

## Medical Necessity Guidelines: Experimental, Investigational or Unproven Services

Last Review Date: January 24, 2024

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### Medical Guideline Disclaimer

Property of EmblemHealth. All rights reserved. The treating physician or primary care provider must submit to EmblemHealth the clinical evidence that the patient meets the criteria for the treatment or surgical procedure. Without this documentation and information, EmblemHealth will not be able to properly review the request for prior authorization. The clinical review criteria expressed below reflects how EmblemHealth determines whether certain services or supplies are medically necessary. EmblemHealth established the clinical review criteria based upon a review of currently available clinical information (including clinical outcome studies in the peer reviewed published medical literature, regulatory status of the technology, evidence-based guidelines of public health and health research agencies, evidence-based guidelines and positions of leading national health professional organizations, views of physicians practicing in relevant clinical areas, and other relevant factors). EmblemHealth expressly reserves the right to revise these conclusions as clinical information changes and welcomes further relevant information. Each benefit program defines which services are covered. The conclusion that a particular service or supply is medically necessary does not constitute a representation or warranty that this service or supply is covered and/or paid for by EmblemHealth, as some programs exclude coverage for services or supplies that EmblemHealth considers medically necessary. If there is a discrepancy between this guideline and a member's benefits program, the benefits program will govern. In addition, coverage may be mandated by applicable legal requirements of a state, the Federal Government or the Centers for Medicare & Medicaid Services (CMS) for Medicare and Medicaid members. All coding and web site links are accurate at time of publication. EmblemHealth Services Company LLC, ("EmblemHealth") has adopted the herein policy in providing management, administrative and other services to EmblemHealth Plan, Inc., EmblemHealth Insurance Company, EmblemHealth Services Company, LLC and Health Insurance Plan of Greater New York (HIP) related to health benefit plans offered by these entities. All of the aforementioned entities are affiliated companies under common control of EmblemHealth Inc

### Guideline

EmblemHealth restricts coverage to those devices, treatments or procedures for which the safety and efficacy have been proven, and which are comparable or superior to conventional therapies. The plan defines the terms "investigational", "experimental" or "unproven" as the use of a service, procedure or supply that is not recognized by the Plan as standard medical care for the condition, disease, illness or injury being treated. A service, procedure or supply includes, but is not limited to the diagnostic service, treatment, facility, equipment, drug or device. A service is considered investigational, experimental or unproven, if any of the following criteria are met:

1. The services, procedures or supplies requiring Federal or other Governmental body approval, such as drugs and devices, do not have unrestricted market approval from the Food and Drug Administration (FDA) or final approval from any other governmental regulatory body for use in treatment of a specified condition. Any approval that is granted as an interim step in the regulatory process is not a substitute for final or unrestricted market approval.
2. There is insufficient or inconclusive medical and scientific evidence to permit the Plan to evaluate the therapeutic value of the service, procedure or supply. (Adequate evidence is defined as at least two documents of medical and scientific evidence that indicate that the proposed treatment is likely to be beneficial to the member.)
3. There is inconclusive medical and scientific evidence in peer-reviewed medical literature that the service, procedure or supply has a beneficial effect on health outcomes.
4. The service, procedure or supply under consideration is not as beneficial as any established alternatives.
5. There is insufficient information or inconclusive scientific evidence that, when used in a non-investigational setting, the service, procedure or supply has a beneficial effect on health outcomes or is as beneficial as any established alternatives.

- Any device, medical treatment, supply or procedure for which safety and efficacy has not been established and proven is considered investigational (unproven) and is not considered to be medically necessary or appropriate.

To determine whether a device, medical treatment or procedure is proven safe and effective, the following hierarchy of reliable evidence is used:

- Published formal technology assessments and /or high quality meta analyses
- Well-designed randomized studies published in credible, peer-reviewed literature
- High quality case-control or cohort studies
- Historical control studies
- Reports of expert opinion from national professional medical societies or national medical policy organizations

### Limitations/Exclusions

With respect to clinical studies, only those reports and articles, which contain scientifically valid data and published in the referred medical and scientific literature, shall be considered reliable evidence.

Specifically, not included in the meaning of reliable evidence are reports, articles or statements by providers or groups of providers containing only abstracts, anecdotal evidence or personal professional opinions. Also, not included is the fact that a provider or a number of providers have elected to adopt a device, medical treatment or procedure as their personal treatment or procedure of choice or standard of practice.

EmblemHealth adheres to Federal and state government program directives. Therefore, if there is a discrepancy between the overarching clinical coverage position and the member's benefits program, the benefits program will govern.

