



Iowa Department of Human Services

**Prior Authorization Codes
Other Medical Services**

Healthcare Common Procedure Coding System (HCPCS)	
Code	Description
27416	OSTEOCHNDRAL AUTOGRAFT, KNEE, OPEN
28446	OPEN OSTEOCHNDRAL AUTOGRAFT, TALUS
32851	LUNG TRANSPLANT, SINGLE, W/O CARDIOPUL
32852	LUNG TRANSPLANT, SINGLE W/CARDIOPULMONAR
32853	LUNG TRANSPLANT, DOUBLE W/O CARDIOPULM
32854	LUNG TRANSPLANT DOUBLE W/CARDIOPULMONARY
33935	HEART-LUNG TRANSPLANT W/RECIPIENT CARD
33945	HEART TRANSPLANT, WITH OR WITHOUT RECIPI
38240	BONE MARROW TRANSPLANTATION, ALLOGENIC
38241	BONE MARROW TRANSPLANT AUTOLOGOUS
38242	BONE MARROW,STEM CELL TRANSPLAT.
43644	LAP,GASTRIC REST PROC W BYPASS & ROUX-EN
43645	LAP,W GASTRIC BYPASS & SM INTES RECONTRU
43770	LAP, PLACE GASTR ADJUST BAND
43771	LAP, REVISE ADJUST GAST BAND
43772	LAP, REMOVE ADJUST GAST BAND
43773	LAP, CHANGE ADJUST GAST BAND
43774	LAP REMOV ADJ GAST BAND/PORT
43775	LAP,SURG,GASTRIC RESTRICTIVE PROCEDURE
43842	GASTRIC RESTRICTIVE PROCEDURE W/O BYPASS
43843	GASTRIC RESTRICTIVE PROCEDURE OTHER THAN
43845	GASTRIC RESTRICTIVE PROC W PAR GASTRESTO
43846	GASTRIC BYPASS W/ROUX-EN-Y GASTROENTEROS
43847	GASTRIC RESTRICTIVE PROCEDURE W/BYPASS W
43848	REVISION, OPEN GASTRIC RESTRICTIVE
43886	GASTRIC RESTRICT PROC;REVISE SUBQ PORT
43887	GASTRIC RESTRICT PROC;REMOVE SUBQ PORT
43888	GASTRIC RESTRICT PROC;REMOV REPLC SUBQ
47135	LIVER ALLOTRANSPLANTATION, ORTHOTOPIC PA
47136	LIVER ALLOTRANSPLANTATION, HETEROPTIC, P
48160	PANCREATECTOMY, TOTAL OR SUBTOTAL, W/AUT
48554	TRANSPLANTATION OF PANCREATIC ALLOGRAFT
70336	MRI, TEMPOROMANDIBULAR JOINT(S)
70450	C.A.T. SCAN,HEAD OR BRAIN;WITHOUT CONTRA
70460	C.A.T. SCAN,HEAD OR BRAIN;WITH CONTRAST
70470	C.A.T. SCAN,HEAD OR BRAIN:WITHOUT CONTRA
70480	C.A.T. SCAN,ORBIT,SELLA,POSTERIOR FOSSA,

