

All Other Appeals

All other appeals are for services not in an inpatient hospital setting that Molina was not able to approve. Sometimes, the clinical information sent to us for these services do not meet medical necessity on initial review. Texas Department of Insurance rules require plans to decide within 24 hours of the request for inpatient authorization. We must decide anytime we have any information such as the member's name, admit date and diagnosis. When services are denied, a member or provider have the right to appeal. Appeals allow time to provide more clinical information. With complete clinical information, we can usually approve the services. These are considered an appeal overturn. When the denial decision is not overturned, it is considered upheld. Due to tight turnaround times for inpatient service authorizations, Molina does see a higher inpatient overturn rate. Please refer to [Pre-Authorization Statistic Abbreviation Guide](#) to view the descriptions of the APS abbreviations.

Service Code	Service Code Description	APS Service Code Group Description	Number of Appeals Upheld	Number of Appeals Overturned	Total Appeals
0016U	ONC HMTLMF NEO RNA BCR/ABL1 BLD/BNE MARROW		0	1	1
0037U	TRGT GEN SEQ ALYS SLD ORGN NEO DNA 324 GENES		3	0	3
0047U	ONC PRST8 MRNA GEN XPRS PRFL 17 GEN ALG RSK SCOR		6	0	6
00811	ANESTHESIA LOWER INTST ENDOSCOPIC PX NOS		0	2	2
0170	Nursery - General		0	1	1
0172	Nursery - Newborn - Level II		0	1	1
0191T	ANT SEGMENT INSERTION DRAINAGE W/O RESERVOIR INT		1	0	1
0275T	PERC LAMINO-/LAMINECTOMY INDIR IMAG GUIDE LUMBAR		0	1	1
0295T	EXT ECG GT 48HR TO 21 DAY RCRD SCAN ANLYS REP R and I		1	1	2
0296T	EXT ECG GT 48HR TO 21 DAY RCRD W/CONNECT INTL RCRD		1	0	1
0298T	EXT ECG GT 48HR TO 21 DAY REVIEW AND INTERPRETATN		1	0	1
0379T	VISUAL FIELD ASSESSMENT TECH SUPPORT W/INSTRUCT		1	0	1
10005	FINE NEEDLE ASPIRATION BX W/US GDN 1ST LESION		0	1	1
11042	DEBRIDEMENT SUBCUTANEOUS TISSUE 20 SQ CM OR LT		0	3	3
11043	DEBRIDEMENT MUSCLE and FASCIA 20 SQ CM OR LT		0	1	1
11044	DEBRIDEMENT BONE MUSCLE and /FASCIA 20 SQ CM OR LT		0	1	1
11045	DBRDMT SUBCUTANEOUS TISSUE EA ADDL 20 SQ CM		0	2	2
11046	DEBRIDEMENT MUSCLE and /FASCIA EA ADDL 20 SQ CM		0	1	1
11402	EXC B9 LESION MRGN XCP SK TG T/A/L 1.1-2.0 CM		0	1	1
11970	REPLACEMENT TISSUE EXPANDER W/PERMANENT IMPLANT		0	1	1
11971	REMOVAL TISSUE EXPANDER W/O INSERTION IMPLANT		0	1	1
12031	REPAIR INTERMEDIATE S/A/T/E 2.5 CM OR LT		0	1	1
13101	REPAIR COMPLEX TRUNK 2.6-7.5 CM		0	1	1
13102	REPAIR COMPLEX TRUNK EACH ADDITIONAL 5 CM OR LT		0	1	1
14301	ADJNT TIS TRNSFR/REARGMT ANY AREA 30.1-60 SQ CM		0	1	1
14302	ADJT TIS TRNSFR/REARGMT DEFEC EA ADDL 30 SQCM		0	1	1
15120	SPLIT AGRFT F/S/N/H/F/G/M/D GT 1ST 100 CM OR LT /1 PCT		1	0	1
15220	FTH/GFT FREE W/DIRECT CLOSURE S/A/L 20 CM OR LT		1	0	1
15271	APP SKN SUB GRFT T/A/L AREA/100SQ CM OR LT 1ST 25		0	1	1
15272	APP SKN SUB GRFT T/A/L AREA/100SQ CM EA ADL 25SC		0	1	1
15733	MUSC MYOQ/FSCQ FLAP HEAD and NECK W/NAMED VASC PEDCL		0	1	1
15757	FREE SKIN FLAP W/MICROVASCULAR ANASTOMOSIS		1	0	1
15770	GRAFT DERMA-FAT-FASCIA		0	1	1
15777	IMPLNT BIO IMPLNT FOR SOFT TISSUE REINFORCEMENT		0	1	1
15823	BLEPHAROPLASTY UPPER EYELID W/EXCESSIVE SKIN		0	1	1
15860	IV INJECTION TEST VASCULAR FLOW FLAP/GRAFT		0	1	1
17106	DESTRUCTION CUTANEOUS VASC PROLIFERATIVE LT 10CM		1	0	1
17107	DSTRJ CUTANEOUS VASCULAR LESIONS 10.0-50.0 SQ CM		1	0	1

17108	DSTRJ CUTANEOUS VASCULAR LESIONS GT 50.0 SQ CM	1	0	1
17311	MOHS MICROGRAPHIC H/N/H/F/G 1ST STAGE 5 BLOCKS	0	1	1
17312	MOHS MICROGRAPHIC H/N/H/F/G EACH ADDL STAGE	0	1	1
19342	INSJ/RPLCMT BREAST IMPLANT SEP DAY MASTECTOMY	0	1	1
19350	NIPPLE/AREOLA RECONSTRUCTION	0	1	1
19370	REVISION PERI-IMPLANT CAPSULE BREAST	0	1	1
19371	PERI-IMPLANT CAPSULECTOMY BREAST COMPLETE	0	1	1
19380	REVISION OF RECONSTRUCTED BREAST	0	1	1
20900	BONE GRAFT ANY DONOR AREA MINOR/SMALL	0	1	1
20930	ALLOGRAFT FOR SPINE SURGERY ONLY MORSELIZED	2	2	4
20936	AUTOGRAFT SPINE SURGERY LOCAL FROM SAME INCISION	1	0	1
20937	AUTOGRAFT SPINE SURGERY MORSELIZED SEP INCISION	2	0	2
20939	BONE MARROW ASPIRATION BONE GRFG SPI SURG ONLY	1	0	1
21235	GRAFT EAR CRTLG AUTOGENOUS NOSE/EAR	0	1	1
21299	UNLISTED CRANIOFACIAL AND MAXILLOFACIAL PROCEDURE	0	1	1
21552	EXC TUMOR SOFT TIS NECK/ANT THORAX SUBQ 3 CM OR GT	0	1	1
21554	EXC TUMOR SOFT TISSUE NECK/THORAX SUBFASC 5 CM OR GT	0	1	1
21932	EXC TUMOR SOFT TISS BACK/FLANK SUBFASCIAL LT 5CM	0	1	1
22551	ARTHRD ANT INTERBODY DECOMPRESS CERVICAL BELW C2	3	1	4
22552	ARTHRD ANT INTERDY CERVCL BELW C2 EA ADDL NTRSPC	3	1	4
22554	ARTHRD ANT MIN DISCECT INTERBODY CERV BELOW C2	0	1	1
22585	ARTHRODESIS ANTERIOR INTERBODY EA ADDL NTRSPC	0	1	1
22600	ARTHRODESIS PST/PSTLAT CERVICAL BELW C2 SGM	0	2	2
22614	ARTHRODESIS POSTERIOR/POSTEROLATERAL EA ADDL	0	2	2
22830	EXPLORATION SPINAL FUSION	1	0	1
22842	POSTERIOR SEGMENTAL INSTRUMENTATION 3-6 VRT SEG	0	1	1
22845	ANTERIOR INSTRUMENTATION 2-3 VERTEBRAL SEGMENTS	2	1	3
22846	ANTERIOR INSTRUMENTATION 4-7 VERTEBRAL SEGMENTS	1	1	2
22849	REINSERTION SPINAL FIXATION DEVICE	1	0	1
22853	INSJ BIOMCHN DEV INTERVERTEBRAL DSC SPC W/ARTHRD	4	1	5
22854	INSJ BIOMCHN DEV VRT CORPECTOMY DEFECT W/ARTHRD	1	1	2
23455	CAPSULORRHAPHY ANTERIOR W/LABRAL REPAIR	0	1	1
25000	INCISION EXTENSOR TENDON SHEATH WRIST	1	0	1
26055	TENDON SHEATH INCISION	0	1	1
27096	INJECT SI JOINT ARTHRGPRHY and /ANES/STEROID W/IMA	1	0	1
27130	ARTHRP ACETBLR/PROX FEM PROSTC AGRFT/ALGRFT	2	1	3
27339	EXC TUMOR SOFT TISSUE THIGH/KNEE SUBFASC 5 CM OR GT	1	0	1
27447	ARTHRP KNE CONDYLE AND PLATU MEDIAL AND LAT COMPARTMENTS	0	5	5
27630	EXCISION LESION TENDON SHEATH/CAPSULE LEG and /ANK	0	1	1
27665	RPR EXTENSOR TENDON LEG SECONDRY W/WO GRAFT EACH	0	1	1
27675	RPR DISLOC PERONEAL TENDON W/O FIBULAR OSTEOTOMY	0	1	1
27698	REPAIR SECONDARY DISRUPTED LIGAMENT ANKLE COLTRL	0	1	1
28100	EXCISION/CURETTAGE CYST/TUMOR TALUS/CALCANEUS	0	1	1
28120	PARTIAL EXCISION BONE TALUS/CALCANEUS	0	1	1
28122	PRTL EXC B1 TARSAL/METAR B1 XCP TALUS/CALCANEUS	0	1	1
28208	REPAIR TENDON EXTENSOR FOOT 1/2 EACH TENDON	0	1	1
28292	CORRJ HALLUX VALGUS W/SESMDC W/RESCJ PROX PHAL	0	2	2
28295	CORRJ HALLUX VALGUS W/SESMDC W/PROX METAR OSTEOT	0	1	1
28296	CORRJ HALLUX VALGUS W/SESMDC W/DIST METAR OSTEOT	0	1	1

