

Independent Health's Preventive Services – 2016

All codes appearing in this document may not be eligible for reimbursement to all physicians or providers due to individual procedure privileging requirements, reimbursement or medical management policy established by Independent Health or as determined by the member's individual contract benefit language.

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION
Abdominal Aortic Aneurysm Screening	G0389	Ultrasound B-scan and/or real time with image documentation; for abdominal aortic aneurysm (AAA) screening
Alcohol Misuse Screening and Behavioral Counseling Intervention	99408	Alcohol and/or substance (other than tobacco) abuse structured screening and brief intervention services; 15 to 30 minutes
	99409	Alcohol and/or substance (other than tobacco) abuse structured screening and brief intervention services; greater than 30 minutes
	G0396	Alcohol and/or substance (other than tobacco) abuse structured assessment and brief intervention; 15 to 30 minutes
	G0397	Alcohol and/or substance (other than tobacco) abuse structured assessment and intervention; greater than 30 minutes
	G0442	Annual alcohol misuse screening; 15 minutes
	G0443	Brief face-to-face behavioral counseling for alcohol misuse; 15 minutes
	H0049	Alcohol and/or drug screening
	H0050	Alcohol and/or drug services, brief intervention; per 15 minutes
Aspirin Therapy Discussion for Prevention of Cardiovascular Disease	N/A	
Aspirin Therapy for Prevention of Cardiovascular Disease	N/A	
Asymptomatic Bacteriuria Screening in Pregnant Women	81007	Urinalysis; bacteriuria screening; except by culture or dipstick
Bone Density (Osteoporosis Screening)	76977	Ultrasound bone density measurement and interpretation; peripheral site(s), any method
	77078	Computed tomography; bone mineral density study; one or more sites; axial skeleton (e.g., hips, pelvis, spine)
	77080	Dual-energy X-ray absorptiometry (DXA); bone density study; one or more sites; axial skeleton (e.g., hips, pelvis, spine)
	77081	Dual-energy X-ray absorptiometry (DXA); bone density study; one or more sites; appendicular skeleton (peripheral) (e.g., radius, wrist, heel)
	77082	Dual-energy X-ray absorptiometry (DXA); bone density study; vertebral fracture assessment
	77085	Dual-energy X-ray absorptiometry (DXA); bone density study; one or more sites; axial skeleton, including vertebral fracture assessment
	78350	Bone mineral density (bone mineral content) study; one or more sites; single photon absorptiometry
	78351	Bone mineral density (bone mineral content) study; one or more sites; dual photon absorptiometry
	G0130	Single-energy X-ray absorptiometry (SEXA); bone density study; one or more sites; appendicular skeleton (peripheral) (e.g., radius, wrist, heel)
Breast and Ovarian Cancer Susceptibility Counseling	N/A	

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION
Breast and Ovarian Cancer Susceptibility Genetic Testing*		
*Please note: BRCA mutation screening requires prior authorization to review for medical necessity based on product. Reference the following policy for additional information: Breast Cancer Susceptibility 1 and 2 (BRCA 1/2) Sequence Testing for Susceptibility to Hereditary Breast Cancer and BRACA Analysis® Rearrangement Test (BART test)	81162	BRCA1, BRCA2 (breast cancer 1 and 2) (e.g., hereditary breast and ovarian cancer); gene analysis, full sequence analysis and full duplication/deletion
	81211	BRCA1, BRCA2; breast and ovarian cancer; gene analysis, full sequence analysis and common duplication; deletion in BRCA 1
	81212	BRCA1, BRCA2; breast and ovarian cancer; gene analysis, full sequence analysis and common duplication; 185delAG, 538incC and 6174delT variants
	81213	BRCA1, BRCA2; breast and ovarian cancer; gene analysis
	81214	BRCA gene analysis, full sequence analysis and common duplication
	81215	BRCA gene analysis, full sequence analysis and common duplication; unknown familial variant
	81216	BRCA2 gene analysis, full sequence analysis
	81217	BRCA2 gene analysis, full sequence analysis, known familial variant
Breast Cancer Preventive Medications	Will be billed with NDC to pharmacy (script required) but paid as a medical benefit	
Breast Cancer Screening (Mammography)	77051	Computer-aided detection (computer algorithm analysis of digital image data for lesion detection) with further physician review for interpretation, with or without digitization of film radiographic images; diagnostic mammography (list separately in addition to code for primary procedure)
	77052	Computer-aided detection (computer algorithm analysis of digital image data for lesion detection) with further physician review for interpretation, with or without digitization of film radiographic images; screening mammography (list separately in addition to code for primary procedure)
	77055	Mammography; unilateral
	77056	Mammography; bilateral
	77057	Screening mammography; bilateral (2-view film study of each breast)
	G0202	Screening mammography; producing direct digital image; bilateral; all views
	G0204	Diagnostic mammography; producing direct digital image; bilateral; all views
	G0206	Diagnostic mammography; producing direct digital image; unilateral; all views
	G0279	Diagnostic digital breast tomosynthesis; unilateral/bilateral
Breast Feeding, Primary Care Interventions to Promote	N/A	
Breastfeeding Supplies	A4281	Tubing for breast pump, replacement
	A4282	Adapter for breast pump, replacement
	A4283	Cap for breast pump bottle, replacement
	A4284	Breast shield and splash protector for use with breast pump, replacement
	A4285	Polycarbonate bottle for use with breast pump, replacement
	A4286	Locking ring for breast pump, replacement
	E0602	Breast pump, manual, any type
	E0603	Breast pump, electric (AC and/or DC), any type
	E0604	Breast pump, hospital grade, electric (AC and/or DC), any type
Breastfeeding Support and Counseling	S9443	Lactation classes, non-physician provider, per session
Bright Futures	96110	Developmental screening
	96127	Emotional behavioral assessment
Cervical Cancer Screening (Pap Smear)	88141	Cytopathology, cervical or vaginal (any reporting system); requiring interpretation by physician
	88142	Cytopathology, cervical or vaginal (any reporting system); collected in preservative fluid; automated thin layer preparation; manual screening under physician supervision
	88143	Cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation; manual screening and rescreening under physician supervision
	88147	Cytopathology smears, cervical or vaginal; screening by automated system under physician supervision