### Experimental & Noncovered Investigational by CPT Code (Commercial Plans)

11950	11951	11952	11954	19105	20939	20983	22526	22527	22586	23470	23472
23700	24300	27570	27599	28035	28890	29893	30468	30469	33274	33275	33289
33542	33548	34717	34718	36012	36901	36902	36903	36904	36905	36906	36907
36908	36909	37246	37247	37248	37249	41512	41530	43206	43210	43252	43257
43284	43285	43290	43291	49419	53451	53452	53453	53454	54240	58580	61736
61737	62263	62264	62290	62380	64555	64628	64629	64702	64704	64708	64712
64714	64722	64726	64727	64910	64911	65820	69433	69705	69706	72295	75898
#REF!	76498	77605	77615	77620	78811	78814	81173	81174	81204	81230	81231
81241	81243	81256	81283	81291	81327	81328	81332	81335	81346	81355	81383
81419	81434	81455	81470	81471	81490	81493	81503	81504	81520	81521	81525

**Experimental & Noncovered Investigational by CPT Code (Commercial Plans)**

81529	81535	81536	81540	81541	81552	81554	82726	83006	83722	83789	83951
83987	84112	84378	86039	86140	86152	86153	86200	86225	86235	86352	86382
86431	87801	88112	88120	88121	88187	88313	88323	88346	88350	88368	88375
89240	90867	90868	90869	91113	91132	91133	92145	92227	92449	92512	93050
93702	93740	93895	94717	95012	96004	96904	96931	96932	96933	96934	96935
96936	97026	97039	97139	97607	97608	97610	99070	0002U	0003U	0004M	0006M
0007M	0007U	0008U	0009U	0011M	0011U	0012M	0013M	0014U	0015M	0016M	0017M
0018M	0019U	0021U	0024U	0025U	0029U	0030U	0031U	0032U	0033U	0034U	0035U
0038U	0039U	0041U	0042T	0042U	0043U	0044U	0045U	0047U	0048U	0051U	0052U
0053U	0054T	0054U	0055T	0055U	0058U	0059U	0060U	0061U	0062U	0063U	0064U
0065U	0066U	0067U	0068U	0069U	0071T	0072T	0075T	0076T	0077U	0078U	0079U
0080U	0082U	0083U	0086U	0087U	0088U	0089U	0090U	0091U	0092U	0093U	0094U
0095T	0095U	0096U	0098T	0100T	0101T	0101U	0102T	0106T	0106U	0107T	0107U
0108T	0108U	0109T	0109U	0110T	0110U	0112U	0113U	0114U	0115U	0116U	0117U
0118U	0119U	0120U	0121U	0122U	0123U	0130U	0134U	0140U	0141U	0142U	0143U
0144U	0145U	0146U	0147U	0148U	0149U	0150U	0152U	0153U	0156U	0163U	0164T
0164U	0165T	0165U	0166U	0167U	0169U	0170U	0174T	0174U	0175T	0175U	0176U
0178U	0198T	0200T	0201T	0202T	0203U	0204U	0205U	0206U	0207T	0207U	0208T
0209T	0209U	0210T	0210U	0211T	0212T	0212U	0213T	0213U	0214T	0214U	0215T
0215U	0216T	0217T	0218T	0219T	0219U	0220T	0220U	0221T	0222T	0223U	0224U
0225U	0226U	0227U	0228U	0229U	0230U	0232T	0234T	0235T	0236T	0237T	0238T
0240U	0241U	0243U	0246U	0247U	0248U	0249U	0251U	0252U	0253U	0254U	0255U
0256U	0257U	0258U	0259U	0260U	0261U	0262U	0263T	0263U	0264T	0264U	0265T
0265U	0266T	0266U	0267T	0267U	0268T	0268U	0269T	0269U	0270T	0270U	0271T

