

CSI - Ohio

The Common Sense Initiative

Business Impact Analysis

Agency Name: Ohio Department of Medicaid (ODM)

Regulation/Package Title: Surgical Services

Rule Number(s):

To Be Rescinded: 5160-4-22

New: 5160-4-22

Date: February 12, 2015

Rule Type:

☒ New
☐ Amended

☐ 5-Year Review
☒ Rescinded

The Common Sense Initiative was established by Executive Order 2011-01K and placed within the Office of the Lieutenant Governor. Under the CSI Initiative, agencies should balance the critical objectives of all regulations with the costs of compliance by the regulated parties. Agencies should promote transparency, consistency, predictability, and flexibility in regulatory activities. Agencies should prioritize compliance over punishment, and to that end, should utilize plain language in the development of regulations.

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Regulatory Intent

1. Please briefly describe the draft regulation in plain language.

Please include the key provisions of the regulation as well as any proposed amendments.

Current rule 5160-4-22, "Surgical services," sets forth provisions for coverage of and payment for surgical services performed in non-hospital settings. This rule is being proposed for rescission, along with its appendix.

New rule 5160-4-22, "Surgical services," sets forth provisions for coverage of and payment for surgical services performed in non-hospital settings. This rule is being proposed for adoption to replace current rule 5160-4-22.

Changes: Four main differences may be noted in the new rule:

- The text is condensed and streamlined.
- The appendix to the current rule, which is rescinded, addresses four groups of surgical procedures whose characteristics may affect how they are reported on a claim and how payment for them is made: (1) multiple procedures, for which payment is reduced when more than one is performed; (2) bilateral procedures, for which payment is adjusted when they are performed on both body parts of a corresponding pair; (3) assistant-at-surgery procedures, for which payment is reduced when they are performed by an assistant at surgery; and (4) procedures performed on fingers, toes, eyelids, or coronary arteries. In place of the appendix, a provision is added in the body of the new rule stating that the department follows Medicare policies concerning these procedures.
- A restriction is removed that disallowed payment for an assistant-at-surgery procedure performed by someone other than a physician.
- A statement is added that payment for the surgical treatment of obesity, a service that was previously non-covered, now requires prior authorization.

2. Please list the Ohio statute authorizing the Agency to adopt this regulation.

Section 5164.02 of the Ohio Revised Code.

3. Does the regulation implement a federal requirement? Is the proposed regulation being adopted or amended to enable the state to obtain or maintain approval to administer and enforce a federal law or to participate in a federal program?

If yes, please briefly explain the source and substance of the federal requirement.

Under provisions of the Social Security Act, surgical services are mandatory Medicaid services. The proposed changes in the rule are being made to improve administration of the Medicaid benefit.

4. If the regulation includes provisions not specifically required by the federal government, please explain the rationale for exceeding the federal requirement.

This rule does not exceed federal requirements.

5. **What is the public purpose for this regulation (i.e., why does the Agency feel that there needs to be any regulation in this area at all)?**

Medicaid rules perform several core business functions: They establish and update coverage and payment policies for medical goods and services. They set limits on the types of entities that can receive Medicaid payment for these goods and services. They publish payment formulas or fee schedules for the use of providers and the general public. No alternative is readily apparent.

6. **How will the Agency measure the success of this regulation in terms of outputs and/or outcomes?**

The success of these rules will be measured by the extent to which claims for assistant-at-surgery services performed by someone other than a physician and prior authorization requests for bariatric surgery are correctly processed in the Medicaid Information Technology System (MITS).

Development of the Regulation

7. **Please list the stakeholders included by the Agency in the development or initial review of the draft regulation.**

If applicable, please include the date and medium by which the stakeholders were initially contacted.

Both the current rule and the new rule have gone through the public-comment process known as Clearance.

8. **What input was provided by the stakeholders, and how did that input affect the draft regulation being proposed by the Agency?**

As a result of a question submitted during Clearance, a restriction has been removed that disallowed payment for an assistant-at-surgery procedure performed by someone other than a physician.

9. **What scientific data was used to develop the rule or the measurable outcomes of the rule? How does this data support the regulation being proposed?**

Because the change in policy is strictly administrative, no utilization or expenditure data were needed.

10. What alternative regulations (or specific provisions within the regulation) did the Agency consider, and why did it determine that these alternatives were not appropriate? If none, why didn't the Agency consider regulatory alternatives?

The current rule is being rescinded.

For the new rule, the simplest course of action concerning multiple procedures, bilateral procedures, assistant-at-surgery procedures, and procedures performed on fingers, toes, eyelids, or coronary arteries was to adopt Medicare policies. Whether to cover a particular procedure or type of procedure (e.g., assistant-at-surgery service, surgical treatment of obesity) admits of only a few options: yes, no, or with conditions.

11. Did the Agency specifically consider a performance-based regulation? Please explain. Performance-based regulations define the required outcome, but don't dictate the process the regulated stakeholders must use to achieve compliance.

The concept of performance-based rule-making does not apply to these services.

12. What measures did the Agency take to ensure that this regulation does not duplicate an existing Ohio regulation?

Rules involving Medicaid providers are housed exclusively within agency 5160 of the Ohio Administrative Code. Within this division, rules are generally separated out by topic. It is clear which rules apply to which type of provider and item or service; in this instance, there was no duplication.

13. Please describe the Agency's plan for implementation of the regulation, including any measures to ensure that the regulation is applied consistently and predictably for the regulated community.

The policy changes will be incorporated into (1) internal Medicaid processes and (2) the Medicaid Information Technology System (MITS), which is the department's electronic claim-payment system. Incorporation into ODM processes and systems will ensure that the rules are applied consistently and predictably.

Adverse Impact to Business

14. Provide a summary of the estimated cost of compliance with the rule. Specifically, please do the following:

- a. Identify the scope of the impacted business community;**
- b. Identify the nature of the adverse impact (e.g., license fees, fines, employer time for compliance); and**
- c. Quantify the expected adverse impact from the regulation.**
The adverse impact can be quantified in terms of dollars, hours to comply, or other factors; and may be estimated for the entire regulated population or for a “representative business.” Please include the source for your information/estimated impact.

- a. This rule affects providers of surgical services.
- b. The current rule specifies that when applying a cast in the absence of surgery, a provider "must maintain, at a minimum, documentation that supports that the service was an initial cast application for a non-surgical service and the quantity and description of the casting supplies." (This requirement is omitted from the new rule.)

In the new rule, a statement is added that payment for the surgical treatment of obesity, a service that was previously non-covered, now requires prior authorization.

- c. A notation that a cast was applied without a related surgical procedure would naturally be included in an individual's medical record; no expenditure of time or effort can therefore be attributed to the rule. It is not clear whether the amount of material used is routinely recorded in the medical record; if not, this rule provision could require from ten to thirty seconds per procedure, the total time depending on the technological sophistication of the provider's record-keeping system (networked data entry, handwritten log sheets).

The adverse impact of the new rule lies in the time needed to fill out paperwork. ODM estimates that each prior authorization request will take about 15 minutes to complete.

15. Why did the Agency determine that the regulatory intent justifies the adverse impact to the regulated business community?

The regulatory requirement in the current rule to maintain documentation of cast application is omitted from the new rule.

Prior authorization is often set as a requirement for processing certain claims. It is an effective tool for preventing fraud, waste, and abuse and for promoting quality and cost-effectiveness; it helps to ensure that the Ohio Medicaid program pays for services that are most appropriate to the needs of the person who will receive them.

Regulatory Flexibility

16. Does the regulation provide any exemptions or alternative means of compliance for small businesses? Please explain.

Provider enrollment requirements are not predicated on the size of an entity and cannot be waived on that basis.

17. How will the agency apply Ohio Revised Code section 119.14 (waiver of fines and penalties for paperwork violations and first-time offenders) into implementation of the regulation?

The rule imposes no fines or penalties.

18. What resources are available to assist small businesses with compliance of the regulation?

Providers that submit claims through an electronic clearinghouse (a “trading partner”) can generally rely on the clearinghouse to know current Medicaid claim-submission procedures.

Information sheets and instruction manuals on various claim-related topics are readily available on the Medicaid website.

The Bureau of Provider Services renders technical assistance to providers through its hotline, (800) 686-1516.

ODM staff members are available to provide policy interpretation.

*** DRAFT - NOT YET FILED ***

TO BE RESCINDED

5160-4-22

Surgical services.

(A) The department will reimburse physicians for most surgical procedures. The surgical procedure includes the operation per se, local infiltration, metacarpal/digital block or topical anesthesia when used, and the normal uncomplicated preoperative and postoperative care. Payment for conscious sedation is bundled into the payment for the related surgical or radiological procedure and is not reimbursed separately by the department.

(B) Physicians will be reimbursed for physician visits in addition to the surgery only as detailed in rule 5160-4-06 of the Administrative Code.

(C) For the reimbursement of surgical services, the physician must bill the appropriate code for the surgical procedure(s). Each surgical procedure must be billed using the most comprehensive surgical procedure code(s). This means procedures that are incidental to, or performed as an integral part of the comprehensive surgical service(s), must not be billed in component parts or "unbundled."

(D) Multiple surgeries.

(1) Surgical codes subject to multiple surgery pricing are indicated in the appendix to this rule. Multiple surgery pricing will apply to the procedures indicated with an "x" in the corresponding column for multiple surgery in the appendix to this rule.

(2) Reimbursement for multiple surgical procedures performed on the same patient by the same provider shall be the lesser of billed charges or:

(a) One hundred per cent of the medicaid maximum allowed for the primary procedure.

The primary procedure is considered to be the surgical procedure that has the highest medicaid maximum listed in appendix DD to rule 5160-1-60 of the Administrative Code.

(b) Fifty per cent of the medicaid maximum allowed for the secondary procedure.

(c) Twenty-five per cent of the medicaid maximum allowed for all

subsequent (tertiary, etc.) procedures.

- (3) Surgical codes subject to multiple surgery pricing may not be billed with multiple units. Billing a multiple surgery code with more than one unit will result in a denial of that line. Each surgery subject to multiple surgery pricing must be billed on a separate line using the most comprehensive surgical procedure code.
- (4) Surgical procedure codes that are not considered multiple surgery and are not bundled into the reimbursement of another surgical procedure billed will be paid at the lesser of the billed charge or the medicaid maximum regardless of whether the codes are submitted with another surgical procedure indicated with an "x" in the multiple surgery column of the appendix to this rule.
- (5) The Ohio department of medicaid (ODM) allows the 51 modifier signifying a "multiple procedure."

(E) Bilateral procedures.

- (1) Surgical codes subject to bilateral surgery pricing are contained in the appendices to this rule. Bilateral surgery pricing will apply to procedures indicated with an "x" in the corresponding column for bilateral surgery in the appendix to this rule.
- (2) Bilateral procedures, when performed bilaterally, should be billed with the bilateral surgery code on a single line with the modifier 50.
- (3) The medicaid maximum for bilateral procedures is one hundred fifty per cent of the medicaid maximum allowed for the same procedures performed unilaterally when the code is billed on a single line with the 50 modifier.
- (4) Surgical codes that are considered bilateral codes but are performed unilaterally on only one side of the body should be billed on one line unmodified or on one line with either the LT or the RT modifier indicating the side of the body on which the procedure was performed.
- (5) Surgical codes that are considered bilateral codes but are performed more than once on one or each side of the body and/or body part indicated by the code definition must be billed using only the LT and RT modifiers on each line to demonstrate the procedure was performed more than once on one or each side.

(F) Surgical procedures that may be billed with site modifiers.

- (1) Surgical procedures performed on fingers, toes, eyelids, or coronary arteries may be billed with site modifiers. Procedures that may be billed with site modifiers are indicated with an "x" in the corresponding column in the appendix to this rule.
- (2) Surgical procedures performed on hands, feet, fingers, and/or toes may be billed modified or unmodified depending on the definition of the code and the site at which the procedure was performed. For example, if the code definition indicates the right thumb, the code defines the site of the procedure.
 - (a) Surgical procedures performed on only one body part, for example one finger or one hand, one toe or one foot, may be billed unmodified.
 - (b) Surgical procedures performed on more than one body part, according to the definition of the code, must be billed with the appropriate digit modifier for each finger or toe, and/or with the LT modifier for each left hand or left foot procedure, and/or with the RT modifier for each right hand or right foot procedure.
- (3) Surgical procedures performed on eyelids may be billed using eyelid modifiers. An eyelid modifier is required if the surgery involves more than one eyelid. If the surgery was performed on only one eyelid (right or left side), the code must be billed using the appropriate eyelid modifier. If the surgical procedure was performed on both eyelids of one eye on a side, the code must be billed using the LT or the RT modifier demonstrating that the surgery was performed on both eyelids of one eye on a side.
- (4) Surgical procedures performed on the coronary arteries may be billed using the appropriate coronary artery modifier to demonstrate which artery and side.

(G) Incidental procedures.

When incidental procedures are performed through the same incision, during the same operative session, the allowable fee shall be that of the major, more comprehensive, procedure only.

(H) Assistant at surgery.

- (1) Surgical codes subject to assistant at surgery pricing are contained in the

appendix to this rule. Assistant at surgery pricing will apply to procedures indicated with an "x" in the corresponding column for assistant at surgery in the appendix to this rule.

- (2) The billing by a surgical assistant shall be no greater than his/her customary charge for the professional work rendered.
- (3) The department's payment for an assistant at surgery will be limited to the billed charge, or twenty-five per cent of the medicaid maximum allowed for the primary surgical procedure, whichever is lower.
- (4) No assistant fees will be reimbursed for assistant-at-surgery services provided by a non-physician (e.g., registered nurses, advanced practice nurses, or physician assistants).
- (5) Reimbursement will not be made for more than one assistant at surgery, regardless of the extent of surgery.
- (6) Conditions for payment for assistants at surgery in a teaching hospital.
 - (a) Reimbursement will not be made for assistants at surgery in teaching hospitals with a training program relating to the medical specialty required for the surgical procedure and where a resident in a training program is available to serve as an assistant at surgery.
 - (b) Reimbursement for an assistant at surgery in a teaching hospital may be made only if the services:
 - (i) Are required due to exceptional medical circumstances;
 - (ii) Are performed by team physicians needed to perform complex medical procedures;
 - (iii) Constitute concurrent medical care relating to a medical condition that requires the presence of and active care by a physician of another specialty during surgery; or
 - (iv) Are medically required and are furnished by a physician who is primarily engaged in the field of surgery and the primary surgeon does not utilize residents and interns in the surgical procedure he or she performs (including preoperative and postoperative care).

(7) Billing assistant at surgery services.

For reimbursement, providers must bill the appropriate code for the primary surgical procedure modified by 80.

(I) Application of casts, splints, straps or other traction devices.

- (1) Services listed in the musculoskeletal surgery section of the current procedural terminology (codes 20000 through 28899 and 29800 through 29999) include the application and removal of the first cast, splint, strap or other traction device.
- (2) The casting, splinting and strapping procedures listed at the end of the musculoskeletal surgery section of the current procedural terminology (CPT) (codes 29000 through 29799) may be billed only when the casting, splinting or strapping is performed as a replacement procedure during or after the period of follow-up care. A visit may not be billed with any of the casting, splinting or strapping codes.
 - (a) The casting codes include all professional services and supplies provided during the service.
 - (b) The splinting and strapping codes do not include the splints or straps (elastic bandages). Splints or straps may be billed as a durable medical equipment (DME) service, if it was medically necessary to replace the splint or strap.
- (3) If a cast application, strapping or splinting is provided as an initial procedure in which no surgery code is applicable (e.g., the casting or strapping of a sprained ankle or knee), the provider must bill using the appropriate visit code. When this service is provided in a non-hospital setting, the provider may also be reimbursed for the cost of the cast, splint, or strap.
 - (a) For the strapping or splinting materials, the provider must bill the appropriate DME code in accordance with Chapter 5160-10 of the Administrative Code.
 - (b) For casting materials, the provider must bill the appropriate code for casting materials in appendix DD to rule 5160-1-60 of the Administrative Code. The provider must maintain, at a minimum, documentation that supports that the service was an initial cast application for a non-surgical service and the quantity and description

of the casting supplies.

- (4) When a cast has been damaged and it is medically appropriate to repair rather than to remove and replace the cast, the provider may bill and be reimbursed for an evaluation and management service. If the casting repair is performed in a non-hospital setting, the provider may also be compensated for the casting materials by billing one of the appropriate codes for casting materials.

Effective:

Five Year Review (FYR) Dates:

Certification

Date

Promulgated Under:	119.03
Statutory Authority:	5164.02
Rule Amplifies:	5162.03, 5164.02, 5164.70
Prior Effective Dates:	06/03/1983, 10/01/1983 (Emer), 12/29/1983, 01/01/1986, 05/09/1986, 06/16/1988, 01/13/1989 (Emer), 04/13/1989, 09/01/1989, 02/17/1991, 12/01/1992, 01/01/2001, 10/01/2003, 10/15/2006, 12/29/2006 (Emer), 03/29/2007, 12/31/2007 (Emer), 03/30/2008, 12/31/2008 (Emer), 03/31/2009, 12/31/2009 (Emer), 03/31/2010, 12/06/2010, 12/30/2010 (Emer), 03/30/2011, 12/30/2011 (Emer), 3/29/2012, 12/30/2012 (Emer), 03/28/2013, 12/18/2013 (Emer), 03/27/2014

RESCINDED

Appendix 5160-4-22

Appendix to rule 5160-4-22

Effective for claims submitted on or after March 30, 2014

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
10030	GUIDED CATH DRAINAGE			x		
10040	ACNE SURGERY			x		
10060	DRAINAGE OF SKIN ABSCESS			x		
10061	DRAINAGE OF SKIN ABSCESS			x		
10080	DRAINAGE OF PILONIDAL CYST			x		
10081	DRAINAGE OF PILONIDAL CYST			x		
10120	REMOVE FOREIGN BODY			x		
10121	REMOVE FOREIGN BODY			x		
10140	DRAINAGE OF HEMATOMA/FLUID			x		
10160	PUNCTURE DRAINAGE OF LESION			x		
10180	COMPLEX DRAINAGE, WOUND			x		
11000	DEBRIDE INFECTED SKIN			x		
11004	DEBRIDE GENITALIA & PERINEUM			x		
11006	DEBRIDE GENIT/PER/ABDOM WALL			x		
11010	DEBRIDE SKIN, FX			x		
11011	DEBRIDE SKIN/MUSCLE, FX			x		
11012	DEBRIDE SKIN/MUSCLE/BONE, FX			x		
11042	DEBRIDE SKIN/TISSUE			x		
11043	DEBRIDE TISSUE/MUSCLE			x		
11044	DEBRIDE TISSUE/MUSCLE/BONE			x		
11045	DBRDMT SUBCUTANEOUS TISSUE EA ADDL 20 SQ CM			x		
11046	DBRDMT M&F EA ADDL 20 SQ CM			x		
11047	DEBRIDEMENT BONE EA ADDL 20 SQ CM<			x		
11055	TRIM SKIN LESION			x		
11056	TRIM SKIN LESIONS, 2 TO 4			x		
11057	TRIM SKIN LESIONS, OVER 4			x		
11100	BIOPSY, SKIN LESION			x		
11200	REMOVAL OF SKIN TAGS			x		
11300	SHAVE SKIN LESION			x		
11301	SHAVE SKIN LESION			x		
11302	SHAVE SKIN LESION			x		
11303	SHAVE SKIN LESION			x		
11305	SHAVE SKIN LESION			x		
11306	SHAVE SKIN LESION			x		
11307	SHAVE SKIN LESION			x		
11308	SHAVE SKIN LESION			x		
11310	SHAVE SKIN LESION			x		
11311	SHAVE SKIN LESION			x		
11312	SHAVE SKIN LESION			x		
11313	SHAVE SKIN LESION			x		
11400	EXC TR-EXT B9+MARG 0.5 < CM			x		
11401	EXC TR-EXT B9+MARG 0.6-1 CM			x		
11402	EXC TR-EXT B9+MARG 1.1-2 CM			x		
11403	EXC TR-EXT B9+MARG 2.1-3 CM			x		
11404	EXC TR-EXT B9+MARG 3.1-4 CM			x		
11406	EXC TR-EXT B9+MARG > 4.0 CM			x		
11420	EXC H-F-NK-SP B9+MARG 0.5 <			x		
11421	EXC H-F-NK-SP B9+MARG 0.6-1			x		
11422	EXC H-F-NK-SP B9+MARG 1.1-2			x		
11423	EXC H-F-NK-SP B9+MARG 2.1-3			x		
11424	EXC H-F-NK-SP B9+MARG 3.1-4			x		
11426	EXC H-F-NK-SP B9+MARG > 4 CM			x		
11440	EXC FACE-MM B9+MARG 0.5 < CM			x		
11441	EXC FACE-MM B9+MARG 0.6-1 CM			x		
11442	EXC FACE-MM B9+MARG 1.1-2 CM			x		
11443	EXC FACE-MM B9+MARG 2.1-3 CM			x		
11444	EXC FACE-MM B9+MARG 3.1-4 CM			x		
11446	EXC FACE-MM B9+MARG > 4 CM			x		
11450	REMOVAL, SWEAT GLAND LESION		x	x		x
11451	REMOVAL, SWEAT GLAND LESION		x	x		x
11462	REMOVAL, SWEAT GLAND LESION		x	x		x
11463	REMOVAL, SWEAT GLAND LESION		x	x		x
11470	REMOVAL, SWEAT GLAND LESION		x	x		x
11471	REMOVAL, SWEAT GLAND LESION		x	x		x
11600	EXC TR-EXT MLG+MARG 0.5 < CM			x		
11601	EXC TR-EXT MLG+MARG 0.6-1 CM			x		
11602	EXC TR-EXT MLG+MARG 1.1-2 CM			x		
11603	EXC TR-EXT MLG+MARG 2.1-3 CM			x		
11604	EXC TR-EXT MLG+MARG 3.1-4 CM			x		
11606	EXC TR-EXT MLG+MARG > 4 CM			x		
11620	EXC H-F-NK-SP MLG+MARG 0.5 <			x		
11621	EXC H-F-NK-SP MLG+MARG 0.6-1			x		
11622	EXC H-F-NK-SP MLG+MARG 1.1-2			x		
11623	EXC H-F-NK-SP MLG+MARG 2.1-3			x		
11624	EXC H-F-NK-SP MLG+MARG 3.1-4	x		x		
11626	EXC H-F-NK-SP MLG+MAR > 4 CM			x		
11640	EXC FACE-MM MALIG+MARG 0.5 <	x		x		
11641	EXC FACE-MM MALIG+MARG 0.6-1			x		
11642	EXC FACE-MM MALIG+MARG 1.1-2	x		x		
11643	EXC FACE-MM MALIG+MARG 2.1-3			x		
11644	EXC FACE-MM MALIG+MARG 3.1-4			x		
11646	EXC FACE-MM MLG+MARG > 4 CM			x		
11730	REMOVAL OF NAIL PLATE			x		
11740	DRAIN BLOOD FROM UNDER NAIL			x	x	
11750	REMOVAL OF NAIL BED			x	x	
11752	REMOVE NAIL BED/FINGER TIP			x	x	
11755	BIOPSY, NAIL UNIT			x	x	
11760	REPAIR OF NAIL BED			x	x	
11762	RECONSTRUCTION OF NAIL BED			x	x	
11765	EXCISION OF NAIL FOLD, TOE			x	x	
11770	REMOVAL OF PILONIDAL LESION			x		
11771	REMOVAL OF PILONIDAL LESION			x		
11772	REMOVAL OF PILONIDAL LESION			x		
11900	INJECTION INTO SKIN LESIONS			x		
11901	ADDED SKIN LESIONS INJECTION			x		
11950	THERAPY FOR CONTOUR DEFECTS			x		
11951	THERAPY FOR CONTOUR DEFECTS			x		
11952	THERAPY FOR CONTOUR DEFECTS			x		
11954	THERAPY FOR CONTOUR DEFECTS			x		
11960	INSERT TISSUE EXPANDER(S)			x		
11971	REMOVE TISSUE EXPANDER(S)		x	x		
11976	REMOVAL OF CONTRACEPTIVE CAP			x		
11980	IMPLANT HORMONE PELLET(S)			x		

Covered Surgery Code	Description	Modifier			
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)
11981	INSERT DRUG IMPLANT DEVICE			X	
11982	REMOVE DRUG IMPLANT DEVICE			X	
11983	REMOVE/INSERT DRUG IMPLANT			X	
12001	REPAIR SUPERFICIAL WOUND(S)			X	
12002	REPAIR SUPERFICIAL WOUND(S)			X	
12004	REPAIR SUPERFICIAL WOUND(S)			X	
12005	REPAIR SUPERFICIAL WOUND(S)			X	
12006	REPAIR SUPERFICIAL WOUND(S)			X	
12007	REPAIR SUPERFICIAL WOUND(S)			X	
12011	REPAIR SUPERFICIAL WOUND(S)			X	
12013	REPAIR SUPERFICIAL WOUND(S)			X	
12014	REPAIR SUPERFICIAL WOUND(S)			X	
12015	REPAIR SUPERFICIAL WOUND(S)			X	
12016	REPAIR SUPERFICIAL WOUND(S)			X	
12017	REPAIR SUPERFICIAL WOUND(S)			X	
12018	REPAIR SUPERFICIAL WOUND(S)			X	
12020	CLOSURE OF SPLIT WOUND	X		X	
12021	CLOSURE OF SPLIT WOUND			X	
12031	INTMD WND REPAIR S/TR/EXT			X	
12032	INTMD WND REPAIR S/TR/EXT			X	
12034	INTMD WND REPAIR S/TR/EXT			X	
12035	INTMD WND REPAIR S/TR/EXT			X	
12036	INTMD WND REPAIR S/TR/EXT			X	
12037	INTMD WND REPAIR S/TR/EXT			X	
12041	INTMD WND REPAIR N-HF/GENIT			X	
12042	INTMD WND REPAIR N-HG/GENIT			X	
12044	INTMD WND REPAIR N-HG/GENIT			X	
12045	INTMD WND REPAIR N-HG/GENIT			X	
12046	INTMD WND REPAIR N-HG/GENIT			X	
12047	INTMD WND REPAIR N-HG/GENIT	X		X	
12051	INTMD WND REPAIR FACE/MM			X	
12052	INTMD WND REPAIR FACE/MM			X	
12053	INTMD WND REPAIR FACE/MM			X	
12054	INTMD WND REPAIR FACE/MM			X	
12055	INTMD WND REPAIR FACE/MM			X	
12056	INTMD WND REPAIR FACE/MM			X	
12057	INTMD WND REPAIR FACE/MM	X		X	
13100	REPAIR OF WOUND OR LESION			X	
13101	REPAIR OF WOUND OR LESION			X	
13120	REPAIR OF WOUND OR LESION			X	
13121	REPAIR OF WOUND OR LESION			X	
13131	REPAIR OF WOUND OR LESION			X	
13132	REPAIR OF WOUND OR LESION			X	
13150	REPAIR OF WOUND OR LESION			X	
13151	REPAIR OF WOUND OR LESION			X	
13152	REPAIR OF WOUND OR LESION			X	
13160	LATE CLOSURE OF WOUND			X	
14000	SKIN TISSUE REARRANGEMENT			X	
14001	SKIN TISSUE REARRANGEMENT			X	
14020	SKIN TISSUE REARRANGEMENT			X	
14021	SKIN TISSUE REARRANGEMENT			X	
14040	SKIN TISSUE REARRANGEMENT			X	
14041	SKIN TISSUE REARRANGEMENT			X	
14060	SKIN TISSUE REARRANGEMENT			X	
14061	SKIN TISSUE REARRANGEMENT			X	
14301	SKIN TISSUE REARRANGEMENT	X		X	
14302	SKIN TISSUE REARRANGEMENT ADD-ON	X		X	
14350	SKIN TISSUE REARRANGEMENT			X	X
15050	SKIN PINCH GRAFT			X	
15100	SKIN SPLT GRFT, TRNK/ARM/LEG			X	
15101	SKIN SPLT GRFT T/A/L ADD-ON			X	
15110	EPIDRM AUTOGRFT TRNK/ARM/LEG			X	
15115	EPIDRM A-GRFT FACE/NCK/HF/G			X	
15120	SKN SPLT A-GRFT FAC/NCK/HF/G			X	
15130	DERM AUTOGRAFT, TRNK/ARM/LEG			X	
15131	DER GRAFT,TRUNK,LIMBS,EACH ADD'L 100SCM			X	
15135	DERM AUTOGRAFT FACE/NCK/HF/G			X	
15150	CULT EPIDERM GRFT T/ARM/LEG			X	
15155	CULT EPIDERM GRAFT, F/N/HF/G			X	
15156	TISSUE EPID GRFT,FACE,ETC:ADD'L 100SQ CM<			X	
15157	TISSUE EPID GRFT,FACE,ETC:ADD'L 1-75SQ CM<			X	
15200	SKIN FULL GRAFT, TRUNK			X	
15201	SKIN FULL GRAFT TRUNK ADD-ON			X	
15220	SKIN FULL GRAFT SCLP/ARM/LEG			X	
15240	SKIN FULL GRFT FACE/GENIT/HF			X	
15241	SKIN FULL GRAFT ADD-ON			X	
15260	SKIN FULL GRAFT EEN & LIPS			X	
15261	SKIN FULL GRAFT ADD-ON			X	
15271	APP SKN SUB GRFT T/A/L AREA/<100SCM /<1ST 25 SCM			X	
15272	APP SKN SUB GRFT T/A/L AREA/<100SCM EA ADL 25SCM			X	
15273	APP SKN SUB GRFT T/A/L AREA/>100SCM 1ST 100SCM			X	
15274	APP SKN SUB GRFT T/A/L AREA/>100SCM ADL 100SCM			X	
15275	SUB GRFT F/S/N/HF/G/M/D /<100SCM /<1ST 25 SCM			X	
15276	SUB GRFT F/S/N/HF/G/M/D /<100SCM EA ADL 25SCM			X	
15277	SUB GRFT F/S/N/HF/G/M/D />100SCM 1ST 100SCM			X	
15278	SUB GRFT F/S/N/HF/G/M/D />100SCM ADL 100SCM			X	
15570	FORM SKIN PEDICLE FLAP			X	
15572	FORM SKIN PEDICLE FLAP			X	
15574	FORM SKIN PEDICLE FLAP			X	
15576	FORM SKIN PEDICLE FLAP			X	
15600	SKIN GRAFT			X	
15610	SKIN GRAFT			X	
15620	SKIN GRAFT			X	
15630	SKIN GRAFT			X	
15650	TRANSFER SKIN PEDICLE FLAP			X	
15731	FOREHEAD FLAP W/VASC PEDICLE			X	
15732	MUSCLE-SKIN GRAFT, HEAD/NECK	X		X	
15734	MUSCLE-SKIN GRAFT, TRUNK	X		X	
15736	MUSCLE-SKIN GRAFT, ARM			X	
15738	MUSCLE-SKIN GRAFT, LEG	X		X	
15740	ISLAND PEDICLE FLAP GRAFT			X	
15750	NEUROVASCULAR PEDICLE GRAFT	X		X	
15756	FREE MYO/SKIN FLAP MICROVASC	X		X	
15757	FREE SKIN FLAP, MICROVASC	X		X	
15758	FREE FASCIAL FLAP, MICROVASC	X		X	
15760	COMPOSITE SKIN GRAFT			X	