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION
	88148	Cytopathology smears, cervical or vaginal; screening by automated system with manual rescreening under physician supervision
	88150	Cytopathology, slides, cervical or vaginal; manual screening under physician supervision
	88152	Cytopathology, slides, cervical or vaginal; with manual screening and computer-assisted rescreening under physician supervision
	88153	Cytopathology, slides, cervical or vaginal; with manual screening and rescreening under physician supervision
	88154	Cytopathology, slides, cervical or vaginal; with manual screening and computer-assisted rescreening using cell selection and review under physician supervision
	88155	Cytopathology, slides, cervical or vaginal; definitive hormone evaluation (e.g., maturation index, karyopyknotic index, estrogenic index) (list separately in addition to code[s] for other technical and interpretation services)
	88164	Cytopathology, slides, cervical or vaginal (the Bethesda System); with manual screening under physician supervision
	88165	Cytopathology, slides, cervical or vaginal (the Bethesda System); with manual screening and rescreening under physician supervision
	88166	Cytopathology, slides, cervical or vaginal (the Bethesda System); with manual screening and computer-assisted rescreening under physician supervision
	88167	Cytopathology, slides, cervical or vaginal (the Bethesda System); with manual screening and computer-assisted rescreening using cell selection and review under physician supervision
	88174	Cytopathology, slides, cervical or vaginal (any reporting system); collected in preservative fluid, automated thin layer preparation; screening by automated system, under physician supervision
	88175	Cytopathology, cervical or vaginal (any reporting system); collected in preservative fluid, automated thin layer preparation; with screening by automated system and manual rescreening or review under physician supervision
	G0101	Cervical or vaginal cancer screening; pelvic and clinical breast examination
	G0123	Screening cytopathology, cervical or vaginal (any reporting system); collected in preservative fluid, automated thin layer preparation; screening by cytotechnologist under physician supervision
	G0124	Screening cytopathology, cervical or vaginal (any reporting system); collected in preservative fluid, automated thin layer preparation; requiring interpretation by physician
	G0141	Screening cytopathology smears, cervical or vaginal; performed by automated system with manual rescreening; requiring interpretation by physician
	G0143	Screening cytopathology, cervical or vaginal (any reporting system); collected in preservative fluid, automated thin layer preparation; with manual screening and rescreening by cytotechnologist under physician supervision
	G0144	Screening cytopathology, cervical or vaginal (any reporting system); collected in preservative fluid, automated thin layer preparation; with screening by automated system, under physician supervision
	G0145	Screening cytopathology, cervical or vaginal (any reporting system); collected in preservative fluid, automated thin layer preparation; with screening by automated system and manual rescreening under physician supervision
	G0147	Screening cytopathology smears, cervical or vaginal; performed by automated system, with manual rescreening; requiring interpretation by physician
	G0148	Screening cytopathology smears, cervical or vaginal; performed by automated system with manual rescreening
	P3000	Screening Papanicolaou smear, cervical or vaginal; up to three smears, by technician under physician supervision
	P3001	Screening Papanicolaou smear, cervical or vaginal; up to three smears, requiring interpretation by physician
	Q0091	Screening Papanicolaou smear; obtaining, preparing and conveyance of cervical or vaginal smear to laboratory
Chlamydia Screening	86631	Antibody; chlamydia
	86632	Antibody; chlamydia, IgM
	87110	Culture; chlamydia; any source
	87270	Infectious agent antigen detection by immunofluorescence technique; chlamydia trachomatis
	87320	Infectious agent antigen detection by enzyme immunoassay technique; qualitative or semi-quantitative, multiple-step method; chlamydia trachomatis
	87485	Infectious agent detection by nucleic acid (DNA or RNA); chlamydia pneumoniae; direct probe technique
	87486	Infectious agent detection by nucleic acid (DNA or RNA); chlamydia pneumoniae; amplified probe technique
	87487	Infectious agent detection by nucleic acid (DNA or RNA); chlamydia pneumoniae; quantification

