IMPORTANT!

Molina Provider News:



September 1st Authorization Process Update for SMI Membership

(Medicaid Update - Code Exceptions)

FL CODE/BENEFIT EXCEPTIONS

Important Not	tice: All serv	vices done	in a hospital require prior authorizat	ion		
Behavioral Health for LOBs: Please contact Beacon Health - 800-221- www.beaconhealthoptions.cor					c <u>om</u>	
Specialty Plan	Members: P	lease cont	tact Molina Healthcare			
Therapies (PT/OT/ST) for MMA/MCR/MP: Please contact Health Network One (HN1): 888-550-8800.						
Specialty Plan Members, LTC/Comprehensive: Please contact Molina Healthcare						
Therapies (Art/Pet) for MMA Only: Please contact Medical www.mtm-inc.net Transportation Management: 888-521-2651						
			nfusion (Including Home PT, OT or ST)·		
			ers please contact Coastal Care Service			
			ontact Molina Healthcare			
Healthcare Ad	ministered	Drug Requ	uests faxed to:			
Medicare via N	Novologix Pr	ovider Por	tal or fax at 800-391-6437 Medicaid	& Marketplace 866-236-8531		
Plan develope	d own versi	on of PA N	Matrix; click below:			
http://www.m	olinahealth	care.com/	providers/fl/medicaid/forms/Pages/fu	ıf.aspx		
Y: PA REQUIRE	ED / N: NO P	A REQUIR	RED / NC: NOT COVERED			
CPT Code	Medicaid	Market	Description for "Y" Exceptions	Service Category for "Y"	Code Notes	
		Place		Exceptions		
99217/99238	N	N		Observation Services		
95700	N	N				
95708	N	N				
95709	N	N				
95710	N	N				
95711	N	N				
95712	N	N				
95713	N	N				
95714	95714 N N					
95715	N	N				
95716	N	N				
95718	N	N				
95719	N	N				
95720	N	N				
95721	N	N				

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95722	N	N			
95723	N	N			
95724	N	N			
95725	N	N			
95726	N	N			
95957	N	N			
A9276		N			
S9131	N	N			
S9977		NC			
H2019	Υ	110	THERAPEUTIC BEHAVIORAL	Behavioral Health, Mental	
112019			SERVICES PER 15 MINUTES	Health, Alcohol & Chemical Dependency Services	
H0015	Y		ALCOHOL AND/OR DRUG SRVCS	Behavioral/Mental Health, Alcohol-Chemical Dependency	Covered Only under Expanded Benefit
H0019	Y		BHVAL HEALTH; LONG-TERM RES W/O ROOM and BOARD-DIEM	Behavioral/Mental Health, Alcohol-Chemical Dependency	Covered Only under Expanded Benefit
H0046	Y		MENTAL HEALTH SERVICES NOT OTHERWISE SPECIFIED	Behavioral/Mental Health, Alcohol-Chemical Dependency	Non Emergent requires Prior Authorization
S9480	Y		INTENSIVE OP PSYCHIATRY	Behavioral/Mental Health, Alcohol-Chemical Dependency	PA AFTER 14 UNITS, expanded benefit
A4217	Y		STERILE WATER/SALINE 500 ML	Durable Medical Equipment (DME)	
A4221	Y		SUPPLIES FOR MAINT NON-INS RX INFUS CATH PER WK	Durable Medical Equipment (DME)	
A4222	Υ		INFUS SPL EXT RX INFUS PUMP CASSETTE/BAG	Durable Medical Equipment (DME)	
A4246	Υ		BETADINE OR PHISOHEX SOLUTION PER PINT	Durable Medical Equipment (DME)	
A4256	Υ		NORMAL LOW AND HIGH CALIBRATOR SOLUTION/CHIPS	Durable Medical Equipment (DME)	
A4314	Y		INSRTION TRAY W/DRN BAG W/CATH 2-WAY LATX W/COAT	Durable Medical Equipment (DME)	
A4340	Y		INDWELLING CATHETER; SPECIALTY TYPE EACH	Durable Medical Equipment (DME)	
A4565	Y		SLINGS	Durable Medical Equipment (DME)	
A4570	Y		SPLINTS	Durable Medical Equipment (DME)	
A6196	Y		ALGINAT/OTH FIBER GELL DRESS STERIL PAD 16 SQ OR LT	Durable Medical Equipment (DME)	
A6197	Y		ALGINATE/OTH FIBER GELL DRESS PAD GT 16 LT or equal to 48	Durable Medical Equipment (DME)	
A6209	Y		FOAM DRESS STERL PAD 16 SQ OR LT NO ADHES BORDR EA	Durable Medical Equipment (DME)	
A6210	Y		FOAM DRESS GT 16 BUT LT or equal to 48 SQ W/O ADHES BO	Durable Medical Equipment (DME)	