70481 C.A.T. SCAN,ORBIT,SELLA,POSTERIOR FOSSA,
70482 C.A.T. SCAN,ORBIT,SELLA,POSTERIOR FOSSA,
70486 C.A.T. SCAN,MAXILLOFACIAL AREA;WITHOUT C
70487 C.A.T. SCAN,MAXILLOFACIAL AREA;WITH CONT
70488 C.A.T. SCAN,MAXILLOFACIAL AREA;WITHOUT C
70490 C.A.T. SCAN,SOFT TISSUE NECK;WITHOUT CON
70491 C.A.T. SCAN,SOFT TISSUE NECK;WITH CONTRA
70492 C.A.T. SCAN,SOFT TISSUE NECK;WITHOUT CON
70496 CT ANGIOGRAPHY, HEAD, W/WO CONTRAST
70498 CT ANGIOGRAPHY, NECK, W/WO CONTRAST
70540 MAGNETIC RESONANCE (EG, PROTON) IMAGING;
70542 MRI, ORBIT, FACE AND NECK
70543 MRI, ORBIT, FACE AND NECK
70544 MRA, HEAD
70545 MRA, HEAD
70546 MRA, HEAD
70547 MRA, NECK
70548 MRA, NECK
70549 MRA, NECK
70551 MAGNETIC RESONANCE (EG, PROTON) IMAGING,
70552 MAGNETIC RESONANCE IMAGING BRAIN W/CONTR
70553 MAGNETIC RESONANCE IMAGING W/O CONTRAST
71250 C.A.T. SCAN,THORAX;WITHOUT CONTRAST MATE
71260 C.A.T. SCAN,THORAX;WITH CONTRAST MATERIA
71270 C.A.T. SCAN,THORAX;WITHOUT CONTRAST,FOLL
71275 CT ANGIOGRAPHY, CHEST, W/WO CONTRAST
71550 MAGNETIC RESONANCE (EG, PROTON) IMAGING,
71551 MRI, CHEST
71552 MRI, CHEST
72125 C.A.T. SCAN,CERVICAL SPINE;WITHOUT CONTR
72126 C.A.T. SCAN,CERVICAL SPINE;WITH CONTRAST
72127 C.A.T. SCAN,CERVICAL SPINE;WITHOUT CONTR
72128 C.A.T. SCAN,THORACIC SPINE;WITHOUT CONTR
72129 C.A.T. SCAN,THORACIC SPINE;WITH CONTRAST
72130 C.A.T. SCAN,THORACIC SPINE;WITHOUT CONTR
72131 C.A.T. SCAN,LUMBAR SPINE;WITHOUT CONTRAS
72132 C.A.T. SCAN,LUMBAR SPINE;WITH CONTRAST M
72133 C.A.T. SCAN,LUMBAR SPINE;WITHOUT CONTRAS
72141 MAGNETIC RESONANCE IMAGING,SPINAL CANAL
72142 MAGNETIC RESONANCE IMAGING SPINAL CERVIC
72146 MAGNETIC RESONANCE IMAGING SPINAL THORAC
72147 MAGNETIC RESONANCE IMAGING SPINAL THORAC
72148 MAGNETIC RESONANCE IMAGING SPINAL LUMBAR

72149 MAGNETIC RESONANCE IMAGING SPINAL LUMBAR
72156 MAGNETIC RESONANCE IMAGING, SPINAL CANAL
72157 MAGNETIC RESONANCE IMAGING, THORACIC, W/
72158 MAGNETIC RESONANCE IMAGING, LUMBAR, NONC
72191 CT ANGIOGRAPHY OF PELVIS
72192 C.A.T. SCAN, PELVIS; WITHOUT CONTRAST MATE
72193 C.A.T. SCAN, PELVIS; WITH CONTRAST
72194 C.A.T. SCAN, PELVIS; WITHOUT & WITH CONTRAST
72195 MRI, PELVIS
72196 MAGNETIC RESONANCE IMAGING, PELVIS
72197 MRI, PELVIS
73200 C.A.T. SCAN, UPPER EXTREMITY; WITHOUT CONT
73201 C.A.T. SCAN, UPPER EXTREMITY; WITH CONTRAS
73202 C.A.T. SCAN, UPPER EXTREMITY; WITHOUT CONT
73206 CT ANGIOGRAPHY OF UPPER EXTREMITY
73218 MRI, UPPER EXTREMITIES
73219 MRI, UPPER EXTREMITIES
73220 MAGNETIC RESONANCE IMAGING, UPPER EXTREMI
73221 MAGNETIC RESONANCE IMAGING, ANY JOINT OF
73222 MRI, JOINT, UPPER EXTREMITY
73223 MRI, JOINT, UPPER EXTREMITY
73700 C.A.T. SCAN, LOWER EXTREMITY; WITHOUT CONT
73701 C.A.T. SCAN, LOWER EXTREMITY; WITH CONTRAS
73702 C.A.T. SCAN, LOWER EXTREMITY; WITHOUT CONT
73706 CT ANGIOGRAPHY OF LOWER EXTREMITY
73718 MRI, LOWER EXTREMITY
73719 MRI, LOWER EXTREMITY
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73721 MAGNETIC RESONANCE IMAGING, ANY JOINT OF
73722 MRI, JOINT, LOWER EXTREMITY
73723 MRI, JOINT, LOWER EXTREMITY
73725 MAGNETIC RESONANCE ANGIOGRAPHY, LOWER EX
74150 C.A.T. SCAN, ABDOMEN; WITHOUT CONTRAST MAT
74160 C.A.T. SCAN, ABDOMEN; WITH CONTRAST MATERI
74170 C.A.T. SCAN, ABDOMEN; WITHOUT CONTRAST, FOL
74174 CT ANGIOGRAPHY OF ABD & PELVIS
74175 CT ANGIOGRAPHY OF ABDOMEN
74176 CT, ABD & PELVIS; W/O CONTRAST
74177 CT, ABD & PELVIS; W/ CONTRAST
74178 CT, ABD & PELVIS; W/O CONTRAST
74181 MAGNETIC RESONANCE (EG, PROTON) IMAGING,
74182 MRI, ABDOMEN
74183 MRI, ABDOMEN

