

CMSP Approved Procedure Codes with No Share of Cost

| <b>CPT Code</b> | <b>Procedure</b>   | <b>CPT/HCPCS Code Description</b>   |
|-----------------|--|---|
| 10060           | Incision & drainage of abscess   | Simple or single  |
| 10061           | Incision & drainage of abscess   | Complicated or multiple   |
| 10160           | Incision & drainage of abscess   | Puncture aspiration of abscess  |
| 11200           | Removal of skin tags - 15 skin tags  | Removal of skin tags, multiple fibrocuteaneous tags, any area; up to and including 15 lesions   |
| 11201           | Removal of skin tags - each additional 10 skin tags  | Removal of skin tags, multiple fibrocuteaneous tags, any area; up to and including 15 lesions; each addition 10 lesions, or part thereof (list separately in addition to code for primary procedure)        |
| 11300           | Shaving of epidermal or dermal lesions - 0.5 cm or less  | Shaving of epidermal or dermal lesion, single lesion, trunk, arms or legs; lesion diameter 0.5 cm or less   |
| 11301           | Shaving of epidermal or dermal lesions - 0.6-1.0 cm  | Shaving of epidermal or dermal lesion, single lesion, trunk, arms or legs; lesion diameter 0.6 cm to 1.0 cm   |
| 12001           | Minor Laceration Repair - Simple Repair 2.5 cm or less   | Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); 2.5 cm or less  |
| 12002           | Minor Laceration Repair - Simple Repair 2.6 cm to 7.5 cm   | Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); 2.6 cm to 7.5 cm  |
| 12004           | Minor Laceration Repair - Simple Repair 7.6 cm to 12.5 cm  | Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); 7.6 cm to 12.5 cm   |
| 12005           | Minor Laceration Repair - Simple Repair 12.6 cm to 20.0 cm   | Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); 12.6 cm to 20.0 cm  |
| 12006           | Minor Laceration Repair - Simple Repair 20.1 cm to 30.0 cm   | Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); 20.1 cm to 30.0 cm  |
| 12007           | Minor Laceration Repair - Simple Repair over 30.0 cm   | Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); over 30.0 cm  |
| 12011           | Minor Laceration Repair - Simple Repair 2.5 cm or less   | Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 2.5 cm or less  |
| 12013           | Minor Laceration Repair - Simple Repair 2.6 cm to 5.0 cm   | Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 2.6 cm to 5.0 cm  |
| 12014           | Minor Laceration Repair - Simple Repair 5.1 cm to 7.5 cm   | Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 5.1 cm to 7.5 cm  |
| 12015           | Minor Laceration Repair - Simple Repair 7.6 cm to 12.5 cm  | Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 7.6 cm to 12.5 cm   |
| 12016           | Minor Laceration Repair - Simple Repair 12.6 cm to 20.0 cm   | Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 12.6 cm to 20.0 cm  |
| 12017           | Minor Laceration Repair - Simple Repair 20.1 cm to 30.0 cm   | Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 20.1 cm to 30.0 cm  |
| 12018           | Minor Laceration Repair - Simple Repair Over 30.0 cm   | Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; Over 30.0 cm  |
| 12020           | Minor Laceration Repair - Simple Repair  | Treatment of superficial wound dehiscence; simple closure   |
| 12021           | Minor Laceration Repair - Simple Repair; with packing  | Treatment of superficial wound dehiscence; simple closure; with packing   |
| 13100           | Benign Skin Tag, mole, wart removal (no pathology needed) - Repair, complex, trunk; 1.1 cm to 2.5 cm | Repair, complex, trunk; 1.1 cm to 2.5 cm  |
| 13101           | Benign Skin Tag, mole, wart removal (no pathology needed) - Repair, complex, trunk; 2.6 cm to 7.5 cm | Repair, complex, trunk; 2.6 cm to 7.5 cm  |
| 11400           | Excision - benign lesions (trunk, arms and legs) 0.5 cm or less                                      | Excision, benign lesion including margins, except skin tag (unless listed elsewhere), trunk, arms, or legs; excised diameter 0.5 cm or less   |
| 11401           | Excision - benign lesions (trunk, arms and legs) 0.6 to 1.0 cm                                       | Excision, benign lesion including margins, except skin tag (unless listed elsewhere), trunk, arms, or legs; excised diameter 0.6 cm to 1 cm   |
| 11420           | Excision - benign lesions (scalp, neck, hands, feet) 0.5 cm or less                                  | Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter 0.5 cm or less  |
| 11421           | Excision - benign lesions (scalp, neck, hands, feet) 0.6 cm to 1.0 cm                                | Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter 0.6 cm to 1.0 cm  |
| 11440           | Excision - benign lesions (face, ears, eyelids, nose, lips, mucous membrane) 0.5 cm or less          | Excision, benign lesion including margins, except skin tag (unless listed elsewhere), face, ears, eyelids, nose, lips, mucous membrane; excised diameter 0.5 cm or less                                     |
| 11441           | Excision - benign lesions (face, ears, eyelids, nose, lips, mucous membrane) 0.6 to 1.0 cm           | Excision, benign lesion including margins, except skin tag (unless listed elsewhere), face, ears, eyelids, nose, lips, mucous membrane; excised diameter 0.6 to 1.0 cm                                      |
| 17000           | Destruction, Benign or premalignant lesions- 1st lesion  | Destruction (e.g., laser surgery, electro surgery, cryosurgery, chemosurgery, surgical curettement), premalignant lesions (e.g. actinic keratoses); first lesion  |
| 17003           | Destruction, premalignant lesions - 2-14 lesions   | Destruction (e.g., laser surgery, electro surgery, cryosurgery, chemosurgery, surgical curettement), premalignant lesions (e.g. actinic keratoses); second thru 14 lesions                                  |
| 17004           | Destruction, premalignant lesions - 15 or more lesions   | Destruction (e.g., laser surgery, electro surgery, cryosurgery, chemosurgery, surgical curettement), premalignant lesions (e.g. actinic keratoses); 15 or more lesions                                      |
| 17110           | Destruction, Benign lesions - up to 14 lesions   | Destruction (e.g., laser surgery, electro surgery, cryosurgery, chemosurgery, surgical curettement), of benign lesions other than skin tags or cutaneous vascular proliferative lesions; up to 14 lesions   |
| 17111           | Destruction, Benign lesions - 15 or more lesions   | Destruction (e.g., laser surgery, electro surgery, cryosurgery, chemosurgery, surgical curettement), of benign lesions other than skin tags or cutaneous vascular proliferative lesions; 15 or more lesions |
| 11765           | Ingrown toenail removal  | Wedge excision of skin of nail fold (eg, for ingrown toenail)   |
| 20550           | Injection of tendon sheaths  | Injection(s); single tendon sheath, or ligament, aponeurosis (e.g., plantar "fascia")   |