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A6212 Y FOAM DRESS STERL PAD SZ 16 SQ OR GT W/ADHES BORDR EA Equipment (DME) A6216 Y GAUZE NON-IMPREG NONSTERL 16 SQ Durable Medical Equipment (DME) A6402 Y GAUZE NON-IMPREG STERL 16 SQ Durable Medical Equipment (DME) B4035 Y ENTERAL FEEDING SUPPLY KIT; Durable Medical Equipment (DME) B9002 Y ENTERAL NUTRITION INFUSION PUMP ANY TYPE Equipment (DME) B9004 Y PARENTERAL NUTRITION Durable Medical Equipment (DME) E0250 Y HOSP BED FIX HT W/ANY TYPE Equipment (DME) E0470 Y RESP ASST DEVC BI-LEVL PRSS Durable Medical Equipment (DME) E0470 Y RESP ASST DEVC BI-LEVL PRSS Durable Medical Equipment (DME)	
A6216 Y GAUZE NON-IMPREG NONSTERL Equipment (DME) A6402 Y GAUZE NON-IMPREG STERL 16 SQ Durable Medical Equipment (DME) B4035 Y ENTERAL FEEDING SUPPLY KIT; Durable Medical Equipment (DME) B9002 Y ENTERAL NUTRITION INFUSION Durable Medical Equipment (DME) B9004 Y PARENTERAL NUTRITION DURABLE Equipment (DME) B9005 Y PARENTERAL NUTRITION DURABLE Equipment (DME) B9006 Y PARENTERAL NUTRITION DURABLE Equipment (DME) B9007 PARENTERAL NUTRITION DURABLE Equipment (DME) B9008 PARENTERAL NUTRITION DURABLE Equipment (DME) E0250 Y HOSP BED FIX HT W/ANY TYPE DURABLE Equipment (DME) E0470 Y RESP ASST DEVC BI-LEVL PRSS DURABLE MEDICAL EQUIPMENT (DME)	
A6402 Y GAUZE NON-IMPREG STERL 16 SQ Durable Medical Equipment (DME) B4035 Y ENTERAL FEEDING SUPPLY KIT; Durable Medical Equipment (DME) B9002 Y ENTERAL NUTRITION INFUSION Durable Medical Equipment (DME) B9004 Y PARENTERAL NUTRITION Durable Medical Equipment (DME) B9005 Y PARENTERAL NUTRITION Durable Medical Equipment (DME) B9006 Y PARENTERAL NUTRITION Durable Medical INFUSION PUMP PORTABLE Equipment (DME) E0250 Y HOSP BED FIX HT W/ANY TYPE Durable Medical SIDE RAILS W/MATTRSS Equipment (DME) E0470 Y RESP ASST DEVC BI-LEVL PRSS Durable Medical CAPABILITY W/O BACKU Equipment (DME)	
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B9004 Y PARENTERAL NUTRITION Durable Medical INFUSION PUMP PORTABLE Equipment (DME) E0250 Y Y HOSP BED FIX HT W/ANY TYPE Durable Medical SIDE RAILS W/MATTRSS Equipment (DME) E0470 Y RESP ASST DEVC BI-LEVL PRSS Durable Medical CAPABILITY W/O BACKU Equipment (DME)	
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E0470 Y Y RESP ASST DEVC BI-LEVL PRSS Durable Medical CAPABILITY W/O BACKU Equipment (DME)	
CAPABILITY W/O BACKU Equipment (DME)	
E0471 Y RESP ASST DEVC BI-LEVL PRSS Durable Medical	
CAPABILITY W/BACK-UP Equipment (DME)	
E0472 Y RESP ASST DEVC BI-LEVL PRSS Durable Medical	
CAPABILITY W/BACKUP Equipment (DME)	
E0601 Y CONTINUOUS POSITIVE AIRWAY Durable Medical	
PRESSURE DEVICE Equipment (DME)	
E0561 Y HUMDIFIR NON-HEATED USED Durable Medical	
W/POS AIRWAY PRESS DEVC Equipment (DME)	
E0562 Y HUMDIFIR HEATED USED W/POS Durable Medical	
ARWAY PRESSURE DEVICE Equipment (DME)	
E0603 Y BREAST PUMP ELECTRIC ANY TYPE Durable Medical	
Equipment (DME)	
E0604 Y BREAST PUMP HEVY DUTY HOSP Durable Medical	
GRADE PISTON OP Equipment (DME)	
E0630 Y PATIENT LIFT HYDRAULIC/MECH Durable Medical	
INCL SEAT SLING/PAD Equipment (DME)	
E0635 Y PATIENT LIFT ELECTRIC WITH SEAT Durable Medical	
OR SLING Equipment (DME)	
E1050 Y Y FULL RECLIN WHLCHAIR; FIX FULL- Durable Medical	
LEN ARMS LEGRESTS Equipment (DME)	
E1060 Y Y FULL RECLIN WHLCHAIR; Durable Medical	
DTACHBLE ARMS LEGRESTS Equipment (DME)	
E1070 Y Y FULLY RECLIN WHLCHAIR; Durable Medical	
DTACHBLE ARMS FOOTRESTS Equipment (DME)	
E1083 Y HEMI-W/C; FIXED FULL-LEN ARMS Durable Medical	
DETACHBLE LEGREST Equipment (DME)	
E1084 Y HEMI-WHLCHAIR; DTACHBLE Durable Medical	
ARMS DESK/FULL LEGRESTS Equipment (DME)	
E1086 Y HEMI-WHLCHAIR; DTACHBLE Durable Medical	
ARMS DESK/FULL FOOTRESTS Equipment (DME)	
E1087 Y Y HI-STRGTH LGHTWT WHLCHAIR; Durable Medical	
FIX ARMS DTACH LEGRST Equipment (DME)	
E1088 Y Y HI-STRGTH LGHTWT WHLCHAIR; Durable Medical	
DTACHBL ARMS LEGRESTS Equipment (DME)	
E1089 Y Y HI-STRGTH LGHTWT WHLCHAIR; Durable Medical	
FIX ARM DTACH FOOTRST Equipment (DME)	

