

Independent Health Medicare Advantage Preventive Services – 2017

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	COMMENTS
Abdominal Aortic Aneurysm Screening	76707	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 for prevention of cardiovascular disease (OTC Aspirin is NOT covered)	N/A		
Asymptomatic Bacteriuria Screening in Pregnant Women	81007	Urinalysis; bacteriuria screen, 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, 1 or more sites; axial skeleton (e.g., hips, pelvis, spine)	
	77080	Dual-energy X-ray absorptiometry (DXA), bone density study, 1 or more sites; axial skeleton (e.g., hips, pelvis, spine)	
	77081	Dual-energy X-ray absorptiometry (DXA), bone density study, 1 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 absorptimetry (DXA) bone density study, 1 or more sites; axial skeleton including vertebral fracture assessment	
	78350	Bone mineral density (bone mineral content) study; 1 or more sites: single photon absorptiometry	
	78351	Bone mineral density (bone mineral content) study; 1 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 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).	
	77067	Screening mammography, bilateral (2-view study of each breast), including computer-aided detection (CAD) when performed	

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION	COMMENTS
	77065	Diagnostic mammography, including computer-aided detection (CAD) when performed; unilateral	New code replaces 77055
	77066	Mammography; bilateral	New code replaces 77056
	77067	Screening mammography, bilateral	New code replaces 77057
	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	
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; with manual screening and rescreening under physician supervision	
	88147	Cytopathology smears, cervical or vaginal; screening by automated system under physician supervision	
	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 (eg, 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	