CMSP Approved Procedure Codes with No Share of Cost

| <b>CPT Code</b> | <b>Procedure</b>               | <b>CPT/HCPCS Code Description</b>  |
|-----------------|--------------------------------|--|
| 20551           | Injection of tendon sheaths    | Injection(s); single tendon sheath, or ligament, aponeurosis (e.g., plantar "fascia") - Single tendon origin/insertion   |
| 20552           | Injection of trigger points    | Injection(s); single or multiple trigger point(s), 1 or 2 muscle (s)   |
| 20553           | Injection of trigger points    | Injection(s); single or multiple trigger point(s), 3 or more muscles   |
| 20600           | Injection of buse              | Arthrocentesis, aspiration and/or injection, small joint or burse (e.g., fingers, toes); without ultrasound guidance   |
| 20605           | Injection of buse              | Arthrocentesis, aspiration and/or injection, intermediate joint or bursa (e.g., temporomandibular, acromioclavicular, wrist, elbow or ankle, olecranon bursa); without ultrasound guidance |
| 20610           | Injection of buse              | Arthrocentesis, aspiration and/or injection, major joint or busa (e.g., shoulder, hip knee, subcromial bursa); without ultrasound guidance   |
| 36415           | Venipuncture                   | Collection of venous blood by venipuncture   |
| 36416           | Venipuncture                   | Collection of capillary blood specimen (e.g., finger, heel, ear stick)   |
| 45330           | Sigmoidscopy                   | Sigmoidoscopy, flexible; diagnostic, with or without collection of specimen(s) by brushing or washing  |
| 45331           | Sigmoidscopy                   | Sigmoidoscopy, flexible; with biopsy, single or multiple   |
| 45332           | Sigmoidscopy                   | Sigmoidoscopy, flexible; with removal of foreign body  |
| 45333           | Sigmoidscopy                   | Sigmoidoscopy, flexible; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery   |
| 45334           | Sigmoidscopy                   | Sigmoidoscopy, flexible; with control of bleeding (e.g., injection, bipolar cautery, unipolar cautery, laser, heater probe, stapler, plasma coagulator)                                    |
| 45335           | Sigmoidscopy                   | Sigmoidoscopy, flexible; with directed submucosal injection(s), any substance  |
| 45337           | Sigmoidscopy                   | Sigmoidoscopy, flexible; with decompression of volvulus, any method  |
| 45338           | Sigmoidscopy                   | Sigmoidoscopy, flexible; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique   |
| 45340           | Sigmoidscopy                   | Sigmoidoscopy, flexible; with dilation by balloon, 1 or more strictures  |
| 45341           | Sigmoidscopy                   | Sigmoidoscopy, flexible; with endoscopic ultrasound examination  |
| 45342           | Sigmoidscopy                   | Sigmoidoscopy, flexible; with transendoscopic ultrasound guided intramural or transmural fine needle aspiration/biopsy(s)  |
| 45346           | Sigmoidscopy                   | Sigmoidoscopy, flexible; with ablation of tumor(s), polyp(s), or other lesion(s) (includes pre- and post-dilation and guide wire passage, when performed)                                  |
| 45378           | Colonoscopy                    | Colonoscopy, flexible, proximal to splenic flexure; diagnostic, with or without collection of specimen(s) by brushing or washing, with or without colon decompression (separate procedure) |
| 45379           | Colonoscopy                    | Colonoscopy, flexible, proximal to splenic flexure; with removal of foreign body   |
| 45380           | Colonoscopy                    | Colonoscopy, flexible, proximal to splenic flexure; with biopsy, single or multiple  |
| 45381           | Colonoscopy                    | Colonoscopy, flexible, proximal to splenic flexure; with directed submucosal injection(s), any substance   |
| 45382           | Colonoscopy                    | Colonoscopy, flexible, proximal to splenic flexure; with control of bleeding (e.g., injection, bipolar cautery, unipolar cautery, laser, heater probe, stapler, plasma coagulator)         |
| 45384           | Colonoscopy                    | Colonoscopy, flexible, proximal to splenic flexure; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery  |
| 45385           | Colonoscopy                    | Colonoscopy, flexible, proximal to splenic flexure; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique  |
| 45386           | Colonoscopy                    | Colonoscopy, flexible, proximal to splenic flexure; with dilation by balloon, 1 or more structures   |
| 45388           | Colonoscopy                    | Colonoscopy, flexible; with ablation of tumor(s), polyp(s), or other lesion(s) (includes pre- and post-dilation and guide wire passage, when performed)                                    |
| 45391           | Colonoscopy                    | Colonoscopy, flexible, proximal to splenic flexure; with endoscopic ultrasound examination   |
| 45392           | Colonoscopy                    | Colonoscopy, flexible, proximal to splenic flexure; with transendoscopic ultrasound guided intramural or transmural fine needle aspiration/biopsy(s)                                       |
| 46083           | Treatment of minor hemorrhoids | Incision of thrombosed hemorrhoid, external  |
| 46320           | Treatment of minor hemorrhoids | Incision of thrombosed hemorrhoid, external  |
| 71250           | Lung Cancer Screening          | Computed tomography, thorax; without contrast material   |
| 70360           | X-Ray - Neck                   | Radiologic examination; neck, soft tissue  |
| 71045           | X-Ray - Chest                  | Radiologic examination, chest; single view   |
| 71046           | X-Ray - Chest                  | Radiologic examination, chest; 2 views   |
| 71100           | X-Ray - Ribs                   | Radiologic examination, ribs; Unilateral; 2 views  |
| 71101           | X-Ray - Ribs                   | Radiologic examination, ribs; Unilateral; 2 views; including posteroanterior chest, minimum of 3 views   |
| 71110           | X-Ray - Ribs                   | Radiologic examination, ribs; Bilateral; 3 views   |
| 71111           | X-Ray - Ribs                   | Radiologic examination, ribs; Bilateral; 3 views; including posteroanterior chest, minimum of 4 views  |
| 72020           | X-Ray - Spine                  | Radiologic examination; spine, single view, specify level  |
| 72040           | X-Ray - Spine, Cervical        | Radiologic examination; spine, cervical; 2 or 3 views  |
| 72050           | X-Ray - Spine, Cervical        | Radiologic examination; spine, cervical; 4 or 5 views  |
| 72052           | X-Ray - Spine, Cervical        | Radiologic examination; spine, cervical; 6 or more views   |