**Experimental & Noncovered Investigational by CPT Code (Commercial Plans)**

0271U	0272T	0272U	0273T	0273U	0274T	0274U	0275T	0275U	0276U	0277T	0277U
0278T	0278U	0279U	0280U	0281U	0283U	0284U	0285U	0286U	0287U	0288U	0289U
0290U	0291U	0292U	0293U	0294U	0295U	0296U	0297U	0298U	0299U	0300U	0301U
0302U	0303U	0304U	0305U	0306U	0307U	0308U	0309U	0310U	0311U	0312U	0313U
0314U	0315U	0316U	0317U	0318U	0319U	0320U	0321U	0322U	0323U	0328U	0329T
0329U	0330T	0330U	0331T	0331U	0332T	0332U	0333T	0333U	0334U	0335T	0335U
0336U	0337U	0338T	0338U	0339T	0339U	0340U	0341U	0342T	0342U	0343U	0344U
0345U	0346U	0347T	0347U	0348T	0348U	0349T	0349U	0350T	0350U	0351T	0351U
0352T	0352U	0353T	0353U	0354T	0354U	0355T	0357U	0358T	0358U	0359U	0360U
0361U	0364U	0365U	0366U	0367U	0370U	0371U	0372U	0373U	0374U	0375U	0376U
0377T	0377U	0378T	0378U	0379T	0381U	0382U	0383U	0384U	0385U	0387U	0389U
0390U	0391U	0393U	0394T	0394U	0395T	0395U	0396U	0397T	0398T	0398U	0399U
0401U	0403T	0404T	0406U	0408T	0409T	0410T	0411T	0412T	0413T	0414T	0415T
0416T	0417T	0418T	0419T	0420T	0422T	0424T	0425T	0426T	0427T	0428T	0429T
0430T	0431T	0432T	0433T	0434T	0435T	0436T	0437T	0440T	0443T	0444T	0445T
0450T	0464T	0465T	0469T	0470T	0471T	0472T	0473T	0474T	0475T	0476T	0477T
0478T	0479T	0480T	0481T	0483T	0484T	0485T	0486T	0487T	0488T	0489T	0490T
0491T	0492T	0493T	0494T	0495T	0496T	0497T	0498T	0499T	0506T	0507T	0508T
0510T	0511T	0512T	0513T	0514T	0515T	0516T	0517T	0518T	0519T	0520T	0521T
0522T	0523T	0524T	0525T	0526T	0527T	0528T	0529T	0530T	0531T	0532T	0533T
0534T	0535T	0536T	0541T	0542T	0543T	0544T	0545T	0546T	0547T	0552T	0553T
0554T	0555T	0556T	0557T	0558T	0559T	0560T	0561T	0562T	0563T	0564T	0565T
0566T	0567T	0568T	0569T	0570T	0571T	0572T	0573T	0574T	0575T	0576T	0577T
0578T	0579T	0580T	0581T	0582T	0583T	0587T	0588T	0589T	0590T	0596T	0597T

**Experimental & Noncovered Investigational by CPT Code (Commercial Plans)**

0598T	0599T	0600T	0601T	0602T	0603T	0606T	0607T	0608T	0609T	0610T	0611T
0612T	0613T	0614T	0615T	0619T	0620T	0621T	0622T	0623T	0624T	0625T	0626T
0627T	0628T	0629T	0630T	0631T	0632T	0633T	0634T	0635T	0636T	0637T	0638T
0639T	0640T	0641T	0642T	0643T	0644T	0645T	0646T	0647T	0648T	0649T	0651T
0655T	0656T	0658T	0659T	0660T	0662T	0663T	0664T	0666T	0668T	0670T	0673T
0675T	0677T	0679T	0681T	0683T	0685T	0686T	0687T	0688T	0689T	0691T	0692T
0693T	0694T	0695T	0696T	0697T	0698T	0700T	0701T	0702T	0704T	0706T	0708T
0710T	0711T	0712T	0713T	0714T	0715T	0716T	0717T	0718T	0719T	0720T	0721T
0725T	0726T	0727T	0728T	0729T	0730T	0731T	0733T	0734T	0736T	0737T	0738T
0739T	0740T	0741T	0744T	0745T	0746T	0747T	0748T	0749T	0750T	0751T	0752T
0753T	0754T	0755T	0756T	0757T	0758T	0759T	0760T	0761T	0762T	0763T	0764T
0765T	0766T	0767T	0768T	0769T	0770T	0771T	0772T	0773T	0774T	0775T	0776T
0777T	0778T	0779T	0781T	0782T	0783T	0791T	0793T	0794T	0795T	0796T	0797T
0798T	0799T	0800T	0801T	0802T	0803T	0804T	0805T	0806T	0807T	0808T	0809T
0810T	0814T	0815T	0816T	0817T	0818T	0819T	0826T	0827T	0828T	0829T	0830T
0831T	0832T	0833T	0834T	0835T	0836T	0837T	0838T	0839T	0840T	0841T	0842T
0843T	0844T	0845T	0846T	0847T	0848T	0849T	0850T	0851T	0852T	0853T	0854T
0855T	0856T	0858T	0859T	0860T	0864T	32994	A2001	A2002	A2004	A2005	A2006
A2007	A2008	A2009	A2010	A2011	A2012	A2013	A2014	A2015	A2016	A2017	A2018
A2019	A2020	A2021	A2022	A2023	A2024	A2025	A4335	A4337	A4341	A4342	A4541
A4542	A4558	A4563	A4575	A4638	A4639	A6000	A7049	A9272	A9292	A9586	C9790
C9791	C9792	E0218	E0221	E0231	E0232	E0236	E0490	E0491	E0492	E0493	E0530
E0711	E0732	E0733	E0734	E0735	E0761	E0762	E0765	E2120	E3000	H0047	J1817
J3490	J7030	J7040	J7050	K1007	K1016	K1017	K1018	K1019	K1028	K1029	K1030