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E1090	Υ	Υ	LI STRCTU I CUTVAT VALUE CUAIR.	Durable Medical
L1030	ľ	ľ	HI-STRGTH LGHTWT WHLCHAIR; DTACHBL ARMS FOOTREST	Equipment (DME)
F1002	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			1 1 7
E1092	Υ	Υ	WIDE HEVY-DUTY WHLCHAIR;	Durable Medical
54000	.,		DTACHBLE ARMS LEGRESTS	Equipment (DME)
E1093	Υ	Υ	WIDE HEVY-DUTY WHLCHAIR;	Durable Medical
F1100			DTACHBLE ARMS FOOTRESTS	Equipment (DME)
E1100	Υ	Υ	SEMI-RECLIN WHLCHAIR; FIX	Durable Medical
			ARMS DTACHBLE LEGRESTS	Equipment (DME)
E1110	Υ	Υ	SEMI-RECLIN WHLCHAIR;	Durable Medical
			DTACHBLE ARMS ELEV LEGREST	Equipment (DME)
E1140	Υ	Υ	WHLCHAIR; DTACHBLE ARMS	Durable Medical
			DTACHBLE FOOTRESTS	Equipment (DME)
E1150	Υ	Υ	WHLCHAIR; DTACHBLE ARMS	Durable Medical
			DTACHBLE ELEV LEGRESTS	Equipment (DME)
E1170	Υ	Υ	AMPUTEE WHLCHAIR; FIX FULL	Durable Medical
			ARMS DTACHBL LEGRESTS	Equipment (DME)
E1171	Υ	Υ	AMPUTEE WHLCHAIR; FIX FULL	Durable Medical
			ARMS W/O FOOT/LEGREST	Equipment (DME)
E1172	Υ	Υ	AMPUTEE WHLCHAIR; DTACHBL	Durable Medical
			ARMS W/O FOOT/LEGRESTS	Equipment (DME)
E1180	Υ	Υ	AMPUTEE WHLCHAIR; DTACHBL	Durable Medical
			ARMS DTACHBL FOOTRESTS	Equipment (DME)
E1190	Υ	Υ	AMPUTEE WHLCHAIR; DTACHBL	Durable Medical
			ARMS DTACHBL LEGRESTS	Equipment (DME)
E1195	Υ	Υ	HEVY DUTY WHLCHAIR; FIX FULL	Durable Medical
			ARMS DTACHBL LEGRST	Equipment (DME)
E1200	Υ	Υ	AMPUTEE WHLCHAIR; FIX FULL	Durable Medical
			ARMS DTACHBL FOOTRSTS	Equipment (DME)
E1223	Υ	Υ	WHEELCHAIR WITH DETACHABLE	Durable Medical
			ARMS FOOTRESTS	Equipment (DME)
E1240	Υ	Υ	LGHTWT WHLCHAIR; DTACHBLE	Durable Medical
			ARMS DTACHBLE LEGREST	Equipment (DME)
E1250	Υ	Υ	LGHTWT WHLCHAIR; FIX FULL	Durable Medical
			ARMS DTACHBL FOOTRESTS	Equipment (DME)
E1260	Υ	Υ	LGHTWT WHLCHAIR; DTACHBL	Durable Medical
			ARMS DTACHBL FOOTRESTS	Equipment (DME)
E1270	Υ	Υ	LGHTWT WHLCHAIR; FIX ARMS	Durable Medical
			DTACHBLE ELEV LEGRESTS	Equipment (DME)
E1280	Υ	Υ	HEVY-DUTY WHLCHAIR; DTACHBLE	Durable Medical
			ARMS ELEV LEGRESTS	Equipment (DME)
E1285	Υ	Υ	HEVY-DUTY WHLCHAIR; FIX ARMS	Durable Medical
			DTACHBLE FOOTRESTS	Equipment (DME)
E1290	Υ	Υ	HEVY-DUTY WC DTCHBL ARMS	Durable Medical
			SWNG AWAY DTCHBL FTRST	Equipment (DME)
E1295	Υ	Υ	HEVY-DUTY WHLCHAIR; FIX FULL	Durable Medical
			ARMS ELEV LEGRESTS	Equipment (DME)
G0176	Υ		ACTV TX REL CARE AND TX PTS	Durable Medical
202.0	'		DISABL MENTL HLTH-SESS	Equipment (DME)