CMSP Approved Procedure Codes with No Share of Cost

| <b>CPT Code</b> | <b>Procedure</b>                        | <b>CPT/HCPCS Code Description</b>  |
|-----------------|---|--|
| 72070           | X-Ray - Spine, Thoracic                 | Radiologic Examination, spine; thoracic, 2 views   |
| 72072           | X-Ray - Spine, Thoracic                 | Radiologic Examination, spine; thoracic, 3 views   |
| 72110           | X-Ray - Spine, Lumbosacral              | Radiologic Examination, spine, lumbosacral; minimum of 4 views   |
| 72114           | X-Ray - Spine, Lumbosacral              | Radiologic Examination, spine, lumbosacral; complete, including bending views, minimum of 6 views                                  |
| 72170           | X-Ray - Pelvis                          | Radiologic Examination, pelvis; 1 or 2 views   |
| 72190           | X-Ray - Pelvis                          | Radiologic Examination, pelvis; complete; minimum of 3 views   |
| 72220           | X-Ray - Sacrum and Coccyx               | Radiologic Examination, sacrum and coccyx, minimum of 2 views  |
| 73000           | X-Ray - Clavicle                        | Radiologic Examination, clavicle, complete   |
| 73010           | X-Ray - Scapula                         | Radiologic Examination, scapula, complete  |
| 73020           | X-Ray - Shoulder                        | Radiologic Examination, shoulder, 1 view   |
| 73030           | X-Ray - Shoulder                        | Radiologic Examination, shoulder, complete, 2 views  |
| 73060           | X-Ray - Humerus                         | Radiologic Examination, humerus, minimum of 2 views  |
| 73070           | X-Ray - Elbow                           | Radiologic Examination, elbow, 2 views   |
| 73080           | X-Ray - Elbow                           | Radiologic Examination, elbow, complete, minimum of 3 views  |
| 73090           | X-Ray - Forearm                         | Radiologic Examination, forearm, 2 views   |
| 73100           | X-Ray - Wrist                           | Radiologic Examination, wrist; 2 views   |
| 73110           | X-Ray - Wrist                           | Radiologic Examination, wrist; complete; minimum of 3 views  |
| 73120           | X-Ray - Hand                            | Radiologic Examination, hand; 2 views  |
| 73130           | X-Ray - Hand                            | Radiologic Examination, hand; minimum of 3 views   |
| 73140           | X-Ray - Fingers                         | Radiologic Examination, fingers; minimum of 2 views  |
| 73501           | X-Ray - Hip                             | Radiologic Examination, hip, unilateral, with pelvis when performed, 1 view  |
| 73502           | X-Ray - Hip                             | Radiologic Examination, hip, unilateral, with pelvis when performed, 2-3 views   |
| 73503           | X-Ray - Hip                             | Radiologic Examination, hip, unilateral, with pelvis when performed, minimum of 4 views  |
| 73521           | X-Ray - Hip                             | Radiologic Examination, hip, bilateral, with pelvis when performed, 2 views  |
| 73522           | X-Ray - Hip                             | Radiologic Examination, hip, bilateral, with pelvis when performed, 3-4 views  |
| 73523           | X-Ray - Hip                             | Radiologic Examination, hip, bilateral, with pelvis when performed, minimum of 5 views   |
| 73551           | X-Ray - Femur                           | Radiologic Examination, femur, 1 view  |
| 73552           | X-Ray - Femur                           | Radiologic Examination, femur, minimum of 2 views  |
| 73560           | X-Ray - Knee                            | Radiologic Examination, knee, 1 or 2 views   |
| 73562           | X-Ray - Knee                            | Radiologic Examination, knee, 3 views  |
| 73564           | X-Ray - Knee                            | Radiologic Examination, knee, 4 or more views  |
| 73565           | X-Ray - Knee                            | Radiologic Examination, both knees, anteroposterior  |
| 73590           | X-Ray - Tibia and Fibula                | Radiologic Examination, tibia and fibula, 2 views  |
| 73600           | X-Ray - Ankle                           | Radiologic Examination, ankle, 2 views   |
| 73610           | X-Ray - Ankle                           | Radiologic Examination, complete ankle, minimum of 3 views   |
| 73620           | X-Ray - Foot                            | Radiologic Examination, foot, 2 views  |
| 73630           | X-Ray - Foot                            | Radiologic Examination, complete foot, minimum of 3 views  |
| 73650           | X-Ray - Calcaneus                       | Radiologic Examination, calcaneus, minimum of 2 views  |
| 73660           | X-Ray - Toe(s)                          | Radiologic Examination, toe(s) minimum of 2 views  |
| 74018           | X-Ray - Abdomen                         | Radiologic Examination, abdomen; single view   |
| 74019           | X-Ray - Abdomen                         | Radiologic Examination, abdomen; 2 views   |
| 74021           | X-Ray - Abdomen                         | Radiologic Examination, abdomen; 3 or more views   |
| 74022           | X-Ray - Abdomen                         | Radiologic Examination, abdomen; complete acute abdomen series, including supine, erect, and/or decubitus views, single view chest |
| 74263           | Colorectal Cancer                       | Computed tomographic (CT) colonography, screening, including image postprocessing  |
| 76536           | Ultrasound, Head and Neck               | Ultrasound, Soft tissues of head and neck (E.g., thyroid, parathyroid, parotid), real time with image documentation                |
| 76604           | Ultrasound, Chest                       | Ultrasound, chest (includes mediastinum), real time with image documentation   |
| 76642           | Ultrasound, Chest                       | Limited, only once per breast, per session   |
| 76700           | Ultrasound, Abdomen and Retroperitoneum | Ultrasound, abdominal, real time with image documentation; complete  |
| 76705           | Ultrasound, Abdomen and Retroperitoneum | Limited (e.g., single organ, quadrant, follow-up)  |
| 76770           | Ultrasound, Abdomen and Retroperitoneum | Ultrasound, retroperitoneal (e.g., renal, aorta, nodes), real time with image documentation; complete                              |
| 76775           | Ultrasound, Abdomen and Retroperitoneum | Limited  |
| 76800           | Ultrasound, Spinal Canal                | Ultrasound, spinal canal and contents  |
| 76830           | Ultrasound, nonobstetrical              | Ultrasound, transvaginal   |
| 76831           | Ultrasound, nonobstetrical              | Saline infusion sonohysterography(SIS), including color flow Doppler, when performed   |
| 76856           | Ultrasound, nonobstetrical              | Ultrasound, pelvic (nonobstetric), real time with image documentation; complete  |