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
15770	DERMA-FAT-FASCIA GRAFT	x		x		
15777	IMPLNT BIO IMPLNT FOR SOFT TISSUE REINFORCEMENT		x	x		
15786	ABRASION, LESION, SINGLE			x		
15840	GRAFT FOR FACE NERVE PALSY			x		
15841	GRAFT FOR FACE NERVE PALSY	x		x		
15842	FLAP FOR FACE NERVE PALSY	x		x		
15845	SKIN AND MUSCLE REPAIR, FACE	x		x		
15851	REMOVAL OF SUTURES			x		
15852	DRESSING CHANGE NOT FOR BURN			x		
15920	REMOVAL OF TAIL BONE ULCER			x		x
15922	REMOVAL OF TAIL BONE ULCER	x		x		x
15931	REMOVE SACRUM PRESSURE SORE			x		
15933	REMOVE SACRUM PRESSURE SORE			x		
15934	REMOVE SACRUM PRESSURE SORE			x		
15935	REMOVE SACRUM PRESSURE SORE	x		x		
15936	REMOVE SACRUM PRESSURE SORE			x		
15937	REMOVE SACRUM PRESSURE SORE	x		x		
15940	REMOVE HIP PRESSURE SORE			x		x
15941	REMOVE HIP PRESSURE SORE			x		x
15944	REMOVE HIP PRESSURE SORE			x		x
15945	REMOVE HIP PRESSURE SORE			x		x
15946	REMOVE HIP PRESSURE SORE			x		x
15950	REMOVE THIGH PRESSURE SORE			x		x
15951	REMOVE THIGH PRESSURE SORE			x		x
15952	REMOVE THIGH PRESSURE SORE	x		x		x
15953	REMOVE THIGH PRESSURE SORE			x		x
15956	REMOVE THIGH PRESSURE SORE			x		x
15958	REMOVE THIGH PRESSURE SORE			x		x
15999	UNLISTED PROCEDURE, EXCISION PRESSURE ULCER			x		
16000	INITIAL TREATMENT OF BURN(S)			x		
16020	DRESS/DEBRID P-THICK BURN, S			x		
16025	DRESS/DEBRID P-THICK BURN, M			x		
16030	DRESS/DEBRID P-THICK BURN, L			x		
16035	INCISION OF BURN SCAB, INITI			x		
17000	DESTRUCT PREMALG LESION			x		
17003	DESTRUCT PREMALG LES, 2-14			*		
17106	DESTRUCTION OF SKIN LESIONS			x		
17107	DESTRUCTION OF SKIN LESIONS			x		
17108	DESTRUCTION OF SKIN LESIONS			x		
17110	DESTRUCT B9 LESION, 1-14			x		
17111	DESTRUCT LESION, 15 OR MORE			x		
17250	CHEMICAL CAUTERY, TISSUE			x		
17260	DESTRUCTION OF SKIN LESIONS			x		
17261	DESTRUCTION OF SKIN LESIONS			x		
17262	DESTRUCTION OF SKIN LESIONS			x		
17263	DESTRUCTION OF SKIN LESIONS			x		
17264	DESTRUCTION OF SKIN LESIONS			x		
17266	DESTRUCTION OF SKIN LESIONS			x		
17270	DESTRUCTION OF SKIN LESIONS			x		
17271	DESTRUCTION OF SKIN LESIONS			x		
17272	DESTRUCTION OF SKIN LESIONS			x		
17273	DESTRUCTION OF SKIN LESIONS			x		
17274	DESTRUCTION OF SKIN LESIONS			x		
17276	DESTRUCTION OF SKIN LESIONS			x		
17280	DESTRUCTION OF SKIN LESIONS			x		
17281	DESTRUCTION OF SKIN LESIONS			x		
17282	DESTRUCTION OF SKIN LESIONS			x		
17283	DESTRUCTION OF SKIN LESIONS			x		
17284	DESTRUCTION OF SKIN LESIONS			x		
17286	DESTRUCTION OF SKIN LESIONS			x		
17311	MOHS, 1 STAGE, H/N/HF/G			x		
17313	MOHS, 1 STAGE, T/A/L			x		
17340	CRYOTHERAPY OF SKIN			x		
17360	SKIN PEEL THERAPY			x		
17999	UNLISTED PROCEDURE SKIN MEMBRAN SUBC TIS			x		
19000	DRAINAGE OF BREAST LESION			x		x
19020	INCISION OF BREAST LESION		x	x		x
19030	INJECTION FOR BREAST X-RAY		x	x		x
19081	BIOPSY BREAST 1ST LESION STRTCTC GUID		x	x		x
19083	BIOPSY BREAST 1ST LESION ULTRA GUID		x	x		x
19085	BIOPSY BREAST 1ST LESIION MRI GUID		x	x		x
19100	BX BREAST PERCUT W/O IMAGE		x	x		x
19101	BIOPSY OF BREAST, OPEN		x	x		x
19102	BX BREAST PERCUT W/IMAGE		*	*		*
19103	BX BREAST PERCUT W/DEVICE		*	*		*
19105	CRYOSURG ABLATE FA, EACH		x	x		x
19110	NIPPLE EXPLORATION		x	x		x
19112	EXCISE BREAST DUCT FISTULA		x	x		x
19120	REMOVAL OF BREAST LESION		x	x		x
19125	EXCISION, BREAST LESION		x	x		x
19126	EXCISION, ADDL BREAST LESION			x		x
19260	REMOVAL OF CHEST WALL LESION	x		x		
19271	REVISION OF CHEST WALL	x		x		
19272	EXTENSIVE CHEST WALL SURGERY	x		x		
19281	PLACE BREAST DEVICE MAMMO GUID		x	x		x
19283	PLACE BREAST DEVICE STRTCTC GUID		x	x		x
19285	PLACE BREAST DEVICE ULTRA GUID		x	x		x
19287	PLACE BREAST DEVICE MRI GUID		x	x		x
19299	PLACE NEEDLE WIRE, BREAST		*	*		*
19291	PLACE NEEDLE WIRE, BREAST			*		*
19295	PLACE BREAST CLIP, PERCUT			*		*
19296	PLACE PO BREAST CATH FOR RAD		x	x		x
19297	PLACE BREAST CATH FOR RAD			x		x
19298	PLACE BREAST RAD TUBE/CATHS		x	x		x
19300	REMOVAL OF BREAST TISSUE		x	x		x
19301	PARTIAL MASTECTOMY			x		x
19302	P-MASTECTOMY W/LN REMOVAL	x		x		x
19303	MAST, SIMPLE, COMPLETE	x		x		x
19304	MAST, SUBO	x		x		x
19305	MAST, RADICAL	x		x		x
19306	MAST, RAD, URBAN TYPE	x		x		x
19307	MAST, MOD RAD	x		x		x
19316	SUSPENSION OF BREAST	x		x		x
19318	REDUCTION OF LARGE BREAST	x		x		x
19324	ENLARGE BREAST		x	x		x
19325	ENLARGE BREAST WITH IMPLANT		x	x		x

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
19328	REMOVAL OF BREAST IMPLANT		X	X		X
19330	REMOVAL OF IMPLANT MATERIAL		X	X		X
19340	IMMEDIATE BREAST PROSTHESIS		X	X		X
19342	DELAYED BREAST PROSTHESIS		X	X		X
19350	BREAST RECONSTRUCTION		X	X		X
19357	BREAST RECONSTRUCTION	X	X	X		X
19361	BREAST RECONSTR W/LAT FLAP	X	X	X		X
19364	BREAST RECONSTRUCTION	X	X	X		X
19366	BREAST RECONSTRUCTION	X	X	X		X
19367	BREAST RECONSTRUCTION	X	X	X		X
19368	BREAST RECONSTRUCTION	X	X	X		X
19369	BREAST RECONSTRUCTION	X	X	X		X
19370	SURGERY OF BREAST CAPSULE		X	X		X
19371	REMOVAL OF BREAST CAPSULE		X	X		X
19499	BREAST SURGERY PROCEDURE			X		
20005	INCISION OF DEEP ABSCESS			X		
20100	EXPLORE WOUND, NECK	X	X	X		X
20101	EXPLORE WOUND, CHEST			X		
20102	EXPLORE WOUND, ABDOMEN			X		
20103	EXPLORE WOUND, EXTREMITY			X		X
20150	EXCISE EPIPHYSEAL BAR	X	X	X		X
20200	MUSCLE BIOPSY			X		
20205	DEEP MUSCLE BIOPSY			X		
20206	NEEDLE BIOPSY, MUSCLE			X		
20220	BONE BIOPSY, TROCAR/NEEDLE			X		
20225	BONE BIOPSY, TROCAR/NEEDLE			X		
20240	BONE BIOPSY, EXCISIONAL			X		
20245	BONE BIOPSY, EXCISIONAL			X		
20250	OPEN BONE BIOPSY			X		
20251	OPEN BONE BIOPSY	X		X		
20500	INJECTION OF SINUS TRACT			X		X
20501	INJECT SINUS TRACT FOR X-RAY			X		X
20520	REMOVAL OF FOREIGN BODY			X		
20525	REMOVAL OF FOREIGN BODY			X		
20526	THER INJECTION, CARP TUNNEL		X	X		X
20527	INJECTION ENZYME PALMAR FASCIAL CORD		X	X		
20550	INJ TENDON SHEATH/LIGAMENT		X	X		
20551	INJ TENDON ORIGIN/INSERTION			X		
20552	INJ TRIGGER POINT, 1/2 MUSCL			X		
20553	INJECT TRIGGER POINTS, >= 3			X		
20555	PLACE NDIL MUSC/TIS FOR RT			X		
20600	DRAIN/INJECT, JOINT/BURSA		X	X	X	X
20605	DRAIN/INJECT, JOINT/BURSA		X	X		X
20610	DRAIN/INJECT, JOINT/BURSA		X	X		X
20612	ASPIRATE/INJ GANGLION CYST			X		
20615	TREATMENT OF BONE CYST			X		
20650	INSERT AND REMOVE BONE PIN			X		
20660	APPLY, REM FIXATION DEVICE			X		
20661	APPLICATION OF HEAD BRACE			X		
20662	APPLICATION OF PELVIS BRACE			X		
20663	APPLICATION OF THIGH BRACE			X		
20664	HALO BRACE APPLICATION		X	X		X
20665	REMOVAL OF FIXATION DEVICE			X		
20670	REMOVAL OF SUPPORT IMPLANT			X		
20680	REMOVAL OF SUPPORT IMPLANT			X		
20690	APPLY BONE FIXATION DEVICE			X		X
20692	APPLY BONE FIXATION DEVICE	X		X		X
20693	ADJUST BONE FIXATION DEVICE			X		
20694	REMOVE BONE FIXATION DEVICE			X		
20696	COMP MULTIPLANE EXT FIXATION	X		X		X
20697	COMP EXT FIXATE, STRUT CHANGE	X		X		X
20802	REPLANTATION, ARM, COMPLETE	X	X	X		X
20805	REPLANT FOREARM, COMPLETE	X	X	X		X
20808	REPLANTATION HAND, COMPLETE	X	X	X		X
20816	REPLANTATION DIGIT, COMPLETE	X		X	X	
20822	REPLANTATION DIGIT, COMPLETE	X		X	X	
20824	REPLANTATION THUMB, COMPLETE	X	X	X	X	X
20827	REPLANTATION THUMB, COMPLETE	X	X	X	X	X
20838	REPLANTATION FOOT, COMPLETE	X	X	X		X
20900	REMOVAL OF BONE FOR GRAFT	X		X		
20902	REMOVAL OF BONE FOR GRAFT	X		X		
20910	REMOVE CARTILAGE FOR GRAFT			X		
20912	REMOVE CARTILAGE FOR GRAFT			X		
20920	REMOVAL OF FASCIA FOR GRAFT			X		
20922	REMOVAL OF FASCIA FOR GRAFT	X		X		
20924	REMOVAL OF TENDON FOR GRAFT	X		X	X	X
20926	REMOVAL OF TISSUE FOR GRAFT			X		
20937	SPINAL BONE AUTOGRAFT	X		X		
20938	SPINAL BONE AUTOGRAFT	X		X		
20950	FLUID PRESSURE, MUSCLE			X		
20955	FIBULA BONE GRAFT, MICROVASC	X		X		X
20956	ILIAC BONE GRAFT, MICROVASC	X		X		X
20957	MT BONE GRAFT, MICROVASC	X		X	X	X
20962	OTHER BONE GRAFT, MICROVASC	X		X		
20969	BONE/SKIN GRAFT, MICROVASC	X		X		
20970	BONE/SKIN GRAFT, ILIAC CREST	X		X		X
20972	BONE/SKIN GRAFT, METATARSAL	X		X	X	X
20973	BONE/SKIN GRAFT, GREAT TOE	X	X	X	X	X
20975	ELECTRICAL BONE STIMULATION	X		X		
20982	ABLATE, BONE TUMOR(S) PERQ		X	X		
20999	UNLISTED PROCEDURE MUSCULOSKELETAL GENER			X		
21010	INCISION OF JAW JOINT		X	X		X
21011	EXC FACE LES SC < 2 CM	X		X		
21012	EXC FACE LES SC < 2 CM	X		X		
21013	EXC FACE TUM DEEP < 2 CM	X		X		
21014	EXC FACE TUM DEEP < 2 CM	X		X		
21015	RESECTION OF FACIAL TUMOR			X		
21016	RESECT FACE TUM > 2 CM	X		X		
21025	EXCISION OF BONE, LOWER JAW			X		X
21026	EXCISION OF FACIAL BONE(S)			X		
21029	CONTOUR OF FACE BONE LESION			X		
21030	EXCISE MAX/ZYGOMA B9 TUMOR		X	X		X
21031	REMOVE EXOSTOSIS, MANDIBLE		X	X		X
21032	REMOVE EXOSTOSIS, MAXILLA			X		X
21034	EXCISE MAX/ZYGOMA MLG TUMOR	X		X		X
21040	EXCISE MANDIBLE LESION			X		X

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
21044	REMOVAL OF JAW BONE LESION	x		x		x
21045	EXTENSIVE JAW SURGERY	x		x		x
21046	REMOVE MANDIBLE CYST COMPLEX			x		x
21047	EXCISE LWR JAW CYST W/REPAIR	x		x		x
21048	REMOVE MAXILLA CYST COMPLEX			x		x
21049	EXCIS UPPR JAW CYST W/REPAIR	x		x		x
21050	REMOVAL OF JAW JOINT		x	x		x
21060	REMOVE JAW JOINT CARTILAGE	x	x	x		x
21070	REMOVE CORONOID PROCESS		x	x		x
21073	MNPJ OF TMJ W/ANESTH		x	x		
21076	PREPARE FACE/ORAL PROSTHESIS			x		
21077	PREPARE FACE/ORAL PROSTHESIS		x	x		x
21079	PREPARE FACE/ORAL PROSTHESIS			x		
21080	PREPARE FACE/ORAL PROSTHESIS			x		
21081	PREPARE FACE/ORAL PROSTHESIS			x		
21082	PREPARE FACE/ORAL PROSTHESIS			x		
21083	PREPARE FACE/ORAL PROSTHESIS			x		
21084	PREPARE FACE/ORAL PROSTHESIS			x		
21085	PREPARE FACE/ORAL PROSTHESIS			x		
21086	PREPARE FACE/ORAL PROSTHESIS		x	x		x
21087	PREPARE FACE/ORAL PROSTHESIS			x		
21100	MAXILLOFACIAL FIXATION			x		
21116	INJECTION, JAW JOINT X-RAY		x	x		x
21120	RECONSTRUCTION OF CHIN			x		
21121	RECONSTRUCTION OF CHIN	x		x		
21122	RECONSTRUCTION OF CHIN	x		x		
21123	RECONSTRUCTION OF CHIN	x		x		
21125	AUGMENTATION, LOWER JAW BONE	x		x		x
21127	AUGMENTATION, LOWER JAW BONE	x		x		x
21137	REDUCTION OF FOREHEAD	x		x		
21138	REDUCTION OF FOREHEAD	x		x		
21139	REDUCTION OF FOREHEAD	x		x		
21141	RECONSTRUCT MIDFACE, LEFORT	x		x		
21142	RECONSTRUCT MIDFACE, LEFORT	x		x		
21143	RECONSTRUCT MIDFACE, LEFORT	x		x		
21145	RECONSTRUCT MIDFACE, LEFORT	x		x		
21146	RECONSTRUCT MIDFACE, LEFORT	x		x		
21147	RECONSTRUCT MIDFACE, LEFORT	x		x		
21150	RECONSTRUCT MIDFACE, LEFORT	x		x		
21151	RECONSTRUCT MIDFACE, LEFORT	x		x		
21154	RECONSTRUCT MIDFACE, LEFORT	x		x		
21155	RECONSTRUCT MIDFACE, LEFORT	x		x		
21159	RECONSTRUCT MIDFACE, LEFORT	x		x		
21160	RECONSTRUCT MIDFACE, LEFORT	x		x		
21172	RECONSTRUCT ORBIT/FOREHEAD	x		x		
21175	RECONSTRUCT ORBIT/FOREHEAD	x		x		
21179	RECONSTRUCT ENTIRE FOREHEAD	x		x		
21180	RECONSTRUCT ENTIRE FOREHEAD	x		x		
21181	CONTOUR CRANIAL BONE LESION			x		
21182	RECONSTRUCT CRANIAL BONE	x		x		
21183	RECONSTRUCT CRANIAL BONE	x		x		
21184	RECONSTRUCT CRANIAL BONE	x		x		
21188	RECONSTRUCTION OF MIDFACE	x		x		
21193	RECONST LWR JAW W/O GRAFT	x		x		
21194	RECONST LWR JAW W/GRAFT	x		x		
21195	RECONST LWR JAW W/O FIXATION	x		x		
21196	RECONST LWR JAW W/FIXATION	x		x		
21198	RECONSTR LWR JAW SEGMENT	x		x		x
21199	RECONSTR LWR JAW W/ADVANCE	x		x		
21206	RECONSTRUCT UPPER JAW BONE	x		x		x
21208	AUGMENTATION OF FACIAL BONES			x		
21209	REDUCTION OF FACIAL BONES	x		x		
21210	FACE BONE GRAFT			x		
21215	LOWER JAW BONE GRAFT			x		x
21230	RIB CARTILAGE GRAFT			x		
21235	EAR CARTILAGE GRAFT			x		x
21240	RECONSTRUCTION OF JAW JOINT	x	x	x		x
21242	RECONSTRUCTION OF JAW JOINT	x		x		x
21243	RECONSTRUCTION OF JAW JOINT	x	x	x		x
21244	RECONSTRUCTION OF LOWER JAW	x		x		x
21245	RECONSTRUCTION OF JAW	x		x		x
21246	RECONSTRUCTION OF JAW	x		x		x
21247	RECONSTRUCT LOWER JAW BONE	x	x	x		x
21248	RECONSTRUCTION OF JAW			x		
21249	RECONSTRUCTION OF JAW			x		
21255	RECONSTRUCT LOWER JAW BONE	x	x	x		x
21256	RECONSTRUCTION OF ORBIT	x	x	x		x
21260	REVISE EYE SOCKETS	x		x		
21261	REVISE EYE SOCKETS	x		x		
21263	REVISE EYE SOCKETS	x		x		
21267	REVISE EYE SOCKETS	x	x	x		
21268	REVISE EYE SOCKETS	x	x	x		
21270	AUGMENTATION, CHEEK BONE	x	x	x		x
21275	REVISION, ORBITOFACIAL BONES	x		x		x
21280	REVISION OF EYELID		x	x		x
21282	REVISION OF EYELID		x	x		x
21295	REVISION OF JAW MUSCLE/BONE		x	x		x
21296	REVISION OF JAW MUSCLE/BONE		x	x		x
21299	CRANIO/MAXILLOFACIAL SURGERY			x		
21310	TREATMENT OF NOSE FRACTURE			x		
21315	TREATMENT OF NOSE FRACTURE			x		
21320	TREATMENT OF NOSE FRACTURE			x		
21325	TREATMENT OF NOSE FRACTURE			x		
21330	TREATMENT OF NOSE FRACTURE			x		
21332	TREATMENT OF NOSE FRACTURE			x		
21336	TREAT NASAL SEPTAL FRACTURE			x		
21337	TREAT NASAL SEPTAL FRACTURE			x		
21338	TREAT NASOETHMOID FRACTURE			x		x
21339	TREAT NASOETHMOID FRACTURE	x		x		x
21340	TREATMENT OF NOSE FRACTURE			x		x
21343	TREATMENT OF SINUS FRACTURE	x		x		x
21344	TREATMENT OF SINUS FRACTURE	x		x		x
21345	TREAT NOSE/JAW FRACTURE			x		
21346	TREAT NOSE/JAW FRACTURE			x		
21347	TREAT NOSE/JAW FRACTURE	x		x		
21348	TREAT NOSE/JAW FRACTURE	x		x		

Covered Surgery Code	Description	Modifier			
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)
21355	TREAT CHEEK BONE FRACTURE		X	X	
21356	TREAT CHEEK BONE FRACTURE		X	X	
21360	TREAT CHEEK BONE FRACTURE	X	X	X	
21365	TREAT CHEEK BONE FRACTURE	X	X	X	
21366	TREAT CHEEK BONE FRACTURE	X	X	X	
21385	TREAT EYE SOCKET FRACTURE	X	X	X	
21386	TREAT EYE SOCKET FRACTURE	X	X	X	
21387	TREAT EYE SOCKET FRACTURE	X	X	X	
21390	TREAT EYE SOCKET FRACTURE	X	X	X	
21395	TREAT EYE SOCKET FRACTURE	X	X	X	
21400	TREAT EYE SOCKET FRACTURE		X	X	
21401	TREAT EYE SOCKET FRACTURE	X	X	X	
21406	TREAT EYE SOCKET FRACTURE	X	X	X	
21407	TREAT EYE SOCKET FRACTURE	X	X	X	
21408	TREAT EYE SOCKET FRACTURE	X	X	X	
21421	TREAT MOUTH ROOF FRACTURE			X	
21422	TREAT MOUTH ROOF FRACTURE	X		X	
21423	TREAT MOUTH ROOF FRACTURE	X		X	
21431	TREAT CRANIOFACIAL FRACTURE	X		X	
21432	TREAT CRANIOFACIAL FRACTURE	X		X	
21433	TREAT CRANIOFACIAL FRACTURE	X		X	
21435	TREAT CRANIOFACIAL FRACTURE	X		X	
21436	TREAT CRANIOFACIAL FRACTURE	X		X	
21440	TREAT DENTAL RIDGE FRACTURE			X	
21445	TREAT DENTAL RIDGE FRACTURE	X		X	
21450	TREAT LOWER JAW FRACTURE			X	
21451	TREAT LOWER JAW FRACTURE			X	
21452	TREAT LOWER JAW FRACTURE			X	
21453	TREAT LOWER JAW FRACTURE			X	
21454	TREAT LOWER JAW FRACTURE			X	
21461	TREAT LOWER JAW FRACTURE			X	
21462	TREAT LOWER JAW FRACTURE	X		X	
21465	TREAT LOWER JAW FRACTURE	X	X	X	
21470	TREAT LOWER JAW FRACTURE	X		X	
21480	RESET DISLOCATED JAW		X	X	
21485	RESET DISLOCATED JAW		X	X	
21490	REPAIR DISLOCATED JAW	X	X	X	
21495	TREAT HYOID BONE FRACTURE	X		X	
21499	HEAD SURGERY PROCEDURE			X	
21501	DRAIN NECK/CHEST LESION			X	
21502	DRAIN CHEST LESION	X		X	
21510	DRAINAGE OF BONE LESION			X	
21550	BIOPSY OF NECK/CHEST			X	
21552	EXC NECK LES SC = 3 CM	X		X	
21554	EXC NECK TUM DEEP = 5 CM	X		X	
21555	REMOVE LESION NECK/CHEST			X	
21556	REMOVE LESION NECK/CHEST			X	
21557	REMOVE TUMOR NECK/CHEST	X		X	
21558	RESECT NECK TUM = 5 CM	X		X	
21600	PARTIAL REMOVAL OF RIB			X	
21610	PARTIAL REMOVAL OF RIB	X		X	
21615	REMOVAL OF RIB	X	X	X	
21616	REMOVAL OF RIB AND NERVES	X	X	X	
21620	PARTIAL REMOVAL OF STERNUM	X		X	
21627	STERNAL DEBRIDEMENT	X		X	
21630	EXTENSIVE STERNUM SURGERY	X		X	
21632	EXTENSIVE STERNUM SURGERY	X		X	
21685	HYOID MYOTOMY & SUSPENSION	X		X	
21700	REVISION OF NECK MUSCLE	X	X	X	
21705	REVISION OF NECK MUSCLE/RIB	X	X	X	
21720	REVISION OF NECK MUSCLE	X		X	
21725	REVISION OF NECK MUSCLE	X		X	
21740	RECONSTRUCTION OF STERNUM	X		X	
21742	REPAIR STERNUM/NUSS W/O SCOPE	X		X	
21743	REPAIR STERNUM/NUSS W/SCOPE	X		X	
21750	REPAIR OF STERNUM SEPARATION	X		X	
21800	TREATMENT OF RIB FRACTURE			X	
21805	TREATMENT OF RIB FRACTURE			X	
21810	TREATMENT OF RIB FRACTURE(S)	X		X	
21820	TREAT STERNUM FRACTURE			X	
21825	TREAT STERNUM FRACTURE	X		X	
21899	NECK/CHEST SURGERY PROCEDURE			X	
21920	BIOPSY SOFT TISSUE OF BACK			X	
21925	BIOPSY SOFT TISSUE OF BACK			X	
21930	REMOVE LESION BACK OR FLANK			X	
21931	EXC BACK LES SC = 3 CM	X		X	
21932	EXC BACK TUM DEEP < 5 CM	X		X	
21933	EXC BACK TUM DEEP = 5 CM	X		X	
21935	REMOVE TUMOR BACK			X	
21936	RESECT BACK TUM = 5 CM	X		X	
22010	I&D P-SPINE, C/T/CERV-THOR			X	
22015	I&D P-SPINE, L/S/L			X	
22100	REMOVE PART OF NECK VERTEBRA	X		X	
22101	REMOVE PART, THORAX VERTEBRA	X		X	
22102	REMOVE PART, LUMBAR VERTEBRA	X		X	
22103	REMOVE PART, LUMBAR VERT ADDL SEG	X			
22110	REMOVE PART OF NECK VERTEBRA	X		X	
22112	REMOVE PART, THORAX VERTEBRA	X		X	
22114	REMOVE PART, LUMBAR VERTEBRA	X		X	
22116	REMOVE EXTRA SPINE SEGMENT	X			
22206	CUT SPINE 3 COL, THOR	X		X	
22207	CUT SPINE 3 COL, LUMB	X		X	
22208	CUT SPINE 3 COL, ADDL SEG	X		X	
22210	REVISION OF NECK SPINE	X		X	
22212	REVISION OF THORAX SPINE	X		X	
22214	REVISION OF LUMBAR SPINE	X		X	
22216	REVISION OF EXTRA SPINE SEGMENT	X			
22220	REVISION OF NECK SPINE			X	
22222	REVISION OF THORAX SPINE			X	
22224	REVISION OF LUMBAR SPINE			X	
22226	REVISION OF EXTRA SPINE SEGMENT	X			
22305	TREAT SPINE PROCESS FRACTURE			X	
22310	TREAT SPINE FRACTURE			X	
22315	TREAT SPINE FRACTURE			X	
22318	TREAT ODONTOID FX W/O GRAFT	X		X	
22319	TREAT ODONTOID FX W/GRAFT	X		X	