28300	OSTEOTOMY CALCANEUS W/WO INTERNAL FIXATION	1	0	1
28304	OSTEOTOMY TARSAL BONES OTH/THN CALCANEUS/TALUS	1	0	1
28740	ARTHRODESIS MIDTARSOMETATARSAL SINGLE JOINT	1	0	1
28750	ARTHRODESIS GREAT TOE METATARSOPHALANGEAL JOINT	0	1	1
29822	SURGICAL ARTHROSCOPY SHOULDER LMTD DBRDMT 1/2	0	1	1
29823	SURGICAL ARTHROSCOPY SHOULDER XTNSV DBRDMT 3 Plus	0	2	2
29825	SURGICAL ARTHROSCOPY SHOULDER W/LSS and RESCJ ADS	0	1	1
29826	SURGICAL ARTHROSCOPY SHO W/CORACOACRM LIGM RLS	0	2	2
29827	SURGICAL ARTHROSCOPY SHOULDER W/ROTATOR CUFF RPR	0	2	2
29874	ARTHROSCOPY KNEE REMOVAL LOOSE/FOREIGN BODY	0	1	1
29875	ARTHROSCOPY KNEE SYNOVECTOMY LIMITED SPX	0	2	2
29876	ARTHROSCOPY KNEE SYNOVECTOMY 2 OR GT COMPARTMENTS	0	6	6
29877	ARTHRS KNEE DEBRIDEMENT/SHAVING ARTCLR CRTLG	0	3	3
29879	ARTHRS KNEE ABRASION ARTHRP/MLT DRLG/MICROFX	0	2	2
29880	ARTHRS KNEE W/MENISCECTOMY MED and LAT W/SHAVING	0	3	3
29881	ARTHRS KNE SURG W/MENISCECTOMY MED/LAT W/SHVG	2	8	10
29882	ARTHROSCOPY KNEE W/MENISCUS RPR MEDIAL/LATERAL	0	2	2
29883	ARTHROSCOPY KNEE W/MENISCUS RPR MEDIAL and LATERAL	0	1	1
29887	ARTHRS KNEE DRLG OSTEOCHOND DISSECANS INT FIXJ	1	0	1
29888	ARTHRS AIDED ANT CRUCIATE LIGM RPR/AGMNTJ/RCNSTJ	0	5	5
29898	ARTHROSCOPY ANKLE SURGICAL DEBRIDEMENT EXTENSIVE	0	1	1
29999	UNLISTED PROCEDURE ARTHROSCOPY	0	1	1
30140	SUBMUCOUS RESCJ INFERIOR TURBINATE PRTL/COMPL	0	2	2
30520	SEPTOPLASTY/SUBMUCOUS RESEJ W/WO CARTILAGE GRF	0	3	3
31541	LARGSC EXC TUM and /STRPG CORDS/EPIGL MCRSCP/TLSCP	0	2	2
31622	BRNCHSC INCL FLUOR GDNCE DX W/CELL WASHG SPX	0	1	1
31630	BRNCHSC W/TRACHEAL/BRONCHIAL DILAT/CLSD RDCTJ FX	0	2	2
32480	RMVL LUNG OTHER THAN PNEUMONECTOMY 1 LOBE LOBECT	0	1	1
32608	THORACOSCOPY W/DX BX OF LUNG NODULES UNILATRL	0	1	1
32663	THORACOSCOPY W/LOBECTOMY SINGLE LOBE	0	1	1
35761	EXPL N FLWD SURG RPR W WO LYSIS OTHER ARTERY	0	2	2
36011	SLCTV CATH PLMT VEN SYS 1ST ORDER BRANCH	0	1	1
36224	SLCTV CATH INTRNL CAROTID ART ANGIO INTRCRNL ART	0	1	1
36415	COLLECTION VENOUS BLOOD VENIPUNCTURE	0	3	3
36430	TRANSFUSION BLOOD/BLOOD COMPONENTS	0	1	1
36471	INJECTION SCLEROSANT MULTIPLE INCMPTNT VEINS	0	2	2
36478	ENDOVEN ABLTJ INCMPTNT VEIN XTR LASER 1ST VEIN	0	1	1
37238	OPEN/PERQ PLACEMENT INTRAVASCULAR STENT SAME 1ST	0	1	1
38220	DIAGNOSTIC BONE MARROW ASPIRATIONS	0	2	2
38221	DIAGNOSTIC BONE MARROW BIOPSIES	0	3	3
38222	DIAGNOSTIC BONE MARROW BIOPSIES AND ASPIRATIONS	0	3	3
38241	TRNSPLJ AUTOLOGOUS HEMATOPOIETIC CELLS PER DONOR	0	1	1
38570	LAPS SURG RETROPERITONEAL LYMPH NODE BX 1/MLT	1	0	1
38571	LAPS SURG BILATERAL TOTAL PELVIC LMPHADECTOMY	2	0	2
38572	LAPS BI TOT PEL LMPHADEC AND PRI-AORTIC LYMPH BX 1	1	0	1
38724	CERVICAL LYMPHADEC MODIFIED RADICAL NECK DSJ	1	0	1
38770	PEL LMPHADEC W/XTRNL ILIAC HYPOGSTR and OBTURATOR	0	1	1
40899	UNLISTED PROCEDURE VESTIBULE MOUTH	0	1	1
41116	EXCISION LESION FLOOR MOUTH	1	0	1

41899	UNLISTED PROCEDURE DENTOALVEOLAR STRUCTURES	0	1	1
43237	ESOPHAGOGASTRODUODENOSCOPY US SCOPE W/ADJ STRXRS	2	1	3
43238	EGD INTRMURAL US NEEDLE ASPIRATE/BIOPSY ESOPHAGS	0	2	2
43239	EGD TRANSORAL BIOPSY SINGLE/MULTIPLE	1	3	4
43281	LAPS RPR PARAESPHGL HRNA INCL FUNDPLSTY W/O MESH	1	0	1
43775	LAPS GSTRC RSTRICTIV PX LONGITUDINAL GASTRECTOMY	1	0	1
43860	REVJ GSTR/JJ ANAST W/RCNSTJ W/O VGTMY	0	1	1
44120	ENTRC RESCJ SMALL INTESTINE 1 RESCJ AND ANAST	0	1	1
44121	ENTERECTOMY RESCJ SMALL INTESTINE EA RESCJ AND ANA	0	1	1
44204	LAPAROSCOPY COLECTOMY PARTIAL W/ANASTOMOSIS	0	2	2
44955	APPENDEC INDICATED PURPOSE OTH MAJOR PX NOT SPX	0	1	1
44970	LAPAROSCOPIC APPENDECTOMY	0	1	1
45330	SIGMOIDOSCOPY FLX DX W/COLLJ SPEC BR/WA IF PFRMD	0	1	1
45378	COLONOSCOPY FLX DX W/COLLJ SPEC WHEN PFRMD	1	4	5
45380	COLONOSCOPY W/BIOPSY SINGLE/MULTIPLE	0	3	3
45381	COLSC FLX WITH DIRECTED SUBMUCOSAL NJX ANY SBST	0	1	1
45385	COLSC FLX W/RMVL OF TUMOR POLYP LESION SNARE TQ	0	1	1
45388	COLONOSCOPY FLX ABLATION TUMOR POLYP/OTHER LES	0	1	1
47135	LVR ALTRNSPLJ ORTHOTOPIC PRTL/WHL DON ANY AGE	2	1	3
47379	UNLIS LAPAROSCOPIC PROCEDURE LIVER	0	1	1
47562	LAPAROSCOPY SURG CHOLECYSTECTOMY	0	2	2
49205	EXC/DESTRUCTION OPEN ABDOMINAL TUMORS GT 10.0 CM	0	1	1
49255	OMNTC EPIPLOECTOMY RESCJ OMENTUM SPX	0	1	1
49329	UNLISTED LAPAROSCOPIC PX ABD PERTONEUM AND OMENTUM	0	1	1
49653	LAP RPR HRNA XCPT INCAL/INGUN NCRC8/STRANGULATED	1	0	1
49654	LAPAROSCOPY REPAIR INCISIONAL HERNIA REDUCIBLE	1	0	1
49905	OMENTAL FLAP INTRA-ABDOMINAL	0	1	1
50546	LAPAROSCOPY NEPHRECTOMY W/PARTIAL URETERECT	1	0	1
50590	LITHOTRIPSY XTRCORP SHOCK WAVE	0	4	4
51040	CYSTOSTOMY CYSTOTOMY W/DRAINAGE	0	1	1
51102	ASPIRATION BLADDER INSERT SUPRAPUBIC CATHETER	1	0	1
51700	BLDR IRRIGATION SMPL LAVAGE and /INSTLJ	0	2	2
51840	ANT VESICOURETHROPEXY/URETHROPEXY SMPL	0	1	1
52000	CYSTOURETHROSCOPY	0	5	5
52260	CYSTOURETHROSCOPY W/DIL BLADDER GENERAL ANESTH	0	2	2
52287	CYSTOURETHROSCOPY INJ CHEMODENERVATION BLADDER	0	2	2
52441	CYSTO INSERTION TRANSPROSTATIC IMPLANT SINGLE	1	0	1
52442	CYSTO INSERTION TRANSPROSTATIC IMPLANT EA ADDL	1	0	1
55250	VASECTOMY UNI/BI SPX W/POSTOP SEMEN EXAMS	0	1	1
55840	PROSTATECTOMY RETROPUBIC W/WO NERVE SPARING	0	1	1
55845	PROSTECT RETROPUB RAD W/WO NRV SPAR and BI PLV LYM	1	0	1
55866	LAPS PROSTECT RETROPUBIC RAD W/NRV SPARING ROBOT	2	0	2
57240	ANTERIOR COLPORRAPHY RPR CYSTOCELE W/CYSTO	0	3	3
57250	POST COLPORRHAPHY RECTOCELE W/WO PERINEORRHAPHY	0	1	1
57268	REPAIR ENTEROCELE VAGINAL APPROACH SPX	0	1	1
57283	COLPOPEXY VAGINAL INTRAPERITONEAL APPROACH	0	2	2
57288	SLING OPERATION STRESS INCONTINENCE	0	4	4
58100	ENDOMETRIAL BX W/WO ENDOCERVIX BX W/O DILAT SPX	0	1	1
58150	TOTAL ABDOMINAL HYSTERECT W/WO RMVL TUBE OVARY	4	3	7

