q3 2025	Inpatient Hosp	59622	CPT	CESAREAN DELIVERY ONLY, FOLLOWING ATTEMPTED VAGINAL DELIVERY AFTER PREVIOUS CESAREAN DELIVERY; INCLUDING POSTPARTUM CARE
OHANAA	Q3 2025	Inpatient Hosp	60520	CPT	THYMECTOMY, PARTIAL OR TOTAL; TRANSCERVICAL APPROACH (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Inpatient Hosp	60521	CPT	THYMECTOMY, PARTIAL OR TOTAL; STERNAL SPLIT OR TRANSTHORACIC APPROACH, WITHOUT RADICAL MEDIASTINAL DISSECTION (SEPARATE PR
OHANAA	Q3 2025	Inpatient Hosp	60522	CPT	THYMECTOMY, PARTIAL OR TOTAL; STERNAL SPLIT OR TRANSTHORACIC APPROACH, WITH RADICAL MEDIASTINAL DISSECTION (SEPARATE PROCE
OHANAA	Q3 2025	Inpatient Hosp	60650	CPT	LAPAROSCOPY, SURGICAL, WITH ADRENALECTOMY, PARTIAL OR COMPLETE, OR EXPLORATION OF ADRENAL GLAND WITH OR WITHOUT BIOPSY, TR
OHANAA	Q3 2025	Inpatient Hosp	61500	CPT	CRANIECTOMY; WITH EXCISION OF TUMOR OR OTHER BONE LESION OF SKULL
OHANAA	Q3 2025	Inpatient Hosp	61510	CPT	CRANIECTOMY, TREPHINATION, BONE FLAP CRANIOTOMY; FOR EXCISION OF BRAIN TUMOR, SUPRATENTORIAL, EXCEPT MENINGIOMA
OHANAA	Q3 2025	Inpatient Hosp	61512	CPT	CRANIECTOMY, TREPHINATION, BONE FLAP CRANIOTOMY; FOR EXCISION OF MENINGIOMA, SUPRATENTORIAL
OHANAA	Q3 2025	Inpatient Hosp	61518	CPT	CRANIECTOMY FOR EXCISION OF BRAIN TUMOR, INFRATENTORIAL OR POSTERIOR FOSSA; EXCEPT MENINGIOMA, CEREBELLOPONTINE ANGLE TUMO
OHANAA	Q3 2025	Inpatient Hosp	61535	CPT	CRANIOTOMY WITH ELEVATION OF BONE FLAP; FOR REMOVAL OF EPIDURAL OR SUBDURAL ELECTRODE ARRAY, WITHOUT EXCISION OF CEREBRAL
OHANAA	Q3 2025	Inpatient Hosp	61548	CPT	HYPOPHYSECTOMY OR EXCISION OF PITUITARY TUMOR, TRANSNASAL OR TRANSSEPTAL APPROACH, NONSTEREOTACTIC
OHANAA	Q3 2025	Inpatient Hosp	61550	CPT	CRANIECTOMY FOR CRANIOSYNOSTOSIS; SINGLE CRANIAL SUTURE
OHANAA	Q3 2025	Inpatient Hosp	61552	CPT	CRANIECTOMY FOR CRANIOSYNOSTOSIS; MULTIPLE CRANIAL SUTURES
OHANAA	Q3 2025	Inpatient Hosp	61557	CPT	CRANIOTOMY FOR CRANIOSYNOSTOSIS; BIFRONTAL BONE FLAP
OHANAA	Q3 2025	Inpatient Hosp	61558	CPT	EXTENSIVE CRANIECTOMY FOR MULTIPLE CRANIAL SUTURE CRANIOSYNOSTOSIS (EG, CLOVERLEAF SKULL); NOT REQUIRING BONE GRAFTS
OHANAA	Q3 2025	Inpatient Hosp	61559	CPT	EXTENSIVE CRANIECTOMY FOR MULTIPLE CRANIAL SUTURE CRANIOSYNOSTOSIS (EG, CLOVERLEAF SKULL); RECONTOURING WITH MULTIPLE OSTE
OHANAA	Q3 2025	Inpatient Hosp	61624	CPT	TRANSCATHETER PERMANENT OCCLUSION OR EMBOLIZATION (EG, FOR TUMOR DESTRUCTION, TO ACHIEVE HEMOSTASIS, TO OCCLUDE A VASCULAR
OHANAA	Q3 2025	Inpatient Hosp	61711	CPT	ANASTOMOSIS, ARTERIAL, EXTRACRANIAL-INTRACRANIAL (EG, MIDDLE CEREBRAL/CORTICAL) ARTERIES
OHANAA	Q3 2025	Inpatient Hosp	61751	CPT	STEREOTACTIC BIOPSY, ASPIRATION, OR EXCISION, INCLUDING BURR HOLE(S), FOR INTRACRANIAL LESION; WITH COMPUTED TOMOGRAPHY AN
OHANAA	Q3 2025	Inpatient Hosp	61760	CPT	STEREOTACTIC IMPLANTATION OF DEPTH ELECTRODES INTO THE CEREBRUM FOR LONG-TERM SEIZURE MONITORING
OHANAA	Q3 2025	Inpatient Hosp	61781	CPT	STEREOTACTIC COMPUTER-ASSISTED (NAVIGATIONAL) PROCEDURE; CRANIAL, INTRADURAL (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROC
OHANAA	Q3 2025	Inpatient Hosp	61860	CPT	CRANIECTOMY OR CRANIOTOMY FOR IMPLANTATION OF NEUROSTIMULATOR ELECTRODES, CEREBRAL, CORTICAL
OHANAA	Q3 2025	Inpatient Hosp	61880	CPT	REVISION OR REMOVAL OF INTRACRANIAL NEUROSTIMULATOR ELECTRODES
OHANAA	Q3 2025	Inpatient Hosp	61888	CPT	REVISION OR REMOVAL OF CRANIAL NEUROSTIMULATOR PULSE GENERATOR OR RECEIVER
OHANAA	Q3 2025	Inpatient Hosp	62120	CPT	REPAIR OF ENCEPHALOCELE, SKULL VAULT, INCLUDING CRANIOPLASTY
OHANAA	Q3 2025	Inpatient Hosp	62140	CPT	CRANIOPLASTY FOR SKULL DEFECT; UP TO 5 CM DIAMETER
OHANAA	Q3 2025	Inpatient Hosp	62141	CPT	CRANIOPLASTY FOR SKULL DEFECT; LARGER THAN 5 CM DIAMETER
OHANAA	Q3 2025	Inpatient Hosp	62160	CPT	NEUROENDOSCOPY, INTRACRANIAL, FOR PLACEMENT OR REPLACEMENT OF VENTRICULAR CATHETER AND ATTACHMENT TO SHUNT SYSTEM OR EXTER
OHANAA	Q3 2025	Inpatient Hosp	62223	CPT	CREATION OF SHUNT; VENTRICULO-PERITONEAL, -PLEURAL, OTHER TERMINUS
OHANAA	Q3 2025	Inpatient Hosp	62230	CPT	REPLACEMENT OR REVISION OF CEREBROSPINAL FLUID SHUNT, OBSTRUCTED VALVE, OR DISTAL CATHETER IN SHUNT SYSTEM
OHANAA	Q3 2025	Inpatient Hosp	62365	CPT	REMOVAL OF SUBCUTANEOUS RESERVOIR OR PUMP, PREVIOUSLY IMPLANTED FOR INTRATHECAL OR EPIDURAL INFUSION
OHANAA	Q3 2025	Inpatient Hosp	63012	CPT	LAMINECTOMY WITH REMOVAL OF ABNORMAL FACETS AND/OR PARS INTER-ARTICULARIS WITH DECOMPRESSION OF CAUDA EQUINA AND NERVE ROO
OHANAA	Q3 2025	Inpatient Hosp	63035	CPT	LAMINOTOMY (HEMILAMINECTOMY), WITH DECOMPRESSION OF NERVE ROOT(S), INCLUDING PARTIAL FACETECTOMY, FORAMINOTOMY AND/OR EXCI
OHANAA	Q3 2025	Inpatient Hosp	63045	CPT	LAMINECTOMY, FACETECTOMY AND FORAMINOTOMY (UNILATERAL OR BILATERAL WITH DECOMPRESSION OF SPINAL CORD, CAUDA EQUINA AND/OR
OHANAA	Q3 2025	Inpatient Hosp	63046	CPT	LAMINECTOMY, FACETECTOMY AND FORAMINOTOMY (UNILATERAL OR BILATERAL WITH DECOMPRESSION OF SPINAL CORD, CAUDA EQUINA AND/OR
OHANAA	Q3 2025	Inpatient Hosp	63047	CPT	LAMINECTOMY, FACETECTOMY AND FORAMINOTOMY (UNILATERAL OR BILATERAL WITH DECOMPRESSION OF SPINAL CORD, CAUDA EQUINA AND/OR
OHANAA	Q3 2025	Inpatient Hosp	63050	CPT	LAMINOPLASTY, CERVICAL, WITH DECOMPRESSION OF THE SPINAL CORD, TWO OR MORE VERTEBRAL SEGMENTS;
OHANAA	Q3 2025	Inpatient Hosp	63051	CPT	LAMINOPLASTY, CERVICAL, WITH DECOMPRESSION OF THE SPINAL CORD, TWO OR MORE VERTEBRAL SEGMENTS; WITH RECONSTRUCTION OF THE
OHANAA	Q3 2025	Inpatient Hosp	63056	CPT	TRANSPEDICULAR APPROACH WITH DECOMPRESSION OF SPINAL CORD, EQUINA AND/OR NERVE ROOT(S) (EG, HERNIATED INTERVERTEBRAL DISC)
OHANAA	Q3 2025	Inpatient Hosp	63090	CPT	VERTEBRAL CORPECTOMY (VERTEBRAL BODY RESECTION), PARTIAL OR COMPLETE, TRANSPERITONEAL OR RETROPERITONEAL APPROACH WITH DEC
OHANAA	Q3 2025	Inpatient Hosp	63267	CPT	LAMINECTOMY FOR EXCISION OR EVACUATION OF INTRASPINAL LESION OTHER THAN NEOPLASM, EXTRADURAL; LUMBAR

OHANAA	Q3 2025	Inpatient Hosp	63707	CPT	REPAIR OF DURAL/CEREBROSPINAL FLUID LEAK, NOT REQUIRING LAMINECTOMY
OHANAA	Q3 2025	Inpatient Hosp	64486	CPT	TRANSVERSUS ABDOMINIS PLANE (TAP) BLOCK (ABDOMINAL PLANE BLOCK, RECTUS SHEATH BLOCK) UNILATERAL; BY INJECTION(S) (INCLUDES IMAGING GUIDANCE, WHEN PERFORMED
OHANAA	Q3 2025	Inpatient Hosp	64611	CPT	CHEMODENERVATION OF PAROTID AND SUBMANDIBULAR SALIVARY GLANDS, BILATERAL
OHANAA	Q3 2025	Inpatient Hosp	64616	CPT	CHEMODENERVATION OF MUSCLE(S); NECK MUSCLE(S), EXCLUDING MUSCLES OF THE LARYNX, UNILATERAL (EG, FOR CERVICAL DYSTONIA, SPASMODIC T
OHANAA	Q3 2025	Inpatient Hosp	64646	CPT	CHEMODENERVATION OF TRUNK MUSCLE(S); 1-5 MUSCLE(S)
OHANAA	Q3 2025	Inpatient Hosp	69990	CPT	MICROSURGICAL TECHNIQUES, REQUIRING USE OF OPERATING MICROSCOPE (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE
OHANAA	Q3 2025	Inpatient Hosp	71046	CPT	RADIOLOGIC EXAMINATION, CHEST; 2 VIEWS
OHANAA	Q3 2025	Inpatient Hosp	75825	CPT	VENOGRAPHY, CAVAL, INFERIOR, WITH SERIALOGRAPHY, RADIOLOGICAL SUPERVISION AND INTERPRETATION
OHANAA	Q3 2025	Inpatient Hosp	75827	CPT	VENOGRAPHY, CAVAL, SUPERIOR, WITH SERIALOGRAPHY, RADIOLOGICAL SUPERVISION AND INTERPRETATION
OHANAA	Q3 2025	Inpatient Hosp	75894	CPT	TRANSCATHETER THERAPY, EMBOLIZATION, ANY METHOD, RADIOLOGICAL SUPERVISION AND INTERPRETATION
OHANAA	Q3 2025	Inpatient Hosp	75898	CPT	ANGIOGRAPHY THROUGH EXISTING CATHETER FOR FOLLOW-UP STUDY FOR TRANSCATHETER THERAPY, EMBOLIZATION OR INFUSION
OHANAA	Q3 2025	Inpatient Hosp	76776	CPT	ULTRASOUND, TRANSPLANTED KIDNEY, REAL TIME AND DUPLEX DOPPLER WITH IMAGE DOCUMENTATION
OHANAA	Q3 2025	Inpatient Hosp	81001	CPT	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN, KETONES, LEUKOCYTES, NITRITE, PH, PROTEIN,
OHANAA	Q3 2025	Inpatient Hosp	81507	CPT	FETAL ANEUPLOIDY (TRISOMY 21, 18, AND 13) DNA SEQUENCE ANALYSIS OF SELECTED REGIONS USING MATERNAL PLASMA, ALGORITHM REPORTED AS A
OHANAA	Q3 2025	Inpatient Hosp	82565	CPT	CREATININE; BLOOD
OHANAA	Q3 2025	Inpatient Hosp	82575	CPT	CREATININE; CLEARANCE
OHANAA	Q3 2025	Inpatient Hosp	83735	CPT	MAGNESIUM
OHANAA	Q3 2025	Inpatient Hosp	84100	CPT	PHOSPHORUS INORGANIC (PHOSPHATE);
OHANAA	Q3 2025	Inpatient Hosp	84156	CPT	PROTEIN, TOTAL, EXCEPT BY REFRACTOMETRY; URINE
OHANAA	Q3 2025	Inpatient Hosp	84550	CPT	URIC ACID; BLOOD
OHANAA	Q3 2025	Inpatient Hosp	85610	CPT	PROTHROMBIN TIME;
OHANAA	Q3 2025	Inpatient Hosp	85730	CPT	THROMBOPLASTIN TIME, PARTIAL (PTT); PLASMA OR WHOLE BLOOD
OHANAA	Q3 2025	Inpatient Hosp	86021	CPT	ANTIBODY IDENTIFICATION; LEUKOCYTE ANTIBODIES
OHANAA	Q3 2025	Inpatient Hosp	86329	CPT	IMMUNODIFFUSION; NOT ELSEWHERE SPECIFIED
OHANAA	Q3 2025	Inpatient Hosp	86480	CPT	TUBERCULOSIS TEST, CELL MEDIATED IMMUNITY MEASUREMENT OF GAMMA INTERFERON ANTIGEN RESPONSE
OHANAA	Q3 2025	Inpatient Hosp	86592	CPT	SYPHILIS TEST; QUALITATIVE (EG, VDRL, RPR, ART)
OHANAA	Q3 2025	Inpatient Hosp	86644	CPT	ANTIBODY; CYTOMEGALOVIRUS (CMV)
OHANAA	Q3 2025	Inpatient Hosp	86687	CPT	ANTIBODY; HTLV-I
OHANAA	Q3 2025	Inpatient Hosp	86688	CPT	ANTIBODY; HTLV-II
OHANAA	Q3 2025	Inpatient Hosp	86695	CPT	ANTIBODY; HERPES SIMPLEX, TYPE 1
OHANAA	Q3 2025	Inpatient Hosp	86703	CPT	ANTIBODY; HIV-1 AND HIV-2, SINGLE ASSAY
OHANAA	Q3 2025	Inpatient Hosp	86704	CPT	HEPATITIS B CORE ANTIBODY (HBCAB); TOTAL
OHANAA	Q3 2025	Inpatient Hosp	86705	CPT	HEPATITIS B CORE ANTIBODY (HBCAB); IGM ANTIBODY
OHANAA	Q3 2025	Inpatient Hosp	86706	CPT	HEPATITIS B SURFACE ANTIBODY (HBSAB)
OHANAA	Q3 2025	Inpatient Hosp	86708	CPT	HEPATITIS A ANTIBODY (HAAB)
OHANAA	Q3 2025	Inpatient Hosp	86777	CPT	ANTIBODY; TOXOPLASMA
OHANAA	Q3 2025	Inpatient Hosp	86803	CPT	HEPATITIS C ANTIBODY;
OHANAA	Q3 2025	Inpatient Hosp	86806	CPT	LYMPHOCYTOTOXICITY ASSAY, VISUAL CROSSMATCH; WITHOUT TITRATION
OHANAA	Q3 2025	Inpatient Hosp	86807	CPT	SERUM SCREENING FOR CYTOTOXIC PERCENT REACTIVE ANTIBODY (PRA); STANDARD METHOD
OHANAA	Q3 2025	Inpatient Hosp	86850	CPT	ANTIBODY SCREEN, RBC, EACH SERUM TECHNIQUE
OHANAA	Q3 2025	Inpatient Hosp	86900	CPT	BLOOD TYPING, SEROLOGIC; ABO
OHANAA	Q3 2025	Inpatient Hosp	86901	CPT	BLOOD TYPING, SEROLOGIC; RH (D)
OHANAA	Q3 2025	Inpatient Hosp	86922	CPT	COMPATIBILITY TEST EACH UNIT; ANTIGLOBULIN TECHNIQUE
OHANAA	Q3 2025	Inpatient Hosp	87290	CPT	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE; VARICELLA ZOSTER VIRUS
OHANAA	Q3 2025	Inpatient Hosp	87340	CPT	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOASSAY TECHNIQUE, (EG, ENZYME IMMUNOASSAY [EIA], ENZYME-LINKED IMMUNOSORBENT ASSAY [ELISA], IMMUNOCHEMILUMINO
OHANAA	Q3 2025	Inpatient Hosp	87522	CPT	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HEPATITIS C, QUANTIFICATION
OHANAA	Q3 2025	Inpatient Hosp	88182	CPT	FLOW CYTOMETRY, CELL CYCLE OR DNA ANALYSIS
OHANAA	Q3 2025	Inpatient Hosp	92990	CPT	PERCUTANEOUS BALLOON VALVULOPLASTY; PULMONARY VALVE
OHANAA	Q3 2025	Inpatient Hosp	92997	CPT	PERCUTANEOUS TRANSLUMINAL PULMONARY ARTERY BALLOON ANGIOPLASTY; SINGLE VESSEL
OHANAA	Q3 2025	Inpatient Hosp	93005	CPT	ELECTROCARDIOGRAM, ROUTINE ECG WITH AT LEAST 12 LEADS; TRACING ONLY, WITHOUT INTERPRETATION AND REPORT
OHANAA	Q3 2025	Inpatient Hosp	93355	CPT	ECHOCARDIOGRAPHY, TRANSESOPHAGEAL (TEE) FOR GUIDANCE OF A TRANSCATHETER INTRACARDIAC OR GREAT VESSEL(S) STRUCTURAL INTERVENTION(S) (EG,TAVR, TRANSCATHETH
OHANAA	Q3 2025	Inpatient Hosp	93565	CPT	INJECTION PROCEDURE DURING CARDIAC CATHETERIZATION INCLUDING IMAGING SUPERVISION, INTERPRETATION, AND REPORT; FOR SELECTIVE LEFT V
OHANAA	Q3 2025	Inpatient Hosp	93566	CPT	INJECTION PROCEDURE DURING CARDIAC CATHETERIZATION INCLUDING IMAGING SUPERVISION, INTERPRETATION, AND REPORT; FOR SELECTIVE RIGHT
OHANAA	Q3 2025	Inpatient Hosp	93568	CPT	INJECTION PROCEDURE DURING CARDIAC CATHETERIZATION INCLUDING IMAGING SUPERVISION, INTERPRETATION, AND REPORT; FOR PULMONARY ANGIOG
OHANAA	Q3 2025	Inpatient Hosp	94002	CPT	VENTILATION ASSIST AND MANAGEMENT, INITIATION OF PRESSURE OR VOLUME PRESET VENTILATORS FOR ASSISTED OR CONTROLLED BREATHIN
OHANAA	Q3 2025	Inpatient Hosp	94003	CPT	VENTILATION ASSIST AND MANAGEMENT, INITIATION OF PRESSURE OR VOLUME PRESET VENTILATORS FOR ASSISTED OR CONTROLLED BREATHIN
OHANAA	Q3 2025	Inpatient Hosp	94010	CPT	SPIROMETRY, INCLUDING GRAPHIC RECORD, TOTAL AND TIMED VITAL CAPACITY, EXPIRATORY FLOW RATE MEASUREMENT(S), WITH OR WITHOUT
OHANAA	Q3 2025	Inpatient Hosp	94726	CPT	PLETHYSMOGRAPHY FOR DETERMINATION OF LUNG VOLUMES AND, WHEN PERFORMED, AIRWAY RESISTANCE
OHANAA	Q3 2025	Inpatient Hosp	94727	CPT	GAS DILUTION OR WASHOUT FOR DETERMINATION OF LUNG VOLUMES AND, WHEN PERFORMED, DISTRIBUTION OF VENTILATION AND CLOSING VOLUMES
OHANAA	Q3 2025	Inpatient Hosp	95720	CPT	ELECTROENCEPHALOGRAM (EEG), CONTINUOUS RECORDING, PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL REVIEW OF RECORDED EVENTS, ANALYSIS OF SPIKE AND
OHANAA	Q3 2025	Inpatient Hosp	95965	CPT	MAGNETOENCEPHALOGRAPHY (MEG), RECORDING AND ANALYSIS; FOR SPONTANEOUS BRAIN MAGNETIC ACTIVITY (EG, EPILEPTIC CEREBRAL CORT
OHANAA	Q3 2025	Inpatient Hosp	96156	CPT	HEALTH BEHAVIOR ASSESSMENT, OR RE-ASSESSMENT (IE, HEALTH-FOCUSED CLINICAL INTERVIEW, BEHAVIORAL OBSERVATIONS, CLINICAL DECISION MAKING)
OHANAA	Q3 2025	Inpatient Hosp	96416	CPT	CHEMOTHERAPY ADMINISTRATION, INTRAVENOUS INFUSION TECHNIQUE; INITIATION OF PROLONGED CHEMOTHERAPY INFUSION (MORE THAN 8 HO
OHANAA	Q3 2025	Inpatient Hosp	99026	CPT	HOSPITAL MANDATED ON CALL SERVICE; IN-HOSPITAL, EACH HOUR
OHANAA	Q3 2025	Inpatient Hosp	99027	CPT	HOSPITAL MANDATED ON CALL SERVICE; OUT-OF-HOSPITAL, EACH HOUR
OHANAA	Q3 2025	Inpatient Hosp	99199	CPT	UNLISTED SPECIAL SERVICE, PROCEDURE OR REPORT
OHANAA	Q3 2025	Inpatient Hosp	99220	CPT	INITIAL OBSERVATION CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES THESE 3 KEY COMPONENTS: A COMPREHENSIVE HISTORY; A COMPRE
OHANAA	Q3 2025	Inpatient Hosp	99221	CPT	INITIAL HOSPITAL CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES THESE 3 KEY COMPONENTS: A D
OHANAA	Q3 2025	Inpatient Hosp	99222	CPT	INITIAL HOSPITAL CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES THESE 3 KEY COMPONENTS: A C
OHANAA	Q3 2025	Inpatient Hosp	99223	CPT	INITIAL HOSPITAL CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES THESE 3 KEY COMPONENTS: A C
OHANAA	Q3 2025	Inpatient Hosp	99234	CPT	OBSERVATION OR INPATIENT HOSPITAL CARE, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT INCLUDING ADMISSION AND DISCHARGE O
OHANAA	Q3 2025	Inpatient Hosp	99235	CPT	OBSERVATION OR INPATIENT HOSPITAL CARE, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT INCLUDING ADMISSION AND DISCHARGE O
OHANAA	Q3 2025	Inpatient Hosp	99236	CPT	OBSERVATION OR INPATIENT HOSPITAL CARE, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT INCLUDING ADMISSION AND DISCHARGE O
OHANAA	Q3 2025	Inpatient Hosp	G0531	HCPCS	FACILITY-BASED RESPITE 24-HOUR UNIT
OHANAA	Q3 2025	Inpatient Hosp	H0017	HCPCS	BEHAVIORAL HEALTH; RESIDENTIAL (HOSPITAL RESIDENTIAL TREATMENT PROGRAM), WITHOUT ROOM AND BOARD, PER DIEM
OHANAA	Q3 2025	Inpatient Hosp	H0019	HCPCS	BEHAVIORAL HEALTH; LONG-TERM RESIDENTIAL (NONMEDICAL, NONACUTE CARE IN A RESIDENTIAL TREATMENT PROGRAM WHERE STAY IS TYPICALLY LO
OHANAA	Q3 2025	Inpatient Hosp	H0035	HCPCS	MENTAL HEALTH PARTIAL HOSPITALIZATION, TREATMENT, LESS THAN 24 HOURS
OHANAA	Q3 2025	Inpatient Hosp	H0045	HCPCS	RESPITE CARE SERVICES, NOT IN THE HOME, PER DIEM
OHANAA	Q3 2025	Inpatient Hosp	H1000	HCPCS	PRENATAL CARE, AT-RISK ASSESSMENT
OHANAA	Q3 2025	Inpatient Hosp	H1005	HCPCS	PRENATAL CARE, AT-RISK ENHANCED SERVICE PACKAGE (INCLUDES H1001-H1004)
OHANAA	Q3 2025	Inpatient Hosp	S2900	HCPCS	SURGICAL TECHNIQUES REQUIRING USE OF ROBOTIC SURGICAL SYSTEM (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
OHANAA	Q3 2025	Inpatient Hosp	S5150	HCPCS	UNSKILLED RESPITE CARE, NOT HOSPICE; PER 15 MINUTES
OHANAA	Q3 2025	Inpatient Hosp	T1005	HCPCS	RESPITE CARE SERVICES, UP TO 15 MINUTES
OHANAA	Q3 2025	Other	T2050	HCPCS	FINANCIAL MANAGEMENT SELF-DIRECTED WAIVER PD
OHANAA	Q3 2025	Other	T2051	HCPCS	SUPPORTS BROKERAGE SELF-DIRECTED WAIVER PD
OHANAA	Q3 2025	Outpatient Hosp	170	CPT	ANESTHESIA FOR INTRAORAL PROCEDURES, INCLUDING BIOPSY; NOT OTHERWISE SPECIFIED
OHANAA	Q3 2025	Outpatient Hosp	811	CPT	ANESTHESIA FOR LOWER INTESTINAL ENDOSCOPIC PROCEDURES, ENDOSCOPE INTRODUCED DISTAL TO DUODENUM; NOT OTHERWISE SPECIFIED
OHANAA	Q3 2025	Outpatient Hosp	812	CPT	ANESTHESIA FOR LOWER INTESTINAL ENDOSCOPIC PROCEDURES, ENDOSCOPE INTRODUCED DISTAL TO DUODENUM; SCREENING COLONOSCOPY
OHANAA	Q3 2025	Outpatient Hosp	813	CPT	ANESTHESIA FOR COMBINED UPPER AND LOWER GASTROINTESTINAL ENDOSCOPIC PROCEDURES, ENDOSCOPE INTRODUCED BOTH PROXIMAL
OHANAA	Q3 2025	Outpatient Hosp	921	CPT	ANESTHESIA FOR PROCEDURES ON MALE GENITALIA (INCLUDING OPEN URETHRAL PROCEDURES); VASECTOMY, UNILATERAL OR BILATERAL
OHANAA	Q3 2025	Outpatient Hosp	948	CPT	ANESTHESIA FOR VAGINAL PROCEDURES (INCLUDING BIOPSY OF LABIA, VAGINA, CERVIX OR ENDOMETRIUM); CERVICAL CERCLAGE
OHANAA	Q3 2025	Outpatient Hosp	0402T	CPT	COLLAGEN CROSS-LINKING OF CORNEA (INCLUDING REMOVAL OF THE CORNEAL EPITHELIUM AND INTRAOPERATIVE PACHYMETRY WHEN PERFORMED)
OHANAA	Q3 2025	Outpatient Hosp	0402T	CPT	COLLAGEN CROSS-LINKING OF CORNEA (INCLUDING REMOVAL OF THE CORNEAL EPITHELIUM AND INTRAOPERATIVE PACHYMETRY WHEN PERFORMED)
OHANAA	Q3 2025	Outpatient Hosp	0449T	CPT	INSERTION OF AQUEOUS DRAINAGE DEVICE, WITHOUT EXTRAOCULAR RESERVOIR, INTERNAL APPROACH, INTO THE SUBCONJUNCTIVAL SPACE; INITIAL DEVICE
OHANAA	Q3 2025	Outpatient Hosp	0640T	CPT	NCNTC NR IFR SPECTRSC FLAP/WND IMG ACQUISJ I AND R
OHANAA	Q3 2025	Outpatient Hosp	0647T	CPT	INSJ GASTROSTOMY TUBE PERQ W/MAGNETIC GASTROPEXY
OHANAA	Q3 2025	Outpatient Hosp	0648T	CPT	QUAN MR ALYS TISS COMPOSITION W/O MRI SAME SESS
OHANAA	Q3 2025	Outpatient Hosp	0649T	CPT	QUAN MR ALYS TISS COMPOSITION W/MRI

OHANAA	Q3 2025	Outpatient Hosp	0650T	CPT	PRGRMG DEV EVAL SCRMS PHYS/QHP REMOTE
OHANAA	Q3 2025	Outpatient Hosp	0651T	CPT	MAGNETICALLY CONTROLLED CAPSULE ENDOSCOPY W/I AND R
OHANAA	Q3 2025	Outpatient Hosp	0652T	CPT	EGD FLEXIBLE TRANSNASAL DX W/COLLJ SPEC BR/WA
OHANAA	Q3 2025	Outpatient Hosp	0653T	CPT	EGD FLEXIBLE TRANSNASAL W/BIOPSY SINGLE/MULTIPLE
OHANAA	Q3 2025	Outpatient Hosp	0654T	CPT	EGD FLEXIBLE TRANSNASAL W/INSJ INTRAL TUBE/CATH
OHANAA	Q3 2025	Outpatient Hosp	0655T	CPT	TRANSPERINEAL FOCAL LASER ABLTJ MAL PRST8 TISS
OHANAA	Q3 2025	Outpatient Hosp	0658T	CPT	ELECTRICAL IMPEDENCE SPECTROSCOPY 1+SKIN LESIONS
OHANAA	Q3 2025	Outpatient Hosp	0660T	CPT	IMPLTJ ANT SGM IO NBIODEGRADABLE RX ELUTING SYS
OHANAA	Q3 2025	Outpatient Hosp	0661T	CPT	RMVL AND RIMPLTJ ANT SGM IO NBIODGRD RX ELUT IMPLT
OHANAA	Q3 2025	Outpatient Hosp	0662T	CPT	SCALP COOLING 1ST MEASUREMENT AND CAP CALIBRATION
OHANAA	Q3 2025	Outpatient Hosp	0663T	CPT	SCALP COOLING PLACEMENT MNTR AND REMOVAL OF DEVICE
OHANAA	Q3 2025	Outpatient Hosp	0664T	CPT	DONOR HYSTERECTOMY OPEN FROM CADAVER DONOR
OHANAA	Q3 2025	Outpatient Hosp	0714T	CPT	TPRNL LSR ABLTJ B9 PROSTATIC HYPERPLASIA W/IMG
OHANAA	Q3 2025	Outpatient Hosp	0716T	CPT	CARDIAC ACOUS WAVFRM REC AUTO ALYS CAD RSK SCORE
OHANAA	Q3 2025	Outpatient Hosp	0717T	CPT	ADRC THER PRTL THICKNESS RC TEAR
OHANAA	Q3 2025	Outpatient Hosp	0718T	CPT	ADRC THER PRTL THICKNESS RC TEAR NJX TENDON UNI
OHANAA	Q3 2025	Outpatient Hosp	0719T	CPT	PST VERTEBRAL JOINT RPLCMT LUMBAR SPI SINGLE SGM
OHANAA	Q3 2025	Outpatient Hosp	0720T	CPT	PERQ ELEC NRV FIELD STIMJ CRANIAL NRVS WO IMPLTJ
OHANAA	Q3 2025	Outpatient Hosp	0721T	CPT	QUAN CT TISS CHARAC I AND R W/O CNCRNT CT EXAM
OHANAA	Q3 2025	Outpatient Hosp	0722T	CPT	QUAN CT TISS CHARAC I AND R W/CNCRNT CT EXAM
OHANAA	Q3 2025	Outpatient Hosp	0723T	CPT	QMRCP W/O DIAGNOSTIC MRI SM ANATOMY DRG SM SESS
OHANAA	Q3 2025	Outpatient Hosp	0724T	CPT	QMRCP W/DIAGNOSTIC MRI SAME ANATOMY
OHANAA	Q3 2025	Outpatient Hosp	0725T	CPT	VESTIBULAR DEVICE IMPLANTATION UNILATERAL
OHANAA	Q3 2025	Outpatient Hosp	0726T	CPT	REMOVAL IMPLANTED VESTIBULAR DEVICE UNILATERAL
OHANAA	Q3 2025	Outpatient Hosp	0727T	CPT	RMVL AND RPLCMT IMPLANTED VESTIBULAR DEVICE UNI
OHANAA	Q3 2025	Outpatient Hosp	0728T	CPT	DX ALYS VESTIBULAR IMPLANT UNILATERAL 1ST PRGRMG
OHANAA	Q3 2025	Outpatient Hosp	0729T	CPT	DX ALYS VESTIBULAR IMPLANT UNI SBSQ PRGRMG
OHANAA	Q3 2025	Outpatient Hosp	0730T	CPT	TRABECULOTOMY BY LASER INCLUDING OCT GUIDANCE
OHANAA	Q3 2025	Outpatient Hosp	0731T	CPT	AUGMENTATIVE AI-BASED FACIAL PHENOTYPE A/R
OHANAA	Q3 2025	Outpatient Hosp	0732T	CPT	IMMUNOTHERAPY ADMN WITH ELECTROPORATION IM
OHANAA	Q3 2025	Outpatient Hosp	0733T	CPT	REM BDY AND LMB KNMTC MEAS THER SPLY AND TECH SPRT 30D
OHANAA	Q3 2025	Outpatient Hosp	0734T	CPT	REM BDY AND LMB KNMTC MEAS THER TX MGMT SVCS CAL MO
OHANAA	Q3 2025	Outpatient Hosp	0735T	CPT	PREPJ TUMOR CAVITY IORT CNCRNT W/PRIM CRANIOTOMY
OHANAA	Q3 2025	Outpatient Hosp	0736T	CPT	COLONIC LAVAGE 35+L WATER W/INDUCED DEFECATION
OHANAA	Q3 2025	Outpatient Hosp	0737T	CPT	XENOGRAFT IMPLANTATION INTO ARTICULAR SURFACE
OHANAA	Q3 2025	Outpatient Hosp	11055	CPT	PARING OR CUTTING OF BENIGN HYPERKERATOTIC LESION (EG, CORN OR CALLUS); SINGLE LESION
OHANAA	Q3 2025	Outpatient Hosp	11056	CPT	PARING OR CUTTING OF BENIGN HYPERKERATOTIC LESION (EG, CORN OR CALLUS); 2 TO 4 LESIONS
OHANAA	Q3 2025	Outpatient Hosp	11057	CPT	PARING OR CUTTING OF BENIGN HYPERKERATOTIC LESION (EG, CORN OR CALLUS); MORE THAN 4 LESIONS
OHANAA	Q3 2025	Outpatient Hosp	11200	CPT	REMOVAL OF SKIN TAGS, MULTIPLE FIBROCUTANEOUS TAGS, ANY AREA; UP TO AND INCLUDING 15 LESIONS
OHANAA	Q3 2025	Outpatient Hosp	11421	CPT	EXCISION, BENIGN LESION INCLUDING MARGINS, EXCEPT SKIN TAG (UNLESS LISTED ELSEWHERE), SCALP, NECK, HANDS, FEET, GENITALIA;
OHANAA	Q3 2025	Outpatient Hosp	11606	CPT	EXCISION, MALIGNANT LESION INCLUDING MARGINS, TRUNK, ARMS, OR LEGS; EXCISED DIAMETER OVER 4.0 CM
OHANAA	Q3 2025	Outpatient Hosp	11719	CPT	TRIMMING OF NONDYSTROPHIC NAILS, ANY NUMBER
OHANAA	Q3 2025	Outpatient Hosp	11720	CPT	DEBRIDEMENT OF NAIL(S) BY ANY METHOD(S); ONE TO FIVE
OHANAA	Q3 2025	Outpatient Hosp	11721	CPT	DEBRIDEMENT OF NAIL(S) BY ANY METHOD(S); SIX OR MORE
OHANAA	Q3 2025	Outpatient Hosp	11730	CPT	AVULSION OF NAIL PLATE, PARTIAL OR COMPLETE, SIMPLE; SINGLE
OHANAA	Q3 2025	Outpatient Hosp	11772	CPT	EXCISION OF PILONIDAL CYST OR SINUS; COMPLICATED
OHANAA	Q3 2025	Outpatient Hosp	11920	CPT	TATTOOING, INTRADERMAL INTRODUCTION OF INSOLUBLE OPAQUE PIGMENTS TO CORRECT COLOR DEFECTS OF SKIN, INCLUDING MICROPIGMENTA
OHANAA	Q3 2025	Outpatient Hosp	11954	CPT	SUBCUTANEOUS INJECTION OF FILLING MATERIAL (EG, COLLAGEN); OVER 10.0 CC
OHANAA	Q3 2025	Outpatient Hosp	11960	CPT	INSERTION OF TISSUE EXPANDER(S) FOR OTHER THAN BREAST, INCLUDING SUBSEQUENT EXPANSION
OHANAA	Q3 2025	Outpatient Hosp	11970	CPT	REPLACEMENT OF TISSUE EXPANDER WITH PERMANENT IMPLANT
OHANAA	Q3 2025	Outpatient Hosp	11971	CPT	REMOVAL OF TISSUE EXPANDER WITHOUT INSERTION OF IMPLANT
OHANAA	Q3 2025	Outpatient Hosp	12034	CPT	LAYER CLOSURE OF WOUNDS OF SCALP, AXILLAE, TRUNK AND/OR EXTREMITIES (EXCLUDING HANDS AND FEET); 7.6 CM TO 12.5 CM
OHANAA	Q3 2025	Outpatient Hosp	13151	CPT	REPAIR, COMPLEX, EYELIDS, NOSE, EARS AND/OR LIPS; 1.1 CM TO 2.5 CM
OHANAA	Q3 2025	Outpatient Hosp	13160	CPT	SECONDARY CLOSURE OF SURGICAL WOUND OR DEHISCENCE, EXTENSIVE OR COMPLICATED
OHANAA	Q3 2025	Outpatient Hosp	14000	CPT	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, TRUNK; DEFECT 10 SQ CM OR LESS
OHANAA	Q3 2025	Outpatient Hosp	15100	CPT	SPLIT-THICKNESS AUTOGRAFT, TRUNK, ARMS, LEGS; FIRST 100 SQ CM OR LESS, OR 1% OF BODY AREA OF INFANTS AND CHILDREN (EXCEPT
OHANAA	Q3 2025	Outpatient Hosp	15272	CPT	APPLICATION OF SKIN SUBSTITUTE GRAFT TO TRUNK, ARMS, LEGS, TOTAL WOUND SURFACE AREA UP TO 100 SQ CM; EACH ADDITIONAL 25 SQ CM WOUN
OHANAA	Q3 2025	Outpatient Hosp	15273	CPT	APPLICATION OF SKIN SUBSTITUTE GRAFT TO TRUNK, ARMS, LEGS, TOTAL WOUND SURFACE AREA GREATER THAN OR EQUAL TO 100 SQ CM; FIRST 100
OHANAA	Q3 2025	Outpatient Hosp	15274	CPT	APPLICATION OF SKIN SUBSTITUTE GRAFT TO TRUNK, ARMS, LEGS, TOTAL WOUND SURFACE AREA GREATER THAN OR EQUAL TO 100 SQ CM; EACH ADDIT
OHANAA	Q3 2025	Outpatient Hosp	15275	CPT	APPLICATION OF SKIN SUBSTITUTE GRAFT TO FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HANDS, FEET, AND/OR MULTIPLE D
OHANAA	Q3 2025	Outpatient Hosp	15276	CPT	APPLICATION OF SKIN SUBSTITUTE GRAFT TO FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HANDS, FEET, AND/OR MULTIPLE D
OHANAA	Q3 2025	Outpatient Hosp	15650	CPT	TRANSFER, INTERMEDIATE, OF ANY PEDICLE FLAP (EG, ABDOMEN TO WRIST, WALKING TUBE), ANY LOCATION
OHANAA	Q3 2025	Outpatient Hosp	15769	CPT	GRAFTING OF AUTOLOGOUS SOFT TISSUE, OTHER, HARVESTED BY DIRECT EXCISION (EG, FAT, DERMIS, FASCIA)
OHANAA	Q3 2025	Outpatient Hosp	15771	CPT	GRAFTING OF AUTOLOGOUS FAT HARVESTED BY LIPOSUCTION TECHNIQUE TO TRUNK, BREASTS, SCALP, ARMS, AND/OR LEGS; 50 CC OR LESS INJECTATE
OHANAA	Q3 2025	Outpatient Hosp	15772	CPT	GRAFTING OF AUTOLOGOUS FAT HARVESTED BY LIPOSUCTION TECHNIQUE TO TRUNK, BREASTS, SCALP, ARMS, AND/OR LEGS; EACH ADDITIONAL 50 CC INJECTATE, OR PART THEREOF (
OHANAA	Q3 2025	Outpatient Hosp	15773	CPT	GRAFTING OF AUTOLOGOUS FAT HARVESTED BY LIPOSUCTION TECHNIQUE TO FACE, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HANDS, AND/OR FEET; 25 CC OR LESS INJECTA
OHANAA	Q3 2025	Outpatient Hosp	15774	CPT	GRAFTING OF AUTOLOGOUS FAT HARVESTED BY LIPOSUCTION TECHNIQUE TO FACE, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HANDS, AND/OR FEET; EACH ADDITIONAL 25 C
OHANAA	Q3 2025	Outpatient Hosp	15777	CPT	IMPLANTATION OF BIOLOGIC IMPLANT (EG, ACELLULAR DERMAL MATRIX) FOR SOFT TISSUE REINFORCEMENT (EG, BREAST, TRUNK) (LIST SEPARATELY
OHANAA	Q3 2025	Outpatient Hosp	15830	CPT	EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY); ABDOMEN, INFRAUMBILICAL PANNICULECTOMY
OHANAA	Q3 2025	Outpatient Hosp	15839	CPT	EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY); OTHER AREA
OHANAA	Q3 2025	Outpatient Hosp	17000	CPT	DESTRUCTION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY, CHEMOSURGERY, SURGICAL CURETTEMENT), PREMALIGNANT LESIONS (EG
OHANAA	Q3 2025	Outpatient Hosp	17003	CPT	DESTRUCTION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY, CHEMOSURGERY, SURGICAL CURETTEMENT), PREMALIGNANT LESIONS (EG
OHANAA	Q3 2025	Outpatient Hosp	17111	CPT	DESTRUCTION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY, CHEMOSURGERY, SURGICAL CURETTEMENT), OF BENIGN LESIONS OTHER
OHANAA	Q3 2025	Outpatient Hosp	19083	CPT	BIOPSY, BREAST, WITH PLACEMENT OF BREAST LOCALIZATION DEVICE(S) (EG, CLIP, METALLIC PELLET), WHEN PERFORMED, AND IMAGING OF THE BI
OHANAA	Q3 2025	Outpatient Hosp	19084	CPT	BIOPSY, BREAST, WITH PLACEMENT OF BREAST LOCALIZATION DEVICE(S) (EG, CLIP, METALLIC PELLET), WHEN PERFORMED, AND IMAGING OF THE BI
OHANAA	Q3 2025	Outpatient Hosp	19120	CPT	EXCISION OF CYST, FIBROADENOMA, OR OTHER BENIGN OR MALIGNANT TUMOR, ABERRANT BREAST TISSUE, DUCT LESION, NIPPLE OR AREOLAR
OHANAA	Q3 2025	Outpatient Hosp	19301	CPT	MASTECTOMY, PARTIAL (EG, LUMPECTOMY, TYLECTOMY, QUADRANTECTOMY, SEGMENTECTOMY);
OHANAA	Q3 2025	Outpatient Hosp	19302	CPT	MASTECTOMY, PARTIAL (EG, LUMPECTOMY, TYLECTOMY, QUADRANTECTOMY, SEGMENTECTOMY); WITH AXILLARY LYMPHADENECTOMY
OHANAA	Q3 2025	Outpatient Hosp	19303	CPT	MASTECTOMY, SIMPLE, COMPLETE
OHANAA	Q3 2025	Outpatient Hosp	19305	CPT	MASTECTOMY, RADICAL, INCLUDING PECTORAL MUSCLES, AXILLARY LYMPH NODES
OHANAA	Q3 2025	Outpatient Hosp	19306	CPT	MASTECTOMY, RADICAL, INCLUDING PECTORAL MUSCLES, AXILLARY AND INTERNAL MAMMARY LYMPH NODES (URBAN TYPE OPERATION)
OHANAA	Q3 2025	Outpatient Hosp	19307	CPT	MASTECTOMY, MODIFIED RADICAL, INCLUDING AXILLARY LYMPH NODES, WITH OR WITHOUT PECTORALIS MINOR MUSCLE, BUT EXCLUDING PECTO
OHANAA	Q3 2025	Outpatient Hosp	19316	CPT	MASTOPEXY
OHANAA	Q3 2025	Outpatient Hosp	19318	CPT	BREAST REDUCTION
OHANAA	Q3 2025	Outpatient Hosp	19325	CPT	BREAST AUGMENTATION WITH IMPLANT
OHANAA	Q3 2025	Outpatient Hosp	19328	CPT	REMOVAL OF INTACT BREAST IMPLANT
OHANAA	Q3 2025	Outpatient Hosp	19342	CPT	INSERTION OR REPLACEMENT OF BREAST IMPLANT ON SEPARATE DAY FROM MASTECTOMY
OHANAA	Q3 2025	Outpatient Hosp	19350	CPT	NIPPLE/AREOLA RECONSTRUCTION
OHANAA	Q3 2025	Outpatient Hosp	19357	CPT	TISSUE EXPANDER PLACEMENT IN BREAST RECONSTRUCTION, INCLUDING SUBSEQUENT EXPANSION(S)
OHANAA	Q3 2025	Outpatient Hosp	19361	CPT	BREAST RECONSTRUCTION; WITH LATISSIMUS DORSI FLAP
OHANAA	Q3 2025	Outpatient Hosp	19370	CPT	REVISION OF PERI-IMPLANT CAPSULE, BREAST, INCLUDING CAPSULOTOMY, CAPSULORRHAPHY, AND/OR PARTIAL CAPSULECTOMY
OHANAA	Q3 2025	Outpatient Hosp	19371	CPT	PERI-IMPLANT CAPSULECTOMY, BREAST, COMPLETE, INCLUDING REMOVAL OF ALL INTRACAPSULAR CONTENTS
OHANAA	Q3 2025	Outpatient Hosp	19380	CPT	REVISION OF RECONSTRUCTED BREAST (EG, SIGNIFICANT REMOVAL OF TISSUE, RE-ADVANCEMENT AND/OR RE-INSET OF FLAPS IN AUTOLOGOUS RECONSTRUCTION OR SIGNIFICANT C
OHANAA	Q3 2025	Outpatient Hosp	20205	CPT	BIOPSY, MUSCLE; DEEP
OHANAA	Q3 2025	Outpatient Hosp	20520	CPT	REMOVAL OF FOREIGN BODY IN MUSCLE OR TENDON SHEATH; SIMPLE
OHANAA	Q3 2025	Outpatient Hosp	20527	CPT	INJECTION, ENZYME (EG, COLLAGENASE), PALMAR FASCIAL CORD (IE, DUPUYTREN'S CONTRACTURE)
OHANAA	Q3 2025	Outpatient Hosp	20680	CPT	REMOVAL OF IMPLANT; DEEP (EG, BURIED WIRE, PIN, SCREW, METAL BAND, NAIL, ROD OR PLATE)
OHANAA	Q3 2025	Outpatient Hosp	20694	CPT	REMOVAL, UNDER ANESTHESIA, OF EXTERNAL FIXATION SYSTEM

OHANAA	Q3 2025	Outpatient Hosp	20900	CPT	BONE GRAFT, ANY DONOR AREA; MINOR OR SMALL (EG, DOWEL OR BUTTON)
OHANAA	Q3 2025	Outpatient Hosp	20902	CPT	BONE GRAFT, ANY DONOR AREA; MAJOR OR LARGE
OHANAA	Q3 2025	Outpatient Hosp	20922	CPT	FASCIA LATA GRAFT; BY INCISION AND AREA EXPOSURE, COMPLEX OR SHEET
OHANAA	Q3 2025	Outpatient Hosp	20931	CPT	ALLOGRAFT FOR SPINE SURGERY ONLY; STRUCTURAL (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp	20937	CPT	AUTOGRAFT FOR SPINE SURGERY ONLY (INCLUDES HARVESTING THE GRAFT); MORSELIZED (THROUGH SEPARATE SKIN OR FASCIAL INCISION) (
OHANAA	Q3 2025	Outpatient Hosp	20956	CPT	BONE GRAFT WITH MICROVASCULAR ANASTOMOSIS; ILIAC CREST
OHANAA	Q3 2025	Outpatient Hosp	21011	CPT	EXCISION, TUMOR, SOFT TISSUE OF FACE OR SCALP, SUBCUTANEOUS; LESS THAN 2 CM
OHANAA	Q3 2025	Outpatient Hosp	21013	CPT	EXCISION, TUMOR, SOFT TISSUE OF FACE AND SCALP, SUBFASCIAL (EG, SUBGALEAL, INTRAMUSCULAR); LESS THAN 2 CM
OHANAA	Q3 2025	Outpatient Hosp	21089	CPT	UNLISTED MAXILLOFACIAL PROSTHETIC PROCEDURE
OHANAA	Q3 2025	Outpatient Hosp	21139	CPT	REDUCTION FOREHEAD; CONTOURING AND SETBACK OF ANTERIOR FRONTAL SINUS WALL
OHANAA	Q3 2025	Outpatient Hosp	21141	CPT	RECONSTRUCTION MIDFACE, LEFORT I; SINGLE PIECE, SEGMENT MOVEMENT IN ANY DIRECTION (EG, FOR LONG FACE SYNDROME), WITHOUT BO
OHANAA	Q3 2025	Outpatient Hosp	21196	CPT	RECONSTRUCTION OF MANDIBULAR RAMI AND/OR BODY, SAGITTAL SPLIT; WITH INTERNAL RIGID FIXATION
OHANAA	Q3 2025	Outpatient Hosp	21209	CPT	OSTEOPLASTY, FACIAL BONES; REDUCTION
OHANAA	Q3 2025	Outpatient Hosp	21235	CPT	GRAFT; EAR CARTILAGE, AUTOGENOUS, TO NOSE OR EAR (INCLUDES OBTAINING GRAFT)
OHANAA	Q3 2025	Outpatient Hosp	21299	CPT	UNLISTED CRANIOFACIAL AND MAXILLOFACIAL PROCEDURE
OHANAA	Q3 2025	Outpatient Hosp	21337	CPT	CLOSED TREATMENT OF NASAL SEPTAL FRACTURE, WITH OR WITHOUT STABILIZATION
OHANAA	Q3 2025	Outpatient Hosp	21552	CPT	EXCISION, TUMOR, SOFT TISSUE OF NECK OR ANTERIOR THORAX, SUBCUTANEOUS; 3 CM OR GREATER
OHANAA	Q3 2025	Outpatient Hosp	22505	CPT	MANIPULATION OF SPINE REQUIRING ANESTHESIA, ANY REGION
OHANAA	Q3 2025	Outpatient Hosp	22510	CPT	PERCUTANEOUS VERTEBROPLASTY (BONE BIOPSY INCLUDED WHEN PERFORMED), 1 VERTEBRAL BODY, UNILATERAL OR BILATERAL INJECTION, INCLUSIVE OF ALL IMAGING GUIDANCE;
OHANAA	Q3 2025	Outpatient Hosp	22513	CPT	PERCUTANEOUS VERTEBRAL AUGMENTATION, INCLUDING CAVITY CREATION (FRACTURE REDUCTION AND BONE BIOPSY INCLUDED WHEN PERFORMED) USING MECHANICAL DEVICE (
OHANAA	Q3 2025	Outpatient Hosp	22514	CPT	PERCUTANEOUS VERTEBRAL AUGMENTATION, INCLUDING CAVITY CREATION (FRACTURE REDUCTION AND BONE BIOPSY INCLUDED WHEN PERFORMED) USING MECHANICAL DEVICE (
OHANAA	Q3 2025	Outpatient Hosp	22515	CPT	PERCUTANEOUS VERTEBRAL AUGMENTATION, INCLUDING CAVITY CREATION (FRACTURE REDUCTION AND BONE BIOPSY INCLUDED WHEN PERFORMED) USING MECHANICAL DEVICE (
OHANAA	Q3 2025	Outpatient Hosp	22551	CPT	ARTHRODESIS, ANTERIOR INTERBODY, INCLUDING DISC SPACE PREPARATION, DISCECTOMY, OSTEOPHYTECTOMY AND DECOMPRESSION OF SPINAL CORD AN
OHANAA	Q3 2025	Outpatient Hosp	22552	CPT	CERVICAL BELOW C2, EACH ADDITIONAL INTERSPACE (LIST SEPARATELY IN ADDITION TO CODE FOR SEPARATE PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp	22558	CPT	ARTHRODESIS, ANTERIOR INTERBODY TECHNIQUE, INCLUDING MINIMAL DISCECTOMY TO PREPARE INTERSPACE (OTHER THAN FOR DECOMPRESSIO
OHANAA	Q3 2025	Outpatient Hosp	22600	CPT	ARTHRODESIS, POSTERIOR OR POSTEROLATERAL TECHNIQUE, SINGLE LEVEL; CERVICAL BELOW C2 SEGMENT
OHANAA	Q3 2025	Outpatient Hosp	22614	CPT	ARTHRODESIS, POSTERIOR OR POSTEROLATERAL TECHNIQUE, SINGLE LEVEL; EACH ADDITIONAL VERTEBRAL SEGMENT (LIST SEPARATELY IN AD
OHANAA	Q3 2025	Outpatient Hosp	22634	CPT	ARTHRODESIS, COMBINED POSTERIOR OR POSTEROLATERAL TECHNIQUE WITH POSTERIOR INTERBODY TECHNIQUE INCLUDING LAMINECTOMY AND/OR DISCEC
OHANAA	Q3 2025	Outpatient Hosp	22845	CPT	ANTERIOR INSTRUMENTATION; 2 TO 3 VERTEBRAL SEGMENTS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp	22850	CPT	REMOVAL OF POSTERIOR NONSEGMENTAL INSTRUMENTATION (EG, HARRINGTON ROD)
OHANAA	Q3 2025	Outpatient Hosp	22852	CPT	REMOVAL OF POSTERIOR SEGMENTAL INSTRUMENTATION
OHANAA	Q3 2025	Outpatient Hosp	22853	CPT	INSERTION OF INTERBODY BIOMECHANICAL DEVICE(S) (EG, SYNTHETIC CAGE, MESH) WITH INTEGRAL ANTERIOR INSTRUMENTATION FOR DEVICE ANCHORING (EG, SCREWS, FLANGES),
OHANAA	Q3 2025	Outpatient Hosp	22856	CPT	TOTAL DISC ARTHROPLASTY (ARTIFICIAL DISC), ANTERIOR APPROACH, INCLUDING DISCECTOMY WITH END PLATE PREPARATION (INCLUDES OSTEOPHYTECTOMY FOR NERVE ROOT OR S
OHANAA	Q3 2025	Outpatient Hosp	22858	CPT	TOTAL DISC ARTHROPLASTY (ARTIFICIAL DISC), ANTERIOR APPROACH, INCLUDING DISCECTOMY WITH END PLATE PREPARATION (INCLUDES OSTEOPHYTECTOMY FOR NERVE ROOT OR S
OHANAA	Q3 2025	Outpatient Hosp	22899	CPT	UNLISTED PROCEDURE, SPINE
OHANAA	Q3 2025	Outpatient Hosp	23071	CPT	EXCISION, TUMOR, SOFT TISSUE OF SHOULDER AREA, SUBCUTANEOUS; 3 CM OR GREATER
OHANAA	Q3 2025	Outpatient Hosp	23073	CPT	EXCISION, TUMOR, SOFT TISSUE OF SHOULDER AREA, SUBFASCIAL (EG, INTRAMUSCULAR); 5 CM OR GREATER
OHANAA	Q3 2025	Outpatient Hosp	23076	CPT	EXCISION, SOFT TISSUE TUMOR, SHOULDER AREA; DEEP, SUBFASCIAL, OR INTRAMUSCULAR
OHANAA	Q3 2025	Outpatient Hosp	23120	CPT	CLAVICULECTOMY; PARTIAL
OHANAA	Q3 2025	Outpatient Hosp	23130	CPT	ACROMIOPLASTY OR ACROMIONECTOMY, PARTIAL, WITH OR WITHOUT CORACOACROMIAL LIGAMENT RELEASE
OHANAA	Q3 2025	Outpatient Hosp	23405	CPT	TENOTOMY, SHOULDER AREA; SINGLE TENDON
OHANAA	Q3 2025	Outpatient Hosp	23410	CPT	REPAIR OF RUPTURED MUSCULOTENDINOUS CUFF (EG, ROTATOR CUFF) OPEN; ACUTE
OHANAA	Q3 2025	Outpatient Hosp	23412	CPT	REPAIR OF RUPTURED MUSCULOTENDINOUS CUFF (EG, ROTATOR CUFF) OPEN; CHRONIC
OHANAA	Q3 2025	Outpatient Hosp	23420	CPT	RECONSTRUCTION OF COMPLETE SHOULDER (ROTATOR) CUFF AVULSION, CHRONIC (INCLUDES ACROMIOPLASTY)
OHANAA	Q3 2025	Outpatient Hosp	23430	CPT	TENODESIS OF LONG TENDON OF BICEPS
OHANAA	Q3 2025	Outpatient Hosp	23440	CPT	RESECTION OR TRANSPLANTATION OF LONG TENDON OF BICEPS
OHANAA	Q3 2025	Outpatient Hosp	23455	CPT	CAPSULORRHAPHY, ANTERIOR; WITH LABRAL REPAIR (EG, BANKART PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp	23460	CPT	CAPSULORRHAPHY, ANTERIOR, ANY TYPE; WITH BONE BLOCK
OHANAA	Q3 2025	Outpatient Hosp	23470	CPT	ARTHROPLASTY, GLENOHUMERAL JOINT; HEMIARTHROPLASTY
OHANAA	Q3 2025	Outpatient Hosp	23472	CPT	ARTHROPLASTY, GLENOHUMERAL JOINT; TOTAL SHOULDER (GLENOID AND PROXIMAL HUMERAL REPLACEMENT (EG, TOTAL SHOULDER))
OHANAA	Q3 2025	Outpatient Hosp	23473	CPT	REVISION OF TOTAL SHOULDER ARTHROPLASTY, INCLUDING ALLOGRAFT WHEN PERFORMED; HUMERAL OR GLENOID COMPONENT
OHANAA	Q3 2025	Outpatient Hosp	23485	CPT	OSTEOTOMY, CLAVICLE, WITH OR WITHOUT INTERNAL FIXATION; WITH BONE GRAFT FOR NONUNION OR MALUNION (INCLUDES OBTAINING GRAFT
OHANAA	Q3 2025	Outpatient Hosp	23585	CPT	OPEN TREATMENT OF SCAPULAR FRACTURE (BODY, GLENOID OR ACROMION) WITH OR WITHOUT INTERNAL FIXATION
OHANAA	Q3 2025	Outpatient Hosp	23929	CPT	UNLISTED PROCEDURE, SHOULDER
OHANAA	Q3 2025	Outpatient Hosp	24071	CPT	EXCISION, TUMOR, SOFT TISSUE OF UPPER ARM OR ELBOW AREA, SUBCUTANEOUS; 3 CM OR GREATER
OHANAA	Q3 2025	Outpatient Hosp	24305	CPT	TENDON LENGTHENING, UPPER ARM OR ELBOW, EACH TENDON
OHANAA	Q3 2025	Outpatient Hosp	24342	CPT	REINSERTION OF RUPTURED BICEPS OR TRICEPS TENDON, DISTAL, WITH OR WITHOUT TENDON GRAFT
OHANAA	Q3 2025	Outpatient Hosp	24344	CPT	RECONSTRUCTION LATERAL COLLATERAL LIGAMENT, ELBOW, WITH TENDON GRAFT (INCLUDES HARVESTING OF GRAFT)
OHANAA	Q3 2025	Outpatient Hosp	24345	CPT	REPAIR MEDIAL COLLATERAL LIGAMENT, ELBOW, WITH LOCAL TISSUE
OHANAA	Q3 2025	Outpatient Hosp	24346	CPT	RECONSTRUCTION MEDIAL COLLATERAL LIGAMENT, ELBOW, WITH TENDON GRAFT (INCLUDES HARVESTING OF GRAFT)
OHANAA	Q3 2025	Outpatient Hosp	24357	CPT	TENOTOMY, ELBOW, LATERAL OR MEDIAL (EG, EPICONDYLITIS, TENNIS ELBOW, GOLFER'S ELBOW); PERCUTANEOUS
OHANAA	Q3 2025	Outpatient Hosp	24358	CPT	TENOTOMY, ELBOW, LATERAL OR MEDIAL (EG, EPICONDYLITIS, TENNIS ELBOW, GOLFER'S ELBOW); DEBRIDEMENT, SOFT TISSUE AND/OR BONE
OHANAA	Q3 2025	Outpatient Hosp	24545	CPT	OPEN TREATMENT OF HUMERAL SUPRACONDYLAR OR TRANSCONDYLAR FRACTURE, INCLUDES INTERNAL FIXATION, WHEN PERFORMED; WITHOUT INT
OHANAA	Q3 2025	Outpatient Hosp	24666	CPT	OPEN TREATMENT OF RADIAL HEAD OR NECK FRACTURE, INCLUDES INTERNAL FIXATION OR RADIAL HEAD EXCISION, WHEN PERFORMED; WITH R
OHANAA	Q3 2025	Outpatient Hosp	25076	CPT	EXCISION, TUMOR, SOFT TISSUE OF FOREARM AND/OR WRIST AREA; DEEP (SUBFASCIAL OR INTRAMUSCULAR)
OHANAA	Q3 2025	Outpatient Hosp	25105	CPT	ARTHROTOMY, WRIST JOINT; WITH SYNOVECTOMY
OHANAA	Q3 2025	Outpatient Hosp	25107	CPT	ARTHROTOMY, DISTAL RADIOULNAR JOINT INCLUDING REPAIR OF TRIANGULAR CARTILAGE, COMPLEX
OHANAA	Q3 2025	Outpatient Hosp	25118	CPT	SYNOVECTOMY, EXTENSOR TENDON SHEATH, WRIST, SINGLE COMPARTMENT;
OHANAA	Q3 2025	Outpatient Hosp	25210	CPT	CARPECTOMY; ONE BONE
OHANAA	Q3 2025	Outpatient Hosp	25215	CPT	CARPECTOMY; ALL BONES OF PROXIMAL ROW
OHANAA	Q3 2025	Outpatient Hosp	25246	CPT	INJECTION PROCEDURE FOR WRIST ARTHROGRAPHY
OHANAA	Q3 2025	Outpatient Hosp	25274	CPT	REPAIR, TENDON OR MUSCLE, EXTENSOR, FOREARM AND/OR WRIST; SECONDARY, WITH FREE GRAFT (INCLUDES OBTAINING GRAFT), EACH TEND
OHANAA	Q3 2025	Outpatient Hosp	25295	CPT	TENOLYSIS, FLEXOR OR EXTENSOR TENDON, FOREARM AND/OR WRIST, SINGLE, EACH TENDON
OHANAA	Q3 2025	Outpatient Hosp	25310	CPT	TENDON TRANSPLANTATION OR TRANSFER, FLEXOR OR EXTENSOR, FOREARM AND/OR WRIST, SINGLE; EACH TENDON
OHANAA	Q3 2025	Outpatient Hosp	25405	CPT	REPAIR OF NONUNION OR MALUNION, RADIUS OR ULNA; WITH AUTOGRAFT (INCLUDES OBTAINING GRAFT)
OHANAA	Q3 2025	Outpatient Hosp	25415	CPT	REPAIR OF NONUNION OR MALUNION, RADIUS AND ULNA; WITHOUT GRAFT (EG, COMPRESSION TECHNIQUE)
OHANAA	Q3 2025	Outpatient Hosp	25440	CPT	REPAIR OF NONUNION, SCAPHOID CARPAL (NAVICULAR) BONE, WITH OR WITHOUT RADIAL STYLOIDECTOMY (INCLUDES OBTAINING GRAFT AND N
OHANAA	Q3 2025	Outpatient Hosp	25447	CPT	ARTHROPLASTY, INTERPOSITION, INTERCARPAL OR CARPOMETACARPAL JOINTS
OHANAA	Q3 2025	Outpatient Hosp	25607	CPT	OPEN TREATMENT OF DISTAL RADIAL EXTRA-ARTICULAR FRACTURE OR EPIPHYSEAL SEPARATION, WITH INTERNAL FIXATION
OHANAA	Q3 2025	Outpatient Hosp	25609	CPT	OPEN TREATMENT OF DISTAL RADIAL INTRA-ARTICULAR FRACTURE OR EPIPHYSEAL SEPARATION; WITH INTERNAL FIXATION OF 3 OR MORE FRA
OHANAA	Q3 2025	Outpatient Hosp	26045	CPT	FASCIOTOMY, PALMAR (EG, DUPUYTREN'S CONTRACTURE); OPEN, PARTIAL
OHANAA	Q3 2025	Outpatient Hosp	26080	CPT	ARTHROTOMY, WITH EXPLORATION, DRAINAGE, OR REMOVAL OF LOOSE OR FOREIGN BODY; INTERPHALANGEAL JOINT, EACH
OHANAA	Q3 2025	Outpatient Hosp	26116	CPT	EXCISION, TUMOR OR VASCULAR MALFORMATION, SOFT TISSUE OF HAND OR FINGER; DEEP (SUBFASCIAL OR INTRAMUSCULAR)
OHANAA	Q3 2025	Outpatient Hosp	26123	CPT	FASCIECTOMY, PARTIAL PALMAR WITH RELEASE OF SINGLE DIGIT INCLUDING PROXIMAL INTERPHALANGEAL JOINT, WITH OR WITHOUT Z-PLAST
OHANAA	Q3 2025	Outpatient Hosp	26170	CPT	EXCISION OF TENDON, PALM, FLEXOR OR EXTENSOR, SINGLE, EACH TENDON
OHANAA	Q3 2025	Outpatient Hosp	26180	CPT	EXCISION OF TENDON, FINGER, FLEXOR OR EXTENSOR, EACH TENDON
OHANAA	Q3 2025	Outpatient Hosp	26341	CPT	MANIPULATION, PALMAR FASCIAL CORD (IE, DUPUYTREN'S CORD), POST ENZYME INJECTION (EG, COLLAGENASE), SINGLE CORD
OHANAA	Q3 2025	Outpatient Hosp	26410	CPT	REPAIR, EXTENSOR TENDON, HAND, PRIMARY OR SECONDARY; WITHOUT FREE GRAFT, EACH TENDON
OHANAA	Q3 2025	Outpatient Hosp	26418	CPT	REPAIR, EXTENSOR TENDON, FINGER, PRIMARY OR SECONDARY; WITHOUT FREE GRAFT, EACH TENDON
OHANAA	Q3 2025	Outpatient Hosp	26480	CPT	TRANSFER OR TRANSPLANT OF TENDON, CARPOMETACARPAL AREA OR DORSUM OF HAND; WITHOUT FREE GRAFT, EACH TENDON
OHANAA	Q3 2025	Outpatient Hosp	26483	CPT	TRANSFER OR TRANSPLANT OF TENDON, CARPOMETACARPAL AREA OR DORSUM OF HAND; WITH FREE TENDON GRAFT (INCLUDES OBTAINING GRAFT
OHANAA	Q3 2025	Outpatient Hosp	26485	CPT	TRANSFER OR TRANSPLANT OF TENDON, PALMAR; WITHOUT FREE TENDON GRAFT, EACH TENDON
OHANAA	Q3 2025	Outpatient Hosp	26540	CPT	REPAIR OF COLLATERAL LIGAMENT, METACARPOPHALANGEAL OR INTERPHALANGEAL JOINT
OHANAA	Q3 2025	Outpatient Hosp	26541	CPT	RECONSTRUCTION, COLLATERAL LIGAMENT, METACARPOPHALANGEAL JOINT, SINGLE; WITH TENDON OR FASCIAL GRAFT (INCLUDES OBTAINING G
OHANAA	Q3 2025	Outpatient Hosp	26587	CPT	RECONSTRUCTION OF POLYDACTYLOUS DIGIT, SOFT TISSUE AND BONE
OHANAA	Q3 2025	Outpatient Hosp	26685	CPT	OPEN TREATMENT OF CARPOMETACARPAL DISLOCATION, OTHER THAN THUMB; INCLUDES INTERNAL FIXATION, WHEN PERFORMED, EACH JOINT
OHANAA	Q3 2025	Outpatient Hosp	26727	CPT	PERCUTANEOUS SKELETAL FIXATION OF UNSTABLE PHALANGEAL SHAFT FRACTURE, PROXIMAL OR MIDDLE PHALANX, FINGER OR THUMB, WITH MA
OHANAA	Q3 2025	Outpatient Hosp	26735	CPT	OPEN TREATMENT OF PHALANGEAL SHAFT FRACTURE, PROXIMAL OR MIDDLE PHALANX, FINGER OR THUMB, INCLUDES INTERNAL FIXATION, WHEN

OHANAA	Q3 2025	Outpatient Hosp	26746	CPT	OPEN TREATMENT OF ARTICULAR FRACTURE, INVOLVING METACARPOPHALANGEAL OR INTERPHALANGEAL JOINT, INCLUDES INTERNAL FIXATION,
OHANAA	Q3 2025	Outpatient Hosp	26842	CPT	ARTHRODESIS, CARPOMETACARPAL JOINT, THUMB, WITH OR WITHOUT INTERNAL FIXATION; WITH AUTOGRAFT (INCLUDES OBTAINING GRAFT)
OHANAA	Q3 2025	Outpatient Hosp	26989	CPT	UNLISTED PROCEDURE, HANDS OR FINGERS
OHANAA	Q3 2025	Outpatient Hosp	27130	CPT	ARTHROPLASTY, ACETABULAR AND PROXIMAL FEMORAL PROSTHETIC REPLACEMENT (TOTAL HIP ARTHROPLASTY), WITH OR WITHOUT AUTOGRAFT O
OHANAA	Q3 2025	Outpatient Hosp	27279	CPT	ARTHRODESIS, SACROILIAC JOINT, PERCUTANEOUS OR MINIMALLY INVASIVE (INDIRECT VISUALIZATION), WITH IMAGE GUIDANCE, INCLUDES OBTAINING BONE GRAFT WHEN PERFORME
OHANAA	Q3 2025	Outpatient Hosp	27310	CPT	ARTHROTOMY, KNEE, WITH EXPLORATION, DRAINAGE, OR REMOVAL OF FOREIGN BODY (EG, INFECTION)
OHANAA	Q3 2025	Outpatient Hosp	27340	CPT	EXCISION, PREPATELLAR BURSA
OHANAA	Q3 2025	Outpatient Hosp	27385	CPT	SUTURE OF QUADRICEPS OR HAMSTRING MUSCLE RUPTURE; PRIMARY
OHANAA	Q3 2025	Outpatient Hosp	27395	CPT	LENGTHENING OF HAMSTRING TENDON; MULTIPLE TENDONS, BILATERAL
OHANAA	Q3 2025	Outpatient Hosp	27418	CPT	ANTERIOR TIBIAL TUBERCLEPLASTY (EG, MAQUET TYPE PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp	27425	CPT	LATERAL RETINACULAR RELEASE, OPEN
OHANAA	Q3 2025	Outpatient Hosp	27427	CPT	LIGAMENTOUS RECONSTRUCTION (AUGMENTATION), KNEE; EXTRA-ARTICULAR
OHANAA	Q3 2025	Outpatient Hosp	27446	CPT	ARTHROPLASTY, KNEE, CONDYLE AND PLATEAU; MEDIAL OR LATERAL COMPARTMENT
OHANAA	Q3 2025	Outpatient Hosp	27447	CPT	ARTHROPLASTY, KNEE, CONDYLE AND PLATEAU; MEDIAL AND LATERAL COMPARTMENTS WITH OR WITHOUT PATELLA RESURFACING (TOTAL KNEE A
OHANAA	Q3 2025	Outpatient Hosp	27448	CPT	OSTEOTOMY, FEMUR, SHAFT OR SUPRACONDYLAR; WITHOUT FIXATION
OHANAA	Q3 2025	Outpatient Hosp	27659	CPT	REPAIR, FLEXOR TENDON, LEG; SECONDARY, WITH OR WITHOUT GRAFT, EACH TENDON
OHANAA	Q3 2025	Outpatient Hosp	27687	CPT	GASTROCNEMIUS RECESSION (EG, STRAYER PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp	27691	CPT	TRANSFER OR TRANSPLANT OF SINGLE TENDON (WITH MUSCLE REDIRECTION OR REROUTING); DEEP (EG, ANTERIOR TIBIAL OR POSTERIOR TIB
OHANAA	Q3 2025	Outpatient Hosp	27700	CPT	ARTHROPLASTY, ANKLE;
OHANAA	Q3 2025	Outpatient Hosp	27784	CPT	OPEN TREATMENT OF PROXIMAL FIBULA OR SHAFT FRACTURE, INCLUDES INTERNAL FIXATION, WHEN PERFORMED
OHANAA	Q3 2025	Outpatient Hosp	27814	CPT	OPEN TREATMENT OF BIMALLEOLAR ANKLE FRACTURE (EG, LATERAL AND MEDIAL MALLEOLI, OR LATERAL AND POSTERIOR MALLEOLI, OR MEDIA
OHANAA	Q3 2025	Outpatient Hosp	27823	CPT	OPEN TREATMENT OF TRIMALLEOLAR ANKLE FRACTURE, INCLUDES INTERNAL FIXATION, WHEN PERFORMED, MEDIAL AND/OR LATERAL MALLEOLUS
OHANAA	Q3 2025	Outpatient Hosp	27829	CPT	OPEN TREATMENT OF DISTAL TIBIOFIBULAR JOINT (SYNDESMOSIS) DISRUPTION, INCLUDES INTERNAL FIXATION, WHEN PERFORMED
OHANAA	Q3 2025	Outpatient Hosp	27870	CPT	ARTHRODESIS, ANKLE, OPEN
OHANAA	Q3 2025	Outpatient Hosp	28112	CPT	OSTECTOMY, COMPLETE EXCISION; OTHER METATARSAL HEAD (SECOND, THIRD OR FOURTH)
OHANAA	Q3 2025	Outpatient Hosp	28116	CPT	OSTECTOMY, EXCISION OF TARSAL COALITION
OHANAA	Q3 2025	Outpatient Hosp	28119	CPT	OSTECTOMY, CALCANEUS; FOR SPUR, WITH OR WITHOUT PLANTAR FASCIAL RELEASE
OHANAA	Q3 2025	Outpatient Hosp	28120	CPT	PARTIAL EXCISION (CRATERIZATION, SAUCERIZATION, SEQUESTRECTOMY, OR DIAPHYSECTOMY) BONE (EG, OSTEOMYELITIS OR BOSSING); TAL
OHANAA	Q3 2025	Outpatient Hosp	28285	CPT	CORRECTION, HAMMERTOE (EG, INTERPHALANGEAL FUSION, PARTIAL OR TOTAL PHALANGECTOMY)
OHANAA	Q3 2025	Outpatient Hosp	28286	CPT	CORRECTION, COCK-UP FIFTH TOE, WITH PLASTIC SKIN CLOSURE (EG, RUIZ-MORA TYPE PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp	28288	CPT	OSTECTOMY, PARTIAL, EXOSTECTOMY OR CONDYLECTOMY, METATARSAL HEAD, EACH METATARSAL HEAD
OHANAA	Q3 2025	Outpatient Hosp	28289	CPT	HALLUX RIGIDUS CORRECTION WITH CHEILECTOMY, DEBRIDEMENT AND CAPSULAR RELEASE OF THE FIRST METATARSOPHALANGEAL JOINT
OHANAA	Q3 2025	Outpatient Hosp	28291	CPT	HALLUX RIGIDUS CORRECTION WITH CHEILECTOMY, DEBRIDEMENT AND CAPSULAR RELEASE OF THE FIRST METATARSOPHALANGEAL JOINT; WITH IMPLANT
OHANAA	Q3 2025	Outpatient Hosp	28292	CPT	CORRECTION, HALLUX VALGUS (BUNION), WITH OR WITHOUT SESAMOIDECTOMY; KELLER, MCBRIDE, OR MAYO TYPE PROCEDURE
OHANAA	Q3 2025	Outpatient Hosp	28296	CPT	CORRECTION, HALLUX VALGUS (BUNION), WITH OR WITHOUT SESAMOIDECTOMY; WITH METATARSAL OSTEOTOMY (EG, MITCHELL, CHEVRON, OR C
OHANAA	Q3 2025	Outpatient Hosp	28297	CPT	CORRECTION, HALLUX VALGUS (BUNION), WITH OR WITHOUT SESAMOIDECTOMY; LAPIDUS-TYPE PROCEDURE
OHANAA	Q3 2025	Outpatient Hosp	28298	CPT	CORRECTION, HALLUX VALGUS (BUNION), WITH OR WITHOUT SESAMOIDECTOMY; BY PHALANX OSTEOTOMY
OHANAA	Q3 2025	Outpatient Hosp	28304	CPT	OSTEOTOMY, TARSAL BONES, OTHER THAN CALCANEUS OR TALUS;
OHANAA	Q3 2025	Outpatient Hosp	28306	CPT	OSTEOTOMY, WITH OR WITHOUT LENGTHENING, SHORTENING OR ANGULAR CORRECTION, METATARSAL; FIRST METATARSAL
OHANAA	Q3 2025	Outpatient Hosp	28308	CPT	OSTEOTOMY, WITH OR WITHOUT LENGTHENING, SHORTENING OR ANGULAR CORRECTION, METATARSAL; OTHER THAN FIRST METATARSAL, EACH
OHANAA	Q3 2025	Outpatient Hosp	28312	CPT	OSTEOTOMY, SHORTENING, ANGULAR OR ROTATIONAL CORRECTION; OTHER PHALANGES, ANY TOE
OHANAA	Q3 2025	Outpatient Hosp	28322	CPT	REPAIR, NONUNION OR MALUNION; METATARSAL, WITH OR WITHOUT BONE GRAFT (INCLUDES OBTAINING GRAFT)
OHANAA	Q3 2025	Outpatient Hosp	28344	CPT	RECONSTRUCTION, TOE(S); POLYDACTYLY
OHANAA	Q3 2025	Outpatient Hosp	28485	CPT	OPEN TREATMENT OF METATARSAL FRACTURE, INCLUDES INTERNAL FIXATION, WHEN PERFORMED, EACH
OHANAA	Q3 2025	Outpatient Hosp	28705	CPT	ARTHRODESIS; PANTALAR
OHANAA	Q3 2025	Outpatient Hosp	28715	CPT	ARTHRODESIS; TRIPLE
OHANAA	Q3 2025	Outpatient Hosp	28725	CPT	ARTHRODESIS; SUBTALAR
OHANAA	Q3 2025	Outpatient Hosp	28730	CPT	ARTHRODESIS, MIDTARSAL OR TARSOMETATARSAL, MULTIPLE OR TRANSVERSE;
OHANAA	Q3 2025	Outpatient Hosp	28740	CPT	ARTHRODESIS, MIDTARSAL OR TARSOMETATARSAL, SINGLE JOINT
OHANAA	Q3 2025	Outpatient Hosp	28750	CPT	ARTHRODESIS, GREAT TOE; METATARSOPHALANGEAL JOINT
OHANAA	Q3 2025	Outpatient Hosp	28755	CPT	ARTHRODESIS, GREAT TOE; INTERPHALANGEAL JOINT
OHANAA	Q3 2025	Outpatient Hosp	28899	CPT	UNLISTED PROCEDURE, FOOT OR TOES
OHANAA	Q3 2025	Outpatient Hosp	29425	CPT	APPLICATION OF SHORT LEG CAST (BELOW KNEE TO TOES); WALKING OR AMBULATORY TYPE
OHANAA	Q3 2025	Outpatient Hosp	29806	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; CAPSULORRHAPHY
OHANAA	Q3 2025	Outpatient Hosp	29807	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; REPAIR OF SLAP LESION
OHANAA	Q3 2025	Outpatient Hosp	29821	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; SYNOVECTOMY, COMPLETE
OHANAA	Q3 2025	Outpatient Hosp	29822	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; DEBRIDEMENT, LIMITED, 1 OR 2 DISCRETE STRUCTURES (EG, HUMERAL BONE, HUMERAL ARTICULAR CARTILAGE, GLENOID BONE, GLENOID ART
OHANAA	Q3 2025	Outpatient Hosp	29823	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; DEBRIDEMENT, EXTENSIVE, 3 OR MORE DISCRETE STRUCTURES (EG, HUMERAL BONE, HUMERAL ARTICULAR CARTILAGE, GLENOID BONE, GLEN
OHANAA	Q3 2025	Outpatient Hosp	29824	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; DISTAL CLAVICULECTOMY INCLUDING DISTAL ARTICULAR SURFACE (MUMFORD PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp	29826	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; DECOMPRESSION OF SUBACROMIAL SPACE WITH PARTIAL ACROMIOPLASTY, WITH CORACOACROMIAL LIGAMENT (IE, ARCH) RELEASE, WHEN PI
OHANAA	Q3 2025	Outpatient Hosp	29827	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; WITH ROTATOR CUFF REPAIR
OHANAA	Q3 2025	Outpatient Hosp	29828	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; BICEPS TENODESIS
OHANAA	Q3 2025	Outpatient Hosp	29830	CPT	ARTHROSCOPY, ELBOW, DIAGNOSTIC, WITH OR WITHOUT SYNOVIAL BIOPSY (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp	29834	CPT	ARTHROSCOPY, ELBOW, SURGICAL; WITH REMOVAL OF LOOSE BODY OR FOREIGN BODY
OHANAA	Q3 2025	Outpatient Hosp	29835	CPT	ARTHROSCOPY, ELBOW, SURGICAL; SYNOVECTOMY, PARTIAL
OHANAA	Q3 2025	Outpatient Hosp	29836	CPT	ARTHROSCOPY, ELBOW, SURGICAL; SYNOVECTOMY, COMPLETE
OHANAA	Q3 2025	Outpatient Hosp	29844	CPT	ARTHROSCOPY, WRIST, SURGICAL; SYNOVECTOMY, PARTIAL
OHANAA	Q3 2025	Outpatient Hosp	29846	CPT	ARTHROSCOPY, WRIST, SURGICAL; EXCISION AND/OR REPAIR OF TRIANGULAR FIBROCARTILAGE AND/OR JOINT DEBRIDEMENT
OHANAA	Q3 2025	Outpatient Hosp	29847	CPT	ARTHROSCOPY, WRIST, SURGICAL; INTERNAL FIXATION FOR FRACTURE OR INSTABILITY
OHANAA	Q3 2025	Outpatient Hosp	29848	CPT	ENDOSCOPY, WRIST, SURGICAL, WITH RELEASE OF TRANSVERSE CARPAL LIGAMENT
OHANAA	Q3 2025	Outpatient Hosp	29867	CPT	ARTHROSCOPY, KNEE, SURGICAL; OSTEOCHONDRAL ALLOGRAFT (EG, MOSAICPLASTY)
OHANAA	Q3 2025	Outpatient Hosp	29868	CPT	ARTHROSCOPY, KNEE, SURGICAL; MENISCAL TRANSPLANTATION (INCLUDES ARTHROTOMY FOR MENISCAL INSERTION), MEDIAL OR LATERAL
OHANAA	Q3 2025	Outpatient Hosp	29870	CPT	ARTHROSCOPY, KNEE, DIAGNOSTIC, WITH OR WITHOUT SYNOVIAL BIOPSY (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp	29873	CPT	ARTHROSCOPY, KNEE, SURGICAL; WITH LATERAL RELEASE
OHANAA	Q3 2025	Outpatient Hosp	29874	CPT	ARTHROSCOPY, KNEE, SURGICAL; FOR REMOVAL OF LOOSE BODY OR FOREIGN BODY (EG, OSTEOCHONDRITIS DISSECANS FRAGMENTATION, CHOND
OHANAA	Q3 2025	Outpatient Hosp	29875	CPT	ARTHROSCOPY, KNEE, SURGICAL; SYNOVECTOMY, LIMITED (EG, PLICA OR SHELF RESECTION) (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp	29876	CPT	ARTHROSCOPY, KNEE, SURGICAL; SYNOVECTOMY, MAJOR, TWO OR MORE COMPARTMENTS (EG, MEDIAL OR LATERAL)
OHANAA	Q3 2025	Outpatient Hosp	29877	CPT	ARTHROSCOPY, KNEE, SURGICAL; DEBRIDEMENT/SHAVING OF ARTICULAR CARTILAGE (CHONDROPLASTY)
OHANAA	Q3 2025	Outpatient Hosp	29879	CPT	ARTHROSCOPY, KNEE, SURGICAL; ABRASION ARTHROPLASTY (INCLUDES CHONDROPLASTY WHERE NECESSARY) OR MULTIPLE DRILLING OR MICROF
OHANAA	Q3 2025	Outpatient Hosp	29880	CPT	ARTHROSCOPY, KNEE, SURGICAL; WITH MENISCECTOMY (MEDIAL AND LATERAL, INCLUDING ANY MENISCAL SHAVING)
OHANAA	Q3 2025	Outpatient Hosp	29881	CPT	ARTHROSCOPY, KNEE, SURGICAL; WITH MENISCECTOMY (MEDIAL OR LATERAL, INCLUDING ANY MENISCAL SHAVING)
OHANAA	Q3 2025	Outpatient Hosp	29882	CPT	ARTHROSCOPY, KNEE, SURGICAL; WITH MENISCUS REPAIR (MEDIAL OR LATERAL)
OHANAA	Q3 2025	Outpatient Hosp	29883	CPT	ARTHROSCOPY, KNEE, SURGICAL; WITH MENISCUS REPAIR (MEDIAL AND LATERAL)
OHANAA	Q3 2025	Outpatient Hosp	29884	CPT	ARTHROSCOPY, KNEE, SURGICAL; WITH LYSIS OF ADHESIONS, WITH OR WITHOUT MANIPULATION (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp	29887	CPT	ARTHROSCOPY, KNEE, SURGICAL; DRILLING FOR INTACT OSTEOCHONDRITIS DISSECANS LESION WITH INTERNAL FIXATION
OHANAA	Q3 2025	Outpatient Hosp	29888	CPT	ARTHROSCOPICALLY AIDED ANTERIOR CRUCIATE LIGAMENT REPAIR/AUGMENTATION OR RECONSTRUCTION
OHANAA	Q3 2025	Outpatient Hosp	29891	CPT	ARTHROSCOPY, ANKLE, SURGICAL, EXCISION OF OSTEOCHONDRAL DEFECT OF TALUS AND/OR TIBIA, INCLUDING DRILLING OF THE DEFECT
OHANAA	Q3 2025	Outpatient Hosp	29893	CPT	ENDOSCOPIC PLANTAR FASCIOTOMY
OHANAA	Q3 2025	Outpatient Hosp	29897	CPT	ARTHROSCOPY, ANKLE (TIBIOTALAR AND FIBULOTALAR JOINTS), SURGICAL; DEBRIDEMENT, LIMITED
OHANAA	Q3 2025	Outpatient Hosp	29898	CPT	ARTHROSCOPY, ANKLE (TIBIOTALAR AND FIBULOTALAR JOINTS), SURGICAL; DEBRIDEMENT, EXTENSIVE
OHANAA	Q3 2025	Outpatient Hosp	29914	CPT	ARTHROSCOPY, HIP, SURGICAL; WITH FEMOROPLASTY (IE, TREATMENT OF CAM LESION)
OHANAA	Q3 2025	Outpatient Hosp	29916	CPT	ARTHROSCOPY, HIP, SURGICAL; WITH LABRAL REPAIR
OHANAA	Q3 2025	Outpatient Hosp	30140	CPT	SUBMUCOUS RESECTION INFERIOR TURBINATE, PARTIAL OR COMPLETE, ANY METHOD
OHANAA	Q3 2025	Outpatient Hosp	30400	CPT	RHINOPLASTY, PRIMARY; LATERAL AND ALAR CARTILAGES AND/OR ELEVATION OF NASAL TIP
OHANAA	Q3 2025	Outpatient Hosp	30410	CPT	RHINOPLASTY, PRIMARY; COMPLETE, EXTERNAL PARTS INCLUDING BONY PYRAMID, LATERAL AND ALAR CARTILAGES, AND/OR ELEVATION OF NA
OHANAA	Q3 2025	Outpatient Hosp	30420	CPT	RHINOPLASTY, PRIMARY; INCLUDING MAJOR SEPTAL REPAIR
OHANAA	Q3 2025	Outpatient Hosp	30465	CPT	REPAIR OF NASAL VESTIBULAR STENOSIS (EG, SPREADER GRAFTING, LATERAL NASAL WALL RECONSTRUCTION)
OHANAA	Q3 2025	Outpatient Hosp	30468	CPT	REPAIR OF NASAL VALVE COLLAPSE WITH SUBCUTANEOUS/SUBMUCOSAL LATERAL WALL IMPLANT(S)

OHANAA	Q3 2025	Outpatient Hosp	30520	CPT	SEPTOPLASTY OR SUBMUCOUS RESECTION, WITH OR WITHOUT CARTILAGE SCORING, CONTOURING OR REPLACEMENT WITH GRAFT
OHANAA	Q3 2025	Outpatient Hosp	30630	CPT	REPAIR NASAL SEPTAL PERFORATIONS
OHANAA	Q3 2025	Outpatient Hosp	30802	CPT	CAUTERY AND/OR ABLATION, MUCOSA OF INFERIOR TURBINATES, UNILATERAL OR BILATERAL, ANY METHOD; INTRAMURAL
OHANAA	Q3 2025	Outpatient Hosp	31000	CPT	LAVAGE BY CANNULATION; MAXILLARY SINUS (ANTRUM PUNCTURE OR NATURAL OSTIUM)
OHANAA	Q3 2025	Outpatient Hosp	31030	CPT	SINUSOTOMY, MAXILLARY (ANTROTOMY); RADICAL (CALDWELL-LUC) WITHOUT REMOVAL OF ANTROCHOANAL POLYPS
OHANAA	Q3 2025	Outpatient Hosp	31541	CPT	LARYNGOSCOPY, DIRECT, OPERATIVE, WITH EXCISION OF TUMOR AND/OR STRIPPING OF VOCAL CORDS OR EPIGLOTTIS; WITH OPERATING MICR
OHANAA	Q3 2025	Outpatient Hosp	31551	CPT	LARYNGOPLASTY; FOR LARYNGEAL STENOSIS, WITH GRAFT, WITHOUT INDWELLING STENT PLACEMENT, YOUNGER THAN 12 YEARS OF AGE
OHANAA	Q3 2025	Outpatient Hosp	31575	CPT	LARYNGOSCOPY, FLEXIBLE FIBEROPTIC; DIAGNOSTIC
OHANAA	Q3 2025	Outpatient Hosp	31579	CPT	LARYNGOSCOPY, FLEXIBLE OR RIGID FIBEROPTIC, WITH STROBOSCOPY
OHANAA	Q3 2025	Outpatient Hosp	31599	CPT	UNLISTED PROCEDURE, LARYNX
OHANAA	Q3 2025	Outpatient Hosp	31625	CPT	BRONCHOSCOPY, RIGID OR FLEXIBLE, WITH OR WITHOUT FLUOROSCOPIC GUIDANCE; WITH BRONCHIAL OR ENDOBRONCHIAL BIOPSY(S), SINGLE
OHANAA	Q3 2025	Outpatient Hosp	31628	CPT	BRONCHOSCOPY, RIGID OR FLEXIBLE, WITH OR WITHOUT FLUOROSCOPIC GUIDANCE; WITH TRANSBRONCHIAL LUNG BIOPSY(S), SINGLE LOBE
OHANAA	Q3 2025	Outpatient Hosp	31635	CPT	BRONCHOSCOPY, RIGID OR FLEXIBLE, WITH OR WITHOUT FLUOROSCOPIC GUIDANCE; WITH REMOVAL OF FOREIGN BODY
OHANAA	Q3 2025	Outpatient Hosp	31651	CPT	BRONCHOSCOPY, RIGID OR FLEXIBLE, INCLUDING FLUOROSCOPIC GUIDANCE, WHEN PERFORMED; WITH BALLOON OCCLUSION, WHEN PERFORMED, ASSESSME
OHANAA	Q3 2025	Outpatient Hosp	33207	CPT	INSERTION OR REPLACEMENT OF PERMANENT PACEMAKER WITH TRANSVENOUS ELECTRODE(S); VENTRICULAR
OHANAA	Q3 2025	Outpatient Hosp	33214	CPT	UPGRADE OF IMPLANTED PACEMAKER SYSTEM, CONVERSION OF SINGLE CHAMBER SYSTEM TO DUAL CHAMBER SYSTEM (INCLUDES REMOVAL OF PRE
OHANAA	Q3 2025	Outpatient Hosp	33234	CPT	REMOVAL OF TRANSVENOUS PACEMAKER ELECTRODE(S); SINGLE LEAD SYSTEM, ATRIAL OR VENTRICULAR
OHANAA	Q3 2025	Outpatient Hosp	33240	CPT	INSERTION OF IMPLANTABLE DEFIBRILLATOR PULSE GENERATOR ONLY; WITH EXISTING SINGLE LEAD
OHANAA	Q3 2025	Outpatient Hosp	33262	CPT	REMOVAL OF IMPLANTABLE DEFIBRILLATOR PULSE GENERATOR WITH REPLACEMENT OF IMPLANTABLE DEFIBRILLATOR PULSE GENERATOR; SINGLE LEAD SYSTEM
OHANAA	Q3 2025	Outpatient Hosp	33263	CPT	REMOVAL OF IMPLANTABLE DEFIBRILLATOR PULSE GENERATOR WITH REPLACEMENT OF IMPLANTABLE DEFIBRILLATOR PULSE GENERATOR; DUAL LEAD SYSTEM
OHANAA	Q3 2025	Outpatient Hosp	33264	CPT	REMOVAL OF IMPLANTABLE DEFIBRILLATOR PULSE GENERATOR WITH REPLACEMENT OF IMPLANTABLE DEFIBRILLATOR PULSE GENERATOR; MULTIPLE LEAD SYSTEM
OHANAA	Q3 2025	Outpatient Hosp	33270	CPT	INSERTION OR REPLACEMENT OF PERMANENT SUBCUTANEOUS IMPLANTABLE DEFIBRILLATOR SYSTEM, WITH SUBCUTANEOUS ELECTRODE, INCLUDING DEFIBRILLATION THRESHOLD E
OHANAA	Q3 2025	Outpatient Hosp	33274	CPT	TRANSCATHETER INSERTION OR REPLACEMENT OF PERMANENT LEADLESS PACEMAKER, RIGHT VENTRICULAR, INCLUDING IMAGING GUIDANCE (EG, FLUOROSCOPY, VENOUS ULTRASO
OHANAA	Q3 2025	Outpatient Hosp	33285	CPT	INSERTION, SUBCUTANEOUS CARDIAC RHYTHM MONITOR, INCLUDING PROGRAMMING
OHANAA	Q3 2025	Outpatient Hosp	33289	CPT	TRANSCATHETER IMPLANTATION OF WIRELESS PULMONARY ARTERY PRESSURE SENSOR FOR LONG-TERM HEMODYNAMIC MONITORING, INCLUDING DEPLOYMENT AND CALIBRATION O
OHANAA	Q3 2025	Outpatient Hosp	33880	CPT	ENDOVASCULAR REPAIR OF DESCENDING THORACIC AORTA (EG, ANEURYSM, PSEUDOANEURYSM, DISSECTION, PENETRATING ULCER, INTRAMURAL
OHANAA	Q3 2025	Outpatient Hosp	36011	CPT	SELECTIVE CATHETER PLACEMENT, VENOUS SYSTEM; FIRST ORDER BRANCH (EG, RENAL VEIN, JUGULAR VEIN)
OHANAA	Q3 2025	Outpatient Hosp	36012	CPT	SELECTIVE CATHETER PLACEMENT, VENOUS SYSTEM; SECOND ORDER, OR MORE SELECTIVE, BRANCH (EG, LEFT ADRENAL VEIN, PETROSAL SINU
OHANAA	Q3 2025	Outpatient Hosp	36140	CPT	INTRODUCTION OF NEEDLE OR INTRACATHETER, UPPER OR LOWER EXTREMITY ARTERY
OHANAA	Q3 2025	Outpatient Hosp	36200	CPT	INTRODUCTION OF CATHETER, AORTA
OHANAA	Q3 2025	Outpatient Hosp	36221	CPT	NON-SELECTIVE CATHETER PLACEMENT, THORACIC AORTA, WITH ANGIOGRAPHY OF THE EXTRACRANIAL CAROTID, VERTEBRAL, AND/OR INTRACRANIAL VES
OHANAA	Q3 2025	Outpatient Hosp	36222	CPT	SELECTIVE CATHETER PLACEMENT, COMMON CAROTID OR INNOMINATE ARTERY, UNILATERAL, ANY APPROACH, WITH ANGIOGRAPHY OF THE IPSILATERAL E
OHANAA	Q3 2025	Outpatient Hosp	36223	CPT	SELECTIVE CATHETER PLACEMENT, COMMON CAROTID OR INNOMINATE ARTERY, UNILATERAL, ANY APPROACH, WITH ANGIOGRAPHY OF THE IPSILATERAL I
OHANAA	Q3 2025	Outpatient Hosp	36224	CPT	SELECTIVE CATHETER PLACEMENT, INTERNAL CAROTID ARTERY, UNILATERAL, WITH ANGIOGRAPHY OF THE IPSILATERAL INTRACRANIAL CAROTID CIRCUL
OHANAA	Q3 2025	Outpatient Hosp	36225	CPT	SELECTIVE CATHETER PLACEMENT, SUBCLAVIAN OR INNOMINATE ARTERY, UNILATERAL, WITH ANGIOGRAPHY OF THE IPSILATERAL VERTEBRAL CIRCULATI
OHANAA	Q3 2025	Outpatient Hosp	36226	CPT	SELECTIVE CATHETER PLACEMENT, VERTEBRAL ARTERY, UNILATERAL, WITH ANGIOGRAPHY OF THE IPSILATERAL VERTEBRAL CIRCULATION AND ALL ASSO
OHANAA	Q3 2025	Outpatient Hosp	36227	CPT	SELECTIVE CATHETER PLACEMENT, EXTERNAL CAROTID ARTERY, UNILATERAL, WITH ANGIOGRAPHY OF THE IPSILATERAL EXTERNAL CAROTID CIRCULATIO
OHANAA	Q3 2025	Outpatient Hosp	36228	CPT	SELECTIVE CATHETER PLACEMENT, EACH INTRACRANIAL BRANCH OF THE INTERNAL CAROTID OR VERTEBRAL ARTERIES, UNILATERAL, WITH ANGIOGRAPHY
OHANAA	Q3 2025	Outpatient Hosp	36246	CPT	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM; INITIAL SECOND ORDER ABDOMINAL, PELVIC, OR LOWER EXTREMITY ARTERY BRANCH, W
OHANAA	Q3 2025	Outpatient Hosp	36247	CPT	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM; INITIAL THIRD ORDER OR MORE SELECTIVE ABDOMINAL, PELVIC, OR LOWER EXTREMITY
OHANAA	Q3 2025	Outpatient Hosp	36248	CPT	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM; ADDITIONAL SECOND ORDER, THIRD ORDER, AND BEYOND, ABDOMINAL, PELVIC, OR LOW
OHANAA	Q3 2025	Outpatient Hosp	36252	CPT	SELECTIVE CATHETER PLACEMENT (FIRST-ORDER), MAIN RENAL ARTERY AND ANY ACCESSORY RENAL ARTERY(S) FOR RENAL ANGIOGRAPHY, INCLUDING A
OHANAA	Q3 2025	Outpatient Hosp	36430	CPT	TRANSFUSION, BLOOD OR BLOOD COMPONENTS
OHANAA	Q3 2025	Outpatient Hosp	36468	CPT	INJECTION(S) OF SCLEROSANT FOR SPIDER VEINS (TELANGIECTASIA), LIMB OR TRUNK
OHANAA	Q3 2025	Outpatient Hosp	36470	CPT	INJECTION OF SCLEROSANT; SINGLE INCOMPETENT VEIN (OTHER THAN TELANGIECTASIA)
OHANAA	Q3 2025	Outpatient Hosp	36471	CPT	INJECTION OF SCLEROSANT; MULTIPLE INCOMPETENT VEINS (OTHER THAN TELANGIECTASIA), SAME LEG
OHANAA	Q3 2025	Outpatient Hosp	36474	CPT	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, INCLUSIVE OF ALL IMAGING GUIDANCE AND MONITORING, PERCUTANEOUS, MECHANOCHEMICAL; SUBSEQUEN
OHANAA	Q3 2025	Outpatient Hosp	36478	CPT	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, INCLUSIVE OF ALL IMAGING GUIDANCE AND MONITORING, PERCUTANEOUS
OHANAA	Q3 2025	Outpatient Hosp	36481	CPT	PERCUTANEOUS PORTAL VEIN CATHETERIZATION BY ANY METHOD
OHANAA	Q3 2025	Outpatient Hosp	3650F	CPT	ELECTROENCEPHALOGRAM (EEG) ORDERED, REVIEWED OR REQUESTED (EPI)
OHANAA	Q3 2025	Outpatient Hosp	36556	CPT	INSERTION OF NON-TUNNELED CENTRALLY INSERTED CENTRAL VENOUS CATHETER; AGE 5 YEARS OR OLDER
OHANAA	Q3 2025	Outpatient Hosp	36560	CPT	INSERTION OF TUNNELED CENTRALLY INSERTED CENTRAL VENOUS ACCESS DEVICE, WITH SUBCUTANEOUS PORT; YOUNGER THAN 5 YEARS OF AGE
OHANAA	Q3 2025	Outpatient Hosp	36591	CPT	COLLECTION OF BLOOD SPECIMEN FROM A COMPLETELY IMPLANTABLE VENOUS ACCESS DEVICE
OHANAA	Q3 2025	Outpatient Hosp	36592	CPT	COLLECTION OF BLOOD SPECIMEN USING ESTABLISHED CENTRAL OR PERIPHERAL CATHETER, VENOUS, NOT OTHERWISE SPECIFIED
OHANAA	Q3 2025	Outpatient Hosp	36593	CPT	DECLOTTING BY THROMBOLYTIC AGENT OF IMPLANTED VASCULAR ACCESS DEVICE OR CATHETER
OHANAA	Q3 2025	Outpatient Hosp	36821	CPT	ARTERIOVENOUS ANASTOMOSIS, OPEN; DIRECT, ANY SITE (EG, CIMINO TYPE) (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp	36832	CPT	REVISION, OPEN, ARTERIOVENOUS FISTULA; WITHOUT THROMBECTOMY, AUTOGENOUS OR NONAUTOGENOUS DIALYSIS GRAFT (SEPARATE PROCEDUR
OHANAA	Q3 2025	Outpatient Hosp	37220	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, ILIAC ARTERY, UNILATERAL, INITIAL VESSEL; WITH TRANSLUMINAL ANGIOPLASTY
OHANAA	Q3 2025	Outpatient Hosp	37221	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, ILIAC ARTERY, UNILATERAL, INITIAL VESSEL; WITH TRANSLUMINAL STENT PLACEMENT
OHANAA	Q3 2025	Outpatient Hosp	37222	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, ILIAC ARTERY, EACH ADDITIONAL IPSILATERAL ILIAC VESSEL; WITH TRANSLUMINAL A
OHANAA	Q3 2025	Outpatient Hosp	37223	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, ILIAC ARTERY, EACH ADDITIONAL IPSILATERAL ILIAC VESSEL; WITH TRANSLUMINAL S
OHANAA	Q3 2025	Outpatient Hosp	37225	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL, POPLITEAL ARTERY(S), UNILATERAL; WITH ATHERECTOMY, INCLUDES ANGIOP
OHANAA	Q3 2025	Outpatient Hosp	37226	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL, POPLITEAL ARTERY(S), UNILATERAL; WITH TRANSLUMINAL STENT PLACEMENT
OHANAA	Q3 2025	Outpatient Hosp	37228	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL, PERONEAL ARTERY, UNILATERAL, INITIAL VESSEL; WITH TRANSLUMINAL ANGI
OHANAA	Q3 2025	Outpatient Hosp	37229	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL, PERONEAL ARTERY, UNILATERAL, INITIAL VESSEL; WITH ATHERECTOMY, INCL
OHANAA	Q3 2025	Outpatient Hosp	37230	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL, PERONEAL ARTERY, UNILATERAL, INITIAL VESSEL; WITH TRANSLUMINAL STEN
OHANAA	Q3 2025	Outpatient Hosp	37231	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL, PERONEAL ARTERY, UNILATERAL, INITIAL VESSEL; WITH TRANSLUMINAL STEN
OHANAA	Q3 2025	Outpatient Hosp	37232	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL/PERONEAL ARTERY, UNILATERAL, EACH ADDITIONAL VESSEL; WITH TRANSLUMIN
OHANAA	Q3 2025	Outpatient Hosp	37233	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL/PERONEAL ARTERY, UNILATERAL, EACH ADDITIONAL VESSEL; WITH ATHERECTOM
OHANAA	Q3 2025	Outpatient Hosp	37234	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL/PERONEAL ARTERY, UNILATERAL, EACH ADDITIONAL VESSEL; WITH TRANSLUMIN
OHANAA	Q3 2025	Outpatient Hosp	37236	CPT	TRANSCATHETER PLACEMENT OF AN INTRAVASCULAR STENT(S) (EXCEPT LOWER EXTREMITY, CERVICAL CAROTID, EXTRACRANIAL VERTEBRAL OR INTRATHO
OHANAA	Q3 2025	Outpatient Hosp	37242	CPT	VASCULAR EMBOLIZATION OR OCCLUSION, INCLUSIVE OF ALL RADIOLOGICAL SUPERVISION AND INTERPRETATION, INTRAPROCEDURAL ROADMAPPING, AND
OHANAA	Q3 2025	Outpatient Hosp	37243	CPT	VASCULAR EMBOLIZATION OR OCCLUSION, INCLUSIVE OF ALL RADIOLOGICAL SUPERVISION AND INTERPRETATION, INTRAPROCEDURAL ROADMAPPING, AND
OHANAA	Q3 2025	Outpatient Hosp	37246	CPT	TRANSLUMINAL BALLOON ANGIOPLASTY (EXCEPT LOWER EXTREMITY ARTERY(IES) FOR OCCLUSIVE DISEASE, INTRACRANIAL, CORONARY, PULMONARY, OR DIALYSIS CIRCUIT), OPEN OR
OHANAA	Q3 2025	Outpatient Hosp	37700	CPT	LIGATION AND DIVISION OF LONG SAPHENOUS VEIN AT SAPHENOFEMORAL JUNCTION, OR DISTAL INTERRUPTIONS
OHANAA	Q3 2025	Outpatient Hosp	37722	CPT	LIGATION, DIVISION, AND STRIPPING, LONG (GREATER) SAPHENOUS VEINS FROM SAPHENOFEMORAL JUNCTION TO KNEE OR BELOW
OHANAA	Q3 2025	Outpatient Hosp	37765	CPT	STAB PHLEBECTOMY OF VARICOSE VEINS, ONE EXTREMITY; 10-20 STAB INCISIONS
OHANAA	Q3 2025	Outpatient Hosp	38222	CPT	DIAGNOSTIC BONE MARROW; BIOPSY(IES) AND ASPIRATION(S)
OHANAA	Q3 2025	Outpatient Hosp	38230	CPT	BONE MARROW HARVESTING FOR TRANSPLANTATION
OHANAA	Q3 2025	Outpatient Hosp	38232	CPT	BONE MARROW HARVESTING FOR TRANSPLANTATION; AUTOLOGOUS
OHANAA	Q3 2025	Outpatient Hosp	38241	CPT	BONE MARROW OR BLOOD-DERIVED PERIPHERAL STEM CELL TRANSPLANTATION; AUTOLOGOUS
OHANAA	Q3 2025	Outpatient Hosp	38242	CPT	BONE MARROW OR BLOOD-DERIVED PERIPHERAL STEM CELL TRANSPLANTATION; ALLOGENEIC DONOR LYMPHOCYTE INFUSIONS
OHANAA	Q3 2025	Outpatient Hosp	38243	CPT	HEMATOPOIETIC PROGENITOR CELL (HPC); HPC BOOST
OHANAA	Q3 2025	Outpatient Hosp	38745	CPT	AXILLARY LYMPHADENECTOMY; COMPLETE
OHANAA	Q3 2025	Outpatient Hosp	38900	CPT	INTRAOPERATIVE IDENTIFICATION (EG, MAPPING) OF SENTINEL LYMPH NODE(S) INCLUDES INJECTION OF NON-RADIOACTIVE DYE, WHEN PERFORMED (L
OHANAA	Q3 2025	Outpatient Hosp	40700	CPT	PLASTIC REPAIR OF CLEFT LIP/NASAL DEFORMITY; PRIMARY, PARTIAL OR COMPLETE, UNILATERAL
OHANAA	Q3 2025	Outpatient Hosp	40720	CPT	PLASTIC REPAIR OF CLEFT LIP/NASAL DEFORMITY; SECONDARY, BY RECREATION OF DEFECT AND RECLOSURE
OHANAA	Q3 2025	Outpatient Hosp	40799	CPT	UNLISTED PROCEDURE, LIPS
OHANAA	Q3 2025	Outpatient Hosp	41899	CPT	UNLISTED PROCEDURE, DENTOALVEOLAR STRUCTURES
OHANAA	Q3 2025	Outpatient Hosp	42106	CPT	EXCISION, LESION OF PALATE, UVULA; WITH SIMPLE PRIMARY CLOSURE
OHANAA	Q3 2025	Outpatient Hosp	42145	CPT	PALATOPHARYNGOPLASTY (EG, UVULOPALATOPHARYNGOPLASTY, UVULOPHARYNGOPLASTY)
OHANAA	Q3 2025	Outpatient Hosp	42210	CPT	PALATOPLASTY FOR CLEFT PALATE, WITH CLOSURE OF ALVEOLAR RIDGE; WITH BONE GRAFT TO ALVEOLAR RIDGE (INCLUDES OBTAINING GRAFT
OHANAA	Q3 2025	Outpatient Hosp	42220	CPT	PALATOPLASTY FOR CLEFT PALATE; SECONDARY LENGTHENING PROCEDURE
OHANAA	Q3 2025	Outpatient Hosp	42225	CPT	PALATOPLASTY FOR CLEFT PALATE; ATTACHMENT PHARYNGEAL FLAP
OHANAA	Q3 2025	Outpatient Hosp	42440	CPT	EXCISION OF SUBMANDIBULAR (SUBMAXILLARY) GLAND
OHANAA	Q3 2025	Outpatient Hosp	42806	CPT	BIOPSY; NASOPHARYNX, SURVEY FOR UNKNOWN PRIMARY LESION
OHANAA	Q3 2025	Outpatient Hosp	42815	CPT	EXCISION BRANCHIAL CLEFT CYST, VESTIGE, OR FISTULA, EXTENDING BENEATH SUBCUTANEOUS TISSUES AND/OR INTO PHARYNX
OHANAA	Q3 2025	Outpatient Hosp	42820	CPT	TONSILLECTOMY AND ADENOIDECTOMY; YOUNGER THAN AGE 12

OHANAA	Q3 2025	Outpatient Hosp		42821	CPT	TONSILLECTOMY AND ADENOIDECTOMY; AGE 12 OR OVER
OHANAA	Q3 2025	Outpatient Hosp		42825	CPT	TONSILLECTOMY, PRIMARY OR SECONDARY; YOUNGER THAN AGE 12
OHANAA	Q3 2025	Outpatient Hosp		42826	CPT	TONSILLECTOMY, PRIMARY OR SECONDARY; AGE 12 OR OVER
OHANAA	Q3 2025	Outpatient Hosp		42830	CPT	ADENOIDECTOMY, PRIMARY; YOUNGER THAN AGE 12
OHANAA	Q3 2025	Outpatient Hosp		42831	CPT	ADENOIDECTOMY, PRIMARY; AGE 12 OR OVER
OHANAA	Q3 2025	Outpatient Hosp		42835	CPT	ADENOIDECTOMY, SECONDARY; YOUNGER THAN AGE 12
OHANAA	Q3 2025	Outpatient Hosp		43200	CPT	ESOPHAGOSCOPY, RIGID OR FLEXIBLE; DIAGNOSTIC, WITH OR WITHOUT COLLECTION OF SPECIMEN(S) BY BRUSHING OR WASHING (SEPARATE P
OHANAA	Q3 2025	Outpatient Hosp		43233	CPT	ESOPHAGOGASTRODUODENOSCOPY, FLEXIBLE, TRANSORAL; WITH DILATION OF ESOPHAGUS WITH BALLOON (30 MM DIAMETER OR LARGER) (INCLUDES FLUO
OHANAA	Q3 2025	Outpatient Hosp		43235	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; DIAG
OHANAA	Q3 2025	Outpatient Hosp		43236	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
OHANAA	Q3 2025	Outpatient Hosp		43237	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
OHANAA	Q3 2025	Outpatient Hosp		43238	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
OHANAA	Q3 2025	Outpatient Hosp		43239	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
OHANAA	Q3 2025	Outpatient Hosp		43240	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
OHANAA	Q3 2025	Outpatient Hosp		43241	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
OHANAA	Q3 2025	Outpatient Hosp		43242	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
OHANAA	Q3 2025	Outpatient Hosp		43245	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
OHANAA	Q3 2025	Outpatient Hosp		43246	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
OHANAA	Q3 2025	Outpatient Hosp		43247	CPT	ESOPHAGOGASTRODUODENOSCOPY, FLEXIBLE, TRANSORAL; WITH REMOVAL OF FOREIGN BODY(S)
OHANAA	Q3 2025	Outpatient Hosp		43248	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
OHANAA	Q3 2025	Outpatient Hosp		43249	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
OHANAA	Q3 2025	Outpatient Hosp		43250	CPT	ESOPHAGOGASTRODUODENOSCOPY, FLEXIBLE, TRANSORAL; WITH REMOVAL OF TUMOR(S), POLYP(S), OR OTHER LESION(S) BY HOT BIOPSY FORCEPS
OHANAA	Q3 2025	Outpatient Hosp		43252	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH OPTICAL
OHANAA	Q3 2025	Outpatient Hosp		43253	CPT	ESOPHAGOGASTRODUODENOSCOPY, FLEXIBLE, TRANSORAL; WITH TRANSENDOSCOPIC ULTRASOUND-GUIDED TRANSMURAL INJECTION OF DIAGNOSTIC OR THER
OHANAA	Q3 2025	Outpatient Hosp		43254	CPT	ESOPHAGOGASTRODUODENOSCOPY, FLEXIBLE, TRANSORAL; WITH ENDOSCOPIC MUCOSAL RESECTION
OHANAA	Q3 2025	Outpatient Hosp		43257	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
OHANAA	Q3 2025	Outpatient Hosp		43259	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
OHANAA	Q3 2025	Outpatient Hosp		43260	CPT	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP); DIAGNOSTIC, WITH OR WITHOUT COLLECTION OF SPECIMEN(S) BY BRUSHING O
OHANAA	Q3 2025	Outpatient Hosp		43261	CPT	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP); WITH BIOPSY, SINGLE OR MULTIPLE
OHANAA	Q3 2025	Outpatient Hosp		43262	CPT	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP); WITH SPHINCTEROTOMY/PAPILLOTOMY
OHANAA	Q3 2025	Outpatient Hosp		43263	CPT	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP); WITH PRESSURE MEASUREMENT OF SPHINCTER OF ODDI (PANCREATIC DUCT OR
OHANAA	Q3 2025	Outpatient Hosp		43264	CPT	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP); WITH ENDOSCOPIC RETROGRADE REMOVAL OF CALCULUS/CALCULI FROM BILIARY
OHANAA	Q3 2025	Outpatient Hosp		43265	CPT	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP); WITH ENDOSCOPIC RETROGRADE DESTRUCTION, LITHOTRIPSY OF CALCULUS/CAL
OHANAA	Q3 2025	Outpatient Hosp		43266	CPT	ESOPHAGOGASTRODUODENOSCOPY, FLEXIBLE, TRANSORAL; WITH PLACEMENT OF ENDOSCOPIC STENT (INCLUDES PRE- AND POST-DILATION AND GUIDE WIR
OHANAA	Q3 2025	Outpatient Hosp		43270	CPT	ESOPHAGOGASTRODUODENOSCOPY, FLEXIBLE, TRANSORAL; WITH ABLATION OF TUMOR(S), POLYP(S), OR OTHER LESION(S) (INCLUDES PRE- AND POST-D
OHANAA	Q3 2025	Outpatient Hosp		43273	CPT	NDSC CANNULATION PAPILLA VIS BILE &/ PNCRTC DUX ENDOSCOPIC CANNULATION OF PAPILLA WITH DIRECT VISUALIZATION OF COMMON BILE DUCT(S)
OHANAA	Q3 2025	Outpatient Hosp		43274	CPT	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP); WITH PLACEMENT OF ENDOSCOPIC STENT INTO BILIARY OR PANCREATIC DUCT, INCLUDI
OHANAA	Q3 2025	Outpatient Hosp		43275	CPT	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP); WITH REMOVAL OF FOREIGN BODY(S) OR STENT(S) FROM BILIARY/PANCREATIC DUCT(S)
OHANAA	Q3 2025	Outpatient Hosp		43276	CPT	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP); WITH REMOVAL AND EXCHANGE OF STENT(S), BILIARY OR PANCREATIC DUCT, INCLUDIN
OHANAA	Q3 2025	Outpatient Hosp		43277	CPT	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP); WITH TRANS-ENDOSCOPIC BALLOON DILATION OF BILIARY/PANCREATIC DUCT(S) OR OF
OHANAA	Q3 2025	Outpatient Hosp		43280	CPT	LAPAROSCOPY, SURGICAL, ESOPHAGOGASTRIC FUNDOPLASTY (EG, NISSEN, TOUPET PROCEDURES)
OHANAA	Q3 2025	Outpatient Hosp		43282	CPT	LAPAROSCOPY, SURGICAL, REPAIR OF PARAESOPHAGEAL HERNIA, INCLUDES FUNDOPLASTY, WHEN PERFORMED; WITH IMPLANTATION OF MESH
OHANAA	Q3 2025	Outpatient Hosp		43450	CPT	DILATION OF ESOPHAGUS, BY UNGUIDED SOUND OR BOUGIE, SINGLE OR MULTIPLE PASSES
OHANAA	Q3 2025	Outpatient Hosp		43453	CPT	DILATION OF ESOPHAGUS, OVER GUIDE WIRE
OHANAA	Q3 2025	Outpatient Hosp		44799	CPT	UNLISTED PROCEDURE, SMALL INTESTINE
OHANAA	Q3 2025	Outpatient Hosp		44970	CPT	LAPAROSCOPY, SURGICAL, APPENDECTOMY
OHANAA	Q3 2025	Outpatient Hosp		45100	CPT	BIOPSY OF ANORECTAL WALL, ANAL APPROACH (EG, CONGENITAL MEGACOLON)
OHANAA	Q3 2025	Outpatient Hosp		45341	CPT	SIGMOIDOSCOPY, FLEXIBLE; WITH ENDOSCOPIC ULTRASOUND EXAMINATION
OHANAA	Q3 2025	Outpatient Hosp		45342	CPT	SIGMOIDOSCOPY, FLEXIBLE; WITH TRANSENDOSCOPIC ULTRASOUND GUIDED INTRAMURAL OR TRANSMURAL FINE NEEDLE ASPIRATION/BIOPSY(S)
OHANAA	Q3 2025	Outpatient Hosp	45378		CPT	COLONOSCOPY, FLEXIBLE; DIAGNOSTIC, INCLUDING COLLECTION OF SPECIMEN(S) BY BRUSHING OR WASHING, WHEN PERFORMED (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp		45389	CPT	COLONOSCOPY, FLEXIBLE; WITH ENDOSCOPIC STENT PLACEMENT (INCLUDES PRE- AND POST-DILATION AND GUIDE WIRE PASSAGE, WHEN PERFORMED)
OHANAA	Q3 2025	Outpatient Hosp		45390	CPT	COLONOSCOPY, FLEXIBLE; WITH ENDOSCOPIC MUCOSAL RESECTION
OHANAA	Q3 2025	Outpatient Hosp		45391	CPT	COLONOSCOPY, FLEXIBLE; WITH ENDOSCOPIC ULTRASOUND EXAMINATION LIMITED TO THE RECTUM, SIGMOID, DESCENDING, TRANSVERSE, OR ASCENDING COLON AND CECUM, ANI
OHANAA	Q3 2025	Outpatient Hosp		45392	CPT	COLONOSCOPY, FLEXIBLE; WITH TRANSENDOSCOPIC ULTRASOUND GUIDED INTRAMURAL OR TRANSMURAL FINE NEEDLE ASPIRATION/BIOPSY(S), INCLUDES ENDOSCOPIC ULTRASOUN
OHANAA	Q3 2025	Outpatient Hosp		45505	CPT	PROCTOPLASTY; FOR PROLAPSE OF MUCOUS MEMBRANE
OHANAA	Q3 2025	Outpatient Hosp		46020	CPT	PLACEMENT OF SETON
OHANAA	Q3 2025	Outpatient Hosp		46260	CPT	HEMORRHOIDECTOMY, INTERNAL AND EXTERNAL, COMPLEX OR EXTENSIVE;
OHANAA	Q3 2025	Outpatient Hosp		46270	CPT	SURGICAL TREATMENT OF ANAL FISTULA (FISTULECTOMY/FISTULOTOMY); SUBCUTANEOUS
OHANAA	Q3 2025	Outpatient Hosp		46275	CPT	SURGICAL TREATMENT OF ANAL FISTULA (FISTULECTOMY/FISTULOTOMY); SUBMUSCULAR
OHANAA	Q3 2025	Outpatient Hosp		46280	CPT	SURGICAL TREATMENT OF ANAL FISTULA (FISTULECTOMY/FISTULOTOMY); COMPLEX OR MULTIPLE, WITH OR WITHOUT PLACEMENT OF SETON
OHANAA	Q3 2025	Outpatient Hosp		46288	CPT	CLOSURE OF ANAL FISTULA WITH RECTAL ADVANCEMENT FLAP
OHANAA	Q3 2025	Outpatient Hosp		46946	CPT	HEMORRHOIDECTOMY, INTERNAL, BY LIGATION OTHER THAN RUBBER BAND; 2 OR MORE HEMORRHOID COLUMNS/GROUPS, WITHOUT IMAGING GUIDANCE
OHANAA	Q3 2025	Outpatient Hosp		47379	CPT	UNLISTED LAPAROSCOPIC PROCEDURE, LIVER
OHANAA	Q3 2025	Outpatient Hosp		47382	CPT	ABLATION, ONE OR MORE LIVER TUMOR(S), PERCUTANEOUS, RADIOFREQUENCY
OHANAA	Q3 2025	Outpatient Hosp		47564	CPT	LAPAROSCOPY, SURGICAL; CHOLECYSTECTOMY WITH EXPLORATION OF COMMON DUCT
OHANAA	Q3 2025	Outpatient Hosp		47605	CPT	CHOLECYSTECTOMY; WITH CHOLANGIOGRAPHY
OHANAA	Q3 2025	Outpatient Hosp		48100	CPT	BIOPSY OF PANCREAS, OPEN (EG, FINE NEEDLE ASPIRATION, NEEDLE CORE BIOPSY, WEDGE BIOPSY)
OHANAA	Q3 2025	Outpatient Hosp		49083	CPT	ABDOMINAL PARACENTESIS (DIAGNOSTIC OR THERAPEUTIC); WITH IMAGING GUIDANCE
OHANAA	Q3 2025	Outpatient Hosp		49180	CPT	BIOPSY, ABDOMINAL OR RETROPERITONEAL MASS, PERCUTANEOUS NEEDLE
OHANAA	Q3 2025	Outpatient Hosp		49324	CPT	LAPAROSCOPY, SURGICAL; WITH INSERTION OF INTRAPERITONEAL CANNULA OR CATHETER, PERMANENT
OHANAA	Q3 2025	Outpatient Hosp		49329	CPT	UNLISTED LAPAROSCOPY PROCEDURE, ABDOMEN, PERITONEUM AND OMENTUM
OHANAA	Q3 2025	Outpatient Hosp		49400	CPT	INJECTION OF AIR OR CONTRAST INTO PERITONEAL CAVITY (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp		49424	CPT	CONTRAST INJECTION FOR ASSESSMENT OF ABSCESS OR CYST VIA PREVIOUSLY PLACED DRAINAGE CATHETER OR TUBE (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp		49440	CPT	INSERTION OF GASTROSTOMY TUBE, PERCUTANEOUS, UNDER FLUOROSCOPIC GUIDANCE INCLUDING CONTRAST INJECTION(S), IMAGE DOCUMENTAT
OHANAA	Q3 2025	Outpatient Hosp		49495	CPT	REPAIR, INITIAL INGUINAL HERNIA, FULL TERM INFANT YOUNGER THAN AGE 6 MONTHS, OR PRETERM INFANT OLDER THAN 50 WEEKS POSTCON
OHANAA	Q3 2025	Outpatient Hosp		49500	CPT	REPAIR INITIAL INGUINAL HERNIA, AGE 6 MONTHS TO YOUNGER THAN 5 YEARS, WITH OR WITHOUT HYDROCELECTOMY; REDUCIBLE
OHANAA	Q3 2025	Outpatient Hosp		49501	CPT	REPAIR INITIAL INGUINAL HERNIA, AGE 6 MONTHS TO YOUNGER THAN 5 YEARS, WITH OR WITHOUT HYDROCELECTOMY; INCARCERATED OR STRA
OHANAA	Q3 2025	Outpatient Hosp	49505		CPT	REPAIR INITIAL INGUINAL HERNIA, AGE 5 YEARS OR OLDER; REDUCIBLE
OHANAA	Q3 2025	Outpatient Hosp		49507	CPT	REPAIR INITIAL INGUINAL HERNIA, AGE 5 YEARS OR OLDER; INCARCERATED OR STRANGULATED
OHANAA	Q3 2025	Outpatient Hosp		49520	CPT	REPAIR RECURRENT INGUINAL HERNIA, ANY AGE; REDUCIBLE
OHANAA	Q3 2025	Outpatient Hosp		49525	CPT	REPAIR INGUINAL HERNIA, SLIDING, ANY AGE
OHANAA	Q3 2025	Outpatient Hosp		49550	CPT	REPAIR INITIAL FEMORAL HERNIA, ANY AGE; REDUCIBLE
OHANAA	Q3 2025	Outpatient Hosp		49561	CPT	REPAIR INITIAL INCISIONAL OR VENTRAL HERNIA; INCARCERATED OR STRANGULATED
OHANAA	Q3 2025	Outpatient Hosp		49565	CPT	REPAIR RECURRENT INCISIONAL OR VENTRAL HERNIA; REDUCIBLE
OHANAA	Q3 2025	Outpatient Hosp		49570	CPT	REPAIR EPIGASTRIC HERNIA (EG, PREPERITONEAL FAT); REDUCIBLE (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp		49572	CPT	REPAIR EPIGASTRIC HERNIA (EG, PREPERITONEAL FAT); INCARCERATED OR STRANGULATED
OHANAA	Q3 2025	Outpatient Hosp		49580	CPT	REPAIR UMBILICAL HERNIA, YOUNGER THAN AGE 5 YEARS; REDUCIBLE
OHANAA	Q3 2025	Outpatient Hosp		49585	CPT	REPAIR UMBILICAL HERNIA, AGE 5 YEARS OR OLDER; REDUCIBLE
OHANAA	Q3 2025	Outpatient Hosp		49587	CPT	REPAIR UMBILICAL HERNIA, AGE 5 YEARS OR OLDER; INCARCERATED OR STRANGULATED
OHANAA	Q3 2025	Outpatient Hosp		49590	CPT	REPAIR SPIGELIAN HERNIA
OHANAA	Q3 2025	Outpatient Hosp		49650	CPT	LAPAROSCOPY, SURGICAL; REPAIR INITIAL INGUINAL HERNIA
OHANAA	Q3 2025	Outpatient Hosp		49651	CPT	LAPAROSCOPY, SURGICAL; REPAIR RECURRENT INGUINAL HERNIA
OHANAA	Q3 2025	Outpatient Hosp		49652	CPT	LAPS REPAIR HERNIA EXCEPT INCAL/INGUN REDUCIBLE LAPAROSCOPY, SURGICAL, REPAIR, VENTRAL, UMBILICAL, SPIGELIAN OR EPIGASTRIC HERNIA
OHANAA	Q3 2025	Outpatient Hosp		50080	CPT	PERCUTANEOUS NEPHROSTOLITHOTOMY OR PYELOSTOLITHOTOMY, WITH OR WITHOUT DILATION, ENDOSCOPY, LITHOTRIPSY, STENTING, OR BASKE
OHANAA	Q3 2025	Outpatient Hosp		50081	CPT	PERCUTANEOUS NEPHROSTOLITHOTOMY OR PYELOSTOLITHOTOMY, WITH OR WITHOUT DILATION, ENDOSCOPY, LITHOTRIPSY, STENTING, OR BASKE
OHANAA	Q3 2025	Outpatient Hosp		50549	CPT	UNLISTED LAPAROSCOPY PROCEDURE, RENAL
OHANAA	Q3 2025	Outpatient Hosp		50590	CPT	LITHOTRIPSY, EXTRACORPOREAL SHOCK WAVE
OHANAA	Q3 2025	Outpatient Hosp		50593	CPT	ABLATION, RENAL TUMOR(S), UNILATERAL, PERCUTANEOUS, CRYOTHERAPY

OHANAA	Q3 2025	Outpatient Hosp	50949	CPT	UNLISTED LAPAROSCOPY PROCEDURE, URETER
OHANAA	Q3 2025	Outpatient Hosp	51600	CPT	INJECTION PROCEDURE FOR CYSTOGRAPHY OR VOIDING URETHROCYSTOGRAPHY
OHANAA	Q3 2025	Outpatient Hosp	51710	CPT	CHANGE OF CYSTOSTOMY TUBE; COMPLICATED
OHANAA	Q3 2025	Outpatient Hosp	51940	CPT	CLOSURE, EXSTROPHY OF BLADDER
OHANAA	Q3 2025	Outpatient Hosp	52005	CPT	CYSTOURETHROSCOPY, WITH URETERAL CATHETERIZATION, WITH OR WITHOUT IRRIGATION, INSTILLATION, OR URETEROPYELOGRAPHY, EXCLUSI
OHANAA	Q3 2025	Outpatient Hosp	52204	CPT	CYSTOURETHROSCOPY, WITH BIOPSY(S)
OHANAA	Q3 2025	Outpatient Hosp	52224	CPT	CYSTOURETHROSCOPY, WITH FULGURATION (INCLUDING CRYOSURGERY OR LASER SURGERY) OR TREATMENT OF MINOR (LESS THAN 0.5 CM) LESI
OHANAA	Q3 2025	Outpatient Hosp	52234	CPT	CYSTOURETHROSCOPY, WITH FULGURATION (INCLUDING CRYOSURGERY OR LASER SURGERY) AND/OR RESECTION OF; SMALL BLADDER TUMOR(S) (
OHANAA	Q3 2025	Outpatient Hosp	52235	CPT	CYSTOURETHROSCOPY, WITH FULGURATION (INCLUDING CRYOSURGERY OR LASER SURGERY) AND/OR RESECTION OF; MEDIUM BLADDER TUMOR(S)
OHANAA	Q3 2025	Outpatient Hosp	52240	CPT	CYSTOURETHROSCOPY, WITH FULGURATION (INCLUDING CRYOSURGERY OR LASER SURGERY) AND/OR RESECTION OF; LARGE BLADDER TUMOR(S)
OHANAA	Q3 2025	Outpatient Hosp	52287	CPT	CYSTOURETHROSCOPY, WITH INJECTION(S) FOR CHEMODENERVATION OF THE BLADDER
OHANAA	Q3 2025	Outpatient Hosp	52310	CPT	CYSTOURETHROSCOPY, WITH REMOVAL OF FOREIGN BODY, CALCULUS, OR URETERAL STENT FROM URETHRA OR BLADDER (SEPARATE PROCEDURE);
OHANAA	Q3 2025	Outpatient Hosp	52317	CPT	LITHOLAPAXY: CRUSHING OR FRAGMENTATION OF CALCULUS BY ANY MEANS IN BLADDER AND REMOVAL OF FRAGMENTS; SIMPLE OR SMALL (LESS
OHANAA	Q3 2025	Outpatient Hosp	52318	CPT	LITHOLAPAXY: CRUSHING OR FRAGMENTATION OF CALCULUS BY ANY MEANS IN BLADDER AND REMOVAL OF FRAGMENTS; COMPLICATED OR LARGE
OHANAA	Q3 2025	Outpatient Hosp	52334	CPT	CYSTOURETHROSCOPY WITH INSERTION OF URETERAL GUIDE WIRE THROUGH KIDNEY TO ESTABLISH A PERCUTANEOUS NEPHROSTOMY, RETROGRADE
OHANAA	Q3 2025	Outpatient Hosp	52352	CPT	CYSTOURETHROSCOPY, WITH URETEROSCOPY AND/OR PYELOSCOPY; WITH REMOVAL OR MANIPULATION OF CALCULUS (URETERAL CATHETERIZATION
OHANAA	Q3 2025	Outpatient Hosp	52353	CPT	CYSTOURETHROSCOPY, WITH URETEROSCOPY AND/OR PYELOSCOPY; WITH LITHOTRIPSY (URETERAL CATHETERIZATION IS INCLUDED)
OHANAA	Q3 2025	Outpatient Hosp	52354	CPT	CYSTOURETHROSCOPY, WITH URETEROSCOPY AND/OR PYELOSCOPY; WITH BIOPSY AND/OR FULGURATION OF URETERAL OR RENAL PELVIC LESION
OHANAA	Q3 2025	Outpatient Hosp	52356	CPT	CYSTOURETHROSCOPY, WITH URETEROSCOPY AND/OR PYELOSCOPY; WITH LITHOTRIPSY INCLUDING INSERTION OF INDWELLING URETERAL STENT (EG, GIB
OHANAA	Q3 2025	Outpatient Hosp	52601	CPT	TRANSURETHRAL ELECTROSURGICAL RESECTION OF PROSTATE, INCLUDING CONTROL OF POSTOPERATIVE BLEEDING, COMPLETE (VASECTOMY, MEA
OHANAA	Q3 2025	Outpatient Hosp	52648	CPT	LASER VAPORIZATION OF PROSTATE, INCLUDING CONTROL OF POSTOPERATIVE BLEEDING, COMPLETE (VASECTOMY, MEATOTOMY, CYSTOURETHROS
OHANAA	Q3 2025	Outpatient Hosp	54060	CPT	DESTRUCTION OF LESION(S), PENIS (EG, CONDYLOMA, PAPILLOMA, MOLLUSCUM CONTAGIOSUM, HERPETIC VESICLE), SIMPLE; SURGICAL EXCI
OHANAA	Q3 2025	Outpatient Hosp	54163	CPT	REPAIR INCOMPLETE CIRCUMCISION
OHANAA	Q3 2025	Outpatient Hosp	54344	CPT	REPAIR OF HYPOSPADIAS COMPLICATIONS (IE, FISTULA, STRICTURE, DIVERTICULA); REQUIRING MOBILIZATION OF SKIN FLAPS AND URETHR
OHANAA	Q3 2025	Outpatient Hosp	54360	CPT	PLASTIC OPERATION ON PENIS TO CORRECT ANGULATION
OHANAA	Q3 2025	Outpatient Hosp	54410	CPT	REMOVAL AND REPLACEMENT OF ALL COMPONENT(S) OF A MULTI-COMPONENT, INFLATABLE PENILE PROSTHESIS AT THE SAME OPERATIVE SESSI
OHANAA	Q3 2025	Outpatient Hosp	54520	CPT	ORCHIECTOMY, SIMPLE (INCLUDING SUBCAPSULAR), WITH OR WITHOUT TESTICULAR PROSTHESIS, SCROTAL OR INGUINAL APPROACH
OHANAA	Q3 2025	Outpatient Hosp	54530	CPT	ORCHIECTOMY, RADICAL, FOR TUMOR; INGUINAL APPROACH
OHANAA	Q3 2025	Outpatient Hosp	54640	CPT	ORCHIOPEXY, INGUINAL OR SCROTAL APPROACH
OHANAA	Q3 2025	Outpatient Hosp	54650	CPT	ORCHIOPEXY, ABDOMINAL APPROACH, FOR INTRA-ABDOMINAL TESTIS (EG, FOWLER-STEPHENS)
OHANAA	Q3 2025	Outpatient Hosp	54692	CPT	LAPAROSCOPY, SURGICAL; ORCHIOPEXY FOR INTRA-ABDOMINAL TESTIS
OHANAA	Q3 2025	Outpatient Hosp	55040	CPT	EXCISION OF HYDROCELE; UNILATERAL
OHANAA	Q3 2025	Outpatient Hosp	55530	CPT	EXCISION OF VARICOCELE OR LIGATION OF SPERMATIC VEINS FOR VARICOCELE; (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp	56620	CPT	VULVECTOMY SIMPLE; PARTIAL
OHANAA	Q3 2025	Outpatient Hosp	57240	CPT	ANTERIOR COLPORRHAPHY, REPAIR OF CYSTOCELE WITH OR WITHOUT REPAIR OF URETHROCELE, INCLUDING CYSTOURETHROSCOPY, WHEN PERFORMED
OHANAA	Q3 2025	Outpatient Hosp	57250	CPT	POSTERIOR COLPORRHAPHY, REPAIR OF RECTOCELE WITH OR WITHOUT PERINEORRHAPHY
OHANAA	Q3 2025	Outpatient Hosp	57260	CPT	COMBINED ANTEROPOSTERIOR COLPORRHAPHY, INCLUDING CYSTOURETHROSCOPY, WHEN PERFORMED
OHANAA	Q3 2025	Outpatient Hosp	57265	CPT	COMBINED ANTEROPOSTERIOR COLPORRHAPHY, INCLUDING CYSTOURETHROSCOPY, WHEN PERFORMED; WITH ENTEROCELE REPAIR
OHANAA	Q3 2025	Outpatient Hosp	57287	CPT	REMOVAL OR REVISION OF SLING FOR STRESS INCONTINENCE (EG, FASCIA OR SYNTHETIC)
OHANAA	Q3 2025	Outpatient Hosp	57295	CPT	REVISION (INCLUDING REMOVAL) OF PROSTHETIC VAGINAL GRAFT; VAGINAL APPROACH
OHANAA	Q3 2025	Outpatient Hosp	57425	CPT	LAPAROSCOPY, SURGICAL, COLPOPEXY (SUSPENSION OF VAGINAL APEX)
OHANAA	Q3 2025	Outpatient Hosp	57461	CPT	COLPOSCOPY OF THE CERVIX INCLUDING UPPER/ADJACENT VAGINA; WITH LOOP ELECTRODE CONIZATION OF THE CERVIX
OHANAA	Q3 2025	Outpatient Hosp	57520	CPT	CONIZATION OF CERVIX, WITH OR WITHOUT FULGURATION, WITH OR WITHOUT DILATION AND CURETTAGE, WITH OR WITHOUT REPAIR; COLD KN
OHANAA	Q3 2025	Outpatient Hosp	58120	CPT	DILATION AND CURETTAGE, DIAGNOSTIC AND/OR THERAPEUTIC (NONOBSTETRICAL)
OHANAA	Q3 2025	Outpatient Hosp	58150	CPT	TOTAL ABDOMINAL HYSTERECTOMY (CORPUS AND CERVIX), WITH OR WITHOUT REMOVAL OF TUBE(S), WITH OR WITHOUT REMOVAL OF OVARY(S);
OHANAA	Q3 2025	Outpatient Hosp	58152	CPT	TOTAL ABDOMINAL HYSTERECTOMY (CORPUS AND CERVIX), WITH OR WITHOUT REMOVAL OF TUBE(S), WITH OR WITHOUT REMOVAL OF OVARY(S);
OHANAA	Q3 2025	Outpatient Hosp	58180	CPT	SUPRACERVICAL ABDOMINAL HYSTERECTOMY (SUBTOTAL HYSTERECTOMY), WITH OR WITHOUT REMOVAL OF TUBE(S), WITH OR WITHOUT REMOVAL
OHANAA	Q3 2025	Outpatient Hosp	58200	CPT	TOTAL ABDOMINAL HYSTERECTOMY, INCLUDING PARTIAL VAGINECTOMY, WITH PARA-AORTIC AND PELVIC LYMPH NODE SAMPLING, WITH OR WITH
OHANAA	Q3 2025	Outpatient Hosp	58210	CPT	RADICAL ABDOMINAL HYSTERECTOMY, WITH BILATERAL TOTAL PELVIC LYMPHADENECTOMY AND PARA-AORTIC LYMPH NODE SAMPLING (BIOPSY),
OHANAA	Q3 2025	Outpatient Hosp	58240	CPT	PELVIC EXENTERATION FOR GYNECOLOGIC MALIGNANCY, WITH TOTAL ABDOMINAL HYSTERECTOMY OR CERVICECTOMY, WITH OR WITHOUT REMOVAL
OHANAA	Q3 2025	Outpatient Hosp	58260	CPT	VAGINAL HYSTERECTOMY, FOR UTERUS 250 G OR LESS;
OHANAA	Q3 2025	Outpatient Hosp	58262	CPT	VAGINAL HYSTERECTOMY, FOR UTERUS 250 G OR LESS; WITH REMOVAL OF TUBE(S), AND/OR OVARY(S)
OHANAA	Q3 2025	Outpatient Hosp	58290	CPT	VAGINAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 G;
OHANAA	Q3 2025	Outpatient Hosp	58291	CPT	VAGINAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 G; WITH REMOVAL OF TUBE(S) AND/OR OVARY(S)
OHANAA	Q3 2025	Outpatient Hosp	58292	CPT	VAGINAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 G; WITH REMOVAL OF TUBE(S) AND/OR OVARY(S), WITH REPAIR OF ENTEROCELE
OHANAA	Q3 2025	Outpatient Hosp	58353	CPT	ENDOMETRIAL ABLATION, THERMAL, WITHOUT HYSTEROSCOPIC GUIDANCE
OHANAA	Q3 2025	Outpatient Hosp	58541	CPT	LAPAROSCOPY, SURGICAL, SUPRACERVICAL HYSTERECTOMY, FOR UTERUS 250 G OR LESS;
OHANAA	Q3 2025	Outpatient Hosp	58542	CPT	LAPAROSCOPY, SURGICAL, SUPRACERVICAL HYSTERECTOMY, FOR UTERUS 250 G OR LESS; WITH REMOVAL OF TUBE(S) AND/OR OVARY(S)
OHANAA	Q3 2025	Outpatient Hosp	58544	CPT	LAPAROSCOPY, SURGICAL, SUPRACERVICAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 G; WITH REMOVAL OF TUBE(S) AND/OR OVARY(S)
OHANAA	Q3 2025	Outpatient Hosp	58545	CPT	LAPAROSCOPY, SURGICAL, MYOMECTOMY, EXCISION; 1 TO 4 INTRAMURAL MYOMAS WITH TOTAL WEIGHT OF 250 G OR LESS AND/OR REMOVAL OF
OHANAA	Q3 2025	Outpatient Hosp	58548	CPT	LAPAROSCOPY, SURGICAL, WITH RADICAL HYSTERECTOMY, WITH BILATERAL TOTAL PELVIC LYMPHADENECTOMY AND PARA-AORTIC LYMPH NODE S
OHANAA	Q3 2025	Outpatient Hosp	58550	CPT	LAPAROSCOPY, SURGICAL, WITH VAGINAL HYSTERECTOMY, FOR UTERUS 250 G OR LESS;
OHANAA	Q3 2025	Outpatient Hosp	58552	CPT	LAPAROSCOPY, SURGICAL, WITH VAGINAL HYSTERECTOMY, FOR UTERUS 250 G OR LESS; WITH REMOVAL OF TUBE(S) AND/OR OVARY(S)
OHANAA	Q3 2025	Outpatient Hosp	58553	CPT	LAPAROSCOPY, SURGICAL, WITH VAGINAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 G;
OHANAA	Q3 2025	Outpatient Hosp	58554	CPT	LAPAROSCOPY, SURGICAL, WITH VAGINAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 G; WITH REMOVAL OF TUBE(S) AND/OR OVARY(S)
OHANAA	Q3 2025	Outpatient Hosp	58561	CPT	HYSTEROSCOPY, SURGICAL; WITH REMOVAL OF LEIOMYOMATA
OHANAA	Q3 2025	Outpatient Hosp	58570	CPT	LAPAROSCOPY, SURGICAL, WITH TOTAL HYSTERECTOMY, FOR UTERUS 250 G OR LESS;
OHANAA	Q3 2025	Outpatient Hosp	58571	CPT	LAPAROSCOPY, SURGICAL, WITH TOTAL HYSTERECTOMY, FOR UTERUS 250 G OR LESS; WITH REMOVAL OF TUBE(S) AND/OR OVARY(S)
OHANAA	Q3 2025	Outpatient Hosp	58573	CPT	LAPAROSCOPY, SURGICAL, WITH TOTAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 G; WITH REMOVAL OF TUBE(S) AND/OR OVARY(S)
OHANAA	Q3 2025	Outpatient Hosp	58661	CPT	LAPAROSCOPY, SURGICAL; WITH REMOVAL OF ADNEXAL STRUCTURES (PARTIAL OR TOTAL OOPHORECTOMY AND/OR SALPINGECTOMY)
OHANAA	Q3 2025	Outpatient Hosp	58662	CPT	LAPAROSCOPY, SURGICAL; WITH FULGURATION OR EXCISION OF LESIONS OF THE OVARY, PELVIC VISCERA, OR PERITONEAL SURFACE BY ANY
OHANAA	Q3 2025	Outpatient Hosp	58700	CPT	SALPINGECTOMY, COMPLETE OR PARTIAL, UNILATERAL OR BILATERAL (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp	58720	CPT	SALPINGO-OOPHORECTOMY, COMPLETE OR PARTIAL, UNILATERAL OR BILATERAL (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp	58940	CPT	OOPHORECTOMY, PARTIAL OR TOTAL, UNILATERAL OR BILATERAL;
OHANAA	Q3 2025	Outpatient Hosp	58943	CPT	OOPHORECTOMY, PARTIAL OR TOTAL, UNILATERAL OR BILATERAL; FOR OVARIAN, TUBAL OR PRIMARY PERITONEAL MALIGNANCY, WITH PARA-AO
OHANAA	Q3 2025	Outpatient Hosp	59000	CPT	AMNIOCENTESIS; DIAGNOSTIC
OHANAA	Q3 2025	Outpatient Hosp	60212	CPT	PARTIAL THYROID LOBECTOMY, UNILATERAL; WITH CONTRALATERAL SUBTOTAL LOBECTOMY, INCLUDING ISTHMUSECTOMY
OHANAA	Q3 2025	Outpatient Hosp	60220	CPT	TOTAL THYROID LOBECTOMY, UNILATERAL; WITH OR WITHOUT ISTHMUSECTOMY
OHANAA	Q3 2025	Outpatient Hosp	60225	CPT	TOTAL THYROID LOBECTOMY, UNILATERAL; WITH CONTRALATERAL SUBTOTAL LOBECTOMY, INCLUDING ISTHMUSECTOMY
OHANAA	Q3 2025	Outpatient Hosp	60240	CPT	THYROIDECTOMY, TOTAL OR COMPLETE
OHANAA	Q3 2025	Outpatient Hosp	60252	CPT	THYROIDECTOMY, TOTAL OR SUBTOTAL FOR MALIGNANCY; WITH LIMITED NECK DISSECTION
OHANAA	Q3 2025	Outpatient Hosp	60254	CPT	THYROIDECTOMY, TOTAL OR SUBTOTAL FOR MALIGNANCY; WITH RADICAL NECK DISSECTION
OHANAA	Q3 2025	Outpatient Hosp	60260	CPT	THYROIDECTOMY, REMOVAL OF ALL REMAINING THYROID TISSUE FOLLOWING PREVIOUS REMOVAL OF A PORTION OF THYROID
OHANAA	Q3 2025	Outpatient Hosp	60280	CPT	EXCISION OF THYROGLOSSAL DUCT CYST OR SINUS;
OHANAA	Q3 2025	Outpatient Hosp	60500	CPT	PARATHYROIDECTOMY OR EXPLORATION OF PARATHYROID(S);
OHANAA	Q3 2025	Outpatient Hosp	60512	CPT	PARATHYROID AUTOTRANSPLANTATION (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp	60699	CPT	UNLISTED PROCEDURE, ENDOCRINE SYSTEM
OHANAA	Q3 2025	Outpatient Hosp	60699	CPT	UNLISTED PROCEDURE, ENDOCRINE SYSTEM
OHANAA	Q3 2025	Outpatient Hosp	61605	CPT	RESECTION OR EXCISION OF NEOPLASTIC, VASCULAR OR INFECTIOUS LESION OF INFRATEMPORAL FOSSA, PARAPHARYNGEAL SPACE, PETROUS A
OHANAA	Q3 2025	Outpatient Hosp	61886	CPT	INSERTION OR REPLACEMENT OF CRANIAL NEUROSTIMULATOR PULSE GENERATOR OR RECEIVER, DIRECT OR INDUCTIVE COUPLING; WITH CONNEC
OHANAA	Q3 2025	Outpatient Hosp	62142	CPT	REMOVAL OF BONE FLAP OR PROSTHETIC PLATE OF SKULL
OHANAA	Q3 2025	Outpatient Hosp	62273	CPT	INJECTION, EPIDURAL, OF BLOOD OR CLOT PATCH
OHANAA	Q3 2025	Outpatient Hosp	62324	CPT	INJECTION(S), INCLUDING INDWELLING CATHETER PLACEMENT, CONTINUOUS INFUSION OR INTERMITTENT BOLUS, OF DIAGNOSTIC OR THERAPEUTIC SUBSTANCE(S) (EG, ANESTHETIC,
OHANAA	Q3 2025	Outpatient Hosp	62325	CPT	INJECTION(S), INCLUDING INDWELLING CATHETER PLACEMENT, CONTINUOUS INFUSION OR INTERMITTENT BOLUS, OF DIAGNOSTIC OR THERAPEUTIC SUBSTANCE(S) (EG, ANESTHETIC,
OHANAA	Q3 2025	Outpatient Hosp	62326	CPT	INJECTION(S), INCLUDING INDWELLING CATHETER PLACEMENT, CONTINUOUS INFUSION OR INTERMITTENT BOLUS, OF DIAGNOSTIC OR THERAPEUTIC SUBSTANCE(S) (EG, ANESTHETIC,
OHANAA	Q3 2025	Outpatient Hosp	62327	CPT	INJECTION(S), INCLUDING INDWELLING CATHETER PLACEMENT, CONTINUOUS INFUSION OR INTERMITTENT BOLUS, OF DIAGNOSTIC OR THERAPEUTIC SUBSTANCE(S) (EG, ANESTHETIC,
OHANAA	Q3 2025	Outpatient Hosp	62350	CPT	IMPLANTATION, REVISION OR REPOSITIONING OF TUNNELED INTRATHECAL OR EPIDURAL CATHETER, FOR LONG-TERM MEDICATION ADMINISTRAT
OHANAA	Q3 2025	Outpatient Hosp	62360	CPT	IMPLANTATION OR REPLACEMENT OF DEVICE FOR INTRATHECAL OR EPIDURAL DRUG INFUSION; SUBCUTANEOUS RESERVOIR