CMSP Approved Procedure Codes with No Share of Cost

| <b>CPT Code</b> | <b>Procedure</b>   | <b>CPT/HCPCS Code Description</b>  |
|-----------------|--|--|
| 76857           | Ultrasound, nonobstetrical   | limited or follow up (eg, for follicles)   |
| 76870           | Ultrasound, Genitalia  | Ultrasound, scrotum and contents   |
| 76872           | Ultrasound, Genitalia  | Ultrasound, transrectal  |
| 76873           | Ultrasound, Genitalia  | prostate volume study for brachytherapy treatment planning (separate procedure)  |
| 76881           | Ultrasound, Extremities; complete  | Ultrasound, extremity, nonvascular, real-time with image documentation; complete   |
| 76882           | Ultrasound, Extremities; Limited   | Ultrasound, extremity, nonvascular, real-time with image documentation; Limited, anatomic specific   |
| 77078           | DXA Scan Osteoporosis  | Computed tomography, bone mineral density study, 1 or more sites; axial skeleton (e.g., hips, pelvis, spine)   |
| 77080           | DXA Scan Osteoporosis  | Dual-energy X-ray absorptiometry (DXA), bone density study, 1 or more sites; axial skeleton (e.g., hips, pelvis, spine)  |
| 77081           | DXA Scan Osteoporosis  | Dual-energy X-ray absorptiometry (DXA), bone density study, 1 or more sites; appendicular skeleton (peripheral) (e.g., radius, wrist, heel)                            |
| 77085           | DXA Scan Osteoporosis  | Dual-energy X-ray absorptiometry (DXA), bone density study, 1 or more sites; axial skeleton (e.g., hips, pelvis, spine), including vertebral fracture assessment       |
| 77086           | DXA Scan Osteoporosis  | Vertebral fracture assessment via dual-energy X-ray absorptiometry (DXA)   |
| 80061           | Lipid Disorders in Adults  | Lipid panel  |
| 82270           | Occult Blood - Colorectal Cancer Screening                               | Blood, occult, by peroxidase activity (e.g., guaiac), qualitative; feces, consecutive collected specimens with single determination, for colorectal neoplasm screening |
| 82274           | Fecal Hemoglobin - Colorectal Cancer Screening                           | Blood, occult, by fecal hemoglobin determination by immunoassay, qualitative, feces, 1-3 simultaneous determinations   |
| 82465           | Lipid Disorders in Adults  | Cholesterol, serum or whole blood, total   |
| 82947           | Type 2 Diabetes Mellitus   | Glucose; quantitative, blood (except reagent strip)  |
| 82948           | Type 2 Diabetes Mellitus   | Glucose; blood, reagent strip  |
| 83036           | Hemoglobin; Glycosylated (A1C)   | High performance liquid chromatography and ion exchange chromatography.  |
| 83718           | Lipid Disorders in Adults  | Lipoprotein, direct measurement; high density cholesterol (HDL cholesterol)  |
| 83719           | Lipid Disorders in Adults  | Lipoprotein, direct measurement; VLDL cholesterol  |
| 83721           | Lipid Disorders in Adults  | Lipoprotein, direct measurement; LDL cholesterol   |
| 84478           | Lipid Disorders in Adults  | Triglycerides  |
| 86592           | Syphilis - Sexually Transmitted Infections (STI) Screening               | Syphilis test, non-treponemal antibody; qualitative  |
| 86592           | Syphilis - Sexually Transmitted Infections (STI) Screening               | Syphilis test, non-treponemal antibody; qualitative (e.g., VDRL, RPR, ART)   |
| 86593           | Syphilis - Sexually Transmitted Infections (STI) Screening               | Syphilis test, quantitative e.g., VDRL, RPR  |
| 86631           | Chlamydia - Sexually Transmitted Infections (STI) Screening              | Chlamydia antibody   |
| 86632           | Chlamydia - Sexually Transmitted Infections (STI) Screening              | Chlamydia IGM  |
| 86689           | HIV Antibody Screening - Sexually Transmitted Infections (STI) Screening | Antibody; HTLV or HIV antibody, confirmatory test (e.g., Western Blot)   |
| 86701           | HIV-1 Screening  | Antibody; HIV-1  |
| 86702           | HIV -2 Screening   | Antibody; HIV-2  |
| 86703           | HIV -1 and HIV -2 Screening  | Antibody; HIV-1 and HIV-2, single assay  |
| 86704           | Hepatitis B Virus Screening  | Hepatitis B core antibody (HBcAb); total   |
| 86706           | Hepatitis B Virus Screening  | Hepatitis B surface antibody (HBsAb)   |
| 86707           | Hepatitis B Virus Screening  | Hepatitis Be antibody (HBeAb)  |
| 86803           | Hepatitis C Virus Screening  | Hepatitis C antibody   |
| 87110           | Chlamydia and Gonorrhea  | Culture, chlamydia, any source   |
| 87270           | Chlamydia and Gonorrhea  | Infectious agent antigen detection by immunofluorescent technique  |
| 87320           | Chlamydia and Gonorrhea  | Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semiquantitative, multiple-step method  |
| 87340           | Hepatitis B Virus Screening  | Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semiquantitative, multiple-step method; hepatitis B surface antigen (HBsAg)         |
| 87390           | HIV Screening  | Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semiquantitative, multiple-step method; HIV-1                                       |
| 87391           | HIV Screening  | Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semiquantitative, multiple-step method; HIV-2                                       |
| 87491           | Chlamydia and Gonorrhea  | Infectious agent detection by nucleic acid (DNA or RNA); amplified probe technique   |
| 87492           | Chlamydia and Gonorrhea  | Infectious agent detection by nucleic acid (DNA or RNA); quantification  |
| 87590           | Chlamydia and Gonorrhea  | Infectious agent detection by nucleic acid (DNA or RNA); Neisseria gonorrhoeae, direct probe technique   |
| 87591           | Chlamydia and Gonorrhea  | Infectious agent detection by nucleic acid (DNA or RNA); Neisseria gonorrhoeae, amplified probe technique  |
| 87592           | Chlamydia and Gonorrhea  | Neisseria gonorrhoea, quantification   |
| 87623           | HPV DNA Testing for Women ages 30 or older                               | Infectious agent detection by nucleic acid (DNA or RNA); papillomavirus, human, quantification   |
| 87801           | Chlamydia and Gonorrhea  | Infectious agent detection by DNA or RNA, direct probe technique   |
| 87810           | Chlamydia and Gonorrhea  | Chlamydia antigen detection by immunoassay with direct optical observation   |