75557 CARDIAC MRI FOR MORPH&FXN W/O CONTRAST
75559 CARDIAC MRI-MORP&FXN W/O CONTRAST W/IMG
75561 CARDC MRI MORPH/FXN W/O&W/CONTRAST
75563 CARDC MRI MORPH/FXN W/O&W/CONTRST W/STR
75565 CARDIAC MRI FOR FLOW MAPPING; ADD-ON
75572 CT,HEART,W/CONTRAST,EVAL CARDIAC STRUC
75573 CT, HEART, W/CONTRAST, EVAL CONGEN HRT
75574 CT,HEART,COR ART/BYPASS GFT,W/CONTRAST
75635 CT ANIOGRAPHY OF ABDOMINAL AORTA
76380 COMPUTERIZED TOMOGRAPHY, LIMITED/LOCALIZ
76497 UNLISTED COMPUTED TOMOGRAPHY PROCEDURE
76498 UNLISTED MAGNETIC RESONANCE PROCEDURE
77058 MRI BREAST UNILATERAL
77059 MRI BREAST BILATERAL
78459 MYOCARDIAL IMAGING, POSITRON EMISSION, T
78491 MYOCARDIAL IMAGING,POSITRON EMISSION
78492 MYOCARDIAL IMAGING,POSITRON EMISSION
78608 BRAIN IMAGING, POSITRON EMISSION TOMOGRA
78609 BRAIN IMAGING, POSITRON EMISSION TOMOGRA
78811 PET IMAGING; LIMITED AREA
78812 PET IMAGING; SKULL BASE TO MID-THIGH
78813 PET IMAGING; WHOLE BODY
78814 PET W/ACQUIRED CT; LIMITED AREA
78815 PET W/ACQUIRED CT; SKULL TO MID-THIGH
78816 PET W/ACQUIRED CT; WHOLE BODY
81201 Gene analysis (adenomatous polyposis col
81202 Gene analysis (adenomatous polyposis col
81203 Gene analysis (adenomatous polyposis col
81211 BRCA1,BRCA2 GENE ANALYSIS;FULL SEQUENC
81212 BRCA1, BRCA2 GENE ANALYSIS; VARIANTS
81213 BRCA1, BRCA2 GENE ANALYSIS; VARIANTS
81214 BRCA1 GENE ANALYSIS; FULL SEQ ANALYSIS
81215 BRCA1 GENE ANALYSIS; KNOWN FAMILIAL
81216 BRCA2 GENE ANALYSIS; FULL SEQ ANALYSIS
81217 BRCA2 GENE ANALYSIS; KNOWN FAMILIAL
81235 Gene analysis (epidermal growth factor r
81252 Gene analysis, full gene sequence
81253 Gene analysis, known familial variants
81254 Gene analysis, common variants
81321 Gene analysis (phosphatase and tensin ho
81322 Gene analysis (phosphatase and tensin ho
81323 Gene analysis (phosphatase and tensin ho
81324 Gene analysis (peripheral myelin protein