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
22325	TREAT SPINE FRACTURE	x		x		
22326	TREAT NECK SPINE FRACTURE	x		x		
22327	TREAT THORAX SPINE FRACTURE	x		x		
22328	REPAIR ADDL SPINE FX	x		x		
22505	MANIPULATION OF SPINE			x		
22520	PERCUT VERTEBROPLASTY THOR			x		
22521	PERCUT VERTEBROPLASTY LUMB			x		
22523	PERCUT KYPHOPLASTY THOR			x		
22524	PERCUT KYPHOPLASTY LUMBAR			x		
22532	LAT THORAX SPINE FUSION	x		x		
22533	LAT LUMBAR SPINE FUSION	x		x		
22534	LAT THOR/LUMB, ADDL SEG	x				
22548	NECK SPINE FUSION	x		x		
22551	ARTHRO ANT INTERBODY DECOMPRESS CERVICAL BELW C2	x		x		
22552	ARTHRO ANT INTERDY CERVCL BELW C2 EA ADDL NTRSPC	x		x		
22554	NECK SPINE FUSION	x		x		
22556	THORAX SPINE FUSION	x		x		
22558	LUMBAR SPINE FUSION	x		x		
22585	ADDITIONAL SPINAL FUSION	x		x		
22586	PRESCLR FUSE W/ INSTR L5/S1	x		x		
22590	SPINE & SKULL SPINAL FUSION	x		x		
22595	NECK SPINAL FUSION	x		x		
22600	NECK SPINE FUSION	x		x		
22610	THORAX SPINE FUSION	x		x		
22612	LUMBAR SPINE FUSION	x		x		
22614	SPINE FUSION, EXTRA SEGMENT	x		x		
22630	LUMBAR SPINE FUSION	x		x		
22632	SPINE FUSION, EXTRA SEGMENT	x		x		
22633	ARTHDSIS POST/POSTEROLATRL/POSTINTERBODY LUMBAR			x		
22634	ARTHDSIS POST/POSTERLATRL/POSTINTRBDYADL SPC/SEG	x		x		
22800	FUSION OF SPINE	x		x		
22802	FUSION OF SPINE	x		x		
22804	FUSION OF SPINE	x		x		
22808	FUSION OF SPINE	x		x		
22810	FUSION OF SPINE	x		x		
22812	FUSION OF SPINE	x		x		
22818	KYPHECTOMY, 1-2 SEGMENTS	x		x		
22819	KYPHECTOMY, 3 OR MORE	x		x		
22830	EXPLORATION OF SPINAL FUSION	x		x		
22840	INSERT SPINE FIXATION DEVICE	x		x		
22842	INSERT SPINE FIXATION DEVICE	x		x		
22843	INSERT SPINE FIXATION DEVICE	x		x		
22844	INSERT SPINE FIXATION DEVICE	x		x		
22845	INSERT SPINE FIXATION DEVICE	x		x		
22846	INSERT SPINE FIXATION DEVICE	x		x		
22847	INSERT SPINE FIXATION DEVICE	x		x		
22848	INSERT SPINE FIXATION DEVICE	x		x		
22849	REINSERT SPINAL FIXATION	x		x		
22850	REMOVE SPINE FIXATION DEVICE	x		x		
22851	APPLY PROSTHETIC SPINE DEVICE	x		x		
22852	REMOVE SPINE FIXATION DEVICE	x		x		
22855	REMOVE SPINE FIXATION DEVICE	x		x		
22856	CERV ARTIFIC DISKECTOMY	x		x		
22861	REVISE CERV ARTIFIC DISC	x		x		
22864	REMOVE CERV ARTIF DISC	x		x		
22899	SPINE SURGERY PROCEDURE	x		x		
22900	REMOVE ABDOMINAL WALL LESION	x		x		
22901	EXC BACK TUM DEEP = 5 CM	x		x		
22902	EXC ABD LES SC < 3 CM	x		x		
22903	EXC ABD LES SC > 3 CM	x		x		
22904	RESECT ABD TUM < 5 CM	x		x		
22905	RESECT ABD TUM > 5 CM	x		x		
22999	ABDOMEN SURGERY PROCEDURE			x		
23000	REMOVAL OF CALCIUM DEPOSITS	x		x		
23020	RELEASE SHOULDER JOINT	x	x	x		x
23030	DRAIN SHOULDER LESION			x		x
23031	DRAIN SHOULDER BURSA		x	x		x
23035	DRAIN SHOULDER BONE LESION	x	x	x		x
23040	EXPLORATORY SHOULDER SURGERY	x	x	x		x
23044	EXPLORATORY SHOULDER SURGERY		x	x		x
23065	BIOPSY SHOULDER TISSUES		x	x		x
23066	BIOPSY SHOULDER TISSUES		x	x		x
23071	EXC SHOULDER LES SC > 3 CM	x	x	x		x
23073	EXC SHOULDER TUM DEEP > 5 CM	x	x	x		x
23075	REMOVAL OF SHOULDER LESION		x	x		x
23076	REMOVAL OF SHOULDER LESION		x	x		x
23077	REMOVE TUMOR OF SHOULDER	x	x	x		x
23078	RESECT SHOULDER TUM > 5 CM	x	x	x		x
23100	BIOPSY OF SHOULDER JOINT	x	x	x		x
23101	SHOULDER JOINT SURGERY		x	x		x
23105	REMOVE SHOULDER JOINT LINING	x	x	x		x
23106	INCISION OF COLLARBONE JOINT		x	x		x
23107	EXPLORE TREAT SHOULDER JOINT	x	x	x		x
23120	PARTIAL REMOVAL COLLAR BONE	x	x	x		x
23125	REMOVAL OF COLLAR BONE	x	x	x		x
23130	REMOVE SHOULDER BONE, PART		x	x		x
23140	REMOVAL OF BONE LESION		x	x		x
23145	REMOVAL OF BONE LESION	x	x	x		x
23146	REMOVAL OF BONE LESION		x	x		x
23150	REMOVAL OF HUMERUS LESION	x	x	x		x
23155	REMOVAL OF HUMERUS LESION	x	x	x		x
23156	REMOVAL OF HUMERUS LESION	x	x	x		x
23170	REMOVE COLLAR BONE LESION		x	x		x
23172	REMOVE SHOULDER BLADE LESION	x	x	x		x
23174	REMOVE HUMERUS LESION	x	x	x		x
23180	REMOVE COLLAR BONE LESION		x	x		x
23182	REMOVE SHOULDER BLADE LESION	x	x	x		x
23184	REMOVE HUMERUS LESION	x	x	x		x
23190	PARTIAL REMOVAL OF SCAPULA	x	x	x		x
23195	REMOVAL OF HEAD OF HUMERUS	x	x	x		x
23200	REMOVAL OF COLLAR BONE	x	x	x		x
23210	REMOVAL OF SHOULDER BLADE	x	x	x		x
23220	PARTIAL REMOVAL OF HUMERUS	x	x	x		x
23330	REMOVE SHOULDER FOREIGN BODY		x	x		x
23331	REMOVE SHOULDER FOREIGN BODY		x	x		x
23332	REMOVE SHOULDER FOREIGN BODY	x	x	x		x

Covered Surgery Code	Description	Modifier				Site (e.g., E1-E4)	Left/Right (LT or RT)
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)			
23333	REMOVE SHOULDER FOREIGN BODY DEEP		X	X			X
23334	REMOVAL PROS HUMERAL OR GLEN COMP		X	X			X
23335	REMOVAL PROS HUMERAL AND GLEN COMP		X	X			X
23350	INJECTION FOR SHOULDER X-RAY		X	X			X
23395	MUSCLE TRANSFER SHOULDER/ARM	X		X			X
23397	MUSCLE TRANSFERS	X		X			X
23400	FIXATION OF SHOULDER BLADE	X	X	X			X
23405	INCISION OF TENDON & MUSCLE	X		X			X
23406	INCISE TENDON(S) & MUSCLE(S)	X		X			X
23410	REPAIR ROTATOR CUFF ACUTE	X	X	X			X
23412	REPAIR ROTATOR CUFF CHRONIC	X	X	X			X
23415	RELEASE OF SHOULDER LIGAMENT		X	X			X
23420	REPAIR OF SHOULDER	X	X	X			X
23430	REPAIR BICEPS TENDON	X	X	X			X
23440	REMOVE/TRANSPLANT TENDON	X	X	X			X
23450	REPAIR SHOULDER CAPSULE	X	X	X			X
23455	REPAIR SHOULDER CAPSULE	X	X	X			X
23460	REPAIR SHOULDER CAPSULE	X	X	X			X
23462	REPAIR SHOULDER CAPSULE	X	X	X			X
23465	REPAIR SHOULDER CAPSULE	X	X	X			X
23466	REPAIR SHOULDER CAPSULE	X	X	X			X
23470	RECONSTRUCT SHOULDER JOINT	X	X	X			X
23472	RECONSTRUCT SHOULDER JOINT	X	X	X			X
23473	REVIS RECONST SHOULDER JOINT	X	X	X			X
23474	REVIS RECONST SHOULDER JOINT	X	X	X			X
23480	REVISION OF COLLAR BONE		X	X			X
23485	REVISION OF COLLAR BONE	X	X	X			X
23490	REINFORCE CLAVICLE	X	X	X			X
23491	REINFORCE SHOULDER BONES	X	X	X			X
23500	TREAT CLAVICLE FRACTURE		X	X			X
23505	TREAT CLAVICLE FRACTURE		X	X			X
23515	TREAT CLAVICLE FRACTURE	X	X	X			X
23520	TREAT CLAVICLE DISLOCATION		X	X			X
23525	TREAT CLAVICLE DISLOCATION		X	X			X
23530	TREAT CLAVICLE DISLOCATION	X	X	X			X
23532	TREAT CLAVICLE DISLOCATION	X	X	X			X
23540	TREAT CLAVICLE DISLOCATION		X	X			X
23545	TREAT CLAVICLE DISLOCATION		X	X			X
23550	TREAT CLAVICLE DISLOCATION	X	X	X			X
23552	TREAT CLAVICLE DISLOCATION	X	X	X			X
23570	TREAT SHOULDER BLADE FX		X	X			X
23575	TREAT SHOULDER BLADE FX		X	X			X
23585	TREAT SCAPULA FRACTURE	X	X	X			X
23600	TREAT HUMERUS FRACTURE		X	X			X
23605	TREAT HUMERUS FRACTURE		X	X			X
23615	TREAT HUMERUS FRACTURE	X	X	X			X
23616	TREAT HUMERUS FRACTURE	X	X	X			X
23620	TREAT HUMERUS FRACTURE		X	X			X
23625	TREAT HUMERUS FRACTURE		X	X			X
23630	TREAT HUMERUS FRACTURE	X	X	X			X
23650	TREAT SHOULDER DISLOCATION		X	X			X
23655	TREAT SHOULDER DISLOCATION		X	X			X
23660	TREAT SHOULDER DISLOCATION	X	X	X			X
23665	TREAT DISLOCATION/FRACTURE		X	X			X
23670	TREAT DISLOCATION/FRACTURE	X	X	X			X
23675	TREAT DISLOCATION/FRACTURE		X	X			X
23680	TREAT DISLOCATION/FRACTURE	X	X	X			X
23700	FIXATION OF SHOULDER		X	X			X
23800	FUSION OF SHOULDER JOINT	X	X	X			X
23802	FUSION OF SHOULDER JOINT	X	X	X			X
23900	AMPUTATION OF ARM & GIRDLE	X		X			X
23920	AMPUTATION AT SHOULDER JOINT	X	X	X			X
23921	AMPUTATION FOLLOW-UP SURGERY		X	X			X
23929	SHOULDER SURGERY PROCEDURE	X		X			X
23930	DRAINAGE OF ARM LESION		X	X			X
23931	DRAINAGE OF ARM BURSA		X	X			X
23935	DRAIN ARM/ELBOW BONE LESION		X	X			X
24000	EXPLORATORY ELBOW SURGERY		X	X			X
24006	RELEASE ELBOW JOINT	X	X	X			X
24065	BIOPSY ARM/ELBOW SOFT TISSUE		X	X			X
24066	BIOPSY ARM/ELBOW SOFT TISSUE		X	X			X
24071	EXC ARM/ELBOW LES SC = 3 CM	X	X	X			X
24073	EX ARM/ELBOW TUM DEEP > 5 CM	X	X	X			X
24075	REMOVE ARM/ELBOW LESION		X	X			X
24076	REMOVE ARM/ELBOW LESION		X	X			X
24077	REMOVE TUMOR OF ARM/ELBOW		X	X			X
24079	RESECT ARM/ELBOW TUM > 5 CM	X	X	X			X
24100	BIOPSY ELBOW JOINT LINING	X	X	X			X
24101	EXPLORE/TREAT ELBOW JOINT	X	X	X			X
24102	REMOVE ELBOW JOINT LINING	X	X	X			X
24105	REMOVAL OF ELBOW BURSA		X	X			X
24110	REMOVE HUMERUS LESION		X	X			X
24115	REMOVE/GRAFT BONE LESION	X	X	X			X
24116	REMOVE/GRAFT BONE LESION	X	X	X			X
24120	REMOVE ELBOW LESION		X	X			X
24125	REMOVE/GRAFT BONE LESION	X	X	X			X
24126	REMOVE/GRAFT BONE LESION	X	X	X			X
24130	REMOVAL OF HEAD OF RADIUS		X	X			X
24134	REMOVAL OF ARM BONE LESION	X	X	X			X
24136	REMOVE RADIUS BONE LESION		X	X			X
24138	REMOVE ELBOW BONE LESION	X	X	X			X
24140	PARTIAL REMOVAL OF ARM BONE	X	X	X			X
24145	PARTIAL REMOVAL OF RADIUS		X	X			X
24147	PARTIAL REMOVAL OF ELBOW		X	X			X
24149	RADICAL RESECTION OF ELBOW	X	X	X			X
24150	EXTENSIVE HUMERUS SURGERY	X	X	X			X
24152	EXTENSIVE RADIUS SURGERY	X	X	X			X
24155	REMOVAL OF ELBOW JOINT	X	X	X			X
24160	REMOVE ELBOW JOINT IMPLANT		X	X			X
24164	REMOVE RADIUS HEAD IMPLANT		X	X			X
24200	REMOVAL OF ARM FOREIGN BODY		X	X			X
24201	REMOVAL OF ARM FOREIGN BODY		X	X			X
24220	INJECTION FOR ELBOW X-RAY		X	X			X
24300	MANIPULATE ELBOW W/ANESTH		X	X			X
24301	MUSCLE/TENDON TRANSFER	X		X			X
24305	ARM TENDON LENGTHENING			X			X

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
24310	REVISION OF ARM TENDON			X		X
24320	REPAIR OF ARM TENDON	X		X		X
24330	REVISION OF ARM MUSCLES	X	X	X		X
24331	REVISION OF ARM MUSCLES	X	X	X		X
24332	TENOLYSIS, TRICEPS		X	X		X
24340	REPAIR OF BICEPS TENDON	X	X	X		X
24341	REPAIR ARM TENDON/MUSCLE	X	X	X		X
24342	REPAIR OF RUPTURED TENDON	X	X	X		X
24343	REPR ELBOW LAT LIGMNT W/ISS	X	X	X		X
24344	RECONSTRUCT ELBOW LAT LIGMNT	X	X	X		X
24345	REPR ELBW MED LIGMNT W/ISSU	X	X	X		X
24346	RECONSTRUCT ELBOW MED LIGMNT	X	X	X		X
24357	REPAIR ELBOW, PERC		X	X		X
24358	REPAIR ELBOW W/DEB, OPEN		X	X		X
24359	REPAIR ELBOW DEB/ATTCH OPEN		X	X		X
24360	RECONSTRUCT ELBOW JOINT	X	X	X		X
24361	RECONSTRUCT ELBOW JOINT	X	X	X		X
24362	RECONSTRUCT ELBOW JOINT	X	X	X		X
24363	REPLACE ELBOW JOINT	X	X	X		X
24365	RECONSTRUCT HEAD OF RADIUS	X	X	X		X
24366	RECONSTRUCT HEAD OF RADIUS	X	X	X		X
24370	REVISE RECONST ELBOW JOINT	X	X	X		X
24371	REVISE RECONST ELBOW JOINT	X	X	X		X
24400	REVISION OF HUMERUS	X	X	X		X
24410	REVISION OF HUMERUS	X	X	X		X
24420	REVISION OF HUMERUS	X	X	X		X
24430	REPAIR OF HUMERUS	X	X	X		X
24435	REPAIR HUMERUS WITH GRAFT	X	X	X		X
24470	REVISION OF ELBOW JOINT	X	X	X		X
24495	DECOMPRESSION OF FOREARM		X	X		X
24498	REINFORCE HUMERUS	X	X	X		X
24500	TREAT HUMERUS FRACTURE		X	X		X
24505	TREAT HUMERUS FRACTURE		X	X		X
24515	TREAT HUMERUS FRACTURE	X	X	X		X
24516	TREAT HUMERUS FRACTURE	X	X	X		X
24530	TREAT HUMERUS FRACTURE		X	X		X
24535	TREAT HUMERUS FRACTURE		X	X		X
24538	TREAT HUMERUS FRACTURE		X	X		X
24545	TREAT HUMERUS FRACTURE	X	X	X		X
24546	TREAT HUMERUS FRACTURE	X	X	X		X
24560	TREAT HUMERUS FRACTURE		X	X		X
24565	TREAT HUMERUS FRACTURE		X	X		X
24566	TREAT HUMERUS FRACTURE		X	X		X
24575	TREAT HUMERUS FRACTURE	X	X	X		X
24576	TREAT HUMERUS FRACTURE		X	X		X
24577	TREAT HUMERUS FRACTURE		X	X		X
24579	TREAT HUMERUS FRACTURE	X	X	X		X
24582	TREAT HUMERUS FRACTURE		X	X		X
24586	TREAT ELBOW FRACTURE	X	X	X		X
24587	TREAT ELBOW FRACTURE	X	X	X		X
24600	TREAT ELBOW DISLOCATION		X	X		X
24605	TREAT ELBOW DISLOCATION		X	X		X
24615	TREAT ELBOW DISLOCATION	X	X	X		X
24620	TREAT ELBOW FRACTURE		X	X		X
24635	TREAT ELBOW FRACTURE	X	X	X		X
24640	TREAT ELBOW DISLOCATION		X	X		X
24650	TREAT RADIUS FRACTURE		X	X		X
24655	TREAT RADIUS FRACTURE		X	X		X
24665	TREAT RADIUS FRACTURE	X	X	X		X
24666	TREAT RADIUS FRACTURE	X	X	X		X
24670	TREAT ULNAR FRACTURE		X	X		X
24675	TREAT ULNAR FRACTURE		X	X		X
24685	TREAT ULNAR FRACTURE	X	X	X		X
24800	FUSION OF ELBOW JOINT	X	X	X		X
24802	FUSION/GRAFT OF ELBOW JOINT	X	X	X		X
24900	AMPUTATION OF UPPER ARM	X	X	X		X
24920	AMPUTATION OF UPPER ARM	X	X	X		X
24925	AMPUTATION FOLLOW-UP SURGERY	X	X	X		X
24930	AMPUTATION FOLLOW-UP SURGERY	X	X	X		X
24931	AMPUTATE UPPER ARM & IMPLANT	X	X	X		X
24935	REVISION OF AMPUTATION		X	X		X
24940	REVISION OF UPPER ARM	X	X	X		X
24999	UPPER ARM/ELBOW SURGERY		X	X		
25000	INCISION OF TENDON SHEATH		X	X		X
25001	INCISE FLEXOR CARPI RADIALIS		X	X		X
25020	DECOMPRESS FOREARM 1 SPACE		X	X		X
25023	DECOMPRESS FOREARM 1 SPACE		X	X		X
25024	DECOMPRESS FOREARM 2 SPACES		X	X		X
25025	DECOMPRESS FOREARM 2 SPACES		X	X		X
25028	DRAINAGE OF FOREARM LESION		X	X		X
25031	DRAINAGE OF FOREARM BURSA		X	X		X
25035	TREAT FOREARM BONE LESION		X	X		X
25040	EXPLORE/TREAT WRIST JOINT		X	X		X
25065	BIOPSY FOREARM SOFT TISSUES		X	X		X
25066	BIOPSY FOREARM SOFT TISSUES		X	X		X
25071	EXC FOREARM LES SC > 3 CM	X	X	X		X
25073	EXC FOREARM TUM DEEP = 3 CM	X	X	X		X
25075	REMOVAL FOREARM LESION SUBCU		X	X		X
25076	REMOVAL FOREARM LESION DEEP		X	X		X
25077	REMOVE TUMOR, FOREARM/WRIST		X	X		X
25078	RESECT FOREARM/WRIST TUM = 3 CM	X	X	X		X
25085	INCISION OF WRIST CAPSULE	X	X	X		X
25100	BIOPSY OF WRIST JOINT		X	X		X
25101	EXPLORE/TREAT WRIST JOINT		X	X		X
25105	REMOVE WRIST JOINT LINING		X	X		X
25107	REMOVE WRIST JOINT CARTILAGE	X	X	X		X
25109	EXCISE TENDON FOREARM/WRIST		X	X		X
25110	REMOVE WRIST TENDON LESION		X	X		X
25111	REMOVE WRIST TENDON LESION		X	X		X
25112	REMOVE WRIST TENDON LESION		X	X		X
25115	REMOVE WRIST/FOREARM LESION		X	X		X
25116	REMOVE WRIST/FOREARM LESION		X	X		X
25118	EXCISE WRIST TENDON SHEATH		X	X		X
25119	PARTIAL REMOVAL OF ULNA	X	X	X		X
25120	REMOVAL OF FOREARM LESION		X	X		X
25125	REMOVE/GRAFT FOREARM LESION		X	X		X

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
25126	REMOVE/GRAFT FOREARM LESION	x	x	x		x
25130	REMOVAL OF WRIST LESION		x	x		x
25135	REMOVE & GRAFT WRIST LESION	x	x	x		x
25136	REMOVE & GRAFT WRIST LESION	x	x	x		x
25145	REMOVE FOREARM BONE LESION	x	x	x		x
25150	PARTIAL REMOVAL OF ULNA		x	x		x
25151	PARTIAL REMOVAL OF RADIUS	x	x	x		x
25170	EXTENSIVE FOREARM SURGERY	x	x	x		x
25210	REMOVAL OF WRIST BONE			x		x
25215	REMOVAL OF WRIST BONES	x	x	x		x
25230	PARTIAL REMOVAL OF RADIUS		x	x		x
25240	PARTIAL REMOVAL OF ULNA		x	x		x
25246	INJECTION FOR WRIST X-RAY		x	x		x
25248	REMOVE FOREARM FOREIGN BODY		x	x		x
25250	REMOVAL OF WRIST PROSTHESIS	x	x	x		x
25251	REMOVAL OF WRIST PROSTHESIS	x	x	x		x
25259	MANIPULATE WRIST W/ANESTHESIA		x	x		x
25260	REPAIR FOREARM TENDON/MUSCLE			x		x
25263	REPAIR FOREARM TENDON/MUSCLE	x		x		x
25265	REPAIR FOREARM TENDON/MUSCLE	x		x		x
25270	REPAIR FOREARM TENDON/MUSCLE			x		x
25272	REPAIR FOREARM TENDON/MUSCLE			x		x
25274	REPAIR FOREARM TENDON/MUSCLE			x		x
25275	REPAIR FOREARM TENDON SHEATH		x	x		x
25280	REVISE WRIST/FOREARM TENDON			x		x
25290	INCISE WRIST/FOREARM TENDON			x		x
25295	RELEASE WRIST/FOREARM TENDON			x		x
25300	FUSION OF TENDONS AT WRIST	x	x	x		
25301	FUSION OF TENDONS AT WRIST	x	x	x		x
25310	TRANSPLANT FOREARM TENDON	x		x		x
25312	TRANSPLANT FOREARM TENDON	x		x		x
25315	REVISE PALSY HAND TENDON(S)	x	x	x		
25316	REVISE PALSY HAND TENDON(S)	x	x	x		
25320	REPAIR/REVISE WRIST JOINT	x	x	x		
25332	REVISE WRIST JOINT	x	x	x		
25335	REALIGNMENT OF HAND	x	x	x		
25337	RECONSTRUCT ULNA/RADIOULNAR		x	x		x
25350	REVISION OF RADIUS	x	x	x		
25355	REVISION OF RADIUS	x	x	x		
25360	REVISION OF ULNA	x	x	x		
25365	REVISE RADIUS & ULNA	x	x	x		
25370	REVISE RADIUS OR ULNA	x	x	x		
25375	REVISE RADIUS & ULNA	x	x	x		
25390	SHORTEN RADIUS OR ULNA	x	x	x		
25391	LENGTHEN RADIUS OR ULNA	x	x	x		
25392	SHORTEN RADIUS & ULNA	x	x	x		
25393	LENGTHEN RADIUS & ULNA	x	x	x		
25394	REPAIR CARPAL BONE, SHORTEN	x	x	x		
25400	REPAIR RADIUS OR ULNA	x	x	x		
25405	REPAIR/GRAFT RADIUS OR ULNA	x	x	x		
25415	REPAIR RADIUS & ULNA	x	x	x		
25420	REPAIR/GRAFT RADIUS & ULNA	x	x	x		
25425	REPAIR/GRAFT RADIUS OR ULNA	x	x	x		
25426	REPAIR/GRAFT RADIUS & ULNA	x	x	x		
25430	VASC GRAFT INTO CARPAL BONE		x	x		x
25431	REPAIR NONUNION CARPAL BONE	x	x	x		
25440	REPAIR/GRAFT WRIST BONE	x	x	x		
25441	RECONSTRUCT WRIST JOINT	x	x	x		
25442	RECONSTRUCT WRIST JOINT	x	x	x		
25443	RECONSTRUCT WRIST JOINT	x	x	x		
25444	RECONSTRUCT WRIST JOINT	x	x	x		
25445	RECONSTRUCT WRIST JOINT		x	x		x
25446	WRIST REPLACEMENT	x	x	x		
25447	REPAIR WRIST JOINT(S)	x	x	x		
25449	REMOVE WRIST JOINT IMPLANT	x	x	x		
25450	REVISION OF WRIST JOINT		x	x		x
25455	REVISION OF WRIST JOINT		x	x		x
25490	REINFORCE RADIUS	x	x	x		x
25491	REINFORCE ULNA	x	x	x		x
25492	REINFORCE RADIUS AND ULNA	x	x	x		x
25500	TREAT FRACTURE OF RADIUS		x	x		x
25505	TREAT FRACTURE OF RADIUS		x	x		x
25515	TREAT FRACTURE OF RADIUS	x	x	x		x
25520	TREAT FRACTURE OF RADIUS		x	x		x
25525	TREAT FRACTURE OF RADIUS	x	x	x		x
25526	TREAT FRACTURE OF RADIUS	x	x	x		x
25530	TREAT FRACTURE OF ULNA		x	x		x
25535	TREAT FRACTURE OF ULNA		x	x		x
25545	TREAT FRACTURE OF ULNA	x	x	x		x
25560	TREAT FRACTURE RADIUS & ULNA		x	x		x
25565	TREAT FRACTURE RADIUS & ULNA		x	x		x
25574	TREAT FRACTURE RADIUS & ULNA	x	x	x		x
25575	TREAT FRACTURE RADIUS/ULNA	x	x	x		x
25600	TREAT FRACTURE RADIUS/ULNA		x	x		x
25605	TREAT FRACTURE RADIUS/ULNA		x	x		x
25606	TREAT FX DISTAL RADIAL		x	x		x
25607	TREAT FX RAD EXTRA-ARTICUL	x	x	x		x
25608	TREAT FX RAD INTRA-ARTICUL	x	x	x		x
25609	TREAT FX RADIAL 3+ FRAG	x	x	x		x
25622	TREAT WRIST BONE FRACTURE		x	x		x
25624	TREAT WRIST BONE FRACTURE		x	x		x
25628	TREAT WRIST BONE FRACTURE	x	x	x		x
25630	TREAT WRIST BONE FRACTURE		x	x		x
25635	TREAT WRIST BONE FRACTURE		x	x		x
25645	TREAT WRIST BONE FRACTURE	x	x	x		x
25650	TREAT WRIST BONE FRACTURE		x	x		x
25661	PIN ULNAR STYLOID FRACTURE		x	x		x
25662	TREAT FRACTURE ULNAR STYLOID		x	x		x
25660	TREAT WRIST DISLOCATION		x	x		x
25670	TREAT WRIST DISLOCATION	x	x	x		x
25671	PIN RADIOULNAR DISLOCATION		x	x		x
25675	TREAT WRIST DISLOCATION		x	x		x
25676	TREAT WRIST DISLOCATION	x	x	x		x
25680	TREAT WRIST FRACTURE		x	x		x
25685	TREAT WRIST FRACTURE	x	x	x		x
25690	TREAT WRIST DISLOCATION		x	x		x