**Experimental & Noncovered Investigational by CPT Code (Commercial Plans)**

K1035	K1036	L8605	L8608	L8699	L8701	L8702	Q1004	Q1005	Q4113	Q4114	Q4125
Q4139	Q4142	Q4143	Q4145	Q4149	Q4150	Q4162	Q4167	Q4171	Q4184	Q4185	Q4192
Q4193	Q4194	Q4198	Q4200	Q4201	Q4202	Q4204	Q4206	Q4227	Q4229	Q4230	Q4231
Q4232	Q4233	Q4234	Q4235	Q4236	Q4237	Q4238	Q4239	Q4241	Q4242	Q4244	Q4245
Q4247	Q4248	Q4249	Q4250	Q4254	Q4255	Q4259	Q4260	Q4261	Q4262	Q4263	Q4264
Q4265	Q4266	Q4267	Q4268	Q4269	Q4270	Q4271	Q4279	Q4285	Q4286	Q4289	Q4290
Q4291	Q4292	Q4293	Q4294	Q4295	Q4296	Q4297	Q4298	Q4299	Q4300	Q4301	Q4302
Q4303	S0800	S1030	S1031	S1090	S2117	S2140	S2300	S2348	S3650	S3722	S3800
S3852	S3900	S8037	S8080	S8130	S8131	S8930	S9055	S9090	V5299		

**Experimental & Noncovered Investigational by CPT Code (Medicare Plans)**

11950	11951	11952	11954	20939	22526	22527	22586	22860	23470	23472	23700	24300	27570
28035	28890	29893	36012	36901	36902	36903	36904	36905	36906	36907	36908	36909	37246
37247	37248	37249	41512	43257	43284	49419	53451	53452	53453	53454	62263	62264	62290
62380	64629	64702	64704	64708	64712	64714	64722	64726	64727	65820	69433	72295	75898
76498	77605	77615	77620	81173	81174	81204	81232	81234	81239	81241	81243	81252	81253
81254	81256	81283	81284	81285	81286	81289	81291	81328	81332	81346	81383	81419	81430
81431	81434	81470	81471	81493	81503	81520	81521	81535	81536	82726	83006	83722	83789
83951	84112	84378	86039	86140	86200	86225	86235	86352	86382	87801	88112	88120	88121
88187	88313	88323	88346	88350	88368	89240	90867	90868	90869	91113	92145	92449	93740
93895	96904	97026	97039	97139	99070	0001U	0002U	0003U	0007M	0007U	0008U	0009U	0011U
0012M	0013M	0014U	0016U	0017U	0019U	0021U	0023U	0024U	0025U	0029U	0030U	0031U	0032U
0033U	0034U	0035U	0036U	0038U	0039U	0040U	0041U	0042T	0042U	0043U	0044U	0051U	0053U
0054T	0054U	0055T	0055U	0058U	0059U	0060U	0061U	0062U	0063U	0064U	0065U	0066U	0067U
0068U	0069U	0071T	0071U	0072T	0072U	0073U	0074U	0075T	0075U	0076T	0076U	0077U	0078U