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION
	87490	Infectious agent detection by nucleic acid (DNA or RNA); chlamydia trachomatis; direct probe technique
	87491	Infectious agent detection by nucleic acid (DNA or RNA); chlamydia trachomatis; amplified probe technique
	87492	Infectious agent detection by nucleic acid (DNA or RNA); chlamydia trachomatis; quantification
	87810	Infectious agent antigen detection by immunoassay with direct optical observation; chlamydia trachomatis
Colorectal Cancer Screening, Lab, Pathology, Sigmoidoscopy and Colonoscopy	Colonoscopy claims that do not contain the 33 or PT modifier denoting preventive services will be subject to member liability as of March 1, 2016.	
	44388	Colonoscopy through stoma; diagnostic; with or without collection of specimen by brushing or washing
	44389	Colonoscopy through stoma; with biopsy, single or multiple
	44390	Colonoscopy through stoma; with removal of a foreign body
	44391	Colonoscopy through stoma; with control of bleeding (i.e., injection, bipolar cautery, unipolar cautery, laser, heater probe, stapler, plasma coagulator)
	44392	Colonoscopy through stoma; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery
	44393	Colonoscopy through stoma; with ablation of tumor(s), polyp(s) or other lesion(s) not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique
	44394	Colonoscopy through stoma; with removal of tumor(s), polyp(s) or other lesion(s) by snare technique
	44397	Colonoscopy through stoma; with transendoscopic stent placement (includes predilation)
	44401	Colonoscopy through stoma; with ablation of tumor(s), polyp(s), or other lesion(s)
	44402	Colonoscopy through stoma; with endoscopic stent placement
	44403	Colonoscopy through stoma; with endoscopic mucosal resection
	44404	Colonoscopy through stoma; with direct submucosal injection(s), any substance
	44405	Colonoscopy through stoma; with transendoscopic balloon dilation
	44406	Colonoscopy through stoma; with endoscopic ultrasound exam, limited to the sigmoid, descending, transverse, or ascending colon and cecum and adjacent structures
	44407	Colonoscopy through stoma; with transendoscopic ultrasound guided intramural or transmural fine needle aspiration/biopsy(s), includes endoscopic ultrasound exam limited to the sigmoid, descending, transverse, or ascending colon and cecum and adjacent structures
	44408	Colonoscopy through stoma; with decompression (for pathological distention) (e.g., volvulus, megacolon, including placement of a decompression tube)
	45330	Sigmoidoscopy, flexible; diagnostic, with or without collection of specimen by brushing or washing
	45331	Sigmoidoscopy, flexible; with biopsy, single or multiple
	45332	Sigmoidoscopy, flexible; with removal of foreign body
	45333	Sigmoidoscopy, flexible; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery
	45334	Sigmoidoscopy, flexible; with control of bleeding (e.g., injection, bipolar cautery, unipolar cautery, laser, heater probe, stapler, plasma coagulator)
	45335	Sigmoidoscopy, flexible; with directed submucosal injection(s), any substance
	45337	Sigmoidoscopy, flexible; with decompression of volvulus, any method
	45338	Sigmoidoscopy, flexible; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique
	45339	Sigmoidoscopy, flexible; with ablation of tumor(s), polyp(s), or other lesion(s) not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique
	45340	Sigmoidoscopy, flexible; with dilation by balloon, one or more strictures
	45341	Sigmoidoscopy, flexible; with endoscopic ultrasound examination
	45342	Sigmoidoscopy, flexible; with transendoscopic ultrasound guided intramural or transmural fine needle aspiration/biopsy(s)
	45345	Sigmoidoscopy, flexible; with transendoscopic stent placement, includes pre-dilation
	45346	Sigmoidoscopy, flexible; with ablation of tumor(s), polyp(s), or other lesion(s); includes pre- and post-dilation and guide wire passage, when performed
	45347	Sigmoidoscopy, flexible; with placement of endoscopic stent; includes pre- and post-dilation and guide wire passage, when performed
	45349	Sigmoidoscopy, flexible; with endoscopic mucosal resection
	45350	Sigmoidoscopy, flexible; with band ligation(s) (e.g., hemorrhoids)
	45355	Colonoscopy, rigid or flexible; transabdominal via colostomy; single or multiple
	45378	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)

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION
	45379	Colonoscopy, flexible, proximal to splenic flexure; with removal of foreign body
	45380	Colonoscopy, flexible, proximal to splenic flexure; with biopsy, single or multiple
	45381	Colonoscopy, flexible, proximal to splenic flexure; with directed mucosal injection(s), any substance
	45382	Colonoscopy, flexible, proximal to splenic flexure; with control of bleeding (i.e., injection, bipolar cautery, unipolar cautery, laser, heater probe, stapler, plasma coagulator)
	45383	Colonoscopy, flexible, proximal to splenic flexure; with ablation of tumor(s), polyp(s), or other lesion(s) not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique
	45384	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, flexible, proximal to splenic flexure; with removal of tumor(s), polyp(s), or other lesion (s) by snare technique
	45386	Colonoscopy, flexible, proximal to splenic flexure; with dilation by balloon, one or more strictures
	45387	Colonoscopy, flexible, proximal to splenic flexure; with transendoscopic stent placement; includes predilation
	45388	Colonoscopy, flexible; with ablation of tumor(s), polyp(s), or other lesion(s); includes pre and post-dilation and guide wire passage, when performed
	45389	Colonoscopy, flexible; with endoscopic stent placement; includes pre- and post-dilation and guide wire passage, when performed
	45390	Colonoscopy, flexible; with endoscopic mucosal resection
	45391	Colonoscopy, flexible, proximal to splenic flexure; with endoscopic ultrasound examination
	45392	Colonoscopy, flexible, proximal to splenic flexure; with transendoscopic ultrasound guided intramural or transmural fine needle aspiration/biopsy(s)
	45393	Colonoscopy, flexible; with decompression (for pathologic distention) (e.g., volvulus, megacolon); includes placement of decompression tube, when performed
	45398	Colonoscopy, flexible; with band ligation(s) (e.g., hemorrhoids)
	82270	Blood, occult, by peroxidase activity (e.g., guaiac), qualitative; feces, consecutive collected specimens with single determination, for colorectal neoplasm screening (i.e., patient was provided three cards or single triple card for consecutive collection)
	82272	Blood, occult, by peroxidase activity (e.g., guaiac), qualitative; feces, 1-3 simultaneous determinations performed for other than colorectal neoplasm screening
	82274	Blood, occult, by fecal hemoglobin determination by immunoassay, qualitative; feces, 1-3 simultaneous determinations
	G0104	Colorectal cancer screening; flexible sigmoidoscopy
	G0105	Colorectal cancer screening; colonoscopy on individual at high risk
	G0121	Colorectal cancer screening; colonoscopy on individual not meeting criteria for high risk
	G0328	Colorectal cancer screening; fecal occult blood test, immunoassay, 1-3 simultaneous determinations
	G6019	Colonoscopy through stoma; with ablation of tumor
	G6020	Colonoscopy through stoma; with transendoscopic
	G6022	Sigmoidoscopy flexible; with ablation of tumor(s)
	G6023	Sigmoidoscopy flexible; with transendoscopic
	G6024	Colonoscopy, proximal to splenic flexure
	G6025	Colonoscopy flexible, proximal to splenic flexure
Congenital Hypothyroidism Screening	N/A	
Contraceptive Methods and Counseling	11976	Removal, implantable contraceptive capsule
	57170	Diaphragm or cervical cap fitting with instructions
	58300	Insertion of intrauterine device (IUD)
	58301	Removal of intrauterine device (IUD)
	58565	Hysteroscopy with bilateral fallopian tube cannulation to induce occlusion by placement of permanent implants
	58600	Ligation or transection of fallopian tube(s), abdominal or vaginal approach, unilateral or bilateral
	58605	Ligation or transection of fallopian tube(s), abdominal or vaginal approach, unilateral or bilateral, during same hospitalization (separate procedure)
	58611	Ligation or transection of fallopian tube(s), when done at the time of cesarean delivery or intra-abdominal surgery (not a separate procedure)
	58615	Occlusion of fallopian tube(s) by device (e.g., band, clip, falope ring); vaginal or suprapubic approach
	58670	Laparoscopy, with fulguration of oviducts (with or without transection)