58260	VAGINAL HYSTERECTOMY UTERUS 250 GM OR LT	0	2	2
58262	VAG HYST 250 GM OR LT W/RMVL TUBE and /OVARY	0	1	1
58542	LAPS SUPRACRV HYSTERECT 250 GM OR LT RMVL TUBE/OVAR	0	1	1
58550	LAPS VAGINAL HYSTERECTOMY UTERUS 250 GM OR LT	0	1	1
58552	LAPS W/VAG HYSTERECT 250 GM/ and RMVL TUBE and /OVARIES	1	6	7
58571	LAPS TOTAL HYSTERECT 250 GM OR LT W/RMVL TUBE/OVARY	1	9	10
58573	LAPAROSCOPY TOT HYSTERECTOMY GT 250 G W/TUBE/OVAR	0	2	2
58661	LAPAROSCOPY W/RMVL ADNEXAL STRUCTURES	2	4	6
58662	LAPS FULG/EXC OVARY VISCERA/PERITONEAL SURFACE	0	4	4
58670	LAPAROSCOPY FULGURATION OVIDUCTS	1	0	1
58700	SALPINGECTOMY COMPLETE/PARTIAL UNI/BI SPX	0	2	2
58720	SALPINGO-OOPHORECTOMY COMPL/PRTL UNI/BI SPX	0	1	1
58925	OVARIAN CYSTECTOMY UNI/BI	0	2	2
58940	OOPHORECTOMY PARTIAL/TOTAL UNI/BI	0	2	2
58951	RESCJ PRIM PRTL MAL W/BSO and OMNTC TAH and LMPHAD	0	1	1
58953	BSO W/OMENECTOMY TAH and RAD DEBULKING DISSECTION	0	1	1
58960	LAPT STG/RESTG OVARIAN TUBAL/PRIM MAL 2ND LOOK	0	1	1
59025	FETAL NONSTRESS TEST	0	1	1
59410	VAGINAL DELIVERY ONLY W/POSTPARTUM CARE	0	1	1
59430	POSTPARTUM CARE ONLY SEPARATE PROCEDURE	0	1	1
60100	BIOPSY THYROID PERCUTANEOUS CORE NEEDLE	0	1	1
61711	ANAST ARTL EXTRACRANIAL-INTRACRANIAL ARTERIES	0	1	1
61860	CRNEC/CRX IMPLTJ NSTIM ELTRD CERE CORTICAL	0	2	2
61886	INSJ/RPLCMT CRANIAL NEUROSITM GENER 2 OR GT ELTRDS	0	2	2
62321	NJX DX/THER SBST INTRLMNR CRV/THRC W/IMG GDN	0	1	1
62323	NJX DX/THER SBST INTRLMNR LMBR/SAC W/IMG GDN	1	1	2
63030	LAMNOTMY INCL W/DCMPRSN NRV ROOT 1 INTRSPC LUMBR	0	2	2
63035	LAMNOTMY W/DCMPRSN NRV EACH ADDL CRVCL/LMBR	0	1	1
63042	LAMOT PRTL FFD EXC DISC REEXPL 1 NTRSPC LUMBAR	1	0	1
63045	LAM FACETECTOMY AND FORAMOTOMY 1 SEGMENT CERVICAL	0	1	1
63048	LAM FACETECTOMY and FORAMTOMY 1 SGM EA CRV THRC/LMBR	0	1	1
63056	TRANSPEDICULAR DCMPRN SPINAL CORD 1 SEG LUMBAR	0	1	1
63057	TRANSPEDICULAR DCMPRN 1 SEG EA THORACIC/LUMBAR	0	1	1
63075	DISCECTOMY ANT DCMPRN CORD CERVICAL 1 NTRSPC	1	0	1
63076	DISCECTOMY ANT DCMPRN CORD CERVICAL EA NTRSPC	1	0	1
63081	VERTEBRAL CORPECTOMY ANT DCMPRN CERVICAL 1 SEG	1	1	2
63082	VERTEBRAL CORPECTOMY DCMPRN CERVICAL EA SEG	0	1	1
64450	INJECTION AA and /STRD OTHER PERIPHERAL NERVE/BRANCH	1	0	1
64479	NJX AA and /STRD TFRML EPI CERVICAL/THORACIC 1 LEVEL	0	1	1
64480	NJX AA and /STRD TFRML EPI CERVICAL/THORACIC EA ADDL	0	1	1
64483	NJX AA and /STRD TFRML EPI LUMBAR/SACRAL 1 LEVEL	2	10	12
64484	NJX AA and /STRD TFRML EPI LUMBAR/SACRAL EA ADDL	2	7	9
64490	NJX DX/THER AGT PVRT FACET JT CRV/THRC 1 LEVEL	3	2	5
64491	NJX DX/THER AGT PVRT FACET JT CRV/THRC 2ND LEVEL	3	2	5
64492	NJX DX/THER AGT PVRT FACET JT CRV/THRC 3 Plus LEVEL	1	1	2
64493	NJX DX/THER AGT PVRT FACET JT LMBR/SAC 1 LEVEL	9	6	15
64494	NJX DX/THER AGT PVRT FACET JT LMBR/SAC 2ND LEVEL	9	4	13
64495	NJX DX/THER AGT PVRT FACET JT LMBR/SAC 3 Plus LEVEL	6	0	6
64633	DSTR NROLYTC AGNT PARVERTEB FCT SNGL CRVCL/THORA	0	2	2

64634	DSTR NROLYTC AGNT PARVERTEB FCT ADDL CRVCL/THORA	0	2	2
64635	DSTR NROLYTC AGNT PARVERTEB FCT SNGL LMBR/SACRAL	1	3	4
64636	DSTR NROLYTC AGNT PARVERTEB FCT ADDL LMBR/SACRAL	1	3	4
64640	DSTRJ NEUROLYTIC AGENT OTHER PERIPHERAL NERVE	1	0	1
64886	NERVE GRAFT HEAD/NECK GT 4 CM	1	0	1
66682	SUTURE IRIS CILIARY BODY SPX RETRIEVAL SUTURE	0	1	1
66982	XCAPSL CTRC RMVL INSJ IO LENS PROSTH CPLX WO ECP	0	6	6
66984	XCAPSL CTRC RMVL INSJ IO LENS PROSTH W/O ECP	0	2	2
66986	EXCHANGE INTRAOCULAR LENS	0	1	1
67040	VTRECTOMY MCHNL PARS PLNA ENDOLASER PANRTA PC	0	1	1
67904	RPR BLEPHAROPTOSIS LEVATOR RESCJ/ADVMNT XTRNL	1	0	1
69990	MICROSURG TQS REQ USE OPERATING MICROSCOPE	2	1	3
70450	CT HEAD/BRAIN W/O CONTRAST MATERIAL	0	1	1
70460	CT HEAD/BRAIN W/CONTRAST MATERIAL	0	1	1
70496	CT ANGIOGRAPHY HEAD W/CONTRAST/NONCONTRAST	0	2	2
70498	CT ANGIOGRAPHY NECK W/CONTRAST/NONCONTRAST	0	1	1
70553	MRI BRAIN BRAIN STEM W/O W/CONTRAST MATERIAL	0	1	1
71046	RADIOLOGIC EXAM CHEST 2 VIEWS	0	1	1
71250	DIAGNOSTIC COMPUTED TOMOGRAPHY THORAX W/O CNTRST	0	2	2
71260	DIAGNOSTIC COMPUTED TOMOGRAPHY THORAX W/CONTRAST	0	1	1
71270	DIAGNOSTIC COMPUTED TOMOGRAPHY THORAX C-/C Plus	2	0	2
72141	MRI SPINAL CANAL CERVICAL W/O CONTRAST MATRL	0	1	1
72148	MRI SPINAL CANAL LUMBAR W/O CONTRAST MATERIAL	0	3	3
72149	MRI SPINAL CANAL LUMBAR W/CONTRAST MATERIAL	0	1	1
72197	MRI PELVIS W/O and W/CONTRAST MATERIAL	1	0	1
73080	RADEX ELBOW COMPLETE MINIMUM 3 VIEWS	1	0	1
73221	MRI ANY JT UPPER EXTREMITY W/O CONTRAST MATRL	1	1	2
74150	CT ABDOMEN W/O CONTRAST MATERIAL	0	1	1
74160	CT ABDOMEN W/CONTRAST MATERIAL	1	0	1
74170	CT ABDOMEN W/O and W/CONTRAST MATERIAL	1	2	3
74174	CT ANGIO ABD and PLVIS CNTRST MTRL W/WO CNTRST IMG	1	0	1
74176	CT ABDOMEN and PELVIS W/O CONTRAST MATERIAL	1	1	2
74177	CT ABDOMEN and PELVIS W/CONTRAST MATERIAL	0	2	2
74183	MRI ABDOMEN W/O and W/CONTRAST MATERIAL	1	0	1
75571	CT HEART NO CONTRAST QUANT EVAL CORONRY CALCIUM	2	0	2
76770	US RETROPERITONEAL REAL TIME W/IMAGE COMPLETE	0	1	1
76816	US PREG UTERUS REAL TIME F/U TRNSABDL PER FETUS	1	2	3
76818	FETAL BIOPHYSICAL PROFILE NON-STRESS TESTING	0	1	1
76942	US GUIDANCE NEEDLE PLACEMENT IMG S AND I	0	2	2
77049	MRI BREAST WITHOUT and WITH CONTRAST W/CAD BILATERAL	0	2	2
77080	DXA BONE DENSITY STUDY 1 OR GT SITES AXIAL SKEL	0	1	1
77334	TX DEVICES DESIGN AND CONSTRUCTION COMPLEX	1	6	7
77336	CONTINUING MEDICAL PHYSICS CONSLTJ PR WK	1	0	1
77373	STEREOTACTIC BODY RADIATION DELIVERY	1	0	1
77386	INTENSITY MODULATED RADIATION TX DLVR COMPLEX	1	0	1
78452	MYOCARDIAL SPECT MULTIPLE STUDIES	4	2	6
78815	PET IMAGING CT ATTENUATION SKULL BASE MID-THIGH	2	1	3
80050	GENERAL HEALTH PANEL	0	2	2
80051	Electrolyte panel	0	2	2