**Experimental & Noncovered Investigational by CPT Code (Medicare Plans)**

0079U	0082U	0083U	0084U	0086U	0087U	0088U	0091U	0092U	0093U	0094U	0095T	0095U	0096U
0098T	0100T	0101T	0102T	0106T	0106U	0107T	0107U	0108T	0108U	0109T	0109U	0110T	0110U
0112U	0113U	0114U	0115U	0116U	0117U	0118U	0119U	0120U	0121U	0122U	0123U	0129U	0130U
0133U	0135U	0136U	0137U	0138U	0140U	0141U	0142U	0143U	0144U	0145U	0146U	0147U	0148U
0149U	0150U	0152U	0153U	0156U	0157U	0158U	0159U	0160U	0161U	0162U	0163U	0164T	0164U
0165T	0165U	0166U	0167U	0169U	0170U	0171U	0173U	0174T	0174U	0175T	0175U	0176U	0178U
0179U	0180U	0181U	0182U	0183U	0184U	0185U	0186U	0187U	0188U	0189U	0190U	0191U	0192U
0193U	0194U	0195U	0196U	0197U	0198T	0198U	0200T	0201T	0202T	0204U	0207T	0208T	0209T
0210T	0211T	0212T	0213T	0214T	0215T	0216T	0217T	0218T	0219T	0220T	0221T	0222T	0223U
0225U	0232T	0234T	0235T	0236T	0237T	0238T	0243U	0246U	0247U	0263T	0264T	0265T	0266T
0267T	0268T	0269T	0270T	0271T	0272T	0273T	0274T	0275T	0277T	0278T	0287U	0312U	0329T
0330T	0331T	0332T	0333T	0335T	0338T	0339T	0340U	0342T	0347T	0348T	0349T	0350T	0351T
0352T	0353T	0353U	0354T	0354U	0355T	0357U	0358T	0358U	0359U	0360U	0361U	0365U	0366U
0367U	0370U	0371U	0372U	0373U	0374U	0375U	0376U	0377T	0377U	0378T	0378U	0379T	0381U
0382U	0383U	0384U	0385U	0387U	0389U	0390U	0391U	0393U	0394T	0394U	0395T	0395U	0396U
0397T	0398U	0399U	0401U	0402T	0403T	0404T	0406U	0408T	0409T	0410T	0411T	0412T	0413T
0414T	0415T	0416T	0417T	0418T	0419T	0420T	0422T	0424T	0425T	0426T	0427T	0428T	0429T
0430T	0431T	0432T	0433T	0434T	0435T	0436T	0437T	0440T	0443T	0444T	0445T	0450T	0464T
0465T	0469T	0470T	0471T	0472T	0473T	0474T	0475T	0476T	0477T	0478T	0479T	0480T	0481T
0483T	0484T	0485T	0486T	0487T	0488T	0489T	0490T	0491T	0492T	0493T	0494T	0495T	0496T
0497T	0498T	0499T	0506T	0507T	0508T	0510T	0511T	0512T	0513T	0514T	0515T	0516T	0517T
0518T	0519T	0520T	0521T	0522T	0523T	0525T	0526T	0527T	0528T	0529T	0530T	0531T	0532T
0533T	0534T	0535T	0536T	0541T	0542T	0543T	0544T	0545T	0546T	0547T	0552T	0553T	0559T
0560T	0561T	0562T	0563T	0564T	0565T	0566T	0567T	0568T	0569T	0570T	0571T	0572T	0573T
0574T	0575T	0576T	0577T	0578T	0579T	0580T	0581T	0582T	0583T	0587T	0588T	0589T	0590T
0596T	0597T	0598T	0599T	0600T	0601T	0602T	0603T	0606T	0607T	0608T	0609T	0610T	0611T

**Experimental & Noncovered Investigational by CPT Code (Medicare Plans)**

0612T	0613T	0614T	0615T	0619T	0620T	0621T	0622T	0623T	0624T	0625T	0626T	0627T	0628T
0629T	0630T	0631T	0632T	0633T	0634T	0635T	0636T	0637T	0638T	0639T	0640T	0641T	0642T
0643T	0644T	0645T	0646T	0647T	0648T	0649T	0655T	0658T	0659T	0662T	0663T	0673T	0686T
0687T	0688T	0692T	0693T	0694T	0695T	0696T	0697T	0698T	0700T	0701T	0710T	0711T	0712T
0713T	0714T	0715T	0716T	0717T	0718T	0719T	0720T	0725T	0726T	0727T	0729T	0730T	0731T
0733T	0734T	0736T	0737T	0738T	0739T	0740T	0741T	0743T	0745T	0746T	0747T	0748T	0749T
0750T	0751T	0752T	0753T	0754T	0755T	0756T	0757T	0758T	0759T	0760T	0761T	0762T	0763T
0764T	0765T	0766T	0767T	0768T	0769T	0770T	0771T	0772T	0773T	0774T	0775T	0776T	0777T
0778T	0779T	0781T	0782T	0783T	0791T	0793T	0794T	0795T	0796T	0797T	0798T	0799T	0800T
0801T	0802T	0803T	0804T	0805T	0806T	0807T	0808T	0809T	0810T	0814T	0815T	0816T	0817T
0818T	0819T	0826T	0827T	0828T	0829T	0830T	0831T	0832T	0833T	0834T	0835T	0836T	0837T
0838T	0839T	0840T	0841T	0842T	0843T	0844T	0845T	0846T	0847T	0848T	0849T	0850T	0851T
0852T	0853T	0854T	0855T	0856T	0858T	0859T	0860T	0864T	33542	33548	A2001	A2002	A2004
A2005	A2006	A2007	A2008	A2009	A2010	A2011	A2012	A2013	A2014	A2015	A2016	A2017	A2018
A2019	A2020	A2021	A2022	A2023	A2024	A2025	A4335	A4337	A4541	A4542	A4560	A4575	A4638
A4639	A6000	A7049	A9272	A9292	C9790	C9792	E0218	E0221	E0231	E0232	E0236	E0492	E0493
E0530	E0711	E0732	E0733	E0734	E0735	E0762	E2120	E3000	G0252	G0255	G0282	G0341	G0342
G0343	G0428	G9147	H0047	J1817	J3490	J7030	J7040	J7050	K1007	K1016	K1017	K1018	K1019
K1028	K1029	K1030	K1035	L7900	L7902	L8605	L8608	L8701	L8702	Q1004	Q1005	Q4113	Q4114
Q4125	Q4139	Q4142	Q4143	Q4145	Q4149	Q4150	Q4162	Q4167	Q4171	Q4184	Q4185	Q4191	Q4192
Q4193	Q4194	Q4198	Q4200	Q4201	Q4202	Q4204	Q4206	Q4227	Q4229	Q4230	Q4231	Q4232	Q4233
Q4234	Q4235	Q4236	Q4237	Q4238	Q4239	Q4241	Q4242	Q4244	Q4245	Q4247	Q4248	Q4249	Q4250
Q4254	Q4255	Q4259	Q4260	Q4261	Q4262	Q4263	Q4264	Q4265	Q4266	Q4267	Q4268	Q4269	Q4270
Q4271	Q4279	Q4285	Q4286	Q4289	Q4290	Q4291	Q4292	Q4293	Q4294	Q4295	Q4296	Q4297	Q4298
Q4299	Q4300	Q4301	Q4302	Q4303	S8037	V5299	Q4299						