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
25695	TREAT WRIST DISLOCATION	x	x	x		x
25800	FUSION OF WRIST JOINT	x	x	x		x
25805	FUSION/GRAFT OF WRIST JOINT	x	x	x		x
25810	FUSION/GRAFT OF WRIST JOINT	x	x	x		x
25820	FUSION OF HAND BONES	x	x	x		x
25825	FUSE HAND BONES WITH GRAFT	x	x	x		x
25830	FUSION, RADIOULNAR JNT/ULNA	x	x	x		x
25900	AMPUTATION OF FOREARM		x	x		x
25905	AMPUTATION OF FOREARM	x	x	x		x
25907	AMPUTATION FOLLOW-UP SURGERY	x	x	x		x
25909	AMPUTATION FOLLOW-UP SURGERY	x	x	x		x
25915	AMPUTATION OF FOREARM	x	x	x		x
25920	AMPUTATE HAND AT WRIST		x	x		x
25922	AMPUTATE HAND AT WRIST	x	x	x		x
25924	AMPUTATION FOLLOW-UP SURGERY	x	x	x		x
25927	AMPUTATION OF HAND		x	x		x
25929	AMPUTATION FOLLOW-UP SURGERY	x	x	x		x
25931	AMPUTATION FOLLOW-UP SURGERY		x	x		x
25999	FOREARM OR WRIST SURGERY		x	x		
26010	DRAINAGE OF FINGER ABSCESS			x	x	
26011	DRAINAGE OF FINGER ABSCESS			x	x	
26020	DRAIN HAND TENDON SHEATH			x	x	x
26025	DRAINAGE OF PALM BURSA		x	x		x
26030	DRAINAGE OF PALM BURSA(S)		x	x		x
26034	TREAT HAND BONE LESION			x	x	x
26035	DECOMPRESS FINGERS/HAND			x	x	x
26037	DECOMPRESS FINGERS/HAND		x	x		x
26040	RELEASE PALM CONTRACTURE		x	x		x
26045	RELEASE PALM CONTRACTURE		x	x		x
26055	INCISE FINGER TENDON SHEATH			x	x	
26060	INCISION OF FINGER TENDON			x	x	
26070	EXPLORE/TREAT HAND JOINT		x	x		x
26075	EXPLORE/TREAT FINGER JOINT		x	x	x	x
26080	EXPLORE/TREAT FINGER JOINT			x	x	
26100	BIOPSY HAND JOINT LINING		x	x		x
26105	BIOPSY FINGER JOINT LINING		x	x	x	x
26110	BIOPSY FINGER JOINT LINING			x	x	
26111	EXC HAND LES SC > 1.5 CM	x		x	x	x
26113	EXC HAND TUM DEEP > 1.5 CM	x		x	x	x
26115	REMOVAL HAND LESION SUBCUT			x	x	x
26116	REMOVAL HAND LESION, DEEP			x	x	x
26117	REMOVE TUMOR, HAND/FINGER			x	x	x
26118	EXC HAND TUM RA > 3 CM	x		x	x	x
26121	RELEASE PALM CONTRACTURE		x	x		x
26123	RELEASE PALM CONTRACTURE		x	x	x	x
26125	RELEASE PALM CONTRACTURE			x	x	x
26130	REMOVE WRIST JOINT LINING		x	x		x
26135	REVISE FINGER JOINT, EACH			x	x	x
26140	REVISE FINGER JOINT, EACH			x	x	
26145	TENDON EXCISION, PALM/FINGER			x	x	x
26160	REMOVE TENDON SHEATH LESION			x	x	x
26170	REMOVAL OF PALM TENDON, EACH			x		x
26180	REMOVAL OF FINGER TENDON			x	x	
26185	REMOVE FINGER BONE	x	x	x	x	
26200	REMOVE HAND BONE LESION			x		x
26205	REMOVE/GRAFT BONE LESION			x		x
26210	REMOVAL OF FINGER LESION			x	x	
26215	REMOVE/GRAFT FINGER LESION			x	x	
26230	PARTIAL REMOVAL OF HAND BONE			x		x
26235	PARTIAL REMOVAL, FINGER BONE			x	x	
26236	PARTIAL REMOVAL, FINGER BONE			x	x	
26250	EXTENSIVE HAND SURGERY			x		x
26260	EXTENSIVE FINGER SURGERY	x		x	x	
26262	PARTIAL REMOVAL OF FINGER	x		x	x	
26320	REMOVAL OF IMPLANT FROM HAND			x	x	x
26340	MANIPULATE FINGER W/ANESTH		x	x	x	
26341	MANIPLATN PALMAR FASCIAL CRD POST INJ SINGLE CORD		x	x		
26350	REPAIR FINGER/HAND TENDON			x	x	x
26352	REPAIR/GRAFT HAND TENDON	x		x	x	x
26356	REPAIR FINGER/HAND TENDON			x	x	x
26357	REPAIR FINGER/HAND TENDON	x		x	x	x
26358	REPAIR/GRAFT HAND TENDON	x		x	x	x
26370	REPAIR FINGER/HAND TENDON			x		x
26372	REPAIR/GRAFT HAND TENDON	x		x		x
26373	REPAIR FINGER/HAND TENDON	x		x		x
26390	REVISE HAND/FINGER TENDON	x		x	x	x
26392	REPAIR/GRAFT HAND TENDON	x		x	x	x
26410	REPAIR HAND TENDON			x		x
26412	REPAIR/GRAFT HAND TENDON			x		
26415	EXCISION, HAND/FINGER TENDON			x	x	x
26416	GRAFT HAND OR FINGER TENDON			x	x	x
26418	REPAIR FINGER TENDON			x	x	
26420	REPAIR/GRAFT FINGER TENDON	x		x	x	
26426	REPAIR FINGER/HAND TENDON			x	x	
26428	REPAIR/GRAFT FINGER TENDON			x	x	
26432	REPAIR FINGER TENDON			x	x	
26433	REPAIR FINGER TENDON			x	x	
26434	REPAIR/GRAFT FINGER TENDON	x		x	x	
26437	REALIGNMENT OF TENDONS			x		x
26440	RELEASE PALM/FINGER TENDON			x	x	x
26442	RELEASE PALM & FINGER TENDON			x	x	
26445	RELEASE HAND/FINGER TENDON			x	x	x
26449	RELEASE FOREARM/HAND TENDON			x	x	x
26450	INCISION OF PALM TENDON			x		x
26455	INCISION OF FINGER TENDON			x	x	
26460	INCISE HAND/FINGER TENDON			x	x	x
26471	FUSION OF FINGER TENDONS			x	x	
26474	FUSION OF FINGER TENDONS	x		x		
26476	TENDON LENGTHENING			x	x	x
26477	TENDON SHORTENING			x	x	x
26478	LENGTHENING OF HAND TENDON			x	x	x
26479	SHORTENING OF HAND TENDON	x		x	x	
26480	TRANSPLANT HAND TENDON			x		x
26483	TRANSPLANT/GRAFT HAND TENDON	x		x		x
26485	TRANSPLANT PALM TENDON	x		x		x
26489	TRANSPLANT/GRAFT PALM TENDON			x		x

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
26490	REVISE THUMB TENDON			X	X	X
26492	TENDON TRANSFER WITH GRAFT	X		X	X	X
26494	HAND TENDON/MUSCLE TRANSFER	X		X	X	X
26496	REVISE THUMB TENDON			X	X	X
26497	FINGER TENDON TRANSFER	X		X		X
26498	FINGER TENDON TRANSFER	X		X		X
26499	REVISION OF FINGER	X		X	X	
26500	HAND TENDON RECONSTRUCTION			X		X
26502	HAND TENDON RECONSTRUCTION	X		X		X
26508	RELEASE THUMB CONTRACTURE		X	X	X	X
26510	THUMB TENDON TRANSFER			X	X	X
26516	FUSION OF KNUCKLE JOINT		X	X		X
26517	FUSION OF KNUCKLE JOINTS	X	X	X		X
26518	FUSION OF KNUCKLE JOINTS	X	X	X		X
26520	RELEASE KNUCKLE CONTRACTURE			X	X	X
26525	RELEASE FINGER CONTRACTURE			X	X	
26530	REVISE KNUCKLE JOINT	X		X	X	X
26531	REVISE KNUCKLE WITH IMPLANT	X		X	X	X
26535	REVISE FINGER JOINT			X	X	
26536	REVISE/IMPLANT FINGER JOINT			X	X	
26540	REPAIR HAND JOINT			X	X	X
26541	REPAIR HAND JOINT WITH GRAFT	X		X	X	X
26542	REPAIR HAND JOINT WITH GRAFT			X	X	X
26545	RECONSTRUCT FINGER JOINT			X	X	
26546	REPAIR NONUNION HAND	X	X	X	X	X
26548	RECONSTRUCT FINGER JOINT			X	X	
26550	CONSTRUCT THUMB REPLACEMENT	X	X	X	X	
26551	GREAT TOE-HAND TRANSFER	X	X	X	X	X
26553	SINGLE TRANSFER, TOE-HAND	X	X	X	X	X
26554	DOUBLE TRANSFER, TOE-HAND	X	X	X	X	
26555	POSITIONAL CHANGE OF FINGER	X		X	X	
26556	TOE JOINT TRANSFER	X		X	X	
26560	REPAIR OF WEB FINGER			X	X	
26561	REPAIR OF WEB FINGER	X		X	X	
26562	REPAIR OF WEB FINGER	X		X	X	
26565	CORRECT METACARPAL FLAW	X		X		X
26567	CORRECT FINGER DEFORMITY			X	X	
26568	LENGTHEN METACARPAL/FINGER	X		X	X	X
26580	REPAIR HAND DEFORMITY	X	X	X		X
26587	RECONSTRUCT EXTRA FINGER	X		X	X	X
26590	REPAIR FINGER DEFORMITY	X		X	X	
26591	REPAIR MUSCLES OF HAND			X		X
26593	RELEASE MUSCLES OF HAND			X		X
26596	EXCISION CONSTRICTING TISSUE	X		X	X	
26600	TREAT METACARPAL FRACTURE			X		X
26605	TREAT METACARPAL FRACTURE			X		X
26607	TREAT METACARPAL FRACTURE			X		X
26608	TREAT METACARPAL FRACTURE			X		X
26615	TREAT METACARPAL FRACTURE			X		X
26641	TREAT THUMB DISLOCATION		X	X	X	X
26645	TREAT THUMB FRACTURE		X	X	X	X
26650	TREAT THUMB FRACTURE		X	X	X	X
26665	TREAT THUMB FRACTURE		X	X	X	X
26670	TREAT HAND DISLOCATION			X	X	X
26675	TREAT HAND DISLOCATION			X		X
26676	PIN HAND DISLOCATION			X		X
26685	TREAT HAND DISLOCATION			X		X
26686	TREAT HAND DISLOCATION	X		X		X
26700	TREAT KNUCKLE DISLOCATION			X	X	X
26705	TREAT KNUCKLE DISLOCATION			X	X	X
26706	PIN KNUCKLE DISLOCATION			X	X	X
26715	TREAT KNUCKLE DISLOCATION			X	X	X
26720	TREAT FINGER FRACTURE, EACH			X	X	
26725	TREAT FINGER FRACTURE, EACH			X	X	
26727	TREAT FINGER FRACTURE, EACH			X	X	
26735	TREAT FINGER FRACTURE, EACH			X	X	
26740	TREAT FINGER FRACTURE, EACH			X	X	X
26742	TREAT FINGER FRACTURE, EACH			X	X	X
26746	TREAT FINGER FRACTURE, EACH			X	X	X
26750	TREAT FINGER FRACTURE, EACH			X	X	
26755	TREAT FINGER FRACTURE, EACH			X	X	
26756	PIN FINGER FRACTURE, EACH			X	X	
26765	TREAT FINGER FRACTURE, EACH			X	X	
26770	TREAT FINGER DISLOCATION			X	X	X
26775	TREAT FINGER DISLOCATION			X	X	
26776	PIN FINGER DISLOCATION			X	X	
26785	TREAT FINGER DISLOCATION			X	X	
26820	THUMB FUSION WITH GRAFT	X	X	X	X	X
26841	FUSION OF THUMB			X	X	X
26842	THUMB FUSION WITH GRAFT	X	X	X	X	X
26843	FUSION OF HAND JOINT	X		X	X	X
26844	FUSION/GRAFT OF HAND JOINT	X		X	X	X
26850	FUSION OF KNUCKLE			X	X	X
26852	FUSION OF KNUCKLE WITH GRAFT	X		X	X	X
26860	FUSION OF FINGER JOINT			X	X	
26861	FUSION OF FINGER JNT, ADD-ON			X	X	
26862	FUSION/GRAFT OF FINGER JOINT	X		X	X	X
26863	FUSE/GRAFT ADDED JOINT	X		X	X	X
26910	AMPUTATE METACARPAL BONE			X	X	
26951	AMPUTATION OF FINGER/THUMB			X	X	
26952	AMPUTATION OF FINGER/THUMB			X	X	
26989	HAND/FINGER SURGERY			X		
26990	DRAINAGE OF PELVIS LESION			X		X
26991	DRAINAGE OF PELVIS BURSA			X		X
26992	DRAINAGE OF BONE LESION			X		X
27000	INCISION OF HIP TENDON		X	X		X
27001	INCISION OF HIP TENDON	X	X	X		X
27003	INCISION OF HIP TENDON	X	X	X		X
27005	INCISION OF HIP TENDON	X	X	X		X
27006	INCISION OF HIP TENDONS	X	X	X		X
27025	INCISION OF HIP/THIGH FASCIA		X	X		X
27027	BUTTOCK FASCIOTOMY		X	X		X
27030	DRAINAGE OF HIP JOINT	X	X	X		X
27033	EXPLORATION OF HIP JOINT	X	X	X		X
27035	DENERVATION OF HIP JOINT	X	X	X		X
27036	EXCISION OF HIP JOINT/MUSCLE	X	X	X		X

Covered Surgery Code	Description	Modifier				Site (e.g., E1-E4)	Left/Right (LT or RT)
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)			
27040	BIOPSY OF SOFT TISSUES		X	X			X
27041	BIOPSY OF SOFT TISSUES		X	X			X
27043	EXC HIP PELVIS LES SC ≥ 3 CM		X	X			X
27045	EXC HIP PELVIS TUM DEEP >5CM	X	X	X			X
27047	REMOVE HIP/PELVIS LESION		X	X			X
27048	REMOVE HIP/PELVIS LESION	X	X	X			X
27049	REMOVE TUMOR HIP/PELVIS	X	X	X			X
27050	BIOPSY OF SACROILIAC JOINT		X	X			X
27052	BIOPSY OF HIP JOINT	X	X	X			X
27054	REMOVAL OF HIP JOINT LINING	X	X	X			X
27057	BUTTOCK FASCIOTOMY W/DBRDMT		X	X			X
27059	RESECT HIP/PELVY TUM > 5 CM	X	X	X			X
27060	REMOVAL OF ISCHIAL BURSA		X	X			X
27062	REMOVE FEMUR LESION/BURSA		X	X			X
27065	REMOVAL OF HIP BONE LESION	X	X	X			X
27066	REMOVAL OF HIP BONE LESION	X	X	X			X
27067	REMOVE/GRAFT HIP BONE LESION	X	X	X			X
27070	PARTIAL REMOVAL OF HIP BONE	X	X	X			X
27071	PARTIAL REMOVAL OF HIP BONE	X	X	X			X
27075	EXTENSIVE HIP SURGERY	X		X			X
27076	EXTENSIVE HIP SURGERY	X		X			X
27077	EXTENSIVE HIP SURGERY	X		X			X
27078	EXTENSIVE HIP SURGERY	X	X	X			X
27080	REMOVAL OF TAIL BONE	X		X			X
27086	REMOVE HIP FOREIGN BODY		X	X			X
27087	REMOVE HIP FOREIGN BODY	X	X	X			X
27090	REMOVAL OF HIP PROSTHESIS		X	X			X
27091	REMOVAL OF HIP PROSTHESIS	X	X	X			X
27093	INJECTION FOR HIP X-RAY		X	X			X
27095	INJECTION FOR HIP X-RAY		X	X			X
27096	INJECT SACROILIAC JOINT		X	X			X
27097	REVISION OF HIP TENDON	X	X	X			X
27098	TRANSFER TENDON TO PELVIS	X	X	X			X
27100	TRANSFER OF ABDOMINAL MUSCLE	X	X	X			X
27105	TRANSFER OF SPINAL MUSCLE	X	X	X			X
27110	TRANSFER OF ILIOPSOAS MUSCLE	X	X	X			X
27111	TRANSFER OF ILIOPSOAS MUSCLE	X	X	X			X
27120	RECONSTRUCTION OF HIP SOCKET	X	X	X			X
27122	RECONSTRUCTION OF HIP SOCKET	X	X	X			X
27125	PARTIAL HIP REPLACEMENT	X	X	X			X
27130	TOTAL HIP ARTHROPLASTY	X	X	X			X
27132	TOTAL HIP ARTHROPLASTY	X	X	X			X
27134	REVISE HIP JOINT REPLACEMENT	X	X	X			X
27137	REVISE HIP JOINT REPLACEMENT	X	X	X			X
27138	REVISE HIP JOINT REPLACEMENT	X	X	X			X
27140	TRANSPLANT FEMUR RIDGE	X	X	X			X
27146	INCISION OF HIP BONE	X	X	X			X
27147	REVISION OF HIP BONE	X	X	X			X
27151	INCISION OF HIP BONES	X	X	X			X
27156	REVISION OF HIP BONES	X	X	X			X
27158	REVISION OF PELVIS		X	X			X
27161	INCISION OF NECK OF FEMUR	X	X	X			X
27165	INCISION/FIXATION OF FEMUR	X	X	X			X
27170	REPAIR/GRAFT FEMUR HEAD/NECK	X	X	X			X
27175	TREAT SLIPPED EPIPHYSIS		X	X			X
27176	TREAT SLIPPED EPIPHYSIS	X	X	X			X
27177	TREAT SLIPPED EPIPHYSIS	X	X	X			X
27178	TREAT SLIPPED EPIPHYSIS	X	X	X			X
27179	REVISE HEAD/NECK OF FEMUR	X	X	X			X
27181	TREAT SLIPPED EPIPHYSIS	X	X	X			X
27185	REVISION OF FEMUR EPIPHYSIS		X	X			X
27187	REINFORCE HIP BONES	X	X	X			X
27193	TREAT PELVIC RING FRACTURE			X			X
27194	TREAT PELVIC RING FRACTURE			X			X
27200	TREAT TAIL BONE FRACTURE			X			
27202	TREAT TAIL BONE FRACTURE	X		X			
27215	TREAT PELVIC FRACTURE(S)	X	X	X			X
27216	TREAT PELVIC RING FRACTURE	X	X	X			X
27217	TREAT PELVIC RING FRACTURE	X	X	X			X
27218	TREAT PELVIC RING FRACTURE	X	X	X			X
27220	TREAT HIP SOCKET FRACTURE		X	X			X
27222	TREAT HIP SOCKET FRACTURE		X	X			X
27226	TREAT HIP WALL FRACTURE	X	X	X			X
27227	TREAT HIP FRACTURE(S)	X	X	X			X
27228	TREAT HIP FRACTURE(S)	X	X	X			X
27230	TREAT THIGH FRACTURE		X	X			X
27232	TREAT THIGH FRACTURE		X	X			X
27235	TREAT THIGH FRACTURE		X	X			X
27236	TREAT THIGH FRACTURE	X	X	X			X
27238	TREAT THIGH FRACTURE		X	X			X
27240	TREAT THIGH FRACTURE		X	X			X
27244	TREAT THIGH FRACTURE	X	X	X			X
27245	TREAT THIGH FRACTURE	X	X	X			X
27246	TREAT THIGH FRACTURE		X	X			X
27248	TREAT THIGH FRACTURE	X	X	X			X
27250	TREAT HIP DISLOCATION		X	X			X
27252	TREAT HIP DISLOCATION		X	X			X
27253	TREAT HIP DISLOCATION	X	X	X			X
27254	TREAT HIP DISLOCATION	X	X	X			X
27256	TREAT HIP DISLOCATION		X	X			X
27257	TREAT HIP DISLOCATION		X	X			X
27258	TREAT HIP DISLOCATION	X	X	X			X
27259	TREAT HIP DISLOCATION	X	X	X			X
27265	TREAT HIP DISLOCATION		X	X			X
27266	TREAT HIP DISLOCATION		X	X			X
27267	CLTX THIGH FX	X	X	X			X
27268	CLTX THIGH FX W/MNPJ	X	X	X			X
27269	OPTX THIGH FX	X	X	X			X
27275	MANIPULATION OF HIP JOINT			X			X
27280	FUSION OF SACROILIAC JOINT	X	X	X			X
27282	FUSION OF PUBIC BONES	X		X			X
27284	FUSION OF HIP JOINT	X	X	X			X
27286	FUSION OF HIP JOINT	X	X	X			X
27290	AMPUTATION OF LEG AT HIP	X		X			X
27295	AMPUTATION OF LEG AT HIP	X	X	X			X
27299	PELVIS/HIP JOINT SURGERY	X	X	X			

Covered Surgery Code	Description	Modifier				Site (e.g., E1-E4)	Left/Right (LT or RT)
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)			
27301	DRAIN THIGH/KNEE LESION		X	X			X
27303	DRAINAGE OF BONE LESION	X	X	X			X
27305	INCISE THIGH TENDON & FASCIA	X	X	X			X
27306	INCISION OF THIGH TENDON	X	X	X			X
27307	INCISION OF THIGH TENDONS		X	X			X
27310	EXPLORATION OF KNEE JOINT	X	X	X			X
27323	BIOPSY, THIGH SOFT TISSUES		X	X			X
27324	BIOPSY, THIGH SOFT TISSUES		X	X			X
27325	NEURECTOMY, HAMSTRING	X	X	X			X
27326	NEURECTOMY, POPLITEAL	X	X	X			X
27327	REMOVAL OF THIGH LESION		X	X			X
27328	REMOVAL OF THIGH LESION		X	X			X
27329	REMOVE TUMOR, THIGH/KNEE	X	X	X			X
27330	BIOPSY, KNEE JOINT LINING		X	X			X
27331	EXPLORE/TREAT KNEE JOINT	X	X	X			X
27332	REMOVAL OF KNEE CARTILAGE	X	X	X			X
27333	REMOVAL OF KNEE CARTILAGE	X	X	X			X
27334	REMOVE KNEE JOINT LINING	X	X	X			X
27335	REMOVE KNEE JOINT LINING	X	X	X			X
27337	EXC THIGH/KNEE LES SC > 3 CM	X	X	X			X
27339	EXC THIGH/KNEE TUM DEEP > 5 CM	X	X	X			X
27340	REMOVAL OF KNEECAP BURSA		X	X			X
27345	REMOVAL OF KNEE CYST	X	X	X			X
27347	REMOVE KNEE CYST	X	X	X			X
27350	REMOVAL OF KNEECAP	X	X	X			X
27355	REMOVE FEMUR LESION	X	X	X			X
27356	REMOVE FEMUR LESION/GRAFT	X	X	X			X
27357	REMOVE FEMUR LESION/GRAFT	X	X	X			X
27358	REMOVE FEMUR LESION/FIXATION	X		X			X
27360	PARTIAL REMOVAL, LEG BONE(S)	X	X	X			X
27364	RESECT THIGH/KNEE TUM > 5 CM	X	X	X			X
27365	EXTENSIVE LEG SURGERY	X	X	X			X
27370	INJECTION FOR KNEE X-RAY		X	X			X
27372	REMOVAL OF FOREIGN BODY		X	X			X
27380	REPAIR OF KNEECAP TENDON	X	X	X			X
27381	REPAIR/GRAFT KNEECAP TENDON	X	X	X			X
27385	REPAIR OF THIGH MUSCLE	X	X	X			X
27386	REPAIR/GRAFT OF THIGH MUSCLE	X	X	X			X
27390	INCISION OF THIGH TENDON	X	X	X			X
27391	INCISION OF THIGH TENDONS			X			
27392	INCISION OF THIGH TENDONS	X		X			
27393	LENGTHENING OF THIGH TENDON	X	X	X			X
27394	LENGTHENING OF THIGH TENDONS	X		X			
27395	LENGTHENING OF THIGH TENDONS	X		X			
27396	TRANSPLANT OF THIGH TENDON			X			
27397	TRANSPLANTS OF THIGH TENDONS	X	X	X			X
27400	REVISE THIGH MUSCLES/TENDONS	X	X	X			X
27403	REPAIR OF KNEE CARTILAGE	X	X	X			X
27405	REPAIR OF KNEE LIGAMENT	X	X	X			X
27407	REPAIR OF KNEE LIGAMENT	X	X	X			X
27409	REPAIR OF KNEE LIGAMENTS	X	X	X			X
27412	AUTOCHONDROCYTE IMPLANT KNEE	X	X	X			X
27415	OSTEOCHONDRAL KNEE ALLOGRAFT	X	X	X			X
27416	OSTEOCHONDRAL KNEE AUTOGRAFT		X	X			X
27418	REPAIR DEGENERATED KNEECAP	X	X	X			X
27420	REVISION OF UNSTABLE KNEECAP	X	X	X			X
27422	REVISION OF UNSTABLE KNEECAP	X	X	X			X
27424	REVISION/REMOVAL OF KNEECAP	X	X	X			X
27425	LAT RETINACULAR RELEASE OPEN		X	X			X
27427	RECONSTRUCTION, KNEE	X	X	X			X
27428	RECONSTRUCTION, KNEE	X	X	X			X
27429	RECONSTRUCTION, KNEE	X	X	X			X
27430	REVISION OF THIGH MUSCLES	X	X	X			X
27435	INCISION OF KNEE JOINT	X	X	X			X
27437	REVISE KNEECAP		X	X			X
27438	REVISE KNEECAP WITH IMPLANT	X	X	X			X
27440	REVISION OF KNEE JOINT	X	X	X			X
27441	REVISION OF KNEE JOINT	X	X	X			X
27442	REVISION OF KNEE JOINT	X	X	X			X
27443	REVISION OF KNEE JOINT	X	X	X			X
27445	REVISION OF KNEE JOINT	X	X	X			X
27446	REVISION OF KNEE JOINT	X	X	X			X
27447	TOTAL KNEE ARTHROPLASTY	X	X	X			X
27448	INCISION OF THIGH	X	X	X			X
27450	INCISION OF THIGH	X	X	X			X
27454	REALIGNMENT OF THIGH BONE	X	X	X			X
27455	REALIGNMENT OF KNEE	X	X	X			X
27457	REALIGNMENT OF KNEE	X	X	X			X
27465	SHORTENING OF THIGH BONE	X	X	X			X
27466	LENGTHENING OF THIGH BONE	X	X	X			X
27468	SHORTEN/LENGTHEN THIGHS	X	X	X			X
27470	REPAIR OF THIGH	X	X	X			X
27472	REPAIR/GRAFT OF THIGH	X	X	X			X
27475	SURGERY TO STOP LEG GROWTH		X	X			X
27477	SURGERY TO STOP LEG GROWTH		X	X			X
27479	SURGERY TO STOP LEG GROWTH	X	X	X			X
27485	SURGERY TO STOP LEG GROWTH		X	X			X
27486	REVISE/REPLACE KNEE JOINT	X	X	X			X
27487	REVISE/REPLACE KNEE JOINT	X	X	X			X
27488	REMOVAL OF KNEE PROSTHESIS	X	X	X			X
27495	REINFORCE THIGH	X	X	X			X
27496	DECOMPRESSION OF THIGH/KNEE		X	X			X
27497	DECOMPRESSION OF THIGH/KNEE		X	X			X
27498	DECOMPRESSION OF THIGH/KNEE	X	X	X			X
27499	DECOMPRESSION OF THIGH/KNEE	X	X	X			X
27500	TREATMENT OF THIGH FRACTURE		X	X			X
27501	TREATMENT OF THIGH FRACTURE		X	X			X
27502	TREATMENT OF THIGH FRACTURE		X	X			X
27503	TREATMENT OF THIGH FRACTURE		X	X			X
27506	TREATMENT OF THIGH FRACTURE	X	X	X			X
27507	TREATMENT OF THIGH FRACTURE	X	X	X			X
27508	TREATMENT OF THIGH FRACTURE		X	X			X
27509	TREATMENT OF THIGH FRACTURE		X	X			X
27510	TREATMENT OF THIGH FRACTURE		X	X			X
27511	TREATMENT OF THIGH FRACTURE	X	X	X			X
27513	TREATMENT OF THIGH FRACTURE	X	X	X			X

Covered Surgery Code	Description	Modifier				Site (e.g., E1-E4)	Left/Right (LT or RT)
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)			
27514	TREATMENT OF THIGH FRACTURE	x	x	x			x
27516	TREAT THIGH FX GROWTH PLATE		x	x			x
27517	TREAT THIGH FX GROWTH PLATE		x	x			x
27519	TREAT THIGH FX GROWTH PLATE	x	x	x			x
27520	TREAT KNEECAP FRACTURE		x	x			x
27524	TREAT KNEECAP FRACTURE	x	x	x			x
27530	TREAT KNEE FRACTURE		x	x			x
27532	TREAT KNEE FRACTURE		x	x			x
27535	TREAT KNEE FRACTURE	x	x	x			x
27536	TREAT KNEE FRACTURE	x	x	x			x
27538	TREAT KNEE FRACTURE(S)		x	x			x
27540	TREAT KNEE FRACTURE	x	x	x			x
27550	TREAT KNEE DISLOCATION		x	x			x
27552	TREAT KNEE DISLOCATION		x	x			x
27556	TREAT KNEE DISLOCATION	x	x	x			x
27557	TREAT KNEE DISLOCATION	x	x	x			x
27558	TREAT KNEE DISLOCATION	x	x	x			x
27560	TREAT KNEECAP DISLOCATION		x	x			x
27562	TREAT KNEECAP DISLOCATION		x	x			x
27566	TREAT KNEECAP DISLOCATION	x	x	x			x
27570	FIXATION OF KNEE JOINT		x	x			x
27580	FUSION OF KNEE	x	x	x			x
27590	AMPUTATE LEG AT THIGH	x	x	x			x
27591	AMPUTATE LEG AT THIGH	x	x	x			x
27592	AMPUTATE LEG AT THIGH	x	x	x			x
27594	AMPUTATION FOLLOW-UP SURGERY		x	x			x
27596	AMPUTATION FOLLOW-UP SURGERY		x	x			x
27598	AMPUTATE LOWER LEG AT KNEE	x	x	x			x
27599	LEG SURGERY PROCEDURE	x	x	x			
27600	DECOMPRESSION OF LOWER LEG		x	x			x
27601	DECOMPRESSION OF LOWER LEG		x	x			x
27602	DECOMPRESSION OF LOWER LEG	x	x	x			x
27603	DRAIN LOWER LEG LESION		x	x			x
27604	DRAIN LOWER LEG BURSA		x	x			x
27605	INCISION OF ACHILLES TENDON		x	x			x
27606	INCISION OF ACHILLES TENDON		x	x			x
27607	TREAT LOWER LEG BONE LESION		x	x			x
27610	EXPLORE/TREAT ANKLE JOINT		x	x			x
27612	EXPLORATION OF ANKLE JOINT	x	x	x			x
27613	BIOPSY LOWER LEG SOFT TISSUE		x	x			x
27614	BIOPSY LOWER LEG SOFT TISSUE		x	x			x
27615	REMOVE TUMOR, LOWER LEG		x	x			x
27616	RESECT LEG/ANKLE TUM > 5 CM			x			
27618	REMOVE LOWER LEG LESION		x	x			x
27619	REMOVE LOWER LEG LESION			x			x
27620	EXPLORE/TREAT ANKLE JOINT	x	x	x			x
27625	REMOVE ANKLE JOINT LINING	x	x	x			x
27626	REMOVE ANKLE JOINT LINING	x	x	x			x
27630	REMOVAL OF TENDON LESION		x	x			x
27632	EXC LEG/ANKLE LES SC > 3 CM	x	x	x			x
27634	EXC LEG/ANKLE TUM DEEP > 5 CM	x	x	x			x
27635	REMOVE LOWER LEG BONE LESION		x	x			x
27637	REMOVE/GRAFT LEG BONE LESION	x	x	x			x
27638	REMOVE/GRAFT LEG BONE LESION	x	x	x			x
27640	PARTIAL REMOVAL OF TIBIA		x	x			x
27641	PARTIAL REMOVAL OF FIBULA			x			x
27645	EXTENSIVE LOWER LEG SURGERY	x	x	x			x
27646	EXTENSIVE LOWER LEG SURGERY	x	x	x			x
27647	EXTENSIVE ANKLE/HEEL SURGERY	x	x	x			x
27648	INJECTION FOR ANKLE X-RAY		x	x			x
27650	REPAIR ACHILLES TENDON	x	x	x			x
27652	REPAIR/GRAFT ACHILLES TENDON		x	x			x
27654	REPAIR OF ACHILLES TENDON	x	x	x			x
27656	REPAIR LEG FASCIA DEFECT	x	x	x			x
27658	REPAIR OF LEG TENDON, EACH	x		x			x
27659	REPAIR OF LEG TENDON, EACH	x		x			x
27664	REPAIR OF LEG TENDON, EACH			x			x
27665	REPAIR OF LEG TENDON, EACH	x		x			x
27675	REPAIR LOWER LEG TENDONS	x	x	x			x
27676	REPAIR LOWER LEG TENDONS	x	x	x			x
27680	RELEASE OF LOWER LEG TENDON			x			x
27681	RELEASE OF LOWER LEG TENDONS		x	x			x
27685	REVISION OF LOWER LEG TENDON	x	x	x			x
27686	REVISE LOWER LEG TENDONS		x	x			x
27687	REVISION OF Calf Tendon	x	x	x			x
27690	REVISE LOWER LEG TENDON		x	x			x
27691	REVISE LOWER LEG TENDON	x	x	x			x
27692	REVISE ADDITIONAL LEG TENDON	x		x			x
27695	REPAIR OF ANKLE LIGAMENT		x	x			x
27696	REPAIR OF ANKLE LIGAMENTS			x			x
27698	REPAIR OF ANKLE LIGAMENT	x	x	x			x
27700	REVISION OF ANKLE JOINT	x	x	x			x
27702	RECONSTRUCT ANKLE JOINT	x	x	x			x
27703	RECONSTRUCTION, ANKLE JOINT	x	x	x			x
27704	REMOVAL OF ANKLE IMPLANT		x	x			x
27705	INCISION OF TIBIA	x	x	x			x
27707	INCISION OF FIBULA		x	x			x
27709	INCISION OF TIBIA & FIBULA	x	x	x			x
27712	REALIGNMENT OF LOWER LEG	x	x	x			x
27715	REVISION OF LOWER LEG	x	x	x			x
27720	REPAIR OF TIBIA	x	x	x			x
27722	REPAIR/GRAFT OF TIBIA	x	x	x			x
27724	REPAIR/GRAFT OF TIBIA	x	x	x			x
27725	REPAIR OF LOWER LEG	x	x	x			x
27726	REPAIR FIBULA NONUNION		x	x			x
27727	REPAIR OF LOWER LEG	x	x	x			x
27730	REPAIR OF TIBIA EPIPHYSIS		x	x			x
27732	REPAIR OF FIBULA EPIPHYSIS			x			x
27734	REPAIR LOWER LEG EPIPHYSES		x	x			x
27740	REPAIR OF LEG EPIPHYSES	x	x	x			x
27742	REPAIR OF LEG EPIPHYSES	x	x	x			x
27745	REINFORCE TIBIA	x		x			x
27750	TREATMENT OF TIBIA FRACTURE		x	x			x
27752	TREATMENT OF TIBIA FRACTURE			x			x
27756	TREATMENT OF TIBIA FRACTURE	x	x	x			x
27758	TREATMENT OF TIBIA FRACTURE	x	x	x			x