OHANAA	Q3 2025	Outpatient Hosp	62361	CPT	IMPLANTATION OR REPLACEMENT OF DEVICE FOR INTRATHECAL OR EPIDURAL DRUG INFUSION; NONPROGRAMMABLE PUMP
OHANAA	Q3 2025	Outpatient Hosp	62362	CPT	IMPLANTATION OR REPLACEMENT OF DEVICE FOR INTRATHECAL OR EPIDURAL DRUG INFUSION; PROGRAMMABLE PUMP, INCLUDING PREPARATION
OHANAA	Q3 2025	Outpatient Hosp	63015	CPT	LAMINECTOMY WITH EXPLORATION AND/OR DECOMPRESSION OF SPINAL CORD AND/OR CAUDA EQUINA, WITHOUT FACETECTOMY, FORAMINOTOMY OR
OHANAA	Q3 2025	Outpatient Hosp	63020	CPT	LAMINOTOMY (HEMILAMINECTOMY), WITH DECOMPRESSION OF NERVE ROOT(S), INCLUDING PARTIAL FACETECTOMY, FORAMINOTOMY AND/OR EXCI
OHANAA	Q3 2025	Outpatient Hosp	63030	CPT	LAMINOTOMY (HEMILAMINECTOMY), WITH DECOMPRESSION OF NERVE ROOT(S), INCLUDING PARTIAL FACETECTOMY, FORAMINOTOMY AND/OR EXCI
OHANAA	Q3 2025	Outpatient Hosp	63042	CPT	LAMINOTOMY (HEMILAMINECTOMY), WITH DECOMPRESSION OF NERVE ROOT(S), INCLUDING PARTIAL FACETECTOMY, FORAMINOTOMY AND/OR EXCI
OHANAA	Q3 2025	Outpatient Hosp	63048	CPT	LAMINECTOMY, FACETECTOMY AND FORAMINOTOMY (UNILATERAL OR BILATERAL WITH DECOMPRESSION OF SPINAL CORD, CAUDA EQUINA AND/OR
OHANAA	Q3 2025	Outpatient Hosp	63075	CPT	DISCECTOMY, ANTERIOR, WITH DECOMPRESSION OF SPINAL CORD AND/OR NERVE ROOT(S), INCLUDING OSTEOPHYTECTOMY; CERVICAL, SINGLE
OHANAA	Q3 2025	Outpatient Hosp	63081	CPT	VERTEBRAL CORPECTOMY (VERTEBRAL BODY RESECTION), PARTIAL OR COMPLETE, ANTERIOR APPROACH WITH DECOMPRESSION OF SPINAL CORD
OHANAA	Q3 2025	Outpatient Hosp	63655	CPT	LAMINECTOMY FOR IMPLANTATION OF NEUROSTIMULATOR ELECTRODES, PLATE/PADDLE, EPIDURAL
OHANAA	Q3 2025	Outpatient Hosp	63662	CPT	REMOVAL OF SPINAL NEUROSTIMULATOR ELECTRODE PLATE/PADDLE(S) PLACED VIA LAMINOTOMY OR LAMINECTOMY, INCLUDING FLUOROSCOPY, WHEN PERF
OHANAA	Q3 2025	Outpatient Hosp	63663	CPT	REVISION INCLUDING REPLACEMENT, WHEN PERFORMED, OF SPINAL NEUROSTIMULATOR ELECTRODE PERCUTANEOUS ARRAY(S), INCLUDING FLUOROSCOPY,
OHANAA	Q3 2025	Outpatient Hosp	63685	CPT	INSERTION OR REPLACEMENT OF SPINAL NEUROSTIMULATOR PULSE GENERATOR OR RECEIVER, DIRECT OR INDUCTIVE COUPLING
OHANAA	Q3 2025	Outpatient Hosp	64418	CPT	INJECTION(S), ANESTHETIC AGENT(S) AND/OR STEROID; SUPRASCAPULAR NERVE
OHANAA	Q3 2025	Outpatient Hosp	64420	CPT	INJECTION(S), ANESTHETIC AGENT(S) AND/OR STEROID; INTERCOSTAL NERVE, SINGLE LEVEL
OHANAA	Q3 2025	Outpatient Hosp	64520	CPT	INJECTION, ANESTHETIC AGENT; LUMBAR OR THORACIC (PARAVERTEBRAL SYMPATHETIC)
OHANAA	Q3 2025	Outpatient Hosp	64555	CPT	PERCUTANEOUS IMPLANTATION OF NEUROSTIMULATOR ELECTRODES; PERIPHERAL NERVE (EXCLUDES SACRAL NERVE)
OHANAA	Q3 2025	Outpatient Hosp	64568	CPT	INCISION FOR IMPLANTATION OF CRANIAL NERVE (EG, VAGUS NERVE) NEUROSTIMULATOR ELECTRODE ARRAY AND PULSE GENERATOR
OHANAA	Q3 2025	Outpatient Hosp	64569	CPT	REVISION OR REPLACEMENT OF CRANIAL NERVE (EG, VAGUS NERVE) NEUROSTIMULATOR ELECTRODE ARRAY, INCLUDING CONNECTION TO EXISTING PULSE
OHANAA	Q3 2025	Outpatient Hosp	64581	CPT	INCISION FOR IMPLANTATION OF NEUROSTIMULATOR ELECTRODES; SACRAL NERVE (TRANSFORAMINAL PLACEMENT)
OHANAA	Q3 2025	Outpatient Hosp	64585	CPT	REVISION OR REMOVAL OF PERIPHERAL NEUROSTIMULATOR ELECTRODES
OHANAA	Q3 2025	Outpatient Hosp	64590	CPT	INSERTION OR REPLACEMENT OF PERIPHERAL OR GASTRIC NEUROSTIMULATOR PULSE GENERATOR OR RECEIVER, DIRECT OR INDUCTIVE COUPLIN
OHANAA	Q3 2025	Outpatient Hosp	64595	CPT	REVISION OR REMOVAL OF PERIPHERAL OR GASTRIC NEUROSTIMULATOR PULSE GENERATOR OR RECEIVER
OHANAA	Q3 2025	Outpatient Hosp	64612	CPT	CHEMODENERVATION OF MUSCLE(S); MUSCLE(S) INNERVATED BY FACIAL NERVE (EG, FOR BLEPHAROSPASM, HEMIFACIAL SPASM)
OHANAA	Q3 2025	Outpatient Hosp	64702	CPT	NEUROPLASTY; DIGITAL, ONE OR BOTH, SAME DIGIT
OHANAA	Q3 2025	Outpatient Hosp	64708	CPT	NEUROPLASTY, MAJOR PERIPHERAL NERVE, ARM OR LEG; OTHER THAN SPECIFIED
OHANAA	Q3 2025	Outpatient Hosp	64713	CPT	NEUROPLASTY, MAJOR PERIPHERAL NERVE, ARM OR LEG; BRACHIAL PLEXUS
OHANAA	Q3 2025	Outpatient Hosp	64718	CPT	NEUROPLASTY AND/OR TRANSPOSITION; ULNAR NERVE AT ELBOW
OHANAA	Q3 2025	Outpatient Hosp	64719	CPT	NEUROPLASTY AND/OR TRANSPOSITION; ULNAR NERVE AT WRIST
OHANAA	Q3 2025	Outpatient Hosp	64721	CPT	NEUROPLASTY AND/OR TRANSPOSITION; MEDIAN NERVE AT CARPAL TUNNEL
OHANAA	Q3 2025	Outpatient Hosp	64774	CPT	EXCISION OF NEUROMA; CUTANEOUS NERVE, SURGICALLY IDENTIFIABLE
OHANAA	Q3 2025	Outpatient Hosp	64831	CPT	SUTURE OF DIGITAL NERVE, HAND OR FOOT; ONE NERVE
OHANAA	Q3 2025	Outpatient Hosp	64834	CPT	SUTURE OF ONE NERVE; HAND OR FOOT, COMMON SENSORY NERVE
OHANAA	Q3 2025	Outpatient Hosp	64910	CPT	NERVE REPAIR; WITH SYNTHETIC CONDUIT OR VEIN ALLOGRAFT (EG, NERVE TUBE), EACH NERVE
OHANAA	Q3 2025	Outpatient Hosp	64912	CPT	NERVE REPAIR; WITH NERVE ALLOGRAFT, EACH NERVE, FIRST STRAND (CABLE)
OHANAA	Q3 2025	Outpatient Hosp	64999	CPT	UNLISTED PROCEDURE, NERVOUS SYSTEM
OHANAA	Q3 2025	Outpatient Hosp	65093	CPT	EVISCERATION OF OCULAR CONTENTS; WITH IMPLANT
OHANAA	Q3 2025	Outpatient Hosp	65105	CPT	ENUCLEATION OF EYE; WITH IMPLANT, MUSCLES ATTACHED TO IMPLANT
OHANAA	Q3 2025	Outpatient Hosp	65426	CPT	EXCISION OR TRANSPOSITION OF PTERYGIUM; WITH GRAFT
OHANAA	Q3 2025	Outpatient Hosp	65710	CPT	KERATOPLASTY (CORNEAL TRANSPLANT); LAMELLAR
OHANAA	Q3 2025	Outpatient Hosp	65730	CPT	KERATOPLASTY (CORNEAL TRANSPLANT); PENETRATING (EXCEPT IN APHAKIA)
OHANAA	Q3 2025	Outpatient Hosp	65750	CPT	KERATOPLASTY (CORNEAL TRANSPLANT); PENETRATING (IN APHAKIA)
OHANAA	Q3 2025	Outpatient Hosp	65756	CPT	KERATOPLASTY ENDOTHELIAL KERATOPLASTY (CORNEAL TRANSPLANT); ENDOTHELIAL
OHANAA	Q3 2025	Outpatient Hosp	65779	CPT	PLACEMENT OF AMNIOTIC MEMBRANE ON THE OCULAR SURFACE FOR WOUND HEALING; SINGLE LAYER, SUTURED
OHANAA	Q3 2025	Outpatient Hosp	65800	CPT	PARACENTESIS OF ANTERIOR CHAMBER OF EYE (SEPARATE PROCEDURE); WITH DIAGNOSTIC ASPIRATION OF AQUEOUS
OHANAA	Q3 2025	Outpatient Hosp	65815	CPT	PARACENTESIS OF ANTERIOR CHAMBER OF EYE (SEPARATE PROCEDURE); WITH REMOVAL OF BLOOD, WITH OR WITHOUT IRRIGATION AND/OR AIR
OHANAA	Q3 2025	Outpatient Hosp	65820	CPT	GONIOTOMY
OHANAA	Q3 2025	Outpatient Hosp	65850	CPT	TRABECULOTOMY AB EXTERNO
OHANAA	Q3 2025	Outpatient Hosp	65855	CPT	TRABECULOPLASTY BY LASER SURGERY
OHANAA	Q3 2025	Outpatient Hosp	65865	CPT	SEVERING ADHESIONS OF ANTERIOR SEGMENT OF EYE, INCISIONAL TECHNIQUE (WITH OR WITHOUT INJECTION OF AIR OR LIQUID) (SEPARATE
OHANAA	Q3 2025	Outpatient Hosp	65930	CPT	REMOVAL OF BLOOD CLOT, ANTERIOR SEGMENT OF EYE
OHANAA	Q3 2025	Outpatient Hosp	66174	CPT	TRANSLUMINAL DILATION OF AQUEOUS OUTFLOW CANAL; WITHOUT RETENTION OF DEVICE OR STENT
OHANAA	Q3 2025	Outpatient Hosp	66180	CPT	AQUEOUS SHUNT TO EXTRAOCULAR EQUATORIAL PLATE RESERVOIR, EXTERNAL APPROACH; WITH GRAFT
OHANAA	Q3 2025	Outpatient Hosp	66682	CPT	SUTURE OF IRIS, CILIARY BODY (SEPARATE PROCEDURE) WITH RETRIEVAL OF SUTURE THROUGH SMALL INCISION (EG, MCCANNEL SUTURE)
OHANAA	Q3 2025	Outpatient Hosp	66820	CPT	DISCISSION OF SECONDARY MEMBRANOUS CATARACT (OPACIFIED POSTERIOR LENS CAPSULE AND/OR ANTERIOR HYALOID); STAB INCISION TECH
OHANAA	Q3 2025	Outpatient Hosp	66821	CPT	DISCISSION OF SECONDARY MEMBRANOUS CATARACT (OPACIFIED POSTERIOR LENS CAPSULE AND/OR ANTERIOR HYALOID); LASER SURGERY (EG,
OHANAA	Q3 2025	Outpatient Hosp	66825	CPT	REPOSITIONING OF INTRAOCULAR LENS PROSTHESIS, REQUIRING AN INCISION (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp	66850	CPT	REMOVAL OF LENS MATERIAL; PHACOFRAGMENTATION TECHNIQUE (MECHANICAL OR ULTRASONIC) (EG, PHACOEMULSIFICATION), WITH ASPIRATI
OHANAA	Q3 2025	Outpatient Hosp	66852	CPT	REMOVAL OF LENS MATERIAL; PARS PLANA APPROACH, WITH OR WITHOUT VITRECTOMY
OHANAA	Q3 2025	Outpatient Hosp	66982	CPT	EXTRACAPSULAR CATARACT REMOVAL WITH INSERTION OF INTRAOCULAR LENS PROSTHESIS (1-STAGE PROCEDURE), MANUAL OR MECHANICAL TECHNIQUE (EG, IRRIGATION AND ASPI
OHANAA	Q3 2025	Outpatient Hosp	66984	CPT	EXTRACAPSULAR CATARACT REMOVAL WITH INSERTION OF INTRAOCULAR LENS PROSTHESIS (1 STAGE PROCEDURE), MANUAL OR MECHANICAL TECHNIQUE (EG, IRRIGATION AND ASPI
OHANAA	Q3 2025	Outpatient Hosp	66985	CPT	INSERTION OF INTRAOCULAR LENS PROSTHESIS (SECONDARY IMPLANT), NOT ASSOCIATED WITH CONCURRENT CATARACT REMOVAL
OHANAA	Q3 2025	Outpatient Hosp	66986	CPT	EXCHANGE OF INTRAOCULAR LENS
OHANAA	Q3 2025	Outpatient Hosp	66987	CPT	EXTRACAPSULAR CATARACT REMOVAL WITH INSERTION OF INTRAOCULAR LENS PROSTHESIS (1-STAGE PROCEDURE), MANUAL OR MECHANICAL TECHNIQUE (EG, IRRIGATION AND ASPI
OHANAA	Q3 2025	Outpatient Hosp	66988	CPT	EXTRACAPSULAR CATARACT REMOVAL WITH INSERTION OF INTRAOCULAR LENS PROSTHESIS (1 STAGE PROCEDURE), MANUAL OR MECHANICAL TECHNIQUE (EG, IRRIGATION AND ASPI
OHANAA	Q3 2025	Outpatient Hosp	66990	CPT	USE OF OPHTHALMIC ENDOSCOPE (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp	67015	CPT	ASPIRATION OR RELEASE OF VITREOUS, SUBRETINAL OR CHOROIDAL FLUID, PARS PLANA APPROACH (POSTERIOR SCLEROTOMY)
OHANAA	Q3 2025	Outpatient Hosp	67028	CPT	INTRAVITREAL INJECTION OF A PHARMACOLOGIC AGENT (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp	67036	CPT	VITRECTOMY, MECHANICAL, PARS PLANA APPROACH;
OHANAA	Q3 2025	Outpatient Hosp	67040	CPT	VITRECTOMY, MECHANICAL, PARS PLANA APPROACH; WITH ENDOLASER PANRETINAL PHOTOCOAGULATION
OHANAA	Q3 2025	Outpatient Hosp	67043	CPT	VITRECTOMY, MECHANICAL, PARS PLANA APPROACH; WITH REMOVAL OF SUBRETINAL MEMBRANE (EG, CHOROIDAL NEOVASCULARIZATION), INCLU
OHANAA	Q3 2025	Outpatient Hosp	67105	CPT	REPAIR OF RETINAL DETACHMENT, 1 OR MORE SESSIONS; PHOTOCOAGULATION, INCLUDING DRAINAGE OF SUBRETINAL FLUID, WHEN PERFORMED
OHANAA	Q3 2025	Outpatient Hosp	67108	CPT	REPAIR OF RETINAL DETACHMENT; WITH VITRECTOMY, ANY METHOD, WITH OR WITHOUT AIR OR GAS TAMPONADE, FOCAL ENDOLASER PHOTOCOAG
OHANAA	Q3 2025	Outpatient Hosp	67110	CPT	REPAIR OF RETINAL DETACHMENT; BY INJECTION OF AIR OR OTHER GAS (EG, PNEUMATIC RETINOPEXY)
OHANAA	Q3 2025	Outpatient Hosp	67113	CPT	REPAIR OF COMPLEX RETINAL DETACHMENT (EG, PROLIFERATIVE VITREORETINOPATHY, STAGE C-1 OR GREATER, DIABETIC TRACTION RETINAL
OHANAA	Q3 2025	Outpatient Hosp	67120	CPT	REMOVAL OF IMPLANTED MATERIAL, POSTERIOR SEGMENT; EXTRAOCULAR
OHANAA	Q3 2025	Outpatient Hosp	67208	CPT	DESTRUCTION OF LOCALIZED LESION OF RETINA (EG, MACULAR EDEMA, TUMORS), ONE OR MORE SESSIONS; CRYOTHERAPY, DIATHERMY
OHANAA	Q3 2025	Outpatient Hosp	67210	CPT	DESTRUCTION OF LOCALIZED LESION OF RETINA (EG, MACULAR EDEMA, TUMORS), ONE OR MORE SESSIONS; PHOTOCOAGULATION
OHANAA	Q3 2025	Outpatient Hosp	67221	CPT	DESTRUCTION OF LOCALIZED LESION OF CHOROID (EG, CHOROIDAL NEOVASCULARIZATION); PHOTODYNAMIC THERAPY (INCLUDES INTRAVENOUS
OHANAA	Q3 2025	Outpatient Hosp	67228	CPT	TREATMENT OF EXTENSIVE OR PROGRESSIVE RETINOPATHY (EG, DIABETIC RETINOPATHY), PHOTOCOAGULATION
OHANAA	Q3 2025	Outpatient Hosp	67311	CPT	STRABISMUS SURGERY, RECESSION OR RESECTION PROCEDURE; ONE HORIZONTAL MUSCLE
OHANAA	Q3 2025	Outpatient Hosp	67312	CPT	STRABISMUS SURGERY, RECESSION OR RESECTION PROCEDURE; TWO HORIZONTAL MUSCLES
OHANAA	Q3 2025	Outpatient Hosp	67314	CPT	STRABISMUS SURGERY, RECESSION OR RESECTION PROCEDURE; ONE VERTICAL MUSCLE (EXCLUDING SUPERIOR OBLIQUE)
OHANAA	Q3 2025	Outpatient Hosp	67331	CPT	STRABISMUS SURGERY ON PATIENT WITH PREVIOUS EYE SURGERY OR INJURY THAT DID NOT INVOLVE THE EXTRAOCULAR MUSCLES (LIST SEPAR
OHANAA	Q3 2025	Outpatient Hosp	67332	CPT	STRABISMUS SURGERY ON PATIENT WITH SCARRING OF EXTRAOCULAR MUSCLES (EG, PRIOR OCULAR INJURY, STRABISMUS OR RETINAL DETACHM
OHANAA	Q3 2025	Outpatient Hosp	67412	CPT	ORBITOTOMY WITHOUT BONE FLAP (FRONTAL OR TRANSCONJUNCTIVAL APPROACH); WITH REMOVAL OF LESION
OHANAA	Q3 2025	Outpatient Hosp	67875	CPT	TEMPORARY CLOSURE OF EYELIDS BY SUTURE (EG, FROST SUTURE)
OHANAA	Q3 2025	Outpatient Hosp	67917	CPT	REPAIR OF ECTROPION; EXTENSIVE (EG, TARSAL STRIP OPERATIONS)
OHANAA	Q3 2025	Outpatient Hosp	67924	CPT	REPAIR OF ENTROPION; EXTENSIVE (EG, TARSAL STRIP OR CAPSULOPALPEBRAL FASCIA REPAIRS OPERATION)
OHANAA	Q3 2025	Outpatient Hosp	67935	CPT	SUTURE OF RECENT WOUND, EYELID, INVOLVING LID MARGIN, TARSUS, AND/OR PALPEBRAL CONJUNCTIVA DIRECT CLOSURE; FULL THICKNESS
OHANAA	Q3 2025	Outpatient Hosp	67950	CPT	CANTHOPLASTY (RECONSTRUCTION OF CANTHUS)
OHANAA	Q3 2025	Outpatient Hosp	67961	CPT	EXCISION AND REPAIR OF EYELID, INVOLVING LID MARGIN, TARSUS, CONJUNCTIVA, CANTHUS, OR FULL THICKNESS, MAY INCLUDE PREPARAT
OHANAA	Q3 2025	Outpatient Hosp	68326	CPT	CONJUNCTIVOPLASTY, RECONSTRUCTION CUL-DE-SAC; WITH CONJUNCTIVAL GRAFT OR EXTENSIVE REARRANGEMENT
OHANAA	Q3 2025	Outpatient Hosp	68340	CPT	REPAIR OF SYMBLEPHARON; DIVISION OF SYMBLEPHARON, WITH OR WITHOUT INSERTION OF CONFORMER OR CONTACT LENS
OHANAA	Q3 2025	Outpatient Hosp	68720	CPT	DACRYOCYSTORHINOSTOMY (FISTULIZATION OF LACRIMAL SAC TO NASAL CAVITY)
OHANAA	Q3 2025	Outpatient Hosp	68750	CPT	CONJUNCTIVORHINOSTOMY (FISTULIZATION OF CONJUNCTIVA TO NASAL CAVITY); WITH INSERTION OF TUBE OR STENT
OHANAA	Q3 2025	Outpatient Hosp	68810	CPT	PROBING OF NASOLACRIMAL DUCT, WITH OR WITHOUT IRRIGATION;
OHANAA	Q3 2025	Outpatient Hosp	68811	CPT	PROBING OF NASOLACRIMAL DUCT, WITH OR WITHOUT IRRIGATION; REQUIRING GENERAL ANESTHESIA

OHANAA	Q3 2025	Outpatient Hosp	68815	CPT	PROBING OF NASOLACRIMAL DUCT, WITH OR WITHOUT IRRIGATION; WITH INSERTION OF TUBE OR STENT
OHANAA	Q3 2025	Outpatient Hosp	68816	CPT	PROBING OF NASOLACRIMAL DUCT, WITH OR WITHOUT IRRIGATION; WITH TRANSLUMINAL BALLOON CATHETER DILATION
OHANAA	Q3 2025	Outpatient Hosp	69140	CPT	EXCISION EXOSTOSIS(ES), EXTERNAL AUDITORY CANAL
OHANAA	Q3 2025	Outpatient Hosp	69300	CPT	OTOPLASTY, PROTRUDING EAR, WITH OR WITHOUT SIZE REDUCTION
OHANAA	Q3 2025	Outpatient Hosp	69310	CPT	RECONSTRUCTION OF EXTERNAL AUDITORY CANAL (MEATOPLASTY) (EG, FOR STENOSIS DUE TO INJURY, INFECTION) (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp	69420	CPT	MYRINGOTOMY INCLUDING ASPIRATION AND/OR EUSTACHIAN TUBE INFLATION
OHANAA	Q3 2025	Outpatient Hosp	69421	CPT	MYRINGOTOMY INCLUDING ASPIRATION AND/OR EUSTACHIAN TUBE INFLATION REQUIRING GENERAL ANESTHESIA
OHANAA	Q3 2025	Outpatient Hosp	69436	CPT	TYMPANOSTOMY (REQUIRING INSERTION OF VENTILATING TUBE), GENERAL ANESTHESIA
OHANAA	Q3 2025	Outpatient Hosp	69620	CPT	MYRINGOPLASTY (SURGERY CONFINED TO DRUMHEAD AND DONOR AREA)
OHANAA	Q3 2025	Outpatient Hosp	69631	CPT	TYMPANOPLASTY WITHOUT MASTOIDECTOMY (INCLUDING CANALPLASTY, ATTICOTOMY AND/OR MIDDLE EAR SURGERY), INITIAL OR REVISION; WI
OHANAA	Q3 2025	Outpatient Hosp	69632	CPT	TYMPANOPLASTY WITHOUT MASTOIDECTOMY (INCLUDING CANALPLASTY, ATTICOTOMY AND/OR MIDDLE EAR SURGERY), INITIAL OR REVISION; WI
OHANAA	Q3 2025	Outpatient Hosp	69644	CPT	TYMPANOPLASTY WITH MASTOIDECTOMY (INCLUDING CANALPLASTY, MIDDLE EAR SURGERY, TYMPANIC MEMBRANE REPAIR); WITH INTACT OR REC
OHANAA	Q3 2025	Outpatient Hosp	69660	CPT	STAPEDECTOMY OR STAPEDOTOMY WITH REESTABLISHMENT OF OSSICULAR CONTINUITY, WITH OR WITHOUT USE OF FOREIGN MATERIAL;
OHANAA	Q3 2025	Outpatient Hosp	69670	CPT	MASTOID OBLITERATION (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp	69714	CPT	IMPLANTATION, OSSEOINTEGRATED IMPLANT, TEMPORAL BONE, WITH PERCUTANEOUS ATTACHMENT TO EXTERNAL SPEECH PROCESSOR/COCHLEAR S
OHANAA	Q3 2025	Outpatient Hosp	69717	CPT	REPLACEMENT (INCLUDING REMOVAL OF EXISTING DEVICE), OSSEOINTEGRATED IMPLANT, TEMPORAL BONE, WITH PERCUTANEOUS ATTACHMENT T
OHANAA	Q3 2025	Outpatient Hosp	69799	CPT	UNLISTED PROCEDURE, MIDDLE EAR
OHANAA	Q3 2025	Outpatient Hosp	69930	CPT	COCHLEAR DEVICE IMPLANTATION, WITH OR WITHOUT MASTOIDECTOMY
OHANAA	Q3 2025	Outpatient Hosp	70490	CPT	COMPUTED TOMOGRAPHY, SOFT TISSUE NECK; WITHOUT CONTRAST MATERIAL
OHANAA	Q3 2025	Outpatient Hosp	70491	CPT	COMPUTED TOMOGRAPHY, SOFT TISSUE NECK; WITH CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Outpatient Hosp	70492	CPT	COMPUTED TOMOGRAPHY, SOFT TISSUE NECK; WITHOUT CONTRAST MATERIAL FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
OHANAA	Q3 2025	Outpatient Hosp	70552	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM); WITH CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Outpatient Hosp	71111	CPT	RADIOLOGIC EXAMINATION, RIBS, BILATERAL; INCLUDING POSTEROANTERIOR CHEST, MINIMUM OF FOUR VIEWS
OHANAA	Q3 2025	Outpatient Hosp	71260	CPT	COMPUTED TOMOGRAPHY, THORAX, DIAGNOSTIC; WITH CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Outpatient Hosp	71270	CPT	COMPUTED TOMOGRAPHY, THORAX, DIAGNOSTIC; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
OHANAA	Q3 2025	Outpatient Hosp	72132	CPT	COMPUTED TOMOGRAPHY, LUMBAR SPINE; WITH CONTRAST MATERIAL
OHANAA	Q3 2025	Outpatient Hosp	72133	CPT	COMPUTED TOMOGRAPHY, LUMBAR SPINE; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
OHANAA	Q3 2025	Outpatient Hosp	72147	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, THORACIC; WITH CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Outpatient Hosp	72157	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERI
OHANAA	Q3 2025	Outpatient Hosp	72159	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, SPINAL CANAL AND CONTENTS, WITH OR WITHOUT CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Outpatient Hosp	73115	CPT	RADIOLOGIC EXAMINATION, WRIST, ARTHROGRAPHY, RADIOLOGICAL SUPERVISION AND INTERPRETATION
OHANAA	Q3 2025	Outpatient Hosp	73722	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF LOWER EXTREMITY; WITH CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Outpatient Hosp	74175	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, ABDOMEN, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED, AND IMAG
OHANAA	Q3 2025	Outpatient Hosp	74181	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ABDOMEN; WITHOUT CONTRAST MATERIAL(S)
OHANAA	Q3 2025	Outpatient Hosp	74420	CPT	UROGRAPHY, RETROGRADE, WITH OR WITHOUT KUB
OHANAA	Q3 2025	Outpatient Hosp	74455	CPT	URETHROCYSTOGRAPHY, VOIDING, RADIOLOGICAL SUPERVISION AND INTERPRETATION
OHANAA	Q3 2025	Outpatient Hosp	75557	CPT	CARDIAC MAGNETIC RESONANCE IMAGING FOR MORPHOLOGY AND FUNCTION WITHOUT CONTRAST MATERIAL;
OHANAA	Q3 2025	Outpatient Hosp	75561	CPT	CARDIAC MAGNETIC RESONANCE IMAGING FOR MORPHOLOGY AND FUNCTION WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL
OHANAA	Q3 2025	Outpatient Hosp	75574	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, HEART, CORONARY ARTERIES AND BYPASS GRAFTS (WHEN PRESENT), WITH CONTRAST MATERIAL, INCLUDING 3D
OHANAA	Q3 2025	Outpatient Hosp	75625	CPT	AORTOGRAPHY, ABDOMINAL, BY SERIALOGRAPHY, RADIOLOGICAL SUPERVISION AND INTERPRETATION
OHANAA	Q3 2025	Outpatient Hosp	75630	CPT	AORTOGRAPHY, ABDOMINAL PLUS BILATERAL ILIOFEMORAL LOWER EXTREMITY, CATHETER, BY SERIALOGRAPHY, RADIOLOGICAL SUPERVISION AN
OHANAA	Q3 2025	Outpatient Hosp	75635	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, ABDOMINAL AORTA AND BILATERAL ILIOFEMORAL LOWER EXTREMITY RUNOFF, WITH CONTRAST MATERIAL
OHANAA	Q3 2025	Outpatient Hosp	75710	CPT	ANGIOGRAPHY, EXTREMITY, UNILATERAL, RADIOLOGICAL SUPERVISION AND INTERPRETATION
OHANAA	Q3 2025	Outpatient Hosp	75716	CPT	ANGIOGRAPHY, EXTREMITY, BILATERAL, RADIOLOGICAL SUPERVISION AND INTERPRETATION
OHANAA	Q3 2025	Outpatient Hosp	75885	CPT	PERCUTANEOUS TRANSHEPATIC PORTOGRAPHY WITH HEMODYNAMIC EVALUATION, RADIOLOGICAL SUPERVISION AND INTERPRETATION
OHANAA	Q3 2025	Outpatient Hosp	75889	CPT	HEPATIC VENOGRAPHY, WEDGED OR FREE, WITH HEMODYNAMIC EVALUATION, RADIOLOGICAL SUPERVISION AND INTERPRETATION
OHANAA	Q3 2025	Outpatient Hosp	75956	CPT	ENDOVASCULAR REPAIR OF DESCENDING THORACIC AORTA (EG, ANEURYSM, PSEUDOANEURYSM, DISSECTION, PENETRATING ULCER, INTRAMURAL
OHANAA	Q3 2025	Outpatient Hosp	76380	CPT	COMPUTED TOMOGRAPHY, LIMITED OR LOCALIZED FOLLOW-UP STUDY
OHANAA	Q3 2025	Outpatient Hosp	76514	CPT	OPHTHALMIC ULTRASOUND, DIAGNOSTIC; CORNEAL PACHYMETRY, UNILATERAL OR BILATERAL (DETERMINATION OF CORNEAL THICKNESS)
OHANAA	Q3 2025	Outpatient Hosp	76516	CPT	OPHTHALMIC BIOMETRY BY ULTRASOUND ECHOGRAPHY, A-SCAN;
OHANAA	Q3 2025	Outpatient Hosp	76519	CPT	OPHTHALMIC BIOMETRY BY ULTRASOUND ECHOGRAPHY, A-SCAN; WITH INTRAOCULAR LENS POWER CALCULATION
OHANAA	Q3 2025	Outpatient Hosp	76700	CPT	ULTRASOUND, ABDOMINAL, REAL TIME WITH IMAGE DOCUMENTATION; COMPLETE
OHANAA	Q3 2025	Outpatient Hosp	76818	CPT	FETAL BIOPHYSICAL PROFILE; WITH NON-STRESS TESTING
OHANAA	Q3 2025	Outpatient Hosp	76819	CPT	FETAL BIOPHYSICAL PROFILE; WITHOUT NON-STRESS TESTING
OHANAA	Q3 2025	Outpatient Hosp	76820	CPT	DOPPLER VELOCIMETRY, FETAL; UMBILICAL ARTERY
OHANAA	Q3 2025	Outpatient Hosp	76821	CPT	DOPPLER VELOCIMETRY, FETAL; MIDDLE CEREBRAL ARTERY
OHANAA	Q3 2025	Outpatient Hosp	76872	CPT	ULTRASOUND, TRANSRECTAL;
OHANAA	Q3 2025	Outpatient Hosp	76946	CPT	ULTRASONIC GUIDANCE FOR AMNIOCENTESIS, IMAGING SUPERVISION AND INTERPRETATION
OHANAA	Q3 2025	Outpatient Hosp	77021	CPT	MAGNETIC RESONANCE IMAGING GUIDANCE FOR NEEDLE PLACEMENT (EG, FOR BIOPSY, NEEDLE ASPIRATION, INJECTION, OR PLACEMENT OF LOCALIZATION DEVICE) RADIOLOGICAL S
OHANAA	Q3 2025	Outpatient Hosp	77078	CPT	COMPUTED TOMOGRAPHY, BONE MINERAL DENSITY STUDY, 1 OR MORE SITES; AXIAL SKELETON (EG, HIPS, PELVIS, SPINE)
OHANAA	Q3 2025	Outpatient Hosp	77770	CPT	REMOTE AFTERLOADING HIGH DOSE RATE RADIONUCLIDE INTERSTITIAL OR INTRACAVITARY BRACHYTHERAPY, INCLUDES BASIC DOSIMETRY, WHEN PERFOR
OHANAA	Q3 2025	Outpatient Hosp	77771	CPT	REMOTE AFTERLOADING HIGH DOSE RATE RADIONUCLIDE INTERSTITIAL OR INTRACAVITARY BRACHYTHERAPY, INCLUDES BASIC DOSIMETRY, WHEN PERFOR
OHANAA	Q3 2025	Outpatient Hosp	77772	CPT	REMOTE AFTERLOADING HIGH DOSE RATE RADIONUCLIDE INTERSTITIAL OR INTRACAVITARY BRACHYTHERAPY, INCLUDES BASIC DOSIMETRY, WHEN PERFOR
OHANAA	Q3 2025	Outpatient Hosp	78452	CPT	MYOCARDIAL PERFUSION IMAGING, TOMOGRAPHIC (SPECT) (INCLUDING ATTENUATION CORRECTION, QUALITATIVE OR QUANTITATIVE WALL MOTION, EJEC
OHANAA	Q3 2025	Outpatient Hosp	78459	CPT	MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), METABOLIC EVALUATION STUDY (INCLUDING VENTRICULAR WALL MOTION[S] AND/OR EJECTION FRACTION[S], WHEN
OHANAA	Q3 2025	Outpatient Hosp	78700	CPT	KIDNEY IMAGING MORPHOLOGY;
OHANAA	Q3 2025	Outpatient Hosp	78804	CPT	RADIOPHARMACEUTICAL LOCALIZATION OF TUMOR, INFLAMMATORY PROCESS OR DISTRIBUTION OF RADIOPHARMACEUTICAL AGENT(S) (INCLUDES VASCULAR FLOW AND BLOOD POO
OHANAA	Q3 2025	Outpatient Hosp	78811	CPT	POSITRON EMISSION TOMOGRAPHY (PET) IMAGING; LIMITED AREA (EG, CHEST, HEAD/NECK)
OHANAA	Q3 2025	Outpatient Hosp	80074	CPT	ACUTE HEPATITIS PANEL THIS PANEL MUST INCLUDE THE FOLLOWING: HEPATITIS A ANTIBODY (HAAB), IGM ANTIBODY (86709) HEPATITIS B
OHANAA	Q3 2025	Outpatient Hosp	80076	CPT	HEPATIC FUNCTION PANEL THIS PANEL MUST INCLUDE THE FOLLOWING: ALBUMIN (82040) BILIRUBIN, TOTAL (82247) BILIRUBIN, DIRECT (
OHANAA	Q3 2025	Outpatient Hosp	80414	CPT	CHORIONIC GONADOTROPIN STIMULATION PANEL; TESTOSTERONE RESPONSE THIS PANEL MUST INCLUDE THE FOLLOWING: TESTOSTERONE (84403 X 2 ON 3 POOLED BLOOD SAMPLES
OHANAA	Q3 2025	Outpatient Hosp	81234	CPT	DMPK (DM1 PROTEIN KINASE) (EG, MYOTONIC DYSTROPHY TYPE 1) GENE ANALYSIS; EVALUATION TO DETECT ABNORMAL (EXPANDED) ALLELES
OHANAA	Q3 2025	Outpatient Hosp	83718	CPT	LIPOPROTEIN, DIRECT MEASUREMENT; HIGH DENSITY CHOLESTEROL (HDL CHOLESTEROL)
OHANAA	Q3 2025	Outpatient Hosp	85652	CPT	SEDIMENTATION RATE, ERYTHROCYTE; AUTOMATED
OHANAA	Q3 2025	Outpatient Hosp	85670	CPT	THROMBIN TIME; PLASMA
OHANAA	Q3 2025	Outpatient Hosp	86038	CPT	ANTINUCLEAR ANTIBODIES (ANA);
OHANAA	Q3 2025	Outpatient Hosp	86430	CPT	RHEUMATOID FACTOR; QUALITATIVE
OHANAA	Q3 2025	Outpatient Hosp	86593	CPT	SYPHILIS TEST; QUANTITATIVE
OHANAA	Q3 2025	Outpatient Hosp	86663	CPT	ANTIBODY; EPSTEIN-BARR (EB) VIRUS, EARLY ANTIGEN (EA)
OHANAA	Q3 2025	Outpatient Hosp	86664	CPT	ANTIBODY; EPSTEIN-BARR (EB) VIRUS, NUCLEAR ANTIGEN (EBNA)
OHANAA	Q3 2025	Outpatient Hosp	86701	CPT	ANTIBODY; HIV-1
OHANAA	Q3 2025	Outpatient Hosp	86702	CPT	ANTIBODY; HIV-2
OHANAA	Q3 2025	Outpatient Hosp	86905	CPT	BLOOD TYPING, SEROLOGIC; RBC ANTIGENS, OTHER THAN ABO OR RH (D), EACH
OHANAA	Q3 2025	Outpatient Hosp	86920	CPT	COMPATIBILITY TEST EACH UNIT; IMMEDIATE SPIN TECHNIQUE
OHANAA	Q3 2025	Outpatient Hosp	87390	CPT	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOASSAY TECHNIQUE, (EG, ENZYME IMMUNOASSAY [EIA], ENZYME-LINKED IMMUNOSORBENT ASSAY [ELISA], IMMUNOCHEMILUMINO
OHANAA	Q3 2025	Outpatient Hosp	87391	CPT	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOASSAY TECHNIQUE, (EG, ENZYME IMMUNOASSAY [EIA], ENZYME-LINKED IMMUNOSORBENT ASSAY [ELISA], IMMUNOCHEMILUMINO
OHANAA	Q3 2025	Outpatient Hosp	87635	CPT	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID-19]), AMPLI
OHANAA	Q3 2025	Outpatient Hosp	88275	CPT	MOLECULAR CYTOGENETICS; INTERPHASE IN SITU HYBRIDIZATION, ANALYZE 100-300 CELLS
OHANAA	Q3 2025	Outpatient Hosp	88740	CPT	HEMOGLOBIN, QUANTITATIVE, TRANSCUTANEOUS, PER DAY; CARBOXYHEMOGLOBIN
OHANAA	Q3 2025	Outpatient Hosp	90378	CPT	RESPIRATORY SYNCYTIAL VIRUS IMMUNE GLOBULIN (RSV-IGIM), FOR INTRAMUSCULAR USE, 50 MG, EACH
OHANAA	Q3 2025	Outpatient Hosp	90867	CPT	THERAPEUTIC REPETITIVE TRANSCRANIAL MAGNETIC STIMULATION TREATMENT; PLANNING
OHANAA	Q3 2025	Outpatient Hosp	90868	CPT	THERAPEUTIC REPETITIVE TRANSCRANIAL MAGNETIC STIMULATION TREATMENT; DELIVERY AND MANAGEMENT, PER SESSION
OHANAA	Q3 2025	Outpatient Hosp	90870	CPT	ELECTROCONVULSIVE THERAPY (INCLUDES NECESSARY MONITORING)
OHANAA	Q3 2025	Outpatient Hosp	90935	CPT	HEMODIALYSIS PROCEDURE WITH SINGLE PHYSICIAN EVALUATION
OHANAA	Q3 2025	Outpatient Hosp	90937	CPT	HEMODIALYSIS PROCEDURE REQUIRING REPEATED EVALUATION(S) WITH OR WITHOUT SUBSTANTIAL REVISION OF DIALYSIS PRESCRIPTION
OHANAA	Q3 2025	Outpatient Hosp	90945	CPT	DIALYSIS PROCEDURE OTHER THAN HEMODIALYSIS (EG, PERITONEAL DIALYSIS, HEMOFILTRATION, OR OTHER CONTINUOUS RENAL REPLACEMENT
OHANAA	Q3 2025	Outpatient Hosp	90947	CPT	DIALYSIS PROCEDURE OTHER THAN HEMODIALYSIS (EG, PERITONEAL DIALYSIS, HEMOFILTRATION, OR OTHER CONTINUOUS RENAL REPLACEMENT
OHANAA	Q3 2025	Outpatient Hosp	90993	CPT	DIALYSIS TRAINING, PATIENT, INCLUDING HELPER WHERE APPLICABLE, ANY MODE, COURSE NOT COMPLETED, PER TRAINING SESSION

OHANAA	Q3 2025	Outpatient Hosp	90999	CPT	UNLISTED DIALYSIS PROCEDURE, INPATIENT OR OUTPATIENT
OHANAA	Q3 2025	Outpatient Hosp	91034	CPT	ESOPHAGUS, GASTROESOPHAGEAL REFLUX TEST; WITH NASAL CATHETER PH ELECTRODE(S) PLACEMENT, RECORDING, ANALYSIS AND INTERPRETA
OHANAA	Q3 2025	Outpatient Hosp	91038	CPT	ESOPHAGEAL FUNCTION TEST, GASTROESOPHAGEAL REFLUX TEST WITH NASAL CATHETER INTRALUMINAL IMPEDANCE ELECTRODE(S) PLACEMENT,
OHANAA	Q3 2025	Outpatient Hosp	92014	CPT	OPHTHALMOLOGICAL SERVICES: MEDICAL EXAMINATION AND EVALUATION, WITH INITIATION OR CONTINUATION OF DIAGNOSTIC AND TREATMENT
OHANAA	Q3 2025	Outpatient Hosp	92015	CPT	DETERMINATION OF REFRACTIVE STATE
OHANAA	Q3 2025	Outpatient Hosp	92018	CPT	OPHTHALMOLOGICAL EXAMINATION AND EVALUATION, UNDER GENERAL ANESTHESIA, WITH OR WITHOUT MANIPULATION OF GLOBE FOR PASSIVE R
OHANAA	Q3 2025	Outpatient Hosp	92019	CPT	OPHTHALMOLOGICAL EXAMINATION AND EVALUATION, UNDER GENERAL ANESTHESIA, WITH OR WITHOUT MANIPULATION OF GLOBE FOR PASSIVE R
OHANAA	Q3 2025	Outpatient Hosp	92020	CPT	GONIOSCOPY (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp	92025	CPT	COMPUTERIZED CORNEAL TOPOGRAPHY, UNILATERAL OR BILATERAL, WITH INTERPRETATION AND REPORT
OHANAA	Q3 2025	Outpatient Hosp	92132	CPT	SCANNING COMPUTERIZED OPHTHALMIC DIAGNOSTIC IMAGING, ANTERIOR SEGMENT, WITH INTERPRETATION AND REPORT, UNILATERAL OR BILATERAL
OHANAA	Q3 2025	Outpatient Hosp	92136	CPT	OPHTHALMIC BIOMETRY BY PARTIAL COHERENCE INTERFEROMETRY WITH INTRAOCULAR LENS POWER CALCULATION
OHANAA	Q3 2025	Outpatient Hosp	92201	CPT	OPHTHALMOSCOPY, EXTENDED; WITH RETINAL DRAWING AND SCLERAL DEPRESSION OF PERIPHERAL RETINAL DISEASE (EG, FOR RETINAL TEAR, RETINAL DETACHMENT, RETINAL TUMO
OHANAA	Q3 2025	Outpatient Hosp	92202	CPT	OPHTHALMOSCOPY, EXTENDED; WITH DRAWING OF OPTIC NERVE OR MACULA (EG, FOR GLAUCOMA, MACULAR PATHOLOGY, TUMOR) WITH INTERPRETATION AND REPORT, UNILATERAL
OHANAA	Q3 2025	Outpatient Hosp	92235	CPT	FLUORESCEIN ANGIOGRAPHY (INCLUDES MULTIFRAME IMAGING) WITH INTERPRETATION AND REPORT
OHANAA	Q3 2025	Outpatient Hosp	92250	CPT	FUNDUS PHOTOGRAPHY WITH INTERPRETATION AND REPORT
OHANAA	Q3 2025	Outpatient Hosp	92285	CPT	EXTERNAL OCULAR PHOTOGRAPHY WITH INTERPRETATION AND REPORT FOR DOCUMENTATION OF MEDICAL PROGRESS (EG, CLOSE-UP PHOTOGRAPHY
OHANAA	Q3 2025	Outpatient Hosp	92511	CPT	NASOPHARYNGOSCOPY WITH ENDOSCOPE (SEPARATE PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp	92540	CPT	BASIC VESTIBULAR EVALUATION, INCLUDES SPONTANEOUS NYSTAGMUS TEST WITH ECCENTRIC GAZE FIXATION NYSTAGMUS, WITH RECORDING, POSITIONA
OHANAA	Q3 2025	Outpatient Hosp	92541	CPT	SPONTANEOUS NYSTAGMUS TEST, INCLUDING GAZE AND FIXATION NYSTAGMUS, WITH RECORDING
OHANAA	Q3 2025	Outpatient Hosp	92542	CPT	POSITIONAL NYSTAGMUS TEST, MINIMUM OF 4 POSITIONS, WITH RECORDING
OHANAA	Q3 2025	Outpatient Hosp	92544	CPT	OPTOKINETIC NYSTAGMUS TEST, BIDIRECTIONAL, FOVEAL OR PERIPHERAL STIMULATION, WITH RECORDING
OHANAA	Q3 2025	Outpatient Hosp	92545	CPT	OSCILLATING TRACKING TEST, WITH RECORDING
OHANAA	Q3 2025	Outpatient Hosp	92546	CPT	SINUSOIDAL VERTICAL AXIS ROTATIONAL TESTING
OHANAA	Q3 2025	Outpatient Hosp	92550	CPT	TYMPANOMETRY AND REFLEX THRESHOLD MEASUREMENTS
OHANAA	Q3 2025	Outpatient Hosp	92613	CPT	FLEXIBLE FIBEROPTIC ENDOSCOPIC EVALUATION OF SWALLOWING BY CINE OR VIDEO RECORDING; PHYSICIAN INTERPRETATION AND REPORT ON
OHANAA	Q3 2025	Outpatient Hosp	92616	CPT	FLEXIBLE FIBEROPTIC ENDOSCOPIC EVALUATION OF SWALLOWING AND LARYNGEAL SENSORY TESTING BY CINE OR VIDEO RECORDING;
OHANAA	Q3 2025	Outpatient Hosp	92617	CPT	FLEXIBLE FIBEROPTIC ENDOSCOPIC EVALUATION OF SWALLOWING AND LARYNGEAL SENSORY TESTING BY CINE OR VIDEO RECORDING; PHYSICIA
OHANAA	Q3 2025	Outpatient Hosp	92920	CPT	PERCUTANEOUS TRANSLUMINAL CORONARY ANGIOPLASTY; SINGLE MAJOR CORONARY ARTERY OR BRANCH
OHANAA	Q3 2025	Outpatient Hosp	92924	CPT	PERCUTANEOUS TRANSLUMINAL CORONARY ATHERECTOMY, WITH CORONARY ANGIOPLASTY WHEN PERFORMED; SINGLE MAJOR CORONARY ARTERY OR BRANCH
OHANAA	Q3 2025	Outpatient Hosp	92928	CPT	PERCUTANEOUS TRANSCATHETER PLACEMENT OF INTRACORONARY STENT(S), WITH CORONARY ANGIOPLASTY WHEN PERFORMED; SINGLE MAJOR CORONARY AR
OHANAA	Q3 2025	Outpatient Hosp	92929	CPT	PERCUTANEOUS TRANSCATHETER PLACEMENT OF INTRACORONARY STENT(S), WITH CORONARY ANGIOPLASTY WHEN PERFORMED; EACH ADDITIONAL BRANCH O
OHANAA	Q3 2025	Outpatient Hosp	92933	CPT	PERCUTANEOUS TRANSLUMINAL CORONARY ATHERECTOMY, WITH INTRACORONARY STENT, WITH CORONARY ANGIOPLASTY WHEN PERFORMED; SINGLE MAJOR C
OHANAA	Q3 2025	Outpatient Hosp	92937	CPT	PERCUTANEOUS TRANSLUMINAL REVASCULARIZATION OF OR THROUGH CORONARY ARTERY BYPASS GRAFT (INTERNAL MAMMARY, FREE ARTERIAL, VENOUS),
OHANAA	Q3 2025	Outpatient Hosp	92941	CPT	PERCUTANEOUS TRANSLUMINAL REVASCULARIZATION OF ACUTE TOTAL/SUBTOTAL OCCLUSION DURING ACUTE MYOCARDIAL INFARCTION, CORONARY ARTERY
OHANAA	Q3 2025	Outpatient Hosp	92943	CPT	PERCUTANEOUS TRANSLUMINAL REVASCULARIZATION OF CHRONIC TOTAL OCCLUSION, CORONARY ARTERY, CORONARY ARTERY BRANCH, OR CORONARY ARTER
OHANAA	Q3 2025	Outpatient Hosp	92960	CPT	CARDIOVERSION, ELECTIVE, ELECTRICAL CONVERSION OF ARRHYTHMIA; EXTERNAL
OHANAA	Q3 2025	Outpatient Hosp	92987	CPT	PERCUTANEOUS BALLOON VALVULOPLASTY; MITRAL VALVE
OHANAA	Q3 2025	Outpatient Hosp	93016	CPT	CARDIOVASCULAR STRESS TEST USING MAXIMAL OR SUBMAXIMAL TREADMILL OR BICYCLE EXERCISE, CONTINUOUS ELECTROCARDIOGRAPHIC MONI
OHANAA	Q3 2025	Outpatient Hosp	93017	CPT	CARDIOVASCULAR STRESS TEST USING MAXIMAL OR SUBMAXIMAL TREADMILL OR BICYCLE EXERCISE, CONTINUOUS ELECTROCARDIOGRAPHIC MONI
OHANAA	Q3 2025	Outpatient Hosp	93018	CPT	CARDIOVASCULAR STRESS TEST USING MAXIMAL OR SUBMAXIMAL TREADMILL OR BICYCLE EXERCISE, CONTINUOUS ELECTROCARDIOGRAPHIC MONI
OHANAA	Q3 2025	Outpatient Hosp	93245	CPT	EXTERNAL ELECTROCARDIOGRAPHIC RECORDING FOR MORE THAN 7 DAYS UP TO 15 DAYS BY CONTINUOUS RHYTHM RECORDING AND STORAGE; INCLUDES RECORDING, SCANNING A
OHANAA	Q3 2025	Outpatient Hosp	93246	CPT	EXTERNAL ELECTROCARDIOGRAPHIC RECORDING FOR MORE THAN 7 DAYS UP TO 15 DAYS BY CONTINUOUS RHYTHM RECORDING AND STORAGE; RECORDING (INCLUDES CONNECTIO
OHANAA	Q3 2025	Outpatient Hosp	93247	CPT	EXTERNAL ELECTROCARDIOGRAPHIC RECORDING FOR MORE THAN 7 DAYS UP TO 15 DAYS BY CONTINUOUS RHYTHM RECORDING AND STORAGE; SCANNING ANALYSIS WITH REPORT
OHANAA	Q3 2025	Outpatient Hosp	93248	CPT	EXTERNAL ELECTROCARDIOGRAPHIC RECORDING FOR MORE THAN 7 DAYS UP TO 15 DAYS BY CONTINUOUS RHYTHM RECORDING AND STORAGE; REVIEW AND INTERPRETATION
OHANAA	Q3 2025	Outpatient Hosp	93303	CPT	TRANSTHORACIC ECHOCARDIOGRAPHY FOR CONGENITAL CARDIAC ANOMALIES; COMPLETE
OHANAA	Q3 2025	Outpatient Hosp	93304	CPT	TRANSTHORACIC ECHOCARDIOGRAPHY FOR CONGENITAL CARDIAC ANOMALIES; FOLLOW-UP OR LIMITED STUDY
OHANAA	Q3 2025	Outpatient Hosp	93307	CPT	ECHOCARDIOGRAPHY, TRANSTHORACIC, REAL-TIME WITH IMAGE DOCUMENTATION (2D) INCLUDES M-MODE RECORDING; WHEN PERFORMED, COMPLETE, W/O
OHANAA	Q3 2025	Outpatient Hosp	93308	CPT	ECHOCARDIOGRAPHY, TRANSTHORACIC, REAL-TIME WITH IMAGE DOCUMENTATION (2D) WITH OR WITHOUT M-MODE RECORDING; FOLLOW-UP OR LI
OHANAA	Q3 2025	Outpatient Hosp	93313	CPT	ECHOCARDIOGRAPHY, TRANSESOPHAGEAL, REAL TIME WITH IMAGE DOCUMENTATION (2D) (WITH OR WITHOUT M-MODE RECORDING); PLACEMENT O
OHANAA	Q3 2025	Outpatient Hosp	93320	CPT	DOPPLER ECHOCARDIOGRAPHY, PULSED WAVE AND/OR CONTINUOUS WAVE WITH SPECTRAL DISPLAY (LIST SEPARATELY IN ADDITION TO CODES F
OHANAA	Q3 2025	Outpatient Hosp	93321	CPT	DOPPLER ECHOCARDIOGRAPHY, PULSED WAVE AND/OR CONTINUOUS WAVE WITH SPECTRAL DISPLAY (LIST SEPARATELY IN ADDITION TO CODES F
OHANAA	Q3 2025	Outpatient Hosp	93350	CPT	ECHOCARDIOGRAPHY, TRANSTHORACIC, REAL-TIME WITH IMAGE DOCUMENTATION (2D), WITH OR WITHOUT M-MODE RECORDING, DURING REST AN
OHANAA	Q3 2025	Outpatient Hosp	93451	CPT	RIGHT HEART CATHETERIZATION INCLUDING MEASUREMENT(S) OF OXYGEN SATURATION AND CARDIAC OUTPUT, WHEN PERFORMED
OHANAA	Q3 2025	Outpatient Hosp	93452	CPT	LEFT HEART CATHETERIZATION INCLUDING INTRAPROCEDURAL INJECTION(S) FOR LEFT VENTRICULOGRAPHY, IMAGING SUPERVISION AND INTERPRETATIO
OHANAA	Q3 2025	Outpatient Hosp	93453	CPT	COMBINED RIGHT AND LEFT HEART CATHETERIZATION INCLUDING INTRAPROCEDURAL INJECTION(S) FOR LEFT VENTRICULOGRAPHY, IMAGING SUPERVISIO
OHANAA	Q3 2025	Outpatient Hosp	93454	CPT	CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY
OHANAA	Q3 2025	Outpatient Hosp	93455	CPT	CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY
OHANAA	Q3 2025	Outpatient Hosp	93456	CPT	CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY
OHANAA	Q3 2025	Outpatient Hosp	93457	CPT	CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY
OHANAA	Q3 2025	Outpatient Hosp	93458	CPT	CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY
OHANAA	Q3 2025	Outpatient Hosp	93459	CPT	CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY
OHANAA	Q3 2025	Outpatient Hosp	93461	CPT	CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY
OHANAA	Q3 2025	Outpatient Hosp	93567	CPT	INJECTION PROCEDURE DURING CARDIAC CATHETERIZATION INCLUDING IMAGING SUPERVISION, INTERPRETATION, AND REPORT; FOR SUPRAVALVULAR AO
OHANAA	Q3 2025	Outpatient Hosp	93580	CPT	PERCUTANEOUS TRANSCATHETER CLOSURE OF CONGENITAL INTERATRIAL COMMUNICATION (IE, FONTAN FENESTRATION, ATRIAL SEPTAL DEFECT)
OHANAA	Q3 2025	Outpatient Hosp	93583	CPT	PERCUTANEOUS TRANSCATHETER SEPTAL REDUCTION THERAPY (EG, ALCOHOL SEPTAL ABLATION) INCLUDING TEMPORARY PACEMAKER INSERTION WHEN PER
OHANAA	Q3 2025	Outpatient Hosp	93609	CPT	INTRAVENTRICULAR AND/OR INTRA-ATRIAL MAPPING OF TACHYCARDIA SITE(S) WITH CATHETER MANIPULATION TO RECORD FROM MULTIPLE SIT
OHANAA	Q3 2025	Outpatient Hosp	93613	CPT	INTRACARDIAC ELECTROPHYSIOLOGIC 3-DIMENSIONAL MAPPING (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
OHANAA	Q3 2025	Outpatient Hosp	93619	CPT	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION WITH RIGHT ATRIAL PACING AND RECORDING, RIGHT VENTRICULAR PACING AND RECORDING
OHANAA	Q3 2025	Outpatient Hosp	93620	CPT	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION INCLUDING INSERTION AND REPOSITIONING OF MULTIPLE ELECTRODE CATHETERS WITH IND
OHANAA	Q3 2025	Outpatient Hosp	93621	CPT	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION INCLUDING INSERTION AND REPOSITIONING OF MULTIPLE ELECTRODE CATHETERS WITH IND
OHANAA	Q3 2025	Outpatient Hosp	93622	CPT	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION INCLUDING INSERTION AND REPOSITIONING OF MULTIPLE ELECTRODE CATHETERS WITH IND
OHANAA	Q3 2025	Outpatient Hosp	93623	CPT	PROGRAMMED STIMULATION AND PACING AFTER INTRAVENOUS DRUG INFUSION (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDU
OHANAA	Q3 2025	Outpatient Hosp	93631	CPT	INTRA-OPERATIVE EPICARDIAL AND ENDOCARDIAL PACING AND MAPPING TO LOCALIZE THE SITE OF TACHYCARDIA OR ZONE OF SLOW CONDUCTI
OHANAA	Q3 2025	Outpatient Hosp	93640	CPT	ELECTROPHYSIOLOGIC EVALUATION OF SINGLE OR DUAL CHAMBER PACING CARDIOVERTER-DEFIBRILLATOR LEADS INCLUDING DEFIBRILLATION T
OHANAA	Q3 2025	Outpatient Hosp	93650	CPT	INTRACARDIAC CATHETER ABLATION OF ATRIOVENTRICULAR NODE FUNCTION, ATRIOVENTRICULAR CONDUCTION FOR CREATION OF COMPLETE HEA
OHANAA	Q3 2025	Outpatient Hosp	93653	CPT	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION INCLUDING INSERTION AND REPOSITIONING OF MULTIPLE ELECTRODE CATHETERS WITH INDUCTION O
OHANAA	Q3 2025	Outpatient Hosp	93654	CPT	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION INCLUDING INSERTION AND REPOSITIONING OF MULTIPLE ELECTRODE CATHETERS WITH INDUCTION O
OHANAA	Q3 2025	Outpatient Hosp	93655	CPT	INTRACARDIAC CATHETER ABLATION OF A DISCRETE MECHANISM OF ARRHYTHMIA WHICH IS DISTINCT FROM THE PRIMARY ABLATED MECHANISM, INCLUDI
OHANAA	Q3 2025	Outpatient Hosp	93656	CPT	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION INCLUDING TRANSSEPTAL CATHETERIZATIONS, INSERTION AND REPOSITIONING OF MULTIPLE ELECTR
OHANAA	Q3 2025	Outpatient Hosp	93657	CPT	ADDITIONAL LINEAR OR FOCAL INTRACARDIAC CATHETER ABLATION OF THE LEFT OR RIGHT ATRIUM FOR TREATMENT OF ATRIAL FIBRILLATION REMAINI
OHANAA	Q3 2025	Outpatient Hosp	93660	CPT	EVALUATION OF CARDIOVASCULAR FUNCTION WITH TILT TABLE EVALUATION, WITH CONTINUOUS ECG MONITORING AND INTERMITTENT BLOOD PR
OHANAA	Q3 2025	Outpatient Hosp	93662	CPT	INTRACARDIAC ECHOCARDIOGRAPHY DURING THERAPEUTIC/DIAGNOSTIC INTERVENTION, INCLUDING IMAGING SUPERVISION AND INTERPRETATION
OHANAA	Q3 2025	Outpatient Hosp	93797	CPT	PHYSICIAN SERVICES FOR OUTPATIENT CARDIAC REHABILITATION; WITHOUT CONTINUOUS ECG MONITORING (PER SESSION)
OHANAA	Q3 2025	Outpatient Hosp	93799	CPT	UNLISTED CARDIOVASCULAR SERVICE OR PROCEDURE
OHANAA	Q3 2025	Outpatient Hosp	93922	CPT	NONINVASIVE PHYSIOLOGIC STUDIES OF UPPER OR LOWER EXTREMITY ARTERIES, SINGLE LEVEL, BILATERAL (EG, ANKLE/BRACHIAL INDICES,
OHANAA	Q3 2025	Outpatient Hosp	93924	CPT	NONINVASIVE PHYSIOLOGIC STUDIES OF LOWER EXTREMITY ARTERIES, AT REST AND FOLLOWING TREADMILL STRESS TESTING, COMPLETE BILA
OHANAA	Q3 2025	Outpatient Hosp	93925	CPT	DUPLEX SCAN OF LOWER EXTREMITY ARTERIES OR ARTERIAL BYPASS GRAFTS; COMPLETE BILATERAL STUDY
OHANAA	Q3 2025	Outpatient Hosp	93970	CPT	DUPLEX SCAN OF EXTREMITY VEINS INCLUDING RESPONSES TO COMPRESSION AND OTHER MANEUVERS; COMPLETE BILATERAL STUDY
OHANAA	Q3 2025	Outpatient Hosp	93975	CPT	DUPLEX SCAN OF ARTERIAL INFLOW AND VENOUS OUTFLOW OF ABDOMINAL, PELVIC, SCROTAL CONTENTS AND/OR RETROPERITONEAL ORGANS; CO
OHANAA	Q3 2025	Outpatient Hosp	93978	CPT	DUPLEX SCAN OF AORTA, INFERIOR VENA CAVA, ILIAC VASCULATURE, OR BYPASS GRAFTS; COMPLETE STUDY
OHANAA	Q3 2025	Outpatient Hosp	94680	CPT	OXYGEN UPTAKE, EXPIRED GAS ANALYSIS; REST AND EXERCISE, DIRECT, SIMPLE
OHANAA	Q3 2025	Outpatient Hosp	94761	CPT	NONINVASIVE EAR OR PULSE OXIMETRY FOR OXYGEN SATURATION; MULTIPLE DETERMINATIONS (EG, DURING EXERCISE)
OHANAA	Q3 2025	Outpatient Hosp	95718	CPT	ELECTROENCEPHALOGRAM (EEG), CONTINUOUS RECORDING, PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL REVIEW OF RECORDED EVENTS, ANALYSIS OF SPIKE AND
OHANAA	Q3 2025	Outpatient Hosp	95719	CPT	ELECTROENCEPHALOGRAM (EEG), CONTINUOUS RECORDING, PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL REVIEW OF RECORDED EVENTS, ANALYSIS OF SPIKE AND
OHANAA	Q3 2025	Outpatient Hosp	95801	CPT	SLEEP STUDY, UNATTENDED, SIMULTANEOUS RECORDING; MINIMUM OF HEART RATE, OXYGEN SATURATION, AND RESPIRATORY ANALYSIS (EG, BY AIRFLO
OHANAA	Q3 2025	Outpatient Hosp	96001	CPT	COMPREHENSIVE COMPUTER-BASED MOTION ANALYSIS BY VIDEO-TAPING AND 3-D KINEMATICS; WITH DYNAMIC PLANTAR PRESSURE MEASUREMENT
OHANAA	Q3 2025	Outpatient Hosp	96002	CPT	DYNAMIC SURFACE ELECTROMYOGRAPHY, DURING WALKING OR OTHER FUNCTIONAL ACTIVITIES, 1-12 MUSCLES
OHANAA	Q3 2025	Outpatient Hosp	96004	CPT	PHYSICIAN REVIEW AND INTERPRETATION OF COMPREHENSIVE COMPUTER-BASED MOTION ANALYSIS, DYNAMIC PLANTAR PRESSURE MEASUREMENTS

OHANAA	Q3 2025	Outpatient Hosp	96360	CPT	IV INFUSION HYDRATION INITIAL 31 MIN-1 HOUR INTRAVENOUS INFUSION, HYDRATION; INITIAL, 31 MINUTES TO 1 HOUR
OHANAA	Q3 2025	Outpatient Hosp	96361	CPT	IV INFUSION HYDRATION EACH ADDITIONAL HOUR INTRAVENOUS INFUSION, HYDRATION; EACH ADDITIONAL HOUR (LIST SEPARATELY IN ADDITION
OHANAA	Q3 2025	Outpatient Hosp	96365	CPT	IV INFUSION THERAPY/PROPHYLAXIS /DX 1ST >1 HOUR INTRAVENOUS INFUSION, FOR THERAPY, PROPHYLAXIS, OR DIAGNOSIS (SPECIFY SUBSTANCE OR
OHANAA	Q3 2025	Outpatient Hosp	96366	CPT	IV INFUSION THERAPY PROPHYLAXIS/DX EA HOUR INTRAVENOUS INFUSION, FOR THERAPY, PROPHYLAXIS, OR DIAGNOSIS (SPECIFY SUBSTANCE OR
OHANAA	Q3 2025	Outpatient Hosp	96368	CPT	IV NFS THERAPY PROPHYLAXIS/DX CONCURRENT NFS INTRAVENOUS INFUSION, FOR THERAPY, PROPHYLAXIS, OR DIAGNOSIS (SPECIFY SUBSTANCE OR
OHANAA	Q3 2025	Outpatient Hosp	96372	CPT	THERAPEUTIC, PROPHYLACTIC OR DIAGNOSTIC INJECTION (SPECIFY SUBSTANCE OR DRUG); SUBCUTANEOUS OR INTRAMUSCULAR
OHANAA	Q3 2025	Outpatient Hosp	96374	CPT	THER PROPH/DX NJX IV PUSH SINGLE/1ST SBST/DRUG THERAPEUTIC, PROPHYLACTIC, OR DIAGNOSTIC INJECTION (SPECIFY SUBSTANCE OR DRUG); IN
OHANAA	Q3 2025	Outpatient Hosp	96376	CPT	THERAPEUTIC, PROPHYLACTIC, OR DIAGNOSTIC INJECTION (SPECIFY SUBSTANCE OR DRUG); EACH ADDITIONAL SEQUENTIAL INTRAVENOUS PUSH OF THE
OHANAA	Q3 2025	Outpatient Hosp	96377	CPT	APPLICATION OF ON-BODY INJECTOR (INCLUDES CANNULA INSERTION) FOR TIMED SUBCUTANEOUS INJECTION
OHANAA	Q3 2025	Outpatient Hosp	96379	CPT	UNLISTED THERAPEUTIC, PROPHYLACTIC, OR DIAGNOSTIC INTRAVENOUS OR INTRA-ARTERIAL INJECTION OR INFUSION
OHANAA	Q3 2025	Outpatient Hosp	96401	CPT	CHEMOTHERAPY ADMINISTRATION, SUBCUTANEOUS OR INTRAMUSCULAR; NON-HORMONAL ANTI-NEOPLASTIC
OHANAA	Q3 2025	Outpatient Hosp	96402	CPT	CHEMOTHERAPY ADMINISTRATION, SUBCUTANEOUS OR INTRAMUSCULAR; HORMONAL ANTI-NEOPLASTIC
OHANAA	Q3 2025	Outpatient Hosp	96411	CPT	CHEMOTHERAPY ADMINISTRATION; INTRAVENOUS, PUSH TECHNIQUE, EACH ADDITIONAL SUBSTANCE/DRUG (LIST SEPARATELY IN ADDITION TO C
OHANAA	Q3 2025	Outpatient Hosp	96450	CPT	CHEMOTHERAPY ADMINISTRATION, INTO CNS (EG, INTRATHECAL), REQUIRING AND INCLUDING SPINAL PUNCTURE
OHANAA	Q3 2025	Outpatient Hosp	96523	CPT	IRRIGATION OF IMPLANTED VENOUS ACCESS DEVICE FOR DRUG DELIVERY SYSTEMS
OHANAA	Q3 2025	Outpatient Hosp	96567	CPT	PHOTODYNAMIC THERAPY BY EXTERNAL APPLICATION OF LIGHT TO DESTROY PREMALIGNANT LESIONS OF THE SKIN AND ADJACENT MUCOSA WITH APPLICATION AND ILLUMINATION/AC
OHANAA	Q3 2025	Outpatient Hosp	97297	CPT	Missing
OHANAA	Q3 2025	Outpatient Hosp	97502	CPT	Missing
OHANAA	Q3 2025	Outpatient Hosp	97596	CPT	Missing
OHANAA	Q3 2025	Outpatient Hosp	97603	CPT	Missing
OHANAA	Q3 2025	Outpatient Hosp	97605	CPT	NEGATIVE PRESSURE WOUND THERAPY (EG, VACUUM ASSISTED DRAINAGE COLLECTION), UTILIZING DURABLE MEDICAL EQUIPMENT (DME), INCLUDING TOPICAL APPLICATION(S), WOU
OHANAA	Q3 2025	Outpatient Hosp	97606	CPT	NEGATIVE PRESSURE WOUND THERAPY (EG, VACUUM ASSISTED DRAINAGE COLLECTION), UTILIZING DURABLE MEDICAL EQUIPMENT (DME), INCLUDING TOPICAL APPLICATION(S), WOU
OHANAA	Q3 2025	Outpatient Hosp	97608	CPT	NEGATIVE PRESSURE WOUND THERAPY, (EG, VACUUM ASSISTED DRAINAGE COLLECTION), UTILIZING DISPOSABLE, NON-DURABLE MEDICAL EQUIPMENT INCLUDING PROVISION OF EXU
OHANAA	Q3 2025	Outpatient Hosp	99091	CPT	COLLECTION AND INTERPRETATION OF PHYSIOLOGIC DATA (EG, ECG, BLOOD PRESSURE, GLUCOSE MONITORING) DIGITALLY STORED AND/OR TRANSMITTED BY THE PATIENT AND/OR C
OHANAA	Q3 2025	Outpatient Hosp	99155	CPT	MODERATE SEDATION SERVICES PROVIDED BY A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL OTHER THAN THE PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PRO
OHANAA	Q3 2025	Outpatient Hosp	99157	CPT	MODERATE SEDATION SERVICES PROVIDED BY A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL OTHER THAN THE PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PRO
OHANAA	Q3 2025	Outpatient Hosp	99217	CPT	OBSERVATION CARE DISCHARGE DAY MANAGEMENT (THIS CODE IS TO BE UTILIZED TO REPORT ALL SERVICES PROVIDED TO A PATIENT ON DISCHARGE FROM OUTPATIENT HOSPITAL "OB
OHANAA	Q3 2025	Outpatient Hosp	99306	CPT	INITIAL NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES THESE 3 KEY COMPONE
OHANAA	Q3 2025	Outpatient Hosp	99308	CPT	SUBSEQUENT NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES AT LEAST 2 OF TH
OHANAA	Q3 2025	Outpatient Hosp	A4648	HCPCS	TISSUE MARKER, IMPLANTABLE, ANY TYPE, EACH
OHANAA	Q3 2025	Outpatient Hosp	A9573	HCPCS	INJECTION GADOPICLENOL 1 ML
OHANAA	Q3 2025	Outpatient Hosp	A9697	HCPCS	INJECTION CARBOXYDEXTRAN-CTD SPM IO PER ST D
OHANAA	Q3 2025	Outpatient Hosp	C1715	HCPCS	BRACHYTHERAPY NEEDLE
OHANAA	Q3 2025	Outpatient Hosp	C1767	HCPCS	GENERATOR, NEUROSTIMULATOR (IMPLANTABLE), NONRECHARGEABLE
OHANAA	Q3 2025	Outpatient Hosp	C1778	HCPCS	LEAD, NEUROSTIMULATOR (IMPLANTABLE)
OHANAA	Q3 2025	Outpatient Hosp	C1787	HCPCS	PATIENT PROGRAMMER, NEUROSTIMULATOR
OHANAA	Q3 2025	Outpatient Hosp	C2624	HCPCS	IMPLANTABLE WIRELESS PULMONARY ARTERY PRESSURE SENSOR WITH DELIVERY CATHETER, INCLUDING ALL SYSTEM COMPONENTS
OHANAA	Q3 2025	Outpatient Hosp	C8923	HCPCS	TRANSTHORACIC ECHOCARDIOGRAPHY WITH CONTRAST, REAL-TIME WITH IMAGE DOCUMENTATION (2D) WITH OR WITHOUT M-MODE RECORDING; COMPLETE
OHANAA	Q3 2025	Outpatient Hosp	C8924	HCPCS	TRANSTHORACIC ECHOCARDIOGRAPHY WITH CONTRAST, REAL-TIME WITH IMAGE DOCUMENTATION (2D) WITH OR WITHOUT M-MODE RECORDING; FOLLOW-UP
OHANAA	Q3 2025	Outpatient Hosp	C8929	HCPCS	TRANSTHORACIC ECHOCARDIOGRAPHY WITH CONTRAST, REAL TIME WITH IMAGE DOCUMENTATION (2D), WITH OR WITHOUT M-MODE RECORDING, DURING RE
OHANAA	Q3 2025	Outpatient Hosp	C8930	HCPCS	TRANSTHORACIC ECHOCARDIOGRAPHY, WITH CONTRAST, OR WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST, REAL-TIME WITH IMAGE DOCUMENTATION (
OHANAA	Q3 2025	Outpatient Hosp	C9789	HCPCS	INSTILL ANTINEOPLAST PHARM/BIOL AGT RP ANY METH
OHANAA	Q3 2025	Outpatient Hosp	C9791	HCPCS	MRI WITH INHALED HPX CONTRAST AGENT CHEST
OHANAA	Q3 2025	Outpatient Hosp	C9792	HCPCS	BLIND/NONBLND PROC SYM NYHA CLASS II III IVA HF
OHANAA	Q3 2025	Outpatient Hosp	D7210	HCPCS	SURGICAL REMOVAL OF ERUPTED TOOTH REQUIRING ELEVATION OF MUCOPERIOSTEAL FLAP AND REMOVAL OF BONE AND/OR SECTION OF TOOTH
OHANAA	Q3 2025	Outpatient Hosp	G0121	HCPCS	COLORECTAL CANCER SCREENING; COLONOSCOPY ON INDIVIDUAL NOT MEETING CRITERIA FOR HIGH RISK
OHANAA	Q3 2025	Outpatient Hosp	G0277	HCPCS	HYPERBARIC OXYGEN UNDER PRESSURE, FULL BODY CHAMBER, PER 30 MINUTE INTERVAL
OHANAA	Q3 2025	Outpatient Hosp	G0491	HCPCS	DIALYSIS PROCEDURE AT A MEDICARE CERTIFIED ESRD FACILITY FOR ACUTE KIDNEY INJURY WITHOUT ESRD
OHANAA	Q3 2025	Outpatient Hosp	G0530	HCPCS	ADULT DAY CENTER 8-HOUR UNIT
OHANAA	Q3 2025	Outpatient Hosp	H0011	HCPCS	ALCOHOL AND/OR DRUG SERVICES; ACUTE DETOXIFICATION (RESIDENTIAL ADDICTION PROGRAM INPATIENT)
OHANAA	Q3 2025	Outpatient Hosp	H0015	HCPCS	ALCOHOL AND/OR DRUG SERVICES; INTENSIVE OUTPATIENT (TREATMENT PROGRAM THAT OPERATES AT LEAST 3 HOURS/DAY AND AT LEAST 3 DAYS/WEEK
OHANAA	Q3 2025	Outpatient Hosp	H2012	HCPCS	BEHAVIORAL HEALTH DAY TREATMENT, PER HOUR
OHANAA	Q3 2025	Outpatient Hosp	H2015	HCPCS	COMPREHENSIVE COMMUNITY SUPPORT SERVICES, PER 15 MINUTES
OHANAA	Q3 2025	Outpatient Hosp	J0171	HCPCS	INJECTION, ADRENALIN, EPINEPHRINE, 0.1 MG
OHANAA	Q3 2025	Outpatient Hosp	J0174	HCPCS	INJECTION, LECANEMAB-IRMB, 1 MG
OHANAA	Q3 2025	Outpatient Hosp	J0585	HCPCS	BOTULINUM TOXIN TYPE A, PER UNIT
OHANAA	Q3 2025	Outpatient Hosp	J0604	HCPCS	CINACALCET, ORAL, 1 MG, (FOR ESRD ON DIALYSIS)
OHANAA	Q3 2025	Outpatient Hosp	J0606	HCPCS	INJECTION, ETELCALCETIDE, 0.1 MG
OHANAA	Q3 2025	Outpatient Hosp	J0702	HCPCS	INJECTION, BETAMETHASONE ACETATE 3 MG AND BETAMETHASONE SODIUM PHOSPHATE 3 MG
OHANAA	Q3 2025	Outpatient Hosp	J0801	HCPCS	INJECTION CORTICOTROPIN ACTHAR GEL UP TO 40 U
OHANAA	Q3 2025	Outpatient Hosp	J0802	HCPCS	INJECTION CORTICOTROPIN ANI UP TO 40 UNITS
OHANAA	Q3 2025	Outpatient Hosp	J0878	HCPCS	INJECTION, DAPTOMYCIN, 1 MG
OHANAA	Q3 2025	Outpatient Hosp	J0889	HCPCS	DAPRODUSTAT ORAL 1 MG FOR ESRD ON DIALYSIS
OHANAA	Q3 2025	Outpatient Hosp	J1335	HCPCS	INJECTION, ERTAPENEM SODIUM, 500 MG
OHANAA	Q3 2025	Outpatient Hosp	J1439	HCPCS	INJECTION, FERRIC CARBOXYMALTOSE, 1MG
OHANAA	Q3 2025	Outpatient Hosp	J1642	HCPCS	INJECTION, HEPARIN SODIUM, (HEPARIN LOCK FLUSH), PER 10 UNITS
OHANAA	Q3 2025	Outpatient Hosp	J1720	HCPCS	INJECTION, HYDROCORTISONE SODIUM SUCCINATE, UP TO 100 MG
OHANAA	Q3 2025	Outpatient Hosp	J1756	HCPCS	INJECTION, IRON SUCROSE, 1 MG
OHANAA	Q3 2025	Outpatient Hosp	J2060	HCPCS	INJECTION, LORAZEPAM, 2 MG
OHANAA	Q3 2025	Outpatient Hosp	J2405	HCPCS	INJECTION, ONDANSETRON HCL, PER 1 MG
OHANAA	Q3 2025	Outpatient Hosp	J2781	HCPCS	INJECTION PEGCETACOPLAN INTRAVITREAL 1 MG
OHANAA	Q3 2025	Outpatient Hosp	J2787	HCPCS	RIBOFLAVIN 5'-PHOSPHATE OPHTHALMIC SOL TO 3 ML
OHANAA	Q3 2025	Outpatient Hosp	J2916	HCPCS	INJECTION, SODIUM FERRIC GLUCONATE COMPLEX IN SUCROSE INJECTION, 12.5 MG
OHANAA	Q3 2025	Outpatient Hosp	J7040	HCPCS	INFUSION, NORMAL SALINE SOLUTION, STERILE (500 ML = 1 UNIT)
OHANAA	Q3 2025	Outpatient Hosp	J7042	HCPCS	5% DEXTROSE/NORMAL SALINE (500 ML = 1 UNIT)
OHANAA	Q3 2025	Outpatient Hosp	J7050	HCPCS	INFUSION, NORMAL SALINE SOLUTION, 250 CC
OHANAA	Q3 2025	Outpatient Hosp	J7120	HCPCS	RINGER'S LACTATE INFUSION, UP TO 1,000 CC
OHANAA	Q3 2025	Outpatient Hosp	J7214	HCPCS	INJECTION FVIII/VWD FAC CMPLX REC PER FVIII IU
OHANAA	Q3 2025	Outpatient Hosp	J7308	HCPCS	AMINOLEVULINIC ACID HCL FOR TOPICAL ADMINISTRATION, 20%, SINGLE UNIT DOSAGE FORM (354 MG)
OHANAA	Q3 2025	Outpatient Hosp	J7353	HCPCS	ANACAULASE-BCDB 8.8 PERCENTAGE GEL 1 GM
OHANAA	Q3 2025	Outpatient Hosp	J9051	HCPCS	INJECTION BORTEZOMIB NOT TE TO J9041 0.1 MG
OHANAA	Q3 2025	Outpatient Hosp	J9055	HCPCS	INJECTION, CETUXIMAB, 10 MG
OHANAA	Q3 2025	Outpatient Hosp	J9060	HCPCS	CISPLATIN, POWDER OR SOLUTION, PER 10 MG
OHANAA	Q3 2025	Outpatient Hosp	J9064	HCPCS	INJECTION CABAZITAXEL NOT TE TO J9043 1 MG
OHANAA	Q3 2025	Outpatient Hosp	J9301	HCPCS	INJECTION, OBINUTUZUMAB, 10 MG
OHANAA	Q3 2025	Outpatient Hosp	J9345	HCPCS	INJECTION RETIFANLIMAB-DLWR 1 MG
OHANAA	Q3 2025	Outpatient Hosp	L8609	HCPCS	ARTIFICIAL CORNEA
OHANAA	Q3 2025	Outpatient Hosp	L8614	HCPCS	COCHLEAR DEVICE, INCLUDES ALL INTERNAL AND EXTERNAL COMPONENTS
OHANAA	Q3 2025	Outpatient Hosp	L8686	HCPCS	IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR, SINGLE ARRAY, NONRECHARGEABLE, INCLUDES EXTENSION
OHANAA	Q3 2025	Outpatient Hosp	L8699	HCPCS	PROSTHETIC IMPLANT, NOT OTHERWISE SPECIFIED
OHANAA	Q3 2025	Outpatient Hosp	P9011	HCPCS	BLOOD, SPLIT UNIT
OHANAA	Q3 2025	Outpatient Hosp	P9016	HCPCS	RED BLOOD CELLS, LEUKOCYTES REDUCED, EACH UNIT
OHANAA	Q3 2025	Outpatient Hosp	P9020	HCPCS	PLATELET RICH PLASMA, EACH UNIT
OHANAA	Q3 2025	Outpatient Hosp	P9021	HCPCS	RED BLOOD CELLS, EACH UNIT
OHANAA	Q3 2025	Outpatient Hosp	P9037	HCPCS	PLATELETS, PHERESIS, LEUKOCYTES REDUCED, IRRADIATED, EACH UNIT
OHANAA	Q3 2025	Outpatient Hosp	P9040	HCPCS	RED BLOOD CELLS, LEUKOCYTES REDUCED, IRRADIATED, EACH UNIT
OHANAA	Q3 2025	Outpatient Hosp	P9070	HCPCS	PLASMA, POOLED MULTIPLE DONOR, PATHOGEN REDUCED, FROZEN, EACH UNIT
OHANAA	Q3 2025	Outpatient Hosp	Q2050	HCPCS	INJECTION, DOXORUBICIN HYDROCHLORIDE, LIPOSOMAL, NOT OTHERWISE SPECIFIED, 10 MG

OHANAA	Q3 2025	Outpatient Hosp	Q4132	HCPCS	GRAFIX CORE, PER SQ CM
OHANAA	Q3 2025	Outpatient Hosp	Q4133	HCPCS	GRAFIX PRIME, GRAFIXPL PRIME, STRAVIX AND STRAVIXPL, PER SQ CM
OHANAA	Q3 2025	Outpatient Hosp	Q4139	HCPCS	AMNIOMATRIX OR BIODMATRIX, INJECTABLE, 1 CC
OHANAA	Q3 2025	Outpatient Hosp	Q4173	HCPCS	PALINGEN/PALINGEN XPLUS PER
OHANAA	Q3 2025	Outpatient Hosp	Q4196	HCPCS	PURAPLY AM, PER SQ CM
OHANAA	Q3 2025	Outpatient Hosp	Q5103	HCPCS	INJECTION, INFLIXIMAB-DYYB, BIOSIMILAR, (INFLECTRA), 10 MG
OHANAA	Q3 2025	Outpatient Hosp	Q5105	HCPCS	INJECTION EPOETIN ALFA BIOSIMILAR 100 UNITS
OHANAA	Q3 2025	Outpatient Hosp	Q9950	HCPCS	INJECTION, SULFUR HEXAFLUORIDE LIPID MICROSPHERES, PER ML
OHANAA	Q3 2025	Outpatient Hosp	S0028	HCPCS	INJECTION, FAMOTIDINE, 20 MG
OHANAA	Q3 2025	Outpatient Hosp	S9480	HCPCS	INTENSIVE OUTPATIENT PSYCHIATRIC SERVICES, PER DIEM
OHANAA	Q3 2025	Outpatient Hosp	S9990	HCPCS	SERVICES PROVIDED AS PART OF A PHASE II CLINICAL TRIAL
OHANAA	Q3 2025	Outpatient Hosp	V2785	HCPCS	PROCESSING, PRESERVING AND TRANSPORTING CORNEAL TISSUE
OHANAA	Q3 2025	Physician Services	11005	CPT	DEBRIDEMENT OF SKIN, SUBCUTANEOUS TISSUE, MUSCLE AND FASCIA FOR NECROTIZING SOFT TISSUE INFECTION; ABDOMINAL WALL, WITH OR
OHANAA	Q3 2025	Physician Services	11406	CPT	EXCISION, BENIGN LESION INCLUDING MARGINS, EXCEPT SKIN TAG (UNLESS LISTED ELSEWHERE), TRUNK, ARMS OR LEGS; EXCISED DIAMETE
OHANAA	Q3 2025	Physician Services	731	CPT	ANESTHESIA FOR UPPER GASTROINTESTINAL ENDOSCOPIC PROCEDURES, ENDOSCOPE INTRODUCED PROXIMAL TO DUODENUM; NOT OTHERWISE SPECIFIED
OHANAA	Q3 2025	Physician Services	1992	CPT	ANESTHESIA FOR DIAGNOSTIC OR THERAPEUTIC NERVE BLOCKS AND INJECTIONS (WHEN BLOCK OR INJECTION IS PERFORMED BY A DIFFERENT
OHANAA	Q3 2025	Physician Services	0502F	CPT	SUBSEQUENT PRENATAL CARE VISIT (PRENATAL) [EXCLUDES: PATIENTS WHO ARE SEEN FOR A CONDITION UNRELATED TO PREGNANCY OR PREN
OHANAA	Q3 2025	Physician Services	0503F	CPT	POSTPARTUM CARE VISIT (PRENATAL)2
OHANAA	Q3 2025	Physician Services	10120	CPT	INCISION AND REMOVAL OF FOREIGN BODY, SUBCUTANEOUS TISSUES; SIMPLE
OHANAA	Q3 2025	Physician Services	10121	CPT	INCISION AND REMOVAL OF FOREIGN BODY, SUBCUTANEOUS TISSUES; COMPLICATED
OHANAA	Q3 2025	Physician Services	11000	CPT	DEBRIDEMENT OF EXTENSIVE ECZEMATOUS OR INFECTED SKIN; UP TO 10% OF BODY SURFACE
OHANAA	Q3 2025	Physician Services	11001	CPT	DEBRIDEMENT OF EXTENSIVE ECZEMATOUS OR INFECTED SKIN; EACH ADDITIONAL 10% OF THE BODY SURFACE (LIST SEPARATELY IN ADDITION
OHANAA	Q3 2025	Physician Services	11004	CPT	DEBRIDEMENT OF SKIN, SUBCUTANEOUS TISSUE, MUSCLE AND FASCIA FOR NECROTIZING SOFT TISSUE INFECTION; EXTERNAL GENITALIA AND
OHANAA	Q3 2025	Physician Services	11006	CPT	DEBRIDEMENT OF SKIN, SUBCUTANEOUS TISSUE, MUSCLE AND FASCIA FOR NECROTIZING SOFT TISSUE INFECTION; EXTERNAL GENITALIA, PER
OHANAA	Q3 2025	Physician Services	11102	CPT	TANGENTIAL BIOPSY OF SKIN (EG, SHAVE, SCOOP, SAUCERIZE, CURETTE); SINGLE LESION
OHANAA	Q3 2025	Physician Services	11103	CPT	TANGENTIAL BIOPSY OF SKIN (EG, SHAVE, SCOOP, SAUCERIZE, CURETTE); EACH SEPARATE/ADDITIONAL LESION (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
OHANAA	Q3 2025	Physician Services	11300	CPT	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, TRUNK, ARMS OR LEGS; LESION DIAMETER 0.5 CM OR LESS
OHANAA	Q3 2025	Physician Services	11310	CPT	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, FACE, EARS, EYELIDS, NOSE, LIPS, MUCOUS MEMBRANE; LESION DIAMETER 0.
OHANAA	Q3 2025	Physician Services	11640	CPT	EXCISION, MALIGNANT LESION INCLUDING MARGINS, FACE, EARS, EYELIDS, NOSE, LIPS; EXCISED DIAMETER 0.5 CM OR LESS
OHANAA	Q3 2025	Physician Services	11641	CPT	EXCISION, MALIGNANT LESION INCLUDING MARGINS, FACE, EARS, EYELIDS, NOSE, LIPS; EXCISED DIAMETER 0.6 TO 1.0 CM
OHANAA	Q3 2025	Physician Services	11921	CPT	TATTOOING, INTRADERMAL INTRODUCTION OF INSOLUBLE OPAQUE PIGMENTS TO CORRECT COLOR DEFECTS OF SKIN, INCLUDING MICROPIGMENTA
OHANAA	Q3 2025	Physician Services	12020	CPT	TREATMENT OF SUPERFICIAL WOUND DEHISCENCE; SIMPLE CLOSURE
OHANAA	Q3 2025	Physician Services	12021	CPT	TREATMENT OF SUPERFICIAL WOUND DEHISCENCE; WITH PACKING
OHANAA	Q3 2025	Physician Services	12051	CPT	LAYER CLOSURE OF WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR MUCOUS MEMBRANES; 2.5 CM OR LESS
OHANAA	Q3 2025	Physician Services	12052	CPT	LAYER CLOSURE OF WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR MUCOUS MEMBRANES; 2.6 CM TO 5.0 CM
OHANAA	Q3 2025	Physician Services	13152	CPT	REPAIR, COMPLEX, EYELIDS, NOSE, EARS AND/OR LIPS; 2.6 CM TO 7.5 CM
OHANAA	Q3 2025	Physician Services	13153	CPT	REPAIR, COMPLEX, EYELIDS, NOSE, EARS AND/OR LIPS; EACH ADDITIONAL 5 CM OR LESS (LIST SEPARATELY IN ADDITION TO CODE FOR PR
OHANAA	Q3 2025	Physician Services	14001	CPT	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, TRUNK; DEFECT 10.1 SQ CM TO 30.0 SQ CM
OHANAA	Q3 2025	Physician Services	14020	CPT	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, SCALP, ARMS AND/OR LEGS; DEFECT 10 SQ CM OR LESS
OHANAA	Q3 2025	Physician Services	14021	CPT	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, SCALP, ARMS AND/OR LEGS; DEFECT 10.1 SQ CM TO 30.0 SQ CM
OHANAA	Q3 2025	Physician Services	14040	CPT	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, FOREHEAD, CHEEKS, CHIN, MOUTH, NECK, AXILLAE, GENITALIA, HANDS AND/OR FEET; DEF
OHANAA	Q3 2025	Physician Services	14041	CPT	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, FOREHEAD, CHEEKS, CHIN, MOUTH, NECK, AXILLAE, GENITALIA, HANDS AND/OR FEET; DEF
OHANAA	Q3 2025	Physician Services	14060	CPT	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, EYELIDS, NOSE, EARS AND/OR LIPS; DEFECT 10 SQ CM OR LESS
OHANAA	Q3 2025	Physician Services	14061	CPT	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, EYELIDS, NOSE, EARS AND/OR LIPS; DEFECT 10.1 SQ CM TO 30.0 SQ CM
OHANAA	Q3 2025	Physician Services	14301	CPT	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, ANY AREA; DEFECT 30.1 SQ CM TO 60.0 SQ CM
OHANAA	Q3 2025	Physician Services	14302	CPT	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, ANY AREA; EACH ADDITIONAL 30.0 SQ CM, OR PART THEREOF (LIST SEPARATELY IN ADDITION TO C
OHANAA	Q3 2025	Physician Services	15200	CPT	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR SITE, TRUNK; 20 SQ CM OR LESS
OHANAA	Q3 2025	Physician Services	15201	CPT	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR SITE, TRUNK; EACH ADDITIONAL 20 SQ CM (LIST SEPARATELY IN AD
OHANAA	Q3 2025	Physician Services	15220	CPT	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR SITE, SCALP, ARMS, AND/OR LEGS; 20 SQ CM OR LESS
OHANAA	Q3 2025	Physician Services	15221	CPT	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR SITE, SCALP, ARMS, AND/OR LEGS; EACH ADDITIONAL 20 SQ CM (LI
OHANAA	Q3 2025	Physician Services	15241	CPT	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR SITE, FOREHEAD, CHEEKS, CHIN, MOUTH, NECK, AXILLAE, GENITALI
OHANAA	Q3 2025	Physician Services	15260	CPT	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR SITE, NOSE, EARS, EYELIDS, AND/OR LIPS; 20 SQ CM OR LESS
OHANAA	Q3 2025	Physician Services	15271	CPT	APPLICATION OF SKIN SUBSTITUTE GRAFT TO TRUNK, ARMS, LEGS, TOTAL WOUND SURFACE AREA UP TO 100 SQ CM; FIRST 25 SQ CM OR LESS WOUND
OHANAA	Q3 2025	Physician Services	15277	CPT	APPLICATION OF SKIN SUBSTITUTE GRAFT TO FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HANDS, FEET, AND/OR MULTIPLE D
OHANAA	Q3 2025	Physician Services	15278	CPT	APPLICATION OF SKIN SUBSTITUTE GRAFT TO FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HANDS, FEET, AND/OR MULTIPLE D
OHANAA	Q3 2025	Physician Services	15574	CPT	FORMATION OF DIRECT OR TUBED PEDICLE, WITH OR WITHOUT TRANSFER; FOREHEAD, CHEEKS, CHIN, MOUTH, NECK, AXILLAE, GENITALIA, H
OHANAA	Q3 2025	Physician Services	15576	CPT	FORMATION OF DIRECT OR TUBED PEDICLE, WITH OR WITHOUT TRANSFER; EYELIDS, NOSE, EARS, LIPS, OR INTRAORAL
OHANAA	Q3 2025	Physician Services	15620	CPT	DELAY OF FLAP OR SECTIONING OF FLAP (DIVISION AND INSET); AT FOREHEAD, CHEEKS, CHIN, NECK, AXILLAE, GENITALIA, HANDS, OR F
OHANAA	Q3 2025	Physician Services	15630	CPT	DELAY OF FLAP OR SECTIONING OF FLAP (DIVISION AND INSET); AT EYELIDS, NOSE, EARS, OR LIPS
OHANAA	Q3 2025	Physician Services	15731	CPT	FOREHEAD FLAP WITH PRESERVATION OF VASCULAR PEDICLE (EG, AXIAL PATTERN FLAP, PARAMEDIAN FOREHEAD FLAP)
OHANAA	Q3 2025	Physician Services	15740	CPT	FLAP; ISLAND PEDICLE
OHANAA	Q3 2025	Physician Services	15760	CPT	GRAFT; COMPOSITE (EG, FULL THICKNESS OF EXTERNAL EAR OR NASAL ALA), INCLUDING PRIMARY CLOSURE, DONOR AREA
OHANAA	Q3 2025	Physician Services	15823	CPT	BLEPHAROPLASTY, UPPER EYELID; WITH EXCESSIVE SKIN WEIGHTING DOWN LID
OHANAA	Q3 2025	Physician Services	17110	CPT	DESTRUCTION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY, CHEMOSURGERY, SURGICAL CURETTEMENT), OF BENIGN LESIONS OTHER
OHANAA	Q3 2025	Physician Services	17311	CPT	MOHS MICROGRAPHIC TECHNIQUE, INCLUDING REMOVAL OF ALL GROSS TUMOR, SURGICAL EXCISION OF TISSUE SPECIMENS, MAPPING, COLOR C
OHANAA	Q3 2025	Physician Services	17312	CPT	MOHS MICROGRAPHIC TECHNIQUE, INCLUDING REMOVAL OF ALL GROSS TUMOR, SURGICAL EXCISION OF TISSUE SPECIMENS, MAPPING, COLOR C
OHANAA	Q3 2025	Physician Services	17313	CPT	MOHS MICROGRAPHIC TECHNIQUE, INCLUDING REMOVAL OF ALL GROSS TUMOR, SURGICAL EXCISION OF TISSUE SPECIMENS, MAPPING, COLOR C
OHANAA	Q3 2025	Physician Services	17314	CPT	MOHS MICROGRAPHIC TECHNIQUE, INCLUDING REMOVAL OF ALL GROSS TUMOR, SURGICAL EXCISION OF TISSUE SPECIMENS, MAPPING, COLOR C
OHANAA	Q3 2025	Physician Services	20552	CPT	INJECTION(S); SINGLE OR MULTIPLE TRIGGER POINT(S), ONE OR TWO MUSCLE(S)
OHANAA	Q3 2025	Physician Services	20553	CPT	INJECTION(S); SINGLE OR MULTIPLE TRIGGER POINT(S), THREE OR MORE MUSCLE(S)
OHANAA	Q3 2025	Physician Services	20604	CPT	ARTHROCENTESIS, ASPIRATION AND/OR INJECTION, SMALL JOINT OR BURSA (EG, FINGERS, TOES); WITH ULTRASOUND GUIDANCE, WITH PERMANENT RECORDING AND REPORTING
OHANAA	Q3 2025	Physician Services	20606	CPT	ARTHROCENTESIS, ASPIRATION AND/OR INJECTION, INTERMEDIATE JOINT OR BURSA (EG, TEMPOROMANDIBULAR, ACROMIOCLAVICULAR, WRIST, ELBOW OR ANKLE, OLECRANON BURS
OHANAA	Q3 2025	Physician Services	20611	CPT	ARTHROCENTESIS, ASPIRATION AND/OR INJECTION, MAJOR JOINT OR BURSA (EG, SHOULDER, HIP, KNEE, SUBACROMIAL BURSA); WITH ULTRASOUND GUIDANCE, WITH PERMANENT RE
OHANAA	Q3 2025	Physician Services	21012	CPT	EXCISION, TUMOR, SOFT TISSUE OF FACE OR SCALP, SUBCUTANEOUS; 2 CM OR GREATER
OHANAA	Q3 2025	Physician Services	21014	CPT	EXCISION, TUMOR, SOFT TISSUE OF FACE AND SCALP, SUBFASCIAL (EG, SUBGALEAL, INTRAMUSCULAR); 2 CM OR GREATER
OHANAA	Q3 2025	Physician Services	21031	CPT	EXCISION OF TORUS MANDIBULARIS
OHANAA	Q3 2025	Physician Services	21040	CPT	EXCISION OF BENIGN TUMOR OR CYST OF MANDIBLE, BY ENUCLEATION AND/OR CURETTAGE
OHANAA	Q3 2025	Physician Services	21555	CPT	EXCISION TUMOR, SOFT TISSUE OF NECK OR THORAX; SUBCUTANEOUS
OHANAA	Q3 2025	Physician Services	21930	CPT	EXCISION, TUMOR, SOFT TISSUE OF BACK OR FLANK
OHANAA	Q3 2025	Physician Services	22903	CPT	EXCISION, TUMOR, SOFT TISSUE OF ABDOMINAL WALL, SUBCUTANEOUS; 3 CM OR GREATER
OHANAA	Q3 2025	Physician Services	23075	CPT	EXCISION, SOFT TISSUE TUMOR, SHOULDER AREA; SUBCUTANEOUS
OHANAA	Q3 2025	Physician Services	23462	CPT	CAPSULORRHAPHY, ANTERIOR, ANY TYPE; WITH CORACOID PROCESS TRANSFER
OHANAA	Q3 2025	Physician Services	24343	CPT	REPAIR LATERAL COLLATERAL LIGAMENT, ELBOW, WITH LOCAL TISSUE
OHANAA	Q3 2025	Physician Services	25290	CPT	TENOTOMY, OPEN, FLEXOR OR EXTENSOR TENDON, FOREARM AND/OR WRIST, SINGLE, EACH TENDON
OHANAA	Q3 2025	Physician Services	25999	CPT	UNLISTED PROCEDURE, FOREARM OR WRIST
OHANAA	Q3 2025	Physician Services	26350	CPT	REPAIR OR ADVANCEMENT, FLEXOR TENDON, NOT IN ZONE 2 DIGITAL FLEXOR TENDON SHEATH (EG, NO MAN'S LAND); PRIMARY OR SECONDARY
OHANAA	Q3 2025	Physician Services	26356	CPT	REPAIR OR ADVANCEMENT, FLEXOR TENDON, IN ZONE 2 DIGITAL FLEXOR TENDON SHEATH (EG, NO MAN'S LAND); PRIMARY, WITHOUT FREE GR
OHANAA	Q3 2025	Physician Services	26553	CPT	TRANSFER, TOE-TO-HAND WITH MICROVASCULAR ANASTOMOSIS; OTHER THAN GREAT TOE, SINGLE
OHANAA	Q3 2025	Physician Services	26665	CPT	OPEN TREATMENT OF CARPOMETACARPAL FRACTURE DISLOCATION, THUMB (BENNETT FRACTURE), INCLUDES INTERNAL FIXATION, WHEN PERFORM
OHANAA	Q3 2025	Physician Services	27096	CPT	INJECTION PROCEDURE FOR SACROILIAC JOINT, ARTHROGRAPHY AND/OR ANESTHETIC/STEROID
OHANAA	Q3 2025	Physician Services	27626	CPT	ARTHROTOMY, WITH SYNOVECTOMY, ANKLE; INCLUDING TENOSYNOVECTOMY
OHANAA	Q3 2025	Physician Services	27658	CPT	REPAIR, FLEXOR TENDON, LEG; PRIMARY, WITHOUT GRAFT, EACH TENDON
OHANAA	Q3 2025	Physician Services	27664	CPT	REPAIR, EXTENSOR TENDON, LEG; PRIMARY, WITHOUT GRAFT, EACH TENDON
OHANAA	Q3 2025	Physician Services	27695	CPT	REPAIR, PRIMARY, DISRUPTED LIGAMENT, ANKLE; COLLATERAL
OHANAA	Q3 2025	Physician Services	27696	CPT	REPAIR, PRIMARY, DISRUPTED LIGAMENT, ANKLE; BOTH COLLATERAL LIGAMENTS
OHANAA	Q3 2025	Physician Services	27705	CPT	OSTEOTOMY; TIBIA
OHANAA	Q3 2025	Physician Services	27707	CPT	OSTEOTOMY; FIBULA
OHANAA	Q3 2025	Physician Services	27709	CPT	OSTEOTOMY; TIBIA AND FIBULA

OHANAA	Q3 2025	Physician Services	27712	CPT	OSTEOTOMY; MULTIPLE, WITH REALIGNMENT ON INTRAMEDULLARY ROD (EG, SOFIELD TYPE PROCEDURE)
OHANAA	Q3 2025	Physician Services	27715	CPT	OSTEOPLASTY, TIBIA AND FIBULA, LENGTHENING OR SHORTENING
OHANAA	Q3 2025	Physician Services	27720	CPT	REPAIR OF NONUNION OR MALUNION, TIBIA; WITHOUT GRAFT, (EG, COMPRESSION TECHNIQUE)
OHANAA	Q3 2025	Physician Services	27722	CPT	REPAIR OF NONUNION OR MALUNION, TIBIA; WITH SLIDING GRAFT
OHANAA	Q3 2025	Physician Services	27724	CPT	REPAIR OF NONUNION OR MALUNION, TIBIA; WITH ILIAC OR OTHER AUTOGRAFT (INCLUDES OBTAINING GRAFT)
OHANAA	Q3 2025	Physician Services	27726	CPT	REPAIR OF FIBULA NONUNION AND/OR MALUNION WITH INTERNAL FIXATION
OHANAA	Q3 2025	Physician Services	27727	CPT	REPAIR OF CONGENITAL PSEUDARTHROSIS, TIBIA
OHANAA	Q3 2025	Physician Services	27730	CPT	ARREST, EPIPHYSEAL (EPIPHYSIODESIS), OPEN; DISTAL TIBIA
OHANAA	Q3 2025	Physician Services	27732	CPT	ARREST, EPIPHYSEAL (EPIPHYSIODESIS), OPEN; DISTAL FIBULA
OHANAA	Q3 2025	Physician Services	27734	CPT	ARREST, EPIPHYSEAL (EPIPHYSIODESIS), OPEN; DISTAL TIBIA AND FIBULA
OHANAA	Q3 2025	Physician Services	29540	CPT	STRAPPING; ANKLE AND/OR FOOT
OHANAA	Q3 2025	Physician Services	29550	CPT	STRAPPING; TOES
OHANAA	Q3 2025	Physician Services	30580	CPT	REPAIR FISTULA; OROMAXILLARY (COMBINE WITH 31030 IF ANTROTOMY IS INCLUDED)
OHANAA	Q3 2025	Physician Services	31298	CPT	NASAL/SINUS ENDOSCOPY, SURGICAL, WITH DILATION (EG, BALLOON DILATION); FRONTAL AND SPHENOID SINUS OSTIA
OHANAA	Q3 2025	Physician Services	33766	CPT	SHUNT; SUPERIOR VENA CAVA TO PULMONARY ARTERY FOR FLOW TO ONE LUNG (CLASSICAL GLENN PROCEDURE)
OHANAA	Q3 2025	Physician Services	36416	CPT	COLLECTION OF CAPILLARY BLOOD SPECIMEN (EG, FINGER, HEEL, EAR STICK)
OHANAA	Q3 2025	Physician Services	36465	CPT	INJECTION OF NON-COMPOUNDED FOAM SCLEROSANT WITH ULTRASOUND COMPRESSION MANEUVERS TO GUIDE DISPERSION OF THE INJECTATE, INCLUSIVE OF ALL IMAGING GUIDAN
OHANAA	Q3 2025	Physician Services	36473	CPT	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, INCLUSIVE OF ALL IMAGING GUIDANCE AND MONITORING, PERCUTANEOUS, MECHANOCHEMICAL; FIRST VEIN T
OHANAA	Q3 2025	Physician Services	36476	CPT	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, INCLUSIVE OF ALL IMAGING GUIDANCE AND MONITORING, PERCUTANEOUS
OHANAA	Q3 2025	Physician Services	36482	CPT	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, BY TRANSCATHETER DELIVERY OF A CHEMICAL ADHESIVE (EG, CYANOACRYLATE) REMOTE FROM THE ACCESS SI
OHANAA	Q3 2025	Physician Services	37766	CPT	STAB PHLEBECTOMY OF VARICOSE VEINS, ONE EXTREMITY; MORE THAN 20 INCISIONS
OHANAA	Q3 2025	Physician Services	41252	CPT	REPAIR OF LACERATION OF TONGUE, FLOOR OF MOUTH, OVER 2.6 CM OR COMPLEX
OHANAA	Q3 2025	Physician Services	43244	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
OHANAA	Q3 2025	Physician Services	43251	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
OHANAA	Q3 2025	Physician Services	43255	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
OHANAA	Q3 2025	Physician Services	43289	CPT	UNLISTED LAPAROSCOPY PROCEDURE, ESOPHAGUS
OHANAA	Q3 2025	Physician Services	47000	CPT	BIOPSY OF LIVER, NEEDLE; PERCUTANEOUS
OHANAA	Q3 2025	Physician Services	49654	CPT	LAPAROSCOPY REPAIR INCISIONAL HERNIA REDUCIBLE LAPAROSCOPY, SURGICAL, REPAIR, INCISIONAL HERNIA (INCLUDES MESH INSERTION, WHEN PE
OHANAA	Q3 2025	Physician Services	50547	CPT	LAPAROSCOPY, SURGICAL; DONOR NEPHRECTOMY (INCLUDING COLD PRESERVATION), FROM LIVING DONOR
OHANAA	Q3 2025	Physician Services	51102	CPT	ASPIRATION OF BLADDER; WITH INSERTION OF SUPRAPUBIC CATHETER
OHANAA	Q3 2025	Physician Services	51610	CPT	INJECTION PROCEDURE FOR RETROGRADE URETHROCYSTOGRAPHY
OHANAA	Q3 2025	Physician Services	52276	CPT	CYSTOURETHROSCOPY WITH DIRECT VISION INTERNAL URETHROTOMY
OHANAA	Q3 2025	Physician Services	54405	CPT	INSERTION OF MULTI-COMPONENT, INFLATABLE PENILE PROSTHESIS, INCLUDING PLACEMENT OF PUMP, CYLINDERS, AND RESERVOIR
OHANAA	Q3 2025	Physician Services	55250	CPT	VASECTOMY, UNILATERAL OR BILATERAL (SEPARATE PROCEDURE), INCLUDING POSTOPERATIVE SEMEN EXAMINATION(S)
OHANAA	Q3 2025	Physician Services	55700	CPT	BIOPSY, PROSTATE; NEEDLE OR PUNCH, SINGLE OR MULTIPLE, ANY APPROACH
OHANAA	Q3 2025	Physician Services	55874	CPT	TRANSPERINEAL PLACEMENT OF BIODEGRADABLE MATERIAL, PERI-PROSTATIC, SINGLE OR MULTIPLE INJECTION(S), INCLUDING IMAGE GUIDANCE, WHEN PERFORMED
OHANAA	Q3 2025	Physician Services	58100	CPT	ENDOMETRIAL SAMPLING (BIOPSY) WITH OR WITHOUT ENDOCERVICAL SAMPLING (BIOPSY), WITHOUT CERVICAL DILATION, ANY METHOD (SEPAR
OHANAA	Q3 2025	Physician Services	59840	CPT	INDUCED ABORTION, BY DILATION AND CURETTAGE
OHANAA	Q3 2025	Physician Services	61107	CPT	TWIST DRILL HOLE(S) FOR SUBDURAL, INTRACEREBRAL, OR VENTRICULAR PUNCTURE; FOR IMPLANTING VENTRICULAR CATHETER, PRESSURE RE
OHANAA	Q3 2025	Physician Services	61796	CPT	STEREOTACTIC RADIOSURGERY 1 SIMPLE CRANIAL LES STEREOTACTIC RADIOSURGERY (PARTICLE BEAM, GAMMA RAY, OR LINEAR ACCELERATOR); 1 SIM
OHANAA	Q3 2025	Physician Services	61798	CPT	STEREOTACTIC RADIOSURGERY 1 COMPLEX CRANIAL LES STEREOTACTIC RADIOSURGERY (PARTICLE BEAM, GAMMA RAY, OR LINEAR ACCELERATOR); 1 COM
OHANAA	Q3 2025	Physician Services	61800	CPT	APPL STRTCTC HEADFRAME STEREOTACTIC RADIOSURGERYAPPLICATION OF STEREOTACTIC HEADFRAME FOR STEREOTACTIC RADIOSURGERY (LIST SEPARATE
OHANAA	Q3 2025	Physician Services	62270	CPT	SPINAL PUNCTURE, LUMBAR, DIAGNOSTIC;
OHANAA	Q3 2025	Physician Services	62272	CPT	SPINAL PUNCTURE, THERAPEUTIC, FOR DRAINAGE OF CEREBROSPINAL FLUID (BY NEEDLE OR CATHETER);
OHANAA	Q3 2025	Physician Services	62320	CPT	INJECTION(S), OF DIAGNOSTIC OR THERAPEUTIC SUBSTANCE(S) (EG, ANESTHETIC, ANTISPASMODIC, OPIOID, STEROID, OTHER SOLUTION), NOT INCLUDING NEUROLYTIC SUBSTANCES,
OHANAA	Q3 2025	Physician Services	62321	CPT	INJECTION(S), OF DIAGNOSTIC OR THERAPEUTIC SUBSTANCE(S) (EG, ANESTHETIC, ANTISPASMODIC, OPIOID, STEROID, OTHER SOLUTION), NOT INCLUDING NEUROLYTIC SUBSTANCES,
OHANAA	Q3 2025	Physician Services	62322	CPT	INJECTION(S), OF DIAGNOSTIC OR THERAPEUTIC SUBSTANCE(S) (EG, ANESTHETIC, ANTISPASMODIC, OPIOID, STEROID, OTHER SOLUTION), NOT INCLUDING NEUROLYTIC SUBSTANCES,
OHANAA	Q3 2025	Physician Services	62323	CPT	INJECTION(S), OF DIAGNOSTIC OR THERAPEUTIC SUBSTANCE(S) (EG, ANESTHETIC, ANTISPASMODIC, OPIOID, STEROID, OTHER SOLUTION), NOT INCLUDING NEUROLYTIC SUBSTANCES,
OHANAA	Q3 2025	Physician Services	63650	CPT	PERCUTANEOUS IMPLANTATION OF NEUROSTIMULATOR ELECTRODE ARRAY, EPIDURAL
OHANAA	Q3 2025	Physician Services	63688	CPT	REVISION OR REMOVAL OF IMPLANTED SPINAL NEUROSTIMULATOR PULSE GENERATOR OR RECEIVER
OHANAA	Q3 2025	Physician Services	64400	CPT	INJECTION(S), ANESTHETIC AGENT(S) AND/OR STEROID; TRIGEMINAL NERVE, EACH BRANCH (IE, OPHTHALMIC, MAXILLARY, MANDIBULAR)
OHANAA	Q3 2025	Physician Services	64405	CPT	INJECTION(S), ANESTHETIC AGENT(S) AND/OR STEROID; GREATER OCCIPITAL NERVE
OHANAA	Q3 2025	Physician Services	64454	CPT	INJECTION(S), ANESTHETIC AGENT(S) AND/OR STEROID; GENICULAR NERVE BRANCHES, INCLUDING IMAGING GUIDANCE, WHEN PERFORMED
OHANAA	Q3 2025	Physician Services	64479	CPT	INJECTION(S), ANESTHETIC AGENT(S) AND/OR STEROID; TRANSFORAMINAL EPIDURAL, WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT), CERVICAL OR THORACIC, SINGLE LEVEL
OHANAA	Q3 2025	Physician Services	64480	CPT	INJECTION(S), ANESTHETIC AGENT(S) AND/OR STEROID; TRANSFORAMINAL EPIDURAL, WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT), CERVICAL OR THORACIC, EACH ADDITIONAL L
OHANAA	Q3 2025	Physician Services	64483	CPT	INJECTION(S), ANESTHETIC AGENT(S) AND/OR STEROID; TRANSFORAMINAL EPIDURAL, WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT), LUMBAR OR SACRAL, SINGLE LEVEL
OHANAA	Q3 2025	Physician Services	64484	CPT	INJECTION(S), ANESTHETIC AGENT(S) AND/OR STEROID; TRANSFORAMINAL EPIDURAL, WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT), LUMBAR OR SACRAL, EACH ADDITIONAL LEVEL
OHANAA	Q3 2025	Physician Services	64490	CPT	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEAL) JOINT (OR NERVES INNERVATING THAT JOINT) WITH I
OHANAA	Q3 2025	Physician Services	64491	CPT	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEAL) JOINT (OR NERVES INNERVATING THAT JOINT) WITH I
OHANAA	Q3 2025	Physician Services	64492	CPT	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEAL) JOINT (OR NERVES INNERVATING THAT JOINT) WITH I
OHANAA	Q3 2025	Physician Services	64493	CPT	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEAL) JOINT (OR NERVES INNERVATING THAT JOINT) WITH I
OHANAA	Q3 2025	Physician Services	64494	CPT	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEAL) JOINT (OR NERVES INNERVATING THAT JOINT) WITH I
OHANAA	Q3 2025	Physician Services	64495	CPT	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEAL) JOINT (OR NERVES INNERVATING THAT JOINT) WITH I
OHANAA	Q3 2025	Physician Services	64510	CPT	INJECTION, ANESTHETIC AGENT; STELLATE GANGLION (CERVICAL SYMPATHETIC)
OHANAA	Q3 2025	Physician Services	64566	CPT	POSTERIOR TIBIAL NEUROSTIMULATION, PERCUTANEOUS NEEDLE ELECTRODE, SINGLE TREATMENT, INCLUDES PROGRAMMING
OHANAA	Q3 2025	Physician Services	64615	CPT	CHEMODENERVATION OF MUSCLE(S); MUSCLE(S) INNERVATED BY FACIAL, TRIGEMINAL, CERVICAL SPINAL AND ACCESSORY NERVES, BILATERAL (EG, FO
OHANAA	Q3 2025	Physician Services	64617	CPT	CHEMODENERVATION OF MUSCLE(S); LARYNX, UNILATERAL, PERCUTANEOUS (EG, FOR SPASMODIC DYSPHONIA), INCLUDES GUIDANCE BY NEEDLE ELECTRO
OHANAA	Q3 2025	Physician Services	64625	CPT	RADIOFREQUENCY ABLATION, NERVES INNERVATING THE SACROILIAC JOINT, WITH IMAGE GUIDANCE (IE, FLUOROSCOPY OR COMPUTED TOMOGRAPHY)
OHANAA	Q3 2025	Physician Services	64633	CPT	DESTRUCTION BY NEUROLYTIC AGENT, PARAVERTEBRAL FACET JOINT NERVE(S), WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT); CERVICAL OR THORAC
OHANAA	Q3 2025	Physician Services	64634	CPT	DESTRUCTION BY NEUROLYTIC AGENT, PARAVERTEBRAL FACET JOINT NERVE(S), WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT); CERVICAL OR THORAC
OHANAA	Q3 2025	Physician Services	64635	CPT	DESTRUCTION BY NEUROLYTIC AGENT, PARAVERTEBRAL FACET JOINT NERVE(S), WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT); LUMBAR OR SACRAL,
OHANAA	Q3 2025	Physician Services	64636	CPT	DESTRUCTION BY NEUROLYTIC AGENT, PARAVERTEBRAL FACET JOINT NERVE(S), WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT); LUMBAR OR SACRAL,
OHANAA	Q3 2025	Physician Services	64642	CPT	CHEMODENERVATION OF ONE EXTREMITY; 1-4 MUSCLE(S)
OHANAA	Q3 2025	Physician Services	64643	CPT	CHEMODENERVATION OF ONE EXTREMITY; EACH ADDITIONAL EXTREMITY, 1-4 MUSCLE(S) (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCE
OHANAA	Q3 2025	Physician Services	67904	CPT	REPAIR OF BLEPHAROPTOSIS; (TARSO) LEVATOR RESECTION OR ADVANCEMENT, EXTERNAL APPROACH
OHANAA	Q3 2025	Physician Services	67966	CPT	EXCISION AND REPAIR OF EYELID, INVOLVING LID MARGIN, TARSUS, CONJUNCTIVA, CANTHUS, OR FULL THICKNESS, MAY INCLUDE PREPARAT
OHANAA	Q3 2025	Physician Services	68320	CPT	CONJUNCTIVOPLASTY; WITH CONJUNCTIVAL GRAFT OR EXTENSIVE REARRANGEMENT
OHANAA	Q3 2025	Physician Services	69433	CPT	TYMPANOSTOMY (REQUIRING INSERTION OF VENTILATING TUBE), LOCAL OR TOPICAL ANESTHESIA
OHANAA	Q3 2025	Physician Services	70355	CPT	ORTHOPANTOGRAM
OHANAA	Q3 2025	Physician Services	73030	CPT	RADIOLOGIC EXAMINATION, SHOULDER; COMPLETE, MINIMUM OF TWO VIEWS
OHANAA	Q3 2025	Physician Services	73060	CPT	RADIOLOGIC EXAMINATION; HUMERUS, MINIMUM OF TWO VIEWS
OHANAA	Q3 2025	Physician Services	73120	CPT	RADIOLOGIC EXAMINATION, HAND; TWO VIEWS
OHANAA	Q3 2025	Physician Services	73130	CPT	RADIOLOGIC EXAMINATION, HAND; MINIMUM OF THREE VIEWS
OHANAA	Q3 2025	Physician Services	73630	CPT	RADIOLOGIC EXAMINATION, FOOT; COMPLETE, MINIMUM OF THREE VIEWS
OHANAA	Q3 2025	Physician Services	77002	CPT	FLUOROSCOPIC GUIDANCE FOR NEEDLE PLACEMENT (EG, BIOPSY, ASPIRATION, INJECTION, LOCALIZATION DEVICE)
OHANAA	Q3 2025	Physician Services	78264	CPT	GASTRIC EMPTYING IMAGING STUDY (EG, SOLID, LIQUID, OR BOTH);
OHANAA	Q3 2025	Physician Services	78608	CPT	BRAIN IMAGING, POSITRON EMISSION TOMOGRAPHY (PET); METABOLIC EVALUATION
OHANAA	Q3 2025	Physician Services	78999	CPT	UNLISTED MISCELLANEOUS PROCEDURE, DIAGNOSTIC NUCLEAR MEDICINE
OHANAA	Q3 2025	Physician Services	80048	CPT	BASIC METABOLIC PANEL (CALCIUM, TOTAL) THIS PANEL MUST INCLUDE THE FOLLOWING: CALCIUM (82310) CARBON DIOXIDE (82374) CHLOR
OHANAA	Q3 2025	Physician Services	81370	CPT	HLA CLASS I AND II TYPING, LOW RESOLUTION (EG, ANTIGEN EQUIVALENTS); HLA-A, -B, -C, -DRB1/3/4/5, AND -DQB1
OHANAA	Q3 2025	Physician Services	81371	CPT	HLA CLASS I AND II TYPING, LOW RESOLUTION (EG, ANTIGEN EQUIVALENTS); HLA-A, -B, AND -DRB1/3/4/5 (EG, VERIFICATION TYPING)
OHANAA	Q3 2025	Physician Services	81372	CPT	HLA CLASS I TYPING, LOW RESOLUTION (EG, ANTIGEN EQUIVALENTS); COMPLETE (IE, HLA-A, -B, AND -C)
OHANAA	Q3 2025	Physician Services	81374	CPT	HLA CLASS I TYPING, LOW RESOLUTION (EG, ANTIGEN EQUIVALENTS); 1 ANTIGEN EQUIVALENT (EG, B*27), EACH
OHANAA	Q3 2025	Physician Services	81375	CPT	HLA CLASS II TYPING, LOW RESOLUTION (EG, ANTIGEN EQUIVALENTS); HLA-DRB1/3/4/5 AND -DQB1
OHANAA	Q3 2025	Physician Services	81379	CPT	HLA CLASS I TYPING, HIGH RESOLUTION (IE, ALLELES OR ALLELE GROUPS); COMPLETE (IE, HLA-A, -B, AND -C)
OHANAA	Q3 2025	Physician Services	82677	CPT	ESTRIOL
OHANAA	Q3 2025	Physician Services	83605	CPT	LACTATE (LACTIC ACID)
OHANAA	Q3 2025	Physician Services	84163	CPT	PREGNANCY-ASSOCIATED PLASMA PROTEIN-A (PAPP-A)

OHANAA	Q3 2025	Physician Services	85576	CPT	PLATELET, AGGREGATION (IN VITRO), EACH AGENT
OHANAA	Q3 2025	Physician Services	86005	CPT	ALLERGEN SPECIFIC IGE; QUALITATIVE, MULTIALLERGEN SCREEN (EG, DISK, SPONGE, CARD)
OHANAA	Q3 2025	Physician Services	86336	CPT	INHIBIN A
OHANAA	Q3 2025	Physician Services	86812	CPT	HLA TYPING; A, B, OR C (EG, A10, B7, B27), SINGLE ANTIGEN
OHANAA	Q3 2025	Physician Services	86813	CPT	HLA TYPING; A, B, OR C, MULTIPLE ANTIGENS
OHANAA	Q3 2025	Physician Services	86816	CPT	HLA TYPING; DR/DQ, SINGLE ANTIGEN
OHANAA	Q3 2025	Physician Services	86817	CPT	HLA TYPING; DR/DQ, MULTIPLE ANTIGENS
OHANAA	Q3 2025	Physician Services	87040	CPT	CULTURE, BACTERIAL; BLOOD, AEROBIC, WITH ISOLATION AND PRESUMPTIVE IDENTIFICATION OF ISOLATES (INCLUDES ANAEROBIC CULTURE,
OHANAA	Q3 2025	Physician Services	87070	CPT	CULTURE, BACTERIAL; ANY OTHER SOURCE EXCEPT URINE, BLOOD OR STOOL, AEROBIC, WITH ISOLATION AND PRESUMPTIVE IDENTIFICATION
OHANAA	Q3 2025	Physician Services	88331	CPT	PATHOLOGY CONSULTATION DURING SURGERY; FIRST TISSUE BLOCK, WITH FROZEN SECTION(S), SINGLE SPECIMEN
OHANAA	Q3 2025	Physician Services	88348	CPT	ELECTRON MICROSCOPY; DIAGNOSTIC
OHANAA	Q3 2025	Physician Services	89320	CPT	SEMEN ANALYSIS; VOLUME, COUNT, MOTILITY, AND DIFFERENTIAL
OHANAA	Q3 2025	Physician Services	90636	CPT	HEPATITIS A AND HEPATITIS B VACCINE (HEPA-HEPB), ADULT DOSAGE, FOR INTRAMUSCULAR USE
OHANAA	Q3 2025	Physician Services	91110	CPT	GASTROINTESTINAL TRACT IMAGING, INTRALUMINAL (EG, CAPSULE ENDOSCOPY), ESOPHAGUS THROUGH ILEUM, WITH PHYSICIAN INTERPRETATI
OHANAA	Q3 2025	Physician Services	91111	CPT	GASTROINTESTINAL TRACT IMAGING, INTRALUMINAL (EG, CAPSULE ENDOSCOPY), ESOPHAGUS WITH PHYSICIAN INTERPRETATION AND REPORT
OHANAA	Q3 2025	Physician Services	91112	CPT	GASTROINTESTINAL TRANSIT AND PRESSURE MEASUREMENT, STOMACH THROUGH COLON, WIRELESS CAPSULE, WITH INTERPRETATION AND REPORT
OHANAA	Q3 2025	Physician Services	92012	CPT	OPHTHALMOLOGICAL SERVICES: MEDICAL EXAMINATION AND EVALUATION, WITH INITIATION OR CONTINUATION OF DIAGNOSTIC AND TREATMENT
OHANAA	Q3 2025	Physician Services	92134	CPT	SCANNING COMPUTERIZED OPHTHALMIC DIAGNOSTIC IMAGING, POSTERIOR SEGMENT, WITH INTERPRETATION AND REPORT, UNILATERAL OR BILATERAL; R
OHANAA	Q3 2025	Physician Services	92273	CPT	ELECTRORETINOGRAPHY (ERG), WITH INTERPRETATION AND REPORT; FULL FIELD (IE, FFERG, FLASH ERG, GANZFELD ERG)
OHANAA	Q3 2025	Physician Services	92971	CPT	CARDIOASSIST-METHOD OF CIRCULATORY ASSIST; EXTERNAL
OHANAA	Q3 2025	Physician Services	93228	CPT	WEARABLE MOBILE CV TELEMETRY W/PHYS R&I W/REPORTWEARABLE MOBILE CARDIOVASCULAR TELEMETRY WITH ELECTROCARDIOGRAPHIC RECORDING, CONC
OHANAA	Q3 2025	Physician Services	93270	CPT	PATIENT DEMAND SINGLE OR MULTIPLE EVENT RECORDING WITH PRESYMPTOM MEMORY LOOP, 24-HOUR ATTENDED MONITORING, PER 30 DAY PER
OHANAA	Q3 2025	Physician Services	93272	CPT	PATIENT DEMAND SINGLE OR MULTIPLE EVENT RECORDING WITH PRESYMPTOM MEMORY LOOP, 24-HOUR ATTENDED MONITORING, PER 30 DAY PER
OHANAA	Q3 2025	Physician Services	93351	CPT	ECHO TTHRC R-T 2D -+M-MODE REST&STRS CONT ECG ECHOCARDIOGRAPHY, TRANSTHORACIC, REAL-TIME WITH IMAGE DOCUMENTATION (2D), INCLUDES
OHANAA	Q3 2025	Physician Services	93923	CPT	NONINVASIVE PHYSIOLOGIC STUDIES OF UPPER OR LOWER EXTREMITY ARTERIES, MULTIPLE LEVELS OR WITH PROVOCATIVE FUNCTIONAL MANEU
OHANAA	Q3 2025	Physician Services	93931	CPT	DUPLEX SCAN OF UPPER EXTREMITY ARTERIES OR ARTERIAL BYPASS GRAFTS; UNILATERAL OR LIMITED STUDY
OHANAA	Q3 2025	Physician Services	94642	CPT	AEROSOL INHALATION OF PENTAMIDINE FOR PNEUMOCYSTIS CARINII PNEUMONIA TREATMENT OR PROPHYLAXIS
OHANAA	Q3 2025	Physician Services	95018	CPT	ALLERGY TESTING, ANY COMBINATION OF PERCUTANEOUS (SCRATCH, PUNCTURE, PRICK) AND INTRACUTANEOUS (INTRADERMAL), SEQUENTIAL AND INCREMENTAL, WITH DRUGS OR B
OHANAA	Q3 2025	Physician Services	95076	CPT	INGESTION CHALLENGE TEST (SEQUENTIAL AND INCREMENTAL INGESTION OF TEST ITEMS, EG, FOOD, DRUG OR OTHER SUBSTANCE); INITIAL 120 MINU
OHANAA	Q3 2025	Physician Services	95115	CPT	PROFESSIONAL SERVICES FOR ALLERGEN IMMUNOTHERAPY NOT INCLUDING PROVISION OF ALLERGENIC EXTRACTS; SINGLE INJECTION
OHANAA	Q3 2025	Physician Services	95250	CPT	AMBULATORY CONTINUOUS GLUCOSE MONITORING OF INTERSTITIAL TISSUE FLUID VIA A SUBCUTANEOUS SENSOR FOR A MINIMUM OF 72 HOURS; PHYSICIAN OR OTHER QUALIFIED HE
OHANAA	Q3 2025	Physician Services	95700	CPT	ELECTROENCEPHALOGRAM (EEG) CONTINUOUS RECORDING, WITH VIDEO WHEN PERFORMED, SETUP, PATIENT EDUCATION, AND TAKEDOWN WHEN PERFORMED, ADMINISTERED IN P
OHANAA	Q3 2025	Physician Services	95708	CPT	ELECTROENCEPHALOGRAM (EEG), WITHOUT VIDEO, REVIEW OF DATA, TECHNICAL DESCRIPTION BY EEG TECHNOLOGIST, EACH INCREMENT OF 12-26 HOURS; UNMONITORED
OHANAA	Q3 2025	Physician Services	95713	CPT	ELECTROENCEPHALOGRAM WITH VIDEO (VEEG), REVIEW OF DATA, TECHNICAL DESCRIPTION BY EEG TECHNOLOGIST, 2-12 HOURS; WITH CONTINUOUS, REAL-TIME MONITORING AND M
OHANAA	Q3 2025	Physician Services	95714	CPT	ELECTROENCEPHALOGRAM WITH VIDEO (VEEG), REVIEW OF DATA, TECHNICAL DESCRIPTION BY EEG TECHNOLOGIST, EACH INCREMENT OF 12-26 HOURS; UNMONITORED
OHANAA	Q3 2025	Physician Services	95715	CPT	ELECTROENCEPHALOGRAM WITH VIDEO (VEEG), REVIEW OF DATA, TECHNICAL DESCRIPTION BY EEG TECHNOLOGIST, EACH INCREMENT OF 12-26 HOURS; WITH INTERMITTENT MONITO
OHANAA	Q3 2025	Physician Services	95716	CPT	ELECTROENCEPHALOGRAM WITH VIDEO (VEEG), REVIEW OF DATA, TECHNICAL DESCRIPTION BY EEG TECHNOLOGIST, EACH INCREMENT OF 12-26 HOURS; WITH CONTINUOUS, REAL-TI
OHANAA	Q3 2025	Physician Services	95721	CPT	ELECTROENCEPHALOGRAM (EEG), CONTINUOUS RECORDING, PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL REVIEW OF RECORDED EVENTS, ANALYSIS OF SPIKE AND
OHANAA	Q3 2025	Physician Services	95722	CPT	ELECTROENCEPHALOGRAM (EEG), CONTINUOUS RECORDING, PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL REVIEW OF RECORDED EVENTS, ANALYSIS OF SPIKE AND
OHANAA	Q3 2025	Physician Services	95723	CPT	ELECTROENCEPHALOGRAM (EEG), CONTINUOUS RECORDING, PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL REVIEW OF RECORDED EVENTS, ANALYSIS OF SPIKE AND
OHANAA	Q3 2025	Physician Services	95724	CPT	ELECTROENCEPHALOGRAM (EEG), CONTINUOUS RECORDING, PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL REVIEW OF RECORDED EVENTS, ANALYSIS OF SPIKE AND
OHANAA	Q3 2025	Physician Services	95782	CPT	POLYSOMNOGRAPHY; YOUNGER THAN 6 YEARS, SLEEP STAGING WITH 4 OR MORE ADDITIONAL PARAMETERS OF SLEEP, ATTENDED BY A TECHNOLOGIST
OHANAA	Q3 2025	Physician Services	95800	CPT	SLEEP STUDY, UNATTENDED, SIMULTANEOUS RECORDING; HEART RATE, OXYGEN SATURATION, RESPIRATORY ANALYSIS (EG, BY AIRFLOW OR PERIPHERAL
OHANAA	Q3 2025	Physician Services	95819	CPT	ELECTROENCEPHALOGRAM (EEG); INCLUDING RECORDING AWAKE AND ASLEEP
OHANAA	Q3 2025	Physician Services	95860	CPT	NEEDLE ELECTROMYOGRAPHY; ONE EXTREMITY WITH OR WITHOUT RELATED PARASPINAL AREAS
OHANAA	Q3 2025	Physician Services	95872	CPT	NEEDLE ELECTROMYOGRAPHY USING SINGLE FIBER ELECTRODE, WITH QUANTITATIVE MEASUREMENT OF JITTER, BLOCKING AND/OR FIBER DENSI
OHANAA	Q3 2025	Physician Services	95885	CPT	NEEDLE ELECTROMYOGRAPHY, EACH EXTREMITY, WITH RELATED PARASPINAL AREAS, WHEN PERFORMED, DONE WITH NERVE CONDUCTION, AMPLITUDE AND
OHANAA	Q3 2025	Physician Services	95887	CPT	NEEDLE ELECTROMYOGRAPHY, NON-EXTREMITY (CRANIAL NERVE SUPPLIED OR AXIAL) MUSCLE(S) DONE WITH NERVE CONDUCTION, AMPLITUDE AND LATEN
OHANAA	Q3 2025	Physician Services	95907	CPT	NERVE CONDUCTION STUDIES; 1-2 STUDIES
OHANAA	Q3 2025	Physician Services	95930	CPT	VISUAL EVOKED POTENTIAL (VEP) CHECKERBOARD OR FLASH TESTING, CENTRAL NERVOUS SYSTEM EXCEPT GLAUCOMA, WITH INTERPRETATION AND REPORT
OHANAA	Q3 2025	Physician Services	95937	CPT	NEUROMUSCULAR JUNCTION TESTING (REPETITIVE STIMULATION, PAIRED STIMULI), EACH NERVE, ANY ONE METHOD
OHANAA	Q3 2025	Physician Services	95957	CPT	DIGITAL ANALYSIS OF ELECTROENCEPHALOGRAM (EEG) (EG, FOR EPILEPTIC SPIKE ANALYSIS)
OHANAA	Q3 2025	Physician Services	95999	CPT	UNLISTED NEUROLOGICAL OR NEUROMUSCULAR DIAGNOSTIC PROCEDURE
OHANAA	Q3 2025	Physician Services	97810	CPT	ACUPUNCTURE, 1 OR MORE NEEDLES; WITHOUT ELECTRICAL STIMULATION, INITIAL 15 MINUTES OF PERSONAL ONE-ON-ONE CONTACT WITH THE
OHANAA	Q3 2025	Physician Services	97811	CPT	ACUPUNCTURE, 1 OR MORE NEEDLES; WITHOUT ELECTRICAL STIMULATION, EACH ADDITIONAL 15 MINUTES OF PERSONAL ONE-ON-ONE CONTACT
OHANAA	Q3 2025	Physician Services	97813	CPT	ACUPUNCTURE, 1 OR MORE NEEDLES; WITH ELECTRICAL STIMULATION, INITIAL 15 MINUTES OF PERSONAL ONE-ON-ONE CONTACT WITH THE PA
OHANAA	Q3 2025	Physician Services	97814	CPT	ACUPUNCTURE, 1 OR MORE NEEDLES; WITH ELECTRICAL STIMULATION, EACH ADDITIONAL 15 MINUTES OF PERSONAL ONE-ON-ONE CONTACT WIT
OHANAA	Q3 2025	Physician Services	98925	CPT	OSTEOPATHIC MANIPULATIVE TREATMENT (OMT); ONE TO TWO BODY REGIONS INVOLVED
OHANAA	Q3 2025	Physician Services	98926	CPT	OSTEOPATHIC MANIPULATIVE TREATMENT (OMT); THREE TO FOUR BODY REGIONS INVOLVED
OHANAA	Q3 2025	Physician Services	98927	CPT	OSTEOPATHIC MANIPULATIVE TREATMENT (OMT); FIVE TO SIX BODY REGIONS INVOLVED
OHANAA	Q3 2025	Physician Services	98941	CPT	CHIROPRACTIC MANIPULATIVE TREATMENT (CMT); SPINAL, THREE TO FOUR REGIONS
OHANAA	Q3 2025	Physician Services	98968	CPT	TELEPHONE ASSESSMENT AND MANAGEMENT SERVICE PROVIDED BY A QUALIFIED NONPHYSICIAN HEALTH CARE PROFESSIONAL TO AN ESTABLISHE
OHANAA	Q3 2025	Physician Services	99080	CPT	SPECIAL REPORTS SUCH AS INSURANCE FORMS, MORE THAN THE INFORMATION CONVEYED IN THE USUAL MEDICAL COMMUNICATIONS OR STANDAR
OHANAA	Q3 2025	Physician Services	99183	CPT	PHYSICIAN ATTENDANCE AND SUPERVISION OF HYPERBARIC OXYGEN THERAPY, PER SESSION
OHANAA	Q3 2025	Physician Services	99202	CPT	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT, WHICH REQUIRES A MEDICALLY APPROPRIATE HISTORY AND/OR EXAMINATION AND
OHANAA	Q3 2025	Physician Services	99211	CPT	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT, THAT MAY NOT REQUIRE THE PRESENCE OF A PHYSICIAN OR OTHER QUAL
OHANAA	Q3 2025	Physician Services	99212	CPT	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT, WHICH REQUIRES A MEDICALLY APPROPRIATE HISTORY AND/OR EXAMINA
OHANAA	Q3 2025	Physician Services	99304	CPT	INITIAL NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES THESE 3 KEY COMPONE
OHANAA	Q3 2025	Physician Services	99305	CPT	INITIAL NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES THESE 3 KEY COMPONE
OHANAA	Q3 2025	Physician Services	99307	CPT	SUBSEQUENT NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES AT LEAST 2 OF TH
OHANAA	Q3 2025	Physician Services	99309	CPT	SUBSEQUENT NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES AT LEAST 2 OF TH
OHANAA	Q3 2025	Physician Services	99310	CPT	SUBSEQUENT NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES AT LEAST 2 OF TH
OHANAA	Q3 2025	Physician Services	99315	CPT	NURSING FACILITY DISCHARGE DAY MANAGEMENT; 30 MINUTES OR LESS
OHANAA	Q3 2025	Physician Services	99316	CPT	NURSING FACILITY DISCHARGE DAY MANAGEMENT; MORE THAN 30 MINUTES
OHANAA	Q3 2025	Physician Services	A4220	HCPCS	REFILL KIT FOR IMPLANTABLE INFUSION PUMP
OHANAA	Q3 2025	Physician Services	G0108	HCPCS	DIABETES OUTPATIENT SELF-MANAGEMENT TRAINING SERVICES, INDIVIDUAL, PER 30 MINUTES
OHANAA	Q3 2025	Physician Services	G0260	HCPCS	INJECTION PROCEDURE FOR SACROILIAC JOINT; PROVISION OF ANESTHETIC, STEROID AND/OR OTHER THERAPEUTIC AGENT, WITH OR WITHOUT ARTHRO
OHANAA	Q3 2025	Physician Services	G0399	HCPCS	HOME SLEEP TEST (HST) WITH TYPE III PORTABLE MONITOR, UNATTENDED; MINIMUM OF 4 CHANNELS: 2 RESPIRATORY MOVEMENT/AIRFLOW, 1 ECG/HEA
OHANAA	Q3 2025	Physician Services	G0422	HCPCS	INTENSIVE CARDIAC REHABILITATION; WITH OR WITHOUT CONTINUOUS ECG MONITORING WITH EXERCISE, PER SESSION
OHANAA	Q3 2025	Physician Services	G0423	HCPCS	INTENSIVE CARDIAC REHABILITATION; WITH OR WITHOUT CONTINUOUS ECG MONITORING; WITHOUT EXERCISE, PER SESSION
OHANAA	Q3 2025	Physician Services	J0177	HCPCS	INJECTION AFLIBERCEPT HD 1 MG
OHANAA	Q3 2025	Physician Services	J0577	HCPCS	INJECTION BUPRENORPHINE ER </= TO 7 DAYS TX
OHANAA	Q3 2025	Physician Services	J0578	HCPCS	INJECTION BUPRENORPHINE ER > 7 TO 28 DAYS TX
OHANAA	Q3 2025	Physician Services	J0589	HCPCS	INJECTION DAXIBOTULINUMTOXINA-LANM 1 UNIT
OHANAA	Q3 2025	Physician Services	J0692	HCPCS	INJECTION, CEFEPIME HCL, 500 MG
OHANAA	Q3 2025	Physician Services	J1050	HCPCS	INJECTION, MEDROXYPROGESTERONE ACETATE, 1MG
OHANAA	Q3 2025	Physician Services	J1071	HCPCS	INJECTION, TESTOSTERONE CYPIONATE, 1MG
OHANAA	Q3 2025	Physician Services	J1094	HCPCS	INJECTION, DEXAMETHASONE ACETATE, 1 MG
OHANAA	Q3 2025	Physician Services	J1202	HCPCS	MIGLUSTAT ORAL 65 MG
OHANAA	Q3 2025	Physician Services	J1203	HCPCS	INJECTION CIPAGLUCOSIDASE ALFA-ATGA 5 MG
OHANAA	Q3 2025	Physician Services	J1323	HCPCS	INJECTION ELRANATAMAB-BCMM 1 MG
OHANAA	Q3 2025	Physician Services	J1380	HCPCS	INJECTION, ESTRADIOL VALERATE, UP TO 10 MG
OHANAA	Q3 2025	Physician Services	J1434	HCPCS	INJECTION FOSAPREPITANT 1 MG
OHANAA	Q3 2025	Physician Services	J1748	HCPCS	INJECTION INFLIXIMAB-DYYB 10 MG
OHANAA	Q3 2025	Physician Services	J1750	HCPCS	INJECTION, IRON DEXTRAN, 50 MG
OHANAA	Q3 2025	Physician Services	J2267	HCPCS	INJECTION MIRIKIZUMAB-MRKZ 1 MG
OHANAA	Q3 2025	Physician Services	J2277	HCPCS	INJECTION MOTIXAFORTIDE 0.25 MG
OHANAA	Q3 2025	Physician Services	J2468	HCPCS	INJECTION PAL HCI NOT THR EQ TO J2469 25 MCG