80053	COMPREHENSIVE METABOLIC PANEL		0	5	5
80197	DRUG SCREEN QUANTITATIVE TACROLIMUS		0	1	1
80307	DRUG TST PRSMV INSTRMNT CHEM ANALYZERS PR DATE		0	1	1
81002	URNLS DIP STICK/TABLET RGNT NON-AUTO W/O MICRSCP		1	1	2
81120	IDH1 COMMON VARIANTS		7	1	8
81121	IDH2 COMMON VARIANTS		7	1	8
81162	BRCA1 BRCA2 GENE ALYS FULL SEQ FULL DUP/DEL ALYS		10	8	18
81163	BRCA1 BRCA2 GENE ANALYSIS FULL SEQUENCE ANALYSIS		11	0	11
81170	ABL1 GENE ANALYSIS KINASE DOMAIN VARIANTS		11	0	11
81173	AR GENE ANALYSIS FULL GENE SEQUENCE		13	1	14
81200	ASPA GENE ANALYSIS COMMON VARIANTS		1	0	1
81201	APC GENE ANALYSIS FULL GENE SEQUENCE		8	1	9
81202	APC GENE ANALYSIS KNOWN FAMILIAL VARIANTS		12	0	12
81205	BCKDHB GENE ANALYSIS COMMON VARIANTS		1	0	1
81206	BCR/ABL1 MAJOR BREAKPNT QUALITATIVE/QUANTITATIVE		15	0	15
81207	BCR/ABL1 MINOR BREAKPNT QUALITATIVE/QUANTITATIVE		11	0	11
81208	BCR/ABL1 OTHER BREAKPNT QUALITATIVE/QUANTITATIVE		11	0	11
81209	BLM GENE ANALYSIS 2281DEL6INS7 VARIANT		1	0	1
81210	BRAF GENE ANALYSIS V600 VARIANT(S)		12	1	13
81212	BRCA1 BRCA 2 GEN ALYS 185DEL6AG 5385INSC 6174DELT		1	0	1
81219	CALR GENE ANALYSIS COMMON VARIANTS IN EXON 9		0	1	1
81220	CFTR GENE ANALYSIS COMMON VARIANTS		2	0	2
81235	EGFR GENE ANALYSIS COMMON VARIANTS		21	1	22
81242	FANCC GENE ANALYSIS COMMON VARIANT		1	0	1
81243	FMR1 ANALYSIS EVAL TO DETECT ABNORMAL ALLELES		3	0	3
81245	FLT3 GENE ANALYSIS INTERNAL TANDEM DUP VARIANTS		12	0	12
81250	G6PC GENE ANALYSIS COMMON VARIANTS		1	0	1
81251	GBA GLUCOSIDASE/BETA/ACID ANAL COMM VARIANTS		1	0	1
81255	HEXA GENE ANALYSIS COMMON VARIANTS		1	0	1
81257	HBA1/HBA2 GENE ANALYSIS COMMON DELETIONS/VARIANT		1	0	1
81260	IKBKAP GENE ANALYSIS COMMON VARIANTS		1	0	1
81265	COMPARATIVE ANAL STR MARKERS PATIENT AND COMP SPEC		0	1	1
81270	JAK2 GENE ANALYSIS P.VAL617PHE VARIANT		7	2	9
81272	KIT GENE ANALYSIS TARGETED SEQUENCE ANALYSIS		18	1	19
81275	KRAS GENE ANALYSIS VARIANTS IN EXON 2		20	1	21
81276	KRAS GENE ANALYSIS ADDITIONAL VARIANT(S)		20	1	21
81290	MCOLN1 MUCOLIPIN1 GENE ANALYSIS COMMON VARIANTS		1	0	1
81292	MLH1 GENE ANALYSIS FULL SEQUENCE ANALYSIS		18	0	18
81293	MLH1 GENE ANALYSIS KNOWN FAMILIAL VARIANTS		6	1	7
81294	MLH1 GENE ANALYSIS DUPLICATION/DELETION VARIANTS		3	0	3
81295	MSH2 GENE ANALYSIS FULL SEQUENCE ANALYSIS		17	0	17
81297	MSH2 GENE ANALYSIS DUPLICATION/DELETION VARIANTS		3	0	3
81298	MSH6 GENE ANALYSIS FULL SEQUENCE ANALYSIS		18	0	18
81300	MSH6 GENE ANALYSIS DUPLICATION/DELETION VARIA		3	0	3
81301	MICROSATELLITE INSTAB ANAL MISMATCH REPAIR DEF		16	1	17
81307	PALB2 GENE ANALYSIS FULL GENE SEQUENCE		4	0	4
81309	PIK3CA GENE ANALYSIS TARGETED SEQUENCE ANALYSIS		7	0	7
81310	NPM1 NUCLEOPHOSMIN GENE ANAL EXON 12 VARIANTS		7	1	8
81311	NRAS GENE ANALYSIS VARIANTS IN EXON 2 AND 3		20	1	21

81314	PDGFRA GENE ANALYS TARGETED SEQUENCE ANALYS	18	1	19
81315	PML/RARALPHA COMMON BREAKPOINTS QUAL/QUANT	1	0	1
81317	PMS2 GENE ANALYSIS FULL SEQUENCE	6	0	6
81319	PMS2 GENE ANALYSIS DUPLICATION/DELETION VARIANTS	3	0	3
81321	PTEN GENE ANALYSIS FULL SEQUENCE ANALYSIS	20	1	21
81329	SMN1 GENE ANALYSIS DOSAGE/DELET ALYS W/SMN2 ALYS	4	0	4
81330	SMPD1 GENE ANALYSIS COMMON VARIANTS	1	0	1
81345	TERT GENE ANALYSIS TARGETED SEQUENCE ANALYSIS	3	0	3
81400	MOLECULAR PATHOLOGY PROCEDURE LEVEL 1	8	1	9
81401	MOLECULAR PATHOLOGY PROCEDURE LEVEL 2	18	1	19
81402	MOLECULAR PATHOLOGY PROCEDURE LEVEL 3	7	2	9
81403	MOLECULAR PATHOLOGY PROCEDURE LEVEL 4	18	2	20
81404	MOLECULAR PATHOLOGY PROCEDURE LEVEL 5	25	1	26
81405	MOLECULAR PATHOLOGY PROCEDURE LEVEL 6	17	1	18
81406	MOLECULAR PATHOLOGY PROCEDURE LEVEL 7	27	6	33
81408	MOLECULAR PATHOLOGY PROCEDURE LEVEL 9	13	0	13
81422	FETAL CHROMOSOMAL MICRODELTAJ GENOMIC SEQ ANALYS	1	0	1
81455	GEN SEQ ANALYS SOL ORG/HEMTOLMPHOID NEO 51 OR GT GEN	6	0	6
81479	UNLISTED MOLECULAR PATHOLOGY PROCEDURE	27	4	31
81490	AUTOIMMUNE RHEUMATOID ARTHRITS ANALYS 12 BIOMRKRS	8	0	8
81519	ONCOLOGY BREAST MRNA GENE EXPRESSION 21 GENES	1	0	1
81525	ONCOLOGY COLON MRNA GENE EXPRESSION 12 GENES	1	0	1
81528	ONCOLOGY COLORECTAL SCREENING QUAN 10 DNA MARKRS	0	1	1
81541	ONC PRST8 MRNA GENE XPRSN PRFL RT-PCR 46 GENES	1	0	1
81545	ONCOLOGY THYROID GENE EXPRESSION 142 GENES	2	0	2
81551	ONC PRST8 PRMTR METHYLATION PRFL R-T PCR 3 GENES	2	0	2
82248	BILIRUBIN DIRECT	0	1	1
82784	ASSAY OF GAMMAGLOBULIN IGA IGD IGG IGM EACH	0	1	1
83615	LACTATE DEHYDROGENASE LDH	0	2	2
83735	ASSAY OF MAGNESIUM	0	2	2
84550	ASSAY OF BLOOD/URIC ACID	0	1	1
85025	BLOOD COUNT COMPLETE AUTO AND AUTO DIFRNTL WBC	0	3	3
85027	BLOOD COUNT COMPLETE AUTOMATED	0	2	2
85610	Prothrombin time	0	2	2
85652	SEDIMENTATION RATE RBC AUTOMATED	0	1	1
85730	THROMBOPLASTIN TIME PARTIAL PLASMA/WHOLE BLOOD	0	1	1
86140	C-reactive protein	0	1	1
86355	B CELLS TOTAL COUNT	0	1	1
86357	NATURAL KILLER CELLS TOTAL COUNT	0	1	1
86359	T CELLS TOTAL COUNT	0	1	1
86360	T CELLS ABSOLUTE CD4 AND CD8 COUNT RATIO	0	1	1
87486	IADNA CHLAMYDIA PNEUMONIAE AMPLIFIED PROBE TQ	0	1	1
87497	IADNA CYTOMEGALOVIRUS QUANTIFICATION	0	1	1
87581	IADNA MYCOPLSM PNEUMONIAE AMPLIFIED PROBE TQ	0	1	1
87633	IADNA RESPIRATRY PROBE AND REV TRNSCR 12-25 TARGET	0	1	1
87798	IADNA NOS AMPLIFIED PROBE TQ EACH ORGANISM	0	2	2
88184	FLOW CYTOMETRY CELL SURF MARKER TECHL ONLY 1ST	0	1	1
88185	FLOW CYTOMETRY CELL SURF MARKER TECHL ONLY EA	0	1	1
88305	LEVEL IV SURG PATHOLOGY GROSS AND MICROSCOPIC EXAM	0	1	1