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
27759	TREATMENT OF TIBIA FRACTURE	x	x	x		x
27760	CLTX MEDIAL ANKLE FX		x	x		x
27762	CLTX MED ANKLE FX W/MNPJ		x	x		x
27766	OPTX MEDIAL ANKLE FX		x	x		x
27767	CLTX POST ANKLE FX		x	x		x
27768	CLTX POST ANKLE FX W/MNPJ		x	x		x
27769	OPTX POST ANKLE FX		x	x		x
27780	TREATMENT OF FIBULA FRACTURE		x	x		x
27781	TREATMENT OF FIBULA FRACTURE		x	x		x
27784	TREATMENT OF FIBULA FRACTURE		x	x		x
27786	TREATMENT OF ANKLE FRACTURE		x	x		x
27788	TREATMENT OF ANKLE FRACTURE		x	x		x
27792	TREATMENT OF ANKLE FRACTURE		x	x		x
27808	TREATMENT OF ANKLE FRACTURE		x	x		x
27810	TREATMENT OF ANKLE FRACTURE		x	x		x
27814	TREATMENT OF ANKLE FRACTURE	x	x	x		x
27816	TREATMENT OF ANKLE FRACTURE		x	x		x
27818	TREATMENT OF ANKLE FRACTURE		x	x		x
27822	TREATMENT OF ANKLE FRACTURE	x	x	x		x
27823	TREATMENT OF ANKLE FRACTURE	x	x	x		x
27824	TREAT LOWER LEG FRACTURE		x	x		x
27825	TREAT LOWER LEG FRACTURE		x	x		x
27826	TREAT LOWER LEG FRACTURE	x	x	x		x
27827	TREAT LOWER LEG FRACTURE	x	x	x		x
27828	TREAT LOWER LEG FRACTURE	x	x	x		x
27829	TREAT LOWER LEG JOINT	x	x	x		x
27830	TREAT LOWER LEG DISLOCATION		x	x		x
27831	TREAT LOWER LEG DISLOCATION		x	x		x
27832	TREAT LOWER LEG DISLOCATION	x	x	x		x
27840	TREAT ANKLE DISLOCATION		x	x		x
27842	TREAT ANKLE DISLOCATION		x	x		x
27846	TREAT ANKLE DISLOCATION	x	x	x		x
27848	TREAT ANKLE DISLOCATION	x	x	x		x
27860	FIXATION OF ANKLE JOINT		x	x		x
27870	FUSION OF ANKLE JOINT_OPEN	x	x	x		x
27871	FUSION OF TIBIOFIBULAR JOINT	x	x	x		x
27880	AMPUTATION OF LOWER LEG	x	x	x		x
27881	AMPUTATION OF LOWER LEG	x	x	x		x
27882	AMPUTATION OF LOWER LEG		x	x		x
27884	AMPUTATION FOLLOW-UP SURGERY		x	x		x
27886	AMPUTATION FOLLOW-UP SURGERY		x	x		x
27888	AMPUTATION OF FOOT AT ANKLE	x	x	x		x
27889	AMPUTATION OF FOOT AT ANKLE		x	x		x
27892	DECOMPRESSION OF LEG		x	x		x
27893	DECOMPRESSION OF LEG		x	x		x
27894	DECOMPRESSION OF LEG	x	x	x		x
27899	LEG/ANKLE SURGERY PROCEDURE		x	x		x
28001	DRAINAGE OF BURSA OF FOOT			x		x
28002	TREATMENT OF FOOT INFECTION			x		x
28003	TREATMENT OF FOOT INFECTION			x		x
28005	TREAT FOOT BONE LESION			x		x
28008	INCISION OF FOOT FASCIA		x	x	x	x
28010	INCISION OF TOE TENDON			x	x	
28011	INCISION OF TOE TENDONS			x	x	
28020	EXPLORATION OF FOOT JOINT			x		x
28022	EXPLORATION OF FOOT JOINT			x	x	x
28024	EXPLORATION OF TOE JOINT			x	x	
28035	DECOMPRESSION OF TIBIA NERVE		x	x		x
28039	EXC FOOT/TOE TUM SC > 1.5 CM	x	x	x	x	x
28041	EXC FOOT/TOE TUM DEEP > 1.5 CM		x	x	x	x
28043	EXCISION OF FOOT LESION		x	x	x	x
28045	EXCISION OF FOOT LESION		x	x	x	x
28046	RESECTION OF TUMOR, FOOT		x	x	x	x
28047	RESECT FOOT/TOE TUMOR > 3 CM	x		x	x	x
28050	BIOPSY OF FOOT JOINT LINING		x	x		x
28052	BIOPSY OF FOOT JOINT LINING		x	x	x	x
28054	BIOPSY OF TOE JOINT LINING		x	x	x	
28055	NEURECTOMY, FOOT		x	x		x
28060	PARTIAL REMOVAL, FOOT FASCIA		x	x		x
28062	REMOVAL OF FOOT FASCIA		x	x		x
28070	REMOVAL OF FOOT JOINT LINING			x		x
28072	REMOVAL OF FOOT JOINT LINING			x	x	x
28080	REMOVAL OF FOOT LESION			x	x	
28086	EXCISE FOOT TENDON SHEATH	x	x	x		x
28088	EXCISE FOOT TENDON SHEATH		x	x		x
28090	REMOVAL OF FOOT LESION		x	x		x
28092	REMOVAL OF TOE LESIONS			x	x	
28100	REMOVAL OF ANKLE/HEEL LESION	x	x	x		x
28102	REMOVE/GRAFT FOOT LESION	x	x	x		x
28103	REMOVE/GRAFT FOOT LESION	x	x	x		x
28104	REMOVAL OF FOOT LESION	x		x		x
28106	REMOVE/GRAFT FOOT LESION	x		x		x
28107	REMOVE/GRAFT FOOT LESION	x		x		x
28108	REMOVAL OF TOE LESIONS			x	x	
28110	PART REMOVAL OF METATARSAL		x	x	x	x
28111	PART REMOVAL OF METATARSAL		x	x	x	x
28112	PART REMOVAL OF METATARSAL		x	x	x	x
28113	PART REMOVAL OF METATARSAL		x	x	x	x
28114	REMOVAL OF METATARSAL HEADS	x	x	x		x
28116	REVISION OF FOOT		x	x		x
28118	REMOVAL OF HEEL BONE	x	x	x		x
28119	REMOVAL OF HEEL SPUR		x	x		x
28120	PART REMOVAL OF ANKLE/HEEL		x	x		x
28122	PARTIAL REMOVAL OF FOOT BONE	x	x	x		x
28124	PARTIAL REMOVAL OF TOE		x	x		x
28126	PARTIAL REMOVAL OF TOE			x	x	
28130	REMOVAL OF ANKLE BONE	x	x	x		x
28140	REMOVAL OF METATARSAL			x	x	
28150	REMOVAL OF TOE			x	x	
28153	PARTIAL REMOVAL OF TOE			x	x	
28160	PARTIAL REMOVAL OF TOE			x	x	
28171	EXTENSIVE FOOT SURGERY	x		x		x
28173	EXTENSIVE FOOT SURGERY			x		x
28175	EXTENSIVE FOOT SURGERY			x	x	
28190	REMOVAL OF FOOT FOREIGN BODY		x	x		x
28192	REMOVAL OF FOOT FOREIGN BODY		x	x		x

Covered Surgery Code	Description	Modifier				Left/Right (LT or RT)
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	
28193	REMOVAL OF FOOT FOREIGN BODY		X	X		X
28200	REPAIR OF FOOT TENDON			X		X
28202	REPAIR/GRAFT OF FOOT TENDON	X		X		X
28208	REPAIR OF FOOT TENDON			X		X
28210	REPAIR/GRAFT OF FOOT TENDON	X		X		X
28220	RELEASE OF FOOT TENDON		X	X		X
28222	RELEASE OF FOOT TENDONS		X	X		X
28225	RELEASE OF FOOT TENDON		X	X		X
28226	RELEASE OF FOOT TENDONS		X	X		X
28230	INCISION OF FOOT TENDON(S)		X	X		X
28232	INCISION OF TOE TENDON			X	X	
28234	INCISION OF FOOT TENDON			X	X	
28238	REVISION OF FOOT TENDON	X	X	X		X
28240	RELEASE OF BIG TOE		X	X	X	X
28250	REVISION OF FOOT FASCIA	X	X	X		X
28260	RELEASE OF MIDFOOT JOINT	X	X	X		X
28261	REVISION OF FOOT TENDON		X	X		X
28262	REVISION OF FOOT AND ANKLE	X	X	X		X
28264	RELEASE OF MIDFOOT JOINT	X	X	X		X
28270	RELEASE OF FOOT CONTRACTURE		X	X	X	X
28272	RELEASE OF TOE JOINT, EACH		X	X	X	
28280	FUSION OF TOES		X	X	X	
28285	REPAIR OF HAMMERTOE		X	X	X	
28286	REPAIR OF HAMMERTOE		X	X		X
28288	PARTIAL REMOVAL OF FOOT BONE			X		X
28289	REPAIR HALLUX RIGIDUS	X	X	X	X	X
28290	CORRECTION OF UNION		X	X	X	X
28292	CORRECTION OF UNION	X	X	X	X	X
28293	CORRECTION OF UNION	X	X	X	X	X
28294	CORRECTION OF UNION	X	X	X	X	X
28296	CORRECTION OF UNION	X	X	X	X	X
28297	CORRECTION OF UNION	X	X	X	X	X
28298	CORRECTION OF UNION	X	X	X	X	X
28299	CORRECTION OF UNION	X	X	X	X	X
28300	INCISION OF HEEL BONE	X	X	X		X
28302	INCISION OF ANKLE BONE	X	X	X		X
28304	INCISION OF MIDFOOT BONES	X	X	X		X
28305	INCISE/GRAFT MIDFOOT BONES	X	X	X		X
28306	INCISION OF METATARSAL	X	X	X	X	X
28307	INCISION OF METATARSAL		X	X	X	X
28308	INCISION OF METATARSAL	X	X	X	X	X
28309	INCISION OF METATARSALS		X	X		X
28310	REVISION OF BIG TOE		X	X	X	
28312	REVISION OF TOE			X	X	
28313	REPAIR DEFORMITY OF TOE			X	X	
28315	REMOVAL OF SESAMOID BONE		X	X	X	
28320	REPAIR OF FOOT BONES	X	X	X		X
28322	REPAIR OF METATARSALS	X		X		X
28340	RESECT ENLARGED TOE TISSUE			X	X	
28341	RESECT ENLARGED TOE			X	X	
28344	REPAIR EXTRA TOE(S)		X	X	X	X
28345	REPAIR WEBBED TOE(S)			X	X	
28360	RECONSTRUCT CLEFT FOOT	X	X	X		X
28400	TREATMENT OF HEEL FRACTURE		X	X		X
28405	TREATMENT OF HEEL FRACTURE		X	X		X
28406	TREATMENT OF HEEL FRACTURE		X	X		X
28415	TREAT HEEL FRACTURE	X	X	X		X
28420	TREAT/GRAFT HEEL FRACTURE	X	X	X		X
28430	TREATMENT OF ANKLE FRACTURE		X	X		X
28435	TREATMENT OF ANKLE FRACTURE		X	X		X
28436	TREATMENT OF ANKLE FRACTURE		X	X		X
28445	TREAT ANKLE FRACTURE	X	X	X		X
28446	OSTEOCHONDRAL TALUS AUTOGRFT	X	X	X		X
28450	TREAT MIDFOOT FRACTURE, EACH			X		X
28455	TREAT MIDFOOT FRACTURE, EACH			X		X
28456	TREAT MIDFOOT FRACTURE			X		X
28465	TREAT MIDFOOT FRACTURE, EACH			X		X
28470	TREAT METATARSAL FRACTURE			X		X
28475	TREAT METATARSAL FRACTURE			X		X
28476	TREAT METATARSAL FRACTURE			X		X
28485	TREAT METATARSAL FRACTURE			X		X
28490	TREAT BIG TOE FRACTURE		X	X	X	X
28495	TREAT BIG TOE FRACTURE		X	X	X	X
28496	TREAT BIG TOE FRACTURE		X	X	X	X
28505	TREAT BIG TOE FRACTURE		X	X	X	X
28510	TREATMENT OF TOE FRACTURE			X	X	
28515	TREATMENT OF TOE FRACTURE			X	X	
28525	TREAT TOE FRACTURE			X	X	
28530	TREAT SESAMOID BONE FRACTURE		X	X	X	X
28531	TREAT SESAMOID BONE FRACTURE		X	X	X	X
28540	TREAT FOOT DISLOCATION		X	X		X
28545	TREAT FOOT DISLOCATION		X	X		X
28546	TREAT FOOT DISLOCATION		X	X		X
28555	REPAIR FOOT DISLOCATION	X	X	X		X
28570	TREAT FOOT DISLOCATION		X	X		X
28575	TREAT FOOT DISLOCATION		X	X		X
28576	TREAT FOOT DISLOCATION		X	X		X
28585	REPAIR FOOT DISLOCATION	X	X	X		X
28600	TREAT FOOT DISLOCATION			X		X
28605	TREAT FOOT DISLOCATION			X		X
28606	TREAT FOOT DISLOCATION			X		X
28615	REPAIR FOOT DISLOCATION	X		X		X
28630	TREAT TOE DISLOCATION			X	X	X
28635	TREAT TOE DISLOCATION			X	X	X
28636	TREAT TOE DISLOCATION			X	X	X
28645	REPAIR TOE DISLOCATION			X	X	X
28660	TREAT TOE DISLOCATION			X	X	
28665	TREAT TOE DISLOCATION			X	X	
28666	TREAT TOE DISLOCATION			X	X	
28675	REPAIR OF TOE DISLOCATION			X	X	
28705	FUSION OF FOOT BONES	X	X	X		X
28715	FUSION OF FOOT BONES	X	X	X		X
28725	FUSION OF FOOT BONES	X	X	X		X
28730	FUSION OF FOOT BONES	X	X	X		X
28735	FUSION OF FOOT BONES	X	X	X		X
28737	REVISION OF FOOT BONES	X	X	X		X

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
28740	FUSION OF FOOT BONES	x		x		x
28750	FUSION OF BIG TOE JOINT		x	x	x	x
28755	FUSION OF BIG TOE JOINT		x	x	x	x
28760	FUSION OF BIG TOE JOINT	x	x	x	x	x
28800	AMPUTATION OF MIDFOOT	x	x	x		x
28805	AMPUTATION THRU METATARSAL		x	x		x
28810	AMPUTATION TOE & METATARSAL			x	x	
28820	AMPUTATION OF TOE			x	x	
28825	PARTIAL AMPUTATION OF TOE			x	x	
28890	HIGH ENERGY ESWT, PLANTAR F		x	x		x
28899	FOOT/TOES SURGERY PROCEDURE			x		
29000	APPLICATION OF BODY CAST			x		
29010	APPLICATION OF BODY CAST			x		
29015	APPLICATION OF BODY CAST			x		
29020	APPLICATION OF BODY CAST			x		
29025	APPLICATION OF BODY CAST			x		
29035	APPLICATION OF BODY CAST			x		
29040	APPLICATION OF BODY CAST			x		
29044	APPLICATION OF BODY CAST			x		
29046	APPLICATION OF BODY CAST			x		
29049	APPLICATION OF FIGURE EIGHT			x		
29055	APPLICATION OF SHOULDER CAST			x		x
29058	APPLICATION OF SHOULDER CAST			x		x
29065	APPLICATION OF LONG ARM CAST		x	x		x
29075	APPLICATION OF FOREARM CAST		x	x		x
29085	APPLY HAND/WRIST CAST		x	x		x
29086	APPLY FINGER CAST		x	x	x	
29105	APPLY LONG ARM SPLINT		x	x		x
29125	APPLY FOREARM SPLINT		x	x		x
29126	APPLY FOREARM SPLINT		x	x		x
29130	APPLICATION OF FINGER SPLINT		x	x	x	
29131	APPLICATION OF FINGER SPLINT		x	x	x	
29200	STRAPPING OF CHEST			x		
29240	STRAPPING OF SHOULDER		x	x		x
29260	STRAPPING OF ELBOW OR WRIST		x	x		x
29280	STRAPPING OF HAND OR FINGER		x	x	x	x
29305	APPLICATION OF HIP CAST			x		
29325	APPLICATION OF HIP CASTS			x		
29345	APPLICATION OF LONG LEG CAST		x	x		x
29355	APPLICATION OF LONG LEG CAST		x	x		x
29358	APPLY LONG LEG CAST BRACE		x	x		x
29365	APPLICATION OF LONG LEG CAST		x	x		x
29405	APPLY SHORT LEG CAST		x	x		x
29425	APPLY SHORT LEG CAST		x	x		x
29435	APPLY SHORT LEG CAST		x	x		x
29440	ADDITION OF WALKER TO CAST		x	x		x
29445	APPLY RIGID LEG CAST		x	x		x
29450	APPLICATION OF LEG CAST		x	x		x
29505	APPLICATION, LONG LEG SPLINT		x	x		x
29515	APPLICATION LOWER LEG SPLINT		x	x		x
29520	STRAPPING OF HIP		x	x		x
29530	STRAPPING OF KNEE		x	x		x
29540	STRAPPING OF ANKLE AND/OR FT		x	x		x
29550	STRAPPING OF TOES		x	x	x	
29580	APPLICATION OF PASTE BOOT		x	x		x
29581	APPLY MULTILAY COMPRS LWR LEG		x	x		x
29582	APPL MLT LAYR COMPRES THGH LEG ANKLE FT WHEN DONE		x	x		
29583	APPL MLT LAYR COMPRES SYSTEM UPPER & LOWER ARM		x	x		
29584	APPL MLT LAYR COMPRES SYS UP ARM LWR ARM HAND & FINGER		x	x		
29700	REMOVAL/REVISION OF CAST			x		x
29705	REMOVAL/REVISION OF CAST		x	x		x
29710	REMOVAL/REVISION OF CAST		x	x		x
29715	REMOVAL/REVISION OF CAST			x		
29720	REPAIR OF BODY CAST			x		
29730	WINDOWING OF CAST			x		
29740	WEDGING OF CAST			x		
29750	WEDGING OF CLUBFOOT CAST		x	x		x
29799	CASTING/STRAPPING PROCEDURE			x		
29800	JAW ARTHROSCOPY/SURGERY		x	x		x
29804	JAW ARTHROSCOPY/SURGERY	x	x	x		x
29805	SHOULDER ARTHROSCOPY, DX		x	x		x
29806	SHOULDER ARTHROSCOPY/SURGERY		x	x		x
29807	SHOULDER ARTHROSCOPY/SURGERY		x	x		x
29819	SHOULDER ARTHROSCOPY/SURGERY		x	x		x
29820	SHOULDER ARTHROSCOPY/SURGERY	x	x	x		x
29821	SHOULDER ARTHROSCOPY/SURGERY	x	x	x		x
29822	SHOULDER ARTHROSCOPY/SURGERY	x	x	x		x
29823	SHOULDER ARTHROSCOPY/SURGERY	x	x	x		x
29824	SHOULDER ARTHROSCOPY/SURGERY	x	x	x		x
29825	SHOULDER ARTHROSCOPY/SURGERY	x	x	x		x
29826	SHOULDER ARTHROSCOPY/SURGERY	x	x	x		x
29827	ARTHROSCOP ROTATOR CUFF REPR	x	x	x		x
29828	ARTHROSCOPY BICEPS TENODESIS	x	x	x		x
29830	ELBOW ARTHROSCOPY		x	x		x
29834	ELBOW ARTHROSCOPY/SURGERY	x	x	x		x
29835	ELBOW ARTHROSCOPY/SURGERY	x	x	x		x
29836	ELBOW ARTHROSCOPY/SURGERY	x	x	x		x
29837	ELBOW ARTHROSCOPY/SURGERY	x	x	x		x
29838	ELBOW ARTHROSCOPY/SURGERY		x	x		x
29840	WRIST ARTHROSCOPY		x	x		x
29843	WRIST ARTHROSCOPY/SURGERY	x	x	x		x
29844	WRIST ARTHROSCOPY/SURGERY	x	x	x		x
29845	WRIST ARTHROSCOPY/SURGERY	x	x	x		x
29846	WRIST ARTHROSCOPY/SURGERY		x	x		x
29847	WRIST ARTHROSCOPY/SURGERY	x	x	x		x
29848	WRIST ENDOSCOPY/SURGERY		x	x		x
29850	KNEE ARTHROSCOPY/SURGERY		x	x		x
29851	KNEE ARTHROSCOPY/SURGERY	x	x	x		x
29855	TIBIAL ARTHROSCOPY/SURGERY	x	x	x		x
29856	TIBIAL ARTHROSCOPY/SURGERY	x	x	x		x
29860	HIP ARTHROSCOPY, DX	x	x	x		x
29861	HIP ARTHROSCOPY/SURGERY	x	x	x		x
29862	HIP ARTHROSCOPY/SURGERY	x	x	x		x
29863	HIP ARTHROSCOPY/SURGERY	x	x	x		x
29866	AUTGRFT IMPLNT, KNEE W/SCOPE		x	x		x
29867	ALLGRFT IMPLNT, KNEE W/SCOPE		x	x		x

Covered Surgery Code	Description	Modifier				Site (e.g., E1-E4)	Left/Right (LT or RT)
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)			
29868	MENISCAL TRNSPL. KNEE W/SCPE		X	X			X
29870	KNEE ARTHROSCOPY, DX		X	X			X
29871	KNEE ARTHROSCOPY/DRAINAGE		X	X			X
29873	KNEE ARTHROSCOPY/SURGERY		X	X			X
29874	KNEE ARTHROSCOPY/SURGERY		X	X			X
29875	KNEE ARTHROSCOPY/SURGERY		X	X			X
29876	KNEE ARTHROSCOPY/SURGERY		X	X			X
29877	KNEE ARTHROSCOPY/SURGERY		X	X			X
29879	KNEE ARTHROSCOPY/SURGERY		X	X			X
29880	KNEE ARTHROSCOPY/SURGERY		X	X			X
29881	KNEE ARTHROSCOPY/SURGERY		X	X			X
29882	KNEE ARTHROSCOPY/SURGERY		X	X			X
29883	KNEE ARTHROSCOPY/SURGERY		X	X			X
29884	KNEE ARTHROSCOPY/SURGERY	X	X	X			X
29885	KNEE ARTHROSCOPY/SURGERY	X	X	X			X
29886	KNEE ARTHROSCOPY/SURGERY		X	X			X
29887	KNEE ARTHROSCOPY/SURGERY	X	X	X			X
29888	KNEE ARTHROSCOPY/SURGERY	X	X	X			X
29889	KNEE ARTHROSCOPY/SURGERY	X	X	X			X
29891	ANKLE ARTHROSCOPY/SURGERY	X	X	X			X
29892	ANKLE ARTHROSCOPY/SURGERY	X	X	X			X
29893	SCOPE, PLANTAR FASCIOTOMY		X	X			X
29894	ANKLE ARTHROSCOPY/SURGERY	X	X	X			X
29895	ANKLE ARTHROSCOPY/SURGERY	X	X	X			X
29897	ANKLE ARTHROSCOPY/SURGERY	X	X	X			X
29898	ANKLE ARTHROSCOPY/SURGERY	X	X	X			X
29899	ANKLE ARTHROSCOPY/SURGERY	X	X	X			X
29900	MCP JOINT ARTHROSCOPY, DX		X	X			X
29901	MCP JOINT ARTHROSCOPY, SURG		X	X			X
29902	MCP JOINT ARTHROSCOPY, SURG		X	X			X
29904	SUBTALAR ARTHRO W/FB RMVL	X	X	X			X
29905	SUBTALAR ARTHRO W/EXC	X	X	X			X
29906	SUBTALAR ARTHRO W/DEB	X	X	X			X
29907	SUBTALAR ARTHRO W/FUSION	X	X	X			X
29914	ARTHROSCOPY HIP W/FEMOROPLASTY	X	X	X			X
29915	ARTHROSCOPY HIP W/ACETABULOPLASTY	X	X	X			X
29916	ARTHROSCOPY HIP W/LABRAL REPAIR	X	X	X			X
29999	ARTHROSCOPY OF JOINT		X	X			
30000	DRAINAGE OF NOSE LESION			X			X
30020	DRAINAGE OF NOSE LESION			X			X
30100	INTRANASAL BIOPSY			X			X
30110	REMOVAL OF NOSE POLYP(S)		X	X			X
30115	REMOVAL OF NOSE POLYP(S)		X	X			X
30117	REMOVAL OF INTRANASAL LESION			X			X
30118	REMOVAL OF INTRANASAL LESION			X			X
30120	REVISION OF NOSE			X			
30124	REMOVAL OF NOSE LESION			X			X
30125	REMOVAL OF NOSE LESION	X		X			
30130	EXCISE INFERIOR TURBINATE		X	X			X
30140	RESECT INFERIOR TURBINATE		X	X			X
30150	PARTIAL REMOVAL OF NOSE			X			
30160	REMOVAL OF NOSE	X		X			
30200	INJECTION/TREATMENT OF NOSE			X			
30210	NASAL SINUS THERAPY			X			
30220	INSERT NASAL SEPTAL BUTTON			X			
30300	REMOVE NASAL FOREIGN BODY			X			X
30310	REMOVE NASAL FOREIGN BODY			X			X
30320	REMOVE NASAL FOREIGN BODY			X			X
30400	RECONSTRUCTION OF NOSE			X			X
30410	RECONSTRUCTION OF NOSE	X		X			X
30420	RECONSTRUCTION OF NOSE			X			X
30430	REVISION OF NOSE	X		X			
30435	REVISION OF NOSE	X		X			
30450	REVISION OF NOSE	X		X			
30460	REVISION OF NOSE	X		X			X
30462	REVISION OF NOSE	X		X			X
30465	REPAIR NASAL STENOSIS			X			
30520	REPAIR OF NASAL SEPTUM			X			
30540	REPAIR NASAL DEFECT	X		X			X
30545	REPAIR NASAL DEFECT	X		X			X
30560	RELEASE OF NASAL ADHESIONS			X			X
30580	REPAIR UPPER JAW FISTULA			X			X
30600	REPAIR MOUTH/NOSE FISTULA			X			X
30620	INTRANASAL RECONSTRUCTION			X			
30630	REPAIR NASAL SEPTUM DEFECT			X			
30801	ABLATE INF TURBINATE, SUPERF			X			
30802	CAUTERIZATION, INNER NOSE			X			
30901	CONTROL OF NOSEBLEED		X	X			X
30903	CONTROL OF NOSEBLEED		X	X			X
30905	CONTROL OF NOSEBLEED			X			X
30906	REPEAT CONTROL OF NOSEBLEED			X			X
30915	LIGATION, NASAL SINUS ARTERY			X			X
30920	LIGATION, UPPER JAW ARTERY			X			X
30930	THER FX, NASAL INF TURBINATE		X	X			X
30999	NASAL SURGERY PROCEDURE			X			X
31000	IRRIGATION, MAXILLARY SINUS		X	X			X
31002	IRRIGATION, SPHENOID SINUS		X	X			X
31020	EXPLORATION, MAXILLARY SINUS		X	X			X
31030	EXPLORATION, MAXILLARY SINUS		X	X			X
31032	EXPLORATION, MAXILLARY SINUS		X	X			X
31040	EXPLORATION BEHIND UPPER JAW		X	X			X
31050	EXPLORATION, SPHENOID SINUS		X	X			X
31051	SPHENOID SINUS SURGERY		X	X			X
31070	EXPLORATION OF FRONTAL SINUS		X	X			X
31075	EXPLORATION OF FRONTAL SINUS	X	X	X			X
31080	REMOVAL OF FRONTAL SINUS	X	X	X			X
31081	REMOVAL OF FRONTAL SINUS	X	X	X			X
31084	REMOVAL OF FRONTAL SINUS	X	X	X			X
31085	REMOVAL OF FRONTAL SINUS	X	X	X			X
31086	REMOVAL OF FRONTAL SINUS	X	X	X			X
31087	REMOVAL OF FRONTAL SINUS	X	X	X			X
31090	EXPLORATION OF SINUSES		X	X			X
31200	REMOVAL OF ETHMOID SINUS		X	X			X
31201	REMOVAL OF ETHMOID SINUS		X	X			X
31205	REMOVAL OF ETHMOID SINUS	X	X	X			X
31225	REMOVAL OF UPPER JAW	X	X	X			X