81325 Gene analysis (peripheral myelin protein
81326 Gene analysis (peripheral myelin protein
81479 Molecular pathology procedure
90378 RESPIRATORY IMMUNE GLOBULIN, IM. 50MG
90911 BIOFEEDBACK TRAINING, ANORECTAL INC EMG
92065 ORTHOPTIC AND/OR PLEOPTIC TRAINING, W/CO
96152 HEALTH AND BEHAVOIR INTERVENTION/15MIN
96153 HEALTH AND BEHAVOIR INTERVENTION;GROUP
96154 HEALTH & BEHAVIOR INTERVENTION;FAMILY
97802 MEDICL NUTRITION THERAPY;INITIAL,15MIN
97803 MEDICAL NUTRITN THERAPY;REASSESS,15MIN
A4336 INCONT SUPPLY,URETH INSERT,ANY TYPE,EA
A4360 DISPOS EXT URETHAL CLAMP/COMPRESS DEV
A7025 HIGH FREQUENCY CHEST OCCILATION VEST
A7026 HIGH FREQ.OCILL.DEVICE SYSTEM HOSE
A9152 SINGLE VITAMIN/MINERAL/TRACE ELEMENT
A9153 MULTIPLE VITAMINS
A9280 ALERT/ALARM DEVICE,NOS
B4034 ENTERAL FEEDING SUPPLY KIT;SYRINGE FED
B4035 ENTERAL FEEDING SUPPLY KIT; PUMP FED
B4036 ENTERAL FEEDING SUPPLY KIT;GRAVITY FED
B4082 NASOGASTRIC TUBING WITHOUT STYLET (EACH)
B4083 STOMACH TUBE- LEVINE TYPE
B4100 FOOD THICKENER, ADMINISTERED ORALLY
B4102 ENTERAL FORMULA
B4103 ENTERAL FORMULA
B4104 ADDITIVE FOR FORMULA
B4149 ENTERAL FORMULA
B4150 ENTERAL FORMULAE; CATEGORY I: INTACT PRO
B4152 ENTERAL FORMULAE; CATEGORY II: INTACT PR
B4153 ENTERAL FORMULAE; CATEGORY III: HYDROLIZ
B4154 ENTERAL FORMULAE; CATEGORY IV: DEFINED F
B4155 ENTERAL FORMULAE; CATEGORY V: MODULAR CO
B4157 ENTERAL FORMULA W PROTEINS,FATS,CARBS,VI
B4158 ENTERAL FORM FOR PEDS, PROTEINS,FATS,CAR
B4159 ENTERAL FORM, PED,SOY BASED,PROTEINS,FAT
B4160 ENTERAL FORM,PED INCLUDES PROT,FATS,CARB
B4161 ENT FORM,PED, HYDROLYZED/AMINO ACIDS & P
B4162 ENT FORM,SPECIAL METABOLIC NEEDS FOR INH
B9002 ENTERAL NUTRITION INFUSION PUMP W/ALARM-
E0240 BATH/SHOWER CHAIR, W/WO WHEELS,ANY SIZE
E0245 TUB STOOL OR BENCH
E0247 TRANSFER BENCH FOR TUB/TOILET, W/WO OPEN