CMSP Approved Procedure Codes with No Share of Cost

| <b>CPT Code</b> | <b>Procedure</b>  | <b>CPT/HCPCS Code Description</b>   |
|-----------------|---|---|
| 87850           | Chlamydia and Gonorrhea   | Infectious agent antigen detection by immunoassay with direct optical observation; Neisseria gonorrhoeae  |
| 90471           | Adult Immunizations - Administration                                | Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); 1 vaccine (single or combination vaccine/toxoid)   |
| 90472           | Adult Immunizations - Administration                                | Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); each additional vaccine (single or combination vaccine/toxoid) (List separately in addition to code for primary procedure) |
| 90473           | Adult Immunizations - Administration                                | Immunization administration by intranasal or oral route; 1 vaccine (single or combination vaccine/toxoid)   |
| 90474           | Adult Immunizations - Administration                                | Immunization administration by intranasal or oral route; each additional vaccine (single or combination vaccine/toxoid) (List separately in addition to code for primary procedure)   |
| 90581           | Adult Immunizations - Anthrax                                       | Anthrax vaccine, for subcutaneous or intramuscular  |
| 90585           | Adult Immunizations - BCG   | Bacillus Calmette-Guerin vaccine (BCG) for tuberculosis, live, for percutaneous use   |
| 90586           | Adult Immunizations - BCG   | Bacillus Calmette-Guerin vaccine (BCG) for bladder cancer, live, for intravesical use   |
| 90620           | Adult Immunizations - Meningococcal                                 | Meningococcal recombinant protein and outer membrane vesicle vaccine, serogroup B, 2 dose schedule, for intramuscular   |
| 90621           | Adult Immunizations - Meningococcal                                 | Meningococcal recombinant lipoprotein vaccine, serogroup B, 3 dose schedule, for intramuscular use  |
| 90630           | Adult Immunizations - Influenza                                     | Influenza virus vaccine, quadrivalent (IIV4), split virus, preservative free, for intradermal use   |
| 90632           | Adult Immunizations - Hepatitis A                                   | Hepatitis A vaccine, adult dosage, for intramuscular use  |
| 90636           | Adult Immunizations - Hepatitis A & B                               | Hepatitis A and hepatitis B vaccine (HepA-HepB), adult dosage, for intramuscular use  |
| 90649           | Adult Immunizations - HPV: ages 9-26                                | Human Papilloma virus (HPV) vaccine, types 6, 11, 16, 18 (quadrivalent), 3 dose schedule, for intramuscular use   |
| 90650           | Adult Immunizations - HPV: ages 9-26                                | Human Papilloma virus (HPV) vaccine, types 16, 18, bivalent, 3 dose schedule, for intramuscular use   |
| 90651           | Adult Immunizations - HPV: ages 9-26                                | Human Papillomavirus vaccine types 6, 11, 16, 18, 31, 33, 45, 52, 58, nonavalent (HPV), 3 dose schedule, for intramuscular use  |
| 90653           | Adult Immunizations - Influenza                                     | Influenza vaccine, inactivated, subunit, adjuvanted, for intramuscular use  |
| 90654           | Adult Immunizations - Influenza                                     | Influenza virus vaccine, split virus, preservative-free, for intradermal use  |
| 90655           | Adult Immunizations - Influenza                                     | Influenza virus vaccine, split virus, preservative-free, 0.25 mL dosage, for intramuscular use  |
| 90656           | Adult Immunizations - Influenza                                     | Influenza virus vaccine, split virus, preservative-free, when administered to individuals 3 years and older, for intramuscular use  |
| 90658           | Adult Immunizations - Influenza                                     | Influenza virus vaccine, split virus, when administered to individuals 3 years of age and older, for intramuscular use  |
| 90660           | Adult Immunizations - Influenza                                     | Influenza virus vaccine, live, for intranasal use   |
| 90661           | Adult Immunizations - Influenza                                     | Influenza virus vaccine, derived from cell cultures, subunit, preservative and antibiotic free, for intramuscular use   |
| 90662           | Adult Immunizations - Influenza                                     | Influenza virus vaccine, split virus, preservative free, enhanced immunogenicity via increased antigen content, for intramuscular use   |
| 90670           | Adult Immunizations - Pneumococcal (polysaccharide)                 | Pneumococcal conjugate vaccine, 13 valent, for intramuscular use  |
| 90672           | Adult Immunizations - Influenza                                     | Influenza virus vaccine, quadrivalent, live, for intranasal use   |
| 90673           | Adult Immunizations - Influenza                                     | Influenza virus vaccine, trivalent, derived from recombinant DNA (RIV3), hemagglutinin (HA) protein only, preservative and antibiotic free, for intramuscular use   |
| 90675           | Adult Immunizations - Rabies  | Rabies vaccine, for intramuscular use   |
| 90676           | Adult Immunizations - Rabies  | Rabies vaccine, for intradermal use   |
| 90686           | Adult Immunizations - Influenza                                     | Influenza virus vaccine, quadrivalent, split virus, preservative free, when administered to individuals 3 years of age and older, for intramuscular use   |
| 90688           | Adult Immunizations - Influenza                                     | Influenza virus vaccine, quadrivalent, split virus, when administered to individuals 3 years of age and older, for intramuscular use  |
| 90690           | Adult Immunizations - Typhoid                                       | Typhoid vaccine, live, oral   |
| 90691           | Adult Immunizations - Typhoid                                       | Typhoid vaccine, Vi capsular polysaccharide (ViCPs), for intramuscular use  |
| 90697           | Adult Immunizations - DTP   | Diphtheria, tetanus toxoids, acellular pertussis vaccine, inactivated poliovirus vaccine, Haemophilus influenza type b PRP-OMP conjugate vaccine, and hepatitis B vaccine (DTaP-IPV-Hib-HepB), for intramuscular use                    |
| 90698           | Adult Immunizations - DTP   | Diphtheria, tetanus toxoids, and acellular pertussis vaccine, Haemophilus influenza Type B, and poliovirus vaccine, inactivated (DTaP-Hib-IPV), for intramuscular use   |
| 90707           | Adult Immunizations - MMR (Measles, Mumps, Rubella)                 | Measles, mumps and rubella virus vaccine (MMR), live, for subcutaneous use  |
| 90710           | Adult Immunizations - MMRV (Measles, mumps, rubella, and varicella) | Measles, mumps, rubella, and varicella vaccine (MMRV), live, for subcutaneous use   |
| 90714           | Adult Immunizations - DTP   | Tetanus and diphtheria toxoids (Td) adsorbed, preservative free, when administered to individuals 7 years or older, for intramuscular use   |
| 90715           | Adult Immunizations - DTP   | Tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap), when administered to individuals 7 years or older, for intramuscular use  |
| 90716           | Adult Immunizations - Varicella                                     | Varicella virus vaccine, live, for subcutaneous use   |
| 90717           | Adult Immunizations - Yellow Fever                                  | Yellow fever vaccine, live, for subcutaneous use  |