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
31230	REMOVAL OF UPPER JAW	x	x	x		x
31231	NASAL ENDOSCOPY, DX			x		
31233	NASAL/SINUS ENDOSCOPY, DX		x	x		x
31235	NASAL/SINUS ENDOSCOPY, DX		x	x		x
31237	NASAL/SINUS ENDOSCOPY, SURG		x	x		x
31238	NASAL/SINUS ENDOSCOPY, SURG		x	x		x
31239	NASAL/SINUS ENDOSCOPY, SURG		x	x		x
31240	NASAL/SINUS ENDOSCOPY, SURG		x	x		x
31254	REVISION OF ETHMOID SINUS		x	x		x
31255	REMOVAL OF ETHMOID SINUS		x	x		x
31256	EXPLORATION MAXILLARY SINUS		x	x		x
31267	ENDOSCOPY, MAXILLARY SINUS		x	x		x
31276	SINUS ENDOSCOPY, SURGICAL		x	x		x
31287	NASAL/SINUS ENDOSCOPY, SURG		x	x		x
31288	NASAL/SINUS ENDOSCOPY, SURG		x	x		x
31290	NASAL/SINUS ENDOSCOPY, SURG		x	x		x
31291	NASAL/SINUS ENDOSCOPY, SURG		x	x		x
31292	NASAL/SINUS ENDOSCOPY, SURG		x	x		x
31293	NASAL/SINUS ENDOSCOPY, SURG		x	x		x
31294	NASAL/SINUS ENDOSCOPY, SURG		x	x		x
31295	NSL/SINUS NDSC SURG W/DILAT MAXILLARY SINUS	x	x	x		x
31296	NSL/SINUS NDSC SURG W/DILAT FRONTAL SINUS	x	x	x		x
31297	NSL/SINUS NDSC SURG W/DILAT SPHENOID SINUS		x	x		x
31299	SINUS SURGERY PROCEDURE			x		x
31300	REMOVAL OF LARYNX LESION	x		x		
31320	DIAGNOSTIC INCISION, LARYNX			x		
31360	REMOVAL OF LARYNX	x		x		
31365	REMOVAL OF LARYNX	x		x		
31367	PARTIAL REMOVAL OF LARYNX	x		x		
31368	PARTIAL REMOVAL OF LARYNX	x		x		
31370	PARTIAL REMOVAL OF LARYNX	x		x		
31375	PARTIAL REMOVAL OF LARYNX	x		x		
31380	PARTIAL REMOVAL OF LARYNX	x		x		
31382	PARTIAL REMOVAL OF LARYNX	x		x		
31390	REMOVAL OF LARYNX & PHARYNX	x		x		
31395	RECONSTRUCT LARYNX & PHARYNX	x		x		
31400	REVISION OF LARYNX	x		x		x
31420	REMOVAL OF EPIGLOTTIS	x		x		
31600	INSERT EMERGENCY AIRWAY			*		
31502	CHANGE OF WINDPIPE AIRWAY			x		
31505	DIAGNOSTIC LARYNGOSCOPY			x		
31510	LARYNGOSCOPY WITH BIOPSY			x		
31511	REMOVE FOREIGN BODY, LARYNX			x		
31512	REMOVAL OF LARYNX LESION			x		
31513	INJECTION INTO VOCAL CORD			x		
31515	LARYNGOSCOPY FOR ASPIRATION			x		
31520	DX LARYNGOSCOPY, NEWBORN			x		
31525	DX LARYNGOSCOPY EXCL NB			x		
31526	DX LARYNGOSCOPY W/OPER SCOPE			x		
31527	LARYNGOSCOPY FOR TREATMENT			x		
31528	LARYNGOSCOPY AND DILATION			x		
31529	LARYNGOSCOPY AND DILATION			x		
31530	LARYNGOSCOPY W/FB REMOVAL			x		
31531	LARYNGOSCOPY W/FB & OP SCOPE			x		
31535	LARYNGOSCOPY W/BIOPSY			x		
31536	LARYNGOSCOPY W/BX & OP SCOPE			x		
31540	LARYNGOSCOPY W/EXC OF TUMOR			x		
31541	LARYNSCOP W/TUMR EXC + SCOPE			x		
31545	REMOVE VC LESION W/SCOPE		x	x		
31546	REMOVE VC LESION SCOPE/GRAFT		x	x		
31560	LARYNGOSCOPIE W/ARYTENOIDECTOMY			x		
31561	LARYNSCOP, REMVE CART + SCOP			x		
31570	LARYNGOSCOPE W/VC INJ			x		
31571	LARYNGOSCOPE W/VC INJ + SCOPE			x		
31575	DIAGNOSTIC LARYNGOSCOPY			x		
31576	LARYNGOSCOPY WITH BIOPSY			x		
31577	REMOVE FOREIGN BODY, LARYNX			x		
31578	REMOVAL OF LARYNX LESION			x		
31579	DIAGNOSTIC LARYNGOSCOPY			x		
31580	REVISION OF LARYNX	x		x		
31582	REVISION OF LARYNX			x		
31584	TREAT LARYNX FRACTURE	x		x		
31587	REVISION OF LARYNX	x		x		
31588	REVISION OF LARYNX	x		x		
31590	REINNERVATE LARYNX	x		x		
31595	LARYNX NERVE SURGERY	x	x	x		
31599	LARYNX SURGERY PROCEDURE			x		
31600	INCISION OF WINDPIPE			x		
31601	INCISION OF WINDPIPE	x		x		
31603	INCISION OF WINDPIPE			x		
31605	INCISION OF WINDPIPE			x		
31610	INCISION OF WINDPIPE			x		
31611	SURGERY/SPEECH PROSTHESIS	x		x		
31612	PUNCTURE/CLEAR WINDPIPE			x		
31613	REPAIR WINDPIPE OPENING			x		
31614	REPAIR WINDPIPE OPENING			x		
31615	VISUALIZATION OF WINDPIPE			x		
31620	ENDBRONCHIAL US ADD-ON			*		
31622	DX BRONCHOSCOPE/WASH			x		
31623	DX BRONCHOSCOPE/BRUSH			x		
31624	DX BRONCHOSCOPE/LAVAGE			x		x
31625	BRONCHOSCOPY W/BIOPSY(S)			x		
31626	BRONCHOSCOPY W/MARKERS			x		
31627	NAVIGATIONAL BRONCHOSCOPY			*		
31628	BRONCHOSCOPY/LUNG BX, EACH			x		
31629	BRONCHOSCOPY/NEEDLE BX, EACH			x		
31630	BRONCHOSCOPY DILATE/FX REPR			x		x
31631	BRONCHOSCOPY, DILATE W/STENT			x		
31632	BRONCHOSCOPY/LUNG BX, ADDL			*		
31633	BRONCHOSCOPY/NEEDLE BX, ADDL			*		
31634	BRONCHOSCOPY BALLOON OCCLUSION	x		x		
31635	BRONCHOSCOPY W/FB REMOVAL			x		x
31636	BRONCHOSCOPY, BRONCH STENTS			x		
31637	BRONCHOSCOPY, STENT ADD-ON			*		
31638	BRONCHOSCOPY, REVISE STENT			x		
31640	BRONCHOSCOPY W/TUMOR EXCISE			x		x

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
31641	BRONCHOSCOPY, TREAT BLOCKAGE			X		X
31643	DIAG BRONCHOSCOPE/CATHETER			X		X
31645	BRONCHOSCOPY, CLEAR AIRWAYS			X		X
31646	BRONCHOSCOPY, RECLEAR AIRWAY			X		X
31647	BRONCHIAL VALVE INIT INSERT			X		
31648	BRONCHIAL VALVE ADDL INSERT			X		
31660	BRONCH THERMOPLSTY 1 LOBE			X		
31661	BRONCH THERMOPLSTY 2/> LOBES			X		
31717	BRONCHIAL BRUSH BIOPSY			X		X
31720	CLEARANCE OF AIRWAYS			X		
31725	CLEARANCE OF AIRWAYS			X		X
31730	INTRO. WINDPIPE WIRE/TUBE			X		
31750	REPAIR OF WINDPIPE	X		X		
31755	REPAIR OF WINDPIPE	X		X		
31760	REPAIR OF WINDPIPE	X		X		
31766	RECONSTRUCTION OF WINDPIPE	X		X		
31770	REPAIR/GRAFT OF BRONCHUS	X		X		X
31775	RECONSTRUCT BRONCHUS	X		X		X
31780	RECONSTRUCT WINDPIPE	X		X		
31781	RECONSTRUCT WINDPIPE	X		X		
31785	REMOVE WINDPIPE LESION	X		X		
31786	REMOVE WINDPIPE LESION	X		X		
31800	REPAIR OF WINDPIPE INJURY			X		
31805	REPAIR OF WINDPIPE INJURY	X		X		
31820	CLOSURE OF WINDPIPE LESION			X		
31825	REPAIR OF WINDPIPE DEFECT			X		
31830	REVISE WINDPIPE SCAR			X		
31899	AIRWAYS SURGICAL PROCEDURE			X		
32035	EXPLORATION OF CHEST	X	X	X		X
32036	EXPLORATION OF CHEST	X	X	X		X
32096	THORACTOMY W/DX BX LUNG INFILTRATE UNILATERAL	X		X		X
32097	THORACTOMY W/DX BX LUNG NODULE/MASS UNILATERAL	X		X		X
32098	THORACTOMY W/BIOPSY OF PLEURA	X		X		X
32100	EXPLORATION/BIOPSY OF CHEST	X		X		X
32110	EXPLORE/REPAIR CHEST	X		X		X
32120	RE-EXPLORATION OF CHEST	X		X		X
32124	EXPLORE CHEST FREE ADHESIONS	X		X		X
32140	REMOVAL OF LUNG LESION(S)	X		X		X
32141	REMOVE/TREAT LUNG LESIONS	X		X		X
32150	REMOVAL OF LUNG LESION(S)	X		X		X
32151	REMOVE LUNG FOREIGN BODY	X		X		X
32160	OPEN CHEST HEART MASSAGE	X		X		X
32200	DRAIN, OPEN, LUNG LESION	X		X		X
32201	DRAIN, PERCUT, LUNG LESION			X		X
32215	TREAT CHEST LINING	X	X	X		X
32220	RELEASE OF LUNG	X	X	X		X
32225	PARTIAL RELEASE OF LUNG	X	X	X		X
32310	REMOVAL OF CHEST LINING	X		X		X
32320	FREE/REMOVE CHEST LINING	X		X		X
32400	NEEDLE BIOPSY CHEST LINING			X		X
32405	BIOPSY, LUNG OR MEDIASTINUM			X		X
32440	REMOVAL OF LUNG	X		X		X
32442	SLEEVE PNEUMONECTOMY	X		X		X
32445	REMOVAL OF LUNG	X		X		X
32480	PARTIAL REMOVAL OF LUNG	X		X		X
32482	BILOBECTOMY	X		X		
32484	SEGMENTECTOMY	X		X		X
32486	SLEEVE LOBECTOMY	X		X		X
32488	COMPLETION PNEUMONECTOMY	X		X		X
32501	REPAIR BRONCHUS ADD-ON			X		X
32503	RESECT APICAL LUNG TUMOR	X		X		X
32504	RESECT APICAL LUNG TUM/CHEST	X		X		X
32505	THORACOTOMY W/THERAPEUTIC WEDGE RESEXN INITIAL	X		X		X
32506	THORACOTOMY W/THERAP WEDGE RESEXN ADDL IPSILATRL	X		X		X
32507	THORACOTOMY W/DX WEDGE RESEXN &ANTOM LUNG RESEXN	X		X		X
32540	REMOVAL OF LUNG LESION	X		X		X
32550	INSERT PLEURAL CATH			X		X
32551	INSERTION OF CHEST TUBE		X	X		X
32552	REMOVE LUNG CATHETER			X		X
32553	INS MARK THOR FOR RT PERQ	X		X		
32554	ASPIRATE PLEURA W/O IMAGING		X	X		
32555	ASPIRATE PLEURA W/ IMAGING		X	X		
32556	INSERT CATH PLEURA W/O IMAGE		X	X		
32557	INSERT CATH PLEURA W/ IMAGE		X	X		
32560	TREAT LUNG LINING CHEMICALLY			X		X
32561	LYSE CHEST FIBRIN INIT DAY	X		X		
32562	LYSE CHEST FIBRIN SUBQ DAY	X		X		
32601	THORACOSCOPY, DIAGNOSTIC			X		
32604	THORACOSCOPY, DIAGNOSTIC			X		
32606	THORACOSCOPY, DIAGNOSTIC			X		
32607	THORACOSCOPY W/DX BX OF LUNG INFILTRATE UNILATRL			X		X
32608	THORACOSCOPY W/DX BX OF LUNG NODULES UNILATRL			X		X
32609	THORACOSCOPY WITH BIOPSYIES OF PLEURA			X		X
32650	THORACOSCOPY, SURGICAL	X	X	X		X
32651	THORACOSCOPY, SURGICAL	X	X	X		X
32652	THORACOSCOPY, SURGICAL	X	X	X		X
32653	THORACOSCOPY, SURGICAL	X		X		X
32654	THORACOSCOPY, SURGICAL	X	X	X		X
32655	THORACOSCOPY, SURGICAL	X		X		X
32656	THORACOSCOPY, SURGICAL	X	X	X		X
32658	THORACOSCOPY, SURGICAL	X		X		
32659	THORACOSCOPY, SURGICAL	X		X		
32661	THORACOSCOPY, SURGICAL	X		X		
32662	THORACOSCOPY, SURGICAL	X		X		
32663	THORACOSCOPY, SURGICAL	X		X		
32664	THORACOSCOPY, SURGICAL	X	X	X		X
32665	THORACOSCOPY, SURGICAL	X		X		
32666	THORACOSCOPY W/THERA WEDGE RESEXN INITIAL UNILAT	X		X		X
32667	THORACOSCOPY W/THERA WEDGE RESEXN ADDL IPSILATRL	X		X		X
32668	THORACOSCOPY W/DX WEDGE RESEXN ANATO LUNG RESEXN	X		X		X
32669	THORACOSCOPY W/SEGMENTECTOMY	X		X		X
32670	THORACOSCOPY W/BILOBECTOMY	X		X		X
32671	THORACOSCOPY W/PNEUMONECTOMY	X		X		X
32672	THORACOSCOPY W/RESEXN-PLICAJ EMPHYSEMA LUNG UNIL	X		X		X
32673	THORACOSCOPY RESEXN THYMUS UNI/BILATERAL	X		X		X
32674	THORACOSCOPY W/MEDIASTINL ®IONL LYMPHADENECTOMY	X		X		X

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
32800	REPAIR LUNG HERNIA	x		x		x
32810	CLOSE CHEST AFTER DRAINAGE	x		x		x
32815	CLOSE BRONCHIAL FISTULA	x		x		
32820	RECONSTRUCT INJURED CHEST	x		x		
32851	LUNG TRANSPLANT, SINGLE	x		x		
32852	LUNG TRANSPLANT WITH BYPASS	x		x		
32853	LUNG TRANSPLANT, DOUBLE	x		x		
32854	LUNG TRANSPLANT WITH BYPASS	x		x		
32855	PREPARE DONOR LUNG, SINGLE	x		x		
32856	PREPARE DONOR LUNG, DOUBLE	x		x		
32900	REMOVAL OF RIB(S)	x		x		
32905	REVISE & REPAIR CHEST WALL	x		x		x
32906	REVISE & REPAIR CHEST WALL	x		x		x
32940	REVISION OF LUNG	x		x		x
32960	THERAPEUTIC PNEUMOTHORAX			x		x
32997	TOTAL LUNG LAVAGE			x		x
32998	PERQ RF ABLATE TX, PUL TUMOR	x		x		x
32999	CHEST SURGERY PROCEDURE			x		
33010	DRAINAGE OF HEART SAC			x		
33011	REPEAT DRAINAGE OF HEART SAC			x		
33015	INCISION OF HEART SAC			x		
33020	INCISION OF HEART SAC	x		x		
33025	INCISION OF HEART SAC	x		x		
33030	PARTIAL REMOVAL OF HEART SAC	x		x		
33031	PARTIAL REMOVAL OF HEART SAC	x		x		
33050	REMOVAL OF HEART SAC LESION	x		x		
33120	REMOVAL OF HEART LESION	x		x		
33130	REMOVAL OF HEART LESION	x		x		
33140	HEART REVASCULARIZE (TMR)	x		x		
33141	HEART TMR W/OTHER PROCEDURE	x		x		
33202	INSERT EPICARD ELTRD, OPEN			x		
33203	INSERT EPICARD ELTRD, ENDO			x		
33206	INSERTION OF HEART PACEMAKER			x		
33207	INSERTION OF HEART PACEMAKER			x		
33208	INSERTION OF HEART PACEMAKER			x		
33210	INSERTION OF HEART ELECTRODE			x		
33211	INSERTION OF HEART ELECTRODE			x		
33212	INSERTION OF PULSE GENERATOR			x		
33213	INSERTION OF PULSE GENERATOR			x		
33214	UPGRADE OF PACEMAKER SYSTEM			x		
33215	REPOSITION PACING-DEFIB LEAD			x		
33216	INSERT LEAD PACE-DEFIB, ONE			x		
33217	INSERT LEAD PACE-DEFIB, DUAL			x		
33218	REPAIR LEAD PACE-DEFIB, ONE			x		
33220	REPAIR LEAD PACE-DEFIB, DUAL			x		
33221	INS PACEMAKER PULSE GEN ONLY W/EXIST MULT LEADS			x		
33222	REVISE POCKET, PACEMAKER			x		
33223	REVISE POCKET, PACING-DEFIB			x		
33224	INSERT PACING LEAD & CONNECT			x		
33225	L VENTRIC PACING LEAD ADD-ON			x		
33226	REPOSITION L VENTRIC LEAD			x		
33227	REMYL PERM PM PLSE GEN W/REPL PLSE GEN SNGL LEAD			x		
33228	REMYL & REPL C PM GEN DUAL LEAD			x		
33229	REMYL PERM PM PLS GEN W/REPL PLSE GEN 2 LEAD SYS			x		
33230	REMYL PERM PM PLS GEN W/REPL PLSE GEN MULT LEAD			x		
33231	INS PACNG CVDFB PLS GEN ONLY W/EXIST DUAL LEADS			x		
33233	INS PACNG CVDFB PLS GEN ONLY W/EXIST MULTI LEADS			x		
33234	REMOVAL OF PACEMAKER SYSTEM			x		
33235	REMOVAL PACEMAKER ELECTRODE			x		
33236	REMOVE ELECTRODE/THORACOTOMY			x		
33237	REMOVE ELECTRODE/THORACOTOMY			x		
33238	REMOVE ELECTRODE/THORACOTOMY			x		
33240	INSERT PULSE GENERATOR			x		
33241	REMOVE PULSE GENERATOR			x		
33243	REMOVE ELTRD/THORACOTOMY	x		x		
33244	REMOVE ELTRD, TRANSVEN			x		
33249	ELTRD/INSERT PACE-DEFIB			x		
33250	ABLATE HEART DYSRHYTHM FOCUS	x		x		
33251	ABLATE HEART DYSRHYTHM FOCUS	x		x		
33254	ABLATE ATRIA, LMTD	x		x		
33255	ABLATE ATRIA W/O BYPASS, EXT	x		x		
33256	ABLATE ATRIA W/BYPASS, EXTEN	x		x		
33257	ABLATE ATRIA, LMTD, ADD-ON	x		x		
33258	ABLATE ATRIA, X10SV, ADD-ON	x		x		
33259	ABLATE ATRIA W/BYPASS ADD-ON	x		x		
33261	ABLATE HEART DYSRHYTHM FOCUS	x		x		
33262	REM PAC CVDFB PLSE GEN &REPL PLSE GEN SNGL LEAD			x		
33263	REM PAC CVDFB PLSE GEN &REPL PLSE GEN DUAL LEAD			x		
33264	REM PAC CVDFB PLS GEN &REPL PLSE GEN MULTI LEAD			x		
33265	ABLATE ATRIA, LMTD, ENDO	x		x		
33266	ABLATE ATRIA, X10SV, ENDO	x		x		
33282	IMPLANT PAT-ACTIVE HT RECORD			x		
33284	REMOVE PAT-ACTIVE HT RECORD			x		
33300	REPAIR OF HEART WOUND	x		x		
33305	REPAIR OF HEART WOUND	x		x		
33310	EXPLORATORY HEART SURGERY	x		x		
33315	EXPLORATORY HEART SURGERY	x		x		
33320	REPAIR MAJOR BLOOD VESSEL(S)	x		x		
33321	REPAIR MAJOR VESSEL	x		x		
33322	REPAIR MAJOR BLOOD VESSEL(S)	x		x		
33330	INSERT MAJOR VESSEL GRAFT	x		x		
33332	INSERT MAJOR VESSEL GRAFT	x		x		
33335	INSERT MAJOR VESSEL GRAFT	x		x		
33361	REPLACE AORTIC VALVE PERO			x		
33362	REPLACE AORTIC VALVE OPEN			x		
33363	REPLACE AORTIC VALVE OPEN			x		
33364	REPLACE AORTIC VALVE OPEN			x		
33365	REPLACE AORTIC VALVE OPEN			x		
33366	REPLACE AORTIC VALVE OPEN TRANSAPICAL			x		
33400	REPAIR OF AORTIC VALVE	x		x		
33401	VALVULOPLASTY, OPEN	x		x		
33403	VALVULOPLASTY, W/CP BYPASS	x		x		
33404	PREPARE HEART-AORTA CONDUIT	x		x		
33405	REPLACEMENT OF AORTIC VALVE	x		x		
33406	REPLACEMENT OF AORTIC VALVE	x		x		
33410	REPLACEMENT OF AORTIC VALVE	x		x		

Covered Surgery Code	Description	Modifier				Left/Right (LT or RT)
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	
33411	REPLACEMENT OF AORTIC VALVE	x		x		
33412	REPLACEMENT OF AORTIC VALVE	x		x		
33413	REPLACEMENT OF AORTIC VALVE	x		x		
33414	REPAIR OF AORTIC VALVE	x		x		
33415	REVISION, SUBVALVULAR TISSUE	x		x		
33416	REVISE VENTRICLE MUSCLE	x		x		
33417	REPAIR OF AORTIC VALVE	x		x		
33420	REVISION OF MITRAL VALVE			x		
33422	REVISION OF MITRAL VALVE	x		x		
33425	REPAIR OF MITRAL VALVE	x		x		
33426	REPAIR OF MITRAL VALVE	x		x		
33427	REPAIR OF MITRAL VALVE	x		x		
33430	REPLACEMENT OF MITRAL VALVE	x		x		
33460	REVISION OF TRICUSPID VALVE	x		x		
33463	VALVULOPLASTY, TRICUSPID	x		x		
33464	VALVULOPLASTY, TRICUSPID	x		x		
33465	REPLACE TRICUSPID VALVE	x		x		
33468	REVISION OF TRICUSPID VALVE	x		x		
33470	REVISION OF PULMONARY VALVE	x		x		
33471	VALVOTOMY, PULMONARY VALVE	x		x		
33472	REVISION OF PULMONARY VALVE	x		x		
33474	REVISION OF PULMONARY VALVE	x		x		
33475	REPLACEMENT, PULMONARY VALVE	x		x		
33476	REVISION OF HEART CHAMBER	x		x		
33478	REVISION OF HEART CHAMBER	x		x		
33496	REPAIR, PROSTH VALVE CLOT	x		x		
33500	REPAIR HEART VESSEL FISTULA	x		x	x	
33501	REPAIR HEART VESSEL FISTULA	x		x	x	
33502	CORONARY ARTERY CORRECTION	x		x	x	
33503	CORONARY ARTERY GRAFT			x	x	
33504	CORONARY ARTERY GRAFT	x		x	x	
33505	REPAIR ARTERY W/TUNNEL	x		x	x	
33506	REPAIR ARTERY, TRANSLOCATION	x		x	x	
33507	REPAIR ART. INTRAMURAL	x		x	x	
33508	ENDOSCOPIC VEIN HARVEST	x		x		
33510	CABG, VEIN, SINGLE	x		x	x	
33511	CABG, VEIN, TWO	x		x	x	
33512	CABG, VEIN, THREE	x		x	x	
33513	CABG, VEIN, FOUR	x		x	x	
33514	CABG, VEIN, FIVE	x		x	x	
33516	CABG, VEIN, SIX OR MORE	x		x	x	
33517	CABG, ARTERY-VEIN, SINGLE	x		x		
33518	CABG, ARTERY-VEIN, TWO	x		x		
33519	CABG, ARTERY-VEIN, THREE	x		x		
33521	CABG, ARTERY-VEIN, FOUR	x		x		
33522	CABG, ARTERY-VEIN, FIVE	x		x		
33523	CABG, ARTERY-VEIN, SIX OR MORE	x		x		
33530	CORONARY ARTERY BYPASS/REOP	x		x		
33533	CABG, ARTERIAL, SINGLE	x		x	x	
33534	CABG, ARTERIAL, TWO	x		x	x	
33535	CABG, ARTERIAL, THREE	x		x	x	
33536	CABG, ARTERIAL, FOUR OR MORE	x		x	x	
33542	REMOVAL OF HEART LESION	x		x		
33545	REPAIR OF HEART DAMAGE	x		x		
33548	RESTORE/REMODEL, VENTRICLE	x		x		
33572	OPEN CORONARY ENDARTERECTOMY	x		x		
33600	CLOSURE OF VALVE	x		x		
33602	CLOSURE OF VALVE	x		x		
33606	ANASTOMOSIS/ARTERY-AORTA	x		x		
33608	REPAIR ANOMALY W/CONDUIT	x		x		
33610	REPAIR BY ENLARGEMENT	x		x		
33611	REPAIR DOUBLE VENTRICLE	x		x		
33612	REPAIR DOUBLE VENTRICLE	x		x		
33615	REPAIR, MODIFIED FONTAN	x		x		
33617	REPAIR SINGLE VENTRICLE	x		x		
33619	REPAIR SINGLE VENTRICLE	x		x		
33620	APPLICATION RIGHT & LEFT PULMONARY ARTERY BANDS	x		x		
33621	ITTHRC CATHETER INSERT FOR STENT PLACEMENT	x		x		
33622	RECONSTRUCTION COMPLEX CARDIAC ANOMALY	x		x		
33641	REPAIR HEART SEPTUM DEFECT	x		x		
33645	REVISION OF HEART VEINS	x		x		x
33647	REPAIR HEART SEPTUM DEFECTS	x		x		
33660	REPAIR OF HEART DEFECTS	x		x		
33665	REPAIR OF HEART DEFECTS	x		x		
33670	REPAIR OF HEART CHAMBERS	x		x		
33675	CLOSE MULT VSD	x		x		
33676	CLOSE MULT VSD W/RESECTION	x		x		
33677	CL MULT VSD W/REM PUL BAND	x		x		
33681	REPAIR HEART SEPTUM DEFECT	x		x		
33684	REPAIR HEART SEPTUM DEFECT	x		x		
33688	REPAIR HEART SEPTUM DEFECT	x		x		
33690	REINFORCE PULMONARY ARTERY	x		x		
33692	REPAIR OF HEART DEFECTS	x		x		
33694	REPAIR OF HEART DEFECTS	x		x		
33697	REPAIR OF HEART DEFECTS	x		x		
33702	REPAIR OF HEART DEFECTS	x		x		
33710	REPAIR OF HEART DEFECTS	x		x		
33720	REPAIR OF HEART DEFECT	x		x		
33722	REPAIR OF HEART DEFECT	x		x		
33724	REPAIR VENOUS ANOMALY	x		x		
33726	REPAIR PUL VENOUS STENOSIS	x		x		
33730	REPAIR HEART-VEIN DEFECT(S)	x		x		
33732	REPAIR HEART-VEIN DEFECT	x		x		
33735	REVISION OF HEART CHAMBER	x		x		
33736	REVISION OF HEART CHAMBER	x		x		
33737	REVISION OF HEART CHAMBER	x		x		
33750	MAJOR VESSEL SHUNT	x		x		
33755	MAJOR VESSEL SHUNT	x		x		
33762	MAJOR VESSEL SHUNT	x		x		
33764	MAJOR VESSEL SHUNT & GRAFT	x		x		
33766	MAJOR VESSEL SHUNT	x		x		
33767	MAJOR VESSEL SHUNT	x		x		
33768	CAVO PUL MONARY SHUNTING	x		x		
33770	REPAIR GREAT VESSELS DEFECT	x		x		
33771	REPAIR GREAT VESSELS DEFECT	x		x		
33774	REPAIR GREAT VESSELS DEFECT	x		x		