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION	COMMENTS
	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 3 smears, by technician under physician supervision	
	P3001	Screening Papanicolaou smear, cervical or vaginal, up to 3 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 immunofluorescent 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	
	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.		
	44388	Colonoscopy through stoma; diagnostic; with or without collection of specimen by brushing or washing	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	44389	Colonoscopy through stoma; with biopsy, single or multiple	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	44390	Colonoscopy through stoma; with removal of a foreign body	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	44391	Colonoscopy through stoma; with control of bleeding (ie. Injection, bipolar cautery, unipolar cautery, laser, heater probe, stapler, plasma coagulator)	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION	COMMENTS
	44392	Colonoscopy through stoma; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	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	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	44394	Colonoscopy through stoma; with removal of tumor(s), polyp(s) or other lesion(s) by snare technique	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	44397	Colonoscopy through stoma; with transendoscopic stent placement (includes predilation)	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	44401	Colonoscopy through stoma; with ablation of tumor(s), polyp(s), or other lesion(s)	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	44402	Colonoscopy through stoma; with endoscopic stent placement	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	44403	Colonoscopy through stoma; with endoscopic mucosal resection	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	44404	Colonoscopy through stoma; with direct submucosal injection(s), any substance	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	44405	Colonoscopy through stoma; with transendoscopic balloon dilation	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	44406	Colonoscopy through stoma; with endoscopic ultrasound exam, limited to the sigmoid, descending, transverse, or ascending colon and cecum and adjacent structures	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	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	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	44408	Colonoscopy through stoma; with decompression (for pathologic distention) (e.g. volvulus, megacolon, including placement of a decompression tube	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45330	Sigmoidoscopy, flexible; diagnostic, with or without collection of specimen by brushing or washing.	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45331	Sigmoidoscopy, flexible; with biopsy, single or multiple	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45332	Sigmoidoscopy, flexible; with removal of foreign body	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45333	Sigmoidoscopy, flexible; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45334	Sigmoidoscopy, flexible; with control of bleeding (e.g. injection, bipolar cautery, unipolar cautery, laser, heater probe, stapler, plasma coagulator)	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION	COMMENTS
	45335	Sigmoidoscopy, flexible; with directed submucosal injection(s), any substance	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45337	Sigmoidoscopy, flexible; with decompression of volvulus, any method	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45338	Sigmoidoscopy, flexible; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	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	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45340	Sigmoidoscopy, flexible; with dilation by balloon, 1 or more strictures	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45341	Sigmoidoscopy, flexible; with endoscopic ultrasound examination	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45342	Sigmoidoscopy, flexible; with transendoscopic ultrasound guided intramural or transmural fine needle aspiration/biopsy(s)	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45345	Sigmoidoscopy, flexible; with transendoscopic stent placement (includes pre-dilation)	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45346	Sigmoidoscopy, flexible; with ablation of tumor(s), polyp(s), or other lesion(s) (incl. pre and post-dilation and guide wire passage, when performed)	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45347	Sigmoidoscopy, flexible; with placement of endoscopic stent (incl. pre and post-dilation and guide wire passage, when performed)	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45349	Sigmoidoscopy, flexible; with endoscopic mucosal resection	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45350	Sigmoidoscopy, flexible; with band ligation(s) (eg, hemorrhoids)	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45355	Colonoscopy, rigid or flexible, transabdominal via colotomy, single or multiple	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	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)	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45379	Colonoscopy, flexible, proximal to splenic flexure; with removal of foreign body	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45380	Colonoscopy, flexible, proximal to splenic flexure; with biopsy, single or multiple	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45381	Colonoscopy, flexible, proximal to splenic flexure; with directed mucosal injection(s), any substance	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION	COMMENTS
	45382	Colonoscopy, flexible, proximal to splenic flexure; with control of bleeding (ie. injection, bipolar cautery, unipolar cautery, laser, heater probe, stapler, plasma coagulator)	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	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	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	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	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45385	Colonoscopy, flexible, proximal to splenic flexure; with removal of tumor(s), polyp(s), or other lesion (s) by snare technique	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45386	Colonoscopy, flexible, proximal to splenic flexure; with dilation by balloon, 1 or more strictures	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45387	Colonoscopy, flexible, proximal to splenic flexure; with transendoscopic stent placement (includes predilation)	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45388	Colonoscopy, flexible; with ablation of tumor(s), polyp(s), or other lesion(s) (incl. pre and post-dilation and guide wire passage, when performed)	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45389	Colonoscopy, flexible; with endoscopic stent placement (incl. pre and post-dilation and guide wire passage, when performed)	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45390	Colonoscopy, flexible; with endoscopic mucosal resection	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45391	Colonoscopy, flexible, proximal to splenic flexure; with endoscopic ultrasound examination	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45392	Colonoscopy, flexible, proximal to splenic flexure; with transendoscopic ultrasound guided intramural or trans mural fine needle aspiration/biopsy(s)	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45393	Colonoscopy, flexible; with decompression (for pathologic distention) (eg, volvulus, megacolon), incl. placement of decompression tube, when performed	Require Diagnosis editing. Z12.12. Z12.10.Z12.11, Z12.13, Z80.00, Z83., Z86.010
	45398	Colonoscopy, flexible; with band ligation(s) (eg, hemorrhoids)	
	81528	Oncology (colorectal) screening, quantitative real-time target and signal amplification of 10 DNA markers (KRAS mutations, promoter methylation of NDRG4 and BMP3) and fecal hemoglobin, utilizing stool, algorithm reported as a positive or negative result	
	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 3 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	