E0248	TRANSFER BENCH, HVY DUTY, TUB OR STOOL
E0300	PRDIATRIC CRIB, HOSP GRADE,FULLY ENCLOSE
E0328	HOSP BED,PED,MANUAL,FULL ENCLOS W/MAT
E0329	HOSP BED,PED,ELECT/SEMI,FULL ENCL W/MAT
E0483	HIGH FREQUENCY CHEST OSCILLATOR SYSTEM
E0607	HOME BLOOD GLUCOSE MONITOR (PURCHASE ONL
E0635	PATIENT LIFT, ELECTRIC WITH SEAT OR SLIN
E0639	PT LIFT,MOVEABLE W DISASSEM & REASSEMBLY
E0640	PT LIFT,FIX SYS,ALL COMP/ACCESSORIES
E0784	EXTERNAL AMBULATORY INFUSION PUMP, INSUL
E2101	BLOOD GLUCOSE MONITOR W/BLOOD SAMPLE
E2331	POWER WC ATTEND CONTROL
E2500	SPEECH DEV.PRE-RECORDED MESS.<8 MINUTES
E2502	SPEECH DEV.PRE-RECORDED MESS. >8 BUT <20
E2504	SPEECH DEV.PRE-RECORDED MESSAGES >20<40
E2506	SPEECH DEVICE PRE-RECORDED MESSAGES>40MI
E2508	SPEECH DEVICE MESSAGE FORM BY SPELLING
E2510	SPEECH DEVICE MULT. METHODS SPEECH FORM
E2511	SPEECH GENERATING SOFTWARE PROGRAM
E2512	ASSESS.SPEECH GEN.DEVICE MOUNTING
E2599	ASSESS.FOR SPEECH GEN.DEVICE
H0004	BEHAVIORAL HEALTH COUNSELING & THERAPY
H0018	BEHAVIORAL HEALTH; MFP
H0023	BEHAVIORAL HEALTH OUTREACH SERVICES
H0024	BEHAVIORAL HEALTH PREVENTION INFORMATION
H0025	BEHAVIORAL HLTH PREVENTION - MFP
H0031	MENTAL HEALTH ASSESSMENT/NON-PHYS PER 15
H0032	COMM PSHCH SUPPORTIVE TREATMENT
H0036	COMMUNITY PSYCHIATRIC SUPPORT MFP
H0037	COMMUNITY PSYCH PROGRAM
H0040	ASSERTIVE COMMUNITY TREATMENT
H0046	MENTAL HEALTH SERVICES, NOS
H2001	REHAB PROGRAM PER 1/2 DAY - NIP
H2011	CRISIS INTER SERV, PER 15 MIN
H2015	COMPREHENSIVE COMMUNITY SUPPORT SERVICES
H2016	COMPREHENSIVE COMMUNITY SUPPORT SERVICES
H2019	THERAPEUTIC BEHAVIOR SERVICES/15MIN
H2021	COMMUNITY-BASED WRAP-AROUND SERVICES
H2023	SUPPORTED EMPLOYMENT
H2024	SUPPORTED EMPLOYMENT
H2025	ONGOING SUPPORT TO MAINTAIN EMPLOYMENT
J0178	Injection, aflibercept, 1 mg
J0717	Injection, certolizumab pegol, 1 mg