OHANAA	Q3 2025	Physician Services	J2675		HCPCS	INJECTION, PROGESTERONE, PER 50 MG
OHANAA	Q3 2025	Physician Services	J2782		HCPCS	INJECTION AVACINCAPTAD PEGOL 0.1 MG
OHANAA	Q3 2025	Physician Services	J2801		HCPCS	INJECTION RISPERIDONE 0.5 MG
OHANAA	Q3 2025	Physician Services	J3055		HCPCS	INJECTION TALQUETAMAB-TGVS 0.25 MG
OHANAA	Q3 2025	Physician Services	J3247		HCPCS	INJECTION SECUKINUMAB IV 1 MG
OHANAA	Q3 2025	Physician Services	J3263		HCPCS	INJECTION TORIPALIMAB-TPZI 1 MG
OHANAA	Q3 2025	Physician Services	J3301		HCPCS	INJECTION, TRIAMCINOLONE ACETONIDE, PER 10 MG
OHANAA	Q3 2025	Physician Services	J3370		HCPCS	INJECTION, VANCOMYCIN HCL, 500 MG
OHANAA	Q3 2025	Physician Services	J3393		HCPCS	INJECTION BETIBEGLOGENE AUTOTEMCEL PER TREATMENT
OHANAA	Q3 2025	Physician Services	J3394		HCPCS	INJECTION LOVOTIBEGLOGENE AUTOTEMCEL PER TX
OHANAA	Q3 2025	Physician Services	J3420		HCPCS	INJECTION, VITAMIN B-12 CYANOCOBALAMIN, UP TO 1,000 MCG
OHANAA	Q3 2025	Physician Services	J7171		HCPCS	INJECTION ADAMTS13 RECOMBINANT-KRHN 10 IU
OHANAA	Q3 2025	Physician Services	J7298		HCPCS	LEVONORGESTREL-RELEASING INTRAUTERINE CONTRACEPTIVE SYSTEM, 52 MG, 5 YEAR DURATION
OHANAA	Q3 2025	Physician Services	J7355		HCPCS	INJECTION TRAVOPROST INTRACAMERAL IMPLANT 1 MCG
OHANAA	Q3 2025	Physician Services	J8611		HCPCS	METHOTREXATE JYLAMVO ORAL 2.5 MG
OHANAA	Q3 2025	Physician Services	J8612		HCPCS	METHOTREXATE XATMEP ORAL 2.5 MG
OHANAA	Q3 2025	Physician Services	J9034		HCPCS	INJECTION BENDAMUSTINE HCL BENDEKA 1 MG
OHANAA	Q3 2025	Physician Services	J9312		HCPCS	INJECTION, RITUXIMAB, 10 MG
OHANAA	Q3 2025	Physician Services	J9361		HCPCS	INJECTION EFBEMALENOGRASTIM ALFA-VUXW 0.5 MG
OHANAA	Q3 2025	Physician Services	J9376		HCPCS	INJECTION POZELIMAB-BBFG 1 MG
OHANAA	Q3 2025	Physician Services	L0180		HCPCS	CERVICAL, MULTIPLE POST COLLAR, OCCIPITAL/MANDIBULAR SUPPORTS, ADJUSTABLE
OHANAA	Q3 2025	Physician Services	M0224		HCPCS	IV INFUSION PEMIVIBART PRE-EP ONLY
OHANAA	Q3 2025	Physician Services	Q0224		HCPCS	INJECTION PEMIVIBART PRE-EP ONLY
OHANAA	Q3 2025	Physician Services	Q3014		HCPCS	TELEHEALTH ORIGINATING SITE FACILITY FEE
OHANAA	Q3 2025	Physician Services	Q4010		HCPCS	CAST SUPPLIES, SHORT ARM CAST, ADULT (11 YEARS +), FIBERGLASS
OHANAA	Q3 2025	Physician Services	Q4038		HCPCS	CAST SUPPLIES, SHORT LEG CAST, ADULT (11 YEARS +), FIBERGLASS
OHANAA	Q3 2025	Physician Services	Q4184		HCPCS	CELLESTA, PER SQ CM
OHANAA	Q3 2025	Physician Services	Q4186		HCPCS	EPIFIX, PER SQ CM
OHANAA	Q3 2025	Physician Services	Q5133		HCPCS	INJECTION TOCILIZUMAB-BAVI BIOSIMILAR 1 MG
OHANAA	Q3 2025	Physician Services	Q5134		HCPCS	INJECTION NATALIZUMAB-SZTN BIOSIMILAR 1 MG
OHANAA	Q3 2025	Physician Services	Q5137		HCPCS	INJECTION USTEKINUMAB-AUUB WEZLANA BS SC 1 MG
OHANAA	Q3 2025	Physician Services	Q5138		HCPCS	INJECTION USTEKINUMAB-AUUB WEZLANA BS IV 1 MG
OHANAA	Q3 2025	Physician Services	S3845		HCPCS	GENETIC TESTING FOR ALPHA-THALASSEMIA
OHANAA	Q3 2025	Physician Services	S9470		HCPCS	NUTRITIONAL COUNSELING, DIETITIAN VISIT
OHANAA	Q3 2025	Physician Services	S9970		HCPCS	HEALTH CLUB MEMBERSHIP, ANNUAL
OHANAA	Q3 2025	Physician Services	S9991		HCPCS	SERVICES PROVIDED AS PART OF A PHASE III CLINICAL TRIAL
OHANAA	Q3 2025	Physician Services	T1503		HCPCS	ADMINISTRATION OF MEDICATION, OTHER THAN ORAL AND/OR INJECTABLE, BY A HEALTH CARE AGENCY/PROFESSIONAL, PER VISIT
OHANAA	Q3 2025	Physician Services	V2526		HCPCS	CONTACT LENS HPI W/BLUE-VIOLET FILTER PER LENS
OHANAA	Q3 2025	Physician Services	V2600		HCPCS	HAND HELD LOW VISION AIDS AND OTHER NONSPECTACLE MOUNTED AIDS
OHANAA	Q3 2025	Physician Services	V5020		HCPCS	CONFORMITY EVALUATION
OHANAA	Q3 2025	Physician Services	V5275		HCPCS	EAR IMPRESSION, EACH
OHANAA	Q3 2025	Preventive Services	87593		CPT	IADNA ORTHOPOXVIRUS AMPLIFIED PROBE TECHNIQUE EA
OHANAA	Q3 2025	Preventive Services	97803		CPT	MEDICAL NUTRITION THERAPY; RE-ASSESSMENT AND INTERVENTION, INDIVIDUAL, FACE-TO-FACE WITH THE PATIENT, EACH 15 MINUTES
OHANAA	Q3 2025	Preventive Services	G0327		CPT	COLORECTAL CANCER SCREENING BLOOD-BASED BIOMARK
OHANAA	Q3 2025	Rehab Services	0362T		CPT	BEHAVIOR IDENTIFICATION SUPPORTING ASSESSMENT, EACH 15 MINUTES OF TECHNICIANS' TIME FACE-TO-FACE WITH A PATIENT, REQUIRING THE FOLLOWING COMPONENTS: ADMINIS
OHANAA	Q3 2025	Rehab Services		20665	CPT	REMOVAL OF TONGS OR HALO APPLIED BY ANOTHER PHYSICIAN
OHANAA	Q3 2025	Rehab Services		29260	CPT	STRAPPING; ELBOW OR WRIST
OHANAA	Q3 2025	Rehab Services		29799	CPT	UNLISTED PROCEDURE, CASTING OR STRAPPING
OHANAA	Q3 2025	Rehab Services	36475		CPT	UNDER ENDOVASCULAR ABLATION THERAPY OF INCOMPETENT EXTREMITY VEINS
OHANAA	Q3 2025	Rehab Services		74230	CPT	RADIOLOGIC EXAMINATION, SWALLOWING FUNCTION, WITH CINERADIOGRAPHY/VIDEORADIOGRAPHY, INCLUDING SCOUT NECK RADIOGRAPH(S) AND DELAYED IMAGE(S), WHEN PERF
OHANAA	Q3 2025	Rehab Services		77373	CPT	STEREOTACTIC BODY RADIATION THERAPY, TREATMENT DELIVERY, PER FRACTION TO 1 OR MORE LESIONS, INCLUDING IMAGE GUIDANCE, ENTI
OHANAA	Q3 2025	Rehab Services		77385	CPT	INTENSITY MODULATED RADIATION TREATMENT DELIVERY (IMRT), INCLUDES GUIDANCE AND TRACKING, WHEN PERFORMED; SIMPLE
OHANAA	Q3 2025	Rehab Services		77386	CPT	INTENSITY MODULATED RADIATION TREATMENT DELIVERY (IMRT), INCLUDES GUIDANCE AND TRACKING, WHEN PERFORMED; COMPLEX
OHANAA	Q3 2025	Rehab Services		77412	CPT	RADIATION TREATMENT DELIVERY, =>1 MEV; COMPLEX
OHANAA	Q3 2025	Rehab Services		77432	CPT	STEREOTACTIC RADIATION TREATMENT MANAGEMENT OF CRANIAL LESION(S) (COMPLETE COURSE OF TREATMENT CONSISTING OF ONE SESSION)
OHANAA	Q3 2025	Rehab Services		77778	CPT	INTERSTITIAL RADIATION SOURCE APPLICATION; COMPLEX
OHANAA	Q3 2025	Rehab Services		90792	CPT	PSYCHIATRIC DIAGNOSTIC EVALUATION WITH MEDICAL SERVICES
OHANAA	Q3 2025	Rehab Services		90833	CPT	30 MIN PSYCHOTHERAPY ADD-ON CODE
OHANAA	Q3 2025	Rehab Services		90837	CPT	PSYCHOTHERAPY, 60 MINS
OHANAA	Q3 2025	Rehab Services		90853	CPT	GROUP PSYCHOTHERAPY (OTHER THAN OF A MULTIPLE-FAMILY GROUP)
OHANAA	Q3 2025	Rehab Services		90869	CPT	THERAPEUTIC REPETITIVE TRANSCRANIAL MAGNETIC STIMULATION (TMS) TREATMENT; SUBSEQUENT MOTOR THRESHOLD RE-DETERMINATION WITH DELIVER
OHANAA	Q3 2025	Rehab Services		90899	CPT	UNLISTED PSYCHIATRIC SERVICE OR PROCEDURE
OHANAA	Q3 2025	Rehab Services	92507		CPT	TREATMENT OF SPEECH, LANGUAGE, VOICE, COMMUNICATION, AND/OR AUDITORY PROCESSING DISORDER; INDIVIDUAL
OHANAA	Q3 2025	Rehab Services		92508	CPT	TREATMENT OF SPEECH, LANGUAGE, VOICE, COMMUNICATION, AND/OR AUDITORY PROCESSING DISORDER; GROUP, 2 OR MORE INDIVIDUALS
OHANAA	Q3 2025	Rehab Services		92521	CPT	EVALUATION OF SPEECH FLUENCY (EG, STUTTERING, CLUTTERING)
OHANAA	Q3 2025	Rehab Services		92522	CPT	EVALUATION OF SPEECH SOUND PRODUCTION (EG, ARTICULATION, PHONOLOGICAL PROCESS, APRAXIA, DYSARTHRIA);
OHANAA	Q3 2025	Rehab Services		92523	CPT	EVALUATION OF SPEECH SOUND PRODUCTION (EG, ARTICULATION, PHONOLOGICAL PROCESS, APRAXIA, DYSARTHRIA); WITH EVALUATION OF LANGUAGE C
OHANAA	Q3 2025	Rehab Services		92524	CPT	BEHAVIORAL AND QUALITATIVE ANALYSIS OF VOICE AND RESONANCE
OHANAA	Q3 2025	Rehab Services	92526		CPT	TREATMENT OF SWALLOWING DYSFUNCTION AND/OR ORAL FUNCTION FOR FEEDING
OHANAA	Q3 2025	Rehab Services		92597	CPT	EVALUATION FOR USE AND/OR FITTING OF VOICE PROSTHETIC DEVICE TO SUPPLEMENT ORAL SPEECH
OHANAA	Q3 2025	Rehab Services		92607	CPT	EVALUATION FOR PRESCRIPTION FOR SPEECH-GENERATING AUGMENTATIVE AND ALTERNATIVE COMMUNICATION DEVICE, FACE-TO-FACE WITH THE
OHANAA	Q3 2025	Rehab Services		92608	CPT	EVALUATION FOR PRESCRIPTION FOR SPEECH-GENERATING AUGMENTATIVE AND ALTERNATIVE COMMUNICATION DEVICE, FACE-TO-FACE WITH THE
OHANAA	Q3 2025	Rehab Services		92609	CPT	THERAPEUTIC SERVICES FOR THE USE OF SPEECH-GENERATING DEVICE, INCLUDING PROGRAMMING AND MODIFICATION
OHANAA	Q3 2025	Rehab Services		92610	CPT	EVALUATION OF ORAL AND PHARYNGEAL SWALLOWING FUNCTION
OHANAA	Q3 2025	Rehab Services		92612	CPT	FLEXIBLE FIBEROPTIC ENDOSCOPIC EVALUATION OF SWALLOWING BY CINE OR VIDEO RECORDING;
OHANAA	Q3 2025	Rehab Services		92626	CPT	EVALUATION OF AUDITORY FUNCTION FOR SURGICALLY IMPLANTED DEVICE(S) CANDIDACY OR POSTOPERATIVE STATUS OF A SURGICALLY IMPLANTED DEVICE(S); FIRST HOUR
OHANAA	Q3 2025	Rehab Services		92627	CPT	EVALUATION OF AUDITORY FUNCTION FOR SURGICALLY IMPLANTED DEVICE(S) CANDIDACY OR POSTOPERATIVE STATUS OF A SURGICALLY IMPLANTED DEVICE(S); EACH ADDITIONAL 15
OHANAA	Q3 2025	Rehab Services	92630		CPT	AUDITORY REHABILITATION; PRELINGUAL HEARING LOSS
OHANAA	Q3 2025	Rehab Services	93798		CPT	PHYSICIAN SERVICES FOR OUTPATIENT CARDIAC REHABILITATION; WITH CONTINUOUS ECG MONITORING (PER SESSION)
OHANAA	Q3 2025	Rehab Services		96105	CPT	ASSESSMENT OF APHASIA (INCLUDES ASSESSMENT OF EXPRESSIVE AND RECEPTIVE SPEECH AND LANGUAGE FUNCTION, LANGUAGE COMPREHENSIO
OHANAA	Q3 2025	Rehab Services	96900		CPT	ACTINOTHERAPY (ULTRAVIOLET LIGHT)
OHANAA	Q3 2025	Rehab Services		97010	CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; HOT OR COLD PACKS
OHANAA	Q3 2025	Rehab Services		97012	CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; TRACTION, MECHANICAL
OHANAA	Q3 2025	Rehab Services	97014		CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; ELECTRICAL STIMULATION (UNATTENDED)
OHANAA	Q3 2025	Rehab Services		97016	CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; VASOPNEUMATIC DEVICES
OHANAA	Q3 2025	Rehab Services		97018	CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; PARAFFIN BATH
OHANAA	Q3 2025	Rehab Services		97022	CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; WHIRLPOOL
OHANAA	Q3 2025	Rehab Services		97024	CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; DIATHERMY (EG, MICROWAVE)
OHANAA	Q3 2025	Rehab Services		97026	CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; INFRARED
OHANAA	Q3 2025	Rehab Services		97032	CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; ELECTRICAL STIMULATION (MANUAL), EACH 15 MINUTES
OHANAA	Q3 2025	Rehab Services		97033	CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; IONTOPHORESIS, EACH 15 MINUTES
OHANAA	Q3 2025	Rehab Services		97034	CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; CONTRAST BATHS, EACH 15 MINUTES
OHANAA	Q3 2025	Rehab Services		97035	CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; ULTRASOUND, EACH 15 MINUTES
OHANAA	Q3 2025	Rehab Services		97036	CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; HUBBARD TANK, EACH 15 MINUTES
OHANAA	Q3 2025	Rehab Services		97039	CPT	UNLISTED MODALITY (SPECIFY TYPE AND TIME IF CONSTANT ATTENDANCE)
OHANAA	Q3 2025	Rehab Services		97059	CPT	Missing
OHANAA	Q3 2025	Rehab Services		97100	CPT	Missing
OHANAA	Q3 2025	Rehab Services		97102	CPT	Missing

OHANAA	Q3 2025	Rehab Services		97104	CPT	Missing
OHANAA	Q3 2025	Rehab Services	97110		CPT	UNDER PHYSICAL MEDICINE AND REHABILITATION THERAPEUTIC PROCEDURES
OHANAA	Q3 2025	Rehab Services		97112	CPT	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; NEUROMUSCULAR REEDUCATION OF MOVEMENT, BALANCE, COORDINATION, K
OHANAA	Q3 2025	Rehab Services		97113	CPT	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; AQUATIC THERAPY WITH THERAPEUTIC EXERCISES
OHANAA	Q3 2025	Rehab Services		97115	CPT	Missing
OHANAA	Q3 2025	Rehab Services		97116	CPT	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; GAIT TRAINING (INCLUDES STAIR CLIMBING)
OHANAA	Q3 2025	Rehab Services		97124	CPT	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; MASSAGE, INCLUDING EFFLEURAGE, PETRISSAGE AND/OR TAPOTEMENT (ST
OHANAA	Q3 2025	Rehab Services		97129	CPT	THERAPEUTIC INTERVENTIONS THAT FOCUS ON COGNITIVE FUNCTION (EG, ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCT
OHANAA	Q3 2025	Rehab Services		97130	CPT	THERAPEUTIC INTERVENTIONS THAT FOCUS ON COGNITIVE FUNCTION (EG, ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCT
OHANAA	Q3 2025	Rehab Services		97139	CPT	UNLISTED THERAPEUTIC PROCEDURE (SPECIFY)
OHANAA	Q3 2025	Rehab Services		97140	CPT	MANUAL THERAPY TECHNIQUES (EG, MOBILIZATION/ MANIPULATION, MANUAL LYMPHATIC DRAINAGE, MANUAL TRACTION), ONE OR MORE REGION
OHANAA	Q3 2025	Rehab Services		97150	CPT	THERAPEUTIC PROCEDURE(S), GROUP (2 OR MORE INDIVIDUALS)
OHANAA	Q3 2025	Rehab Services		97152	CPT	BEHAVIOR IDENTIFICATION-SUPPORTING ASSESSMENT, ADMINISTERED BY ONE TECHNICIAN UNDER THE DIRECTION OF A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSION
OHANAA	Q3 2025	Rehab Services		97155	CPT	ADAPTIVE BEHAVIOR TREATMENT WITH PROTOCOL MODIFICATION, ADMINISTERED BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, WHICH MAY INCLUDE SIMULTAN
OHANAA	Q3 2025	Rehab Services		97156	CPT	FAMILY ADAPTIVE BEHAVIOR TREATMENT GUIDANCE, ADMINISTERED BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL (WITH OR WITHOUT THE PATIENT PRESENT), FAC
OHANAA	Q3 2025	Rehab Services		97160	CPT	Missing
OHANAA	Q3 2025	Rehab Services		97164	CPT	RE-EVALUATION OF PHYSICAL THERAPY ESTABLISHED PLAN OF CARE, REQUIRING THESE COMPONENTS: AN EXAMINATION INCLUDING A REVIEW OF HISTORY AND USE OF STANDARDIZ
OHANAA	Q3 2025	Rehab Services		97165	CPT	OCCUPATIONAL THERAPY EVALUATION, LOW COMPLEXITY, REQUIRING THESE COMPONENTS: AN OCCUPATIONAL PROFILE AND MEDICAL AND THERAPY HISTORY, WHICH INCLUDES A
OHANAA	Q3 2025	Rehab Services		97166	CPT	OCCUPATIONAL THERAPY EVALUATION, MODERATE COMPLEXITY, REQUIRING THESE COMPONENTS: AN OCCUPATIONAL PROFILE AND MEDICAL AND THERAPY HISTORY, WHICH INCLU
OHANAA	Q3 2025	Rehab Services		97171	CPT	RE-EVALUATION OF ATHLETIC TRAINING ESTABLISHED PLAN OF CARE REQUIRING THESE COMPONENTS: AN ASSESSMENT OF PATIENT'S CURRENT FUNCTIONAL STATUS WHEN THERE IS
OHANAA	Q3 2025	Rehab Services		97187	CPT	Missing
OHANAA	Q3 2025	Rehab Services		97430	CPT	Missing
OHANAA	Q3 2025	Rehab Services		97512	CPT	Missing
OHANAA	Q3 2025	Rehab Services		97530	CPT	THERAPEUTIC ACTIVITIES, DIRECT (ONE-ON-ONE) PATIENT CONTACT BY THE PROVIDER (USE OF DYNAMIC ACTIVITIES TO IMPROVE FUNCTION
OHANAA	Q3 2025	Rehab Services		97533	CPT	SENSORY INTEGRATIVE TECHNIQUES TO ENHANCE SENSORY PROCESSING AND PROMOTE ADAPTIVE RESPONSES TO ENVIRONMENTAL DEMANDS, DIRE
OHANAA	Q3 2025	Rehab Services	97535		CPT	SELF-CARE/HOME MANAGEMENT TRAINING (EG, ACTIVITIES OF DAILY LIVING (ADL) AND COMPENSATORY TRAINING, MEAL PREPARATION, SAFE
OHANAA	Q3 2025	Rehab Services		97536	CPT	Missing
OHANAA	Q3 2025	Rehab Services		97537	CPT	COMMUNITY/WORK REINTEGRATION TRAINING (EG, SHOPPING, TRANSPORTATION, MONEY MANAGEMENT, AVOCATIONAL ACTIVITIES AND/OR WORK
OHANAA	Q3 2025	Rehab Services		97542	CPT	WHEELCHAIR MANAGEMENT (EG, ASSESSMENT, FITTING, TRAINING), EACH 15 MINUTES
OHANAA	Q3 2025	Rehab Services		97580	CPT	Missing
OHANAA	Q3 2025	Rehab Services		97663	CPT	Missing
OHANAA	Q3 2025	Rehab Services		97716	CPT	Missing
OHANAA	Q3 2025	Rehab Services		97750	CPT	PHYSICAL PERFORMANCE TEST OR MEASUREMENT (EG, MUSCULOSKELETAL, FUNCTIONAL CAPACITY), WITH WRITTEN REPORT, EACH 15 MINUTES
OHANAA	Q3 2025	Rehab Services		97755	CPT	ASSISTIVE TECHNOLOGY ASSESSMENT (EG, TO RESTORE, AUGMENT OR COMPENSATE FOR EXISTING FUNCTION, OPTIMIZE FUNCTIONAL TASKS AN
OHANAA	Q3 2025	Rehab Services		97760	CPT	ORTHOTIC(S) MANAGEMENT AND TRAINING (INCLUDING ASSESSMENT AND FITTING WHEN NOT OTHERWISE REPORTED), UPPER EXTREMITY(IES), LOWER EXTREMITY(IES) AND/OR TRUNK
OHANAA	Q3 2025	Rehab Services		97761	CPT	PROSTHETIC(S) TRAINING, UPPER AND/OR LOWER EXTREMITY(IES), INITIAL PROSTHETIC(S) ENCOUNTER, EACH 15 MINUTES
OHANAA	Q3 2025	Rehab Services		97763	CPT	ORTHOTIC(S)/PROSTHETIC(S) MANAGEMENT AND/OR TRAINING, UPPER EXTREMITY(IES), LOWER EXTREMITY(IES), AND/OR TRUNK, SUBSEQUENT ORTHOTIC(S)/PROSTHETIC(S) ENCOUNT
OHANAA	Q3 2025	Rehab Services	99499		CPT	UNLISTED EVALUATION AND MANAGEMENT SERVICE
OHANAA	Q3 2025	Rehab Services	A6509		HCPCS	COMPRESSION BURN GARMENT, UPPER TRUNK TO WAIST INCLUDING ARM OPENINGS (VEST), CUSTOM FABRICATED
OHANAA	Q3 2025	Rehab Services	A9606		HCPCS	RADIUM RA-223 DICHLORIDE, THERAPEUTIC, PER MICROCURIE
OHANAA	Q3 2025	Rehab Services	E0110		HCPCS	CRUTCHES, FOREARM, INCLUDES CRUTCHES OF VARIOUS MATERIALS, ADJUSTABLE OR FIXED, PAIR, COMPLETE WITH TIPS AND HANDGRIPS
OHANAA	Q3 2025	Rehab Services	G0281		HCPCS	ELECTRICAL STIMULATION, (UNATTENDED), TO ONE OR MORE AREAS, FOR CHRONIC STAGE III AND STAGE IV PRESSURE ULCERS, ARTERIAL ULCERS,
OHANAA	Q3 2025	Rehab Services	G0282		HCPCS	ELECTRICAL STIMULATION, (UNATTENDED), TO ONE OR MORE AREAS, FOR WOUND CARE OTHER THAN DESCRIBED IN G0281
OHANAA	Q3 2025	Rehab Services	G0327		HCPCS	COLORECTAL CANCER SCREENING BLOOD-BASED BIOMARK
OHANAA	Q3 2025	Rehab Services	G6004		HCPCS	RADIATION TREATMENT DELIVERY, SINGLE TREATMENT AREA,SINGLE PORT OR PARALLEL OPPOSED PORTS, SIMPLE BLOCKS OR NO BLOCKS: 6-10MEV
OHANAA	Q3 2025	Rehab Services	G6008		HCPCS	RADIATION TREATMENT DELIVERY, 2 SEPARATE TREATMENT AREAS, 3 OR MORE PORTS ON A SINGLE TREATMENT AREA, USE OF MULTIPLE BLOCKS: 6-10MEV
OHANAA	Q3 2025	Rehab Services	G6011		HCPCS	RADIATION TREATMENT DELIVERY,3 OR MORE SEPARATE TREATMENT AREAS, CUSTOM BLOCKING, TANGENTIAL PORTS, WEDGES, ROTATIONAL BEAM, COMPENSATORS, ELECTRON BEAN
OHANAA	Q3 2025	Rehab Services	G6012		HCPCS	RADIATION TREATMENT DELIVERY,3 OR MORE SEPARATE TREATMENT AREAS, CUSTOM BLOCKING, TANGENTIAL PORTS, WEDGES, ROTATIONAL BEAM, COMPENSATORS, ELECTRON BEAN
OHANAA	Q3 2025	Rehab Services	G6013		HCPCS	RADIATION TREATMENT DELIVERY,3 OR MORE SEPARATE TREATMENT AREAS, CUSTOM BLOCKING, TANGENTIAL PORTS, WEDGES, ROTATIONAL BEAM, COMPENSATORS, ELECTRON BEAN
OHANAA	Q3 2025	Rehab Services	G6014		HCPCS	RADIATION TREATMENT DELIVERY,3 OR MORE SEPARATE TREATMENT AREAS, CUSTOM BLOCKING, TANGENTIAL PORTS, WEDGES, ROTATIONAL BEAM, COMPENSATORS, ELECTRON BEAN
OHANAA	Q3 2025	Rehab Services	G6015		HCPCS	INTENSITY MODULATED TREATMENT DELIVERY, SINGLE OR MULTIPLE FIELDS/ARCS,VIA NARROW SPATIALLY AND TEMPORALLY MODULATED BEAMS, BINARY, DYNAMIC MLC, PER TREATM
OHANAA	Q3 2025	Rehab Services	G9763		HCPCS	PATHOLOGY RPT DIAGNOSING CUTANEOUS BASAL CELL CARCINOMA OR SQUAMOUS CELL CARCINOMA (TO INCLUDE IN SITU DISEASE) SENT
OHANAA	Q3 2025	Rehab Services	H0020		HCPCS	ALCOHOL AND/OR DRUG SERVICES; METHADONE ADMINISTRATION AND/OR SERVICE (PROVISION OF THE DRUG BY A LICENSED PROGRAM)
OHANAA	Q3 2025	Rehab Services	H0046		HCPCS	MENTAL HEALTH SERVICES, NOT OTHERWISE SPECIFIED
OHANAA	Q3 2025	Rehab Services	H2038		HCPCS	SKILLS TRAINING AND DEVELOPMENT PER DIEM
OHANAA	Q3 2025	Rehab Services	L3935		HCPCS	FINGER ORTHOTIC, NONTORSION JOINT, MAY INCLUDE SOFT INTERFACE, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT
OHANAA	Q3 2025	Rehab Services	T1013		HCPCS	SIGN LANGUAGE OR ORAL INTERPRETIVE SERVICES, PER 15 MINUTES
OHANAA	Q3 2025	Transport Services	A0021		HCPCS	AMBULANCE SERVICE, OUTSIDE STATE PER MILE, TRANSPORT (MEDICAID ONLY)
OHANAA	Q3 2025	Transport Services	A0100		HCPCS	NON-EMERGENCY TRANSPORTATION; TAXI
OHANAA	Q3 2025	Transport Services	A0110		HCPCS	NONEMERGENCY TRANSPORTATION AND BUS, INTRA- OR INTERSTATE CARRIER
OHANAA	Q3 2025	Transport Services	A0140		HCPCS	NONEMERGENCY TRANSPORTATION AND AIR TRAVEL (PRIVATE OR COMMERCIAL), INTRA- OR INTERSTATE
OHANAA	Q3 2025	Transport Services	A0180		HCPCS	NONEMERGENCY TRANSPORTATION: ANCILLARY: LODGING - RECIPIENT
OHANAA	Q3 2025	Transport Services	A0190		HCPCS	NONEMERGENCY TRANSPORTATION: ANCILLARY: MEALS - RECIPIENT
OHANAA	Q3 2025	Transport Services	A0200		HCPCS	NONEMERGENCY TRANSPORTATION: ANCILLARY: LODGING - ESCORT
OHANAA	Q3 2025	Transport Services	A0210		HCPCS	NONEMERGENCY TRANSPORTATION: ANCILLARY: MEALS - ESCORT
OHANAA	Q3 2025	Transport Services	A0431		HCPCS	AMBULANCE SERVICE, CONVENTIONAL AIR SERVICES, TRANSPORT, ONE WAY (ROTARY WING)
OHANAA	Q3 2025	Transport Services	T2001		HCPCS	NONEMERGENCY TRANSPORTATION; PATIENT ATTENDANT/ESCORT
OHANAA	Q3 2025	Transport Services	T2005		HCPCS	NONEMERGENCY TRANSPORTATION; STRETCHER VAN
XOHANA	Q3 2025	At Risk Services	S5105		HCPCS	DAY CARE SERVICES, CENTER-BASED; SERVICES NOT INCLUDED IN PROGRAM FEE, PER DIEM
XOHANA	Q3 2025	At Risk Services	S5125		HCPCS	ATTENDANT CARE SERVICES; PER 15 MINUTES
XOHANA	Q3 2025	At Risk Services	S5161		HCPCS	EMERGENCY RESPONSE SYSTEM; SERVICE FEE, PER MONTH (EXCLUDES INSTALLATION AND TESTING)
XOHANA	Q3 2025	At Risk Services	S9122		HCPCS	HOME HEALTH AIDE OR CERTIFIED NURSE ASSISTANT, PROVIDING CARE IN THE HOME; PER HOUR
XOHANA	Q3 2025	At Risk Services	S9123		HCPCS	NURSING CARE, IN THE HOME; BY REGISTERED NURSE, PER HOUR (USE FOR GENERAL NURSING CARE ONLY, NOT TO BE USED WHEN CPT CODES 99500-
XOHANA	Q3 2025	Autism Services		97151	CPT	BEHAVIOR IDENTIFICATION ASSESSMENT, ADMINISTERED BY A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, EACH 15 MINUTES OF THE PHYSICIAN'S OR OTHER QUAL
XOHANA	Q3 2025	Autism Services		97153	CPT	ADAPTIVE BEHAVIOR TREATMENT BY PROTOCOL, ADMINISTERED BY TECHNICIAN UNDER THE DIRECTION OF A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, FACE-TO
XOHANA	Q3 2025	Autism Services		97154	CPT	GROUP ADAPTIVE BEHAVIOR TREATMENT BY PROTOCOL, ADMINISTERED BY TECHNICIAN UNDER THE DIRECTION OF A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL,
XOHANA	Q3 2025	Behavioral Health	0889T		CPT	PERSONALIZED TARGET DEVELOPMENT ARHFCMRIGTBS
XOHANA	Q3 2025	Behavioral Health	0890T		CPT	ARHFCMRIGTBS 1ST MOTOR THRESHOLD DETER 1ST TX D
XOHANA	Q3 2025	Behavioral Health	0891T		CPT	ARHFCMRIGTBS SUBSEQUENT TREATMENT DAY
XOHANA	Q3 2025	Behavioral Health	0892T		CPT	ARHFCMRIGTBS SBSQ MOTOR THRESHLD REDETER PR TX D
XOHANA	Q3 2025	Diagnostic Testing	87913		CPT	NFCT AGENT GENOTYPE ALYS NUCLEIC ACID SARSCOV2
XOHANA	Q3 2025	Diagnostic Testing	0019M		CPT	CV DS PLSM ALYS PRTN BMRK APTAMR-BSD MICRORA AND ALG
XOHANA	Q3 2025	Diagnostic Testing	0020M		CPT	ONC CNS ALYS 30000 DNA METHYLATION LOCI TUM TISS
XOHANA	Q3 2025	Diagnostic Testing	0248U		CPT	ONC BRAIN SPHRD CLL CUL 12 RX PNL TUMOR RESPONSE
XOHANA	Q3 2025	Diagnostic Testing	0249U		CPT	ONC BRST SEMIQ ALYS 32 PHSPRTN AND PRTN ANALYTE ALG
XOHANA	Q3 2025	Diagnostic Testing	0250U		CPT	ONC SLD ORG NEO TRGT GEN SEQ DNA ALYS 505 GENES
XOHANA	Q3 2025	Diagnostic Testing	0251U		CPT	HEPCIDIN-25 ELISA SERUM OR PLASMA
XOHANA	Q3 2025	Diagnostic Testing	0252U		CPT	FTL ANEUPLOIDY STR CMPRTV ALYS FTL DNA PRDC CNCP
XOHANA	Q3 2025	Diagnostic Testing	0253U		CPT	REPRDTVE MED RNA 238 GEN NXT GEN SEQ ENDMT TISS
XOHANA	Q3 2025	Diagnostic Testing	0254U		CPT	REPRDTVE MED ALYS 24 CHRMSM EMBRY AND MITOCHDRL DNA
XOHANA	Q3 2025	Diagnostic Testing	0306U		CPT	ONC MRD NEXT-GNRJ TRGT SEQ ALYS CLL-FR DNA 1ST
XOHANA	Q3 2025	Diagnostic Testing	0307U		CPT	ONC MRD NEXT-GNRJ TRGT SEQ ALYS CLL-FR DNA SBSQ
XOHANA	Q3 2025	Diagnostic Testing	0308U		CPT	CRD CAD ALYS 3 PRTN PLSM ALG RSK OBSTRUCTIVE CAD
XOHANA	Q3 2025	Diagnostic Testing	0309U		CPT	CRD CV DS ALYS 4 PRTN PLSM ALG RSK MAJ CAR EVENT
XOHANA	Q3 2025	Diagnostic Testing	0310U		CPT	PED VSCLTS KD ALYS 3 BMRK PLSM ALG RSK SCORE KD
XOHANA	Q3 2025	Diagnostic Testing	0311U		CPT	NFCT DS BCT QUAN ANTMCRB SC MIC EA ORG ID
XOHANA	Q3 2025	Diagnostic Testing	0312U		CPT	AI DS SLE ALYS 8 IGG AUTOANT AND 2 CLL BOUND PRDCTS
XOHANA	Q3 2025	Diagnostic Testing	0313U		CPT	ONC PNCRS DNA AND MRNA NXT-GNRJ SEQ ALYS 74 GEN AND CEA

XOHANA	Q3 2025	Diagnostic Testing	0314U	CPT	ONC CUTAN MLNMA MRNA GEN XPRSN PRFL 35 GENES ALG
XOHANA	Q3 2025	Diagnostic Testing	0315U	CPT	ONC CUTAN SQ CLL CARC MRNA GEN XPRSN PRFL 40 ALG
XOHANA	Q3 2025	Diagnostic Testing	0316U	CPT	BORRELIA BURGDORFERI LYME DS OSPA PRTN EVAL UR
XOHANA	Q3 2025	Diagnostic Testing	0317U	CPT	ONC LUNG CA 4-PRB FISH ASY WHL BLD PREDICTIV ALG
XOHANA	Q3 2025	Diagnostic Testing	0318U	CPT	PED WHL GENOME MTHYLTN ALYS MICRORA 50+GENES BLD
XOHANA	Q3 2025	Diagnostic Testing	0319U	CPT	NEPH RNL TRNSPL RNA PRETRNSPL PERPH BLD ALG
XOHANA	Q3 2025	Diagnostic Testing	0320U	CPT	NEPH RNL TRNSPL RNA POSTTRNSPL PERPH BLD ALG
XOHANA	Q3 2025	Diagnostic Testing	0321U	CPT	IADNA GU PTHGN 20BCT AND FNGL ORG AND ID 16 ABX RSIST GN
XOHANA	Q3 2025	Diagnostic Testing	0322U	CPT	NEURO ASD QUAN MEAS 14 ACYL CARNITINES AND METABLT
XOHANA	Q3 2025	Diagnostic Testing	0323U	CPT	IADNA CNS PATHOGEN NEXT-GENERATION SEQUENCING
XOHANA	Q3 2025	Diagnostic Testing	0326U	CPT	TRGT GEN SEQ ALYS SLD ORGN NEO CLL-FR DNA 83+
XOHANA	Q3 2025	Diagnostic Testing	0327U	CPT	FTL ANEUPLOIDY TRSMY DNA SEQ ALYS MAT PLSM RSK
XOHANA	Q3 2025	Diagnostic Testing	0328U	CPT	DRUG ASSAY DEF 120+ RX AND METABOLITES UR W/LC-MS/MS
XOHANA	Q3 2025	Diagnostic Testing	0329U	CPT	ONC NEOPLASIA XOME AND TRNS SEQ ALYS DNA AND RNA TUMOR
XOHANA	Q3 2025	Diagnostic Testing	0330U	CPT	IADNA VAG PTHGN PNL 27 ORG AMP PROBE VAG SWAB
XOHANA	Q3 2025	Diagnostic Testing	0331U	CPT	ONC HL NEO OPT GEN MAPPING W/DNA BLD/BONE MARROW
XOHANA	Q3 2025	Diagnostic Testing	0333U	CPT	ONC LVR SRVLNC HCC ALYS METHYLTN PATTERNS CFDNA
XOHANA	Q3 2025	Diagnostic Testing	0334U	CPT	ONC SLD ORGN TGSA FFPE TUM TISS DNA 84/+ GEN
XOHANA	Q3 2025	Diagnostic Testing	0335U	CPT	RARE DISEASES WHOLE GENOME SEQ ALYS FETAL SAMPLE
XOHANA	Q3 2025	Diagnostic Testing	0336U	CPT	RARE DISEASES WHOLE GENOME SEQ ALYS BLOOD/SALIVA
XOHANA	Q3 2025	Diagnostic Testing	0339U	CPT	ONC PROSTATE MRNA XPRSN PRFLG HOXC6 AND DLX1 RT-PCR
XOHANA	Q3 2025	Diagnostic Testing	0340U	CPT	ONC PAN CANCER ANALYSIS MRD FROM PLASMA
XOHANA	Q3 2025	Diagnostic Testing	0341U	CPT	FETAL ANEUPLOIDY DNA SEQUENCING COMPARATIVE ALYS
XOHANA	Q3 2025	Diagnostic Testing	0343U	CPT	ONC PRST8 XOME BASED ALYS 442 SNCRNA RT-QPCR UR
XOHANA	Q3 2025	Diagnostic Testing	0345U	CPT	PSYC GENOMIC ALYS PANEL VARIANT ALYS 15 GENES
XOHANA	Q3 2025	Diagnostic Testing	0347U	CPT	RX METAB/PCX DNA 16 GENE VRNT ALYS AND REPRTD PHNT
XOHANA	Q3 2025	Diagnostic Testing	0348U	CPT	RX METAB/PCX DNA 25 GENE VRNT ALYS AND REPRTD PHNT
XOHANA	Q3 2025	Diagnostic Testing	0349U	CPT	RX METAB/PCX DNA 27 GEN VRNT ALYS AND PHNT GEN-RX IA
XOHANA	Q3 2025	Diagnostic Testing	0350U	CPT	RX METAB/PCX DNA 27 GENE VRNT ALYS AND REPRTD PHNT
XOHANA	Q3 2025	Diagnostic Testing	0353U	CPT	IADNA CHLMYD TRCHMTS AND NEISSRA GONORR MULT AMP PRB
XOHANA	Q3 2025	Diagnostic Testing	0403U	CPT	ONC PROSTATE MRNA GENE XPRSN PRFLG 18 URINE ALG
XOHANA	Q3 2025	Diagnostic Testing	0405U	CPT	ONC PNCRTC 59 MTHYLTN HAPLOTYPE BLOCK MRK PLSM
XOHANA	Q3 2025	Diagnostic Testing	0406U	CPT	ONC LUNG FLOW CYTOMETRY SPUTUM 5 MARKERS ALG
XOHANA	Q3 2025	Diagnostic Testing	0407U	CPT	NEPHROLOGY DIABETIC CKD MULT ECLIA PLASMA ALG
XOHANA	Q3 2025	Diagnostic Testing	0409U	CPT	ONC SLD TUM DNA 80 AND RNA 36 GEN NEXT GNRJ SEQ PLSM
XOHANA	Q3 2025	Diagnostic Testing	0410U	CPT	ONC PNCRTC DNA WHL GN SEQ 5-HYDROXYMETHYLCYTOSN
XOHANA	Q3 2025	Diagnostic Testing	0411U	CPT	PSYC GENOMIC ALYS PANEL VARIANT ALYS 15 GENES
XOHANA	Q3 2025	Diagnostic Testing	0412U	CPT	BETA AMYLOID AB42/40 IMPRCIP QUAN LC-MS/MS ALG
XOHANA	Q3 2025	Diagnostic Testing	0413U	CPT	ONC HL NEO OPT GEN MAPG CPY NMBR ALTERATIONS DNA
XOHANA	Q3 2025	Diagnostic Testing	0414U	CPT	ONC LUNG AUGMNT ALG ALYS DGTZ WHOL SLD IMG 8 GEN
XOHANA	Q3 2025	Diagnostic Testing	0415U	CPT	CV DS ACS IA ALG BLOOD 5 YEAR DEL RISK SCORE ACS
XOHANA	Q3 2025	Diagnostic Testing	0417U	CPT	RARE DS WHL MITOCHDRL GEN SEQ ALYS 335 NUC GENES
XOHANA	Q3 2025	Diagnostic Testing	0418U	CPT	ONC BRST AUGMNT ALG ALYS DGTZ WHOL SLD IMG 8FEAT
XOHANA	Q3 2025	Diagnostic Testing	0419U	CPT	NEUROPSYCHIATRY GEN SEQ ALYS PNL VRNT ALY 13 GEN
XOHANA	Q3 2025	Diagnostic Testing	0439U	CPT	CRD CHD DNA ALYS 5 SNP 3 DNA MTHYLTN MRK QPCR
XOHANA	Q3 2025	Diagnostic Testing	0440U	CPT	CRD CHD DNA ALYS 10 SNP 6 DNA MTHYLTN MRK QPCR
XOHANA	Q3 2025	Diagnostic Testing	0443U	CPT	NEUROFILAMENT LIGHT CHAIN ULTRSENS IA SERUM/CSF
XOHANA	Q3 2025	Diagnostic Testing	0444U	CPT	ONC SLD ORGN NEO TGSAP 361 GEN INTERROG DNA FFPE
XOHANA	Q3 2025	Diagnostic Testing	0449U	CPT	CAR SCR SEV INH COND GENOMIC SEQ ALYS PNL 5 GEN
XOHANA	Q3 2025	Diagnostic Testing	0450U	CPT	ONC MM LC-MS/MS MONOCLONAL P-PRTN SEQ ALYS SERUM
XOHANA	Q3 2025	Diagnostic Testing	0451U	CPT	ONC MM LC-MS/MS PEPTIDE ION QUANTIFICATION SERUM
XOHANA	Q3 2025	Diagnostic Testing	0452U	CPT	ONC BLADDER MTHYL PENK DNA DETCJ LTE-QMSP URINE
XOHANA	Q3 2025	Diagnostic Testing	0453U	CPT	ONC CLRCT CA CFDNA MTHYLTN BSD QUAN PCR ASY PLSM
XOHANA	Q3 2025	Diagnostic Testing	0454U	CPT	RARE DS ID VRTJ INVRJ INSJ TLCJ OPT GENOME MAPG
XOHANA	Q3 2025	Diagnostic Testing	0457U	CPT	PFAS 9 PFAS COMPOUNDS LC-MS/MS PLASMA/SERUM QUAN
XOHANA	Q3 2025	Diagnostic Testing	0458U	CPT	ONC BREAST CA S100 A8&A9 ELISA TEAR FLUID ALG
XOHANA	Q3 2025	Diagnostic Testing	0459U	CPT	ABETA42 & TTAU ECLIA CEREBRAL SPINAL FLUID RATIO
XOHANA	Q3 2025	Diagnostic Testing	0460U	CPT	ONC WHL BLD/BUCCAL DNA SNP GNOTYP RT-PCR 24 GENE
XOHANA	Q3 2025	Diagnostic Testing	0461U	CPT	ONC RX-GENOMIC ALYS SNP GNOTYP RT-PCR 24 GENES
XOHANA	Q3 2025	Diagnostic Testing	0462U	CPT	MELATONIN LVL TEST SLEEP STUDY 7/9 SAMPLE ELISA
XOHANA	Q3 2025	Diagnostic Testing	0463U	CPT	ONC CERVIX MRNA GENXPRSN 14 BMRK E6&E7 HPV NASBA
XOHANA	Q3 2025	Diagnostic Testing	0465U	CPT	ONC UROTHELIAL CARC DNA QMSP 2 GENES ALG ALYS
XOHANA	Q3 2025	Diagnostic Testing	0466U	CPT	CRD CAD DNA GWAS 564856 SNP TRGT VARIANT GNOTYP
XOHANA	Q3 2025	Diagnostic Testing	0467U	CPT	ONC BLDR DNA NGS 60 GEN&WHL GENOME ANEUP UR ALG
XOHANA	Q3 2025	Diagnostic Testing	0468U	CPT	HEP NASH MIR-34A-5P A2M YKL40 HBA1C SRM&WHL BLD
XOHANA	Q3 2025	Diagnostic Testing	0469U	CPT	RARE DS WHL GENOM SEQ ALYS CHRMOML ABNR FTL SAMP
XOHANA	Q3 2025	Diagnostic Testing	0470U	CPT	ONC OROP DETCJ MRD NGS QUAN EVAL 8DNA CFHPV16&18
XOHANA	Q3 2025	Diagnostic Testing	0472U	CPT	CA VI PSP&SP1 ANTB ELISA SEMIQL BLD SJOGREN SYND
XOHANA	Q3 2025	Diagnostic Testing	0473U	CPT	ONC SOLID TUMOR NGS DNA FFPE TISS BLD/SLV 648GEN
XOHANA	Q3 2025	Diagnostic Testing	0474U	CPT	HERED PAN CA GSAP 88 GENES 20DUP/DEL NGS BLD/SLV
XOHANA	Q3 2025	Diagnostic Testing	0475U	CPT	HERED PRST8 CA-RLTD DO GSAP NGS CGH EVAL 23 GENE
XOHANA	Q3 2025	Diagnostic Testing	28299	CPT	CORRECTION, HALLUX VALGUS (BUNION), WITH OR WITHOUT SESAMOIDECTOMY; BY DOUBLE OSTEOTOMY
XOHANA	Q3 2025	Diagnostic Testing	38204	CPT	MANAGEMENT OF RECIPIENT HEMATOPOIETIC PROGENITOR CELL DONOR SEARCH AND CELL ACQUISITION
XOHANA	Q3 2025	Diagnostic Testing	70336	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, TEMPOROMANDIBULAR JOINT(S)
XOHANA	Q3 2025	Diagnostic Testing	70450	CPT	COMPUTED TOMOGRAPHY, HEAD OR BRAIN; WITHOUT CONTRAST MATERIAL
XOHANA	Q3 2025	Diagnostic Testing	70460	CPT	COMPUTED TOMOGRAPHY, HEAD OR BRAIN; WITH CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	70470	CPT	COMPUTED TOMOGRAPHY, HEAD OR BRAIN; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
XOHANA	Q3 2025	Diagnostic Testing	70480	CPT	COMPUTED TOMOGRAPHY, ORBIT, SELLA, OR POSTERIOR FOSSA OR OUTER, MIDDLE, OR INNER EAR; WITHOUT CONTRAST MATERIAL
XOHANA	Q3 2025	Diagnostic Testing	70481	CPT	COMPUTED TOMOGRAPHY, ORBIT, SELLA, OR POSTERIOR FOSSA OR OUTER, MIDDLE, OR INNER EAR; WITH CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	70482	CPT	COMPUTED TOMOGRAPHY, ORBIT, SELLA, OR POSTERIOR FOSSA OR OUTER, MIDDLE, OR INNER EAR; WITHOUT CONTRAST MATERIAL, FOLLOWED
XOHANA	Q3 2025	Diagnostic Testing	70486	CPT	COMPUTED TOMOGRAPHY, MAXILLOFACIAL AREA; WITHOUT CONTRAST MATERIAL
XOHANA	Q3 2025	Diagnostic Testing	70487	CPT	COMPUTED TOMOGRAPHY, MAXILLOFACIAL AREA; WITH CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	70488	CPT	COMPUTED TOMOGRAPHY, MAXILLOFACIAL AREA; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
XOHANA	Q3 2025	Diagnostic Testing	70496	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, HEAD, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED, AND IMAGE P
XOHANA	Q3 2025	Diagnostic Testing	70498	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, NECK, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED, AND IMAGE P
XOHANA	Q3 2025	Diagnostic Testing	70540	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ORBIT, FACE, AND/OR NECK; WITHOUT CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	70542	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ORBIT, FACE, AND/OR NECK; WITH CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	70543	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ORBIT, FACE, AND/OR NECK; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATE
XOHANA	Q3 2025	Diagnostic Testing	70544	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, HEAD; WITHOUT CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	70545	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, HEAD; WITH CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	70546	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, HEAD; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SEQUENCES
XOHANA	Q3 2025	Diagnostic Testing	70547	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, NECK; WITHOUT CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	70548	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, NECK; WITH CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	70549	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, NECK; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SEQUENCES
XOHANA	Q3 2025	Diagnostic Testing	70551	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM); WITHOUT CONTRAST MATERIAL
XOHANA	Q3 2025	Diagnostic Testing	70553	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM); WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MAT
XOHANA	Q3 2025	Diagnostic Testing	70554	CPT	MAGNETIC RESONANCE IMAGING, BRAIN, FUNCTIONAL MRI; INCLUDING TEST SELECTION AND ADMINISTRATION OF REPETITIVE BODY PART MOV
XOHANA	Q3 2025	Diagnostic Testing	71250	CPT	COMPUTED TOMOGRAPHY, THORAX, DIAGNOSTIC; WITHOUT CONTRAST MATERIAL

XOHANA	Q3 2025	Diagnostic Testing	71275	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, CHEST (NONCORONARY), WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORM
XOHANA	Q3 2025	Diagnostic Testing	71550	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, CHEST (EG, FOR EVALUATION OF HILAR AND MEDIASTINAL LYMPHADENOPATHY); WITHOUT CONT
XOHANA	Q3 2025	Diagnostic Testing	71551	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, CHEST (EG, FOR EVALUATION OF HILAR AND MEDIASTINAL LYMPHADENOPATHY); WITH CONTRAS
XOHANA	Q3 2025	Diagnostic Testing	71552	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, CHEST (EG, FOR EVALUATION OF HILAR AND MEDIASTINAL LYMPHADENOPATHY); WITHOUT CONT
XOHANA	Q3 2025	Diagnostic Testing	71555	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, CHEST (EXCLUDING MYOCARDIUM), WITH OR WITHOUT CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	72125	CPT	COMPUTED TOMOGRAPHY, CERVICAL SPINE; WITHOUT CONTRAST MATERIAL
XOHANA	Q3 2025	Diagnostic Testing	72126	CPT	COMPUTED TOMOGRAPHY, CERVICAL SPINE; WITH CONTRAST MATERIAL
XOHANA	Q3 2025	Diagnostic Testing	72127	CPT	COMPUTED TOMOGRAPHY, CERVICAL SPINE; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
XOHANA	Q3 2025	Diagnostic Testing	72128	CPT	COMPUTED TOMOGRAPHY, THORACIC SPINE; WITHOUT CONTRAST MATERIAL
XOHANA	Q3 2025	Diagnostic Testing	72129	CPT	COMPUTED TOMOGRAPHY, THORACIC SPINE; WITH CONTRAST MATERIAL
XOHANA	Q3 2025	Diagnostic Testing	72130	CPT	COMPUTED TOMOGRAPHY, THORACIC SPINE; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
XOHANA	Q3 2025	Diagnostic Testing	72131	CPT	COMPUTED TOMOGRAPHY, LUMBAR SPINE; WITHOUT CONTRAST MATERIAL
XOHANA	Q3 2025	Diagnostic Testing	72141	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, CERVICAL; WITHOUT CONTRAST MATERIAL
XOHANA	Q3 2025	Diagnostic Testing	72142	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, CERVICAL; WITH CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	72146	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, THORACIC; WITHOUT CONTRAST MATERIAL
XOHANA	Q3 2025	Diagnostic Testing	72148	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, LUMBAR; WITHOUT CONTRAST MATERIAL
XOHANA	Q3 2025	Diagnostic Testing	72149	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, LUMBAR; WITH CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	72156	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERI
XOHANA	Q3 2025	Diagnostic Testing	72158	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERI
XOHANA	Q3 2025	Diagnostic Testing	72191	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, PELVIS, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED, AND IMAGE
XOHANA	Q3 2025	Diagnostic Testing	72192	CPT	COMPUTED TOMOGRAPHY, PELVIS; WITHOUT CONTRAST MATERIAL
XOHANA	Q3 2025	Diagnostic Testing	72193	CPT	COMPUTED TOMOGRAPHY, PELVIS; WITH CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	72194	CPT	COMPUTED TOMOGRAPHY, PELVIS; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
XOHANA	Q3 2025	Diagnostic Testing	72195	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, PELVIS; WITHOUT CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	72196	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, PELVIS; WITH CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	72197	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, PELVIS; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHE
XOHANA	Q3 2025	Diagnostic Testing	72198	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, PELVIS, WITH OR WITHOUT CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	73200	CPT	COMPUTED TOMOGRAPHY, UPPER EXTREMITY; WITHOUT CONTRAST MATERIAL
XOHANA	Q3 2025	Diagnostic Testing	73201	CPT	COMPUTED TOMOGRAPHY, UPPER EXTREMITY; WITH CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	73202	CPT	COMPUTED TOMOGRAPHY, UPPER EXTREMITY; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
XOHANA	Q3 2025	Diagnostic Testing	73206	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, UPPER EXTREMITY, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED,
XOHANA	Q3 2025	Diagnostic Testing	73218	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, UPPER EXTREMITY, OTHER THAN JOINT; WITHOUT CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	73219	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, UPPER EXTREMITY, OTHER THAN JOINT; WITH CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	73220	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, UPPER EXTREMITY, OTHER THAN JOINT; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONT
XOHANA	Q3 2025	Diagnostic Testing	73221	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF UPPER EXTREMITY; WITHOUT CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	73222	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF UPPER EXTREMITY; WITH CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	73223	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF UPPER EXTREMITY; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST
XOHANA	Q3 2025	Diagnostic Testing	73700	CPT	COMPUTED TOMOGRAPHY, LOWER EXTREMITY; WITHOUT CONTRAST MATERIAL
XOHANA	Q3 2025	Diagnostic Testing	73701	CPT	COMPUTED TOMOGRAPHY, LOWER EXTREMITY; WITH CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	73702	CPT	COMPUTED TOMOGRAPHY, LOWER EXTREMITY; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
XOHANA	Q3 2025	Diagnostic Testing	73706	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, LOWER EXTREMITY, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED,
XOHANA	Q3 2025	Diagnostic Testing	73718	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, LOWER EXTREMITY OTHER THAN JOINT; WITHOUT CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	73719	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, LOWER EXTREMITY OTHER THAN JOINT; WITH CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	73720	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, LOWER EXTREMITY OTHER THAN JOINT; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTR
XOHANA	Q3 2025	Diagnostic Testing	73721	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF LOWER EXTREMITY; WITHOUT CONTRAST MATERIAL
XOHANA	Q3 2025	Diagnostic Testing	73723	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF LOWER EXTREMITY; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST
XOHANA	Q3 2025	Diagnostic Testing	73725	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, LOWER EXTREMITY, WITH OR WITHOUT CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	74150	CPT	COMPUTED TOMOGRAPHY, ABDOMEN; WITHOUT CONTRAST MATERIAL
XOHANA	Q3 2025	Diagnostic Testing	74160	CPT	COMPUTED TOMOGRAPHY, ABDOMEN; WITH CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	74170	CPT	COMPUTED TOMOGRAPHY, ABDOMEN; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
XOHANA	Q3 2025	Diagnostic Testing	74174	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, ABDOMEN AND PELVIS, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED, AND I
XOHANA	Q3 2025	Diagnostic Testing	74176	CPT	COMPUTED TOMOGRAPHY, ABDOMEN AND PELVIS; WITHOUT CONTRAST MATERIAL
XOHANA	Q3 2025	Diagnostic Testing	74177	CPT	COMPUTED TOMOGRAPHY, ABDOMEN AND PELVIS; WITH CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	74178	CPT	COMPUTED TOMOGRAPHY, ABDOMEN AND PELVIS; WITHOUT CONTRAST MATERIAL IN ONE OR BOTH BODY REGIONS, FOLLOWED BY CONTRAST MATERIAL(S) A
XOHANA	Q3 2025	Diagnostic Testing	74182	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ABDOMEN; WITH CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	74183	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ABDOMEN; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY WITH CONTRAST MATERIAL(S) AND
XOHANA	Q3 2025	Diagnostic Testing	74185	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, ABDOMEN, WITH OR WITHOUT CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Diagnostic Testing	74261	CPT	COMPUTED TOMOGRAPHIC (CT) COLONOGRAPHY, DIAGNOSTIC, INCLUDING IMAGE POSTPROCESSING; WITHOUT CONTRAST MATERIAL
XOHANA	Q3 2025	Diagnostic Testing	74712	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, FETAL, INCLUDING PLACENTAL AND MATERNAL PELVIC IMAGING WHEN PERFORMED; SINGLE OR FIRST GE
XOHANA	Q3 2025	Diagnostic Testing	74713	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, FETAL, INCLUDING PLACENTAL AND MATERNAL PELVIC IMAGING WHEN PERFORMED; EACH ADDITIONAL GE
XOHANA	Q3 2025	Diagnostic Testing	75559	CPT	CARDIAC MAGNETIC RESONANCE IMAGING FOR MORPHOLOGY AND FUNCTION WITHOUT CONTRAST MATERIAL; WITH STRESS IMAGING
XOHANA	Q3 2025	Diagnostic Testing	75563	CPT	CARDIAC MAGNETIC RESONANCE IMAGING FOR MORPHOLOGY AND FUNCTION WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL
XOHANA	Q3 2025	Diagnostic Testing	75571	CPT	COMPUTED TOMOGRAPHY, HEART, WITHOUT CONTRAST MATERIAL, WITH QUANTITATIVE EVALUATION OF CORONARY CALCIUM
XOHANA	Q3 2025	Diagnostic Testing	75572	CPT	COMPUTED TOMOGRAPHY, HEART, WITH CONTRAST MATERIAL, FOR EVALUATION OF CARDIAC STRUCTURE AND MORPHOLOGY (INCLUDING 3D IMAGE POSTPRO
XOHANA	Q3 2025	Diagnostic Testing	75573	CPT	COMPUTED TOMOGRAPHY, HEART, WITH CONTRAST MATERIAL, FOR EVALUATION OF CARDIAC STRUCTURE AND MORPHOLOGY IN THE SETTING OF CONGENITA
XOHANA	Q3 2025	Diagnostic Testing	76391	CPT	MAGNETIC RESONANCE (EG, VIBRATION) ELASTOGRAPHY
XOHANA	Q3 2025	Diagnostic Testing	76801	CPT	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND MATERNAL EVALUATION, FIRST TRIMESTER (< 14 WEEK
XOHANA	Q3 2025	Diagnostic Testing	76802	CPT	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND MATERNAL EVALUATION, FIRST TRIMESTER (< 14 WEEK
XOHANA	Q3 2025	Diagnostic Testing	76805	CPT	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND MATERNAL EVALUATION, AFTER FIRST TRIMESTER (> O
XOHANA	Q3 2025	Diagnostic Testing	76810	CPT	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND MATERNAL EVALUATION, AFTER FIRST TRIMESTER (> O
XOHANA	Q3 2025	Diagnostic Testing	76811	CPT	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND MATERNAL EVALUATION PLUS DETAILED FETAL ANATOMI
XOHANA	Q3 2025	Diagnostic Testing	76812	CPT	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND MATERNAL EVALUATION PLUS DETAILED FETAL ANATOMI
XOHANA	Q3 2025	Diagnostic Testing	76813	CPT	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FIRST TRIMESTER FETAL NUCHAL TRANSLUCENCY MEASUREMENT, TR
XOHANA	Q3 2025	Diagnostic Testing	76815	CPT	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, LIMITED (EG, FETAL HEART BEAT, PLACENTAL LOCATION, FETAL
XOHANA	Q3 2025	Diagnostic Testing	76816	CPT	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FOLLOW-UP (EG, RE-EVALUATION OF FETAL SIZE BY MEASURING S
XOHANA	Q3 2025	Diagnostic Testing	76999	CPT	UNLISTED ULTRASOUND PROCEDURE (EG, DIAGNOSTIC, INTERVENTIONAL)
XOHANA	Q3 2025	Diagnostic Testing	77046	CPT	MAGNETIC RESONANCE IMAGING, BREAST, WITHOUT CONTRAST MATERIAL; UNILATERAL
XOHANA	Q3 2025	Diagnostic Testing	77047	CPT	MAGNETIC RESONANCE IMAGING, BREAST, WITHOUT CONTRAST MATERIAL; BILATERAL
XOHANA	Q3 2025	Diagnostic Testing	77048	CPT	MAGNETIC RESONANCE IMAGING, BREAST, WITHOUT AND WITH CONTRAST MATERIAL(S), INCLUDING COMPUTER-AIDED DETECTION (CAD REAL-TIME LESION DETECTION, CHARACTERIZ
XOHANA	Q3 2025	Diagnostic Testing	77049	CPT	MAGNETIC RESONANCE IMAGING, BREAST, WITHOUT AND WITH CONTRAST MATERIAL(S), INCLUDING COMPUTER-AIDED DETECTION (CAD REAL-TIME LESION DETECTION, CHARACTERIZ
XOHANA	Q3 2025	Diagnostic Testing	77371	CPT	RADIATION TREATMENT DELIVERY, STEREOTACTIC RADIOSURGERY (SRS), COMPLETE COURSE OF TREATMENT OF CRANIAL LESION(S) CONSISTIN
XOHANA	Q3 2025	Diagnostic Testing	78813	CPT	POSITRON EMISSION TOMOGRAPHY (PET) IMAGING; WHOLE BODY
XOHANA	Q3 2025	Diagnostic Testing	78815	CPT	POSITRON EMISSION TOMOGRAPHY (PET) WITH CONCURRENTLY ACQUIRED COMPUTED TOMOGRAPHY (CT) FOR ATTENUATION CORRECTION AND ANAT
XOHANA	Q3 2025	Diagnostic Testing	78816	CPT	POSITRON EMISSION TOMOGRAPHY (PET) WITH CONCURRENTLY ACQUIRED COMPUTED TOMOGRAPHY (CT) FOR ATTENUATION CORRECTION AND ANAT
XOHANA	Q3 2025	Diagnostic Testing	81105	CPT	HUMAN PLATELET ANTIGEN 1 GENOTYPING (HPA-1), ITGB3 (INTEGRIN, BETA 3 [PLATELET GLYCOPROTEIN IIIA], ANTIGEN CD61 [GPIIIA]) (EG, NEONATAL ALLOIMMUNE THROMBOCYTOPEN
XOHANA	Q3 2025	Diagnostic Testing	81106	CPT	HUMAN PLATELET ANTIGEN 2 GENOTYPING (HPA-2), GP1BA (GLYCOPROTEIN IB [PLATELET], ALPHA POLYPEPTIDE [GPIBA]) (EG, NEONATAL ALLOIMMUNE THROMBOCYTOPENIA [NAIT], PO
XOHANA	Q3 2025	Diagnostic Testing	81107	CPT	HUMAN PLATELET ANTIGEN 3 GENOTYPING (HPA-3), ITGA2B (INTEGRIN, ALPHA 2B [PLATELET GLYCOPROTEIN IIB OF IIB/IIIA COMPLEX], ANTIGEN CD41 [GPIIB]) (EG, NEONATAL ALLOIMMU
XOHANA	Q3 2025	Diagnostic Testing	81108	CPT	HUMAN PLATELET ANTIGEN 4 GENOTYPING (HPA-4), ITGB3 (INTEGRIN, BETA 3 [PLATELET GLYCOPROTEIN IIIA], ANTIGEN CD61 [GPIIIA]) (EG, NEONATAL ALLOIMMUNE THROMBOCYTOPEN
XOHANA	Q3 2025	Diagnostic Testing	81109	CPT	HUMAN PLATELET ANTIGEN 5 GENOTYPING (HPA-5), ITGA2 (INTEGRIN, ALPHA 2 [CD49B, ALPHA 2 SUBUNIT OF VLA-2 RECEPTOR] [GPIA]) (EG, NEONATAL ALLOIMMUNE THROMBOCYTOPE
XOHANA	Q3 2025	Diagnostic Testing	81110	CPT	HUMAN PLATELET ANTIGEN 6 GENOTYPING (HPA-6W), ITGB3 (INTEGRIN, BETA 3 [PLATELET GLYCOPROTEIN IIIA, ANTIGEN CD61] [GPIIIA]) (EG, NEONATAL ALLOIMMUNE THROMBOCYTOPE
XOHANA	Q3 2025	Diagnostic Testing	81111	CPT	HUMAN PLATELET ANTIGEN 9 GENOTYPING (HPA-9W), ITGA2B (INTEGRIN, ALPHA 2B [PLATELET GLYCOPROTEIN IIB OF IIB/IIIA COMPLEX, ANTIGEN CD41] [GPIIB]) (EG, NEONATAL ALLOIMM
XOHANA	Q3 2025	Diagnostic Testing	81112	CPT	HUMAN PLATELET ANTIGEN 15 GENOTYPING (HPA-15), CD109 (CD109 MOLECULE) (EG, NEONATAL ALLOIMMUNE THROMBOCYTOPENIA [NAIT], POST-TRANSFUSION PURPURA), GENE AN
XOHANA	Q3 2025	Diagnostic Testing	81120	CPT	IDH1 (ISOCITRATE DEHYDROGENASE 1 [NADP+], SOLUBLE) (EG, GLIOMA), COMMON VARIANTS (EG, R132H, R132C)
XOHANA	Q3 2025	Diagnostic Testing	81121	CPT	IDH2 (ISOCITRATE DEHYDROGENASE 2 [NADP+], MITOCHONDRIAL) (EG, GLIOMA), COMMON VARIANTS (EG, R140W, R172M)
XOHANA	Q3 2025	Diagnostic Testing	81162	CPT	BRCA1 (BRCA1, DNA REPAIR ASSOCIATED), BRCA2 (BRCA2, DNA REPAIR ASSOCIATED) (EG, HEREDITARY BREAST AND OVARIAN CANCER) GENE ANALYSIS; FULL SEQUENCE ANALYSIS AN
XOHANA	Q3 2025	Diagnostic Testing	81163	CPT	BRCA1 (BRCA1, DNA REPAIR ASSOCIATED), BRCA2 (BRCA2, DNA REPAIR ASSOCIATED) (EG, HEREDITARY BREAST AND OVARIAN CANCER) GENE ANALYSIS; FULL SEQUENCE ANALYSIS
XOHANA	Q3 2025	Diagnostic Testing	81173	CPT	AR (ANDROGEN RECEPTOR) (EG, SPINAL AND BULBAR MUSCULAR ATROPHY, KENNEDY DISEASE, X CHROMOSOME INACTIVATION) GENE ANALYSIS; FULL GENE SEQUENCE
XOHANA	Q3 2025	Diagnostic Testing	81181	CPT	ATXN7 (ATAXIN 7) (EG, SPINOCEREBELLAR ATAXIA) GENE ANALYSIS, EVALUATION TO DETECT ABNORMAL (EG, EXPANDED) ALLELES

XOHANA	Q3 2025	Diagnostic Testing	81185		CPT	CACNA1A (CALCIUM VOLTAGE-GATED CHANNEL SUBUNIT ALPHA1 A) (EG, SPINOCEREBELLAR ATAXIA) GENE ANALYSIS; FULL GENE SEQUENCE
XOHANA	Q3 2025	Diagnostic Testing	81194		CPT	NTRK (NEUROTROPHIC-TROPOMYOSIN RECEPTOR TYROSINE KINASE 1, 2, AND 3) (EG, SOLID TUMORS) TRANSLOCATION ANALYSIS
XOHANA	Q3 2025	Diagnostic Testing		81200	CPT	ASPA (ASPARTOACYLASE) (EG, CANAVAN DISEASE) GENE ANALYSIS, COMMON VARIANTS (EG, E285A, Y231X)
XOHANA	Q3 2025	Diagnostic Testing		81201	CPT	APC (ADENOMATOUS POLYPOSIS COLI) (EG, FAMILIAL ADENOMATOSIS POLYPOSIS [FAP], ATTENUATED FAP) GENE ANALYSIS; FULL GENE SEQUENCE
XOHANA	Q3 2025	Diagnostic Testing	81202		CPT	APC (ADENOMATOUS POLYPOSIS COLI) (EG, FAMILIAL ADENOMATOSIS POLYPOSIS [FAP], ATTENUATED FAP) GENE ANALYSIS; KNOWN FAMILIAL VARIANT
XOHANA	Q3 2025	Diagnostic Testing	81203		CPT	APC (ADENOMATOUS POLYPOSIS COLI) (EG, FAMILIAL ADENOMATOSIS POLYPOSIS [FAP], ATTENUATED FAP) GENE ANALYSIS; DUPLICATION/DELETION V
XOHANA	Q3 2025	Diagnostic Testing	81205		CPT	BCKDHB (BRANCHED-CHAIN KETO ACID DEHYDROGENASE E1, BETA POLYPEPTIDE) (EG, MAPLE SYRUP URINE DISEASE) GENE ANALYSIS, COMMON VARIANT
XOHANA	Q3 2025	Diagnostic Testing	81206		CPT	BCR/ABL1 (T(9;22)) (EG, CHRONIC MYELOGENOUS LEUKEMIA) TRANSLOCATION ANALYSIS; MAJOR BREAKPOINT, QUALITATIVE OR QUANTITATIVE
XOHANA	Q3 2025	Diagnostic Testing	81207		CPT	BCR/ABL1 (T(9;22)) (EG, CHRONIC MYELOGENOUS LEUKEMIA) TRANSLOCATION ANALYSIS; MINOR BREAKPOINT, QUALITATIVE OR QUANTITATIVE
XOHANA	Q3 2025	Diagnostic Testing	81208		CPT	BCR/ABL1 (T(9;22)) (EG, CHRONIC MYELOGENOUS LEUKEMIA) TRANSLOCATION ANALYSIS; OTHER BREAKPOINT, QUALITATIVE OR QUANTITATIVE
XOHANA	Q3 2025	Diagnostic Testing	81210		CPT	BRAF (B-RAF PROTO-ONCOGENE, SERINE/THREONINE KINASE) (EG, COLON CANCER, MELANOMA), GENE ANALYSIS, V600 VARIANT(S)
XOHANA	Q3 2025	Diagnostic Testing	81219		CPT	CALR (CALRETICULIN) (EG, MYELOPROLIFERATIVE DISORDERS), GENE ANALYSIS, COMMON VARIANTS IN EXON 9
XOHANA	Q3 2025	Diagnostic Testing	81220		CPT	CFTR (CYSTIC FIBROSIS TRANSMEMBRANE CONDUCTANCE REGULATOR) (EG, CYSTIC FIBROSIS) GENE ANALYSIS; COMMON VARIANTS (EG, ACMG/ACOG GUI
XOHANA	Q3 2025	Diagnostic Testing		81223	CPT	CFTR (CYSTIC FIBROSIS TRANSMEMBRANE CONDUCTANCE REGULATOR) (EG, CYSTIC FIBROSIS) GENE ANALYSIS; FULL GENE SEQUENCE
XOHANA	Q3 2025	Diagnostic Testing		81225	CPT	CYP2C19 (CYTOCHROME P450, FAMILY 2, SUBFAMILY C, POLYPEPTIDE 19) (EG, DRUG METABOLISM), GENE ANALYSIS, COMMON VARIANTS (EG, *2, *3
XOHANA	Q3 2025	Diagnostic Testing	81226		CPT	CYP2D6 (CYTOCHROME P450, FAMILY 2, SUBFAMILY D, POLYPEPTIDE 6) (EG, DRUG METABOLISM), GENE ANALYSIS, COMMON VARIANTS (EG, *2, *3,
XOHANA	Q3 2025	Diagnostic Testing	81227		CPT	CYP2C9 (CYTOCHROME P450, FAMILY 2, SUBFAMILY C, POLYPEPTIDE 9) (EG, DRUG METABOLISM), GENE ANALYSIS, COMMON VARIANTS (EG, *2, *3,
XOHANA	Q3 2025	Diagnostic Testing		81229	CPT	CYTOGENOMIC CONSTITUTIONAL (GENOME-WIDE) MICROARRAY ANALYSIS; INTERROGATION OF GENOMIC REGIONS FOR COPY NUMBER AND SINGLE NUCLEOTI
XOHANA	Q3 2025	Diagnostic Testing	81230		CPT	CYP3A4 (CYTOCHROME P450 FAMILY 3 SUBFAMILY A MEMBER 4) (EG, DRUG METABOLISM), GENE ANALYSIS, COMMON VARIANT(S) (EG, *2, *22)
XOHANA	Q3 2025	Diagnostic Testing	81231		CPT	CYP3A5 (CYTOCHROME P450 FAMILY 3 SUBFAMILY A MEMBER 5) (EG, DRUG METABOLISM), GENE ANALYSIS, COMMON VARIANTS (EG, *2, *3, *4, *5, *6, *7)
XOHANA	Q3 2025	Diagnostic Testing	81235		CPT	EGFR (EPIDERMAL GROWTH FACTOR RECEPTOR) (EG, NON-SMALL CELL LUNG CANCER) GENE ANALYSIS, COMMON VARIANTS (EG, EXON 19 LREA DELETION
XOHANA	Q3 2025	Diagnostic Testing	81240		CPT	F2 (PROTHROMBIN, COAGULATION FACTOR II) (EG, HEREDITARY HYPERCOAGULABILITY) GENE ANALYSIS, 20210G>A VARIANT
XOHANA	Q3 2025	Diagnostic Testing		81241	CPT	F5 (COAGULATION FACTOR V) (EG, HEREDITARY HYPERCOAGULABILITY) GENE ANALYSIS, LEIDEN VARIANT
XOHANA	Q3 2025	Diagnostic Testing		81243	CPT	FMR1 (FRAGILE X MENTAL RETARDATION 1) (EG, FRAGILE X MENTAL RETARDATION) GENE ANALYSIS; EVALUATION TO DETECT ABNORMAL (EG, EXPANDE
XOHANA	Q3 2025	Diagnostic Testing	81244		CPT	FMR1 (FRAGILE X MENTAL RETARDATION 1) (EG, FRAGILE X MENTAL RETARDATION) GENE ANALYSIS; CHARACTERIZATION OF ALLELES (EG, EXPANDED SIZE AND PROMOTER METHYLATION
XOHANA	Q3 2025	Diagnostic Testing	81245		CPT	FLT3 (FMS-RELATED TYROSINE KINASE 3) (EG, ACUTE MYELOID LEUKEMIA), GENE ANALYSIS; INTERNAL TANDEM DUPLICATION (ITD) VARIANTS (IE, EXONS 14, 15)
XOHANA	Q3 2025	Diagnostic Testing	81252		CPT	GJB2 (GAP JUNCTION PROTEIN, BETA 2, 26KDA, CONNEXIN 26) (EG, NONSYNDROMIC HEARING LOSS) GENE ANALYSIS; FULL GENE SEQUENCE
XOHANA	Q3 2025	Diagnostic Testing		81256	CPT	HFE (HEMOCHROMATOSIS) (EG, HEREDITARY HEMOCHROMATOSIS) GENE ANALYSIS, COMMON VARIANTS (EG, C282Y, H63D)
XOHANA	Q3 2025	Diagnostic Testing		81257	CPT	HBA1/HBA2 (ALPHA GLOBIN 1 AND ALPHA GLOBIN 2) (EG, ALPHA THALASSEMIA, HB BART HYDROPS FETALIS SYNDROME, HBH DISEASE), GENE ANALYSIS; COMMON DELETIONS OR VARIA
XOHANA	Q3 2025	Diagnostic Testing	81263		CPT	IGH@ (IMMUNOGLOBULIN HEAVY CHAIN LOCUS) (EG, LEUKEMIA AND LYMPHOMA, B-CELL), VARIABLE REGION SOMATIC MUTATION ANALYSIS
XOHANA	Q3 2025	Diagnostic Testing	81265		CPT	COMPARATIVE ANALYSIS USING SHORT TANDEM REPEAT (STR) MARKERS; PATIENT AND COMPARATIVE SPECIMEN (EG, PRE-TRANSPLANT RECIPIENT AND D
XOHANA	Q3 2025	Diagnostic Testing	81270		CPT	JAK2 (JANUS KINASE 2) (EG, MYELOPROLIFERATIVE DISORDER) GENE ANALYSIS, P.VAL617PHE (V617F) VARIANT
XOHANA	Q3 2025	Diagnostic Testing	81272		CPT	KIT (V-KIT HARDY-ZUCKERMAN 4 FELINE SARCOMA VIRAL ONCOGENE HOMOLOG) (EG, GASTROINTESTINAL STROMAL TUMOR [GIST], ACUTE MYELOID LEUK
XOHANA	Q3 2025	Diagnostic Testing	81273		CPT	KIT (V-KIT HARDY-ZUCKERMAN 4 FELINE SARCOMA VIRAL ONCOGENE HOMOLOG) (EG, MASTOCYTOSIS), GENE ANALYSIS, D816 VARIANT(S)
XOHANA	Q3 2025	Diagnostic Testing	81275		CPT	KRAS (KIRSTEN RAT SARCOMA VIRAL ONCOGENE HOMOLOG) (EG, CARCINOMA) GENE ANALYSIS; VARIANTS IN EXON 2 (EG, CODONS 12 AND 13)
XOHANA	Q3 2025	Diagnostic Testing	81276		CPT	KRAS (KIRSTEN RAT SARCOMA VIRAL ONCOGENE HOMOLOG) (EG, CARCINOMA) GENE ANALYSIS; ADDITIONAL VARIANT(S) (EG, CODON 61, CODON 146)
XOHANA	Q3 2025	Diagnostic Testing	81279		CPT	JAK2 (JANUS KINASE 2) (EG, MYELOPROLIFERATIVE DISORDER) TARGETED SEQUENCE ANALYSIS (EG, EXONS 12 AND 13)
XOHANA	Q3 2025	Diagnostic Testing	81286		CPT	FXN (FRATAXIN) (EG, FRIEDREICH ATAXIA) GENE ANALYSIS; FULL GENE SEQUENCE
XOHANA	Q3 2025	Diagnostic Testing		81291	CPT	MTHFR (5,10-METHYLENETETRAHYDROFOLATE REDUCTASE) (EG, HEREDITARY HYPERCOAGULABILITY) GENE ANALYSIS, COMMON VARIANTS (EG, 677T, 129
XOHANA	Q3 2025	Diagnostic Testing		81292	CPT	MLH1 (MUTL HOMOLOG 1, COLON CANCER, NONPOLYPOSIS TYPE 2) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANA
XOHANA	Q3 2025	Diagnostic Testing	81294		CPT	MLH1 (MUTL HOMOLOG 1, COLON CANCER, NONPOLYPOSIS TYPE 2) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANA
XOHANA	Q3 2025	Diagnostic Testing	81295		CPT	MSH2 (MUTS HOMOLOG 2, COLON CANCER, NONPOLYPOSIS TYPE 1) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANA
XOHANA	Q3 2025	Diagnostic Testing	81297		CPT	MSH2 (MUTS HOMOLOG 2, COLON CANCER, NONPOLYPOSIS TYPE 1) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANA
XOHANA	Q3 2025	Diagnostic Testing	81298		CPT	MSH6 (MUTS HOMOLOG 6 [E. COLI]) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANALYSIS; FULL SEQUENCE ANAL
XOHANA	Q3 2025	Diagnostic Testing	81300		CPT	MSH6 (MUTS HOMOLOG 6 [E. COLI]) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE ANALYSIS; DUPLICATION/DELETI
XOHANA	Q3 2025	Diagnostic Testing	81301		CPT	MICROSATELLITE INSTABILITY ANALYSIS (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) OF MARKERS FOR MISMATCH REPAI
XOHANA	Q3 2025	Diagnostic Testing	81302		CPT	MECP2 (METHYL CPG BINDING PROTEIN 2) (EG, RETT SYNDROME) GENE ANALYSIS; FULL SEQUENCE ANALYSIS
XOHANA	Q3 2025	Diagnostic Testing	81307		CPT	PALB2 (PARTNER AND LOCALIZER OF BRCA2) (EG, BREAST AND PANCREATIC CANCER) GENE ANALYSIS; FULL GENE SEQUENCE
XOHANA	Q3 2025	Diagnostic Testing	81309		CPT	PIK3CA (PHOSPHATIDYLINOSITOL-4, 5-BIPHOSPHATE 3-KINASE, CATALYTIC SUBUNIT ALPHA) (EG, COLORECTAL AND BREAST CANCER) GENE ANALYSIS, TARGETED SEQUENCE ANALYSIS
XOHANA	Q3 2025	Diagnostic Testing	81311		CPT	NRAS (NEUROBLASTOMA RAS VIRAL [V-RAS] ONCOGENE HOMOLOG) (EG, COLORECTAL CARCINOMA), GENE ANALYSIS, VARIANTS IN EXON 2 (EG, CODONS
XOHANA	Q3 2025	Diagnostic Testing	81312		CPT	PABPN1 (POLY[A] BINDING PROTEIN NUCLEAR 1) (EG, OCULOPHARYNGEAL MUSCULAR DYSTROPHY) GENE ANALYSIS, EVALUATION TO DETECT ABNORMAL (EG, EXPANDED) ALLELES
XOHANA	Q3 2025	Diagnostic Testing	81314		CPT	PDGFRA (PLATELET-DERIVED GROWTH FACTOR RECEPTOR, ALPHA POLYPEPTIDE) (EG, GASTROINTESTINAL STROMAL TUMOR [GIST]), GENE ANALYSIS, TA
XOHANA	Q3 2025	Diagnostic Testing	81317		CPT	PMS2 (POSTMEIOTIC SEGREGATION INCREASED 2 [S. CEREVISIAE]) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE A
XOHANA	Q3 2025	Diagnostic Testing	81319		CPT	PMS2 (POSTMEIOTIC SEGREGATION INCREASED 2 [S. CEREVISIAE]) (EG, HEREDITARY NON-POLYPOSIS COLORECTAL CANCER, LYNCH SYNDROME) GENE A
XOHANA	Q3 2025	Diagnostic Testing	81321		CPT	PTEN (PHOSPHATASE AND TENSIN HOMOLOG) (EG, COWDEN SYNDROME, PTEN HAMARTOMA TUMOR SYNDROME) GENE ANALYSIS; FULL SEQUENCE ANALYSIS
XOHANA	Q3 2025	Diagnostic Testing	81324		CPT	PMP22 (PERIPHERAL MYELIN PROTEIN 22) (EG, CHARCOT-MARIE-TOOTH, HEREDITARY NEUROPATHY WITH LIABILITY TO PRESSURE PALSIES) GENE ANAL
XOHANA	Q3 2025	Diagnostic Testing	81329		CPT	SMN1 (SURVIVAL OF MOTOR NEURON 1, TELOMERIC) (EG, SPINAL MUSCULAR ATROPHY) GENE ANALYSIS; DOSAGE/DELETION ANALYSIS (EG, CARRIER TESTING), INCLUDES SMN2 (SURVI
XOHANA	Q3 2025	Diagnostic Testing	81339		CPT	MPL (MPL PROTO-ONCOGENE, THROMBOPOIETIN RECEPTOR) (EG, MYELOPROLIFERATIVE DISORDER) GENE ANALYSIS; SEQUENCE ANALYSIS, EXON 10
XOHANA	Q3 2025	Diagnostic Testing	81343		CPT	PPP2R2B (PROTEIN PHOSPHATASE 2 REGULATORY SUBUNIT BBETA) (EG, SPINOCEREBELLAR ATAXIA) GENE ANALYSIS, EVALUATION TO DETECT ABNORMAL (EG, EXPANDED) ALLELES
XOHANA	Q3 2025	Diagnostic Testing	81344		CPT	TBP (TATA BOX BINDING PROTEIN) (EG, SPINOCEREBELLAR ATAXIA) GENE ANALYSIS, EVALUATION TO DETECT ABNORMAL (EG, EXPANDED) ALLELES
XOHANA	Q3 2025	Diagnostic Testing	81351		CPT	TP53 (TUMOR PROTEIN 53) (EG, LI-FRAUMENI SYNDROME) GENE ANALYSIS; FULL GENE SEQUENCE
XOHANA	Q3 2025	Diagnostic Testing	81361		CPT	HBB (HEMOGLOBIN, SUBUNIT BETA) (EG, SICKLE CELL ANEMIA, BETA THALASSEMIA, HEMOGLOBINOPATHY); COMMON VARIANT(S) (EG, HBS, HBC, HBE)
XOHANA	Q3 2025	Diagnostic Testing	81362		CPT	HBB (HEMOGLOBIN, SUBUNIT BETA) (EG, SICKLE CELL ANEMIA, BETA THALASSEMIA, HEMOGLOBINOPATHY); KNOWN FAMILIAL VARIANT(S)
XOHANA	Q3 2025	Diagnostic Testing		81400	CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 1
XOHANA	Q3 2025	Diagnostic Testing		81401	CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 2
XOHANA	Q3 2025	Diagnostic Testing	81402		CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 3
XOHANA	Q3 2025	Diagnostic Testing	81403		CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 4
XOHANA	Q3 2025	Diagnostic Testing		81404	CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 5
XOHANA	Q3 2025	Diagnostic Testing		81405	CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 6
XOHANA	Q3 2025	Diagnostic Testing		81406	CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 7
XOHANA	Q3 2025	Diagnostic Testing	81407		CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 8
XOHANA	Q3 2025	Diagnostic Testing		81408	CPT	MOLECULAR PATHOLOGY PROCEDURE, LEVEL 9 (EG, ANALYSIS OF > 50 EXONS IN A SINGLE GENE BY DNA SEQUENCE ANALYSIS) FBN1 (FIBRILLIN 1) (
XOHANA	Q3 2025	Diagnostic Testing		81415	CPT	EXOME (EG, UNEXPLAINED CONSTITUTIONAL OR HERITABLE DISORDER OR SYNDROME); SEQUENCE ANALYSIS
XOHANA	Q3 2025	Diagnostic Testing	81416		CPT	EXOME (EG, UNEXPLAINED CONSTITUTIONAL OR HERITABLE DISORDER OR SYNDROME); SEQUENCE ANALYSIS, EACH COMPARATOR EXOME (EG, PARENTS, SIBLINGS) (LIST SEPARATELY
XOHANA	Q3 2025	Diagnostic Testing	81420		CPT	FETAL CHROMOSOMAL ANEUPLOIDY (EG, TRISOMY 21, MONOSOMY X) GENOMIC SEQUENCE ANALYSIS PANEL, CIRCULATING CELL-FREE FETAL DNA IN MATERNAL BLOOD, MUST INCLUD
XOHANA	Q3 2025	Diagnostic Testing	81422		CPT	FETAL CHROMOSOMAL MICRODELETION(S) GENOMIC SEQUENCE ANALYSIS (EG, DIGEORGE SYNDROME, CRI-DU-CHAT SYNDROME), CIRCULATING CELL-FREE FETAL DNA IN MATERNAL
XOHANA	Q3 2025	Diagnostic Testing	81445		CPT	TARGETED GENOMIC SEQUENCE ANALYSIS PANEL, SOLID ORGAN NEOPLASM, DNA ANALYSIS, AND RNA ANALYSIS WHEN PERFORMED, 5-50 GENES (EG, ALK, BRAF, CDKN2A, EGFR, ERBB
XOHANA	Q3 2025	Diagnostic Testing	81448		CPT	HEREDITARY PERIPHERAL NEUROPATHIES (EG, CHARCOT-MARIE-TOOTH, SPASTIC PARAPLEGIA), GENOMIC SEQUENCE ANALYSIS PANEL, MUST INCLUDE SEQUENCING OF AT LEAST 5 PE
XOHANA	Q3 2025	Diagnostic Testing	81450		CPT	TARGETED GENOMIC SEQUENCE ANALYSIS PANEL, HEMATOLYMPHOID NEOPLASM OR DISORDER, DNA ANALYSIS, AND RNA ANALYSIS WHEN PERFORMED, 5-50 GENES (EG, BRAF, CEBP
XOHANA	Q3 2025	Diagnostic Testing		81479	CPT	UNLISTED MOLECULAR PATHOLOGY PROCEDURE
XOHANA	Q3 2025	Diagnostic Testing	81599		CPT	UNLISTED MULTIANALYTE ASSAY WITH ALGORITHMIC ANALYSIS
XOHANA	Q3 2025	Diagnostic Testing	88240		CPT	CRYOPRESERVATION, FREEZING AND STORAGE OF CELLS, EACH CELL LINE
XOHANA	Q3 2025	Diagnostic Testing	88261		CPT	CHROMOSOME ANALYSIS; COUNT 5 CELLS, 1 KARYOTYPE, WITH BANDING
XOHANA	Q3 2025	Diagnostic Testing	88262		CPT	CHROMOSOME ANALYSIS; COUNT 15-20 CELLS, 2 KARYOTYPES, WITH BANDING
XOHANA	Q3 2025	Diagnostic Testing	88267		CPT	CHROMOSOME ANALYSIS, AMNIOTIC FLUID OR CHORIONIC VILLUS, COUNT 15 CELLS, 1 KARYOTYPE, WITH BANDING
XOHANA	Q3 2025	Diagnostic Testing	88269		CPT	CHROMOSOME ANALYSIS, IN SITU FOR AMNIOTIC FLUID CELLS, COUNT CELLS FROM 6-12 COLONIES, 1 KARYOTYPE, WITH BANDING
XOHANA	Q3 2025	Diagnostic Testing	88271		CPT	MOLECULAR CYTOGENETICS; DNA PROBE, EACH (EG, FISH)
XOHANA	Q3 2025	Diagnostic Testing	88273		CPT	MOLECULAR CYTOGENETICS; CHROMOSOMAL IN SITU HYBRIDIZATION, ANALYZE 10-30 CELLS (EG, FOR MICRODELETIONS)
XOHANA	Q3 2025	Diagnostic Testing	88274		CPT	MOLECULAR CYTOGENETICS; INTERPHASE IN SITU HYBRIDIZATION, ANALYZE 25-99 CELLS
XOHANA	Q3 2025	Diagnostic Testing	88280		CPT	CHROMOSOME ANALYSIS; ADDITIONAL KARYOTYPES, EACH STUDY
XOHANA	Q3 2025	Diagnostic Testing	88285		CPT	CHROMOSOME ANALYSIS; ADDITIONAL CELLS COUNTED, EACH STUDY
XOHANA	Q3 2025	Diagnostic Testing	88291		CPT	CYTOGENETICS AND MOLECULAR CYTOGENETICS, INTERPRETATION AND REPORT
XOHANA	Q3 2025	Diagnostic Testing	96130		CPT	PSYCHOLOGICAL TESTING EVALUATION SERVICES BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, INCLUDING INTEGRATION OF PATIENT DATA, INTERPRETATION OF
XOHANA	Q3 2025	Diagnostic Testing	96131		CPT	PSYCHOLOGICAL TESTING EVALUATION SERVICES BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, INCLUDING INTEGRATION OF PATIENT DATA, INTERPRETATION OF
XOHANA	Q3 2025	Diagnostic Testing	96132		CPT	NEUROPSYCHOLOGICAL TESTING EVALUATION SERVICES BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, INCLUDING INTEGRATION OF PATIENT DATA, INTERPRETAT
XOHANA	Q3 2025	Diagnostic Testing	96133		CPT	NEUROPSYCHOLOGICAL TESTING EVALUATION SERVICES BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, INCLUDING INTEGRATION OF PATIENT DATA, INTERPRETAT
XOHANA	Q3 2025	Diagnostic Testing	96136		CPT	PSYCHOLOGICAL OR NEUROPSYCHOLOGICAL TEST ADMINISTRATION AND SCORING BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, TWO OR MORE TESTS, ANY MET
XOHANA	Q3 2025	Diagnostic Testing	96137		CPT	PSYCHOLOGICAL OR NEUROPSYCHOLOGICAL TEST ADMINISTRATION AND SCORING BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, TWO OR MORE TESTS, ANY MET

XOHANA	Q3 2025	Diagnostic Testing	96138		CPT	PSYCHOLOGICAL OR NEUROPSYCHOLOGICAL TEST ADMINISTRATION AND SCORING BY TECHNICIAN, TWO OR MORE TESTS, ANY METHOD; FIRST 30 MINUTES
XOHANA	Q3 2025	Diagnostic Testing	96139		CPT	PSYCHOLOGICAL OR NEUROPSYCHOLOGICAL TEST ADMINISTRATION AND SCORING BY TECHNICIAN, TWO OR MORE TESTS, ANY METHOD; EACH ADDITIONAL 30 MINUTES (LIST SEPARA
XOHANA	Q3 2025	Diagnostic Testing	C9507		HCPCS	FR FRZ P HT COVID-19 CONV FRZ WI 8 HRS COLL EA U
XOHANA	Q3 2025	Diagnostic Testing	J1453		HCPCS	INJECTION, FOSAPREPITANT, 1 MG
XOHANA	Q3 2025	Diagnostic Testing	J1459		HCPCS	(INJECTION, IMMUNE GLOBULIN (PRIVIGEN), INTRAVENOUS, NON-LYOPHILIZED (E.G. LIQUID 500 MG).
XOHANA	Q3 2025	Diagnostic Testing	J1745		HCPCS	INJECTION, INFLIXIMAB, 10 MG
XOHANA	Q3 2025	Diagnostic Testing	J9045		HCPCS	CARBOPLATIN, 50 MG
XOHANA	Q3 2025	Diagnostic Testing	J9305		HCPCS	INJECTION, PEMETREXED, 10 MG
XOHANA	Q3 2025	Diagnostic Testing	S8037		HCPCS	MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY (MRCP)
XOHANA	Q3 2025	DME Medical Supplies		64632	CPT	DESTRUCTION BY NEUROLYTIC AGENT; PLANTAR COMMON DIGITAL NERVE
XOHANA	Q3 2025	DME Medical Supplies		94660	CPT	CONTINUOUS POSITIVE AIRWAY PRESSURE VENTILATION (CPAP), INITIATION AND MANAGEMENT
XOHANA	Q3 2025	DME Medical Supplies	A2022		HCPCS	INNOVABURN OR INNOVAMATRIX XL PER SQ CM
XOHANA	Q3 2025	DME Medical Supplies	A2023		HCPCS	INNOVAMATRIX PD 1 MG
XOHANA	Q3 2025	DME Medical Supplies	A2024		HCPCS	RESOLVE MATRIX PER SQ CM
XOHANA	Q3 2025	DME Medical Supplies	A2025		HCPCS	MIRO3D PER CU CM
XOHANA	Q3 2025	DME Medical Supplies	A4211		HCPCS	SUPPLIES FOR SELF-ADMINISTERED INJECTIONS
XOHANA	Q3 2025	DME Medical Supplies	A4213		HCPCS	SYRINGE, STERILE, 20 CC OR GREATER, EACH
XOHANA	Q3 2025	DME Medical Supplies	A4215		HCPCS	NEEDLE, STERILE, ANY SIZE, EACH
XOHANA	Q3 2025	DME Medical Supplies	A4216		HCPCS	STERILE WATER, SALINE AND/OR DEXTROSE, DILUENT/FLUSH, 10 ML
XOHANA	Q3 2025	DME Medical Supplies	A4217		HCPCS	STERILE WATER/SALINE, 500 ML
XOHANA	Q3 2025	DME Medical Supplies	A4221		HCPCS	SUPPLIES FOR MAINTENANCE OF NON-INSULIN DRUG INFUSION CATHETER, PER WEEK (LIST DRUGS SEPARATELY)
XOHANA	Q3 2025	DME Medical Supplies	A4222		HCPCS	INFUSION SUPPLIES FOR EXTERNAL DRUG INFUSION PUMP, PER CASSETTE OR BAG (LIST DRUGS SEPARATELY)
XOHANA	Q3 2025	DME Medical Supplies	A4223		HCPCS	INFUSION SUPPLIES NOT USED WITH EXTERNAL INFUSION PUMP, PER CASSETTE OR BAG (LIST DRUGS SEPARATELY)
XOHANA	Q3 2025	DME Medical Supplies	A4230		HCPCS	INFUSION SET FOR EXTERNAL INSULIN PUMP, NONNEEDLE CANNULA TYPE
XOHANA	Q3 2025	DME Medical Supplies	A4232		HCPCS	SYRINGE WITH NEEDLE FOR EXTERNAL INSULIN PUMP, STERILE, 3 CC
XOHANA	Q3 2025	DME Medical Supplies	A4245		HCPCS	ALCOHOL WIPES, PER BOX
XOHANA	Q3 2025	DME Medical Supplies	A4246		HCPCS	BETADINE OR PHISOHEX SOLUTION, PER PINT
XOHANA	Q3 2025	DME Medical Supplies	A4247		HCPCS	BETADINE OR IODINE SWABS/WIPES, PER BOX
XOHANA	Q3 2025	DME Medical Supplies	A4253		HCPCS	BLOOD GLUCOSE TEST OR REAGENT STRIPS FOR HOME BLOOD GLUCOSE MONITOR, PER 50 STRIPS
XOHANA	Q3 2025	DME Medical Supplies	A4259		HCPCS	LANCETS, PER BOX OF 100
XOHANA	Q3 2025	DME Medical Supplies	A4270		HCPCS	DISPOSABLE ENDOSCOPE SHEATH, EACH
XOHANA	Q3 2025	DME Medical Supplies	A4305		HCPCS	DISPOSABLE DRUG DELIVERY SYSTEM, FLOW RATE OF 50 ML OR GREATER PER HOUR
XOHANA	Q3 2025	DME Medical Supplies	A4310		HCPCS	INSERTION TRAY WITHOUT DRAINAGE BAG AND WITHOUT CATHETER (ACCESSORIES ONLY)
XOHANA	Q3 2025	DME Medical Supplies	A4315		HCPCS	INSERTION TRAY WITH DRAINAGE BAG WITH INDWELLING CATHETER, FOLEY TYPE, 2-WAY, ALL SILICONE
XOHANA	Q3 2025	DME Medical Supplies	A4322		HCPCS	IRRIGATION SYRINGE, BULB OR PISTON, EACH
XOHANA	Q3 2025	DME Medical Supplies	A4331		HCPCS	EXTENSION DRAINAGE TUBING, ANY TYPE, ANY LENGTH, WITH CONNECTOR/ADAPTOR, FOR USE WITH URINARY LEG BAG OR UROSTOMY POUCH, EACH
XOHANA	Q3 2025	DME Medical Supplies	A4332		HCPCS	LUBRICANT, INDIVIDUAL STERILE PACKET, EACH
XOHANA	Q3 2025	DME Medical Supplies	A4335		HCPCS	INCONTINENCE SUPPLY; MISCELLANEOUS
XOHANA	Q3 2025	DME Medical Supplies	A4338		HCPCS	INDWELLING CATHETER; FOLEY TYPE, 2-WAY LATEX WITH COATING (TEFLON, SILICONE, SILICONE ELASTOMER, OR HYDROPHILIC, ETC.), EACH
XOHANA	Q3 2025	DME Medical Supplies	A4344		HCPCS	INDWELLING CATHETER, FOLEY TYPE, 2-WAY, ALL SILICONE, EACH
XOHANA	Q3 2025	DME Medical Supplies	A4351		HCPCS	INTERMITTENT URINARY CATHETER; STRAIGHT TIP, WITH OR WITHOUT COATING (TEFLON, SILICONE, SILICONE ELASTOMER, OR HYDROPHILIC
XOHANA	Q3 2025	DME Medical Supplies	A4352		HCPCS	INTERMITTENT URINARY CATHETER; COUDE (CURVED) TIP, WITH OR WITHOUT COATING (TEFLON, SILICONE, SILICONE ELASTOMERIC
XOHANA	Q3 2025	DME Medical Supplies	A4353		HCPCS	INTERMITTENT URINARY CATHETER, WITH INSERTION SUPPLIES
XOHANA	Q3 2025	DME Medical Supplies	A4354		HCPCS	INSERTION TRAY WITH DRAINAGE BAG BUT WITHOUT CATHETER
XOHANA	Q3 2025	DME Medical Supplies	A4357		HCPCS	BEDSIDE DRAINAGE BAG, DAY OR NIGHT, WITH OR WITHOUT ANTIREFLUX DEVICE, WITH OR WITHOUT TUBE, EACH
XOHANA	Q3 2025	DME Medical Supplies	A4358		HCPCS	URINARY DRAINAGE BAG, LEG OR ABDOMEN, VINYL, WITH OR WITHOUT TUBE, WITH STRAPS, EACH
XOHANA	Q3 2025	DME Medical Supplies	A4362		HCPCS	SKIN BARRIER; SOLID, 4 X 4 OR EQUIVALENT; EACH
XOHANA	Q3 2025	DME Medical Supplies	A4366		HCPCS	OSTOMY VENT, ANY TYPE, EACH
XOHANA	Q3 2025	DME Medical Supplies	A4371		HCPCS	OSTOMY SKIN BARRIER, POWDER, PER OZ
XOHANA	Q3 2025	DME Medical Supplies	A4385		HCPCS	OSTOMY SKIN BARRIER, SOLID 4 X 4 OR EQUIVALENT, EXTENDED WEAR, WITHOUT BUILT-IN CONVEXITY, EACH
XOHANA	Q3 2025	DME Medical Supplies	A4388		HCPCS	OSTOMY POUCH, DRAINABLE, WITH EXTENDED WEAR BARRIER ATTACHED, (1 PIECE), EACH
XOHANA	Q3 2025	DME Medical Supplies	A4390		HCPCS	OSTOMY POUCH, DRAINABLE, WITH EXTENDED WEAR BARRIER ATTACHED, WITH BUILT-IN CONVEXITY (1 PIECE), EACH
XOHANA	Q3 2025	DME Medical Supplies	A4393		HCPCS	OSTOMY POUCH, URINARY, WITH EXTENDED WEAR BARRIER ATTACHED, WITH BUILT-IN CONVEXITY (1 PIECE), EACH
XOHANA	Q3 2025	DME Medical Supplies	A4394		HCPCS	OSTOMY DEODORANT, WITH OR WITHOUT LUBRICANT, FOR USE IN OSTOMY POUCH, PER FL OZ
XOHANA	Q3 2025	DME Medical Supplies	A4402		HCPCS	LUBRICANT, PER OZ
XOHANA	Q3 2025	DME Medical Supplies	A4406		HCPCS	OSTOMY SKIN BARRIER, PECTIN-BASED, PASTE, PER OZ
XOHANA	Q3 2025	DME Medical Supplies	A4407		HCPCS	OSTOMY SKIN BARRIER, W FLANGE (SOLID, FLEXIBLE, OR ACCORDION), EXTENDED WEAR, W BUILT-IN CONVEXITY, 4 X 4 IN OR SMALLER, EACH
XOHANA	Q3 2025	DME Medical Supplies	A4414		HCPCS	OSTOMY SKIN BARRIER, WITH FLANGE (SOLID, FLEXIBLE OR ACCORDION), WITHOUT BUILT-IN CONVEXITY, 4 X 4 IN OR SMALLER, EACH
XOHANA	Q3 2025	DME Medical Supplies	A4425		HCPCS	OSTOMY POUCH, DRAINABLE; FOR USE ON BARRIER WITH NONLOCKING FLANGE, WITH FILTER (2-PIECE SYSTEM), EACH
XOHANA	Q3 2025	DME Medical Supplies	A4450		HCPCS	TAPE, NONWATERPROOF, PER 18 SQ IN
XOHANA	Q3 2025	DME Medical Supplies	A4452		HCPCS	TAPE, WATERPROOF, PER 18 SQ IN
XOHANA	Q3 2025	DME Medical Supplies	A4456		HCPCS	ADHESIVE REMOVER, WIPES, ANY TYPE, EACH
XOHANA	Q3 2025	DME Medical Supplies	A4463		HCPCS	SURGICAL DRESSING HOLDER, REUSABLE, EACH
XOHANA	Q3 2025	DME Medical Supplies	A4483		HCPCS	MOISTURE EXCHANGER, DISPOSABLE, FOR USE WITH INVASIVE MECHANICAL VENTILATION
XOHANA	Q3 2025	DME Medical Supplies	A4550		HCPCS	SURGICAL TRAYS
XOHANA	Q3 2025	DME Medical Supplies	A4554		HCPCS	DISPOSABLE UNDERPADS, ALL SIZES
XOHANA	Q3 2025	DME Medical Supplies	A4565		HCPCS	SLINGS
XOHANA	Q3 2025	DME Medical Supplies	A4595		HCPCS	ELECTRICAL STIMULATOR SUPPLIES, 2 LEAD, PER MONTH, (E.G., TENS, NMES)
XOHANA	Q3 2025	DME Medical Supplies	A4602		HCPCS	REPLACEMENT BATTERY FOR EXTERNAL INFUSION PUMP OWNED BY PATIENT, LITHIUM, 1.5 VOLT, EACH
XOHANA	Q3 2025	DME Medical Supplies	A4606		HCPCS	OXYGEN PROBE FOR USE WITH OXIMETER DEVICE, REPLACEMENT
XOHANA	Q3 2025	DME Medical Supplies	A4623		HCPCS	TRACHEOSTOMY, INNER CANNULA
XOHANA	Q3 2025	DME Medical Supplies	A4624		HCPCS	TRACHEAL SUCTION CATHETER, ANY TYPE OTHER THAN CLOSED SYSTEM, EACH
XOHANA	Q3 2025	DME Medical Supplies	A4625		HCPCS	TRACHEOSTOMY CARE KIT FOR NEW TRACHEOSTOMY
XOHANA	Q3 2025	DME Medical Supplies	A4628		HCPCS	OROPHARYNGEAL SUCTION CATHETER, EACH
XOHANA	Q3 2025	DME Medical Supplies	A4649		HCPCS	SURGICAL SUPPLY; MISCELLANEOUS
XOHANA	Q3 2025	DME Medical Supplies	A4657		HCPCS	SYRINGE, WITH OR WITHOUT NEEDLE, EACH
XOHANA	Q3 2025	DME Medical Supplies	A4670		HCPCS	AUTOMATIC BLOOD PRESSURE MONITOR
XOHANA	Q3 2025	DME Medical Supplies	A4927		HCPCS	GLOVES, NONSTERILE, PER 100
XOHANA	Q3 2025	DME Medical Supplies	A5054		HCPCS	OSTOMY POUCH, CLOSED; FOR USE ON BARRIER WITH FLANGE (2 PIECE), EACH
XOHANA	Q3 2025	DME Medical Supplies	A5063		HCPCS	OSTOMY POUCH, DRAINABLE FOR USE ON BARRIER WITH FLANGE (2-PIECE SYSTEM), EACH
XOHANA	Q3 2025	DME Medical Supplies	A5120		HCPCS	SKIN BARRIER, WIPES OR SWABS, EACH
XOHANA	Q3 2025	DME Medical Supplies	A5500		HCPCS	FOR DIABETICS ONLY, FITTING (INCLUDING FOLLOW-UP), CUSTOM PREPARATION AND SUPPLY OF OFF-THE-SHELF DEPTH-INLAY SHOE
XOHANA	Q3 2025	DME Medical Supplies	A5501		HCPCS	FOR DIABETICS ONLY, FITTING (INCLUDING FOLLOW-UP), CUSTOM PREPARATION AND SUPPLY OF SHOE MOLDED FROM CAST(S) OF PATIENT'S
XOHANA	Q3 2025	DME Medical Supplies	A5512		HCPCS	FOR DIABETICS ONLY, MULTIPLE DENSITY INSERT, DIRECT FORMED, MOLDED TO FOOT AFTER EXTERNAL HEAT SOURCE OF 230 DEGREES
XOHANA	Q3 2025	DME Medical Supplies	A5513		HCPCS	FOR DIABETICS ONLY, MULTIPLE DENSITY INSERT, CUSTOM MOLDED FROM MODEL OF PATIENT'S FOOT, TOTAL CONTACT WITH PATIENT'S FOOT
XOHANA	Q3 2025	DME Medical Supplies	A5514		HCPCS	DIAB ONLY MX DEN INSRT DIRECT CARV CUSTOM FAB EA
XOHANA	Q3 2025	DME Medical Supplies	A6010		HCPCS	COLLAGEN BASED WOUND FILLER, DRY FORM, STERILE, PER G OF COLLAGEN
XOHANA	Q3 2025	DME Medical Supplies	A6021		HCPCS	COLLAGEN DRESSING, STERILE, SIZE 16 SQ IN OR LESS, EACH
XOHANA	Q3 2025	DME Medical Supplies	A6022		HCPCS	COLLAGEN DRESSING, STERILE, SIZE MORE THAN 16 SQ IN BUT LESS THAN OR EQUAL TO 48 SQ IN, EACH
XOHANA	Q3 2025	DME Medical Supplies	A6023		HCPCS	COLLAGEN DRESSING, STERILE, SIZE MORE THAN 48 SQ IN, EACH
XOHANA	Q3 2025	DME Medical Supplies	A6196		HCPCS	ALGINATE OR OTHER FIBER GELLING DRESSING, WOUND COVER, STERILE, PAD SIZE 16 SQ IN OR LESS, EACH DRESSING
XOHANA	Q3 2025	DME Medical Supplies	A6197		HCPCS	ALGINATE OR OTHER FIBER GELLING DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 16 SQ IN BUT LESS THAN OR EQUAL TO 48 SQ IN
XOHANA	Q3 2025	DME Medical Supplies	A6199		HCPCS	ALGINATE OR OTHER FIBER GELLING DRESSING, WOUND FILLER, STERILE, PER 6 IN
XOHANA	Q3 2025	DME Medical Supplies	A6209		HCPCS	FOAM DRESSING, WOUND COVER, STERILE, PAD SIZE 16 SQ IN OR LESS, WITHOUT ADHESIVE BORDER, EACH DRESSING
XOHANA	Q3 2025	DME Medical Supplies	A6210		HCPCS	FOAM DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 16 SQ IN BUT LESS THAN OR EQUAL TO 48 SQ IN, WITHOUT ADHESIVE BORDER
XOHANA	Q3 2025	DME Medical Supplies	A6211		HCPCS	FOAM DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 48 SQ IN, WITHOUT ADHESIVE BORDER, EACH DRESSING
XOHANA	Q3 2025	DME Medical Supplies	A6212		HCPCS	FOAM DRESSING, WOUND COVER, STERILE, PAD SIZE 16 SQ. IN. OR LESS, WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING
XOHANA	Q3 2025	DME Medical Supplies	A6213		HCPCS	FOAM DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 16 SQ IN BUT LESS THAN OR EQUAL TO 48 SQ IN, WITH ANY SIZE

XOHANA	Q3 2025	DME Medical Supplies	A6216	HCPCS	GAUZE, NONIMPREGNATED, NONSTERILE, PAD SIZE 16 SQ IN OR LESS, WITHOUT ADHESIVE BORDER, EACH DRESSING
XOHANA	Q3 2025	DME Medical Supplies	A6219	HCPCS	GAUZE, NONIMPREGNATED, STERILE, PAD SIZE 16 SQ IN OR LESS, WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING
XOHANA	Q3 2025	DME Medical Supplies	A6220	HCPCS	GAUZE, NONIMPREGNATED, STERILE, PAD SIZE MORE THAN 16 SQ IN BUT LESS THAN OR EQUAL TO 48 SQ IN, WITH ANY SIZE ADHESIVE BORDER
XOHANA	Q3 2025	DME Medical Supplies	A6222	HCPCS	GAUZE, IMPREGNATED WITH OTHER THAN WATER, NORMAL SALINE, OR HYDROGEL, STERILE, PAD SIZE 16 SQ IN OR LESS, WITHOUT ADHESIVE
XOHANA	Q3 2025	DME Medical Supplies	A6223	HCPCS	GAUZE, IMPREGNATED WITH OTHER THAN WATER, NORMAL SALINE, OR HYDROGEL, STERILE, PAD SIZE MORE THAN 16 SQ IN, BUT LESS
XOHANA	Q3 2025	DME Medical Supplies	A6234	HCPCS	HYDROCOLLOID DRESSING, WOUND COVER, STERILE, PAD SIZE 16 SQ IN OR LESS, WITHOUT ADHESIVE BORDER, EACH DRESSING
XOHANA	Q3 2025	DME Medical Supplies	A6235	HCPCS	HYDROCOLLOID DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 16 SQ IN BUT LESS THAN OR EQUAL TO 48 SQ IN, WITHOUT
XOHANA	Q3 2025	DME Medical Supplies	A6248	HCPCS	HYDROGEL DRESSING, WOUND FILLER, GEL, PER FL OZ
XOHANA	Q3 2025	DME Medical Supplies	A6250	HCPCS	SKIN SEALANTS, PROTECTANTS, MOISTURIZERS, OINTMENTS, ANY TYPE, ANY SIZE
XOHANA	Q3 2025	DME Medical Supplies	A6252	HCPCS	SPECIALTY ABSORPTIVE DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 16 SQ IN BUT LESS THAN OR EQUAL TO 48 SQ IN
XOHANA	Q3 2025	DME Medical Supplies	A6253	HCPCS	SPECIALTY ABSORPTIVE DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 48 SQ IN, WITHOUT ADHESIVE BORDER, EACH DRESSING
XOHANA	Q3 2025	DME Medical Supplies	A6254	HCPCS	SPECIALTY ABSORPTIVE DRESSING, WOUND COVER, STERILE, PAD SIZE 16 SQ IN OR LESS, WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING
XOHANA	Q3 2025	DME Medical Supplies	A6255	HCPCS	SPECIALTY ABSORPTIVE DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 16 SQ IN BUT LESS THAN OR EQUAL TO 48 SQ IN
XOHANA	Q3 2025	DME Medical Supplies	A6257	HCPCS	TRANSPARENT FILM, STERILE, 16 SQ IN OR LESS, EACH DRESSING
XOHANA	Q3 2025	DME Medical Supplies	A6260	HCPCS	WOUND CLEANSERS, ANY TYPE, ANY SIZE
XOHANA	Q3 2025	DME Medical Supplies	A6261	HCPCS	WOUND FILLER, GEL/PASTE, PER FL OZ, NOT OTHERWISE SPECIFIED
XOHANA	Q3 2025	DME Medical Supplies	A6266	HCPCS	GAUZE, IMPREGNATED, OTHER THAN WATER, NORMAL SALINE, OR ZINC PASTE, STERILE, ANY WIDTH, PER LINEAR YD
XOHANA	Q3 2025	DME Medical Supplies	A6402	HCPCS	GAUZE, NONIMPREGNATED, STERILE, PAD SIZE 16 SQ IN OR LESS, WITHOUT ADHESIVE BORDER, EACH DRESSING
XOHANA	Q3 2025	DME Medical Supplies	A6403	HCPCS	GAUZE, NONIMPREGNATED, STERILE, PAD SIZE MORE THAN 16 SQ IN, LESS THAN OR EQUAL TO 48 SQ IN, WITHOUT ADHESIVE BORDER
XOHANA	Q3 2025	DME Medical Supplies	A6407	HCPCS	PACKING STRIPS, NONIMPREGNATED, STERILE, UP TO 2 IN IN WIDTH, PER LINEAR YD
XOHANA	Q3 2025	DME Medical Supplies	A6443	HCPCS	CONFORMING BANDAGE, NONELASTIC, KNITTED/WOVEN, NONSTERILE, WIDTH GREATER THAN OR EQUAL TO 3 IN AND LESS THAN 5 IN, PER YD
XOHANA	Q3 2025	DME Medical Supplies	A6446	HCPCS	CONFORMING BANDAGE, NONELASTIC, KNITTED/WOVEN, STERILE, WIDTH GREATER THAN OR EQUAL TO 3 IN AND LESS THAN 5 IN, PER YD
XOHANA	Q3 2025	DME Medical Supplies	A6448	HCPCS	LIGHT COMPRESSION BANDAGE, ELASTIC, KNITTED/WOVEN, WIDTH LESS THAN 3 IN, PER YD
XOHANA	Q3 2025	DME Medical Supplies	A6449	HCPCS	LIGHT COMPRESSION BANDAGE, ELASTIC, KNITTED/WOVEN, WIDTH GREATER THAN OR EQUAL TO 3 IN AND LESS THAN 5 IN, PER YD
XOHANA	Q3 2025	DME Medical Supplies	A6450	HCPCS	LIGHT COMPRESSION BANDAGE, ELASTIC, KNITTED/WOVEN, WIDTH GREATER THAN OR EQUAL TO 5 IN, PER YD
XOHANA	Q3 2025	DME Medical Supplies	A6453	HCPCS	SELF-ADHERENT BANDAGE, ELASTIC, NONKNITTED/NONWOVEN, WIDTH LESS THAN 3 IN, PER YD
XOHANA	Q3 2025	DME Medical Supplies	A6454	HCPCS	SELF-ADHERENT BANDAGE, ELASTIC, NONKNITTED/NONWOVEN, WIDTH GREATER THAN OR EQUAL TO 3 IN AND LESS THAN 5 IN, PER YD
XOHANA	Q3 2025	DME Medical Supplies	A6457	HCPCS	TUBULAR DRESSING WITH OR WITHOUT ELASTIC, ANY WIDTH, PER LINEAR YD
XOHANA	Q3 2025	DME Medical Supplies	A6504	HCPCS	COMPRESSION BURN GARMENT, GLOVE TO WRIST, CUSTOM FABRICATED
XOHANA	Q3 2025	DME Medical Supplies	A6507	HCPCS	COMPRESSION BURN GARMENT, FOOT TO KNEE LENGTH, CUSTOM FABRICATED
XOHANA	Q3 2025	DME Medical Supplies	A6512	HCPCS	COMPRESSION BURN GARMENT, NOT OTHERWISE CLASSIFIED
XOHANA	Q3 2025	DME Medical Supplies	A6530	HCPCS	GRADIENT COMPRESSION STOCKING, BELOW KNEE, 18-30 MM HG, EACH
XOHANA	Q3 2025	DME Medical Supplies	A6531	HCPCS	GRADIENT COMPRESSION STOCKING, BELOW KNEE, 30-40 MM HG, EACH
XOHANA	Q3 2025	DME Medical Supplies	A6532	HCPCS	GRADIENT COMPRESSION STOCKING, BELOW KNEE, 40-50 MM HG, EACH
XOHANA	Q3 2025	DME Medical Supplies	A6545	HCPCS	GRADIENT COMPRESSION WRAP, NONELASTIC, BELOW KNEE, 30-50 MM HG, EACH
XOHANA	Q3 2025	DME Medical Supplies	A6550	HCPCS	WOUND CARE SET, FOR NEGATIVE PRESSURE WOUND THERAPY ELECTRICAL PUMP, INCLUDES ALL SUPPLIES AND ACCESSORIES
XOHANA	Q3 2025	DME Medical Supplies	A7000	HCPCS	CANISTER, DISPOSABLE, USED WITH SUCTION PUMP, EACH
XOHANA	Q3 2025	DME Medical Supplies	A7002	HCPCS	TUBING, USED WITH SUCTION PUMP, EACH
XOHANA	Q3 2025	DME Medical Supplies	A7003	HCPCS	ADMINISTRATION SET, WITH SMALL VOLUME NONFILTERED PNEUMATIC NEBULIZER, DISPOSABLE
XOHANA	Q3 2025	DME Medical Supplies	A7005	HCPCS	ADMINISTRATION SET, WITH SMALL VOLUME NONFILTERED PNEUMATIC NEBULIZER, NONDISPOSABLE
XOHANA	Q3 2025	DME Medical Supplies	A7015	HCPCS	AEROSOL MASK, USED WITH DME NEBULIZER
XOHANA	Q3 2025	DME Medical Supplies	A7020	HCPCS	INTERFACE FOR COUGH STIMULATING DEVICE, INCLUDES ALL COMPONENTS, REPLACEMENT ONLY
XOHANA	Q3 2025	DME Medical Supplies	A7030	HCPCS	FULL FACE MASK USED WITH POSITIVE AIRWAY PRESSURE DEVICE, EACH
XOHANA	Q3 2025	DME Medical Supplies	A7031	HCPCS	FACE MASK INTERFACE, REPLACEMENT FOR FULL FACE MASK, EACH
XOHANA	Q3 2025	DME Medical Supplies	A7032	HCPCS	CUSHION FOR USE ON NASAL MASK INTERFACE, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	A7033	HCPCS	PILLOW FOR USE ON NASAL CANNULA TYPE INTERFACE, REPLACEMENT ONLY, PAIR
XOHANA	Q3 2025	DME Medical Supplies	A7044	HCPCS	ORAL INTERFACE USED WITH POSITIVE AIRWAY PRESSURE DEVICE, EACH
XOHANA	Q3 2025	DME Medical Supplies	A7048	HCPCS	VACUUM DRAINAGE COLLECTION UNIT AND TUBING KIT, INCLUDING ALL SUPPLIES NEEDED FOR COLLECTION UNIT CHANGE, FOR USE WITH
XOHANA	Q3 2025	DME Medical Supplies	A7507	HCPCS	FILTER HOLDER AND INTEGRATED FILTER WITHOUT ADHESIVE, FOR USE IN A TRACHEOSTOMA HEAT AND MOISTURE EXCHANGE SYSTEM, EACH
XOHANA	Q3 2025	DME Medical Supplies	A7508	HCPCS	HOUSING AND INTEGRATED ADHESIVE, FOR USE IN A TRACHEOSTOMA HEAT AND MOISTURE EXCHANGE SYSTEM AND/OR WITH A TRACHEOSTOMA VALVE
XOHANA	Q3 2025	DME Medical Supplies	A7520	HCPCS	TRACHEOSTOMY/LARYNGECTOMY TUBE, NONCUFFED, POLYVINYLCHLORIDE (PVC), SILICONE OR EQUAL, EACH
XOHANA	Q3 2025	DME Medical Supplies	A7523	HCPCS	TRACHEOSTOMY SHOWER PROTECTOR, EACH
XOHANA	Q3 2025	DME Medical Supplies	A7526	HCPCS	TRACHEOSTOMY TUBE COLLAR/HOLDER, EACH
XOHANA	Q3 2025	DME Medical Supplies	A8000	HCPCS	HELMET, PROTECTIVE, SOFT, PREFABRICATED, INCLUDES ALL COMPONENTS AND ACCESSORIES
XOHANA	Q3 2025	DME Medical Supplies	A8001	HCPCS	HELMET, PROTECTIVE, HARD, PREFABRICATED, INCLUDES ALL COMPONENTS AND ACCESSORIES
XOHANA	Q3 2025	DME Medical Supplies	A9156	HCPCS	ORAL MUCOADHESIVE ANY TYPE PER 1 ML
XOHANA	Q3 2025	DME Medical Supplies	A9268	HCPCS	PROGRAMMER FOR TRANSIENT ORALLY INGESTED CAPSULE
XOHANA	Q3 2025	DME Medical Supplies	A9269	HCPCS	PROGRMMABLE TSNT ORALLY ING CAP USE EXT PROG PM
XOHANA	Q3 2025	DME Medical Supplies	A9270	HCPCS	NONCOVERED ITEM OR SERVICE
XOHANA	Q3 2025	DME Medical Supplies	A9274	HCPCS	EXTERNAL AMBULATORY INSULIN DELIVERY SYSTEM, DISPOSABLE, EACH, INCLUDES ALL SUPPLIES AND ACCESSORIES
XOHANA	Q3 2025	DME Medical Supplies	A9276	HCPCS	SENSOR; INVASIVE (E.G., SUBCUTANEOUS), DISPOSABLE, FOR USE WITH INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM
XOHANA	Q3 2025	DME Medical Supplies	A9277	HCPCS	TRANSMITTER; EXTERNAL, FOR USE WITH INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM
XOHANA	Q3 2025	DME Medical Supplies	A9278	HCPCS	RECEIVER (MONITOR); EXTERNAL, FOR USE WITH INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM
XOHANA	Q3 2025	DME Medical Supplies	A9279	HCPCS	MONITORING FEATURE/DEVICE, STAND-ALONE OR INTEGRATED, ANY TYPE, INCLUDES ALL ACCESSORIES, COMPONENTS AND ELECTRONICS
XOHANA	Q3 2025	DME Medical Supplies	A9292	HCPCS	PRESCRIPTN DGTL VIS TX SW-ONLY FDA CL PER CRS TX
XOHANA	Q3 2025	DME Medical Supplies	A9900	HCPCS	MISCELLANEOUS DME SUPPLY, ACCESSORY, AND/OR SERVICE COMPONENT OF ANOTHER HCPCS CODE
XOHANA	Q3 2025	DME Medical Supplies	A9901	HCPCS	DME DELIVERY, SET UP, AND/OR DISPENSING SERVICE COMPONENT OF ANOTHER HCPCS CODE
XOHANA	Q3 2025	DME Medical Supplies	A9999	HCPCS	MISCELLANEOUS DME SUPPLY OR ACCESSORY, NOT OTHERWISE SPECIFIED
XOHANA	Q3 2025	DME Medical Supplies	B4035	HCPCS	ENTERAL FEEDING SUPPLY KIT; PUMP FED, PER DAY, INCLUDES BUT NOT LIMITED TO FEEDING/FLUSHING SYRINGE, ADMINISTRATION SET TUBING
XOHANA	Q3 2025	DME Medical Supplies	B4036	HCPCS	ENTERAL FEEDING SUPPLY KIT; GRAVITY FED, PER DAY, INCLUDES BUT NOT LIMITED TO FEEDING/FLUSHING SYRINGE, ADMINISTRATION
XOHANA	Q3 2025	DME Medical Supplies	B4081	HCPCS	NASOGASTRIC TUBING WITH STYLET
XOHANA	Q3 2025	DME Medical Supplies	B4087	HCPCS	GASTROSTOMY/JEJUNOSTOMY TUBE, STANDARD, ANY MATERIAL, ANY TYPE, EACH
XOHANA	Q3 2025	DME Medical Supplies	B4088	HCPCS	GASTROSTOMY/JEJUNOSTOMY TUBE, LOW-PROFILE, ANY MATERIAL, ANY TYPE, EACH
XOHANA	Q3 2025	DME Medical Supplies	B4100	HCPCS	FOOD THICKENER, ADMINISTERED ORALLY, PER OZ
XOHANA	Q3 2025	DME Medical Supplies	B4148	HCPCS	ENTERAL FEEDING SPLY KIT; ELASTOMERC CTRL FED PD
XOHANA	Q3 2025	DME Medical Supplies	B4150	HCPCS	ENTERAL FORMULA, NUTRITIONALLY COMPLETE WITH INTACT NUTRIENTS, INCLUDES PROTEINS, FATS, CARBOHYDRATES, VITAMINS AND MINERALS
XOHANA	Q3 2025	DME Medical Supplies	B4152	HCPCS	ENTERAL FORMULA, NUTRITIONALLY COMPLETE, CALORICALLY DENSE (EQUAL TO OR GREATER THAN 1.5 KCAL/ML) WITH INTACT NUTRIENTS
XOHANA	Q3 2025	DME Medical Supplies	B4153	HCPCS	ENTERAL FORMULA, NUTRITIONALLY COMPLETE, HYDROLYZED PROTEINS (AMINO ACIDS AND PEPTIDE CHAIN), INCLUDES FATS, CARBOHYDRATES
XOHANA	Q3 2025	DME Medical Supplies	B4154	HCPCS	ENTERAL FORMULA, NUTRITIONALLY COMPLETE, FOR SPECIAL METABOLIC NEEDS, EXCLUDES INHERITED DISEASE OF METABOLISM
XOHANA	Q3 2025	DME Medical Supplies	B4155	HCPCS	ENTERAL FORMULA, NUTRITIONALLY INCOMPLETE/MODULAR NUTRIENTS, INCLUDES SPECIFIC NUTRIENTS, CARBOHYDRATES (E.G.
XOHANA	Q3 2025	DME Medical Supplies	B4160	HCPCS	ENTERAL FORMULA, FOR PEDIATRICS, NUTRITIONALLY COMPLETE CALORICALLY DENSE (EQUAL TO OR GREATER THAN 0.7 KCAL/ML) WITH
XOHANA	Q3 2025	DME Medical Supplies	B4161	HCPCS	ENTERAL FORMULA, FOR PEDIATRICS, HYDROLYZED/AMINO ACIDS AND PEPTIDE CHAIN PROTEINS, INCLUDES FATS, CARBOHYDRATES
XOHANA	Q3 2025	DME Medical Supplies	B4185	HCPCS	PARENTERAL NUTRITION SOLUTION, PER 10 GRAMS LIPIDS
XOHANA	Q3 2025	DME Medical Supplies	B4187	HCPCS	OMEGAVEN 10 G LIPIDS
XOHANA	Q3 2025	DME Medical Supplies	B4193	HCPCS	PARENTERAL NUTRITION SOLUTION: COMPOUNDED AMINO ACID AND CARBOHYDRATES W ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS
XOHANA	Q3 2025	DME Medical Supplies	B4197	HCPCS	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATES W ELECTROLYTES, TRACE ELEMENTS AND VITAMINS
XOHANA	Q3 2025	DME Medical Supplies	B9002	HCPCS	ENTERAL NUTRITION INFUSION PUMP, ANY TYPE
XOHANA	Q3 2025	DME Medical Supplies	B9998	HCPCS	NOC FOR ENTERAL SUPPLIES
XOHANA	Q3 2025	DME Medical Supplies	E0100	HCPCS	CANE, INCLUDES CANES OF ALL MATERIALS, ADJUSTABLE OR FIXED, WITH TIP
XOHANA	Q3 2025	DME Medical Supplies	E0105	HCPCS	CANE, QUAD OR 3-PRONG, INCLUDES CANES OF ALL MATERIALS, ADJUSTABLE OR FIXED, WITH TIPS
XOHANA	Q3 2025	DME Medical Supplies	E0143	HCPCS	WALKER, FOLDING, WHEELED, ADJUSTABLE OR FIXED HEIGHT
XOHANA	Q3 2025	DME Medical Supplies	E0144	HCPCS	WALKER, ENCLOSED, 4 SIDED FRAMED, RIGID OR FOLDING, WHEELED WITH POSTERIOR SEAT
XOHANA	Q3 2025	DME Medical Supplies	E0147	HCPCS	WALKER, HEAVY-DUTY, MULTIPLE BRAKING SYSTEM, VARIABLE WHEEL RESISTANCE
XOHANA	Q3 2025	DME Medical Supplies	E0149	HCPCS	WALKER, HEAVY-DUTY, WHEELED, RIGID OR FOLDING, ANY TYPE
XOHANA	Q3 2025	DME Medical Supplies	E0154	HCPCS	PLATFORM ATTACHMENT, WALKER, EACH
XOHANA	Q3 2025	DME Medical Supplies	E0156	HCPCS	SEAT ATTACHMENT, WALKER
XOHANA	Q3 2025	DME Medical Supplies	E0159	HCPCS	BRAKE ATTACHMENT FOR WHEELED WALKER, REPLACEMENT, EACH
XOHANA	Q3 2025	DME Medical Supplies	E0163	HCPCS	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS

XOHANA	Q3 2025	DME Medical Supplies	E0165	HCPCS	COMMODE CHAIR, MOBILE OR STATIONARY, WITH DETACHABLE ARMS
XOHANA	Q3 2025	DME Medical Supplies	E0168	HCPCS	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY-DUTY, STATIONARY OR MOBILE, WITH OR WITHOUT ARMS, ANY TYPE, EACH
XOHANA	Q3 2025	DME Medical Supplies	E0170	HCPCS	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, ELECTRIC, ANY TYPE
XOHANA	Q3 2025	DME Medical Supplies	E0181	HCPCS	POWERED PRESSURE REDUCING MATTRESS OVERLAY/PAD, ALTERNATING, WITH PUMP, INCLUDES HEAVY-DUTY
XOHANA	Q3 2025	DME Medical Supplies	E0184	HCPCS	DRY PRESSURE MATTRESS
XOHANA	Q3 2025	DME Medical Supplies	E0185	HCPCS	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH
XOHANA	Q3 2025	DME Medical Supplies	E0186	HCPCS	AIR PRESSURE MATTRESS
XOHANA	Q3 2025	DME Medical Supplies	E0191	HCPCS	HEEL OR ELBOW PROTECTOR, EACH
XOHANA	Q3 2025	DME Medical Supplies	E0197	HCPCS	AIR PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH
XOHANA	Q3 2025	DME Medical Supplies	E0210	HCPCS	ELECTRIC HEAT PAD, STANDARD
XOHANA	Q3 2025	DME Medical Supplies	E0240	HCPCS	BATH/SHOWER CHAIR, WITH OR WITHOUT WHEELS, ANY SIZE
XOHANA	Q3 2025	DME Medical Supplies	E0242	HCPCS	BATHTUB RAIL, FLOOR BASE
XOHANA	Q3 2025	DME Medical Supplies	E0244	HCPCS	RAISED TOILET SEAT
XOHANA	Q3 2025	DME Medical Supplies	E0245	HCPCS	TUB STOOL OR BENCH
XOHANA	Q3 2025	DME Medical Supplies	E0247	HCPCS	TRANSFER BENCH FOR TUB OR TOILET WITH OR WITHOUT COMMODE OPENING
XOHANA	Q3 2025	DME Medical Supplies	E0248	HCPCS	TRANSFER BENCH, HEAVY-DUTY, FOR TUB OR TOILET WITH OR WITHOUT COMMODE OPENING
XOHANA	Q3 2025	DME Medical Supplies	E0255	HCPCS	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITH MATTRESS
XOHANA	Q3 2025	DME Medical Supplies	E0260	HCPCS	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS, WITH MATTRESS
XOHANA	Q3 2025	DME Medical Supplies	E0261	HCPCS	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS
XOHANA	Q3 2025	DME Medical Supplies	E0265	HCPCS	HOSPITAL BED, TOTAL ELECTRIC (HEAD, FOOT, AND HEIGHT ADJUSTMENTS), WITH ANY TYPE SIDE RAILS, WITH MATTRESS
XOHANA	Q3 2025	DME Medical Supplies	E0271	HCPCS	MATTRESS, INNERSPRING
XOHANA	Q3 2025	DME Medical Supplies	E0272	HCPCS	MATTRESS, FOAM RUBBER
XOHANA	Q3 2025	DME Medical Supplies	E0274	HCPCS	OVER-BED TABLE
XOHANA	Q3 2025	DME Medical Supplies	E0277	HCPCS	POWERED PRESSURE-REDUCING AIR MATTRESS
XOHANA	Q3 2025	DME Medical Supplies	E0295	HCPCS	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITHOUT MATTRESS
XOHANA	Q3 2025	DME Medical Supplies	E0301	HCPCS	HOSPITAL BED, HEAVY-DUTY, EXTRA WIDE, W WEIGHT CAPACITY GREATER THAN 350 POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS
XOHANA	Q3 2025	DME Medical Supplies	E0302	HCPCS	HOSPITAL BED, EXTRA HEAVY-DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600 POUNDS, WITH ANY TYPE SIDE RAILS
XOHANA	Q3 2025	DME Medical Supplies	E0303	HCPCS	HOSPITAL BED, HEAVY-DUTY, EXTRA WIDE, W WEIGHT CAPACITY GREATER THAN 350 POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS
XOHANA	Q3 2025	DME Medical Supplies	E0305	HCPCS	BEDSIDE RAILS, HALF-LENGTH
XOHANA	Q3 2025	DME Medical Supplies	E0310	HCPCS	BEDSIDE RAILS, FULL-LENGTH
XOHANA	Q3 2025	DME Medical Supplies	E0325	HCPCS	URINAL; MALE, JUG-TYPE, ANY MATERIAL
XOHANA	Q3 2025	DME Medical Supplies	E0372	HCPCS	POWERED AIR OVERLAY FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH
XOHANA	Q3 2025	DME Medical Supplies	E0424	HCPCS	STATIONARY COMPRESSED GASEOUS OXYGEN SYSTEM, RENTAL; INCLUDES CONTAINER, CONTENTS, REGULATOR, FLOWMETER, HUMIDIFIER
XOHANA	Q3 2025	DME Medical Supplies	E0431	HCPCS	PORTABLE GASEOUS OXYGEN SYSTEM, RENTAL; INCLUDES PORTABLE CONTAINER, REGULATOR, FLOWMETER, HUMIDIFIER, CANNULA OR MASK, AND TUBING
XOHANA	Q3 2025	DME Medical Supplies	E0443	HCPCS	PORTABLE OXYGEN CONTENTS, GASEOUS, 1 MONTH'S SUPPLY = 1 UNIT
XOHANA	Q3 2025	DME Medical Supplies	E0445	HCPCS	OXIMETER DEVICE FOR MEASURING BLOOD OXYGEN LEVELS NONINVASIVELY
XOHANA	Q3 2025	DME Medical Supplies	E0465	HCPCS	HOME VENTILATOR, ANY TYPE, USED WITH INVASIVE INTERFACE, (E.G., TRACHEOSTOMY TUBE)
XOHANA	Q3 2025	DME Medical Supplies	E0466	HCPCS	HOME VENTILATOR, ANY TYPE, USED WITH NONINVASIVE INTERFACE, (E.G., MASK, CHEST SHELL)
XOHANA	Q3 2025	DME Medical Supplies	E0470	HCPCS	RESPIRATORY ASSIST DEVICE, BI-LEVEL PRESSURE CAPABILITY, WITHOUT BACKUP RATE FEATURE, USED WITH NONINVASIVE INTERFACE
XOHANA	Q3 2025	DME Medical Supplies	E0471	HCPCS	RESPIRATORY ASSIST DEVICE, BI-LEVEL PRESSURE CAPABILITY, WITH BACK-UP RATE FEATURE, USED WITH NONINVASIVE INTERFACE
XOHANA	Q3 2025	DME Medical Supplies	E0482	HCPCS	COUGH STIMULATING DEVICE, ALTERNATING POSITIVE AND NEGATIVE AIRWAY PRESSURE
XOHANA	Q3 2025	DME Medical Supplies	E0483	HCPCS	HIGH FREQUENCY CHEST WALL OSCILLATION AIR-PULSE GENERATOR SYSTEM, (INCLUDES HOSES AND VEST), EACH
XOHANA	Q3 2025	DME Medical Supplies	E0490	HCPCS	PS & CE U O DVC/APPL NM ELECT STIM TNG MUSC REM
XOHANA	Q3 2025	DME Medical Supplies	E0491	HCPCS	ORAL DEVICE/APPL NM ELECT STIM TONGUE MUSCLE
XOHANA	Q3 2025	DME Medical Supplies	E0550	HCPCS	HUMIDIFIER, DURABLE FOR EXTENSIVE SUPPLEMENTAL HUMIDIFICATION DURING IPPB TREATMENTS OR OXYGEN DELIVERY
XOHANA	Q3 2025	DME Medical Supplies	E0561	HCPCS	HUMIDIFIER, NONHEATED, USED WITH POSITIVE AIRWAY PRESSURE DEVICE
XOHANA	Q3 2025	DME Medical Supplies	E0562	HCPCS	HUMIDIFIER, HEATED, USED WITH POSITIVE AIRWAY PRESSURE DEVICE
XOHANA	Q3 2025	DME Medical Supplies	E0565	HCPCS	COMPRESSOR, AIR POWER SOURCE FOR EQUIPMENT WHICH IS NOT SELF-CONTAINED OR CYLINDER DRIVEN
XOHANA	Q3 2025	DME Medical Supplies	E0570	HCPCS	NEBULIZER, WITH COMPRESSOR
XOHANA	Q3 2025	DME Medical Supplies	E0600	HCPCS	RESPIRATORY SUCTION PUMP, HOME MODEL, PORTABLE OR STATIONARY, ELECTRIC
XOHANA	Q3 2025	DME Medical Supplies	E0601	HCPCS	CONTINUOUS POSITIVE AIRWAY PRESSURE (CPAP) DEVICE
XOHANA	Q3 2025	DME Medical Supplies	E0603	HCPCS	BREAST PUMP, ELECTRIC (AC AND/OR DC), ANY TYPE
XOHANA	Q3 2025	DME Medical Supplies	E0621	HCPCS	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON
XOHANA	Q3 2025	DME Medical Supplies	E0630	HCPCS	PATIENT LIFT, HYDRAULIC OR MECHANICAL, INCLUDES ANY SEAT, SLING, STRAP(S), OR PAD(S)
XOHANA	Q3 2025	DME Medical Supplies	E0635	HCPCS	PATIENT LIFT, ELECTRIC, WITH SEAT OR SLING
XOHANA	Q3 2025	DME Medical Supplies	E0638	HCPCS	STANDING FRAME/TABLE SYSTEM, ONE POSITION (E.G., UPRIGHT, SUPINE OR PRONE STANDER), ANY SIZE INCLUDING PEDIATRIC
XOHANA	Q3 2025	DME Medical Supplies	E0651	HCPCS	PNEUMATIC COMPRESSOR, SEGMENTAL HOME MODEL WITHOUT CALIBRATED GRADIENT PRESSURE
XOHANA	Q3 2025	DME Medical Supplies	E0652	HCPCS	PNEUMATIC COMPRESSOR, SEGMENTAL HOME MODEL WITH CALIBRATED GRADIENT PRESSURE
XOHANA	Q3 2025	DME Medical Supplies	E0667	HCPCS	SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, FULL LEG
XOHANA	Q3 2025	DME Medical Supplies	E0668	HCPCS	SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, FULL ARM
XOHANA	Q3 2025	DME Medical Supplies	E0669	HCPCS	SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, HALF LEG
XOHANA	Q3 2025	DME Medical Supplies	E0670	HCPCS	SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, INTEGRATED, 2 FULL LEGS AND TRUNK
XOHANA	Q3 2025	DME Medical Supplies	E0693	HCPCS	ULTRAVIOLET LIGHT THERAPY SYSTEM PANEL, INCLUDES BULBS/LAMPS, TIMER AND EYE PROTECTION, 6 FT PANEL
XOHANA	Q3 2025	DME Medical Supplies	E0720	HCPCS	TRANSCUTANEOUS ELECTRICAL NERVE STIMULATION (TENS) DEVICE, 2 LEAD, LOCALIZED STIMULATION
XOHANA	Q3 2025	DME Medical Supplies	E0730	HCPCS	TRANSCUTANEOUS ELECTRICAL NERVE STIMULATION (TENS) DEVICE, 4 OR MORE LEADS, FOR MULTIPLE NERVE STIMULATION
XOHANA	Q3 2025	DME Medical Supplies	E0747	HCPCS	OSTEOGENESIS STIMULATOR, ELECTRICAL, NONINVASIVE, OTHER THAN SPINAL APPLICATIONS
XOHANA	Q3 2025	DME Medical Supplies	E0748	HCPCS	OSTEOGENESIS STIMULATOR, ELECTRICAL, NONINVASIVE, SPINAL APPLICATIONS
XOHANA	Q3 2025	DME Medical Supplies	E0760	HCPCS	OSTEOGENESIS STIMULATOR, LOW INTENSITY ULTRASOUND, NONINVASIVE
XOHANA	Q3 2025	DME Medical Supplies	E0766	HCPCS	ELECTRICAL STIMULATION DEVICE USED FOR CANCER TREATMENT, INCLUDES ALL ACCESSORIES, ANY TYPE
XOHANA	Q3 2025	DME Medical Supplies	E0776	HCPCS	IV POLE
XOHANA	Q3 2025	DME Medical Supplies	E0781	HCPCS	AMBULATORY INFUSION PUMP, SINGLE OR MULTIPLE CHANNELS, ELECTRIC OR BATTERY OPERATED, WITH ADMINISTRATIVE EQUIPMENT
XOHANA	Q3 2025	DME Medical Supplies	E0784	HCPCS	EXTERNAL AMBULATORY INFUSION PUMP, INSULIN
XOHANA	Q3 2025	DME Medical Supplies	E0856	HCPCS	CERVICAL TRACTION DEVICE, WITH INFLATABLE AIR BLADDER(S)
XOHANA	Q3 2025	DME Medical Supplies	E0910	HCPCS	TRAPEZE BARS, ALSO KNOWN AS PATIENT HELPER, ATTACHED TO BED, WITH GRAB BAR
XOHANA	Q3 2025	DME Medical Supplies	E0912	HCPCS	TRAPEZE BAR, HEAVY-DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS, FREESTANDING, COMPLETE WITH GRAB BAR
XOHANA	Q3 2025	DME Medical Supplies	E0940	HCPCS	TRAPEZE BAR, FREESTANDING, COMPLETE WITH GRAB BAR
XOHANA	Q3 2025	DME Medical Supplies	E0950	HCPCS	WHEELCHAIR ACCESSORY, TRAY, EACH
XOHANA	Q3 2025	DME Medical Supplies	E0952	HCPCS	TOE LOOP/HOLDER, ANY TYPE, EACH
XOHANA	Q3 2025	DME Medical Supplies	E0953	HCPCS	WHEELCHAIR ACCESSORY, LATERAL THIGH OR KNEE SUPPORT, ANY TYPE INCLUDING FIXED MOUNTING HARDWARE, EACH
XOHANA	Q3 2025	DME Medical Supplies	E0954	HCPCS	WHEELCHAIR ACCESSORY, FOOT BOX, ANY TYPE, INCLUDES ATTACHMENT AND MOUNTING HARDWARE, EACH FOOT
XOHANA	Q3 2025	DME Medical Supplies	E0955	HCPCS	WHEELCHAIR ACCESSORY, HEADREST, CUSHIONED, ANY TYPE, INCLUDING FIXED MOUNTING HARDWARE, EACH
XOHANA	Q3 2025	DME Medical Supplies	E0956	HCPCS	WHEELCHAIR ACCESSORY, LATERAL TRUNK OR HIP SUPPORT, ANY TYPE, INCLUDING FIXED MOUNTING HARDWARE, EACH
XOHANA	Q3 2025	DME Medical Supplies	E0957	HCPCS	WHEELCHAIR ACCESSORY, MEDIAL THIGH SUPPORT, ANY TYPE, INCLUDING FIXED MOUNTING HARDWARE, EACH
XOHANA	Q3 2025	DME Medical Supplies	E0958	HCPCS	MANUAL WHEELCHAIR ACCESSORY, ONE-ARM DRIVE ATTACHMENT, EACH
XOHANA	Q3 2025	DME Medical Supplies	E0959	HCPCS	MANUAL WHEELCHAIR ACCESSORY, ADAPTER FOR AMPUTEE, EACH
XOHANA	Q3 2025	DME Medical Supplies	E0961	HCPCS	MANUAL WHEELCHAIR ACCESSORY, WHEEL LOCK BRAKE EXTENSION (HANDLE), EACH
XOHANA	Q3 2025	DME Medical Supplies	E0966	HCPCS	MANUAL WHEELCHAIR ACCESSORY, HEADREST EXTENSION, EACH
XOHANA	Q3 2025	DME Medical Supplies	E0970	HCPCS	NO. 2 FOOTPLATES, EXCEPT FOR ELEVATING LEGREST
XOHANA	Q3 2025	DME Medical Supplies	E0971	HCPCS	MANUAL WHEELCHAIR ACCESSORY, ANTITIPPING DEVICE, EACH
XOHANA	Q3 2025	DME Medical Supplies	E0974	HCPCS	MANUAL WHEELCHAIR ACCESSORY, ANTIROLLBACK DEVICE, EACH
XOHANA	Q3 2025	DME Medical Supplies	E0981	HCPCS	WHEELCHAIR ACCESSORY, SEAT UPHOLSTERY, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	E0982	HCPCS	WHEELCHAIR ACCESSORY, BACK UPHOLSTERY, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	E0986	HCPCS	MANUAL WHEELCHAIR ACCESSORY, PUSH-RIM ACTIVATED POWER ASSIST SYSTEM
XOHANA	Q3 2025	DME Medical Supplies	E0990	HCPCS	WHEELCHAIR ACCESSORY, ELEVATING LEGREST, COMPLETE ASSEMBLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	E0992	HCPCS	MANUAL WHEELCHAIR ACCESSORY, SOLID SEAT INSERT
XOHANA	Q3 2025	DME Medical Supplies	E0995	HCPCS	WHEELCHAIR ACCESSORY, CALF REST/PAD, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	E1002	HCPCS	WHEELCHAIR ACCESSORY, POWER SEATING SYSTEM, TILT ONLY
XOHANA	Q3 2025	DME Medical Supplies	E1007	HCPCS	WHEELCHAIR ACCESSORY, POWER SEATING SYSTEM, COMBINATION TILT AND RECLINE, WITH MECHANICAL SHEAR REDUCTION