88311	DECALCIFICATION PROCEDURE		0	1	1
88312	SPECIAL STAIN GROUP 1 MICROORGANISMS I AND R		0	1	1
88313	SPCL STN 2 I and R EXCPT MICROORG/ENZYME/IMCYT		0	1	1
88321	CONSLTJ AND REPRT SLIDES PREPARED ELSEWHERE		1	0	1
88331	PATH CONSLTJ SURG 1ST BLK FROZEN SCTJ 1 SPEC		0	1	1
88332	PATH CONSLTJ SURG EA ADDL BLK FROZEN SECTION		0	1	1
88341	IMHISTOCHEM/CYTCHM EA ADDL ANTIBODY SLIDE		10	1	11
88342	IMHISTOCHEM/CYTCHM 1ST ANTIBODY STAIN PROCEDURE		10	2	12
88360	M/PHMTRC ALYS TUMOR IMHCHEM EA ANTIBODY MANUAL		11	0	11
88365	IN SITU HYBRIDIZATION 1ST PROBE STAIN		2	0	2
88377	M/PHMTRC ALYS ISH QUANT/SEMIQ MNL EACH MULTIPRB		3	0	3
88381	MICRODISSECTION PREP IDENTIFIED TARGET MANUAL		5	0	5
90471	IM ADM PRQ ID SUBQ/IM NXJS 1 VACCINE		0	2	2
90686	IIV4 VACC PRESRV FREE 0.5 ML DOS FOR IM USE		0	2	2
90853	GROUP PSYCHOTHERAPY		0	1	1
90867	REPET TMS TX INITIAL W/MAP/MOTR THRESHLD/DEL and M		0	1	1
90868	THERAP REPETITIVE TMS TX SUBSEQ DELIVERY AND MNG		0	1	1
90869	REPET TMS TX SUBSEQ MOTR THRESHLD W/DELIV and MN		0	1	1
90935	HEMODIALYSIS PROCEDURE W/ PHYS/QHP EVALUATION		3	0	3
90937	HEMODIALYSIS PX REPEAT EVAL W/WO REVJ DIALYS RX		2	0	2
90945	DIALYSIS OTHER/THAN HEMODIALYSIS 1 PHYS/QHP EVAL		1	0	1
90961	ESRD RELATED SVC MONTHLY 20 OR GT YR OLD 2/3 VISITS		0	1	1
90999	UNLISTED DIALYSIS PROCEDURE INPATIENT/OUTPATIENT		4	1	5
92002	OPHTH MEDICAL XM AND EVAL INTERMEDIATE NEW PT		0	1	1
92507	TX SPEECH LANG VOICE COMMJ and /AUDITORY PROC IND		6	6	12
92523	EVAL SPEECH SOUND PRODUCT LANGUAGE COMPREHENSION		1	1	2
92526	TX SWALLOWING DYSFUNCTION and /ORAL FUNCJ FEEDING		1	0	1
93000	ECG ROUTINE ECG W/LEAST 12 LDS W/I and R		0	2	2
93015	CV STRS TST XERS and /OR RX CONT ECG W/SI and R		4	6	10
93017	CV STRS TST XERS and /OR RX CONT ECG TRCG ONLY		0	1	1
93041	RHYTHM ECG 1-3 LEADS TRACING ONLY W/O I and R		0	1	1
93228	XTRNL MOBILE CV TELEMETRY W/I and REPORT 30 DAYS		0	2	2
93229	XTRNL MOBILE CV TELEMETRY W/TECHNICAL SUPPORT		0	2	2
93306	ECHO TTHRC R-T 2D W/WOM-MODE COMPL SPEC and COLR D		2	5	7
93351	ECHO TTHRC R-T 2D W/WO M-MODE REST and STRS CONT ECG		1	0	1
93451	RIGHT HEART CATH O2 SATURATION AND CARDIAC OUTPUT		0	1	1
93452	L HRT CATH W/NJX L VENTRICULOGRAPHY IMG S and I		0	1	1
93880	DUPLEX SCAN EXTRACRANIAL ART COMPL BI STUDY		0	1	1
93925	DUP-SCAN LXTR ART/ARTL BPGS COMPL BI STUDY		0	1	1
93970	DUP-SCAN XTR VEINS COMPLETE BILATERAL STUDY		1	1	2
93971	DUP-SCAN XTR VEINS UNILATERAL/LIMITED STUDY		1	0	1
94010	SPMTRY W/VC EXPIRATORY FLO W/WO MXML VOL VNTJ		0	1	1
95700	EEG CONT REC W/VIDEO BY TECH MIN 8 CHANNELS		1	1	2
95708	EEG W/O VID BY TECH EA INCR 12-26HR UNMONITORED		1	0	1
95709	EEG W/O VID BY TECH EA INCR 12-26 HR INTMT MNTR		1	0	1
95713	VEEG BY TECH 2-12 HR CONTINUOUS R-T MONITORING		0	1	1
95714	VEEG BY TECH EA INCR 12-26 HR UNMONITORED		1	0	1
95715	VEEG BY TECH EA INCR 12-26 HR INTERMITTENT MNTR		1	0	1
95718	EEG PHYS/QHP 2-12 HR WITH VEEG		0	1	1

95719	EEG PHYS/QHP EA INCR GT 12HR LT 26HR AFTER 24HR WO VID	1	0	1
95720	EEG PHYS/QHP EA INCR GT 12HR LT 26HR AFTER 24HR W/VEEG	1	0	1
95721	EEG COMPLETE STD PHYS/QHP GT 36 HR LT 60 HR W/O VIDEO	1	0	1
95722	EEG COMPLETE STD PHYS/QHP GT 36 HR LT 60 HR W/VEEG	1	0	1
95723	EEG COMPLETE STD PHYS/QHP GT 60 HR LT 84 HR W/O VIDEO	1	0	1
95724	EEG COMPLETE STD PHYS/QHP GT 60 HR LT 84 HR W/VEEG	1	0	1
95810	POLYSOM 6 OR GT YRS SLEEP 4 OR GT ADDL PARAM ATTND	0	2	2
95811	POLYSOM 6 OR GT YRS SLEEP W/CPAP 4 OR GT ADDL PARAM ATTND	0	1	1
95816	ELECTROENCEPHALOGRAM W/REC AWAKE and DROWSY	1	0	1
95861	NDL EMG 2 XTR W/WO RELATED PARASPINAL AREAS	1	0	1
95886	NEEDLE EMG EA EXTREMTY W/PARASPINL AREA COMPLETE	1	0	1
95911	NERVE CONDUCTION STUDIES 9-10 STUDIES	1	0	1
95927	SHORT-LATENCY SOMATOSENS EP STD TRNK/HEAD	1	0	1
95937	NEUROMUSCULAR JUNCT TSTG EA NRV ANY 1 METH	1	0	1
95938	SHORT-LATENCY SOMATOSENS EP STD UPR AND LOW LIMB	1	0	1
95939	CTR MOTR EP STD TRANSCRNL MOTR STIM UPR AND LOW LI	1	0	1
95940	IONM 1 ON 1 IN OR W/ATTENDANCE EACH 15 MINUTES	1	0	1
95951	LOCALIZE CEREBRAL SEIZURE CABLE RADIO EEG VIDEO	1	0	1
96116	NEUROBEHAVIORAL STATUS XM PHYS/QHP 1ST HOUR	1	0	1
96121	NEUROBEHAVIORAL STATUS XM PHYS/QHP EA ADDL HOUR	1	0	1
96130	PSYCHOLOGICAL TST EVAL SVC PHYS/QHP FIRST HOUR	1	1	2
96131	PSYCHOLOGICAL TST EVAL SVC PHYS/QHP EA ADDL HOUR	1	0	1
96132	NEUROPSYCHOLOGICAL TST EVAL PHYS/QHP 1ST HOUR	1	0	1
96133	NEUROPSYCHOLOGICAL TST EVAL PHYS/QHP EA ADDL HR	1	0	1
96136	PSYL/NRPSYCL TST PHYS/QHP 2 Plus TST 1ST 30 MIN	2	0	2
96137	PSYCL/NRPSYCL TST PHYS/QHP 2 Plus TST EA ADDL 30 MIN	2	0	2
96138	PSYCL/NRPSYCL TST TECH 2 Plus TST 1ST 30 MIN	1	0	1
96139	PSYCL/NRPSYCL TST TECH 2 Plus TST EA ADDL 30 MIN	1	0	1
96372	THERAPEUTIC PROPHYLACTIC/DX INJECTION SUBQ/IM	0	1	1
96374	THER PROPH/DX NJX IV PUSH SINGLE/1ST SBST/DRUG	0	1	1
96375	THERAPEUTIC INJECTION IV PUSH EACH NEW DRUG	0	1	1
96413	CHEMOTX ADMN IV NFS TQ UP 1 HR 1/1ST SBST/DRUG	0	1	1
96415	CHEMOTHERAPY ADMN IV INFUSION TQ EA HR	0	1	1
96417	CHEMOTX ADMN IV NFS TQ EA SEQL NFS TO 1 HR	0	1	1
96574	DEBRIDEMENT PRMLG HYPERKERATOTIC LES W/PDT	0	1	1
96900	ACTINOTHERAPY ULTRAVIOLET LIGHT	1	0	1
97010	APPLICATION MODALITY 1 OR GT AREAS HOT/COLD PACKS	4	7	11
97012	APPL MODALITY 1 OR GT AREAS TRACTION MECHANICAL	4	6	10
97014	APPL MODALITY 1 OR GT AREAS ELEC STIMJ UNATTENDED	5	14	19
97016	APPL MODALITY 1 OR GT AREAS VASOPNEUMATIC DEVICES	0	1	1
97018	APPL MODALITY 1 OR GT AREAS PARAFFIN BATH	2	0	2
97022	APPLICATION MODALITY 1 OR GT AREAS WHIRLPOOL	0	2	2
97026	APPLICATION MODALITY 1 OR GT AREAS INFRARED	0	1	1
97032	APPL MODALITY 1 OR GT AREAS ELEC STIMJ EA 15 MIN	5	6	11
97035	APPL MODALITY 1 OR GT AREAS ULTRASOUND EA 15 MIN	10	17	27
97110	THERAPEUTIC PX 1 OR GT AREAS EACH 15 MIN EXERCISES	26	59	85
97112	THER PX 1 OR GT AREAS EACH 15 MIN NEUROMUSC REEDUCA	13	33	46
97113	THER PX 1 OR GT AREAS EACH 15 MIN AQUA THER W/XERSS	0	1	1
97116	THER PX 1 OR GT AREAS EA 15 MIN GAIT TRAIING W/STAIR	8	12	20