L5859	Addition to lower extremity prosthesis,
L5969	Addition, endoskeletal ankle-foot or ank
L5973	ANKLE FT SYS,DORSIFLEX&/OR PLANTR FLEX
L8031	BRST PROST,SILCONE/EQUAL,W/INTEG ADHES
L8032	NIPPLE PROSTHESIS,REUSABLE,ANY TYPE,EA
L8619	COCHLEAR IMPLANT EXTERNAL SPEECH PROCESS
L8627	COCHLEAR IMPL,EXT PROCESSOR,REPLACEMENT
L8628	COCHLEAR IMPL,EXT CONTROLER,REPLACEMENT
Q0138	INJ,FERUMOXYTOL,TX IDA,1 MG(NON-ESRD)
Q0139	INJ,FERUMOXYTOL,TX OF IDA, 1 MG (ESRD)
Q0479	POWER MODULE FOR USE PVAD, REPLACEMENT
S0215	NON-EMERGENCY TRANSPORT; MILE
S5100	DAY CARE SERVICES, ADULT
S5101	ADULT DAY CARE SERVICES; HALF DAY
S5102	DAY CARE SERVICES, ADULT, PER DIEM
S5105	ADULT DAY CARE SERVICES; EXTENDED DAY
S5120	CHORE SERVICES
S5125	ATTENDANT CARE SERVICES; AGENCY
S5130	HOMEMAKER SERVICE
S5135	COMPANION CARE, ADULT
S5150	RESPIRE; INDIVIDUAL
S5160	EMERGENCY RESPONSE SYSTEM; INSTALL AND T
S5161	EMERGENCY RESPONSE SYSTEM; SERVICE FEE
S5165	HOME MODIFICATION
S5170	HOME DELIVERED MEALS
S5185	MED REMINDER SERV, NON-FACE-TO-FACE
S5199	PERSONAL CARE ITEM, NOS
S9122	HOME HEALTH AIDE IN THE HOME; PER HOUR
S9123	NURSING CARE IN THE HOME/RN; PER HOUR
S9124	NURSING CARE IN THE HOME/LPN; PER HOUR
S9434	MODIFIED FOOD SUPP. FOR INBORN ERRORS
S9435	MEDICAL FOODS FOR INBORN ERROR OF METAB.
T1002	RN SERVICES UP TO 15 MINUTES
T1003	LPN/LVN SERVICES UP TO 15 MINUTES
T1004	SERVICES OF A QUALIFIED NURSING AIDE
T1005	RESPIRE CARE SERVICES
T1016	CASE MANAGEMENT/15 MINUTES
T1017	TARGETED CASE MANAGEMENT, EACH 15 MIN.
T1019	PERSONAL CARE SERVICE, PER 15 MINUTES
T1021	HOME HEALTH AIDE,PER VISIT - WAIVER
T1030	NURSING CARE IN THE HOME,RN, PER VISIT
T1031	NURSING CARE IN HOME/LPN - WAIVER/VISIT
T2003	NON-EMERGENCY TRANSPORTATION; TRIP

T2014	HABILITATION, PREVOCATIONAL
T2015	HABILITATION, PREVOCATIONAL
T2018	HABILITATION, SUPPORTED EMPLOYMENT
T2020	DAY HABILITATION
T2021	DAY HABILITATION
T2025	WAIVER SERVICES, NOS
T2028	SPECIALIZED SUPPLY, NOS, WAIVER
T2029	SPECIALIZED MEDICAL EQUIPMENT
T2031	ASSISTED LIVING, WAIVER, PER DIEM
T2036	CAMPING, WAIVER
T2037	CAMPING, WAIVER, DAY CAMP;
T2038	COMMUNITY TRANSITION, WAIVER, PER SERVIC
T2039	VEHICLE MODIFICATION
V2718	PRESS-ON LENS, FRESNELL PRISM, PER LENS
V2744	TINT, PHOTOCHROMATIC, PER LENS
V5274	ASSIST LISTENING DEVICE, NOT SPECIFIED
V5281	Assistive listening device, personal fm/
V5282	Assistive listening device, personal fm/
V5283	Assistive listening device, personal fm/
V5284	Assistive listening device, personal fm/
V5285	Assistive listening device, personal fm/
V5286	Assistive listening device, personal blu
V5287	Assistive listening device, personal fm/
V5288	Assistive listening device, personl fm/d
V5289	Assistive listening device,personl fm/dm
V5290	Assistive listening device, transmitter