XOHANA	Q3 2025	DME Medical Supplies	E1010	HCPCS	WHEELCHAIR ACCESSORY, ADDITION TO POWER SEATING SYSTEM, POWER LEG ELEVATION SYSTEM, INCLUDING LEGREST, PAIR
XOHANA	Q3 2025	DME Medical Supplies	E1012	HCPCS	WHEELCHAIR ACCESSORY, ADDITION TO POWER SEATING SYSTEM, CENTER MOUNT POWER ELEVATING LEG REST/PLATFORM, COMPLETE SYSTEM
XOHANA	Q3 2025	DME Medical Supplies	E1014	HCPCS	RECLINING BACK, ADDITION TO PEDIATRIC SIZE WHEELCHAIR
XOHANA	Q3 2025	DME Medical Supplies	E1015	HCPCS	SHOCK ABSORBER FOR MANUAL WHEELCHAIR, EACH
XOHANA	Q3 2025	DME Medical Supplies	E1020	HCPCS	RESIDUAL LIMB SUPPORT SYSTEM FOR WHEELCHAIR, ANY TYPE
XOHANA	Q3 2025	DME Medical Supplies	E1028	HCPCS	WHEELCHAIR ACCESSORY, MANUAL SWINGAWAY, RETRACTABLE OR REMOVABLE MOUNTING HARDWARE FOR JOYSTICK, OTHER CONTROL INTERFACE
XOHANA	Q3 2025	DME Medical Supplies	E1031	HCPCS	ROLLABOUT CHAIR, ANY AND ALL TYPES WITH CASTORS 5 IN OR GREATER
XOHANA	Q3 2025	DME Medical Supplies	E1038	HCPCS	TRANSPORT CHAIR, ADULT SIZE, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
XOHANA	Q3 2025	DME Medical Supplies	E1070	HCPCS	FULLY-RECLINING WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL-LENGTH) SWING-AWAY DETACHABLE FOOTREST
XOHANA	Q3 2025	DME Medical Supplies	E1130	HCPCS	STANDARD WHEELCHAIR, FIXED FULL-LENGTH ARMS, FIXED OR SWING-AWAY DETACHABLE FOOTRESTS
XOHANA	Q3 2025	DME Medical Supplies	E1140	HCPCS	WHEELCHAIR, DETACHABLE ARMS, DESK OR FULL-LENGTH, SWING-AWAY DETACHABLE FOOTRESTS
XOHANA	Q3 2025	DME Medical Supplies	E1161	HCPCS	MANUAL ADULT SIZE WHEELCHAIR, INCLUDES TILT IN SPACE
XOHANA	Q3 2025	DME Medical Supplies	E1225	HCPCS	WHEELCHAIR ACCESSORY, MANUAL SEMI-RECLINING BACK, (RECLINE GREATER THAN 15 DEGREES, BUT LESS THAN 80 DEGREES), EACH
XOHANA	Q3 2025	DME Medical Supplies	E1226	HCPCS	WHEELCHAIR ACCESSORY, MANUAL FULLY RECLINING BACK, (RECLINE GREATER THAN 80 DEGREES), EACH
XOHANA	Q3 2025	DME Medical Supplies	E1232	HCPCS	WHEELCHAIR, PEDIATRIC SIZE, TILT-IN-SPACE, FOLDING, ADJUSTABLE, WITH SEATING SYSTEM
XOHANA	Q3 2025	DME Medical Supplies	E1233	HCPCS	WHEELCHAIR, PEDIATRIC SIZE, TILT-IN-SPACE, RIGID, ADJUSTABLE, WITHOUT SEATING SYSTEM
XOHANA	Q3 2025	DME Medical Supplies	E1234	HCPCS	WHEELCHAIR, PEDIATRIC SIZE, TILT-IN-SPACE, FOLDING, ADJUSTABLE, WITHOUT SEATING SYSTEM
XOHANA	Q3 2025	DME Medical Supplies	E1235	HCPCS	WHEELCHAIR, PEDIATRIC SIZE, RIGID, ADJUSTABLE, WITH SEATING SYSTEM
XOHANA	Q3 2025	DME Medical Supplies	E1236	HCPCS	WHEELCHAIR, PEDIATRIC SIZE, FOLDING, ADJUSTABLE, WITH SEATING SYSTEM
XOHANA	Q3 2025	DME Medical Supplies	E1238	HCPCS	WHEELCHAIR, PEDIATRIC SIZE, FOLDING, ADJUSTABLE, WITHOUT SEATING SYSTEM
XOHANA	Q3 2025	DME Medical Supplies	E1260	HCPCS	LIGHTWEIGHT WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL-LENGTH) SWING-AWAY DETACHABLE FOOTREST
XOHANA	Q3 2025	DME Medical Supplies	E1297	HCPCS	SPECIAL WHEELCHAIR SEAT DEPTH, BY UPHOLSTERY
XOHANA	Q3 2025	DME Medical Supplies	E1356	HCPCS	OXYGEN ACCESSORY, BATTERY PACK/CARTRIDGE FOR PORTABLE CONCENTRATOR, ANY TYPE, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	E1372	HCPCS	IMMERSION EXTERNAL HEATER FOR NEBULIZER
XOHANA	Q3 2025	DME Medical Supplies	E1390	HCPCS	OXYGEN CONCENTRATOR, SINGLE DELIVERY PORT, CAPABLE OF DELIVERING 85 PERCENT OR GREATER OXYGEN CONCENTRATION AT THE
XOHANA	Q3 2025	DME Medical Supplies	E1392	HCPCS	PORTABLE OXYGEN CONCENTRATOR, RENTAL
XOHANA	Q3 2025	DME Medical Supplies	E1399	HCPCS	DURABLE MEDICAL EQUIPMENT, MISCELLANEOUS
XOHANA	Q3 2025	DME Medical Supplies	E1810	HCPCS	DYNAMIC ADJUSTABLE KNEE EXTENSION/FLEXION DEVICE, INCLUDES SOFT INTERFACE MATERIAL
XOHANA	Q3 2025	DME Medical Supplies	E1815	HCPCS	DYNAMIC ADJUSTABLE ANKLE EXTENSION/FLEXION DEVICE, INCLUDES SOFT INTERFACE MATERIAL
XOHANA	Q3 2025	DME Medical Supplies	E2201	HCPCS	MANUAL WHEELCHAIR ACCESSORY, NONSTANDARD SEAT FRAME, WIDTH GREATER THAN OR EQUAL TO 20 IN AND LESS THAN 24 IN
XOHANA	Q3 2025	DME Medical Supplies	E2203	HCPCS	MANUAL WHEELCHAIR ACCESSORY, NONSTANDARD SEAT FRAME DEPTH, 20 TO LESS THAN 22 IN
XOHANA	Q3 2025	DME Medical Supplies	E2205	HCPCS	MANUAL WHEELCHAIR ACCESSORY, HANDRIM WITHOUT PROJECTIONS (INCLUDES ERGONOMIC OR CONTOURED), ANY TYPE, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2206	HCPCS	MANUAL WHEELCHAIR ACCESSORY, WHEEL LOCK ASSEMBLY, COMPLETE, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2207	HCPCS	WHEELCHAIR ACCESSORY, CRUTCH AND CANE HOLDER, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2209	HCPCS	ACCESSORY, ARM TROUGH, WITH OR WITHOUT HAND SUPPORT, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2210	HCPCS	WHEELCHAIR ACCESSORY, BEARINGS, ANY TYPE, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2212	HCPCS	MANUAL WHEELCHAIR ACCESSORY, TUBE FOR PNEUMATIC PROPULSION TIRE, ANY SIZE, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2214	HCPCS	MANUAL WHEELCHAIR ACCESSORY, PNEUMATIC CASTER TIRE, ANY SIZE, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2220	HCPCS	MANUAL WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) PROPULSION TIRE, ANY SIZE, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2221	HCPCS	MANUAL WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) CASTER TIRE (REMOVABLE), ANY SIZE, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2224	HCPCS	MANUAL WHEELCHAIR ACCESSORY, PROPULSION WHEEL EXCLUDES TIRE, ANY SIZE, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2225	HCPCS	MANUAL WHEELCHAIR ACCESSORY, CASTER WHEEL EXCLUDES TIRE, ANY SIZE, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2226	HCPCS	MANUAL WHEELCHAIR ACCESSORY, CASTER FORK, ANY SIZE, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2228	HCPCS	MANUAL WHEELCHAIR ACCESSORY, WHEEL BRAKING SYSTEM AND LOCK, COMPLETE, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2292	HCPCS	SEAT, PLANAR, FOR PEDIATRIC SIZE WHEELCHAIR INCLUDING FIXED ATTACHING HARDWARE
XOHANA	Q3 2025	DME Medical Supplies	E2293	HCPCS	BACK, CONTOURED, FOR PEDIATRIC SIZE WHEELCHAIR INCLUDING FIXED ATTACHING HARDWARE
XOHANA	Q3 2025	DME Medical Supplies	E2294	HCPCS	SEAT, CONTOURED, FOR PEDIATRIC SIZE WHEELCHAIR INCLUDING FIXED ATTACHING HARDWARE
XOHANA	Q3 2025	DME Medical Supplies	E2301	HCPCS	WHEELCHAIR ACCESSORY, POWER STANDING SYSTEM, ANY TYPE
XOHANA	Q3 2025	DME Medical Supplies	E2310	HCPCS	POWER WHEELCHAIR ACCESSORY, ELECTRONIC CONNECTION BETWEEN WHEELCHAIR CONTROLLER AND ONE POWER SEATING SYSTEM MOTOR
XOHANA	Q3 2025	DME Medical Supplies	E2311	HCPCS	POWER WHEELCHAIR ACCESSORY, ELECTRONIC CONNECTION BETWEEN WHEELCHAIR CONTROLLER AND 2 OR MORE POWER SEATING SYSTEM MOTORS
XOHANA	Q3 2025	DME Medical Supplies	E2312	HCPCS	POWER WHEELCHAIR ACCESSORY, HAND OR CHIN CONTROL INTERFACE, MINI-PROPORTIONAL REMOTE JOYSTICK, PROPORTIONAL, INCLUDING
XOHANA	Q3 2025	DME Medical Supplies	E2313	HCPCS	POWER WHEELCHAIR ACCESSORY, HARNESS FOR UPGRADE TO EXPANDABLE CONTROLLER, INCLUDING ALL FASTENERS, CONNECTORS AND MOUNTING
XOHANA	Q3 2025	DME Medical Supplies	E2323	HCPCS	POWER WHEELCHAIR ACCESSORY, SPECIALTY JOYSTICK HANDLE FOR HAND CONTROL INTERFACE, PREFABRICATED
XOHANA	Q3 2025	DME Medical Supplies	E2330	HCPCS	POWER WHEELCHAIR ACCESSORY, HEAD CONTROL INTERFACE, PROXIMITY SWITCH MECHANISM, NONPROPORTIONAL, INCLUDING ALL RELATED
XOHANA	Q3 2025	DME Medical Supplies	E2331	HCPCS	POWER WHEELCHAIR ACCESSORY, ATTENDANT CONTROL, PROPORTIONAL, INCLUDING ALL RELATED ELECTRONICS AND FIXED MOUNTING HARDWARE
XOHANA	Q3 2025	DME Medical Supplies	E2359	HCPCS	POWER WHEELCHAIR ACCESSORY, GROUP 34 SEALED LEAD ACID BATTERY, EACH (E.G., GEL CELL, ABSORBED GLASS MAT)
XOHANA	Q3 2025	DME Medical Supplies	E2361	HCPCS	POWER WHEELCHAIR ACCESSORY, 22 NF SEALED LEAD ACID BATTERY, EACH (E.G., GEL CELL, ABSORBED GLASSMAT)
XOHANA	Q3 2025	DME Medical Supplies	E2363	HCPCS	POWER WHEELCHAIR ACCESSORY, GROUP 24 SEALED LEAD ACID BATTERY, EACH (E.G., GEL CELL, ABSORBED GLASSMAT)
XOHANA	Q3 2025	DME Medical Supplies	E2365	HCPCS	POWER WHEELCHAIR ACCESSORY, U-1 SEALED LEAD ACID BATTERY, EACH (E.G., GEL CELL, ABSORBED GLASSMAT)
XOHANA	Q3 2025	DME Medical Supplies	E2366	HCPCS	POWER WHEELCHAIR ACCESSORY, BATTERY CHARGER, SINGLE MODE, FOR USE WITH ONLY ONE BATTERY TYPE, SEALED OR NONSEALED, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2367	HCPCS	POWER WHEELCHAIR ACCESSORY, BATTERY CHARGER, DUAL MODE, FOR USE WITH EITHER BATTERY TYPE, SEALED OR NONSEALED, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2370	HCPCS	POWER WHEELCHAIR COMPONENT, INTEGRATED DRIVE WHEEL MOTOR AND GEAR BOX COMBINATION, REPLACEMENT ONLY
XOHANA	Q3 2025	DME Medical Supplies	E2374	HCPCS	POWER WHEELCHAIR ACCESSORY, HAND OR CHIN CONTROL INTERFACE, STANDARD REMOTE JOYSTICK (NOT INCLUDING CONTROLLER)
XOHANA	Q3 2025	DME Medical Supplies	E2375	HCPCS	POWER WHEELCHAIR ACCESSORY, NONEXPANDABLE CONTROLLER, INCLUDING ALL RELATED ELECTRONICS AND MOUNTING HARDWARE, REPLACEMENT ONLY
XOHANA	Q3 2025	DME Medical Supplies	E2376	HCPCS	POWER WHEELCHAIR ACCESSORY, EXPANDABLE CONTROLLER, INCLUDING ALL RELATED ELECTRONICS AND MOUNTING HARDWARE, REPLACEMENT ONLY
XOHANA	Q3 2025	DME Medical Supplies	E2377	HCPCS	POWER WHEELCHAIR ACCESSORY, EXPANDABLE CONTROLLER, INCLUDING ALL RELATED ELECTRONICS AND MOUNTING HARDWARE, UPGRADE
XOHANA	Q3 2025	DME Medical Supplies	E2378	HCPCS	POWER WHEELCHAIR COMPONENT, ACTUATOR, REPLACEMENT ONLY
XOHANA	Q3 2025	DME Medical Supplies	E2381	HCPCS	POWER WHEELCHAIR ACCESSORY, PNEUMATIC DRIVE WHEEL TIRE, ANY SIZE, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2383	HCPCS	POWER WHEELCHAIR ACCESSORY, INSERT FOR PNEUMATIC DRIVE WHEEL TIRE (REMOVABLE), ANY TYPE, ANY SIZE, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2386	HCPCS	POWER WHEELCHAIR ACCESSORY, FOAM FILLED DRIVE WHEEL TIRE, ANY SIZE, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2387	HCPCS	POWER WHEELCHAIR ACCESSORY, FOAM FILLED CASTER TIRE, ANY SIZE, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2388	HCPCS	POWER WHEELCHAIR ACCESSORY, FOAM DRIVE WHEEL TIRE, ANY SIZE, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2389	HCPCS	POWER WHEELCHAIR ACCESSORY, FOAM CASTER TIRE, ANY SIZE, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2391	HCPCS	POWER WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) CASTER TIRE (REMOVABLE), ANY SIZE, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2392	HCPCS	POWER WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) CASTER TIRE WITH INTEGRATED WHEEL, ANY SIZE, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2394	HCPCS	POWER WHEELCHAIR ACCESSORY, DRIVE WHEEL EXCLUDES TIRE, ANY SIZE, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2395	HCPCS	POWER WHEELCHAIR ACCESSORY, CASTER WHEEL EXCLUDES TIRE, ANY SIZE, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2396	HCPCS	POWER WHEELCHAIR ACCESSORY, CASTER FORK, ANY SIZE, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2402	HCPCS	NEGATIVE PRESSURE WOUND THERAPY ELECTRICAL PUMP, STATIONARY OR PORTABLE
XOHANA	Q3 2025	DME Medical Supplies	E2510	HCPCS	SPEECH GENERATING DEVICE, SYNTHESIZED SPEECH, PERMITTING MULTIPLE METHODS OF MESSAGE FORMULATION AND MULTIPLE METHODS
XOHANA	Q3 2025	DME Medical Supplies	E2512	HCPCS	ACCESSORY FOR SPEECH GENERATING DEVICE, MOUNTING SYSTEM
XOHANA	Q3 2025	DME Medical Supplies	E2599	HCPCS	ACCESSORY FOR SPEECH GENERATING DEVICE, NOT OTHERWISE CLASSIFIED
XOHANA	Q3 2025	DME Medical Supplies	E2601	HCPCS	GENERAL USE WHEELCHAIR SEAT CUSHION, WIDTH LESS THAN 22 IN, ANY DEPTH
XOHANA	Q3 2025	DME Medical Supplies	E2602	HCPCS	GENERAL USE WHEELCHAIR SEAT CUSHION, WIDTH 22 IN OR GREATER, ANY DEPTH
XOHANA	Q3 2025	DME Medical Supplies	E2603	HCPCS	SKIN PROTECTION WHEELCHAIR SEAT CUSHION, WIDTH LESS THAN 22 IN, ANY DEPTH
XOHANA	Q3 2025	DME Medical Supplies	E2605	HCPCS	POSITIONING WHEELCHAIR SEAT CUSHION, WIDTH LESS THAN 22 IN, ANY DEPTH
XOHANA	Q3 2025	DME Medical Supplies	E2607	HCPCS	SKIN PROTECTION AND POSITIONING WHEELCHAIR SEAT CUSHION, WIDTH LESS THAN 22 IN, ANY DEPTH
XOHANA	Q3 2025	DME Medical Supplies	E2608	HCPCS	SKIN PROTECTION AND POSITIONING WHEELCHAIR SEAT CUSHION, WIDTH 22 IN OR GREATER, ANY DEPTH
XOHANA	Q3 2025	DME Medical Supplies	E2609	HCPCS	CUSTOM FABRICATED WHEELCHAIR SEAT CUSHION, ANY SIZE
XOHANA	Q3 2025	DME Medical Supplies	E2611	HCPCS	GENERAL USE WHEELCHAIR BACK CUSHION, WIDTH LESS THAN 22 IN, ANY HEIGHT, INCLUDING ANY TYPE MOUNTING HARDWARE
XOHANA	Q3 2025	DME Medical Supplies	E2612	HCPCS	GENERAL USE WHEELCHAIR BACK CUSHION, WIDTH 22 IN OR GREATER, ANY HEIGHT, INCLUDING ANY TYPE MOUNTING HARDWARE
XOHANA	Q3 2025	DME Medical Supplies	E2615	HCPCS	POSITIONING WHEELCHAIR BACK CUSHION, POSTERIOR-LATERAL, WIDTH LESS THAN 22 IN, ANY HEIGHT, INCLUDING ANY TYPE MOUNTING HARDWARE
XOHANA	Q3 2025	DME Medical Supplies	E2617	HCPCS	CUSTOM FABRICATED WHEELCHAIR BACK CUSHION, ANY SIZE, INCLUDING ANY TYPE MOUNTING HARDWARE
XOHANA	Q3 2025	DME Medical Supplies	E2619	HCPCS	REPLACEMENT COVER FOR WHEELCHAIR SEAT CUSHION OR BACK CUSHION, EACH
XOHANA	Q3 2025	DME Medical Supplies	E2621	HCPCS	POSITIONING WHEELCHAIR BACK CUSHION, PLANAR BACK WITH LATERAL SUPPORTS, WIDTH 22 IN OR GREATER, ANY HEIGHT, INCLUDING
XOHANA	Q3 2025	DME Medical Supplies	E2622	HCPCS	SKIN PROTECTION WHEELCHAIR SEAT CUSHION, ADJUSTABLE, WIDTH LESS THAN 22 IN, ANY DEPTH
XOHANA	Q3 2025	DME Medical Supplies	E2623	HCPCS	SKIN PROTECTION WHEELCHAIR SEAT CUSHION, ADJUSTABLE, WIDTH 22 IN OR GREATER, ANY DEPTH
XOHANA	Q3 2025	DME Medical Supplies	E2625	HCPCS	SKIN PROTECTION AND POSITIONING WHEELCHAIR SEAT CUSHION, ADJUSTABLE, WIDTH 22 IN OR GREATER, ANY DEPTH

XOHANA	Q3 2025	DME Medical Supplies	J3490	HCPCS	UNCLASSIFIED DRUGS
XOHANA	Q3 2025	DME Medical Supplies	K0001	HCPCS	STANDARD WHEELCHAIR
XOHANA	Q3 2025	DME Medical Supplies	K0002	HCPCS	STANDARD HEMI (LOW SEAT) WHEELCHAIR
XOHANA	Q3 2025	DME Medical Supplies	K0003	HCPCS	LIGHTWEIGHT WHEELCHAIR
XOHANA	Q3 2025	DME Medical Supplies	K0004	HCPCS	HIGH STRENGTH, LIGHTWEIGHT WHEELCHAIR
XOHANA	Q3 2025	DME Medical Supplies	K0005	HCPCS	ULTRALIGHTWEIGHT WHEELCHAIR
XOHANA	Q3 2025	DME Medical Supplies	K0006	HCPCS	HEAVY-DUTY WHEELCHAIR
XOHANA	Q3 2025	DME Medical Supplies	K0007	HCPCS	EXTRA HEAVY-DUTY WHEELCHAIR
XOHANA	Q3 2025	DME Medical Supplies	K0015	HCPCS	DETACHABLE, NONADJUSTABLE HEIGHT ARMREST, EACH
XOHANA	Q3 2025	DME Medical Supplies	K0017	HCPCS	DETACHABLE, ADJUSTABLE HEIGHT ARMREST, BASE, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	K0019	HCPCS	ARM PAD, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	K0040	HCPCS	ADJUSTABLE ANGLE FOOTPLATE, EACH
XOHANA	Q3 2025	DME Medical Supplies	K0042	HCPCS	STANDARD SIZE FOOTPLATE, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	K0043	HCPCS	FOOTREST, LOWER EXTENSION TUBE, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	K0044	HCPCS	FOOTREST, UPPER HANGER BRACKET, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	K0045	HCPCS	FOOTREST, COMPLETE ASSEMBLY, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	K0047	HCPCS	ELEVATING LEGREST, UPPER HANGER BRACKET, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	K0052	HCPCS	SWINGAWAY, DETACHABLE FOOTRESTS, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	K0053	HCPCS	ELEVATING FOOTRESTS, ARTICULATING (TELESCOPING), EACH
XOHANA	Q3 2025	DME Medical Supplies	K0056	HCPCS	SEAT HEIGHT LESS THAN 17 IN OR EQUAL TO OR GREATER THAN 21 IN FOR A HIGH-STRENGTH, LIGHTWEIGHT, OR ULTRALIGHTWEIGHT WHEELCHAIR
XOHANA	Q3 2025	DME Medical Supplies	K0065	HCPCS	SPOKE PROTECTORS, EACH
XOHANA	Q3 2025	DME Medical Supplies	K0070	HCPCS	REAR WHEEL ASSEMBLY, COMPLETE, WITH PNEUMATIC TIRE, SPOKES OR MOLDED, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	K0077	HCPCS	FRONT CASTER ASSEMBLY, COMPLETE, WITH SOLID TIRE, REPLACEMENT ONLY, EACH
XOHANA	Q3 2025	DME Medical Supplies	K0108	HCPCS	WHEELCHAIR COMPONENT OR ACCESSORY, NOT OTHERWISE SPECIFIED
XOHANA	Q3 2025	DME Medical Supplies	K0195	HCPCS	ELEVATING LEGRESTS, PAIR (FOR USE WITH CAPPED RENTAL WHEELCHAIR BASE)
XOHANA	Q3 2025	DME Medical Supplies	K0462	HCPCS	TEMPORARY REPLACEMENT FOR PATIENT-OWNED EQUIPMENT BEING REPAIRED, ANY TYPE
XOHANA	Q3 2025	DME Medical Supplies	K0606	HCPCS	AUTOMATIC EXTERNAL DEFIBRILLATOR, WITH INTEGRATED ELECTROCARDIOGRAM ANALYSIS, GARMENT TYPE
XOHANA	Q3 2025	DME Medical Supplies	K0669	HCPCS	WHEELCHAIR ACCESSORY, WHEELCHAIR SEAT OR BACK CUSHION, DOES NOT MEET SPECIFIC CODE CRITERIA OR NO WRITTEN CODING VERIFICATION
XOHANA	Q3 2025	DME Medical Supplies	K0733	HCPCS	POWER WHEELCHAIR ACCESSORY, 12 TO 24 AMP HOUR SEALED LEAD ACID BATTERY, EACH (E.G., GEL CELL, ABSORBED GLASSMAT)
XOHANA	Q3 2025	DME Medical Supplies	K0738	HCPCS	PORTABLE GASEOUS OXYGEN SYSTEM, RENTAL; HOME COMPRESSOR USED TO FILL PORTABLE OXYGEN CYLINDERS; INCLUDES PORTABLE CONTAINERS
XOHANA	Q3 2025	DME Medical Supplies	K0739	HCPCS	REPAIR OR NONROUTINE SERVICE FOR DURABLE MEDICAL EQUIPMENT OTHER THAN OXYGEN EQUIPMENT REQUIRING THE SKILL OF A TECHNICIAN
XOHANA	Q3 2025	DME Medical Supplies	K0800	HCPCS	POWER OPERATED VEHICLE, GROUP 1 STANDARD, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
XOHANA	Q3 2025	DME Medical Supplies	K0801	HCPCS	POWER OPERATED VEHICLE, GROUP 1 HEAVY-DUTY, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
XOHANA	Q3 2025	DME Medical Supplies	K0802	HCPCS	POWER OPERATED VEHICLE, GROUP 1 VERY HEAVY-DUTY, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS
XOHANA	Q3 2025	DME Medical Supplies	K0813	HCPCS	POWER WHEELCHAIR, GROUP 1 STANDARD, PORTABLE, SLING/SOLID SEAT AND BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
XOHANA	Q3 2025	DME Medical Supplies	K0822	HCPCS	POWER WHEELCHAIR, GROUP 2 STANDARD, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
XOHANA	Q3 2025	DME Medical Supplies	K0823	HCPCS	POWER WHEELCHAIR, GROUP 2 STANDARD, CAPTAIN'S CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
XOHANA	Q3 2025	DME Medical Supplies	K0825	HCPCS	POWER WHEELCHAIR, GROUP 2 HEAVY-DUTY, CAPTAIN'S CHAIR, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
XOHANA	Q3 2025	DME Medical Supplies	K0827	HCPCS	POWER WHEELCHAIR, GROUP 2 VERY HEAVY-DUTY, CAPTAIN'S CHAIR, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS
XOHANA	Q3 2025	DME Medical Supplies	K0848	HCPCS	POWER WHEELCHAIR, GROUP 3 STANDARD, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
XOHANA	Q3 2025	DME Medical Supplies	K0849	HCPCS	POWER WHEELCHAIR, GROUP 3 STANDARD, CAPTAIN'S CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
XOHANA	Q3 2025	DME Medical Supplies	K0852	HCPCS	POWER WHEELCHAIR, GROUP 3 VERY HEAVY-DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS
XOHANA	Q3 2025	DME Medical Supplies	K0856	HCPCS	POWER WHEELCHAIR, GROUP 3 STANDARD, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING
XOHANA	Q3 2025	DME Medical Supplies	K0861	HCPCS	POWER WHEELCHAIR, GROUP 3 STANDARD, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND
XOHANA	Q3 2025	DME Medical Supplies	K0862	HCPCS	POWER WHEELCHAIR, GROUP 3 HEAVY-DUTY, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
XOHANA	Q3 2025	DME Medical Supplies	K0899	HCPCS	POWER MOBILITY DEVICE, NOT CODED BY DME PDAC OR DOES NOT MEET CRITERIA
XOHANA	Q3 2025	DME Medical Supplies	K1036	HCPCS	SUPPLIES & ACCESSORIES LOW FREQ US DIA TX DVC PM
XOHANA	Q3 2025	DME Medical Supplies	L0120	HCPCS	CERVICAL, FLEXIBLE, NONADJUSTABLE, PREFABRICATED, OFF-THE-SHELF (FOAM COLLAR)
XOHANA	Q3 2025	DME Medical Supplies	L0174	HCPCS	CERVICAL, COLLAR, SEMI-RIGID, THERMOPLASTIC FOAM, TWO PIECE WITH THORACIC EXTENSION, PREFABRICATED, OFF-THE-SHELF
XOHANA	Q3 2025	DME Medical Supplies	L0460	HCPCS	TLSO, TRIPLANAR CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, TWO RIGID PLASTIC SHELLS, POSTERIOR EXTENDS FROM THE SACROCOCCYGEAL
XOHANA	Q3 2025	DME Medical Supplies	L0464	HCPCS	THORACIC-LUMBAR-SACRAL ORTHOTIC (TLSO), TRIPLANAR CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, 4 RIGID PLASTIC SHELLS
XOHANA	Q3 2025	DME Medical Supplies	L0472	HCPCS	THORACIC-LUMBAR-SACRAL ORTHOTIC (TLSO), TRIPLANAR CONTROL, HYPEREXTENSION, RIGID ANTERIOR AND LATERAL FRAME EXTENDS
XOHANA	Q3 2025	DME Medical Supplies	L0482	HCPCS	THORACIC-LUMBAR-SACRAL ORTHOTIC (TLSO), TRIPLANAR CONTROL, 1 PIECE RIGID PLASTIC SHELL W INTERFACE LINER, MULTIPLE
XOHANA	Q3 2025	DME Medical Supplies	L0486	HCPCS	THORACIC-LUMBAR-SACRAL ORTHOTIC (TLSO), TRIPLANAR CONTROL, 2 PIECE RIGID PLASTIC SHELL W INTERFACE LINER, MULTIPLE
XOHANA	Q3 2025	DME Medical Supplies	L0624	HCPCS	SACROILIAC ORTHOTIC, PROVIDES PELVIC-SACRAL SUPPORT, WITH RIGID OR SEMI-RIGID PANELS PLACED OVER THE SACRUM AND ABDOMEN
XOHANA	Q3 2025	DME Medical Supplies	L0627	HCPCS	LUMBAR ORTHOSIS, SAGITTAL CONTROL, W RIGID ANTERIOR AND POSTERIOR PANELS, POSTERIOR EXTENDS FROM L-1 TO BELOW L-5 VERTEBRA
XOHANA	Q3 2025	DME Medical Supplies	L0631	HCPCS	LUMBAR-SACRAL ORTHOSIS, SAGITTAL CONTROL, W RIGID ANTERIOR AND POSTERIOR PANELS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL
XOHANA	Q3 2025	DME Medical Supplies	L0637	HCPCS	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR FRAME/PANELS, POSTERIOR EXTENDS
XOHANA	Q3 2025	DME Medical Supplies	L0648	HCPCS	LUMBAR-SACRAL ORTHOSIS, SAGITTAL CONTROL, W RIGID ANTERIOR AND POSTERIOR PANELS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL
XOHANA	Q3 2025	DME Medical Supplies	L0650	HCPCS	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR FRAME/PANEL(S), POSTERIOR EXTENDS
XOHANA	Q3 2025	DME Medical Supplies	L0984	HCPCS	PROTECTIVE BODY SOCK, PREFABRICATED, OFF-THE-SHELF, EACH
XOHANA	Q3 2025	DME Medical Supplies	L1060	HCPCS	ADDITION TO CERVICAL-THORACIC-LUMBAR-SACRAL ORTHOTIC (CTLSO) OR SCOLIOSIS ORTHOTIC, THORACIC PAD
XOHANA	Q3 2025	DME Medical Supplies	L1200	HCPCS	THORACIC-LUMBAR-SACRAL ORTHOTIC (TLSO), INCLUSIVE OF FURNISHING INITIAL ORTHOTIC ONLY
XOHANA	Q3 2025	DME Medical Supplies	L1210	HCPCS	ADDITION TO THORACIC-LUMBAR-SACRAL ORTHOTIC (TLSO), (LOW PROFILE), LATERAL THORACIC EXTENSION
XOHANA	Q3 2025	DME Medical Supplies	L1240	HCPCS	ADDITION TO THORACIC-LUMBAR-SACRAL ORTHOTIC (TLSO), (LOW PROFILE), LUMBAR DEROTATION PAD
XOHANA	Q3 2025	DME Medical Supplies	L1260	HCPCS	ADDITION TO THORACIC-LUMBAR-SACRAL ORTHOTIC (TLSO), (LOW PROFILE), ANTERIOR THORACIC DEROTATION PAD
XOHANA	Q3 2025	DME Medical Supplies	L1290	HCPCS	ADDITION TO THORACIC-LUMBAR-SACRAL ORTHOTIC (TLSO), (LOW PROFILE), LATERAL TROCHANTERIC PAD
XOHANA	Q3 2025	DME Medical Supplies	L1300	HCPCS	OTHER SCOLIOSIS PROCEDURE, BODY JACKET MOLDED TO PATIENT MODEL
XOHANA	Q3 2025	DME Medical Supplies	L1499	HCPCS	SPINAL ORTHOTIC, NOT OTHERWISE SPECIFIED
XOHANA	Q3 2025	DME Medical Supplies	L1660	HCPCS	HIP ORTHOTIC (HO), ABDUCTION CONTROL OF HIP JOINTS, STATIC, PLASTIC, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT
XOHANA	Q3 2025	DME Medical Supplies	L1681	HCPCS	HO BIL HIP JTS & TH CUFFS ADJ FLEX CTRL HIP JNT
XOHANA	Q3 2025	DME Medical Supplies	L1686	HCPCS	HIP ORTHOTIC (HO), ABDUCTION CONTROL OF HIP JOINT, POSTOPERATIVE HIP ABDUCTION TYPE, PREFAB, INCLUDES FITTING AND ADJUSTMENT
XOHANA	Q3 2025	DME Medical Supplies	L1810	HCPCS	KNEE ORTHOSIS, ELASTIC WITH JOINTS, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE
XOHANA	Q3 2025	DME Medical Supplies	L1820	HCPCS	KNEE ORTHOTIC, ELASTIC WITH CONDYLAR PADS AND JOINTS, WITH OR WITHOUT PATELLAR CONTROL, PREFABRICATED, INCLUDES FITTING
XOHANA	Q3 2025	DME Medical Supplies	L1830	HCPCS	KNEE ORTHOSIS, IMMOBILIZER, CANVAS LONGITUDINAL, PREFABRICATED, OFF-THE-SHELF
XOHANA	Q3 2025	DME Medical Supplies	L1832	HCPCS	KNEE ORTHOSIS, ADJUSTABLE KNEE JOINTS (UNICENTRIC OR POLYCENTRIC), POSITIONAL ORTHOSIS, RIGID SUPPORT, PREFAB ITEM
XOHANA	Q3 2025	DME Medical Supplies	L1833	HCPCS	KNEE ORTHOSIS, ADJUSTABLE KNEE JOINTS (UNICENTRIC OR POLYCENTRIC), POSITIONAL ORTHOSIS, RIGID SUPPORT, PREFAB, OFF-THE SHELF
XOHANA	Q3 2025	DME Medical Supplies	L1834	HCPCS	KNEE ORTHOTIC (KO), WITHOUT KNEE JOINT, RIGID, CUSTOM FABRICATED
XOHANA	Q3 2025	DME Medical Supplies	L1843	HCPCS	KNEE ORTHOSIS, SINGLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC)
XOHANA	Q3 2025	DME Medical Supplies	L1844	HCPCS	KNEE ORTHOTIC (KO), SINGLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC)
XOHANA	Q3 2025	DME Medical Supplies	L1845	HCPCS	KNEE ORTHOSIS, DOUBLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC)
XOHANA	Q3 2025	DME Medical Supplies	L1846	HCPCS	KNEE ORTHOTIC, DOUBLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC)
XOHANA	Q3 2025	DME Medical Supplies	L1851	HCPCS	KNEE ORTHOSIS (KO), SINGLE UPRIGHT, THIGH AND CALF, W ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC)
XOHANA	Q3 2025	DME Medical Supplies	L1852	HCPCS	KNEE ORTHOSIS (KO), DOUBLE UPRIGHT, THIGH AND CALF, W ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC)
XOHANA	Q3 2025	DME Medical Supplies	L1860	HCPCS	KNEE ORTHOTIC (KO), MODIFICATION OF SUPRACONDYLAR PROSTHETIC SOCKET, CUSTOM FABRICATED (SK)
XOHANA	Q3 2025	DME Medical Supplies	L1902	HCPCS	ANKLE ORTHOSIS, ANKLE GAUNTLET OR SIMILAR, WITH OR WITHOUT JOINTS, PREFABRICATED, OFF-THE-SHELF
XOHANA	Q3 2025	DME Medical Supplies	L1906	HCPCS	ANKLE FOOT ORTHOSIS, MULTILIGAMENTOUS ANKLE SUPPORT, PREFABRICATED, OFF-THE-SHELF
XOHANA	Q3 2025	DME Medical Supplies	L1907	HCPCS	ANKLE ORTHOSIS, SUPRAMALLEOLAR WITH STRAPS, WITH OR WITHOUT INTERFACE/PADS, CUSTOM FABRICATED
XOHANA	Q3 2025	DME Medical Supplies	L1920	HCPCS	ANKLE-FOOT ORTHOTIC (AFO), SINGLE UPRIGHT WITH STATIC OR ADJUSTABLE STOP (PHELPS OR PERLSTEIN TYPE), CUSTOM FABRICATED
XOHANA	Q3 2025	DME Medical Supplies	L1930	HCPCS	ANKLE-FOOT ORTHOTIC (AFO), PLASTIC OR OTHER MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT
XOHANA	Q3 2025	DME Medical Supplies	L1932	HCPCS	ANKLE-FOOT ORTHOTIC (AFO), RIGID ANTERIOR TIBIAL SECTION, TOTAL CARBON FIBER OR EQUAL MATERIAL, PREFAB, INCLUDES FITTING
XOHANA	Q3 2025	DME Medical Supplies	L1940	HCPCS	ANKLE-FOOT ORTHOTIC (AFO), PLASTIC OR OTHER MATERIAL, CUSTOM FABRICATED
XOHANA	Q3 2025	DME Medical Supplies	L1950	HCPCS	ANKLE-FOOT ORTHOTIC (AFO), SPIRAL, (INSTITUTE OF REHABILITATIVE MEDICINE TYPE), PLASTIC, CUSTOM FABRICATED
XOHANA	Q3 2025	DME Medical Supplies	L1951	HCPCS	ANKLE-FOOT ORTHOTIC (AFO), SPIRAL, (INSTITUTE OF REHABILITATIVE MEDICINE TYPE), PLASTIC OR OTH MATERIAL, PREFAB
XOHANA	Q3 2025	DME Medical Supplies	L1960	HCPCS	ANKLE-FOOT ORTHOTIC (AFO), POSTERIOR SOLID ANKLE, PLASTIC, CUSTOM FABRICATED
XOHANA	Q3 2025	DME Medical Supplies	L1970	HCPCS	ANKLE-FOOT ORTHOTIC (AFO), PLASTIC WITH ANKLE JOINT, CUSTOM FABRICATED
XOHANA	Q3 2025	DME Medical Supplies	L1971	HCPCS	ANKLE-FOOT ORTHOTIC (AFO), PLASTIC OR OTHER MATERIAL WITH ANKLE JOINT, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT
XOHANA	Q3 2025	DME Medical Supplies	L2036	HCPCS	KNEE-ANKLE-FOOT ORTHOTIC (KAFO), FULL PLASTIC, DOUBLE UPRIGHT, W OR WOUT FREE MOTION KNEE, W OR WOUT FREE MOTION ANKLE, CUST FAB

XOHANA	Q3 2025	DME Medical Supplies	L2200	HCPCS	ADDITION TO LOWER EXTREMITY, LIMITED ANKLE MOTION, EACH JOINT
XOHANA	Q3 2025	DME Medical Supplies	L2210	HCPCS	ADDITION TO LOWER EXTREMITY, DORSIFLEXION ASSIST (PLANTAR FLEXION RESIST), EACH JOINT
XOHANA	Q3 2025	DME Medical Supplies	L2220	HCPCS	ADDITION TO LOWER EXTREMITY, DORSIFLEXION AND PLANTAR FLEXION ASSIST/RESIST, EACH JOINT
XOHANA	Q3 2025	DME Medical Supplies	L2232	HCPCS	ADDITION TO LOWER EXTREMITY ORTHOTIC, ROCKER BOTTOM FOR TOTAL CONTACT ANKLE-FOOT ORTHOTIC (AFO), FOR CUSTOM FABRICATED
XOHANA	Q3 2025	DME Medical Supplies	L2250	HCPCS	ADDITION TO LOWER EXTREMITY, FOOT PLATE, MOLDED TO PATIENT MODEL, STIRRUP ATTACHMENT
XOHANA	Q3 2025	DME Medical Supplies	L2280	HCPCS	ADDITION TO LOWER EXTREMITY, MOLDED INNER BOOT
XOHANA	Q3 2025	DME Medical Supplies	L2300	HCPCS	ADDITION TO LOWER EXTREMITY, ABDUCTION BAR (BILATERAL HIP INVOLVEMENT), JOINTED, ADJUSTABLE
XOHANA	Q3 2025	DME Medical Supplies	L2330	HCPCS	ADDITION TO LOWER EXTREMITY, LACER MOLDED TO PATIENT MODEL, FOR CUSTOM FABRICATED ORTHOTIC ONLY
XOHANA	Q3 2025	DME Medical Supplies	L2340	HCPCS	ADDITION TO LOWER EXTREMITY, PRETIBIAL SHELL, MOLDED TO PATIENT MODEL
XOHANA	Q3 2025	DME Medical Supplies	L2350	HCPCS	ADDITION TO LOWER EXTREMITY, PROSTHETIC TYPE, (BK) SOCKET, MOLDED TO PATIENT MODEL, (USED FOR PTB, AFO ORTHOSES)
XOHANA	Q3 2025	DME Medical Supplies	L2397	HCPCS	ADDITION TO LOWER EXTREMITY ORTHOTIC, SUSPENSION SLEEVE
XOHANA	Q3 2025	DME Medical Supplies	L2405	HCPCS	ADDITION TO KNEE JOINT, DROP LOCK, EACH
XOHANA	Q3 2025	DME Medical Supplies	L2525	HCPCS	ADDITION TO LOWER EXTREMITY, THIGH/WEIGHT BEARING, ISCHIAL CONTAINMENT/NARROW M-L BRIM MOLDED TO PATIENT MODEL
XOHANA	Q3 2025	DME Medical Supplies	L2750	HCPCS	ADDITION TO LOWER EXTREMITY ORTHOTIC, PLATING CHROME OR NICKEL, PER BAR
XOHANA	Q3 2025	DME Medical Supplies	L2755	HCPCS	ADDITION TO LOWER EXTREMITY ORTHOTIC, HIGH STRENGTH, LIGHTWEIGHT MATERIAL, ALL HYBRID LAMINATION/PREPREG COMPOSITE
XOHANA	Q3 2025	DME Medical Supplies	L2768	HCPCS	ORTHOTIC SIDE BAR DISCONNECT DEVICE, PER BAR
XOHANA	Q3 2025	DME Medical Supplies	L2785	HCPCS	ADDITION TO LOWER EXTREMITY ORTHOTIC, DROP LOCK RETAINER, EACH
XOHANA	Q3 2025	DME Medical Supplies	L2810	HCPCS	ADDITION TO LOWER EXTREMITY ORTHOTIC, KNEE CONTROL, CONDYLAR PAD
XOHANA	Q3 2025	DME Medical Supplies	L2820	HCPCS	ADDITION TO LOWER EXTREMITY ORTHOTIC, SOFT INTERFACE FOR MOLDED PLASTIC, BELOW KNEE SECTION
XOHANA	Q3 2025	DME Medical Supplies	L2830	HCPCS	ADDITION TO LOWER EXTREMITY ORTHOTIC, SOFT INTERFACE FOR MOLDED PLASTIC, ABOVE KNEE SECTION
XOHANA	Q3 2025	DME Medical Supplies	L2840	HCPCS	ADDITION TO LOWER EXTREMITY ORTHOTIC, TIBIAL LENGTH SOCK, FRACTURE OR EQUAL, EACH
XOHANA	Q3 2025	DME Medical Supplies	L2850	HCPCS	ADDITION TO LOWER EXTREMITY ORTHOTIC, FEMORAL LENGTH SOCK, FRACTURE OR EQUAL, EACH
XOHANA	Q3 2025	DME Medical Supplies	L2999	HCPCS	LOWER EXTREMITY ORTHOTIC, NOT OTHERWISE SPECIFIED
XOHANA	Q3 2025	DME Medical Supplies	L3000	HCPCS	FOOT, INSERT, REMOVABLE, MOLDED TO PATIENT MODEL, 'UCB' TYPE, BERKELEY SHELL, EACH
XOHANA	Q3 2025	DME Medical Supplies	L3010	HCPCS	FOOT INSERT, REMOVABLE, MOLDED TO PATIENT MODEL, LONGITUDINAL ARCH SUPPORT, EACH
XOHANA	Q3 2025	DME Medical Supplies	L3020	HCPCS	FOOT INSERT, REMOVABLE, MOLDED TO PATIENT MODEL, LONGITUDINAL/METATARSAL SUPPORT, EACH
XOHANA	Q3 2025	DME Medical Supplies	L3170	HCPCS	FOOT, PLASTIC, SILICONE OR EQUAL, HEEL STABILIZER, PREFABRICATED, OFF-THE-SHELF, EACH
XOHANA	Q3 2025	DME Medical Supplies	L3221	HCPCS	ORTHOPEDIC FOOTWEAR, MENS SHOE, DEPTH INLAY, EACH
XOHANA	Q3 2025	DME Medical Supplies	L3222	HCPCS	ORTHOPEDIC FOOTWEAR, MENS SHOE, HIGHTOP, DEPTH INLAY, EACH
XOHANA	Q3 2025	DME Medical Supplies	L3260	HCPCS	SURGICAL BOOT/SHOE, EACH
XOHANA	Q3 2025	DME Medical Supplies	L3300	HCPCS	LIFT, ELEVATION, HEEL, TAPERED TO METATARSALS, PER IN
XOHANA	Q3 2025	DME Medical Supplies	L3310	HCPCS	LIFT, ELEVATION, HEEL AND SOLE, NEOPRENE, PER IN
XOHANA	Q3 2025	DME Medical Supplies	L3332	HCPCS	LIFT, ELEVATION, INSIDE SHOE, TAPERED, UP TO ONE-HALF IN
XOHANA	Q3 2025	DME Medical Supplies	L3334	HCPCS	LIFT, ELEVATION, HEEL, PER IN
XOHANA	Q3 2025	DME Medical Supplies	L3350	HCPCS	HEEL WEDGE
XOHANA	Q3 2025	DME Medical Supplies	L3670	HCPCS	SHOULDER ORTHOSIS, ACROMIO/CLAVICULAR (CANVAS AND WEBBING TYPE), PREFABRICATED, OFF-THE-SHELF
XOHANA	Q3 2025	DME Medical Supplies	L3702	HCPCS	ELBOW ORTHOTIC (EO), WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT
XOHANA	Q3 2025	DME Medical Supplies	L3760	HCPCS	ELBOW ORTHOSIS (EO), WITH ADJUSTABLE POSITION LOCKING JOINT(S), PREFABRICATED, ITEM THAT HAS BEEN TRIMMED, BENT
XOHANA	Q3 2025	DME Medical Supplies	L3760	HCPCS	ELBOW ORTHOSIS (EO), WITH ADJUSTABLE POSITION LOCKING JOINT(S), PREFABRICATED, ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO
XOHANA	Q3 2025	DME Medical Supplies	L3807	HCPCS	WRIST HAND FINGER ORTHOSIS, WITHOUT JOINT(S), PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED
XOHANA	Q3 2025	DME Medical Supplies	L3906	HCPCS	WRIST-HAND ORTHOSIS (WHO), WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT
XOHANA	Q3 2025	DME Medical Supplies	L3908	HCPCS	WRIST HAND ORTHOSIS, WRIST EXTENSION CONTROL COCK-UP, NON MOLDED, PREFABRICATED, OFF-THE-SHELF
XOHANA	Q3 2025	DME Medical Supplies	L3924	HCPCS	HAND FINGER ORTHOSIS, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, PREFABRICATED, OFF-THE-SHELF
XOHANA	Q3 2025	DME Medical Supplies	L3933	HCPCS	FINGER ORTHOTIC (FO), WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT
XOHANA	Q3 2025	DME Medical Supplies	L3960	HCPCS	SHOULDER-ELBOW-WRIST-HAND ORTHOTIC (SEWHO), ABDUCTION POSITIONING, AIRPLANE DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT
XOHANA	Q3 2025	DME Medical Supplies	L3999	HCPCS	UPPER LIMB ORTHOTIC, NOT OTHERWISE SPECIFIED
XOHANA	Q3 2025	DME Medical Supplies	L4002	HCPCS	REPLACEMENT STRAP, ANY ORTHOTIC, INCLUDES ALL COMPONENTS, ANY LENGTH, ANY TYPE
XOHANA	Q3 2025	DME Medical Supplies	L4205	HCPCS	REPAIR OF ORTHOTIC DEVICE, LABOR COMPONENT, PER 15 MINUTES
XOHANA	Q3 2025	DME Medical Supplies	L4210	HCPCS	REPAIR OF ORTHOTIC DEVICE, REPAIR OR REPLACE MINOR PARTS
XOHANA	Q3 2025	DME Medical Supplies	L4350	HCPCS	ANKLE CONTROL ORTHOSIS, STIRRUP STYLE, RIGID, INCLUDES ANY TYPE INTERFACE (E.G., PNEUMATIC, GEL), PREFABRICATED, OFF-THE-SHELF
XOHANA	Q3 2025	DME Medical Supplies	L4360	HCPCS	WALKING BOOT, PNEUMATIC AND/OR VACUUM, WITH OR WITHOUT JOINTS, WITH OR WITHOUT INTERFACE MATERIAL, PREFABRICATED ITEM
XOHANA	Q3 2025	DME Medical Supplies	L4361	HCPCS	WALKING BOOT, PNEUMATIC AND/OR VACUUM, WITH OR WITHOUT JOINTS, WITH OR WITHOUT INTERFACE MATERIAL, PREFABRICATED, OFF-THE-SHELF
XOHANA	Q3 2025	DME Medical Supplies	L4386	HCPCS	WALKING BOOT, NON-PNEUMATIC, WITH OR WITHOUT JOINTS, WITH OR WITHOUT INTERFACE MATERIAL, PREFABRICATED ITEM THAT HAS
XOHANA	Q3 2025	DME Medical Supplies	L4387	HCPCS	WALKING BOOT, NON-PNEUMATIC, WITH OR WITHOUT JOINTS, WITH OR WITHOUT INTERFACE MATERIAL, PREFABRICATED, OFF-THE-SHELF
XOHANA	Q3 2025	DME Medical Supplies	L4392	HCPCS	REPLACEMENT, SOFT INTERFACE MATERIAL, STATIC AFO
XOHANA	Q3 2025	DME Medical Supplies	L4396	HCPCS	STATIC OR DYNAMIC ANKLE FOOT ORTHOSIS, INCL SOFT INTERFACE MATERIAL, ADJUSTABLE FOR FIT, FOR POSITIONING, MAY BE USED
XOHANA	Q3 2025	DME Medical Supplies	L4631	HCPCS	ANKLE FOOT ORTHOSIS, WALKING BOOT TYPE, VARUS/VALGUS CORRECTION, ROCKER BOTTOM, ANTERIOR TIBIAL SHELL, SOFT INTERFACE, CUSTOM ARCH SUPPORT, PLASTIC OR OTHE
XOHANA	Q3 2025	DME Medical Supplies	L5000	HCPCS	PARTIAL FOOT, SHOE INSERT WITH LONGITUDINAL ARCH, TOE FILLER
XOHANA	Q3 2025	DME Medical Supplies	L5020	HCPCS	PARTIAL FOOT, MOLDED SOCKET, TIBIAL TUBERCLE HEIGHT, WITH TOE FILLER
XOHANA	Q3 2025	DME Medical Supplies	L5050	HCPCS	ANKLE, SYMES, MOLDED SOCKET, SACH FOOT
XOHANA	Q3 2025	DME Medical Supplies	L5100	HCPCS	BELOW KNEE, MOLDED SOCKET, SHIN, SACH FOOT
XOHANA	Q3 2025	DME Medical Supplies	L5301	HCPCS	BELOW KNEE, MOLDED SOCKET, SHIN, SACH FOOT, ENDOSKELETAL SYSTEM
XOHANA	Q3 2025	DME Medical Supplies	L5321	HCPCS	ABOVE KNEE, MOLDED SOCKET, OPEN END, SACH FOOT, ENDOSKELETAL SYSTEM, SINGLE AXIS KNEE
XOHANA	Q3 2025	DME Medical Supplies	L5530	HCPCS	PREPARATORY, BELOW KNEE PTB TYPE SOCKET, NONALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, THERMOPLASTIC OR EQUAL, MOLDED TO MODEL
XOHANA	Q3 2025	DME Medical Supplies	L5580	HCPCS	PREPARATORY, ABOVE KNEE, KNEE DISARTICULATION, ISCHIAL LEVEL SOCKET, NONALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT
XOHANA	Q3 2025	DME Medical Supplies	L5611	HCPCS	ADDITION TO LOWER EXTREMITY, ENDOSKELETAL SYSTEM, ABOVE KNEE, KNEE DISARTICULATION, 4-BAR LINKAGE, WITH FRICTION SWING
XOHANA	Q3 2025	DME Medical Supplies	L5618	HCPCS	ADDITION TO LOWER EXTREMITY, TEST SOCKET, SYMES
XOHANA	Q3 2025	DME Medical Supplies	L5620	HCPCS	ADDITION TO LOWER EXTREMITY, TEST SOCKET, BELOW KNEE
XOHANA	Q3 2025	DME Medical Supplies	L5624	HCPCS	ADDITION TO LOWER EXTREMITY, TEST SOCKET, ABOVE KNEE
XOHANA	Q3 2025	DME Medical Supplies	L5629	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, ACRYLIC SOCKET
XOHANA	Q3 2025	DME Medical Supplies	L5632	HCPCS	ADDITION TO LOWER EXTREMITY, SYMES TYPE, PTB BRIM DESIGN SOCKET
XOHANA	Q3 2025	DME Medical Supplies	L5636	HCPCS	ADDITION TO LOWER EXTREMITY, SYMES TYPE, MEDIAL OPENING SOCKET
XOHANA	Q3 2025	DME Medical Supplies	L5637	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, TOTAL CONTACT
XOHANA	Q3 2025	DME Medical Supplies	L5639	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, WOOD SOCKET
XOHANA	Q3 2025	DME Medical Supplies	L5643	HCPCS	ADDITION TO LOWER EXTREMITY, HIP DISARTICULATION, FLEXIBLE INNER SOCKET, EXTERNAL FRAME
XOHANA	Q3 2025	DME Medical Supplies	L5645	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, FLEXIBLE INNER SOCKET, EXTERNAL FRAME
XOHANA	Q3 2025	DME Medical Supplies	L5647	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, SUCTION SOCKET
XOHANA	Q3 2025	DME Medical Supplies	L5649	HCPCS	ADDITION TO LOWER EXTREMITY, ISCHIAL CONTAINMENT/NARROW M-L SOCKET
XOHANA	Q3 2025	DME Medical Supplies	L5650	HCPCS	ADDITIONS TO LOWER EXTREMITY, TOTAL CONTACT, ABOVE KNEE OR KNEE DISARTICULATION SOCKET
XOHANA	Q3 2025	DME Medical Supplies	L5651	HCPCS	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, FLEXIBLE INNER SOCKET, EXTERNAL FRAME
XOHANA	Q3 2025	DME Medical Supplies	L5652	HCPCS	ADDITION TO LOWER EXTREMITY, SUCTION SUSPENSION, ABOVE KNEE OR KNEE DISARTICULATION SOCKET
XOHANA	Q3 2025	DME Medical Supplies	L5653	HCPCS	ADDITION TO LOWER EXTREMITY, KNEE DISARTICULATION, EXPANDABLE WALL SOCKET
XOHANA	Q3 2025	DME Medical Supplies	L5655	HCPCS	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, BELOW KNEE (KEMBLO, PELITE, ALIPLAST, PLASTAZOTE OR EQUAL)
XOHANA	Q3 2025	DME Medical Supplies	L5665	HCPCS	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, MULTIDUROMETER, BELOW KNEE
XOHANA	Q3 2025	DME Medical Supplies	L5666	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, CUFF SUSPENSION
XOHANA	Q3 2025	DME Medical Supplies	L5668	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, MOLDED DISTAL CUSHION
XOHANA	Q3 2025	DME Medical Supplies	L5671	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE/ABOVE KNEE SUSPENSION LOCKING MECHANISM (SHUTTLE, LANYARD, OR EQUAL)
XOHANA	Q3 2025	DME Medical Supplies	L5672	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, REMOVABLE MEDIAL BRIM SUSPENSION
XOHANA	Q3 2025	DME Medical Supplies	L5673	HCPCS	ADDITION TO LOWER EXTREM, FOR USE W LOCKING MECHANISM, BELOW KNEE/ABOVE KNEE, CUST FAB FROM EXISTING MOLD OR PREFAB
XOHANA	Q3 2025	DME Medical Supplies	L5676	HCPCS	ADDITIONS TO LOWER EXTREMITY, BELOW KNEE, KNEE JOINTS, SINGLE AXIS, PAIR
XOHANA	Q3 2025	DME Medical Supplies	L5678	HCPCS	ADDITIONS TO LOWER EXTREMITY, BELOW KNEE, JOINT COVERS, PAIR
XOHANA	Q3 2025	DME Medical Supplies	L5679	HCPCS	ADDITION TO LOWER EXTREM, NOT FOR USE W LOCKING MECHANISM, BELOW KNEE/ABOVE KNEE, CUST FAB FROM EXISTING MOLD OR PREFAB
XOHANA	Q3 2025	DME Medical Supplies	L5680	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, THIGH LACER, NONMOLDED
XOHANA	Q3 2025	DME Medical Supplies	L5684	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, FORK STRAP
XOHANA	Q3 2025	DME Medical Supplies	L5685	HCPCS	ADDITION TO LOWER EXTREMITY PROSTHESIS, BELOW KNEE, SUSPENSION/SEALING SLEEVE, WITH OR WITHOUT VALVE, ANY MATERIAL, EACH
XOHANA	Q3 2025	DME Medical Supplies	L5686	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, BACK CHECK (EXTENSION CONTROL)
XOHANA	Q3 2025	DME Medical Supplies	L5690	HCPCS	ADDITION TO LOWER EXTREMITY, BELOW KNEE, WAIST BELT, PADDED AND LINED
XOHANA	Q3 2025	DME Medical Supplies	L5700	HCPCS	REPLACEMENT, SOCKET, BELOW KNEE, MOLDED TO PATIENT MODEL

XOHANA	Q3 2025	DME Medical Supplies	L5701		HCPCS	REPLACEMENT, SOCKET, ABOVE KNEE/KNEE DISARTICULATION, INCLUDING ATTACHMENT PLATE, MOLDED TO PATIENT MODEL
XOHANA	Q3 2025	DME Medical Supplies	L5702		HCPCS	REPLACEMENT, SOCKET, HIP DISARTICULATION, INCLUDING HIP JOINT, MOLDED TO PATIENT MODEL
XOHANA	Q3 2025	DME Medical Supplies	L5704		HCPCS	CUSTOM SHAPED PROTECTIVE COVER, BELOW KNEE
XOHANA	Q3 2025	DME Medical Supplies	L5707		HCPCS	CUSTOM SHAPED PROTECTIVE COVER, HIP DISARTICULATION
XOHANA	Q3 2025	DME Medical Supplies	L5781		HCPCS	ADDITION TO LOWER LIMB PROSTHESIS, VACUUM PUMP, RESIDUAL LIMB VOLUME MANAGEMENT AND MOISTURE EVACUATION SYSTEM
XOHANA	Q3 2025	DME Medical Supplies	L5785		HCPCS	ADDITION, EXOSKELETAL SYSTEM, BELOW KNEE, ULTRA-LIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)
XOHANA	Q3 2025	DME Medical Supplies	L5810		HCPCS	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, MANUAL LOCK
XOHANA	Q3 2025	DME Medical Supplies	L5812		HCPCS	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FRICTION SWING AND STANCE PHASE CONTROL (SAFETY KNEE)
XOHANA	Q3 2025	DME Medical Supplies	L5828		HCPCS	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FLUID SWING AND STANCE PHASE CONTROL
XOHANA	Q3 2025	DME Medical Supplies	L5845		HCPCS	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, STANCE FLEXION FEATURE, ADJUSTABLE
XOHANA	Q3 2025	DME Medical Supplies	L5850		HCPCS	ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE OR HIP DISARTICULATION, KNEE EXTENSION ASSIST
XOHANA	Q3 2025	DME Medical Supplies	L5910		HCPCS	ADDITION, ENDOSKELETAL SYSTEM, BELOW KNEE, ALIGNABLE SYSTEM
XOHANA	Q3 2025	DME Medical Supplies	L5920		HCPCS	ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE OR HIP DISARTICULATION, ALIGNABLE SYSTEM
XOHANA	Q3 2025	DME Medical Supplies	L5925		HCPCS	ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE, KNEE DISARTICULATION OR HIP DISARTICULATION, MANUAL LOCK
XOHANA	Q3 2025	DME Medical Supplies	L5940		HCPCS	ADDITION, ENDOSKELETAL SYSTEM, BELOW KNEE, ULTRA-LIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)
XOHANA	Q3 2025	DME Medical Supplies	L5950		HCPCS	ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE, ULTRA-LIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)
XOHANA	Q3 2025	DME Medical Supplies	L5962		HCPCS	ADDITION, ENDOSKELETAL SYSTEM, BELOW KNEE, FLEXIBLE PROTECTIVE OUTER SURFACE COVERING SYSTEM
XOHANA	Q3 2025	DME Medical Supplies	L5964		HCPCS	ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE, FLEXIBLE PROTECTIVE OUTER SURFACE COVERING SYSTEM
XOHANA	Q3 2025	DME Medical Supplies	L5968		HCPCS	ADDITION TO LOWER LIMB PROSTHESIS, MULTIAXIAL ANKLE WITH SWING PHASE ACTIVE DORSIFLEXION FEATURE
XOHANA	Q3 2025	DME Medical Supplies	L5971		HCPCS	ALL LOWER EXTREMITY PROSTHESES, SOLID ANKLE CUSHION HEEL (SACH) FOOT, REPLACEMENT ONLY
XOHANA	Q3 2025	DME Medical Supplies	L5972		HCPCS	ALL LOWER EXTREMITY PROSTHESES, FOOT, FLEXIBLE KEEL
XOHANA	Q3 2025	DME Medical Supplies	L5979		HCPCS	ALL LOWER EXTREMITY PROSTHESES, MULTIAXIAL ANKLE, DYNAMIC RESPONSE FOOT, ONE PIECE SYSTEM
XOHANA	Q3 2025	DME Medical Supplies	L5981		HCPCS	ALL LOWER EXTREMITY PROSTHESES, FLEX-WALK SYSTEM OR EQUAL
XOHANA	Q3 2025	DME Medical Supplies	L5984		HCPCS	ALL ENDOSKELETAL LOWER EXTREMITY PROSTHESES, AXIAL ROTATION UNIT, WITH OR WITHOUT ADJUSTABILITY
XOHANA	Q3 2025	DME Medical Supplies	L5986		HCPCS	ALL LOWER EXTREMITY PROSTHESES, MULTIAXIAL ROTATION UNIT (MCP OR EQUAL)
XOHANA	Q3 2025	DME Medical Supplies	L5987		HCPCS	ALL LOWER EXTREMITY PROSTHESES, SHANK FOOT SYSTEM WITH VERTICAL LOADING PYLON
XOHANA	Q3 2025	DME Medical Supplies	L5988		HCPCS	ADDITION TO LOWER LIMB PROSTHESIS, VERTICAL SHOCK REDUCING PYLON FEATURE
XOHANA	Q3 2025	DME Medical Supplies	L5991		HCPCS	ADDITION LWR EXT PROSTHESES OI EXTRNL PROS CONN
XOHANA	Q3 2025	DME Medical Supplies	L7510		HCPCS	REPAIR OF PROSTHETIC DEVICE, REPAIR OR REPLACE MINOR PARTS
XOHANA	Q3 2025	DME Medical Supplies	L7520		HCPCS	REPAIR PROSTHETIC DEVICE, LABOR COMPONENT, PER 15 MINUTES
XOHANA	Q3 2025	DME Medical Supplies	L8000		HCPCS	BREAST PROSTHESIS, MASTECTOMY BRA, WITHOUT INTEGRATED BREAST PROSTHESIS FORM, ANY SIZE, ANY TYPE
XOHANA	Q3 2025	DME Medical Supplies	L8030		HCPCS	BREAST PROSTHESIS, SILICONE OR EQUAL, WITHOUT INTEGRAL ADHESIVE
XOHANA	Q3 2025	DME Medical Supplies	L8300		HCPCS	TRUSS, SINGLE WITH STANDARD PAD
XOHANA	Q3 2025	DME Medical Supplies	L8400		HCPCS	PROSTHETIC SHEATH, BELOW KNEE, EACH
XOHANA	Q3 2025	DME Medical Supplies	L8410		HCPCS	PROSTHETIC SHEATH, ABOVE KNEE, EACH
XOHANA	Q3 2025	DME Medical Supplies	L8420		HCPCS	PROSTHETIC SOCK, MULTIPLE PLY, BELOW KNEE, EACH
XOHANA	Q3 2025	DME Medical Supplies	L8430		HCPCS	PROSTHETIC SOCK, MULTIPLE PLY, ABOVE KNEE, EACH
XOHANA	Q3 2025	DME Medical Supplies	L8440		HCPCS	PROSTHETIC SHRINKER, BELOW KNEE, EACH
XOHANA	Q3 2025	DME Medical Supplies	L8460		HCPCS	PROSTHETIC SHRINKER, ABOVE KNEE, EACH
XOHANA	Q3 2025	DME Medical Supplies	L8470		HCPCS	PROSTHETIC SOCK, SINGLE PLY, FITTING, BELOW KNEE, EACH
XOHANA	Q3 2025	DME Medical Supplies	L8480		HCPCS	PROSTHETIC SOCK, SINGLE PLY, FITTING, ABOVE KNEE, EACH
XOHANA	Q3 2025	DME Medical Supplies	L8500		HCPCS	ARTIFICIAL LARYNX, ANY TYPE
XOHANA	Q3 2025	DME Medical Supplies	L8501		HCPCS	TRACHEOSTOMY SPEAKING VALVE
XOHANA	Q3 2025	DME Medical Supplies	L8615		HCPCS	HEADSET/HEADPIECE FOR USE WITH COCHLEAR IMPLANT DEVICE, REPLACEMENT
XOHANA	Q3 2025	DME Medical Supplies	L8616		HCPCS	MICROPHONE FOR USE WITH COCHLEAR IMPLANT DEVICE, REPLACEMENT
XOHANA	Q3 2025	DME Medical Supplies	L8619		HCPCS	COCHLEAR IMPLANT, EXTERNAL SPEECH PROCESSOR AND CONTROLLER, INTEGRATED SYSTEM, REPLACEMENT
XOHANA	Q3 2025	DME Medical Supplies	L8624		HCPCS	LITHIUM ION BATTERY FOR USE WITH COCHLEAR IMPLANT OR AUDITORY OSSEOINTEGRATED DEVICE SPEECH PROCESSOR, EAR LEVEL
XOHANA	Q3 2025	DME Medical Supplies	L8680		HCPCS	IMPLANTABLE NEUROSTIMULATOR ELECTRODE, EACH
XOHANA	Q3 2025	DME Medical Supplies	L8690		HCPCS	AUDITORY OSSEOINTEGRATED DEVICE, INCLUDES ALL INTERNAL AND EXTERNAL COMPONENTS
XOHANA	Q3 2025	DME Medical Supplies	L8692		HCPCS	AUDITORY OSSEOINTEGRATED DEVICE, EXTERNAL SOUND PROCESSOR, USED WITHOUT OSSEOINTEGRATION, BODY WORN, INCLUDES HEADBAND
XOHANA	Q3 2025	DME Medical Supplies	Q4101		HCPCS	APLIGRAF, PER SQ CM
XOHANA	Q3 2025	DME Medical Supplies	Q4107		HCPCS	GRAFTJACKET, PER SQ CM
XOHANA	Q3 2025	DME Medical Supplies	Q4285		HCPCS	NUDYN DL OR NUDYN DL MESH PER SQ CM
XOHANA	Q3 2025	DME Medical Supplies	Q4286		HCPCS	NUDYN SL OR NUDYN SLW PER SQ CM
XOHANA	Q3 2025	DME Medical Supplies	S1040		HCPCS	CRANIAL REMOLDING ORTHOTIC, PEDIATRIC, RIGID, WITH SOFT INTERFACE MATERIAL, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT(S)
XOHANA	Q3 2025	DME Medical Supplies	S5185		HCPCS	MEDICATION REMINDER SERVICE, NON-FACE-TO-FACE; PER MONTH
XOHANA	Q3 2025	DME Medical Supplies	S8186		HCPCS	SWIVEL ADAPTOR
XOHANA	Q3 2025	DME Medical Supplies	S9501		HCPCS	HOME INFUSION THERAPY, ANTIBIOTIC, ANTIVIRAL, OR ANTIFUNGAL THERAPY; ONCE EVERY 12 HOURS; ADMINISTRATIVE SERVICES, PROFESSIONAL
XOHANA	Q3 2025	DME Medical Supplies	T2028		HCPCS	SPECIALIZED SUPPLY, NOT OTHERWISE SPECIFIED, WAIVER
XOHANA	Q3 2025	DME Medical Supplies	T4521		HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, SMALL, EACH
XOHANA	Q3 2025	DME Medical Supplies	T4522		HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, MEDIUM, EACH
XOHANA	Q3 2025	DME Medical Supplies	T4523		HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, LARGE, EACH
XOHANA	Q3 2025	DME Medical Supplies	T4524		HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, EXTRA LARGE, EACH
XOHANA	Q3 2025	DME Medical Supplies	T4525		HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, SMALL SIZE, EACH
XOHANA	Q3 2025	DME Medical Supplies	T4526		HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, MEDIUM SIZE, EACH
XOHANA	Q3 2025	DME Medical Supplies	T4527		HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, LARGE SIZE, EACH
XOHANA	Q3 2025	DME Medical Supplies	T4528		HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, EXTRA LARGE SIZE, EACH
XOHANA	Q3 2025	DME Medical Supplies	T4530		HCPCS	PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, LARGE SIZE, EACH
XOHANA	Q3 2025	DME Medical Supplies	T4531		HCPCS	PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, SMALL/MEDIUM SIZE, EACH
XOHANA	Q3 2025	DME Medical Supplies	T4533		HCPCS	YOUTH SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, EACH
XOHANA	Q3 2025	DME Medical Supplies	T4534		HCPCS	YOUTH SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, EACH
XOHANA	Q3 2025	DME Medical Supplies	T4535		HCPCS	DISPOSABLE LINER/SHIELD/GUARD/PAD/UNDERGARMENT, FOR INCONTINENCE, EACH
XOHANA	Q3 2025	DME Medical Supplies	T4536		HCPCS	INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, REUSABLE, ANY SIZE, EACH
XOHANA	Q3 2025	DME Medical Supplies	T4537		HCPCS	INCONTINENCE PRODUCT, PROTECTIVE UNDERPAD, REUSABLE, BED SIZE, EACH
XOHANA	Q3 2025	DME Medical Supplies	T4540		HCPCS	INCONTINENCE PRODUCT, PROTECTIVE UNDERPAD, REUSABLE, CHAIR SIZE, EACH
XOHANA	Q3 2025	DME Medical Supplies	T4541		HCPCS	INCONTINENCE PRODUCT, DISPOSABLE UNDERPAD, LARGE, EACH
XOHANA	Q3 2025	DME Medical Supplies	T4542		HCPCS	INCONTINENCE PRODUCT, DISPOSABLE UNDERPAD, SMALL SIZE, EACH
XOHANA	Q3 2025	DME Medical Supplies	T4543		HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE BRIEF/DIAPER, ABOVE EXTRA LARGE, EACH
XOHANA	Q3 2025	DME Medical Supplies	T4544		HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, ABOVE EXTRA LARGE, EACH
XOHANA	Q3 2025	DME Medical Supplies	V2623		HCPCS	PROSTHETIC EYE, PLASTIC, CUSTOM
XOHANA	Q3 2025	DME Medical Supplies	V2628		HCPCS	FABRICATION AND FITTING OF OCULAR CONFORMER
XOHANA	Q3 2025	DME Medical Supplies	V5011		HCPCS	FITTING/ORIENTATION/CHECKING OF HEARING AID
XOHANA	Q3 2025	DME Medical Supplies	V5261		HCPCS	HEARING AID, DIGITAL, BINAURAL, BTE
XOHANA	Q3 2025	DME Medical Supplies	V5264		HCPCS	EAR MOLD/INSERT, NOT DISPOSABLE, ANY TYPE
XOHANA	Q3 2025	DME Medical Supplies	V5266		HCPCS	BATTERY FOR USE IN HEARING DEVICE
XOHANA	Q3 2025	HCBS		99342	CPT	HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT, WHICH REQUIRES THESE 3 KEY COMPONENTS: AN EXPANDED PROBLEM
XOHANA	Q3 2025	HCBS	A4335		HCPCS	INCONTINENCE SUPPLY; MISCELLANEOUS
XOHANA	Q3 2025	HCBS	A4595		HCPCS	ELECTRICAL STIMULATOR SUPPLIES, 2 LEAD, PER MONTH, (E.G., TENS, NMES)
XOHANA	Q3 2025	HCBS	A4670		HCPCS	AUTOMATIC BLOOD PRESSURE MONITOR
XOHANA	Q3 2025	HCBS	A4927		HCPCS	GLOVES, NONSTERILE, PER 100
XOHANA	Q3 2025	HCBS	A5500		HCPCS	FOR DIABETICS ONLY, FITTING (INCLUDING FOLLOW-UP), CUSTOM PREPARATION AND SUPPLY OF OFF-THE-SHELF DEPTH-INLAY SHOE
XOHANA	Q3 2025	HCBS	A5512		HCPCS	FOR DIABETICS ONLY, MULTIPLE DENSITY INSERT, DIRECT FORMED, MOLDED TO FOOT AFTER EXTERNAL HEAT SOURCE OF 230 DEGREES
XOHANA	Q3 2025	HCBS	A6196		HCPCS	ALGINATE OR OTHER FIBER GELLING DRESSING, WOUND COVER, STERILE, PAD SIZE 16 SQ IN OR LESS, EACH DRESSING
XOHANA	Q3 2025	HCBS	A6197		HCPCS	ALGINATE OR OTHER FIBER GELLING DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 16 SQ IN BUT LESS THAN OR EQUAL TO 48 SQ IN
XOHANA	Q3 2025	HCBS	A6253		HCPCS	SPECIALTY ABSORPTIVE DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 48 SQ IN, WITHOUT ADHESIVE BORDER, EACH DRESSING
XOHANA	Q3 2025	HCBS	A6512		HCPCS	COMPRESSION BURN GARMENT, NOT OTHERWISE CLASSIFIED
XOHANA	Q3 2025	HCBS	A6530		HCPCS	GRADIENT COMPRESSION STOCKING, BELOW KNEE, 18-30 MM HG, EACH
XOHANA	Q3 2025	HCBS	A7030		HCPCS	FULL FACE MASK USED WITH POSITIVE AIRWAY PRESSURE DEVICE, EACH

XOHANA	Q3 2025	HCBS	A9270	HCPCS	NONCOVERED ITEM OR SERVICE
XOHANA	Q3 2025	HCBS	A9276	HCPCS	SENSOR; INVASIVE (E.G., SUBCUTANEOUS), DISPOSABLE, FOR USE WITH INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM
XOHANA	Q3 2025	HCBS	A9277	HCPCS	TRANSMITTER; EXTERNAL, FOR USE WITH INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM
XOHANA	Q3 2025	HCBS	A9278	HCPCS	RECEIVER (MONITOR); EXTERNAL, FOR USE WITH INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM
XOHANA	Q3 2025	HCBS	B4100	HCPCS	FOOD THICKENER, ADMINISTERED ORALLY, PER OZ
XOHANA	Q3 2025	HCBS	B4150	HCPCS	ENTERAL FORMULA, NUTRITIONALLY COMPLETE WITH INTACT NUTRIENTS, INCLUDES PROTEINS, FATS, CARBOHYDRATES, VITAMINS AND MINERALS
XOHANA	Q3 2025	HCBS	B4154	HCPCS	ENTERAL FORMULA, NUTRITIONALLY COMPLETE, FOR SPECIAL METABOLIC NEEDS, EXCLUDES INHERITED DISEASE OF METABOLISM
XOHANA	Q3 2025	HCBS	E0156	HCPCS	SEAT ATTACHMENT, WALKER
XOHANA	Q3 2025	HCBS	E0181	HCPCS	POWERED PRESSURE REDUCING MATTRESS OVERLAY/PAD, ALTERNATING, WITH PUMP, INCLUDES HEAVY-DUTY
XOHANA	Q3 2025	HCBS	E0210	HCPCS	ELECTRIC HEAT PAD, STANDARD
XOHANA	Q3 2025	HCBS	E0245	HCPCS	TUB STOOL OR BENCH
XOHANA	Q3 2025	HCBS	E0260	HCPCS	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS, WITH MATTRESS
XOHANA	Q3 2025	HCBS	E0424	HCPCS	STATIONARY COMPRESSED GASEOUS OXYGEN SYSTEM, RENTAL; INCLUDES CONTAINER, CONTENTS, REGULATOR, FLOWMETER, HUMIDIFIER
XOHANA	Q3 2025	HCBS	E0431	HCPCS	PORTABLE GASEOUS OXYGEN SYSTEM, RENTAL; INCLUDES PORTABLE CONTAINER, REGULATOR, FLOWMETER, HUMIDIFIER, CANNULA OR MASK, AND TUBING
XOHANA	Q3 2025	HCBS	E0445	HCPCS	OXIMETER DEVICE FOR MEASURING BLOOD OXYGEN LEVELS NONINVASIVELY
XOHANA	Q3 2025	HCBS	E0466	HCPCS	HOME VENTILATOR, ANY TYPE, USED WITH NONINVASIVE INTERFACE, (E.G., MASK, CHEST SHELL)
XOHANA	Q3 2025	HCBS	E0470	HCPCS	RESPIRATORY ASSIST DEVICE, BI-LEVEL PRESSURE CAPABILITY, WITHOUT BACKUP RATE FEATURE, USED WITH NONINVASIVE INTERFACE
XOHANA	Q3 2025	HCBS	E0483	HCPCS	HIGH FREQUENCY CHEST WALL OSCILLATION AIR-PULSE GENERATOR SYSTEM, (INCLUDES HOSES AND VEST), EACH
XOHANA	Q3 2025	HCBS	E0600	HCPCS	RESPIRATORY SUCTION PUMP, HOME MODEL, PORTABLE OR STATIONARY, ELECTRIC
XOHANA	Q3 2025	HCBS	E0601	HCPCS	CONTINUOUS POSITIVE AIRWAY PRESSURE (CPAP) DEVICE
XOHANA	Q3 2025	HCBS	E0652	HCPCS	PNEUMATIC COMPRESSOR, SEGMENTAL HOME MODEL WITH CALIBRATED GRADIENT PRESSURE
XOHANA	Q3 2025	HCBS	E0720	HCPCS	TRANSCUTANEOUS ELECTRICAL NERVE STIMULATION (TENS) DEVICE, 2 LEAD, LOCALIZED STIMULATION
XOHANA	Q3 2025	HCBS	E0730	HCPCS	TRANSCUTANEOUS ELECTRICAL NERVE STIMULATION (TENS) DEVICE, 4 OR MORE LEADS, FOR MULTIPLE NERVE STIMULATION
XOHANA	Q3 2025	HCBS	E0747	HCPCS	OSTEOGENESIS STIMULATOR, ELECTRICAL, NONINVASIVE, OTHER THAN SPINAL APPLICATIONS
XOHANA	Q3 2025	HCBS	E0748	HCPCS	OSTEOGENESIS STIMULATOR, ELECTRICAL, NONINVASIVE, SPINAL APPLICATIONS
XOHANA	Q3 2025	HCBS	E0760	HCPCS	OSTEOGENESIS STIMULATOR, LOW INTENSITY ULTRASOUND, NONINVASIVE
XOHANA	Q3 2025	HCBS	E0784	HCPCS	EXTERNAL AMBULATORY INFUSION PUMP, INSULIN
XOHANA	Q3 2025	HCBS	E1031	HCPCS	ROLLABOUT CHAIR, ANY AND ALL TYPES WITH CASTORS 5 IN OR GREATER
XOHANA	Q3 2025	HCBS	E1038	HCPCS	TRANSPORT CHAIR, ADULT SIZE, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
XOHANA	Q3 2025	HCBS	E1390	HCPCS	OXYGEN CONCENTRATOR, SINGLE DELIVERY PORT, CAPABLE OF DELIVERING 85 PERCENT OR GREATER OXYGEN CONCENTRATION AT THE
XOHANA	Q3 2025	HCBS	E1392	HCPCS	PORTABLE OXYGEN CONCENTRATOR, RENTAL
XOHANA	Q3 2025	HCBS	E1399	HCPCS	DURABLE MEDICAL EQUIPMENT, MISCELLANEOUS
XOHANA	Q3 2025	HCBS	E1810	HCPCS	DYNAMIC ADJUSTABLE KNEE EXTENSION/FLEXION DEVICE, INCLUDES SOFT INTERFACE MATERIAL
XOHANA	Q3 2025	HCBS	E2402	HCPCS	NEGATIVE PRESSURE WOUND THERAPY ELECTRICAL PUMP, STATIONARY OR PORTABLE
XOHANA	Q3 2025	HCBS	G9004	HCPCS	COORDINATED CARE FEE, RISK ADJUSTED LOW, INITIAL
XOHANA	Q3 2025	HCBS	J3490	HCPCS	UNCLASSIFIED DRUGS
XOHANA	Q3 2025	HCBS	K0001	HCPCS	STANDARD WHEELCHAIR
XOHANA	Q3 2025	HCBS	K0002	HCPCS	STANDARD HEMI (LOW SEAT) WHEELCHAIR
XOHANA	Q3 2025	HCBS	K0003	HCPCS	LIGHTWEIGHT WHEELCHAIR
XOHANA	Q3 2025	HCBS	K0004	HCPCS	HIGH STRENGTH, LIGHTWEIGHT WHEELCHAIR
XOHANA	Q3 2025	HCBS	K0006	HCPCS	HEAVY-DUTY WHEELCHAIR
XOHANA	Q3 2025	HCBS	K0007	HCPCS	EXTRA HEAVY-DUTY WHEELCHAIR
XOHANA	Q3 2025	HCBS	K0462	HCPCS	TEMPORARY REPLACEMENT FOR PATIENT-OWNED EQUIPMENT BEING REPAIRED, ANY TYPE
XOHANA	Q3 2025	HCBS	K0606	HCPCS	AUTOMATIC EXTERNAL DEFIBRILLATOR, WITH INTEGRATED ELECTROCARDIOGRAM ANALYSIS, GARMENT TYPE
XOHANA	Q3 2025	HCBS	K0738	HCPCS	PORTABLE GASEOUS OXYGEN SYSTEM, RENTAL; HOME COMPRESSOR USED TO FILL PORTABLE OXYGEN CYLINDERS; INCLUDES PORTABLE CONTAINERS
XOHANA	Q3 2025	HCBS	K0801	HCPCS	POWER OPERATED VEHICLE, GROUP 1 HEAVY-DUTY, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
XOHANA	Q3 2025	HCBS	K0856	HCPCS	POWER WHEELCHAIR, GROUP 3 STANDARD, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING
XOHANA	Q3 2025	HCBS	L0174	HCPCS	CERVICAL, COLLAR, SEMI-RIGID, THERMOPLASTIC FOAM, TWO PIECE WITH THORACIC EXTENSION, PREFABRICATED, OFF-THE-SHELF
XOHANA	Q3 2025	HCBS	L0464	HCPCS	THORACIC-LUMBAR-SACRAL ORTHOTIC (TLSO), TRIPLANAR CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, 4 RIGID PLASTIC SHELLS
XOHANA	Q3 2025	HCBS	L0627	HCPCS	LUMBAR ORTHOSIS, SAGITTAL CONTROL, W RIGID ANTERIOR AND POSTERIOR PANELS, POSTERIOR EXTENDS FROM L-1 TO BELOW L-5 VERTEBRA
XOHANA	Q3 2025	HCBS	L0637	HCPCS	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR FRAME/PANELS, POSTERIOR EXTENDS
XOHANA	Q3 2025	HCBS	L0650	HCPCS	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR FRAME/PANEL(S), POSTERIOR EXTENDS
XOHANA	Q3 2025	HCBS	L1499	HCPCS	SPINAL ORTHOTIC, NOT OTHERWISE SPECIFIED
XOHANA	Q3 2025	HCBS	L1810	HCPCS	KNEE ORTHOSIS, ELASTIC WITH JOINTS, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE
XOHANA	Q3 2025	HCBS	L1820	HCPCS	KNEE ORTHOTIC, ELASTIC WITH CONDYLAR PADS AND JOINTS, WITH OR WITHOUT PATELLAR CONTROL, PREFABRICATED, INCLUDES FITTING
XOHANA	Q3 2025	HCBS	L1832	HCPCS	KNEE ORTHOSIS, ADJUSTABLE KNEE JOINTS (UNICENTRIC OR POLYCENTRIC), POSITIONAL ORTHOSIS, RIGID SUPPORT, PREFAB ITEM
XOHANA	Q3 2025	HCBS	L1833	HCPCS	KNEE ORTHOSIS, ADJUSTABLE KNEE JOINTS (UNICENTRIC OR POLYCENTRIC), POSITIONAL ORTHOSIS, RIGID SUPPORT, PREFAB, OFF-THE SHELF
XOHANA	Q3 2025	HCBS	L1843	HCPCS	KNEE ORTHOSIS, SINGLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC)
XOHANA	Q3 2025	HCBS	L1845	HCPCS	KNEE ORTHOSIS, DOUBLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC)
XOHANA	Q3 2025	HCBS	L1846	HCPCS	KNEE ORTHOTIC, DOUBLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC)
XOHANA	Q3 2025	HCBS	L1906	HCPCS	ANKLE FOOT ORTHOSIS, MULTILIGAMENTOUS ANKLE SUPPORT, PREFABRICATED, OFF-THE-SHELF
XOHANA	Q3 2025	HCBS	L1940	HCPCS	ANKLE-FOOT ORTHOTIC (AFO), PLASTIC OR OTHER MATERIAL, CUSTOM FABRICATED
XOHANA	Q3 2025	HCBS	L1960	HCPCS	ANKLE-FOOT ORTHOTIC (AFO), POSTERIOR SOLID ANKLE, PLASTIC, CUSTOM FABRICATED
XOHANA	Q3 2025	HCBS	L1970	HCPCS	ANKLE-FOOT ORTHOTIC (AFO), PLASTIC WITH ANKLE JOINT, CUSTOM FABRICATED
XOHANA	Q3 2025	HCBS	L1971	HCPCS	ANKLE-FOOT ORTHOTIC (AFO), PLASTIC OR OTHER MATERIAL WITH ANKLE JOINT, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT
XOHANA	Q3 2025	HCBS	L2397	HCPCS	ADDITION TO LOWER EXTREMITY ORTHOTIC, SUSPENSION SLEEVE
XOHANA	Q3 2025	HCBS	L2820	HCPCS	ADDITION TO LOWER EXTREMITY ORTHOTIC, SOFT INTERFACE FOR MOLDED PLASTIC, BELOW KNEE SECTION
XOHANA	Q3 2025	HCBS	L3020	HCPCS	FOOT INSERT, REMOVABLE, MOLDED TO PATIENT MODEL, LONGITUDINAL/METATARSAL SUPPORT, EACH
XOHANA	Q3 2025	HCBS	L3807	HCPCS	WRIST HAND FINGER ORTHOSIS, WITHOUT JOINT(S), PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED
XOHANA	Q3 2025	HCBS	L3908	HCPCS	WRIST HAND ORTHOSIS, WRIST EXTENSION CONTROL COCK-UP, NON MOLDED, PREFABRICATED, OFF-THE-SHELF
XOHANA	Q3 2025	HCBS	L3984	HCPCS	UPPER EXTREMITY FRACTURE ORTHOTIC, WRIST, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT
XOHANA	Q3 2025	HCBS	L4350	HCPCS	ANKLE CONTROL ORTHOSIS, STIRRUP STYLE, RIGID, INCLUDES ANY TYPE INTERFACE (E.G., PNEUMATIC, GEL), PREFABRICATED, OFF-THE-SHELF
XOHANA	Q3 2025	HCBS	L4360	HCPCS	WALKING BOOT, PNEUMATIC AND/OR VACUUM, WITH OR WITHOUT JOINTS, WITH OR WITHOUT INTERFACE MATERIAL, PREFABRICATED ITEM
XOHANA	Q3 2025	HCBS	L4361	HCPCS	WALKING BOOT, PNEUMATIC AND/OR VACUUM, WITH OR WITHOUT JOINTS, WITH OR WITHOUT INTERFACE MATERIAL, PREFABRICATED, OFF-THE-SHELF
XOHANA	Q3 2025	HCBS	L4396	HCPCS	STATIC OR DYNAMIC ANKLE FOOT ORTHOSIS, INCL SOFT INTERFACE MATERIAL, ADJUSTABLE FOR FIT, FOR POSITIONING, MAY BE USED
XOHANA	Q3 2025	HCBS	L5530	HCPCS	PREPARATORY, BELOW KNEE PTB TYPE SOCKET, NONALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, THERMOPLASTIC OR EQUAL, MOLDED TO MODEL
XOHANA	Q3 2025	HCBS	L5700	HCPCS	REPLACEMENT, SOCKET, BELOW KNEE, MOLDED TO PATIENT MODEL
XOHANA	Q3 2025	HCBS	L8030	HCPCS	BREAST PROSTHESIS, SILICONE OR EQUAL, WITHOUT INTEGRAL ADHESIVE
XOHANA	Q3 2025	HCBS	L8619	HCPCS	COCHLEAR IMPLANT, EXTERNAL SPEECH PROCESSOR AND CONTROLLER, INTEGRATED SYSTEM, REPLACEMENT
XOHANA	Q3 2025	HCBS	L8680	HCPCS	IMPLANTABLE NEUROSTIMULATOR ELECTRODE, EACH
XOHANA	Q3 2025	HCBS	Q4101	HCPCS	APLIGRAF, PER SQ CM
XOHANA	Q3 2025	HCBS	Q5001	HCPCS	HOSPICE OR HOME HEALTH CARE PROVIDED IN PATIENT'S HOME OR RESIDENCE
XOHANA	Q3 2025	HCBS	Q5004	HCPCS	HOSPICE CARE PROVIDED IN SKILLED NURSING FACILITY (SNF)
XOHANA	Q3 2025	HCBS	S5102	HCPCS	DAY CARE SERVICES, ADULT; PER DIEM
XOHANA	Q3 2025	HCBS	S5130	HCPCS	HOMEMAKER SERVICE, NOS; PER 15 MINUTES
XOHANA	Q3 2025	HCBS	S5135	HCPCS	COMPANION CARE, ADULT (E.G., IADL/ADL); PER 15 MINUTES
XOHANA	Q3 2025	HCBS	S5140	HCPCS	FOSTER CARE, ADULT; PER DIEM
XOHANA	Q3 2025	HCBS	S5160	HCPCS	EMERGENCY RESPONSE SYSTEM; INSTALLATION AND TESTING
XOHANA	Q3 2025	HCBS	S5170	HCPCS	HOME DELIVERED MEALS, INCLUDING PREPARATION; PER MEAL
XOHANA	Q3 2025	HCBS	T1019	HCPCS	PERSONAL CARE SERVICES, PER 15 MINUTES, NOT FOR AN INPATIENT OR RESIDENT OF A HOSPITAL, NURSING FACILITY, ICF/MR OR IMD, PART OF
XOHANA	Q3 2025	HCBS	T2022	HCPCS	CASE MANAGEMENT, PER MONTH
XOHANA	Q3 2025	HCBS	T2028	HCPCS	SPECIALIZED SUPPLY, NOT OTHERWISE SPECIFIED, WAIVER
XOHANA	Q3 2025	HCBS	T2033	HCPCS	RESIDENTIAL CARE, NOT OTHERWISE SPECIFIED (NOS), WAIVER; PER DIEM
XOHANA	Q3 2025	HCBS	T4521	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, SMALL, EACH
XOHANA	Q3 2025	HCBS	T4522	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, MEDIUM, EACH
XOHANA	Q3 2025	HCBS	T4523	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, LARGE, EACH
XOHANA	Q3 2025	HCBS	T4525	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, SMALL SIZE, EACH
XOHANA	Q3 2025	HCBS	T4526	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, MEDIUM SIZE, EACH

XOHANA	Q3 2025	HCBS	T4527	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, LARGE SIZE, EACH
XOHANA	Q3 2025	HCBS	T4528	HCPCS	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, EXTRA LARGE SIZE, EACH
XOHANA	Q3 2025	HCBS	T4533	HCPCS	YOUTH SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, EACH
XOHANA	Q3 2025	HCBS	T4535	HCPCS	DISPOSABLE LINER/SHIELD/GUARD/PAD/UNDERGARMENT, FOR INCONTINENCE, EACH
XOHANA	Q3 2025	HCBS	T4541	HCPCS	INCONTINENCE PRODUCT, DISPOSABLE UNDERPAD, LARGE, EACH
XOHANA	Q3 2025	HCBS	V5261	HCPCS	HEARING AID, DIGITAL, BINAURAL, BTE
XOHANA	Q3 2025	HCBS	V5264	HCPCS	EAR MOLD/INSERT, NOT DISPOSABLE, ANY TYPE
XOHANA	Q3 2025	Home Health	99601	CPT	HOME INFUSION/SPECIALTY DRUG ADMINISTRATION, PER VISIT (UP TO 2 HOURS);
XOHANA	Q3 2025	Home Health	99602	CPT	HOME INFUSION/SPECIALTY DRUG ADMINISTRATION, PER VISIT (UP TO 2 HOURS); EACH ADDITIONAL HOUR (LIST SEPARATELY IN ADDITION
XOHANA	Q3 2025	Home Health	B4189	HCPCS	PARENTERAL NUTRITION SOLUTION: COMPOUNDED AMINO ACID AND CARBOHYDRATES W ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS
XOHANA	Q3 2025	Home Health	G0151	HCPCS	SERVICES PERFORMED BY A QUALIFIED PHYSICAL THERAPIST IN THE HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES
XOHANA	Q3 2025	Home Health	G0152	HCPCS	SERVICES PERFORMED BY A QUALIFIED OCCUPATIONAL THERAPIST IN THE HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES
XOHANA	Q3 2025	Home Health	G0153	HCPCS	SERVICES PERFORMED BY A QUALIFIED SPEECH-LANGUAGE PATHOLOGIST IN THE HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES
XOHANA	Q3 2025	Home Health	G0155	HCPCS	SERVICES OF CLINICAL SOCIAL WORKER IN HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES
XOHANA	Q3 2025	Home Health	G0156	HCPCS	SERVICES OF HOME HEALTH / HOSPICE AIDE IN HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES
XOHANA	Q3 2025	Home Health	G0157	HCPCS	SERVICES PERFORMED BY A QUALIFIED PHYSICAL THERAPIST ASSISTANT IN THE HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES
XOHANA	Q3 2025	Home Health	G0158	HCPCS	SERVICES PERFORMED BY A QUALIFIED OCCUPATIONAL THERAPIST ASSISTANT IN THE HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES
XOHANA	Q3 2025	Home Health	G0299	HCPCS	DIRECT SKILLED NURSING SERVICES OF A REGISTERED NURSE (RN) IN THE HOME HEALTH OR HOSPICE SETTINGS, EACH 15 MINUTES
XOHANA	Q3 2025	Home Health	G0300	HCPCS	DIRECT SKILLED NURSING SERVICES OF A LICENSED PRACTICAL NURSE (LPN) IN THE HOME HEALTH OR HOSPICE SETTINGS, EACH 15 MINUTES
XOHANA	Q3 2025	Home Health	G0493	HCPCS	SKILLED SERVICES RN OBV & ASMT PT COND EA 15 MIN
XOHANA	Q3 2025	Home Health	G0495	HCPCS	SKD SRVC RN TRAIN&/EDU PT/FAM HH/HOSPC EA 15 MIN
XOHANA	Q3 2025	Home Health	G0529	HCPCS	IN-HOME RESPITE CARE 4-HOUR UNIT
XOHANA	Q3 2025	Home Health	G2168	HCPCS	SERVICES PRFRM BY PT ASST HH SETTING EA 15 MIN
XOHANA	Q3 2025	Home Health	G2169	HCPCS	SERVICES PRFRM BY OT ASST HH SETTING EA 15 MIN
XOHANA	Q3 2025	Home Health	J0696	HCPCS	INJECTION, CEFTRIAXONE SODIUM, PER 250 MG
XOHANA	Q3 2025	Home Health	S5497	HCPCS	HOME INFUSION THERAPY, CATHETER CARE/MAINTENANCE, NOT OTHERWISE CLASSIFIED; INCLUDES ADMINISTRATIVE SERVICES PROFESSIONAL PHARMACY
XOHANA	Q3 2025	Home Health	S5498	HCPCS	HOME INFUSION THERAPY, CATHETER CARE/MAINTENANCE, SIMPLE (SINGLE LUMEN), INCLUDES ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY
XOHANA	Q3 2025	Home Health	S9124	HCPCS	NURSING CARE, IN THE HOME; BY LICENSED PRACTICAL NURSE, PER HOUR
XOHANA	Q3 2025	Home Health	S9338	HCPCS	HOME INFUSION THERAPY, IMMUNOTHERAPY, ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION & ALL NECESSARY
XOHANA	Q3 2025	Home Health	S9340	HCPCS	HOME THERAPY; ENTERAL NUTRITION; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUP
XOHANA	Q3 2025	Home Health	S9342	HCPCS	HOME THERAPY; ENTERAL NUTRITION VIA PUMP; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NEC
XOHANA	Q3 2025	Home Health	S9343	HCPCS	HOME THERAPY; ENTERAL NUTRITION VIA BOLUS; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL
XOHANA	Q3 2025	Home Health	S9359	HCPCS	HOME INFUSION THERAPY, ANTITUMOR NECROSIS FACTOR INTRAVENOUS THERAPY; (E.G., INFLIXIMAB); ADMINISTRATIVE SERVICES, PROFESSIONAL
XOHANA	Q3 2025	Home Health	S9365	HCPCS	HOME INFUSION THERAPY, TOTAL PARENTERAL NUTRITION (TPN); 1 LITER PER DAY, ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES
XOHANA	Q3 2025	Home Health	S9366	HCPCS	HOME INFUSION THERAPY, TOTAL PARENTERAL NUTRITION (TPN); MORE THAN 1 LITER BUT NO MORE THAN 2 LITERS PER DAY, ADMINISTRATIVE SERV
XOHANA	Q3 2025	Home Health	S9373	HCPCS	HOME INFUSION THERAPY, HYDRATION THERAPY; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NEC
XOHANA	Q3 2025	Home Health	S9379	HCPCS	HOME INFUSION THERAPY, INFUSION THERAPY, NOT OTHERWISE CLASSIFIED; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE
XOHANA	Q3 2025	Home Health	S9484	HCPCS	CRISIS INTERVENTION MENTAL HEALTH SERVICES, PER HOUR
XOHANA	Q3 2025	Home Health	S9494	HCPCS	HOME INFUSION THERAPY, ANTIBIOTIC, ANTIVIRAL, OR ANTIFUNGAL THERAPY; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE
XOHANA	Q3 2025	Home Health	S9500	HCPCS	HOME INFUSION THERAPY, ANTIBIOTIC, ANTIVIRAL, OR ANTIFUNGAL THERAPY; ONCE EVERY 24 HOURS; ADMINISTRATIVE SERVICES, PROFESSIONAL
XOHANA	Q3 2025	Home Health	S9502	HCPCS	HOME INFUSION THERAPY, ANTIBIOTIC, ANTIVIRAL, OR ANTIFUNGAL THERAPY; ONCE EVERY 8 HOURS, ADMINISTRATIVE SVCS, PROFESSIONAL PHAMACY
XOHANA	Q3 2025	Home Health	T2031	HCPCS	ASSISTED LIVING; WAIVER, PER DIEM
XOHANA	Q3 2025	Inpatient Hosp	55970	CPT	INTERSEX SURGERY; MALE TO FEMALE
XOHANA	Q3 2025	Inpatient Hosp	0643T	CPT	TRANSCATHETER L VENTR RESTORATION DEVICE IMPLTJ
XOHANA	Q3 2025	Inpatient Hosp	0644T	CPT	TCAT RMVL/DEBULK ICAR MASS SUCTION DEVICE PERQ
XOHANA	Q3 2025	Inpatient Hosp	0645T	CPT	TCAT IMPLANTATION CORONARY SINUS REDUCTION DEV
XOHANA	Q3 2025	Inpatient Hosp	0646T	CPT	TTVI/RPLCMT PROSTC VLV PERQ W/R HRT CATH AND ANGRPH
XOHANA	Q3 2025	Inpatient Hosp	0656T	CPT	ANTERIOR VERTEBRAL BODY TETHERING <7VRT SEGMENTS
XOHANA	Q3 2025	Inpatient Hosp	0657T	CPT	ANTERIOR VERTEBRAL BODY TETHERING 8+VRT SEGMENTS
XOHANA	Q3 2025	Inpatient Hosp	0659T	CPT	TCAT INTRA-C NFS SUPERSAT O2 W/PERQ C REVSC AMI
XOHANA	Q3 2025	Inpatient Hosp	0665T	CPT	DONOR HYSTERECTOMY OPEN FROM LIVING DONOR
XOHANA	Q3 2025	Inpatient Hosp	0666T	CPT	DONOR HYSTERECTOMY LAPS/ROBOTIC FROM LIV DONOR
XOHANA	Q3 2025	Inpatient Hosp	0667T	CPT	DONOR HYST RCP UTER ALGRFT TRNSPLJ CDVR/LIV
XOHANA	Q3 2025	Inpatient Hosp	0668T	CPT	BACKBENCH PREP CDVR/LIV DONOR UTERINE ALLOGRAFT
XOHANA	Q3 2025	Inpatient Hosp	0669T	CPT	BCKBNCH RCNSTJ CDVR/LIV DON UTER ALGRFT VEN ANST
XOHANA	Q3 2025	Inpatient Hosp	0670T	CPT	BCKBNCH RCNSTJ CDVR/LIV DON UTER ALGRFT ART ANST
XOHANA	Q3 2025	Inpatient Hosp	0867T	CPT	TPLA B9 PROSTATIC HYPERPLASIA PRST8 VOL>=50 ML
XOHANA	Q3 2025	Inpatient Hosp	0868T	CPT	HIGH-RESOLUTION GASTRIC ELECTROPHYSIOLOGY MAPG
XOHANA	Q3 2025	Inpatient Hosp	0870T	CPT	IMPLANTATION SUBQ PERITONEAL ASCITES PUMP SYS
XOHANA	Q3 2025	Inpatient Hosp	0871T	CPT	REPLACEMENT SUBCUTANEOUS PERITONEAL ASCITES PUMP
XOHANA	Q3 2025	Inpatient Hosp	0872T	CPT	RPLCMT INDWELLING BLADDER & PERITONEAL CATHETERS
XOHANA	Q3 2025	Inpatient Hosp	0873T	CPT	REVJ SUBQ IMPL PERITONEAL ASCITES PUMP SYSTEM
XOHANA	Q3 2025	Inpatient Hosp	0874T	CPT	REMOVAL PERITONEAL ASCITES PUMP SYSTEM
XOHANA	Q3 2025	Inpatient Hosp	0876T	CPT	DUPLEX SCAN HEMODIALYSIS FISTULA CPTR AIDED LMTD
XOHANA	Q3 2025	Inpatient Hosp	0877T	CPT	AUGMNT ALYS CH CT IMG DATA ILD WO CNCRNT CT EXAM
XOHANA	Q3 2025	Inpatient Hosp	0878T	CPT	AUGMNT ALYS CH CT IMG DATA ILD W/CNCRNT CT EXAM
XOHANA	Q3 2025	Inpatient Hosp	0879T	CPT	AUGMNT ALYS CH CT IMG DATA ILD DATA PREP&TRNSMS
XOHANA	Q3 2025	Inpatient Hosp	0880T	CPT	AUGMNT ALYS CH CT IMG DATA ILD PHYS/QHP I&R
XOHANA	Q3 2025	Inpatient Hosp	0881T	CPT	CRTX ORAL CAVITY TEMP REGULATED FLU COOLING SYS
XOHANA	Q3 2025	Inpatient Hosp	0884T	CPT	ESPHGSC FLX TRNSORL 1ST TNDSC DILAT RX BALO CATH
XOHANA	Q3 2025	Inpatient Hosp	0885T	CPT	COLSC FLX TRNSORL 1ST TNDSC DILAT RX BALO CATH
XOHANA	Q3 2025	Inpatient Hosp	0886T	CPT	SGMDSC FLX TRNSORL 1ST TNDSC DILAT RX BALO CATH
XOHANA	Q3 2025	Inpatient Hosp	0888T	CPT	HISTOTRIPSY MALIGNANT RENAL TISSUE W/IMG GDN
XOHANA	Q3 2025	Inpatient Hosp	0893T	CPT	N-INVAS ASSMT BLD OXY GAS XCHNG EFF&CARDRESP I&R
XOHANA	Q3 2025	Inpatient Hosp	0897T	CPT	N-INVAS AUGMNT ARRHYT ALYS QUAN CAR ARRHYT SIMUL
XOHANA	Q3 2025	Inpatient Hosp	0898T	CPT	NONINVASIVE PROSTATE CANCER ESTIMATION MAP
XOHANA	Q3 2025	Inpatient Hosp	0899T	CPT	N-INVAS DETER AQMBF AUGMNT ALG ALYS DATASET CMR
XOHANA	Q3 2025	Inpatient Hosp	0900T	CPT	N-INVAS EST AQMBF ASSITIVE ALG ALYS DATASET CMR
XOHANA	Q3 2025	Inpatient Hosp	11446	CPT	EXCISION, OTHER BENIGN LESION INCLUDING MARGINS, EXCEPT SKIN TAG (UNLESS LISTED ELSEWHERE), FACE, EARS, EYELIDS, NOSE, LIP
XOHANA	Q3 2025	Inpatient Hosp	11604	CPT	EXCISION, MALIGNANT LESION INCLUDING MARGINS, TRUNK, ARMS, OR LEGS; EXCISED DIAMETER 3.1 TO 4.0 CM
XOHANA	Q3 2025	Inpatient Hosp	11646	CPT	EXCISION, MALIGNANT LESION INCLUDING MARGINS, FACE, EARS, EYELIDS, NOSE, LIPS; EXCISED DIAMETER OVER 4.0 CM
XOHANA	Q3 2025	Inpatient Hosp	15004	CPT	SURGICAL PREPARATION OR CREATION OF RECIPIENT SITE BY EXCISION OF OPEN WOUNDS, BURN ESCHAR, OR SCAR (INCLUDING SUBCUTANEOU
XOHANA	Q3 2025	Inpatient Hosp	15005	CPT	SURGICAL PREPARATION OR CREATION OF RECIPIENT SITE BY EXCISION OF OPEN WOUNDS, BURN ESCHAR, OR SCAR (INCLUDING SUBCUTANEOU
XOHANA	Q3 2025	Inpatient Hosp	15101	CPT	SPLIT-THICKNESS AUTOGRAFT, TRUNK, ARMS, LEGS; EACH ADDITIONAL 100 SQ CM, OR EACH ADDITIONAL 1% OF BODY AREA OF INFANTS AND
XOHANA	Q3 2025	Inpatient Hosp	15120	CPT	SPLIT-THICKNESS AUTOGRAFT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HANDS, FEET, AND/OR MULTIPLE DIGITS
XOHANA	Q3 2025	Inpatient Hosp	15121	CPT	SPLIT-THICKNESS AUTOGRAFT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HANDS, FEET, AND/OR MULTIPLE DIGITS
XOHANA	Q3 2025	Inpatient Hosp	15734	CPT	MUSCLE, MYOCUTANEOUS, OR FASCIOCUTANEOUS FLAP; TRUNK
XOHANA	Q3 2025	Inpatient Hosp	15757	CPT	FREE SKIN FLAP WITH MICROVASCULAR ANASTOMOSIS
XOHANA	Q3 2025	Inpatient Hosp	15860	CPT	INTRAVENOUS INJECTION OF AGENT (EG, FLUORESCEIN) TO TEST VASCULAR FLOW IN FLAP OR GRAFT
XOHANA	Q3 2025	Inpatient Hosp	15937	CPT	EXCISION, SACRAL PRESSURE ULCER, IN PREPARATION FOR MUSCLE OR MYOCUTANEOUS FLAP OR SKIN GRAFT CLOSURE; WITH OSTECTOMY
XOHANA	Q3 2025	Inpatient Hosp	20650	CPT	INSERTION OF WIRE OR PIN WITH APPLICATION OF SKELETAL TRACTION, INCLUDING REMOVAL (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Inpatient Hosp	20661	CPT	APPLICATION OF HALO, INCLUDING REMOVAL; CRANIAL
XOHANA	Q3 2025	Inpatient Hosp	20664	CPT	APPLICATION OF HALO, INCLUDING REMOVAL, CRANIAL, 6 OR MORE PINS PLACED, FOR THIN SKULL OSTEOLOGY (EG, PEDIATRIC PATIENTS,
XOHANA	Q3 2025	Inpatient Hosp	20692	CPT	APPLICATION OF A MULTIPLANE (PINS OR WIRES IN MORE THAN ONE PLANE), UNILATERAL, EXTERNAL FIXATION SYSTEM (EG, ILIZAROV, MO
XOHANA	Q3 2025	Inpatient Hosp	20930	CPT	ALLOGRAFT FOR SPINE SURGERY ONLY; MORSELIZED (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
XOHANA	Q3 2025	Inpatient Hosp	20936	CPT	AUTOGRAFT FOR SPINE SURGERY ONLY (INCLUDES HARVESTING THE GRAFT); LOCAL (EG, RIBS, SPINOUS PROCESS, OR LAMINAR FRAGMENTS)
XOHANA	Q3 2025	Inpatient Hosp	20969	CPT	FREE OSTEOCUTANEOUS FLAP WITH MICROVASCULAR ANASTOMOSIS; OTHER THAN ILIAC CREST, METATARSAL, OR GREAT TOE
XOHANA	Q3 2025	Inpatient Hosp	21175	CPT	RECONSTRUCTION, BIFRONTAL, SUPERIOR-LATERAL ORBITAL RIMS AND LOWER FOREHEAD, ADVANCEMENT OR ALTERATION (EG, PLAGIOCEPHALY,

XOHANA	Q3 2025	Inpatient Hosp	21182	CPT	RECONSTRUCTION OF ORBITAL WALLS, RIMS, FOREHEAD, NASOETHMOID COMPLEX FOLLOWING INTRA- AND EXTRACRANIAL EXCISION OF BENIGN
XOHANA	Q3 2025	Inpatient Hosp	21627	CPT	STERNAL DEBRIDEMENT
XOHANA	Q3 2025	Inpatient Hosp	22015	CPT	INCISION AND DRAINAGE, OPEN, OF DEEP ABSCESS (SUBFASCIAL), POSTERIOR SPINE; LUMBAR, SACRAL, OR LUMBOSACRAL
XOHANA	Q3 2025	Inpatient Hosp	22206	CPT	OSTEOTOMY OF SPINE, POSTERIOR OR POSTEROLATERAL APPROACH, THREE COLUMNS, ONE VERTEBRAL SEGMENT (EG, PEDICLE/VERTEBRAL BODY
XOHANA	Q3 2025	Inpatient Hosp	22212	CPT	OSTEOTOMY OF SPINE, POSTERIOR OR POSTEROLATERAL APPROACH, ONE VERTEBRAL SEGMENT; THORACIC
XOHANA	Q3 2025	Inpatient Hosp	22214	CPT	OSTEOTOMY OF SPINE, POSTERIOR OR POSTEROLATERAL APPROACH, ONE VERTEBRAL SEGMENT; LUMBAR
XOHANA	Q3 2025	Inpatient Hosp	22216	CPT	OSTEOTOMY OF SPINE, POSTERIOR OR POSTEROLATERAL APPROACH, ONE VERTEBRAL SEGMENT; EACH ADDITIONAL VERTEBRAL SEGMENT (LIST S
XOHANA	Q3 2025	Inpatient Hosp	22325	CPT	OPEN TREATMENT AND/OR REDUCTION OF VERTEBRAL FRACTURE(S) AND/OR DISLOCATION(S), POSTERIOR APPROACH, ONE FRACTURED VERTEBRA
XOHANA	Q3 2025	Inpatient Hosp	22533	CPT	ARTHRODESIS, LATERAL EXTRACAVITARY TECHNIQUE, INCLUDING MINIMAL DISCECTOMY TO PREPARE INTERSPACE (OTHER THAN FOR DECOMPRES
XOHANA	Q3 2025	Inpatient Hosp	22554	CPT	ARTHRODESIS, ANTERIOR INTERBODY TECHNIQUE, INCLUDING MINIMAL DISCECTOMY TO PREPARE INTERSPACE (OTHER THAN FOR DECOMPRESSIO
XOHANA	Q3 2025	Inpatient Hosp	22585	CPT	ARTHRODESIS, ANTERIOR INTERBODY TECHNIQUE, INCLUDING MINIMAL DISCECTOMY TO PREPARE INTERSPACE (OTHER THAN FOR DECOMPRESSIO
XOHANA	Q3 2025	Inpatient Hosp	22595	CPT	ARTHRODESIS, POSTERIOR TECHNIQUE, ATLAS-AXIS (C1-C2)
XOHANA	Q3 2025	Inpatient Hosp	22612	CPT	ARTHRODESIS, POSTERIOR OR POSTEROLATERAL TECHNIQUE, SINGLE LEVEL; LUMBAR (WITH OR WITHOUT LATERAL TRANSVERSE TECHNIQUE)
XOHANA	Q3 2025	Inpatient Hosp	22630	CPT	ARTHRODESIS, POSTERIOR INTERBODY TECHNIQUE, INCLUDING LAMINECTOMY AND/OR DISCECTOMY TO PREPARE INTERSPACE (OTHER THAN FOR
XOHANA	Q3 2025	Inpatient Hosp	22632	CPT	ARTHRODESIS, POSTERIOR INTERBODY TECHNIQUE, INCLUDING LAMINECTOMY AND/OR DISCECTOMY TO PREPARE INTERSPACE (OTHER THAN FOR
XOHANA	Q3 2025	Inpatient Hosp	22633	CPT	ARTHRODESIS, COMBINED POSTERIOR OR POSTEROLATERAL TECHNIQUE WITH POSTERIOR INTERBODY TECHNIQUE INCLUDING LAMINECTOMY AND/OR DISCEC
XOHANA	Q3 2025	Inpatient Hosp	22800	CPT	ARTHRODESIS, POSTERIOR, FOR SPINAL DEFORMITY, WITH OR WITHOUT CAST; UP TO 6 VERTEBRAL SEGMENTS
XOHANA	Q3 2025	Inpatient Hosp	22802	CPT	ARTHRODESIS, POSTERIOR, FOR SPINAL DEFORMITY, WITH OR WITHOUT CAST; 7 TO 12 VERTEBRAL SEGMENTS
XOHANA	Q3 2025	Inpatient Hosp	22804	CPT	ARTHRODESIS, POSTERIOR, FOR SPINAL DEFORMITY, WITH OR WITHOUT CAST; 13 OR MORE VERTEBRAL SEGMENTS
XOHANA	Q3 2025	Inpatient Hosp	22810	CPT	ARTHRODESIS, ANTERIOR, FOR SPINAL DEFORMITY, WITH OR WITHOUT CAST; 4 TO 7 VERTEBRAL SEGMENTS
XOHANA	Q3 2025	Inpatient Hosp	22840	CPT	POSTERIOR NON-SEGMENTAL INSTRUMENTATION (EG, HARRINGTON ROD TECHNIQUE, PEDICLE FIXATION ACROSS ONE INTERSPACE, ATLANTOAXIA
XOHANA	Q3 2025	Inpatient Hosp	22842	CPT	POSTERIOR SEGMENTAL INSTRUMENTATION (EG, PEDICLE FIXATION, DUAL RODS WITH MULTIPLE HOOKS AND SUBLAMINAR WIRES); 3 TO 6 VER
XOHANA	Q3 2025	Inpatient Hosp	22843	CPT	POSTERIOR SEGMENTAL INSTRUMENTATION (EG, PEDICLE FIXATION, DUAL RODS WITH MULTIPLE HOOKS AND SUBLAMINAR WIRES); 7 TO 12 VE
XOHANA	Q3 2025	Inpatient Hosp	22844	CPT	POSTERIOR SEGMENTAL INSTRUMENTATION (EG, PEDICLE FIXATION, DUAL RODS WITH MULTIPLE HOOKS AND SUBLAMINAR WIRES); 13 OR MORE
XOHANA	Q3 2025	Inpatient Hosp	22846	CPT	ANTERIOR INSTRUMENTATION; 4 TO 7 VERTEBRAL SEGMENTS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
XOHANA	Q3 2025	Inpatient Hosp	22848	CPT	PELVIC FIXATION (ATTACHMENT OF CAUDAL END OF INSTRUMENTATION TO PELVIC BONY STRUCTURES) OTHER THAN SACRUM (LIST SEPARATELY
XOHANA	Q3 2025	Inpatient Hosp	22849	CPT	REINSERTION OF SPINAL FIXATION DEVICE
XOHANA	Q3 2025	Inpatient Hosp	22854	CPT	INSERTION OF INTERVERTEBRAL BIOMECHANICAL DEVICE(S) (EG, SYNTHETIC CAGE, MESH) WITH INTEGRAL ANTERIOR INSTRUMENTATION FOR DEVICE ANCHORING (EG, SCREWS, FLAN
XOHANA	Q3 2025	Inpatient Hosp	22855	CPT	REMOVAL OF ANTERIOR INSTRUMENTATION
XOHANA	Q3 2025	Inpatient Hosp	22857	CPT	TOTAL DISC ARTHROPLASTY (ARTIFICIAL DISC), ANTERIOR APPROACH, INCLUDING DISCECTOMY TO PREPARE INTERSPACE (OTHER THAN FOR D
XOHANA	Q3 2025	Inpatient Hosp	22859	CPT	INSERTION OF INTERVERTEBRAL BIOMECHANICAL DEVICE(S) (EG, SYNTHETIC CAGE, MESH, METHYLMETHACRYLATE) TO INTERVERTEBRAL DISC SPACE OR VERTEBRAL BODY DEFECT WI
XOHANA	Q3 2025	Inpatient Hosp	22861	CPT	REVJ RPLCMT DISC ARTHROPLASTY ANT 1 NTRSPC CRV REVISION INCLUDING REPLACEMENT OF TOTAL DISC ARTHROPLASTY (ARTIFICIAL DISC), ANTER
XOHANA	Q3 2025	Inpatient Hosp	22900	CPT	EXCISION, ABDOMINAL WALL TUMOR, SUBFASCIAL (EG, DESMOID)
XOHANA	Q3 2025	Inpatient Hosp	22901	CPT	EXCISION, TUMOR, SOFT TISSUE OF ABDOMINAL WALL, SUBFASCIAL (EG, INTRAMUSCULAR); 5 CM OR GREATER
XOHANA	Q3 2025	Inpatient Hosp	24341	CPT	REPAIR, TENDON OR MUSCLE, UPPER ARM OR ELBOW, EACH TENDON OR MUSCLE, PRIMARY OR SECONDARY (EXCLUDES ROTATOR CUFF)
XOHANA	Q3 2025	Inpatient Hosp	24665	CPT	OPEN TREATMENT OF RADIAL HEAD OR NECK FRACTURE, INCLUDES INTERNAL FIXATION OR RADIAL HEAD EXCISION, WHEN PERFORMED;
XOHANA	Q3 2025	Inpatient Hosp	26477	CPT	SHORTENING OF TENDON, EXTENSOR, HAND OR FINGER, EACH TENDON
XOHANA	Q3 2025	Inpatient Hosp	26478	CPT	LENGTHENING OF TENDON, FLEXOR, HAND OR FINGER, EACH TENDON
XOHANA	Q3 2025	Inpatient Hosp	26850	CPT	ARTHRODESIS, METACARPOPHALANGEAL JOINT, WITH OR WITHOUT INTERNAL FIXATION;
XOHANA	Q3 2025	Inpatient Hosp	27006	CPT	TENOTOMY, ABDUCTORS AND/OR EXTENSOR(S) OF HIP, OPEN (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Inpatient Hosp	27043	CPT	EXCISION, TUMOR, SOFT TISSUE OF PELVIS AND HIP AREA, SUBCUTANEOUS; 3 CM OR GREATER
XOHANA	Q3 2025	Inpatient Hosp	27095	CPT	INJECTION PROCEDURE FOR HIP ARTHROGRAPHY; WITH ANESTHESIA
XOHANA	Q3 2025	Inpatient Hosp	27134	CPT	REVISION OF TOTAL HIP ARTHROPLASTY; BOTH COMPONENTS, WITH OR WITHOUT AUTOGRAFT OR ALLOGRAFT
XOHANA	Q3 2025	Inpatient Hosp	27137	CPT	REVISION OF TOTAL HIP ARTHROPLASTY; ACETABULAR COMPONENT ONLY, WITH OR WITHOUT AUTOGRAFT OR ALLOGRAFT
XOHANA	Q3 2025	Inpatient Hosp	27138	CPT	REVISION OF TOTAL HIP ARTHROPLASTY; FEMORAL COMPONENT ONLY, WITH OR WITHOUT ALLOGRAFT
XOHANA	Q3 2025	Inpatient Hosp	27146	CPT	OSTEOTOMY, ILIAC, ACETABULAR OR INNOMINATE BONE;
XOHANA	Q3 2025	Inpatient Hosp	27147	CPT	OSTEOTOMY, ILIAC, ACETABULAR OR INNOMINATE BONE; WITH OPEN REDUCTION OF HIP
XOHANA	Q3 2025	Inpatient Hosp	27165	CPT	OSTEOTOMY, INTERTROCHANTERIC OR SUBTROCHANTERIC INCLUDING INTERNAL OR EXTERNAL FIXATION AND/OR CAST
XOHANA	Q3 2025	Inpatient Hosp	27236	CPT	OPEN TREATMENT OF FEMORAL FRACTURE, PROXIMAL END, NECK, INTERNAL FIXATION OR PROSTHETIC REPLACEMENT
XOHANA	Q3 2025	Inpatient Hosp	27258	CPT	OPEN TREATMENT OF SPONTANEOUS HIP DISLOCATION (DEVELOPMENTAL, INCLUDING CONGENITAL OR PATHOLOGICAL), REPLACEMENT OF FEMORA
XOHANA	Q3 2025	Inpatient Hosp	27299	CPT	UNLISTED PROCEDURE, PELVIS OR HIP JOINT
XOHANA	Q3 2025	Inpatient Hosp	27355	CPT	EXCISION OR CURETTAGE OF BONE CYST OR BENIGN TUMOR OF FEMUR;
XOHANA	Q3 2025	Inpatient Hosp	27394	CPT	LENGTHENING OF HAMSTRING TENDON; MULTIPLE TENDONS, ONE LEG
XOHANA	Q3 2025	Inpatient Hosp	27422	CPT	RECONSTRUCTION OF DISLOCATING PATELLA; WITH EXTENSOR REALIGNMENT AND/OR MUSCLE ADVANCEMENT OR RELEASE (EG, CAMPBELL, GOLDW
XOHANA	Q3 2025	Inpatient Hosp	27450	CPT	OSTEOTOMY, FEMUR, SHAFT OR SUPRACONDYLAR; WITH FIXATION
XOHANA	Q3 2025	Inpatient Hosp	27455	CPT	OSTEOTOMY, PROXIMAL TIBIA, INCLUDING FIBULAR EXCISION OR OSTEOTOMY (INCLUDES CORRECTION OF GENU VARUS (BOWLEG) OR GENU VAL
XOHANA	Q3 2025	Inpatient Hosp	27470	CPT	REPAIR, NONUNION OR MALUNION, FEMUR, DISTAL TO HEAD AND NECK; WITHOUT GRAFT (EG, COMPRESSION TECHNIQUE)
XOHANA	Q3 2025	Inpatient Hosp	27472	CPT	REPAIR, NONUNION OR MALUNION, FEMUR, DISTAL TO HEAD AND NECK; WITH ILIAC OR OTHER AUTOGENOUS BONE GRAFT (INCLUDES OBTAININ
XOHANA	Q3 2025	Inpatient Hosp	27475	CPT	ARREST, EPIPHYSEAL, ANY METHOD (EG, EPIPHYSIODESIS); DISTAL FEMUR
XOHANA	Q3 2025	Inpatient Hosp	27485	CPT	ARREST, HEMIEPIPHYSEAL, DISTAL FEMUR OR PROXIMAL TIBIA OR FIBULA (EG, GENU VARUS OR VALGUS)
XOHANA	Q3 2025	Inpatient Hosp	27488	CPT	REMOVAL OF PROSTHESIS, INCLUDING TOTAL KNEE PROSTHESIS, METHYLMETHACRYLATE WITH OR WITHOUT INSERTION OF SPACER, KNEE
XOHANA	Q3 2025	Inpatient Hosp	27590	CPT	AMPUTATION, THIGH, THROUGH FEMUR, ANY LEVEL;
XOHANA	Q3 2025	Inpatient Hosp	27606	CPT	TENOTOMY, PERCUTANEOUS, ACHILLES TENDON (SEPARATE PROCEDURE); GENERAL ANESTHESIA
XOHANA	Q3 2025	Inpatient Hosp	27685	CPT	LENGTHENING OR SHORTENING OF TENDON, LEG OR ANKLE; SINGLE TENDON (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Inpatient Hosp	27686	CPT	LENGTHENING OR SHORTENING OF TENDON, LEG OR ANKLE; MULTIPLE TENDONS (THROUGH SAME INCISION), EACH
XOHANA	Q3 2025	Inpatient Hosp	27690	CPT	TRANSFER OR TRANSPLANT OF SINGLE TENDON (WITH MUSCLE REDIRECTION OR REROUTING); SUPERFICIAL (EG, ANTERIOR TIBIAL EXTENSORS
XOHANA	Q3 2025	Inpatient Hosp	27880	CPT	AMPUTATION, LEG, THROUGH TIBIA AND FIBULA;
XOHANA	Q3 2025	Inpatient Hosp	28230	CPT	TENOTOMY, OPEN, TENDON FLEXOR; FOOT, SINGLE OR MULTIPLE TENDON(S) (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Inpatient Hosp	28270	CPT	CAPSULOTOMY; METATARSOPHALANGEAL JOINT, WITH OR WITHOUT TENORRHAPHY, EACH JOINT (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Inpatient Hosp	28300	CPT	OSTEOTOMY; CALCANEUS (EG, DWYER OR CHAMBERS TYPE PROCEDURE), WITH OR WITHOUT INTERNAL FIXATION
XOHANA	Q3 2025	Inpatient Hosp	28735	CPT	ARTHRODESIS, MIDTARSAL OR TARSOMETATARSAL, MULTIPLE OR TRANSVERSE; WITH OSTEOTOMY (EG, FLATFOOT CORRECTION)
XOHANA	Q3 2025	Inpatient Hosp	28810	CPT	AMPUTATION, METATARSAL, WITH TOE, SINGLE
XOHANA	Q3 2025	Inpatient Hosp	29325	CPT	APPLICATION OF HIP SPICA CAST; ONE AND ONE-HALF SPICA OR BOTH LEGS
XOHANA	Q3 2025	Inpatient Hosp	31290	CPT	NASAL/SINUS ENDOSCOPY, SURGICAL, WITH REPAIR OF CEREBROSPINAL FLUID LEAK; ETHMOID REGION
XOHANA	Q3 2025	Inpatient Hosp	31360	CPT	LARYNGECTOMY; TOTAL, WITHOUT RADICAL NECK DISSECTION
XOHANA	Q3 2025	Inpatient Hosp	31505	CPT	LARYNGOSCOPY, INDIRECT; DIAGNOSTIC (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Inpatient Hosp	31525	CPT	LARYNGOSCOPY DIRECT, WITH OR WITHOUT TRACHEOSCOPY; DIAGNOSTIC, EXCEPT NEWBORN
XOHANA	Q3 2025	Inpatient Hosp	31526	CPT	LARYNGOSCOPY DIRECT, WITH OR WITHOUT TRACHEOSCOPY; DIAGNOSTIC, WITH OPERATING MICROSCOPE OR TELESCOPE
XOHANA	Q3 2025	Inpatient Hosp	31600	CPT	TRACHEOSTOMY, PLANNED (SEPARATE PROCEDURE);
XOHANA	Q3 2025	Inpatient Hosp	31631	CPT	BRONCHOSCOPY, RIGID OR FLEXIBLE, WITH OR WITHOUT FLUOROSCOPIC GUIDANCE; WITH PLACEMENT OF TRACHEAL STENT(S) (INCLUDES TRAC
XOHANA	Q3 2025	Inpatient Hosp	31750	CPT	TRACHEOPLASTY; CERVICAL
XOHANA	Q3 2025	Inpatient Hosp	31825	CPT	SURGICAL CLOSURE TRACHEOSTOMY OR FISTULA; WITH PLASTIC REPAIR
XOHANA	Q3 2025	Inpatient Hosp	32100	CPT	THORACOTOMY, MAJOR; WITH EXPLORATION AND BIOPSY
XOHANA	Q3 2025	Inpatient Hosp	32141	CPT	THORACOTOMY, MAJOR; WITH EXCISION-PLICATION OF BULLAE, WITH OR WITHOUT ANY PLEURAL PROCEDURE
XOHANA	Q3 2025	Inpatient Hosp	32440	CPT	REMOVAL OF LUNG, TOTAL PNEUMONECTOMY;
XOHANA	Q3 2025	Inpatient Hosp	32480	CPT	REMOVAL OF LUNG, OTHER THAN TOTAL PNEUMONECTOMY; SINGLE LOBE (LOBECTOMY)
XOHANA	Q3 2025	Inpatient Hosp	32484	CPT	REMOVAL OF LUNG, OTHER THAN TOTAL PNEUMONECTOMY; SINGLE SEGMENT (SEGMENTECTOMY)
XOHANA	Q3 2025	Inpatient Hosp	32505	CPT	THORACOTOMY; WITH THERAPEUTIC WEDGE RESECTION (EG, MASS, NODULE), INITIAL
XOHANA	Q3 2025	Inpatient Hosp	32507	CPT	THORACOTOMY; WITH DIAGNOSTIC WEDGE RESECTION FOLLOWED BY ANATOMIC LUNG RESECTION (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY
XOHANA	Q3 2025	Inpatient Hosp	32650	CPT	THORACOSCOPY, SURGICAL; WITH PLEURODESIS (EG, MECHANICAL OR CHEMICAL)
XOHANA	Q3 2025	Inpatient Hosp	32662	CPT	THORACOSCOPY, SURGICAL; WITH EXCISION OF MEDIASTINAL CYST, TUMOR, OR MASS
XOHANA	Q3 2025	Inpatient Hosp	32663	CPT	THORACOSCOPY, SURGICAL; WITH LOBECTOMY, TOTAL OR SEGMENTAL
XOHANA	Q3 2025	Inpatient Hosp	32666	CPT	THORACOSCOPY, SURGICAL; WITH THERAPEUTIC WEDGE RESECTION (EG, MASS, NODULE), INITIAL UNILATERAL
XOHANA	Q3 2025	Inpatient Hosp	32667	CPT	THORACOSCOPY, SURGICAL; WITH THERAPEUTIC WEDGE RESECTION (EG, MASS OR NODULE), EACH ADDITIONAL RESECTION, IPSILATERAL (LIST SEPARA
XOHANA	Q3 2025	Inpatient Hosp	32668	CPT	THORACOSCOPY, SURGICAL; WITH DIAGNOSTIC WEDGE RESECTION FOLLOWED BY ANATOMIC LUNG RESECTION (LIST SEPARATELY IN ADDITION TO CODE F
XOHANA	Q3 2025	Inpatient Hosp	32669	CPT	THORACOSCOPY, SURGICAL; WITH REMOVAL OF A SINGLE LUNG SEGMENT (SEGMENTECTOMY)
XOHANA	Q3 2025	Inpatient Hosp	32670	CPT	THORACOSCOPY, SURGICAL; WITH REMOVAL OF 2 LOBES (BILOBECTOMY)
XOHANA	Q3 2025	Inpatient Hosp	32671	CPT	THORACOSCOPY, SURGICAL; WITH REMOVAL OF LUNG (PNEUMONECTOMY)