97124	THER PX 1 OR GT AREAS EACH 15 MINUTES MASSAGE	0	1	1
97140	MANUAL THERAPY TQS 1 OR GT REGIONS EACH 15 MINUTES	19	44	63
97150	THERAPEUTIC PROCEDURES GROUP 2 OR GT INDIVIDUALS	0	2	2
97161	PHYSICAL THERAPY EVALUATION LOW COMPLEX 20 MINS	0	6	6
97163	PHYSICAL THERAPY EVALUATION HIGH COMPLEX 45 MINS	0	1	1
97164	PHYSICAL THERAPY RE-EVAL EST PLAN CARE 20 MINS	2	8	10
97167	OCCUPATIONAL THERAPY EVAL HIGH COMPLEX 60 MINS	1	0	1
97530	THERAPEUT ACTIVITY DIRECT PT CONTACT EACH 15 MIN	16	25	41
97535	SELF-CARE/HOME MGMT TRAINING EACH 15 MINUTES	8	13	21
97597	DEBRIDEMENT OPEN WOUND 20 SQ CM OR LT	0	2	2
97598	DEBRIDEMENT OPEN WOUND EACH ADDITIONAL 20 SQ CM	0	2	2
97750	PHYSICAL PERFORMANCE TEST/MEAS W/REPRT EA 15 MIN	2	0	2
97760	ORTHOTICS MGMT AND TRAINING INITIAL ENCTR EA 15 MINS	3	3	6
97799	UNLISTED PHYSICAL MEDICINE/REHAB SERVICE/PROC	0	1	1
98943	CHIROPRACTIC MANIPLTV TX EXTRASPINAL 1 OR GT REGION	1	0	1
99060	SVC PRV EMER OUT OFFICE DISRUPTS OFFICE SVC	0	1	1
99183	PHYS/QHP ATTN and SUPVJ HYPRBARIC OXYGEN TX/SESSION	0	9	9
99201	OFFICE OUTPATIENT NEW 10 MINUTES	1	0	1
99202	OFFICE/OUTPATIENT NEW SF MDM 15-29 MINUTES	1	0	1
99203	OFFICE/OUTPATIENT NEW LOW MDM 30-44 MINUTES	4	6	10
99204	OFFICE/OUTPATIENT NEW MODERATE MDM 45-59 MINUTES	2	3	5
99205	OFFICE/OUTPATIENT NEW HIGH MDM 60-74 MINUTES	1	1	2
99211	OFFICE/OUTPATIENT ESTABLISHED MINIMAL PROBLEM(S)	0	1	1
99212	OFFICE/OUTPATIENT ESTABLISHED SF MDM 10-19 MIN	1	2	3
99213	OFFICE/OUTPATIENT ESTABLISHED LOW MDM 20-29 MIN	9	10	19
99214	OFFICE/OUTPATIENT ESTABLISHED MOD MDM 30-39 MIN	4	13	17
99215	OFFICE/OUTPATIENT ESTABLISHED HIGH MDM 40-54 MIN	0	3	3
99220	INITIAL OBSERVATION CARE/DAY 70 MINUTES	1	2	3
99232	SBSQ HOSPITAL CARE/DAY 25 MINUTES	0	1	1
99233	SBSQ HOSPITAL CARE/DAY 35 MINUTES	0	1	1
99242	OFFICE CONSULTATION NEW/ESTAB PATIENT 30 MIN	1	1	2
99243	OFFICE CONSULTATION NEW/ESTAB PATIENT 40 MIN	0	1	1
99244	OFFICE CONSULTATION NEW/ESTAB PATIENT 60 MIN	1	1	2
99245	OFFICE CONSULTATION NEW/ESTAB PATIENT 80 MIN	1	1	2
99308	SBSQ NURSING FACIL CARE/DAY MINOR COMPLJ 15 MIN	1	1	2
99309	SBSQ NURSING FACIL CARE/DAY NEW PROBLEM 25 MIN	1	0	1
99310	SBSQ NURS FACIL CARE/DAY UNSTABL/NEW PROB 35 MIN	1	0	1
99601	HOME NFS/SPECTY DRUG ADMN PR VST LT 2 HR	2	0	2
99602	HOME NFS/SPECTY DRUG ADMN PR VST LT 2 HR EA HR	1	0	1
A0382	BLS ROUTINE DISPOSABLE SUPPLIES	0	1	1
A0398	ALS ROUTINE DISPOSABLE SUPPLIES	0	1	1
A0425	GROUND MILEAGE PER STATUTE MILE	0	3	3
A0426	AMB SERVICE ALS NONEMERGENCY TRANSPORT LEVEL 1	0	1	1
A0428	AMBULANCE SERVICE BLS NONEMERGENCY TRANSPORT	2	3	5
A4209	SYRINGE WITH NEEDLE STERILE 5 CC OR GREATER EACH	0	1	1
A4212	NONCORING NEEDLE OR STYLET W/WO CATHETER	0	1	1
A4213	SYRINGE STERILE 20 CC OR GREATER EACH	1	1	2
A4215	NEEDLE STERILE ANY SIZE EACH	1	0	1
A4216	STERIL WATER SALINE and OR DXT DILUENT/FLUSH 10 ML	0	1	1

A4221	SUPPLIES FOR MAINT NON-INS RX INFUS CATH PER WK		1	3	4
A4222	INFUS SPL EXT RX INFUS PUMP CASSETTE/BAG		0	7	7
A4223	INFUS SPL NOT USED W/EXT INFUS PUMP CASSETTE/BAG		0	1	1
A4230	INFUS SET EXT INSULIN PUMP NONNDLE CANNULA TYPE		1	0	1
A4232	SYRINGE W/NDLE EXTERNAL INSULIN PUMP STERILE 3CC		1	0	1
A4290	SACRAL NERVE STIMULATION TEST LEAD EACH		1	0	1
A4305	DISPBL DRUG DELIV SYSTEM FLOW RATE 50 ML OR GT -HOUR		0	1	1
A4351	INTERMIT URIN CATH; STRAIGHT TIP W/WO COAT EA		1	0	1
A4450	TAPE NON-WATERPROOF PER 18 SQUARE INCHES		0	1	1
A4556	ELECTRODES PER PAIR		1	0	1
A4626	TRACHEOSTOMY CLEANING BRUSH EACH		1	0	1
A4649	SURGICAL SUPPLY; MISCELLANEOUS		0	1	1
A4657	SYRINGE WITH OR WITHOUT NEEDLE EACH		0	1	1
A6209	FOAM DRESS STERL PAD 16 SQ OR LT NO ADHES BORDR EA		0	3	3
A6550	WND CARE SET NEG PRSS WND TX ELEC PUMP SPL		1	0	1
A7000	CANISTER DISPOSABLE USED WITH SUCTION PUMP EACH		1	0	1
A7507	FLTR HLDR and INTGR FLTR W/O ADHES TRACHEOSTMA EXCHG		1	0	1
A7520	TRACHEOST/LARYNGECT TUBE NON-CUFFED POLYVINYLCHL		1	0	1
A7526	TRACHEOSTOMY TUBE COLLAR/HOLDER EACH		1	0	1
A9500	TECHNETIUM TC-99M SESTAMIBI DX PER STUDY DOSE		5	3	8
A9502	TECHNETIUM TC-99M TETROFOSMIN DX PER STUDY DOSE		0	2	2
A9552	FLUORODEOXYGLUCOSE F-18 FDG DX UP TO 45 MCI		1	0	1
A9555	RUBIDIUM RB-82 DX PER STUDY DOSE UP TO 60 MCI		1	0	1
APS		Revenue Codes - 0001-9999 1000-1005 Behavioral Health Accommodations 1000-1005 Behavioral Health Accommodations	1	0	1
APS	3D Rendering On Independent Workstation	Auth - AI 3D Rendering On Independent Workstation (76377) 3D Rendering On Independent Workstation	1	0	1
APS	Behavioral Health Treatments/Service	Revenue Codes - 0001-9999 0230-0999 Ancillary 0900-0919 Behavioral Health Treatments/Service	2	2	4
APS	CT Scan Ab+Pelvis	Auth - AI CT Ab+Pelvis (74176 - 78) CT Abdomen+Pelvis	5	7	12
APS	CT Scan Abdomen	Auth - AI CT Abdomen (74150, 74160, 74170)	1	0	1
APS	CT Scan Abdomen	Auth - AI CT Abdomen (74150, 74160, 74170) CT Abdomen	0	1	1
APS	CT Scan Angiography, Chest	Auth - AI CT Angiography, Chest (71275) CT Angiography, Chest	1	2	3
APS	CT Scan Angiography, Head	Auth - AI CT Angiography, Head (70496) CT Angiography, Head	1	0	1
APS	CT Scan Cervical Spine	Auth - AI CT Cervical Spine (72125, 72126, 72127) CT Cervical Spine	1	1	2
APS	CT Scan Chest	Auth - AI CT Chest (71250, 71260, 71270)	1	1	2
APS	CT Scan Chest	Auth - AI CT Chest (71250, 71260, 71270) CT Chest	5	6	11
APS	CT Scan Head/Brain	Auth - AI CT Head/Brain (70450, 70460, 70470) CT Head/Brain	1	2	3
APS	CT Scan Lower Extremity	Auth - AI CT Lower Extremity (73700, 73701, 73702) CT Lower Extremity	1	0	1
APS	CT Scan Lumbar Spine	Auth - AI CT Lumbar Spine (72131, 72132, 72133) CT Lumbar Spine	0	1	1
APS	CT Scan Pelvis	Auth - AI CT Pelvis (72192, 72193, 72194) CT Pelvis	0	1	1
APS	CT Scan Soft Tissue Neck	Auth - AI CT Soft Tissue Neck (70490, 70491, 70492) CT Soft Tissue Neck	0	3	3