CMSP Approved Procedure Codes with No Share of Cost

| <b>CPT Code</b> | <b>Procedure</b>  | <b>CPT/HCPCS Code Description</b>  |
|-----------------|---|--|
| 90721           | Adult Immunizations - DTP   | Diphtheria, tetanus toxoids, and acellular pertussis vaccine and Haemophilus influenza B vaccine (DtaP-Hib), for intramuscular use   |
| 90723           | Adult Immunizations - DTP   | Diphtheria, tetanus toxoids, acellular pertussis vaccine, Hepatitis B, and poliovirus vaccine, inactivated (DTaP-HepB-IPV), for intramuscular use  |
| 90732           | Adult Immunizations - Pneumococcal (polysaccharide)                         | Pneumococcal polysaccharide vaccine, 23-valent, adult or immunosuppressed patient dosage, when administered to individuals 2 years or older, for subcutaneous or intramuscular use   |
| 90733           | Adult Immunizations - Meningococcal   | Meningococcal polysaccharide vaccine (any group(s)), for subcutaneous use  |
| 90734           | Adult Immunizations - Meningococcal   | Meningococcal conjugate vaccine, serogroups A, C, Y and W-135 (tetraivalent), for intramuscular use  |
| 90736           | Adult Immunizations - Zoster  | Zoster (shingles) vaccine, live, for subcutaneous injection  |
| 90738           | Adult Immunizations - Japanese Encephalitis                                 | Japanese encephalitis virus vaccine, inactivated, for intramuscular use  |
| 90739           | Adult Immunizations - Hepatitis B   | Hepatitis B vaccine, adult dosage (2 dose schedule), for intramuscular use   |
| 90740           | Adult Immunizations - Hepatitis B   | Hepatitis B vaccine, dialysis or immunosuppressed patient dosage (3 does schedule), for intramuscular use  |
| 90746           | Adult Immunizations - Hepatitis B   | Hepatitis B vaccine, adult dosage, for intramuscular use   |
| 90747           | Adult Immunizations - Hepatitis B   | Hepatitis B vaccine, dialysis or immunosuppressed patient dosage (4 dose schedule), for intramuscular use  |
| 90748           | Adult Immunizations - Hepatitis B   | Hepatitis B and Haemophilus influenza b vaccine (Hep- B-Hib), for intramuscular use  |
| 93000           | Electrocardiogram (EKG)   | Electrocardiogram, Routine ECG with at least 12 leads; with interpretation and report  |
| 93005           | Electrocardiogram (EKG); Tracing only & no interpretation/report            | Electrocardiogram, Routine ECG with at least 12 leads; with interpretation and report; Tracing only, without interpretation and report   |
| 93010           | Electrocardiogram(EKG); Interpretation/report                               | Interpretation and report only   |
| 93040           | Electrocardiogram(EKG); Rhythm ECG  | Rhythm ECG, 1-3 leads; with interpretation and report  |
| 93041           | Electrocardiogram(EKG); Rhythm ECG; Tracing only & no interpretation/report | Tracing only, without interpretation and report  |
| 93042           | Electrocardiogram(EKG); Rhythm ECG; interpretation/report                   | Interpretation and report only   |
| 96127           | Depression Screening  | Brief emotional/behavioral assessment (for example, depression inventory, attention-deficit/hyperactivity disorder [ADHD] scale), with scoring and documentation, per standardized instrument  |
| 96160           | Health Risk Assessment  | Administration of patient-focused health risk assessment instrument (e.g., health hazard appraisal) with scoring and documentation, per standardized instrument.   |
| 96161           | Health Risk Assessment  | Administration of caregiver-focused health risk assessment instrument (e.g., depression inventory) for the benefit of the patient, with scoring and documentation, per standardized instrument.  |
| 99000           | Lab handling of specimens   | Handling and preparation specimens if sending to an outside lab or state lab   |
| 99078           | Tobacco Use Counseling and intervention                                     | Physician educational services rendered to patients in a group setting (e.g., prenatal, obesity, or diabetic instructions)   |
| 99201           | Office Visit - New Patient Level 1  | Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: a problem focused history; a problem focused examination; straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Typically, 10 min are spent face-to-face with the patient and/or family.                                |
| 99202           | Office Visit - New Patient Level 2  | Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: an expanded problem focused history; an expanded problem focused examination; straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Typically, 20 minutes are spent face-to-face with the patient and/or family.  |
| 99203           | Office Visit - New Patient Level 3  | Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: an expanded problem focused history; an expanded problem focused examination; straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Typically, 20 minutes are spent face-to-face with the patient and/or family.  |
| 99204           | Office Visit - New Patient Level 4  | Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: an expanded problem focused history; an expanded problem focused examination; straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 45 minutes are spent face-to-face with the patient and/or family. |