XOHANA	Q3 2025	Inpatient Hosp	32674	CPT	THORACOSCOPY, SURGICAL; WITH MEDIASTINAL AND REGIONAL LYMPHADENECTOMY (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
XOHANA	Q3 2025	Inpatient Hosp	33025	CPT	CREATION OF PERICARDIAL WINDOW OR PARTIAL RESECTION FOR DRAINAGE
XOHANA	Q3 2025	Inpatient Hosp	33223	CPT	RELOCATION OF SKIN POCKET FOR IMPLANTABLE DEFIBRILLATOR
XOHANA	Q3 2025	Inpatient Hosp	33241	CPT	REMOVAL OF IMPLANTABLE DEFIBRILLATOR PULSE GENERATOR ONLY
XOHANA	Q3 2025	Inpatient Hosp	33244	CPT	REMOVAL OF SINGLE OR DUAL CHAMBER IMPLANTABLE DEFIBRILLATOR ELECTRODE(S); BY TRANSVENOUS EXTRACTION
XOHANA	Q3 2025	Inpatient Hosp	33259	CPT	OPERATIVE TISSUE ABLATION AND RECONSTRUCTION OF ATRIA, PERFORMED AT THE TIME OF OTHER CARDIAC PROCEDURE(S), EXTENSIVE (EG,
XOHANA	Q3 2025	Inpatient Hosp	33305	CPT	REPAIR OF CARDIAC WOUND; WITH CARDIOPULMONARY BYPASS
XOHANA	Q3 2025	Inpatient Hosp	33310	CPT	CARDIOTOMY, EXPLORATORY (INCLUDES REMOVAL OF FOREIGN BODY, ATRIAL OR VENTRICULAR THROMBUS); WITHOUT BYPASS
XOHANA	Q3 2025	Inpatient Hosp	33315	CPT	CARDIOTOMY, EXPLORATORY (INCLUDES REMOVAL OF FOREIGN BODY, ATRIAL OR VENTRICULAR THROMBUS); WITH CARDIOPULMONARY BYPASS
XOHANA	Q3 2025	Inpatient Hosp	33340	CPT	PERCUTANEOUS TRANSCATHETER CLOSURE OF THE LEFT ATRIAL APPENDAGE WITH ENDOCARDIAL IMPLANT, INCLUDING FLUOROSCOPY, TRANSSEPTAL PUNCTURE, CATHETER PLACEN
XOHANA	Q3 2025	Inpatient Hosp	33361	CPT	TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; PERCUTANEOUS FEMORAL ARTERY APPROACH
XOHANA	Q3 2025	Inpatient Hosp	33362	CPT	TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; OPEN FEMORAL ARTERY APPROACH
XOHANA	Q3 2025	Inpatient Hosp	33363	CPT	TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; OPEN AXILLARY ARTERY APPROACH
XOHANA	Q3 2025	Inpatient Hosp	33364	CPT	TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; OPEN ILIAC ARTERY APPROACH
XOHANA	Q3 2025	Inpatient Hosp	33365	CPT	TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; TRANSAORTIC APPROACH (EG, MEDIAN STERNOTOMY, MEDIASTINOT
XOHANA	Q3 2025	Inpatient Hosp	33366	CPT	TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; TRANSAPICAL EXPOSURE (EG, LEFT THORACOTOMY)
XOHANA	Q3 2025	Inpatient Hosp	33405	CPT	REPLACEMENT, AORTIC VALVE, WITH CARDIOPULMONARY BYPASS; WITH PROSTHETIC VALVE OTHER THAN HOMOGRAFT OR STENTLESS VALVE
XOHANA	Q3 2025	Inpatient Hosp	33418	CPT	TRANSCATHETER MITRAL VALVE REPAIR, PERCUTANEOUS APPROACH, INCLUDING TRANSSEPTAL PUNCTURE WHEN PERFORMED; INITIAL PROSTHESIS
XOHANA	Q3 2025	Inpatient Hosp	33419	CPT	TRANSCATHETER MITRAL VALVE REPAIR, PERCUTANEOUS APPROACH, INCLUDING TRANSSEPTAL PUNCTURE WHEN PERFORMED; ADDITIONAL PROSTHESIS(ES) DURING SAME SESSION
XOHANA	Q3 2025	Inpatient Hosp	33426	CPT	VALVULOPLASTY, MITRAL VALVE, WITH CARDIOPULMONARY BYPASS; WITH PROSTHETIC RING
XOHANA	Q3 2025	Inpatient Hosp	33427	CPT	VALVULOPLASTY, MITRAL VALVE, WITH CARDIOPULMONARY BYPASS; RADICAL RECONSTRUCTION, WITH OR WITHOUT RING
XOHANA	Q3 2025	Inpatient Hosp	33430	CPT	REPLACEMENT, MITRAL VALVE, WITH CARDIOPULMONARY BYPASS
XOHANA	Q3 2025	Inpatient Hosp	33464	CPT	VALVULOPLASTY, TRICUSPID VALVE; WITH RING INSERTION
XOHANA	Q3 2025	Inpatient Hosp	33465	CPT	REPLACEMENT, TRICUSPID VALVE, WITH CARDIOPULMONARY BYPASS
XOHANA	Q3 2025	Inpatient Hosp	33502	CPT	REPAIR OF ANOMALOUS CORONARY ARTERY FROM PULMONARY ARTERY ORIGIN; BY LIGATION
XOHANA	Q3 2025	Inpatient Hosp	33508	CPT	ENDOSCOPY, SURGICAL, INCLUDING VIDEO-ASSISTED HARVEST OF VEIN(S) FOR CORONARY ARTERY BYPASS PROCEDURE (LIST SEPARATELY IN
XOHANA	Q3 2025	Inpatient Hosp	33510	CPT	CORONARY ARTERY BYPASS, VEIN ONLY; SINGLE CORONARY VENOUS GRAFT
XOHANA	Q3 2025	Inpatient Hosp	33511	CPT	CORONARY ARTERY BYPASS, VEIN ONLY; TWO CORONARY VENOUS GRAFTS
XOHANA	Q3 2025	Inpatient Hosp	33512	CPT	CORONARY ARTERY BYPASS, VEIN ONLY; THREE CORONARY VENOUS GRAFTS
XOHANA	Q3 2025	Inpatient Hosp	33513	CPT	CORONARY ARTERY BYPASS, VEIN ONLY; FOUR CORONARY VENOUS GRAFTS
XOHANA	Q3 2025	Inpatient Hosp	33514	CPT	CORONARY ARTERY BYPASS, VEIN ONLY; FIVE CORONARY VENOUS GRAFTS
XOHANA	Q3 2025	Inpatient Hosp	33516	CPT	CORONARY ARTERY BYPASS, VEIN ONLY; SIX OR MORE CORONARY VENOUS GRAFTS
XOHANA	Q3 2025	Inpatient Hosp	33518	CPT	CORONARY ARTERY BYPASS, USING VENOUS GRAFT(S) AND ARTERIAL GRAFT(S); TWO VENOUS GRAFTS (LIST SEPARATELY IN ADDITION TO COD
XOHANA	Q3 2025	Inpatient Hosp	33519	CPT	CORONARY ARTERY BYPASS, USING VENOUS GRAFT(S) AND ARTERIAL GRAFT(S); THREE VENOUS GRAFTS (LIST SEPARATELY IN ADDITION TO C
XOHANA	Q3 2025	Inpatient Hosp	33521	CPT	CORONARY ARTERY BYPASS, USING VENOUS GRAFT(S) AND ARTERIAL GRAFT(S); FOUR VENOUS GRAFTS (LIST SEPARATELY IN ADDITION TO CO
XOHANA	Q3 2025	Inpatient Hosp	33533	CPT	CORONARY ARTERY BYPASS, USING ARTERIAL GRAFT(S); SINGLE ARTERIAL GRAFT
XOHANA	Q3 2025	Inpatient Hosp	33534	CPT	CORONARY ARTERY BYPASS, USING ARTERIAL GRAFT(S); TWO CORONARY ARTERIAL GRAFTS
XOHANA	Q3 2025	Inpatient Hosp	33535	CPT	CORONARY ARTERY BYPASS, USING ARTERIAL GRAFT(S); THREE CORONARY ARTERIAL GRAFTS
XOHANA	Q3 2025	Inpatient Hosp	33617	CPT	REPAIR OF COMPLEX CARDIAC ANOMALIES (EG, SINGLE VENTRICLE) BY MODIFIED FONTAN PROCEDURE
XOHANA	Q3 2025	Inpatient Hosp	33641	CPT	REPAIR ATRIAL SEPTAL DEFECT, SECUNDUM, WITH CARDIOPULMONARY BYPASS, WITH OR WITHOUT PATCH
XOHANA	Q3 2025	Inpatient Hosp	33670	CPT	REPAIR OF COMPLETE ATRIOVENTRICULAR CANAL, WITH OR WITHOUT PROSTHETIC VALVE
XOHANA	Q3 2025	Inpatient Hosp	33675	CPT	CLOSURE OF MULTIPLE VENTRICULAR SEPTAL DEFECTS;
XOHANA	Q3 2025	Inpatient Hosp	33681	CPT	CLOSURE OF SINGLE VENTRICULAR SEPTAL DEFECT, WITH OR WITHOUT PATCH;
XOHANA	Q3 2025	Inpatient Hosp	33692	CPT	COMPLETE REPAIR TETRALOGY OF FALLOT WITHOUT PULMONARY ATRESIA;
XOHANA	Q3 2025	Inpatient Hosp	33697	CPT	COMPLETE REPAIR TETRALOGY OF FALLOT WITH PULMONARY ATRESIA INCLUDING CONSTRUCTION OF CONDUIT FROM RIGHT VENTRICLE TO PULMO
XOHANA	Q3 2025	Inpatient Hosp	33851	CPT	EXCISION OF COARCTATION OF AORTA, WITH OR WITHOUT ASSOCIATED PATENT DUCTUS ARTERIOSUS; REPAIR USING EITHER LEFT SUBCLAVIAN
XOHANA	Q3 2025	Inpatient Hosp	33883	CPT	PLACEMENT OF PROXIMAL EXTENSION PROSTHESIS FOR ENDOVASCULAR REPAIR OF DESCENDING THORACIC AORTA (EG, ANEURYSM, PSEUDOANEUR
XOHANA	Q3 2025	Inpatient Hosp	33917	CPT	REPAIR OF PULMONARY ARTERY STENOSIS BY RECONSTRUCTION WITH PATCH OR GRAFT
XOHANA	Q3 2025	Inpatient Hosp	34701	CPT	ENDOVASCULAR REPAIR OF INFRARENAL AORTA BY DEPLOYMENT OF AN AORTO-AORTIC TUBE ENDOGRAFT INCLUDING PRE-PROCEDURE SIZING AND DEVICE SELECTION, ALL NONSELE
XOHANA	Q3 2025	Inpatient Hosp	34702	CPT	ENDOVASCULAR REPAIR OF INFRARENAL AORTA BY DEPLOYMENT OF AN AORTO-AORTIC TUBE ENDOGRAFT INCLUDING PRE-PROCEDURE SIZING AND DEVICE SELECTION, ALL NONSELE
XOHANA	Q3 2025	Inpatient Hosp	34703	CPT	ENDOVASCULAR REPAIR OF INFRARENAL AORTA AND/OR ILIAC ARTERY(IES) BY DEPLOYMENT OF AN AORTO-UNI-ILIAC ENDOGRAFT INCLUDING PRE-PROCEDURE SIZING AND DEVICE SE
XOHANA	Q3 2025	Inpatient Hosp	34704	CPT	ENDOVASCULAR REPAIR OF INFRARENAL AORTA AND/OR ILIAC ARTERY(IES) BY DEPLOYMENT OF AN AORTO-UNI-ILIAC ENDOGRAFT INCLUDING PRE-PROCEDURE SIZING AND DEVICE SE
XOHANA	Q3 2025	Inpatient Hosp	34705	CPT	ENDOVASCULAR REPAIR OF INFRARENAL AORTA AND/OR ILIAC ARTERY(IES) BY DEPLOYMENT OF AN AORTO-BI-ILIAC ENDOGRAFT INCLUDING PRE-PROCEDURE SIZING AND DEVICE SEL
XOHANA	Q3 2025	Inpatient Hosp	34706	CPT	ENDOVASCULAR REPAIR OF INFRARENAL AORTA AND/OR ILIAC ARTERY(IES) BY DEPLOYMENT OF AN AORTO-BI-ILIAC ENDOGRAFT INCLUDING PRE-PROCEDURE SIZING AND DEVICE SEL
XOHANA	Q3 2025	Inpatient Hosp	34707	CPT	ENDOVASCULAR REPAIR OF ILIAC ARTERY BY DEPLOYMENT OF AN ILIO-ILIAC TUBE ENDOGRAFT INCLUDING PRE-PROCEDURE SIZING AND DEVICE SELECTION, ALL NONSELECTIVE CATH
XOHANA	Q3 2025	Inpatient Hosp	34708	CPT	ENDOVASCULAR REPAIR OF ILIAC ARTERY BY DEPLOYMENT OF AN ILIO-ILIAC TUBE ENDOGRAFT INCLUDING PRE-PROCEDURE SIZING AND DEVICE SELECTION, ALL NONSELECTIVE CATH
XOHANA	Q3 2025	Inpatient Hosp	34812	CPT	OPEN FEMORAL ARTERY EXPOSURE FOR DELIVERY OF ENDOVASCULAR PROSTHESIS, BY GROIN INCISION, UNILATERAL (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDU
XOHANA	Q3 2025	Inpatient Hosp	35011	CPT	DIRECT REPAIR OF ANEURYSM, PSEUDOANEURYSM, OR EXCISION (PARTIAL OR TOTAL) AND GRAFT INSERTION, WITH OR WITHOUT PATCH GRAFT
XOHANA	Q3 2025	Inpatient Hosp	35256	CPT	REPAIR BLOOD VESSEL WITH VEIN GRAFT; LOWER EXTREMITY
XOHANA	Q3 2025	Inpatient Hosp	35301	CPT	THROMBOENDARTERECTOMY, INCLUDING PATCH GRAFT, IF PERFORMED; CAROTID, VERTEBRAL, SUBCLAVIAN, BY NECK INCISION
XOHANA	Q3 2025	Inpatient Hosp	35302	CPT	THROMBOENDARTERECTOMY, INCLUDING PATCH GRAFT, IF PERFORMED; SUPERFICIAL FEMORAL ARTERY
XOHANA	Q3 2025	Inpatient Hosp	35355	CPT	THROMBOENDARTERECTOMY, INCLUDING PATCH GRAFT, IF PERFORMED; ILIOFEMORAL
XOHANA	Q3 2025	Inpatient Hosp	35371	CPT	THROMBOENDARTERECTOMY, INCLUDING PATCH GRAFT, IF PERFORMED; COMMON FEMORAL
XOHANA	Q3 2025	Inpatient Hosp	35372	CPT	THROMBOENDARTERECTOMY, INCLUDING PATCH GRAFT, IF PERFORMED; DEEP (PROFUNDA) FEMORAL
XOHANA	Q3 2025	Inpatient Hosp	35516	CPT	BYPASS GRAFT, WITH VEIN; SUBCLAVIAN-AXILLARY
XOHANA	Q3 2025	Inpatient Hosp	35525	CPT	BYPASS GRAFT, WITH VEIN; BRACHIAL-BRACHIAL
XOHANA	Q3 2025	Inpatient Hosp	35556	CPT	BYPASS GRAFT, WITH VEIN; FEMORAL-POPLITEAL
XOHANA	Q3 2025	Inpatient Hosp	35558	CPT	BYPASS GRAFT, WITH VEIN; FEMORAL-FEMORAL
XOHANA	Q3 2025	Inpatient Hosp	35566	CPT	BYPASS GRAFT, WITH VEIN; FEMORAL-ANTERIOR TIBIAL, POSTERIOR TIBIAL, PERONEAL ARTERY OR OTHER DISTAL VESSELS
XOHANA	Q3 2025	Inpatient Hosp	35572	CPT	HARVEST OF FEMOROPOPLITEAL VEIN, ONE SEGMENT, FOR VASCULAR RECONSTRUCTION PROCEDURE (EG, AORTIC, VENA CAVAL, CORONARY, PER
XOHANA	Q3 2025	Inpatient Hosp	35585	CPT	IN-SITU VEIN BYPASS; FEMORAL-ANTERIOR TIBIAL, POSTERIOR TIBIAL, OR PERONEAL ARTERY
XOHANA	Q3 2025	Inpatient Hosp	35600	CPT	HARVEST OF UPPER EXTREMITY ARTERY, ONE SEGMENT, FOR CORONARY ARTERY BYPASS PROCEDURE (LIST SEPARATELY IN ADDITION TO CODE
XOHANA	Q3 2025	Inpatient Hosp	35656	CPT	BYPASS GRAFT, WITH OTHER THAN VEIN; FEMORAL-POPLITEAL
XOHANA	Q3 2025	Inpatient Hosp	35903	CPT	EXCISION OF INFECTED GRAFT; EXTREMITY
XOHANA	Q3 2025	Inpatient Hosp	36010	CPT	INTRODUCTION OF CATHETER, SUPERIOR OR INFERIOR VENA CAVA
XOHANA	Q3 2025	Inpatient Hosp	36558	CPT	INSERTION OF TUNNELED CENTRALLY INSERTED CENTRAL VENOUS CATHETER, WITHOUT SUBCUTANEOUS PORT OR PUMP; AGE 5 YEARS OR OLDER
XOHANA	Q3 2025	Inpatient Hosp	36563	CPT	INSERTION OF TUNNELED CENTRALLY INSERTED CENTRAL VENOUS ACCESS DEVICE WITH SUBCUTANEOUS PUMP
XOHANA	Q3 2025	Inpatient Hosp	36571	CPT	INSERTION OF PERIPHERALLY INSERTED CENTRAL VENOUS ACCESS DEVICE, WITH SUBCUTANEOUS PORT; AGE 5 YEARS OR OLDER
XOHANA	Q3 2025	Inpatient Hosp	36830	CPT	CREATION OF ARTERIOVENOUS FISTULA BY OTHER THAN DIRECT ARTERIOVENOUS ANASTOMOSIS (SEPARATE PROCEDURE); NONAUTOGENOUS GRAFT
XOHANA	Q3 2025	Inpatient Hosp	37224	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL, POPLITEAL ARTERY(S), UNILATERAL; WITH TRANSLUMINAL ANGIOPLASTY
XOHANA	Q3 2025	Inpatient Hosp	37227	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL, POPLITEAL ARTERY(S), UNILATERAL; WITH TRANSLUMINAL STENT PLACEMENT
XOHANA	Q3 2025	Inpatient Hosp	37235	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL/PERONEAL ARTERY, UNILATERAL, EACH ADDITIONAL VESSEL; WITH TRANSLUMIN
XOHANA	Q3 2025	Inpatient Hosp	37237	CPT	TRANSCATHETER PLACEMENT OF AN INTRAVASCULAR STENT(S) (EXCEPT LOWER EXTREMITY, CERVICAL CAROTID, EXTRACRANIAL VERTEBRAL OR INTRATHO
XOHANA	Q3 2025	Inpatient Hosp	37238	CPT	TRANSCATHETER PLACEMENT OF AN INTRAVASCULAR STENT(S), OPEN OR PERCUTANEOUS, INCLUDING RADIOLOGICAL SUPERVISION AND INTERPRETATION
XOHANA	Q3 2025	Inpatient Hosp	37239	CPT	TRANSCATHETER PLACEMENT OF AN INTRAVASCULAR STENT(S), OPEN OR PERCUTANEOUS, INCLUDING RADIOLOGICAL SUPERVISION AND INTERPRETATION
XOHANA	Q3 2025	Inpatient Hosp	37241	CPT	VASCULAR EMBOLIZATION OR OCCLUSION, INCLUSIVE OF ALL RADIOLOGICAL SUPERVISION AND INTERPRETATION, INTRAPROCEDURAL ROADMAPPING, AND
XOHANA	Q3 2025	Inpatient Hosp	37248	CPT	TRANSLUMINAL BALLOON ANGIOPLASTY (EXCEPT DIALYSIS CIRCUIT), OPEN OR PERCUTANEOUS, INCLUDING ALL IMAGING AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NE
XOHANA	Q3 2025	Inpatient Hosp	37617	CPT	LIGATION, MAJOR ARTERY (EG, POST-TRAUMATIC, RUPTURE); ABDOMEN
XOHANA	Q3 2025	Inpatient Hosp	38100	CPT	SPLENECTOMY; TOTAL (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Inpatient Hosp	38101	CPT	SPLENECTOMY; PARTIAL (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Inpatient Hosp	38120	CPT	LAPAROSCOPY, SURGICAL, SPLENECTOMY
XOHANA	Q3 2025	Inpatient Hosp	38220	CPT	DIAGNOSTIC BONE MARROW; ASPIRATION(S)
XOHANA	Q3 2025	Inpatient Hosp	38221	CPT	DIAGNOSTIC BONE MARROW; BIOPSY(IES)
XOHANA	Q3 2025	Inpatient Hosp	38240	CPT	BONE MARROW OR BLOOD-DERIVED PERIPHERAL STEM CELL TRANSPLANTATION; ALLOGENIC
XOHANA	Q3 2025	Inpatient Hosp	38542	CPT	DISSECTION, DEEP JUGULAR NODE(S)
XOHANA	Q3 2025	Inpatient Hosp	38571	CPT	LAPAROSCOPY, SURGICAL; WITH BILATERAL TOTAL PELVIC LYMPHADENECTOMY
XOHANA	Q3 2025	Inpatient Hosp	38720	CPT	CERVICAL LYMPHADENECTOMY (COMPLETE)
XOHANA	Q3 2025	Inpatient Hosp	38724	CPT	CERVICAL LYMPHADENECTOMY (MODIFIED RADICAL NECK DISSECTION)

XOHANA	Q3 2025	Inpatient Hosp	39010	CPT	MEDIASTINOTOMY WITH EXPLORATION, DRAINAGE, REMOVAL OF FOREIGN BODY, OR BIOPSY; TRANSTHORACIC APPROACH, INCLUDING EITHER TR
XOHANA	Q3 2025	Inpatient Hosp	41130	CPT	GLOSSECTOMY; HEMIGLOSSECTOMY
XOHANA	Q3 2025	Inpatient Hosp	41150	CPT	GLOSSECTOMY; COMPOSITE PROCEDURE WITH RESECTION FLOOR OF MOUTH AND MANDIBULAR RESECTION, WITHOUT RADICAL NECK DISSECTION
XOHANA	Q3 2025	Inpatient Hosp	43191	CPT	ESOPHAGOSCOPY, RIGID, TRANSORAL; DIAGNOSTIC, INCLUDING COLLECTION OF SPECIMEN(S) BY BRUSHING OR WASHING WHEN PERFORMED (SEPARATE P
XOHANA	Q3 2025	Inpatient Hosp	43611	CPT	EXCISION, LOCAL; MALIGNANT TUMOR OF STOMACH
XOHANA	Q3 2025	Inpatient Hosp	43620	CPT	GASTRECTOMY, TOTAL; WITH ESOPHAGOENTEROSTOMY
XOHANA	Q3 2025	Inpatient Hosp	43631	CPT	GASTRECTOMY, PARTIAL, DISTAL; WITH GASTRODUODENOSTOMY
XOHANA	Q3 2025	Inpatient Hosp	43633	CPT	GASTRECTOMY, PARTIAL, DISTAL; WITH ROUX-EN-Y RECONSTRUCTION
XOHANA	Q3 2025	Inpatient Hosp	43644	CPT	LAPAROSCOPY, SURGICAL, GASTRIC RESTRICTIVE PROCEDURE; WITH GASTRIC BYPASS AND ROUX-EN-Y GASTROENTEROSTOMY (ROUX LIMB 150 C
XOHANA	Q3 2025	Inpatient Hosp	43653	CPT	LAPAROSCOPY, SURGICAL; GASTROSTOMY, WITHOUT CONSTRUCTION OF GASTRIC TUBE (EG, STAMM PROCEDURE) (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Inpatient Hosp	43659	CPT	UNLISTED LAPAROSCOPY PROCEDURE, STOMACH
XOHANA	Q3 2025	Inpatient Hosp	43775	CPT	LAPAROSCOPY, SURGICAL, GASTRIC RESTRICTIVE PROCEDURE; LONGITUDINAL GASTRECTOMY (IE, SLEEVE GASTRECTOMY)
XOHANA	Q3 2025	Inpatient Hosp	43870	CPT	CLOSURE OF GASTROSTOMY, SURGICAL
XOHANA	Q3 2025	Inpatient Hosp	44120	CPT	ENTERECTOMY, RESECTION OF SMALL INTESTINE; SINGLE RESECTION AND ANASTOMOSIS
XOHANA	Q3 2025	Inpatient Hosp	44121	CPT	ENTERECTOMY, RESECTION OF SMALL INTESTINE; EACH ADDITIONAL RESECTION AND ANASTOMOSIS (LIST SEPARATELY IN ADDITION TO CODE
XOHANA	Q3 2025	Inpatient Hosp	44139	CPT	MOBILIZATION (TAKE-DOWN) OF SPLENIC FLEXURE PERFORMED IN CONJUNCTION WITH PARTIAL COLECTOMY (LIST SEPARATELY IN ADDITION T
XOHANA	Q3 2025	Inpatient Hosp	44140	CPT	COLECTOMY, PARTIAL; WITH ANASTOMOSIS
XOHANA	Q3 2025	Inpatient Hosp	44144	CPT	COLECTOMY, PARTIAL; WITH RESECTION, WITH COLOSTOMY OR ILEOSTOMY AND CREATION OF MUCOFISTULA
XOHANA	Q3 2025	Inpatient Hosp	44145	CPT	COLECTOMY, PARTIAL; WITH COLOPROCTOSTOMY (LOW PELVIC ANASTOMOSIS)
XOHANA	Q3 2025	Inpatient Hosp	44146	CPT	COLECTOMY, PARTIAL; WITH COLOPROCTOSTOMY (LOW PELVIC ANASTOMOSIS), WITH COLOSTOMY
XOHANA	Q3 2025	Inpatient Hosp	44150	CPT	COLECTOMY, TOTAL, ABDOMINAL, WITHOUT PROCTECTOMY; WITH ILEOSTOMY OR ILEOPROCTOSTOMY
XOHANA	Q3 2025	Inpatient Hosp	44155	CPT	COLECTOMY, TOTAL, ABDOMINAL, WITH PROCTECTOMY; WITH ILEOSTOMY
XOHANA	Q3 2025	Inpatient Hosp	44156	CPT	COLECTOMY, TOTAL, ABDOMINAL, WITH PROCTECTOMY; WITH CONTINENT ILEOSTOMY
XOHANA	Q3 2025	Inpatient Hosp	44157	CPT	COLECTOMY, TOTAL, ABDOMINAL, WITH PROCTECTOMY; WITH ILEOANAL ANASTOMOSIS, INCLUDES LOOP ILEOSTOMY, AND RECTAL MUCOSECTOMY,
XOHANA	Q3 2025	Inpatient Hosp	44158	CPT	COLECTOMY, TOTAL, ABDOMINAL, WITH PROCTECTOMY; WITH ILEOANAL ANASTOMOSIS, CREATION OF ILEAL RESERVOIR (S OR J), INCLUDES L
XOHANA	Q3 2025	Inpatient Hosp	44160	CPT	COLECTOMY, PARTIAL, WITH REMOVAL OF TERMINAL ILEUM WITH ILEOCOLOSTOMY
XOHANA	Q3 2025	Inpatient Hosp	44187	CPT	LAPAROSCOPY, SURGICAL; ILEOSTOMY OR JEJUNOSTOMY, NON-TUBE
XOHANA	Q3 2025	Inpatient Hosp	44188	CPT	LAPAROSCOPY, SURGICAL, COLOSTOMY OR SKIN LEVEL CECOSTOMY
XOHANA	Q3 2025	Inpatient Hosp	44204	CPT	LAPAROSCOPY, SURGICAL; COLECTOMY, PARTIAL, WITH ANASTOMOSIS
XOHANA	Q3 2025	Inpatient Hosp	44205	CPT	LAPAROSCOPY, SURGICAL; COLECTOMY, PARTIAL, WITH REMOVAL OF TERMINAL ILEUM WITH ILEOCOLOSTOMY
XOHANA	Q3 2025	Inpatient Hosp	44206	CPT	LAPAROSCOPY, SURGICAL; COLECTOMY, PARTIAL, WITH END COLOSTOMY AND CLOSURE OF DISTAL SEGMENT (HARTMANN TYPE PROCEDURE)
XOHANA	Q3 2025	Inpatient Hosp	44207	CPT	LAPAROSCOPY, SURGICAL; COLECTOMY, PARTIAL, WITH ANASTOMOSIS, WITH COLOPROCTOSTOMY (LOW PELVIC ANASTOMOSIS)
XOHANA	Q3 2025	Inpatient Hosp	44208	CPT	LAPAROSCOPY, SURGICAL; COLECTOMY, PARTIAL, WITH ANASTOMOSIS, WITH COLOPROCTOSTOMY (LOW PELVIC ANASTOMOSIS) WITH COLOSTOMY
XOHANA	Q3 2025	Inpatient Hosp	44213	CPT	LAPAROSCOPY, SURGICAL, MOBILIZATION (TAKE-DOWN) OF SPLENIC FLEXURE PERFORMED IN CONJUNCTION WITH PARTIAL COLECTOMY (LIST S
XOHANA	Q3 2025	Inpatient Hosp	44227	CPT	LAPAROSCOPY, SURGICAL, CLOSURE OF ENTEROSTOMY, LARGE OR SMALL INTESTINE, WITH RESECTION AND ANASTOMOSIS
XOHANA	Q3 2025	Inpatient Hosp	44300	CPT	PLACEMENT, ENTEROSTOMY OR CECOSTOMY, TUBE OPEN (EG, FOR FEEDING OR DECOMPRESSION) (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Inpatient Hosp	44310	CPT	ILEOSTOMY OR JEJUNOSTOMY, NON-TUBE
XOHANA	Q3 2025	Inpatient Hosp	44320	CPT	COLOSTOMY OR SKIN LEVEL CECOSTOMY;
XOHANA	Q3 2025	Inpatient Hosp	44615	CPT	INTESTINAL STRICTUROPLASTY (ENTEROTOMY AND ENTERORRHAPHY) WITH OR WITHOUT DILATION, FOR INTESTINAL OBSTRUCTION
XOHANA	Q3 2025	Inpatient Hosp	44620	CPT	CLOSURE OF ENTEROSTOMY, LARGE OR SMALL INTESTINE;
XOHANA	Q3 2025	Inpatient Hosp	44625	CPT	CLOSURE OF ENTEROSTOMY, LARGE OR SMALL INTESTINE; WITH RESECTION AND ANASTOMOSIS OTHER THAN COLORECTAL
XOHANA	Q3 2025	Inpatient Hosp	44626	CPT	CLOSURE OF ENTEROSTOMY, LARGE OR SMALL INTESTINE; WITH RESECTION AND COLORECTAL ANASTOMOSIS (EG, CLOSURE OF HARTMANN TYPE
XOHANA	Q3 2025	Inpatient Hosp	44660	CPT	CLOSURE OF ENTEROVESICAL FISTULA; WITHOUT INTESTINAL OR BLADDER RESECTION
XOHANA	Q3 2025	Inpatient Hosp	45110	CPT	PROCTECTOMY; COMPLETE, COMBINED ABDOMINOPERINEAL, WITH COLOSTOMY
XOHANA	Q3 2025	Inpatient Hosp	45300	CPT	PROCTOSIGMOIDOSCOPY, RIGID; DIAGNOSTIC, WITH OR WITHOUT COLLECTION OF SPECIMEN(S) BY BRUSHING OR WASHING (SEPARATE PROCEDU
XOHANA	Q3 2025	Inpatient Hosp	45395	CPT	LAPAROSCOPY, SURGICAL; PROCTECTOMY, COMPLETE, COMBINED ABDOMINOPERINEAL, WITH COLOSTOMY
XOHANA	Q3 2025	Inpatient Hosp	46040	CPT	INCISION AND DRAINAGE OF ISCHIORECTAL AND/OR PERIRECTAL ABSCESS (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Inpatient Hosp	46900	CPT	DESTRUCTION OF LESION(S), ANUS (EG, CONDYLOMA, PAPILLOMA, MOLLUSCUM CONTAGIOSUM, HERPETIC VESICLE), SIMPLE; CHEMICAL
XOHANA	Q3 2025	Inpatient Hosp	46910	CPT	DESTRUCTION OF LESION(S), ANUS (EG, CONDYLOMA, PAPILLOMA, MOLLUSCUM CONTAGIOSUM, HERPETIC VESICLE), SIMPLE; ELECTRODESICCA
XOHANA	Q3 2025	Inpatient Hosp	46916	CPT	DESTRUCTION OF LESION(S), ANUS (EG, CONDYLOMA, PAPILLOMA, MOLLUSCUM CONTAGIOSUM, HERPETIC VESICLE), SIMPLE; CRYOSURGERY
XOHANA	Q3 2025	Inpatient Hosp	46917	CPT	DESTRUCTION OF LESION(S), ANUS (EG, CONDYLOMA, PAPILLOMA, MOLLUSCUM CONTAGIOSUM, HERPETIC VESICLE), SIMPLE; LASER SURGERY
XOHANA	Q3 2025	Inpatient Hosp	46922	CPT	DESTRUCTION OF LESION(S), ANUS (EG, CONDYLOMA, PAPILLOMA, MOLLUSCUM CONTAGIOSUM, HERPETIC VESICLE), SIMPLE; SURGICAL EXCIS
XOHANA	Q3 2025	Inpatient Hosp	46924	CPT	DESTRUCTION OF LESION(S), ANUS (EG, CONDYLOMA, PAPILLOMA, MOLLUSCUM CONTAGIOSUM, HERPETIC VESICLE), EXTENSIVE (EG, LASER S
XOHANA	Q3 2025	Inpatient Hosp	47120	CPT	HEPATECTOMY, RESECTION OF LIVER; PARTIAL LOBECTOMY
XOHANA	Q3 2025	Inpatient Hosp	47562	CPT	LAPAROSCOPY, SURGICAL; CHOLECYSTECTOMY
XOHANA	Q3 2025	Inpatient Hosp	47563	CPT	LAPAROSCOPY, SURGICAL; CHOLECYSTECTOMY WITH CHOLANGIOGRAPHY
XOHANA	Q3 2025	Inpatient Hosp	47600	CPT	CHOLECYSTECTOMY;
XOHANA	Q3 2025	Inpatient Hosp	47715	CPT	EXCISION OF CHOLEDOCHAL CYST
XOHANA	Q3 2025	Inpatient Hosp	48140	CPT	PANCREATECTOMY, DISTAL SUBTOTAL, WITH OR WITHOUT SPLENECTOMY; WITHOUT PANCREATICOJEJUNOSTOMY
XOHANA	Q3 2025	Inpatient Hosp	48150	CPT	PANCREATECTOMY, PROXIMAL SUBTOTAL WITH TOTAL DUODENECTOMY, PARTIAL GASTRECTOMY, CHOLEDOCHOENTEROSTOMY AND GASTROJEJUNOSTOM
XOHANA	Q3 2025	Inpatient Hosp	49000	CPT	EXPLORATORY LAPAROTOMY, EXPLORATORY CELIOTOMY WITH OR WITHOUT BIOPSY(S) (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Inpatient Hosp	49215	CPT	EXCISION OF PRESACRAL OR SACROCOCCYGEAL TUMOR
XOHANA	Q3 2025	Inpatient Hosp	49425	CPT	INSERTION OF PERITONEAL-VENOUS SHUNT
XOHANA	Q3 2025	Inpatient Hosp	49450	CPT	REPLACEMENT OF GASTROSTOMY OR CECOSTOMY (OR OTHER COLONIC) TUBE, PERCUTANEOUS, UNDER FLUOROSCOPIC GUIDANCE INCLUDING CONTR
XOHANA	Q3 2025	Inpatient Hosp	49491	CPT	REPAIR, INITIAL INGUINAL HERNIA, PRETERM INFANT (YOUNGER THAN 37 WEEKS GESTATION AT BIRTH), PERFORMED FROM BIRTH UP TO 50
XOHANA	Q3 2025	Inpatient Hosp	49492	CPT	REPAIR, INITIAL INGUINAL HERNIA, PRETERM INFANT (YOUNGER THAN 37 WEEKS GESTATION AT BIRTH), PERFORMED FROM BIRTH UP TO 50
XOHANA	Q3 2025	Inpatient Hosp	49566	CPT	REPAIR RECURRENT INCISIONAL OR VENTRAL HERNIA; INCARCERATED OR STRANGULATED
XOHANA	Q3 2025	Inpatient Hosp	49655	CPT	LAPS RPR INCISIONAL HERNIA NCRC8/STRANGULATED LAPAROSCOPY, SURGICAL, REPAIR, INCISIONAL HERNIA (INCLUDES MESH INSERTION, WHEN PE
XOHANA	Q3 2025	Inpatient Hosp	49656	CPT	LAPS RPR RECURRENT INCISIONAL HERNIA REDUCIBLE LAPAROSCOPY, SURGICAL, REPAIR, RECURRENT INCISIONAL HERNIA (INCLUDES MESH INSERTIO
XOHANA	Q3 2025	Inpatient Hosp	49657	CPT	LAPS RPR RECURRENT INCAL HRNA NCRC8/STRANGULATEDLAPAROSCOPY, SURGICAL, REPAIR, RECURRENT INCISIONAL HERNIA (INCLUDES MESH INSERTIO
XOHANA	Q3 2025	Inpatient Hosp	50200	CPT	RENAL BIOPSY; PERCUTANEOUS, BY TROCAR OR NEEDLE
XOHANA	Q3 2025	Inpatient Hosp	50220	CPT	NEPHRECTOMY, INCLUDING PARTIAL URETERECTOMY, ANY OPEN APPROACH INCLUDING RIB RESECTION;
XOHANA	Q3 2025	Inpatient Hosp	50230	CPT	NEPHRECTOMY, INCLUDING PARTIAL URETERECTOMY, ANY OPEN APPROACH INCLUDING RIB RESECTION; RADICAL, WITH REGIONAL LYMPHADENEC
XOHANA	Q3 2025	Inpatient Hosp	50240	CPT	NEPHRECTOMY, PARTIAL
XOHANA	Q3 2025	Inpatient Hosp	50280	CPT	EXCISION OR UNROOFING OF CYST(S) OF KIDNEY
XOHANA	Q3 2025	Inpatient Hosp	50380	CPT	RENAL AUTOTRANSPLANTATION, REIMPLANTATION OF KIDNEY
XOHANA	Q3 2025	Inpatient Hosp	50400	CPT	PYELOPLASTY (FOLEY Y-PYELOPLASTY), PLASTIC OPERATION ON RENAL PELVIS, WITH OR WITHOUT PLASTIC OPERATION ON URETER, NEPHROP
XOHANA	Q3 2025	Inpatient Hosp	50543	CPT	LAPAROSCOPY, SURGICAL; PARTIAL NEPHRECTOMY
XOHANA	Q3 2025	Inpatient Hosp	50544	CPT	LAPAROSCOPY, SURGICAL; PYELOPLASTY
XOHANA	Q3 2025	Inpatient Hosp	50545	CPT	LAPAROSCOPY, SURGICAL; RADICAL NEPHRECTOMY (INCLUDES REMOVAL OF GEROTA'S FASCIA AND SURROUNDING FATTY TISSUE, REMOVAL OF R
XOHANA	Q3 2025	Inpatient Hosp	50546	CPT	LAPAROSCOPY, SURGICAL; NEPHRECTOMY, INCLUDING PARTIAL URETERECTOMY
XOHANA	Q3 2025	Inpatient Hosp	50548	CPT	LAPAROSCOPY, SURGICAL; NEPHRECTOMY WITH TOTAL URETERECTOMY
XOHANA	Q3 2025	Inpatient Hosp	50592	CPT	ABLATION, ONE OR MORE RENAL TUMOR(S), PERCUTANEOUS, UNILATERAL, RADIOFREQUENCY
XOHANA	Q3 2025	Inpatient Hosp	50785	CPT	URETERONEOCYSTOSTOMY; WITH VESICO-PSOAS HITCH OR BLADDER FLAP
XOHANA	Q3 2025	Inpatient Hosp	50860	CPT	URETEROSTOMY, TRANSPLANTATION OF URETER TO SKIN
XOHANA	Q3 2025	Inpatient Hosp	50947	CPT	LAPAROSCOPY, SURGICAL; URETERONEOCYSTOSTOMY WITH CYSTOSCOPY AND URETERAL STENT PLACEMENT
XOHANA	Q3 2025	Inpatient Hosp	51050	CPT	CYSTOLITHOTOMY, CYSTOTOMY WITH REMOVAL OF CALCULUS, WITHOUT VESICAL NECK RESECTION
XOHANA	Q3 2025	Inpatient Hosp	51590	CPT	CYSTECTOMY, COMPLETE, WITH URETEROILEAL CONDUIT OR SIGMOID BLADDER, INCLUDING INTESTINE ANASTOMOSIS;
XOHANA	Q3 2025	Inpatient Hosp	51595	CPT	CYSTECTOMY, COMPLETE, WITH URETEROILEAL CONDUIT OR SIGMOID BLADDER, INCLUDING INTESTINE ANASTOMOSIS; WITH BILATERAL PELVIC
XOHANA	Q3 2025	Inpatient Hosp	51999	CPT	UNLISTED LAPAROSCOPY PROCEDURE, BLADDER
XOHANA	Q3 2025	Inpatient Hosp	53400	CPT	URETHROPLASTY; FIRST STAGE, FOR FISTULA, DIVERTICULUM, OR STRICTURE (EG, JOHANNSEN TYPE)
XOHANA	Q3 2025	Inpatient Hosp	54162	CPT	LYSIS OR EXCISION OF PENILE POST-CIRCUMCISION ADHESIONS
XOHANA	Q3 2025	Inpatient Hosp	55840	CPT	PROSTATECTOMY, RETROPUBIC RADICAL, WITH OR WITHOUT NERVE SPARING;
XOHANA	Q3 2025	Inpatient Hosp	55845	CPT	PROSTATECTOMY, RETROPUBIC RADICAL, WITH OR WITHOUT NERVE SPARING; WITH BILATERAL PELVIC LYMPHADENECTOMY, INCLUDING EXTERNA
XOHANA	Q3 2025	Inpatient Hosp	55866	CPT	LAPAROSCOPY, SURGICAL PROSTATECTOMY, RETROPUBIC RADICAL, INCLUDING NERVE SPARING
XOHANA	Q3 2025	Inpatient Hosp	55899	CPT	UNLISTED PROCEDURE, MALE GENITAL SYSTEM
XOHANA	Q3 2025	Inpatient Hosp	56632	CPT	VULVECTOMY, RADICAL, PARTIAL; WITH BILATERAL INGUINOFEMORAL LYMPHADENECTOMY
XOHANA	Q3 2025	Inpatient Hosp	57110	CPT	VAGINECTOMY, COMPLETE REMOVAL OF VAGINAL WALL;

XOHANA	Q3 2025	Inpatient Hosp	58140	CPT	MYOMECTOMY, EXCISION OF FIBROID TUMOR(S) OF UTERUS, 1 TO 4 INTRAMURAL MYOMA(S) WITH TOTAL WEIGHT OF 250 G OR LESS AND/OR R
XOHANA	Q3 2025	Inpatient Hosp	58146	CPT	MYOMECTOMY, EXCISION OF FIBROID TUMOR(S) OF UTERUS, 5 OR MORE INTRAMURAL MYOMAS AND/OR INTRAMURAL MYOMAS WITH TOTAL WEIGHT
XOHANA	Q3 2025	Inpatient Hosp	58275	CPT	VAGINAL HYSTERECTOMY, WITH TOTAL OR PARTIAL VAGINECTOMY;
XOHANA	Q3 2025	Inpatient Hosp	58575	CPT	LAPAROSCOPY, SURGICAL, TOTAL HYSTERECTOMY FOR RESECTION OF MALIGNANCY (TUMOR DEBULKING), WITH OMENTECTOMY INCLUDING SALPINGO-OOPHORECTOMY, UNILATERA
XOHANA	Q3 2025	Inpatient Hosp	58605	CPT	LIGATION OR TRANSECTION OF FALLOPIAN TUBE(S), ABDOMINAL OR VAGINAL APPROACH, POSTPARTUM, UNILATERAL OR BILATERAL, DURING S
XOHANA	Q3 2025	Inpatient Hosp	58740	CPT	LYSIS OF ADHESIONS (SALPINGOLYSIS, OVARIOLYSIS)
XOHANA	Q3 2025	Inpatient Hosp	58951	CPT	RESECTION (INITIAL) OF OVARIAN, TUBAL OR PRIMARY PERITONEAL MALIGNANCY WITH BILATERAL SALPINGO-OOPHORECTOMY AND OMENTECTOM
XOHANA	Q3 2025	Inpatient Hosp	58952	CPT	RESECTION (INITIAL) OF OVARIAN, TUBAL OR PRIMARY PERITONEAL MALIGNANCY WITH BILATERAL SALPINGO-OOPHORECTOMY AND OMENTECTOM
XOHANA	Q3 2025	Inpatient Hosp	58953	CPT	BILATERAL SALPINGO-OOPHORECTOMY WITH OMENTECTOMY, TOTAL ABDOMINAL HYSTERECTOMY AND RADICAL DISSECTION FOR DEBULKING;
XOHANA	Q3 2025	Inpatient Hosp	58954	CPT	BILATERAL SALPINGO-OOPHORECTOMY WITH OMENTECTOMY, TOTAL ABDOMINAL HYSTERECTOMY AND RADICAL DISSECTION FOR DEBULKING; WITH
XOHANA	Q3 2025	Inpatient Hosp	58956	CPT	BILATERAL SALPINGO-OOPHORECTOMY WITH TOTAL OMENTECTOMY, TOTAL ABDOMINAL HYSTERECTOMY FOR MALIGNANCY
XOHANA	Q3 2025	Inpatient Hosp	58958	CPT	RESECTION (TUMOR DEBULKING) OF RECURRENT OVARIAN, TUBAL, PRIMARY PERITONEAL, UTERINE MALIGNANCY (INTRA-ABDOMINAL, RETROPER
XOHANA	Q3 2025	Inpatient Hosp	58960	CPT	LAPAROTOMY, FOR STAGING OR RESTAGING OF OVARIAN, TUBAL, OR PRIMARY PERITONEAL MALIGNANCY (SECOND LOOK), WITH OR WITHOUT OM
XOHANA	Q3 2025	Inpatient Hosp	58999	CPT	UNLISTED PROCEDURE, FEMALE GENITAL SYSTEM (NONOBSTETRICAL)
XOHANA	Q3 2025	Inpatient Hosp	59400	CPT	ROUTINE OBSTETRIC CARE INCLUDING ANTEPARTUM CARE, VAGINAL DELIVERY (WITH OR WITHOUT EPISIOTOMY, AND/OR FORCEPS) AND POSTPA
XOHANA	Q3 2025	Inpatient Hosp	59409	CPT	VAGINAL DELIVERY ONLY (WITH OR WITHOUT EPISIOTOMY AND/OR FORCEPS);
XOHANA	Q3 2025	Inpatient Hosp	59410	CPT	VAGINAL DELIVERY ONLY (WITH OR WITHOUT EPISIOTOMY AND/OR FORCEPS); INCLUDING POSTPARTUM CARE
XOHANA	Q3 2025	Inpatient Hosp	59425	CPT	ANTEPARTUM CARE ONLY; 4-6 VISITS
XOHANA	Q3 2025	Inpatient Hosp	59426	CPT	ANTEPARTUM CARE ONLY; 7 OR MORE VISITS
XOHANA	Q3 2025	Inpatient Hosp	59510	CPT	ROUTINE OBSTETRIC CARE INCLUDING ANTEPARTUM CARE, CESAREAN DELIVERY, AND POSTPARTUM CARE
XOHANA	Q3 2025	Inpatient Hosp	59514	CPT	CESAREAN DELIVERY ONLY;
XOHANA	Q3 2025	Inpatient Hosp	59610	CPT	ROUTINE OBSTETRIC CARE INCLUDING ANTEPARTUM CARE, VAGINAL DELIVERY (WITH OR WITHOUT EPISIOTOMY, AND/OR FORCEPS) AND POSTPA
XOHANA	Q3 2025	Inpatient Hosp	59612	CPT	VAGINAL DELIVERY ONLY, AFTER PREVIOUS CESAREAN DELIVERY (WITH OR WITHOUT EPISIOTOMY AND/OR FORCEPS);
XOHANA	Q3 2025	Inpatient Hosp	59614	CPT	VAGINAL DELIVERY ONLY, AFTER PREVIOUS CESAREAN DELIVERY (WITH OR WITHOUT EPISIOTOMY AND/OR FORCEPS); INCLUDING POSTPARTUM
XOHANA	Q3 2025	Inpatient Hosp	59618	CPT	ROUTINE OBSTETRIC CARE INCLUDING ANTEPARTUM CARE, CESAREAN DELIVERY, AND POSTPARTUM CARE, FOLLOWING ATTEMPTED VAGINAL DELI
XOHANA	Q3 2025	Inpatient Hosp	59620	CPT	CESAREAN DELIVERY ONLY, FOLLOWING ATTEMPTED VAGINAL DELIVERY AFTER PREVIOUS CESAREAN DELIVERY;
XOHANA	Q3 2025	Inpatient Hosp	59622	CPT	CESAREAN DELIVERY ONLY, FOLLOWING ATTEMPTED VAGINAL DELIVERY AFTER PREVIOUS CESAREAN DELIVERY; INCLUDING POSTPARTUM CARE
XOHANA	Q3 2025	Inpatient Hosp	60520	CPT	THYMECTOMY, PARTIAL OR TOTAL; TRANSCERVICAL APPROACH (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Inpatient Hosp	60521	CPT	THYMECTOMY, PARTIAL OR TOTAL; STERNAL SPLIT OR TRANSTHORACIC APPROACH, WITHOUT RADICAL MEDIASTINAL DISSECTION (SEPARATE PR
XOHANA	Q3 2025	Inpatient Hosp	60522	CPT	THYMECTOMY, PARTIAL OR TOTAL; STERNAL SPLIT OR TRANSTHORACIC APPROACH, WITH RADICAL MEDIASTINAL DISSECTION (SEPARATE PROCE
XOHANA	Q3 2025	Inpatient Hosp	60650	CPT	LAPAROSCOPY, SURGICAL, WITH ADRENALECTOMY, PARTIAL OR COMPLETE, OR EXPLORATION OF ADRENAL GLAND WITH OR WITHOUT BIOPSY, TR
XOHANA	Q3 2025	Inpatient Hosp	61500	CPT	CRANIECTOMY; WITH EXCISION OF TUMOR OR OTHER BONE LESION OF SKULL
XOHANA	Q3 2025	Inpatient Hosp	61510	CPT	CRANIECTOMY, TREPHINATION, BONE FLAP CRANIOTOMY; FOR EXCISION OF BRAIN TUMOR, SUPRATENTORIAL, EXCEPT MENINGIOMA
XOHANA	Q3 2025	Inpatient Hosp	61512	CPT	CRANIECTOMY, TREPHINATION, BONE FLAP CRANIOTOMY; FOR EXCISION OF MENINGIOMA, SUPRATENTORIAL
XOHANA	Q3 2025	Inpatient Hosp	61518	CPT	CRANIECTOMY FOR EXCISION OF BRAIN TUMOR, INFRATENTORIAL OR POSTERIOR FOSSA; EXCEPT MENINGIOMA, CEREBELLOPONTINE ANGLE TUMO
XOHANA	Q3 2025	Inpatient Hosp	61535	CPT	CRANIOTOMY WITH ELEVATION OF BONE FLAP; FOR REMOVAL OF EPIDURAL OR SUBDURAL ELECTRODE ARRAY, WITHOUT EXCISION OF CEREBRAL
XOHANA	Q3 2025	Inpatient Hosp	61548	CPT	HYPOPHYSECTOMY OR EXCISION OF PITUITARY TUMOR, TRANSNASAL OR TRANSSEPTAL APPROACH, NONSTEREOTACTIC
XOHANA	Q3 2025	Inpatient Hosp	61550	CPT	CRANIECTOMY FOR CRANIOSYNOSTOSIS; SINGLE CRANIAL SUTURE
XOHANA	Q3 2025	Inpatient Hosp	61552	CPT	CRANIECTOMY FOR CRANIOSYNOSTOSIS; MULTIPLE CRANIAL SUTURES
XOHANA	Q3 2025	Inpatient Hosp	61557	CPT	CRANIOTOMY FOR CRANIOSYNOSTOSIS; BIFRONTAL BONE FLAP
XOHANA	Q3 2025	Inpatient Hosp	61558	CPT	EXTENSIVE CRANIECTOMY FOR MULTIPLE CRANIAL SUTURE CRANIOSYNOSTOSIS (EG, CLOVERLEAF SKULL); NOT REQUIRING BONE GRAFTS
XOHANA	Q3 2025	Inpatient Hosp	61559	CPT	EXTENSIVE CRANIECTOMY FOR MULTIPLE CRANIAL SUTURE CRANIOSYNOSTOSIS (EG, CLOVERLEAF SKULL); RECONTOURING WITH MULTIPLE OSTE
XOHANA	Q3 2025	Inpatient Hosp	61624	CPT	TRANSCATHETER PERMANENT OCCLUSION OR EMBOLIZATION (EG, FOR TUMOR DESTRUCTION, TO ACHIEVE HEMOSTASIS, TO OCCLUDE A VASCULAR
XOHANA	Q3 2025	Inpatient Hosp	61711	CPT	ANASTOMOSIS, ARTERIAL, EXTRACRANIAL-INTRACRANIAL (EG, MIDDLE CEREBRAL/CORTICAL) ARTERIES
XOHANA	Q3 2025	Inpatient Hosp	61751	CPT	STEREOTACTIC BIOPSY, ASPIRATION, OR EXCISION, INCLUDING BURR HOLE(S), FOR INTRACRANIAL LESION; WITH COMPUTED TOMOGRAPHY AN
XOHANA	Q3 2025	Inpatient Hosp	61760	CPT	STEREOTACTIC IMPLANTATION OF DEPTH ELECTRODES INTO THE CEREBRUM FOR LONG-TERM SEIZURE MONITORING
XOHANA	Q3 2025	Inpatient Hosp	61781	CPT	STEREOTACTIC COMPUTER-ASSISTED (NAVIGATIONAL) PROCEDURE; CRANIAL, INTRADURAL (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROC
XOHANA	Q3 2025	Inpatient Hosp	61860	CPT	CRANIECTOMY OR CRANIOTOMY FOR IMPLANTATION OF NEUROSTIMULATOR ELECTRODES, CEREBRAL, CORTICAL
XOHANA	Q3 2025	Inpatient Hosp	61880	CPT	REVISION OR REMOVAL OF INTRACRANIAL NEUROSTIMULATOR ELECTRODES
XOHANA	Q3 2025	Inpatient Hosp	61888	CPT	REVISION OR REMOVAL OF CRANIAL NEUROSTIMULATOR PULSE GENERATOR OR RECEIVER
XOHANA	Q3 2025	Inpatient Hosp	62120	CPT	REPAIR OF ENCEPHALOCELE, SKULL VAULT, INCLUDING CRANIOPLASTY
XOHANA	Q3 2025	Inpatient Hosp	62140	CPT	CRANIOPLASTY FOR SKULL DEFECT; UP TO 5 CM DIAMETER
XOHANA	Q3 2025	Inpatient Hosp	62141	CPT	CRANIOPLASTY FOR SKULL DEFECT; LARGER THAN 5 CM DIAMETER
XOHANA	Q3 2025	Inpatient Hosp	62160	CPT	NEUROENDOSCOPY, INTRACRANIAL, FOR PLACEMENT OR REPLACEMENT OF VENTRICULAR CATHETER AND ATTACHMENT TO SHUNT SYSTEM OR EXTER
XOHANA	Q3 2025	Inpatient Hosp	62223	CPT	CREATION OF SHUNT; VENTRICULO-PERITONEAL, -PLEURAL, OTHER TERMINUS
XOHANA	Q3 2025	Inpatient Hosp	62230	CPT	REPLACEMENT OR REVISION OF CEREBROSPINAL FLUID SHUNT, OBSTRUCTED VALVE, OR DISTAL CATHETER IN SHUNT SYSTEM
XOHANA	Q3 2025	Inpatient Hosp	62365	CPT	REMOVAL OF SUBCUTANEOUS RESERVOIR OR PUMP, PREVIOUSLY IMPLANTED FOR INTRATHECAL OR EPIDURAL INFUSION
XOHANA	Q3 2025	Inpatient Hosp	63012	CPT	LAMINECTOMY WITH REMOVAL OF ABNORMAL FACETS AND/OR PARS INTER-ARTICULARIS WITH DECOMPRESSION OF CAUDA EQUINA AND NERVE ROO
XOHANA	Q3 2025	Inpatient Hosp	63035	CPT	LAMINOTOMY (HEMILAMINECTOMY), WITH DECOMPRESSION OF NERVE ROOT(S), INCLUDING PARTIAL FACETECTOMY, FORAMINOTOMY AND/OR EXCI
XOHANA	Q3 2025	Inpatient Hosp	63045	CPT	LAMINECTOMY, FACETECTOMY AND FORAMINOTOMY (UNILATERAL OR BILATERAL WITH DECOMPRESSION OF SPINAL CORD, CAUDA EQUINA AND/OR
XOHANA	Q3 2025	Inpatient Hosp	63046	CPT	LAMINECTOMY, FACETECTOMY AND FORAMINOTOMY (UNILATERAL OR BILATERAL WITH DECOMPRESSION OF SPINAL CORD, CAUDA EQUINA AND/OR
XOHANA	Q3 2025	Inpatient Hosp	63047	CPT	LAMINECTOMY, FACETECTOMY AND FORAMINOTOMY (UNILATERAL OR BILATERAL WITH DECOMPRESSION OF SPINAL CORD, CAUDA EQUINA AND/OR
XOHANA	Q3 2025	Inpatient Hosp	63050	CPT	LAMINOPLASTY, CERVICAL, WITH DECOMPRESSION OF THE SPINAL CORD, TWO OR MORE VERTEBRAL SEGMENTS;
XOHANA	Q3 2025	Inpatient Hosp	63051	CPT	LAMINOPLASTY, CERVICAL, WITH DECOMPRESSION OF THE SPINAL CORD, TWO OR MORE VERTEBRAL SEGMENTS; WITH RECONSTRUCTION OF THE
XOHANA	Q3 2025	Inpatient Hosp	63056	CPT	TRANSPEDICULAR APPROACH WITH DECOMPRESSION OF SPINAL CORD, EQUINA AND/OR NERVE ROOT(S) (EG, HERNIATED INTERVERTEBRAL DISC)
XOHANA	Q3 2025	Inpatient Hosp	63090	CPT	VERTEBRAL CORPECTOMY (VERTEBRAL BODY RESECTION), PARTIAL OR COMPLETE, TRANSPERITONEAL OR RETROPERITONEAL APPROACH WITH DEC
XOHANA	Q3 2025	Inpatient Hosp	63267	CPT	LAMINECTOMY FOR EXCISION OR EVACUATION OF INTRASPINAL LESION OTHER THAN NEOPLASM, EXTRADURAL; LUMBAR
XOHANA	Q3 2025	Inpatient Hosp	63707	CPT	REPAIR OF DURAL/CEREBROSPINAL FLUID LEAK, NOT REQUIRING LAMINECTOMY
XOHANA	Q3 2025	Inpatient Hosp	64486	CPT	TRANSVERSUS ABDOMINIS PLANE (TAP) BLOCK (ABDOMINAL PLANE BLOCK, RECTUS SHEATH BLOCK) UNILATERAL; BY INJECTION(S) (INCLUDES IMAGING GUIDANCE, WHEN PERFORMEL
XOHANA	Q3 2025	Inpatient Hosp	64611	CPT	CHEMODENERVATION OF PAROTID AND SUBMANDIBULAR SALIVARY GLANDS, BILATERAL
XOHANA	Q3 2025	Inpatient Hosp	64616	CPT	CHEMODENERVATION OF MUSCLE(S); NECK MUSCLE(S), EXCLUDING MUSCLES OF THE LARYNX, UNILATERAL (EG, FOR CERVICAL DYSTONIA, SPASMODIC T
XOHANA	Q3 2025	Inpatient Hosp	64646	CPT	CHEMODENERVATION OF TRUNK MUSCLE(S); 1-5 MUSCLE(S)
XOHANA	Q3 2025	Inpatient Hosp	69990	CPT	MICROSURGICAL TECHNIQUES, REQUIRING USE OF OPERATING MICROSCOPE (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE
XOHANA	Q3 2025	Inpatient Hosp	71046	CPT	RADIOLOGIC EXAMINATION, CHEST; 2 VIEWS
XOHANA	Q3 2025	Inpatient Hosp	75825	CPT	VENOGRAPHY, CAVAL, INFERIOR, WITH SERIALOGRAPHY, RADIOLOGICAL SUPERVISION AND INTERPRETATION
XOHANA	Q3 2025	Inpatient Hosp	75827	CPT	VENOGRAPHY, CAVAL, SUPERIOR, WITH SERIALOGRAPHY, RADIOLOGICAL SUPERVISION AND INTERPRETATION
XOHANA	Q3 2025	Inpatient Hosp	75894	CPT	TRANSCATHETER THERAPY, EMBOLIZATION, ANY METHOD, RADIOLOGICAL SUPERVISION AND INTERPRETATION
XOHANA	Q3 2025	Inpatient Hosp	75898	CPT	ANGIOGRAPHY THROUGH EXISTING CATHETER FOR FOLLOW-UP STUDY FOR TRANSCATHETER THERAPY, EMBOLIZATION OR INFUSION
XOHANA	Q3 2025	Inpatient Hosp	76776	CPT	ULTRASOUND, TRANSPLANTED KIDNEY, REAL TIME AND DUPLEX DOPPLER WITH IMAGE DOCUMENTATION
XOHANA	Q3 2025	Inpatient Hosp	81001	CPT	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN, KETONES, LEUKOCYTES, NITRITE, PH, PROTEIN,
XOHANA	Q3 2025	Inpatient Hosp	81507	CPT	FETAL ANEUPLOIDY (TRISOMY 21, 18, AND 13) DNA SEQUENCE ANALYSIS OF SELECTED REGIONS USING MATERNAL PLASMA, ALGORITHM REPORTED AS A
XOHANA	Q3 2025	Inpatient Hosp	82565	CPT	CREATININE; BLOOD
XOHANA	Q3 2025	Inpatient Hosp	82575	CPT	CREATININE; CLEARANCE
XOHANA	Q3 2025	Inpatient Hosp	83735	CPT	MAGNESIUM
XOHANA	Q3 2025	Inpatient Hosp	84100	CPT	PHOSPHORUS INORGANIC (PHOSPHATE);
XOHANA	Q3 2025	Inpatient Hosp	84156	CPT	PROTEIN, TOTAL, EXCEPT BY REFRACTOMETRY; URINE
XOHANA	Q3 2025	Inpatient Hosp	84550	CPT	URIC ACID; BLOOD
XOHANA	Q3 2025	Inpatient Hosp	85610	CPT	PROTHROMBIN TIME;
XOHANA	Q3 2025	Inpatient Hosp	85730	CPT	THROMBOPLASTIN TIME, PARTIAL (PTT); PLASMA OR WHOLE BLOOD
XOHANA	Q3 2025	Inpatient Hosp	86021	CPT	ANTIBODY IDENTIFICATION; LEUKOCYTE ANTIBODIES
XOHANA	Q3 2025	Inpatient Hosp	86329	CPT	IMMUNODIFFUSION; NOT ELSEWHERE SPECIFIED
XOHANA	Q3 2025	Inpatient Hosp	86480	CPT	TUBERCULOSIS TEST, CELL MEDIATED IMMUNITY MEASUREMENT OF GAMMA INTERFERON ANTIGEN RESPONSE
XOHANA	Q3 2025	Inpatient Hosp	86592	CPT	SYPHILIS TEST; QUALITATIVE (EG, VDRL, RPR, ART)
XOHANA	Q3 2025	Inpatient Hosp	86644	CPT	ANTIBODY; CYTOMEGALOVIRUS (CMV)
XOHANA	Q3 2025	Inpatient Hosp	86687	CPT	ANTIBODY; HTLV-I
XOHANA	Q3 2025	Inpatient Hosp	86688	CPT	ANTIBODY; HTLV-II
XOHANA	Q3 2025	Inpatient Hosp	86695	CPT	ANTIBODY; HERPES SIMPLEX, TYPE 1
XOHANA	Q3 2025	Inpatient Hosp	86703	CPT	ANTIBODY; HIV-1 AND HIV-2, SINGLE ASSAY

XOHANA	Q3 2025	Inpatient Hosp	86704	CPT	HEPATITIS B CORE ANTIBODY (HBCAB); TOTAL
XOHANA	Q3 2025	Inpatient Hosp	86705	CPT	HEPATITIS B CORE ANTIBODY (HBCAB); IGM ANTIBODY
XOHANA	Q3 2025	Inpatient Hosp	86706	CPT	HEPATITIS B SURFACE ANTIBODY (HBSAB)
XOHANA	Q3 2025	Inpatient Hosp	86708	CPT	HEPATITIS A ANTIBODY (HAAB)
XOHANA	Q3 2025	Inpatient Hosp	86777	CPT	ANTIBODY; TOXOPLASMA
XOHANA	Q3 2025	Inpatient Hosp	86803	CPT	HEPATITIS C ANTIBODY;
XOHANA	Q3 2025	Inpatient Hosp	86806	CPT	LYMPHOCYTOTOXICITY ASSAY, VISUAL CROSSMATCH; WITHOUT TITRATION
XOHANA	Q3 2025	Inpatient Hosp	86807	CPT	SERUM SCREENING FOR CYTOTOXIC PERCENT REACTIVE ANTIBODY (PRA); STANDARD METHOD
XOHANA	Q3 2025	Inpatient Hosp	86850	CPT	ANTIBODY SCREEN, RBC, EACH SERUM TECHNIQUE
XOHANA	Q3 2025	Inpatient Hosp	86900	CPT	BLOOD TYPING, SEROLOGIC; ABO
XOHANA	Q3 2025	Inpatient Hosp	86901	CPT	BLOOD TYPING, SEROLOGIC; RH (D)
XOHANA	Q3 2025	Inpatient Hosp	86922	CPT	COMPATIBILITY TEST EACH UNIT; ANTIGLOBULIN TECHNIQUE
XOHANA	Q3 2025	Inpatient Hosp	87290	CPT	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE; VARICELLA ZOSTER VIRUS
XOHANA	Q3 2025	Inpatient Hosp	87340	CPT	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOASSAY TECHNIQUE, (EG, ENZYME IMMUNOASSAY [EIA], ENZYME-LINKED IMMUNOSORBENT ASSAY [ELISA], IMMUNOCHEMILUMINO
XOHANA	Q3 2025	Inpatient Hosp	87522	CPT	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HEPATITIS C, QUANTIFICATION
XOHANA	Q3 2025	Inpatient Hosp	88182	CPT	FLOW CYTOMETRY, CELL CYCLE OR DNA ANALYSIS
XOHANA	Q3 2025	Inpatient Hosp	92990	CPT	PERCUTANEOUS BALLOON VALVULOPLASTY; PULMONARY VALVE
XOHANA	Q3 2025	Inpatient Hosp	92997	CPT	PERCUTANEOUS TRANSLUMINAL PULMONARY ARTERY BALLOON ANGIOPLASTY; SINGLE VESSEL
XOHANA	Q3 2025	Inpatient Hosp	93005	CPT	ELECTROCARDIOGRAM, ROUTINE ECG WITH AT LEAST 12 LEADS; TRACING ONLY, WITHOUT INTERPRETATION AND REPORT
XOHANA	Q3 2025	Inpatient Hosp	93355	CPT	ECHOCARDIOGRAPHY, TRANSESOPHAGEAL (TEE) FOR GUIDANCE OF A TRANSCATHETER INTRACARDIAC OR GREAT VESSEL(S) STRUCTURAL INTERVENTION(S) (EG,TAVR, TRANSCATHETH
XOHANA	Q3 2025	Inpatient Hosp	93565	CPT	INJECTION PROCEDURE DURING CARDIAC CATHETERIZATION INCLUDING IMAGING SUPERVISION, INTERPRETATION, AND REPORT; FOR SELECTIVE LEFT V
XOHANA	Q3 2025	Inpatient Hosp	93566	CPT	INJECTION PROCEDURE DURING CARDIAC CATHETERIZATION INCLUDING IMAGING SUPERVISION, INTERPRETATION, AND REPORT; FOR SELECTIVE RIGHT
XOHANA	Q3 2025	Inpatient Hosp	93568	CPT	INJECTION PROCEDURE DURING CARDIAC CATHETERIZATION INCLUDING IMAGING SUPERVISION, INTERPRETATION, AND REPORT; FOR PULMONARY ANGIOG
XOHANA	Q3 2025	Inpatient Hosp	94002	CPT	VENTILATION ASSIST AND MANAGEMENT, INITIATION OF PRESSURE OR VOLUME PRESET VENTILATORS FOR ASSISTED OR CONTROLLED BREATHIN
XOHANA	Q3 2025	Inpatient Hosp	94003	CPT	VENTILATION ASSIST AND MANAGEMENT, INITIATION OF PRESSURE OR VOLUME PRESET VENTILATORS FOR ASSISTED OR CONTROLLED BREATHIN
XOHANA	Q3 2025	Inpatient Hosp	94010	CPT	SPIROMETRY, INCLUDING GRAPHIC RECORD, TOTAL AND TIMED VITAL CAPACITY, EXPIRATORY FLOW RATE MEASUREMENT(S), WITH OR WITHOUT
XOHANA	Q3 2025	Inpatient Hosp	94726	CPT	PLETHYSMOGRAPHY FOR DETERMINATION OF LUNG VOLUMES AND, WHEN PERFORMED, AIRWAY RESISTANCE
XOHANA	Q3 2025	Inpatient Hosp	94727	CPT	GAS DILUTION OR WASHOUT FOR DETERMINATION OF LUNG VOLUMES AND, WHEN PERFORMED, DISTRIBUTION OF VENTILATION AND CLOSING VOLUMES
XOHANA	Q3 2025	Inpatient Hosp	95720	CPT	ELECTROENCEPHALOGRAM (EEG), CONTINUOUS RECORDING, PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL REVIEW OF RECORDED EVENTS, ANALYSIS OF SPIKE AND
XOHANA	Q3 2025	Inpatient Hosp	95965	CPT	MAGNETOENCEPHALOGRAPHY (MEG), RECORDING AND ANALYSIS; FOR SPONTANEOUS BRAIN MAGNETIC ACTIVITY (EG, EPILEPTIC CEREBRAL CORT
XOHANA	Q3 2025	Inpatient Hosp	96156	CPT	HEALTH BEHAVIOR ASSESSMENT, OR RE-ASSESSMENT (IE, HEALTH-FOCUSED CLINICAL INTERVIEW, BEHAVIORAL OBSERVATIONS, CLINICAL DECISION MAKING)
XOHANA	Q3 2025	Inpatient Hosp	96416	CPT	CHEMOTHERAPY ADMINISTRATION, INTRAVENOUS INFUSION TECHNIQUE; INITIATION OF PROLONGED CHEMOTHERAPY INFUSION (MORE THAN 8 HO
XOHANA	Q3 2025	Inpatient Hosp	99026	CPT	HOSPITAL MANDATED ON CALL SERVICE; IN-HOSPITAL, EACH HOUR
XOHANA	Q3 2025	Inpatient Hosp	99027	CPT	HOSPITAL MANDATED ON CALL SERVICE; OUT-OF-HOSPITAL, EACH HOUR
XOHANA	Q3 2025	Inpatient Hosp	99199	CPT	UNLISTED SPECIAL SERVICE, PROCEDURE OR REPORT
XOHANA	Q3 2025	Inpatient Hosp	99220	CPT	INITIAL OBSERVATION CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES THESE 3 KEY COMPONENTS: A COMPREHENSIVE HISTORY; A COMPRE
XOHANA	Q3 2025	Inpatient Hosp	99221	CPT	INITIAL HOSPITAL CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES THESE 3 KEY COMPONENTS: A D
XOHANA	Q3 2025	Inpatient Hosp	99222	CPT	INITIAL HOSPITAL CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES THESE 3 KEY COMPONENTS: A C
XOHANA	Q3 2025	Inpatient Hosp	99223	CPT	INITIAL HOSPITAL CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES THESE 3 KEY COMPONENTS: A C
XOHANA	Q3 2025	Inpatient Hosp	99234	CPT	OBSERVATION OR INPATIENT HOSPITAL CARE, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT INCLUDING ADMISSION AND DISCHARGE O
XOHANA	Q3 2025	Inpatient Hosp	99235	CPT	OBSERVATION OR INPATIENT HOSPITAL CARE, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT INCLUDING ADMISSION AND DISCHARGE O
XOHANA	Q3 2025	Inpatient Hosp	99236	CPT	OBSERVATION OR INPATIENT HOSPITAL CARE, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT INCLUDING ADMISSION AND DISCHARGE O
XOHANA	Q3 2025	Inpatient Hosp	G0531	HCPCS	FACILITY-BASED RESPITE 24-HOUR UNIT
XOHANA	Q3 2025	Inpatient Hosp	H0017	HCPCS	BEHAVIORAL HEALTH; RESIDENTIAL (HOSPITAL RESIDENTIAL TREATMENT PROGRAM), WITHOUT ROOM AND BOARD, PER DIEM
XOHANA	Q3 2025	Inpatient Hosp	H0019	HCPCS	BEHAVIORAL HEALTH; LONG-TERM RESIDENTIAL (NONMEDICAL, NONACUTE CARE IN A RESIDENTIAL TREATMENT PROGRAM WHERE STAY IS TYPICALLY LO
XOHANA	Q3 2025	Inpatient Hosp	H0035	HCPCS	MENTAL HEALTH PARTIAL HOSPITALIZATION, TREATMENT, LESS THAN 24 HOURS
XOHANA	Q3 2025	Inpatient Hosp	H0045	HCPCS	RESPITE CARE SERVICES, NOT IN THE HOME, PER DIEM
XOHANA	Q3 2025	Inpatient Hosp	H1000	HCPCS	PRENATAL CARE, AT-RISK ASSESSMENT
XOHANA	Q3 2025	Inpatient Hosp	H1005	HCPCS	PRENATAL CARE, AT-RISK ENHANCED SERVICE PACKAGE (INCLUDES H1001-H1004)
XOHANA	Q3 2025	Inpatient Hosp	S2900	HCPCS	SURGICAL TECHNIQUES REQUIRING USE OF ROBOTIC SURGICAL SYSTEM (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
XOHANA	Q3 2025	Inpatient Hosp	S5150	HCPCS	UNSKILLED RESPITE CARE, NOT HOSPICE; PER 15 MINUTES
XOHANA	Q3 2025	Inpatient Hosp	T1005	HCPCS	RESPITE CARE SERVICES, UP TO 15 MINUTES
XOHANA	Q3 2025	Other	T2050	HCPCS	FINANCIAL MANAGEMENT SELF-DIRECTED WAIVER PD
XOHANA	Q3 2025	Other	T2051	HCPCS	SUPPORTS BROKERAGE SELF-DIRECTED WAIVER PD
XOHANA	Q3 2025	Outpatient Hosp	170	CPT	ANESTHESIA FOR INTRAORAL PROCEDURES, INCLUDING BIOPSY; NOT OTHERWISE SPECIFIED
XOHANA	Q3 2025	Outpatient Hosp	811	CPT	ANESTHESIA FOR LOWER INTESTINAL ENDOSCOPIC PROCEDURES, ENDOSCOPE INTRODUCED DISTAL TO DUODENUM; NOT OTHERWISE SPECIFIED
XOHANA	Q3 2025	Outpatient Hosp	812	CPT	ANESTHESIA FOR LOWER INTESTINAL ENDOSCOPIC PROCEDURES, ENDOSCOPE INTRODUCED DISTAL TO DUODENUM; SCREENING COLONOSCOPY
XOHANA	Q3 2025	Outpatient Hosp	813	CPT	ANESTHESIA FOR COMBINED UPPER AND LOWER GASTROINTESTINAL ENDOSCOPIC PROCEDURES, ENDOSCOPE INTRODUCED BOTH PROXIMAL
XOHANA	Q3 2025	Outpatient Hosp	921	CPT	ANESTHESIA FOR PROCEDURES ON MALE GENITALIA (INCLUDING OPEN URETHRAL PROCEDURES); VASECTOMY, UNILATERAL OR BILATERAL
XOHANA	Q3 2025	Outpatient Hosp	948	CPT	ANESTHESIA FOR VAGINAL PROCEDURES (INCLUDING BIOPSY OF LABIA, VAGINA, CERVIX OR ENDOMETRIUM); CERVICAL CERCLAGE
XOHANA	Q3 2025	Outpatient Hosp	0402T	CPT	COLLAGEN CROSS-LINKING OF CORNEA (INCLUDING REMOVAL OF THE CORNEAL EPITHELIUM AND INTRAOPERATIVE PACHYMETRY WHEN PERFORMED)
XOHANA	Q3 2025	Outpatient Hosp	0402T	CPT	COLLAGEN CROSS-LINKING OF CORNEA (INCLUDING REMOVAL OF THE CORNEAL EPITHELIUM AND INTRAOPERATIVE PACHYMETRY WHEN PERFORMED)
XOHANA	Q3 2025	Outpatient Hosp	0449T	CPT	INSERTION OF AQUEOUS DRAINAGE DEVICE, WITHOUT EXTRAOCULAR RESERVOIR, INTERNAL APPROACH, INTO THE SUBCONJUNCTIVAL SPACE; INITIAL DEVICE
XOHANA	Q3 2025	Outpatient Hosp	0640T	CPT	NCNTC NR IFR SPECTRSC FLAP/WND IMG ACQUISJ I AND R
XOHANA	Q3 2025	Outpatient Hosp	0647T	CPT	INSJ GASTROSTOMY TUBE PERQ W/MAGNETIC GASTROPEXY
XOHANA	Q3 2025	Outpatient Hosp	0648T	CPT	QUAN MR ALYS TISS COMPOSITION W/O MRI SAME SESS
XOHANA	Q3 2025	Outpatient Hosp	0649T	CPT	QUAN MR ALYS TISS COMPOSITION W/MRI
XOHANA	Q3 2025	Outpatient Hosp	0650T	CPT	PRGRMG DEV EVAL SCRMS PHYS/QHP REMOTE
XOHANA	Q3 2025	Outpatient Hosp	0651T	CPT	MAGNETICALLY CONTROLLED CAPSULE ENDOSCOPY W/I AND R
XOHANA	Q3 2025	Outpatient Hosp	0652T	CPT	EGD FLEXIBLE TRANSNASAL DX W/COLLJ SPEC BR/WA
XOHANA	Q3 2025	Outpatient Hosp	0653T	CPT	EGD FLEXIBLE TRANSNASAL W/BIOPSY SINGLE/MULTIPLE
XOHANA	Q3 2025	Outpatient Hosp	0654T	CPT	EGD FLEXIBLE TRANSNASAL W/INSJ INTRAL TUBE/CATH
XOHANA	Q3 2025	Outpatient Hosp	0655T	CPT	TRANSPERINEAL FOCAL LASER ABLTJ MAL PRST8 TISS
XOHANA	Q3 2025	Outpatient Hosp	0658T	CPT	ELECTRICAL IMPEDENCE SPECTROSCOPY 1+SKIN LESIONS
XOHANA	Q3 2025	Outpatient Hosp	0660T	CPT	IMPLTJ ANT SGM IO NBIODEGRADABLE RX ELUTING SYS
XOHANA	Q3 2025	Outpatient Hosp	0661T	CPT	RMVL AND RIMPLTJ ANT SGM IO NBIODGRD RX ELUT IMPLT
XOHANA	Q3 2025	Outpatient Hosp	0662T	CPT	SCALP COOLING 1ST MEASUREMENT AND CAP CALIBRATION
XOHANA	Q3 2025	Outpatient Hosp	0663T	CPT	SCALP COOLING PLACEMENT MNTR AND REMOVAL OF DEVICE
XOHANA	Q3 2025	Outpatient Hosp	0664T	CPT	DONOR HYSTERECTOMY OPEN FROM CADAVER DONOR
XOHANA	Q3 2025	Outpatient Hosp	0714T	CPT	TPRNL LSR ABLTJ B9 PROSTATIC HYPERPLASIA W/IMG
XOHANA	Q3 2025	Outpatient Hosp	0716T	CPT	CARDIAC ACOUS WAVFRM REC AUTO ALYS CAD RSK SCORE
XOHANA	Q3 2025	Outpatient Hosp	0717T	CPT	ADRC THER PRTL THICKNESS RC TEAR
XOHANA	Q3 2025	Outpatient Hosp	0718T	CPT	ADRC THER PRTL THICKNESS RC TEAR NJX TENDON UNI
XOHANA	Q3 2025	Outpatient Hosp	0719T	CPT	PST VERTEBRAL JOINT RPLCMT LUMBAR SPI SINGLE SGM
XOHANA	Q3 2025	Outpatient Hosp	0720T	CPT	PERQ ELEC NRV FIELD STIMJ CRANIAL NRVS WO IMPLTJ
XOHANA	Q3 2025	Outpatient Hosp	0721T	CPT	QUAN CT TISS CHARAC I AND R W/O CNCRNT CT EXAM
XOHANA	Q3 2025	Outpatient Hosp	0722T	CPT	QUAN CT TISS CHARAC I AND R W/CNCRNT CT EXAM
XOHANA	Q3 2025	Outpatient Hosp	0723T	CPT	QMRCP W/O DIAGNOSTIC MRI SM ANATOMY DRG SM SESS
XOHANA	Q3 2025	Outpatient Hosp	0724T	CPT	QMRCP W/DIAGNOSTIC MRI SAME ANATOMY
XOHANA	Q3 2025	Outpatient Hosp	0725T	CPT	VESTIBULAR DEVICE IMPLANTATION UNILATERAL
XOHANA	Q3 2025	Outpatient Hosp	0726T	CPT	REMOVAL IMPLANTED VESTIBULAR DEVICE UNILATERAL
XOHANA	Q3 2025	Outpatient Hosp	0727T	CPT	RMVL AND RPLCMT IMPLANTED VESTIBULAR DEVICE UNI
XOHANA	Q3 2025	Outpatient Hosp	0728T	CPT	DX ALYS VESTIBULAR IMPLANT UNILATERAL 1ST PRGRMG
XOHANA	Q3 2025	Outpatient Hosp	0729T	CPT	DX ALYS VESTIBULAR IMPLANT UNI SBSQ PRGRMG
XOHANA	Q3 2025	Outpatient Hosp	0730T	CPT	TRABECULOTOMY BY LASER INCLUDING OCT GUIDANCE
XOHANA	Q3 2025	Outpatient Hosp	0731T	CPT	AUGMENTATIVE AI-BASED FACIAL PHENOTYPE A/R
XOHANA	Q3 2025	Outpatient Hosp	0732T	CPT	IMMUNOTHERAPY ADMN WITH ELECTROPORATION IM
XOHANA	Q3 2025	Outpatient Hosp	0733T	CPT	REM BDY AND LMB KNMTC MEAS THER SPLY AND TECH SPRT 30D

XOHANA	Q3 2025	Outpatient Hosp	0734T		CPT	REM BDY AND LMB KNMTC MEAS THER TX MGMT SVCS CAL MO
XOHANA	Q3 2025	Outpatient Hosp	0735T		CPT	PREPJ TUMOR CAVITY IORT CNCRNT W/PRIM CRANIOTOMY
XOHANA	Q3 2025	Outpatient Hosp	0736T		CPT	COLONIC LAVAGE 35+L WATER W/INDUCED DEFECATION
XOHANA	Q3 2025	Outpatient Hosp	0737T		CPT	XENOGRAFT IMPLANTATION INTO ARTICULAR SURFACE
XOHANA	Q3 2025	Outpatient Hosp		11055	CPT	PARING OR CUTTING OF BENIGN HYPERKERATOTIC LESION (EG, CORN OR CALLUS); SINGLE LESION
XOHANA	Q3 2025	Outpatient Hosp	11056		CPT	PARING OR CUTTING OF BENIGN HYPERKERATOTIC LESION (EG, CORN OR CALLUS); 2 TO 4 LESIONS
XOHANA	Q3 2025	Outpatient Hosp		11057	CPT	PARING OR CUTTING OF BENIGN HYPERKERATOTIC LESION (EG, CORN OR CALLUS); MORE THAN 4 LESIONS
XOHANA	Q3 2025	Outpatient Hosp		11200	CPT	REMOVAL OF SKIN TAGS, MULTIPLE FIBROCUTANEOUS TAGS, ANY AREA; UP TO AND INCLUDING 15 LESIONS
XOHANA	Q3 2025	Outpatient Hosp		11421	CPT	EXCISION, BENIGN LESION INCLUDING MARGINS, EXCEPT SKIN TAG (UNLESS LISTED ELSEWHERE), SCALP, NECK, HANDS, FEET, GENITALIA;
XOHANA	Q3 2025	Outpatient Hosp		11606	CPT	EXCISION, MALIGNANT LESION INCLUDING MARGINS, TRUNK, ARMS, OR LEGS; EXCISED DIAMETER OVER 4.0 CM
XOHANA	Q3 2025	Outpatient Hosp		11719	CPT	TRIMMING OF NONDYSTROPHIC NAILS, ANY NUMBER
XOHANA	Q3 2025	Outpatient Hosp		11720	CPT	DEBRIDEMENT OF NAIL(S) BY ANY METHOD(S); ONE TO FIVE
XOHANA	Q3 2025	Outpatient Hosp		11721	CPT	DEBRIDEMENT OF NAIL(S) BY ANY METHOD(S); SIX OR MORE
XOHANA	Q3 2025	Outpatient Hosp		11730	CPT	AVULSION OF NAIL PLATE, PARTIAL OR COMPLETE, SIMPLE; SINGLE
XOHANA	Q3 2025	Outpatient Hosp		11772	CPT	EXCISION OF PILONIDAL CYST OR SINUS; COMPLICATED
XOHANA	Q3 2025	Outpatient Hosp		11920	CPT	TATTOOING, INTRADERMAL INTRODUCTION OF INSOLUBLE OPAQUE PIGMENTS TO CORRECT COLOR DEFECTS OF SKIN, INCLUDING MICROPIGMENTA
XOHANA	Q3 2025	Outpatient Hosp		11954	CPT	SUBCUTANEOUS INJECTION OF FILLING MATERIAL (EG, COLLAGEN); OVER 10.0 CC
XOHANA	Q3 2025	Outpatient Hosp		11960	CPT	INSERTION OF TISSUE EXPANDER(S) FOR OTHER THAN BREAST, INCLUDING SUBSEQUENT EXPANSION
XOHANA	Q3 2025	Outpatient Hosp		11970	CPT	REPLACEMENT OF TISSUE EXPANDER WITH PERMANENT IMPLANT
XOHANA	Q3 2025	Outpatient Hosp		11971	CPT	REMOVAL OF TISSUE EXPANDER WITHOUT INSERTION OF IMPLANT
XOHANA	Q3 2025	Outpatient Hosp		12034	CPT	LAYER CLOSURE OF WOUNDS OF SCALP, AXILLAE, TRUNK AND/OR EXTREMITIES (EXCLUDING HANDS AND FEET); 7.6 CM TO 12.5 CM
XOHANA	Q3 2025	Outpatient Hosp	13151		CPT	REPAIR, COMPLEX, EYELIDS, NOSE, EARS AND/OR LIPS; 1.1 CM TO 2.5 CM
XOHANA	Q3 2025	Outpatient Hosp		13160	CPT	SECONDARY CLOSURE OF SURGICAL WOUND OR DEHISCENCE, EXTENSIVE OR COMPLICATED
XOHANA	Q3 2025	Outpatient Hosp		14000	CPT	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, TRUNK; DEFECT 10 SQ CM OR LESS
XOHANA	Q3 2025	Outpatient Hosp		15100	CPT	SPLIT-THICKNESS AUTOGRAFT, TRUNK, ARMS, LEGS; FIRST 100 SQ CM OR LESS, OR 1% OF BODY AREA OF INFANTS AND CHILDREN (EXCEPT
XOHANA	Q3 2025	Outpatient Hosp		15272	CPT	APPLICATION OF SKIN SUBSTITUTE GRAFT TO TRUNK, ARMS, LEGS, TOTAL WOUND SURFACE AREA UP TO 100 SQ CM; EACH ADDITIONAL 25 SQ CM WOUN
XOHANA	Q3 2025	Outpatient Hosp		15273	CPT	APPLICATION OF SKIN SUBSTITUTE GRAFT TO TRUNK, ARMS, LEGS, TOTAL WOUND SURFACE AREA GREATER THAN OR EQUAL TO 100 SQ CM; FIRST 100
XOHANA	Q3 2025	Outpatient Hosp		15274	CPT	APPLICATION OF SKIN SUBSTITUTE GRAFT TO TRUNK, ARMS, LEGS, TOTAL WOUND SURFACE AREA GREATER THAN OR EQUAL TO 100 SQ CM; EACH ADDIT
XOHANA	Q3 2025	Outpatient Hosp		15275	CPT	APPLICATION OF SKIN SUBSTITUTE GRAFT TO FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HANDS, FEET, AND/OR MULTIPLE D
XOHANA	Q3 2025	Outpatient Hosp		15276	CPT	APPLICATION OF SKIN SUBSTITUTE GRAFT TO FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HANDS, FEET, AND/OR MULTIPLE D
XOHANA	Q3 2025	Outpatient Hosp		15650	CPT	TRANSFER, INTERMEDIATE, OF ANY PEDICLE FLAP (EG, ABDOMEN TO WRIST, WALKING TUBE), ANY LOCATION
XOHANA	Q3 2025	Outpatient Hosp		15769	CPT	GRAFTING OF AUTOLOGOUS SOFT TISSUE, OTHER, HARVESTED BY DIRECT EXCISION (EG, FAT, DERMIS, FASCIA)
XOHANA	Q3 2025	Outpatient Hosp		15771	CPT	GRAFTING OF AUTOLOGOUS FAT HARVESTED BY LIPOSUCTION TECHNIQUE TO TRUNK, BREASTS, SCALP, ARMS, AND/OR LEGS; 50 CC OR LESS INJECTATE
XOHANA	Q3 2025	Outpatient Hosp		15772	CPT	GRAFTING OF AUTOLOGOUS FAT HARVESTED BY LIPOSUCTION TECHNIQUE TO TRUNK, BREASTS, SCALP, ARMS, AND/OR LEGS; EACH ADDITIONAL 50 CC INJECTATE, OR PART THEREOF (
XOHANA	Q3 2025	Outpatient Hosp		15773	CPT	GRAFTING OF AUTOLOGOUS FAT HARVESTED BY LIPOSUCTION TECHNIQUE TO FACE, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HANDS, AND/OR FEET; 25 CC OR LESS INJECTA
XOHANA	Q3 2025	Outpatient Hosp		15774	CPT	GRAFTING OF AUTOLOGOUS FAT HARVESTED BY LIPOSUCTION TECHNIQUE TO FACE, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HANDS, AND/OR FEET; EACH ADDITIONAL 25 C
XOHANA	Q3 2025	Outpatient Hosp		15777	CPT	IMPLANTATION OF BIOLOGIC IMPLANT (EG, ACELLULAR DERMAL MATRIX) FOR SOFT TISSUE REINFORCEMENT (EG, BREAST, TRUNK) (LIST SEPARATELY
XOHANA	Q3 2025	Outpatient Hosp		15830	CPT	EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY); ABDOMEN, INFRAUMBILICAL PANNICULECTOMY
XOHANA	Q3 2025	Outpatient Hosp		15839	CPT	EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY); OTHER AREA
XOHANA	Q3 2025	Outpatient Hosp		17000	CPT	DESTRUCTION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY, CHEMOSURGERY, SURGICAL CURETTEMENT), PREMALIGNANT LESIONS (EG
XOHANA	Q3 2025	Outpatient Hosp		17003	CPT	DESTRUCTION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY, CHEMOSURGERY, SURGICAL CURETTEMENT), PREMALIGNANT LESIONS (EG
XOHANA	Q3 2025	Outpatient Hosp		17111	CPT	DESTRUCTION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY, CHEMOSURGERY, SURGICAL CURETTEMENT), OF BENIGN LESIONS OTHER
XOHANA	Q3 2025	Outpatient Hosp		19083	CPT	BIOPSY, BREAST, WITH PLACEMENT OF BREAST LOCALIZATION DEVICE(S) (EG, CLIP, METALLIC PELLET), WHEN PERFORMED, AND IMAGING OF THE BI
XOHANA	Q3 2025	Outpatient Hosp		19084	CPT	BIOPSY, BREAST, WITH PLACEMENT OF BREAST LOCALIZATION DEVICE(S) (EG, CLIP, METALLIC PELLET), WHEN PERFORMED, AND IMAGING OF THE BI
XOHANA	Q3 2025	Outpatient Hosp		19120	CPT	EXCISION OF CYST, FIBROADENOMA, OR OTHER BENIGN OR MALIGNANT TUMOR, ABERRANT BREAST TISSUE, DUCT LESION, NIPPLE OR AREOLAR
XOHANA	Q3 2025	Outpatient Hosp		19301	CPT	MASTECTOMY, PARTIAL (EG, LUMPECTOMY, TYLECTOMY, QUADRANTECTOMY, SEGMENTECTOMY);
XOHANA	Q3 2025	Outpatient Hosp		19302	CPT	MASTECTOMY, PARTIAL (EG, LUMPECTOMY, TYLECTOMY, QUADRANTECTOMY, SEGMENTECTOMY); WITH AXILLARY LYMPHADENECTOMY
XOHANA	Q3 2025	Outpatient Hosp	19303		CPT	MASTECTOMY, SIMPLE, COMPLETE
XOHANA	Q3 2025	Outpatient Hosp		19305	CPT	MASTECTOMY, RADICAL, INCLUDING PECTORAL MUSCLES, AXILLARY LYMPH NODES
XOHANA	Q3 2025	Outpatient Hosp		19306	CPT	MASTECTOMY, RADICAL, INCLUDING PECTORAL MUSCLES, AXILLARY AND INTERNAL MAMMARY LYMPH NODES (URBAN TYPE OPERATION)
XOHANA	Q3 2025	Outpatient Hosp		19307	CPT	MASTECTOMY, MODIFIED RADICAL, INCLUDING AXILLARY LYMPH NODES, WITH OR WITHOUT PECTORALIS MINOR MUSCLE, BUT EXCLUDING PECTO
XOHANA	Q3 2025	Outpatient Hosp		19316	CPT	MASTOPEXY
XOHANA	Q3 2025	Outpatient Hosp	19318		CPT	BREAST REDUCTION
XOHANA	Q3 2025	Outpatient Hosp		19325	CPT	BREAST AUGMENTATION WITH IMPLANT
XOHANA	Q3 2025	Outpatient Hosp		19328	CPT	REMOVAL OF INTACT BREAST IMPLANT
XOHANA	Q3 2025	Outpatient Hosp		19342	CPT	INSERTION OR REPLACEMENT OF BREAST IMPLANT ON SEPARATE DAY FROM MASTECTOMY
XOHANA	Q3 2025	Outpatient Hosp		19350	CPT	NIPPLE/AREOLA RECONSTRUCTION
XOHANA	Q3 2025	Outpatient Hosp		19357	CPT	TISSUE EXPANDER PLACEMENT IN BREAST RECONSTRUCTION, INCLUDING SUBSEQUENT EXPANSION(S)
XOHANA	Q3 2025	Outpatient Hosp		19361	CPT	BREAST RECONSTRUCTION; WITH LATISSIMUS DORSI FLAP
XOHANA	Q3 2025	Outpatient Hosp		19370	CPT	REVISION OF PERI-IMPLANT CAPSULE, BREAST, INCLUDING CAPSULOTOMY, CAPSULORRHAPHY, AND/OR PARTIAL CAPSULECTOMY
XOHANA	Q3 2025	Outpatient Hosp		19371	CPT	PERI-IMPLANT CAPSULECTOMY, BREAST, COMPLETE, INCLUDING REMOVAL OF ALL INTRACAPSULAR CONTENTS
XOHANA	Q3 2025	Outpatient Hosp		19380	CPT	REVISION OF RECONSTRUCTED BREAST (EG, SIGNIFICANT REMOVAL OF TISSUE, RE-ADVANCEMENT AND/OR RE-INSET OF FLAPS IN AUTOLOGOUS RECONSTRUCTION OR SIGNIFICANT C
XOHANA	Q3 2025	Outpatient Hosp		20205	CPT	BIOPSY, MUSCLE; DEEP
XOHANA	Q3 2025	Outpatient Hosp		20520	CPT	REMOVAL OF FOREIGN BODY IN MUSCLE OR TENDON SHEATH; SIMPLE
XOHANA	Q3 2025	Outpatient Hosp		20527	CPT	INJECTION, ENZYME (EG, COLLAGENASE), PALMAR FASCIAL CORD (IE, DUPUYTREN'S CONTRACTURE)
XOHANA	Q3 2025	Outpatient Hosp		20680	CPT	REMOVAL OF IMPLANT; DEEP (EG, BURIED WIRE, PIN, SCREW, METAL BAND, NAIL, ROD OR PLATE)
XOHANA	Q3 2025	Outpatient Hosp		20694	CPT	REMOVAL, UNDER ANESTHESIA, OF EXTERNAL FIXATION SYSTEM
XOHANA	Q3 2025	Outpatient Hosp		20900	CPT	BONE GRAFT, ANY DONOR AREA; MINOR OR SMALL (EG, DOWEL OR BUTTON)
XOHANA	Q3 2025	Outpatient Hosp		20902	CPT	BONE GRAFT, ANY DONOR AREA; MAJOR OR LARGE
XOHANA	Q3 2025	Outpatient Hosp		20922	CPT	FASCIA LATA GRAFT; BY INCISION AND AREA EXPOSURE, COMPLEX OR SHEET
XOHANA	Q3 2025	Outpatient Hosp		20931	CPT	ALLOGRAFT FOR SPINE SURGERY ONLY; STRUCTURAL (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp		20937	CPT	AUTOGRAFT FOR SPINE SURGERY ONLY (INCLUDES HARVESTING THE GRAFT); MORSELIZED (THROUGH SEPARATE SKIN OR FASCIAL INCISION) (
XOHANA	Q3 2025	Outpatient Hosp		20956	CPT	BONE GRAFT WITH MICROVASCULAR ANASTOMOSIS; ILIAC CREST
XOHANA	Q3 2025	Outpatient Hosp		21011	CPT	EXCISION, TUMOR, SOFT TISSUE OF FACE OR SCALP, SUBCUTANEOUS; LESS THAN 2 CM
XOHANA	Q3 2025	Outpatient Hosp		21013	CPT	EXCISION, TUMOR, SOFT TISSUE OF FACE AND SCALP, SUBFASCIAL (EG, SUBGALEAL, INTRAMUSCULAR); LESS THAN 2 CM
XOHANA	Q3 2025	Outpatient Hosp		21089	CPT	UNLISTED MAXILLOFACIAL PROSTHETIC PROCEDURE
XOHANA	Q3 2025	Outpatient Hosp		21139	CPT	REDUCTION FOREHEAD; CONTOURING AND SETBACK OF ANTERIOR FRONTAL SINUS WALL
XOHANA	Q3 2025	Outpatient Hosp		21141	CPT	RECONSTRUCTION MIDFACE, LEFORT I; SINGLE PIECE, SEGMENT MOVEMENT IN ANY DIRECTION (EG, FOR LONG FACE SYNDROME), WITHOUT BO
XOHANA	Q3 2025	Outpatient Hosp		21196	CPT	RECONSTRUCTION OF MANDIBULAR RAMI AND/OR BODY, SAGITTAL SPLIT; WITH INTERNAL RIGID FIXATION
XOHANA	Q3 2025	Outpatient Hosp		21209	CPT	OSTEOPLASTY, FACIAL BONES; REDUCTION
XOHANA	Q3 2025	Outpatient Hosp		21235	CPT	GRAFT; EAR CARTILAGE, AUTOGENOUS, TO NOSE OR EAR (INCLUDES OBTAINING GRAFT)
XOHANA	Q3 2025	Outpatient Hosp		21299	CPT	UNLISTED CRANIOFACIAL AND MAXILLOFACIAL PROCEDURE
XOHANA	Q3 2025	Outpatient Hosp		21337	CPT	CLOSED TREATMENT OF NASAL SEPTAL FRACTURE, WITH OR WITHOUT STABILIZATION
XOHANA	Q3 2025	Outpatient Hosp		21552	CPT	EXCISION, TUMOR, SOFT TISSUE OF NECK OR ANTERIOR THORAX, SUBCUTANEOUS; 3 CM OR GREATER
XOHANA	Q3 2025	Outpatient Hosp		22505	CPT	MANIPULATION OF SPINE REQUIRING ANESTHESIA, ANY REGION
XOHANA	Q3 2025	Outpatient Hosp		22510	CPT	PERCUTANEOUS VERTEBROPLASTY (BONE BIOPSY INCLUDED WHEN PERFORMED), 1 VERTEBRAL BODY, UNILATERAL OR BILATERAL INJECTION, INCLUSIVE OF ALL IMAGING GUIDANCE;
XOHANA	Q3 2025	Outpatient Hosp		22513	CPT	PERCUTANEOUS VERTEBRAL AUGMENTATION, INCLUDING CAVITY CREATION (FRACTURE REDUCTION AND BONE BIOPSY INCLUDED WHEN PERFORMED) USING MECHANICAL DEVICE (
XOHANA	Q3 2025	Outpatient Hosp		22514	CPT	PERCUTANEOUS VERTEBRAL AUGMENTATION, INCLUDING CAVITY CREATION (FRACTURE REDUCTION AND BONE BIOPSY INCLUDED WHEN PERFORMED) USING MECHANICAL DEVICE (
XOHANA	Q3 2025	Outpatient Hosp		22515	CPT	PERCUTANEOUS VERTEBRAL AUGMENTATION, INCLUDING CAVITY CREATION (FRACTURE REDUCTION AND BONE BIOPSY INCLUDED WHEN PERFORMED) USING MECHANICAL DEVICE (
XOHANA	Q3 2025	Outpatient Hosp		22551	CPT	ARTHRODESIS, ANTERIOR INTERBODY, INCLUDING DISC SPACE PREPARATION, DISCECTOMY, OSTEOPHYTECTOMY AND DECOMPRESSION OF SPINAL CORD AN
XOHANA	Q3 2025	Outpatient Hosp		22552	CPT	CERVICAL BELOW C2, EACH ADDITIONAL INTERSPACE (LIST SEPARATELY IN ADDITION TO CODE FOR SEPARATE PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp		22558	CPT	ARTHRODESIS, ANTERIOR INTERBODY TECHNIQUE, INCLUDING MINIMAL DISCECTOMY TO PREPARE INTERSPACE (OTHER THAN FOR DECOMPRESSIO
XOHANA	Q3 2025	Outpatient Hosp		22600	CPT	ARTHRODESIS, POSTERIOR OR POSTEROLATERAL TECHNIQUE, SINGLE LEVEL; CERVICAL BELOW C2 SEGMENT
XOHANA	Q3 2025	Outpatient Hosp		22614	CPT	ARTHRODESIS, POSTERIOR OR POSTEROLATERAL TECHNIQUE, SINGLE LEVEL; EACH ADDITIONAL VERTEBRAL SEGMENT (LIST SEPARATELY IN AD
XOHANA	Q3 2025	Outpatient Hosp		22634	CPT	ARTHRODESIS, COMBINED POSTERIOR OR POSTEROLATERAL TECHNIQUE WITH POSTERIOR INTERBODY TECHNIQUE INCLUDING LAMINECTOMY AND/OR DISCEC
XOHANA	Q3 2025	Outpatient Hosp		22845	CPT	ANTERIOR INSTRUMENTATION; 2 TO 3 VERTEBRAL SEGMENTS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp		22850	CPT	REMOVAL OF POSTERIOR NONSEGMENTAL INSTRUMENTATION (EG, HARRINGTON ROD)
XOHANA	Q3 2025	Outpatient Hosp		22852	CPT	REMOVAL OF POSTERIOR SEGMENTAL INSTRUMENTATION

XOHANA	Q3 2025	Outpatient Hosp	22853	CPT	INSERTION OF INTERBODY BIOMECHANICAL DEVICE(S) (EG, SYNTHETIC CAGE, MESH) WITH INTEGRAL ANTERIOR INSTRUMENTATION FOR DEVICE ANCHORING (EG, SCREWS, FLANGES),
XOHANA	Q3 2025	Outpatient Hosp	22856	CPT	TOTAL DISC ARTHROPLASTY (ARTIFICIAL DISC), ANTERIOR APPROACH, INCLUDING DISCECTOMY WITH END PLATE PREPARATION (INCLUDES OSTEOPHYTECTOMY FOR NERVE ROOT OR S
XOHANA	Q3 2025	Outpatient Hosp	22858	CPT	TOTAL DISC ARTHROPLASTY (ARTIFICIAL DISC), ANTERIOR APPROACH, INCLUDING DISCECTOMY WITH END PLATE PREPARATION (INCLUDES OSTEOPHYTECTOMY FOR NERVE ROOT OR S
XOHANA	Q3 2025	Outpatient Hosp	22899	CPT	UNLISTED PROCEDURE, SPINE
XOHANA	Q3 2025	Outpatient Hosp	23071	CPT	EXCISION, TUMOR, SOFT TISSUE OF SHOULDER AREA, SUBCUTANEOUS; 3 CM OR GREATER
XOHANA	Q3 2025	Outpatient Hosp	23073	CPT	EXCISION, TUMOR, SOFT TISSUE OF SHOULDER AREA, SUBFASCIAL (EG, INTRAMUSCULAR); 5 CM OR GREATER
XOHANA	Q3 2025	Outpatient Hosp	23076	CPT	EXCISION, SOFT TISSUE TUMOR, SHOULDER AREA; DEEP, SUBFASCIAL, OR INTRAMUSCULAR
XOHANA	Q3 2025	Outpatient Hosp	23120	CPT	CLAVICULECTOMY; PARTIAL
XOHANA	Q3 2025	Outpatient Hosp	23130	CPT	ACROMIOPLASTY OR ACROMIONECTOMY, PARTIAL, WITH OR WITHOUT CORACOACROMIAL LIGAMENT RELEASE
XOHANA	Q3 2025	Outpatient Hosp	23405	CPT	TENOTOMY, SHOULDER AREA; SINGLE TENDON
XOHANA	Q3 2025	Outpatient Hosp	23410	CPT	REPAIR OF RUPTURED MUSCULOTENDINOUS CUFF (EG, ROTATOR CUFF) OPEN; ACUTE
XOHANA	Q3 2025	Outpatient Hosp	23412	CPT	REPAIR OF RUPTURED MUSCULOTENDINOUS CUFF (EG, ROTATOR CUFF) OPEN; CHRONIC
XOHANA	Q3 2025	Outpatient Hosp	23420	CPT	RECONSTRUCTION OF COMPLETE SHOULDER (ROTATOR) CUFF AVULSION, CHRONIC (INCLUDES ACROMIOPLASTY)
XOHANA	Q3 2025	Outpatient Hosp	23430	CPT	TENODESIS OF LONG TENDON OF BICEPS
XOHANA	Q3 2025	Outpatient Hosp	23440	CPT	RESECTION OR TRANSPLANTATION OF LONG TENDON OF BICEPS
XOHANA	Q3 2025	Outpatient Hosp	23455	CPT	CAPSULORRHAPHY, ANTERIOR; WITH LABRAL REPAIR (EG, BANKART PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp	23460	CPT	CAPSULORRHAPHY, ANTERIOR, ANY TYPE; WITH BONE BLOCK
XOHANA	Q3 2025	Outpatient Hosp	23470	CPT	ARTHROPLASTY, GLENOHUMERAL JOINT; HEMIARTHROPLASTY
XOHANA	Q3 2025	Outpatient Hosp	23472	CPT	ARTHROPLASTY, GLENOHUMERAL JOINT; TOTAL SHOULDER (GLENOID AND PROXIMAL HUMERAL REPLACEMENT (EG, TOTAL SHOULDER))
XOHANA	Q3 2025	Outpatient Hosp	23473	CPT	REVISION OF TOTAL SHOULDER ARTHROPLASTY, INCLUDING ALLOGRAFT WHEN PERFORMED; HUMERAL OR GLENOID COMPONENT
XOHANA	Q3 2025	Outpatient Hosp	23485	CPT	OSTEOTOMY, CLAVICLE, WITH OR WITHOUT INTERNAL FIXATION; WITH BONE GRAFT FOR NONUNION OR MALUNION (INCLUDES OBTAINING GRAFT
XOHANA	Q3 2025	Outpatient Hosp	23585	CPT	OPEN TREATMENT OF SCAPULAR FRACTURE (BODY, GLENOID OR ACROMION) WITH OR WITHOUT INTERNAL FIXATION
XOHANA	Q3 2025	Outpatient Hosp	23929	CPT	UNLISTED PROCEDURE, SHOULDER
XOHANA	Q3 2025	Outpatient Hosp	24071	CPT	EXCISION, TUMOR, SOFT TISSUE OF UPPER ARM OR ELBOW AREA, SUBCUTANEOUS; 3 CM OR GREATER
XOHANA	Q3 2025	Outpatient Hosp	24305	CPT	TENDON LENGTHENING, UPPER ARM OR ELBOW, EACH TENDON
XOHANA	Q3 2025	Outpatient Hosp	24342	CPT	REINSERTION OF RUPTURED BICEPS OR TRICEPS TENDON, DISTAL, WITH OR WITHOUT TENDON GRAFT
XOHANA	Q3 2025	Outpatient Hosp	24344	CPT	RECONSTRUCTION LATERAL COLLATERAL LIGAMENT, ELBOW, WITH TENDON GRAFT (INCLUDES HARVESTING OF GRAFT)
XOHANA	Q3 2025	Outpatient Hosp	24345	CPT	REPAIR MEDIAL COLLATERAL LIGAMENT, ELBOW, WITH LOCAL TISSUE
XOHANA	Q3 2025	Outpatient Hosp	24346	CPT	RECONSTRUCTION MEDIAL COLLATERAL LIGAMENT, ELBOW, WITH TENDON GRAFT (INCLUDES HARVESTING OF GRAFT)
XOHANA	Q3 2025	Outpatient Hosp	24357	CPT	TENOTOMY, ELBOW, LATERAL OR MEDIAL (EG, EPICONDYLITIS, TENNIS ELBOW, GOLFER'S ELBOW); PERCUTANEOUS
XOHANA	Q3 2025	Outpatient Hosp	24358	CPT	TENOTOMY, ELBOW, LATERAL OR MEDIAL (EG, EPICONDYLITIS, TENNIS ELBOW, GOLFER'S ELBOW); DEBRIDEMENT, SOFT TISSUE AND/OR BONE
XOHANA	Q3 2025	Outpatient Hosp	24545	CPT	OPEN TREATMENT OF HUMERAL SUPRACONDYLAR OR TRANSCONDYLAR FRACTURE, INCLUDES INTERNAL FIXATION, WHEN PERFORMED; WITHOUT INT
XOHANA	Q3 2025	Outpatient Hosp	24666	CPT	OPEN TREATMENT OF RADIAL HEAD OR NECK FRACTURE, INCLUDES INTERNAL FIXATION OR RADIAL HEAD EXCISION, WHEN PERFORMED; WITH R
XOHANA	Q3 2025	Outpatient Hosp	25076	CPT	EXCISION, TUMOR, SOFT TISSUE OF FOREARM AND/OR WRIST AREA; DEEP (SUBFASCIAL OR INTRAMUSCULAR)
XOHANA	Q3 2025	Outpatient Hosp	25105	CPT	ARTHROTOMY, WRIST JOINT; WITH SYNOVECTOMY
XOHANA	Q3 2025	Outpatient Hosp	25107	CPT	ARTHROTOMY, DISTAL RADIOULNAR JOINT INCLUDING REPAIR OF TRIANGULAR CARTILAGE, COMPLEX
XOHANA	Q3 2025	Outpatient Hosp	25118	CPT	SYNOVECTOMY, EXTENSOR TENDON SHEATH, WRIST, SINGLE COMPARTMENT;
XOHANA	Q3 2025	Outpatient Hosp	25210	CPT	CARPECTOMY; ONE BONE
XOHANA	Q3 2025	Outpatient Hosp	25215	CPT	CARPECTOMY; ALL BONES OF PROXIMAL ROW
XOHANA	Q3 2025	Outpatient Hosp	25246	CPT	INJECTION PROCEDURE FOR WRIST ARTHROGRAPHY
XOHANA	Q3 2025	Outpatient Hosp	25274	CPT	REPAIR, TENDON OR MUSCLE, EXTENSOR, FOREARM AND/OR WRIST; SECONDARY, WITH FREE GRAFT (INCLUDES OBTAINING GRAFT), EACH TEND
XOHANA	Q3 2025	Outpatient Hosp	25295	CPT	TENOLYSIS, FLEXOR OR EXTENSOR TENDON, FOREARM AND/OR WRIST, SINGLE, EACH TENDON
XOHANA	Q3 2025	Outpatient Hosp	25310	CPT	TENDON TRANSPLANTATION OR TRANSFER, FLEXOR OR EXTENSOR, FOREARM AND/OR WRIST, SINGLE; EACH TENDON
XOHANA	Q3 2025	Outpatient Hosp	25405	CPT	REPAIR OF NONUNION OR MALUNION, RADIUS OR ULNA; WITH AUTOGRAFT (INCLUDES OBTAINING GRAFT)
XOHANA	Q3 2025	Outpatient Hosp	25415	CPT	REPAIR OF NONUNION OR MALUNION, RADIUS AND ULNA; WITHOUT GRAFT (EG, COMPRESSION TECHNIQUE)
XOHANA	Q3 2025	Outpatient Hosp	25440	CPT	REPAIR OF NONUNION, SCAPHOID CARPAL (NAVICULAR) BONE, WITH OR WITHOUT RADIAL STYLOIDECTOMY (INCLUDES OBTAINING GRAFT AND N
XOHANA	Q3 2025	Outpatient Hosp	25447	CPT	ARTHROPLASTY, INTERPOSITION, INTERCARPAL OR CARPOMETACARPAL JOINTS
XOHANA	Q3 2025	Outpatient Hosp	25607	CPT	OPEN TREATMENT OF DISTAL RADIAL EXTRA-ARTICULAR FRACTURE OR EPIPHYSEAL SEPARATION, WITH INTERNAL FIXATION
XOHANA	Q3 2025	Outpatient Hosp	25609	CPT	OPEN TREATMENT OF DISTAL RADIAL INTRA-ARTICULAR FRACTURE OR EPIPHYSEAL SEPARATION; WITH INTERNAL FIXATION OF 3 OR MORE FRA
XOHANA	Q3 2025	Outpatient Hosp	26045	CPT	FASCIOTOMY, PALMAR (EG, DUPUYTREN'S CONTRACTURE); OPEN, PARTIAL
XOHANA	Q3 2025	Outpatient Hosp	26080	CPT	ARTHROTOMY, WITH EXPLORATION, DRAINAGE, OR REMOVAL OF LOOSE OR FOREIGN BODY; INTERPHALANGEAL JOINT, EACH
XOHANA	Q3 2025	Outpatient Hosp	26116	CPT	EXCISION, TUMOR OR VASCULAR MALFORMATION, SOFT TISSUE OF HAND OR FINGER; DEEP (SUBFASCIAL OR INTRAMUSCULAR)
XOHANA	Q3 2025	Outpatient Hosp	26123	CPT	FASCIECTOMY, PARTIAL PALMAR WITH RELEASE OF SINGLE DIGIT INCLUDING PROXIMAL INTERPHALANGEAL JOINT, WITH OR WITHOUT Z-PLAST
XOHANA	Q3 2025	Outpatient Hosp	26170	CPT	EXCISION OF TENDON, PALM, FLEXOR OR EXTENSOR, SINGLE, EACH TENDON
XOHANA	Q3 2025	Outpatient Hosp	26180	CPT	EXCISION OF TENDON, FINGER, FLEXOR OR EXTENSOR, EACH TENDON
XOHANA	Q3 2025	Outpatient Hosp	26341	CPT	MANIPULATION, PALMAR FASCIAL CORD (IE, DUPUYTREN'S CORD), POST ENZYME INJECTION (EG, COLLAGENASE), SINGLE CORD
XOHANA	Q3 2025	Outpatient Hosp	26410	CPT	REPAIR, EXTENSOR TENDON, HAND, PRIMARY OR SECONDARY; WITHOUT FREE GRAFT, EACH TENDON
XOHANA	Q3 2025	Outpatient Hosp	26418	CPT	REPAIR, EXTENSOR TENDON, FINGER, PRIMARY OR SECONDARY; WITHOUT FREE GRAFT, EACH TENDON
XOHANA	Q3 2025	Outpatient Hosp	26480	CPT	TRANSFER OR TRANSPLANT OF TENDON, CARPOMETACARPAL AREA OR DORSUM OF HAND; WITHOUT FREE GRAFT, EACH TENDON
XOHANA	Q3 2025	Outpatient Hosp	26483	CPT	TRANSFER OR TRANSPLANT OF TENDON, CARPOMETACARPAL AREA OR DORSUM OF HAND; WITH FREE TENDON GRAFT (INCLUDES OBTAINING GRAFT
XOHANA	Q3 2025	Outpatient Hosp	26485	CPT	TRANSFER OR TRANSPLANT OF TENDON, PALMAR; WITHOUT FREE TENDON GRAFT, EACH TENDON
XOHANA	Q3 2025	Outpatient Hosp	26540	CPT	REPAIR OF COLLATERAL LIGAMENT, METACARPOPHALANGEAL OR INTERPHALANGEAL JOINT
XOHANA	Q3 2025	Outpatient Hosp	26541	CPT	RECONSTRUCTION, COLLATERAL LIGAMENT, METACARPOPHALANGEAL JOINT, SINGLE; WITH TENDON OR FASCIAL GRAFT (INCLUDES OBTAINING G
XOHANA	Q3 2025	Outpatient Hosp	26587	CPT	RECONSTRUCTION OF POLYDACTYLOUS DIGIT, SOFT TISSUE AND BONE
XOHANA	Q3 2025	Outpatient Hosp	26685	CPT	OPEN TREATMENT OF CARPOMETACARPAL DISLOCATION, OTHER THAN THUMB; INCLUDES INTERNAL FIXATION, WHEN PERFORMED, EACH JOINT
XOHANA	Q3 2025	Outpatient Hosp	26727	CPT	PERCUTANEOUS SKELETAL FIXATION OF UNSTABLE PHALANGEAL SHAFT FRACTURE, PROXIMAL OR MIDDLE PHALANX, FINGER OR THUMB, WITH MA
XOHANA	Q3 2025	Outpatient Hosp	26735	CPT	OPEN TREATMENT OF PHALANGEAL SHAFT FRACTURE, PROXIMAL OR MIDDLE PHALANX, FINGER OR THUMB, INCLUDES INTERNAL FIXATION, WHEN
XOHANA	Q3 2025	Outpatient Hosp	26746	CPT	OPEN TREATMENT OF ARTICULAR FRACTURE, INVOLVING METACARPOPHALANGEAL OR INTERPHALANGEAL JOINT, INCLUDES INTERNAL FIXATION,
XOHANA	Q3 2025	Outpatient Hosp	26842	CPT	ARTHRODESIS, CARPOMETACARPAL JOINT, THUMB, WITH OR WITHOUT INTERNAL FIXATION; WITH AUTOGRAFT (INCLUDES OBTAINING GRAFT)
XOHANA	Q3 2025	Outpatient Hosp	26989	CPT	UNLISTED PROCEDURE, HANDS OR FINGERS
XOHANA	Q3 2025	Outpatient Hosp	27130	CPT	ARTHROPLASTY, ACETABULAR AND PROXIMAL FEMORAL PROSTHETIC REPLACEMENT (TOTAL HIP ARTHROPLASTY), WITH OR WITHOUT AUTOGRAFT O
XOHANA	Q3 2025	Outpatient Hosp	27279	CPT	ARTHRODESIS, SACROILIAC JOINT, PERCUTANEOUS OR MINIMALLY INVASIVE (INDIRECT VISUALIZATION), WITH IMAGE GUIDANCE, INCLUDES OBTAINING BONE GRAFT WHEN PERFORME
XOHANA	Q3 2025	Outpatient Hosp	27310	CPT	ARTHROTOMY, KNEE, WITH EXPLORATION, DRAINAGE, OR REMOVAL OF FOREIGN BODY (EG, INFECTION)
XOHANA	Q3 2025	Outpatient Hosp	27340	CPT	EXCISION, PREPATELLAR BURSA
XOHANA	Q3 2025	Outpatient Hosp	27385	CPT	SUTURE OF QUADRICEPS OR HAMSTRING MUSCLE RUPTURE; PRIMARY
XOHANA	Q3 2025	Outpatient Hosp	27395	CPT	LENGTHENING OF HAMSTRING TENDON; MULTIPLE TENDONS, BILATERAL
XOHANA	Q3 2025	Outpatient Hosp	27418	CPT	ANTERIOR TIBIAL TUBERCLEPLASTY (EG, MAQUET TYPE PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp	27425	CPT	LATERAL RETINACULAR RELEASE, OPEN
XOHANA	Q3 2025	Outpatient Hosp	27427	CPT	LIGAMENTOUS RECONSTRUCTION (AUGMENTATION), KNEE; EXTRA-ARTICULAR
XOHANA	Q3 2025	Outpatient Hosp	27446	CPT	ARTHROPLASTY, KNEE, CONDYLE AND PLATEAU; MEDIAL OR LATERAL COMPARTMENT
XOHANA	Q3 2025	Outpatient Hosp	27447	CPT	ARTHROPLASTY, KNEE, CONDYLE AND PLATEAU; MEDIAL AND LATERAL COMPARTMENTS WITH OR WITHOUT PATELLA RESURFACING (TOTAL KNEE A
XOHANA	Q3 2025	Outpatient Hosp	27448	CPT	OSTEOTOMY, FEMUR, SHAFT OR SUPRACONDYLAR; WITHOUT FIXATION
XOHANA	Q3 2025	Outpatient Hosp	27659	CPT	REPAIR, FLEXOR TENDON, LEG; SECONDARY, WITH OR WITHOUT GRAFT, EACH TENDON
XOHANA	Q3 2025	Outpatient Hosp	27687	CPT	GASTROCNEMIUS RECESSION (EG, STRAYER PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp	27691	CPT	TRANSFER OR TRANSPLANT OF SINGLE TENDON (WITH MUSCLE REDIRECTION OR REROUTING); DEEP (EG, ANTERIOR TIBIAL OR POSTERIOR TIB
XOHANA	Q3 2025	Outpatient Hosp	27700	CPT	ARTHROPLASTY, ANKLE;
XOHANA	Q3 2025	Outpatient Hosp	27784	CPT	OPEN TREATMENT OF PROXIMAL FIBULA OR SHAFT FRACTURE, INCLUDES INTERNAL FIXATION, WHEN PERFORMED
XOHANA	Q3 2025	Outpatient Hosp	27814	CPT	OPEN TREATMENT OF BIMALLEOLAR ANKLE FRACTURE (EG, LATERAL AND MEDIAL MALLEOLI, OR LATERAL AND POSTERIOR MALLEOLI, OR MEDIA
XOHANA	Q3 2025	Outpatient Hosp	27823	CPT	OPEN TREATMENT OF TRIMALLEOLAR ANKLE FRACTURE, INCLUDES INTERNAL FIXATION, WHEN PERFORMED, MEDIAL AND/OR LATERAL MALLEOLUS
XOHANA	Q3 2025	Outpatient Hosp	27829	CPT	OPEN TREATMENT OF DISTAL TIBIOFIBULAR JOINT (SYNDESMOSIS) DISRUPTION, INCLUDES INTERNAL FIXATION, WHEN PERFORMED
XOHANA	Q3 2025	Outpatient Hosp	27870	CPT	ARTHRODESIS, ANKLE, OPEN
XOHANA	Q3 2025	Outpatient Hosp	28112	CPT	OSTECTOMY, COMPLETE EXCISION; OTHER METATARSAL HEAD (SECOND, THIRD OR FOURTH)
XOHANA	Q3 2025	Outpatient Hosp	28116	CPT	OSTECTOMY, EXCISION OF TARSAL COALITION
XOHANA	Q3 2025	Outpatient Hosp	28119	CPT	OSTECTOMY, CALCANEUS; FOR SPUR, WITH OR WITHOUT PLANTAR FASCIAL RELEASE
XOHANA	Q3 2025	Outpatient Hosp	28120	CPT	PARTIAL EXCISION (CRATERIZATION, SAUCERIZATION, SEQUESTRECTOMY, OR DIAPHYSECTOMY) BONE (EG, OSTEOMYELITIS OR BOSSING); TAL
XOHANA	Q3 2025	Outpatient Hosp	28285	CPT	CORRECTION, HAMMERTOE (EG, INTERPHALANGEAL FUSION, PARTIAL OR TOTAL PHALANGECTOMY)
XOHANA	Q3 2025	Outpatient Hosp	28286	CPT	CORRECTION, COCK-UP FIFTH TOE, WITH PLASTIC SKIN CLOSURE (EG, RUIZ-MORA TYPE PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp	28288	CPT	OSTECTOMY, PARTIAL, EXOSTECTOMY OR CONDYLECTOMY, METATARSAL HEAD, EACH METATARSAL HEAD

XOHANA	Q3 2025	Outpatient Hosp	28289	CPT	HALLUX RIGIDUS CORRECTION WITH CHEILECTOMY, DEBRIDEMENT AND CAPSULAR RELEASE OF THE FIRST METATARSOPHALANGEAL JOINT
XOHANA	Q3 2025	Outpatient Hosp	28291	CPT	HALLUX RIGIDUS CORRECTION WITH CHEILECTOMY, DEBRIDEMENT AND CAPSULAR RELEASE OF THE FIRST METATARSOPHALANGEAL JOINT; WITH IMPLANT
XOHANA	Q3 2025	Outpatient Hosp	28292	CPT	CORRECTION, HALLUX VALGUS (BUNION), WITH OR WITHOUT SESAMOIDECTOMY; KELLER, MCBRIDE, OR MAYO TYPE PROCEDURE
XOHANA	Q3 2025	Outpatient Hosp	28296	CPT	CORRECTION, HALLUX VALGUS (BUNION), WITH OR WITHOUT SESAMOIDECTOMY; WITH METATARSAL OSTEOTOMY (EG, MITCHELL, CHEVRON, OR C
XOHANA	Q3 2025	Outpatient Hosp	28297	CPT	CORRECTION, HALLUX VALGUS (BUNION), WITH OR WITHOUT SESAMOIDECTOMY; LAPIDUS-TYPE PROCEDURE
XOHANA	Q3 2025	Outpatient Hosp	28298	CPT	CORRECTION, HALLUX VALGUS (BUNION), WITH OR WITHOUT SESAMOIDECTOMY; BY PHALANX OSTEOTOMY
XOHANA	Q3 2025	Outpatient Hosp	28304	CPT	OSTEOTOMY, TARSAL BONES, OTHER THAN CALCANEUS OR TALUS;
XOHANA	Q3 2025	Outpatient Hosp	28306	CPT	OSTEOTOMY, WITH OR WITHOUT LENGTHENING, SHORTENING OR ANGULAR CORRECTION, METATARSAL; FIRST METATARSAL
XOHANA	Q3 2025	Outpatient Hosp	28308	CPT	OSTEOTOMY, WITH OR WITHOUT LENGTHENING, SHORTENING OR ANGULAR CORRECTION, METATARSAL; OTHER THAN FIRST METATARSAL, EACH
XOHANA	Q3 2025	Outpatient Hosp	28312	CPT	OSTEOTOMY, SHORTENING, ANGULAR OR ROTATIONAL CORRECTION; OTHER PHALANGES, ANY TOE
XOHANA	Q3 2025	Outpatient Hosp	28322	CPT	REPAIR, NONUNION OR MALUNION; METATARSAL, WITH OR WITHOUT BONE GRAFT (INCLUDES OBTAINING GRAFT)
XOHANA	Q3 2025	Outpatient Hosp	28344	CPT	RECONSTRUCTION, TOE(S); POLYDACTYLY
XOHANA	Q3 2025	Outpatient Hosp	28485	CPT	OPEN TREATMENT OF METATARSAL FRACTURE, INCLUDES INTERNAL FIXATION, WHEN PERFORMED, EACH
XOHANA	Q3 2025	Outpatient Hosp	28705	CPT	ARTHRODESIS; PANTALAR
XOHANA	Q3 2025	Outpatient Hosp	28715	CPT	ARTHRODESIS; TRIPLE
XOHANA	Q3 2025	Outpatient Hosp	28725	CPT	ARTHRODESIS; SUBTALAR
XOHANA	Q3 2025	Outpatient Hosp	28730	CPT	ARTHRODESIS, MIDTARSAL OR TARSOMETATARSAL, MULTIPLE OR TRANSVERSE;
XOHANA	Q3 2025	Outpatient Hosp	28740	CPT	ARTHRODESIS, MIDTARSAL OR TARSOMETATARSAL, SINGLE JOINT
XOHANA	Q3 2025	Outpatient Hosp	28750	CPT	ARTHRODESIS, GREAT TOE; METATARSOPHALANGEAL JOINT
XOHANA	Q3 2025	Outpatient Hosp	28755	CPT	ARTHRODESIS, GREAT TOE; INTERPHALANGEAL JOINT
XOHANA	Q3 2025	Outpatient Hosp	28899	CPT	UNLISTED PROCEDURE, FOOT OR TOES
XOHANA	Q3 2025	Outpatient Hosp	29425	CPT	APPLICATION OF SHORT LEG CAST (BELOW KNEE TO TOES); WALKING OR AMBULATORY TYPE
XOHANA	Q3 2025	Outpatient Hosp	29806	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; CAPSULORRHAPHY
XOHANA	Q3 2025	Outpatient Hosp	29807	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; REPAIR OF SLAP LESION
XOHANA	Q3 2025	Outpatient Hosp	29821	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; SYNOVECTOMY, COMPLETE
XOHANA	Q3 2025	Outpatient Hosp	29822	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; DEBRIDEMENT, LIMITED, 1 OR 2 DISCRETE STRUCTURES (EG, HUMERAL BONE, HUMERAL ARTICULAR CARTILAGE, GLENOID BONE, GLENOID ART
XOHANA	Q3 2025	Outpatient Hosp	29823	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; DEBRIDEMENT, EXTENSIVE, 3 OR MORE DISCRETE STRUCTURES (EG, HUMERAL BONE, HUMERAL ARTICULAR CARTILAGE, GLENOID BONE, GLEN
XOHANA	Q3 2025	Outpatient Hosp	29824	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; DISTAL CLAVICULECTOMY INCLUDING DISTAL ARTICULAR SURFACE (MUMFORD PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp	29826	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; DECOMPRESSION OF SUBACROMIAL SPACE WITH PARTIAL ACROMIOPLASTY, WITH CORACOACROMIAL LIGAMENT (IE, ARCH) RELEASE, WHEN PI
XOHANA	Q3 2025	Outpatient Hosp	29827	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; WITH ROTATOR CUFF REPAIR
XOHANA	Q3 2025	Outpatient Hosp	29828	CPT	ARTHROSCOPY, SHOULDER, SURGICAL; BICEPS TENODESIS
XOHANA	Q3 2025	Outpatient Hosp	29830	CPT	ARTHROSCOPY, ELBOW, DIAGNOSTIC, WITH OR WITHOUT SYNOVIAL BIOPSY (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp	29834	CPT	ARTHROSCOPY, ELBOW, SURGICAL; WITH REMOVAL OF LOOSE BODY OR FOREIGN BODY
XOHANA	Q3 2025	Outpatient Hosp	29835	CPT	ARTHROSCOPY, ELBOW, SURGICAL; SYNOVECTOMY, PARTIAL
XOHANA	Q3 2025	Outpatient Hosp	29836	CPT	ARTHROSCOPY, ELBOW, SURGICAL; SYNOVECTOMY, COMPLETE
XOHANA	Q3 2025	Outpatient Hosp	29844	CPT	ARTHROSCOPY, WRIST, SURGICAL; SYNOVECTOMY, PARTIAL
XOHANA	Q3 2025	Outpatient Hosp	29846	CPT	ARTHROSCOPY, WRIST, SURGICAL; EXCISION AND/OR REPAIR OF TRIANGULAR FIBROCARTILAGE AND/OR JOINT DEBRIDEMENT
XOHANA	Q3 2025	Outpatient Hosp	29847	CPT	ARTHROSCOPY, WRIST, SURGICAL; INTERNAL FIXATION FOR FRACTURE OR INSTABILITY
XOHANA	Q3 2025	Outpatient Hosp	29848	CPT	ENDOSCOPY, WRIST, SURGICAL, WITH RELEASE OF TRANSVERSE CARPAL LIGAMENT
XOHANA	Q3 2025	Outpatient Hosp	29867	CPT	ARTHROSCOPY, KNEE, SURGICAL; OSTEOCHONDRAL ALLOGRAFT (EG, MOSAICPLASTY)
XOHANA	Q3 2025	Outpatient Hosp	29868	CPT	ARTHROSCOPY, KNEE, SURGICAL; MENISCAL TRANSPLANTATION (INCLUDES ARTHROTOMY FOR MENISCAL INSERTION), MEDIAL OR LATERAL
XOHANA	Q3 2025	Outpatient Hosp	29870	CPT	ARTHROSCOPY, KNEE, DIAGNOSTIC, WITH OR WITHOUT SYNOVIAL BIOPSY (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp	29873	CPT	ARTHROSCOPY, KNEE, SURGICAL; WITH LATERAL RELEASE
XOHANA	Q3 2025	Outpatient Hosp	29874	CPT	ARTHROSCOPY, KNEE, SURGICAL; FOR REMOVAL OF LOOSE BODY OR FOREIGN BODY (EG, OSTEOCHONDRITIS DISSECANS FRAGMENTATION, CHOND
XOHANA	Q3 2025	Outpatient Hosp	29875	CPT	ARTHROSCOPY, KNEE, SURGICAL; SYNOVECTOMY, LIMITED (EG, PLICA OR SHELF RESECTION) (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp	29876	CPT	ARTHROSCOPY, KNEE, SURGICAL; SYNOVECTOMY, MAJOR, TWO OR MORE COMPARTMENTS (EG, MEDIAL OR LATERAL)
XOHANA	Q3 2025	Outpatient Hosp	29877	CPT	ARTHROSCOPY, KNEE, SURGICAL; DEBRIDEMENT/SHAVING OF ARTICULAR CARTILAGE (CHONDROPLASTY)
XOHANA	Q3 2025	Outpatient Hosp	29879	CPT	ARTHROSCOPY, KNEE, SURGICAL; ABRASION ARTHROPLASTY (INCLUDES CHONDROPLASTY WHERE NECESSARY) OR MULTIPLE DRILLING OR MICROF
XOHANA	Q3 2025	Outpatient Hosp	29880	CPT	ARTHROSCOPY, KNEE, SURGICAL; WITH MENISCECTOMY (MEDIAL AND LATERAL, INCLUDING ANY MENISCAL SHAVING)
XOHANA	Q3 2025	Outpatient Hosp	29881	CPT	ARTHROSCOPY, KNEE, SURGICAL; WITH MENISCECTOMY (MEDIAL OR LATERAL, INCLUDING ANY MENISCAL SHAVING)
XOHANA	Q3 2025	Outpatient Hosp	29882	CPT	ARTHROSCOPY, KNEE, SURGICAL; WITH MENISCUS REPAIR (MEDIAL OR LATERAL)
XOHANA	Q3 2025	Outpatient Hosp	29883	CPT	ARTHROSCOPY, KNEE, SURGICAL; WITH MENISCUS REPAIR (MEDIAL AND LATERAL)
XOHANA	Q3 2025	Outpatient Hosp	29884	CPT	ARTHROSCOPY, KNEE, SURGICAL; WITH LYSIS OF ADHESIONS, WITH OR WITHOUT MANIPULATION (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp	29887	CPT	ARTHROSCOPY, KNEE, SURGICAL; DRILLING FOR INTACT OSTEOCHONDRITIS DISSECANS LESION WITH INTERNAL FIXATION
XOHANA	Q3 2025	Outpatient Hosp	29888	CPT	ARTHROSCOPICALLY AIDED ANTERIOR CRUCIATE LIGAMENT REPAIR/AUGMENTATION OR RECONSTRUCTION
XOHANA	Q3 2025	Outpatient Hosp	29891	CPT	ARTHROSCOPY, ANKLE, SURGICAL, EXCISION OF OSTEOCHONDRAL DEFECT OF TALUS AND/OR TIBIA, INCLUDING DRILLING OF THE DEFECT
XOHANA	Q3 2025	Outpatient Hosp	29893	CPT	ENDOSCOPIC PLANTAR FASCIOTOMY
XOHANA	Q3 2025	Outpatient Hosp	29897	CPT	ARTHROSCOPY, ANKLE (TIBIOTALAR AND FIBULOTALAR JOINTS), SURGICAL; DEBRIDEMENT, LIMITED
XOHANA	Q3 2025	Outpatient Hosp	29898	CPT	ARTHROSCOPY, ANKLE (TIBIOTALAR AND FIBULOTALAR JOINTS), SURGICAL; DEBRIDEMENT, EXTENSIVE
XOHANA	Q3 2025	Outpatient Hosp	29914	CPT	ARTHROSCOPY, HIP, SURGICAL; WITH FEMOROPLASTY (IE, TREATMENT OF CAM LESION)
XOHANA	Q3 2025	Outpatient Hosp	29916	CPT	ARTHROSCOPY, HIP, SURGICAL; WITH LABRAL REPAIR
XOHANA	Q3 2025	Outpatient Hosp	30140	CPT	SUBMUCOUS RESECTION INFERIOR TURBINATE, PARTIAL OR COMPLETE, ANY METHOD
XOHANA	Q3 2025	Outpatient Hosp	30400	CPT	RHINOPLASTY, PRIMARY; LATERAL AND ALAR CARTILAGES AND/OR ELEVATION OF NASAL TIP
XOHANA	Q3 2025	Outpatient Hosp	30410	CPT	RHINOPLASTY, PRIMARY; COMPLETE, EXTERNAL PARTS INCLUDING BONY PYRAMID, LATERAL AND ALAR CARTILAGES, AND/OR ELEVATION OF NA
XOHANA	Q3 2025	Outpatient Hosp	30420	CPT	RHINOPLASTY, PRIMARY; INCLUDING MAJOR SEPTAL REPAIR
XOHANA	Q3 2025	Outpatient Hosp	30465	CPT	REPAIR OF NASAL VESTIBULAR STENOSIS (EG, SPREADER GRAFTING, LATERAL NASAL WALL RECONSTRUCTION)
XOHANA	Q3 2025	Outpatient Hosp	30468	CPT	REPAIR OF NASAL VALVE COLLAPSE WITH SUBCUTANEOUS/SUBMUCOSAL LATERAL WALL IMPLANT(S)
XOHANA	Q3 2025	Outpatient Hosp	30520	CPT	SEPTOPLASTY OR SUBMUCOUS RESECTION, WITH OR WITHOUT CARTILAGE SCORING, CONTOURING OR REPLACEMENT WITH GRAFT
XOHANA	Q3 2025	Outpatient Hosp	30630	CPT	REPAIR NASAL SEPTAL PERFORATIONS
XOHANA	Q3 2025	Outpatient Hosp	30802	CPT	CAUTERY AND/OR ABLATION, MUCOSA OF INFERIOR TURBINATES, UNILATERAL OR BILATERAL, ANY METHOD; INTRAMURAL
XOHANA	Q3 2025	Outpatient Hosp	31000	CPT	LAVAGE BY CANNULATION; MAXILLARY SINUS (ANTRUM PUNCTURE OR NATURAL OSTIUM)
XOHANA	Q3 2025	Outpatient Hosp	31030	CPT	SINUSOTOMY, MAXILLARY (ANTROTOMY); RADICAL (CALDWELL-LUC) WITHOUT REMOVAL OF ANTROCHOANAL POLYPS
XOHANA	Q3 2025	Outpatient Hosp	31541	CPT	LARYNGOSCOPY, DIRECT, OPERATIVE, WITH EXCISION OF TUMOR AND/OR STRIPPING OF VOCAL CORDS OR EPIGLOTTIS; WITH OPERATING MICR
XOHANA	Q3 2025	Outpatient Hosp	31551	CPT	LARYNGOPLASTY; FOR LARYNGEAL STENOSIS, WITH GRAFT, WITHOUT INDWELLING STENT PLACEMENT, YOUNGER THAN 12 YEARS OF AGE
XOHANA	Q3 2025	Outpatient Hosp	31575	CPT	LARYNGOSCOPY, FLEXIBLE FIBEROPTIC; DIAGNOSTIC
XOHANA	Q3 2025	Outpatient Hosp	31579	CPT	LARYNGOSCOPY, FLEXIBLE OR RIGID FIBEROPTIC, WITH STROBOSCOPY
XOHANA	Q3 2025	Outpatient Hosp	31599	CPT	UNLISTED PROCEDURE, LARYNX
XOHANA	Q3 2025	Outpatient Hosp	31625	CPT	BRONCHOSCOPY, RIGID OR FLEXIBLE, WITH OR WITHOUT FLUOROSCOPIC GUIDANCE; WITH BRONCHIAL OR ENDOBRONCHIAL BIOPSY(S), SINGLE
XOHANA	Q3 2025	Outpatient Hosp	31628	CPT	BRONCHOSCOPY, RIGID OR FLEXIBLE, WITH OR WITHOUT FLUOROSCOPIC GUIDANCE; WITH TRANSBRONCHIAL LUNG BIOPSY(S), SINGLE LOBE
XOHANA	Q3 2025	Outpatient Hosp	31635	CPT	BRONCHOSCOPY, RIGID OR FLEXIBLE, WITH OR WITHOUT FLUOROSCOPIC GUIDANCE; WITH REMOVAL OF FOREIGN BODY
XOHANA	Q3 2025	Outpatient Hosp	31651	CPT	BRONCHOSCOPY, RIGID OR FLEXIBLE, INCLUDING FLUOROSCOPIC GUIDANCE, WHEN PERFORMED; WITH BALLOON OCCLUSION, WHEN PERFORMED, ASSESSME
XOHANA	Q3 2025	Outpatient Hosp	33207	CPT	INSERTION OR REPLACEMENT OF PERMANENT PACEMAKER WITH TRANSVENOUS ELECTRODE(S); VENTRICULAR
XOHANA	Q3 2025	Outpatient Hosp	33214	CPT	UPGRADE OF IMPLANTED PACEMAKER SYSTEM, CONVERSION OF SINGLE CHAMBER SYSTEM TO DUAL CHAMBER SYSTEM (INCLUDES REMOVAL OF PRE
XOHANA	Q3 2025	Outpatient Hosp	33234	CPT	REMOVAL OF TRANSVENOUS PACEMAKER ELECTRODE(S); SINGLE LEAD SYSTEM, ATRIAL OR VENTRICULAR
XOHANA	Q3 2025	Outpatient Hosp	33240	CPT	INSERTION OF IMPLANTABLE DEFIBRILLATOR PULSE GENERATOR ONLY; WITH EXISTING SINGLE LEAD
XOHANA	Q3 2025	Outpatient Hosp	33262	CPT	REMOVAL OF IMPLANTABLE DEFIBRILLATOR PULSE GENERATOR WITH REPLACEMENT OF IMPLANTABLE DEFIBRILLATOR PULSE GENERATOR; SINGLE LEAD SYSTEM
XOHANA	Q3 2025	Outpatient Hosp	33263	CPT	REMOVAL OF IMPLANTABLE DEFIBRILLATOR PULSE GENERATOR WITH REPLACEMENT OF IMPLANTABLE DEFIBRILLATOR PULSE GENERATOR; DUAL LEAD SYSTEM
XOHANA	Q3 2025	Outpatient Hosp	33264	CPT	REMOVAL OF IMPLANTABLE DEFIBRILLATOR PULSE GENERATOR WITH REPLACEMENT OF IMPLANTABLE DEFIBRILLATOR PULSE GENERATOR; MULTIPLE LEAD SYSTEM
XOHANA	Q3 2025	Outpatient Hosp	33270	CPT	INSERTION OR REPLACEMENT OF PERMANENT SUBCUTANEOUS IMPLANTABLE DEFIBRILLATOR SYSTEM, WITH SUBCUTANEOUS ELECTRODE, INCLUDING DEFIBRILLATION THRESHOLD E
XOHANA	Q3 2025	Outpatient Hosp	33274	CPT	TRANSCATHETER INSERTION OR REPLACEMENT OF PERMANENT LEADLESS PACEMAKER, RIGHT VENTRICULAR, INCLUDING IMAGING GUIDANCE (EG, FLUOROSCOPY, VENOUS ULTRASO
XOHANA	Q3 2025	Outpatient Hosp	33285	CPT	INSERTION, SUBCUTANEOUS CARDIAC RHYTHM MONITOR, INCLUDING PROGRAMMING
XOHANA	Q3 2025	Outpatient Hosp	33289	CPT	TRANSCATHETER IMPLANTATION OF WIRELESS PULMONARY ARTERY PRESSURE SENSOR FOR LONG-TERM HEMODYNAMIC MONITORING, INCLUDING DEPLOYMENT AND CALIBRATION C
XOHANA	Q3 2025	Outpatient Hosp	33880	CPT	ENDOVASCULAR REPAIR OF DESCENDING THORACIC AORTA (EG, ANEURYSM, PSEUDOANEURYSM, DISSECTION, PENETRATING ULCER, INTRAMURAL
XOHANA	Q3 2025	Outpatient Hosp	36011	CPT	SELECTIVE CATHETER PLACEMENT, VENOUS SYSTEM; FIRST ORDER BRANCH (EG, RENAL VEIN, JUGULAR VEIN)
XOHANA	Q3 2025	Outpatient Hosp	36012	CPT	SELECTIVE CATHETER PLACEMENT, VENOUS SYSTEM; SECOND ORDER, OR MORE SELECTIVE, BRANCH (EG, LEFT ADRENAL VEIN, PETROSAL SINU
XOHANA	Q3 2025	Outpatient Hosp	36140	CPT	INTRODUCTION OF NEEDLE OR INTRACATHETER, UPPER OR LOWER EXTREMITY ARTERY
XOHANA	Q3 2025	Outpatient Hosp	36200	CPT	INTRODUCTION OF CATHETER, AORTA
XOHANA	Q3 2025	Outpatient Hosp	36221	CPT	NON-SELECTIVE CATHETER PLACEMENT, THORACIC AORTA, WITH ANGIOGRAPHY OF THE EXTRACRANIAL CAROTID, VERTEBRAL, AND/OR INTRACRANIAL VES

XOHANA	Q3 2025	Outpatient Hosp		36222	CPT	SELECTIVE CATHETER PLACEMENT, COMMON CAROTID OR INNOMINATE ARTERY, UNILATERAL, ANY APPROACH, WITH ANGIOGRAPHY OF THE IPSILATERAL E
XOHANA	Q3 2025	Outpatient Hosp		36223	CPT	SELECTIVE CATHETER PLACEMENT, COMMON CAROTID OR INNOMINATE ARTERY, UNILATERAL, ANY APPROACH, WITH ANGIOGRAPHY OF THE IPSILATERAL I
XOHANA	Q3 2025	Outpatient Hosp		36224	CPT	SELECTIVE CATHETER PLACEMENT, INTERNAL CAROTID ARTERY, UNILATERAL, WITH ANGIOGRAPHY OF THE IPSILATERAL INTRACRANIAL CAROTID CIRCUL
XOHANA	Q3 2025	Outpatient Hosp		36225	CPT	SELECTIVE CATHETER PLACEMENT, SUBCLAVIAN OR INNOMINATE ARTERY, UNILATERAL, WITH ANGIOGRAPHY OF THE IPSILATERAL VERTEBRAL CIRCULATI
XOHANA	Q3 2025	Outpatient Hosp		36226	CPT	SELECTIVE CATHETER PLACEMENT, VERTEBRAL ARTERY, UNILATERAL, WITH ANGIOGRAPHY OF THE IPSILATERAL VERTEBRAL CIRCULATION AND ALL ASSO
XOHANA	Q3 2025	Outpatient Hosp		36227	CPT	SELECTIVE CATHETER PLACEMENT, EXTERNAL CAROTID ARTERY, UNILATERAL, WITH ANGIOGRAPHY OF THE IPSILATERAL EXTERNAL CAROTID CIRCULATIO
XOHANA	Q3 2025	Outpatient Hosp		36228	CPT	SELECTIVE CATHETER PLACEMENT, EACH INTRACRANIAL BRANCH OF THE INTERNAL CAROTID OR VERTEBRAL ARTERIES, UNILATERAL, WITH ANGIOGRAPHY
XOHANA	Q3 2025	Outpatient Hosp		36246	CPT	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM; INITIAL SECOND ORDER ABDOMINAL, PELVIC, OR LOWER EXTREMITY ARTERY BRANCH, W
XOHANA	Q3 2025	Outpatient Hosp		36247	CPT	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM; INITIAL THIRD ORDER OR MORE SELECTIVE ABDOMINAL, PELVIC, OR LOWER EXTREMITY
XOHANA	Q3 2025	Outpatient Hosp		36248	CPT	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM; ADDITIONAL SECOND ORDER, THIRD ORDER, AND BEYOND, ABDOMINAL, PELVIC, OR LOW
XOHANA	Q3 2025	Outpatient Hosp		36252	CPT	SELECTIVE CATHETER PLACEMENT (FIRST-ORDER), MAIN RENAL ARTERY AND ANY ACCESSORY RENAL ARTERY(S) FOR RENAL ANGIOGRAPHY, INCLUDING A
XOHANA	Q3 2025	Outpatient Hosp		36430	CPT	TRANSFUSION, BLOOD OR BLOOD COMPONENTS
XOHANA	Q3 2025	Outpatient Hosp	36468		CPT	INJECTION(S) OF SCLEROSANT FOR SPIDER VEINS (TELANGIECTASIA), LIMB OR TRUNK
XOHANA	Q3 2025	Outpatient Hosp	36470		CPT	INJECTION OF SCLEROSANT; SINGLE INCOMPETENT VEIN (OTHER THAN TELANGIECTASIA)
XOHANA	Q3 2025	Outpatient Hosp	36471		CPT	INJECTION OF SCLEROSANT; MULTIPLE INCOMPETENT VEINS (OTHER THAN TELANGIECTASIA), SAME LEG
XOHANA	Q3 2025	Outpatient Hosp		36474	CPT	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, INCLUSIVE OF ALL IMAGING GUIDANCE AND MONITORING, PERCUTANEOUS, MECHANOCHEMICAL; SUBSEQUEN
XOHANA	Q3 2025	Outpatient Hosp	36478		CPT	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, INCLUSIVE OF ALL IMAGING GUIDANCE AND MONITORING, PERCUTANEOUS
XOHANA	Q3 2025	Outpatient Hosp		36481	CPT	PERCUTANEOUS PORTAL VEIN CATHETERIZATION BY ANY METHOD
XOHANA	Q3 2025	Outpatient Hosp	3650F		CPT	ELECTROENCEPHALOGRAM (EEG) ORDERED, REVIEWED OR REQUESTED (EPI)
XOHANA	Q3 2025	Outpatient Hosp		36556	CPT	INSERTION OF NON-TUNNELED CENTRALLY INSERTED CENTRAL VENOUS CATHETER; AGE 5 YEARS OR OLDER
XOHANA	Q3 2025	Outpatient Hosp		36560	CPT	INSERTION OF TUNNELED CENTRALLY INSERTED CENTRAL VENOUS ACCESS DEVICE, WITH SUBCUTANEOUS PORT; YOUNGER THAN 5 YEARS OF AGE
XOHANA	Q3 2025	Outpatient Hosp		36591	CPT	COLLECTION OF BLOOD SPECIMEN FROM A COMPLETELY IMPLANTABLE VENOUS ACCESS DEVICE
XOHANA	Q3 2025	Outpatient Hosp		36592	CPT	COLLECTION OF BLOOD SPECIMEN USING ESTABLISHED CENTRAL OR PERIPHERAL CATHETER, VENOUS, NOT OTHERWISE SPECIFIED
XOHANA	Q3 2025	Outpatient Hosp		36593	CPT	DECLOTTING BY THROMBOLYTIC AGENT OF IMPLANTED VASCULAR ACCESS DEVICE OR CATHETER
XOHANA	Q3 2025	Outpatient Hosp		36821	CPT	ARTERIOVENOUS ANASTOMOSIS, OPEN; DIRECT, ANY SITE (EG, CIMINO TYPE) (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp		36832	CPT	REVISION, OPEN, ARTERIOVENOUS FISTULA; WITHOUT THROMBECTOMY, AUTOGENOUS OR NONAUTOGENOUS DIALYSIS GRAFT (SEPARATE PROCEDUR
XOHANA	Q3 2025	Outpatient Hosp		37220	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, ILIAC ARTERY, UNILATERAL, INITIAL VESSEL; WITH TRANSLUMINAL ANGIOPLASTY
XOHANA	Q3 2025	Outpatient Hosp		37221	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, ILIAC ARTERY, UNILATERAL, INITIAL VESSEL; WITH TRANSLUMINAL STENT PLACEMENT
XOHANA	Q3 2025	Outpatient Hosp		37222	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, ILIAC ARTERY, EACH ADDITIONAL IPSILATERAL ILIAC VESSEL; WITH TRANSLUMINAL A
XOHANA	Q3 2025	Outpatient Hosp		37223	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, ILIAC ARTERY, EACH ADDITIONAL IPSILATERAL ILIAC VESSEL; WITH TRANSLUMINAL S
XOHANA	Q3 2025	Outpatient Hosp		37225	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL, POPLITEAL ARTERY(S), UNILATERAL; WITH ATHERECTOMY, INCLUDES ANGIOP
XOHANA	Q3 2025	Outpatient Hosp		37226	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL, POPLITEAL ARTERY(S), UNILATERAL; WITH TRANSLUMINAL STENT PLACEMENT
XOHANA	Q3 2025	Outpatient Hosp		37228	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL, PERONEAL ARTERY, UNILATERAL, INITIAL VESSEL; WITH TRANSLUMINAL ANGI
XOHANA	Q3 2025	Outpatient Hosp		37229	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL, PERONEAL ARTERY, UNILATERAL, INITIAL VESSEL; WITH ATHERECTOMY, INCL
XOHANA	Q3 2025	Outpatient Hosp		37230	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL, PERONEAL ARTERY, UNILATERAL, INITIAL VESSEL; WITH TRANSLUMINAL STEN
XOHANA	Q3 2025	Outpatient Hosp		37231	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL, PERONEAL ARTERY, UNILATERAL, INITIAL VESSEL; WITH TRANSLUMINAL STEN
XOHANA	Q3 2025	Outpatient Hosp		37232	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL/PERONEAL ARTERY, UNILATERAL, EACH ADDITIONAL VESSEL; WITH TRANSLUMIN
XOHANA	Q3 2025	Outpatient Hosp		37233	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL/PERONEAL ARTERY, UNILATERAL, EACH ADDITIONAL VESSEL; WITH ATHERECTOM
XOHANA	Q3 2025	Outpatient Hosp		37234	CPT	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL/PERONEAL ARTERY, UNILATERAL, EACH ADDITIONAL VESSEL; WITH TRANSLUMIN
XOHANA	Q3 2025	Outpatient Hosp		37236	CPT	TRANSCATHETER PLACEMENT OF AN INTRAVASCULAR STENT(S) (EXCEPT LOWER EXTREMITY, CERVICAL CAROTID, EXTRACRANIAL VERTEBRAL OR INTRATHO
XOHANA	Q3 2025	Outpatient Hosp		37242	CPT	VASCULAR EMBOLIZATION OR OCCLUSION, INCLUSIVE OF ALL RADIOLOGICAL SUPERVISION AND INTERPRETATION, INTRAPROCEDURAL ROADMAPPING, AND
XOHANA	Q3 2025	Outpatient Hosp		37243	CPT	VASCULAR EMBOLIZATION OR OCCLUSION, INCLUSIVE OF ALL RADIOLOGICAL SUPERVISION AND INTERPRETATION, INTRAPROCEDURAL ROADMAPPING, AND
XOHANA	Q3 2025	Outpatient Hosp		37246	CPT	TRANSLUMINAL BALLOON ANGIOPLASTY (EXCEPT LOWER EXTREMITY ARTERY(IES) FOR OCCLUSIVE DISEASE, INTRACRANIAL, CORONARY, PULMONARY, OR DIALYSIS CIRCUIT), OPEN OR
XOHANA	Q3 2025	Outpatient Hosp		37700	CPT	LIGATION AND DIVISION OF LONG SAPHENOUS VEIN AT SAPHENOFEMORAL JUNCTION, OR DISTAL INTERRUPTIONS
XOHANA	Q3 2025	Outpatient Hosp		37722	CPT	LIGATION, DIVISION, AND STRIPPING, LONG (GREATER) SAPHENOUS VEINS FROM SAPHENOFEMORAL JUNCTION TO KNEE OR BELOW
XOHANA	Q3 2025	Outpatient Hosp	37765		CPT	STAB PHLEBECTOMY OF VARICOSE VEINS, ONE EXTREMITY; 10-20 STAB INCISIONS
XOHANA	Q3 2025	Outpatient Hosp		38222	CPT	DIAGNOSTIC BONE MARROW; BIOPSY(IES) AND ASPIRATION(S)
XOHANA	Q3 2025	Outpatient Hosp		38230	CPT	BONE MARROW HARVESTING FOR TRANSPLANTATION
XOHANA	Q3 2025	Outpatient Hosp		38232	CPT	BONE MARROW HARVESTING FOR TRANSPLANTATION; AUTOLOGOUS
XOHANA	Q3 2025	Outpatient Hosp		38241	CPT	BONE MARROW OR BLOOD-DERIVED PERIPHERAL STEM CELL TRANSPLANTATION; AUTOLOGOUS
XOHANA	Q3 2025	Outpatient Hosp		38242	CPT	BONE MARROW OR BLOOD-DERIVED PERIPHERAL STEM CELL TRANSPLANTATION; ALLOGENEIC DONOR LYMPHOCYTE INFUSIONS
XOHANA	Q3 2025	Outpatient Hosp		38243	CPT	HEMATOPOIETIC PROGENITOR CELL (HPC); HPC BOOST
XOHANA	Q3 2025	Outpatient Hosp		38745	CPT	AXILLARY LYMPHADENECTOMY; COMPLETE
XOHANA	Q3 2025	Outpatient Hosp		38900	CPT	INTRAOPERATIVE IDENTIFICATION (EG, MAPPING) OF SENTINEL LYMPH NODE(S) INCLUDES INJECTION OF NON-RADIOACTIVE DYE, WHEN PERFORMED (L
XOHANA	Q3 2025	Outpatient Hosp		40700	CPT	PLASTIC REPAIR OF CLEFT LIP/NASAL DEFORMITY; PRIMARY, PARTIAL OR COMPLETE, UNILATERAL
XOHANA	Q3 2025	Outpatient Hosp		40720	CPT	PLASTIC REPAIR OF CLEFT LIP/NASAL DEFORMITY; SECONDARY, BY RECREATION OF DEFECT AND RECLOSURE
XOHANA	Q3 2025	Outpatient Hosp		40799	CPT	UNLISTED PROCEDURE, LIPS
XOHANA	Q3 2025	Outpatient Hosp	41899		CPT	UNLISTED PROCEDURE, DENTOALVEOLAR STRUCTURES
XOHANA	Q3 2025	Outpatient Hosp		42106	CPT	EXCISION, LESION OF PALATE, UVULA; WITH SIMPLE PRIMARY CLOSURE
XOHANA	Q3 2025	Outpatient Hosp		42145	CPT	PALATOPHARYNGOPLASTY (EG, UVULOPALATOPHARYNGOPLASTY, UVULOPHARYNGOPLASTY)
XOHANA	Q3 2025	Outpatient Hosp		42210	CPT	PALATOPLASTY FOR CLEFT PALATE, WITH CLOSURE OF ALVEOLAR RIDGE; WITH BONE GRAFT TO ALVEOLAR RIDGE (INCLUDES OBTAINING GRAFT
XOHANA	Q3 2025	Outpatient Hosp		42220	CPT	PALATOPLASTY FOR CLEFT PALATE; SECONDARY LENGTHENING PROCEDURE
XOHANA	Q3 2025	Outpatient Hosp		42225	CPT	PALATOPLASTY FOR CLEFT PALATE; ATTACHMENT PHARYNGEAL FLAP
XOHANA	Q3 2025	Outpatient Hosp		42440	CPT	EXCISION OF SUBMANDIBULAR (SUBMAXILLARY) GLAND
XOHANA	Q3 2025	Outpatient Hosp		42806	CPT	BIOPSY; NASOPHARYNX, SURVEY FOR UNKNOWN PRIMARY LESION
XOHANA	Q3 2025	Outpatient Hosp		42815	CPT	EXCISION BRANCHIAL CLEFT CYST, VESTIGE, OR FISTULA, EXTENDING BENEATH SUBCUTANEOUS TISSUES AND/OR INTO PHARYNX
XOHANA	Q3 2025	Outpatient Hosp		42820	CPT	TONSILLECTOMY AND ADENOIDECTOMY; YOUNGER THAN AGE 12
XOHANA	Q3 2025	Outpatient Hosp		42821	CPT	TONSILLECTOMY AND ADENOIDECTOMY; AGE 12 OR OVER
XOHANA	Q3 2025	Outpatient Hosp		42825	CPT	TONSILLECTOMY, PRIMARY OR SECONDARY; YOUNGER THAN AGE 12
XOHANA	Q3 2025	Outpatient Hosp		42826	CPT	TONSILLECTOMY, PRIMARY OR SECONDARY; AGE 12 OR OVER
XOHANA	Q3 2025	Outpatient Hosp		42830	CPT	ADENOIDECTOMY, PRIMARY; YOUNGER THAN AGE 12
XOHANA	Q3 2025	Outpatient Hosp		42831	CPT	ADENOIDECTOMY, PRIMARY; AGE 12 OR OVER
XOHANA	Q3 2025	Outpatient Hosp		42835	CPT	ADENOIDECTOMY, SECONDARY; YOUNGER THAN AGE 12
XOHANA	Q3 2025	Outpatient Hosp		43200	CPT	ESOPHAGOSCOPY, RIGID OR FLEXIBLE; DIAGNOSTIC, WITH OR WITHOUT COLLECTION OF SPECIMEN(S) BY BRUSHING OR WASHING (SEPARATE P
XOHANA	Q3 2025	Outpatient Hosp		43233	CPT	ESOPHAGOGASTRODUODENOSCOPY, FLEXIBLE, TRANSORAL; WITH DILATION OF ESOPHAGUS WITH BALLOON (30 MM DIAMETER OR LARGER) (INCLUDES FLUO
XOHANA	Q3 2025	Outpatient Hosp		43235	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; DIAG
XOHANA	Q3 2025	Outpatient Hosp		43236	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
XOHANA	Q3 2025	Outpatient Hosp		43237	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
XOHANA	Q3 2025	Outpatient Hosp		43238	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
XOHANA	Q3 2025	Outpatient Hosp		43239	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
XOHANA	Q3 2025	Outpatient Hosp		43240	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
XOHANA	Q3 2025	Outpatient Hosp		43241	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
XOHANA	Q3 2025	Outpatient Hosp		43242	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
XOHANA	Q3 2025	Outpatient Hosp		43245	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
XOHANA	Q3 2025	Outpatient Hosp		43246	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
XOHANA	Q3 2025	Outpatient Hosp		43247	CPT	ESOPHAGOGASTRODUODENOSCOPY, FLEXIBLE, TRANSORAL; WITH REMOVAL OF FOREIGN BODY(S)
XOHANA	Q3 2025	Outpatient Hosp		43248	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
XOHANA	Q3 2025	Outpatient Hosp		43249	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
XOHANA	Q3 2025	Outpatient Hosp		43250	CPT	ESOPHAGOGASTRODUODENOSCOPY, FLEXIBLE, TRANSORAL; WITH REMOVAL OF TUMOR(S), POLYP(S), OR OTHER LESION(S) BY HOT BIOPSY FORCEPS
XOHANA	Q3 2025	Outpatient Hosp		43252	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH OPTICAL
XOHANA	Q3 2025	Outpatient Hosp		43253	CPT	ESOPHAGOGASTRODUODENOSCOPY, FLEXIBLE, TRANSORAL; WITH TRANSENDOSCOPIC ULTRASOUND-GUIDED TRANSMURAL INJECTION OF DIAGNOSTIC OR THER
XOHANA	Q3 2025	Outpatient Hosp		43254	CPT	ESOPHAGOGASTRODUODENOSCOPY, FLEXIBLE, TRANSORAL; WITH ENDOSCOPIC MUCOSAL RESECTION
XOHANA	Q3 2025	Outpatient Hosp		43257	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
XOHANA	Q3 2025	Outpatient Hosp		43259	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
XOHANA	Q3 2025	Outpatient Hosp		43260	CPT	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP); DIAGNOSTIC, WITH OR WITHOUT COLLECTION OF SPECIMEN(S) BY BRUSHING O
XOHANA	Q3 2025	Outpatient Hosp		43261	CPT	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP); WITH BIOPSY, SINGLE OR MULTIPLE
XOHANA	Q3 2025	Outpatient Hosp		43262	CPT	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP); WITH SPHINCTEROTOMY/PAPILLOTOMY
XOHANA	Q3 2025	Outpatient Hosp		43263	CPT	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP); WITH PRESSURE MEASUREMENT OF SPHINCTER OF ODDI (PANCREATIC DUCT OR