Covered Surgery Code	Description	Modifier				Site (e.g., E1-E4)	Left/Right (LT or RT)
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)			
33775	REPAIR GREAT VESSELS DEFECT	X		X			
33776	REPAIR GREAT VESSELS DEFECT	X		X			
33777	REPAIR GREAT VESSELS DEFECT	X		X			
33778	REPAIR GREAT VESSELS DEFECT	X		X			
33779	REPAIR GREAT VESSELS DEFECT	X		X			
33780	REPAIR GREAT VESSELS DEFECT	X		X			
33781	REPAIR GREAT VESSELS DEFECT	X		X			
33782	NIKAIDOH PROC	X		X			
33783	NIKAIDOH PROC W/OSTIA IMPLT	X		X			
33786	REPAIR ARTERIAL TRUNK	X		X			
33788	REVISION OF PULMONARY ARTERY	X		X			
33800	AORTIC SUSPENSION	X		X			
33802	REPAIR VESSEL DEFECT	X		X			
33803	REPAIR VESSEL DEFECT	X		X			
33813	REPAIR SEPTAL DEFECT	X		X			
33814	REPAIR SEPTAL DEFECT	X		X			
33820	REVISE MAJOR VESSEL	X		X			
33822	REVISE MAJOR VESSEL	X		X			
33824	REVISE MAJOR VESSEL	X		X			
33840	REMOVE AORTA CONSTRICTION	X		X			
33845	REMOVE AORTA CONSTRICTION	X		X			
33851	REMOVE AORTA CONSTRICTION	X		X			
33852	REPAIR SEPTAL DEFECT	X		X			
33853	REPAIR SEPTAL DEFECT	X		X			
33860	ASCENDING AORTIC GRAFT	X		X			
33863	ASCENDING AORTIC GRAFT	X		X			
33864	ASCENDING AORTIC GRAFT	X		X			
33870	TRANSVERSE AORTIC ARCH GRAFT	X		X			
33875	THORACIC AORTIC GRAFT	X		X			
33877	THORACOABDOMINAL GRAFT	X		X			
33880	ENDOVASC TAA REPR INCL SUBCL	X		X			
33881	ENDOVASC TAA REPR W/O SUBCL	X		X			
33883	INSERT ENDOVASC PROSTH. TAA	X		X			
33884	ENDOVASC PROSTH. TAA, ADD-ON	X					
33886	ENDOVASC PROSTH, DELAYED	X		X			X
33889	ARTERY TRANSPOSE/ENDOVAS TAA	X	X	X			X
33891	CAR-CAR BP GRFT/ENDOVAS TAA	X	X	X			X
33910	REMOVE LUNG ARTERY EMBOLI	X		X			X
33915	REMOVE LUNG ARTERY EMBOLI	X		X			X
33916	SURGERY OF GREAT VESSEL	X		X			X
33917	REPAIR PULMONARY ARTERY	X		X			X
33920	REPAIR PULMONARY ATRESIA	X		X			X
33922	TRANSECT PULMONARY ARTERY	X		X			X
33924	REMOVE PULMONARY SHUNT	X		X			X
33925	RPR PUL ART UNIFOCAL W/O CPB	X		X			X
33926	REPR PUL ART. UNIFOCAL W/CPB	X		X			X
33933	PREPARE DONOR HEART/LUNG	X		X			
33935	TRANSPLANTATION, HEART/LUNG	X		X			
33944	PREPARE DONOR HEART	X		X			
33945	TRANSPLANTATION OF HEART	X		X			
33960	EXTERNAL CIRCULATION ASSIST	X		X			
33967	INSERT IA PERCUT DEVICE			X			
33968	REMOVE AORTIC ASSIST DEVICE			X			
33970	AORTIC CIRCULATION ASSIST	X		X			
33971	AORTIC CIRCULATION ASSIST			X			
33973	INSERT BALLOON DEVICE	X		X			
33974	REMOVE INTRA-AORTIC BALLOON			X			
33975	IMPLANT VENTRICULAR DEVICE	X		X			
33976	IMPLANT VENTRICULAR DEVICE	X		X			
33977	REMOVE VENTRICULAR DEVICE	X		X			
33978	REMOVE VENTRICULAR DEVICE	X		X			
33979	INSERT INTRACORPOREAL DEVICE	X		X			
33980	REMOVE INTRACORPOREAL DEVICE	X		X			
33981	REPLACE VAD PUMP EXT	X		X			
33982	REPLACE VAD INTRA W/O BP	X		X			
33983	REPLACE VAD INTRA W/BP	X		X			
33990	INSERT VAD ARTERY ACCESS	X		X			
33991	INSERT VAD ART & VEIN ACCESS	X		X			
33992	REMOVE VAD DIFFERENT SESSION	X		X			
33993	REPOSITION VAD DIFF SESSION	X		X			
33999	CARDIAC SURGERY PROCEDURE	X		X			
34001	REMOVAL OF ARTERY CLOT	X	X	X			X
34051	REMOVAL OF ARTERY CLOT	X	X	X			X
34101	REMOVAL OF ARTERY CLOT	X	X	X			X
34111	REMOVAL OF ARM ARTERY CLOT	X	X	X			X
34151	REMOVAL OF ARTERY CLOT	X	X	X			X
34201	REMOVAL OF ARTERY CLOT	X	X	X			X
34203	REMOVAL OF LEG ARTERY CLOT	X	X	X			X
34401	REMOVAL OF VEIN CLOT	X	X	X			X
34421	REMOVAL OF VEIN CLOT	X	X	X			X
34451	REMOVAL OF VEIN CLOT	X	X	X			X
34471	REMOVAL OF VEIN CLOT		X	X			X
34490	REMOVAL OF VEIN CLOT		X	X			X
34501	REPAIR VALVE, FEMORAL VEIN	X	X	X			X
34502	RECONSTRUCT VENA CAVA	X		X			
34510	TRANSPOSITION OF VEIN VALVE	X	X	X			X
34520	CROSS-OVER VEIN GRAFT	X	X	X			X
34530	LEG VEIN FUSION	X	X	X			X
34800	ENDOVAS AAA REPR W/SM TUBE	X		X			
34802	ENDOVAS AAA REPR W/2-P PART	X		X			
34803	ENDOVAS AAA REPR W/3-P PART	X		X			
34804	ENDOVAS AAA REPR W/1-P PART	X		X			
34805	ENDOVAS AAA REPR W/LONG TUBE	X		X			
34806	ANEURYSM PRESS SENSOR ADD-ON	X					
34808	ENDOVAS ILIAC A DEVICE ADD-ON	X					
34812	XPOSE FOR ENDOPROSTH. FEMORL	X	X	X			X
34813	FEMORAL ENDOVAS GRAFT ADD-ON	X		X			
34820	XPOSE FOR ENDOPROSTH. ILIAC		X	X			X
34825	ENDOVASC EXTEND PROSTH. INIT	X		X			
34826	ENDOVASC EXTEN PROSTH. ADD-H	X		X			X
34830	OPEN AORTIC TUBE PROSTH REPR	X		X			
34831	OPEN AORTOILIAC PROSTH REPR	X		X			
34832	OPEN AORTOFEMOR PROSTH REPR	X		X			
34833	XPOSE FOR ENDOPROSTH. ILIAC	X	X	X			X
34834	XPOSE, ENDOPROSTH. BRACHIAL	X	X	X			X
34900	ENDOVASC ILIAC REPR W/GRAFT	X	X	X			X

Covered Surgery Code	Description	Modifier				Site (e.g., E1-E4)	Left/Right (LT or RT)
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)			
35001	REPAIR DEFECT OF ARTERY	x		x			x
35002	REPAIR ARTERY RUPTURE, NECK	x	x	x			x
35005	REPAIR DEFECT OF ARTERY	x	x	x			x
35011	REPAIR DEFECT OF ARTERY	x	x	x			x
35013	REPAIR ARTERY RUPTURE, ARM	x	x	x			x
35021	REPAIR DEFECT OF ARTERY	x	x				x
35022	REPAIR ARTERY RUPTURE, CHEST	x	x	x			x
35045	REPAIR DEFECT OF ARM ARTERY	x	x	x			x
35081	REPAIR DEFECT OF ARTERY	x		x			
35082	REPAIR ARTERY RUPTURE, AORTA	x		x			
35091	REPAIR DEFECT OF ARTERY	x	x	x			
35092	REPAIR ARTERY RUPTURE, AORTA	x	x	x			
35102	REPAIR DEFECT OF ARTERY	x	x	x			
35103	REPAIR ARTERY RUPTURE, GROIN	x	x	x			
35111	REPAIR DEFECT OF ARTERY	x	x	x			
35112	REPAIR ARTERY RUPTURE, SPLEEN	x	x	x			
35121	REPAIR DEFECT OF ARTERY	x	x	x			x
35122	REPAIR ARTERY RUPTURE, BELLY	x	x	x			x
35131	REPAIR DEFECT OF ARTERY	x	x	x			x
35132	REPAIR ARTERY RUPTURE, GROIN	x	x	x			x
35141	REPAIR DEFECT OF ARTERY	x	x	x			x
35142	REPAIR ARTERY RUPTURE, THIGH	x	x	x			x
35151	REPAIR DEFECT OF ARTERY	x	x	x			x
35152	REPAIR ARTERY RUPTURE, KNEE	x	x	x			x
35180	REPAIR BLOOD VESSEL LESION	x		x			
35182	REPAIR BLOOD VESSEL LESION	x		x			
35184	REPAIR BLOOD VESSEL LESION	x		x			x
35188	REPAIR BLOOD VESSEL LESION	x		x			
35189	REPAIR BLOOD VESSEL LESION	x		x			
35190	REPAIR BLOOD VESSEL LESION	x		x			x
35201	REPAIR BLOOD VESSEL LESION	x	x	x			x
35206	REPAIR BLOOD VESSEL LESION	x	x	x			x
35207	REPAIR BLOOD VESSEL LESION		x	x	x		x
35211	REPAIR BLOOD VESSEL LESION	x	x	x		x	x
35216	REPAIR BLOOD VESSEL LESION	x	x	x			x
35221	REPAIR BLOOD VESSEL LESION	x	x	x			x
35226	REPAIR BLOOD VESSEL LESION	x	x	x			x
35231	REPAIR BLOOD VESSEL LESION	x	x	x			x
35236	REPAIR BLOOD VESSEL LESION	x	x	x			x
35241	REPAIR BLOOD VESSEL LESION	x	x	x			x
35246	REPAIR BLOOD VESSEL LESION	x	x	x			x
35251	REPAIR BLOOD VESSEL LESION	x	x	x			x
35256	REPAIR BLOOD VESSEL LESION	x	x	x			x
35261	REPAIR BLOOD VESSEL LESION	x	x	x			x
35266	REPAIR BLOOD VESSEL LESION	x	x	x			x
35271	REPAIR BLOOD VESSEL LESION	x	x	x			x
35276	REPAIR BLOOD VESSEL LESION	x	x	x			x
35281	REPAIR BLOOD VESSEL LESION	x	x	x			x
35286	REPAIR BLOOD VESSEL LESION	x	x	x			x
35301	RECHANNELING OF ARTERY	x	x	x			x
35302	RECHANNELING OF ARTERY	x	x	x			x
35303	RECHANNELING OF ARTERY	x	x	x			x
35304	RECHANNELING OF ARTERY	x	x	x			x
35305	RECHANNELING OF ARTERY	x	x	x			x
35306	RECHANNELING OF ARTERY	x		x			x
35311	RECHANNELING OF ARTERY	x	x	x			x
35321	RECHANNELING OF ARTERY	x	x	x			x
35331	RECHANNELING OF ARTERY	x	x	x			x
35341	RECHANNELING OF ARTERY	x	x	x			x
35351	RECHANNELING OF ARTERY	x	x	x			x
35355	RECHANNELING OF ARTERY	x	x	x			x
35361	RECHANNELING OF ARTERY	x	x	x			x
35363	RECHANNELING OF ARTERY	x	x	x			x
35371	RECHANNELING OF ARTERY	x	x	x			x
35372	RECHANNELING OF ARTERY	x	x	x			x
35390	REOPERATION, CAROTID ADD-ON	x		x			x
35450	REPAIR ARTERIAL BLOCKAGE	x	x	x			x
35452	REPAIR ARTERIAL BLOCKAGE	x	x	x			
35458	REPAIR ARTERIAL BLOCKAGE	x	x	x			x
35460	REPAIR VENOUS BLOCKAGE		x	x			x
35471	REPAIR ARTERIAL BLOCKAGE		x	x			x
35472	REPAIR ARTERIAL BLOCKAGE		x	x			
35475	REPAIR ARTERIAL BLOCKAGE			x			x
35476	REPAIR VENOUS BLOCKAGE		x	x			x
35500	HARVEST VEIN FOR BYPASS	x		x			
35501	ARTERY BYPASS GRAFT	x	x	x			x
35506	ARTERY BYPASS GRAFT	x	x	x			x
35508	ARTERY BYPASS GRAFT	x	x	x			x
35509	ARTERY BYPASS GRAFT	x	x	x			x
35510	ARTERY BYPASS GRAFT	x	x	x			x
35511	ARTERY BYPASS GRAFT	x	x	x			
35512	ARTERY BYPASS GRAFT	x	x	x			x
35515	ARTERY BYPASS GRAFT	x	x	x			x
35516	ARTERY BYPASS GRAFT	x	x	x			x
35518	ARTERY BYPASS GRAFT	x	x	x			
35521	ARTERY BYPASS GRAFT	x	x	x			x
35522	ARTERY BYPASS GRAFT	x	x	x			x
35523	ARTERY BYPASS GRAFT	x	x	x			x
35525	ARTERY BYPASS GRAFT	x	x	x			x
35526	ARTERY BYPASS GRAFT	x	x	x			x
35531	ARTERY BYPASS GRAFT	x	x	x			x
35533	ARTERY BYPASS GRAFT	x	x	x			
35535	ARTERY BYPASS GRAFT	x	x	x			x
35536	ARTERY BYPASS GRAFT	x	x	x			x
35537	ARTERY BYPASS GRAFT	x		x			
35538	ARTERY BYPASS GRAFT	x		x			
35539	ARTERY BYPASS GRAFT	x		x			
35540	ARTERY BYPASS GRAFT		x	x			
35556	ARTERY BYPASS GRAFT		x	x			
35558	ARTERY BYPASS GRAFT	x	x	x			x
35560	ARTERY BYPASS GRAFT	x	x	x			x
35563	ARTERY BYPASS GRAFT	x	x	x			x
35565	ARTERY BYPASS GRAFT	x	x	x			x
35566	ARTERY BYPASS GRAFT	x	x	x			x
35570	ARTERY BYPASS GRAFT	x	x	x			x
35571	ARTERY BYPASS GRAFT	x	x	x			x

Covered Surgery Code	Description	Modifier				Site (e.g., E1-E4)	Left/Right (LT or RT)
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)			
35572	HARVEST FEMOROPLOPLITEAL VEIN	x					x
35583	VEIN BYPASS GRAFT	x	x	x			x
35585	VEIN BYPASS GRAFT	x	x	x			x
35587	VEIN BYPASS GRAFT	x	x	x			x
35600	HARVEST ART FOR CABG ADD-ON	x		x			x
35601	ARTERY BYPASS GRAFT	x	x	x			x
35606	ARTERY BYPASS GRAFT	x	x	x			x
35612	ARTERY BYPASS GRAFT	x	x	x			
35616	ARTERY BYPASS GRAFT	x	x	x			x
35621	ARTERY BYPASS GRAFT	x	x	x			x
35623	BYPASS GRAFT, NOT VEIN	x	x	x			x
35626	ARTERY BYPASS GRAFT	x	x	x			x
35631	ARTERY BYPASS GRAFT	x	x	x			x
35632	ARTERY BYPASS GRAFT	x	x	x			x
35633	ARTERY BYPASS GRAFT	x	x	x			x
35634	ARTERY BYPASS GRAFT	x	x	x			x
35636	ARTERY BYPASS GRAFT	x	x	x			x
35637	ARTERY BYPASS GRAFT	x		x			
35638	ARTERY BYPASS GRAFT	x		x			
35642	ARTERY BYPASS GRAFT	x	x	x			x
35645	ARTERY BYPASS GRAFT	x	x	x			x
35646	ARTERY BYPASS GRAFT	x		x			
35647	ARTERY BYPASS GRAFT	x	x	x			
35650	ARTERY BYPASS GRAFT	x	x	x			
35654	ARTERY BYPASS GRAFT	x		x			
35656	ARTERY BYPASS GRAFT	x	x	x			x
35661	ARTERY BYPASS GRAFT	x	x	x			
35663	ARTERY BYPASS GRAFT	x	x	x			x
35665	ARTERY BYPASS GRAFT	x	x	x			x
35666	ARTERY BYPASS GRAFT	x	x	x			x
35671	ARTERY BYPASS GRAFT	x	x	x			x
35685	BYPASS GRAFT PATENCY/PATCH	x		x			x
35686	BYPASS GRAFT/AV FIST PATENCY	x		x			x
35691	ARTERIAL TRANSPOSITION	x	x	x			x
35693	ARTERIAL TRANSPOSITION	x	x	x			x
35694	ARTERIAL TRANSPOSITION	x	x	x			x
35695	ARTERIAL TRANSPOSITION	x	x	x			x
35697	REIMPLANT V ART TO IA PROSTHESIS EA ART	x		x			
35700	REOPERATION, BYPASS GRAFT	x		x			x
35701	EXPLORATION, CAROTID ARTERY	x	x	x			x
35721	EXPLORATION, FEMORAL ARTERY	x	x	x			x
35741	EXPLORATION, POPLITEAL ARTERY	x	x	x			x
35761	EXPLORATION OF ARTERY/VEIN	x	x	x			x
35800	EXPLORE NECK VESSELS	x		x			
35820	EXPLORE CHEST VESSELS	x		x			
35840	EXPLORE ABDOMINAL VESSELS	x		x			
35860	EXPLORE LIMB VESSELS	x		x			x
35870	REPAIR VESSEL GRAFT DEFECT	x		x			
35875	REMOVAL OF CLOT IN GRAFT			x			
35876	REMOVAL OF CLOT IN GRAFT	x		x			
35879	REVISE GRAFT W/VEIN	x	x				x
35881	REVISE GRAFT W/VEIN	x	x	x			x
35883	REVISE GRAFT W/NONAUTO GRAFT	x	x	x			x
35884	REVISE GRAFT W/VEIN	x	x	x			x
35901	EXCISION, GRAFT, NECK	x		x			
35903	EXCISION, GRAFT, EXTREMITY	x		x			x
35905	EXCISION, GRAFT, THORAX	x		x			
35907	EXCISION, GRAFT, ABDOMEN	x		x			
36000	PLACE NEEDLE IN VEIN		x	x			x
36002	PSEUDOANEURYSM INJECTION TRT		x	x			x
36005	INJECTION EXT VENOGRAPHY		x	x			x
36010	PLACE CATHETER IN VEIN		x	x			
36011	PLACE CATHETER IN VEIN		x	x			x
36012	PLACE CATHETER IN VEIN		x	x			x
36013	PLACE CATHETER IN ARTERY			x			
36014	PLACE CATHETER IN ARTERY		x	x			x
36015	PLACE CATHETER IN ARTERY		x	x			x
36100	ESTABLISH ACCESS TO ARTERY		x	x			x
36120	ESTABLISH ACCESS TO ARTERY			x			x
36140	ESTABLISH ACCESS TO ARTERY			x			
36147	ACCESS AV DIAL GRFT FOR EVAL	x		x			
36148	ACCESS AV DIAL GRFT FOR PROC	x		x			
36160	ESTABLISH ACCESS TO AORTA			x			
36200	PLACE CATHETER IN AORTA		x	x			x
36215	PLACE CATHETER IN ARTERY			x			
36216	PLACE CATHETER IN ARTERY			x			
36217	PLACE CATHETER IN ARTERY			x			
36221	PLACE CATH THORACIC AORTA			x			
36222	PLACE CATH CAROTID/INOM ART			x			
36223	PLACE CATH CAROTID/INOM ART			x			
36224	PLACE CATH CAROTID ART			x			
36225	PLACE CATH SUBCLAVIAN ART			x			
36226	PLACE CATH VERTEBRAL ART			x			
36245	PLACE CATHETER IN ARTERY		x	x			
36246	PLACE CATHETER IN ARTERY		x	x			x
36247	PLACE CATHETER IN ARTERY		x	x			x
36248	ADD SECOND/THIRD ABD/PELVIC/LOWER EXTREM			x			
36251	SLCTV CATH 1STORD W/VO ART PUNCT/FLUORO/S&I UNI			x			
36252	SLCTV CATH 1STORD W/VO ART PUNCT/FLUORO/S&I BILAT			x			
36253	SUPSLCTV CATH 2ND-ORD RENL&ACCES ARTERY/S&I UNI			x			
36254	SUPSLCTV CATH 2ND-ORD RENL&ACCES ARTERY/S&I BILAT			x			
36260	INSERTION OF INFUSION PUMP			x			
36261	REVISION OF INFUSION PUMP	x		x			
36262	REMOVAL OF INFUSION PUMP			x			
36295	VESSEL INJECTION PROCEDURE			x			
36400	BL DRAW < 3 YRS FEM/IGULAR			x			
36405	BL DRAW < 3 YRS SCALP VEIN			x			
36406	BL DRAW < 3 YRS OTHER VEIN			x			
36410	NON-ROUTINE BL DRAW > 3 YRS			x			
36415	ROUTINE VENIPUNCTURE/CAPILLARY SPEC COLL			x			
36416	CAPILLARY BLOOD DRAW			x			
36420	VEIN ACCESS CUTDOWN < 1 YR			x			
36425	VEIN ACCESS CUTDOWN > 1 YR			x			
36430	TRANSFUSION BLOOD OR BLOOD PRODUCTS			x			
36440	BL PUSH TRANSFUSE, 2 YR OR <			x			
36450	BL EXCHANGE/TRANSFUSE, NB			x			

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
36455	BL EXCHANGE/TRANSFUSE NON-NB			X		
36460	TRANSFUSION SERVICE, FETAL	X		X		
36470	INJECTION THERAPY OF VEIN		X	X		X
36471	INJECTION THERAPY OF VEINS		X	X		X
36475	ENDOVENOUS RF, 1ST VEIN		X	X		X
36476	ENDOVENOUS RF, VEIN ADD-ON		X	X		X
36478	ENDOVENOUS LASER, 1ST VEIN		X	X		X
36479	ENDOVENOUS LASER VEIN ADDON		X	X		X
36481	INSERTION OF CATHETER, VEIN			X		
36500	INSERTION OF CATHETER, VEIN			X		
36510	INSERTION OF CATHETER, VEIN			X		
36511	APHERESIS WBC			X		
36512	APHERESIS RBC			X		
36513	APHERESIS PLATELETS			X		
36514	APHERESIS PLASMA			X		
36515	APHERESIS, ADSORP/REINFUSE			X		
36516	APHERESIS, SELECTIVE			X		
36522	PHOTOPHERESIS			X		
36557	INSERT TUNNELED CV CATH		X	X		X
36558	INSERT TUNNELED CV CATH		X	X		X
36560	INSERT TUNNELED CV CATH		X	X		X
36561	INSERT TUNNELED CV CATH		X	X		X
36563	INSERT TUNNELED CV CATH			X		
36565	INSERT TUNNELED CV CATH		X	X		X
36566	INSERT TUNNELED CV CATH		X	X		X
36568	INSERT PERIF VEN CATH W/O SQ PRT/PMP<5YR			X		
36569	INSERT PERIF VEN CATH W/O SQ PRT/PMP>5YR			X		
36570	INSERT PICVAD CATH		X	X		X
36571	INSERT PICVAD CATH		X	X		X
36575	REPAIR TUNNELED CV CATH			X		X
36576	REPAIR TUNNELED CV CATH			X		X
36578	REPLACE TUNNELED CV CATH			X		X
36580	REPLACE CVAD CATH			X		X
36581	REPLACE TUNNELED CV CATH			X		X
36582	REPLACE TUNNELED CV CATH			X		X
36583	REPLACE TUNNELED CV CATH			X		X
36584	REPLACE PICC CATH			X		X
36585	REPLACE PICVAD CATH			X		X
36589	REMOVAL TUNNELED CV CATH			X		
36590	REMOVAL TUNNELED CV CATH			X		X
36591	COLLECTION OF BLOOD, VENOUS ACC, DEV.			X		
36592	COLLECTION OF BLOOD, CNTRL PERIPH. CATH.			X		
36593	DECLOTTING THROMBOLYTIC AGENT, VASCULAR			X		
36595	MECH REMOV TUNNELED CV CATH			X		
36596	MECH REMOV TUNNELED CV CATH			X		
36597	REPOSITION VENOUS CATHETER			X		
36598	INJ W/FLUOR, EVAL CV DEVICE		X	X		X
36600	WITHDRAWAL OF ARTERIAL BLOOD			X		
36620	ARTER CATH/CANUL, SAMP, MONITOR, TRANSFUSE			X		
36625	ARTERIAL CUTDOWN, SAMP, MONITOR, TRANSFUSE			X		
36640	INSERTION CATHETER, ARTERY			X		
36660	INSERTION CATHETER, ARTERY			X		
36680	INSERT NEEDLE, BONE CAVITY			X		
36800	INSERTION OF CANNULA			X		
36810	INSERTION OF CANNULA			X		
36815	INSERTION OF CANNULA			X		
36818	AV FUSE, UPPR ARM, CEPHALIC	X		X		X
36819	AV FUSE, UPPR ARM, BASILIC	X		X		X
36820	AV FUSION/FOREARM VEIN	X	X	X		X
36821	AV FUSION DIRECT ANY SITE	X		X		X
36822	INSERTION OF CANNULA(S)			X		
36823	INSERTION OF CANNULA(S)			X		
36825	ARTERY-VEIN AUTOGRAFT	X		X		X
36830	ARTERY-VEIN NONAUTOGRAFT	X		X		X
36831	OPEN THROMBECT AV FISTULA	X		X		X
36832	AV FISTULA REVISION, OPEN	X		X		X
36833	AV FISTULA REVISION	X		X		X
36835	ARTERY TO VEIN SHUNT			X		X
36838	DIST REVAS LIGATION, HEMO	X	X	X		X
36860	EXTERNAL CANNULA DECLOTTING			X		
36861	CANNULA DECLOTTING			X		
36870	PERCUT THROMBECT AV FISTULA		X	X		X
37140	REVISION OF CIRCULATION			X		
37145	REVISION OF CIRCULATION	X		X		
37160	REVISION OF CIRCULATION	X		X		
37180	REVISION OF CIRCULATION	X		X		
37181	SPLICE SPLEEN/KIDNEY VEINS	X		X		
37182	INSERT HEPATIC SHUNT (TIPS)			X		
37183	REMOVE HEPATIC SHUNT (TIPS)			X		
37184	PRIM ART MECH THROMBECTOMY		X	X		X
37185	PRIM ART M-THROMBECT ADD-ON			X		
37186	SEC ART M-THROMBECT ADD-ON			X		
37187	VENOUS MECH THROMBECTOMY		X	X		X
37188	VENOUS M-THROMBECTOMY ADD-ON		X	X		X
37191	INS INTRVAS VC FILTR W/WO VAS ACS VSL SELXN RS&I			X		
37192	REPSNG INTRVAS VC FILTR W/WO ACS VSL SELXN RS&I			X		
37193	RTRVL INTRVAS VC FILTR W/WO ACS VSL SELXN RS&I			X		
37195	THROMBOLYTIC THERAPY, STROKE			X		
37197	REMOVE INTRVAS FOREIGN BODY			X		
37200	TRANSCATHETER BIOPSY			X		
37202	TRANSCATHETER THERAPY INFUSE			X		
37204	TRANSCATHETER OCCLUSION			X		
37206	TRANSCATH IV STENT, PERCUT			X		
37206	TRANSCATH IV STENT/PERC ADDL			X		
37207	TRANSCATH IV STENT, OPEN	X	X	X		X
37208	TRANSCATH IV STENT/OPEN ADDL	X		X		
37210	EMBOLIZATION, UTERINE FIBROID			X		
37211	THROMBOLYTIC ART THERAPY			X		
37212	THROMBOLYTIC VENOUS THERAPY			X		
37213	THROMBLYTIC ART/VEIN THERAPY			X		
37214	CESSJ THERAPY CATH REMOVAL			X		
37215	TRANSCATH STENT, CCA W/EPS		X	X		X
37216	TRANSCATH STENT, CCA W/O EPS		X	X		
37217	TRANSCATH STENT, CCA OR IA OPEN ICCA		X	X		X
37220	REVASCLARIZATION ILIAC ARTERY ANGIOP 1ST VSL		X	X		X
37221	REVSC OPN/PRO ILIAC ART W/STNT PLMT & ANGIOP UNI		X	X		X