CMSP Approved Procedure Codes with No Share of Cost

| <b>CPT Code</b> | <b>Procedure</b>                           | <b>CPT/HCPCS Code Description</b>   |
|-----------------|--|---|
| 99205           | Office Visit - New Patient Level 5         | Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: an expanded problem focused history; an expanded problem focused examination; straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 60 minutes are spent face-to-face with the patient and/or family.                      |
| 99211           | Office Visit - Established Patient Level 1 | 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 qualified health care professional. Usually, the presenting problem(s) are minimal. Typically, 5 minutes are spent performing or supervising these services.  |
| 99212           | Office Visit - Established Patient Level 2 | Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: a problem focused history; a problem focused examination; straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Typically, 10 minutes are spent face-to-face with the patient and/or family.                          |
| 99213           | Office Visit - Established Patient Level 3 | Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: an expanded problem focused history; an expanded problem focused examination; medical decision making of low complexity. Counseling and coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Typically, 15 minutes are spent face-to-face with the patient and/or family. |
| 99214           | Office Visit - Established Patient Level 4 | Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: a detailed history; a detailed examination; medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 25 minutes are spent face-to-face with the patient and/or family.                          |
| 99215           | Office Visit - Established Patient Level 5 | Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: a comprehensive history; a comprehensive examination; medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 40 minutes are spent face-to-face with the patient and/or family.                    |
| 99241           | Office Consultation - Level 1              | Office consultation for a new or established patient, which requires these 3 key components: a problem focused history; a problem focused examination; and straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Typically, 15 minutes are spent face-to-face with the patient and/or family.  |
| 99242           | Office Consultation - Level 2              | Office consultation for a new or established patient, which requires these 3 key components: an expanded problem focused history; an expanded problem focused examination; and straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low severity. Typically, 30 minutes are spent face-to-face with the patient and/or family.  |
| 99243           | Office Consultation - Level 3              | Office consultation for a new or established patient, which requires these 3 key components: a detailed history; a detailed examination; and medical decision making of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Typically, 40 minutes are spent face-to-face with the patient and/or family.   |
| 99244           | Office Consultation - Level 4              | Office consultation for a new or established patient, which requires these 3 key components: a comprehensive history; a comprehensive examination; and medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 60 minutes are spent face-to-face with the patient and/or family.  |
| 99245           | Office Consultation - Level 5              | Office consultation for a new or established patient, which requires these 3 key components: a comprehensive history; a comprehensive examination; and medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 80 minutes are spent face-to-face with the patient and/or family.  |