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION	COMMENTS
	99151	Moderate sedation services provided by the same physician or other qualified health care professional performing the diagnostic or therapeutic service that the sedation supports, requiring the presence of an independent trained observer to assist in the monitoring of the patient's level of consciousness and physiological status; initial 15 minutes of intraservice time, patient younger than 5 years of age	New code effective 1.1.2017 Require Diagnosis editing. Z12.12, Z12.10, Z12.11, Z12.13, Z80.00, Z83.71, Z86.101
	99152	Moderate sedation services provided by the same physician or other qualified health care professional performing the diagnostic or therapeutic service that the sedation supports, requiring the presence of an independent trained observer to assist in the monitoring of the patient's level of consciousness and physiological status; initial 15 minutes of intraservice time, patient age 5 years or older	New code effective 1.1.2017 Require Diagnosis editing. Z12.12, Z12.10, Z12.11, Z12.13, Z80.00, Z83.71, Z86.101
	99153	Moderate sedation services provided by the same physician or other qualified health care professional performing the diagnostic or therapeutic service that the sedation supports, requiring the presence of an independent trained observer to assist in the monitoring of the patient's level of consciousness and physiological status; each additional 15 minutes intraservice time	New code effective 1.1.2017 Require Diagnosis editing. Z12.12, Z12.10, Z12.11, Z12.13, Z80.00, Z83.71, Z86.101
	99155	Moderate sedation services provided by the a physician or other qualified health care professional other than the physician or other qualified health care professional performing the diagnostic or therapeutic service that the sedation supports; initial 15 minutes of intraservice time, patient younger than 5 years of age	New code effective 1.1.2017 Require Diagnosis editing. Z12.12, Z12.10, Z12.11, Z12.13, Z80.00, Z83.71, Z86.101
	99156	Moderate sedation services provided by the a physician or other qualified health care professional other than the physician or other qualified health care professional performing the diagnostic or therapeutic service that the sedation supports; initial 15 minutes of intraservice time, patient age 5 years or older	New code effective 1.1.2017 Require Diagnosis editing. Z12.12, Z12.10, Z12.11, Z12.13, Z80.00, Z83.71, Z86.101
	99157	Moderate sedation services provided by the a physician or other qualified health care professional other than the physician or other qualified health care professional performing the diagnostic or therapeutic service that the sedation supports; each additional 15 minutes of intraservice time	New code effective 1.1.2017 Require Diagnosis editing. Z12.12, Z12.10, Z12.11, Z12.13, Z80.00, Z83.71, Z86.101
	G0104	Colorectal cancer screening, flexible sigmoidoscopy	
	G0105	Colorectal cancer screening, colonoscopy on individual at high risk	
	G0106	Colorectal cancer screening; alternative to G0104, screening sigmoidoscopy, barium enema	
	G0120	Colorectal cancer screening; alternative to G0105, screening colonoscopy, barium enema	
	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	
	G0500	Moderate sedation services provided by the same physician or other qualified health care professional performing a gastrointestinal endoscopic service that sedation supports, requiring the presence of an independent trained observer to assist in the monitoring of the patient's level of consciousness and physiological status; initial 15 minutes of intra-service time; patient age 5 years or older (additional time may be reported with 99153, as appropriate)	New code effective 1.1.2017 Require Diagnosis editing. Z12.12, Z12.10, Z12.11, Z12.13, Z80.00, Z83.71, Z86.101
	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 Flexur	
	G6025	Colonoscopy Flexible, Proximal to Splenic Flexur	
Congenital Hypothyroidism Screening	N/A		
Dental Caries in Preschool Children, Prevention (Fluoride NOT covered)	N/A		

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION	COMMENTS
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)	
EKG Screening	G0403	Electrocardiogram, routine ECG with 12 leads; Performed as screening for the initial preventive physical examination with interpretation and report	
	G0404	Electrocardiogram, routine ECG with 12 leads; tracing only without interpretation and report only. Performed as screening for the initial preventive physical examination	
	G0405	Electrocardiogram, routine ECG with 12 leads; interpretation and report only. Performed as screening for the initial preventive physical examination	
General Health Panel with Basic Metabolic Panel	80048	Basic metabolic panel (calcium, total)	
	80050	General health panel	
Glaucoma Screening	G0117	Glaucoma screening for high risk patients furnished by an optometrist or ophthalmologist	
	G0118	Glaucoma screening for high risk patient furnished under direct supervision of an optometrist or ophthalmologist	
Gonorrhea, Prophylactic Medication	N/A		
Gonorrhea, Screening	87590	Infectious agent detection by nucleic acid (DNA or RNA); Neisseria gonorrhoeae, direct probe technique	
	87591	Infectious agent detection by nucleic acid (DNA or RNA); Neisseria gonorrhoeae, amplified probe technique	
	87592	Infectious agent detection by nucleic acid (DNA or RNA); Neisseria gonorrhoeae, quantification	
Healthy Diet Counseling (eg. Nutritional Counseling, Diabetic Teaching)	97802	Medical nutrition therapy; initial assessment and intervention, individual, face to face with patient, each 15 minutes	
	97803	Medical nutrition therapy; re-assessment and intervention, individual, face to face with patient, each 15 minutes	
	97804	Medical nutrition therapy; group (2 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	
	G0108	Diabetes outpatient self-management training services, individual, per 30 minutes	
	G0109	Diabetes outpatient self-management training services, group session (2 or more) per 30 minutes	