## Revision History

1/24/2024	<p><b><u>Codes Added and Removed:</u></b></p> <ul style="list-style-type: none"> <li>• <b>Commercial:</b> <ul style="list-style-type: none"> <li>○ <b>Added:</b> 58580, 0814T, 0815T, 0816T, 0817T, 0818T, 0819T, 0826T, 0827T, 0828T, 0829T, 0830T, 0831T, 0832T, 0833T, 0834T, 0835T, 0836T, 0837T, 0838T, 0839T, 0840T, 0841T, 0842T, 0843T, 0844T, 0845T, 0846T, 0847T, 0848T, 0849T, 0850T, 0851T, 0852T, 0853T, 0854T, 0855T, 0856T, 0858T, 0856T, 0858T, 0859T, 0860T, 0864T, 0014U, 0353U, 0354U A4541, A4542, E0492, E0493, E0530, E0732, E0733, E0734, E0735, E3000, Q4279, Q4289, Q4290, Q4291, Q4292, Q4293, Q4294, Q4295, Q4296, Q4297, Q4298, Q4299, Q4300, Q4301, Q4302, Q4303</li> <li>○ <b>Removed:</b> 21499, 76120, 76125, 20985, S2900, 0013U</li> </ul> </li> <li>• <b>Medicare:</b> <ul style="list-style-type: none"> <li>○ <b>Added:</b> 0814T, 0815T, 0816T, 0817T, 0818T, 0819T, 0826T, 0827T, 0828T, 0829T, 0830T, 0831T, 0832T, 0833T, 0834T, 0835T, 0836T, 0837T, 0838T, 0839T, 0840T, 0841T, 0842T, 0843T, 0844T, 0845T, 0846T, 0847T, 0848T, 0849T, 0850T, 0851T, 0852T, 0853T, 0854T, 0855T, 0856T, 0858T, 0856T, 0858T, 0859T, 0860T, 0864T, 0014U, 0353U, 0354U A4541, A4542, E0492, E0493, E0530, E0732, E0733, E0734, E0735, E3000, Q4279, Q4289, Q4290, Q4291, Q4292, Q4293, Q4294, Q4295, Q4296, Q4297, Q4298, Q4299, Q4300, Q4301, Q4302, Q4303</li> </ul> </li> </ul>
10/31/2023	<p><b><u>Codes Added and Removed:</u></b></p> <ul style="list-style-type: none"> <li>• <b>Commercial:</b> <ul style="list-style-type: none"> <li>○ <b>Added:</b> K1028, K1029, S8037</li> </ul> </li> <li>• <b>Medicare:</b> <ul style="list-style-type: none"> <li>○ <b>Added:</b> A2022, A2023, A2024, A2025, A9292, A9272, C9790, C9792, Q4285, Q4286, 0406U</li> <li>○ <b>Removed:</b> 20560, 20561</li> </ul> </li> </ul>
10/1/2023	<p><b><u>Codes Added and Removed:</u></b></p> <ul style="list-style-type: none"> <li>• <b>Commercial:</b> <ul style="list-style-type: none"> <li>○ <b>Added:</b> 0406U, 97607, 97608, A2022, A2023, A2024, A2025, A9292, C9790, C9791, C9792, E0490, E0491, K1036, Q4285, Q4286</li> <li>○ <b>Removed:</b> 0324U, 0325U,</li> </ul> </li> <li>• <b>Medicare:</b> <ul style="list-style-type: none"> <li>○ <b>Added:</b> A2022, A2023, A2024, A2025, A9292, A9272, C9790, C9792, Q4285, Q4286, 0406U</li> <li>○ <b>Removed:</b> 20560, 20561</li> </ul> </li> </ul>
7/19/2023	<p><b><u>Codes Added and Removed:</u></b></p> <ul style="list-style-type: none"> <li>• <b>Commercial:</b> <ul style="list-style-type: none"> <li>○ <b>Added:</b> 43290, 43291, 0508T, 0387U, 0389U, 0390U, 0391U, 0393U, 0394U, 0395U, 0396U, 0398U, 0399U, 0101U, 0791T, 0793T, 0794T, 0795T, 0796T, 0797T, 0798T, 0799T, 0800T, 0801T, 0802T, 0803T, 0804T, 0805T, 0806T, 0807T, 0808T, 0809T, 0810T</li> <li>○ <b>Removed:</b> 0163T, 82948</li> </ul> </li> <li>• <b>Medicare:</b> <ul style="list-style-type: none"> <li>○ <b>Added:</b> 0387U, 0393U, 0394U, 0395U, 0399U, 0791T, 0793T, 0794T, 0795T, 0796T, 0797T, 0798T, 0799T, 0800T, 0801T, 0802T, 0803T, 0804T, 0805T, 0806T, 0807T, 0808T, 0809T, 0810T</li> <li>○ <b>Removed:</b> 0163T</li> </ul> </li> </ul>