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION
	58671	Laparoscopy, with occlusion of oviducts by device (e.g, band, clip, falope ring)
	Pharmacy required to bill with NDC code	Cervical cap for contraceptive use (A4261)
	Pharmacy required to bill with NDC code	Diaphragm for contraceptive use (A4266)
	J1050 with Diagnosis Code Z30, Z30.0, Z30.1, Z30.11, Z30.12, Z30.13, Z30.14, Z30.430, Z30.432, Z30.018, Z30.019, Z30.02, Z30.09, Z30.2, Z30.4, Z30.41, Z30.42, Z30.43, Z30.430, Z30.431, Z30.432, Z30.433, Z30.49, Z30.8, Z30.9	Injection, medroxyprogesterone acetate, 1 mg
	J1056	Injection, medroxyprogesterone acetate/estradiol cypionate, 5mg/25mg
	J7300	Intrauterine copper contraceptive (use this code for Paraguard)
	J7301	Levonorgestrel-releasing intrauterine contraceptive system, (SKYLA), 13.5 mg; not covered by Medicare, statute reference: 1862a1
	99201 - 99215 with diagnosis code Z30, Z30.0, Z30.1, Z30.11, Z30.12, Z30.13, Z30.14, Z30.430, Z30.432, Z30.018, Z30.019, Z30.02, Z30.09, Z30.2, Z30.4, Z30.41, Z30.42, Z30.43, Z30.430, Z30.431, Z30.432, Z30.433, Z30.49, Z30.8, Z30.9	Contraceptive management counseling
	Pharmacy required to bill with NDC code	Levonorgestrel-releasing intrauterine contraceptive system, 52 mg; use this code for Mirena (J7302)

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION
	Pharmacy required to bill with NDC code	Contraceptive supply, hormone containing vaginal ring, each; use this code for Nuvaring Vaginal Ring (J7303)
	Pharmacy required to bill with NDC code	Contraceptive supply, hormone containing patch, each (J7304)
	Pharmacy required to bill with NDC code	Etonogestrel (contraceptive) implant system, including implant and supplies; use this code for Implanon (J7307)
Contraceptives – Oral	N/A	
Contraceptives – Over the Counter Drugs and Devices	N/A	
Dental Caries in Preschool Children, Prevention	N/A	
Dental Caries in Preschool Children, Treatment, Fluoride	Will be billed with NDC to pharmacy (script required) but paid as a medical benefit	
Depression Screening (Adults)	99401	Preventive medicine counseling and/or risk factor reduction intervention provided to an individual (separate procedure); approximately 15 minutes
	99402	Preventive medicine counseling and/or risk factor reduction intervention provided to an individual; approximately 30 minutes
	99403	Preventive medicine counseling and/or risk factor reduction intervention provided to an individual; approximately 45 minutes
	99404	Preventive medicine counseling and/or risk factor reduction intervention provided to an individual; approximately 60 minutes
	G0444	Annual depression screening; 15 minutes
Diabetes Screening	82947	Glucose, quantitative, blood (except reagent strip)
	82948	Glucose, blood, reagent strip
	82950	Glucose; post glucose dose (includes glucose)
	82951	Glucose tolerance test, 3 specimens (includes glucose)
Falls Prevention in Older Adults, Vitamin D	Will be billed with NDC to pharmacy (script required) but paid as a medical benefit	
Folic Acid, Daily Supplement	Will be billed with NDC to pharmacy (script required) but paid as a medical benefit	
General Health Panel with Basic Metabolic Panel	80048	Basic metabolic panel (calcium, total)
	80050	General health panel
Gonorrhea, Prophylactic Medication	N/A	
Gonorrhea, Screening	87590	Infectious agent detection by nucleic acid (DNA or RNA); neisseria gonorrhea, direct probe technique
	87591	Infectious agent detection by nucleic acid (DNA or RNA); neisseria gonorrhea, amplified probe technique
	87592	Infectious agent detection by nucleic acid (DNA or RNA); neisseria gonorrhea, quantification
Healthy Diet Counseling	97802	Medical nutrition therapy; initial assessment and intervention, individual, face-to-face with patient; each 15 minutes

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION
	97803	Medical nutrition therapy; re-assessment and intervention, individual, face-to-face with patient; each 15 minutes
	97804	Medical nutrition therapy; group (two or more individuals); each 30 minutes
	99401	Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 15 minutes
	99402	Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual, (separate procedure); approximately 30 minutes
	99403	Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 45 minutes
	99404	Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 60 minutes
Healthy Diet Counseling – Not Preventive for Small and Individual Groups	G0108	Diabetes outpatient self-management training services; individual per 30 minutes
	G0109	Diabetes outpatient self-management training services; group session (two or more) per 30 minutes
	G0270	Medical nutrition therapy; reassessment and subsequent interventions following second referral in same year for change in diagnosis, medical condition or treatment regiment (including additional hours needed for renal disease); individual, face-to-face with the patient, each 15 minutes
	G0271	Medical nutrition therapy; reassessment and subsequent interventions following second referral in same year for change in diagnosis, medical condition or treatment regiment (including additional hours needed for renal disease); individual, face-to-face with the patient, each 30 minutes
	S9140	Diabetic management program; follow-up visit to non-MD provider
	S9141	Diabetic management program; follow-up visit to MD provider
	S9452	Nutrition classes, non-physician provider, per session
	S9455	Diabetic management program; group session
	S9460	Diabetic management program; nurse visit
	S9465	Diabetic management program; dietitian visit
	S9470	Nutrition counseling; dietitian visit
Hearing Loss Screening for Newborns	N/A	
Hepatitis B Virus Infection, Screening	87340	Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semi-quantitative, multiple step method, hepatitis B surface antigen (HBsAg)
Hepatitis C Screening	86803	Hepatitis C antibody
	86804	Hepatitis C confirmatory test
High Blood Pressure Screening	N/A	
HIV Screening	86689	Antibody; HTLV or HIV antibody, confirmatory test (e.g., Western Blot)
	86701	Antibody; HIV-1
	86702	Antibody; HIV-2
	86703	Antibody; HIV-1 and HIV-2, single assay
	87389	HIV-1 antigen, with HIV-1 and HIV-2 antibodies, single result
	87390	Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semi-quantitative, multiple step method, HIV-1
	87391	Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semi-quantitative, multiple step method, HIV-2
	87534	Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, direct probe technique
	87535	Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, amplified probe quantification
	87536	Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, quantification
	87537	Infectious agent detection by nucleic acid (DNA or RNA); HIV-2, direct probe technique
	87538	Infectious agent detection by nucleic acid (DNA or RNA); HIV-2, amplified probe technique
	87539	Infectious agent detection by nucleic acid (DNA or RNA); HIV-2, quantification
	G0432	Infectious agent antibody detection by enzyme immunoassay technique, HIV-1 and/or HIV-2 screening
	G0433	Infectious agent antibody detection by enzyme-linked immunosorbent assay (ELISA) technique, HIV-1 and/or HIV-2 screening
	G0435	Infectious agent antibody detection by rapid antibody tests of oral mucosa transudate, HIV-1 or HIV-2 screening technique, HIV-1 or HIV-2
	G0475	HIV antigen/antibody, combination assay, screening
HIV Counseling	99401	Preventive medicine counseling and/or risk factor reduction intervention provided to an individual; approximately 15 minutes
	99402	Preventive medicine counseling and/or risk factor reduction intervention provided to an individual; approximately 30 minutes
	99403	Preventive medicine counseling and/or risk factor reduction intervention provided to an individual; approximately 45 minutes