XOHANA	Q3 2025	Outpatient Hosp		43264	CPT	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP); WITH ENDOSCOPIC RETROGRADE REMOVAL OF CALCULUS/CALCULI FROM BILIARY
XOHANA	Q3 2025	Outpatient Hosp		43265	CPT	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP); WITH ENDOSCOPIC RETROGRADE DESTRUCTION, LITHOTRIPSY OF CALCULUS/CAL
XOHANA	Q3 2025	Outpatient Hosp		43266	CPT	ESOPHAGOGASTRODUODENOSCOPY, FLEXIBLE, TRANSORAL; WITH PLACEMENT OF ENDOSCOPIC STENT (INCLUDES PRE- AND POST-DILATION AND GUIDE WIR
XOHANA	Q3 2025	Outpatient Hosp		43270	CPT	ESOPHAGOGASTRODUODENOSCOPY, FLEXIBLE, TRANSORAL; WITH ABLATION OF TUMOR(S), POLYP(S), OR OTHER LESION(S) (INCLUDES PRE- AND POST-D
XOHANA	Q3 2025	Outpatient Hosp		43273	CPT	NDSC CANNULATION PAPILLA VIS BILE &/ PNCRTC DUX ENDOSCOPIC CANNULATION OF PAPILLA WITH DIRECT VISUALIZATION OF COMMON BILE DUCT(S)
XOHANA	Q3 2025	Outpatient Hosp		43274	CPT	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP); WITH PLACEMENT OF ENDOSCOPIC STENT INTO BILIARY OR PANCREATIC DUCT, INCLUDI
XOHANA	Q3 2025	Outpatient Hosp		43275	CPT	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP); WITH REMOVAL OF FOREIGN BODY(S) OR STENT(S) FROM BILIARY/PANCREATIC DUCT(S)
XOHANA	Q3 2025	Outpatient Hosp		43276	CPT	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP); WITH REMOVAL AND EXCHANGE OF STENT(S), BILIARY OR PANCREATIC DUCT, INCLUDIN
XOHANA	Q3 2025	Outpatient Hosp		43277	CPT	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP); WITH TRANS-ENDOSCOPIC BALLOON DILATION OF BILIARY/PANCREATIC DUCT(S) OR OF
XOHANA	Q3 2025	Outpatient Hosp		43280	CPT	LAPAROSCOPY, SURGICAL, ESOPHAGOGASTRIC FUNDOPLASTY (EG, NISSEN, TOUPET PROCEDURES)
XOHANA	Q3 2025	Outpatient Hosp		43282	CPT	LAPAROSCOPY, SURGICAL, REPAIR OF PARAESOPHAGEAL HERNIA, INCLUDES FUNDOPLASTY, WHEN PERFORMED; WITH IMPLANTATION OF MESH
XOHANA	Q3 2025	Outpatient Hosp		43450	CPT	DILATION OF ESOPHAGUS, BY UNGUIDED SOUND OR BOUGIE, SINGLE OR MULTIPLE PASSES
XOHANA	Q3 2025	Outpatient Hosp		43453	CPT	DILATION OF ESOPHAGUS, OVER GUIDE WIRE
XOHANA	Q3 2025	Outpatient Hosp		44799	CPT	UNLISTED PROCEDURE, SMALL INTESTINE
XOHANA	Q3 2025	Outpatient Hosp		44970	CPT	LAPAROSCOPY, SURGICAL, APPENDECTOMY
XOHANA	Q3 2025	Outpatient Hosp		45100	CPT	BIOPSY OF ANORECTAL WALL, ANAL APPROACH (EG, CONGENITAL MEGACOLON)
XOHANA	Q3 2025	Outpatient Hosp		45341	CPT	SIGMOIDOSCOPY, FLEXIBLE; WITH ENDOSCOPIC ULTRASOUND EXAMINATION
XOHANA	Q3 2025	Outpatient Hosp		45342	CPT	SIGMOIDOSCOPY, FLEXIBLE; WITH TRANSENDOSCOPIC ULTRASOUND GUIDED INTRAMURAL OR TRANSMURAL FINE NEEDLE ASPIRATION/BIOPSY(S)
XOHANA	Q3 2025	Outpatient Hosp	45378		CPT	COLONOSCOPY, FLEXIBLE; DIAGNOSTIC, INCLUDING COLLECTION OF SPECIMEN(S) BY BRUSHING OR WASHING, WHEN PERFORMED (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp		45389	CPT	COLONOSCOPY, FLEXIBLE; WITH ENDOSCOPIC STENT PLACEMENT (INCLUDES PRE- AND POST-DILATION AND GUIDE WIRE PASSAGE, WHEN PERFORMED)
XOHANA	Q3 2025	Outpatient Hosp		45390	CPT	COLONOSCOPY, FLEXIBLE; WITH ENDOSCOPIC MUCOSAL RESECTION
XOHANA	Q3 2025	Outpatient Hosp		45391	CPT	COLONOSCOPY, FLEXIBLE; WITH ENDOSCOPIC ULTRASOUND EXAMINATION LIMITED TO THE RECTUM, SIGMOID, DESCENDING, TRANSVERSE, OR ASCENDING COLON AND CECUM, AN
XOHANA	Q3 2025	Outpatient Hosp		45392	CPT	COLONOSCOPY, FLEXIBLE; WITH TRANSENDOSCOPIC ULTRASOUND GUIDED INTRAMURAL OR TRANSMURAL FINE NEEDLE ASPIRATION/BIOPSY(S), INCLUDES ENDOSCOPIC ULTRASOUN
XOHANA	Q3 2025	Outpatient Hosp		45505	CPT	PROCTOPLASTY; FOR PROLAPSE OF MUCOUS MEMBRANE
XOHANA	Q3 2025	Outpatient Hosp		46020	CPT	PLACEMENT OF SETON
XOHANA	Q3 2025	Outpatient Hosp		46260	CPT	HEMORRHOIDECTOMY, INTERNAL AND EXTERNAL, COMPLEX OR EXTENSIVE;
XOHANA	Q3 2025	Outpatient Hosp		46270	CPT	SURGICAL TREATMENT OF ANAL FISTULA (FISTULECTOMY/FISTULOTOMY); SUBCUTANEOUS
XOHANA	Q3 2025	Outpatient Hosp		46275	CPT	SURGICAL TREATMENT OF ANAL FISTULA (FISTULECTOMY/FISTULOTOMY); SUBMUSCULAR
XOHANA	Q3 2025	Outpatient Hosp		46280	CPT	SURGICAL TREATMENT OF ANAL FISTULA (FISTULECTOMY/FISTULOTOMY); COMPLEX OR MULTIPLE, WITH OR WITHOUT PLACEMENT OF SETON
XOHANA	Q3 2025	Outpatient Hosp		46288	CPT	CLOSURE OF ANAL FISTULA WITH RECTAL ADVANCEMENT FLAP
XOHANA	Q3 2025	Outpatient Hosp		46946	CPT	HEMORRHOIDECTOMY, INTERNAL, BY LIGATION OTHER THAN RUBBER BAND; 2 OR MORE HEMORRHOID COLUMNS/GROUPS, WITHOUT IMAGING GUIDANCE
XOHANA	Q3 2025	Outpatient Hosp		47379	CPT	UNLISTED LAPAROSCOPIC PROCEDURE, LIVER
XOHANA	Q3 2025	Outpatient Hosp		47382	CPT	ABLATION, ONE OR MORE LIVER TUMOR(S), PERCUTANEOUS, RADIOFREQUENCY
XOHANA	Q3 2025	Outpatient Hosp		47564	CPT	LAPAROSCOPY, SURGICAL; CHOLECYSTECTOMY WITH EXPLORATION OF COMMON DUCT
XOHANA	Q3 2025	Outpatient Hosp		47605	CPT	CHOLECYSTECTOMY; WITH CHOLANGIOGRAPHY
XOHANA	Q3 2025	Outpatient Hosp		48100	CPT	BIOPSY OF PANCREAS, OPEN (EG, FINE NEEDLE ASPIRATION, NEEDLE CORE BIOPSY, WEDGE BIOPSY)
XOHANA	Q3 2025	Outpatient Hosp		49083	CPT	ABDOMINAL PARACENTESIS (DIAGNOSTIC OR THERAPEUTIC); WITH IMAGING GUIDANCE
XOHANA	Q3 2025	Outpatient Hosp		49180	CPT	BIOPSY, ABDOMINAL OR RETROPERITONEAL MASS, PERCUTANEOUS NEEDLE
XOHANA	Q3 2025	Outpatient Hosp		49324	CPT	LAPAROSCOPY, SURGICAL; WITH INSERTION OF INTRAPERITONEAL CANNULA OR CATHETER, PERMANENT
XOHANA	Q3 2025	Outpatient Hosp		49329	CPT	UNLISTED LAPAROSCOPY PROCEDURE, ABDOMEN, PERITONEUM AND OMENTUM
XOHANA	Q3 2025	Outpatient Hosp		49400	CPT	INJECTION OF AIR OR CONTRAST INTO PERITONEAL CAVITY (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp		49424	CPT	CONTRAST INJECTION FOR ASSESSMENT OF ABSCESS OR CYST VIA PREVIOUSLY PLACED DRAINAGE CATHETER OR TUBE (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp		49440	CPT	INSERTION OF GASTROSTOMY TUBE, PERCUTANEOUS, UNDER FLUOROSCOPIC GUIDANCE INCLUDING CONTRAST INJECTION(S), IMAGE DOCUMENTAT
XOHANA	Q3 2025	Outpatient Hosp		49495	CPT	REPAIR, INITIAL INGUINAL HERNIA, FULL TERM INFANT YOUNGER THAN AGE 6 MONTHS, OR PRETERM INFANT OLDER THAN 50 WEEKS POSTCON
XOHANA	Q3 2025	Outpatient Hosp		49500	CPT	REPAIR INITIAL INGUINAL HERNIA, AGE 6 MONTHS TO YOUNGER THAN 5 YEARS, WITH OR WITHOUT HYDROCELECTOMY; REDUCIBLE
XOHANA	Q3 2025	Outpatient Hosp		49501	CPT	REPAIR INITIAL INGUINAL HERNIA, AGE 6 MONTHS TO YOUNGER THAN 5 YEARS, WITH OR WITHOUT HYDROCELECTOMY; INCARCERATED OR STRA
XOHANA	Q3 2025	Outpatient Hosp	49505		CPT	REPAIR INITIAL INGUINAL HERNIA, AGE 5 YEARS OR OLDER; REDUCIBLE
XOHANA	Q3 2025	Outpatient Hosp		49507	CPT	REPAIR INITIAL INGUINAL HERNIA, AGE 5 YEARS OR OLDER; INCARCERATED OR STRANGULATED
XOHANA	Q3 2025	Outpatient Hosp		49520	CPT	REPAIR RECURRENT INGUINAL HERNIA, ANY AGE; REDUCIBLE
XOHANA	Q3 2025	Outpatient Hosp		49525	CPT	REPAIR INGUINAL HERNIA, SLIDING, ANY AGE
XOHANA	Q3 2025	Outpatient Hosp		49550	CPT	REPAIR INITIAL FEMORAL HERNIA, ANY AGE; REDUCIBLE
XOHANA	Q3 2025	Outpatient Hosp		49561	CPT	REPAIR INITIAL INCISIONAL OR VENTRAL HERNIA; INCARCERATED OR STRANGULATED
XOHANA	Q3 2025	Outpatient Hosp		49565	CPT	REPAIR RECURRENT INCISIONAL OR VENTRAL HERNIA; REDUCIBLE
XOHANA	Q3 2025	Outpatient Hosp		49570	CPT	REPAIR EPIGASTRIC HERNIA (EG, PREPERITONEAL FAT); REDUCIBLE (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp		49572	CPT	REPAIR EPIGASTRIC HERNIA (EG, PREPERITONEAL FAT); INCARCERATED OR STRANGULATED
XOHANA	Q3 2025	Outpatient Hosp		49580	CPT	REPAIR UMBILICAL HERNIA, YOUNGER THAN AGE 5 YEARS; REDUCIBLE
XOHANA	Q3 2025	Outpatient Hosp		49585	CPT	REPAIR UMBILICAL HERNIA, AGE 5 YEARS OR OLDER; REDUCIBLE
XOHANA	Q3 2025	Outpatient Hosp		49587	CPT	REPAIR UMBILICAL HERNIA, AGE 5 YEARS OR OLDER; INCARCERATED OR STRANGULATED
XOHANA	Q3 2025	Outpatient Hosp		49590	CPT	REPAIR SPIGELIAN HERNIA
XOHANA	Q3 2025	Outpatient Hosp		49650	CPT	LAPAROSCOPY, SURGICAL; REPAIR INITIAL INGUINAL HERNIA
XOHANA	Q3 2025	Outpatient Hosp		49651	CPT	LAPAROSCOPY, SURGICAL; REPAIR RECURRENT INGUINAL HERNIA
XOHANA	Q3 2025	Outpatient Hosp		49652	CPT	LAPS REPAIR HERNIA EXCEPT INCAL/INGUN REDUCIBLE LAPAROSCOPY, SURGICAL, REPAIR, VENTRAL, UMBILICAL, SPIGELIAN OR EPIGASTRIC HERNIA
XOHANA	Q3 2025	Outpatient Hosp		50080	CPT	PERCUTANEOUS NEPHROSTOLITHOTOMY OR PYELOSTOLITHOTOMY, WITH OR WITHOUT DILATION, ENDOSCOPY, LITHOTRIPSY, STENTING, OR BASKE
XOHANA	Q3 2025	Outpatient Hosp		50081	CPT	PERCUTANEOUS NEPHROSTOLITHOTOMY OR PYELOSTOLITHOTOMY, WITH OR WITHOUT DILATION, ENDOSCOPY, LITHOTRIPSY, STENTING, OR BASKE
XOHANA	Q3 2025	Outpatient Hosp		50549	CPT	UNLISTED LAPAROSCOPY PROCEDURE, RENAL
XOHANA	Q3 2025	Outpatient Hosp		50590	CPT	LITHOTRIPSY, EXTRACORPOREAL SHOCK WAVE
XOHANA	Q3 2025	Outpatient Hosp		50593	CPT	ABLATION, RENAL TUMOR(S), UNILATERAL, PERCUTANEOUS, CRYOTHERAPY
XOHANA	Q3 2025	Outpatient Hosp		50949	CPT	UNLISTED LAPAROSCOPY PROCEDURE, URETER
XOHANA	Q3 2025	Outpatient Hosp		51600	CPT	INJECTION PROCEDURE FOR CYSTOGRAPHY OR VOIDING URETHROCYSTOGRAPHY
XOHANA	Q3 2025	Outpatient Hosp		51710	CPT	CHANGE OF CYSTOSTOMY TUBE; COMPLICATED
XOHANA	Q3 2025	Outpatient Hosp		51940	CPT	CLOSURE, EXSTROPHY OF BLADDER
XOHANA	Q3 2025	Outpatient Hosp		52005	CPT	CYSTOURETHROSCOPY, WITH URETERAL CATHETERIZATION, WITH OR WITHOUT IRRIGATION, INSTILLATION, OR URETEROPYELOGRAPHY, EXCLUSI
XOHANA	Q3 2025	Outpatient Hosp		52204	CPT	CYSTOURETHROSCOPY, WITH BIOPSY(S)
XOHANA	Q3 2025	Outpatient Hosp		52224	CPT	CYSTOURETHROSCOPY, WITH FULGURATION (INCLUDING CRYOSURGERY OR LASER SURGERY) OR TREATMENT OF MINOR (LESS THAN 0.5 CM) LESI
XOHANA	Q3 2025	Outpatient Hosp		52234	CPT	CYSTOURETHROSCOPY, WITH FULGURATION (INCLUDING CRYOSURGERY OR LASER SURGERY) AND/OR RESECTION OF; SMALL BLADDER TUMOR(S) (
XOHANA	Q3 2025	Outpatient Hosp		52235	CPT	CYSTOURETHROSCOPY, WITH FULGURATION (INCLUDING CRYOSURGERY OR LASER SURGERY) AND/OR RESECTION OF; MEDIUM BLADDER TUMOR(S)
XOHANA	Q3 2025	Outpatient Hosp		52240	CPT	CYSTOURETHROSCOPY, WITH FULGURATION (INCLUDING CRYOSURGERY OR LASER SURGERY) AND/OR RESECTION OF; LARGE BLADDER TUMOR(S)
XOHANA	Q3 2025	Outpatient Hosp		52287	CPT	CYSTOURETHROSCOPY, WITH INJECTION(S) FOR CHEMODENERVATION OF THE BLADDER
XOHANA	Q3 2025	Outpatient Hosp		52310	CPT	CYSTOURETHROSCOPY, WITH REMOVAL OF FOREIGN BODY, CALCULUS, OR URETERAL STENT FROM URETHRA OR BLADDER (SEPARATE PROCEDURE);
XOHANA	Q3 2025	Outpatient Hosp		52317	CPT	LITHOLAPAXY: CRUSHING OR FRAGMENTATION OF CALCULUS BY ANY MEANS IN BLADDER AND REMOVAL OF FRAGMENTS; SIMPLE OR SMALL (LESS
XOHANA	Q3 2025	Outpatient Hosp		52318	CPT	LITHOLAPAXY: CRUSHING OR FRAGMENTATION OF CALCULUS BY ANY MEANS IN BLADDER AND REMOVAL OF FRAGMENTS; COMPLICATED OR LARGE
XOHANA	Q3 2025	Outpatient Hosp		52334	CPT	CYSTOURETHROSCOPY WITH INSERTION OF URETERAL GUIDE WIRE THROUGH KIDNEY TO ESTABLISH A PERCUTANEOUS NEPHROSTOMY, RETROGRADE
XOHANA	Q3 2025	Outpatient Hosp		52352	CPT	CYSTOURETHROSCOPY, WITH URETEROSCOPY AND/OR PYELOSCOPY; WITH REMOVAL OR MANIPULATION OF CALCULUS (URETERAL CATHETERIZATION
XOHANA	Q3 2025	Outpatient Hosp		52353	CPT	CYSTOURETHROSCOPY, WITH URETEROSCOPY AND/OR PYELOSCOPY; WITH LITHOTRIPSY (URETERAL CATHETERIZATION IS INCLUDED)
XOHANA	Q3 2025	Outpatient Hosp		52354	CPT	CYSTOURETHROSCOPY, WITH URETEROSCOPY AND/OR PYELOSCOPY; WITH BIOPSY AND/OR FULGURATION OF URETERAL OR RENAL PELVIC LESION
XOHANA	Q3 2025	Outpatient Hosp		52356	CPT	CYSTOURETHROSCOPY, WITH URETEROSCOPY AND/OR PYELOSCOPY; WITH LITHOTRIPSY INCLUDING INSERTION OF INDWELLING URETERAL STENT (EG, GIB
XOHANA	Q3 2025	Outpatient Hosp		52601	CPT	TRANSURETHRAL ELECTROSURGICAL RESECTION OF PROSTATE, INCLUDING CONTROL OF POSTOPERATIVE BLEEDING, COMPLETE (VASECTOMY, MEA
XOHANA	Q3 2025	Outpatient Hosp		52648	CPT	LASER VAPORIZATION OF PROSTATE, INCLUDING CONTROL OF POSTOPERATIVE BLEEDING, COMPLETE (VASECTOMY, MEATOTOMY, CYSTOURETHROS
XOHANA	Q3 2025	Outpatient Hosp		54060	CPT	DESTRUCTION OF LESION(S), PENIS (EG, CONDYLOMA, PAPILLOMA, MOLLUSCUM CONTAGIOSUM, HERPETIC VESICLE), SIMPLE; SURGICAL EXCI
XOHANA	Q3 2025	Outpatient Hosp		54163	CPT	REPAIR INCOMPLETE CIRCUMCISION
XOHANA	Q3 2025	Outpatient Hosp		54344	CPT	REPAIR OF HYPOSPADIAS COMPLICATIONS (IE, FISTULA, STRICTURE, DIVERTICULA); REQUIRING MOBILIZATION OF SKIN FLAPS AND URETHR
XOHANA	Q3 2025	Outpatient Hosp		54360	CPT	PLASTIC OPERATION ON PENIS TO CORRECT ANGULATION
XOHANA	Q3 2025	Outpatient Hosp		54410	CPT	REMOVAL AND REPLACEMENT OF ALL COMPONENT(S) OF A MULTI-COMPONENT, INFLATABLE PENILE PROSTHESIS AT THE SAME OPERATIVE SESSI
XOHANA	Q3 2025	Outpatient Hosp		54520	CPT	ORCHIECTOMY, SIMPLE (INCLUDING SUBCAPSULAR), WITH OR WITHOUT TESTICULAR PROSTHESIS, SCROTAL OR INGUINAL APPROACH
XOHANA	Q3 2025	Outpatient Hosp		54530	CPT	ORCHIECTOMY, RADICAL, FOR TUMOR; INGUINAL APPROACH
XOHANA	Q3 2025	Outpatient Hosp		54640	CPT	ORCHIOPEXY, INGUINAL OR SCROTAL APPROACH
XOHANA	Q3 2025	Outpatient Hosp		54650	CPT	ORCHIOPEXY, ABDOMINAL APPROACH, FOR INTRA-ABDOMINAL TESTIS (EG, FOWLER-STEPHENS)
XOHANA	Q3 2025	Outpatient Hosp		54692	CPT	LAPAROSCOPY, SURGICAL; ORCHIOPEXY FOR INTRA-ABDOMINAL TESTIS

XOHANA	Q3 2025	Outpatient Hosp	55040	CPT	EXCISION OF HYDROCELE; UNILATERAL
XOHANA	Q3 2025	Outpatient Hosp	55530	CPT	EXCISION OF VARICOCELE OR LIGATION OF SPERMATIC VEINS FOR VARICOCELE; (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp	56620	CPT	VULVECTOMY SIMPLE; PARTIAL
XOHANA	Q3 2025	Outpatient Hosp	57240	CPT	ANTERIOR COLPORRHAPHY, REPAIR OF CYSTOCELE WITH OR WITHOUT REPAIR OF URETHROCELE, INCLUDING CYSTOURETHROSCOPY, WHEN PERFORMED
XOHANA	Q3 2025	Outpatient Hosp	57250	CPT	POSTERIOR COLPORRHAPHY, REPAIR OF RECTOCELE WITH OR WITHOUT PERINEORRHAPHY
XOHANA	Q3 2025	Outpatient Hosp	57260	CPT	COMBINED ANTEROPOSTERIOR COLPORRHAPHY, INCLUDING CYSTOURETHROSCOPY, WHEN PERFORMED
XOHANA	Q3 2025	Outpatient Hosp	57265	CPT	COMBINED ANTEROPOSTERIOR COLPORRHAPHY, INCLUDING CYSTOURETHROSCOPY, WHEN PERFORMED; WITH ENTEROCELE REPAIR
XOHANA	Q3 2025	Outpatient Hosp	57287	CPT	REMOVAL OR REVISION OF SLING FOR STRESS INCONTINENCE (EG, FASCIA OR SYNTHETIC)
XOHANA	Q3 2025	Outpatient Hosp	57295	CPT	REVISION (INCLUDING REMOVAL) OF PROSTHETIC VAGINAL GRAFT; VAGINAL APPROACH
XOHANA	Q3 2025	Outpatient Hosp	57425	CPT	LAPAROSCOPY, SURGICAL, COLPOPEXY (SUSPENSION OF VAGINAL APEX)
XOHANA	Q3 2025	Outpatient Hosp	57461	CPT	COLPOSCOPY OF THE CERVIX INCLUDING UPPER/ADJACENT VAGINA; WITH LOOP ELECTRODE CONIZATION OF THE CERVIX
XOHANA	Q3 2025	Outpatient Hosp	57520	CPT	CONIZATION OF CERVIX, WITH OR WITHOUT FULGURATION, WITH OR WITHOUT DILATION AND CURETTAGE, WITH OR WITHOUT REPAIR; COLD KN
XOHANA	Q3 2025	Outpatient Hosp	58120	CPT	DILATION AND CURETTAGE, DIAGNOSTIC AND/OR THERAPEUTIC (NONOBSTETRICAL)
XOHANA	Q3 2025	Outpatient Hosp	58150	CPT	TOTAL ABDOMINAL HYSTERECTOMY (CORPUS AND CERVIX), WITH OR WITHOUT REMOVAL OF TUBE(S), WITH OR WITHOUT REMOVAL OF OVARY(S);
XOHANA	Q3 2025	Outpatient Hosp	58152	CPT	TOTAL ABDOMINAL HYSTERECTOMY (CORPUS AND CERVIX), WITH OR WITHOUT REMOVAL OF TUBE(S), WITH OR WITHOUT REMOVAL OF OVARY(S);
XOHANA	Q3 2025	Outpatient Hosp	58180	CPT	SUPRACERVICAL ABDOMINAL HYSTERECTOMY (SUBTOTAL HYSTERECTOMY), WITH OR WITHOUT REMOVAL OF TUBE(S), WITH OR WITHOUT REMOVAL
XOHANA	Q3 2025	Outpatient Hosp	58200	CPT	TOTAL ABDOMINAL HYSTERECTOMY, INCLUDING PARTIAL VAGINECTOMY, WITH PARA-AORTIC AND PELVIC LYMPH NODE SAMPLING, WITH OR WITH
XOHANA	Q3 2025	Outpatient Hosp	58210	CPT	RADICAL ABDOMINAL HYSTERECTOMY, WITH BILATERAL TOTAL PELVIC LYMPHADENECTOMY AND PARA-AORTIC LYMPH NODE SAMPLING (BIOPSY),
XOHANA	Q3 2025	Outpatient Hosp	58240	CPT	PELVIC EXENTERATION FOR GYNECOLOGIC MALIGNANCY, WITH TOTAL ABDOMINAL HYSTERECTOMY OR CERVICECTOMY, WITH OR WITHOUT REMOVAL
XOHANA	Q3 2025	Outpatient Hosp	58260	CPT	VAGINAL HYSTERECTOMY, FOR UTERUS 250 G OR LESS;
XOHANA	Q3 2025	Outpatient Hosp	58262	CPT	VAGINAL HYSTERECTOMY, FOR UTERUS 250 G OR LESS; WITH REMOVAL OF TUBE(S), AND/OR OVARY(S)
XOHANA	Q3 2025	Outpatient Hosp	58290	CPT	VAGINAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 G;
XOHANA	Q3 2025	Outpatient Hosp	58291	CPT	VAGINAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 G; WITH REMOVAL OF TUBE(S) AND/OR OVARY(S)
XOHANA	Q3 2025	Outpatient Hosp	58292	CPT	VAGINAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 G; WITH REMOVAL OF TUBE(S) AND/OR OVARY(S), WITH REPAIR OF ENTEROCELE
XOHANA	Q3 2025	Outpatient Hosp	58353	CPT	ENDOMETRIAL ABLATION, THERMAL, WITHOUT HYSTEROSCOPIC GUIDANCE
XOHANA	Q3 2025	Outpatient Hosp	58541	CPT	LAPAROSCOPY, SURGICAL, SUPRACERVICAL HYSTERECTOMY, FOR UTERUS 250 G OR LESS;
XOHANA	Q3 2025	Outpatient Hosp	58542	CPT	LAPAROSCOPY, SURGICAL, SUPRACERVICAL HYSTERECTOMY, FOR UTERUS 250 G OR LESS; WITH REMOVAL OF TUBE(S) AND/OR OVARY(S)
XOHANA	Q3 2025	Outpatient Hosp	58544	CPT	LAPAROSCOPY, SURGICAL, SUPRACERVICAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 G; WITH REMOVAL OF TUBE(S) AND/OR OVARY(S)
XOHANA	Q3 2025	Outpatient Hosp	58545	CPT	LAPAROSCOPY, SURGICAL, MYOMECTOMY, EXCISION; 1 TO 4 INTRAMURAL MYOMAS WITH TOTAL WEIGHT OF 250 G OR LESS AND/OR REMOVAL OF
XOHANA	Q3 2025	Outpatient Hosp	58548	CPT	LAPAROSCOPY, SURGICAL, WITH RADICAL HYSTERECTOMY, WITH BILATERAL TOTAL PELVIC LYMPHADENECTOMY AND PARA-AORTIC LYMPH NODE S
XOHANA	Q3 2025	Outpatient Hosp	58550	CPT	LAPAROSCOPY, SURGICAL, WITH VAGINAL HYSTERECTOMY, FOR UTERUS 250 G OR LESS;
XOHANA	Q3 2025	Outpatient Hosp	58552	CPT	LAPAROSCOPY, SURGICAL, WITH VAGINAL HYSTERECTOMY, FOR UTERUS 250 G OR LESS; WITH REMOVAL OF TUBE(S) AND/OR OVARY(S)
XOHANA	Q3 2025	Outpatient Hosp	58553	CPT	LAPAROSCOPY, SURGICAL, WITH VAGINAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 G;
XOHANA	Q3 2025	Outpatient Hosp	58554	CPT	LAPAROSCOPY, SURGICAL, WITH VAGINAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 G; WITH REMOVAL OF TUBE(S) AND/OR OVARY(S)
XOHANA	Q3 2025	Outpatient Hosp	58561	CPT	HYSTEROSCOPY, SURGICAL; WITH REMOVAL OF LEIOMYOMATA
XOHANA	Q3 2025	Outpatient Hosp	58570	CPT	LAPAROSCOPY, SURGICAL, WITH TOTAL HYSTERECTOMY, FOR UTERUS 250 G OR LESS;
XOHANA	Q3 2025	Outpatient Hosp	58571	CPT	LAPAROSCOPY, SURGICAL, WITH TOTAL HYSTERECTOMY, FOR UTERUS 250 G OR LESS; WITH REMOVAL OF TUBE(S) AND/OR OVARY(S)
XOHANA	Q3 2025	Outpatient Hosp	58573	CPT	LAPAROSCOPY, SURGICAL, WITH TOTAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 G; WITH REMOVAL OF TUBE(S) AND/OR OVARY(S)
XOHANA	Q3 2025	Outpatient Hosp	58661	CPT	LAPAROSCOPY, SURGICAL; WITH REMOVAL OF ADNEXAL STRUCTURES (PARTIAL OR TOTAL OOPHORECTOMY AND/OR SALPINGECTOMY)
XOHANA	Q3 2025	Outpatient Hosp	58662	CPT	LAPAROSCOPY, SURGICAL; WITH FULGURATION OR EXCISION OF LESIONS OF THE OVARY, PELVIC VISCERA, OR PERITONEAL SURFACE BY ANY
XOHANA	Q3 2025	Outpatient Hosp	58700	CPT	SALPINGECTOMY, COMPLETE OR PARTIAL, UNILATERAL OR BILATERAL (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp	58720	CPT	SALPINGO-OOPHORECTOMY, COMPLETE OR PARTIAL, UNILATERAL OR BILATERAL (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp	58940	CPT	OOPHORECTOMY, PARTIAL OR TOTAL, UNILATERAL OR BILATERAL;
XOHANA	Q3 2025	Outpatient Hosp	58943	CPT	OOPHORECTOMY, PARTIAL OR TOTAL, UNILATERAL OR BILATERAL; FOR OVARIAN, TUBAL OR PRIMARY PERITONEAL MALIGNANCY, WITH PARA-AO
XOHANA	Q3 2025	Outpatient Hosp	59000	CPT	AMNIOCENTESIS; DIAGNOSTIC
XOHANA	Q3 2025	Outpatient Hosp	60212	CPT	PARTIAL THYROID LOBECTOMY, UNILATERAL; WITH CONTRALATERAL SUBTOTAL LOBECTOMY, INCLUDING ISTHMUSECTOMY
XOHANA	Q3 2025	Outpatient Hosp	60220	CPT	TOTAL THYROID LOBECTOMY, UNILATERAL; WITH OR WITHOUT ISTHMUSECTOMY
XOHANA	Q3 2025	Outpatient Hosp	60225	CPT	TOTAL THYROID LOBECTOMY, UNILATERAL; WITH CONTRALATERAL SUBTOTAL LOBECTOMY, INCLUDING ISTHMUSECTOMY
XOHANA	Q3 2025	Outpatient Hosp	60240	CPT	THYROIDECTOMY, TOTAL OR COMPLETE
XOHANA	Q3 2025	Outpatient Hosp	60252	CPT	THYROIDECTOMY, TOTAL OR SUBTOTAL FOR MALIGNANCY; WITH LIMITED NECK DISSECTION
XOHANA	Q3 2025	Outpatient Hosp	60254	CPT	THYROIDECTOMY, TOTAL OR SUBTOTAL FOR MALIGNANCY; WITH RADICAL NECK DISSECTION
XOHANA	Q3 2025	Outpatient Hosp	60260	CPT	THYROIDECTOMY, REMOVAL OF ALL REMAINING THYROID TISSUE FOLLOWING PREVIOUS REMOVAL OF A PORTION OF THYROID
XOHANA	Q3 2025	Outpatient Hosp	60280	CPT	EXCISION OF THYROGLOSSAL DUCT CYST OR SINUS;
XOHANA	Q3 2025	Outpatient Hosp	60500	CPT	PARATHYROIDECTOMY OR EXPLORATION OF PARATHYROID(S);
XOHANA	Q3 2025	Outpatient Hosp	60512	CPT	PARATHYROID AUTOTRANSPLANTATION (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp	60699	CPT	UNLISTED PROCEDURE, ENDOCRINE SYSTEM
XOHANA	Q3 2025	Outpatient Hosp	60699	CPT	UNLISTED PROCEDURE, ENDOCRINE SYSTEM
XOHANA	Q3 2025	Outpatient Hosp	61605	CPT	RESECTION OR EXCISION OF NEOPLASTIC, VASCULAR OR INFECTIOUS LESION OF INFRATEMPORAL FOSSA, PARAPHARYNGEAL SPACE, PETROUS A
XOHANA	Q3 2025	Outpatient Hosp	61886	CPT	INSERTION OR REPLACEMENT OF CRANIAL NEUROSTIMULATOR PULSE GENERATOR OR RECEIVER, DIRECT OR INDUCTIVE COUPLING; WITH CONNEC
XOHANA	Q3 2025	Outpatient Hosp	62142	CPT	REMOVAL OF BONE FLAP OR PROSTHETIC PLATE OF SKULL
XOHANA	Q3 2025	Outpatient Hosp	62273	CPT	INJECTION, EPIDURAL, OF BLOOD OR CLOT PATCH
XOHANA	Q3 2025	Outpatient Hosp	62324	CPT	INJECTION(S), INCLUDING INDWELLING CATHETER PLACEMENT, CONTINUOUS INFUSION OR INTERMITTENT BOLUS, OF DIAGNOSTIC OR THERAPEUTIC SUBSTANCE(S) (EG, ANESTHETIC,
XOHANA	Q3 2025	Outpatient Hosp	62325	CPT	INJECTION(S), INCLUDING INDWELLING CATHETER PLACEMENT, CONTINUOUS INFUSION OR INTERMITTENT BOLUS, OF DIAGNOSTIC OR THERAPEUTIC SUBSTANCE(S) (EG, ANESTHETIC,
XOHANA	Q3 2025	Outpatient Hosp	62326	CPT	INJECTION(S), INCLUDING INDWELLING CATHETER PLACEMENT, CONTINUOUS INFUSION OR INTERMITTENT BOLUS, OF DIAGNOSTIC OR THERAPEUTIC SUBSTANCE(S) (EG, ANESTHETIC,
XOHANA	Q3 2025	Outpatient Hosp	62327	CPT	INJECTION(S), INCLUDING INDWELLING CATHETER PLACEMENT, CONTINUOUS INFUSION OR INTERMITTENT BOLUS, OF DIAGNOSTIC OR THERAPEUTIC SUBSTANCE(S) (EG, ANESTHETIC,
XOHANA	Q3 2025	Outpatient Hosp	62350	CPT	IMPLANTATION, REVISION OR REPOSITIONING OF TUNNELED INTRATHECAL OR EPIDURAL CATHETER, FOR LONG-TERM MEDICATION ADMINISTRAT
XOHANA	Q3 2025	Outpatient Hosp	62360	CPT	IMPLANTATION OR REPLACEMENT OF DEVICE FOR INTRATHECAL OR EPIDURAL DRUG INFUSION; SUBCUTANEOUS RESERVOIR
XOHANA	Q3 2025	Outpatient Hosp	62361	CPT	IMPLANTATION OR REPLACEMENT OF DEVICE FOR INTRATHECAL OR EPIDURAL DRUG INFUSION; NONPROGRAMMABLE PUMP
XOHANA	Q3 2025	Outpatient Hosp	62362	CPT	IMPLANTATION OR REPLACEMENT OF DEVICE FOR INTRATHECAL OR EPIDURAL DRUG INFUSION; PROGRAMMABLE PUMP, INCLUDING PREPARATION
XOHANA	Q3 2025	Outpatient Hosp	63015	CPT	LAMINECTOMY WITH EXPLORATION AND/OR DECOMPRESSION OF SPINAL CORD AND/OR CAUDA EQUINA, WITHOUT FACETECTOMY, FORAMINOTOMY OR
XOHANA	Q3 2025	Outpatient Hosp	63020	CPT	LAMINOTOMY (HEMILAMINECTOMY), WITH DECOMPRESSION OF NERVE ROOT(S), INCLUDING PARTIAL FACETECTOMY, FORAMINOTOMY AND/OR EXCI
XOHANA	Q3 2025	Outpatient Hosp	63030	CPT	LAMINOTOMY (HEMILAMINECTOMY), WITH DECOMPRESSION OF NERVE ROOT(S), INCLUDING PARTIAL FACETECTOMY, FORAMINOTOMY AND/OR EXCI
XOHANA	Q3 2025	Outpatient Hosp	63042	CPT	LAMINOTOMY (HEMILAMINECTOMY), WITH DECOMPRESSION OF NERVE ROOT(S), INCLUDING PARTIAL FACETECTOMY, FORAMINOTOMY AND/OR EXCI
XOHANA	Q3 2025	Outpatient Hosp	63048	CPT	LAMINECTOMY, FACETECTOMY AND FORAMINOTOMY (UNILATERAL OR BILATERAL WITH DECOMPRESSION OF SPINAL CORD, CAUDA EQUINA AND/OR
XOHANA	Q3 2025	Outpatient Hosp	63075	CPT	DISCECTOMY, ANTERIOR, WITH DECOMPRESSION OF SPINAL CORD AND/OR NERVE ROOT(S), INCLUDING OSTEOPHYTECTOMY; CERVICAL, SINGLE
XOHANA	Q3 2025	Outpatient Hosp	63081	CPT	VERTEBRAL CORPECTOMY (VERTEBRAL BODY RESECTION), PARTIAL OR COMPLETE, ANTERIOR APPROACH WITH DECOMPRESSION OF SPINAL CORD
XOHANA	Q3 2025	Outpatient Hosp	63655	CPT	LAMINECTOMY FOR IMPLANTATION OF NEUROSTIMULATOR ELECTRODES, PLATE/PADDLE, EPIDURAL
XOHANA	Q3 2025	Outpatient Hosp	63662	CPT	REMOVAL OF SPINAL NEUROSTIMULATOR ELECTRODE PLATE/PADDLE(S) PLACED VIA LAMINOTOMY OR LAMINECTOMY, INCLUDING FLUOROSCOPY, WHEN PERF
XOHANA	Q3 2025	Outpatient Hosp	63663	CPT	REVISION INCLUDING REPLACEMENT, WHEN PERFORMED, OF SPINAL NEUROSTIMULATOR ELECTRODE PERCUTANEOUS ARRAY(S), INCLUDING FLUOROSCOPY,
XOHANA	Q3 2025	Outpatient Hosp	63685	CPT	INSERTION OR REPLACEMENT OF SPINAL NEUROSTIMULATOR PULSE GENERATOR OR RECEIVER, DIRECT OR INDUCTIVE COUPLING
XOHANA	Q3 2025	Outpatient Hosp	64418	CPT	INJECTION(S), ANESTHETIC AGENT(S) AND/OR STEROID; SUPRASCAPULAR NERVE
XOHANA	Q3 2025	Outpatient Hosp	64420	CPT	INJECTION(S), ANESTHETIC AGENT(S) AND/OR STEROID; INTERCOSTAL NERVE, SINGLE LEVEL
XOHANA	Q3 2025	Outpatient Hosp	64520	CPT	INJECTION, ANESTHETIC AGENT; LUMBAR OR THORACIC (PARAVERTEBRAL SYMPATHETIC)
XOHANA	Q3 2025	Outpatient Hosp	64555	CPT	PERCUTANEOUS IMPLANTATION OF NEUROSTIMULATOR ELECTRODES; PERIPHERAL NERVE (EXCLUDES SACRAL NERVE)
XOHANA	Q3 2025	Outpatient Hosp	64568	CPT	INCISION FOR IMPLANTATION OF CRANIAL NERVE (EG, VAGUS NERVE) NEUROSTIMULATOR ELECTRODE ARRAY AND PULSE GENERATOR
XOHANA	Q3 2025	Outpatient Hosp	64569	CPT	REVISION OR REPLACEMENT OF CRANIAL NERVE (EG, VAGUS NERVE) NEUROSTIMULATOR ELECTRODE ARRAY, INCLUDING CONNECTION TO EXISTING PULSE
XOHANA	Q3 2025	Outpatient Hosp	64581	CPT	INCISION FOR IMPLANTATION OF NEUROSTIMULATOR ELECTRODES; SACRAL NERVE (TRANSFORAMINAL PLACEMENT)
XOHANA	Q3 2025	Outpatient Hosp	64585	CPT	REVISION OR REMOVAL OF PERIPHERAL NEUROSTIMULATOR ELECTRODES
XOHANA	Q3 2025	Outpatient Hosp	64590	CPT	INSERTION OR REPLACEMENT OF PERIPHERAL OR GASTRIC NEUROSTIMULATOR PULSE GENERATOR OR RECEIVER, DIRECT OR INDUCTIVE COUPLIN
XOHANA	Q3 2025	Outpatient Hosp	64595	CPT	REVISION OR REMOVAL OF PERIPHERAL OR GASTRIC NEUROSTIMULATOR PULSE GENERATOR OR RECEIVER
XOHANA	Q3 2025	Outpatient Hosp	64612	CPT	CHEMODENERVATION OF MUSCLE(S); MUSCLE(S) INNERVATED BY FACIAL NERVE (EG, FOR BLEPHAROSPASM, HEMIFACIAL SPASM)
XOHANA	Q3 2025	Outpatient Hosp	64702	CPT	NEUROPLASTY; DIGITAL, ONE OR BOTH, SAME DIGIT
XOHANA	Q3 2025	Outpatient Hosp	64708	CPT	NEUROPLASTY, MAJOR PERIPHERAL NERVE, ARM OR LEG; OTHER THAN SPECIFIED
XOHANA	Q3 2025	Outpatient Hosp	64713	CPT	NEUROPLASTY, MAJOR PERIPHERAL NERVE, ARM OR LEG; BRACHIAL PLEXUS
XOHANA	Q3 2025	Outpatient Hosp	64718	CPT	NEUROPLASTY AND/OR TRANSPOSITION; ULNAR NERVE AT ELBOW
XOHANA	Q3 2025	Outpatient Hosp	64719	CPT	NEUROPLASTY AND/OR TRANSPOSITION; ULNAR NERVE AT WRIST
XOHANA	Q3 2025	Outpatient Hosp	64721	CPT	NEUROPLASTY AND/OR TRANSPOSITION; MEDIAN NERVE AT CARPAL TUNNEL
XOHANA	Q3 2025	Outpatient Hosp	64774	CPT	EXCISION OF NEUROMA; CUTANEOUS NERVE, SURGICALLY IDENTIFIABLE

XOHANA	Q3 2025	Outpatient Hosp	64831	CPT	SUTURE OF DIGITAL NERVE, HAND OR FOOT; ONE NERVE
XOHANA	Q3 2025	Outpatient Hosp	64834	CPT	SUTURE OF ONE NERVE; HAND OR FOOT, COMMON SENSORY NERVE
XOHANA	Q3 2025	Outpatient Hosp	64910	CPT	NERVE REPAIR; WITH SYNTHETIC CONDUIT OR VEIN ALLOGRAFT (EG, NERVE TUBE), EACH NERVE
XOHANA	Q3 2025	Outpatient Hosp	64912	CPT	NERVE REPAIR; WITH NERVE ALLOGRAFT, EACH NERVE, FIRST STRAND (CABLE)
XOHANA	Q3 2025	Outpatient Hosp	64999	CPT	UNLISTED PROCEDURE, NERVOUS SYSTEM
XOHANA	Q3 2025	Outpatient Hosp	65093	CPT	EVISCERATION OF OCULAR CONTENTS; WITH IMPLANT
XOHANA	Q3 2025	Outpatient Hosp	65105	CPT	ENUCLEATION OF EYE; WITH IMPLANT, MUSCLES ATTACHED TO IMPLANT
XOHANA	Q3 2025	Outpatient Hosp	65426	CPT	EXCISION OR TRANSPOSITION OF PTERYGIUM; WITH GRAFT
XOHANA	Q3 2025	Outpatient Hosp	65710	CPT	KERATOPLASTY (CORNEAL TRANSPLANT); LAMELLAR
XOHANA	Q3 2025	Outpatient Hosp	65730	CPT	KERATOPLASTY (CORNEAL TRANSPLANT); PENETRATING (EXCEPT IN APHAKIA)
XOHANA	Q3 2025	Outpatient Hosp	65750	CPT	KERATOPLASTY (CORNEAL TRANSPLANT); PENETRATING (IN APHAKIA)
XOHANA	Q3 2025	Outpatient Hosp	65756	CPT	KERATOPLASTY ENDOTHELIAL KERATOPLASTY (CORNEAL TRANSPLANT); ENDOTHELIAL
XOHANA	Q3 2025	Outpatient Hosp	65779	CPT	PLACEMENT OF AMNIOTIC MEMBRANE ON THE OCULAR SURFACE FOR WOUND HEALING; SINGLE LAYER, SUTURED
XOHANA	Q3 2025	Outpatient Hosp	65800	CPT	PARACENTESIS OF ANTERIOR CHAMBER OF EYE (SEPARATE PROCEDURE); WITH DIAGNOSTIC ASPIRATION OF AQUEOUS
XOHANA	Q3 2025	Outpatient Hosp	65815	CPT	PARACENTESIS OF ANTERIOR CHAMBER OF EYE (SEPARATE PROCEDURE); WITH REMOVAL OF BLOOD, WITH OR WITHOUT IRRIGATION AND/OR AIR
XOHANA	Q3 2025	Outpatient Hosp	65820	CPT	GONIOTOMY
XOHANA	Q3 2025	Outpatient Hosp	65850	CPT	TRABECULOTOMY AB EXTERNO
XOHANA	Q3 2025	Outpatient Hosp	65855	CPT	TRABECULOPLASTY BY LASER SURGERY
XOHANA	Q3 2025	Outpatient Hosp	65865	CPT	SEVERING ADHESIONS OF ANTERIOR SEGMENT OF EYE, INCISIONAL TECHNIQUE (WITH OR WITHOUT INJECTION OF AIR OR LIQUID) (SEPARATE
XOHANA	Q3 2025	Outpatient Hosp	65930	CPT	REMOVAL OF BLOOD CLOT, ANTERIOR SEGMENT OF EYE
XOHANA	Q3 2025	Outpatient Hosp	66174	CPT	TRANSLUMINAL DILATION OF AQUEOUS OUTFLOW CANAL; WITHOUT RETENTION OF DEVICE OR STENT
XOHANA	Q3 2025	Outpatient Hosp	66180	CPT	AQUEOUS SHUNT TO EXTRAOCULAR EQUATORIAL PLATE RESERVOIR, EXTERNAL APPROACH; WITH GRAFT
XOHANA	Q3 2025	Outpatient Hosp	66682	CPT	SUTURE OF IRIS, CILIARY BODY (SEPARATE PROCEDURE) WITH RETRIEVAL OF SUTURE THROUGH SMALL INCISION (EG, MCCANNEL SUTURE)
XOHANA	Q3 2025	Outpatient Hosp	66820	CPT	DISCISSION OF SECONDARY MEMBRANOUS CATARACT (OPACIFIED POSTERIOR LENS CAPSULE AND/OR ANTERIOR HYALOID); STAB INCISION TECH
XOHANA	Q3 2025	Outpatient Hosp	66821	CPT	DISCISSION OF SECONDARY MEMBRANOUS CATARACT (OPACIFIED POSTERIOR LENS CAPSULE AND/OR ANTERIOR HYALOID); LASER SURGERY (EG,
XOHANA	Q3 2025	Outpatient Hosp	66825	CPT	REPOSITIONING OF INTRAOCULAR LENS PROSTHESIS, REQUIRING AN INCISION (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp	66850	CPT	REMOVAL OF LENS MATERIAL; PHACOFRAGMENTATION TECHNIQUE (MECHANICAL OR ULTRASONIC) (EG, PHACOEMULSIFICATION), WITH ASPIRATI
XOHANA	Q3 2025	Outpatient Hosp	66852	CPT	REMOVAL OF LENS MATERIAL; PARS PLANA APPROACH, WITH OR WITHOUT VITRECTOMY
XOHANA	Q3 2025	Outpatient Hosp	66982	CPT	EXTRACAPSULAR CATARACT REMOVAL WITH INSERTION OF INTRAOCULAR LENS PROSTHESIS (1-STAGE PROCEDURE), MANUAL OR MECHANICAL TECHNIQUE (EG, IRRIGATION AND ASPI
XOHANA	Q3 2025	Outpatient Hosp	66984	CPT	EXTRACAPSULAR CATARACT REMOVAL WITH INSERTION OF INTRAOCULAR LENS PROSTHESIS (1 STAGE PROCEDURE), MANUAL OR MECHANICAL TECHNIQUE (EG, IRRIGATION AND ASPI
XOHANA	Q3 2025	Outpatient Hosp	66985	CPT	INSERTION OF INTRAOCULAR LENS PROSTHESIS (SECONDARY IMPLANT), NOT ASSOCIATED WITH CONCURRENT CATARACT REMOVAL
XOHANA	Q3 2025	Outpatient Hosp	66986	CPT	EXCHANGE OF INTRAOCULAR LENS
XOHANA	Q3 2025	Outpatient Hosp	66987	CPT	EXTRACAPSULAR CATARACT REMOVAL WITH INSERTION OF INTRAOCULAR LENS PROSTHESIS (1-STAGE PROCEDURE), MANUAL OR MECHANICAL TECHNIQUE (EG, IRRIGATION AND ASPI
XOHANA	Q3 2025	Outpatient Hosp	66988	CPT	EXTRACAPSULAR CATARACT REMOVAL WITH INSERTION OF INTRAOCULAR LENS PROSTHESIS (1 STAGE PROCEDURE), MANUAL OR MECHANICAL TECHNIQUE (EG, IRRIGATION AND ASPI
XOHANA	Q3 2025	Outpatient Hosp	66990	CPT	USE OF OPHTHALMIC ENDOSCOPE (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp	67015	CPT	ASPIRATION OR RELEASE OF VITREOUS, SUBRETINAL OR CHOROIDAL FLUID, PARS PLANA APPROACH (POSTERIOR SCLEROTOMY)
XOHANA	Q3 2025	Outpatient Hosp	67028	CPT	INTRAVITREAL INJECTION OF A PHARMACOLOGIC AGENT (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp	67036	CPT	VITRECTOMY, MECHANICAL, PARS PLANA APPROACH;
XOHANA	Q3 2025	Outpatient Hosp	67040	CPT	VITRECTOMY, MECHANICAL, PARS PLANA APPROACH; WITH ENDOLASER PANRETINAL PHOTOCOAGULATION
XOHANA	Q3 2025	Outpatient Hosp	67043	CPT	VITRECTOMY, MECHANICAL, PARS PLANA APPROACH; WITH REMOVAL OF SUBRETINAL MEMBRANE (EG, CHOROIDAL NEOVASCULARIZATION), INCLU
XOHANA	Q3 2025	Outpatient Hosp	67105	CPT	REPAIR OF RETINAL DETACHMENT, 1 OR MORE SESSIONS; PHOTOCOAGULATION, INCLUDING DRAINAGE OF SUBRETINAL FLUID, WHEN PERFORMED
XOHANA	Q3 2025	Outpatient Hosp	67108	CPT	REPAIR OF RETINAL DETACHMENT; WITH VITRECTOMY, ANY METHOD, WITH OR WITHOUT AIR OR GAS TAMPONADE, FOCAL ENDOLASER PHOTOCOAG
XOHANA	Q3 2025	Outpatient Hosp	67110	CPT	REPAIR OF RETINAL DETACHMENT; BY INJECTION OF AIR OR OTHER GAS (EG, PNEUMATIC RETINOPEXY)
XOHANA	Q3 2025	Outpatient Hosp	67113	CPT	REPAIR OF COMPLEX RETINAL DETACHMENT (EG, PROLIFERATIVE VITREORETINOPATHY, STAGE C-1 OR GREATER, DIABETIC TRACTION RETINAL
XOHANA	Q3 2025	Outpatient Hosp	67120	CPT	REMOVAL OF IMPLANTED MATERIAL, POSTERIOR SEGMENT; EXTRAOCULAR
XOHANA	Q3 2025	Outpatient Hosp	67208	CPT	DESTRUCTION OF LOCALIZED LESION OF RETINA (EG, MACULAR EDEMA, TUMORS), ONE OR MORE SESSIONS; CRYOTHERAPY, DIATHERMY
XOHANA	Q3 2025	Outpatient Hosp	67210	CPT	DESTRUCTION OF LOCALIZED LESION OF RETINA (EG, MACULAR EDEMA, TUMORS), ONE OR MORE SESSIONS; PHOTOCOAGULATION
XOHANA	Q3 2025	Outpatient Hosp	67221	CPT	DESTRUCTION OF LOCALIZED LESION OF CHOROID (EG, CHOROIDAL NEOVASCULARIZATION); PHOTODYNAMIC THERAPY (INCLUDES INTRAVENOUS
XOHANA	Q3 2025	Outpatient Hosp	67228	CPT	TREATMENT OF EXTENSIVE OR PROGRESSIVE RETINOPATHY (EG, DIABETIC RETINOPATHY), PHOTOCOAGULATION
XOHANA	Q3 2025	Outpatient Hosp	67311	CPT	STRABISMUS SURGERY, RECESSION OR RESECTION PROCEDURE; ONE HORIZONTAL MUSCLE
XOHANA	Q3 2025	Outpatient Hosp	67312	CPT	STRABISMUS SURGERY, RECESSION OR RESECTION PROCEDURE; TWO HORIZONTAL MUSCLES
XOHANA	Q3 2025	Outpatient Hosp	67314	CPT	STRABISMUS SURGERY, RECESSION OR RESECTION PROCEDURE; ONE VERTICAL MUSCLE (EXCLUDING SUPERIOR OBLIQUE)
XOHANA	Q3 2025	Outpatient Hosp	67331	CPT	STRABISMUS SURGERY ON PATIENT WITH PREVIOUS EYE SURGERY OR INJURY THAT DID NOT INVOLVE THE EXTRAOCULAR MUSCLES (LIST SEPAR
XOHANA	Q3 2025	Outpatient Hosp	67332	CPT	STRABISMUS SURGERY ON PATIENT WITH SCARRING OF EXTRAOCULAR MUSCLES (EG, PRIOR OCULAR INJURY, STRABISMUS OR RETINAL DETACHM
XOHANA	Q3 2025	Outpatient Hosp	67412	CPT	ORBITOTOMY WITHOUT BONE FLAP (FRONTAL OR TRANSCONJUNCTIVAL APPROACH); WITH REMOVAL OF LESION
XOHANA	Q3 2025	Outpatient Hosp	67875	CPT	TEMPORARY CLOSURE OF EYELIDS BY SUTURE (EG, FROST SUTURE)
XOHANA	Q3 2025	Outpatient Hosp	67917	CPT	REPAIR OF ECTROPION; EXTENSIVE (EG, TARSAL STRIP OPERATIONS)
XOHANA	Q3 2025	Outpatient Hosp	67924	CPT	REPAIR OF ENTROPION; EXTENSIVE (EG, TARSAL STRIP OR CAPSULOPALPEBRAL FASCIA REPAIRS OPERATION)
XOHANA	Q3 2025	Outpatient Hosp	67935	CPT	SUTURE OF RECENT WOUND, EYELID, INVOLVING LID MARGIN, TARSUS, AND/OR PALPEBRAL CONJUNCTIVA DIRECT CLOSURE; FULL THICKNESS
XOHANA	Q3 2025	Outpatient Hosp	67950	CPT	CANTHOPLASTY (RECONSTRUCTION OF CANTHUS)
XOHANA	Q3 2025	Outpatient Hosp	67961	CPT	EXCISION AND REPAIR OF EYELID, INVOLVING LID MARGIN, TARSUS, CONJUNCTIVA, CANTHUS, OR FULL THICKNESS, MAY INCLUDE PREPARAT
XOHANA	Q3 2025	Outpatient Hosp	68326	CPT	CONJUNCTIVOPLASTY, RECONSTRUCTION CUL-DE-SAC; WITH CONJUNCTIVAL GRAFT OR EXTENSIVE REARRANGEMENT
XOHANA	Q3 2025	Outpatient Hosp	68340	CPT	REPAIR OF SYMBLEPHARON; DIVISION OF SYMBLEPHARON, WITH OR WITHOUT INSERTION OF CONFORMER OR CONTACT LENS
XOHANA	Q3 2025	Outpatient Hosp	68720	CPT	DACRYOCYSTORHINOSTOMY (FISTULIZATION OF LACRIMAL SAC TO NASAL CAVITY)
XOHANA	Q3 2025	Outpatient Hosp	68750	CPT	CONJUNCTIVORHINOSTOMY (FISTULIZATION OF CONJUNCTIVA TO NASAL CAVITY); WITH INSERTION OF TUBE OR STENT
XOHANA	Q3 2025	Outpatient Hosp	68810	CPT	PROBING OF NASOLACRIMAL DUCT, WITH OR WITHOUT IRRIGATION;
XOHANA	Q3 2025	Outpatient Hosp	68811	CPT	PROBING OF NASOLACRIMAL DUCT, WITH OR WITHOUT IRRIGATION; REQUIRING GENERAL ANESTHESIA
XOHANA	Q3 2025	Outpatient Hosp	68815	CPT	PROBING OF NASOLACRIMAL DUCT, WITH OR WITHOUT IRRIGATION; WITH INSERTION OF TUBE OR STENT
XOHANA	Q3 2025	Outpatient Hosp	68816	CPT	PROBING OF NASOLACRIMAL DUCT, WITH OR WITHOUT IRRIGATION; WITH TRANSLUMINAL BALLOON CATHETER DILATION
XOHANA	Q3 2025	Outpatient Hosp	69140	CPT	EXCISION EXOSTOSIS(ES), EXTERNAL AUDITORY CANAL
XOHANA	Q3 2025	Outpatient Hosp	69300	CPT	OTOPLASTY, PROTRUDING EAR, WITH OR WITHOUT SIZE REDUCTION
XOHANA	Q3 2025	Outpatient Hosp	69310	CPT	RECONSTRUCTION OF EXTERNAL AUDITORY CANAL (MEATOPLASTY) (EG, FOR STENOSIS DUE TO INJURY, INFECTION) (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp	69420	CPT	MYRINGOTOMY INCLUDING ASPIRATION AND/OR EUSTACHIAN TUBE INFLATION
XOHANA	Q3 2025	Outpatient Hosp	69421	CPT	MYRINGOTOMY INCLUDING ASPIRATION AND/OR EUSTACHIAN TUBE INFLATION REQUIRING GENERAL ANESTHESIA
XOHANA	Q3 2025	Outpatient Hosp	69436	CPT	TYMPANOSTOMY (REQUIRING INSERTION OF VENTILATING TUBE), GENERAL ANESTHESIA
XOHANA	Q3 2025	Outpatient Hosp	69620	CPT	MYRINGOPLASTY (SURGERY CONFINED TO DRUMHEAD AND DONOR AREA)
XOHANA	Q3 2025	Outpatient Hosp	69631	CPT	TYMPANOPLASTY WITHOUT MASTOIDECTOMY (INCLUDING CANALPLASTY, ATTICOTOMY AND/OR MIDDLE EAR SURGERY), INITIAL OR REVISION; WI
XOHANA	Q3 2025	Outpatient Hosp	69632	CPT	TYMPANOPLASTY WITHOUT MASTOIDECTOMY (INCLUDING CANALPLASTY, ATTICOTOMY AND/OR MIDDLE EAR SURGERY), INITIAL OR REVISION; WI
XOHANA	Q3 2025	Outpatient Hosp	69644	CPT	TYMPANOPLASTY WITH MASTOIDECTOMY (INCLUDING CANALPLASTY, MIDDLE EAR SURGERY, TYMPANIC MEMBRANE REPAIR); WITH INTACT OR REC
XOHANA	Q3 2025	Outpatient Hosp	69660	CPT	STAPEDECTOMY OR STAPEDOTOMY WITH REESTABLISHMENT OF OSSICULAR CONTINUITY, WITH OR WITHOUT USE OF FOREIGN MATERIAL;
XOHANA	Q3 2025	Outpatient Hosp	69670	CPT	MASTOID OBLITERATION (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp	69714	CPT	IMPLANTATION, OSSEOINTEGRATED IMPLANT, TEMPORAL BONE, WITH PERCUTANEOUS ATTACHMENT TO EXTERNAL SPEECH PROCESSOR/COCHLEAR S
XOHANA	Q3 2025	Outpatient Hosp	69717	CPT	REPLACEMENT (INCLUDING REMOVAL OF EXISTING DEVICE), OSSEOINTEGRATED IMPLANT, TEMPORAL BONE, WITH PERCUTANEOUS ATTACHMENT T
XOHANA	Q3 2025	Outpatient Hosp	69799	CPT	UNLISTED PROCEDURE, MIDDLE EAR
XOHANA	Q3 2025	Outpatient Hosp	69930	CPT	COCHLEAR DEVICE IMPLANTATION, WITH OR WITHOUT MASTOIDECTOMY
XOHANA	Q3 2025	Outpatient Hosp	70490	CPT	COMPUTED TOMOGRAPHY, SOFT TISSUE NECK; WITHOUT CONTRAST MATERIAL
XOHANA	Q3 2025	Outpatient Hosp	70491	CPT	COMPUTED TOMOGRAPHY, SOFT TISSUE NECK; WITH CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Outpatient Hosp	70492	CPT	COMPUTED TOMOGRAPHY, SOFT TISSUE NECK; WITHOUT CONTRAST MATERIAL FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
XOHANA	Q3 2025	Outpatient Hosp	70552	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM); WITH CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Outpatient Hosp	71111	CPT	RADIOLOGIC EXAMINATION, RIBS, BILATERAL; INCLUDING POSTEROANTERIOR CHEST, MINIMUM OF FOUR VIEWS
XOHANA	Q3 2025	Outpatient Hosp	71260	CPT	COMPUTED TOMOGRAPHY, THORAX, DIAGNOSTIC; WITH CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Outpatient Hosp	71270	CPT	COMPUTED TOMOGRAPHY, THORAX, DIAGNOSTIC; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
XOHANA	Q3 2025	Outpatient Hosp	72132	CPT	COMPUTED TOMOGRAPHY, LUMBAR SPINE; WITH CONTRAST MATERIAL
XOHANA	Q3 2025	Outpatient Hosp	72133	CPT	COMPUTED TOMOGRAPHY, LUMBAR SPINE; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS
XOHANA	Q3 2025	Outpatient Hosp	72147	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, THORACIC; WITH CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Outpatient Hosp	72157	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERI
XOHANA	Q3 2025	Outpatient Hosp	72159	CPT	MAGNETIC RESONANCE ANGIOGRAPHY, SPINAL CANAL AND CONTENTS, WITH OR WITHOUT CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Outpatient Hosp	73115	CPT	RADIOLOGIC EXAMINATION, WRIST, ARTHROGRAPHY, RADIOLOGICAL SUPERVISION AND INTERPRETATION

XOHANA	Q3 2025	Outpatient Hosp	73722	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF LOWER EXTREMITY; WITH CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Outpatient Hosp	74175	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, ABDOMEN, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED, AND IMAG
XOHANA	Q3 2025	Outpatient Hosp	74181	CPT	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ABDOMEN; WITHOUT CONTRAST MATERIAL(S)
XOHANA	Q3 2025	Outpatient Hosp	74420	CPT	UROGRAPHY, RETROGRADE, WITH OR WITHOUT KUB
XOHANA	Q3 2025	Outpatient Hosp	74455	CPT	URETHROCYSTOGRAPHY, VOIDING, RADIOLOGICAL SUPERVISION AND INTERPRETATION
XOHANA	Q3 2025	Outpatient Hosp	75557	CPT	CARDIAC MAGNETIC RESONANCE IMAGING FOR MORPHOLOGY AND FUNCTION WITHOUT CONTRAST MATERIAL;
XOHANA	Q3 2025	Outpatient Hosp	75561	CPT	CARDIAC MAGNETIC RESONANCE IMAGING FOR MORPHOLOGY AND FUNCTION WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL
XOHANA	Q3 2025	Outpatient Hosp	75574	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, HEART, CORONARY ARTERIES AND BYPASS GRAFTS (WHEN PRESENT), WITH CONTRAST MATERIAL, INCLUDING 3D
XOHANA	Q3 2025	Outpatient Hosp	75625	CPT	AORTOGRAPHY, ABDOMINAL, BY SERIALOGRAPHY, RADIOLOGICAL SUPERVISION AND INTERPRETATION
XOHANA	Q3 2025	Outpatient Hosp	75630	CPT	AORTOGRAPHY, ABDOMINAL PLUS BILATERAL ILIOFEMORAL LOWER EXTREMITY, CATHETER, BY SERIALOGRAPHY, RADIOLOGICAL SUPERVISION AN
XOHANA	Q3 2025	Outpatient Hosp	75635	CPT	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, ABDOMINAL AORTA AND BILATERAL ILIOFEMORAL LOWER EXTREMITY RUNOFF, WITH CONTRAST MATERIAL
XOHANA	Q3 2025	Outpatient Hosp	75710	CPT	ANGIOGRAPHY, EXTREMITY, UNILATERAL, RADIOLOGICAL SUPERVISION AND INTERPRETATION
XOHANA	Q3 2025	Outpatient Hosp	75716	CPT	ANGIOGRAPHY, EXTREMITY, BILATERAL, RADIOLOGICAL SUPERVISION AND INTERPRETATION
XOHANA	Q3 2025	Outpatient Hosp	75885	CPT	PERCUTANEOUS TRANSHEPATIC PORTOGRAPHY WITH HEMODYNAMIC EVALUATION, RADIOLOGICAL SUPERVISION AND INTERPRETATION
XOHANA	Q3 2025	Outpatient Hosp	75889	CPT	HEPATIC VENOGRAPHY, WEDGED OR FREE, WITH HEMODYNAMIC EVALUATION, RADIOLOGICAL SUPERVISION AND INTERPRETATION
XOHANA	Q3 2025	Outpatient Hosp	75956	CPT	ENDOVASCULAR REPAIR OF DESCENDING THORACIC AORTA (EG, ANEURYSM, PSEUDOANEURYSM, DISSECTION, PENETRATING ULCER, INTRAMURAL
XOHANA	Q3 2025	Outpatient Hosp	76380	CPT	COMPUTED TOMOGRAPHY, LIMITED OR LOCALIZED FOLLOW-UP STUDY
XOHANA	Q3 2025	Outpatient Hosp	76514	CPT	OPHTHALMIC ULTRASOUND, DIAGNOSTIC; CORNEAL PACHYMETRY, UNILATERAL OR BILATERAL (DETERMINATION OF CORNEAL THICKNESS)
XOHANA	Q3 2025	Outpatient Hosp	76516	CPT	OPHTHALMIC BIOMETRY BY ULTRASOUND ECHOGRAPHY, A-SCAN;
XOHANA	Q3 2025	Outpatient Hosp	76519	CPT	OPHTHALMIC BIOMETRY BY ULTRASOUND ECHOGRAPHY, A-SCAN; WITH INTRAOCULAR LENS POWER CALCULATION
XOHANA	Q3 2025	Outpatient Hosp	76700	CPT	ULTRASOUND, ABDOMINAL, REAL TIME WITH IMAGE DOCUMENTATION; COMPLETE
XOHANA	Q3 2025	Outpatient Hosp	76818	CPT	FETAL BIOPHYSICAL PROFILE; WITH NON-STRESS TESTING
XOHANA	Q3 2025	Outpatient Hosp	76819	CPT	FETAL BIOPHYSICAL PROFILE; WITHOUT NON-STRESS TESTING
XOHANA	Q3 2025	Outpatient Hosp	76820	CPT	DOPPLER VELOCIMETRY, FETAL; UMBILICAL ARTERY
XOHANA	Q3 2025	Outpatient Hosp	76821	CPT	DOPPLER VELOCIMETRY, FETAL; MIDDLE CEREBRAL ARTERY
XOHANA	Q3 2025	Outpatient Hosp	76872	CPT	ULTRASOUND, TRANSRECTAL;
XOHANA	Q3 2025	Outpatient Hosp	76946	CPT	ULTRASONIC GUIDANCE FOR AMNIOCENTESIS, IMAGING SUPERVISION AND INTERPRETATION
XOHANA	Q3 2025	Outpatient Hosp	77021	CPT	MAGNETIC RESONANCE IMAGING GUIDANCE FOR NEEDLE PLACEMENT (EG, FOR BIOPSY, NEEDLE ASPIRATION, INJECTION, OR PLACEMENT OF LOCALIZATION DEVICE) RADIOLOGICAL S
XOHANA	Q3 2025	Outpatient Hosp	77078	CPT	COMPUTED TOMOGRAPHY, BONE MINERAL DENSITY STUDY, 1 OR MORE SITES; AXIAL SKELETON (EG, HIPS, PELVIS, SPINE)
XOHANA	Q3 2025	Outpatient Hosp	77770	CPT	REMOTE AFTERLOADING HIGH DOSE RATE RADIONUCLIDE INTERSTITIAL OR INTRACAVITARY BRACHYTHERAPY, INCLUDES BASIC DOSIMETRY, WHEN PERFOR
XOHANA	Q3 2025	Outpatient Hosp	77771	CPT	REMOTE AFTERLOADING HIGH DOSE RATE RADIONUCLIDE INTERSTITIAL OR INTRACAVITARY BRACHYTHERAPY, INCLUDES BASIC DOSIMETRY, WHEN PERFOR
XOHANA	Q3 2025	Outpatient Hosp	77772	CPT	REMOTE AFTERLOADING HIGH DOSE RATE RADIONUCLIDE INTERSTITIAL OR INTRACAVITARY BRACHYTHERAPY, INCLUDES BASIC DOSIMETRY, WHEN PERFOR
XOHANA	Q3 2025	Outpatient Hosp	78452	CPT	MYOCARDIAL PERFUSION IMAGING, TOMOGRAPHIC (SPECT) (INCLUDING ATTENUATION CORRECTION, QUALITATIVE OR QUANTITATIVE WALL MOTION, EJEC
XOHANA	Q3 2025	Outpatient Hosp	78459	CPT	MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), METABOLIC EVALUATION STUDY (INCLUDING VENTRICULAR WALL MOTION[S] AND/OR EJECTION FRACTION[S], WHEN
XOHANA	Q3 2025	Outpatient Hosp	78700	CPT	KIDNEY IMAGING MORPHOLOGY;
XOHANA	Q3 2025	Outpatient Hosp	78804	CPT	RADIOPHARMACEUTICAL LOCALIZATION OF TUMOR, INFLAMMATORY PROCESS OR DISTRIBUTION OF RADIOPHARMACEUTICAL AGENT(S) (INCLUDES VASCULAR FLOW AND BLOOD POO
XOHANA	Q3 2025	Outpatient Hosp	78811	CPT	POSITRON EMISSION TOMOGRAPHY (PET) IMAGING; LIMITED AREA (EG, CHEST, HEAD/NECK)
XOHANA	Q3 2025	Outpatient Hosp	80074	CPT	ACUTE HEPATITIS PANEL THIS PANEL MUST INCLUDE THE FOLLOWING: HEPATITIS A ANTIBODY (HAAB), IGM ANTIBODY (86709) HEPATITIS B
XOHANA	Q3 2025	Outpatient Hosp	80076	CPT	HEPATIC FUNCTION PANEL THIS PANEL MUST INCLUDE THE FOLLOWING: ALBUMIN (82040) BILIRUBIN, TOTAL (82247) BILIRUBIN, DIRECT (
XOHANA	Q3 2025	Outpatient Hosp	80414	CPT	CHORIONIC GONADOTROPIN STIMULATION PANEL; TESTOSTERONE RESPONSE THIS PANEL MUST INCLUDE THE FOLLOWING: TESTOSTERONE (84403 X 2 ON 3 POOLED BLOOD SAMPLES
XOHANA	Q3 2025	Outpatient Hosp	81234	CPT	DMPK (DM1 PROTEIN KINASE) (EG, MYOTONIC DYSTROPHY TYPE 1) GENE ANALYSIS; EVALUATION TO DETECT ABNORMAL (EXPANDED) ALLELES
XOHANA	Q3 2025	Outpatient Hosp	83718	CPT	LIPOPROTEIN, DIRECT MEASUREMENT; HIGH DENSITY CHOLESTEROL (HDL CHOLESTEROL)
XOHANA	Q3 2025	Outpatient Hosp	85652	CPT	SEDIMENTATION RATE, ERYTHROCYTE; AUTOMATED
XOHANA	Q3 2025	Outpatient Hosp	85670	CPT	THROMBIN TIME; PLASMA
XOHANA	Q3 2025	Outpatient Hosp	86038	CPT	ANTINUCLEAR ANTIBODIES (ANA);
XOHANA	Q3 2025	Outpatient Hosp	86430	CPT	RHEUMATOID FACTOR; QUALITATIVE
XOHANA	Q3 2025	Outpatient Hosp	86593	CPT	SYPHILIS TEST; QUANTITATIVE
XOHANA	Q3 2025	Outpatient Hosp	86663	CPT	ANTIBODY; EPSTEIN-BARR (EB) VIRUS, EARLY ANTIGEN (EA)
XOHANA	Q3 2025	Outpatient Hosp	86664	CPT	ANTIBODY; EPSTEIN-BARR (EB) VIRUS, NUCLEAR ANTIGEN (EBNA)
XOHANA	Q3 2025	Outpatient Hosp	86701	CPT	ANTIBODY; HIV-1
XOHANA	Q3 2025	Outpatient Hosp	86702	CPT	ANTIBODY; HIV-2
XOHANA	Q3 2025	Outpatient Hosp	86905	CPT	BLOOD TYPING, SEROLOGIC; RBC ANTIGENS, OTHER THAN ABO OR RH (D), EACH
XOHANA	Q3 2025	Outpatient Hosp	86920	CPT	COMPATIBILITY TEST EACH UNIT; IMMEDIATE SPIN TECHNIQUE
XOHANA	Q3 2025	Outpatient Hosp	87390	CPT	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOASSAY TECHNIQUE, (EG, ENZYME IMMUNOASSAY [EIA], ENZYME-LINKED IMMUNOSORBENT ASSAY [ELISA], IMMUNOCHEMILUMINO
XOHANA	Q3 2025	Outpatient Hosp	87391	CPT	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOASSAY TECHNIQUE, (EG, ENZYME IMMUNOASSAY [EIA], ENZYME-LINKED IMMUNOSORBENT ASSAY [ELISA], IMMUNOCHEMILUMINO
XOHANA	Q3 2025	Outpatient Hosp	87635	CPT	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID-19]), AMPLI
XOHANA	Q3 2025	Outpatient Hosp	88275	CPT	MOLECULAR CYTOGENETICS; INTERPHASE IN SITU HYBRIDIZATION, ANALYZE 100-300 CELLS
XOHANA	Q3 2025	Outpatient Hosp	88740	CPT	HEMOGLOBIN, QUANTITATIVE, TRANSCUTANEOUS, PER DAY; CARBOXYHEMOGLOBIN
XOHANA	Q3 2025	Outpatient Hosp	90378	CPT	RESPIRATORY SYNCYTIAL VIRUS IMMUNE GLOBULIN (RSV-IGIM), FOR INTRAMUSCULAR USE, 50 MG, EACH
XOHANA	Q3 2025	Outpatient Hosp	90867	CPT	THERAPEUTIC REPETITIVE TRANSCRANIAL MAGNETIC STIMULATION TREATMENT; PLANNING
XOHANA	Q3 2025	Outpatient Hosp	90868	CPT	THERAPEUTIC REPETITIVE TRANSCRANIAL MAGNETIC STIMULATION TREATMENT; DELIVERY AND MANAGEMENT, PER SESSION
XOHANA	Q3 2025	Outpatient Hosp	90870	CPT	ELECTROCONVULSIVE THERAPY (INCLUDES NECESSARY MONITORING)
XOHANA	Q3 2025	Outpatient Hosp	90935	CPT	HEMODIALYSIS PROCEDURE WITH SINGLE PHYSICIAN EVALUATION
XOHANA	Q3 2025	Outpatient Hosp	90937	CPT	HEMODIALYSIS PROCEDURE REQUIRING REPEATED EVALUATION(S) WITH OR WITHOUT SUBSTANTIAL REVISION OF DIALYSIS PRESCRIPTION
XOHANA	Q3 2025	Outpatient Hosp	90945	CPT	DIALYSIS PROCEDURE OTHER THAN HEMODIALYSIS (EG, PERITONEAL DIALYSIS, HEMOFILTRATION, OR OTHER CONTINUOUS RENAL REPLACEMENT
XOHANA	Q3 2025	Outpatient Hosp	90947	CPT	DIALYSIS PROCEDURE OTHER THAN HEMODIALYSIS (EG, PERITONEAL DIALYSIS, HEMOFILTRATION, OR OTHER CONTINUOUS RENAL REPLACEMENT
XOHANA	Q3 2025	Outpatient Hosp	90993	CPT	DIALYSIS TRAINING, PATIENT, INCLUDING HELPER WHERE APPLICABLE, ANY MODE, COURSE NOT COMPLETED, PER TRAINING SESSION
XOHANA	Q3 2025	Outpatient Hosp	90999	CPT	UNLISTED DIALYSIS PROCEDURE, INPATIENT OR OUTPATIENT
XOHANA	Q3 2025	Outpatient Hosp	91034	CPT	ESOPHAGUS, GASTROESOPHAGEAL REFLUX TEST; WITH NASAL CATHETER PH ELECTRODE(S) PLACEMENT, RECORDING, ANALYSIS AND INTERPRETA
XOHANA	Q3 2025	Outpatient Hosp	91038	CPT	ESOPHAGEAL FUNCTION TEST, GASTROESOPHAGEAL REFLUX TEST WITH NASAL CATHETER INTRALUMINAL IMPEDANCE ELECTRODE(S) PLACEMENT,
XOHANA	Q3 2025	Outpatient Hosp	92014	CPT	OPHTHALMOLOGICAL SERVICES: MEDICAL EXAMINATION AND EVALUATION, WITH INITIATION OR CONTINUATION OF DIAGNOSTIC AND TREATMENT
XOHANA	Q3 2025	Outpatient Hosp	92015	CPT	DETERMINATION OF REFRACTIVE STATE
XOHANA	Q3 2025	Outpatient Hosp	92018	CPT	OPHTHALMOLOGICAL EXAMINATION AND EVALUATION, UNDER GENERAL ANESTHESIA, WITH OR WITHOUT MANIPULATION OF GLOBE FOR PASSIVE R
XOHANA	Q3 2025	Outpatient Hosp	92019	CPT	OPHTHALMOLOGICAL EXAMINATION AND EVALUATION, UNDER GENERAL ANESTHESIA, WITH OR WITHOUT MANIPULATION OF GLOBE FOR PASSIVE R
XOHANA	Q3 2025	Outpatient Hosp	92020	CPT	GONIOSCOPY (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp	92025	CPT	COMPUTERIZED CORNEAL TOPOGRAPHY, UNILATERAL OR BILATERAL, WITH INTERPRETATION AND REPORT
XOHANA	Q3 2025	Outpatient Hosp	92132	CPT	SCANNING COMPUTERIZED OPHTHALMIC DIAGNOSTIC IMAGING, ANTERIOR SEGMENT, WITH INTERPRETATION AND REPORT, UNILATERAL OR BILATERAL
XOHANA	Q3 2025	Outpatient Hosp	92136	CPT	OPHTHALMIC BIOMETRY BY PARTIAL COHERENCE INTERFEROMETRY WITH INTRAOCULAR LENS POWER CALCULATION
XOHANA	Q3 2025	Outpatient Hosp	92201	CPT	OPHTHALMOSCOPY, EXTENDED; WITH RETINAL DRAWING AND SCLERAL DEPRESSION OF PERIPHERAL RETINAL DISEASE (EG, FOR RETINAL TEAR, RETINAL DETACHMENT, RETINAL TUMO
XOHANA	Q3 2025	Outpatient Hosp	92202	CPT	OPHTHALMOSCOPY, EXTENDED; WITH DRAWING OF OPTIC NERVE OR MACULA (EG, FOR GLAUCOMA, MACULAR PATHOLOGY, TUMOR) WITH INTERPRETATION AND REPORT, UNILATERA
XOHANA	Q3 2025	Outpatient Hosp	92235	CPT	FLUORESCEIN ANGIOGRAPHY (INCLUDES MULTIFRAME IMAGING) WITH INTERPRETATION AND REPORT
XOHANA	Q3 2025	Outpatient Hosp	92250	CPT	FUNDUS PHOTOGRAPHY WITH INTERPRETATION AND REPORT
XOHANA	Q3 2025	Outpatient Hosp	92285	CPT	EXTERNAL OCULAR PHOTOGRAPHY WITH INTERPRETATION AND REPORT FOR DOCUMENTATION OF MEDICAL PROGRESS (EG, CLOSE-UP PHOTOGRAPHY
XOHANA	Q3 2025	Outpatient Hosp	92511	CPT	NASOPHARYNGOSCOPY WITH ENDOSCOPE (SEPARATE PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp	92540	CPT	BASIC VESTIBULAR EVALUATION, INCLUDES SPONTANEOUS NYSTAGMUS TEST WITH ECCENTRIC GAZE FIXATION NYSTAGMUS, WITH RECORDING, POSITIONA
XOHANA	Q3 2025	Outpatient Hosp	92541	CPT	SPONTANEOUS NYSTAGMUS TEST, INCLUDING GAZE AND FIXATION NYSTAGMUS, WITH RECORDING
XOHANA	Q3 2025	Outpatient Hosp	92542	CPT	POSITIONAL NYSTAGMUS TEST, MINIMUM OF 4 POSITIONS, WITH RECORDING
XOHANA	Q3 2025	Outpatient Hosp	92544	CPT	OPTOKINETIC NYSTAGMUS TEST, BIDIRECTIONAL, FOVEAL OR PERIPHERAL STIMULATION, WITH RECORDING
XOHANA	Q3 2025	Outpatient Hosp	92545	CPT	OSCILLATING TRACKING TEST, WITH RECORDING
XOHANA	Q3 2025	Outpatient Hosp	92546	CPT	SINUSOIDAL VERTICAL AXIS ROTATIONAL TESTING
XOHANA	Q3 2025	Outpatient Hosp	92550	CPT	TYMPANOMETRY AND REFLEX THRESHOLD MEASUREMENTS
XOHANA	Q3 2025	Outpatient Hosp	92613	CPT	FLEXIBLE FIBEROPTIC ENDOSCOPIC EVALUATION OF SWALLOWING BY CINE OR VIDEO RECORDING; PHYSICIAN INTERPRETATION AND REPORT ON
XOHANA	Q3 2025	Outpatient Hosp	92616	CPT	FLEXIBLE FIBEROPTIC ENDOSCOPIC EVALUATION OF SWALLOWING AND LARYNGEAL SENSORY TESTING BY CINE OR VIDEO RECORDING;
XOHANA	Q3 2025	Outpatient Hosp	92617	CPT	FLEXIBLE FIBEROPTIC ENDOSCOPIC EVALUATION OF SWALLOWING AND LARYNGEAL SENSORY TESTING BY CINE OR VIDEO RECORDING; PHYSICIA
XOHANA	Q3 2025	Outpatient Hosp	92920	CPT	PERCUTANEOUS TRANSLUMINAL CORONARY ANGIOPLASTY; SINGLE MAJOR CORONARY ARTERY OR BRANCH
XOHANA	Q3 2025	Outpatient Hosp	92924	CPT	PERCUTANEOUS TRANSLUMINAL CORONARY ATHERECTOMY, WITH CORONARY ANGIOPLASTY WHEN PERFORMED; SINGLE MAJOR CORONARY ARTERY OR BRANCH
XOHANA	Q3 2025	Outpatient Hosp	92928	CPT	PERCUTANEOUS TRANSCATHETER PLACEMENT OF INTRACORONARY STENT(S), WITH CORONARY ANGIOPLASTY WHEN PERFORMED; SINGLE MAJOR CORONARY AR
XOHANA	Q3 2025	Outpatient Hosp	92929	CPT	PERCUTANEOUS TRANSCATHETER PLACEMENT OF INTRACORONARY STENT(S), WITH CORONARY ANGIOPLASTY WHEN PERFORMED; EACH ADDITIONAL BRANCH O

XOHANA	Q3 2025	Outpatient Hosp	92933	CPT	PERCUTANEOUS TRANSLUMINAL CORONARY ATHERECTOMY, WITH INTRACORONARY STENT, WITH CORONARY ANGIOPLASTY WHEN PERFORMED; SINGLE MAJOR C
XOHANA	Q3 2025	Outpatient Hosp	92937	CPT	PERCUTANEOUS TRANSLUMINAL REVASCULARIZATION OF OR THROUGH CORONARY ARTERY BYPASS GRAFT (INTERNAL MAMMARY, FREE ARTERIAL, VENOUS),
XOHANA	Q3 2025	Outpatient Hosp	92941	CPT	PERCUTANEOUS TRANSLUMINAL REVASCULARIZATION OF ACUTE TOTAL/SUBTOTAL OCCLUSION DURING ACUTE MYOCARDIAL INFARCTION, CORONARY ARTERY
XOHANA	Q3 2025	Outpatient Hosp	92943	CPT	PERCUTANEOUS TRANSLUMINAL REVASCULARIZATION OF CHRONIC TOTAL OCCLUSION, CORONARY ARTERY, CORONARY ARTERY BRANCH, OR CORONARY ARTER
XOHANA	Q3 2025	Outpatient Hosp	92960	CPT	CARDIOVERSION, ELECTIVE, ELECTRICAL CONVERSION OF ARRHYTHMIA; EXTERNAL
XOHANA	Q3 2025	Outpatient Hosp	92987	CPT	PERCUTANEOUS BALLOON VALVULOPLASTY; MITRAL VALVE
XOHANA	Q3 2025	Outpatient Hosp	93016	CPT	CARDIOVASCULAR STRESS TEST USING MAXIMAL OR SUBMAXIMAL TREADMILL OR BICYCLE EXERCISE, CONTINUOUS ELECTROCARDIOGRAPHIC MONI
XOHANA	Q3 2025	Outpatient Hosp	93017	CPT	CARDIOVASCULAR STRESS TEST USING MAXIMAL OR SUBMAXIMAL TREADMILL OR BICYCLE EXERCISE, CONTINUOUS ELECTROCARDIOGRAPHIC MONI
XOHANA	Q3 2025	Outpatient Hosp	93018	CPT	CARDIOVASCULAR STRESS TEST USING MAXIMAL OR SUBMAXIMAL TREADMILL OR BICYCLE EXERCISE, CONTINUOUS ELECTROCARDIOGRAPHIC MONI
XOHANA	Q3 2025	Outpatient Hosp	93245	CPT	EXTERNAL ELECTROCARDIOGRAPHIC RECORDING FOR MORE THAN 7 DAYS UP TO 15 DAYS BY CONTINUOUS RHYTHM RECORDING AND STORAGE; INCLUDES RECORDING, SCANNING A
XOHANA	Q3 2025	Outpatient Hosp	93246	CPT	EXTERNAL ELECTROCARDIOGRAPHIC RECORDING FOR MORE THAN 7 DAYS UP TO 15 DAYS BY CONTINUOUS RHYTHM RECORDING AND STORAGE; RECORDING (INCLUDES CONNECTIO
XOHANA	Q3 2025	Outpatient Hosp	93247	CPT	EXTERNAL ELECTROCARDIOGRAPHIC RECORDING FOR MORE THAN 7 DAYS UP TO 15 DAYS BY CONTINUOUS RHYTHM RECORDING AND STORAGE; SCANNING ANALYSIS WITH REPORT
XOHANA	Q3 2025	Outpatient Hosp	93248	CPT	EXTERNAL ELECTROCARDIOGRAPHIC RECORDING FOR MORE THAN 7 DAYS UP TO 15 DAYS BY CONTINUOUS RHYTHM RECORDING AND STORAGE; REVIEW AND INTERPRETATION
XOHANA	Q3 2025	Outpatient Hosp	93303	CPT	TRANSTHORACIC ECHOCARDIOGRAPHY FOR CONGENITAL CARDIAC ANOMALIES; COMPLETE
XOHANA	Q3 2025	Outpatient Hosp	93304	CPT	TRANSTHORACIC ECHOCARDIOGRAPHY FOR CONGENITAL CARDIAC ANOMALIES; FOLLOW-UP OR LIMITED STUDY
XOHANA	Q3 2025	Outpatient Hosp	93307	CPT	ECHOCARDIOGRAPHY, TRANSTHORACIC, REAL-TIME WITH IMAGE DOCUMENTATION (2D) INCLUDES M-MODE RECORDING; WHEN PERFORMED, COMPLETE, W/O
XOHANA	Q3 2025	Outpatient Hosp	93308	CPT	ECHOCARDIOGRAPHY, TRANSTHORACIC, REAL-TIME WITH IMAGE DOCUMENTATION (2D) WITH OR WITHOUT M-MODE RECORDING; FOLLOW-UP OR LI
XOHANA	Q3 2025	Outpatient Hosp	93313	CPT	ECHOCARDIOGRAPHY, TRANSESOPHAGEAL, REAL TIME WITH IMAGE DOCUMENTATION (2D) (WITH OR WITHOUT M-MODE RECORDING); PLACEMENT O
XOHANA	Q3 2025	Outpatient Hosp	93320	CPT	DOPPLER ECHOCARDIOGRAPHY, PULSED WAVE AND/OR CONTINUOUS WAVE WITH SPECTRAL DISPLAY (LIST SEPARATELY IN ADDITION TO CODES F
XOHANA	Q3 2025	Outpatient Hosp	93321	CPT	DOPPLER ECHOCARDIOGRAPHY, PULSED WAVE AND/OR CONTINUOUS WAVE WITH SPECTRAL DISPLAY (LIST SEPARATELY IN ADDITION TO CODES F
XOHANA	Q3 2025	Outpatient Hosp	93350	CPT	ECHOCARDIOGRAPHY, TRANSTHORACIC, REAL-TIME WITH IMAGE DOCUMENTATION (2D), WITH OR WITHOUT M-MODE RECORDING, DURING REST AN
XOHANA	Q3 2025	Outpatient Hosp	93451	CPT	RIGHT HEART CATHETERIZATION INCLUDING MEASUREMENT(S) OF OXYGEN SATURATION AND CARDIAC OUTPUT, WHEN PERFORMED
XOHANA	Q3 2025	Outpatient Hosp	93452	CPT	LEFT HEART CATHETERIZATION INCLUDING INTRAPROCEDURAL INJECTION(S) FOR LEFT VENTRICULOGRAPHY, IMAGING SUPERVISION AND INTERPRETATIO
XOHANA	Q3 2025	Outpatient Hosp	93453	CPT	COMBINED RIGHT AND LEFT HEART CATHETERIZATION INCLUDING INTRAPROCEDURAL INJECTION(S) FOR LEFT VENTRICULOGRAPHY, IMAGING SUPERVISIO
XOHANA	Q3 2025	Outpatient Hosp	93454	CPT	CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY
XOHANA	Q3 2025	Outpatient Hosp	93455	CPT	CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY
XOHANA	Q3 2025	Outpatient Hosp	93456	CPT	CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY
XOHANA	Q3 2025	Outpatient Hosp	93457	CPT	CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY
XOHANA	Q3 2025	Outpatient Hosp	93458	CPT	CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY
XOHANA	Q3 2025	Outpatient Hosp	93459	CPT	CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY
XOHANA	Q3 2025	Outpatient Hosp	93461	CPT	CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY
XOHANA	Q3 2025	Outpatient Hosp	93567	CPT	INJECTION PROCEDURE DURING CARDIAC CATHETERIZATION INCLUDING IMAGING SUPERVISION, INTERPRETATION, AND REPORT; FOR SUPRAVALVULAR AO
XOHANA	Q3 2025	Outpatient Hosp	93580	CPT	PERCUTANEOUS TRANSCATHETER CLOSURE OF CONGENITAL INTERATRIAL COMMUNICATION (IE, FONTAN FENESTRATION, ATRIAL SEPTAL DEFECT)
XOHANA	Q3 2025	Outpatient Hosp	93583	CPT	PERCUTANEOUS TRANSCATHETER SEPTAL REDUCTION THERAPY (EG, ALCOHOL SEPTAL ABLATION) INCLUDING TEMPORARY PACEMAKER INSERTION WHEN PER
XOHANA	Q3 2025	Outpatient Hosp	93609	CPT	INTRAVENTRICULAR AND/OR INTRA-ATRIAL MAPPING OF TACHYCARDIA SITE(S) WITH CATHETER MANIPULATION TO RECORD FROM MULTIPLE SIT
XOHANA	Q3 2025	Outpatient Hosp	93613	CPT	INTRACARDIAC ELECTROPHYSIOLOGIC 3-DIMENSIONAL MAPPING (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
XOHANA	Q3 2025	Outpatient Hosp	93619	CPT	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION WITH RIGHT ATRIAL PACING AND RECORDING, RIGHT VENTRICULAR PACING AND RECORDING
XOHANA	Q3 2025	Outpatient Hosp	93620	CPT	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION INCLUDING INSERTION AND REPOSITIONING OF MULTIPLE ELECTRODE CATHETERS WITH IND
XOHANA	Q3 2025	Outpatient Hosp	93621	CPT	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION INCLUDING INSERTION AND REPOSITIONING OF MULTIPLE ELECTRODE CATHETERS WITH IND
XOHANA	Q3 2025	Outpatient Hosp	93622	CPT	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION INCLUDING INSERTION AND REPOSITIONING OF MULTIPLE ELECTRODE CATHETERS WITH IND
XOHANA	Q3 2025	Outpatient Hosp	93623	CPT	PROGRAMMED STIMULATION AND PACING AFTER INTRAVENOUS DRUG INFUSION (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDU
XOHANA	Q3 2025	Outpatient Hosp	93631	CPT	INTRA-OPERATIVE EPICARDIAL AND ENDOCARDIAL PACING AND MAPPING TO LOCALIZE THE SITE OF TACHYCARDIA OR ZONE OF SLOW CONDUCTI
XOHANA	Q3 2025	Outpatient Hosp	93640	CPT	ELECTROPHYSIOLOGIC EVALUATION OF SINGLE OR DUAL CHAMBER PACING CARDIOVERTER-DEFIBRILLATOR LEADS INCLUDING DEFIBRILLATION T
XOHANA	Q3 2025	Outpatient Hosp	93650	CPT	INTRACARDIAC CATHETER ABLATION OF ATRIOVENTRICULAR NODE FUNCTION, ATRIOVENTRICULAR CONDUCTION FOR CREATION OF COMPLETE HEA
XOHANA	Q3 2025	Outpatient Hosp	93653	CPT	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION INCLUDING INSERTION AND REPOSITIONING OF MULTIPLE ELECTRODE CATHETERS WITH INDUCTION O
XOHANA	Q3 2025	Outpatient Hosp	93654	CPT	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION INCLUDING INSERTION AND REPOSITIONING OF MULTIPLE ELECTRODE CATHETERS WITH INDUCTION O
XOHANA	Q3 2025	Outpatient Hosp	93655	CPT	INTRACARDIAC CATHETER ABLATION OF A DISCRETE MECHANISM OF ARRHYTHMIA WHICH IS DISTINCT FROM THE PRIMARY ABLATED MECHANISM, INCLUDI
XOHANA	Q3 2025	Outpatient Hosp	93656	CPT	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION INCLUDING TRANSSEPTAL CATHETERIZATIONS, INSERTION AND REPOSITIONING OF MULTIPLE ELECTR
XOHANA	Q3 2025	Outpatient Hosp	93657	CPT	ADDITIONAL LINEAR OR FOCAL INTRACARDIAC CATHETER ABLATION OF THE LEFT OR RIGHT ATRIUM FOR TREATMENT OF ATRIAL FIBRILLATION REMAINI
XOHANA	Q3 2025	Outpatient Hosp	93660	CPT	EVALUATION OF CARDIOVASCULAR FUNCTION WITH TILT TABLE EVALUATION, WITH CONTINUOUS ECG MONITORING AND INTERMITTENT BLOOD PR
XOHANA	Q3 2025	Outpatient Hosp	93662	CPT	INTRACARDIAC ECHOCARDIOGRAPHY DURING THERAPEUTIC/DIAGNOSTIC INTERVENTION, INCLUDING IMAGING SUPERVISION AND INTERPRETATION
XOHANA	Q3 2025	Outpatient Hosp	93797	CPT	PHYSICIAN SERVICES FOR OUTPATIENT CARDIAC REHABILITATION; WITHOUT CONTINUOUS ECG MONITORING (PER SESSION)
XOHANA	Q3 2025	Outpatient Hosp	93799	CPT	UNLISTED CARDIOVASCULAR SERVICE OR PROCEDURE
XOHANA	Q3 2025	Outpatient Hosp	93922	CPT	NONINVASIVE PHYSIOLOGIC STUDIES OF UPPER OR LOWER EXTREMITY ARTERIES, SINGLE LEVEL, BILATERAL (EG, ANKLE/BRACHIAL INDICES,
XOHANA	Q3 2025	Outpatient Hosp	93924	CPT	NONINVASIVE PHYSIOLOGIC STUDIES OF LOWER EXTREMITY ARTERIES, AT REST AND FOLLOWING TREADMILL STRESS TESTING, COMPLETE BILA
XOHANA	Q3 2025	Outpatient Hosp	93925	CPT	DUPLEX SCAN OF LOWER EXTREMITY ARTERIES OR ARTERIAL BYPASS GRAFTS; COMPLETE BILATERAL STUDY
XOHANA	Q3 2025	Outpatient Hosp	93970	CPT	DUPLEX SCAN OF EXTREMITY VEINS INCLUDING RESPONSES TO COMPRESSION AND OTHER MANEUVERS; COMPLETE BILATERAL STUDY
XOHANA	Q3 2025	Outpatient Hosp	93975	CPT	DUPLEX SCAN OF ARTERIAL INFLOW AND VENOUS OUTFLOW OF ABDOMINAL, PELVIC, SCROTAL CONTENTS AND/OR RETROPERITONEAL ORGANS; CO
XOHANA	Q3 2025	Outpatient Hosp	93978	CPT	DUPLEX SCAN OF AORTA, INFERIOR VENA CAVA, ILIAC VASCULATURE, OR BYPASS GRAFTS; COMPLETE STUDY
XOHANA	Q3 2025	Outpatient Hosp	94680	CPT	OXYGEN UPTAKE, EXPIRED GAS ANALYSIS; REST AND EXERCISE, DIRECT, SIMPLE
XOHANA	Q3 2025	Outpatient Hosp	94761	CPT	NONINVASIVE EAR OR PULSE OXIMETRY FOR OXYGEN SATURATION; MULTIPLE DETERMINATIONS (EG, DURING EXERCISE)
XOHANA	Q3 2025	Outpatient Hosp	95718	CPT	ELECTROENCEPHALOGRAM (EEG), CONTINUOUS RECORDING, PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL REVIEW OF RECORDED EVENTS, ANALYSIS OF SPIKE AND
XOHANA	Q3 2025	Outpatient Hosp	95719	CPT	ELECTROENCEPHALOGRAM (EEG), CONTINUOUS RECORDING, PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL REVIEW OF RECORDED EVENTS, ANALYSIS OF SPIKE AND
XOHANA	Q3 2025	Outpatient Hosp	95801	CPT	SLEEP STUDY, UNATTENDED, SIMULTANEOUS RECORDING; MINIMUM OF HEART RATE, OXYGEN SATURATION, AND RESPIRATORY ANALYSIS (EG, BY AIRFLO
XOHANA	Q3 2025	Outpatient Hosp	96001	CPT	COMPREHENSIVE COMPUTER-BASED MOTION ANALYSIS BY VIDEO-TAPING AND 3-D KINEMATICS; WITH DYNAMIC PLANTAR PRESSURE MEASUREMENT
XOHANA	Q3 2025	Outpatient Hosp	96002	CPT	DYNAMIC SURFACE ELECTROMYOGRAPHY, DURING WALKING OR OTHER FUNCTIONAL ACTIVITIES, 1-12 MUSCLES
XOHANA	Q3 2025	Outpatient Hosp	96004	CPT	PHYSICIAN REVIEW AND INTERPRETATION OF COMPREHENSIVE COMPUTER-BASED MOTION ANALYSIS, DYNAMIC PLANTAR PRESSURE MEASUREMENTS
XOHANA	Q3 2025	Outpatient Hosp	96360	CPT	IV INFUSION HYDRATION INITIAL 31 MIN-1 HOUR INTRAVENOUS INFUSION, HYDRATION; INITIAL, 31 MINUTES TO 1 HOUR
XOHANA	Q3 2025	Outpatient Hosp	96361	CPT	IV INFUSION HYDRATION EACH ADDITIONAL HOUR INTRAVENOUS INFUSION, HYDRATION; EACH ADDITIONAL HOUR (LIST SEPARATELY IN ADDITION
XOHANA	Q3 2025	Outpatient Hosp	96365	CPT	IV INFUSION THERAPY/PROPHYLAXIS /DX 1ST >1 HOUR INTRAVENOUS INFUSION, FOR THERAPY, PROPHYLAXIS, OR DIAGNOSIS (SPECIFY SUBSTANCE OR
XOHANA	Q3 2025	Outpatient Hosp	96366	CPT	IV INFUSION THERAPY PROPHYLAXIS/DX EA HOUR INTRAVENOUS INFUSION, FOR THERAPY, PROPHYLAXIS, OR DIAGNOSIS (SPECIFY SUBSTANCE OR
XOHANA	Q3 2025	Outpatient Hosp	96368	CPT	IV NFS THERAPY PROPHYLAXIS/DX CONCURRENT NFS INTRAVENOUS INFUSION, FOR THERAPY, PROPHYLAXIS, OR DIAGNOSIS (SPECIFY SUBSTANCE OR
XOHANA	Q3 2025	Outpatient Hosp	96372	CPT	THERAPEUTIC, PROPHYLACTIC OR DIAGNOSTIC INJECTION (SPECIFY SUBSTANCE OR DRUG); SUBCUTANEOUS OR INTRAMUSCULAR
XOHANA	Q3 2025	Outpatient Hosp	96374	CPT	THER PROPH/DX NJX IV PUSH SINGLE/1ST SBST/DRUG THERAPEUTIC, PROPHYLACTIC, OR DIAGNOSTIC INJECTION (SPECIFY SUBSTANCE OR DRUG); IN
XOHANA	Q3 2025	Outpatient Hosp	96376	CPT	THERAPEUTIC, PROPHYLACTIC, OR DIAGNOSTIC INJECTION (SPECIFY SUBSTANCE OR DRUG); EACH ADDITIONAL SEQUENTIAL INTRAVENOUS PUSH OF THE
XOHANA	Q3 2025	Outpatient Hosp	96377	CPT	APPLICATION OF ON-BODY INJECTOR (INCLUDES CANNULA INSERTION) FOR TIMED SUBCUTANEOUS INJECTION
XOHANA	Q3 2025	Outpatient Hosp	96379	CPT	UNLISTED THERAPEUTIC, PROPHYLACTIC, OR DIAGNOSTIC INTRAVENOUS OR INTRA-ARTERIAL INJECTION OR INFUSION
XOHANA	Q3 2025	Outpatient Hosp	96401	CPT	CHEMOTHERAPY ADMINISTRATION, SUBCUTANEOUS OR INTRAMUSCULAR; NON-HORMONAL ANTI-NEOPLASTIC
XOHANA	Q3 2025	Outpatient Hosp	96402	CPT	CHEMOTHERAPY ADMINISTRATION, SUBCUTANEOUS OR INTRAMUSCULAR; HORMONAL ANTI-NEOPLASTIC
XOHANA	Q3 2025	Outpatient Hosp	96411	CPT	CHEMOTHERAPY ADMINISTRATION; INTRAVENOUS, PUSH TECHNIQUE, EACH ADDITIONAL SUBSTANCE/DRUG (LIST SEPARATELY IN ADDITION TO C
XOHANA	Q3 2025	Outpatient Hosp	96450	CPT	CHEMOTHERAPY ADMINISTRATION, INTO CNS (EG, INTRATHECAL), REQUIRING AND INCLUDING SPINAL PUNCTURE
XOHANA	Q3 2025	Outpatient Hosp	96523	CPT	IRRIGATION OF IMPLANTED VENOUS ACCESS DEVICE FOR DRUG DELIVERY SYSTEMS
XOHANA	Q3 2025	Outpatient Hosp	96567	CPT	PHOTODYNAMIC THERAPY BY EXTERNAL APPLICATION OF LIGHT TO DESTROY PREMALIGNANT LESIONS OF THE SKIN AND ADJACENT MUCOSA WITH APPLICATION AND ILLUMINATION/AC
XOHANA	Q3 2025	Outpatient Hosp	97297	CPT	Missing
XOHANA	Q3 2025	Outpatient Hosp	97502	CPT	Missing
XOHANA	Q3 2025	Outpatient Hosp	97596	CPT	Missing
XOHANA	Q3 2025	Outpatient Hosp	97603	CPT	Missing
XOHANA	Q3 2025	Outpatient Hosp	97605	CPT	NEGATIVE PRESSURE WOUND THERAPY (EG, VACUUM ASSISTED DRAINAGE COLLECTION), UTILIZING DURABLE MEDICAL EQUIPMENT (DME), INCLUDING TOPICAL APPLICATION(S), WOU
XOHANA	Q3 2025	Outpatient Hosp	97606	CPT	NEGATIVE PRESSURE WOUND THERAPY (EG, VACUUM ASSISTED DRAINAGE COLLECTION), UTILIZING DURABLE MEDICAL EQUIPMENT (DME), INCLUDING TOPICAL APPLICATION(S), WOU
XOHANA	Q3 2025	Outpatient Hosp	97608	CPT	NEGATIVE PRESSURE WOUND THERAPY, (EG, VACUUM ASSISTED DRAINAGE COLLECTION), UTILIZING DISPOSABLE, NON-DURABLE MEDICAL EQUIPMENT INCLUDING PROVISION OF EXU
XOHANA	Q3 2025	Outpatient Hosp	99091	CPT	COLLECTION AND INTERPRETATION OF PHYSIOLOGIC DATA (EG, ECG, BLOOD PRESSURE, GLUCOSE MONITORING) DIGITALLY STORED AND/OR TRANSMITTED BY THE PATIENT AND/OR C
XOHANA	Q3 2025	Outpatient Hosp	99155	CPT	MODERATE SEDATION SERVICES PROVIDED BY A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL OTHER THAN THE PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PRO
XOHANA	Q3 2025	Outpatient Hosp	99157	CPT	MODERATE SEDATION SERVICES PROVIDED BY A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL OTHER THAN THE PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PRO
XOHANA	Q3 2025	Outpatient Hosp	99217	CPT	OBSERVATION CARE DISCHARGE DAY MANAGEMENT (THIS CODE IS TO BE UTILIZED TO REPORT ALL SERVICES PROVIDED TO A PATIENT ON DISCHARGE FROM OUTPATIENT HOSPITAL "OB
XOHANA	Q3 2025	Outpatient Hosp	99306	CPT	INITIAL NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES THESE 3 KEY COMPONE
XOHANA	Q3 2025	Outpatient Hosp	99308	CPT	SUBSEQUENT NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES AT LEAST 2 OF TH
XOHANA	Q3 2025	Outpatient Hosp	A4648	HCPCS	TISSUE MARKER, IMPLANTABLE, ANY TYPE, EACH
XOHANA	Q3 2025	Outpatient Hosp	A9573	HCPCS	INJECTION GADOPICLENOL 1 ML

XOHANA	Q3 2025	Outpatient Hosp	A9697	HCPCS	INJECTION CARBOXYDEXTRAN-CTD SPM IO PER ST D
XOHANA	Q3 2025	Outpatient Hosp	C1715	HCPCS	BRACHYTHERAPY NEEDLE
XOHANA	Q3 2025	Outpatient Hosp	C1767	HCPCS	GENERATOR, NEUROSTIMULATOR (IMPLANTABLE), NONRECHARGEABLE
XOHANA	Q3 2025	Outpatient Hosp	C1778	HCPCS	LEAD, NEUROSTIMULATOR (IMPLANTABLE)
XOHANA	Q3 2025	Outpatient Hosp	C1787	HCPCS	PATIENT PROGRAMMER, NEUROSTIMULATOR
XOHANA	Q3 2025	Outpatient Hosp	C2624	HCPCS	IMPLANTABLE WIRELESS PULMONARY ARTERY PRESSURE SENSOR WITH DELIVERY CATHETER, INCLUDING ALL SYSTEM COMPONENTS
XOHANA	Q3 2025	Outpatient Hosp	C8923	HCPCS	TRANSTHORACIC ECHOCARDIOGRAPHY WITH CONTRAST, REAL-TIME WITH IMAGE DOCUMENTATION (2D) WITH OR WITHOUT M-MODE RECORDING; COMPLETE
XOHANA	Q3 2025	Outpatient Hosp	C8924	HCPCS	TRANSTHORACIC ECHOCARDIOGRAPHY WITH CONTRAST, REAL-TIME WITH IMAGE DOCUMENTATION (2D) WITH OR WITHOUT M-MODE RECORDING; FOLLOW-UP
XOHANA	Q3 2025	Outpatient Hosp	C8929	HCPCS	TRANSTHORACIC ECHOCARDIOGRAPHY WITH CONTRAST, REAL TIME WITH IMAGE DOCUMENTATION (2D), WITH OR WITHOUT M-MODE RECORDING, DURING RE
XOHANA	Q3 2025	Outpatient Hosp	C8930	HCPCS	TRANSTHORACIC ECHOCARDIOGRAPHY, WITH CONTRAST, OR WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST, REAL-TIME WITH IMAGE DOCUMENTATION (
XOHANA	Q3 2025	Outpatient Hosp	C9789	HCPCS	INSTILL ANTINEOPLAST PHARM/BIOL AGT RP ANY METH
XOHANA	Q3 2025	Outpatient Hosp	C9791	HCPCS	MRI WITH INHALED HPX CONTRAST AGENT CHEST
XOHANA	Q3 2025	Outpatient Hosp	C9792	HCPCS	BLIND/NONBLND PROC SYM NYHA CLASS II III IVA HF
XOHANA	Q3 2025	Outpatient Hosp	D7210	HCPCS	SURGICAL REMOVAL OF ERUPTED TOOTH REQUIRING ELEVATION OF MUCOPERIOSTEAL FLAP AND REMOVAL OF BONE AND/OR SECTION OF TOOTH
XOHANA	Q3 2025	Outpatient Hosp	G0121	HCPCS	COLORECTAL CANCER SCREENING; COLONOSCOPY ON INDIVIDUAL NOT MEETING CRITERIA FOR HIGH RISK
XOHANA	Q3 2025	Outpatient Hosp	G0277	HCPCS	HYPERBARIC OXYGEN UNDER PRESSURE, FULL BODY CHAMBER, PER 30 MINUTE INTERVAL
XOHANA	Q3 2025	Outpatient Hosp	G0491	HCPCS	DIALYSIS PROCEDURE AT A MEDICARE CERTIFIED ESRD FACILITY FOR ACUTE KIDNEY INJURY WITHOUT ESRD
XOHANA	Q3 2025	Outpatient Hosp	G0530	HCPCS	ADULT DAY CENTER 8-HOUR UNIT
XOHANA	Q3 2025	Outpatient Hosp	H0011	HCPCS	ALCOHOL AND/OR DRUG SERVICES; ACUTE DETOXIFICATION (RESIDENTIAL ADDICTION PROGRAM INPATIENT)
XOHANA	Q3 2025	Outpatient Hosp	H0015	HCPCS	ALCOHOL AND/OR DRUG SERVICES; INTENSIVE OUTPATIENT (TREATMENT PROGRAM THAT OPERATES AT LEAST 3 HOURS/DAY AND AT LEAST 3 DAYS/WEEK
XOHANA	Q3 2025	Outpatient Hosp	H2012	HCPCS	BEHAVIORAL HEALTH DAY TREATMENT, PER HOUR
XOHANA	Q3 2025	Outpatient Hosp	H2015	HCPCS	COMPREHENSIVE COMMUNITY SUPPORT SERVICES, PER 15 MINUTES
XOHANA	Q3 2025	Outpatient Hosp	J0171	HCPCS	INJECTION, ADRENALIN, EPINEPHRINE, 0.1 MG
XOHANA	Q3 2025	Outpatient Hosp	J0174	HCPCS	INJECTION, LECANEMAB-IRMB, 1 MG
XOHANA	Q3 2025	Outpatient Hosp	J0585	HCPCS	BOTULINUM TOXIN TYPE A, PER UNIT
XOHANA	Q3 2025	Outpatient Hosp	J0604	HCPCS	CINACALCET, ORAL, 1 MG, (FOR ESRD ON DIALYSIS)
XOHANA	Q3 2025	Outpatient Hosp	J0606	HCPCS	INJECTION, ETELCALCETIDE, 0.1 MG
XOHANA	Q3 2025	Outpatient Hosp	J0702	HCPCS	INJECTION, BETAMETHASONE ACETATE 3 MG AND BETAMETHASONE SODIUM PHOSPHATE 3 MG
XOHANA	Q3 2025	Outpatient Hosp	J0801	HCPCS	INJECTION CORTICOTROPIN ACTHAR GEL UP TO 40 U
XOHANA	Q3 2025	Outpatient Hosp	J0802	HCPCS	INJECTION CORTICOTROPIN ANI UP TO 40 UNITS
XOHANA	Q3 2025	Outpatient Hosp	J0878	HCPCS	INJECTION, DAPTOMYCIN, 1 MG
XOHANA	Q3 2025	Outpatient Hosp	J0889	HCPCS	DAPRODUSTAT ORAL 1 MG FOR ESRD ON DIALYSIS
XOHANA	Q3 2025	Outpatient Hosp	J1335	HCPCS	INJECTION, ERTAPENEM SODIUM, 500 MG
XOHANA	Q3 2025	Outpatient Hosp	J1439	HCPCS	INJECTION, FERRIC CARBOXYMALTOSE, 1MG
XOHANA	Q3 2025	Outpatient Hosp	J1642	HCPCS	INJECTION, HEPARIN SODIUM, (HEPARIN LOCK FLUSH), PER 10 UNITS
XOHANA	Q3 2025	Outpatient Hosp	J1720	HCPCS	INJECTION, HYDROCORTISONE SODIUM SUCCINATE, UP TO 100 MG
XOHANA	Q3 2025	Outpatient Hosp	J1756	HCPCS	INJECTION, IRON SUCROSE, 1 MG
XOHANA	Q3 2025	Outpatient Hosp	J2060	HCPCS	INJECTION, LORAZEPAM, 2 MG
XOHANA	Q3 2025	Outpatient Hosp	J2405	HCPCS	INJECTION, ONDANSETRON HCL, PER 1 MG
XOHANA	Q3 2025	Outpatient Hosp	J2781	HCPCS	INJECTION PEGCETACOPLAN INTRAVITREAL 1 MG
XOHANA	Q3 2025	Outpatient Hosp	J2787	HCPCS	RIBOFLAVIN 5'-PHOSPHATE OPHTHALMIC SOL TO 3 ML
XOHANA	Q3 2025	Outpatient Hosp	J2916	HCPCS	INJECTION, SODIUM FERRIC GLUCONATE COMPLEX IN SUCROSE INJECTION, 12.5 MG
XOHANA	Q3 2025	Outpatient Hosp	J7040	HCPCS	INFUSION, NORMAL SALINE SOLUTION, STERILE (500 ML = 1 UNIT)
XOHANA	Q3 2025	Outpatient Hosp	J7042	HCPCS	5% DEXTROSE/NORMAL SALINE (500 ML = 1 UNIT)
XOHANA	Q3 2025	Outpatient Hosp	J7050	HCPCS	INFUSION, NORMAL SALINE SOLUTION, 250 CC
XOHANA	Q3 2025	Outpatient Hosp	J7120	HCPCS	RINGER'S LACTATE INFUSION, UP TO 1,000 CC
XOHANA	Q3 2025	Outpatient Hosp	J7214	HCPCS	INJECTION FVIII/VWD FAC CMPLX REC PER FVIII IU
XOHANA	Q3 2025	Outpatient Hosp	J7308	HCPCS	AMINOLEVULINIC ACID HCL FOR TOPICAL ADMINISTRATION, 20%, SINGLE UNIT DOSAGE FORM (354 MG)
XOHANA	Q3 2025	Outpatient Hosp	J7353	HCPCS	ANACAULASE-BCDB 8.8 PERCENTAGE GEL 1 GM
XOHANA	Q3 2025	Outpatient Hosp	J9051	HCPCS	INJECTION BORTEZOMIB NOT TE TO J9041 0.1 MG
XOHANA	Q3 2025	Outpatient Hosp	J9055	HCPCS	INJECTION, CETUXIMAB, 10 MG
XOHANA	Q3 2025	Outpatient Hosp	J9060	HCPCS	CISPLATIN, POWDER OR SOLUTION, PER 10 MG
XOHANA	Q3 2025	Outpatient Hosp	J9064	HCPCS	INJECTION CABAZITAXEL NOT TE TO J9043 1 MG
XOHANA	Q3 2025	Outpatient Hosp	J9301	HCPCS	INJECTION, OBINUTUZUMAB, 10 MG
XOHANA	Q3 2025	Outpatient Hosp	J9345	HCPCS	INJECTION RETIFANLIMAB-DLWR 1 MG
XOHANA	Q3 2025	Outpatient Hosp	L8609	HCPCS	ARTIFICIAL CORNEA
XOHANA	Q3 2025	Outpatient Hosp	L8614	HCPCS	COCHLEAR DEVICE, INCLUDES ALL INTERNAL AND EXTERNAL COMPONENTS
XOHANA	Q3 2025	Outpatient Hosp	L8686	HCPCS	IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR, SINGLE ARRAY, NONRECHARGEABLE, INCLUDES EXTENSION
XOHANA	Q3 2025	Outpatient Hosp	L8699	HCPCS	PROSTHETIC IMPLANT, NOT OTHERWISE SPECIFIED
XOHANA	Q3 2025	Outpatient Hosp	P9011	HCPCS	BLOOD, SPLIT UNIT
XOHANA	Q3 2025	Outpatient Hosp	P9016	HCPCS	RED BLOOD CELLS, LEUKOCYTES REDUCED, EACH UNIT
XOHANA	Q3 2025	Outpatient Hosp	P9020	HCPCS	PLATELET RICH PLASMA, EACH UNIT
XOHANA	Q3 2025	Outpatient Hosp	P9021	HCPCS	RED BLOOD CELLS, EACH UNIT
XOHANA	Q3 2025	Outpatient Hosp	P9037	HCPCS	PLATELETS, PHERESIS, LEUKOCYTES REDUCED, IRRADIATED, EACH UNIT
XOHANA	Q3 2025	Outpatient Hosp	P9040	HCPCS	RED BLOOD CELLS, LEUKOCYTES REDUCED, IRRADIATED, EACH UNIT
XOHANA	Q3 2025	Outpatient Hosp	P9070	HCPCS	PLASMA, POOLED MULTIPLE DONOR, PATHOGEN REDUCED, FROZEN, EACH UNIT
XOHANA	Q3 2025	Outpatient Hosp	Q2050	HCPCS	INJECTION, DOXORUBICIN HYDROCHLORIDE, LIPOSOMAL, NOT OTHERWISE SPECIFIED, 10 MG
XOHANA	Q3 2025	Outpatient Hosp	Q4132	HCPCS	GRAFIX CORE, PER SQ CM
XOHANA	Q3 2025	Outpatient Hosp	Q4133	HCPCS	GRAFIX PRIME, GRAFIXPL PRIME, STRAVIX AND STRAVIXPL, PER SQ CM
XOHANA	Q3 2025	Outpatient Hosp	Q4139	HCPCS	AMNIOMATRIX OR BIODMATRIX, INJECTABLE, 1 CC
XOHANA	Q3 2025	Outpatient Hosp	Q4173	HCPCS	PALINGEN/PALINGEN XPLUS PER
XOHANA	Q3 2025	Outpatient Hosp	Q4196	HCPCS	PURAPLY AM, PER SQ CM
XOHANA	Q3 2025	Outpatient Hosp	Q5103	HCPCS	INJECTION, INFLIXIMAB-DYYB, BIOSIMILAR, (INFLECTRA), 10 MG
XOHANA	Q3 2025	Outpatient Hosp	Q5105	HCPCS	INJECTION EPOETIN ALFA BIOSIMILAR 100 UNITS
XOHANA	Q3 2025	Outpatient Hosp	Q9950	HCPCS	INJECTION, SULFUR HEXAFLUORIDE LIPID MICROSPHERES, PER ML
XOHANA	Q3 2025	Outpatient Hosp	S0028	HCPCS	INJECTION, FAMOTIDINE, 20 MG
XOHANA	Q3 2025	Outpatient Hosp	S9480	HCPCS	INTENSIVE OUTPATIENT PSYCHIATRIC SERVICES, PER DIEM
XOHANA	Q3 2025	Outpatient Hosp	S9990	HCPCS	SERVICES PROVIDED AS PART OF A PHASE II CLINICAL TRIAL
XOHANA	Q3 2025	Outpatient Hosp	V2785	HCPCS	PROCESSING, PRESERVING AND TRANSPORTING CORNEAL TISSUE
XOHANA	Q3 2025	Physician Services	11005	CPT	DEBRIDEMENT OF SKIN, SUBCUTANEOUS TISSUE, MUSCLE AND FASCIA FOR NECROTIZING SOFT TISSUE INFECTION; ABDOMINAL WALL, WITH OR
XOHANA	Q3 2025	Physician Services	11406	CPT	EXCISION, BENIGN LESION INCLUDING MARGINS, EXCEPT SKIN TAG (UNLESS LISTED ELSEWHERE), TRUNK, ARMS OR LEGS; EXCISED DIAMETE
XOHANA	Q3 2025	Physician Services	731	CPT	ANESTHESIA FOR UPPER GASTROINTESTINAL ENDOSCOPIC PROCEDURES, ENDOSCOPE INTRODUCED PROXIMAL TO DUODENUM; NOT OTHERWISE SPECIFIED
XOHANA	Q3 2025	Physician Services	1992	CPT	ANESTHESIA FOR DIAGNOSTIC OR THERAPEUTIC NERVE BLOCKS AND INJECTIONS (WHEN BLOCK OR INJECTION IS PERFORMED BY A DIFFERENT
XOHANA	Q3 2025	Physician Services	0502F	CPT	SUBSEQUENT PRENATAL CARE VISIT (PRENATAL) [EXCLUDES: PATIENTS WHO ARE SEEN FOR A CONDITION UNRELATED TO PREGNANCY OR PREN
XOHANA	Q3 2025	Physician Services	0503F	CPT	POSTPARTUM CARE VISIT (PRENATAL)2
XOHANA	Q3 2025	Physician Services	10120	CPT	INCISION AND REMOVAL OF FOREIGN BODY, SUBCUTANEOUS TISSUES; SIMPLE
XOHANA	Q3 2025	Physician Services	10121	CPT	INCISION AND REMOVAL OF FOREIGN BODY, SUBCUTANEOUS TISSUES; COMPLICATED
XOHANA	Q3 2025	Physician Services	11000	CPT	DEBRIDEMENT OF EXTENSIVE ECZEMATOUS OR INFECTED SKIN; UP TO 10% OF BODY SURFACE
XOHANA	Q3 2025	Physician Services	11001	CPT	DEBRIDEMENT OF EXTENSIVE ECZEMATOUS OR INFECTED SKIN; EACH ADDITIONAL 10% OF THE BODY SURFACE (LIST SEPARATELY IN ADDITION
XOHANA	Q3 2025	Physician Services	11004	CPT	DEBRIDEMENT OF SKIN, SUBCUTANEOUS TISSUE, MUSCLE AND FASCIA FOR NECROTIZING SOFT TISSUE INFECTION; EXTERNAL GENITALIA AND
XOHANA	Q3 2025	Physician Services	11006	CPT	DEBRIDEMENT OF SKIN, SUBCUTANEOUS TISSUE, MUSCLE AND FASCIA FOR NECROTIZING SOFT TISSUE INFECTION; EXTERNAL GENITALIA, PER
XOHANA	Q3 2025	Physician Services	11102	CPT	TANGENTIAL BIOPSY OF SKIN (EG, SHAVE, SCOOP, SAUCERIZE, CURETTE); SINGLE LESION
XOHANA	Q3 2025	Physician Services	11103	CPT	TANGENTIAL BIOPSY OF SKIN (EG, SHAVE, SCOOP, SAUCERIZE, CURETTE); EACH SEPARATE/ADDITIONAL LESION (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
XOHANA	Q3 2025	Physician Services	11300	CPT	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, TRUNK, ARMS OR LEGS; LESION DIAMETER 0.5 CM OR LESS
XOHANA	Q3 2025	Physician Services	11310	CPT	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, FACE, EARS, EYELIDS, NOSE, LIPS, MUCOUS MEMBRANE; LESION DIAMETER 0.
XOHANA	Q3 2025	Physician Services	11640	CPT	EXCISION, MALIGNANT LESION INCLUDING MARGINS, FACE, EARS, EYELIDS, NOSE, LIPS; EXCISED DIAMETER 0.5 CM OR LESS
XOHANA	Q3 2025	Physician Services	11641	CPT	EXCISION, MALIGNANT LESION INCLUDING MARGINS, FACE, EARS, EYELIDS, NOSE, LIPS; EXCISED DIAMETER 0.6 TO 1.0 CM
XOHANA	Q3 2025	Physician Services	11921	CPT	TATTOOING, INTRADERMAL INTRODUCTION OF INSOLUBLE OPAQUE PIGMENTS TO CORRECT COLOR DEFECTS OF SKIN, INCLUDING MICROPIGMENTA

XOHANA	Q3 2025	Physician Services	12020	CPT	TREATMENT OF SUPERFICIAL WOUND DEHISCENCE; SIMPLE CLOSURE
XOHANA	Q3 2025	Physician Services	12021	CPT	TREATMENT OF SUPERFICIAL WOUND DEHISCENCE; WITH PACKING
XOHANA	Q3 2025	Physician Services	12051	CPT	LAYER CLOSURE OF WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR MUCOUS MEMBRANES; 2.5 CM OR LESS
XOHANA	Q3 2025	Physician Services	12052	CPT	LAYER CLOSURE OF WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR MUCOUS MEMBRANES; 2.6 CM TO 5.0 CM
XOHANA	Q3 2025	Physician Services	13152	CPT	REPAIR, COMPLEX, EYELIDS, NOSE, EARS AND/OR LIPS; 2.6 CM TO 7.5 CM
XOHANA	Q3 2025	Physician Services	13153	CPT	REPAIR, COMPLEX, EYELIDS, NOSE, EARS AND/OR LIPS; EACH ADDITIONAL 5 CM OR LESS (LIST SEPARATELY IN ADDITION TO CODE FOR PR
XOHANA	Q3 2025	Physician Services	14001	CPT	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, TRUNK; DEFECT 10.1 SQ CM TO 30.0 SQ CM
XOHANA	Q3 2025	Physician Services	14020	CPT	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, SCALP, ARMS AND/OR LEGS; DEFECT 10 SQ CM OR LESS
XOHANA	Q3 2025	Physician Services	14021	CPT	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, SCALP, ARMS AND/OR LEGS; DEFECT 10.1 SQ CM TO 30.0 SQ CM
XOHANA	Q3 2025	Physician Services	14040	CPT	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, FOREHEAD, CHEEKS, CHIN, MOUTH, NECK, AXILLAE, GENITALIA, HANDS AND/OR FEET; DEF
XOHANA	Q3 2025	Physician Services	14041	CPT	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, FOREHEAD, CHEEKS, CHIN, MOUTH, NECK, AXILLAE, GENITALIA, HANDS AND/OR FEET; DEF
XOHANA	Q3 2025	Physician Services	14060	CPT	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, EYELIDS, NOSE, EARS AND/OR LIPS; DEFECT 10 SQ CM OR LESS
XOHANA	Q3 2025	Physician Services	14061	CPT	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, EYELIDS, NOSE, EARS AND/OR LIPS; DEFECT 10.1 SQ CM TO 30.0 SQ CM
XOHANA	Q3 2025	Physician Services	14301	CPT	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, ANY AREA; DEFECT 30.1 SQ CM TO 60.0 SQ CM
XOHANA	Q3 2025	Physician Services	14302	CPT	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, ANY AREA; EACH ADDITIONAL 30.0 SQ CM, OR PART THEREOF (LIST SEPARATELY IN ADDITION TO C
XOHANA	Q3 2025	Physician Services	15200	CPT	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR SITE, TRUNK; 20 SQ CM OR LESS
XOHANA	Q3 2025	Physician Services	15201	CPT	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR SITE, TRUNK; EACH ADDITIONAL 20 SQ CM (LIST SEPARATELY IN AD
XOHANA	Q3 2025	Physician Services	15220	CPT	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR SITE, SCALP, ARMS, AND/OR LEGS; 20 SQ CM OR LESS
XOHANA	Q3 2025	Physician Services	15221	CPT	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR SITE, SCALP, ARMS, AND/OR LEGS; EACH ADDITIONAL 20 SQ CM (LI
XOHANA	Q3 2025	Physician Services	15241	CPT	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR SITE, FOREHEAD, CHEEKS, CHIN, MOUTH, NECK, AXILLAE, GENITALI
XOHANA	Q3 2025	Physician Services	15260	CPT	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR SITE, NOSE, EARS, EYELIDS, AND/OR LIPS; 20 SQ CM OR LESS
XOHANA	Q3 2025	Physician Services	15271	CPT	APPLICATION OF SKIN SUBSTITUTE GRAFT TO TRUNK, ARMS, LEGS, TOTAL WOUND SURFACE AREA UP TO 100 SQ CM; FIRST 25 SQ CM OR LESS WOUND
XOHANA	Q3 2025	Physician Services	15277	CPT	APPLICATION OF SKIN SUBSTITUTE GRAFT TO FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HANDS, FEET, AND/OR MULTIPLE D
XOHANA	Q3 2025	Physician Services	15278	CPT	APPLICATION OF SKIN SUBSTITUTE GRAFT TO FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HANDS, FEET, AND/OR MULTIPLE D
XOHANA	Q3 2025	Physician Services	15574	CPT	FORMATION OF DIRECT OR TUBED PEDICLE, WITH OR WITHOUT TRANSFER; FOREHEAD, CHEEKS, CHIN, MOUTH, NECK, AXILLAE, GENITALIA, H
XOHANA	Q3 2025	Physician Services	15576	CPT	FORMATION OF DIRECT OR TUBED PEDICLE, WITH OR WITHOUT TRANSFER; EYELIDS, NOSE, EARS, LIPS, OR INTRAORAL
XOHANA	Q3 2025	Physician Services	15620	CPT	DELAY OF FLAP OR SECTIONING OF FLAP (DIVISION AND INSET); AT FOREHEAD, CHEEKS, CHIN, NECK, AXILLAE, GENITALIA, HANDS, OR F
XOHANA	Q3 2025	Physician Services	15630	CPT	DELAY OF FLAP OR SECTIONING OF FLAP (DIVISION AND INSET); AT EYELIDS, NOSE, EARS, OR LIPS
XOHANA	Q3 2025	Physician Services	15731	CPT	FOREHEAD FLAP WITH PRESERVATION OF VASCULAR PEDICLE (EG, AXIAL PATTERN FLAP, PARAMEDIAN FOREHEAD FLAP)
XOHANA	Q3 2025	Physician Services	15740	CPT	FLAP; ISLAND PEDICLE
XOHANA	Q3 2025	Physician Services	15760	CPT	GRAFT; COMPOSITE (EG, FULL THICKNESS OF EXTERNAL EAR OR NASAL ALA), INCLUDING PRIMARY CLOSURE, DONOR AREA
XOHANA	Q3 2025	Physician Services	15823	CPT	BLEPHAROPLASTY, UPPER EYELID; WITH EXCESSIVE SKIN WEIGHTING DOWN LID
XOHANA	Q3 2025	Physician Services	17110	CPT	DESTRUCTION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY, CHEMOSURGERY, SURGICAL CURETTEMENT), OF BENIGN LESIONS OTHER
XOHANA	Q3 2025	Physician Services	17311	CPT	MOHS MICROGRAPHIC TECHNIQUE, INCLUDING REMOVAL OF ALL GROSS TUMOR, SURGICAL EXCISION OF TISSUE SPECIMENS, MAPPING, COLOR C
XOHANA	Q3 2025	Physician Services	17312	CPT	MOHS MICROGRAPHIC TECHNIQUE, INCLUDING REMOVAL OF ALL GROSS TUMOR, SURGICAL EXCISION OF TISSUE SPECIMENS, MAPPING, COLOR C
XOHANA	Q3 2025	Physician Services	17313	CPT	MOHS MICROGRAPHIC TECHNIQUE, INCLUDING REMOVAL OF ALL GROSS TUMOR, SURGICAL EXCISION OF TISSUE SPECIMENS, MAPPING, COLOR C
XOHANA	Q3 2025	Physician Services	17314	CPT	MOHS MICROGRAPHIC TECHNIQUE, INCLUDING REMOVAL OF ALL GROSS TUMOR, SURGICAL EXCISION OF TISSUE SPECIMENS, MAPPING, COLOR C
XOHANA	Q3 2025	Physician Services	20552	CPT	INJECTION(S); SINGLE OR MULTIPLE TRIGGER POINT(S), ONE OR TWO MUSCLE(S)
XOHANA	Q3 2025	Physician Services	20553	CPT	INJECTION(S); SINGLE OR MULTIPLE TRIGGER POINT(S), THREE OR MORE MUSCLE(S)
XOHANA	Q3 2025	Physician Services	20604	CPT	ARTHROCENTESIS, ASPIRATION AND/OR INJECTION, SMALL JOINT OR BURSA (EG, FINGERS, TOES); WITH ULTRASOUND GUIDANCE, WITH PERMANENT RECORDING AND REPORTING
XOHANA	Q3 2025	Physician Services	20606	CPT	ARTHROCENTESIS, ASPIRATION AND/OR INJECTION, INTERMEDIATE JOINT OR BURSA (EG, TEMPOROMANDIBULAR, ACROMIOCLAVICULAR, WRIST, ELBOW OR ANKLE, OLECRANON BURS
XOHANA	Q3 2025	Physician Services	20611	CPT	ARTHROCENTESIS, ASPIRATION AND/OR INJECTION, MAJOR JOINT OR BURSA (EG, SHOULDER, HIP, KNEE, SUBACROMIAL BURSA); WITH ULTRASOUND GUIDANCE, WITH PERMANENT RE
XOHANA	Q3 2025	Physician Services	21012	CPT	EXCISION, TUMOR, SOFT TISSUE OF FACE OR SCALP, SUBCUTANEOUS; 2 CM OR GREATER
XOHANA	Q3 2025	Physician Services	21014	CPT	EXCISION, TUMOR, SOFT TISSUE OF FACE AND SCALP, SUBFASCIAL (EG, SUBGALEAL, INTRAMUSCULAR); 2 CM OR GREATER
XOHANA	Q3 2025	Physician Services	21031	CPT	EXCISION OF TORUS MANDIBULARIS
XOHANA	Q3 2025	Physician Services	21040	CPT	EXCISION OF BENIGN TUMOR OR CYST OF MANDIBLE, BY ENUCLEATION AND/OR CURETTAGE
XOHANA	Q3 2025	Physician Services	21555	CPT	EXCISION TUMOR, SOFT TISSUE OF NECK OR THORAX; SUBCUTANEOUS
XOHANA	Q3 2025	Physician Services	21930	CPT	EXCISION, TUMOR, SOFT TISSUE OF BACK OR FLANK
XOHANA	Q3 2025	Physician Services	22903	CPT	EXCISION, TUMOR, SOFT TISSUE OF ABDOMINAL WALL, SUBCUTANEOUS; 3 CM OR GREATER
XOHANA	Q3 2025	Physician Services	23075	CPT	EXCISION, SOFT TISSUE TUMOR, SHOULDER AREA; SUBCUTANEOUS
XOHANA	Q3 2025	Physician Services	23462	CPT	CAPSULORRHAPHY, ANTERIOR, ANY TYPE; WITH CORACOID PROCESS TRANSFER
XOHANA	Q3 2025	Physician Services	24343	CPT	REPAIR LATERAL COLLATERAL LIGAMENT, ELBOW, WITH LOCAL TISSUE
XOHANA	Q3 2025	Physician Services	25290	CPT	TENOTOMY, OPEN, FLEXOR OR EXTENSOR TENDON, FOREARM AND/OR WRIST, SINGLE, EACH TENDON
XOHANA	Q3 2025	Physician Services	25999	CPT	UNLISTED PROCEDURE, FOREARM OR WRIST
XOHANA	Q3 2025	Physician Services	26350	CPT	REPAIR OR ADVANCEMENT, FLEXOR TENDON, NOT IN ZONE 2 DIGITAL FLEXOR TENDON SHEATH (EG, NO MAN'S LAND); PRIMARY OR SECONDARY
XOHANA	Q3 2025	Physician Services	26356	CPT	REPAIR OR ADVANCEMENT, FLEXOR TENDON, IN ZONE 2 DIGITAL FLEXOR TENDON SHEATH (EG, NO MAN'S LAND); PRIMARY, WITHOUT FREE GR
XOHANA	Q3 2025	Physician Services	26553	CPT	TRANSFER, TOE-TO-HAND WITH MICROVASCULAR ANASTOMOSIS; OTHER THAN GREAT TOE, SINGLE
XOHANA	Q3 2025	Physician Services	26665	CPT	OPEN TREATMENT OF CARPOMETACARPAL FRACTURE DISLOCATION, THUMB (BENNETT FRACTURE), INCLUDES INTERNAL FIXATION, WHEN PERFORM
XOHANA	Q3 2025	Physician Services	27096	CPT	INJECTION PROCEDURE FOR SACROILIAC JOINT, ARTHROGRAPHY AND/OR ANESTHETIC/STEROID
XOHANA	Q3 2025	Physician Services	27626	CPT	ARTHROTOMY, WITH SYNOVECTOMY, ANKLE; INCLUDING TENOSYNOVECTOMY
XOHANA	Q3 2025	Physician Services	27658	CPT	REPAIR, FLEXOR TENDON, LEG; PRIMARY, WITHOUT GRAFT, EACH TENDON
XOHANA	Q3 2025	Physician Services	27664	CPT	REPAIR, EXTENSOR TENDON, LEG; PRIMARY, WITHOUT GRAFT, EACH TENDON
XOHANA	Q3 2025	Physician Services	27695	CPT	REPAIR, PRIMARY, DISRUPTED LIGAMENT, ANKLE; COLLATERAL
XOHANA	Q3 2025	Physician Services	27696	CPT	REPAIR, PRIMARY, DISRUPTED LIGAMENT, ANKLE; BOTH COLLATERAL LIGAMENTS
XOHANA	Q3 2025	Physician Services	27705	CPT	OSTEOTOMY; TIBIA
XOHANA	Q3 2025	Physician Services	27707	CPT	OSTEOTOMY; FIBULA
XOHANA	Q3 2025	Physician Services	27709	CPT	OSTEOTOMY; TIBIA AND FIBULA
XOHANA	Q3 2025	Physician Services	27712	CPT	OSTEOTOMY; MULTIPLE, WITH REALIGNMENT ON INTRAMEDULLARY ROD (EG, SOFIELD TYPE PROCEDURE)
XOHANA	Q3 2025	Physician Services	27715	CPT	OSTEOPLASTY, TIBIA AND FIBULA, LENGTHENING OR SHORTENING
XOHANA	Q3 2025	Physician Services	27720	CPT	REPAIR OF NONUNION OR MALUNION, TIBIA; WITHOUT GRAFT, (EG, COMPRESSION TECHNIQUE)
XOHANA	Q3 2025	Physician Services	27722	CPT	REPAIR OF NONUNION OR MALUNION, TIBIA; WITH SLIDING GRAFT
XOHANA	Q3 2025	Physician Services	27724	CPT	REPAIR OF NONUNION OR MALUNION, TIBIA; WITH ILIAC OR OTHER AUTOGRAFT (INCLUDES OBTAINING GRAFT)
XOHANA	Q3 2025	Physician Services	27726	CPT	REPAIR OF FIBULA NONUNION AND/OR MALUNION WITH INTERNAL FIXATION
XOHANA	Q3 2025	Physician Services	27727	CPT	REPAIR OF CONGENITAL PSEUDARTHROSIS, TIBIA
XOHANA	Q3 2025	Physician Services	27730	CPT	ARREST, EPIPHYSEAL (EPIPHYSIODESIS), OPEN; DISTAL TIBIA
XOHANA	Q3 2025	Physician Services	27732	CPT	ARREST, EPIPHYSEAL (EPIPHYSIODESIS), OPEN; DISTAL FIBULA
XOHANA	Q3 2025	Physician Services	27734	CPT	ARREST, EPIPHYSEAL (EPIPHYSIODESIS), OPEN; DISTAL TIBIA AND FIBULA
XOHANA	Q3 2025	Physician Services	29540	CPT	STRAPPING; ANKLE AND/OR FOOT
XOHANA	Q3 2025	Physician Services	29550	CPT	STRAPPING; TOES
XOHANA	Q3 2025	Physician Services	30580	CPT	REPAIR FISTULA; OROMAXILLARY (COMBINE WITH 31030 IF ANTROTOMY IS INCLUDED)
XOHANA	Q3 2025	Physician Services	31298	CPT	NASAL/SINUS ENDOSCOPY, SURGICAL, WITH DILATION (EG, BALLOON DILATION); FRONTAL AND SPHENOID SINUS OSTIA
XOHANA	Q3 2025	Physician Services	33766	CPT	SHUNT; SUPERIOR VENA CAVA TO PULMONARY ARTERY FOR FLOW TO ONE LUNG (CLASSICAL GLENN PROCEDURE)
XOHANA	Q3 2025	Physician Services	36416	CPT	COLLECTION OF CAPILLARY BLOOD SPECIMEN (EG, FINGER, HEEL, EAR STICK)
XOHANA	Q3 2025	Physician Services	36465	CPT	INJECTION OF NON-COMPOUNDED FOAM SCLEROSANT WITH ULTRASOUND COMPRESSION MANEUVERS TO GUIDE DISPERSION OF THE INJECTATE, INCLUSIVE OF ALL IMAGING GUIDAN
XOHANA	Q3 2025	Physician Services	36473	CPT	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, INCLUSIVE OF ALL IMAGING GUIDANCE AND MONITORING, PERCUTANEOUS, MECHANOCHEMICAL; FIRST VEIN T
XOHANA	Q3 2025	Physician Services	36476	CPT	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, INCLUSIVE OF ALL IMAGING GUIDANCE AND MONITORING, PERCUTANEOUS
XOHANA	Q3 2025	Physician Services	36482	CPT	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, BY TRANSCATHETER DELIVERY OF A CHEMICAL ADHESIVE (EG, CYANOACRYLATE) REMOTE FROM THE ACCESS SI
XOHANA	Q3 2025	Physician Services	37766	CPT	STAB PHLEBECTOMY OF VARICOSE VEINS, ONE EXTREMITY; MORE THAN 20 INCISIONS
XOHANA	Q3 2025	Physician Services	41252	CPT	REPAIR OF LACERATION OF TONGUE, FLOOR OF MOUTH, OVER 2.6 CM OR COMPLEX
XOHANA	Q3 2025	Physician Services	43244	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
XOHANA	Q3 2025	Physician Services	43251	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
XOHANA	Q3 2025	Physician Services	43255	CPT	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH
XOHANA	Q3 2025	Physician Services	43289	CPT	UNLISTED LAPAROSCOPY PROCEDURE, ESOPHAGUS
XOHANA	Q3 2025	Physician Services	47000	CPT	BIOPSY OF LIVER, NEEDLE; PERCUTANEOUS
XOHANA	Q3 2025	Physician Services	49654	CPT	LAPAROSCOPY REPAIR INCISIONAL HERNIA REDUCIBLE LAPAROSCOPY, SURGICAL, REPAIR, INCISIONAL HERNIA (INCLUDES MESH INSERTION, WHEN PE
XOHANA	Q3 2025	Physician Services	50547	CPT	LAPAROSCOPY, SURGICAL; DONOR NEPHRECTOMY (INCLUDING COLD PRESERVATION), FROM LIVING DONOR
XOHANA	Q3 2025	Physician Services	51102	CPT	ASPIRATION OF BLADDER; WITH INSERTION OF SUPRAPUBIC CATHETER
XOHANA	Q3 2025	Physician Services	51610	CPT	INJECTION PROCEDURE FOR RETROGRADE URETHROCYSTOGRAPHY