APS	Diagnostic Ultrasound Pelvis (Obstetrical)	CPT - 70000-79999 Radiology 76506-76999 Diagnostic Ultrasound 76801-76828 Pelvis (Obstetrical)	0	1	1
APS	Integumentary System Acellular Dermal Replacement	CPT - 10000-69999 Surgery 10021-19499 Integumentary System 15170-15261 Acellular Dermal Replacement	0	1	1
APS	Integumentary System Adjacent Tissue Transfer or Rearrangement	CPT - 10000-69999 Surgery 10021-19499 Integumentary System 14000-14350 Adjacent Tissue Transfer or Rearrangement	0	1	1
APS	Integumentary System Nails	CPT - 10000-69999 Surgery 10021-19499 Integumentary System 11719-11765 Nails	0	1	1
APS	Integumentary System Repair - Complex	CPT - 10000-69999 Surgery 10021-19499 Integumentary System 13100-13160 Repair - Complex	0	1	1
APS	LTAC - Level 1	Inpatient Accommodation LOC LTAC LEVEL 1	4	9	13
APS	LTAC - Level 4	Inpatient Accommodation LOC LTAC LEVEL 4	0	4	4
APS	Maternity Care and Delivery Vaginal Delivery, Antepartum & Postpartum Care	CPT - 10000-69999 Surgery 59000-59899 Maternity Care and Delivery 59400-59430 Vaginal Delivery, Antepartum & Postpartum Care	0	1	1
APS	MRA Head	Auth - AI MRA Head (70544, 70545, 70546) MRA Head	0	2	2
APS	MRA Neck	Auth - AI MRA Neck (70547, 70548, 70549) MRA Neck	0	2	2
APS	MRI Abdomen	Auth - AI MRI Abdomen (74181, 74182, 74183, S8037) MRI Abdomen	3	1	4
APS	MRI Brain (w/Attn to IAC or Orbit)	Auth - AI MRI Brain (w/ attn to IAC or Orbit) (70551, 70552, 70553) MRI Brain	2	5	7
APS	MRI Cervical Spine	Auth - AI MRI Cervical Spine (72141, 72142, 72156) MRI Cervical Spine	2	2	4
APS	MRI Lower Extremity Joint	Auth - AI MRI LE Joint (73721, 73722, 73723) MRI Lower Extremity Joint	6	6	12
APS	MRI Lower Extremity, other than Joint	Auth - AI MRI LE, other than Joint (73718 - 73720) MRI Lower Extremity, other than Joint	1	4	5
APS	MRI Lumbar Spine	Auth - AI MRI Lumbar Spine (72148, 72149, 72158)	0	1	1
APS	MRI Lumbar Spine	Auth - AI MRI Lumbar Spine (72148, 72149, 72158) MRI Lumbar Spine	16	4	20
APS	MRI Orbit, Face, Neck, IAC	Auth - AI MRI Orbit, Face, Neck, IAC (70540, 70542, 70543) MRI Orbit, Face, Neck	0	1	1
APS	MRI Pelvis	Auth - AI MRI Pelvis (72195, 72196, 72197) MRI Pelvis	3	3	6
APS	MRI Thoracic Spine	Auth - AI MRI Thoracic Spine (72146, 72147, 72157) MRI Thoracic Spine	1	1	2
APS	MRI Upper Extremity Joint	Auth - AI MRI Upper Extremity Joint (73221, 73222, 73223) MRI Upper Extremity Joint	0	2	2
APS	Nuclear Medicine Cardiology	Auth - AI Nuc-Cardio78451-54,78466-69,78472,78473,78481,78483,78494-99 Myocardial Perfusion Imaging - Nuclear Cardiology	7	10	17
APS	Office or Outpatient Established Patient	CPT - 99200-99499 Evaluation and Management 99200-99215 Office or Other Outpatient Services 99211-99215 Office or Other Outpatient Visit (Estblshd Ptnt)	3	2	5
APS	Office or Outpatient New or Other Outpatient	CPT - 99200-99499 Evaluation and Management 99240-99279 Consultations 99240-22949 Office Consultation (New or Other Outpatient)	1	0	1
APS	Office or Outpatient New Patient	CPT - 99200-99499 Evaluation and Management 99200-99215 Office or Other Outpatient Services 99200-99210 Office or Other Outpatient Visit (New Patient)	0	1	1

APS	Office or Outpatient Unspecified	CPT - 99200-99499 Evaluation and Management 99200-99215 Office or Other Outpatient Services	1	0	1
APS	Pathology/Lab Urinalysis	CPT - 80000-89999 Pathology and Laboratory 80047-89356 Pathology & Laboratory Inclusive Listings 81000-81099 Urinalysis	0	1	1
APS	PET Heart	Auth - AI PET Scan, Heart (78459, 78491, 78492, 93015-93018) PET Scan, Heart	2	0	2
APS	PET Tumor	Auth - AI PET Scan, Tumor (G0219, G0296, 78811-78816) PET Scan, Tumor Imaging	2	4	6
APS	Rehab - Level 1	Inpatient Accomodation LOC REHAB LEVEL 1	13	26	39
APS	Rehab - Level 4	Inpatient Accomodation LOC REHAB LEVEL 4	1	0	1
APS	SNF - Level 1	Inpatient Accomodation LOC SNF LEVEL 1	9	13	22
APS	SNF - Level 2	Inpatient Accomodation LOC SNF LEVEL 2	1	0	1
B4035	ENTERAL FEEDING SUPPLY KIT; PUMP FED PER DAY		1	0	1
B4150	ENTRAL F NUTRITIONALLY CMPL W/INTACT NUTRIENTS		1	0	1
B4185	PARENTERAL NUTRITION SOL NOS 10 GRAMS LIPIDS		0	2	2
B4193	PARNTRAL NUT SOL; AMINO ACID AND CARB 52-73 GMS PROT		1	1	2
B4197	PARNTRAL NUT SOL; AMINO ACID AND CARB 74-100 GM PROT		0	1	1
B4199	PARNTRAL NUT SOL; AMINO ACID and CARB GT 100 GMS PPAR		0	1	1
B4216	PARNTRAL NUTRITION; ADDITIVES - HOME MIX PER DAY		0	1	1
B4220	PARENTERAL NUTRITION SUPPLY KIT; PREMIX PER DAY		1	1	2
B4224	PARENTERAL NUTRITION ADMINISTRATION KIT PER DAY		1	1	2
B9002	ENTERAL NUTRITION INFUSION PUMP ANY TYPE		1	0	1
B9004	PARENTERAL NUTRITION INFUSION PUMP PORTABLE		0	1	1
C8908	MR IMAG W/O CONTRST FLWED W/CONTRST BRST; BIL		1	0	1
E0466	HOME VENTILATOR ANY TYPE USED W/NON-INVASV INTF		0	2	2
E0652	PNEUMAT COMPRS SEG HOM MDL W/CALBRD GRADNT PRSS		6	11	17
E0667	SEG PNEUMAT APPLINC W/PNEUMAT COMPRS FULL LEG		2	5	7
E0668	SEG PNEUMAT APPLINC W/PNEUMAT COMPRS FULL ARM		2	2	4
E0669	SEG PNEUMAT APPLINC W/PNEUMAT COMPRS HALF LEG		1	0	1
E0748	OSTOGNS STIMULATOR ELEC NONINVASV SPINAL APPLIC		0	2	2
E0776	Iv pole		1	1	2
E0781	AMB INFUS PUMP 1/MX CHANNL W/ADMN EQP WORN BY PT		0	8	8
E0784	EXTERNAL AMBULATORY INFUSION PUMP INSULIN		1	0	1
E1028	WC ACCSS MANL SWINGAWAY OTH CNTRL INTRFCE/PSTN		0	1	1
E1399	DURABLE MEDICAL EQUIPMENT MISCELLANEOUS		1	0	1
E1800	DYN ADJUSTBL ELB EXT/FLX DEVC W/SFT INTRFCE MATL		0	1	1
E1805	DYN ADJUSTBL WRIST EXT/FLX DEVC W/INTERFCE MATL		0	1	1
E1810	DYN ADJUSTBL KNEE EXT/FLX DEVC W/INTERFCE MATL		0	2	2
E2210	WHEELCHAIR ACCESS BEARINGS ANY TYPE REPL ONLY EA		0	1	1
E2363	PWR WC ACCSS GRP 24 SEALED LEAD ACID BATTERY EA		0	1	1
E2366	PWR WC ACCS BATTERY CHRGR 1 MODE W/ONLY 1 BATTERY		0	1	1
E2392	PWR WC SOLID CASTER TIRE INTEGRD WHEEL REPL EA		0	1	1
E2396	PWR WC CASTER FORK REPLACEMENT ONLY EACH		0	1	1
E2402	NEG PRESS WOUND THERAPY ELEC PUMP STATION/PRTBLE		1	0	1
G0151	SERVICE PHYS THERAP HOME HLTH/HOSPICE EA 15 MIN		1	0	1
G0156	SRVC HH/HOSPICE AIDE IN HH/HOSPICE SET EA 15 MIN		1	0	1
G0159	SERVICES PT HOME HEALTH EST/DEL PT MP EA 15 MINS		1	0	1
G0277	HPO UND PRESS FULL BODY CHMBR PER 30 MIN INT		0	9	9
G0283	E-STIM 1 OR GT AREAS OTH THAN WND CARE PART TX PLAN		1	6	7