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION
	99404	Preventive medicine counseling and/or risk factor reduction intervention provided to an individual; approximately 60 minutes
HPV Screening	53645	HIV-1 antibody testing of oral mucosal transudate
	87623	Human papillomavirus (HPV), low-risk types (e.g., 6, 11, 42, 43, 44)
	87624	Human papillomavirus (HPV), high-risk types (e.g., 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 68)
	87625	Human papillomavirus (HPV), types 16 and 18 only, include type 45, if performed
	G0476	Infectious agent detection by nucleic acid (DNA or RNA; human papillomavirus [HPV]); high-risk types for cervical cancer screening; must be performed in addition to Pap smear
Immunizations – Adult	90471	Immunization administration, includes percutaneous, intradermal, subcutaneous, or intramuscular injections; one vaccine, single or combination vaccine/toxoid
	90472	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	Immunization administration by intranasal or oral route; one vaccine (single or combination vaccine/toxoid)
	90474	Immunization administration by intranasal or oral route; each additional vaccine, single or combination vaccine/toxoid (list separately in addition to code for primary procedure)
	90476	Adenovirus vaccine, type 4, live, for oral use
	90477	Adenovirus vaccine, type 7, for oral use
	90581	Anthrax vaccine for subcutaneous or intramuscular use
	90585	Bacillus Calmette-Guerine vaccine (BCG) for tuberculosis, live, for percutaneous use
	90586	Bacillus Calmette-Guerin vaccine (BCG) for bladder cancer, live, for intravesical use
	90620	Meningococcal recombinant protein and outer membrane vesicle vaccine, serogroup B (MenB); 2 dose schedule, for intramuscular dose
	90621	Meningococcal recombinant lipoprotein vaccine, serogroup B (MenB); 3 dose schedule, for intramuscular use
	90632	Hepatitis A vaccine, adult dosage; for intramuscular use
	90634	Hepatitis A vaccine, pediatric/adolescent dosage; 3 dose schedule, for intramuscular use
	90636	Hepatitis A and hepatitis B vaccine (HepA-HepB), adult dosage; for intramuscular use
	90645	Haemophilus influenzae B vaccine (Hib), HbOC conjugate; 4 dose schedule, for intramuscular use
	90646	Haemophilus influenzae B vaccine (Hib), PRP-D conjugate; for booster use only, intramuscular use
	90649	Human papillomavirus (HPV) vaccine; types 6, 11, 16 and 18 (quadrivalent); 3 dose schedule, for intramuscular use
	90650	Human papillomavirus (HPV) vaccine; types 16 and 18, bivalent; 3 dose schedule, for intramuscular use
	90654	Influenza virus vaccine, split virus, preservative-free, for intradermal use
	90656	Influenza virus vaccine, split virus, preservative-free, when administered to individuals 3 years and older, for intramuscular use
	90658	Influenza virus vaccine, split virus, when administered to individuals 3 years of age and older, for intramuscular use
	90660	Influenza virus vaccine, live, for intranasal use
	90662	Influenza virus vaccine, split virus, preservative free, enhanced immunogenicity via increased antigen content, for intramuscular use
	90665	Lyme disease vaccine, adult dosage, for intramuscular use
	90669	Pneumococcal conjugate vaccine, 7 valent, for intramuscular use
	90670	Pneumococcal conjugate vaccine, 13 valent, for intramuscular use
	90672	Influenza virus vaccine, quadrivalent, live, for intranasal use
	90673	Influenza virus vaccine, trivalent, derived from recombinant DNA (RIV3), hemagglutinin (HA) protein only, preservative- and antibiotic-free, for intramuscular use
	90675	Rabies vaccine for intramuscular use
	90676	Rabies vaccine for intradermal use
	90690	Typhoid vaccine, live, oral
	90691	Typhoid vaccine, Vi capsular polysaccharide for intramuscular use
	90692	Typhoid vaccine, heat and phenol inactivated (H-P), for subcutaneous or intradermal use
	90701	Diphtheria, tetanus toxoids, and whole cell pertussis vaccine (DTP) for intramuscular use
	90703	Tetanus toxoid adsorbed, for intramuscular use
	90704	Mumps virus vaccine, live, for subcutaneous use
	90705	Measles virus vaccine, live, for subcutaneous use
	90706	Rubella virus vaccine, live, for subcutaneous use