XOHANA	Q3 2025	Physician Services	52276	CPT	CYSTOURETHROSCOPY WITH DIRECT VISION INTERNAL URETHROTOMY
XOHANA	Q3 2025	Physician Services	54405	CPT	INSERTION OF MULTI-COMPONENT, INFLATABLE PENILE PROSTHESIS, INCLUDING PLACEMENT OF PUMP, CYLINDERS, AND RESERVOIR
XOHANA	Q3 2025	Physician Services	55250	CPT	VASECTOMY, UNILATERAL OR BILATERAL (SEPARATE PROCEDURE), INCLUDING POSTOPERATIVE SEMEN EXAMINATION(S)
XOHANA	Q3 2025	Physician Services	55700	CPT	BIOPSY, PROSTATE; NEEDLE OR PUNCH, SINGLE OR MULTIPLE, ANY APPROACH
XOHANA	Q3 2025	Physician Services	55874	CPT	TRANSPERINEAL PLACEMENT OF BIODEGRADABLE MATERIAL, PERI-PROSTATIC, SINGLE OR MULTIPLE INJECTION(S), INCLUDING IMAGE GUIDANCE, WHEN PERFORMED
XOHANA	Q3 2025	Physician Services	58100	CPT	ENDOMETRIAL SAMPLING (BIOPSY) WITH OR WITHOUT ENDOCERVICAL SAMPLING (BIOPSY), WITHOUT CERVICAL DILATION, ANY METHOD (SEPAR
XOHANA	Q3 2025	Physician Services	59840	CPT	INDUCED ABORTION, BY DILATION AND CURETTAGE
XOHANA	Q3 2025	Physician Services	61107	CPT	TWIST DRILL HOLE(S) FOR SUBDURAL, INTRACEREBRAL, OR VENTRICULAR PUNCTURE; FOR IMPLANTING VENTRICULAR CATHETER, PRESSURE RE
XOHANA	Q3 2025	Physician Services	61796	CPT	STEREOTACTIC RADIOSURGERY 1 SIMPLE CRANIAL LES STEREOTACTIC RADIOSURGERY (PARTICLE BEAM, GAMMA RAY, OR LINEAR ACCELERATOR); 1 SIM
XOHANA	Q3 2025	Physician Services	61798	CPT	STEREOTACTIC RADIOSURGERY 1 COMPLEX CRANIAL LES STEREOTACTIC RADIOSURGERY (PARTICLE BEAM, GAMMA RAY, OR LINEAR ACCELERATOR); 1 COM
XOHANA	Q3 2025	Physician Services	61800	CPT	APPL STRTCTC HEADFRAME STEREOTACTIC RADIOSURGERYAPPLICATION OF STEREOTACTIC HEADFRAME FOR STEREOTACTIC RADIOSURGERY (LIST SEPARATE
XOHANA	Q3 2025	Physician Services	62270	CPT	SPINAL PUNCTURE, LUMBAR, DIAGNOSTIC;
XOHANA	Q3 2025	Physician Services	62272	CPT	SPINAL PUNCTURE, THERAPEUTIC, FOR DRAINAGE OF CEREBROSPINAL FLUID (BY NEEDLE OR CATHETER);
XOHANA	Q3 2025	Physician Services	62320	CPT	INJECTION(S), OF DIAGNOSTIC OR THERAPEUTIC SUBSTANCE(S) (EG, ANESTHETIC, ANTISPASMODIC, OPIOID, STEROID, OTHER SOLUTION), NOT INCLUDING NEUROLYTIC SUBSTANCES,
XOHANA	Q3 2025	Physician Services	62321	CPT	INJECTION(S), OF DIAGNOSTIC OR THERAPEUTIC SUBSTANCE(S) (EG, ANESTHETIC, ANTISPASMODIC, OPIOID, STEROID, OTHER SOLUTION), NOT INCLUDING NEUROLYTIC SUBSTANCES,
XOHANA	Q3 2025	Physician Services	62322	CPT	INJECTION(S), OF DIAGNOSTIC OR THERAPEUTIC SUBSTANCE(S) (EG, ANESTHETIC, ANTISPASMODIC, OPIOID, STEROID, OTHER SOLUTION), NOT INCLUDING NEUROLYTIC SUBSTANCES,
XOHANA	Q3 2025	Physician Services	62323	CPT	INJECTION(S), OF DIAGNOSTIC OR THERAPEUTIC SUBSTANCE(S) (EG, ANESTHETIC, ANTISPASMODIC, OPIOID, STEROID, OTHER SOLUTION), NOT INCLUDING NEUROLYTIC SUBSTANCES,
XOHANA	Q3 2025	Physician Services	63650	CPT	PERCUTANEOUS IMPLANTATION OF NEUROSTIMULATOR ELECTRODE ARRAY, EPIDURAL
XOHANA	Q3 2025	Physician Services	63688	CPT	REVISION OR REMOVAL OF IMPLANTED SPINAL NEUROSTIMULATOR PULSE GENERATOR OR RECEIVER
XOHANA	Q3 2025	Physician Services	64400	CPT	INJECTION(S), ANESTHETIC AGENT(S) AND/OR STEROID; TRIGEMINAL NERVE, EACH BRANCH (IE, OPHTHALMIC, MAXILLARY, MANDIBULAR)
XOHANA	Q3 2025	Physician Services	64405	CPT	INJECTION(S), ANESTHETIC AGENT(S) AND/OR STEROID; GREATER OCCIPITAL NERVE
XOHANA	Q3 2025	Physician Services	64454	CPT	INJECTION(S), ANESTHETIC AGENT(S) AND/OR STEROID; GENICULAR NERVE BRANCHES, INCLUDING IMAGING GUIDANCE, WHEN PERFORMED
XOHANA	Q3 2025	Physician Services	64479	CPT	INJECTION(S), ANESTHETIC AGENT(S) AND/OR STEROID; TRANSFORAMINAL EPIDURAL, WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT), CERVICAL OR THORACIC, SINGLE LEVEL
XOHANA	Q3 2025	Physician Services	64480	CPT	INJECTION(S), ANESTHETIC AGENT(S) AND/OR STEROID; TRANSFORAMINAL EPIDURAL, WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT), CERVICAL OR THORACIC, EACH ADDITIONAL L
XOHANA	Q3 2025	Physician Services	64483	CPT	INJECTION(S), ANESTHETIC AGENT(S) AND/OR STEROID; TRANSFORAMINAL EPIDURAL, WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT), LUMBAR OR SACRAL, SINGLE LEVEL
XOHANA	Q3 2025	Physician Services	64484	CPT	INJECTION(S), ANESTHETIC AGENT(S) AND/OR STEROID; TRANSFORAMINAL EPIDURAL, WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT), LUMBAR OR SACRAL, EACH ADDITIONAL LEVEL
XOHANA	Q3 2025	Physician Services	64490	CPT	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEAL) JOINT (OR NERVES INNERVATING THAT JOINT) WITH I
XOHANA	Q3 2025	Physician Services	64491	CPT	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEAL) JOINT (OR NERVES INNERVATING THAT JOINT) WITH I
XOHANA	Q3 2025	Physician Services	64492	CPT	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEAL) JOINT (OR NERVES INNERVATING THAT JOINT) WITH I
XOHANA	Q3 2025	Physician Services	64493	CPT	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEAL) JOINT (OR NERVES INNERVATING THAT JOINT) WITH I
XOHANA	Q3 2025	Physician Services	64494	CPT	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEAL) JOINT (OR NERVES INNERVATING THAT JOINT) WITH I
XOHANA	Q3 2025	Physician Services	64495	CPT	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEAL) JOINT (OR NERVES INNERVATING THAT JOINT) WITH I
XOHANA	Q3 2025	Physician Services	64510	CPT	INJECTION, ANESTHETIC AGENT; STELLATE GANGLION (CERVICAL SYMPATHETIC)
XOHANA	Q3 2025	Physician Services	64566	CPT	POSTERIOR TIBIAL NEUROSTIMULATION, PERCUTANEOUS NEEDLE ELECTRODE, SINGLE TREATMENT, INCLUDES PROGRAMMING
XOHANA	Q3 2025	Physician Services	64615	CPT	CHEMODENERVATION OF MUSCLE(S); MUSCLE(S) INNERVATED BY FACIAL, TRIGEMINAL, CERVICAL SPINAL AND ACCESSORY NERVES, BILATERAL (EG, FO
XOHANA	Q3 2025	Physician Services	64617	CPT	CHEMODENERVATION OF MUSCLE(S); LARYNX, UNILATERAL, PERCUTANEOUS (EG, FOR SPASMODIC DYSPHONIA), INCLUDES GUIDANCE BY NEEDLE ELECTRO
XOHANA	Q3 2025	Physician Services	64625	CPT	RADIOFREQUENCY ABLATION, NERVES INNERVATING THE SACROILIAC JOINT, WITH IMAGE GUIDANCE (IE, FLUOROSCOPY OR COMPUTED TOMOGRAPHY)
XOHANA	Q3 2025	Physician Services	64633	CPT	DESTRUCTION BY NEUROLYTIC AGENT, PARAVERTEBRAL FACET JOINT NERVE(S), WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT); CERVICAL OR THORAC
XOHANA	Q3 2025	Physician Services	64634	CPT	DESTRUCTION BY NEUROLYTIC AGENT, PARAVERTEBRAL FACET JOINT NERVE(S), WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT); CERVICAL OR THORAC
XOHANA	Q3 2025	Physician Services	64635	CPT	DESTRUCTION BY NEUROLYTIC AGENT, PARAVERTEBRAL FACET JOINT NERVE(S), WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT); LUMBAR OR SACRAL,
XOHANA	Q3 2025	Physician Services	64636	CPT	DESTRUCTION BY NEUROLYTIC AGENT, PARAVERTEBRAL FACET JOINT NERVE(S), WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT); LUMBAR OR SACRAL,
XOHANA	Q3 2025	Physician Services	64642	CPT	CHEMODENERVATION OF ONE EXTREMITY; 1-4 MUSCLE(S)
XOHANA	Q3 2025	Physician Services	64643	CPT	CHEMODENERVATION OF ONE EXTREMITY; EACH ADDITIONAL EXTREMITY, 1-4 MUSCLE(S) (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCE
XOHANA	Q3 2025	Physician Services	67904	CPT	REPAIR OF BLEPHAROPTOSIS; (TARSO) LEVATOR RESECTION OR ADVANCEMENT, EXTERNAL APPROACH
XOHANA	Q3 2025	Physician Services	67966	CPT	EXCISION AND REPAIR OF EYELID, INVOLVING LID MARGIN, TARSUS, CONJUNCTIVA, CANTHUS, OR FULL THICKNESS, MAY INCLUDE PREPARAT
XOHANA	Q3 2025	Physician Services	68320	CPT	CONJUNCTIVOPLASTY; WITH CONJUNCTIVAL GRAFT OR EXTENSIVE REARRANGEMENT
XOHANA	Q3 2025	Physician Services	69433	CPT	TYMPANOSTOMY (REQUIRING INSERTION OF VENTILATING TUBE), LOCAL OR TOPICAL ANESTHESIA
XOHANA	Q3 2025	Physician Services	70355	CPT	ORTHOPANTOGRAM
XOHANA	Q3 2025	Physician Services	73030	CPT	RADIOLOGIC EXAMINATION, SHOULDER; COMPLETE, MINIMUM OF TWO VIEWS
XOHANA	Q3 2025	Physician Services	73060	CPT	RADIOLOGIC EXAMINATION; HUMERUS, MINIMUM OF TWO VIEWS
XOHANA	Q3 2025	Physician Services	73120	CPT	RADIOLOGIC EXAMINATION, HAND; TWO VIEWS
XOHANA	Q3 2025	Physician Services	73130	CPT	RADIOLOGIC EXAMINATION, HAND; MINIMUM OF THREE VIEWS
XOHANA	Q3 2025	Physician Services	73630	CPT	RADIOLOGIC EXAMINATION, FOOT; COMPLETE, MINIMUM OF THREE VIEWS
XOHANA	Q3 2025	Physician Services	77002	CPT	FLUOROSCOPIC GUIDANCE FOR NEEDLE PLACEMENT (EG, BIOPSY, ASPIRATION, INJECTION, LOCALIZATION DEVICE)
XOHANA	Q3 2025	Physician Services	78264	CPT	GASTRIC EMPTYING IMAGING STUDY (EG, SOLID, LIQUID, OR BOTH);
XOHANA	Q3 2025	Physician Services	78608	CPT	BRAIN IMAGING, POSITRON EMISSION TOMOGRAPHY (PET); METABOLIC EVALUATION
XOHANA	Q3 2025	Physician Services	78999	CPT	UNLISTED MISCELLANEOUS PROCEDURE, DIAGNOSTIC NUCLEAR MEDICINE
XOHANA	Q3 2025	Physician Services	80048	CPT	BASIC METABOLIC PANEL (CALCIUM, TOTAL) THIS PANEL MUST INCLUDE THE FOLLOWING: CALCIUM (82310) CARBON DIOXIDE (82374) CHLOR
XOHANA	Q3 2025	Physician Services	81370	CPT	HLA CLASS I AND II TYPING, LOW RESOLUTION (EG, ANTIGEN EQUIVALENTS); HLA-A, -B, -C, -DRB1/3/4/5, AND -DQB1
XOHANA	Q3 2025	Physician Services	81371	CPT	HLA CLASS I AND II TYPING, LOW RESOLUTION (EG, ANTIGEN EQUIVALENTS); HLA-A, -B, AND -DRB1/3/4/5 (EG, VERIFICATION TYPING)
XOHANA	Q3 2025	Physician Services	81372	CPT	HLA CLASS I TYPING, LOW RESOLUTION (EG, ANTIGEN EQUIVALENTS); COMPLETE (IE, HLA-A, -B, AND -C)
XOHANA	Q3 2025	Physician Services	81374	CPT	HLA CLASS I TYPING, LOW RESOLUTION (EG, ANTIGEN EQUIVALENTS); 1 ANTIGEN EQUIVALENT (EG, B*27), EACH
XOHANA	Q3 2025	Physician Services	81375	CPT	HLA CLASS II TYPING, LOW RESOLUTION (EG, ANTIGEN EQUIVALENTS); HLA-DRB1/3/4/5 AND -DQB1
XOHANA	Q3 2025	Physician Services	81379	CPT	HLA CLASS I TYPING, HIGH RESOLUTION (IE, ALLELES OR ALLELE GROUPS); COMPLETE (IE, HLA-A, -B, AND -C)
XOHANA	Q3 2025	Physician Services	82677	CPT	ESTRIOL
XOHANA	Q3 2025	Physician Services	83605	CPT	LACTATE (LACTIC ACID)
XOHANA	Q3 2025	Physician Services	84163	CPT	PREGNANCY-ASSOCIATED PLASMA PROTEIN-A (PAPP-A)
XOHANA	Q3 2025	Physician Services	85576	CPT	PLATELET, AGGREGATION (IN VITRO), EACH AGENT
XOHANA	Q3 2025	Physician Services	86005	CPT	ALLERGEN SPECIFIC IGE; QUALITATIVE, MULTIALLERGEN SCREEN (EG, DISK, SPONGE, CARD)
XOHANA	Q3 2025	Physician Services	86336	CPT	INHIBIN A
XOHANA	Q3 2025	Physician Services	86812	CPT	HLA TYPING; A, B, OR C (EG, A10, B7, B27), SINGLE ANTIGEN
XOHANA	Q3 2025	Physician Services	86813	CPT	HLA TYPING; A, B, OR C, MULTIPLE ANTIGENS
XOHANA	Q3 2025	Physician Services	86816	CPT	HLA TYPING; DR/DQ, SINGLE ANTIGEN
XOHANA	Q3 2025	Physician Services	86817	CPT	HLA TYPING; DR/DQ, MULTIPLE ANTIGENS
XOHANA	Q3 2025	Physician Services	87040	CPT	CULTURE, BACTERIAL; BLOOD, AEROBIC, WITH ISOLATION AND PRESUMPTIVE IDENTIFICATION OF ISOLATES (INCLUDES ANAEROBIC CULTURE,
XOHANA	Q3 2025	Physician Services	87070	CPT	CULTURE, BACTERIAL; ANY OTHER SOURCE EXCEPT URINE, BLOOD OR STOOL, AEROBIC, WITH ISOLATION AND PRESUMPTIVE IDENTIFICATION
XOHANA	Q3 2025	Physician Services	88331	CPT	PATHOLOGY CONSULTATION DURING SURGERY; FIRST TISSUE BLOCK, WITH FROZEN SECTION(S), SINGLE SPECIMEN
XOHANA	Q3 2025	Physician Services	88348	CPT	ELECTRON MICROSCOPY; DIAGNOSTIC
XOHANA	Q3 2025	Physician Services	89320	CPT	SEMEN ANALYSIS; VOLUME, COUNT, MOTILITY, AND DIFFERENTIAL
XOHANA	Q3 2025	Physician Services	90636	CPT	HEPATITIS A AND HEPATITIS B VACCINE (HEPA-HEPB), ADULT DOSAGE, FOR INTRAMUSCULAR USE
XOHANA	Q3 2025	Physician Services	91110	CPT	GASTROINTESTINAL TRACT IMAGING, INTRALUMINAL (EG, CAPSULE ENDOSCOPY), ESOPHAGUS THROUGH ILEUM, WITH PHYSICIAN INTERPRETATI
XOHANA	Q3 2025	Physician Services	91111	CPT	GASTROINTESTINAL TRACT IMAGING, INTRALUMINAL (EG, CAPSULE ENDOSCOPY), ESOPHAGUS WITH PHYSICIAN INTERPRETATION AND REPORT
XOHANA	Q3 2025	Physician Services	91112	CPT	GASTROINTESTINAL TRANSIT AND PRESSURE MEASUREMENT, STOMACH THROUGH COLON, WIRELESS CAPSULE, WITH INTERPRETATION AND REPORT
XOHANA	Q3 2025	Physician Services	92012	CPT	OPHTHALMOLOGICAL SERVICES: MEDICAL EXAMINATION AND EVALUATION, WITH INITIATION OR CONTINUATION OF DIAGNOSTIC AND TREATMENT
XOHANA	Q3 2025	Physician Services	92134	CPT	SCANNING COMPUTERIZED OPHTHALMIC DIAGNOSTIC IMAGING, POSTERIOR SEGMENT, WITH INTERPRETATION AND REPORT, UNILATERAL OR BILATERAL; R
XOHANA	Q3 2025	Physician Services	92273	CPT	ELECTRORETINOGRAPHY (ERG), WITH INTERPRETATION AND REPORT; FULL FIELD (IE, FFERG, FLASH ERG, GANZFELD ERG)
XOHANA	Q3 2025	Physician Services	92971	CPT	CARDIOASSIST-METHOD OF CIRCULATORY ASSIST; EXTERNAL
XOHANA	Q3 2025	Physician Services	93228	CPT	WEARABLE MOBILE CV TELEMETRY W/PHYS R&I W/REPORTWEARABLE MOBILE CARDIOVASCULAR TELEMETRY WITH ELECTROCARDIOGRAPHIC RECORDING, CONC
XOHANA	Q3 2025	Physician Services	93270	CPT	PATIENT DEMAND SINGLE OR MULTIPLE EVENT RECORDING WITH PRESYMPTOM MEMORY LOOP, 24-HOUR ATTENDED MONITORING, PER 30 DAY PER
XOHANA	Q3 2025	Physician Services	93272	CPT	PATIENT DEMAND SINGLE OR MULTIPLE EVENT RECORDING WITH PRESYMPTOM MEMORY LOOP, 24-HOUR ATTENDED MONITORING, PER 30 DAY PER
XOHANA	Q3 2025	Physician Services	93351	CPT	ECHO TTHRC R-T 2D -+M-MODE REST&STRS CONT ECG ECHOCARDIOGRAPHY, TRANSTHORACIC, REAL-TIME WITH IMAGE DOCUMENTATION (2D), INCLUDES
XOHANA	Q3 2025	Physician Services	93923	CPT	NONINVASIVE PHYSIOLOGIC STUDIES OF UPPER OR LOWER EXTREMITY ARTERIES, MULTIPLE LEVELS OR WITH PROVOCATIVE FUNCTIONAL MANEU
XOHANA	Q3 2025	Physician Services	93931	CPT	DUPLEX SCAN OF UPPER EXTREMITY ARTERIES OR ARTERIAL BYPASS GRAFTS; UNILATERAL OR LIMITED STUDY
XOHANA	Q3 2025	Physician Services	94642	CPT	AEROSOL INHALATION OF PENTAMIDINE FOR PNEUMOCYSTIS CARINII PNEUMONIA TREATMENT OR PROPHYLAXIS
XOHANA	Q3 2025	Physician Services	95018	CPT	ALLERGY TESTING, ANY COMBINATION OF PERCUTANEOUS (SCRATCH, PUNCTURE, PRICK) AND INTRACUTANEOUS (INTRADERMAL), SEQUENTIAL AND INCREMENTAL, WITH DRUGS OR B
XOHANA	Q3 2025	Physician Services	95076	CPT	INGESTION CHALLENGE TEST (SEQUENTIAL AND INCREMENTAL INGESTION OF TEST ITEMS, EG, FOOD, DRUG OR OTHER SUBSTANCE); INITIAL 120 MINU
XOHANA	Q3 2025	Physician Services	95115	CPT	PROFESSIONAL SERVICES FOR ALLERGEN IMMUNOTHERAPY NOT INCLUDING PROVISION OF ALLERGENIC EXTRACTS; SINGLE INJECTION
XOHANA	Q3 2025	Physician Services	95250	CPT	AMBULATORY CONTINUOUS GLUCOSE MONITORING OF INTERSTITIAL TISSUE FLUID VIA A SUBCUTANEOUS SENSOR FOR A MINIMUM OF 72 HOURS; PHYSICIAN OR OTHER QUALIFIED HE

XOHANA	Q3 2025	Physician Services	95700	CPT	ELECTROENCEPHALOGRAM (EEG) CONTINUOUS RECORDING, WITH VIDEO WHEN PERFORMED, SETUP, PATIENT EDUCATION, AND TAKEDOWN WHEN PERFORMED, ADMINISTERED IN P
XOHANA	Q3 2025	Physician Services	95708	CPT	ELECTROENCEPHALOGRAM (EEG), WITHOUT VIDEO, REVIEW OF DATA, TECHNICAL DESCRIPTION BY EEG TECHNOLOGIST, EACH INCREMENT OF 12-26 HOURS; UNMONITORED
XOHANA	Q3 2025	Physician Services	95713	CPT	ELECTROENCEPHALOGRAM WITH VIDEO (VEEG), REVIEW OF DATA, TECHNICAL DESCRIPTION BY EEG TECHNOLOGIST, 2-12 HOURS; WITH CONTINUOUS, REAL-TIME MONITORING AND N
XOHANA	Q3 2025	Physician Services	95714	CPT	ELECTROENCEPHALOGRAM WITH VIDEO (VEEG), REVIEW OF DATA, TECHNICAL DESCRIPTION BY EEG TECHNOLOGIST, EACH INCREMENT OF 12-26 HOURS; UNMONITORED
XOHANA	Q3 2025	Physician Services	95715	CPT	ELECTROENCEPHALOGRAM WITH VIDEO (VEEG), REVIEW OF DATA, TECHNICAL DESCRIPTION BY EEG TECHNOLOGIST, EACH INCREMENT OF 12-26 HOURS; WITH INTERMITTENT MONITO
XOHANA	Q3 2025	Physician Services	95716	CPT	ELECTROENCEPHALOGRAM WITH VIDEO (VEEG), REVIEW OF DATA, TECHNICAL DESCRIPTION BY EEG TECHNOLOGIST, EACH INCREMENT OF 12-26 HOURS; WITH CONTINUOUS, REAL-TI
XOHANA	Q3 2025	Physician Services	95721	CPT	ELECTROENCEPHALOGRAM (EEG), CONTINUOUS RECORDING, PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL REVIEW OF RECORDED EVENTS, ANALYSIS OF SPIKE AND
XOHANA	Q3 2025	Physician Services	95722	CPT	ELECTROENCEPHALOGRAM (EEG), CONTINUOUS RECORDING, PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL REVIEW OF RECORDED EVENTS, ANALYSIS OF SPIKE AND
XOHANA	Q3 2025	Physician Services	95723	CPT	ELECTROENCEPHALOGRAM (EEG), CONTINUOUS RECORDING, PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL REVIEW OF RECORDED EVENTS, ANALYSIS OF SPIKE AND
XOHANA	Q3 2025	Physician Services	95724	CPT	ELECTROENCEPHALOGRAM (EEG), CONTINUOUS RECORDING, PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL REVIEW OF RECORDED EVENTS, ANALYSIS OF SPIKE AND
XOHANA	Q3 2025	Physician Services	95782	CPT	POLYSOMNOGRAPHY; YOUNGER THAN 6 YEARS, SLEEP STAGING WITH 4 OR MORE ADDITIONAL PARAMETERS OF SLEEP, ATTENDED BY A TECHNOLOGIST
XOHANA	Q3 2025	Physician Services	95800	CPT	SLEEP STUDY, UNATTENDED, SIMULTANEOUS RECORDING; HEART RATE, OXYGEN SATURATION, RESPIRATORY ANALYSIS (EG, BY AIRFLOW OR PERIPHERAL
XOHANA	Q3 2025	Physician Services	95819	CPT	ELECTROENCEPHALOGRAM (EEG); INCLUDING RECORDING AWAKE AND ASLEEP
XOHANA	Q3 2025	Physician Services	95860	CPT	NEEDLE ELECTROMYOGRAPHY; ONE EXTREMITY WITH OR WITHOUT RELATED PARASPINAL AREAS
XOHANA	Q3 2025	Physician Services	95872	CPT	NEEDLE ELECTROMYOGRAPHY USING SINGLE FIBER ELECTRODE, WITH QUANTITATIVE MEASUREMENT OF JITTER, BLOCKING AND/OR FIBER DENSI
XOHANA	Q3 2025	Physician Services	95885	CPT	NEEDLE ELECTROMYOGRAPHY, EACH EXTREMITY, WITH RELATED PARASPINAL AREAS, WHEN PERFORMED, DONE WITH NERVE CONDUCTION, AMPLITUDE AND
XOHANA	Q3 2025	Physician Services	95887	CPT	NEEDLE ELECTROMYOGRAPHY, NON-EXTREMITY (CRANIAL NERVE SUPPLIED OR AXIAL) MUSCLE(S) DONE WITH NERVE CONDUCTION, AMPLITUDE AND LATEN
XOHANA	Q3 2025	Physician Services	95907	CPT	NERVE CONDUCTION STUDIES; 1-2 STUDIES
XOHANA	Q3 2025	Physician Services	95930	CPT	VISUAL EVOKED POTENTIAL (VEP) CHECKERBOARD OR FLASH TESTING, CENTRAL NERVOUS SYSTEM EXCEPT GLAUCOMA, WITH INTERPRETATION AND REPORT
XOHANA	Q3 2025	Physician Services	95937	CPT	NEUROMUSCULAR JUNCTION TESTING (REPETITIVE STIMULATION, PAIRED STIMULI), EACH NERVE, ANY ONE METHOD
XOHANA	Q3 2025	Physician Services	95957	CPT	DIGITAL ANALYSIS OF ELECTROENCEPHALOGRAM (EEG) (EG, FOR EPILEPTIC SPIKE ANALYSIS)
XOHANA	Q3 2025	Physician Services	95999	CPT	UNLISTED NEUROLOGICAL OR NEUROMUSCULAR DIAGNOSTIC PROCEDURE
XOHANA	Q3 2025	Physician Services	97810	CPT	ACUPUNCTURE, 1 OR MORE NEEDLES; WITHOUT ELECTRICAL STIMULATION, INITIAL 15 MINUTES OF PERSONAL ONE-ON-ONE CONTACT WITH THE
XOHANA	Q3 2025	Physician Services	97811	CPT	ACUPUNCTURE, 1 OR MORE NEEDLES; WITHOUT ELECTRICAL STIMULATION, EACH ADDITIONAL 15 MINUTES OF PERSONAL ONE-ON-ONE CONTACT
XOHANA	Q3 2025	Physician Services	97813	CPT	ACUPUNCTURE, 1 OR MORE NEEDLES; WITH ELECTRICAL STIMULATION, INITIAL 15 MINUTES OF PERSONAL ONE-ON-ONE CONTACT WITH THE PA
XOHANA	Q3 2025	Physician Services	97814	CPT	ACUPUNCTURE, 1 OR MORE NEEDLES; WITH ELECTRICAL STIMULATION, EACH ADDITIONAL 15 MINUTES OF PERSONAL ONE-ON-ONE CONTACT WIT
XOHANA	Q3 2025	Physician Services	98925	CPT	OSTEOPATHIC MANIPULATIVE TREATMENT (OMT); ONE TO TWO BODY REGIONS INVOLVED
XOHANA	Q3 2025	Physician Services	98926	CPT	OSTEOPATHIC MANIPULATIVE TREATMENT (OMT); THREE TO FOUR BODY REGIONS INVOLVED
XOHANA	Q3 2025	Physician Services	98927	CPT	OSTEOPATHIC MANIPULATIVE TREATMENT (OMT); FIVE TO SIX BODY REGIONS INVOLVED
XOHANA	Q3 2025	Physician Services	98941	CPT	CHIROPRACTIC MANIPULATIVE TREATMENT (CMT); SPINAL, THREE TO FOUR REGIONS
XOHANA	Q3 2025	Physician Services	98968	CPT	TELEPHONE ASSESSMENT AND MANAGEMENT SERVICE PROVIDED BY A QUALIFIED NONPHYSICIAN HEALTH CARE PROFESSIONAL TO AN ESTABLISHE
XOHANA	Q3 2025	Physician Services	99080	CPT	SPECIAL REPORTS SUCH AS INSURANCE FORMS, MORE THAN THE INFORMATION CONVEYED IN THE USUAL MEDICAL COMMUNICATIONS OR STANDAR
XOHANA	Q3 2025	Physician Services	99183	CPT	PHYSICIAN ATTENDANCE AND SUPERVISION OF HYPERBARIC OXYGEN THERAPY, PER SESSION
XOHANA	Q3 2025	Physician Services	99202	CPT	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT, WHICH REQUIRES A MEDICALLY APPROPRIATE HISTORY AND/OR EXAMINATION AND
XOHANA	Q3 2025	Physician Services	99211	CPT	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT, THAT MAY NOT REQUIRE THE PRESENCE OF A PHYSICIAN OR OTHER QUAL
XOHANA	Q3 2025	Physician Services	99212	CPT	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT, WHICH REQUIRES A MEDICALLY APPROPRIATE HISTORY AND/OR EXAMINA
XOHANA	Q3 2025	Physician Services	99304	CPT	INITIAL NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES THESE 3 KEY COMPONE
XOHANA	Q3 2025	Physician Services	99305	CPT	INITIAL NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES THESE 3 KEY COMPONE
XOHANA	Q3 2025	Physician Services	99307	CPT	SUBSEQUENT NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES AT LEAST 2 OF TH
XOHANA	Q3 2025	Physician Services	99309	CPT	SUBSEQUENT NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES AT LEAST 2 OF TH
XOHANA	Q3 2025	Physician Services	99310	CPT	SUBSEQUENT NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A PATIENT, WHICH REQUIRES AT LEAST 2 OF TH
XOHANA	Q3 2025	Physician Services	99315	CPT	NURSING FACILITY DISCHARGE DAY MANAGEMENT; 30 MINUTES OR LESS
XOHANA	Q3 2025	Physician Services	99316	CPT	NURSING FACILITY DISCHARGE DAY MANAGEMENT; MORE THAN 30 MINUTES
XOHANA	Q3 2025	Physician Services	A4220	HCPCS	REFILL KIT FOR IMPLANTABLE INFUSION PUMP
XOHANA	Q3 2025	Physician Services	G0108	HCPCS	DIABETES OUTPATIENT SELF-MANAGEMENT TRAINING SERVICES, INDIVIDUAL, PER 30 MINUTES
XOHANA	Q3 2025	Physician Services	G0260	HCPCS	INJECTION PROCEDURE FOR SACROILIAC JOINT; PROVISION OF ANESTHETIC, STEROID AND/OR OTHER THERAPEUTIC AGENT, WITH OR WITHOUT ARTHRO
XOHANA	Q3 2025	Physician Services	G0399	HCPCS	HOME SLEEP TEST (HST) WITH TYPE III PORTABLE MONITOR, UNATTENDED; MINIMUM OF 4 CHANNELS: 2 RESPIRATORY MOVEMENT/AIRFLOW, 1 ECG/HEA
XOHANA	Q3 2025	Physician Services	G0422	HCPCS	INTENSIVE CARDIAC REHABILITATION; WITH OR WITHOUT CONTINUOUS ECG MONITORING WITH EXERCISE, PER SESSION
XOHANA	Q3 2025	Physician Services	G0423	HCPCS	INTENSIVE CARDIAC REHABILITATION; WITH OR WITHOUT CONTINUOUS ECG MONITORING; WITHOUT EXERCISE, PER SESSION
XOHANA	Q3 2025	Physician Services	J0177	HCPCS	INJECTION AFLIBERCEPT HD 1 MG
XOHANA	Q3 2025	Physician Services	J0577	HCPCS	INJECTION BUPRENORPHINE ER </= TO 7 DAYS TX
XOHANA	Q3 2025	Physician Services	J0578	HCPCS	INJECTION BUPRENORPHINE ER > 7 TO 28 DAYS TX
XOHANA	Q3 2025	Physician Services	J0589	HCPCS	INJECTION DAXIBOTULINUMTOXINA-LANM 1 UNIT
XOHANA	Q3 2025	Physician Services	J0692	HCPCS	INJECTION, CEFEPIME HCL, 500 MG
XOHANA	Q3 2025	Physician Services	J1050	HCPCS	INJECTION, MEDROXYPROGESTERONE ACETATE, 1MG
XOHANA	Q3 2025	Physician Services	J1071	HCPCS	INJECTION, TESTOSTERONE CYPIONATE, 1MG
XOHANA	Q3 2025	Physician Services	J1094	HCPCS	INJECTION, DEXAMETHASONE ACETATE, 1 MG
XOHANA	Q3 2025	Physician Services	J1202	HCPCS	MIGLUSTAT ORAL 65 MG
XOHANA	Q3 2025	Physician Services	J1203	HCPCS	INJECTION CIPAGLUCOSIDASE ALFA-ATGA 5 MG
XOHANA	Q3 2025	Physician Services	J1323	HCPCS	INJECTION ELRANATAMAB-BCMM 1 MG
XOHANA	Q3 2025	Physician Services	J1380	HCPCS	INJECTION, ESTRADIOL VALERATE, UP TO 10 MG
XOHANA	Q3 2025	Physician Services	J1434	HCPCS	INJECTION FOSAPREPITANT 1 MG
XOHANA	Q3 2025	Physician Services	J1748	HCPCS	INJECTION INFLIXIMAB-DYYB 10 MG
XOHANA	Q3 2025	Physician Services	J1750	HCPCS	INJECTION, IRON DEXTRAN, 50 MG
XOHANA	Q3 2025	Physician Services	J2267	HCPCS	INJECTION MIRIKIZUMAB-MRKZ 1 MG
XOHANA	Q3 2025	Physician Services	J2277	HCPCS	INJECTION MOTIXAFORTIDE 0.25 MG
XOHANA	Q3 2025	Physician Services	J2468	HCPCS	INJECTION PAL HCI NOT THR EQ TO J2469 25 MCG
XOHANA	Q3 2025	Physician Services	J2675	HCPCS	INJECTION, PROGESTERONE, PER 50 MG
XOHANA	Q3 2025	Physician Services	J2782	HCPCS	INJECTION AVACINCAPTAD PEGOL 0.1 MG
XOHANA	Q3 2025	Physician Services	J2801	HCPCS	INJECTION RISPERIDONE 0.5 MG
XOHANA	Q3 2025	Physician Services	J3055	HCPCS	INJECTION TALQUETAMAB-TGVS 0.25 MG
XOHANA	Q3 2025	Physician Services	J3247	HCPCS	INJECTION SECUKINUMAB IV 1 MG
XOHANA	Q3 2025	Physician Services	J3263	HCPCS	INJECTION TORIPALIMAB-TPZI 1 MG
XOHANA	Q3 2025	Physician Services	J3301	HCPCS	INJECTION, TRIAMCINOLONE ACETONIDE, PER 10 MG
XOHANA	Q3 2025	Physician Services	J3370	HCPCS	INJECTION, VANCOMYCIN HCL, 500 MG
XOHANA	Q3 2025	Physician Services	J3393	HCPCS	INJECTION BETIBEGLOGENE AUTOTEMCEL PER TREATMENT
XOHANA	Q3 2025	Physician Services	J3394	HCPCS	INJECTION LOVOTIBEGLOGENE AUTOTEMCEL PER TX
XOHANA	Q3 2025	Physician Services	J3420	HCPCS	INJECTION, VITAMIN B-12 CYANOCOBALAMIN, UP TO 1,000 MCG
XOHANA	Q3 2025	Physician Services	J7171	HCPCS	INJECTION ADAMTS13 RECOMBINANT-KRHN 10 IU
XOHANA	Q3 2025	Physician Services	J7298	HCPCS	LEVONORGESTREL-RELEASING INTRAUTERINE CONTRACEPTIVE SYSTEM, 52 MG, 5 YEAR DURATION
XOHANA	Q3 2025	Physician Services	J7355	HCPCS	INJECTION TRAVOPROST INTRACAMERAL IMPLANT 1 MCG
XOHANA	Q3 2025	Physician Services	J8611	HCPCS	METHOTREXATE JYLAMVO ORAL 2.5 MG
XOHANA	Q3 2025	Physician Services	J8612	HCPCS	METHOTREXATE XATMEP ORAL 2.5 MG
XOHANA	Q3 2025	Physician Services	J9034	HCPCS	INJECTION BENDAMUSTINE HCL BENDEKA 1 MG
XOHANA	Q3 2025	Physician Services	J9312	HCPCS	INJECTION, RITUXIMAB, 10 MG
XOHANA	Q3 2025	Physician Services	J9361	HCPCS	INJECTION EFBEMALENOGRASTIM ALFA-VUXW 0.5 MG
XOHANA	Q3 2025	Physician Services	J9376	HCPCS	INJECTION POZELIMAB-BBFG 1 MG
XOHANA	Q3 2025	Physician Services	L0180	HCPCS	CERVICAL, MULTIPLE POST COLLAR, OCCIPITAL/MANDIBULAR SUPPORTS, ADJUSTABLE
XOHANA	Q3 2025	Physician Services	M0224	HCPCS	IV INFUSION PEMIVIBART PRE-EP ONLY
XOHANA	Q3 2025	Physician Services	Q0224	HCPCS	INJECTION PEMIVIBART PRE-EP ONLY
XOHANA	Q3 2025	Physician Services	Q3014	HCPCS	TELEHEALTH ORIGINATING SITE FACILITY FEE
XOHANA	Q3 2025	Physician Services	Q4010	HCPCS	CAST SUPPLIES, SHORT ARM CAST, ADULT (11 YEARS +), FIBERGLASS
XOHANA	Q3 2025	Physician Services	Q4038	HCPCS	CAST SUPPLIES, SHORT LEG CAST, ADULT (11 YEARS +), FIBERGLASS
XOHANA	Q3 2025	Physician Services	Q4184	HCPCS	CELLESTA, PER SQ CM
XOHANA	Q3 2025	Physician Services	Q4186	HCPCS	EPIFIX, PER SQ CM
XOHANA	Q3 2025	Physician Services	Q5133	HCPCS	INJECTION TOCILIZUMAB-BAVI BIOSIMILAR 1 MG
XOHANA	Q3 2025	Physician Services	Q5134	HCPCS	INJECTION NATALIZUMAB-SZTN BIOSIMILAR 1 MG
XOHANA	Q3 2025	Physician Services	Q5137	HCPCS	INJECTION USTEKINUMAB-AUUB WEZLANA BS SC 1 MG

XOHANA	Q3 2025	Physician Services	Q5138		HCPCS	INJECTION USTEKINUMAB-AUUB WEZLANA BS IV 1 MG
XOHANA	Q3 2025	Physician Services	S3845		HCPCS	GENETIC TESTING FOR ALPHA-THALASSEMIA
XOHANA	Q3 2025	Physician Services	S9470		HCPCS	NUTRITIONAL COUNSELING, DIETITIAN VISIT
XOHANA	Q3 2025	Physician Services	S9970		HCPCS	HEALTH CLUB MEMBERSHIP, ANNUAL
XOHANA	Q3 2025	Physician Services	S9991		HCPCS	SERVICES PROVIDED AS PART OF A PHASE III CLINICAL TRIAL
XOHANA	Q3 2025	Physician Services	T1503		HCPCS	ADMINISTRATION OF MEDICATION, OTHER THAN ORAL AND/OR INJECTABLE, BY A HEALTH CARE AGENCY/PROFESSIONAL, PER VISIT
XOHANA	Q3 2025	Physician Services	V2526		HCPCS	CONTACT LENS HPI W/BLUE-VIOLET FILTER PER LENS
XOHANA	Q3 2025	Physician Services	V2600		HCPCS	HAND HELD LOW VISION AIDS AND OTHER NONSPECTACLE MOUNTED AIDS
XOHANA	Q3 2025	Physician Services	V5020		HCPCS	CONFORMITY EVALUATION
XOHANA	Q3 2025	Physician Services	V5275		HCPCS	EAR IMPRESSION, EACH
XOHANA	Q3 2025	Preventive Services	87593		CPT	IADNA ORTHOPOXVIRUS AMPLIFIED PROBE TECHNIQUE EA
XOHANA	Q3 2025	Preventive Services	97803		CPT	MEDICAL NUTRITION THERAPY; RE-ASSESSMENT AND INTERVENTION, INDIVIDUAL, FACE-TO-FACE WITH THE PATIENT, EACH 15 MINUTES
XOHANA	Q3 2025	Preventive Services	G0327		CPT	COLORECTAL CANCER SCREENING BLOOD-BASED BIOMARK
XOHANA	Q3 2025	Rehab Services	0362T		CPT	BEHAVIOR IDENTIFICATION SUPPORTING ASSESSMENT, EACH 15 MINUTES OF TECHNICIANS' TIME FACE-TO-FACE WITH A PATIENT, REQUIRING THE FOLLOWING COMPONENTS: ADMINIS
XOHANA	Q3 2025	Rehab Services		20665	CPT	REMOVAL OF TONGS OR HALO APPLIED BY ANOTHER PHYSICIAN
XOHANA	Q3 2025	Rehab Services		29260	CPT	STRAPPING; ELBOW OR WRIST
XOHANA	Q3 2025	Rehab Services		29799	CPT	UNLISTED PROCEDURE, CASTING OR STRAPPING
XOHANA	Q3 2025	Rehab Services	36475		CPT	UNDER ENDOVASCULAR ABLATION THERAPY OF INCOMPETENT EXTREMITY VEINS
XOHANA	Q3 2025	Rehab Services		74230	CPT	RADIOLOGIC EXAMINATION, SWALLOWING FUNCTION, WITH CINERADIOGRAPHY/VIDEORADIOGRAPHY, INCLUDING SCOUT NECK RADIOGRAPH(S) AND DELAYED IMAGE(S), WHEN PERF
XOHANA	Q3 2025	Rehab Services		77373	CPT	STEREOTACTIC BODY RADIATION THERAPY, TREATMENT DELIVERY, PER FRACTION TO 1 OR MORE LESIONS, INCLUDING IMAGE GUIDANCE, ENTI
XOHANA	Q3 2025	Rehab Services		77385	CPT	INTENSITY MODULATED RADIATION TREATMENT DELIVERY (IMRT), INCLUDES GUIDANCE AND TRACKING, WHEN PERFORMED; SIMPLE
XOHANA	Q3 2025	Rehab Services		77386	CPT	INTENSITY MODULATED RADIATION TREATMENT DELIVERY (IMRT), INCLUDES GUIDANCE AND TRACKING, WHEN PERFORMED; COMPLEX
XOHANA	Q3 2025	Rehab Services		77412	CPT	RADIATION TREATMENT DELIVERY, =>1 MEV; COMPLEX
XOHANA	Q3 2025	Rehab Services		77432	CPT	STEREOTACTIC RADIATION TREATMENT MANAGEMENT OF CRANIAL LESION(S) (COMPLETE COURSE OF TREATMENT CONSISTING OF ONE SESSION)
XOHANA	Q3 2025	Rehab Services		77778	CPT	INTERSTITIAL RADIATION SOURCE APPLICATION; COMPLEX
XOHANA	Q3 2025	Rehab Services		90792	CPT	PSYCHIATRIC DIAGNOSTIC EVALUATION WITH MEDICAL SERVICES
XOHANA	Q3 2025	Rehab Services		90833	CPT	30 MIN PSYCHOTHERAPY ADD-ON CODE
XOHANA	Q3 2025	Rehab Services		90837	CPT	PSYCHOTHERAPY, 60 MINS
XOHANA	Q3 2025	Rehab Services		90853	CPT	GROUP PSYCHOTHERAPY (OTHER THAN OF A MULTIPLE-FAMILY GROUP)
XOHANA	Q3 2025	Rehab Services		90869	CPT	THERAPEUTIC REPETITIVE TRANSCRANIAL MAGNETIC STIMULATION (TMS) TREATMENT; SUBSEQUENT MOTOR THRESHOLD RE-DETERMINATION WITH DELIVER
XOHANA	Q3 2025	Rehab Services		90899	CPT	UNLISTED PSYCHIATRIC SERVICE OR PROCEDURE
XOHANA	Q3 2025	Rehab Services	92507		CPT	TREATMENT OF SPEECH, LANGUAGE, VOICE, COMMUNICATION, AND/OR AUDITORY PROCESSING DISORDER; INDIVIDUAL
XOHANA	Q3 2025	Rehab Services		92508	CPT	TREATMENT OF SPEECH, LANGUAGE, VOICE, COMMUNICATION, AND/OR AUDITORY PROCESSING DISORDER; GROUP, 2 OR MORE INDIVIDUALS
XOHANA	Q3 2025	Rehab Services		92521	CPT	EVALUATION OF SPEECH FLUENCY (EG, STUTTERING, CLUTTERING)
XOHANA	Q3 2025	Rehab Services		92522	CPT	EVALUATION OF SPEECH SOUND PRODUCTION (EG, ARTICULATION, PHONOLOGICAL PROCESS, APRAXIA, DYSARTHRIA);
XOHANA	Q3 2025	Rehab Services		92523	CPT	EVALUATION OF SPEECH SOUND PRODUCTION (EG, ARTICULATION, PHONOLOGICAL PROCESS, APRAXIA, DYSARTHRIA); WITH EVALUATION OF LANGUAGE C
XOHANA	Q3 2025	Rehab Services		92524	CPT	BEHAVIORAL AND QUALITATIVE ANALYSIS OF VOICE AND RESONANCE
XOHANA	Q3 2025	Rehab Services	92526		CPT	TREATMENT OF SWALLOWING DYSFUNCTION AND/OR ORAL FUNCTION FOR FEEDING
XOHANA	Q3 2025	Rehab Services		92597	CPT	EVALUATION FOR USE AND/OR FITTING OF VOICE PROSTHETIC DEVICE TO SUPPLEMENT ORAL SPEECH
XOHANA	Q3 2025	Rehab Services		92607	CPT	EVALUATION FOR PRESCRIPTION FOR SPEECH-GENERATING AUGMENTATIVE AND ALTERNATIVE COMMUNICATION DEVICE, FACE-TO-FACE WITH THE
XOHANA	Q3 2025	Rehab Services		92608	CPT	EVALUATION FOR PRESCRIPTION FOR SPEECH-GENERATING AUGMENTATIVE AND ALTERNATIVE COMMUNICATION DEVICE, FACE-TO-FACE WITH THE
XOHANA	Q3 2025	Rehab Services		92609	CPT	THERAPEUTIC SERVICES FOR THE USE OF SPEECH-GENERATING DEVICE, INCLUDING PROGRAMMING AND MODIFICATION
XOHANA	Q3 2025	Rehab Services		92610	CPT	EVALUATION OF ORAL AND PHARYNGEAL SWALLOWING FUNCTION
XOHANA	Q3 2025	Rehab Services		92612	CPT	FLEXIBLE FIBEROPTIC ENDOSCOPIC EVALUATION OF SWALLOWING BY CINE OR VIDEO RECORDING;
XOHANA	Q3 2025	Rehab Services		92626	CPT	EVALUATION OF AUDITORY FUNCTION FOR SURGICALLY IMPLANTED DEVICE(S) CANDIDACY OR POSTOPERATIVE STATUS OF A SURGICALLY IMPLANTED DEVICE(S); FIRST HOUR
XOHANA	Q3 2025	Rehab Services		92627	CPT	EVALUATION OF AUDITORY FUNCTION FOR SURGICALLY IMPLANTED DEVICE(S) CANDIDACY OR POSTOPERATIVE STATUS OF A SURGICALLY IMPLANTED DEVICE(S); EACH ADDITIONAL 15
XOHANA	Q3 2025	Rehab Services	92630		CPT	AUDITORY REHABILITATION; PRELINGUAL HEARING LOSS
XOHANA	Q3 2025	Rehab Services	93798		CPT	PHYSICIAN SERVICES FOR OUTPATIENT CARDIAC REHABILITATION; WITH CONTINUOUS ECG MONITORING (PER SESSION)
XOHANA	Q3 2025	Rehab Services		96105	CPT	ASSESSMENT OF APHASIA (INCLUDES ASSESSMENT OF EXPRESSIVE AND RECEPTIVE SPEECH AND LANGUAGE FUNCTION, LANGUAGE COMPREHENSIO
XOHANA	Q3 2025	Rehab Services	96900		CPT	ACTINOTHERAPY (ULTRAVIOLET LIGHT)
XOHANA	Q3 2025	Rehab Services		97010	CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; HOT OR COLD PACKS
XOHANA	Q3 2025	Rehab Services		97012	CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; TRACTION, MECHANICAL
XOHANA	Q3 2025	Rehab Services	97014		CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; ELECTRICAL STIMULATION (UNATTENDED)
XOHANA	Q3 2025	Rehab Services		97016	CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; VASOPNEUMATIC DEVICES
XOHANA	Q3 2025	Rehab Services		97018	CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; PARAFFIN BATH
XOHANA	Q3 2025	Rehab Services		97022	CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; WHIRLPOOL
XOHANA	Q3 2025	Rehab Services		97024	CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; DIATHERMY (EG, MICROWAVE)
XOHANA	Q3 2025	Rehab Services		97026	CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; INFRARED
XOHANA	Q3 2025	Rehab Services		97032	CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; ELECTRICAL STIMULATION (MANUAL), EACH 15 MINUTES
XOHANA	Q3 2025	Rehab Services		97033	CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; IONTOPHORESIS, EACH 15 MINUTES
XOHANA	Q3 2025	Rehab Services		97034	CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; CONTRAST BATHS, EACH 15 MINUTES
XOHANA	Q3 2025	Rehab Services		97035	CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; ULTRASOUND, EACH 15 MINUTES
XOHANA	Q3 2025	Rehab Services		97036	CPT	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; HUBBARD TANK, EACH 15 MINUTES
XOHANA	Q3 2025	Rehab Services		97039	CPT	UNLISTED MODALITY (SPECIFY TYPE AND TIME IF CONSTANT ATTENDANCE)
XOHANA	Q3 2025	Rehab Services		97059	CPT	Missing
XOHANA	Q3 2025	Rehab Services		97100	CPT	Missing
XOHANA	Q3 2025	Rehab Services		97102	CPT	Missing
XOHANA	Q3 2025	Rehab Services		97104	CPT	Missing
XOHANA	Q3 2025	Rehab Services	97110		CPT	UNDER PHYSICAL MEDICINE AND REHABILITATION THERAPEUTIC PROCEDURES
XOHANA	Q3 2025	Rehab Services		97112	CPT	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; NEUROMUSCULAR REEDUCATION OF MOVEMENT, BALANCE, COORDINATION, K
XOHANA	Q3 2025	Rehab Services		97113	CPT	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; AQUATIC THERAPY WITH THERAPEUTIC EXERCISES
XOHANA	Q3 2025	Rehab Services		97115	CPT	Missing
XOHANA	Q3 2025	Rehab Services		97116	CPT	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; GAIT TRAINING (INCLUDES STAIR CLIMBING)
XOHANA	Q3 2025	Rehab Services		97124	CPT	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; MASSAGE, INCLUDING EFFLEURAGE, PETRISSAGE AND/OR TAPOTEMENT (ST
XOHANA	Q3 2025	Rehab Services		97129	CPT	THERAPEUTIC INTERVENTIONS THAT FOCUS ON COGNITIVE FUNCTION (EG, ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCT
XOHANA	Q3 2025	Rehab Services		97130	CPT	THERAPEUTIC INTERVENTIONS THAT FOCUS ON COGNITIVE FUNCTION (EG, ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCT
XOHANA	Q3 2025	Rehab Services		97139	CPT	UNLISTED THERAPEUTIC PROCEDURE (SPECIFY)
XOHANA	Q3 2025	Rehab Services		97140	CPT	MANUAL THERAPY TECHNIQUES (EG, MOBILIZATION/ MANIPULATION, MANUAL LYMPHATIC DRAINAGE, MANUAL TRACTION), ONE OR MORE REGION
XOHANA	Q3 2025	Rehab Services		97150	CPT	THERAPEUTIC PROCEDURE(S), GROUP (2 OR MORE INDIVIDUALS)
XOHANA	Q3 2025	Rehab Services		97152	CPT	BEHAVIOR IDENTIFICATION-SUPPORTING ASSESSMENT, ADMINISTERED BY ONE TECHNICIAN UNDER THE DIRECTION OF A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSION
XOHANA	Q3 2025	Rehab Services		97155	CPT	ADAPTIVE BEHAVIOR TREATMENT WITH PROTOCOL MODIFICATION, ADMINISTERED BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, WHICH MAY INCLUDE SIMULTAN
XOHANA	Q3 2025	Rehab Services		97156	CPT	FAMILY ADAPTIVE BEHAVIOR TREATMENT GUIDANCE, ADMINISTERED BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL (WITH OR WITHOUT THE PATIENT PRESENT), FAC
XOHANA	Q3 2025	Rehab Services		97160	CPT	Missing
XOHANA	Q3 2025	Rehab Services		97164	CPT	RE-EVALUATION OF PHYSICAL THERAPY ESTABLISHED PLAN OF CARE, REQUIRING THESE COMPONENTS: AN EXAMINATION INCLUDING A REVIEW OF HISTORY AND USE OF STANDARDIZ
XOHANA	Q3 2025	Rehab Services		97165	CPT	OCCUPATIONAL THERAPY EVALUATION, LOW COMPLEXITY, REQUIRING THESE COMPONENTS: AN OCCUPATIONAL PROFILE AND MEDICAL AND THERAPY HISTORY, WHICH INCLUDES A
XOHANA	Q3 2025	Rehab Services		97166	CPT	OCCUPATIONAL THERAPY EVALUATION, MODERATE COMPLEXITY, REQUIRING THESE COMPONENTS: AN OCCUPATIONAL PROFILE AND MEDICAL AND THERAPY HISTORY, WHICH INCLU
XOHANA	Q3 2025	Rehab Services		97171	CPT	RE-EVALUATION OF ATHLETIC TRAINING ESTABLISHED PLAN OF CARE REQUIRING THESE COMPONENTS: AN ASSESSMENT OF PATIENT'S CURRENT FUNCTIONAL STATUS WHEN THERE IS
XOHANA	Q3 2025	Rehab Services		97187	CPT	Missing
XOHANA	Q3 2025	Rehab Services		97430	CPT	Missing
XOHANA	Q3 2025	Rehab Services		97512	CPT	Missing
XOHANA	Q3 2025	Rehab Services		97530	CPT	THERAPEUTIC ACTIVITIES, DIRECT (ONE-ON-ONE) PATIENT CONTACT BY THE PROVIDER (USE OF DYNAMIC ACTIVITIES TO IMPROVE FUNCTION
XOHANA	Q3 2025	Rehab Services		97533	CPT	SENSORY INTEGRATIVE TECHNIQUES TO ENHANCE SENSORY PROCESSING AND PROMOTE ADAPTIVE RESPONSES TO ENVIRONMENTAL DEMANDS, DIRE
XOHANA	Q3 2025	Rehab Services	97535		CPT	SELF-CARE/HOME MANAGEMENT TRAINING (EG, ACTIVITIES OF DAILY LIVING (ADL) AND COMPENSATORY TRAINING, MEAL PREPARATION, SAFE
XOHANA	Q3 2025	Rehab Services		97536	CPT	Missing
XOHANA	Q3 2025	Rehab Services		97537	CPT	COMMUNITY/WORK REINTEGRATION TRAINING (EG, SHOPPING, TRANSPORTATION, MONEY MANAGEMENT, AVOCATIONAL ACTIVITIES AND/OR WORK
XOHANA	Q3 2025	Rehab Services		97542	CPT	WHEELCHAIR MANAGEMENT (EG, ASSESSMENT, FITTING, TRAINING), EACH 15 MINUTES
XOHANA	Q3 2025	Rehab Services		97580	CPT	Missing
XOHANA	Q3 2025	Rehab Services		97663	CPT	Missing

XOHANA	Q3 2025	Rehab Services		97716 CPT	Missing
XOHANA	Q3 2025	Rehab Services		97750 CPT	PHYSICAL PERFORMANCE TEST OR MEASUREMENT (EG, MUSCULOSKELETAL, FUNCTIONAL CAPACITY), WITH WRITTEN REPORT, EACH 15 MINUTES
XOHANA	Q3 2025	Rehab Services		97755 CPT	ASSISTIVE TECHNOLOGY ASSESSMENT (EG, TO RESTORE, AUGMENT OR COMPENSATE FOR EXISTING FUNCTION, OPTIMIZE FUNCTIONAL TASKS AN
XOHANA	Q3 2025	Rehab Services		97760 CPT	ORTHOTIC(S) MANAGEMENT AND TRAINING (INCLUDING ASSESSMENT AND FITTING WHEN NOT OTHERWISE REPORTED), UPPER EXTREMITY(IES), LOWER EXTREMITY(IES) AND/OR TRUNK
XOHANA	Q3 2025	Rehab Services		97761 CPT	PROSTHETIC(S) TRAINING, UPPER AND/OR LOWER EXTREMITY(IES), INITIAL PROSTHETIC(S) ENCOUNTER, EACH 15 MINUTES
XOHANA	Q3 2025	Rehab Services		97763 CPT	ORTHOTIC(S)/PROSTHETIC(S) MANAGEMENT AND/OR TRAINING, UPPER EXTREMITY(IES), LOWER EXTREMITY(IES), AND/OR TRUNK, SUBSEQUENT ORTHOTIC(S)/PROSTHETIC(S) ENCOUNT
XOHANA	Q3 2025	Rehab Services	99499	CPT	UNLISTED EVALUATION AND MANAGEMENT SERVICE
XOHANA	Q3 2025	Rehab Services	A6509	HCPCS	COMPRESSION BURN GARMENT, UPPER TRUNK TO WAIST INCLUDING ARM OPENINGS (VEST), CUSTOM FABRICATED
XOHANA	Q3 2025	Rehab Services	A9606	HCPCS	RADIUM RA-223 DICHLORIDE, THERAPEUTIC, PER MICROCURIE
XOHANA	Q3 2025	Rehab Services	E0110	HCPCS	CRUTCHES, FOREARM, INCLUDES CRUTCHES OF VARIOUS MATERIALS, ADJUSTABLE OR FIXED, PAIR, COMPLETE WITH TIPS AND HANDGRIPS
XOHANA	Q3 2025	Rehab Services	G0281	HCPCS	ELECTRICAL STIMULATION, (UNATTENDED), TO ONE OR MORE AREAS, FOR CHRONIC STAGE III AND STAGE IV PRESSURE ULCERS, ARTERIAL ULCERS,
XOHANA	Q3 2025	Rehab Services	G0282	HCPCS	ELECTRICAL STIMULATION, (UNATTENDED), TO ONE OR MORE AREAS, FOR WOUND CARE OTHER THAN DESCRIBED IN G0281
XOHANA	Q3 2025	Rehab Services	G0327	HCPCS	COLORECTAL CANCER SCREENING BLOOD-BASED BIOMARK
XOHANA	Q3 2025	Rehab Services	G6004	HCPCS	RADIATION TREATMENT DELIVERY, SINGLE TREATMENT AREA,SINGLE PORT OR PARALLEL OPPOSED PORTS, SIMPLE BLOCKS OR NO BLOCKS: 6-10MEV
XOHANA	Q3 2025	Rehab Services	G6008	HCPCS	RADIATION TREATMENT DELIVERY, 2 SEPARATE TREATMENT AREAS, 3 OR MORE PORTS ON A SINGLE TREATMENT AREA, USE OF MULTIPLE BLOCKS: 6-10MEV
XOHANA	Q3 2025	Rehab Services	G6011	HCPCS	RADIATION TREATMENT DELIVERY,3 OR MORE SEPARATE TREATMENT AREAS, CUSTOM BLOCKING, TANGENTIAL PORTS, WEDGES, ROTATIONAL BEAM, COMPENSATORS, ELECTRON BEAN
XOHANA	Q3 2025	Rehab Services	G6012	HCPCS	RADIATION TREATMENT DELIVERY,3 OR MORE SEPARATE TREATMENT AREAS, CUSTOM BLOCKING, TANGENTIAL PORTS, WEDGES, ROTATIONAL BEAM, COMPENSATORS, ELECTRON BEAN
XOHANA	Q3 2025	Rehab Services	G6013	HCPCS	RADIATION TREATMENT DELIVERY,3 OR MORE SEPARATE TREATMENT AREAS, CUSTOM BLOCKING, TANGENTIAL PORTS, WEDGES, ROTATIONAL BEAM, COMPENSATORS, ELECTRON BEAN
XOHANA	Q3 2025	Rehab Services	G6014	HCPCS	RADIATION TREATMENT DELIVERY,3 OR MORE SEPARATE TREATMENT AREAS, CUSTOM BLOCKING, TANGENTIAL PORTS, WEDGES, ROTATIONAL BEAM, COMPENSATORS, ELECTRON BEAN
XOHANA	Q3 2025	Rehab Services	G6015	HCPCS	INTENSITY MODULATED TREATMENT DELIVERY, SINGLE OR MULTIPLE FIELDS/ARCS,VIA NARROW SPATIALLY AND TEMPORALLY MODULATED BEAMS, BINARY, DYNAMIC MLC, PER TREATM
XOHANA	Q3 2025	Rehab Services	G9763	HCPCS	PATHOLOGY RPT DIAGNOSING CUTANEOUS BASAL CELL CARCINOMA OR SQUAMOUS CELL CARCINOMA (TO INCLUDE IN SITU DISEASE) SENT
XOHANA	Q3 2025	Rehab Services	H0020	HCPCS	ALCOHOL AND/OR DRUG SERVICES; METHADONE ADMINISTRATION AND/OR SERVICE (PROVISION OF THE DRUG BY A LICENSED PROGRAM)
XOHANA	Q3 2025	Rehab Services	H0046	HCPCS	MENTAL HEALTH SERVICES, NOT OTHERWISE SPECIFIED
XOHANA	Q3 2025	Rehab Services	H2038	HCPCS	SKILLS TRAINING AND DEVELOPMENT PER DIEM
XOHANA	Q3 2025	Rehab Services	L3935	HCPCS	FINGER ORTHOTIC, NONTORSION JOINT, MAY INCLUDE SOFT INTERFACE, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT
XOHANA	Q3 2025	Rehab Services	T1013	HCPCS	SIGN LANGUAGE OR ORAL INTERPRETIVE SERVICES, PER 15 MINUTES
XOHANA	Q3 2025	Transport Services	A0021	HCPCS	AMBULANCE SERVICE, OUTSIDE STATE PER MILE, TRANSPORT (MEDICAID ONLY)
XOHANA	Q3 2025	Transport Services	A0100	HCPCS	NON-EMERGENCY TRANSPORTATION; TAXI
XOHANA	Q3 2025	Transport Services	A0110	HCPCS	NONEMERGENCY TRANSPORTATION AND BUS, INTRA- OR INTERSTATE CARRIER
XOHANA	Q3 2025	Transport Services	A0140	HCPCS	NONEMERGENCY TRANSPORTATION AND AIR TRAVEL (PRIVATE OR COMMERCIAL), INTRA- OR INTERSTATE
XOHANA	Q3 2025	Transport Services	A0180	HCPCS	NONEMERGENCY TRANSPORTATION: ANCILLARY: LODGING - RECIPIENT
XOHANA	Q3 2025	Transport Services	A0190	HCPCS	NONEMERGENCY TRANSPORTATION: ANCILLARY: MEALS - RECIPIENT
XOHANA	Q3 2025	Transport Services	A0200	HCPCS	NONEMERGENCY TRANSPORTATION: ANCILLARY: LODGING - ESCORT
XOHANA	Q3 2025	Transport Services	A0210	HCPCS	NONEMERGENCY TRANSPORTATION: ANCILLARY: MEALS - ESCORT
XOHANA	Q3 2025	Transport Services	A0431	HCPCS	AMBULANCE SERVICE, CONVENTIONAL AIR SERVICES, TRANSPORT, ONE WAY (ROTARY WING)
XOHANA	Q3 2025	Transport Services	T2001	HCPCS	NONEMERGENCY TRANSPORTATION; PATIENT ATTENDANT/ESCORT
XOHANA	Q3 2025	Transport Services	T2005	HCPCS	NONEMERGENCY TRANSPORTATION; STRETCHER VAN
OHANAA	Q3 2025	Outpatient Hosp	C8005	HCPCS	BRONCH RGD/FLEX NON THRM TRANSBRON ABL LES PEF E
OHANAA	Q3 2025	Other	C9301	HCPCS	OBECABTAGENE AUTOLEUCEL POS T CELLS Q THER D
OHANAA	Q3 2025	Other	C9302	HCPCS	INJECTION ZANIDATAMAB HRII 2 MG
OHANAA	Q3 2025	Other	C9303	HCPCS	INJECTION ZOLBETUXIMAB CLZB 1 MG
OHANAA	Q3 2025	Other	C9304	HCPCS	INJECTION MARSTACIMAB HNCQ 0.5 MG
OHANAA	Q3 2025	Other	J1072	HCPCS	INJECTION TESTOSTERONE CYPIONATE AZMIRO 1 MG
OHANAA	Q3 2025	Other	J1299	HCPCS	INJECTION ECULIZUMAB 2 MG
OHANAA	Q3 2025	Other	J2351	HCPCS	INJECTION OCRELIZUMAB 1 MG & HYALURONIDASE OCSQ
OHANAA	Q3 2025	Other	J2428	HCPCS	INJECTION PALIPERIDONE PAL EXT REL ERZOFRI 1 MG
OHANAA	Q3 2025	Other	J7521	HCPCS	TACROLIMUS GRANULES ORAL SUSPENSION 0.1 MG
OHANAA	Q3 2025	Other	J9024	HCPCS	INJECTION ATEZOLIZUMAB 5 MG & HYALURONIDASE TQJS
OHANAA	Q3 2025	Other	J9038	HCPCS	INJECTION AXATILIMAB CSFR 0.1 MG
OHANAA	Q3 2025	Other	J9054	HCPCS	INJECTION BORTEZOMIB BORUZU 0.1 MG
OHANAA	Q3 2025	Other	J9161	HCPCS	INJECTION DENILEUKIN DIFTITOX CXDL 1 MCG
OHANAA	Q3 2025	Other	Q5147	HCPCS	INJECTION AFLIBERCEPT AYYH PAVBLU BS 1 MG
OHANAA	Q3 2025	Other	Q5148	HCPCS	INJECTION FILGRASTIM TXID NYPOZI BS 1 MCG
OHANAA	Q3 2025	Other	Q5149	HCPCS	INJECTION AFLIBERCEPT ABZV ENZEEVU BS 1 MG
OHANAA	Q3 2025	Other	Q5150	HCPCS	INJECTION AFLIBERCEPT MRBB AHZANTIVE BS 1 MG
OHANAA	Q3 2025	Other	Q5151	HCPCS	INJECTION ECULIZUMAB AAGH EPYSQLI BS 2 MG
OHANAA	Q3 2025	Other	Q5152	HCPCS	INJECTION ECULIZUMAB AEEB BKEMV BIOSIMILAR 2 MG
OHANAA	Q3 2025	Other	Q9999	HCPCS	INJECTION USTEKINUMAB AAUZ OTULFI BS 1 MG
OHANAA	Q3 2025	Diagnostic Testing	0531U	CPT	NFCT DS AFB AND INVAS FUNGI DNA 673 ORGS NGS PLASMA
OHANAA	Q3 2025	Diagnostic Testing	0532U	CPT	RARE DS RAPID WHL GEN AND MITOCHDRL DNA SEQ SNV SLV
OHANAA	Q3 2025	Diagnostic Testing	0533U	CPT	RX METAB ADVRS RX RXN AND RSPSE GNOTYP 16 GENES
OHANAA	Q3 2025	Diagnostic Testing	0534U	CPT	ONC PRST8 MIRNA SNP ALYS RT-PCR 32VRNT BUCC SWAB
OHANAA	Q3 2025	Diagnostic Testing	0536U	CPT	RBC AG FETAL RHD PCR ALYS EXON 4 RHD GENE AND GAPDH
OHANAA	Q3 2025	Diagnostic Testing	0537U	CPT	ONC CLRCT CA ALYS CFDNA EPIG PTRN NGS >2500 DMR
OHANAA	Q3 2025	Diagnostic Testing	0538U	CPT	ONC SOLID TUM NGTS ALYS FFPE DNA ALYS 600 GENES
OHANAA	Q3 2025	Diagnostic Testing	0539U	CPT	ONC SOLID TUMOR CFCTDNA 152 GEN NGS INTERROG SNV
OHANAA	Q3 2025	Diagnostic Testing	0540U	CPT	TRNSPLJ MEDICINE QUAN DD-CFDNA NGS ALYS PLASMA
OHANAA	Q3 2025	Diagnostic Testing	0543U	CPT	ONC SOL TUM NGS DNA FFPE TISS 517GEN INTEROG SNV
OHANAA	Q3 2025	Diagnostic Testing	0544U	CPT	NEFRO TRANSPLANT MNTR 48 VRNTS DPCR CFDNA PLASMA
OHANAA	Q3 2025	Diagnostic Testing	0549U	CPT	ONC URTHL DNA QUAN MTHYLTD RT PCR TRNA-CYS SIM2
XOHANA	Q3 2025	Outpatient Hosp	C8005	HCPCS	BRONCH RGD/FLEX NON THRM TRANSBRON ABL LES PEF E
XOHANA	Q3 2025	Other	C9301	HCPCS	OBECABTAGENE AUTOLEUCEL POS T CELLS Q THER D
XOHANA	Q3 2025	Other	C9302	HCPCS	INJECTION ZANIDATAMAB HRII 2 MG
XOHANA	Q3 2025	Other	C9303	HCPCS	INJECTION ZOLBETUXIMAB CLZB 1 MG
XOHANA	Q3 2025	Other	C9304	HCPCS	INJECTION MARSTACIMAB HNCQ 0.5 MG
XOHANA	Q3 2025	Other	J1072	HCPCS	INJECTION TESTOSTERONE CYPIONATE AZMIRO 1 MG
XOHANA	Q3 2025	Other	J1299	HCPCS	INJECTION ECULIZUMAB 2 MG
XOHANA	Q3 2025	Other	J2351	HCPCS	INJECTION OCRELIZUMAB 1 MG & HYALURONIDASE OCSQ
XOHANA	Q3 2025	Other	J2428	HCPCS	INJECTION PALIPERIDONE PAL EXT REL ERZOFRI 1 MG
XOHANA	Q3 2025	Other	J7521	HCPCS	TACROLIMUS GRANULES ORAL SUSPENSION 0.1 MG
XOHANA	Q3 2025	Other	J9024	HCPCS	INJECTION ATEZOLIZUMAB 5 MG & HYALURONIDASE TQJS
XOHANA	Q3 2025	Other	J9038	HCPCS	INJECTION AXATILIMAB CSFR 0.1 MG
XOHANA	Q3 2025	Other	J9054	HCPCS	INJECTION BORTEZOMIB BORUZU 0.1 MG
XOHANA	Q3 2025	Other	J9161	HCPCS	INJECTION DENILEUKIN DIFTITOX CXDL 1 MCG
XOHANA	Q3 2025	Other	Q5147	HCPCS	INJECTION AFLIBERCEPT AYYH PAVBLU BS 1 MG
XOHANA	Q3 2025	Other	Q5148	HCPCS	INJECTION FILGRASTIM TXID NYPOZI BS 1 MCG
XOHANA	Q3 2025	Other	Q5149	HCPCS	INJECTION AFLIBERCEPT ABZV ENZEEVU BS 1 MG
XOHANA	Q3 2025	Other	Q5150	HCPCS	INJECTION AFLIBERCEPT MRBB AHZANTIVE BS 1 MG
XOHANA	Q3 2025	Other	Q5151	HCPCS	INJECTION ECULIZUMAB AAGH EPYSQLI BS 2 MG
XOHANA	Q3 2025	Other	Q5152	HCPCS	INJECTION ECULIZUMAB AEEB BKEMV BIOSIMILAR 2 MG
XOHANA	Q3 2025	Other	Q9999	HCPCS	INJECTION USTEKINUMAB AAUZ OTULFI BS 1 MG
XOHANA	Q3 2025	Diagnostic Testing	0531U	CPT	NFCT DS AFB AND INVAS FUNGI DNA 673 ORGS NGS PLASMA
XOHANA	Q3 2025	Diagnostic Testing	0532U	CPT	RARE DS RAPID WHL GEN AND MITOCHDRL DNA SEQ SNV SLV
XOHANA	Q3 2025	Diagnostic Testing	0533U	CPT	RX METAB ADVRS RX RXN AND RSPSE GNOTYP 16 GENES
XOHANA	Q3 2025	Diagnostic Testing	0534U	CPT	ONC PRST8 MIRNA SNP ALYS RT-PCR 32VRNT BUCC SWAB
XOHANA	Q3 2025	Diagnostic Testing	0536U	CPT	RBC AG FETAL RHD PCR ALYS EXON 4 RHD GENE AND GAPDH
XOHANA	Q3 2025	Diagnostic Testing	0537U	CPT	ONC CLRCT CA ALYS CFDNA EPIG PTRN NGS >2500 DMR
XOHANA	Q3 2025	Diagnostic Testing	0538U	CPT	ONC SOLID TUM NGTS ALYS FFPE DNA ALYS 600 GENES

XOHANA	Q3 2025	Diagnostic Testing	0539U	CPT	ONC SOLID TUMOR CFCTDNA 152 GEN NGS INTERROG SNV
XOHANA	Q3 2025	Diagnostic Testing	0540U	CPT	TRNSPLJ MEDICINE QUAN DD-CFDNA NGS ALYS PLASMA
XOHANA	Q3 2025	Diagnostic Testing	0543U	CPT	ONC SOL TUM NGS DNA FFPE TISS 517GEN INTEROG SNV
XOHANA	Q3 2025	Diagnostic Testing	0544U	CPT	NEFRO TRANSPLANT MNTR 48 VRNTS DPCR CFDNA PLASMA
XOHANA	Q3 2025	Diagnostic Testing	0549U	CPT	ONC URTHL DNA QUAN MTHYLTD RT PCR TRNA-CYS SIM2

CY 2025 Metric	Aggregate Result
Total standard prior authorizations requests received	106,368
Total expedited prior authorization requests received	17,163
Total standard and expedited prior authorization requests received	123,531
Percentage of standard prior authorization requests that were approved	92.28%
Percentage of standard prior authorization requests that were denied	7.72%
Percentage of standard prior authorization requests approved after appeal	0.07%
Average time to decision for standard prior authorizations	4 days
Median time to decision on standard prior authorizations	1 day
Percentage of expedited prior authorization requests that were approved	97.90%
Percentage of expedited prior authorization requests that were denied	2.10%
Average time to decision for expedited prior authorizations	16 hours
Median time to decision for expedited prior authorizations	5 hours
Percentage of total prior authorization requests approved with extended timeframe	0.67%

Please note that the aggregate results slightly differ from the totals displayed on the webpage due to the inclusion of Med-QUEST Fee for Service (FFS) prior authorization (PA) data. The FFS PA data counts do not meet the threshold to be reported separately.

HP_ID	Year_Qtr	Service_Category	Procedure_Code	Procedure_Code_Type	Proc_Code_Description	Proc_Code_Change	New_Proc_Code
UNITED	Q3 2025	At Risk Services	S5105	HCPCS	DAY CARE SRVC CENTER-BASED; SRVC NOT W/PROGM FEE	N	NA
UNITED	Q3 2025	At Risk Services	S5125	HCPCS	ATTENDANT CARE SERVICES; PER 15 MINUTES	N	NA
UNITED	Q3 2025	At Risk Services	S5130	HCPCS	HOMEMAKER SERVICE NOS; PER 15 MINUTES	N	NA
UNITED	Q3 2025	At Risk Services	S5161	HCPCS	EMERGENCY RESPONSE SYSTEM; SERVICE FEE PER MONTH	N	NA
UNITED	Q3 2025	At Risk Services	S5170	HCPCS	HOME DELIV MEALS INCLUDING PREPARATION; PER MEAL	N	NA
UNITED	Q3 2025	At Risk Services	S9122	HCPCS	HOM HLTH AIDE/CERT NURSE ASST PROV CARE HOM;-HR	N	NA
UNITED	Q3 2025	At Risk Services	S9123	HCPCS	NURSING CARE THE HOME; REGISTERED NURSE PER HOUR	N	NA
UNITED	Q3 2025	At Risk Services	S9124	HCPCS	NURSING CARE IN THE HOME; BY LPN PER HOUR	N	NA
UNITED	Q3 2025	Behavioral Health	90846	CPT	FAMILY PSYTX W/O PT 50 MIN	N	NA
UNITED	Q3 2025	Behavioral Health	90847	CPT	FAMILY PSYTX W/PT 50 MIN	N	NA
UNITED	Q3 2025	Behavioral Health	99214	CPT	OFFICE O/P EST MOD 30 MIN	N	NA
UNITED	Q3 2025	Behavioral Health	1002	HCPCS	NON-ACUTE RESIDENTIAL TREATMENT FOR SUBSTANCE USE DISORDERS	N	NA
UNITED	Q3 2025	Behavioral Health	124	REV CODE	ROOM AND BOARD - PSYCHIATRIC CARE, SEMI-PRIVATE	N	NA
UNITED	Q3 2025	Behavioral Health	126	REV CODE	ROOM AND BOARD - PSYCHIATRIC CARE, WARD (3+ BEDS)	N	NA
UNITED	Q3 2025	Behavioral Health	90791	CPT	PSYCH DIAGNOSTIC EVALUATION	N	NA
UNITED	Q3 2025	Behavioral Health	90792	CPT	PSYCH DIAG EVAL W/MED SRVCS	N	NA
UNITED	Q3 2025	Behavioral Health	90832	CPT	PSYTX W PT 30 MINUTES	N	NA
UNITED	Q3 2025	Behavioral Health	90833	CPT	PSYTX W PT W E/M 30 MIN	N	NA
UNITED	Q3 2025	Behavioral Health	90834	CPT	PSYTX W PT 45 MINUTES	N	NA
UNITED	Q3 2025	Behavioral Health	90836	CPT	PSYTX W PT W E/M 45 MIN	N	NA
UNITED	Q3 2025	Behavioral Health	90837	CPT	PSYTX W PT 60 MINUTES	N	NA
UNITED	Q3 2025	Behavioral Health	96130	CPT	PSYCL TST EVAL PHYS/QHP 1ST	N	NA
UNITED	Q3 2025	Behavioral Health	96131	CPT	PSYCL TST EVAL PHYS/QHP EA	N	NA
UNITED	Q3 2025	Behavioral Health	96136	CPT	PSYCL/NRPSYC TST PHY/QHP 1ST	N	NA
UNITED	Q3 2025	Behavioral Health	96137	CPT	PSYCL/NRPSYC TST PHY/QHP EA	N	NA
UNITED	Q3 2025	Behavioral Health	97153	CPT	ADAPTIVE BEHAVIOR TX BY TECH	N	NA
UNITED	Q3 2025	Behavioral Health	97154	CPT	GRP ADAPT BHV TX BY TECH	N	NA
UNITED	Q3 2025	Behavioral Health	97155	CPT	ADAPT BEHAVIOR TX PHYS/QHP	N	NA
UNITED	Q3 2025	Behavioral Health	97156	CPT	FAM ADAPT BHV TX GDN PHY/QHP	N	NA
UNITED	Q3 2025	Behavioral Health	97158	CPT	GRP ADAPT BHV TX BY PHY/QHP	N	NA
UNITED	Q3 2025	Behavioral Health	99213	CPT	OFFICE O/P EST LOW 20 MIN	N	NA
UNITED	Q3 2025	Behavioral Health	H0015	HCPCS	ALCOHL&/RX SRVC; INTENSV OP; INTRVN	N	NA
UNITED	Q3 2025	Behavioral Health	H0020	HCPCS	ALCOHL&/RX SRVC;METHDONE ADMN&/SRVC	N	NA
UNITED	Q3 2025	Behavioral Health	H0035	HCPCS	MENTAL HEALTH PART HOSP TX < 24 HR	N	NA
UNITED	Q3 2025	Behavioral Health	S0201	HCPCS	PART HOSPITALIZATN SRVC<24 HR-DIEM	N	NA
UNITED	Q3 2025	Behavioral Health	S9480	HCPCS	INTENSIVE OP PSYC SERVICES PER DIEM	N	NA
UNITED	Q3 2025	Diagnostic Testing	0006M	CPT	ONCOLOGY HEP MRNA 161 GENES RISK CLASSIFIER	N	NA
UNITED	Q3 2025	Diagnostic Testing	0007M	CPT	ONCOLOGY GASTRO 51 GENES NOMOGRAM DISEASE INDEX	N	NA
UNITED	Q3 2025	Diagnostic Testing	0012U	CPT	GERMLN DO GENE REARGMT DETCJ DNA WHOLE BLOOD	N	NA
UNITED	Q3 2025	Diagnostic Testing	0013U	CPT	ONC SLD ORGN NEO GENE REARGMT DNA FRSH FRZN TISS	N	NA
UNITED	Q3 2025	Diagnostic Testing	0014U	CPT	HEM HMTLMF NEO GENE REARGMT DNA WHL BLD/MARROW	N	NA
UNITED	Q3 2025	Diagnostic Testing	0018U	CPT	ONC THYR 10 MICRORNA SEQ +/- RSLT MOD HI RSK MAL	N	NA
UNITED	Q3 2025	Diagnostic Testing	0022U	CPT	TGSAP NONSMALL CELL LUNG NEO DNA&RNA 23 GENES	N	NA
UNITED	Q3 2025	Diagnostic Testing	0023U	CPT	ONC AML DNA GNTYP INT TANDEM DUP DETCJ/NONDETCJ	N	NA
UNITED	Q3 2025	Diagnostic Testing	0026U	CPT	ONC THYR DNA&MRNA 112 GENES FNA NDUL ALG ALYS	N	NA
UNITED	Q3 2025	Diagnostic Testing	0055U	CPT	CARD HRT TRNSPL 96 TARGET DNA SEQUENCES PLASMA	N	NA
UNITED	Q3 2025	Diagnostic Testing	0060U	CPT	TWN ZYG GEN TRGT SEQ ALYS CHRMS2 FTL DNA MAT BLD	N	NA
UNITED	Q3 2025	Diagnostic Testing	0087U	CPT	CARD HRT TRNSPL MRNA GEN XPRS PRFL 1283 GENE ALG	N	NA
UNITED	Q3 2025	Diagnostic Testing	0088U	CPT	TRNSPLJ MED KDN ALGRFT REJ 1494 GENES ALG	N	NA
UNITED	Q3 2025	Diagnostic Testing	0097U	CPT	GI PTHGN MULT REV TRANS&AMP PRB TECH 22 TRGT	N	NA
UNITED	Q3 2025	Diagnostic Testing	0111U	CPT	ONCOLOGY COLON CANCER TRGT KRAS&NRAS GENE ALYS	N	NA
UNITED	Q3 2025	Diagnostic Testing	0129U	CPT	HEREDITARY BRST CA RLTD DO GEN SEQ&DEL/DUP PNL	N	NA
UNITED	Q3 2025	Diagnostic Testing	0154U	CPT	ONC UROTHELIAL CANCER RNA RT-PCR FGFR3 GENE ALYS	N	NA
UNITED	Q3 2025	Diagnostic Testing	0168U	CPT	FTL ANEUPLOIDY TRISOMY 21 18 13 DNA MAT PLSM ALG	N	NA
UNITED	Q3 2025	Diagnostic Testing	0170U	CPT	NEURO ASD RNA NEXT-GNRJ SEQ SALIVA ALG ALYS	N	NA
UNITED	Q3 2025	Diagnostic Testing	0171U	CPT	TARGETED GENOMIC SEQUENCE ALYS PNL DNA 23 GENES	N	NA
UNITED	Q3 2025	Diagnostic Testing	0172U	CPT	ONC SLD TUM SOMATIC MUT ALYS BRCA1 BRCA2 ALG	N	NA
UNITED	Q3 2025	Diagnostic Testing	0173U	CPT	PSYCHIATRY GEN ALYS PNL W/VARIANT ALYS 14 GENES	N	NA
UNITED	Q3 2025	Diagnostic Testing	0175U	CPT	PSYCHIATRY GEN ALYS PNL W/VARIANT ALYS 15 GENES	N	NA
UNITED	Q3 2025	Diagnostic Testing	0179U	CPT	ONC NONSM CLL LNG CA CELL FREE DNA ALYS 23 GEN	N	NA
UNITED	Q3 2025	Diagnostic Testing	0209U	CPT	CYTOG CONST ALYS INTERROG GEN REG F/COPY NUMBER	N	NA
UNITED	Q3 2025	Diagnostic Testing	0214U	CPT	RARE DS WHL XOM&MITOCHDRL DNA SEQ ALYS PROBAND	N	NA
UNITED	Q3 2025	Diagnostic Testing	0215U	CPT	RARE DS WHL XOM&MITOCHDRL DNA SEQ ALYS EA CMPRTR	N	NA
UNITED	Q3 2025	Diagnostic Testing	0216U	CPT	NEURO INH ATAXIA GENOMIC DNA SEQ ALYS 12 BLD/SLV	N	NA
UNITED	Q3 2025	Diagnostic Testing	0217U	CPT	NEURO INH ATAXIA GENOMIC DNA SEQ ALYS 51 BLD/SLV	N	NA
UNITED	Q3 2025	Diagnostic Testing	0218U	CPT	NEURO MUSCULAR DYSTROPHY DMD SEQ ALYS BLD/SALIVA	N	NA
UNITED	Q3 2025	Diagnostic Testing	0237U	CPT	CARDIAC ION CHANNELOPATHIES GENOMIC SEQ ALYS PNL	N	NA
UNITED	Q3 2025	Diagnostic Testing	0238U	CPT	ONC LYNCH SYNDROME GENOMIC DNA SEQUENCE ANALYSIS	N	NA
UNITED	Q3 2025	Diagnostic Testing	0245U	CPT	ONC THYR MUT ALYS 10 GEN 37 RNA FSN XPRSN 4 MRNA	N	NA
UNITED	Q3 2025	Diagnostic Testing	0250U	CPT	ONC SLD ORG NEO TRGT GEN SEQ DNA ALYS 505 GENES	N	NA
UNITED	Q3 2025	Diagnostic Testing	0252U	CPT	FTL ANEUPLOIDY STR CMPRTV ALYS FTL DNA PRDC CNCP	N	NA
UNITED	Q3 2025	Diagnostic Testing	0253U	CPT	REPRDTVE MED RNA 238 GEN NXT GEN SEQ ENDMT TISS	N	NA
UNITED	Q3 2025	Diagnostic Testing	0254U	CPT	REPRDTVE MED ALYS 24 CHRMSM EMBRY& MITOCHDRL DNA	N	NA
UNITED	Q3 2025	Diagnostic Testing	0258U	CPT	AI PSORIASIS MRNA GEN XPRSN PRFL 50-100 GEN ALG	N	NA
UNITED	Q3 2025	Diagnostic Testing	0260U	CPT	RARE DS ID VRTJ INVRJ INSJ TLCJ OPT GENOME MAPG	N	NA
UNITED	Q3 2025	Diagnostic Testing	0262U	CPT	ONC SOLID TUM GEN XPRSN PRFL RT-PCR 7 GEN PTHWY	N	NA
UNITED	Q3 2025	Diagnostic Testing	0264U	CPT	RARE DS ID VRTJ INVRJ INSJ TLCJ OPT GENOME MAPG	N	NA
UNITED	Q3 2025	Diagnostic Testing	0265U	CPT	RARE DO WHL GENOME& MITOCHDRL DNA SEQ ALYS	N	NA
UNITED	Q3 2025	Diagnostic Testing	0266U	CPT	UNXPLAIND CONST/OTH HERITABLE DO/SYND GEN XPRSN	N	NA
UNITED	Q3 2025	Diagnostic Testing	0267U	CPT	RARE DO ID VARIATIONS OPT GEN MAP&WHL GEN SEQ	N	NA
UNITED	Q3 2025	Diagnostic Testing	0268U	CPT	HEM ATYP HEMOLYTIC UREMC SYND GEN SEQ ALY 15 GEN	N	NA

UNITED	Q3 2025	Diagnostic Testing	0269U	CPT	HEM AUTO DOM CGEN THRMBCTPNA GEN SEQ ALYS 22 GEN	N	NA
UNITED	Q3 2025	Diagnostic Testing	0270U	CPT	HEM CGEN COAGJ DO GENOMIC SEQ ALYS 20 GENES	N	NA
UNITED	Q3 2025	Diagnostic Testing	0271U	CPT	HEM CGEN NEUTROPENIA GEN SEQ ALYS 24 GENES	N	NA
UNITED	Q3 2025	Diagnostic Testing	0272U	CPT	HEM GEN BLD DO GEN SEQ ALYS 60 GENE&DUP/DEL PLAU	N	NA
UNITED	Q3 2025	Diagnostic Testing	0273U	CPT	HEM GEN HYPRFIBRNLYSIS DLYD BLD ALYS 9 GEN	N	NA
UNITED	Q3 2025	Diagnostic Testing	0274U	CPT	HEM GEN PLTLT DO GEN SEQ ALY 62 GEN&DUP/DEL PLAU	N	NA
UNITED	Q3 2025	Diagnostic Testing	0276U	CPT	HEM INH THROMBOCYTOPENIA GEN SEQ ALYS 42 GENES	N	NA
UNITED	Q3 2025	Diagnostic Testing	0277U	CPT	HEM GEN PLTL FUNC DO GEN SEQ ALY 40&DUP/DEL PLAU	N	NA
UNITED	Q3 2025	Diagnostic Testing	0278U	CPT	HEM GEN THROMBOSIS GEN SEQ ALYS 14 GENES	N	NA
UNITED	Q3 2025	Diagnostic Testing	0282U	CPT	RBC DNA GNOTYP 12 BLD GRP PREDICT 44 RBC AG PHNT	N	NA
UNITED	Q3 2025	Diagnostic Testing	0285U	CPT	ONC DS PROG&RSPSE MNTR RADJ CHEMOTX/OTH CA TX	N	NA
UNITED	Q3 2025	Diagnostic Testing	0286U	CPT	CEP72 NUDT15&TPMT GENE ANALYSIS COMMON VARIANTS	N	NA
UNITED	Q3 2025	Diagnostic Testing	0287U	CPT	ONC THYR DNA&MRNA NEXT-GEN SEQ ALYS 112 GEN ALG	N	NA
UNITED	Q3 2025	Diagnostic Testing	0288U	CPT	ONC LUNG MRNA QUAN PCR ALYS 11 GEN&3 REF GEN ALG	N	NA
UNITED	Q3 2025	Diagnostic Testing	0289U	CPT	NEURO ALZHEIMER MRNA GEN XPRSN PRFL RNA SEQ 24	N	NA
UNITED	Q3 2025	Diagnostic Testing	0290U	CPT	PAIN MGMT MRNA GEN XPRSN PRFL RNA SEQ 36 GENES	N	NA
UNITED	Q3 2025	Diagnostic Testing	0291U	CPT	PSYC MOOD DO MRNA GEN XPRSN PRFL RNA SEQ 144 GEN	N	NA
UNITED	Q3 2025	Diagnostic Testing	0292U	CPT	PSYC STRS DO MRNA GEN XPRSN PRFL RNA SEQ 72 GEN	N	NA
UNITED	Q3 2025	Diagnostic Testing	0293U	CPT	PSYC SUICDL IDEA MRNA GEN XPRSN PRFL RNA SEQ 54	N	NA
UNITED	Q3 2025	Diagnostic Testing	0294U	CPT	LNGVTY&MRTLTY RSK MRNA GEN XPRSN PRFL RNA 18 GEN	N	NA
UNITED	Q3 2025	Diagnostic Testing	0296U	CPT	ONC ORL&/OROP CA GEN XPRSN PRFL RNA 20 MLEC FEAT	N	NA
UNITED	Q3 2025	Diagnostic Testing	0297U	CPT	ONC PAN TUM WHL GEN SEQ PAIRED MAL&NML DNA SPEC	N	NA
UNITED	Q3 2025	Diagnostic Testing	0298U	CPT	ONC PAN TUM WHL TRNS SEQ PAIRED MAL&NML RNA SPEC	N	NA
UNITED	Q3 2025	Diagnostic Testing	0299U	CPT	ONC PAN TUM WHL GEN OPT MAPG MAL&NML DNA SPEC	N	NA
UNITED	Q3 2025	Diagnostic Testing	0300U	CPT	ONC PAN TUM WHL GEN SEQ&OPT GEN MAPG MAL&NML DNA	N	NA
UNITED	Q3 2025	Diagnostic Testing	81162	CPT	BRCA1 BRCA2 GENE ALYS FULL SEQ FULL DUP/DEL ALYS	N	NA
UNITED	Q3 2025	Diagnostic Testing	81163	CPT	BRCA1 BRCA2 GENE ANALYSIS FULL SEQUENCE ANALYSIS	N	NA
UNITED	Q3 2025	Diagnostic Testing	81164	CPT	BRCA1 BRCA2 GENE ANALYSIS FULL DUP/DEL ANALYSIS	N	NA
UNITED	Q3 2025	Diagnostic Testing	81228	CPT	CYTOG ALYS CHRMOML ABNOR COPY NUMBER VRNT CGH	N	NA
UNITED	Q3 2025	Diagnostic Testing	81277	CPT	CYTOGENOMIC NEOPLASIA MICROARRAY ANALYSIS	N	NA
UNITED	Q3 2025	Diagnostic Testing	81349	CPT	CYTOG ALYS CHRMOML ABNOR LOW-PASS SEQ ALYS	N	NA
UNITED	Q3 2025	Diagnostic Testing	81402	CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 3	N	NA
UNITED	Q3 2025	Diagnostic Testing	81403	CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 4	N	NA
UNITED	Q3 2025	Diagnostic Testing	81407	CPT	MOLECULAR PATHOLOGY PROCEDURE LEVEL 8	N	NA
UNITED	Q3 2025	Diagnostic Testing	81410	CPT	AORTIC DYSFUNCTION/DILATION GENOMIC SEQ ANALYSIS	N	NA
UNITED	Q3 2025	Diagnostic Testing	81411	CPT	AORTIC DYSFUNCTION/DILATION DUP/DEL ANALYSIS	N	NA
UNITED	Q3 2025	Diagnostic Testing	81412	CPT	ASHKENAZI JEWISH ASSOC DSRDRS GEN SEQ ANAL 9 GEN	N	NA
UNITED	Q3 2025	Diagnostic Testing	81416	CPT	EXOME SEQUENCE ANALYSIS EACH COMPARATOR EXOME	N	NA
UNITED	Q3 2025	Diagnostic Testing	81417	CPT	EXOME RE-EVAL OF PREVIOUSLY OBTAINED EXOME SEQ	N	NA
UNITED	Q3 2025	Diagnostic Testing	81420	CPT	FETAL CHROMOSOMAL ANEUPLOIDY GENOMIC SEQ ANALYS	N	NA
UNITED	Q3 2025	Diagnostic Testing	81431	CPT	HEARING LOSS DUP/DEL ANALYSIS	N	NA
UNITED	Q3 2025	Diagnostic Testing	81432	CPT	HEREDITARY BRST CA-RLATD DO GEN SEQ ALYS 5+ GEN	N	NA
UNITED	Q3 2025	Diagnostic Testing	81433	CPT	HEREDITARY BRST CA-RELATED DUP/DEL ANALYSIS	N	NA
UNITED	Q3 2025	Diagnostic Testing	81435	CPT	HEREDITARY COLON CA-RELATED DO GEN SEQ ALYS 5+	N	NA
UNITED	Q3 2025	Diagnostic Testing	81436	CPT	HEREDITARY COLON CA DSRDRS DUP/DEL ANALYS 5 GEN	N	NA
UNITED	Q3 2025	Diagnostic Testing	81437	CPT	HERED NEUROEND TUM-RELATED DO GEN SEQ ALYS 5+	N	NA
UNITED	Q3 2025	Diagnostic Testing	81438	CPT	HEREDTRY NURONDCRN TUM DSRDRS DUP/DEL ANALYSIS	N	NA
UNITED	Q3 2025	Diagnostic Testing	81440	CPT	NUCLEAR MITOCHONDRIAL 100 GENE GENOMIC SEQ	N	NA
UNITED	Q3 2025	Diagnostic Testing	81443	CPT	GENETIC TESTING FOR SEVERE INHERITED CONDITIONS	N	NA
UNITED	Q3 2025	Diagnostic Testing	81445	CPT	SOLID ORGAN NEOPLASM GSAP 5-50 DNA/DNA&RNA ALYS	N	NA
UNITED	Q3 2025	Diagnostic Testing	81448	CPT	HEREDITARY PERIPHERAL NEUROPATHY GEN SEQ PNL	N	NA
UNITED	Q3 2025	Diagnostic Testing	81460	CPT	WHOLE MITOCHONDRIAL GENOME	N	NA
UNITED	Q3 2025	Diagnostic Testing	81465	CPT	WHOLE MITOCHONDRIAL GENOME ANALYSIS PANEL	N	NA
UNITED	Q3 2025	Diagnostic Testing	81507	CPT	FETAL ANEUPLOIDY 21 18 13 SEQ ANALY TRISOM RISK	N	NA
UNITED	Q3 2025	Diagnostic Testing	81518	CPT	ONCOLOGY BREAST MRNA GENE EXPRESSION 11 GENES	N	NA
UNITED	Q3 2025	Diagnostic Testing	81519	CPT	ONCOLOGY BREAST MRNA GENE EXPRESSION 21 GENES	N	NA
UNITED	Q3 2025	Diagnostic Testing	81520	CPT	ONC BREAST MRNA GENE XPRSN PRFL HYBRD 58 GENES	N	NA
UNITED	Q3 2025	Diagnostic Testing	81521	CPT	ONC BREAST MRNA MICRORA GENE XPRSN PRFL 70 GENES	N	NA
UNITED	Q3 2025	Diagnostic Testing	81522	CPT	ONCOLOGY BREAST MRNA GENE XPRSN PRFL 12 GENES	N	NA
UNITED	Q3 2025	Diagnostic Testing	81523	CPT	ONC BRST MRNA NEXT GNRJ SEQ GEN XPRSN 70 CNT&31	N	NA
UNITED	Q3 2025	Diagnostic Testing	81546	CPT	ONC THYR MRNA 10,196 GENES FINE NDL ASPIRATE ALG	N	NA
UNITED	Q3 2025	Diagnostic Testing	81595	CPT	CARDIOLOGY HRT TRNSPL MRNA GENE EXPRESS 20 GENES	N	NA
UNITED	Q3 2025	Diagnostic Testing	81599	CPT	UNLISTED MULTIANALYTE ASSAY ALGORITHMIC ANALYSIS	N	NA
UNITED	Q3 2025	Diagnostic Testing	87505	CPT	NFCT AGENT DNA/RNA GASTROINTESTINAL PATHOGEN	N	NA
UNITED	Q3 2025	Diagnostic Testing	87506	CPT	IADNA-DNA/RNA GI PTHGN MULTIPLEX PROBE TQ 6-11	N	NA
UNITED	Q3 2025	Diagnostic Testing	87507	CPT	IADNA-DNA/RNA GI PTHGN MULTIPLEX PROBE TQ 12-25	N	NA
UNITED	Q3 2025	Diagnostic Testing	S3870	HCPCS	CGH MICROARRAY TEST DD ASD &/OR INTELL DISABILTY	N	NA
UNITED	Q3 2025	DME/Medical Supplies	A4226	HCPCS	SPL MAINT INS IP DR ADJ USING TX CONT G SENS WK	N	NA
UNITED	Q3 2025	DME/Medical Supplies	A4239	HCPCS	SPLY ALW NONADJUNC NONIMPL CGM 1 MO SPLY= 1 UOS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	A4335	HCPCS	INCONTINENCE SUPPLY; MISCELLANEOUS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	A4638	HCPCS	REPLACEMENT BATTRY PT-OWNED EAR PULSE GEN EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	A4927	HCPCS	GLOVES NON-STERILE PER 100	N	NA
UNITED	Q3 2025	DME/Medical Supplies	A6000	HCPCS	NON-CNTC WND WARMING WND COVR W/DEVC&CARD	N	NA
UNITED	Q3 2025	DME/Medical Supplies	A9270	HCPCS	NONCOVERED ITEM OR SERVICE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	A9274	HCPCS	EXTERNAL AMB INSULIN DEL SYSTEM DISPOSABLE EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	A9276	HCPCS	SNSR;INVSV DISP USE NONDME INTRSTL CGM 1U=1D SPL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	A9277	HCPCS	TRANSMITTER; EXT USE WITH NONDME INTRSTL CGM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	A9278	HCPCS	RECEIVER; EXT USE NONDME INTRSTL SYSTEM CGM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	A9279	HCPCS	MONITOR FEATURE/DEVC STAND-ALONE/INTEGRATED NOC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	A9280	HCPCS	ALERT OR ALARM DEVICE NOT OTHERWISE CLASSIFIED	N	NA
UNITED	Q3 2025	DME/Medical Supplies	A9900	HCPCS	DME SUP/ACCESS/SRV-COMPON/OTH HCPCS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	B4034	HCPCS	ENTERAL FEEDING SUPPLY KIT; SYRINGE FED PER DAY	N	NA

UNITED	Q3 2025	DME/Medical Supplies	B4035	HCPCS	ENTERAL FEEDING SUPPLY KIT; PUMP FED PER DAY	N	NA
UNITED	Q3 2025	DME/Medical Supplies	B4036	HCPCS	ENTERAL FEEDING SUPPLY KIT; GRAVITY FED PER DAY	N	NA
UNITED	Q3 2025	DME/Medical Supplies	B4100	HCPCS	FOOD THICKENER ADMINISTERED ORALLY PER OUNCE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	B4102	HCPCS	ENTRAL FORMULA ADLT REPL FLS&LYTES 500 ML = 1 U	N	NA
UNITED	Q3 2025	DME/Medical Supplies	B4103	HCPCS	ENTRAL FORMULA PED REPL FLS&LYTES 500 ML = 1 U	N	NA
UNITED	Q3 2025	DME/Medical Supplies	B4104	HCPCS	ADDITIVE FOR ENTERAL FORMULA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	B4149	HCPCS	ENTRAL F MANF BLNDRIZD NAT FOODS W/NUTRIENTS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	B4150	HCPCS	ENTRAL F NUTRITIONALLY CMPL W/INTACT NUTRIENTS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	B4152	HCPCS	ENTRAL F NUTRITION CMPL CAL DENSE INTACT NUTRNTS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	B4153	HCPCS	ENTRAL FORMULA NUTIONALLY CMPL HYDROLYZED PROTS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	B4155	HCPCS	ENTRAL F NUTRITIONALLY INCMPL/MODULAR NUTRIENTS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	B4158	HCPCS	ENTRAL F PED NUTRITION CMPL W/INTACT NUTRNTS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	B4159	HCPCS	ENTRAL F PED NUTRITN CMPL SOY BASD INTCT NUTRNTS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	B4160	HCPCS	ENTRAL F PED NUTRITION CMPL CAL DENSE NUTRNTS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	B4161	HCPCS	ENTRAL F PED HYDROLYZED/AA&PEPTIDE CHAIN PROTS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	B9002	HCPCS	ENTERAL NUTRITION INFUSION PUMP ANY TYPE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	B9998	HCPCS	NOC FOR ENTERAL SUPPLIES	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0194	HCPCS	AIR FLUIDIZED BED	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0231	HCPCS	NON-CNTC WND WARMING DEVC W/WARMING CARD&COVR	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0265	HCPCS	HOSP BED TOT ELEC W/ANY TYPE SIDE RAIL W/MATTRSS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0266	HCPCS	HOS BED TOT ELEC ANY TYPE SIDE RAIL W/O MATTRSS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0270	HCPCS	HOSP BED INSTITUTIONAL TYPE: W/MATTRSS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0277	HCPCS	POWERED PRESSURE-REDUCING AIR MATTRESS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0300	HCPCS	PED CRIB HOS GRADE FULLY ENC W/WO TOP ENC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0328	HCPCS	HOSPITAL BED PEDIATRIC MANUAL INCLUDES MATTRESS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0329	HCPCS	HOSPITAL BED PEDIATRIC ELECTRIC INCLUDE MATTRESS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0445	HCPCS	OXIMETER DEVICE MSR BLD O2 LEVLS NON-INVASV	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0457	HCPCS	CHEST SHELL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0460	HCPCS	NEGATIVE PRESSURE VENTILATOR	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0465	HCPCS	HOME VENTILATOR ANY TYPE USED W/INVASIVE INTF	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0466	HCPCS	HOME VENTILATOR ANY TYPE USED W/NON-INVASV INTF	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0470	HCPCS	RESP ASST DEVC BI-LEVL PRSS CAPABILITY W/O BACKU	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0471	HCPCS	RAD BACKUP NON INV INTRFC NASAL/FACIAL MASK	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0483	HCPCS	HF CW OS SYS FULL THOR REG RECV SIM EXT OS EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0486	HCPCS	ORL DEVC/APPL RDUC UP AIRWAY COLLAPSIBILITY CSTM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0620	HCPCS	SKIN PIERCING DEVICE CLCT CAPILLARY BLD LASER EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0636	HCPCS	MX PSTN PT SUPP SYS INTGR LIFT PT ACSSIBLE CNTRL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0637	HCPCS	COMB SIT STAND FRAME/TABLE SYS SEATLIFT FEATURE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0652	HCPCS	PNEUMAT COMPRS SEG HOM MDL W/CALBRTD GRADNT PRSS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0656	HCPCS	SEG PNEUMAT APPLIANCE USE W/PNEUMAT COMPRS TRUNK	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0669	HCPCS	SEG PNEUMAT APPLINC W/PNEUMAT COMPRS HALF LEG	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0670	HCPCS	SEG PNEU APPLINC PNEU COMPRS IN 2 FULL LEGS TRNK	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0675	HCPCS	PNEUMAT COMPRS DEVC HI PRSS RAPID INFLATION/DEFL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0693	HCPCS	UV LT TX SYS PANL W/BULBS/LAMPS TIMER 6 FT PANEL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0694	HCPCS	UV MX DIR LT TX SYS 6 FT CABINET W/BULB/LAMP TMR	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0700	HCPCS	SAFETY EQUIPMENT DEVICE OR ACCESSORY ANY TYPE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0710	HCPCS	RESTRAINT ANY TYPE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0745	HCPCS	NEUROMUSCULAR STIMULATOR ELECTRONIC SHOCK UNIT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0747	HCPCS	OSTOGNS STIM ELEC NONINVASV OTH THAN SP APPLIC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0748	HCPCS	OSTOGNS STIMULATOR ELEC NONINVASV SPINAL APPLIC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0760	HCPCS	OSTOGNS STIM LOW INTENS ULTRASOUND NON-INVASV	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0762	HCPCS	TRANSCUT ELEC JOINT STIM DEVC SYS INCL ALL ACCSS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0764	HCPCS	FUNC NEUROMUSC STIM MUSC AMBUL CMPT CNTRL SC INJ	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0766	HCPCS	ELEC STIM DVC U CANCER TX INCL ALL ACC ANY TYPE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0784	HCPCS	EXTERNAL AMBULATORY INFUSION PUMP INSULIN	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0787	HCPCS	EXTERNAL AMB INFUS PUMP INSULIN DOS RATE ADJ	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0984	HCPCS	MNL WC ACSS PWR AO CVT MNL WC MTR WC TILLR CNTRL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E0986	HCPCS	MNL WHEELCHAIR ACSS PUSH-RIM ACT PWR ASSIST SYS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1002	HCPCS	WHEELCHAIR ACCESS POWER SEATING SYSTEM TILT ONLY	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1003	HCPCS	WC ACSS PWR SEAT SYS RECLINE W/O SHEAR RDUC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1004	HCPCS	WC ACSS PWR SEAT SYS RECLINE W/MECH SHEAR RDUC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1005	HCPCS	WC ACSS PWR SEAT SYS RECLINE W/PWR SHEAR RDUC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1006	HCPCS	WC ACSS PWR SEAT SYS TILT&RECLINE NO SHEAR RDUC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1007	HCPCS	WC ACSS PWR SEAT TILT&RECLINE MECH SHEAR RDUC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1008	HCPCS	WC ACSS PWR SEAT TILT&RECLINE W/PWR SHEAR RDUC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1009	HCPCS	WC ACCSS ADD PWR SEAT MECH LINKD LEG ELEV SYS EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1010	HCPCS	WC ACCSS ADD PWR SEAT SYS PWR LEG ELEV SYS PAIR	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1030	HCPCS	WHEELCHAIR ACCESSORY VENTILATOR TRAY GIMBALED	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1035	HCPCS	MULTI-PSTN PT TRNSF SYS W/SEAT PT WT </= 300 LBS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1036	HCPCS	MULTI-PSTN PT TRNSF SYS EXTRA WIDE PT >300 LBS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1130	HCPCS	STD WHLCHAIR; FIX FULL-LEN ARMS DTACHBL FOOTRSTS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1161	HCPCS	MANUAL ADULT SIZE WHEELCHAIR INCLUDES TILT SPACE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1229	HCPCS	WHEELCHAIR PEDIATRIC SIZE NOS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1231	HCPCS	WC PED SZ TILT-IN-SPACE RIGD ADJUSTBL W/SEAT SYS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1232	HCPCS	WC PED SZ TILT-IN-SPACE FOLD ADJUSTBL W/SEAT SYS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1233	HCPCS	WC PED SZ TILT-IN-SPACE RIGD ADJUSTBL W/O SEAT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1234	HCPCS	WC PED SZ TILT-IN-SPACE FOLD ADJUSTBL W/O SEAT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1235	HCPCS	WHLCHAIR PED SIZE RIGD ADJUSTBL W/SEATING SYSTEM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1236	HCPCS	WHLCHAIR PED SIZE FOLD ADJUSTBL W/SEATING SYSTEM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1237	HCPCS	WHLCHAIR PED SZ RIGD ADJUSTBL W/O SEATING SYSTEM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1238	HCPCS	WHLCHAIR PED SZ FOLD ADJUSTBL W/O SEATING SYSTEM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1239	HCPCS	POWER WHEELCHAIR PEDIATRIC SIZE NOS	N	NA

UNITED	Q3 2025	DME/Medical Supplies	E1399	HCPCS	DURABLE MEDICAL EQUIPMENT MISCELLANEOUS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1825	HCPCS	DYN ADJUSTBL FNGR EXT & FLX DEVC SFT INTRFCE MAT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E1831	HCPCS	STATIC PROGRESSIVE STRETCH TOE DEVICE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2100	HCPCS	BLD GLU MONITOR W/INTEGRATED VOICE SYNTHESIZER	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2102	HCPCS	ADJUNCTIVE NONIMPLANTED CGM/RECEIVER	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2103	HCPCS	NONADJUNCTIVE NONIMPLANTED CGM/RECEIVER	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2227	HCPCS	MANUAL WC ACCESS GEAR REDUCTION DRIVE WHEEL EACH	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2228	HCPCS	MNL WC ACCESS WHEEL BRAKING SYS&LOCK COMPLETE EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2230	HCPCS	MANUAL WHEELCHAIR ACCESSORY MANUAL STANDING SYS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2300	HCPCS	WHEELCHAIR ACC PWR SEAT ELEVATION SYS ANY TYPE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2301	HCPCS	WHEELCHAIR ACCESSORY POWER STANDING SYS ANY TYPE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2310	HCPCS	PWR WC ACSS ELEC CNCT BETWN WC CNTRLLER&ONE PWR	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2311	HCPCS	PWR WC ACSS ELEC CNCT BETWN WC CNTRLLER&TWO/MORE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2322	HCPCS	PWR WC ACSS HND CNTRL MX MECH SWTCH NO PRPRTNL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2325	HCPCS	PWR WC ACSS SIP&PUFF INTERFCE NONPROPRTNAL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2327	HCPCS	PWR WC ACSS HEAD CNTRL INTERFCE MECH PROPRTNAL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2329	HCPCS	PWR WC ACSS HEAD CNTRL CNTC SWTCH MECH NOPRPRTNL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2331	HCPCS	PWR WC ACSS ATTENDANT CONTROL PROPROTIONAL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2351	HCPCS	PWR WC ACSS ELEC INTERFCE OPERATE SPCH GEN DEVC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2373	HCPCS	PWR WC MINI-PROPORTIONAL COMPACT REMOTE JOYSTICK	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2402	HCPCS	NEG PRESS WOUND THERAPY ELEC PUMP STATION/PRTBLE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2510	HCPCS	SPCH GEN DEVC SYNTHESIZD MX METH MESS&DEVC ACCSS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2511	HCPCS	SPEECH GEN SOFTWARE PROG PC/PERS DIGITAL ASSIST	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2512	HCPCS	ACCESS SPEECH GENERATING DEVICE MOUNTING SYSTEM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2599	HCPCS	ACCESSORY FOR SPEECH GENERATING DEVICE NOC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2626	HCPCS	WC ACCESS SHLDR ELB MOBIL ARM SUPP WC ADJUSTBLE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2627	HCPCS	WC ACCESS SHLDR ELB M ARM SUPP ADJUSTBL RANCHO	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2628	HCPCS	WC ACCESS SHLDR ELB MOBIL ARM SUPP WC RECLINING	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2629	HCPCS	WC ACCESS SHLDR ELB M ARM SUPP FRICTION ARM SUPP	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E2630	HCPCS	WC ACCESS SHLDR ELB MOBIL MONOSUSP ARM HAND SUPP	N	NA
UNITED	Q3 2025	DME/Medical Supplies	E8000	HCPCS	GAIT TRAINER PED SZ POST SUPP W/ALL ACSS&CMPNTS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0005	HCPCS	ULTRALIGHTWEIGHT WHEELCHAIR	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0008	HCPCS	CUSTOM MANUAL WHEELCHAIR/BASE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0013	HCPCS	CUSTOM MOTORIZED/POWER WHEELCHAIR BASE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0108	HCPCS	OTHER ACCESSORIES	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0812	HCPCS	POWER OPERATED VEHICLE NOT OTHERWISE CLASSIFIED	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0830	HCPCS	PWR WC GRP 2 STD SEAT ELEV SLING PT TO &=300 LBS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0831	HCPCS	PWR WC GRP 2 STD SEAT ELEV CAP CHR PT TO 300 LB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0848	HCPCS	PWR WC GRP 3 STD SLING SEAT PT TO & = 300 LBS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0849	HCPCS	PWR WC GRP 3 STD CAPTAIN CHAIR PT TO & = 300 LBS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0850	HCPCS	PWR WC GRP 3 HVY DUTY SLING SEAT PT 301-450 LBS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0851	HCPCS	PWR WC GRP 3 HVY DUTY CAPT CHAIR PT 301-450 LBS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0852	HCPCS	PWR WC GRP 3 V HVY DUTY SLING SEAT PT 451-600 LB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0853	HCPCS	PWR WC GRP 3 HVY DUTY CAPT CHAIR PT 451-600 LBS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0854	HCPCS	PWR WC GRP 3 XTRA HVY DTY SLNG SEAT PT 601 LBS/>	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0855	HCPCS	PWR WC GRP 3X HVY DTY CHR PT WT CAP 601 LB/>	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0856	HCPCS	PWR WC GRP 3 STD 1 PWR SLING SEAT PT TO &=300 LB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0857	HCPCS	PWR WC GRP 3 STD 1 PWR CAPT CHAIR PT TO &=300 LB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0858	HCPCS	PWR WC GRP 3 HD 1 PWR SLING SEAT PT 301-450 LBS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0859	HCPCS	PWR WC GRP 3 HD 1 PWR CAPT CHAIR PT 301-450 LBS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0860	HCPCS	PWR WC GRP 3 V HD 1 PWR SLING SEAT PT 451-600 LB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0861	HCPCS	PWR WC GRP 3 STD MX PWR SLNG SEAT PT TO &=300 LB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0862	HCPCS	PWR WC GRP 3 HD MX PWR SLING SEAT PT 301-450 LBS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0863	HCPCS	PWR WC GRP 3 V HD MX PWR SLNG SEAT PT 451-600 LB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0864	HCPCS	PWR WC GRP 3 XTR HD MX PWR SLNG SEAT PT 601 LB/>	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0868	HCPCS	PWR WC GRP 4 STD SLING SEAT PT TO & = 300 LBS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0869	HCPCS	PWR WC GRP 4 STD CAPTAIN CHAIR PT TO & = 300 LBS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0870	HCPCS	PWR WC GRP 4 HVY DUTY SLING SEAT PT 301-450 LBS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0871	HCPCS	PWR WC GRP 4 V HVY DUTY SLING SEAT PT 451-600 LB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0877	HCPCS	PWR WC GRP 4 STD 1 PWR SLING SEAT PT TO &=300 LB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0878	HCPCS	PWR WC GRP 4 STD 1 PWR CAPT CHAIR PT TO &=300 LB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0879	HCPCS	PWR WC GRP 4 HD 1 PWR SLING SEAT PT 301-450 LBS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0880	HCPCS	PWR WC GRP 4 V HD 1 PWR SLING SEAT PT 451-600 LB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0884	HCPCS	PWR WC GRP 4 STD MX PWR SLNG SEAT PT TO &=300 LB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0885	HCPCS	PWR WC GRP 4 STD MX PWR CAPT CHR PT TO &=300 LBS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0886	HCPCS	PWR WC GRP 4 HD MX PWR SLING SEAT PT 301-450 LBS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0890	HCPCS	PWR WC GRP 5 PED 1 PWR SLING SEAT PT TO &=125 LB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	K0891	HCPCS	PWR WC GRP 5 PED MX PWR SLNG SEAT PT TO &=125 LB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L0112	HCPCS	CRANIL CERV ORTHOS CONGN TORTICOLLIS TYPE CUSTOM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L0170	HCPCS	CERVICAL COLLAR MOLDED TO PATIENT MODEL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L0456	HCPCS	TLSO FLEXIBLE SC JUNCT SCAP SPINE PREFAB CUSTOM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L0462	HCPCS	TLSO TRIPLANAR 3 SHELL ANT TO STERNL NOTCH PRFAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L0464	HCPCS	TLSO TRIPLANAR 4 SHELL ANT TO STERNL NOTCH PRFAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L0480	HCPCS	TLSO TRIPLANAR 1 PIECE W/O INTERFCE LINER CSTM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L0482	HCPCS	TLSO TRIPLANAR 1 PIECE W/INTERFCE LINER CSTM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L0484	HCPCS	TLSO TRIPLANAR 2 PIECE W/O INTERFCE LINER CSTM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L0486	HCPCS	TLSO TRIPLANAR 2 PIECE W/INTERFCE LINER CSTM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L0624	HCPCS	SACROILIAC ORTHOSIS RIGD/SEMI-RIGD PANELS CUSTOM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L0629	HCPCS	LUMBAR-SACRAL ORTHOSIS FLEXIBLE CUSTOM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L0631	HCPCS	LUMB-SACRAL ORTHOS SAGIT CNTRL RIGID A&P PREFAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L0632	HCPCS	LUMB-SACRAL ORTHOS SAGIT CNTRL RIGID A&P CUSTOM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L0634	HCPCS	LUMB-SAC ORTHOS SAGIT-COR CNTRL RIGD POST CUSTOM	N	NA

UNITED	Q3 2025	DME/Medical Supplies	L0636	HCPCS	LSO SAGITTAL-CORONL CNTRL FLEX RIGID POST CUSTOM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L0637	HCPCS	LUMB-SACRAL ORTHOS SAG-COR CNTRL RIGD A&P PREFAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L0638	HCPCS	LUMB-SACRAL ORTHOS SAG-COR CNTRL RIGD A&P CUSTOM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L0640	HCPCS	LSO SAGITTAL-CORONAL RIGID SHELL/PANEL CUSTM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L0700	HCPCS	CTLSO ANT-POSTERIOR-LAT CONTROL MOLDED PT MODEL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L0710	HCPCS	CTLSO ANT-POST-LAT CNTRL MOLD PT-INTRFCE MATL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L0810	HCPCS	HALO PROC CERV HALO INCORPORATED IN JACKET VEST	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L0820	HCPCS	HALO PROC CERV HALO INC IN PLASTR BDY JACKET	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L0830	HCPCS	HALO PROC CERV HALO INC IN MLWAKEE TYPE ORTHOSIS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L0859	HCPCS	ADD HALO PROC MRI COMPAT SYS RINGS&PINS ANY MATL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L1000	HCPCS	CTLSO INCLUSIVE FURNISHING INIT ORTHOS INCL MDL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L1005	HCPCS	TENSION BASED SCOLIOSIS ORTHOSIS&ACCESSORY PADS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L1200	HCPCS	TLSO INCLUSIVE FURNISHING INITIAL ORTHOSIS ONLY	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L1300	HCPCS	OTH SCOLIOSIS PROC BODY JACKET MOLDED PT MODEL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L1310	HCPCS	OTH SCOLIOSIS PROC POSTOPERATIVE BODY JACKET	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L1499	HCPCS	SPINAL ORTHOSIS NOT OTHERWISE SPECIFIED	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L1680	HCPCS	HIP ORTHOS DYN PELV CONTROL THIGH CUFF CSTM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L1685	HCPCS	HIP ORTHOS ABDCT CNTRL POSTOP HIP ABDCT CSTM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L1700	HCPCS	LEGG PERTHES ORTHOSIS TORONTO CUSTOM FABRICATED	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L1710	HCPCS	LEGG PERTHES ORTHOSIS NEWINGTON CUSTOM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L1720	HCPCS	LEGG PERTHES ORTHOSIS TRILAT TACHDIJAN CSTM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L1730	HCPCS	LEGG PERTHES ORTHOSIS SCOTTISH RITE CUSTOM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L1755	HCPCS	LEGG PERTHES ORTHOSIS PATTEN BOTTOM CSTM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L1820	HCPCS	KO ELAST CONDYLR PADS&JNT PRFAB CM FIT SPEC PT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L1832	HCPCS	KNEE ORTHOSIS IMMOBLIZER ADJUSTABLE JOINT PREFAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L1834	HCPCS	KO WITHOUT KNEE JOINT RIGID CUSTOM FABRICATED	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L1840	HCPCS	KO DEROTATION MEDIAL-LATERAL ACL CUSTOM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L1844	HCPCS	KNEE ORTHOSIS SINGLE UPRIGHT THIGH & CALF CUSTOM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L1845	HCPCS	KNEE ORTHOSIS DOUBLE UPRIGHT THIGH & CALF PREFAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L1846	HCPCS	KNEE ORTHOSIS DOUBLE UPRIGHT THIGH & CALF CUSTOM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L1860	HCPCS	KNEE ORTHOS MOD SUPRACONDYLR PROS SOCKT CSTM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L1945	HCPCS	AFO MOLD PT MDL PLSTC RIGD ANT TIBL SECT CSTM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L1950	HCPCS	ANKLE FOOT ORTHOSIS SPIRAL PLASTIC CUSTOM-FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L1970	HCPCS	AFO PLASTIC WITH ANKLE JOINT CUSTOM FABRICATED	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L2000	HCPCS	KAFO 1 UPRT FREE KNEE FREE ANK SOLID STIRUP CSTM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L2005	HCPCS	KAFO ANY MATL AUTO LOCK&SWNG RLSE W/ANK JNT CSTM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L2010	HCPCS	KAFO 1 UPRT SOLID STIRUP W/O KNEE JNT CSTM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L2020	HCPCS	KAFO DBL UPRT SOLID STIRUP THI&CALF CSTM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L2030	HCPCS	KAFO DBL UPRT SOLID STIRUP W/O KNEE JNT CSTM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L2034	HCPCS	KAFO PLASTIC MED LAT ROTAT CNTRL CSTM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L2036	HCPCS	KAFO FULL PLASTIC DOUBLE UPRIGHT CSTM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L2037	HCPCS	KAFO FULL PLASTIC SINGLE UPRIGHT CUSTOM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L2038	HCPCS	KAFO FULL PLASTIC MX-AXIS ANKLE CUSTOM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L2060	HCPCS	HKAFO TORSION CNTRL BIL TORSION BALL BEAR CSTM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L2106	HCPCS	AFO FX ORTHOSIS TIB FX CAST THERMOPLSTC CSTM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L2108	HCPCS	AFO FX ORTHOSIS TIB FX CAST ORTHOSIS CSTM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L2126	HCPCS	KAFO FEM FX CAST ORTHOSIS THERMOPLSTC CSTM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L2136	HCPCS	KAFO FEM FX CAST ORTHOSIS RIGD PRFAB W/FIT & ADJ	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L2350	HCPCS	ADD LOW EXTREM PROSTHETIC TYPE SOCKT MOLD PT MDL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L2510	HCPCS	ADD LW EXTRM THI/WT BEAR QUADRI-LAT BRIM MOLD PT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L2526	HCPCS	ADD LW EXTRM ISCH M-L BRIM CSTM FIT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L2627	HCPCS	ADD LW EXT PELV PLSTC MOLD PT MDL HIP JNT&CABLES	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L2628	HCPCS	ADD LW EXT PELV METL FRME RECIP HIP JNT&CABLES	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L3230	HCPCS	ORTHOPEDIC FOOTWEAR CUSTOM SHOE DEPTH INLAY EACH	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L3265	HCPCS	PLASTAZOTE SANDAL EACH	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L3649	HCPCS	ORTHOPED SHOE MODIFICATION ADDITION/TRANSFER NOS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L3671	HCPCS	SHOULDER ORTHOSIS JOINT DESIGN W/O JNTS CUSTOM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L3674	HCPCS	SHOULDER ORTHOSIS ABDUCT PSTN THOR COMP CUSTOM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L3720	HCPCS	EO DBL UPRT W/FORARM/ARM CUFF FREE MOT CSTM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L3730	HCPCS	EO DBL UPRT W/CUFF EXT/FLX ASST CSTM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L3740	HCPCS	EO DBL UPRT W/CUFF ADJ LOCK W/ACTV CNTRL CSTM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L3763	HCPCS	EWHO RIGID W/O JOINTS CUSTOM FABRICATED	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L3764	HCPCS	EWHO INCL 1/MORE NONTORSION JOINTS CSTM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L3900	HCPCS	WHFO DYN FLEXOR HINGE WRST/FNGR DRIVEN CSTM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L3901	HCPCS	WHFO DYN FLEXOR HINGE CABLE DRIVEN CSTM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L3904	HCPCS	WHFO EXTERNAL POWERED ELECTRIC CUSTOM FABRICATED	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L3905	HCPCS	WHO INCL 1/MORE NONTORSION JOINTS CSTM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L3961	HCPCS	SEWHO SHOULDER CAP DESIGN W/O JOINTS CSTM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L3971	HCPCS	SEWHO SHOULDER CAP DESIGN CSTM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L3975	HCPCS	SEWHFO SHOULDER CAP DESIGN W/O JOINTS CSTM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L3976	HCPCS	SEWHFO ABDUCT PSTN THOR CMPNT W/O JOINTS CUS FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L3977	HCPCS	SEWHFO SHOULD CAP DESIGN CUSTOM FAB ELASTIC BAND	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L3999	HCPCS	UPPER LIMB ORTHOSIS NOT OTHERWISE SPECIFIED	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L4000	HCPCS	REPLACE GIRDLE FOR SPINAL ORTHOSIS CTLSO OR SO	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L4010	HCPCS	REPLACE TRILATERAL SOCKET BRIM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L4020	HCPCS	REPLACE QUADRILAT SOCKET BRIM MOLDED PT MODEL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5010	HCPCS	PARTIAL FT MOLDED SOCKET ANK HEIGHT W/TOE FILLER	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5020	HCPCS	PART FT MOLDED SOCKET TIB TUBERCLE HT W/TOE FIL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5050	HCPCS	ANKLE SYMES MOLDED SOCKET SACH FOOT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5060	HCPCS	ANK SYMES METL FRME MOLD LEATHR SOCKT ARTIC ANK	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5100	HCPCS	BELOW KNEE MOLDED SOCKET SHIN SACH FOOT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5105	HCPCS	BELOW KNEE PLSTC SOCKT JNT&THIGH LACER SACH FOOT	N	NA

UNITED	Q3 2025	DME/Medical Supplies	L5150	HCPCS	KNEE DISRTC MOLD SOCKT EXT KNEE JNT SHIN SACH FT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5160	HCPCS	KNEE DISARTIC MOLD SOCKT BENT KNEE EXT KNEE JNT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5200	HCPCS	ABOVE KNEE MOLD SOCKT 1 AXIS CONSTANT FRICTION	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5210	HCPCS	ABOVE KNEE SHRT PROSTH NO KNEE JNT NO ANK JNT EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5220	HCPCS	ABOVE KNEE SHORT PROSTH W/ARTIC ANK/FOOT DYN	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5230	HCPCS	ABOVE KNEE PROXIMAL FEM FOCAL DEFIC SACH FOOT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5250	HCPCS	HIP DISARTIC CANADIAN TYPE; MOLD SOCKT HIP JNT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5270	HCPCS	HIP DISRTC TILT TABLE; MOLD SCKT LOCK HIP JNT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5280	HCPCS	HEMIPELVECT CANADIAN TYPE; MOLD SOCKT HIP JNT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5301	HCPCS	BELOW KNEE MOLD SOCKET SHIN SACH FT ENDOSKEL SYS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5312	HCPCS	KNEE DISARTIC MOLD SOCKET 1 AXIS KNEE SACH FOOT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5321	HCPCS	ABOVE KNEE OPEN END SACH FT ENDO SYS 1 AXIS KNEE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5331	HCPCS	JOINT SINGLE AXIS KNEE SACH FOOT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5341	HCPCS	SINGLE AXIS KNEE SACH FOOT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5400	HCPCS	IMMED PSTSRG/ERLY FIT APPLY RIGD DRSS W/1 CHG BK	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5420	HCPCS	IMMED POSTSURG INIT RIGD DRESS 1 CHG AK/KNEE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5460	HCPCS	IMMED POSTSURG APPLIC NONWT BEAR RIGD ABOVE KNEE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5500	HCPCS	INIT BELOW KNEE PTB SOCKET NON-ALIGN DIR FORMED	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5505	HCPCS	INIT ABVE KNEE-DISARTC ISCH LEVL SOCKT NON-ALIGN	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5510	HCPCS	PREP BELOW KNEE PTB SOCKET NON-ALIGN MOLD MODEL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5520	HCPCS	PREP BK PTB SCKT NON-ALIGN THERMOPLSTC/=DIR FORM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5530	HCPCS	PREP BK PTB SCKT NON-ALIGN THERMOPLSTC/=MOLD MDL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5535	HCPCS	PREP BELOW KNEE PTB NON-ALIGN PRFAB ADJ OPEN END	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5540	HCPCS	PREP BK PTB SCKT NON-ALIGN LAMNATD SCKT MOLD MDL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5560	HCPCS	PREP AK-DISRTC ISCH LEVL PLASTER SOCKET MOLD MDL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5570	HCPCS	PREP AK-DISRTC ISCH LEVL THERMOPLSTC/=DIR FORMED	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5580	HCPCS	PREP AK DISARTIC NON-ALIGN THERMOPLSTC/=MOLD MDL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5585	HCPCS	PREP AK-DISARTC NON-ALIGN PRFAB ADJ OPN END SCKT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5590	HCPCS	PREP AK-DISARTIC NON-ALIGN LAMINATED SOCKET MOLD	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5595	HCPCS	PREP HIP DISARTIC-HEMIPELVECT THERMOPLSTC/=MOLD	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5600	HCPCS	PREP HIP DISARTIC-HEMIPELVECT LAMINATD SCKT MOLD	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5610	HCPCS	ADD LW EXTRM ENDO SYS ABVE KNEE HYDRACADENCE SYS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5613	HCPCS	ADD LOW EXTRM ENDO AK-DISARTIC 4-BAR W/HYDRAULIC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5614	HCPCS	ADD LOW EXT EXOSKEL SYS AK-DISARTC 4-BAR PNEUMAT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5616	HCPCS	ADD LOW EXTRM ENDO AK UNIVERSAL MXPLX SYS FRICT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5639	HCPCS	ADDITION LOWER EXTREMITY BELOW KNEE WOOD SOCKET	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5640	HCPCS	ADDITION LOWER EXTREM KNEE DISARTIC LEATHR SOCKT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5642	HCPCS	ADDITION LOWER EXTREM ABOVE KNEE LEATHER SOCKET	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5643	HCPCS	ADD LW EXT HIP DISARTIC FLX INNR SOCKT EXT FRAME	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5644	HCPCS	ADDITION LOWER EXTREMITY ABOVE KNEE WOOD SOCKET	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5646	HCPCS	ADD LOW EXT BELOW KNEE AIR FL GEL/= CUSHN SOCKT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5647	HCPCS	ADDITION LOWER EXTREM BELOW KNEE SUCTION SOCKET	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5648	HCPCS	ADD LOW EXT ABOVE KNEE AIR FL GEL/= CUSHN SOCKET	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5649	HCPCS	ADD LW EXT ISCHIAL CONTAINMENT/NARROW M-L SOCKET	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5651	HCPCS	ADD LW EXT ABVE KNEE FLXIBLE INNR SOCKT EXT FRME	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5653	HCPCS	ADD LOW EXTREM KNEE DISARTIC XPNDABLE WALL SOCKT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5661	HCPCS	ADD LOW EXTREM SOCKT INSERT MULTIDUROMETER SYMES	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5673	HCPCS	ADD LOW EXT CSTM MOLD/PRFAB FOR USE W/LOCK MECH	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5682	HCPCS	ADD LW EXTRM BELW KNEE THI LACER GLUTL/ISCH MOLD	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5683	HCPCS	ADD LW EXTR BK/AK CST FAB NO CNGN/TRAUM AMP INIT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5700	HCPCS	REPLACEMENT SOCKET BELOW KNEE BK MOLDED PT MODEL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5702	HCPCS	REPLCMT SOCKT HIP DISARTIC W/HIP JNT MOLD PT MDL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5703	HCPCS	ANKLE SYMES MOLD PT MODEL SACH FOOT REPL ONLY	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5705	HCPCS	CUSTOM SHAPED PROTECTIVE COVER ABOVE KNEE AK	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5706	HCPCS	CUSTOM SHAPED PROTECTIVE COVER KNEE DISARTIC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5716	HCPCS	ADD EXOSKEL KNEE-SHIN POLYCNTRC MECH STANCE LOCK	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5718	HCPCS	ADD EXOSKL KNEE-SHIN POLYCNTRC FRICT SWING CNTRL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5722	HCPCS	ADD EXOSKEL KNEE-SHIN PNEUMAT SWING FRICT CNTRL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5724	HCPCS	ADD EXOSKEL KNEE-SHIN FLUID SWING PHASE CNTRL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5726	HCPCS	ADD EXOSKEL KNEE-SHIN EXT JOINT FL SWING CNTRL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5728	HCPCS	ADD EXOSKEL KNEE-SHIN FLUID SWING&STANCE CNTRL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5780	HCPCS	ADD EXOSKL KNEE-SHIN PNEUMAT/HYDRA PNEUMAT CNTRL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5790	HCPCS	ADD EXOSKEL SYSTEM ABVE KNEE ULTRA-LGHT MATERIAL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5795	HCPCS	ADD EXOSKEL SYSTEM HIP DISARTIC ULTRA-LGHT MATL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5811	HCPCS	ADD ENDOSKEL KNEE-SHIN MNL LOCK ULTRA-LGHT MATL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5812	HCPCS	ADD ENDOSKEL KNEE-SHIN FRICT SWING&STANCE CNTRL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5814	HCPCS	ADD ENDOSKEL KNEE-SHIN HYDRAULIC SWING MECH LOCK	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5816	HCPCS	ADD ENDOSKEL KNEE-SHIN MECH STANCE PHASE LOCK	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5818	HCPCS	ADD ENDOSKEL KNEE-SHIN FRICT SWING&STANCE CNTRL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5822	HCPCS	ADD ENDOSKEL KNEE-SHIN PNEUMAT SWING FRICT CNTRL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5824	HCPCS	ADD ENDOSKEL KNEE-SHIN FLUID SWING PHASE CNTRL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5826	HCPCS	ADD ENDO KNEE-SHIN HYDRAUL SWNG MIN HI ACTV FRME	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5828	HCPCS	ADD ENDO KNEE-SHIN FL SWING&STANCE PHASE CNTRL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5830	HCPCS	ADD ENDOSKEL KNEE-SHIN PNEUMAT/SWING PHASE CNTRL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5845	HCPCS	ADD ENDOSKEL KNEE-SHIN STANCE FLX FEATUR ADJ	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5848	HCPCS	ADD ENDOSKEL KNEE-SHIN SYS FLUID STANCE EXTENSN	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5857	HCPCS	ADD LOW EXT PROS KNEE-SHIN SYS SWING PHASE ONLY	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5858	HCPCS	ADD LW EXT PROS KNEE SHIN SYS STANCE PHASE ONLY	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5930	HCPCS	ADD ENDOSKEL SYSTEM HIGH ACTV KNEE CONTROL FRAME	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5950	HCPCS	ADD ENDOSKEL SYSTEM ABVE KNEE AK ULTRA-LGHT MATL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5960	HCPCS	ADD ENDOSKEL SYSTEM HIP DISARTIC ULTRA-LGHT MATL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5961	HCPCS	ADD ENDO SYS POLYCNTRC HIP JOINT ROTATION CNTRL	N	NA