G0270	Υ		MED NUT TX; REASSESS FLW 2 REF	Durable Medical
30270	'		YR W/PT EA 15 MIN	Equipment (DME)
G0271	Υ		MED NUT TX REASSESS FLW 2 REF	Durable Medical
30271	'		YR GRP EA 30 MIN	Equipment (DME)
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H0044	Υ		SUPPORTED HOUSING PER	Durable Medical	
			MONTH	Equipment (DME)	
K0002	Υ	Υ	STANDARD HEMI WHEELCHAIR	Durable Medical	
				Equipment (DME)	
K0003	Υ	Υ	LIGHTWEIGHT WHEELCHAIR	Durable Medical	
				Equipment (DME)	
K0004	Υ	Υ	HIGH STRENGTH LIGHTWEIGHT	Durable Medical	
			WHEELCHAIR	Equipment (DME)	
K0005	Υ	Υ	ULTRALIGHTWEIGHT WHEELCHAIR	Durable Medical	
				Equipment (DME)	
K0006	Υ	Υ	HEAVY-DUTY WHEELCHAIR	Durable Medical	
				Equipment (DME)	
K0007	Υ	Υ	EXTRA HEAVY-DUTY WHEELCHAIR	Durable Medical	
				Equipment (DME)	
K0455	Υ	Υ	INFUSION PUMP UNINTERRUPTED	Durable Medical	
			PARENTERAL ADMIN MED	Equipment (DME)	
				, , ,	
K0609	Υ	Υ	REPL ELEC W/AUTO EXT DEFIB	Durable Medical	
			GARMNT TYPE ONLY EA	Equipment (DME)	
K0730	Υ	Υ	CONTROLLED DOSE INHALATION	Durable Medical	
			DRUG DELIVERY SYSTEM	Equipment (DME)	
S5110	Υ		HOME CARE TRAINING FAMILY;	Durable Medical	
			PER 15 MINUTES	Equipment (DME)	
V5010	Υ		ASSESSMENT FOR HEARING AID	Durable Medical	
				Equipment (DME)	
V5011	Υ		FITTING/ORIENTATION/CHECKING	Durable Medical	
			OF HEARING AID	Equipment (DME)	
V5014	Υ		REPAIR/MODIFICATION OF A	Durable Medical	
			HEARING AID	Equipment (DME)	
V5050	Υ		HEARING AID MONAURAL IN THE	Durable Medical	
			EAR	Equipment (DME)	
V5060	Υ		HEARING AID MONAURAL BEHIND	Durable Medical	
			THE EAR	Equipment (DME)	
V5090	Υ		DISPENSING FEE UNSPECIFIED	Durable Medical	
			HEARING AID	Equipment (DME)	
V5130	Υ		BINAURAL IN THE EAR	Durable Medical	
				Equipment (DME)	
V5140	Υ		BINAURAL BEHIND THE EAR	Durable Medical	
				Equipment (DME)	
V5160	Υ		DISPENSING FEE BINAURAL	Durable Medical	
\/F202			DISPENSING FEE CONTROL ATTENDED	Equipment (DME)	
V5200	Υ		DISPENSING FEE CONTRALATERAL	Durable Medical	
V5240	.,		MONAURAL DISPENSIVE SEE CONTRALATERAL	Equipment (DME)	
	Υ		DISPENSING FEE CONTRALATERAL	Durable Medical	
1/5061			RTE SYSTEM BINAURAL	Equipment (DME)	
V5264	Υ		EAR MOLD/INSERT NOT	Durable Medical	
00745			DISPOSABLE ANY TYPE	Equipment (DME)	
90715	N		TDAP VACCINE 7 YRS OR GT IM	Healthcare Administered	
07003	V		NACDICAL NUITDITION ACCAST AND	Drugs	
97802	Y		MEDICAL NUTRITION ASSMT AND	Home Health Care Services	
			IVNTJ INDIV EACH 15 MI	<u> </u>	