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION
	90707	Measles, mumps and rubella virus vaccine (MMR), live, for subcutaneous use
	90708	Measles and rubella virus vaccine, live, for subcutaneous use
	90710	Measles, mumps, rubella, and varicella vaccine (MMRV), live, for subcutaneous use
	90712	Poliovirus vaccine, any type(s) (OPV), live for oral use
	90714	Tetanus and diphtheria toxoids (Td); adsorbed, preservative-free, when administered to individuals 7 years or older, for intramuscular use
	90715	Tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap); when administered to individuals 7 years or older, for intramuscular use
	90716	Varicella virus vaccine, live, for subcutaneous use
	90717	Yellow fever vaccine, live for subcutaneous use
	90718	Tetanus and diphtheria toxoids (Td); adsorbed when administered to individuals 7 years or older, for intramuscular use
	90719	Diphtheria toxoid, for intramuscular use
	90720	Diphtheria, tetanus toxoids, and whole cell pertussis vaccine and haemophilus influenzae B vaccine (DTP-Hib); for intramuscular use
	90721	Diphtheria, tetanus toxoids, and acellular pertussis vaccine and haemophilus influenzae B vaccine (DtaP-Hib); for intramuscular use
	90723	Diphtheria, tetanus toxoids, acellular pertussis vaccine, hepatitis B and poliovirus vaccine, inactivated (DtaP-HepB- IPV); for intramuscular use
	90727	Plague vaccine, for intramuscular use
	90732	Pneumococcal polysaccharide vaccine, 23-valent, adult or immunosuppressed patient dosage; when administered to individuals 2 years or older, for subcutaneous or intramuscular use
	90733	Meningococcal polysaccharide vaccine, any group(s), for subcutaneous use
	90734	Meningococcal conjugate vaccine; serogroups A, C, Y and W-135 (tetravalent); for intramuscular use
	90736	Zoster (shingles) vaccine, live, for subcutaneous injection
	90740	Hepatitis B vaccine, dialysis or immunosuppressed patient dosage; 3 dose schedule, for intramuscular use
	90746	Hepatitis B vaccine, adult dosage, for intramuscular use
	90747	Hepatitis B vaccine, dialysis or immunosuppressed patient dosage; 4 dose schedule, for intramuscular use
	90748	Hepatitis B and haemophilus influenzae B vaccine (HepB-Hib); for intramuscular use
	G0010	Administration of hepatitis B vaccine
	Q2034	Influenza virus vaccine, split virus, for intramuscular use (AGRIFLU)
	Q2035	Influenza virus vaccine, split virus, when administered to individuals 3 years of age and older, for intramuscular use (AFLURIA)
	Q2036	Influenza virus vaccine, split virus, when administered to individuals 3 years of age and older, for intramuscular use (FLULAVAL)
	Q2037	Influenza virus vaccine, split virus, when administered to individuals 3 years of age and older, for intramuscular use (FLUVIRIN)
	Q2038	Influenza virus vaccine, split virus, when administered to individuals 3 years of age and older, for intramuscular use (Fluzone)
	Q2039	Influenza virus vaccine, split virus, when administered to individuals 3 years of age and older, for intramuscular use (not otherwise specified)
Immunizations – Pediatric	Pharmacy required to bill with NDC code	Respiratory syncytial virus, monoclonal antibody, recombinant; for intramuscular use, 50 mg, each (90378)
	90460	Immunization administration through 18 years of age via any route of administration, with counseling by physician or other qualified health care professional; first vaccine/toxoid component administered
	90461	Immunization administration through 18 years of age via any route of administration, with counseling by physician or other qualified health care professional; each additional vaccine/toxoid component administered (list separately in addition to code for primary procedure)
	90471	Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); one vaccine (single or combination vaccine/toxoid)
	90472	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	Immunization administration by intranasal or oral route; one vaccine (single or combination vaccine/toxoid)

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION
	90474	Immunization administration by intranasal or oral route; each additional vaccine (single or combination vaccine/toxoid) (list separately in addition to code for primary procedure)
	90476	Adenovirus vaccine, type 4, live, for oral use
	90477	Adenovirus vaccine, type 7, for oral use
	90620	Meningococcal recombinant protein and outer membrane vesicle vaccine, serogroup B (MenB); 2 dose schedule, for intramuscular dose
	90621	Meningococcal recombinant lipoprotein vaccine, serogroup B (MenB); 3 dose schedule, for intramuscular use
	90633	Hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule, for intramuscular use
	90634	Hepatitis A vaccine, pediatric/adolescent dosage, 3 dose schedule, for intramuscular use
	90645	Haemophilus influenzae B vaccine (Hib), HbOC conjugate; 4 dose schedule, for intramuscular use
	90646	Haemophilus influenzae B vaccine (Hib), PRP-D conjugate (for booster use only); for intramuscular use
	90647	Haemophilus influenzae B vaccine (Hib), PRP-OMP conjugate (3 dose schedule), for intramuscular use
	90648	Haemophilus influenzae B vaccine (Hib), PRP-T conjugate; 4 dose schedule, for intramuscular use
	90649	Human papillomavirus (HPV) vaccine; types 6, 11, 16, 18 (quadrivalent); 3 dose schedule, for intramuscular use
	90650	Human papillomavirus (HPV) vaccine; types 16 and 18, bivalent; 3 dose schedule, for intramuscular use
	90655	Influenza virus vaccine, split virus, preservative-free, when administered to children 6-35 months of age, for intramuscular use
	90656	Influenza virus vaccine, split virus, preservative-free, when administered to individuals 3 years and older, for intramuscular use
	90657	Influenza virus vaccine, split virus, when administered to children 6-35 months of age, for intramuscular use
	90670	Pneumococcal conjugate vaccine; 13 valent, for intramuscular use
	90676	Rabies vaccine; for intradermal use
	90680	Rotavirus vaccine, pentavalent; 3 dose schedule, live, for oral use
	90681	Rotavirus vaccine, human, attenuated; 2 dose schedule, live, for oral use
	90692	Typhoid vaccine, heat and phenol inactivated (H-P); for subcutaneous or intradermal use
	90696	Diphtheria, tetanus toxoids, acellular pertussis vaccine and poliovirus vaccine; inactivated (DTaP-IPV), when administered to children 4-6 years of age, for intramuscular use
	90698	Diphtheria, tetanus toxoids, acellular pertussis vaccine haemophilus influenza type B, and poliovirus vaccine; inactivated (DTaP - Hib - IPV), for intramuscular use
	90700	Diphtheria, tetanus toxoids, and acellular pertussis vaccine (DTaP); when administered to individuals younger than 7 years, for intramuscular use
	90701	Diphtheria, tetanus toxoids, and whole cell pertussis vaccine (DTP); for intramuscular use
	90702	Diphtheria and tetanus toxoids (DT); adsorbed, when administered to individuals younger than 7 years, for intramuscular use
	90703	Tetanus toxoid; adsorbed, for intramuscular use
	90704	Mumps virus vaccine, live, for subcutaneous use
	90705	Measles virus vaccine, live, for subcutaneous use
	90706	Rubella virus vaccine, live, for subcutaneous use
	90707	Measles, mumps and rubella virus vaccine (MMR), live, for subcutaneous use
	90708	Measles and rubella virus vaccine, live, for subcutaneous use
	90710	Measles, mumps, rubella, and varicella vaccine (MMRV), live, for subcutaneous use
	90712	Poliovirus vaccine; any type(s)) (OPV), live for oral use
	90713	Poliovirus vaccine, inactivated (IPV), for subcutaneous or intramuscular use
	90714	Tetanus and diphtheria toxoids (Td); adsorbed, preservative-free, when administered to individuals 7 years or older, for intramuscular use
	90715	Tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap); when administered to individuals 7 years or older, for intramuscular use
	90716	Varicella virus vaccine, live, for subcutaneous use
	90718	Tetanus and diphtheria toxoids (Td); adsorbed when administered to individuals 7 years or older, for intramuscular use
	90719	Diphtheria toxoid, for intramuscular use