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION	COMMENTS
	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	
	G0446	Intensive behavioral therapy to reduce cardiovascular disease risk, individual, face-to-face, bi-annual, 15 minutes	
	G0473	Face-to-face Behavioral Counseling Obesity GRP 30 mininutes	
	G0473	Face-to-Face Behav Counseling Obesity Group 30 min	
	S9140	Diabetic Management Program, follow-up visit to non MD provider	
	S9141	Diabetic Management Program, follow-up visit to MD provider	
	S9452	Nutrition classes, nonphysician 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		
High Blood Pressure Screening	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	
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	

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION	COMMENTS
	G0475	HIV antigen/antibody, combination assay, screening	
	S3645	HIV-1 Antibody testing of oral mucosal transdate	
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	
	99404	Preventive medicine counseling and/or risk factor reduction intervention provided to an individual, approximately 60 minutes	
HPV Screening	S3645	HIV-1 Antibody testing of oral mucosal transdate	
	87623	Human Papilomavirus (HPV), low-risk types (eg. 6, 11,42, 43,44)	
	87624	Human Papilomavirus (HPV), high risk types (eg. 16, 18, 31,33,35,39,45,51,52,56, 58, 59, 68)	
	87625	Human Papilomavirus (HPV), types 16 and 18 only, include type 45, if performed.	
	G0476	Infectious agent detection by nucleic acid (DNA or RNA0; human papillomavirus HPV), high-risk types for cervical cancer screening, mut be performed in addition to pap Smer	
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 screening	N/A		
Iron Deficiency in Pregnant Women (Iron Supplement NOT covered)	85014	Blood count; hematocrit (Hct)	
	85018	Blood count; hemoglobin (Hgb)	
Lead Screening	83655	Lead	
Laboratory Services	86762	Antibody, rubella	
	86900	Blood typing, ABO	
Lipid Screening (Cardiovascular Screening)	80061	Lipid panel. This panel must include the following: 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 Chest CT Screening	71250 billed with Z12.2	Low Dose Chest CT Screening	
	G0296	Visit to determine Idct eligibility	
	G0297	Idct for lung ca screen	
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	

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION	COMMENTS
	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 Post Partum 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. Report also 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 (documentation includes at minimum blood pressure, weight, urine protein, uterine size, fetal heart tones, and estimated date of delivery). Report also: date of visit and, in a separate field, the date of the last menstrual period)	
	0502F	Subsequent prenatal care visit	
	0503F	Postpartum care visit	
Prostate Specific Antigen (PSA)	84152	Prostate specific antigen (PSA) complexed (direct measurement)	
	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 Pregnancy Women	86900	Blood typing; ABO	
	86901	Blood typing; RH (D)	
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, gonorrhoea, syphilis and hepatitis B	
	86593	Syphilis test, non-treponemal antibody; quantitative (e.g. VDRL, RPR, ART)	
Sickle Cell Disease Screening	N/A		
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	
Syphilis Screening	86592	Syphilis test, non-treponemal antibody; qualitative (e.g. VDRL, RPR, ART)	
Visual Impairment Screening in Children Younger than age 5	99173	Screening test of visual acuity, quantitative, bilateral	