Hospital Outpatient

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27416	OSTEOCHNDRAL AUTOGRAFT, KNEE, OPEN
28446	OPEN OSTEOCHNDRAL AUTOGRAFT, TALUS
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78459 MYOCARDIAL IMAGING, POSITRON EMISSION, T
78491 MYOCARDIAL IMAGING,POSITRON EMISSION
78492 MYOCARDIAL IMAGING,POSITRON EMISSION
78608 BRAIN IMAGING, POSITRON EMISSION TOMOGRA
78609 BRAIN IMAGING, POSITRON EMISSION TOMOGRA
78811 PET IMAGING; LIMITED AREA
78812 PET IMAGING; SKULL BASE TO MID-THIGH
78813 PET IMAGING; WHOLE BODY
78814 PET W/ACQUIRED CT; LIMITED AREA
78815 PET W/ACQUIRED CT; SKULL TO MID-THIGH
78816 PET W/ACQUIRED CT; WHOLE BODY
81201 Gene analysis (adenomatous polyposis col
81202 Gene analysis (adenomatous polyposis col
81203 Gene analysis (adenomatous polyposis col
81211 BRCA1,BRCA2 GENE ANALYSIS;FULL SEQUENC
81212 BRCA1, BRCA2 GENE ANALYSIS; VARIANTS
81213 BRCA1, BRCA2 GENE ANALYSIS; VARIANTS
81214 BRCA1 GENE ANALYSIS; FULL SEQ ANALYSIS
81215 BRCA1 GENE ANALYSIS; KNOWN FAMILIAL
81216 BRCA2 GENE ANALYSIS; FULL SEQ ANALYSIS
81217 BRCA2 GENE ANALYSIS; KNOWN FAMILIAL
81235 Gene analysis (epidermal growth factor r
81252 Gene analysis, full gene sequence

81253 Gene analysis, known familial variants
81254 Gene analysis, common variants
81321 Gene analysis (phosphatase and tensin ho
81322 Gene analysis (phosphatase and tensin ho
81323 Gene analysis (phosphatase and tensin ho
81324 Gene analysis (peripheral myelin protein
81325 Gene analysis (peripheral myelin protein
81326 Gene analysis (peripheral myelin protein
81479 Molecular pathology procedure
90911 BIOFEEDBACK TRAINING
96152 HEALTH AND BEHAVOIR INTERVENTION/15MIN
96153 HEALTH AND BEHAVOIR INTERVENTION;GROUP
A4336 INCONT SUPPLY,URETH INSERT,ANY TYPE,EA
A4360 DISPOS EXT URETHAL CLAMP/COMPRESS DEV
C8912 MRA, LOWER EXTREMITY WITH CONTRAST
C8913 MRA, LOWER EXTREMITY WITHOUT CONTRAST
C8914 MRA, LOWR EXT W/O CONTRAST F/B W/CONT
J0178 Injection, aflibercept, 1 mg
J0717 Injection, certolizumab pegol, 1 mg
L5859 Addition to lower extremity prosthesis,
L5969 Addition, endoskeletal ankle-foot or ank
L5973 ANKLE FT SYS,DORSIFLEX&/OR PLANTR FLEX
L8031 BRST PROST,SILCONE/EQUAL,W/INTEG ADHES
L8032 NIPPLE PROSTHESIS,REUSABLE,ANY TYPE,EA
L8627 COCHLEAR IMPL,EXT PROCESSOR,REPLACEMENT
L8628 COCHLEAR IMPL,EXT CONTROLER,REPLACEMNT
Q0479 POWER MODULE FOR USE PVAD, REPLACEMNT
S9122 HOME HEALTH AIDE, HOURLY RATE
S9434 MODIFIED FOOD SUPP. FOR INBORN ERRORS
S9435 MEDICAL FOODS FOR INBORN ERROR OF METAB.
T1000 PRIVATE DUTY/INDEPENDENT NURSING SERVICE
V5281 Assistive listening device, personal fm/
V5282 Assistive listening device, personal fm/
V5283 Assistive listening device, personal fm/
V5284 Assistive listening device, personal fm/
V5285 Assistive listening device, personal fm/
V5286 Assistive listening device, personal blu
V5287 Assistive listening device, personal fm/
V5288 Assistive listening device, personl fm/d
V5289 Assistive listening device,personl fm/dm
V5290 Assistive listening device, transmitter

W0584 DAY TREATMENT FOR CHILDREN, PER HOUR
W0585 PARTIAL HOSPITALIZATION FOR CHILDREN, PE