G0299	DIRECT SNS RN HOME HEALTH/HOSPICE SET EA 15 MIN	5	2	7
G0300	DIRECT SNS LPN HOME HLTH/HOSPICE SET EA 15 MIN	3	4	7
G0410	GRP PSYCHOTX NOT MX FAM GRP PART HOS 45-50 MIN	0	1	1
G0463	HOSPITAL OUTPATIENT CLIN VISIT ASSESS AND MGMT PT	0	2	2
G6015	INTENSITY MODULATED TX DEL 1/MX FLDS PER TX SESS	1	7	8
J0185	INJECTION APREPITANT 1 MG	1	0	1
J0280	INJECTION AMINOPHYLLIN UP TO 250 MG	3	1	4
J0585	BOTULINUM TOXIN TYPE A PER UNIT	0	1	1
J0640	INJECTION LEUCOVORIN CALCIUM PER 50 MG	1	0	1
J0696	INJECTION CEFTRIAXONE SODIUM PER 250 MG	1	1	2
J1040	INJECTION METHYLPREDNISOLONE ACETATE 80 MG	0	1	1
J1245	INJECTION DIPYRIDAMOLE PER 10 MG	4	1	5
J1335	INJECTION ERTAPENEM SODIUM 500 MG	0	1	1
J2785	INJECTION REGADENOSON 0.1 MG	5	3	8
J2930	INJ METHYLPRDNISOLONE SODIUM SUCCNAT TO 125 MG	0	1	1
J3490	UNCLASSIFIED DRUGS	0	1	1
J7050	INFUSION NORMAL SALINE SOLUTION 250 CC	0	1	1
J9035	INJECTION BEVACIZUMAB 10 MG	1	0	1
J9190	INJECTION FLUOROURACIL 500 MG	1	0	1
J9263	INJECTION OXALIPLATIN 0.5 MG	1	0	1
K0017	DETACHABLE ADJUST HT ARMREST BASE REPL ONLY EA	0	1	1
K0019	ARM PAD REPLACEMENT ONLY EACH	0	1	1
K0108	OTHER ACCESSORIES	0	2	2
K0606	AUTO EXT DEFIB W/INTGR ECG ANALY GARMENT TYPE	0	1	1
K0739	REPR/SRVC DME NOT O2 RQR TECH CMPNT PER 15 MINS	0	1	1
L0637	LUMB-SACRAL ORTHOS SAG-COR CNTRL RIGD A AND P PREFAB	0	1	1
L3000	FT INSRT MOLD PT MDL UCB TYPE BERKLY SHELL EA	1	0	1
L3924	HAND-FINGER ORTHOSIS WITHOUT JOINTS PREFAB	0	1	1
L5301	BELOW KNEE MOLD SOCKET SHIN SACH FT ENDOSKEL SYS	0	1	1
L5620	ADDITION LOWER EXTREMITY TEST SOCKET BELOW KNEE	0	1	1
L5629	ADDITION LOWER EXTREM BELOW KNEE ACRYLIC SOCKET	0	1	1
L5637	ADDITION LOWER EXTREMITY BELOW KNEE TOTAL CONTCT	0	1	1
L5645	ADD LW EXT BELW KNEE FLXIBLE INNR SOCKT EXT FRME	0	1	1
L5646	ADD LOW EXT BELOW KNEE AIR FL GEL/ Equal to CUSHN SOCKT	0	1	1
L5647	ADDITION LOWER EXTREM BELOW KNEE SUCTION SOCKET	0	1	1
L5679	ADD LW EXT BK/AK CSTM MOLD/PRFAB NOT W/LOCK MECH	0	1	1
L5685	ADD LOW EXT PROS BELW KNEE SUSP/SEAL SLEEVE EA	0	1	1
L5910	ADD ENDOSKEL SYSTEM BELOW KNEE ALIGNABLE SYSTEM	0	1	1
L5940	ADD ENDOSKEL SYSTEM BELOW KNEE ULTRA-LGHT MATL	0	1	1
L5984	ALL ENDOSKEL LOW EXT PROSTH AXIAL ROTAT UNIT ADJ	0	1	1
L5986	ALL LOW EXTREM PROSTH MULTI-AXIAL ROTATION UNIT	0	1	1
L5987	ALL LW XTRM PRSTH SHNK FT SYS W/VRTCL LOAD PYLN	0	1	1
L8420	PROSTHETIC SOCK MULTIPLE PLY BELOW KNEE BK EACH	0	1	1
L8440	PROSTHETIC SHRINKER BELOW KNEE BK EACH	0	1	1
L8500	ARTIFICIAL LARYNX ANY TYPE	1	0	1
Q0508	MISC SUPPLY OR ACCESSORY USE WITH IMPLANTED VAD	1	0	1
Q4158	KERECIS OMEGA3 PER SQUARE CM	0	1	1
Q5006	HOSPICE CARE PROV INPATIENT HOSPICE FACILITY	0	2	2
S0020	INJECTION BUPIVICAINE HYDROCHLORIDE 30 ML	0	1	1

S1015	IV TUBING EXTENSION SET		0	1	1
S2068	BREAST RECON DIEP/SIEA FLAP and CLOS DONR SITE UNI		1	2	3
S9128	SPEECH THERAPY IN THE HOME PER DIEM		1	0	1
S9131	PHYSICAL THERAPY; IN THE HOME PER DIEM		1	0	1
S9152	SPEECH THERAPY RE-EVALUATION		2	0	2
S9379	HOME INFUSION THERAPY INFUSION THERAPY NOC; DIEM		1	0	1
S9480	INTENSIVE OP PSYCHIATRIC SERVICES PER DIEM		0	1	1
T1999	MISC TX ITEMS AND SPL RETAIL PURCHASE NOC		0	1	1
T4526	ADLT SZD DISPBL INCONT PROD UNWEAR MED EA		1	0	1
Appeal Grand Totals			1209	1159	2368

Inpatient Appeals

Inpatient appeals are for services in an inpatient hospital setting that Molina was not able to approve. Sometimes, the clinical information sent to us for these services do not meet medical necessity on initial review. Texas Department of Insurance rules require plans to decide within 24 hours of the request for inpatient authorization. We must decide anytime we have any information such as the member's name, admit date and diagnosis. When services are denied, a member or provider have the right to appeal. Appeals allow time to provide more clinical information. With complete clinical information, we can usually approve the services. These are considered an appeal overturn. When the denial decision is not overturned, it is considered upheld. Due to tight turnaround times for inpatient service authorizations, Molina does see a higher inpatient overturn rate. Please refer to [Pre-Authorization Statistic Abbreviation Guide](#) to view the descriptions of the APS abbreviations.

Inpatient Level of Care	Number of Appeals Upheld	Number of Appeals Overturned	Total Appeals
Detoxification	1	3	4
Hospice	0	2	2
ICU - Pediatrics	1	5	6
ICU/CCU	26	76	102
Intermediate ICU	5	24	29
Medical	223	441	664
Medical - Pediatrics	9	6	15
Mental Health	13	6	19
Nursery - Newborn - Level I	1	2	3
Nursery - Newborn - Level II	1	3	4
Nursery - Newborn - Level III	1	1	2
OB - C/Section	2	4	6
OB - High Risk (Non-Delivered)	3	8	11
OB - Normal Vaginal	6	4	10
Surgical	30	30	60
Surgical - Pediatrics	1	0	1
Tele/Sac	48	74	122
Unspecified	0	1	1
Appeal Grand Totals	371	690	1061

Appeals Reviewed by an Independent Review Organization (IRO)

When services are denied, the member or provider may request that the service is submitted to an Independent Review Organization (IRO) for review and determination. If an IRO upholds the Molina decision, this means that services remain denied by Molina. If the IRO overturns the Molina decision, this means that the IRO decided to approve the service requested and the service will be approved by Molina. APS service codes outlined below are service groups for Inpatient authorization requests.

Please refer to [Pre-Authorization Statistic Abbreviation Guide](#) to view the descriptions of the APS abbreviations.

Service Code	Service Code Description	Upheld on IRO	Overturned on IRO	Total IRO Appeals
0296T	EXT ECG GT 48HR TO 21 DAY RCRD W/CONNECT INTL RCRD	1	0	1
0298T	EXT ECG GT 48HR TO 21 DAY REVIEW AND INTERPRETATN	1	0	1
0379T	VISUAL FIELD ASSESSMENT TECH SUPPORT W/INSTRUCT	1	0	1
43860	REVJ GSTR/JJ ANAST W/RCNSTJ W/O VGTMY	0	1	1
47135	LVR ALTRNSPLJ ORTHOTOPIC PRTL/WHL DON ANY AGE	0	3	3
50360	RENAL ALTRNSPLJ IMPLTJ GRF W/O RCP NEPHRECTOMY	0	1	1
81243	FMR1 ANALYSIS EVAL TO DETECT ABNORMAL ALLELES	0	1	1
81329	SMN1 GENE ANALYSIS DOSAGE/DELET ALYS W/SMN2 ALYS	0	1	1
81420	FETAL CHROMOSOMAL ANEUPLOIDY GENOMIC SEQ ANALYS	0	1	1
APS	Medical	4	4	8
APS	MRI Brain (w/Attn to IAC or Orbit)	0	1	1
APS	OB - High Risk (Non-Delivered)	1	0	1
APS	Rehab - Level 1	1	0	1
APS	ICU - Pediatrics	0	1	1
APS	ICU/CCU	1	0	1
APS	Intermediate ICU	1	0	1
APS		2	0	2
APS	Behavioral Health Treatments/Service	0	1	1
APS	CT Scan Head/Brain	1	0	1
APS	SNF - Level 1	2	0	2
APS	Surgical	1	1	2
APS	Tele/Sac	1	1	2
G0299	DIRECT SNS RN HOME HEALTH/HOSPICE SET EA 15 MIN	1	0	1
G0300	DIRECT SNS LPN HOME HLTH/HOSPICE SET EA 15 MIN	2	0	2
H0017	BEHAVIORAL HEALTH; RES W/O ROOM and BOARD PER DIEM	2	0	2
IRO Appeal Grand Totals		23	17	40