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION
	90720	Diphtheria tetanus toxoids, and whole cell pertussis vaccine and haemophilus influenzae B vaccine (DTP-Hib); for intramuscular use
	90721	Diphtheria, tetanus toxoids, and acellular pertussis vaccine and haemophilus influenzae B vaccine (DtaP-Hib); for intramuscular use
	90723	Diphtheria, tetanus toxoids, acellular pertussis vaccine, hepatitis B, and poliovirus vaccine, inactivated (DtaP- HepB-IPV); for intramuscular use
	90727	Plague vaccine, for intramuscular use
	90732	Pneumococcal polysaccharide vaccine, 23-valent, adult or immunosuppressed patient dosage; when administered to individuals 2 years or older, for subcutaneous or intramuscular use
	90733	Meningococcal polysaccharide vaccine; any group(s), for subcutaneous use
	90734	Meningococcal conjugate vaccine, serogroups A, C, Y and W-135 (tetravalent); for intramuscular use
	90735	Japanese encephalitis virus vaccine; for subcutaneous use
	90736	Zoster (shingles) vaccine, live; for subcutaneous injection
	90738	Japanese encephalitis virus vaccine, inactivated; for intramuscular use
	90740	Hepatitis B vaccine, dialysis or immunosuppressed patient dosage; 3 dose schedule, for intramuscular use
	90743	Hepatitis B vaccine, adolescent; 2 dose schedule, for intramuscular use
	90744	Hepatitis B vaccine, pediatric/adolescent dosage; 3 dose schedule, for intramuscular use
	90747	Hepatitis B vaccine, dialysis or immunosuppressed patient dosage; 4 dose schedule, for intramuscular use
	90748	Hepatitis B and haemophilus influenzae B vaccine (HepB- Hib); for intramuscular use
	G0009	Administration of pneumococcal vaccine
	G0010	Administration of hepatitis B vaccine
	G9141	Influenza A (H1N1) immunization administration; includes the physician counseling the patient/family
	Q2035	Influenza virus vaccine, split virus; when administered to individuals 3 years of age and older, for intramuscular use (AFLURIA)
	Q2036	Influenza virus vaccine, split virus; when administered to individuals 3 years of age and older, for intramuscular use (FLULAVAL)
	Q2037	Influenza virus vaccine, split virus; when administered to individuals 3 years of age and older, for intramuscular use (Fluvirin)
	Q2038	Influenza virus vaccine, split virus; when administered to individuals 3 years of age and older, for intramuscular use (Fluzone)
	Q2039	Influenza virus vaccine, split virus; when administered to individuals 3 years of age and older, for intramuscular use (not otherwise specified)
	S0195	Pneumococcal conjugate vaccine, polyvalent; intramuscular for children from 5 to 9 years of age who have not previously received the vaccine
Intensive Behavioral Therapy(IBT) for Cardiovascular Disease	G0446	Intensive behavioral therapy to reduce cardiovascular disease risk; individual, face-to-face, bi-annual, 15 minutes
	G0473	Face-to-face behavioral counseling for obesity; group, 30 minutes
Interpersonal and Domestic Violence Counseling	99401	Preventive medicine counseling and/or risk factor reduction intervention provided to an individual (separate procedure); approximately 15 minutes
	99402	Preventive medicine counseling and/or risk factor reduction intervention provided to an individual; approximately 30 minutes
	99403	Preventive medicine counseling and/or risk factor reduction intervention provided to an individual; approximately 45 minutes
	99404	Preventive medicine counseling and/or risk factor reduction intervention provided to an individual; approximately 60 minutes
Interpersonal and Domestic Violence Counseling	N/A	
Iron Deficiency in Pregnant Women Testing	85014	Blood count; hematocrit (Hct)
	85018	Blood count; hemoglobin (Hgb)
Iron Supplementation for Iron Deficiency in Pregnant Women	Will be billed with NDC to pharmacy (script required) but paid as a medical benefit	