5/31/2023	<p><b><u>Codes Removed:</u></b></p> <ul style="list-style-type: none"> <li>• <b>Commercial:</b> <ul style="list-style-type: none"> <li>○ <b>Removed:</b> 36473, 36474, 37500, 37799, 95803</li> </ul> </li> </ul>
4/28/2023	<p><b><u>Codes Added and Removed:</u></b></p> <ul style="list-style-type: none"> <li>• <b>Commercial:</b> <ul style="list-style-type: none"> <li>○ <b>Added:</b> A2011, A2012</li> <li>○ <b>Removed:</b> 47399, 64405, 81200, 81205, 81209, 81242, 81244, 81250, 81251, 81255, 81257, 81260, 81271, 81274, 81290, 81330, 81361, 81362, 81363, 81364, 81400, 81402, 81407, 81408, 81443, 81435, 82397, 89253, 96365, 96366, L8680, L8682, L8683, S3854</li> </ul> </li> <li>• <b>Medicare:</b> <ul style="list-style-type: none"> <li>○ <b>Added:</b> 0596T, 0597T, A2011, A2012</li> <li>○ <b>Removed:</b> 47399, 64405, 64628, 81200, 81205, 81209, 81242, 81244, 81250, 81251, 81255, 81257, 81260, 81271, 81274, 81290, 81330, 81361, 81362, 81363, 81364, 81400, 81402, 81407, 81408, 81443, 81435, 82397, 89253, 96365, 96366, L8680, L8682, L8683, S3854</li> </ul> </li> </ul>
3/31/2023	<p><b><u>Codes Added and Removed:</u></b></p> <ul style="list-style-type: none"> <li>• <b>Commercial:</b> <ul style="list-style-type: none"> <li>○ <b>Added:</b> 0364U, 0365U, 0366U, 0367U, 0370U, 0371U, 0372U, 0373U, 0374U, 0375U, 0376U, 0377U, 0378U, 0381U, 0382U, 0383U, 0384U, 0385U, A2014, A2015, A2016, A2017, A2018, A2019, A2020, A2021, A7049, E0711, G0281, G0329, K1035, Q4265, Q4266, Q4267, Q4268, Q4269, Q4270, Q4271</li> <li>○ <b>Removed:</b> 0105U, 81220, 81221, 81222, 81223, 81224, 85576, K1006, Q4158, Q4176, Q4179, Q4228</li> </ul> </li> <li>• <b>Medicare:</b> <ul style="list-style-type: none"> <li>○ <b>Added:</b> 0365U, 0366U, 0367U, 0370U, 0371U, 0372U, 0373U, 0374U, 0375U, 0376U, 0377U, 0378U, 0381U, 0382U, 0383U, 0384U, 0385U, A2014, A2015, A2016, A2017, A2018, A2019, A2020, A2021, A4560, A7049, E0711, K1035, Q4265, Q4266, Q4267, Q4268, Q4269, Q4270, Q4271</li> <li>○ <b>Removed:</b> 0105U, 81220, 81221, 81222, 81223, 81224, 85576, K1006, Q4158, Q4176, Q4179, Q4228</li> </ul> </li> </ul>
2/17/2023	<p><b><u>Codes Added and Removed:</u></b></p> <ul style="list-style-type: none"> <li>• <b>Commercial:</b> <ul style="list-style-type: none"> <li>○ Added: 0721T</li> <li>○ Removed: 0202U, 43270, 81238, Q4130, Q4189, Q4240, Q4246</li> </ul> </li> <li>• <b>Medicare:</b> <ul style="list-style-type: none"> <li>○ Removed: 43270, 0046U, 0049U, 0050U, 0202U, Q4130, Q4189, Q4240, Q4246</li> </ul> </li> </ul>
12/29/2022	<p><b><u>Codes added that will be effective 1/1/2023:</u></b></p> <ul style="list-style-type: none"> <li>• Commercial and Medicare: <ul style="list-style-type: none"> <li>○ 0357U, 0358U, 0359U, 0360U, 0361U, 0738T, 0739T, 0740T, 0741T, 0745T, 0746T, 0747T, 0748T, 0749T, 0750T, 0751T, 0752T, 0753T, 0754T, 0755T, 0756T, 0757T, 0758T, 0759T, 0760T, 0761T, 0762T, 0763T, 0764T, 0765T, 0766T, 0767T, 0768T, 0769T, 0770T, 0771T, 0772T, 0773T, 0774T, 0775T, 0776T, 0777T, 0778T, 0779T, 0781T, 0782T, 0783T</li> </ul> </li> <li>• Commercial: <ul style="list-style-type: none"> <li>○ 0744T, 30469</li> </ul> </li> <li>• Medicare: <ul style="list-style-type: none"> <li>○ 22860, 0743T</li> </ul> </li> </ul> <p><b><u>Code added:</u></b></p> <ul style="list-style-type: none"> <li>• Commercial:</li> </ul>