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97803	Υ		MEDICAL NUTRITION RE-ASSMT AND IVNTJ INDIV EA 15 M	Home Health Care Services	
97804	Υ		MEDICAL NUTRITION THERAPY	Home Health Care Services	
S5170	Υ		GRP2/ INDIV EA 30 MI HOME DELIV MEALS INCLUDING PREPARATION; PER MEAL	Home Health Care Services	
T1020	Y		PERSONAL CARE SERVICES PER DIEM	Home Health Care Services	
T1021	Y		HOME HEALTH AIDE/CERTIFIED NURSE ASST PER VISIT	Home Health Care Services	
97010	Υ		APPLICATION MODALITY 1 OR GT AREAS HOT/COLD PACKS	Physical Therapy	
97124	Y	Y	THER PX 1 OR GT AREAS EACH 15 MINUTES MASSAGE	Physical Therapy	
97140	Y		MANUAL THERAPY TQS 1 OR GT REGIONS EACH 15 MINUTES	Physical Therapy	
97530	Y	Y	THERAPEUT ACTVITY DIRECT PT CONTACT EACH 15 MIN	Physical Therapy	Evaluation does not require PA, treatment requires PA HN1
97542	Y	Y	WHEELCHAIR MGMT EA 15 MIN	Physical Therapy	Evaluation does not require PA, treatment requires PA HN1
92597	Y	Y	EVAL and /FITG VOICE PROSTC DEV SUPLMNT ORAL SPEEC	Speech Therapy	Evaluation does not require PA, treatment requires PA HN1
92609	Y	Y	THER SP-GENRATJ DEV PRGRMG AND MODIFICAJ	Speech Therapy	Evaluation does not require PA, treatment requires PA HN1
92610	Y	Y	EVAL ORAL AND PHARYNGEAL SWLNG FUNCJ	Speech Therapy	Evaluation does not require PA, treatment requires PA HN1
A0190	Y		NONEMERG TRANSPORTATION: ANCILLARY: MEALS-RECIP	Transportation Services	
A0210	Y		NONEMERG TRANSPORTATION: ANCILLARY: MEALS-ESCORT	Transportation Services	
29799		Y	UNLISTED PROCEDURE CASTING/STRAPPING	Unlisted/Miscellaneous	
S9452	Υ		NUTRITION CLASSES NON- PHYSICIAN PER SESSION	Unlisted/Miscellaneous	

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