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION
Iron Supplementation in Children, 6-12 Months		Will be billed with NDC to pharmacy (script required) but paid as a medical benefit
Laboratory Services	80081	Obstetric panel (includes HIV testing)
	86762	Antibody, rubella
	86900	Blood typing, ABO
Lead Screening	83655	Lead
Lipid Screening (Cardiovascular Screening)	80061	Lipid panel, must include cholesterol, serum, total (82465), lipoprotein, direct measurement, high density cholesterol (HDL cholesterol) (83718), triglycerides (84478)
	82465	Cholesterol, serum or whole blood total
	83718	Lipoprotein, direct measurement, high density cholesterol
	84478	Triglycerides
Low Dose CT Lung Screening		71250 billed with Z12.2, S8032 for Med source and Child Health Plus Special screening for malignant neoplasms, respiratory organs
	G0296	Visit to determine low dose chest CT eligibility
	G0297	Low dose chest CT for lung cancer screening
Major Depressive Disorder Screening for Children and Adolescents	99401	Preventive medicine counseling and/or risk factor reduction intervention provided to an individual; approximately 15 minutes
	99402	Preventive medicine counseling and/or risk factor reduction intervention provided to an individual; approximately 30 minutes
	99403	Preventive medicine counseling and/or risk factor reduction intervention provided to an individual; approximately 45 minutes
	99404	Preventive medicine and/or risk factor reduction intervention provided to an individual; approximately 60 minutes
Obesity Screening, Adults and Children	99401	Preventive medicine counseling and/or risk factor reduction intervention provided to an individual; approximately 15 minutes
	99402	Preventive medicine counseling and/or risk factor reduction intervention provided to an individual; approximately 30 minutes
	99403	Preventive medicine counseling and/or risk factor reduction intervention provided to an individual; approximately 45 minutes
	99404	Preventive medicine and/or risk factor reduction intervention provided to an individual; approximately 60 minutes
	G0447	Face-to-face behavioral counseling for obesity; 15 minutes
	G0449	Annual face-to-face obesity screening; 15 minutes
Phenylketonuria Screening (Children)		Global to newborn DRG
Prenatal Visit and One Postpartum Visit	59425	Antepartum care only; 4-6 visits
	59426	Antepartum care only; 7 or more visits
	59430	Postpartum care only (separate procedure)
	0500F	Initial prenatal care visit (report at first encounter with health care professional providing obstetrical care; also report date of visit and, in a separate field, the date of the last menstrual period)
	0501F	Prenatal flow sheet documented in medical record by first prenatal visit (at minimum, documentation includes blood pressure, weight, urine protein, uterine size, fetal heart tones, and estimated date of delivery; also report date of visit and, in a separate field, the date of the last menstrual period)
	0502F	Subsequent prenatal care visit
	0503F	Postpartum care visit
Preventive Health Care – Pediatric	99381	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, infant (younger than 1 year)

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION
	99382	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, early childhood (ages 1-4)
	99383	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, late childhood (ages 5-11)
	99384	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, adolescent (ages 12-17)
	99391	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, infant (younger than 1 year)
	99392	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, early childhood (ages 1-4)
	99393	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, late childhood (ages 5-11)
	99394	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, adolescent (ages 12-17)
	99460	Initial hospital or birthing center care; per day, for evaluation and management of normal newborn infant
	99461	Initial care; per day, for evaluation and management of normal newborn infant seen in other than hospital or birthing center
	99463	Initial hospital or birthing center care; per day for evaluation and management of normal newborn infant admitted and discharges on the same date
	G0438	Annual wellness visit; includes a personalized prevention plan of service (PPS), initial visit
	G0439	Annual wellness visit, includes a personalized prevention plan of service (PPS), subsequent visit
	S0612	Annual gynecological examination, established patient
Preventive Medicine Services – Adult	99385	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 laboratory/diagnostic procedures; new patient (ages 18-39)
	99386	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 laboratory/diagnostic procedures; new patient (ages 40-64)
	99387	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 laboratory/diagnostic procedures; new patient (ages 65 and older)
	99985	Periodic 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 laboratory/diagnostic procedures; new patient (ages 18-39)
	99396	Periodic 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 laboratory/diagnostic procedures; new patient (ages 40-64)
	99397	Periodic 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 laboratory/diagnostic procedures; new patient (ages 65 and older)
	G0438	Annual wellness visit; includes a personalized prevention plan of service (PPS), initial visit
	G0439	Annual wellness visit, includes a personalized prevention plan of service (PPS), subsequent visit
	S0610	Annual gynecological examination, new patient
	S0612	Annual gynecological examination, established patient
Prostate Specific Antigen (PSA)	84152	Prostate specific antigen (PSA); complexed (direct measurement)

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION
	84153	Prostate specific antigen (PSA); total
	84154	Prostate specific antigen (PSA); free
	G0103	Prostate cancer screening; prostate specific antigen (PSA)
RH (D) Incompatibility Screening in Pregnant Women	86900	Blood typing; ABO
	86901	Blood typing; RH (D)
Sickle Cell Disease Screening	N/A	
Sexually Transmitted Infections Counseling	99401	Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 15 minutes
	99402	Preventive medicine counseling and/or risk factor reduction(s) provided to an individual (separate procedure); approximately 30 minutes
	99403	Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 45 minutes
	99404	Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 60 minutes
	G0445	High intensity behavioral counseling to prevent sexually transmitted infection; face-to-face individual, includes education, skills training and guidance on how to change sexual behavior; performed semi-annually, 30 minutes
	G0450	Screening for sexually transmitted infection, includes laboratory tests for chlamydia, gonorrhea, syphilis and hepatitis B
	86593	Syphilis test, nontreponemal antibody; quantitative (e.g., VDRL, RPR, ART)
Smoking Cessation Intervention, Pharmacotherapy	Will be billed with NDC to pharmacy (script required) but paid as a medical benefit	
Smoking Cessation Counseling	99406	Smoking and tobacco use cessation counseling visit; intermediate, greater than 3 minutes up to 10 minutes
	99407	Smoking and tobacco use cessation counseling visit; intensive, greater than 10 minutes
	G0436	Smoking and tobacco cessation counseling visit for the asymptomatic patient; intermediate, greater than 3 minutes, up to 10 minutes
	G0437	Smoking and tobacco cessation counseling visit for the asymptomatic patient; intensive, greater than 10 minutes
Syphilis Screening	86592	Syphilis test, nontreponemal antibody; qualitative (e.g., VDRL, RPR, ART)
Visual Impairment Screening in Children Younger than age 5	99173	Screening test of visual acuity, quantitative, bilateral

All Codes Are Subject to Industry Standard
NCCI Bundling