	<ul style="list-style-type: none"> <li>○ 0047U – Commercial coverage reversed</li> </ul> <p><b><u>Codes removed:</u></b></p> <ul style="list-style-type: none"> <li>• Commercial: <ul style="list-style-type: none"> <li>○ 88360 – Covered for Commercial</li> <li>○ 0500T – Covered for preventive services</li> </ul> </li> <li>• Medicare: <ul style="list-style-type: none"> <li>○ 0047U - Covered for Medicare</li> <li>○ 0089U – Covered for Medicare</li> <li>○ 81541 – Covered for Medicare</li> <li>○ 88360 - Covered for Medicare</li> </ul> </li> </ul> <p><b><u>Removed the Medicaid table</u></b></p>
10/31/2022	<p><b><u>Codes added that will be effective 2/15/2023:</u></b></p> <ul style="list-style-type: none"> <li>• Commercial, Medicare, and Medicaid: <ul style="list-style-type: none"> <li>○ 81541, 0003U, 0008U, 0009U, 0013U 0014U, 0019U, 0029U, 0030U, 0032U, 0033U, 0047U, 0053U, 0055U, 0067U, 0069U, 0078U, 0089U, 0109U, 0112U, 0113U, 0114U, 0118U, 0120U, 0152U, 0153U, 0156U, 0169U, 0170U, 0175U, 0203U, 0204U, 0205U, 0220U, 0228U, 0229U, 0252U, 0253U, 0254U, 0258U, 0260U, 0262U, 0264U, 0266U, 0285U, 0286U, 0288U, 0289U, 0290U, 0291U, 0292U, 0293U, 0294U, 0296U, 0297U, 0298U, 0299U, 0300U, 0306U, 0307U, 0311U, 0313U, 0314U, 0315U, 0317U, 0318U, 0319U, 0320U, 0321U, 0323U, 0329U, 0330U, U0331U, 0353U, 0354U, A4596</li> </ul> </li> </ul>
10/20/2022	<p><b><u>Commercial, Medicare, and Medicaid Codes added effective 1/1/2023:</u></b></p> <ul style="list-style-type: none"> <li>▪ Removed deleted CPT codes: 0012U, 0013U, and 0013U</li> <li>▪ Added CPT codes: A4596, 0353U, and 0354U</li> </ul>
10/17/2022	<ul style="list-style-type: none"> <li>▪ Added CPT code tables for Commercial, Medicare, and Medicaid LOBs.</li> </ul>