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION	COMMENTS
Pediatric Immunizations		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); 1 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; 1 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	
	90633	Hepatitis A vaccine, pediatric/adolescent dosage-2 schedule for intramuscular use	
	90634	Hepatitis A vaccine, pediatric/adolescent dosage - 3 dose schedule for intramuscular use	
	90645	Hemophilus influenza b vaccine (Hib), HbOC conjugate (4 dose schedule) for intramuscular use	
	90646	Hemophilus influenza b vaccine (Hib), PRP-D conjugate, for booster use only), intramuscular use	
		Hemophilus influenza b vaccine (Hib), PRP-OMP conjugate (3 dose schedule), for intramuscular use	
	90648	Hemophilus influenza b vaccine (Hib), PRP-T conjugate(4 dose schedule), for intramuscular use	
	90649	Human Papilloma virus (HPV) vaccine, types 6, 11, 16, 18 (quadrivalent), 3 dose schedule, for intramuscular use	
	90620	Meningococcal recombinant protein and outer membrane vesicle vaccine, serogroup B (menB) 3 dose schedule, for intramuscular use	
	90621	Meningococcal recombinant lipoprotein vaccine, serogroup B (MenB) 3 dose schedule, for intramuscular use	
	90630	Influenza virus vaccine, quadrivalent (IIV4), split virus, preservative free, for intradermal use	
	90650	Human Papilloma virus (HPV) vaccine, types 16, 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	
	90661	Influenza virus vaccine (cclIV3), derived from cell cultures, subunit, preservative and antibiotic free, 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	

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION	COMMENTS
	90685	Influenza virus vaccine, quadrivalent (IIV4), split virus, preservative free, when administered to children 6-35 months of age, for intramuscular use	
	90686	Influenza virus vaccine, quadrivalent (IIV4), split virus, preservative free, when administered to individuals 3 years of age and older, for intramuscular use	
	90687	Influenza virus vaccine, quadrivalent (IIV4), split virus, when administered to children 6-35 months of age, for intramuscular use	
	90688	Influenza virus vaccine, quadrivalent (IIV4), split virus, when administered to individuals 3 years of age and older, for intramuscular 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 through 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 rebulla 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	
	90720	Diphtheria tetanus toxoids, and whole cell pertussis vaccine and Hemophilus influenza B vaccine (DTP-Hib), for intramuscular use	
	90721	Diphtheria, tetanus toxoids, and acellular pertussis vaccine and Hemophilus influenza 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	

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION	COMMENTS
	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 Hemophilus influenza 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)	
Adult Immunizations Covered Part B Services include Pneumonia, Flu Shots and Hepatitis B. Other vaccines (ie Zoster) are covered as Part B if high risk. All other vaccines are covered under the Part D prescription drug benefit.	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	
	90471	Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); 1 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; 1 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) 3 dose schedule, for intramuscular use	
	90621	Meningococcal recombinant lipoprotein vaccine, serogroup B (MenB) 3 dose schedule, for intramuscular use	

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION	COMMENTS
	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	Hemophilus influenza b vaccine (Hib), HbOC conjugate (4 dose schedule) for intramuscular use	
	90646	Hemophilus influenza b vaccine (Hib), PRP-D conjugate, for booster use only), intramuscular use	
	90649	Human Papilloma virus (HPV) vaccine, types 6, 11, 16, 18 (quadrivalent), 3 dose schedule, for intramuscular use	
	90650	Human Papilloma virus (HPV) vaccine, types 16, 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	
	90672	Influenza virus vaccine, quadrivalent, live, for intranasal 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 & antibiotic free, for IM 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	
	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	

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION	COMMENTS
	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 Hemophilus influenza B vaccine (DTP-Hib), for intramuscular use	
	90721	Diphtheria, tetanus toxoids, and acellular pertussis vaccine and Hemophilus influenza 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 Hemophilus influenza 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)	
	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	

PROCEDURE CATEGORY	CODE	CODE DESCRIPTION	COMMENTS
	99463	Initial hospital or birthing center care, per day for evaluation and management of normal newborn infant admitted and discharges on the same date	
	G0438TG	Annual wellness visit; includes a personalized prevention plan of service (pps), initial visit	
	G0439TG	Annual wellness visit; includes a personalized prevention plan of service (pps), subsequent visit	
	G8496	All Quality Actions for the applicable measures in the preventive care measures group have been performed for this patient	
	S0610	Annual gynecological examination, new patient	
	S0612	Annual gynecological examination, established patient	
Welcome to Medicare Exam	G0402	Initial preventive physical examination; face to face visit, services limited to new beneficiary during the first 12 months of Medicare enrollment	