CMSP Approved Procedure Codes with No Share of Cost

| <b>CPT Code</b> | <b>Procedure</b>   | <b>CPT/HCPCS Code Description</b>  |
|-----------------|--|--|
| 99385           | Preventative Office Visit - Comprehensive Initial 18-39 years                  | Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; 18-39 years            |
| 99386           | Preventative Office Visit - Comprehensive Initial 40-64 years                  | Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; 40-64 years            |
| 99395           | Preventative Office Visit - Reevaluation 18-39 years                           | Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; 18-39 years |
| 99396           | Preventative Office Visit - Reevaluation 40-64 years                           | Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; 40-64 years |
| 99401           | Preventative Medicine Counseling 15 minutes - Obesity or other                 | Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 15 minutes   |
| 99401           | Preventative Medicine Counseling 15 minutes - STI Behavioral                   | Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 15 minutes   |
| 99402           | Preventative Medicine Counseling 30 minutes - Obesity or other                 | Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 30 minutes   |
| 99402           | Preventative Medicine Counseling 30 minutes - STI Behavioral                   | Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 30 minutes   |
| 99403           | Preventative Medicine Counseling 45 minutes - Obesity or other                 | Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 45 minutes   |
| 99403           | Preventative Medicine Counseling 45 minutes - STI Behavioral                   | Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 45 minutes   |
| 99404           | Preventative Medicine Counseling 60 minutes - Obesity or other                 | Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 60 minutes   |
| 99404           | Preventative Medicine Counseling 60 minutes - STI Behavioral                   | Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 60 minutes   |
| 99406           | Tobacco Use Counseling and intervention 3-10 minutes                           | Smoking and tobacco use cessation counseling visit; intermediate, greater than 3 minutes up to 10 minutes  |
| 99407           | Tobacco Use Counseling and intervention greater than 10 minutes                | Smoking and tobacco use cessation counseling visit; intensive, greater than 10 minutes   |
| 99408           | Alcohol Misuse: Screening and Behavioral Counseling for Adults 15 - 30 minutes | Alcohol and/or substance (other than tobacco) abuse structured screening (e.g., AUDIT, DAST), and brief intervention (SBI) services; 15 to 30 minutes  |
| 99409           | Alcohol Misuse: Screening and Behavioral Counseling for Adults > 30 minutes    | Alcohol and/or substance (other than tobacco) abuse structured screening (e.g., AUDIT, DAST), and brief intervention (SBI) services; greater than 30 minutes   |
| G0104           | Colonoscopy - Colorectal Cancer  | Colorectal cancer screening; flexible sigmoidoscopy  |
| G0105           | Colonoscopy - Colorectal Cancer  | Colorectal cancer screening; colonoscopy on individual at high risk  |
| G0106           | Colonoscopy - Colorectal Cancer  | Colorectal cancer screening; alternative to G0104, screening sigmoidoscopy, barium enema   |
| G0120           | Colonoscopy - Colorectal Cancer  | Colorectal cancer screening; alternative to G0105, screening colonoscopy, barium enema   |
| G0121           | Colonoscopy - Colorectal Cancer  | Colorectal cancer screening; colonoscopy on individual not meeting criteria for high risk  |
| G0122           | Barium Enema Colorectal Cancer   | Colorectal cancer screening; barium enema  |
| G0297           | Low dose CT scan (LDCT) for lung cancer screening                              | Low-dose computed tomography for lung cancer screening   |
| G0328           | Fecal occult blood test immunoassay - colorectal cancer screening              | Colorectal cancer screening; fecal occult blood test, immunoassay, 1-3 simultaneous determinations   |
| G0442           | Alcohol Misuse: Screening and Behavioral Counseling for Adults                 | Annual alcohol misuse screening, 15 minutes  |
| G0443           | Alcohol Misuse: Screening and Behavioral Counseling for Adults                 | Brief face-to-face behavioral counseling for alcohol misuse, 15 minutes  |
| G0444           | Depression Screening   | Annual depression screening, 15 minutes  |
| G0445           | Sexually Transmitted Infections: Behavioral Counseling                         | High intensity behavioral counseling to prevent sexually transmitted infection; face-to-face, individual, performed semi-annually, 30 minutes  |
| G0446           | Healthy Diet Counseling  | Intensive behavioral therapy to reduce cardiovascular disease risk, individual, face-to-face, annual, 15 minutes   |
| G0447           | Obesity Counseling   | Face-to-face behavioral counseling for obesity, 15 minutes   |
| G0472           | Hepatitis C Virus Screening  | Hepatitis C antibody screening for individual at high risk and other covered indication(s)   |
| G0473           | Obesity Counseling   | Face-to-face behavioral counseling for obesity, group (2-10), 30 minutes   |
| Q2035           | Immunizations Adult Influenza  | Influenza virus vaccine, split virus, when administered to individuals 3 years of age and older, for intramuscular use (AFLURIA)   |
| Q2036           | Immunizations Adult Influenza  | Influenza virus vaccine, split virus, when administered to individuals 3 years of age and older, for intramuscular use (FLULAVAL)  |



CMSP Approved Procedure Codes with No Share of Cost

| <b>CPT Code</b> | <b>Procedure</b>  | <b>CPT/HCPCS Code Description</b>  |
|-----------------|---|--|
| Q2037           | Immunizations Adult Influenza                                       | Influenza virus vaccine, split virus, when administered to individuals 3 years of age and older, for intramuscular use (FLUVIRIN)                |
| Q2038           | Immunizations Adult Influenza                                       | Influenza virus vaccine, split virus, when administered to individuals 3 years of age and older, for intramuscular use (Fluzone)                 |
| Q2039           | Immunizations Adult Influenza                                       | Influenza virus vaccine, split virus, when administered to individuals 3 years of age and older, for intramuscular use (not otherwise specified) |
| S8092           | CT - electron beam for lung cancer screening                        | Electron beam computed tomography (also known as Ultrafast CT, Cine CT)  |
| S9453           | Tobacco Use Counseling and intervention - smoking cessation classes | Smoking cessation classes, non-physician provider, per session   |
| X3900           | Physical Therapy - Rehabilitation Services                          | Single modality to one area - initial 30 minutes   |
| X3902           | Physical Therapy - Rehabilitation Services                          | Single modality to one area - each additional 15 minutes   |
| X3904           | Physical Therapy - Rehabilitation Services                          | Single procedure to one area - initial 30 minutes  |
| X3906           | Physical Therapy - Rehabilitation Services                          | Single procedure to one area - each additional 15 minutes  |
| X3908           | Physical Therapy - Rehabilitation Services                          | Treatment including a combination of any modalities and procedures (one or more areas) - initial 30 minutes                                      |
| X3910           | Physical Therapy - Rehabilitation Services                          | Treatment including a combination of any modalities and procedures (one or more areas) - each additional 15 minutes                              |
| X3912           | Physical Therapy - Rehabilitation Services                          | Hubbard Tank - initial 30 minutes  |
| X3914           | Physical Therapy - Rehabilitation Services                          | Hubbard Tank - each additional 15 minutes  |
| X3916           | Physical Therapy - Rehabilitation Services                          | Hubbard Tank or pool therapy with therapeutic exercise - initial 30 minutes  |
| X3918           | Physical Therapy - Rehabilitation Services                          | Hubbard Tank or pool therapy with therapeutic exercise - each additional 15 minutes  |
| X3920           | Physical Therapy - Rehabilitation Services                          | Any of the tests and measurements - initial 30 minutes, plus report  |
| X3922           | Physical Therapy - Rehabilitation Services                          | Any of the tests and measurements - each additional 15 minutes, plus report  |
| X3924           | Physical Therapy - Rehabilitation Services                          | Physical Therapy Preliminary Evaluation rehabilitation center, SNF, ICF  |