UNITED	Q3 2025	DME/Medical Supplies	L5962	HCPCS	ADD ENDOSKEL BK FLXIBLE PROTVE OUTR SURF COVRING	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5964	HCPCS	ADD ENDOSKEL AK FLEXIBLE PROTVE OUTR SURF COVER	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5966	HCPCS	ADD ENDO HIP DISRTC FLXIBL PROTVE OUTR SURF COVR	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5968	HCPCS	ADD LW LIMB PROSTH MX-AXIAL ANK W/SWING PHASE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5973	HCPCS	ENDOSKEL ANK FOOT SYS MICRPROCSS CONTROL PWR SRC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5976	HCPCS	ALL LOWER EXTREM PROSTHESES ENERGY STORING FOOT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5979	HCPCS	ALL LW EXTRM PRSTH MX-AXL ANK DYN RSPN FT 1 PECE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5980	HCPCS	ALL LOWER EXTREMITY PROSTHESES FLEX-FOOT SYSTEM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5981	HCPCS	ALL LOWER EXTREM PROSTH FLEX-WALK SYSTEM/EQUAL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5982	HCPCS	ALL EXOSKEL LOW EXTREM PROSTH AXIAL ROTAT UNIT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5984	HCPCS	ALL ENDOSKEL LOW EXT PROSTH AXIAL ROTAT UNIT ADJ	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5986	HCPCS	ALL LOW EXTREM PROSTH MULTI-AXIAL ROTATION UNIT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5987	HCPCS	ALL LW XTRM PRSTH SHNK FT SYS W/VRTCL LOAD PYLN	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5988	HCPCS	ADD LW LIMB PROSTH VERTCL SHOCK RDUC PYLN FEATUR	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5990	HCPCS	ADD LOW EXTREM PROSTH USER ADJUSTBLE HEEL HT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L5999	HCPCS	LOWER EXTREMITY PROSTHESIS NOS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6000	HCPCS	PARTIAL HAND THUMB REMAINING	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6010	HCPCS	PARTIAL HAND LITTLE & OR RING FINGER REMAINING	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6020	HCPCS	PARTIAL HAND NO FINGER REMAINING	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6050	HCPCS	WRST DISARTIC MOLD SOCKET FLEX ELB HNG TRICP PAD	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6055	HCPCS	WRST DISARTIC MOLD SOCKT W/XPNDABLE INTERFCE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6100	HCPCS	BELW ELB MOLD SOCKT FLXIBLE ELB HINGE TRICP PAD	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6110	HCPCS	BELOW ELBOW MOLDED SOCKET	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6120	HCPCS	BELW ELB MOLD DBL WALL SCKT STEP-UP HNG 1/2 CUFF	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6130	HCPCS	BELW ELB STUMP ACTVATD LOCK HINGE HALF CUFF	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6200	HCPCS	ELB DISARTC MOLD SOCKT OUTSIDE LOCK HINGE FORARM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6205	HCPCS	ELB DISARTC MOLD SCKT W/XPND INTRFCE LOCK FORARM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6250	HCPCS	ABVE ELB MOLD DBL WALL SCKT INTRL LCK ELB FORARM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6300	HCPCS	SHLDR DISARTIC MOLD SOCKET INTRL LOCK ELB FORARM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6310	HCPCS	SHOULDER DISARTIC PASSIVE REST COMPLETE PROSTH	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6320	HCPCS	SHOULDER DISART PASSIVE REST SHOULDER CAP ONLY	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6350	HCPCS	INTERSCAP THOR HUM SECT INTRL LOCK ELB FORARM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6360	HCPCS	INTERSCAPULAR THOR PASSIVE REST CMPL PROSTH	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6370	HCPCS	INTERSCAPULAR THOR PASSIVE REST SHLDR CAP ONLY	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6380	HCPCS	IMMED POSTSURG RIGD DRSG 1 CAST CHG WRST DISRTC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6382	HCPCS	IMMED POSTSURG RIGD DRSG 1 CAST CHG ELB DISARTIC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6384	HCPCS	IMMED POSTSURG RIGD DRSG 1 CAST CHG SHLDR DISRTC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6400	HCPCS	BE MOLD SCKT ENDOSKEL SYS W/SFT PROSTH TISS SHAP	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6450	HCPCS	ELB DISRTC MOLD SCKT ENDOSKEL W/SFT PROSTH TISS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6500	HCPCS	ABVE ELB MOLD SCKT ENDOSKEL W/SFT PROSTH TISS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6550	HCPCS	SHLDR DISRTC MOLD SCKT ENDOSKEL W/SFT PROS TISS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6570	HCPCS	INTRSCAP THOR MOLD SCKT ENDOSKEL W/SFT PROS TISS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6580	HCPCS	PREP WRST DISRTC/BELW ELB 1 WALL PLSTC SCKT MOLD	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6582	HCPCS	PREP WRST DISRTC/BELW ELB 1 WALL SCKT DIR FORMED	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6584	HCPCS	PREP ELB DISRTC/ABVE ELB 1 WALL PLSTC SOCKT MOLD	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6586	HCPCS	PREP ELB DISRTC/ABVE ELB 1 WALL SOCKT DIR FORMED	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6588	HCPCS	PREP SHLDR DISRTC THOR 1 WALL PLSTC SCKT MOLD	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6590	HCPCS	PREP SHLDR DISRTC THOR 1 WALL SOCKET DIR FORM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6621	HCPCS	UP EXTREM PROS ADD FLEXION/EXTENSION WRIST	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6623	HCPCS	UP EXT ADD SPRNG ASST ROTATL WRST U W/LATCH RLSE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6624	HCPCS	UPPER EXTREMITY ADD FLX/EXT ROTATION WRIST UNIT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6646	HCPCS	UP EXT ADD SHLDR JNT MX PSTN W/BDY/EXT PWR SYS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6648	HCPCS	UP EXTREM ADD SHLDR LOCK MECH EXT PWR ACTUATOR	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6686	HCPCS	UPPER EXTREMITY ADDITION SUCTION SOCKET	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6687	HCPCS	UP EXTRM ADD FRME TYPE SCKT BELW ELB/WRST DISRTC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6689	HCPCS	UPPER EXTREM ADD FRAME TYPE SOCKT SHLDR DISARTIC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6690	HCPCS	UPPER EXTREM ADD FRAME TYPE SOCKT INTERSCAP-THOR	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6692	HCPCS	UPPER EXT ADD SIL GEL INSERT/=L W/WO LKG MECH EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6693	HCPCS	UPPER EXTREM ADD LOCK ELB FORARM COUNTERBALANCE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6694	HCPCS	ADD UP EXT PROS BELW/ABVE ELB CSTM W/LOCK MECH	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6695	HCPCS	ADD UP EXT PROS BELW/ABVE ELB CSTM W/O LOCK MECH	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6696	HCPCS	ADD UP EXT PROS ELB CSTM CNGN/TRAUMAT AMP INIT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6697	HCPCS	ADD UP EXT PROS ELB CSTM NOT CNGN/TRAUM AMP INIT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6704	HCPCS	TERMINAL DEVICE SPORT/RECREATIONAL/WORK ATTACH	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6707	HCPCS	TERMINAL DEVICE HOOK MECH VOLUNTARY CLOSING	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6708	HCPCS	TERMINAL DEVICE HAND MECH VOLUNTARY OPENING	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6709	HCPCS	TERMINAL DEVICE HAND MECH VOLUNTARY CLOSING	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6711	HCPCS	TERM DVC HOOK MECH VOL OPN ANY MATL ANY SZ PED	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6712	HCPCS	TERM DVC HOOK MECH VOL CLOS ANY MATL ANY SZ PED	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6713	HCPCS	TERM DVC HAND MECH VOL OPN ANY MATL ANY SIZE PED	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6714	HCPCS	TERM DEVC HAND MECH VOL CLOS ANY MATL ANY SZ PED	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6715	HCPCS	TERM DEV MX ARTIC DIGIT W/MOTORS INIT ISSUE/REPL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6880	HCPCS	ELEC HAND SWTCH/MYOELEC CNTRL INDEP ARTC DIG MTR	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6881	HCPCS	AUTOMATIC GRASP ADD UPPER LIMB ELEC PROSTH DEVC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6882	HCPCS	MICRPRROCSS CNTRL FEATUR ADD UP LIMB PROSTH DEVC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6883	HCPCS	REPL SOCKET BE/WD MOLDED TO PATIENT MODEL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6884	HCPCS	REPL SOCKET ABOVE ELBOW/ELBOW DISART MOLD TO PT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6885	HCPCS	REPL SOCKET SD/INTERSCAPULAR THOR MOLD PT MODEL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6895	HCPCS	ADD UP EXT PROSTH GLOV TERM DEVC MATL CSTM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6900	HCPCS	HAND REST PART HAND W/GLOVE THUMB/1 FNGR REMAIN	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6905	HCPCS	HAND REST PART HAND W/GLOVE MX FNGR REMAIN	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6910	HCPCS	HAND REST PART HAND W/GLOVE NO FNGR REMAIN	N	NA

UNITED	Q3 2025	DME/Medical Supplies	L6915	HCPCS	HAND RESTORATION REPLACEMENT GLOVE FOR ABOVE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6920	HCPCS	WRST DISARTIC OTTO BOCK/=SWTCH CNTRL TERM DEVICE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6925	HCPCS	WRST DISARTIC OTTO BOCK/=MYOELEC CNTRL TERM DEVC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6930	HCPCS	BELOW ELBOW OTTO BOCK/=SWITCH CNTRL TERM DEVICE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6935	HCPCS	BELOW ELBOW OTTO BOCK/=MYOELEC CNTRL TERM DEVICE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6940	HCPCS	ELBOW DISARTIC OTTO BOCK/=SWITCH CNTRL TERM DEVC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6945	HCPCS	ELB DISARTIC OTTO BOCK/=MYOELEC CNTRL TERM DEVC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6950	HCPCS	ABOVE ELBOW OTTO BOCK/=SWITCH CNTRL TERM DEVC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6955	HCPCS	ABOVE ELBOW OTTO BOCK/=MYOELEC CNTRL TERM DEVC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6960	HCPCS	SHLDR DISARTIC OTTO BOCK/=SWTCH CNTRL TERM DEVC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6965	HCPCS	SHOULDR DISARTIC OTTO BOCK/=MYOELEC CNTRL TERM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6970	HCPCS	INTERSCAP-THOR OTTO BOCK/=SWTCH CNTRL TERM DEVC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L6975	HCPCS	INTERSCAP-THOR OTTO BOCK/=MYOELEC CNTRL TERM DVC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L7007	HCPCS	ELECTRIC HAND SWITCH/MYOELECTRIC CONTROL ADULT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L7008	HCPCS	ELECTRIC HAND SWITCH/MYOELECTRIC CNTRL PEDIATRIC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L7009	HCPCS	ELECTRIC HOOK SWITCH/MYOELECTRIC CONTROL ADULT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L7040	HCPCS	PREHENSILE ACTUATOR SWITCH CONTROLLED	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L7045	HCPCS	ELEC HOOK SWITCH/MYOELECTRIC CONTOL PEDIATRIC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L7170	HCPCS	ELECTRONIC ELBOW HOSMER/EQUAL SWITCH CONTROLLED	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L7180	HCPCS	ELEC ELB MICROPRC SEQENTIAL CNTRL ELB&TERM DEVC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L7181	HCPCS	ELEC ELB MICROPRC SIMULTAN CNTRL ELB&TERM DEVC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L7185	HCPCS	ELEC ELB ADOLES VRITY VILLAGE/EQUAL SWITCH CNTRL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L7186	HCPCS	ELEC ELB CHILD VRITY VILLAGE/EQUAL SWITCH CNTRL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L7190	HCPCS	ELEC ELB ADOLES VRITY VILLAGE/= MYOELEC CNTRL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L7191	HCPCS	ELEC ELB CHLD VRITY VILL/= MYOELECTRNICALY CNTRL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L7405	HCPCS	ADD UP EXTREM PROS SD/INTERSCAP THOR ACRYLC MATL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L8040	HCPCS	NASAL PROSTHESIS PROVIDED BY A NON-PHYSICIAN	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L8042	HCPCS	ORBITAL PROSTHESIS PROVIDED BY A NON-PHYSICIAN	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L8043	HCPCS	UPPER FACIAL PROSTHESIS PROVIDED A NON-PHYSICIAN	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L8044	HCPCS	HEMI-FACIAL PROSTHESIS PROVIDED A NON-PHYSICIAN	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L8045	HCPCS	AURICULAR PROSTHESIS PROVIDED BY A NON-PHYSICIAN	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L8046	HCPCS	PARTIAL FACIAL PROSTHESIS PROVIDED NON-PHYSICIAN	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L8047	HCPCS	NASAL SEPTAL PROSTHESIS PROVIDED A NON-PHYSICIAN	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L8499	HCPCS	UNLISTED PROC MISCELLANEOUS PROSTHETIC SERVICES	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L8609	HCPCS	ARTIFICIAL CORNEA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L8610	HCPCS	OCULAR IMPLANT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L8612	HCPCS	AQUEOUS SHUNT	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L8614	HCPCS	COCHLEAR DEVICE INCLUDES ALL INT&EXT COMPONENTS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L8619	HCPCS	COCHLEAR IMPL EXT SPEECH PROCESSR/CONTROLLR REPL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L8631	HCPCS	MPJ REPLCMT TWO/MORE PECES METL CERAM-LIKE MATL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L8659	HCPCS	IP FNGR JNT REPL TWO/MORE PECES METL CERAM-LIKE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L8680	HCPCS	IMPLANTABLE NEUROSTIMULATOR ELECTRODE EACH	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L8690	HCPCS	AUDITORY OSSEOINTEGRATED DEVC INT/EXT COMPONENTS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L8691	HCPCS	AUD OI DEVC EXT SP EXCL TRNSDUCR/ACTUATR REPL EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	L8692	HCPCS	AUDITORY OSSEOINTEGRATED DEV EXT SOUND BODY WORN	N	NA
UNITED	Q3 2025	DME/Medical Supplies	S0580	HCPCS	POLYCARBONATE LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	S1030	HCPCS	CONT NONINVASIVE GLU MONITORING DEVICE PURCHASE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	S1031	HCPCS	CONT NONINVAS GLU MON DEVC RENTAL SENSOR REPL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	S1040	HCPCS	CRANIAL REMOLDING ORTHOTIC PED RIGID CUSTOM FAB	N	NA
UNITED	Q3 2025	DME/Medical Supplies	T1999	HCPCS	MISC TX ITEMS & SPL RETAIL PURCHASE NOC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	T4521	HCPCS	ADLT SIZED DISPBL INCONT PROD BRF/DIAPER SM EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	T4522	HCPCS	ADLT SIZED DISPBL INCONT PROD BRF/DIAPER MED EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	T4523	HCPCS	ADLT SIZED DISPBL INCONT PROD BRF/DIAPER LG EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	T4525	HCPCS	ADLT SZD DISPBL INCONT PROD UNDWEAR/PULLON SM EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	T4526	HCPCS	ADLT SZD DISPBL INCONT PROD UNDWEAR MED EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	T4527	HCPCS	ADLT SZD DISPBL INCONT PROD UNDWEAR/PULLON LG EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	T4528	HCPCS	ADLT SZD DISPBL INCONT PROD UNDWEAR XTRA LG EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	T4529	HCPCS	PED SZD DISPBL INCONT PROD BRF/DIAPER SM/MED EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	T4532	HCPCS	PED SZD DISPBL INCONT PROD UNDWEAR/PULLON LG EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	T4533	HCPCS	YOUTH SIZED DISPBL INCONT PRODUCT BRF/DIAPER EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	T4535	HCPCS	DISPBL LINER/SHIELD/GUARD/PAD/UNDGRMNT INCONT EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	T4541	HCPCS	INCONTINENCE PRODUCT DISPOSABLE UNDPAD LARGE EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	T5999	HCPCS	SUPPLY NOT OTHERWISE SPECIFIED	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2200	HCPCS	SPHERE BIFOCL PLANO TO PLUS/MINUS 4.00D PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2201	HCPCS	SPHERE BIFOCAL +/- 4.12 TO +/- 7.00D PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2202	HCPCS	SPHERE BIFOCL +/- 7.12 TO +/- 20.00D PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2203	HCPCS	BIFOCL PLANO +/- 4.00D SPHER 0.12-2.00D CYL-EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2204	HCPCS	BIFOCL PLANO +/- 4.00D SPHER 2.12-4.00D CYL-EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2205	HCPCS	BIFOCL PLANO +/- 4.00D SPHER 4.25-6.00D CYL-EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2206	HCPCS	BIFOCL PLANO +/- 4.00D SPHER OVR 6.00D CYL-EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2207	HCPCS	BIFOCL +/-4.25-+/-7.00D SPHER 0.12-2.00D CYL-EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2208	HCPCS	BIFOCL +/-4.25-+/-7.00D SPHER 2.12-4.00D CYL-EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2209	HCPCS	BIFOCL +/-4.25-+/-7.00D SPHER 4.25-6.00D CYL-EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2210	HCPCS	BIFOCL +/-4.25-+/-7.00D SPHER OVR 6.00D CYL-LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2211	HCPCS	BIFOCL +/-7.25-+/-12.00D SPHER 0.25-2.25D CYL-EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2212	HCPCS	BIFOCL +/-7.25-+/-12.00D SPHER 2.25-4.00D CYL-EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2213	HCPCS	BIFOCL +/-7.25-+/-12.00D SPHER 4.25-6.00D CYL-EA	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2214	HCPCS	BIFOCAL SPHERE OVER +/-12.00D PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2215	HCPCS	LENTICULAR PER LENS BIFOCAL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2218	HCPCS	ANISEIKONIC PER LENS BIFOCAL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2219	HCPCS	BIFOCAL SEG WIDTH OVER 28MM	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2220	HCPCS	BIFOCAL ADD OVER 3.25D	N	NA

UNITED	Q3 2025	DME/Medical Supplies	V2221	HCPCS	LENTICULAR LENS PER LENS BIFOCAL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2299	HCPCS	SPECIALTY BIFOCAL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2430	HCPCS	VARIBL ASPHRCITY LENS BIFOCL FULL FIELD-LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2500	HCPCS	CONTACT LENS PMMA SPHERICAL PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2501	HCPCS	CONTACT LENS PMMA TORIC/PRISM BALLAST PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2502	HCPCS	CONTACT LENS PMMA BIFOCAL PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2503	HCPCS	CONTACT LENS PMMA COLOR VISION DEFIC PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2510	HCPCS	CONTACT LENS GAS PERMEABLE SPHERICAL PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2511	HCPCS	CNTC LENS GAS PERMEABLE TORIC PRISM BALLST-LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2512	HCPCS	CONTACT LENS GAS PERMEABLE BIFOCAL PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2513	HCPCS	CNTC LENS GAS PERMEABLE EXTENDED WEAR PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2521	HCPCS	CNTC LENS HYDROPHIL TORIC/PRISM BALLST PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2522	HCPCS	CONTACT LENS HYDROPHILIC BIFOCAL PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2523	HCPCS	CONTACT LENS HYDROPHILIC EXTENDED WEAR PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2524	HCPCS	CONTACT LENS HPI SPH PC ADDITIVE PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2530	HCPCS	CONTACT LENS SCLERAL GAS IMPERMEABLE PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2531	HCPCS	CONTACT LENS SCLERAL GAS PERMEABLE PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2624	HCPCS	POLISHING/RESURFACING OF OCULAR PROSTHESIS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2625	HCPCS	ENLARGEMENT OF OCULAR PROSTHESIS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2626	HCPCS	REDUCTION OF OCULAR PROSTHESIS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2627	HCPCS	SCLERAL COVER SHELL	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2628	HCPCS	FABRICATION AND FITTING OF OCULAR CONFORMER	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2629	HCPCS	PROSTHETIC EYE OTHER TYPE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2630	HCPCS	ANTERIOR CHAMBER INTRAOCULAR LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2631	HCPCS	IRIS SUPPORTED INTRAOCULAR LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2632	HCPCS	POSTERIOR CHAMBER INTRAOCULAR LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2700	HCPCS	BALANCE LENS PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2710	HCPCS	SLAB OFF PRISM GLASS OR PLASTIC PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2715	HCPCS	PRISM PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2730	HCPCS	SPECIAL BASE CURVE GLASS OR PLASTIC PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2744	HCPCS	TINT PHOTOCHROMATIC PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2745	HCPCS	ADD LENS; TINT COLOR SOLID EXCLD PHOTOCHRMATC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2750	HCPCS	ANTIREFLECTIVE COATING PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2755	HCPCS	U-V LENS PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2760	HCPCS	SCRATCH RESISTANT COATING PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2761	HCPCS	MIRROR COAT TYPE SOLID GRADENT/= LENS MATL-LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2770	HCPCS	OCCLUDER LENS PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2780	HCPCS	OVERSIZE LENS PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2782	HCPCS	LENS INDX 1.54-1.65 PLSTC/1.60-1.79 GLASS LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2783	HCPCS	LENS INDX >/= 1.66 PLSTC/>/= 1.80 GLASS LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2784	HCPCS	LENS POLYCARBONATE OR EQUAL ANY INDEX PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2786	HCPCS	SPECIALTY OCCUPATIONAL MULTIFOCAL LENS PER LENS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V2799	HCPCS	VISION ITEM OR SERVICE MISCELLANEOUS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V5014	HCPCS	REPAIR/MODIFICATION OF A HEARING AID	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V5180	HCPCS	Hearing aid, CROS, behind the ear	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V5220	HCPCS	Hearing aid, BICROS, behind the ear	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V5254	HCPCS	HEARING AID DIGITAL MONAURAL CIC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V5255	HCPCS	HEARING AID DIGITAL MONAURAL ITC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V5256	HCPCS	HEARING AID DIGITAL MONAURAL ITE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V5257	HCPCS	HEARING AID DIGITAL MONAURAL BTE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V5258	HCPCS	HEARING AID DIGITAL BINAURAL CIC	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V5260	HCPCS	HEARING AID DIGITAL BINAURAL ITE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V5261	HCPCS	HEARING AID DIGITAL BINAURAL BTE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V5264	HCPCS	EAR MOLD/INSERT NOT DISPOSABLE ANY TYPE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V5266	HCPCS	BATTERY FOR USE IN HEARING DEVICE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V5269	HCPCS	ASSISTIVE LISTENING DEVICE ALERTING ANY TYPE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V5270	HCPCS	ASSTIVE LISTENING DEVICE TELEVISN AMPLIFIER TYPE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V5271	HCPCS	ASSTIVE LISTENING DEVC TELEVISN CAPTION DECODER	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V5272	HCPCS	ASSISTIVE LISTENING DEVICE TDD	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V5274	HCPCS	ASSISTIVE LEARNING DEVICE NOS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V5275	HCPCS	EAR IMPRESSION EACH	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V5281	HCPCS	ASSIST LIST DEVC PERS FM/DM SYS MONAURL ANY TYPE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V5282	HCPCS	ASSIST LIST DEVC PERS FM/DM SYS BINAURL ANY TYPE	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V5283	HCPCS	ASSIST LIST DEVC PERS FM/DM NCK LOOP INDUCT RECV	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V5286	HCPCS	ASSIST LISTEN DEVC PERS BLUE TOOTH FM/DM RECEIVR	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V5287	HCPCS	ASSISTIVE LISTENING DEVC PERS FM/DM RECEIVER NOS	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V5288	HCPCS	ASSIST LISTEN DEVC PERS FM/DM TRANSMITTER ALD	N	NA
UNITED	Q3 2025	DME/Medical Supplies	V5290	HCPCS	ASSIST LISTEN DEVC TRANSMITT MICROPHONE ANY TYPE	N	NA
UNITED	Q3 2025	HCBS	A4520	HCPCS	INCONTINENCE GARMENT ANY TYPE EACH	N	NA
UNITED	Q3 2025	HCBS	A4554	HCPCS	DISPOSABLE UNDERPADS ALL SIZES	N	NA
UNITED	Q3 2025	HCBS	H0044	HCPCS	SUPPORTED HOUSING PER MONTH	N	NA
UNITED	Q3 2025	HCBS	H0045	HCPCS	RESPITE CARE SERVICES NOT IN THE HOME PER DIEM	N	NA
UNITED	Q3 2025	HCBS	S5101	HCPCS	DAY CARE SERVICES ADULT; PER HALF DAY	N	NA
UNITED	Q3 2025	HCBS	S5102	HCPCS	DAY CARE SERVICES ADULT; PER DIEM	N	NA
UNITED	Q3 2025	HCBS	S5121	HCPCS	CHORE SERVICES; PER DIEM	N	NA
UNITED	Q3 2025	HCBS	S5135	HCPCS	COMPANION CARE ADULT ; PER 15 MINUTES	N	NA
UNITED	Q3 2025	HCBS	S5140	HCPCS	FOSTER CARE ADULT; PER DIEM	N	NA
UNITED	Q3 2025	HCBS	S5150	HCPCS	UNSKILLED RESPITE CARE NOT HOSPICE; PER 15 MIN	N	NA
UNITED	Q3 2025	HCBS	S5151	HCPCS	UNSKILLED RESPITE CARE NOT HOSPICE; PER DIEM	N	NA
UNITED	Q3 2025	HCBS	S5160	HCPCS	EMERGENCY RESPONSE SYSTEM; INSTALLATION&TESTING	N	NA
UNITED	Q3 2025	HCBS	S5162	HCPCS	EMERGENCY RESPONSE SYSTEM; PURCHASE ONLY	N	NA
UNITED	Q3 2025	HCBS	S5165	HCPCS	HOME MODIFICATIONS; PER SERVICE	N	NA

UNITED	Q3 2025	HCBS	S5185	HCPCS	MED REMINDER SERVICE NON-FACE-TO-FACE; MONTH	N	NA
UNITED	Q3 2025	HCBS	S9125	HCPCS	RESPITE CARE IN THE HOME PER DIEM	N	NA
UNITED	Q3 2025	HCBS	S9991	HCPCS	SERVICES PROVIDED AS PART PHASE III CLIN TRIAL	N	NA
UNITED	Q3 2025	HCBS	T1005	HCPCS	RESPITE CARE SERVICES UP TO 15 MINUTES	N	NA
UNITED	Q3 2025	HCBS	T1016	HCPCS	CASE MANAGEMENT EACH 15 MINS	N	NA
UNITED	Q3 2025	HCBS	T1019	HCPCS	PERSONAL CARE SERVICES PER 15 MINUTES	N	NA
UNITED	Q3 2025	HCBS	T1023	HCPCS	SCR CONSIDER IND PARTICIP SPEC PROG PROJ/TX PER	N	NA
UNITED	Q3 2025	HCBS	T2003	HCPCS	NON-EMERGENCY TRANSPORTATION; ENCOUNTER/TRIP	N	NA
UNITED	Q3 2025	HCBS	T2005	HCPCS	NONEMERGENCY TRANSPORTATION; STRETCHER VAN	N	NA
UNITED	Q3 2025	HCBS	T2024	HCPCS	SERVICE ASSESSMENT/PLAN CARE DEVELOPMENT WAIVER	N	NA
UNITED	Q3 2025	HCBS	T2028	HCPCS	SPECIALIZED SUPPLY NOT OTH SPECIFIED WAIVER	N	NA
UNITED	Q3 2025	HCBS	T2029	HCPCS	SPECIALIZED MEDICAL EQUIPMENT NOS WAIVER	N	NA
UNITED	Q3 2025	HCBS	T2031	HCPCS	ASSISTED LIVING WAIVER; PER DIEM	N	NA
UNITED	Q3 2025	HCBS	T2033	HCPCS	RESIDENTIAL CARE NOS WAIVER; PER DIEM	N	NA
UNITED	Q3 2025	HCBS	T2035	HCPCS	UTIL SRVC SUPP MED EQP&ASSTIV TECH/DEVC WAIVER	N	NA
UNITED	Q3 2025	HCBS	T2038	HCPCS	COMMUNITY TRANSITION WAIVER; PER SERVICE	N	NA
UNITED	Q3 2025	HCBS	T2039	HCPCS	VEHICLE MODIFICATIONS WAIVER; PER SERVICE	N	NA
UNITED	Q3 2025	HCBS	T2044	HCPCS	HOSPICE INPATIENT RESPITE CARE; PER DIEM	N	NA
UNITED	Q3 2025	HCBS	T2045	HCPCS	HOSPICE GENERAL INPATIENT CARE; PER DIEM	N	NA
UNITED	Q3 2025	HCBS	T4524	HCPCS	ADLT SZD DISPBL INCONT PROD BRF/DIAPER X-LG EA	N	NA
UNITED	Q3 2025	HCBS	T4530	HCPCS	PED SZD DISPBL INCONT PROD BRF/DIAPER LG SZ EA	N	NA
UNITED	Q3 2025	HCBS	T4531	HCPCS	PED SZD DISPBL INCONT PROD UNDWEAR SM/MED EA	N	NA
UNITED	Q3 2025	HCBS	T4534	HCPCS	YOUTH SZD DISPBL INCONT PROD UNDWEAR/PULLON EA	N	NA
UNITED	Q3 2025	HCBS	T4537	HCPCS	INCONT PROD PROTVE UNDPAD REUSABLE BED SIZE EA	N	NA
UNITED	Q3 2025	HCBS	T4538	HCPCS	DIAPER SERVICE REUSABLE DIAPER EACH DIAPER	N	NA
UNITED	Q3 2025	HCBS	T4539	HCPCS	INCONTINENCE PRODUCT DIAPER/BRF REUSABLE SIZE EA	N	NA
UNITED	Q3 2025	HCBS	T4540	HCPCS	INCONT PROD PROTVE UNDPAD REUSABLE CHAIR SIZE EA	N	NA
UNITED	Q3 2025	HCBS	T4542	HCPCS	INCONTINENCE PRODUCT DISPBL UNDPAD SMALL SIZE EA	N	NA
UNITED	Q3 2025	HCBS	T4543	HCPCS	ADULT SIZE DISP INCONTINENCE PROD ABOVE XL EA	N	NA
UNITED	Q3 2025	HCBS	T4544	HCPCS	ADULT SIZE DISPBL INCONT PULLUP ABVE EXTRA LG EA	N	NA
UNITED	Q3 2025	Home Health	G0151	HCPCS	SERVICE PHYS THERAP HOME HLTH/HOSPICE EA 15 MIN	N	NA
UNITED	Q3 2025	Home Health	G0152	HCPCS	SERVICE OCCUP THERAP HOME HLTH/HOSPICE EA 15 MIN	N	NA
UNITED	Q3 2025	Home Health	G0153	HCPCS	SRVC SPCH&LANG PATH HOME HLTH/HOSPICE EA 15 MIN	N	NA
UNITED	Q3 2025	Home Health	G0155	HCPCS	SRVC CLINICAL SOCIAL WORKER HH/HOSPICE EA 15 MIN	N	NA
UNITED	Q3 2025	Home Health	G0156	HCPCS	SRVC HH/HOSPICE AIDE IN HH/HOSPICE SET EA 15 MIN	N	NA
UNITED	Q3 2025	Home Health	G0157	HCPCS	SERVICES PT ASSIST HOME HEALTH/HOSPICE EA 15 MIN	N	NA
UNITED	Q3 2025	Home Health	G0158	HCPCS	SERVICE OT ASSIST HOME HEALTH/HOSPICE EA 15 MIN	N	NA
UNITED	Q3 2025	Home Health	G0159	HCPCS	SERVICES PT HOME HEALTH EST/DEL PT MP EA 15 MINS	N	NA
UNITED	Q3 2025	Home Health	G0160	HCPCS	SERVICES OT HOME HEALTH EST/DEL OT MP EA 15 MINS	N	NA
UNITED	Q3 2025	Home Health	G0161	HCPCS	SERVICE SLP HH EST/DEL SPCH-LANG PATH MP EA 15 M	N	NA
UNITED	Q3 2025	Home Health	G0299	HCPCS	DIRECT SNS RN HOME HEALTH/HOSPICE SET EA 15 MIN	N	NA
UNITED	Q3 2025	Home Health	G0300	HCPCS	DIRECT SNS LPN HOME HLTH/HOSPICE SET EA 15 MIN	N	NA
UNITED	Q3 2025	Home Health	G0493	HCPCS	SKILLED SERVICES RN OBV & ASMT PT COND EA 15 MIN	N	NA
UNITED	Q3 2025	Home Health	G0494	HCPCS	SKILLED SRVC LPN OBS & ASMT PT COND EA 15 MIN	N	NA
UNITED	Q3 2025	Home Health	G0495	HCPCS	SKD SRVC RN TRAIN&/EDU PT/FAM HH/HOSPC EA 15 MIN	N	NA
UNITED	Q3 2025	Home Health	G0496	HCPCS	SKD SRVC LPN TRAIN&/EDU PT/FAM HH/HOSPC E 15 MIN	N	NA
UNITED	Q3 2025	Home Health	S5180	HCPCS	HOME HEALTH RESPIRATORY THERAPY INIT EVALUATION	N	NA
UNITED	Q3 2025	Home Health	S5181	HCPCS	HOME HEALTH RESPIRATORY THERAPY NOS PER DIEM	N	NA
UNITED	Q3 2025	Home Health	S9128	HCPCS	SPEECH THERAPY IN THE HOME PER DIEM	N	NA
UNITED	Q3 2025	Home Health	S9129	HCPCS	OCCUPATIONAL THERAPY IN THE HOME PER DIEM	N	NA
UNITED	Q3 2025	Home Health	S9131	HCPCS	PHYSICAL THERAPY; IN THE HOME PER DIEM	N	NA
UNITED	Q3 2025	Home Health	S9474	HCPCS	ENTRSTML TX REGISTERED NRS CERT ENTRSTML TX-DIEM	N	NA
UNITED	Q3 2025	Home Health	T1000	HCPCS	PRIV DUTY/INDEPEND NRS SERVICE LIC UP 15 MIN	N	NA
UNITED	Q3 2025	Home Health	T1002	HCPCS	RN SERVICES UP TO 15 MINUTES	N	NA
UNITED	Q3 2025	Home Health	T1003	HCPCS	LPN/LVN SERVICES UP TO 15 MINUTES	N	NA
UNITED	Q3 2025	Inpatient Hosp	101	REV CODE	ROOM AND BOARD - PRIVATE ROOM	N	NA
UNITED	Q3 2025	Inpatient Hosp	110	REV CODE	ROOM AND BOARD - GENERAL CLASSIFICATION	N	NA
UNITED	Q3 2025	Inpatient Hosp	112	REV CODE	ROOM AND BOARD - MEDICAL/SURGICAL - SEMI-PRIVATE	N	NA
UNITED	Q3 2025	Inpatient Hosp	118	REV CODE	ROOM AND BOARD - REHABILITATION, PRIVATE ROOM	N	NA
UNITED	Q3 2025	Inpatient Hosp	120	REV CODE	ROOM AND BOARD - GENERAL CLASSIFICATION, SEMI-PRIVATE	N	NA
UNITED	Q3 2025	Inpatient Hosp	122	REV CODE	ROOM AND BOARD - OBSTETRIC, SEMI-PRIVATE	N	NA
UNITED	Q3 2025	Inpatient Hosp	123	REV CODE	ROOM AND BOARD - PEDIATRIC, SEMI-PRIVATE	N	NA
UNITED	Q3 2025	Inpatient Hosp	170	REV CODE	ROOM AND BOARD - NURSERY - GENERAL CLASSIFICATION	N	NA
UNITED	Q3 2025	Inpatient Hosp	172	REV CODE	ROOM AND BOARD - NURSERY - NEWBORN LEVEL II (INTERMEDIATE CARE)	N	NA
UNITED	Q3 2025	Inpatient Hosp	174	REV CODE	ROOM AND BOARD - NURSERY - NEWBORN LEVEL IV (ADVANCED INTENSIVE CARE)	N	NA
UNITED	Q3 2025	Inpatient Hosp	190	REV CODE	ROOM AND BOARD - SUBACUTE PEDIATRIC - PRIVATE HOSPITAL	N	NA
UNITED	Q3 2025	Inpatient Hosp	191	REV CODE	ROOM AND BOARD - SUBACUTE PEDIATRIC - SEMI-PRIVATE ROOM	N	NA
UNITED	Q3 2025	Inpatient Hosp	192	REV CODE	ROOM AND BOARD - SUBACUTE PEDIATRIC - WARD (3+ BEDS)	N	NA
UNITED	Q3 2025	Inpatient Hosp	199	REV CODE	ROOM AND BOARD - SUBACUTE ADULT - PRIVATE HOSPITAL	N	NA
UNITED	Q3 2025	Inpatient Hosp	203	REV CODE	ROOM AND BOARD - PEDIATRIC INTENSIVE CARE	N	NA
UNITED	Q3 2025	Inpatient Hosp	55970	CPT	SEX TRANSFORMATION M TO F	N	NA
UNITED	Q3 2025	Inpatient Hosp	0191T	CPT	ANT SEGMENT INSERTION DRAINAGE W/O RESERVOIR INT	N	NA
UNITED	Q3 2025	Inpatient Hosp	0537T	CPT	CAR-T THERAPY HRVG BLD DRV T LMPHCYT PR DAY	N	NA
UNITED	Q3 2025	Inpatient Hosp	0538T	CPT	CAR-T THERAPY PREPJ BLD DRV T LMPHCYT F/TRNS	N	NA
UNITED	Q3 2025	Inpatient Hosp	0539T	CPT	CAR-T THERAPY RECEIPT & PREP CAR-T CELLS F/ADMN	N	NA
UNITED	Q3 2025	Inpatient Hosp	0540T	CPT	CAR-T THERAPY AUTOLOGOUS CELL ADMINISTRATION	N	NA
UNITED	Q3 2025	Inpatient Hosp	173	REV CODE	ROOM AND BOARD - NURSERY - NEWBORN LEVEL III (INTERMEDIATE INTENSIVE CARE)	N	NA
UNITED	Q3 2025	Inpatient Hosp	206	REV CODE	ROOM AND BOARD - INTENSIVE CARE - INTERMEDIATE ICU	N	NA
UNITED	Q3 2025	Inpatient Hosp	214	REV CODE	ROOM AND BOARD - CORONARY CARE - INTERMEDIATE CCU (CORONARY CARE UNIT)	N	NA
UNITED	Q3 2025	Inpatient Hosp	33477	CPT	TCAT PULMONARY VALVE IMPLANTATION PRQ APPROACH	N	NA
UNITED	Q3 2025	Inpatient Hosp	36514	CPT	THERAPEUTIC APHERESIS PLASMA PHERESIS	N	NA
UNITED	Q3 2025	Inpatient Hosp	55866	CPT	LAPS SURG PRST8ECT RPBIC RAD W/NRV SPARING ROBOT	N	NA

UNITED	Q3 2025	Inpatient Hosp		69714	CPT	IMPL OI IMPLT SKULL PERQ ATTACHMENT ESP	N	NA
UNITED	Q3 2025	Inpatient Hosp		69930	CPT	COCHLEAR DEVICE IMPLANTATION W/WO MASTOIDECTOMY	N	NA
UNITED	Q3 2025	Inpatient Hosp	95700		CPT	EEG CONT REC W/VIDEO BY TECH MIN 8 CHANNELS	N	NA
UNITED	Q3 2025	Inpatient Hosp	95711		CPT	VEEG BY TECH 2-12 HOURS UNMONITORED	N	NA
UNITED	Q3 2025	Inpatient Hosp	95712		CPT	VEEG BY TECH 2-12 HR INTERMITTENT MONITORING	N	NA
UNITED	Q3 2025	Inpatient Hosp	95713		CPT	VEEG BY TECH 2-12 HR CONTINUOUS R-T MONITORING	N	NA
UNITED	Q3 2025	Inpatient Hosp	95714		CPT	VEEG BY TECH EA INCR 12-26 HR UNMONITORED	N	NA
UNITED	Q3 2025	Inpatient Hosp	95715		CPT	VEEG BY TECH EA INCR 12-26 HR INTERMITTENT MNTR	N	NA
UNITED	Q3 2025	Inpatient Hosp	95716		CPT	VEEG BY TECH EA INCR 12-26 HR CONT R-T MNTR	N	NA
UNITED	Q3 2025	Inpatient Hosp	95718		CPT	EEG PHYS/QHP 2-12 HR WITH VEEG	N	NA
UNITED	Q3 2025	Inpatient Hosp	95720		CPT	EEG PHYS/QHP EA INCR>12HR<26HR AFTER 24HR W/VEEG	N	NA
UNITED	Q3 2025	Inpatient Hosp	95722		CPT	EEG COMPLETE STD PHYS/QHP>36 HR<60 HR W/VEEG	N	NA
UNITED	Q3 2025	Inpatient Hosp	95724		CPT	EEG COMPLETE STD PHYS/QHP>60 HR<84 HR W/VEEG	N	NA
UNITED	Q3 2025	Inpatient Hosp	95726		CPT	EEG COMPLETE STD PHYS/QHP>84 HR W/VEEG	N	NA
UNITED	Q3 2025	Inpatient Hosp	C2624		HCPCS	IMPL WIRELESS PULM ARTERY PRESS SENSOR DEL CATH	N	NA
UNITED	Q3 2025	Inpatient Hosp	S2102		HCPCS	ISLET CELL TISS TRANSPLANT FROM PANC; ALLOGENEIC	N	NA
UNITED	Q3 2025	Inpatient Hosp	S9990		HCPCS	SERVICES PROVIDED AS PART PHASE II CLIN TRIAL	N	NA
UNITED	Q3 2025	Other	C9399		HCPCS	UNCLASSIFIED DRUGS OR BIOLOGICALS	Y	D
UNITED	Q3 2025	Other	J0129		HCPCS	INJ ABATACEPT 10 MG USED MEDICARE ADM SUPV PHYS	N	NA
UNITED	Q3 2025	Other	J0172		HCPCS	INJECTION, ADUCANUMAB-AVWA 2 MG	N	NA
UNITED	Q3 2025	Other	J0174		HCPCS	INJECTION, LECANEMAB-IRMB, 1 MG	N	NA
UNITED	Q3 2025	Other	J0175		HCPCS	INJECTION DONANEMAB-AZBT 2 MG	N	NA
UNITED	Q3 2025	Other	J0178		HCPCS	INJECTION AFLIBERCEPT 1 MG	N	NA
UNITED	Q3 2025	Other	J0179		HCPCS	INJECTION BROLUCIZUMAB-DBLL 1 MG	N	NA
UNITED	Q3 2025	Other	J0180		HCPCS	INJECTION AGALSIDASE BETA 1 MG	N	NA
UNITED	Q3 2025	Other	J0202		HCPCS	INJECTION ALEMTUZUMAB 1 MG	N	NA
UNITED	Q3 2025	Other	J0217		HCPCS	INJECTION VELMANASE ALFA-TYCV 1 MG	N	NA
UNITED	Q3 2025	Other	J0218		HCPCS	INJECTION OLIPUDASE ALFA-RPCP 1 MG	N	NA
UNITED	Q3 2025	Other	J0219		HCPCS	INJECTION AVALGLUCOSIDASE ALFA-NGPT 4 MG	N	NA
UNITED	Q3 2025	Other	J0221		HCPCS	INJECTION ALGLUCOSIDASE ALFA LUMIZYME 10 MG	N	NA
UNITED	Q3 2025	Other	J0222		HCPCS	INJECTION PATISIRAN 0.1 MG	N	NA
UNITED	Q3 2025	Other	J0223		HCPCS	INJECTION GIVOSIRAN 0.5 MG	N	NA
UNITED	Q3 2025	Other	J0224		HCPCS	INJECTION LUMASIRAN 0.5 MG	N	NA
UNITED	Q3 2025	Other	J0225		HCPCS	INJECTION VUTRISIRAN 1 MG	N	NA
UNITED	Q3 2025	Other	J0256		HCPCS	INJECTION ALPHA 1-PROTASE INHIBITOR NOS 10 MG	N	NA
UNITED	Q3 2025	Other	J0257		HCPCS	INJECTION ALPHA 1 PROTEINASE INHIBITOR 10 MG	N	NA
UNITED	Q3 2025	Other	J0490		HCPCS	INJECTION BELIMUMAB 10 MG	N	NA
UNITED	Q3 2025	Other	J0491		HCPCS	INJECTION ANIFROLUMAB-FNIA 1 MG	N	NA
UNITED	Q3 2025	Other	J0517		HCPCS	INJECTION BENRALIZUMAB 1 MG	N	NA
UNITED	Q3 2025	Other	J0567		HCPCS	INJECTION CERLIPONASE ALFA 1 MG	N	NA
UNITED	Q3 2025	Other	J0570		HCPCS	BUPRENORPHINE IMPLANT 74.2 MG	N	NA
UNITED	Q3 2025	Other	J0584		HCPCS	INJECTION BUROSUMAB-TWZA 1 MG	N	NA
UNITED	Q3 2025	Other	J0585		HCPCS	BOTULINUM TOXIN TYPE A PER UNIT	N	NA
UNITED	Q3 2025	Other	J0586		HCPCS	INJECTION ABOBOTULINUMTOXINA 5 UNITS	N	NA
UNITED	Q3 2025	Other	J0587		HCPCS	INJECTION RIMABOTULINUMTOXINB 100 UNITS	N	NA
UNITED	Q3 2025	Other	J0588		HCPCS	INJECTION INCOBOTULINUMTOXIN A 1 UNIT	N	NA
UNITED	Q3 2025	Other	J0596		HCPCS	INJECTION C1 ESTERASE INHIBITOR RUCONEST 10 U	N	NA
UNITED	Q3 2025	Other	J0597		HCPCS	INJ C-1 ESTERASE INHIB HUMN BERINERT 10 UNITS	N	NA
UNITED	Q3 2025	Other	J0598		HCPCS	INJECTION C1 ESTERASE INHIBITOR CINRYZE 10 UNITS	N	NA
UNITED	Q3 2025	Other	J0606		HCPCS	INJECTION ETELCALCETIDE 0.1 MG	N	NA
UNITED	Q3 2025	Other	J0638		HCPCS	INJECTION CANAKINUMAB 1 MG	N	NA
UNITED	Q3 2025	Other	J0640		HCPCS	INJECTION LEUCOVORIN CALCIUM PER 50 MG	N	NA
UNITED	Q3 2025	Other	J0641		HCPCS	INJECTION LEVOLEUCOVORIN NOS 0.5 MG	N	NA
UNITED	Q3 2025	Other	J0642		HCPCS	INJECTION LEVOLEUCOVORIN 0.5 MG	N	NA
UNITED	Q3 2025	Other	J0717		HCPCS	INJECTION CERTOLIZUMAB PEGOL 1 MG	N	NA
UNITED	Q3 2025	Other	J0741		HCPCS	INJECTION CABOTEGRAVIR & RILPIVIRINE 2MG/3MG	N	NA
UNITED	Q3 2025	Other	J0791		HCPCS	INJECTION CRIZANLIZUMAB-TMCA 5 MG	N	NA
UNITED	Q3 2025	Other	J0800		HCPCS	INJECTION CORTICOTROPIN UP TO 40 UNITS	N	NA
UNITED	Q3 2025	Other	J0879		HCPCS	INJECTION DIFELIKEFALIN 0.1 MICROGRAM	N	NA
UNITED	Q3 2025	Other	J0885		HCPCS	INJECTION EPOETIN ALFA FOR NON-ESRD 1000 UNITS	N	NA
UNITED	Q3 2025	Other	J0896		HCPCS	INJECTION LUSPATERCEPT-AAMT 0.25 MG	N	NA
UNITED	Q3 2025	Other	J0897		HCPCS	INJECTION DENOSUMAB 1 MG	N	NA
UNITED	Q3 2025	Other	J1290		HCPCS	INJECTION ECALLANTIDE 1 MG	N	NA
UNITED	Q3 2025	Other	J1299		HCPCS	INJECTION ECULIZUMAB 2 MG	N	NA
UNITED	Q3 2025	Other	J1300		HCPCS	INJECTION ECULIZUMAB 10 MG	N	NA
UNITED	Q3 2025	Other	J1301		HCPCS	INJECTION EDARAVONE 1 MG	N	NA
UNITED	Q3 2025	Other	J1302		HCPCS	INJECTION SUTIMLIMAB-JOME 10 MG	N	NA
UNITED	Q3 2025	Other	J1303		HCPCS	INJECTION RAVULIZUMAB-CWVZ 10 MG	N	NA
UNITED	Q3 2025	Other	J1304		HCPCS	INJECTION TOFERSEN 1 MG	N	NA
UNITED	Q3 2025	Other	J1305		HCPCS	INJECTION EVINACUMAB-DGNB 5MG	N	NA
UNITED	Q3 2025	Other	J1306		HCPCS	INJECTION INCLISIRAN 1 MG	N	NA
UNITED	Q3 2025	Other	J1307		HCPCS	INJECTION CROVALIMAB-AKKZ 10 MG	N	NA
UNITED	Q3 2025	Other	J1322		HCPCS	INJECTION ELOSULFASE ALFA 1 MG	N	NA
UNITED	Q3 2025	Other	J1411		HCPCS	INJ ETRANACOGENE DEZAPARVOVEC-DRLB PER THR DOSE	N	NA
UNITED	Q3 2025	Other	J1412		HCPCS	INJECTION VALOCTOCOGENE ROXAPARVOVEC-RVOX PER ML	N	NA
UNITED	Q3 2025	Other	J1413		HCPCS	INJ DELANDISTROGENE MOXEPARVOVEC-ROKL PER THR D	N	NA
UNITED	Q3 2025	Other	J1414		HCPCS	INJECTION FIDANACOGENE ELAPARVOVEC-DZKT PER TX D	N	NA
UNITED	Q3 2025	Other	J1426		HCPCS	INJECTION CASIMERSEN 10 MG	N	NA
UNITED	Q3 2025	Other	J1427		HCPCS	INJECTION VILTOLARSEN 10 MG	N	NA
UNITED	Q3 2025	Other	J1428		HCPCS	INJECTION ETEPLIRSEN 10 MG	N	NA
UNITED	Q3 2025	Other	J1429		HCPCS	INJECTION GOLODIRSEN 10 MG	N	NA
UNITED	Q3 2025	Other	J1437		HCPCS	INJECTION FERRIC DERISOMALTOSE 10 MG	N	NA

UNITED	Q3 2025	Other	J1439	HCPCS	INJECTION FERRIC CARBOXYMALTOSE 1 MG	N	NA
UNITED	Q3 2025	Other	J1442	HCPCS	INJECTION FILGRASTIM EXCLUDES BIOSIMILARS 1 MIC	N	NA
UNITED	Q3 2025	Other	J1447	HCPCS	INJECTION TBO-FILGRASTIM 1 MICROGRAM	N	NA
UNITED	Q3 2025	Other	J1448	HCPCS	INJECTION TRILACICLIB 1MG	N	NA
UNITED	Q3 2025	Other	J1449	HCPCS	INJECTION EFLAPEGRASTIM-XNST 0.1 MG	N	NA
UNITED	Q3 2025	Other	J1456	HCPCS	INJECT FOSAPREPITANT NOT THERAP EQUIV J1453 1 MG	N	NA
UNITED	Q3 2025	Other	J1458	HCPCS	INJECTION GALSULFASE 1 MG	N	NA
UNITED	Q3 2025	Other	J1459	HCPCS	INJ IG PRIVIGEN IV NONLYOPHILIZED 500 MG	N	NA
UNITED	Q3 2025	Other	J1551	HCPCS	INJECTION IMMUNE GLOBULIN CUTAQUIG 100 MG	N	NA
UNITED	Q3 2025	Other	J1552	HCPCS	INJECTION IMMUNE GLOBULIN ALYGLO 500 MG	N	NA
UNITED	Q3 2025	Other	J1554	HCPCS	INJECTION IMMUNE GLOBULIN ASCENIV 500 MG	N	NA
UNITED	Q3 2025	Other	J1555	HCPCS	INJECTION IMMUNE GLOBULIN 100 MG	N	NA
UNITED	Q3 2025	Other	J1556	HCPCS	INJECTION IMMUNE GLOBULIN BIVIGAM 500 MG	N	NA
UNITED	Q3 2025	Other	J1557	HCPCS	INJ IG GAMMAPLEX IV NONLYOPHILIZED 500 MG	N	NA
UNITED	Q3 2025	Other	J1558	HCPCS	INJECTION IMMUNE GLOBULIN XEMBIFY 100 MG	N	NA
UNITED	Q3 2025	Other	J1559	HCPCS	INJECTION IMMUNE GLOBULIN HIZENTRA 100 MG	N	NA
UNITED	Q3 2025	Other	J1561	HCPCS	INJECTION IMMUNE GLOBULIN NONLYOPHILIZED 500 MG	N	NA
UNITED	Q3 2025	Other	J1566	HCPCS	INJ IG IV LYPHILIZED NOT OTHERWISE SPEC 500 MG	N	NA
UNITED	Q3 2025	Other	J1568	HCPCS	INJ IG OCTOGAM IV NONLYOPHILIZED 500 MG	N	NA
UNITED	Q3 2025	Other	J1569	HCPCS	INJ IG GAMMAGARD LIQ IV NONLYOPHILIZED 500 MG	N	NA
UNITED	Q3 2025	Other	J1572	HCPCS	INJ IG FLEBOGAMMA DIF IV NONLYOPHILIZED 500 MG	N	NA
UNITED	Q3 2025	Other	J1575	HCPCS	INJ IMMUNE GLOBULIN/HYALURONIDASE 100 MG IG	N	NA
UNITED	Q3 2025	Other	J1576	HCPCS	INJECTION IMMUNE GLOBULIN IV NON-LYOPH 500 MG	N	NA
UNITED	Q3 2025	Other	J1599	HCPCS	INJ IG IV NONLYOPHILIZED E.G. LIQUID NOS 500 MG	N	NA
UNITED	Q3 2025	Other	J1602	HCPCS	INJECTION GOLIMUMAB 1 MG FOR INTRAVENOUS USE	N	NA
UNITED	Q3 2025	Other	J1743	HCPCS	INJECTION IDURSULFASE 1 MG	N	NA
UNITED	Q3 2025	Other	J1745	HCPCS	INJECTION INFLIXIMAB EXCLUDES BIOSIMILAR 10 MG	N	NA
UNITED	Q3 2025	Other	J1747	HCPCS	INJECTION SPESOLIMAB-SBZO 1 MG	N	NA
UNITED	Q3 2025	Other	J1786	HCPCS	INJECTION IMIGLUCERASE 10 UNITS	N	NA
UNITED	Q3 2025	Other	J1823	HCPCS	INJECTION INEBILIZUMAB-CDON 1 MG	N	NA
UNITED	Q3 2025	Other	J1930	HCPCS	INJECTION LANREOTIDE 1 MG	N	NA
UNITED	Q3 2025	Other	J1931	HCPCS	INJECTION LARONIDASE 0.1 MG	N	NA
UNITED	Q3 2025	Other	J1932	HCPCS	INJECTION LANREOTIDE 1 MG	N	NA
UNITED	Q3 2025	Other	J1950	HCPCS	INJECTION LEUPROLIDE ACETATE PER 3.75 MG	N	NA
UNITED	Q3 2025	Other	J1951	HCPCS	INJECTION LEUPROLIDE AC FOR DEPOT SUSP 0.25 MG	N	NA
UNITED	Q3 2025	Other	J1952	HCPCS	LEUPROLIDE INJECTABLE CAMCEVI, 1 MG	N	NA
UNITED	Q3 2025	Other	J1954	HCPCS	INJ LEUPROLIDE ACETATE DEPOT SUSP LUT DEP 7.5MG	N	NA
UNITED	Q3 2025	Other	J1961	HCPCS	INJECTION LENACAPAVIR 1 MG	N	NA
UNITED	Q3 2025	Other	J2182	HCPCS	INJECTION MEPOLIZUMAB 1 MG	N	NA
UNITED	Q3 2025	Other	J2326	HCPCS	INJECTION NUSINERSEN 0.1 MG	N	NA
UNITED	Q3 2025	Other	J2327	HCPCS	INJECTION RISANKIZUMAB-RZAA INTRAVENOUS 1 MG	N	NA
UNITED	Q3 2025	Other	J2350	HCPCS	INJECTION OCRELIZUMAB 1 MG	N	NA
UNITED	Q3 2025	Other	J2351	HCPCS	INJECTION OCRELIZUMAB 1 MG & HYALURONIDASE OCSQ	N	NA
UNITED	Q3 2025	Other	J2353	HCPCS	INJ OCTREOTIDE DEPOT FORM IM INJ 1 MG	N	NA
UNITED	Q3 2025	Other	J2354	HCPCS	INJ OCTREOTIDE NON-DEPOT FORM SUBQ/IV INJ 25 MCG	N	NA
UNITED	Q3 2025	Other	J2356	HCPCS	INJECTION TEZEPELUMAB-EKKO 1 MG	N	NA
UNITED	Q3 2025	Other	J2357	HCPCS	INJECTION OMALIZUMAB 5 MG	N	NA
UNITED	Q3 2025	Other	J2502	HCPCS	INJECTION PASIREOTIDE LONG ACTING 1 MG	N	NA
UNITED	Q3 2025	Other	J2506	HCPCS	INJECT PEGFILGRASTIM EXCLUDES BIOSIMILAR 0.5 MG	N	NA
UNITED	Q3 2025	Other	J2507	HCPCS	INJECTION PEGLOTICASE 1 MG	N	NA
UNITED	Q3 2025	Other	J2508	HCPCS	INJECTION PEGUNIGALSIDASE ALFA-IWXJ 1 MG	N	NA
UNITED	Q3 2025	Other	J2777	HCPCS	INJECTION FARICIMAB-SVOA 0.1 MG	N	NA
UNITED	Q3 2025	Other	J2778	HCPCS	INJECTION RANIBIZUMAB 0.1 MG	N	NA
UNITED	Q3 2025	Other	J2779	HCPCS	INJ RANIBIZUMAB VIA IVT IMPLANT SUSVIMO 0.1 MG	N	NA
UNITED	Q3 2025	Other	J2786	HCPCS	INJECTION RESLIZUMAB 1 MG	N	NA
UNITED	Q3 2025	Other	J2796	HCPCS	INJECTION ROMIPLOSTIM 10 MCG	N	NA
UNITED	Q3 2025	Other	J2802	HCPCS	INJECTION ROMIPLOSTIM 1 MCG	N	NA
UNITED	Q3 2025	Other	J2820	HCPCS	INJECTION SARGRAMOSTIM 50 MCG	N	NA
UNITED	Q3 2025	Other	J2840	HCPCS	INJECTION SEBELIPASE ALFA 1 MG	N	NA
UNITED	Q3 2025	Other	J2998	HCPCS	INJECTION PLASMINOGEN HUMAN-TVMH 1 MG	N	NA
UNITED	Q3 2025	Other	J3032	HCPCS	INJECTION EPTINEZUMAB-JJMR 1 MG	N	NA
UNITED	Q3 2025	Other	J3060	HCPCS	INJECTION TALIGLUCERASE ALFA 10 UNITS	N	NA
UNITED	Q3 2025	Other	J3111	HCPCS	INJECTION ROMOSOZUMAB-AQQG 1 MG	N	NA
UNITED	Q3 2025	Other	J3241	HCPCS	INJECTION TEPROTUMUMAB-TRBW 10 MG	N	NA
UNITED	Q3 2025	Other	J3245	HCPCS	INJECTION TILDRAKIZUMAB 1 MG	N	NA
UNITED	Q3 2025	Other	J3262	HCPCS	INJECTION TOCILIZUMAB 1 MG	N	NA
UNITED	Q3 2025	Other	J3316	HCPCS	INJECTION TRIPTORELIN EXTENDED-RELEASE 3.75 MG	N	NA
UNITED	Q3 2025	Other	J3358	HCPCS	USTEKINUMAB FOR INTRAVENOUS INJECTION 1 MG	N	NA
UNITED	Q3 2025	Other	J3380	HCPCS	INJECTION VEDOLIZUMAB INTRAVENOUS 1 MG	N	NA
UNITED	Q3 2025	Other	J3392	HCPCS	INJECTION EXAGAMGLOGENE AUTOTEMCEL PER TREATMENT	N	NA
UNITED	Q3 2025	Other	J3397	HCPCS	INJECTION VESTRONIDASE ALFA-VJBK 1 MG	N	NA
UNITED	Q3 2025	Other	J3398	HCPCS	INJECTION VORETIGENE NEPARVOVEC-RZYL 1 B VEC G	N	NA
UNITED	Q3 2025	Other	J3401	HCPCS	BEREMAGENE GEPERPAVEC-SVDT FOR TOPICAL ADM	N	NA
UNITED	Q3 2025	Other	J3590	HCPCS	UNCLASSIFIED BIOLOGICS	Y	D
UNITED	Q3 2025	Other	J7320	HCPCS	HYALURONAN/DERIVITIVE GENVISC 850 IA INJ 1 MG	N	NA
UNITED	Q3 2025	Other	J7321	HCPCS	HYALURONAN/DERIV HYALGAN/SUPARTZ IA INJ PER DOSE	N	NA
UNITED	Q3 2025	Other	J7322	HCPCS	HYALURONAN/DERIVATIVE HYMOVIS IA INJ 1 MG	N	NA
UNITED	Q3 2025	Other	J7324	HCPCS	HYALURONAN/DERIV ORTHOVISC IA INJ PER DOSE	N	NA
UNITED	Q3 2025	Other	J7325	HCPCS	HYALURONAN/DERIV SYNVISC/SYNVISC-ONE IA INJ 1 MG	N	NA
UNITED	Q3 2025	Other	J7326	HCPCS	HYALURONAN/DERIV GEL-ONE INTRA-ARTIC INJ PER DOS	N	NA
UNITED	Q3 2025	Other	J7327	HCPCS	HYALURONAN/DERIVATIVE MONOVISC IA INJ PER DOSE	N	NA
UNITED	Q3 2025	Other	J7329	HCPCS	HYALURONAN/DERIVATIVE TRIVISC FOR IA INJ 1 MG	N	NA

UNITED	Q3 2025	Other	J7331	HCPCS	HYALURONAN/DERIVATIVE SYNOJOYNT IA INJ 1 MG	N	NA
UNITED	Q3 2025	Other	J7332	HCPCS	HYALURONAN/DERIVATIVE TRILURON IA INJ 1 MG	N	NA
UNITED	Q3 2025	Other	J7352	HCPCS	AFAMELANOTIDE IMPLANT 1 MG	N	NA
UNITED	Q3 2025	Other	J9000	HCPCS	INJECTION DOXORUBICIN HCL 10 MG	N	NA
UNITED	Q3 2025	Other	J9021	HCPCS	INJECT ASPARAGINASE RECOMBINANT (RYLAZE) 0.1 MG	N	NA
UNITED	Q3 2025	Other	J9022	HCPCS	INJECTION ATEZOLIZUMAB 10 MG	N	NA
UNITED	Q3 2025	Other	J9025	HCPCS	INJECTION AZACITIDINE 1 MG	N	NA
UNITED	Q3 2025	Other	J9033	HCPCS	INJECTION BENDAMUSTINE HCL 1 MG	N	NA
UNITED	Q3 2025	Other	J9035	HCPCS	INJECTION BEVACIZUMAB 10 MG	N	NA
UNITED	Q3 2025	Other	J9036	HCPCS	INJECTION BENDAMUSTINE HYDROCHLORIDE 1 MG	N	NA
UNITED	Q3 2025	Other	J9037	HCPCS	INJECTION BELANTAMAB MAFODOTIN-BLMF 0.5 MG	N	NA
UNITED	Q3 2025	Other	J9040	HCPCS	INJECTION BLEOMYCIN SULFATE 15 UNITS	N	NA
UNITED	Q3 2025	Other	J9043	HCPCS	INJECTION CABAZITAXEL 1 MG	N	NA
UNITED	Q3 2025	Other	J9044	HCPCS	INJECTION BORTEZOMIB NOS 0.1 MG	N	NA
UNITED	Q3 2025	Other	J9045	HCPCS	INJECTION CARBOPLATIN 50 MG	N	NA
UNITED	Q3 2025	Other	J9046	HCPCS	INJ BORTEZOMIB NOT THER EQUIV TO J9041 0.1 MG	N	NA
UNITED	Q3 2025	Other	J9047	HCPCS	INJECTION CARFILZOMIB 1 MG	N	NA
UNITED	Q3 2025	Other	J9048	HCPCS	INJ BTZ FRESENIUS KABI NOT TX EQV TO J9041 0.1MG	N	NA
UNITED	Q3 2025	Other	J9049	HCPCS	INJ BORTEZOMB HOSPIRA NOT TX EQV TO J9041 0.1 MG	N	NA
UNITED	Q3 2025	Other	J9051	HCPCS	INJECTION BORTEZOMIB NOT TE TO J9041 0.1 MG	N	NA
UNITED	Q3 2025	Other	J9052	HCPCS	INJECTION CARMUSTINE NOT THR EQV TO J9050 100 MG	N	NA
UNITED	Q3 2025	Other	J9057	HCPCS	INJECTION COPANLISIB 1 MG	N	NA
UNITED	Q3 2025	Other	J9060	HCPCS	INJECTION CISPLATIN POWDER OR SOLUTION 10 MG	N	NA
UNITED	Q3 2025	Other	J9061	HCPCS	INJECTION, AMIVANTAMAB-VMJW 2 MG	N	NA
UNITED	Q3 2025	Other	J9064	HCPCS	INJECTION CABAZITAXEL NOT TE TO J9043 1 MG	N	NA
UNITED	Q3 2025	Other	J9070	HCPCS	CYCLOPHOSPHAMIDE 100 MG	N	NA
UNITED	Q3 2025	Other	J9071	HCPCS	INJECTION CYCLOPHOSPHAMIDE AUROMEDICS 5 MG	N	NA
UNITED	Q3 2025	Other	J9072	HCPCS	INJECTION CYCLOPHOSPHAMIDE AVYXA 5 MG	N	NA
UNITED	Q3 2025	Other	J9118	HCPCS	INJECTION CALASPARGASE PEGOL-MKNL 10 UNITS	N	NA
UNITED	Q3 2025	Other	J9119	HCPCS	INJECTION CEMIPLIMAB-RWLC 1 MG	N	NA
UNITED	Q3 2025	Other	J9130	HCPCS	DACARBAZINE 100 MG	N	NA
UNITED	Q3 2025	Other	J9144	HCPCS	INJECTION DARATUMUMAB 10 MG & HYALURONIDASE-FIHJ	N	NA
UNITED	Q3 2025	Other	J9145	HCPCS	INJECTION DARATUMUMAB 10 MG	N	NA
UNITED	Q3 2025	Other	J9153	HCPCS	INJECTION LIPOSOMAL 1 MG DNR & 2.27 MG CA	N	NA
UNITED	Q3 2025	Other	J9155	HCPCS	INJECTION DEGARELIX 1 MG	N	NA
UNITED	Q3 2025	Other	J9165	HCPCS	INJECTION DIETHYLSTILBESTROL DIPHOSPHATE 250 MG	N	NA
UNITED	Q3 2025	Other	J9171	HCPCS	INJECTION DOCETAXEL 1 MG	N	NA
UNITED	Q3 2025	Other	J9172	HCPCS	INJECTION DOCETAXEL DOCIVYX 1 MG	N	NA
UNITED	Q3 2025	Other	J9173	HCPCS	INJECTION DURVALUMAB 10 MG	N	NA
UNITED	Q3 2025	Other	J9175	HCPCS	INJECTION ELLIOTTS B SOLUTION 1 ML	N	NA
UNITED	Q3 2025	Other	J9176	HCPCS	INJECTION ELOTUZUMAB 1 MG	N	NA
UNITED	Q3 2025	Other	J9177	HCPCS	INJECTION ENFORTUMAB VEDOTIN-EJFV 0.25 MG	N	NA
UNITED	Q3 2025	Other	J9178	HCPCS	INJECTION EPIRUBICIN HCL 2 MG	N	NA
UNITED	Q3 2025	Other	J9179	HCPCS	INJECTION ERIBULIN MESYLATE 0.1 MG	N	NA
UNITED	Q3 2025	Other	J9181	HCPCS	INJECTION ETOPOSIDE 10 MG	N	NA
UNITED	Q3 2025	Other	J9190	HCPCS	INJECTION FLUOROURACIL 500 MG	N	NA
UNITED	Q3 2025	Other	J9196	HCPCS	INJ GEMCITABINE HCI NOT THR EQUIV J9201 200 MG	N	NA
UNITED	Q3 2025	Other	J9198	HCPCS	INJ GEMCITABINE HYDROCHLORDE INFUGEM 100 MG	N	NA
UNITED	Q3 2025	Other	J9201	HCPCS	INJECTION GEMCITABINE HCL NOS 200 MG	N	NA
UNITED	Q3 2025	Other	J9202	HCPCS	GOSERELIN ACETATE IMPLANT PER 3.6 MG	N	NA
UNITED	Q3 2025	Other	J9203	HCPCS	INJECTION GEMTUZUMAB OZOGAMICIN 0.1 MG	N	NA
UNITED	Q3 2025	Other	J9204	HCPCS	INJECTION MOGAMULIZUMAB-KPKC 1 MG	N	NA
UNITED	Q3 2025	Other	J9206	HCPCS	INJECTION IRINOTECAN 20 MG	N	NA
UNITED	Q3 2025	Other	J9207	HCPCS	INJECTION IXABEPILONE 1 MG	N	NA
UNITED	Q3 2025	Other	J9210	HCPCS	INJECTION EMAPALUMAB-LZSG 1 MG	N	NA
UNITED	Q3 2025	Other	J9212	HCPCS	INJECTION INTERFERON ALFACON-1 RECOMBINANT 1 MCG	N	NA
UNITED	Q3 2025	Other	J9213	HCPCS	INJECTION INTERFERON ALFA-2A RECOMBINANT 3 M U	N	NA
UNITED	Q3 2025	Other	J9214	HCPCS	INJECTION INTERFERON ALFA-2B RECOMBINANT 1 M U	N	NA
UNITED	Q3 2025	Other	J9215	HCPCS	INJECTION INTERFERON ALFA-N3 250,000 IU	N	NA
UNITED	Q3 2025	Other	J9216	HCPCS	INJECTION INTERFERON GAMMA-1B 3 MILLION UNITS	N	NA
UNITED	Q3 2025	Other	J9217	HCPCS	LEUPROLIDE ACETATE 7.5 MG	N	NA
UNITED	Q3 2025	Other	J9218	HCPCS	LEUPROLIDE ACETATE PER 1 MG	N	NA
UNITED	Q3 2025	Other	J9223	HCPCS	INJECTION LURBINECTEDIN 0.1 MG	N	NA
UNITED	Q3 2025	Other	J9226	HCPCS	HISTRELIN IMPLANT SUPPRELIN LA 50 MG	N	NA
UNITED	Q3 2025	Other	J9227	HCPCS	INJECTION ISATUXIMAB-IRFC 10 MG	N	NA
UNITED	Q3 2025	Other	J9228	HCPCS	INJECTION IPILIMUMAB 1 MG	N	NA
UNITED	Q3 2025	Other	J9229	HCPCS	INJECTION INOTUZUMAB OZOGAMICIN 0.1 MG	N	NA
UNITED	Q3 2025	Other	J9246	HCPCS	INJECTION MELPHALAN EVOMELA 1 MG	N	NA
UNITED	Q3 2025	Other	J9247	HCPCS	INJECTION MELPHALAN FLUFENAMIDE 1 MG	N	NA
UNITED	Q3 2025	Other	J9250	HCPCS	METHOTREXATE SODIUM 5 MG	N	NA
UNITED	Q3 2025	Other	J9255	HCPCS	INJ METHOTREXATE NOT THR EQV TO J9260 50 MG	N	NA
UNITED	Q3 2025	Other	J9258	HCPCS	INJ PTX PRO-BND PA TEVA NOT EQUIV TO J9264 1 MG	N	NA
UNITED	Q3 2025	Other	J9260	HCPCS	INJECTION METHOTREXATE SODIUM 50 MG	N	NA
UNITED	Q3 2025	Other	J9263	HCPCS	INJECTION OXALIPLATIN 0.5 MG	N	NA
UNITED	Q3 2025	Other	J9264	HCPCS	INJECTION PACLITAXEL PROTEINBOUND PARTICLES 1 MG	N	NA
UNITED	Q3 2025	Other	J9266	HCPCS	INJECTION PEGASPARGASE PER SINGLE DOSE VIAL	N	NA
UNITED	Q3 2025	Other	J9267	HCPCS	INJECTION PACLITAXEL 1 MG	N	NA
UNITED	Q3 2025	Other	J9269	HCPCS	INJECTION TAGRAXOFUSP-ERZS 10 MCG	N	NA
UNITED	Q3 2025	Other	J9270	HCPCS	INJECTION PLICAMYCIN 2.5 MG	N	NA
UNITED	Q3 2025	Other	J9271	HCPCS	INJECTION PEMBROLIZUMAB 1 MG	N	NA
UNITED	Q3 2025	Other	J9272	HCPCS	INJECTION, DOSTARLIMAB-GXLY 10 MG	N	NA
UNITED	Q3 2025	Other	J9273	HCPCS	INJECTION, TISOTUMAB VEDOTIN-TFTV, 1 MG	N	NA

UNITED	Q3 2025	Other	J9274	HCPCS	INJECTION TEBENTAFUSP-TEBN 1 MCG	N	NA
UNITED	Q3 2025	Other	J9280	HCPCS	INJECTION MITOMYCIN 5 MG	N	NA
UNITED	Q3 2025	Other	J9281	HCPCS	MITOMYCIN PYELOCALYCEAL INSTILLATION 1 MG	N	NA
UNITED	Q3 2025	Other	J9285	HCPCS	INJECTION OLARATUMAB 10 MG	N	NA
UNITED	Q3 2025	Other	J9286	HCPCS	INJECTION GLOFITAMAB-GXBM 2.5 MG	N	NA
UNITED	Q3 2025	Other	J9293	HCPCS	INJECTION MITOXANTRONE HCL PER 5 MG	N	NA
UNITED	Q3 2025	Other	J9294	HCPCS	INJECTN PEMETREXED HOSPIRA NOT EQUIV J9305 10 MG	N	NA
UNITED	Q3 2025	Other	J9296	HCPCS	INJECTN PEMETREXED ACCORD NOT EQUIV J9305 10 MG	N	NA
UNITED	Q3 2025	Other	J9297	HCPCS	INJ PEMETREXED SANDOZ NOT THR EQUIV J9305 10 MG	N	NA
UNITED	Q3 2025	Other	J9298	HCPCS	INJECTION NIVOLUMAB & RELATLIMAB-RMBW 3 MG/1 MG	N	NA
UNITED	Q3 2025	Other	J9299	HCPCS	INJECTION NIVOLUMAB 1 MG	N	NA
UNITED	Q3 2025	Other	J9301	HCPCS	INJECTION OBINUTUZUMAB 10 MG	N	NA
UNITED	Q3 2025	Other	J9303	HCPCS	INJECTION PANITUMUMAB 10 MG	N	NA
UNITED	Q3 2025	Other	J9304	HCPCS	INJECTION PEMETREXED PEMFEXY 10 MG	N	NA
UNITED	Q3 2025	Other	J9306	HCPCS	INJECTION PERTUZUMAB 1 MG	N	NA
UNITED	Q3 2025	Other	J9308	HCPCS	INJECTION RAMUCIRUMAB 5 MG	N	NA
UNITED	Q3 2025	Other	J9309	HCPCS	INJECTION POLATUZUMAB VEDOTIN-PIIQ 1 MG	N	NA
UNITED	Q3 2025	Other	J9311	HCPCS	INJECTION RITUXIMAB 10 MG AND HYALURONIDASE	N	NA
UNITED	Q3 2025	Other	J9312	HCPCS	INJECTION RITUXIMAB 10 MG	N	NA
UNITED	Q3 2025	Other	J9313	HCPCS	INJECTION MOXETUMOMAB PASUDOTOX-TDFK 0.01 MG	N	NA
UNITED	Q3 2025	Other	J9314	HCPCS	INJECTION PEMETREXED TEVA NOT EQUIV J9305 10 MG	N	NA
UNITED	Q3 2025	Other	J9316	HCPCS	INJ PERTUZUMAB TRASTUZUMAB & HYAL-ZZXF PER 10 MG	N	NA
UNITED	Q3 2025	Other	J9317	HCPCS	INJECTION SACITUZUMAB GOVITECAN-HZIY 2.5 MG	N	NA
UNITED	Q3 2025	Other	J9318	HCPCS	INJECTION ROMIDEPSIN NONLYOPHILIZED 0.1 MG	N	NA
UNITED	Q3 2025	Other	J9319	HCPCS	INJECTION ROMIDEPSIN LYOPHILIZED 0.1 MG	N	NA
UNITED	Q3 2025	Other	J9321	HCPCS	INJECTION EPCORITAMAB-BYSP 0.16 MG	N	NA
UNITED	Q3 2025	Other	J9324	HCPCS	INJECTION PEMETREXED 10 MG	N	NA
UNITED	Q3 2025	Other	J9325	HCPCS	INJ TALIMOGENE LAHERPAREPVEC PER 1 M PLAQUE F U	N	NA
UNITED	Q3 2025	Other	J9331	HCPCS	INJECTION SIROLIMUS PROTEIN-BOUND PARTICLES 1 MG	N	NA
UNITED	Q3 2025	Other	J9332	HCPCS	INJ EFGARTIGIMOD ALFA-FCAB 2MG	N	NA
UNITED	Q3 2025	Other	J9333	HCPCS	INJECTION ROZANOLIXIZUMAB-NOLI 1 MG	N	NA
UNITED	Q3 2025	Other	J9334	HCPCS	INJ EFGARTIGIMOD ALFA 2 MG & HYALURONIDASE-QVFC	N	NA
UNITED	Q3 2025	Other	J9345	HCPCS	INJECTION RETIFANLIMAB-DLWR 1 MG	N	NA
UNITED	Q3 2025	Other	J9348	HCPCS	INJECTION NAXITAMAB-GQGK 1 MG	N	NA
UNITED	Q3 2025	Other	J9349	HCPCS	INJECTION TAFASITAMAB-CXIX 2 MG	N	NA
UNITED	Q3 2025	Other	J9352	HCPCS	INJECTION TRABECTEDIN 0.1 MG	N	NA
UNITED	Q3 2025	Other	J9353	HCPCS	INJECTION MARGETUXIMAB-CMKB 5 MG	N	NA
UNITED	Q3 2025	Other	J9354	HCPCS	INJ ADO-TRASTUZUMAB EMTANSINE 1 MG	N	NA
UNITED	Q3 2025	Other	J9355	HCPCS	INJECTION TRASTUZUMAB EXCLUDES BIOSIMILAR 10 MG	N	NA
UNITED	Q3 2025	Other	J9356	HCPCS	INJECTION TRASTUZUMAB 10 MG & HYALURONIDASE-OYSK	N	NA
UNITED	Q3 2025	Other	J9358	HCPCS	INJECTION FAM-TRASTUZUMAB DERUXTECAN-NXKI 1 MG	N	NA
UNITED	Q3 2025	Other	J9359	HCPCS	INJECTION, LONCASTUXIMAB TESIRINE-LPYL, 0.075 MG	N	NA
UNITED	Q3 2025	Other	J9360	HCPCS	INJECTION VINBLASTINE SULFATE 1 MG	N	NA
UNITED	Q3 2025	Other	J9370	HCPCS	VINCRISTINE SULFATE 1 MG	N	NA
UNITED	Q3 2025	Other	J9381	HCPCS	INJECTION TEPLIZUMAB-MZWV 5 MCG	N	NA
UNITED	Q3 2025	Other	J9390	HCPCS	INJECTION VINORELBINE TARTRATE 10 MG	N	NA
UNITED	Q3 2025	Other	J9393	HCPCS	INJECT FULVESTRANT NOT THR EQUIV TO J9395 25 MG	N	NA
UNITED	Q3 2025	Other	J9394	HCPCS	INJ FUL FRESENIUS KABI NOT TX EQV TO J9395 25 MG	N	NA
UNITED	Q3 2025	Other	J9395	HCPCS	INJECTION FULVESTRANT 25 MG	N	NA
UNITED	Q3 2025	Other	J9400	HCPCS	INJECTION ZIV-AFLIBERCEPT 1 MG	N	NA
UNITED	Q3 2025	Other	J9600	HCPCS	INJECTION PORFIMER SODIUM 75 MG	N	NA
UNITED	Q3 2025	Other	J9999	HCPCS	NOT OTHERWISE CLASSIFIED ANTINEOPLASTIC DRUG	N	NA
UNITED	Q3 2025	Other	Q0138	HCPCS	INJ FERUMOXYTOL TX IRON DEF ANEMIA 1 MG NON-ESRD	N	NA
UNITED	Q3 2025	Other	Q2017	HCPCS	INJECTION TENIPOSIDE 50 MG	N	NA
UNITED	Q3 2025	Other	Q2041	HCPCS	KTE-C19 TO 200 M A ANTI-CD19 CAR POS T CE P TD	N	NA
UNITED	Q3 2025	Other	Q2042	HCPCS	TISAGENLECLEUCEL TO 600 M CAR-POS VI T CE PER TD	N	NA
UNITED	Q3 2025	Other	Q2043	HCPCS	SIPULEUCEL-T AUTO CD54+	N	NA
UNITED	Q3 2025	Other	Q2049	HCPCS	INJ DOXORUBICIN HCI LIP IMPORTED LIPODOX 10 MG	N	NA
UNITED	Q3 2025	Other	Q2050	HCPCS	INJECTION DOXORUBICIN HCL LIPOSOMAL NOS 10 MG	N	NA
UNITED	Q3 2025	Other	Q2053	HCPCS	BREXUCABTAGENE AUTOLCL AU ANTI-CD19 CAR P V T C	N	NA
UNITED	Q3 2025	Other	Q2054	HCPCS	LM >=110 MIL AUTOL ANTI-CD19 CAR-POS VIABL TC	N	NA
UNITED	Q3 2025	Other	Q2055	HCPCS	IDECABTAGENE VICLEUCEL AUTO BCMA DIR CAR-POS TC	N	NA
UNITED	Q3 2025	Other	Q2056	HCPCS	CILTA CEL TO 100 M AUTO BCMA DIR CAR-POS TC DOSE	N	NA
UNITED	Q3 2025	Other	Q2057	HCPCS	AFAMITRESGENE AUTOLEUCEL PER THERAPEUTIC DOSE	N	NA
UNITED	Q3 2025	Other	Q5101	HCPCS	INJECTION FILGRASTIM BIOSIMILAR 1 MCG	N	NA
UNITED	Q3 2025	Other	Q5103	HCPCS	INJECTION INFLIXIMAB-DYYB BIOSIMILAR 10 MG	N	NA
UNITED	Q3 2025	Other	Q5104	HCPCS	INJECTION INFLIXIMAB-ABDA BIOSIMILAR 10 MG	N	NA
UNITED	Q3 2025	Other	Q5107	HCPCS	INJECTION BEVACIZUMAB-AWWB BIOSIMILAR 10 MG	N	NA
UNITED	Q3 2025	Other	Q5108	HCPCS	INJECTION PEGFILGRASTIM-JMDB BIOSIMILAR 0.5 MG	N	NA
UNITED	Q3 2025	Other	Q5110	HCPCS	INJECTION FILGRASTIM-AAFI BIOSIMILAR 1 MCG	N	NA
UNITED	Q3 2025	Other	Q5111	HCPCS	INJECTION PEGFILGRASTIM-CBQV BIOSIMILAR 0.5 MG	N	NA
UNITED	Q3 2025	Other	Q5112	HCPCS	INJECTION TRASTUZUMAB-DTTB BIOSIMILAR 10 MG	N	NA
UNITED	Q3 2025	Other	Q5113	HCPCS	INJECTION TRASTUZUMAB-PKRB BIOSIMILAR 10 MG	N	NA
UNITED	Q3 2025	Other	Q5114	HCPCS	INJECTION TRASTUZUMAB-DKST BIOSIMILAR 10 MG	N	NA
UNITED	Q3 2025	Other	Q5115	HCPCS	INJECTION RITUXIMAB-ABBS BIOSIMILAR 10 MG	N	NA
UNITED	Q3 2025	Other	Q5116	HCPCS	INJECTION TRASTUZUMAB-QYYP BIOSIMILAR 10 MG	N	NA
UNITED	Q3 2025	Other	Q5117	HCPCS	INJECTION TRASTUZUMAB-ANNS BIOSIMILAR 10 MG	N	NA
UNITED	Q3 2025	Other	Q5118	HCPCS	INJECTION BEVACIZUMAB-BVZR BIOSIMILAR 10 MG	N	NA
UNITED	Q3 2025	Other	Q5119	HCPCS	INJ RITUXIMAB-PVVR BIOSIMILAR RUXIENCE 10 MG	N	NA
UNITED	Q3 2025	Other	Q5120	HCPCS	INJECTION PEGFILGRASTIM-BMEZ BIOSIMILAR 0.5 MG	N	NA
UNITED	Q3 2025	Other	Q5121	HCPCS	INJ INFLIXIMAB-AXXQ BIOSIMILAR AVSOLA 10 MG	N	NA
UNITED	Q3 2025	Other	Q5122	HCPCS	INJECTION PEGFILGRASTIM-APGF BIOSIMILAR 0.5 MG	N	NA

UNITED	Q3 2025	Other	Q5123	HCPCS	INJECTION RITUXIMAB-ARRX BIOSIMILAR 10 MG	N	NA
UNITED	Q3 2025	Other	Q5124	HCPCS	INJECTION RANIBIZUMAB-NUNA BS BYOOVIZ 0.1 MG	N	NA
UNITED	Q3 2025	Other	Q5125	HCPCS	INJECTION FILGRASTIM-AYOW BIOSIMILAR 1 MCG	N	NA
UNITED	Q3 2025	Other	Q5126	HCPCS	INJ BEVACIZUMAB-MALY BIOSIMILAR (ALYMSYS) 10 MG	N	NA
UNITED	Q3 2025	Other	Q5127	HCPCS	INJECTION PEG-FPGK STIMUFEND BIOSIMILAR 0.5 MG	N	NA
UNITED	Q3 2025	Other	Q5128	HCPCS	INJECTION RANIBIZUMAB-EQRN BIOSIMILAR 0.1 MG	N	NA
UNITED	Q3 2025	Other	Q5129	HCPCS	INJECTION BEVACIZUMAB-ADCD BIOSIMILAR 10 MG	N	NA
UNITED	Q3 2025	Other	Q5130	HCPCS	INJECTION PEG-PBBK FYLNETRA BIOSIMILAR 0.5 MG	N	NA
UNITED	Q3 2025	Other	Q5138	HCPCS	INJECTION USTEKINUMAB-AUUB WEZLANA BS IV 1 MG	N	NA
UNITED	Q3 2025	Other	Q5147	HCPCS	INJECTION AFLIBERCEPT AYYH PAVBLU BS 1 MG	N	NA
UNITED	Q3 2025	Other	Q9991	HCPCS	INJECTION BUPRENORPHINE EXT-RLSE </= TO 100 MG	N	NA
UNITED	Q3 2025	Other	Q9992	HCPCS	INJECTION BUPRENORPHINE EXTENDED-RELEASE >100 MG	N	NA
UNITED	Q3 2025	Other	Q9997	HCPCS	INJECTION USTEKINUMAB-TTWE PYZCHIVA IV 1 MG	N	NA
UNITED	Q3 2025	Other	Q9998	HCPCS	INJECTION USTEKINUMAB-AEKN SELARSDI BS	N	NA
UNITED	Q3 2025	Other	Q9999	HCPCS	INJECTION USTEKINUMAB AAUZ OTULFI BS 1 MG	N	NA
UNITED	Q3 2025	Outpatient Hosp	0098T	CPT	REVJ TOT DISC ARTHRP ANT APPR CRV EA NTRSPC	N	NA
UNITED	Q3 2025	Outpatient Hosp	11960	CPT	INSERTION TISSUE EXPANDER INCL SBSQ XPNSJ	N	NA
UNITED	Q3 2025	Outpatient Hosp	11971	CPT	REMOVAL TISSUE EXPANDER W/O INSERTION IMPLANT	N	NA
UNITED	Q3 2025	Outpatient Hosp	14020	CPT	ADJT TIS TRNSFR/REARGMT SCALP/ARM/LEG 10 SQ CM/<	N	NA
UNITED	Q3 2025	Outpatient Hosp	14021	CPT	ADJT/REARRGMT SCALP/ARM/LEG 10.1-30.0 SQ CM	N	NA
UNITED	Q3 2025	Outpatient Hosp	14041	CPT	ADJT/REARGMT F/C/C/M/N/AX/G/H/F 10.1-30.0 SQ CM	N	NA
UNITED	Q3 2025	Outpatient Hosp	14060	CPT	ADJT TIS TRNSFR/REARRGMT E/N/E/L DFCT 10 SQ CM/<	N	NA
UNITED	Q3 2025	Outpatient Hosp	14061	CPT	ADJT TIS REARGMT EYE/NOSE/EAR/LIP 10.1-30.0 SQCM	N	NA
UNITED	Q3 2025	Outpatient Hosp	14301	CPT	ADJNT TIS TRNSFR/REARGMT ANY AREA 30.1-60 SQ CM	N	NA
UNITED	Q3 2025	Outpatient Hosp	15820	CPT	BLEPHAROPLASTY LOWER EYELID	N	NA
UNITED	Q3 2025	Outpatient Hosp	15821	CPT	BLEPHAROPLASTY LOWER EYELID W/HERNIATED FAT PAD	N	NA
UNITED	Q3 2025	Outpatient Hosp	15822	CPT	BLEPHAROPLASTY UPPER EYELID	N	NA
UNITED	Q3 2025	Outpatient Hosp	15823	CPT	BLEPHAROPLASTY UPPER EYELID W/EXCESSIVE SKIN	N	NA
UNITED	Q3 2025	Outpatient Hosp	15830	CPT	EXC EXCSV SKN ABD INFRAUMBILICAL PANNICULECTOMY	N	NA
UNITED	Q3 2025	Outpatient Hosp	15847	CPT	EXCISION EXCESSIVE SKIN & SUBQ TISSUE ABDOMEN	N	NA
UNITED	Q3 2025	Outpatient Hosp	15877	CPT	SUCTION ASSISTED LIPECTOMY TRUNK	N	NA
UNITED	Q3 2025	Outpatient Hosp	15878	CPT	SUCTION ASSISTED LIPECTOMY UPPER EXTREMITY	N	NA
UNITED	Q3 2025	Outpatient Hosp	15879	CPT	SUCTION ASSISTED LIPECTOMY LOWER EXTREMITY	N	NA
UNITED	Q3 2025	Outpatient Hosp	17106	CPT	DESTRUCTION CUTANEOUS VASC PROLIFERATIVE <10CM	N	NA
UNITED	Q3 2025	Outpatient Hosp	17107	CPT	DSTRJ CUTANEOUS VASCULAR LESIONS 10.0-50.0 SQ CM	N	NA
UNITED	Q3 2025	Outpatient Hosp	17108	CPT	DSTRJ CUTANEOUS VASCULAR LESIONS >50.0 SQ CM	N	NA
UNITED	Q3 2025	Outpatient Hosp	17999	CPT	UNLISTED PX SKIN MUC MEMBRANE & SUBQ TISSUE	N	NA
UNITED	Q3 2025	Outpatient Hosp	19316	CPT	MASTOPEXY	N	NA
UNITED	Q3 2025	Outpatient Hosp	19318	CPT	BREAST REDUCTION	N	NA
UNITED	Q3 2025	Outpatient Hosp	19325	CPT	BREAST AUGMENTATION WITH IMPLANT	N	NA
UNITED	Q3 2025	Outpatient Hosp	19328	CPT	REMOVAL INTACT BREAST IMPLANT	N	NA
UNITED	Q3 2025	Outpatient Hosp	19330	CPT	RMVL RUPTURED BREAST IMPLANT W/IMPLANT CONTENTS	N	NA
UNITED	Q3 2025	Outpatient Hosp	19340	CPT	INSERTION BREAST IMPLANT SAME DAY OF MASTECTOMY	N	NA
UNITED	Q3 2025	Outpatient Hosp	19342	CPT	INSJ/RPLCMT BREAST IMPLANT SEP DAY MASTECTOMY	N	NA
UNITED	Q3 2025	Outpatient Hosp	19350	CPT	NIPPLE/AREOLA RECONSTRUCTION	N	NA
UNITED	Q3 2025	Outpatient Hosp	19357	CPT	TISSUE EXPANDER PLACEMENT BREAST RECONSTRUCTION	N	NA
UNITED	Q3 2025	Outpatient Hosp	19361	CPT	BREAST RECONSTRUCTION W/LATISSIMUS DORSI FLAP	N	NA
UNITED	Q3 2025	Outpatient Hosp	19364	CPT	BREAST RECONSTRUCTION W/FREE FLAP	N	NA
UNITED	Q3 2025	Outpatient Hosp	19367	CPT	BREAST RECONSTRUCTION SINGLE PEDICLED TRAM FLAP	N	NA
UNITED	Q3 2025	Outpatient Hosp	19368	CPT	BREAST RECONSTRUCTION 1PEDICLED TRAM FLAP ANAST	N	NA
UNITED	Q3 2025	Outpatient Hosp	19369	CPT	BREAST RECONSTRUCTION BIPEDICLED TRAM FLAP	N	NA
UNITED	Q3 2025	Outpatient Hosp	19370	CPT	REVISION PERI-IMPLANT CAPSULE BREAST	N	NA
UNITED	Q3 2025	Outpatient Hosp	19371	CPT	PERI-IMPLANT CAPSULECTOMY BREAST COMPLETE	N	NA
UNITED	Q3 2025	Outpatient Hosp	19380	CPT	REVISION OF RECONSTRUCTED BREAST	N	NA
UNITED	Q3 2025	Outpatient Hosp	19396	CPT	PREPARATION MOULAGE CUSTOM BREAST IMPLANT	N	NA
UNITED	Q3 2025	Outpatient Hosp	20975	CPT	ELECTRICAL STIMULATION BONE HEALING INVASIVE	N	NA
UNITED	Q3 2025	Outpatient Hosp	20979	CPT	LOW INTENSITY US STIMJ BONE HEALING NONINVASIVE	N	NA
UNITED	Q3 2025	Outpatient Hosp	21121	CPT	GENIOPLASTY SLIDING OSTEOTOMY SINGLE PIECE	N	NA
UNITED	Q3 2025	Outpatient Hosp	21123	CPT	GENIOP SLIDING AGMNTJ W/NTRPSTJ BONE GRAFTS	N	NA
UNITED	Q3 2025	Outpatient Hosp	21125	CPT	AGMNTJ MNDBLR BODY/ANGLE PROSTHETIC MATERIAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	21127	CPT	AGMNTJ MNDBLR BDY/ANGL W/BONE GRF ONLAY/NTRPSTJ	N	NA
UNITED	Q3 2025	Outpatient Hosp	21137	CPT	REDUCTION FOREHEAD CONTOURING ONLY	N	NA
UNITED	Q3 2025	Outpatient Hosp	21138	CPT	RDCTJ FHD CNTRG & PROSTHETIC MATRL/BONE GRAFT	N	NA
UNITED	Q3 2025	Outpatient Hosp	21139	CPT	RDCTJ FHD CNTRG & SETBACK ANT FRONTAL SINUS WALL	N	NA
UNITED	Q3 2025	Outpatient Hosp	21141	CPT	RCNSTJ MIDFACE LEFORT I 1 PIECE W/O BONE GRAFT	N	NA
UNITED	Q3 2025	Outpatient Hosp	21142	CPT	RCNSTJ MIDFACE LEFORT I 2 PIECES W/O BONE GRAFT	N	NA
UNITED	Q3 2025	Outpatient Hosp	21143	CPT	RCNSTJ MIDFACE LEFORT I 3/> PIECE W/O BONE GRAFT	N	NA
UNITED	Q3 2025	Outpatient Hosp	21145	CPT	RCNSTJ MIDFACE LEFORT I 1 PIECE W/BONE GRAFTS	N	NA
UNITED	Q3 2025	Outpatient Hosp	21146	CPT	RCNSTJ MIDFACE LEFORT I 2 PIECES W/BONE GRAFTS	N	NA
UNITED	Q3 2025	Outpatient Hosp	21147	CPT	RCNSTJ MIDFACE LEFORT I 3/> PIECE W/BONE GRAFTS	N	NA
UNITED	Q3 2025	Outpatient Hosp	21150	CPT	RCNSTJ MIDFACE LEFORT II ANTERIOR INTRUSION	N	NA
UNITED	Q3 2025	Outpatient Hosp	21151	CPT	RCNSTJ MIDFACE LEFORT II W/BONE GRAFTS	N	NA
UNITED	Q3 2025	Outpatient Hosp	21154	CPT	RCNSTJ MIDFACE LEFORT III W/O LEFORT I	N	NA
UNITED	Q3 2025	Outpatient Hosp	21155	CPT	RCNSTJ MIDFACE LEFORT III W/LEFORT I	N	NA
UNITED	Q3 2025	Outpatient Hosp	21159	CPT	RCNSTJ MIDFACE LEFORT III W/FHD W/O LEFORT I	N	NA
UNITED	Q3 2025	Outpatient Hosp	21160	CPT	RCNSTJ MIDFACE LEFORT III W/FHD W/LEFORT I	N	NA
UNITED	Q3 2025	Outpatient Hosp	21172	CPT	RCNSTJ SUPERIOR-LATERAL ORBITAL RIM & LOWER FHD	N	NA
UNITED	Q3 2025	Outpatient Hosp	21175	CPT	RCNSTJ BIFRONTAL SUPERIOR-LAT ORB RIMS & LWR FHD	N	NA
UNITED	Q3 2025	Outpatient Hosp	21179	CPT	RCNSTJ FOREHEAD &/ SUPRAORB RIMS W/ALGRF/PROSTC	N	NA
UNITED	Q3 2025	Outpatient Hosp	21180	CPT	RCNSTJ FOREHEAD &/ SUPRAORBITAL RIMS W/AUTOGRAFT	N	NA
UNITED	Q3 2025	Outpatient Hosp	21181	CPT	RCNSTJ CONTOURING BENIGN TUMOR CRNL BONES XTRC	N	NA
UNITED	Q3 2025	Outpatient Hosp	21182	CPT	RCNSTJ ORBIT/FHD/NASETHMD EXCBONE TUM GRF<40SQCM	N	NA

UNITED	Q3 2025	Outpatient Hosp	21183	CPT	RCNSTJ ORBIT/FHD/NASETHMD EXC BONE GRF>40 <80	N	NA
UNITED	Q3 2025	Outpatient Hosp	21184	CPT	RCNSTJ ORBIT/FHD/NASETHMD EXC BONE TUM GRF>80SQ	N	NA
UNITED	Q3 2025	Outpatient Hosp	21188	CPT	RCNSTJ MDFC OTH/THN LEFORT OSTEOT & BONE GRAFTS	N	NA
UNITED	Q3 2025	Outpatient Hosp	21193	CPT	RCNSTJ MNDBLR RAMI HRZNTL/VER/C/L OSTEOT W/O GRF	N	NA
UNITED	Q3 2025	Outpatient Hosp	21194	CPT	RCNSTJ MNDBLR RAMI HRZNTL/VER/C/L OSTEOT W/GRAFT	N	NA
UNITED	Q3 2025	Outpatient Hosp	21195	CPT	RCNSTJ MNDBLR RAMI&/BODY SGTL SPLT W/O INT RGD	N	NA
UNITED	Q3 2025	Outpatient Hosp	21196	CPT	RCNSTJ MNDBLR RAMI&/BDY SGTL SPLT W/INT RGD FI	N	NA
UNITED	Q3 2025	Outpatient Hosp	21198	CPT	OSTEOTOMY MANDIBLE SEGMENTAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	21199	CPT	OSTEOTOMY MANDIBLE SGMTL W/GENIOGLOSSUS ADVMNT	N	NA
UNITED	Q3 2025	Outpatient Hosp	21206	CPT	OSTEOTOMY MAXILLA SEGMENTAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	21208	CPT	OSTEOPLASTY FACIAL BONES AUGMENTATION	N	NA
UNITED	Q3 2025	Outpatient Hosp	21209	CPT	OSTEOPLASTY FACIAL BONES REDUCTION	N	NA
UNITED	Q3 2025	Outpatient Hosp	21210	CPT	GRAFT BONE NASAL/MAXILLARY/MALAR AREAS	N	NA
UNITED	Q3 2025	Outpatient Hosp	21215	CPT	GRAFT BONE MANDIBLE	N	NA
UNITED	Q3 2025	Outpatient Hosp	21230	CPT	GRAFT RIB CRTLG AUTOGENOUS FACE/CHIN/NOSE/EAR	N	NA
UNITED	Q3 2025	Outpatient Hosp	21235	CPT	GRAFT EAR CRTLG AUTOGENOUS NOSE/EAR	N	NA
UNITED	Q3 2025	Outpatient Hosp	21240	CPT	ARTHRP TEMPOROMANDIBULAR JOINT W/WO AUTOGRAFT	N	NA
UNITED	Q3 2025	Outpatient Hosp	21242	CPT	ARTHROPLASTY TEMPOROMANDIBULAR JT W/ALLOGRAFT	N	NA
UNITED	Q3 2025	Outpatient Hosp	21244	CPT	RCNSTJ MNDBL XTRORAL W/TRANSOSTEAL BONE PLATE	N	NA
UNITED	Q3 2025	Outpatient Hosp	21245	CPT	RCNSTJ MNDBL/MAXL SUBPRIOSTEAL IMPLANT PARTIAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	21246	CPT	RCNSTJ MNDBL/MAXL SUBPRIOSTEAL IMPLANT COMPLETE	N	NA
UNITED	Q3 2025	Outpatient Hosp	21247	CPT	RCNSTJ MNDBLR CONDYLE W/BONE CARTLG AUTOGRAFTS	N	NA
UNITED	Q3 2025	Outpatient Hosp	21248	CPT	RCNSTJ MANDIBLE/MAXL ENDOSTEAL IMPLANT PARTIAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	21249	CPT	RCNSTJ MANDIBLE/MAXL ENDOSTEAL IMPLANT COMPLETE	N	NA
UNITED	Q3 2025	Outpatient Hosp	21255	CPT	RCNSTJ ZYGMTC ARCH/GLENOID FOSSA W/BONE CARTLG	N	NA
UNITED	Q3 2025	Outpatient Hosp	21256	CPT	RECONSTRUCTION ORBIT W/OSTEOTOMIES & BONE GRAFTS	N	NA
UNITED	Q3 2025	Outpatient Hosp	21275	CPT	SECONDARY REVISION ORBITOCRANIOFACIAL RCNSTJ	N	NA
UNITED	Q3 2025	Outpatient Hosp	21280	CPT	MEDIAL CANTHOPEXY SEPARATE PROCEDURE	N	NA
UNITED	Q3 2025	Outpatient Hosp	21282	CPT	LATERAL CANTHOPEXY	N	NA
UNITED	Q3 2025	Outpatient Hosp	21295	CPT	REDUCTION MASSETER MUSCLE & BONE EXTRAORAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	21296	CPT	REDUCTION MASSETER MUSCLE & BONE INTRAORAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	21299	CPT	UNLISTED CRANIOFACIAL & MAXILLOFACIAL PROCEDURE	N	NA
UNITED	Q3 2025	Outpatient Hosp	21685	CPT	HYOID MYOTOMY & SUSPENSION	N	NA
UNITED	Q3 2025	Outpatient Hosp	21740	CPT	REPAIR PECTUS EXCAVATUM/CARINATUM OPEN	N	NA
UNITED	Q3 2025	Outpatient Hosp	21742	CPT	REPAIR PECTUS EXCAVATM/CARINATM MINLY W/O THRSC	N	NA
UNITED	Q3 2025	Outpatient Hosp	21743	CPT	REPAIR PECTUS EXCAVATM/CARINATM MINLY W/THRSC	N	NA
UNITED	Q3 2025	Outpatient Hosp	22100	CPT	PRTL EXC PST VRT INTRNSC B1Y LES 1 VRT SGM CRV	N	NA
UNITED	Q3 2025	Outpatient Hosp	22101	CPT	PRTL EXC PST VRT INTRNSC B1Y LES 1 VRT SGM THRC	N	NA
UNITED	Q3 2025	Outpatient Hosp	22102	CPT	PRTL EXC PST VRT INTRNSC B1Y LES 1 VRT SGM LMBR	N	NA
UNITED	Q3 2025	Outpatient Hosp	22110	CPT	PRTL EXC VRT BDY B1Y LES W/O SPI CORD 1 SGM CRV	N	NA
UNITED	Q3 2025	Outpatient Hosp	22112	CPT	PRTL EXC VRT BDY B1Y LES W/O SPI CORD 1 SGM THRC	N	NA
UNITED	Q3 2025	Outpatient Hosp	22114	CPT	PRTL EXC VRT BDY B1Y LES W/O SPI CORD 1 SGM LMBR	N	NA
UNITED	Q3 2025	Outpatient Hosp	22206	CPT	OSTEOTOMY SPINE POSTERIOR 3 COLUMN THORACIC	N	NA
UNITED	Q3 2025	Outpatient Hosp	22207	CPT	OSTEOTOMY SPINE POSTERIOR 3 COLUMN LUMBAR	N	NA
UNITED	Q3 2025	Outpatient Hosp	22210	CPT	OSTEOTOMY SPINE PST/PSTLAT APPR 1 VRT SGM CRV	N	NA
UNITED	Q3 2025	Outpatient Hosp	22212	CPT	OSTEOTOMY SPINE PST/PSTLAT APPR 1 VRT SGM THRC	N	NA
UNITED	Q3 2025	Outpatient Hosp	22214	CPT	OSTEOTOMY SPINE PST/PSTLAT APPR 1 VRT SGM LMBR	N	NA
UNITED	Q3 2025	Outpatient Hosp	22220	CPT	OSTEOTOMY SPINE W/DSC ANT APPR 1 VRT SGM CRV	N	NA
UNITED	Q3 2025	Outpatient Hosp	22224	CPT	OSTEOTOMY SPINE W/DSC ANT APPR 1 VRT SGM LUMBAR	N	NA
UNITED	Q3 2025	Outpatient Hosp	22510	CPT	PERQ VERTEBROPLASTY UNI/BI INJX CERVICOTHORACIC	N	NA
UNITED	Q3 2025	Outpatient Hosp	22511	CPT	PERQ VERTEBROPLASTY UNI/BI INJECTION LUMBOSACRAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	22512	CPT	VERTEBROPLASTY EACH ADDL CERVICOTHOR/LUMBOSACRAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	22513	CPT	PERQ VERT AGMNTJ CAVITY CRTJ UNI/BI CANNULATION	N	NA
UNITED	Q3 2025	Outpatient Hosp	22514	CPT	PERQ VERT AGMNTJ CAVITY CRTJ UNI/BI CANNULJ LMBR	N	NA
UNITED	Q3 2025	Outpatient Hosp	22515	CPT	PERQ VERT AGMNTJ CAVITY CRTJ UNI/BI CANNULJ EACH	N	NA
UNITED	Q3 2025	Outpatient Hosp	22532	CPT	ARTHRODESIS LATERAL EXTRACAVITARY THORACIC	N	NA
UNITED	Q3 2025	Outpatient Hosp	22533	CPT	ARTHRODESIS LATERAL EXTRACAVITARY LUMBAR	N	NA
UNITED	Q3 2025	Outpatient Hosp	22548	CPT	ARTHRD ANT TRANSORL/XTRORAL C1-C2 W/WO EXC ODNTD	N	NA
UNITED	Q3 2025	Outpatient Hosp	22551	CPT	ARTHRD ANT INTERBODY DECOMPRESS CERVICAL BELW C2	N	NA
UNITED	Q3 2025	Outpatient Hosp	22554	CPT	ARTHRD ANT INTERBODY MIN DSC CRV BELOW C2	N	NA
UNITED	Q3 2025	Outpatient Hosp	22556	CPT	ARTHRD ANT INTERBODY MIN DSC THORACIC	N	NA
UNITED	Q3 2025	Outpatient Hosp	22558	CPT	ARTHRD ANT INTERBODY MIN DSC LUMBAR	N	NA
UNITED	Q3 2025	Outpatient Hosp	22586	CPT	ARTHRODESIS PRESACRAL NTRBDY DSC W/INSTRMJ L5-S1	N	NA
UNITED	Q3 2025	Outpatient Hosp	22590	CPT	ARTHRODESIS POSTERIOR CRANIOCERVICAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	22595	CPT	ARTHRODESIS POSTERIOR ATLAS-AXIS C1-C2	N	NA
UNITED	Q3 2025	Outpatient Hosp	22600	CPT	ARTHRD PST/PSTLAT TQ 1NTRSPC CRV BELW C2 SEGMENT	N	NA
UNITED	Q3 2025	Outpatient Hosp	22610	CPT	ARTHRODESIS POSTERIOR/PSTLAT TQ 1NTRSPC THORACIC	N	NA
UNITED	Q3 2025	Outpatient Hosp	22612	CPT	ARTHRODESIS POSTERIOR/PSTLAT TQ 1NTRSPC LUMBAR	N	NA
UNITED	Q3 2025	Outpatient Hosp	22630	CPT	ARTHRODESIS POSTERIOR INTERBODY 1 NTRSPC LUMBAR	N	NA
UNITED	Q3 2025	Outpatient Hosp	22633	CPT	ARTHRODESIS COMBINED TQ 1NTRSPC LUMBAR	N	NA
UNITED	Q3 2025	Outpatient Hosp	22800	CPT	ARTHRODESIS POSTERIOR SPINAL DFRM <6 VRT SGM	N	NA
UNITED	Q3 2025	Outpatient Hosp	22802	CPT	ARTHRODESIS POSTERIOR SPINAL DFRM 7-12 VRT SGM	N	NA
UNITED	Q3 2025	Outpatient Hosp	22804	CPT	ARTHRODESIS POSTERIOR SPINAL DFRM 13+ VRT SGM	N	NA
UNITED	Q3 2025	Outpatient Hosp	22808	CPT	ARTHRODESIS ANTERIOR SPINAL DFRM 2-3 VRT SGM	N	NA
UNITED	Q3 2025	Outpatient Hosp	22810	CPT	ARTHRODESIS ANTERIOR SPINAL DFRM 4-7 VRT SGM	N	NA
UNITED	Q3 2025	Outpatient Hosp	22812	CPT	ARTHRODESIS ANTERIOR SPINAL DFRM 8+ VRT SGM	N	NA
UNITED	Q3 2025	Outpatient Hosp	22818	CPT	KYPHECTOMY SINGLE OR TWO SEGMENTS	N	NA
UNITED	Q3 2025	Outpatient Hosp	22819	CPT	KYPHECTOMY 3 OR MORE SEGMENTS	N	NA
UNITED	Q3 2025	Outpatient Hosp	22830	CPT	EXPLORATION SPINAL FUSION	N	NA
UNITED	Q3 2025	Outpatient Hosp	22849	CPT	REINSERTION SPINAL FIXATION DEVICE	N	NA
UNITED	Q3 2025	Outpatient Hosp	22850	CPT	REMOVAL POSTERIOR NONSEGMENTAL INSTRUMENTATION	N	NA
UNITED	Q3 2025	Outpatient Hosp	22852	CPT	REMOVAL POSTERIOR SEGMENTAL INSTRUMENTATION	N	NA

UNITED	Q3 2025	Outpatient Hosp	22855		CPT	REMOVAL ANTERIOR INSTRUMENTATION	N	NA
UNITED	Q3 2025	Outpatient Hosp	22856		CPT	TOTAL DISC ARTHRP ANT SINGLE INTERSPACE CERVICAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	22861		CPT	REVJ W/RPLCMT TOT DISC ARTHRP ANT 1 NTRSPC CRV	N	NA
UNITED	Q3 2025	Outpatient Hosp	22899		CPT	UNLISTED PROCEDURE SPINE	N	NA
UNITED	Q3 2025	Outpatient Hosp	23470		CPT	ARTHROPLASTY GLENOHUMRL JT HEMIARTHROPLASTY	N	NA
UNITED	Q3 2025	Outpatient Hosp	23472		CPT	ARTHROPLASTY GLENOHUMERAL JOINT TOTAL SHOULDER	N	NA
UNITED	Q3 2025	Outpatient Hosp	23473		CPT	REVIS SHOULDER ARTHRPLSTY HUMERAL/GLENOID COMPNT	N	NA
UNITED	Q3 2025	Outpatient Hosp	23474		CPT	REVIS SHOULDER ARTHRPLSTY HUMERAL&GLENOID COMPNT	N	NA
UNITED	Q3 2025	Outpatient Hosp	24360		CPT	ARTHROPLASTY ELBOW W/MEMBRANE	N	NA
UNITED	Q3 2025	Outpatient Hosp	24361		CPT	ARTHROPLASTY ELBOW W/DISTAL HUMRL PROSTC RPLCMT	N	NA
UNITED	Q3 2025	Outpatient Hosp	24362		CPT	ARTHRP ELBOW W/IMPLT&FSCA LATA LIGAMENT RCNSTJ	N	NA
UNITED	Q3 2025	Outpatient Hosp	24363		CPT	ARTHRP ELBOW W/DISTAL HUM&PROX UR PROSTC RPLCM	N	NA
UNITED	Q3 2025	Outpatient Hosp	24370		CPT	REVIS ELBOW ARTHRPLSTY HUMERAL/ULNA COMPNT	N	NA
UNITED	Q3 2025	Outpatient Hosp	24371		CPT	REVIS ELBOW ARTHRPLSTY HUMERAL&ULNA COMPNT	N	NA
UNITED	Q3 2025	Outpatient Hosp	27120		CPT	ACETABULOPLASTY	N	NA
UNITED	Q3 2025	Outpatient Hosp	27125		CPT	HEMIARTHROPLASTY HIP PARTIAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	27130		CPT	ARTHRP ACETBLR/PROX FEM PROSTC AGRFT/ALGRFT	N	NA
UNITED	Q3 2025	Outpatient Hosp	27132		CPT	CONV PREV HIP TOT HIP ARTHRP W/WO AGRFT/ALGRFT	N	NA
UNITED	Q3 2025	Outpatient Hosp	27134		CPT	REVJ TOT HIP ARTHRP BTH W/WO AGRFT/ALGRFT	N	NA
UNITED	Q3 2025	Outpatient Hosp	27137		CPT	REVJ TOT HIP ARTHRP ACTBLR W/WO AGRFT/ALGRFT	N	NA
UNITED	Q3 2025	Outpatient Hosp	27138		CPT	REVJ TOT HIP ARTHRP FEM ONLY W/WO ALGRFT	N	NA
UNITED	Q3 2025	Outpatient Hosp	27412		CPT	AUTOLOGOUS CHONDROCYTE IMPLANTATION KNEE	N	NA
UNITED	Q3 2025	Outpatient Hosp	27446		CPT	ARTHRP KNEE CONDYLE&PLATEAU MEDIAL/LAT CMPRT	N	NA
UNITED	Q3 2025	Outpatient Hosp	27447		CPT	ARTHRP KNE CONDYLE&PLATU MEDIAL&LAT COMPARTMENTS	N	NA
UNITED	Q3 2025	Outpatient Hosp	27486		CPT	REVJ TOTAL KNEE ARTHRP W/WO ALGRFT 1 COMPONENT	N	NA
UNITED	Q3 2025	Outpatient Hosp	27487		CPT	REVJ TOT KNEE ARTHRP FEM&ENTIRE TIBIAL COMPONE	N	NA
UNITED	Q3 2025	Outpatient Hosp	28344		CPT	RECONSTRUCTION TOE POLYDACTYLY	N	NA
UNITED	Q3 2025	Outpatient Hosp	29866		CPT	ARTHROSCOPY KNEE OSTEOCHONDRAL AGRFT MOSAICPLAST	N	NA
UNITED	Q3 2025	Outpatient Hosp	29867		CPT	ARTHROSCOPY KNEE OSTEOCHONDRAL ALLOGRAFT	N	NA
UNITED	Q3 2025	Outpatient Hosp	29868		CPT	ARTHROSCOPY KNEE MENISCAL TRNSPLJ MED/LAT	N	NA
UNITED	Q3 2025	Outpatient Hosp	29914		CPT	ARTHROSCOPY HIP W/FEMOROPLASTY	N	NA
UNITED	Q3 2025	Outpatient Hosp	29915		CPT	ARTHROSCOPY HIP W/ACETABULOPLASTY	N	NA
UNITED	Q3 2025	Outpatient Hosp	29916		CPT	ARTHROSCOPY HIP W/LABRAL REPAIR	N	NA
UNITED	Q3 2025	Outpatient Hosp	30400		CPT	RHINP PRIM LAT&ALAR CRTLGS&/ELVTN NASAL TI	N	NA
UNITED	Q3 2025	Outpatient Hosp	30410		CPT	RHINP PRIM COMPLETE XTRNL PARTS	N	NA
UNITED	Q3 2025	Outpatient Hosp	30420		CPT	RHINOPLASTY PRIMARY W/MAJOR SEPTAL REPAIR	N	NA
UNITED	Q3 2025	Outpatient Hosp	30430		CPT	RHINOPLASTY SECONDARY MINOR REVISION	N	NA
UNITED	Q3 2025	Outpatient Hosp	30435		CPT	RHINOPLASTY SECONDARY INTERMEDIATE REVISION	N	NA
UNITED	Q3 2025	Outpatient Hosp	30450		CPT	RHINOPLASTY SECONDARY MAJOR REVISION	N	NA
UNITED	Q3 2025	Outpatient Hosp	30460		CPT	RHINP DFRM W/COLUM LNGTH TIP ONLY	N	NA
UNITED	Q3 2025	Outpatient Hosp	30462		CPT	RHINP DFRM COLUM LNGTH TIP SEPTUM OSTEOT	N	NA
UNITED	Q3 2025	Outpatient Hosp	30465		CPT	REPAIR NASAL VESTIBULAR STENOSIS	N	NA
UNITED	Q3 2025	Outpatient Hosp	30620		CPT	SEPTAL/OTHER INTRANASAL DERMATOPLASTY	N	NA
UNITED	Q3 2025	Outpatient Hosp	31240		CPT	NASAL/SINUS NDSC SURG W/CONCHA BULLOSA RESECTION	N	NA
UNITED	Q3 2025	Outpatient Hosp	31253		CPT	NASAL/SINUS NDSC TOT W/FRNT SINS EXPL TISS RMVL	N	NA
UNITED	Q3 2025	Outpatient Hosp	31254		CPT	NASAL/SINUS NDSC W/PARTIAL ETHMOIDECTOMY	N	NA
UNITED	Q3 2025	Outpatient Hosp	31255		CPT	NASAL/SINUS NDSC W/TOTAL ETHOIDECTOMY	N	NA
UNITED	Q3 2025	Outpatient Hosp	31256		CPT	NASAL/SINUS ENDOSCOPY W/MAXILLARY ANTROSTOMY	N	NA
UNITED	Q3 2025	Outpatient Hosp	31257		CPT	NASAL/SINUS NDSC TOTAL WITH SPHENOIDOTOMY	N	NA
UNITED	Q3 2025	Outpatient Hosp	31259		CPT	NASAL/SINUS NDSC TOT W/SPHENDT W/SPHEN TISS RMVL	N	NA
UNITED	Q3 2025	Outpatient Hosp	31267		CPT	NSL/SINUS NDSC MAX ANTROST W/RMVL TISS MAX SINUS	N	NA
UNITED	Q3 2025	Outpatient Hosp	31276		CPT	NASAL/SINUS NDSC W/RMVL TISS FROM FRONTAL SINUS	N	NA
UNITED	Q3 2025	Outpatient Hosp	31287		CPT	NASAL/SINUS ENDOSCOPY W/SPHENOIDOTOMY	N	NA
UNITED	Q3 2025	Outpatient Hosp	31288		CPT	NSL/SINUS NDSC SPHENDT RMVL TISS SPHENOID SINUS	N	NA
UNITED	Q3 2025	Outpatient Hosp	31295		CPT	NASAL/SINUS NDSC SURG W/DILATION MAXILLARY SINUS	N	NA
UNITED	Q3 2025	Outpatient Hosp	31296		CPT	NASAL/SINUS NDSC SURG W/DILATION FRONTAL SINUS	N	NA
UNITED	Q3 2025	Outpatient Hosp	31297		CPT	NASAL/SINUS NDSC SURG W/DILATION SPHENOID SINUS	N	NA
UNITED	Q3 2025	Outpatient Hosp	31298		CPT	NASAL/SINUS NDSC SURG W/DILATION FRNT&SPHN SINUS	N	NA
UNITED	Q3 2025	Outpatient Hosp		33289	CPT	TCAT IMPL WRLS P-ART PRS SNR L-T HEMODYN MNTR	N	NA
UNITED	Q3 2025	Outpatient Hosp	36468		CPT	INJECTIONS SCLEROSANT FOR SPIDER VEINS LIM/TRNK	N	NA
UNITED	Q3 2025	Outpatient Hosp	36473		CPT	ENDOVEN ABLTJ INCMPTNT VEIN MCHNCHEM 1ST VEIN	N	NA
UNITED	Q3 2025	Outpatient Hosp	36475		CPT	ENDOVEN ABLTJ INCMPTNT VEIN XTR RF 1ST VEIN	N	NA
UNITED	Q3 2025	Outpatient Hosp	36478		CPT	ENDOVEN ABLTJ INCMPTNT VEIN XTR LASER 1ST VEIN	N	NA
UNITED	Q3 2025	Outpatient Hosp	37220		CPT	REVASCULARIZATION ILIAC ARTERY ANGIOP 1ST VSL	N	NA
UNITED	Q3 2025	Outpatient Hosp	37221		CPT	REVSC OPN/PRQ ILIAC ART W/STNT PLMT & ANGIOPLSTY	N	NA
UNITED	Q3 2025	Outpatient Hosp	37224		CPT	REVSC OPN/PRG FEM/POP W/ANGIOPLASTY UNI	N	NA
UNITED	Q3 2025	Outpatient Hosp	37225		CPT	REVSC OPN/PRQ FEM/POP W/ATHRC/ANGIOP SM VSL	N	NA
UNITED	Q3 2025	Outpatient Hosp	37226		CPT	REVSC OPN/PRQ FEM/POP W/STNT/ANGIOP SM VSL	N	NA
UNITED	Q3 2025	Outpatient Hosp	37227		CPT	REVSC OPN/PRQ FEM/POP W/STNT/ATHRC/ANGIOP SM VSL	N	NA
UNITED	Q3 2025	Outpatient Hosp	37228		CPT	REVSC OPN/PRQ TIB/PERO W/ANGIOPLASTY UNI	N	NA
UNITED	Q3 2025	Outpatient Hosp	37229		CPT	REVSC OPN/PRQ TIB/PERO W/ATHRC/ANGIOP SM VSL	N	NA
UNITED	Q3 2025	Outpatient Hosp	37230		CPT	REVSC OPN/PRQ TIB/PERO W/STNT/ANGIOP SM VSL	N	NA
UNITED	Q3 2025	Outpatient Hosp	37231		CPT	REVSC OPN/PRQ TIB/PERO W/STNT/ATHR/ANGIOP SM VSL	N	NA
UNITED	Q3 2025	Outpatient Hosp	37243		CPT	VASCULAR EMBOLIZE/OCCLUDE ORGAN TUMOR INFARCT	N	NA
UNITED	Q3 2025	Outpatient Hosp	37700		CPT	LIG&DIV LONG SAPH VEIN SAPHFEM JUNCT/INTERRUPJ	N	NA
UNITED	Q3 2025	Outpatient Hosp	37718		CPT	LIG DIV & STRIPPING SHORT SAPHENOUS VEIN	N	NA
UNITED	Q3 2025	Outpatient Hosp	37722		CPT	LIG DIV&STRPG LONG SAPH SAPHFEM JUNCT KNE/BELW	N	NA
UNITED	Q3 2025	Outpatient Hosp	37765		CPT	STAB PHLEBT VARICOSE VEINS 1 XTR 10-20 STAB INCS	N	NA
UNITED	Q3 2025	Outpatient Hosp	37766		CPT	STAB PHLEBT VARICOSE VEINS 1 XTR > 20 INCS	N	NA
UNITED	Q3 2025	Outpatient Hosp	37780		CPT	LIGJ & DIV SHORT SAPH VEIN SAPHENOPOP JUNCT SPX	N	NA
UNITED	Q3 2025	Outpatient Hosp	41599		CPT	UNLISTED PROCEDURE TONGUE FLOOR MOUTH	N	NA
UNITED	Q3 2025	Outpatient Hosp	42145		CPT	PALATOPHARYNGOPLASTY	N	NA

UNITED	Q3 2025	Outpatient Hosp	43644	CPT	LAPS GSTR RSTCV PX W/BYP ROUX-EN-Y LIMB <150 CM	N	NA
UNITED	Q3 2025	Outpatient Hosp	43645	CPT	LAPS GSTR RSTCV PX W/BYP&SM INT RCNSTJ	N	NA
UNITED	Q3 2025	Outpatient Hosp	43648	CPT	LAPS REVISION/RMVL GASTRIC NSTIM ELTRD ANTRUM	N	NA
UNITED	Q3 2025	Outpatient Hosp	43659	CPT	UNLISTED LAPAROSCOPY PROCEDURE STOMACH	N	NA
UNITED	Q3 2025	Outpatient Hosp	43770	CPT	LAPS GASTRIC RESTRICTIVE PROCEDURE PLACE DEVICE	N	NA
UNITED	Q3 2025	Outpatient Hosp	43775	CPT	LAPS GSTRC RSTRICTIV PX LONGITUDINAL GASTRECTOMY	N	NA
UNITED	Q3 2025	Outpatient Hosp	43842	CPT	GASTRIC RSTCV W/O BYP VERTICAL-BANDED GASTROPLY	N	NA
UNITED	Q3 2025	Outpatient Hosp	43845	CPT	GASTRIC RSTCV W/PRTL GASTRECTOMY 50-100 CM	N	NA
UNITED	Q3 2025	Outpatient Hosp	43846	CPT	GASTRIC RSTCV W/BYP W/SHORT LIMB 150 CM/<	N	NA
UNITED	Q3 2025	Outpatient Hosp	43847	CPT	GASTRIC RSTCV W/BYP W/SM INT RCNSTJ LIMIT ABSRPJ	N	NA
UNITED	Q3 2025	Outpatient Hosp	43848	CPT	REVISION OPEN GASTRIC RESTRICTIVE PX NOT DEVICE	N	NA
UNITED	Q3 2025	Outpatient Hosp	43860	CPT	REVJ GSTR/JJ ANAST W/RCNSTJ W/O VGTMY	N	NA
UNITED	Q3 2025	Outpatient Hosp	43881	CPT	IMPLTJ/RPLCMT GASTRIC NSTIM ELTRDE ANTRUM OPEN	N	NA
UNITED	Q3 2025	Outpatient Hosp	43882	CPT	REVISION/RMVL GASTRIC NSTIM ELTRDE ANTRUM OPEN	N	NA
UNITED	Q3 2025	Outpatient Hosp	52441	CPT	CYSTO INSERTION TRANSPROSTATIC IMPLANT SINGLE	N	NA
UNITED	Q3 2025	Outpatient Hosp	52442	CPT	CYSTO INSERTION TRANSPROSTATIC IMPLANT EA ADDL	N	NA
UNITED	Q3 2025	Outpatient Hosp	53850	CPT	TRURL DSTRJ PRSTATE TISS MICROWAVE THERMOTH	N	NA
UNITED	Q3 2025	Outpatient Hosp	53852	CPT	TRURL DSTRJ PRSTATE TISS RF THERMOTH	N	NA
UNITED	Q3 2025	Outpatient Hosp	55873	CPT	CRYOSURGICAL ABLATION PROSTATE W/US & MONITORI	N	NA
UNITED	Q3 2025	Outpatient Hosp	55874	CPT	TRANSPERINEAL PLMT BIODEGRADABLE MATRL 1/MLT NJX	N	NA
UNITED	Q3 2025	Outpatient Hosp	61863	CPT	STRTCTC IMPLTJ NSTIM ELTRD W/O RECORD 1ST ARRAY	N	NA
UNITED	Q3 2025	Outpatient Hosp	61864	CPT	STRTCTC IMPLTJ NSTIM ELTRD W/O RECORD EA ARRAY	N	NA
UNITED	Q3 2025	Outpatient Hosp	61867	CPT	STRTCTC IMPLTJ NSTIM ELTRD W/RECORD 1ST ARRAY	N	NA
UNITED	Q3 2025	Outpatient Hosp	61868	CPT	STRTCTC IMPLTJ NSTIM ELTRD W/RECORD EA ARRAY	N	NA
UNITED	Q3 2025	Outpatient Hosp	61885	CPT	INSJ/RPLCMT CRANIAL NEUROSTIM PULSE GENERATOR	N	NA
UNITED	Q3 2025	Outpatient Hosp	61886	CPT	INSJ/RPLCMT CRANIAL NEUROSTIM GENER 2/> ELTRDS	N	NA
UNITED	Q3 2025	Outpatient Hosp	63001	CPT	LAM W/O FACETEC FORAMOT/DSC 1/2 VRT SGM CRV	N	NA
UNITED	Q3 2025	Outpatient Hosp	63003	CPT	LAMINECTOMY W/O FFD 1/2 VERT SEG THORACIC	N	NA
UNITED	Q3 2025	Outpatient Hosp	63005	CPT	LAMINECTOMY W/O FFD 1/2 VERT SEG LUMBAR	N	NA
UNITED	Q3 2025	Outpatient Hosp	63011	CPT	LAMINECTOMY W/O FFD 1/2 VERT SEG SACRAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	63012	CPT	LAMINECTOMY W/RMVL ABNORMAL FACETS LUMBAR	N	NA
UNITED	Q3 2025	Outpatient Hosp	63015	CPT	LAMINECTOMY W/O FFD > 2 VERT SEG CERVICAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	63016	CPT	LAMINECTOMY W/O FFD > 2 VERT SEG THORACIC	N	NA
UNITED	Q3 2025	Outpatient Hosp	63017	CPT	LAMINECTOMY W/O FFD > 2 VERT SEG LUMBAR	N	NA
UNITED	Q3 2025	Outpatient Hosp	63020	CPT	LAMNOTMY INCL W/DCMPRSN NRV ROOT 1 INTRSPC CERVC	N	NA
UNITED	Q3 2025	Outpatient Hosp	63030	CPT	LAMNOTMY INCL W/DCMPRSN NRV ROOT 1 INTRSPC LUMBR	N	NA
UNITED	Q3 2025	Outpatient Hosp	63040	CPT	LAMOT PRTL FFD EXC DISC REEXPL 1 NTRSPC CERVICAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	63042	CPT	LAMOT PRTL FFD EXC DISC REEXPL 1 NTRSPC LUMBAR	N	NA
UNITED	Q3 2025	Outpatient Hosp	63045	CPT	LAM FACETECTOMY & FORAMOTOMY 1 VRT SGM CERVICAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	63046	CPT	LAM FACETECTOMY & FORAMOTOMY 1 VRT SGM THORACIC	N	NA
UNITED	Q3 2025	Outpatient Hosp	63047	CPT	LAM FACETECTOMY & FORAMOTOMY 1 VRT SGM LUMBAR	N	NA
UNITED	Q3 2025	Outpatient Hosp	63050	CPT	LAMOP CERVICAL W/DCMPRN SPI CORD 2/> VERT SEG	N	NA
UNITED	Q3 2025	Outpatient Hosp	63055	CPT	TRANSPEDICULAR DCMPRN SPINAL CORD 1 SEG THORACIC	N	NA
UNITED	Q3 2025	Outpatient Hosp	63056	CPT	TRANSPEDICULAR DCMPRN SPINAL CORD 1 SEG LUMBAR	N	NA
UNITED	Q3 2025	Outpatient Hosp	63064	CPT	COSTOVERTEBRAL DCMPRN SPINAL CORD THORACIC 1 SEG	N	NA
UNITED	Q3 2025	Outpatient Hosp	63075	CPT	DISCECTOMY ANT DCMPRN CORD CERVICAL 1 NTRSPC	N	NA
UNITED	Q3 2025	Outpatient Hosp	63077	CPT	DISCECTOMY ANT DCMPRN CORD THORACIC 1 NTRSPC	N	NA
UNITED	Q3 2025	Outpatient Hosp	63081	CPT	VERTEBRAL CORPECTOMY ANT DCMPRN CERVICAL 1 SEG	N	NA
UNITED	Q3 2025	Outpatient Hosp	63085	CPT	VERTEBRAL CORPECTOMY DCMPRN CORD THORACIC 1 SEG	N	NA
UNITED	Q3 2025	Outpatient Hosp	63087	CPT	VCRPEC THORACOLMBR DCMPRN LWR THRC/LMBR 1 SEG	N	NA
UNITED	Q3 2025	Outpatient Hosp	63090	CPT	VCRPEC TRANSPRTL/RPR DCMPRN THRC LMBR/SAC 1 SEG	N	NA
UNITED	Q3 2025	Outpatient Hosp	63101	CPT	VERTEB CORPECT LAT XTRCAVITARY DCMPRN THRC 1 SEG	N	NA
UNITED	Q3 2025	Outpatient Hosp	63102	CPT	VERTEB CORPECT LAT XTRCAVITARY DCMPRN LMBR 1 SEG	N	NA
UNITED	Q3 2025	Outpatient Hosp	63170	CPT	LAM W/MYELOTOMY CERVICAL/THORACIC/THORACOLUMBAR	N	NA
UNITED	Q3 2025	Outpatient Hosp	63172	CPT	LAM W/DRG INTRMEDULLARY CYST/SYRINX SUBARACHNOID	N	NA
UNITED	Q3 2025	Outpatient Hosp	63173	CPT	LAM W/DRG INTRMEDULRY CYST/SYRINX PRTL/PLEURAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	63185	CPT	LAMINECTOMY W/RHIZOTOMY 1/2 SEGMENTS	N	NA
UNITED	Q3 2025	Outpatient Hosp	63190	CPT	LAMINECTOMY W/RHIZOTOMY > 2 SEGMENTS	N	NA
UNITED	Q3 2025	Outpatient Hosp	63191	CPT	LAMINECTOMY W/SECTION SPINAL ACCESSORY NERVE	N	NA
UNITED	Q3 2025	Outpatient Hosp	63200	CPT	LAMINECTOMY RELEASE TETHERED SPINAL CORD LUMBAR	N	NA
UNITED	Q3 2025	Outpatient Hosp	63250	CPT	LAM EXC/OCCLUSION AVM SPINAL CORD CERVICAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	63251	CPT	LAM EXC/OCCLUSION AVM SPINAL CORD THORACIC	N	NA
UNITED	Q3 2025	Outpatient Hosp	63252	CPT	LAM EXC/OCCLUSION AVM SPI CORD THORACOLUMBAR	N	NA
UNITED	Q3 2025	Outpatient Hosp	63265	CPT	LAM EXC/EVAC ISPI LES OTH/THN NEO XDRL CERVICAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	63267	CPT	LAM EXC/EVAC ISPI LESION OTH/THN NEO XDRL LUMBAR	N	NA
UNITED	Q3 2025	Outpatient Hosp	63268	CPT	LAM EXC/EVAC ISPI LES OTH/THN NEO XDRL SACRAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	63270	CPT	LAM EXC ISPI LES OTH/THN NEO IDRL CERVICAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	63271	CPT	LAM EXC ISPI LES OTH/THN NEO IDRL THORACIC	N	NA
UNITED	Q3 2025	Outpatient Hosp	63272	CPT	LAM EXC ISPI LES OTH/THN NEO IDRL LUMBAR	N	NA
UNITED	Q3 2025	Outpatient Hosp	63286	CPT	LAM BX/EXC ISPI NEO IDRL IMED THORACIC	N	NA
UNITED	Q3 2025	Outpatient Hosp	63300	CPT	VCRPEC LES 1 SGM XDRL CERVICAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	63301	CPT	VCRPEC LES 1 SGM XDRL THORACIC TTHRC	N	NA
UNITED	Q3 2025	Outpatient Hosp	63302	CPT	VCRPEC LES 1 SEG XDRL THRC THORACOLMBR	N	NA
UNITED	Q3 2025	Outpatient Hosp	63303	CPT	VCRPEC LES 1 SEG XDRL LMBR/SAC TRANSPRTL/RPR	N	NA
UNITED	Q3 2025	Outpatient Hosp	63304	CPT	VERTEBRAL CORPECTOMY EXC LES 1 SEG IDRL CERVICAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	63305	CPT	VERTEBRAL CORPECTOMY LES 1 SEG IDRL THRC TTHRC	N	NA
UNITED	Q3 2025	Outpatient Hosp	63306	CPT	VERTEBRL CORPECT LES 1 SEG IDRL THRC THORACOLMBR	N	NA
UNITED	Q3 2025	Outpatient Hosp	63307	CPT	VCRPEC LES 1 SEG IDRL LMBR/SAC TRANSPRTL/RPR	N	NA
UNITED	Q3 2025	Outpatient Hosp	63308	CPT	VERTEBRAL CORPECTOMY EXC INDRL LES EACH SEG	N	NA
UNITED	Q3 2025	Outpatient Hosp	63650	CPT	PRQ IMPLTJ NSTIM ELECTRODE ARRAY EPIDURAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	63655	CPT	LAM IMPLTJ NSTIM ELTRDS PLATE/PADDLE EDRL	N	NA
UNITED	Q3 2025	Outpatient Hosp	63685	CPT	INSJ/RPLCMT SPINAL NPG/RCVR POCKET CRTJ&CONNJ	N	NA

UNITED	Q3 2025	Outpatient Hosp	64553		CPT	PRQ IMPLTJ NEUROSTIMULATOR ELTRD CRANIAL NERVE	N	NA
UNITED	Q3 2025	Outpatient Hosp	64555		CPT	PRQ IMPLTJ NEUROSTIMULATOR ELTRD PERIPHERAL NRV	N	NA
UNITED	Q3 2025	Outpatient Hosp	64568		CPT	OPEN IMPLANTATION CRANIAL NERVE NEA & PULSE GEN	N	NA
UNITED	Q3 2025	Outpatient Hosp	64570		CPT	REMOVAL CRNL NRV NSTIM ELTRDS & PULSE GENERATO	N	NA
UNITED	Q3 2025	Outpatient Hosp	64590		CPT	INS/RPLC PERPH SAC/GSTRC NPG/RCVR PCKT CRTJ&CONN	N	NA
UNITED	Q3 2025	Outpatient Hosp		64722	CPT	DECOMPRESSION UNSPECIFIED NERVE	N	NA
UNITED	Q3 2025	Outpatient Hosp		65765	CPT	KERATOPHAKIA	N	NA
UNITED	Q3 2025	Outpatient Hosp		65767	CPT	EPIKERATOPLASTY	N	NA
UNITED	Q3 2025	Outpatient Hosp		66180	CPT	AQUEOUS SHUNT EXTRAOC EQUAT PLATE RSVR W/GRAFT	N	NA
UNITED	Q3 2025	Outpatient Hosp	67900		CPT	REPAIR BROW PTOSIS	N	NA
UNITED	Q3 2025	Outpatient Hosp	67901		CPT	RPR BLEPHAROPTOSIS FRONTALIS MUSC SUTR/OTH MATRL	N	NA
UNITED	Q3 2025	Outpatient Hosp	67902		CPT	RPR BLEPHAROPT FRONTALIS MUSC AUTOL FASCAL SLING	N	NA
UNITED	Q3 2025	Outpatient Hosp	67903		CPT	RPR BLEPHAROPTOSIS LEVATOR RESCJ/ADVMNT INTERNAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	67904		CPT	RPR BLEPHAROPTOSIS LEVATOR RESCJ/ADVMNT XTRNL	N	NA
UNITED	Q3 2025	Outpatient Hosp	67906		CPT	RPR BLEPHAROPTOSIS SUPERIOR RECTUS FASCIAL SLING	N	NA
UNITED	Q3 2025	Outpatient Hosp	67908		CPT	RPR BLPOS CONJUNCTIVO-TARSO-MUSC-LEVATOR RESCJ	N	NA
UNITED	Q3 2025	Outpatient Hosp	67909		CPT	REDUCTION OVERCORRECTION PTOSIS	N	NA
UNITED	Q3 2025	Outpatient Hosp	67911		CPT	CORRECTION LID RETRACTION	N	NA
UNITED	Q3 2025	Outpatient Hosp	67912		CPT	CORRJ LAGOPHTHALMOS IMPLTJ UPR EYELID LID LOAD	N	NA
UNITED	Q3 2025	Outpatient Hosp	67914		CPT	REPAIR ECTROPION SUTURE	N	NA
UNITED	Q3 2025	Outpatient Hosp	67915		CPT	REPAIR ECTROPION THERMOCAUTERIZATION	N	NA
UNITED	Q3 2025	Outpatient Hosp	67916		CPT	REPAIR ECTROPION EXCISION TARSAL WEDGE	N	NA
UNITED	Q3 2025	Outpatient Hosp	67917		CPT	REPAIR ECTROPION EXTENSIVE	N	NA
UNITED	Q3 2025	Outpatient Hosp	67921		CPT	REPAIR ENTROPION SUTURE	N	NA
UNITED	Q3 2025	Outpatient Hosp	67922		CPT	REPAIR ENTROPION THERMOCAUTERIZATION	N	NA
UNITED	Q3 2025	Outpatient Hosp	67923		CPT	REPAIR ENTROPION EXCISION TARSAL WEDGE	N	NA
UNITED	Q3 2025	Outpatient Hosp	67924		CPT	REPAIR ENTROPION EXTENSIVE	N	NA
UNITED	Q3 2025	Outpatient Hosp	67950		CPT	CANTHOPLASTY	N	NA
UNITED	Q3 2025	Outpatient Hosp	67961		CPT	EXCISION & REPAIR EYELID < ONE-FOURTH LID MARGIN	N	NA
UNITED	Q3 2025	Outpatient Hosp	67966		CPT	EXCISION & REPAIR EYELID ONE-FOURTH LID MARGIN	N	NA
UNITED	Q3 2025	Outpatient Hosp		69710	CPT	IMPLTJ/RPLCMT EMGNT BONE CNDJ DEV TEMPORAL BONE	N	NA
UNITED	Q3 2025	Outpatient Hosp	77520		CPT	PROTON TX DELIVERY SIMPLE W/O COMPENSATION	N	NA
UNITED	Q3 2025	Outpatient Hosp	77522		CPT	PROTON TX DELIVERY SIMPLE W/COMPENSATION	N	NA
UNITED	Q3 2025	Outpatient Hosp	77523		CPT	PROTON TX DELIVERY INTERMEDIATE	N	NA
UNITED	Q3 2025	Outpatient Hosp	77525		CPT	PROTON TX DELIVERY COMPLEX	N	NA
UNITED	Q3 2025	Outpatient Hosp		90283	CPT	IMMUNE GLOBULIN IGIV HUMAN IV USE	N	NA
UNITED	Q3 2025	Outpatient Hosp		90284	CPT	IMMUNE GLOBULIN HUMAN SUBQ INFUSION 100 MG EA	N	NA
UNITED	Q3 2025	Outpatient Hosp		90378	CPT	RESPIRATORY SYNCYTIAL VIRUS IG IM 50 MG E	N	NA
UNITED	Q3 2025	Outpatient Hosp	93580		CPT	PRQ TCAT CLSR CGEN INTRATRL COMUNICAJ W/IMPLT	N	NA
UNITED	Q3 2025	Outpatient Hosp	A9590		HCPCS	IODINE I-131 IOBENGUANE 1 MCI	N	NA
UNITED	Q3 2025	Outpatient Hosp	A9607		HCPCS	LUTETIUM LU 177 VIPIVOTIDE TETRAXETAN THER 1 MCI	N	NA
UNITED	Q3 2025	Outpatient Hosp	A9699		HCPCS	RADIOPHARMACEUTICAL THERAPEUTIC NOC	N	NA
UNITED	Q3 2025	Outpatient Hosp	C9098		HCPCS	CILTACABTAGENE AUTOLEUCEL TO 100 M BCMA PER TX D	N	NA
UNITED	Q3 2025	Outpatient Hosp	C9149		HCPCS	INJECTION TEPLIZUMAB-MZWV, 5 MCG	N	NA
UNITED	Q3 2025	Outpatient Hosp	C9151		HCPCS	INJECTION PEGCETACOPLAN 1 MG	N	NA
UNITED	Q3 2025	Outpatient Hosp	C9162		HCPCS	INJECTION AVACINCAPTAD PEGOL 0.1 MG	N	NA
UNITED	Q3 2025	Outpatient Hosp	E0749		HCPCS	OSTEOGENESIS STIMULATOR ELEC SURGICALLY IMPL	N	NA
UNITED	Q3 2025	Outpatient Hosp	J7330		HCPCS	AUTOLOGOUS CULTURED CHONDROCYTES IMPLANT	N	NA
UNITED	Q3 2025	Outpatient Hosp	L8600		HCPCS	IMPLANTABLE BREAST PROSTHESIS SILICONE OR EQUAL	N	NA
UNITED	Q3 2025	Outpatient Hosp	L8682		HCPCS	IMPLANTABLE NEUROSTIMULATOR RADIOFREQ RECEIVER	N	NA
UNITED	Q3 2025	Outpatient Hosp	L8685		HCPCS	IMPLANT NEUROSTIM 1 ARRAY RECHARGEABLE	N	NA
UNITED	Q3 2025	Outpatient Hosp	L8686		HCPCS	IMPLANT NEUROSTIM 1 ARRAY NON-RECHARGEABLE	N	NA
UNITED	Q3 2025	Outpatient Hosp	L8687		HCPCS	IMPLANT NEUROSTIM 2 ARRAY RECHARGEABLE	N	NA
UNITED	Q3 2025	Outpatient Hosp	L8688		HCPCS	IMPLANT NEUROSTIM 2 ARRAY NON-RECHARGEABLE	N	NA
UNITED	Q3 2025	Outpatient Hosp	Q2026		HCPCS	INJECTION RADIESSE 0.1ML	N	NA
UNITED	Q3 2025	Outpatient Hosp	S0013		HCPCS	ESKETAMINE NASAL SPRAY 1 MG	N	NA
UNITED	Q3 2025	Outpatient Hosp	S0810		HCPCS	PHOTOREFRACTIVE KERATECTOMY	N	NA
UNITED	Q3 2025	Outpatient Hosp	S2112		HCPCS	ARTHROSCOPY KNEE SURGICAL HARVESTING CARTILAGE	N	NA
UNITED	Q3 2025	Outpatient Hosp	S9988		HCPCS	SERV PROVIDED AS PART OF PHASE 1 CLINICAL TRIAL	N	NA
UNITED	Q3 2025	Transport Services	A0021		HCPCS	AMB SRVC OTSD STATE-MILE TRANSPORT	N	NA
UNITED	Q3 2025	Transport Services	A0100		HCPCS	NONEMERGENCY TRANSPORTATION; TAXI	N	NA
UNITED	Q3 2025	Transport Services	A0140		HCPCS	NONEMERG TRNSPRT & AIR TRAVEL	N	NA
UNITED	Q3 2025	Transport Services	A0180		HCPCS	NONEMERG TRNSPRT: LODGING-RECIP	N	NA
UNITED	Q3 2025	Transport Services	A0190		HCPCS	NONEMERG TRNSPRT: MEALS-RECIP	N	NA
UNITED	Q3 2025	Transport Services	A0200		HCPCS	NONEMERG TRNSPRT: LODGING-ESCORT	N	NA
UNITED	Q3 2025	Transport Services	A0210		HCPCS	NONEMERG TRNSPRT: MEALS-ESCORT	N	NA
UNITED	Q3 2025	Transport Services	A0425		HCPCS	GROUND MILEAGE PER STATUTE MILE	N	NA
UNITED	Q3 2025	Transport Services	A0428		HCPCS	AMB SERVICE BLS NONEMERG TRANSPORT	N	NA
UNITED	Q3 2025	Transport Services	A0430		HCPCS	AMB SRVC CONV AIR SRVC TRANS 1 WAY FIXED WING	N	NA
UNITED	Q3 2025	Transport Services	A0431		HCPCS	AMB SRVC CONV AIR SRVC TRANS 1 WAY ROTARY WING	N	NA
UNITED	Q3 2025	Transport Services	A0435		HCPCS	FIXED WING AIR MILEAGE PER STATUTE MILE	N	NA
UNITED	Q3 2025	Transport Services	A0436		HCPCS	ROTARY WING AIR MILEAGE PER STATUTE MILE	N	NA
UNITED	Q3 2025	Transport Services	S9960		HCPCS	AMB SERVICE AIR NONEMERGENCY 1 WAY FIXED WING	N	NA
UNITED	Q3 2025	Transport Services	S9961		HCPCS	AMB SERVICE AIR NONEMERGENCY 1 WAY ROTARY WING	N	NA
UNITED	Q3 2025	Transport Services	T2001		HCPCS	NON-EMERG TRANSPORTATION; PT ATTENDANT/ESCORT	N	NA