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
37222	REVASCLARIZATION ILIAC ART ANGIOP EA IPSI VSL		X	X		X
37223	REVSC OPN/PRQ ILIAC ART W/STNT & ANGIOP IPSI VSL		X	X		X
37224	REVSC OPN/PRG FEM/POP W/ANGIOPLASTY UNI		X	X		X
37225	REVSC OPN/PRQ FEM/POP W/ATHRC/ANGIOP SM VSL		X	X		X
37226	REVSC OPN/PRQ FEM/POP W/STNT/ANGIOP SM VSL		X	X		X
37227	REVSC OPN/PRQ FEM/POP W/STNT/ATHRC/ANGIOP SM VSL		X	X		X
37228	REVSC OPN/PRQ TIB/PERO W/ANGIOPLASTY UNI		X	X		X
37229	REVSC OPN/PRQ TIB/PERO W/ATHRC/ANGIOP SM VSL		X	X		X
37230	REVSC OPN/PRQ TIB/PERO W/STNT/ANGIOP SM VSL		X	X		X
37231	REVSC OPN/PRQ TIB/PERO W/STNT/ATHR/ANGIOP SM VSL		X	X		X
37232	REVSC OPN/PRO TIB/PERO W/ANGIOPLASTY UNI EA VSL		X	X		X
37233	REVSC OPN/PRO TIB/PERO W/ATHRC/ANGIOP UNI EA VSL		X	X		X
37234	REVSC OPN/PRO TIB/PERO W/STNT/ANGIOP UNI EA VSL		X	X		X
37235	REVSC OPN/PRO TIB/PERO W/STNT/ATHR/ANGIOP EA VSL		X	X		X
37236	TRANSCATH STENT, OP OR PERQ INITIAL ART		X	X		X
37237	TRANSCATH STENT, OPEN OR PERQ EA ADDL		X			X
37238	TRANSCATH STENT, OP OR PERQ INITIAL VEIN		X	X		X
37239	TRANSCATH STENT, OPEN OR PERQ EA ADDL		X			X
37241	VASC EMBOL OR OCC VENOUS			X		X
37242	VASC EMBOL OR OCC ARTERIAL			X		X
37243	VASC EMBOL TUMORS, ORGAN ISCHEMIA			X		X
37244	VASC EMBOL ARTERIAL OR VENOUS HEMORR			X		X
37500	ENDOSCOPY LIGATE PERF VEINS		X	X		X
37501	VASCULAR ENDOSCOPY PROCEDURE		X	X		
37565	LIGATION OF NECK VEIN		X	X		
37600	LIGATION OF NECK ARTERY	X		X		
37605	LIGATION OF NECK ARTERY	X		X		
37606	LIGATION OF NECK ARTERY	X		X		
37607	LIGATION OF A-V FISTULA			X		
37609	TEMPORAL ARTERY PROCEDURE	X	X	X		X
37615	LIGATION OF NECK ARTERY	X		X		X
37616	LIGATION OF CHEST ARTERY	X		X		
37617	LIGATION OF ABDOMEN ARTERY	X		X		
37618	LIGATION OF EXTREMITY ARTERY	X		X		X
37619	INS INTRVAS VC FILTR W/WO VAS ACS VSL SELXN RS&I	X		X		
37650	REVISION OF MAJOR VEIN		X	X		X
37660	REVISION OF MAJOR VEIN	X	X	X		X
37700	REVISE LEG VEIN		X	X		X
37718	LIGATE/STRIP SHORT LEG VEIN		X	X		X
37722	LIGATE/STRIP LONG LEG VEIN		X	X		X
37735	REMOVAL OF LEG VEINS/LESION		X	X		X
37760	LIGATION, LEG VEINS, OPEN		X	X		X
37761	LIGATE LEG VEINS OPEN	X	X	X		X
37765	PHLEB VEINS - EXTREM - TO 20		X	X		X
37766	PHLEB VEINS - EXTREM 20+		X	X		X
37780	REVISION OF LEG VEIN		X	X		X
37785	LIGATE/DIVIDE/EXCISE VEIN		X	X		X
37788	REVASCLARIZATION, PENIS	X		X		
37790	PENILE VENOUS OCCLUSION			X		
37799	VASCULAR SURGERY PROCEDURE			X		
38100	REMOVAL OF SPLEEN, TOTAL	X		X		
38101	REMOVAL OF SPLEEN, PARTIAL	X		X		
38102	REMOVAL OF SPLEEN, TOTAL	X		X		
38115	REPAIR OF RUPTURED SPLEEN	X		X		
38120	LAPAROSCOPY, SPLENECTOMY	X		X		
38129	LAPAROSCOPE PROC, SPLEEN	X		X		
38200	INJECTION FOR SPLEEN X-RAY			X		
38205	HARVEST ALLOGENIC STEM CELLS			X		
38206	HARVEST AUTO STEM CELLS			X		
38220	BONE MARROW ASPIRATION		X	X		X
38221	BONE MARROW BIOPSY		X	X		X
38230	BONE MARROW COLLECTION			X		
38232	BONE MARROW HARVEST TRANSPLANTATION AUTOLOGOUS			X		
38240	BONE MARROW/STEM TRANSPLANT			X		
38241	BONE MARROW/STEM TRANSPLANT			X		
38242	LYMPHOCYTE INFUSE TRANSPLANT			X		
38243	TRANSPLJ HEMATOPOIETIC BOOST			X		
38300	DRAINAGE, LYMPH NODE LESION			X		
38305	DRAINAGE, LYMPH NODE LESION			X		
38308	INCISION OF LYMPH CHANNELS	X		X		
38380	THORACIC DUCT PROCEDURE	X		X		
38381	THORACIC DUCT PROCEDURE	X		X		
38382	THORACIC DUCT PROCEDURE	X		X		
38500	BIOPSY/REMOVAL, LYMPH NODES		X	X		X
38505	NEEDLE BIOPSY, LYMPH NODES		X	X		X
38510	BIOPSY/REMOVAL, LYMPH NODES		X	X		X
38520	BIOPSY/REMOVAL, LYMPH NODES		X	X		X
38525	BIOPSY/REMOVAL, LYMPH NODES		X	X		X
38530	BIOPSY/REMOVAL, LYMPH NODES	X	X	X		X
38542	EXPLORE DEEP NODE(S), NECK	X	X	X		X
38550	REMOVAL, NECK/ARMPIT LESION			X		X
38555	REMOVAL, NECK/ARMPIT LESION	X		X		X
38562	REMOVAL, PELVIC LYMPH NODES	X		X		
38564	REMOVAL, ABDOMEN LYMPH NODES	X		X		
38570	LAPAROSCOPY, LYMPH NODE BIOP	X		X		
38571	LAPAROSCOPY, LYMPHADENECTOMY	X		X		
38572	LAPAROSCOPY, LYMPHADENECTOMY	X		X		
38589	LAPAROSCOPE PROC LYMPHATIC	X	X	X		
38700	REMOVAL OF LYMPH NODES, NECK	X	X	X		X
38720	REMOVAL OF LYMPH NODES, NECK	X	X	X		X
38724	REMOVAL OF LYMPH NODES, NECK	X	X	X		X
38740	REMOVE ARMPIT LYMPH NODES	X	X	X		X
38745	REMOVE ARMPIT LYMPH NODES	X	X	X		X
38746	REMOVE THORACIC LYMPH NODES	X		X		
38747	REMOVE ABDOMINAL LYMPH NODES	X		X		
38760	REMOVE GROIN LYMPH NODES	X	X	X		X
38765	REMOVE GROIN LYMPH NODES	X	X	X		X
38770	REMOVE PELVIS LYMPH NODES	X	X	X		X
38780	REMOVE ABDOMEN LYMPH NODES	X		X		X
38790	INJECT FOR LYMPHATIC X-RAY		X	X		X
38792	IDENTIFY SENTINEL NODE		X	X		X
38794	ACCESS THORACIC LYMPH DUCT			X		
38900	INTRAOP SENTINEL LYMPH ID W/DYE NJX	X	X	X		X
38999	BLOOD/LYMPH SYSTEM PROCEDURE			X		
39000	EXPLORATION OF CHEST	X		X		
39010	EXPLORATION OF CHEST	X		X		

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
39200	REMOVAL CHEST LESION	x		x		
39220	REMOVAL CHEST LESION	x		x		
39400	VISUALIZATION OF CHEST			x		
39499	CHEST PROCEDURE	x		x		
39501	REPAIR DIAPHRAGM LACERATION	x		x		
39503	REPAIR OF DIAPHRAGM HERNIA	x		x		
39540	REPAIR OF DIAPHRAGM HERNIA	x		x		
39541	REPAIR OF DIAPHRAGM HERNIA	x		x		
39545	REVISION OF DIAPHRAGM	x		x		
39560	RESECT DIAPHRAGM, SIMPLE	x		x		
39561	RESECT DIAPHRAGM, COMPLEX	x		x		
39599	DIAPHRAGM SURGERY PROCEDURE	x		x		
40490	BIOPSY OF LIP			x		
40500	PARTIAL EXCISION OF LIP			x		
40510	PARTIAL EXCISION OF LIP			x		
40520	PARTIAL EXCISION OF LIP			x		
40525	RECONSTRUCT LIP WITH FLAP			x		
40527	RECONSTRUCT LIP WITH FLAP			x		
40530	PARTIAL REMOVAL OF LIP			x		
40650	REPAIR LIP			x		
40652	REPAIR LIP			x		
40654	REPAIR LIP			x		
40700	REPAIR CLEFT LIP/NASAL			x		
40701	REPAIR CLEFT LIP/NASAL	x		x		
40702	REPAIR CLEFT LIP/NASAL	x		x		
40720	REPAIR CLEFT LIP/NASAL		x	x		x
40761	REPAIR CLEFT LIP/NASAL			x		
40799	LIP SURGERY PROCEDURE	x		x		
40800	DRAINAGE OF MOUTH LESION			x		
40801	DRAINAGE OF MOUTH LESION			x		
40804	REMOVAL, FOREIGN BODY, MOUTH			x		
40805	REMOVAL, FOREIGN BODY, MOUTH			x		
40806	INCISION OF LIP FOLD			x		
40808	BIOPSY OF MOUTH LESION			x		
40810	EXCISION OF MOUTH LESION			x		
40812	EXCISE/REPAIR MOUTH LESION			x		
40814	EXCISE/REPAIR MOUTH LESION			x		
40816	EXCISION OF MOUTH LESION			x		
40818	EXCISE ORAL MUCOSA FOR GRAFT			x		
40819	EXCISE LIP OR CHEEK FOLD			x		
40820	TREATMENT OF MOUTH LESION			x		
40830	REPAIR MOUTH LACERATION			x		
40831	REPAIR MOUTH LACERATION			x		
40840	RECONSTRUCTION OF MOUTH	x		x		
40842	RECONSTRUCTION OF MOUTH			x		
40843	RECONSTRUCTION OF MOUTH	x		x		
40844	RECONSTRUCTION OF MOUTH	x		x		
40845	RECONSTRUCTION OF MOUTH	x		x		
40899	MOUTH SURGERY PROCEDURE			x		
41000	DRAINAGE OF MOUTH LESION			x		
41005	DRAINAGE OF MOUTH LESION			x		
41006	DRAINAGE OF MOUTH LESION			x		
41007	DRAINAGE OF MOUTH LESION			x		
41008	DRAINAGE OF MOUTH LESION			x		
41009	DRAINAGE OF MOUTH LESION			x		
41010	INCISION OF TONGUE FOLD			x		
41015	DRAINAGE OF MOUTH LESION			x		
41016	DRAINAGE OF MOUTH LESION			x		
41017	DRAINAGE OF MOUTH LESION			x		
41018	DRAINAGE OF MOUTH LESION			x		
41019	PLACE NEEDLES H&N FOR RT			x		
41100	BIOPSY OF TONGUE			x		
41105	BIOPSY OF TONGUE			x		
41108	BIOPSY OF FLOOR OF MOUTH			x		
41110	EXCISION OF TONGUE LESION			x		
41112	EXCISION OF TONGUE LESION			x		
41113	EXCISION OF TONGUE LESION			x		
41114	EXCISION OF TONGUE LESION			x		
41115	EXCISION OF TONGUE FOLD			x		
41116	EXCISION OF MOUTH LESION			x		
41120	PARTIAL REMOVAL OF TONGUE	x		x		
41130	PARTIAL REMOVAL OF TONGUE	x		x		
41135	TONGUE AND NECK SURGERY	x		x		
41140	REMOVAL OF TONGUE	x		x		
41145	TONGUE REMOVAL, NECK SURGERY	x		x		
41150	TONGUE, MOUTH, JAW SURGERY	x		x		
41153	TONGUE, MOUTH, NECK SURGERY	x		x		
41155	TONGUE, JAW, & NECK SURGERY	x		x		
41250	REPAIR TONGUE LACERATION			x		
41251	REPAIR TONGUE LACERATION			x		
41252	REPAIR TONGUE LACERATION			x		
41500	FIXATION OF TONGUE			x		
41510	TONGUE TO LIP SURGERY			x		
41512	TONGUE SUSPENSION			x		
41520	RECONSTRUCTION, TONGUE FOLD			x		
41530	TONGUE BASE VOL REDUCTION			x		
41599	UNLISTED PROCEDURE TONGUE FLOOR OF MOUTH			x		
41800	DRAINAGE OF GUM LESION			x		
41805	REMOVAL FOREIGN BODY, GUM			x		
41806	REMOVAL FOREIGN BODY, JAWBONE			x		x
41821	EXCISION OF GUM FLAP			x		
41822	EXCISION OF GUM LESION			x		
41823	EXCISION OF GUM LESION			x		
41825	EXCISION OF GUM LESION			x		
41826	EXCISION OF GUM LESION			x		
41827	EXCISION OF GUM LESION			x		
41850	TREATMENT OF GUM LESION			x		
41899	DENTAL SURGERY PROCEDURE			x		
42000	DRAINAGE MOUTH ROOF LESION			x		
42100	BIOPSY ROOF OF MOUTH			x		
42104	EXCISION LESION, MOUTH ROOF			x		
42106	EXCISION LESION, MOUTH ROOF			x		
42107	EXCISION LESION, MOUTH ROOF			x		
42120	REMOVE PALATE/LESION	x		x		
42140	EXCISION OF UVULA			x		
42145	REPAIR PALATE, PHARYNX/UVULA			x		

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
42160	TREATMENT MOUTH ROOF LESION			X		
42180	REPAIR PALATE			X		
42182	REPAIR PALATE			X		
42200	RECONSTRUCT CLEFT PALATE	X		X		
42205	RECONSTRUCT CLEFT PALATE	X		X		
42210	RECONSTRUCT CLEFT PALATE	X		X		
42215	RECONSTRUCT CLEFT PALATE	X		X		
42220	RECONSTRUCT CLEFT PALATE	X		X		
42225	RECONSTRUCT CLEFT PALATE	X		X		
42226	LENGTHENING OF PALATE	X		X		
42227	LENGTHENING OF PALATE	X		X		
42235	REPAIR PALATE	X		X		
42260	REPAIR NOSE TO LIP FISTULA	X		X		
42280	PREPARATION, PALATE MOLD			X		
42281	INSERTION, PALATE PROSTHESIS			X		
42299	PALATE/UVULA SURGERY	X		X		
42300	DRAINAGE OF SALIVARY GLAND			X		X
42305	DRAINAGE OF SALIVARY GLAND			X		X
42310	DRAINAGE OF SALIVARY GLAND			X		X
42320	DRAINAGE OF SALIVARY GLAND			X		X
42330	REMOVAL OF SALIVARY STONE			X		X
42335	REMOVAL OF SALIVARY STONE			X		X
42340	REMOVAL OF SALIVARY STONE		X	X		X
42400	BIOPSY OF SALIVARY GLAND			X		X
42405	BIOPSY OF SALIVARY GLAND			X		X
42408	EXCISION OF SALIVARY CYST			X		X
42409	DRAINAGE OF SALIVARY CYST	X		X		X
42410	EXCISE PAROTID GLAND/LESION	X	X	X		X
42415	EXCISE PAROTID GLAND/LESION	X	X	X		X
42420	EXCISE PAROTID GLAND/LESION	X		X		X
42425	EXCISE PAROTID GLAND/LESION	X		X		X
42426	EXCISE PAROTID GLAND/LESION	X		X		X
42440	EXCISE SUBMAXILLARY GLAND	X		X		X
42450	EXCISE SUBLINGUAL GLAND			X		X
42500	REPAIR SALIVARY DUCT			X		X
42505	REPAIR SALIVARY DUCT			X		X
42507	PAROTID DUCT DIVERSION	X		X		X
42508	PAROTID DUCT DIVERSION	X		X		X
42509	PAROTID DUCT DIVERSION			X		X
42510	PAROTID DUCT DIVERSION	X		X		X
42550	INJECTION FOR SALIVARY X-RAY			X		X
42600	CLOSURE OF SALIVARY FISTULA			X		X
42650	DILATION OF SALIVARY DUCT			X		X
42660	DILATION OF SALIVARY DUCT			X		X
42665	DILATION OF SALIVARY DUCT			X		X
42699	SALIVARY SURGERY PROCEDURE	X		X		
42700	DRAINAGE OF TONSIL ABSCESS			X		X
42720	DRAINAGE OF THROAT ABSCESS			X		
42725	DRAINAGE OF THROAT ABSCESS	X		X		
42800	BIOPSY OF THROAT	X		X		
42802	BIOPSY OF THROAT			X		
42804	BIOPSY OF UPPER NOSE/THROAT			X		
42806	BIOPSY OF UPPER NOSE/THROAT			X		
42808	EXCISE PHARYNX LESION			X		
42809	REMOVE PHARYNX FOREIGN BODY			X		
42810	EXCISION OF NECK CYST	X	X	X		X
42815	EXCISION OF NECK CYST	X	X	X		X
42820	REMOVE TONSILS AND ADENOIDS			X		
42821	REMOVE TONSILS AND ADENOIDS			X		
42825	REMOVAL OF TONSILS			X		
42826	REMOVAL OF TONSILS			X		
42830	REMOVAL OF ADENOIDS			X		
42831	REMOVAL OF ADENOIDS			X		
42835	REMOVAL OF ADENOIDS			X		
42836	REMOVAL OF ADENOIDS			X		
42842	EXTENSIVE SURGERY OF THROAT			X		X
42844	EXTENSIVE SURGERY OF THROAT	X		X		X
42845	EXTENSIVE SURGERY OF THROAT	X		X		X
42860	EXCISION OF TONSIL TAGS			X		
42870	EXCISION OF LINGUAL TONSIL			X		
42890	PARTIAL REMOVAL OF PHARYNX	X		X		
42892	REVISION OF PHARYNGEAL WALLS	X		X		X
42894	REVISION OF PHARYNGEAL WALLS	X		X		X
42900	REPAIR THROAT WOUND			X		
42950	RECONSTRUCTION OF THROAT	X		X		
42953	REPAIR THROAT, ESOPHAGUS	X		X		
42955	SURGICAL OPENING OF THROAT	X		X		
42960	CONTROL THROAT BLEEDING			X		
42961	CONTROL THROAT BLEEDING	X		X		
42962	CONTROL THROAT BLEEDING			X		
42970	CONTROL NOSE/THROAT BLEEDING			X		
42971	CONTROL NOSE/THROAT BLEEDING	X		X		
42972	CONTROL NOSE/THROAT BLEEDING	X		X		
42999	THROAT SURGERY PROCEDURE			X		
43020	INCISION OF ESOPHAGUS	X		X		
43030	THROAT MUSCLE SURGERY	X		X		
43045	INCISION OF ESOPHAGUS	X		X		
43100	EXCISION OF ESOPHAGUS LESION	X		X		
43101	EXCISION OF ESOPHAGUS LESION	X		X		
43107	REMOVAL OF ESOPHAGUS	X		X		
43108	REMOVAL OF ESOPHAGUS	X		X		
43112	REMOVAL OF ESOPHAGUS	X		X		
43113	REMOVAL OF ESOPHAGUS	X		X		
43116	PARTIAL REMOVAL OF ESOPHAGUS	X		X		
43117	PARTIAL REMOVAL OF ESOPHAGUS	X		X		
43118	PARTIAL REMOVAL OF ESOPHAGUS	X		X		
43121	PARTIAL REMOVAL OF ESOPHAGUS	X		X		
43122	PARTIAL REMOVAL OF ESOPHAGUS	X		X		
43123	PARTIAL REMOVAL OF ESOPHAGUS	X		X		
43124	REMOVAL OF ESOPHAGUS	X		X		
43130	REMOVAL OF ESOPHAGUS POUCH			X		
43135	REMOVAL OF ESOPHAGUS POUCH	X		X		
43191	ESOPHAGOSCOPY RIGID DIAGNOSTIC			X		
43192	ESOPHAGOSCOPY RIGID W/ SUBMUCOSAL INJ			X		
43193	ESOPHAGOSCOPY RIGID W/ BIOPSY			X		
43194	ESOPHAGOSCOPY RIGID W/ REMOVAL FOREIGN BDY			X		

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
43195	ESOPHAGOSCOPY RIGID W/ BALL DIAL			X		
43196	ESOPHAGOSCOPY RIGID W/ INS GUIDE WIRE			X		
43197	ESOPHAGOSCOPY FLEX DIAGNOSTIC			X		
43198	ESOPHAGOSCOPY FLEX W/ BIOPSY			X		
43200	ESOPHAGUS ENDOSCOPY			X		
43201	ESOPH SCOPE W/SUBMUCOUS INJ			X		
43202	ESOPHAGUS ENDOSCOPY, BIOPSY			X		
43204	ESOPH SCOPE W/SCLEROSIS INJ			X		
43205	ESOPHAGUS ENDOSCOPY/LIGATION			X		
43206	ESOPHAGUS ENDOSCOPY W/ ENDOMICROSCOPY			X		
43211	ESOPHAGOSCOPY FLEX W/ MUCOSAL RESECTION			X		
43212	ESOPHAGOSCOPY FLEX W/ PLACE STENT			X		
43213	ESOPHAGOSCOPY FLEX W/ DIAL BY BALL OR DIALATOR			X		
43214	ESOPHAGOSCOPY FLEX W/ DIAL W/BALL			X		
43215	ESOPHAGUS ENDOSCOPY			X		
43216	ESOPHAGUS ENDOSCOPY/LESION			X		
43217	ESOPHAGUS ENDOSCOPY			X		
43219	ESOPHAGUS ENDOSCOPY			*		
43220	ESOPH ENDOSCOPY, DILATION			X		
43226	ESOPH ENDOSCOPY, DILATION			X		
43227	ESOPH ENDOSCOPY, REPAIR			X		
43228	ESOPH ENDOSCOPY, ABLATION			*		
43229	ESOPHAGOSCOPY FLEX W/ ABLATION TUMORS/POLYPS/LES			X		
43231	ESOPH ENDOSCOPY W/US EXAM			X		
43232	ESOPH ENDOSCOPY W/US FN BX			X		
43233	ESOPH ENDOSCOPY W/ DIAL W/ BALL			X		
43235	UPPR GI ENDOSCOPY, DIAGNOSIS			X		
43236	UPPR GI SCOPE W/SUBMUC INJ			X		
43237	ENDOSCOPIC US EXAM, ESOPH			X		
43238	UPPR GI ENDOSCOPY W/US FN BX			X		
43239	UPPER GI ENDOSCOPY, BIOPSY			X		
43240	ESOPH ENDOSCOPE W/DRAIN CYST			X		
43241	UPPER GI ENDOSCOPY WITH TUBE			X		
43242	UPPR GI ENDOSCOPY W/US FN BX			X		
43243	UPPER GI ENDOSCOPY & INJECT			X		
43244	UPPER GI ENDOSCOPY/LIGATION			X		
43245	UPPR GI SCOPE DILATE STRICTR			X		
43246	PLACE GASTROSTOMY TUBE			X		
43247	OPERATIVE UPPER GI ENDOSCOPY			X		
43248	UPPR GI ENDOSCOPY/GUIDE WIRE			X		
43249	ESOPH ENDOSCOPY, DILATION			X		
43250	UPPER GI ENDOSCOPY/TUMOR			X		
43251	OPERATIVE UPPER GI ENDOSCOPY			X		
43253	ESOPH ENDOSCOPY W/ ULTRA GUID INJ			X		
43254	ESOPH ENDOSCOPY W/ MUCOSAL RESECT			X		
43255	OPERATIVE UPPER GI ENDOSCOPY			X		
43256	UPPR GI ENDOSCOPY W/STENT			*		
43257	UPPR GI SCOPE W/THRLM TXMNT			X		
43258	OPERATIVE UPPER GI ENDOSCOPY			*		
43259	ENDOSCOPIC ULTRASOUND EXAM			X		
43260	ENDO CHOLANGIOPANCREATOGRAPH			X		
43261	ENDO CHOLANGIOPANCREATOGRAPH			X		
43262	ENDO CHOLANGIOPANCREATOGRAPH			X		
43263	ENDO CHOLANGIOPANCREATOGRAPH			X		
43264	ENDO CHOLANGIOPANCREATOGRAPH			X		
43265	ENDO CHOLANGIOPANCREATOGRAPH			X		
43266	ESOPH ENDOSCOPY PLACE STENT			X		
43267	ENDO CHOLANGIOPANCREATOGRAPH			*		
43268	ENDO CHOLANGIOPANCREATOGRAPH			*		
43269	ENDO CHOLANGIOPANCREATOGRAPH			*		
43270	ESOPH ENDOSCOPY ABLATION TUMOR/POLYP/LES			X		
43271	ENDO CHOLANGIOPANCREATOGRAPH			*		
43272	ENDO CHOLANGIOPANCREATOGRAPH			*		
43274	ENDO CHOLANGIOPANCREATOGRAPH STENT			X		
43275	ENDO CHOLANGIOPANCREATOGRAPH REM			X		
43276	ENDO CHOLANGIOPANCREATOGRAPH STENT REM OR REP			X		
43277	ENDO CHOLANGIOPANCREATOGRAPH W/ DIAL			X		
43278	ENDO CHOLANGIOPANCREATOGRAPH W/ ABLATION			X		
43279	LAP MYOTOMY, HELLER	X		X		
43280	LAPAROSCOPY, FUNDOPLASTY	X		X		
43281	LAP PARAESOPHAG HERN REPAIR	X		X		
43282	LAP PARAESOPH HER RPR W/MESH	X		X		
43283	LAPS ESOPHAGEAL LENGTHENING ADDL	X		X		
43289	LAPAROSCOPE PROC, ESOPH	X	X	X		
43300	REPAIR OF ESOPHAGUS	X		X		
43305	REPAIR ESOPHAGUS AND FISTULA	X		X		
43310	REPAIR OF ESOPHAGUS	X		X		
43312	REPAIR ESOPHAGUS AND FISTULA	X		X		
43313	ESOPHAGOPLASTY CONGENITAL	X		X		
43314	TRACHEO-ESOPHAGOPLASTY CONG	X		X		
43320	FUSE ESOPHAGUS & STOMACH	X		X		
43325	REVISE ESOPHAGUS & STOMACH	X		X		
43327	ESOPG/GSTR FUNDOPLASTY W/LAPT	X		X		
43328	ESOPG/GSTR FUNDOPLASTY W/THORCOM	X		X		
43330	REPAIR OF ESOPHAGUS	X		X		
43331	REPAIR OF ESOPHAGUS	X		X		
43332	RPR PARAESOPH HIATAL HERNIA W/LAPT W/O MESH	X		X		
43333	LAPT RPR PARAESOPH HIATAL HERNIA W/ MESH	X		X		
43334	RPR PARAESOPH HIATAL HERNIA W/THORCOM W/O MESH	X		X		
43335	RPR PARAESOPH HIATAL HERNIA W/THORCOM W/MESH	X		X		
43336	RPR PARAESOPH HIATAL HERNIA THORCOABDOM W/O MESH	X		X		
43337	RPR PARAESOPH HIATAL HERNIA THORCOABDOM W/MESH	X		X		
43338	ESOPHAGUS LENGTHENING	X		X		
43340	FUSE ESOPHAGUS & INTESTINE	X		X		
43341	FUSE ESOPHAGUS & INTESTINE	X		X		
43350	SURGICAL OPENING, ESOPHAGUS	X		X		
43351	SURGICAL OPENING, ESOPHAGUS	X		X		
43352	SURGICAL OPENING, ESOPHAGUS	X		X		
43360	GASTROINTESTINAL REPAIR	X		X		
43361	GASTROINTESTINAL REPAIR	X		X		
43400	LIGATE ESOPHAGUS VEINS	X		X		
43401	ESOPHAGUS SURGERY FOR VEINS	X		X		
43405	LIGATE/STAPLE ESOPHAGUS	X		X		
43410	REPAIR ESOPHAGUS WOUND	X		X		
43415	REPAIR ESOPHAGUS WOUND	X		X		
43420	REPAIR ESOPHAGUS OPENING	X		X		

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
43425	REPAIR ESOPHAGUS OPENING	x		x		
43450	DILATE ESOPHAGUS			x		
43453	DILATE ESOPHAGUS			x		
43456	DILATE ESOPHAGUS			x		
43458	DILATE ESOPHAGUS			x		
43460	PRESSURE TREATMENT ESOPHAGUS			x		
43496	FREE JEJUNUM FLAP MICROVASC	x		x		
43499	ESOPHAGUS SURGERY PROCEDURE			x		
43500	SURGICAL OPENING OF STOMACH	x		x		
43501	SURGICAL REPAIR OF STOMACH	x		x		
43502	SURGICAL REPAIR OF STOMACH	x		x		
43510	SURGICAL OPENING OF STOMACH	x		x		
43520	INCISION OF PYLORIC MUSCLE	x		x		
43605	BIOPSY OF STOMACH	x		x		
43610	EXCISION OF STOMACH LESION	x		x		
43611	EXCISION OF STOMACH LESION	x		x		
43620	REMOVAL OF STOMACH	x		x		
43621	REMOVAL OF STOMACH	x		x		
43622	REMOVAL OF STOMACH	x		x		
43631	REMOVAL OF STOMACH, PARTIAL	x		x		
43632	REMOVAL OF STOMACH, PARTIAL	x		x		
43633	REMOVAL OF STOMACH, PARTIAL	x		x		
43634	REMOVAL OF STOMACH, PARTIAL	x		x		
43635	HEMIGASTRECTOMY, DIS. S/TOT. GAST. W. VAGOTOM			x		
43640	VAGOTOMY & PYLORUS REPAIR	x		x		
43641	VAGOTOMY & PYLORUS REPAIR	x		x		
43644	LAP GASTRIC BYPASS/ROUX-EN-Y	x		x		
43645	LAP GASTR BYPASS INCL. SMLL I	x		x		
43647	LAP IMPL. ELECTRODE, ANTRUM	x		x		
43648	LAP REVISE/REMOV. ELTRD ANTRUM	x		x		
43651	LAPAROSCOPY, VAGUS NERVE	x		x		
43652	LAPAROSCOPY, VAGUS NERVE	x		x		
43653	LAPAROSCOPY, GASTROSTOMY	x		x		
43659	LAPAROSCOPE PROC. STOM.	x	x	x		
43753	GASTRIC TUBE PLMT W/ASPIR & LAVAGE	x		x		
43754	GASTRIC TUBE DX PLMT W/ASPIR 1 SPECIMEN	x		x		
43755	GASTRIC TUBE DX PLMT W/ASPIR MULT SPECIMENS	x		x		
43756	DUODENAL TUBE DX PLMT W/IMG GID 1 SPECIMEN	x		x		
43757	DUODENAL TUBE DX PLMT W/IMG GID MULT SPECIMEN	x		x		
43760	CHANGE GASTROSTOMY TUBE			x		
43761	REPOSITION GASTROSTOMY TUBE			x		
43800	RECONSTRUCTION OF PYLORUS	x		x		
43810	FUSION OF STOMACH AND BOWEL	x		x		
43820	FUSION OF STOMACH AND BOWEL	x		x		
43825	FUSION OF STOMACH AND BOWEL	x		x		
43830	PLACE GASTROSTOMY TUBE	x		x		
43831	PLACE GASTROSTOMY TUBE	x		x		
43832	PLACE GASTROSTOMY TUBE	x		x		
43840	REPAIR OF STOMACH LESION	x		x		
43850	REVISE STOMACH-BOWEL FUSION	x		x		
43855	REVISE STOMACH-BOWEL FUSION	x		x		
43860	REVISE STOMACH-BOWEL FUSION	x		x		
43865	REVISE STOMACH-BOWEL FUSION	x		x		
43870	REPAIR STOMACH OPENING	x		x		
43880	REPAIR STOMACH-BOWEL FISTULA	x		x		
43881	IMPL/REDO ELECTRD. ANTRUM	x		x		
43882	REVISE/REMOVE ELECTRD ANTRUM	x		x		
43999	STOMACH SURGERY PROCEDURE			x		
44005	FREING OF BOWEL ADHESION	x		x		
44010	INCISION OF SMALL BOWEL	x		x		
44015	TUBE JEJUNOSTOMY FOR ENTERAL ALIMEN,INTR	x		x		
44020	EXPLORE SMALL INTESTINE	x		x		
44021	DECOMPRESS SMALL BOWEL	x		x		
44025	INCISION OF LARGE BOWEL	x		x		
44050	REDUCE BOWEL OBSTRUCTION	x		x		
44055	CORRECT MALROTATION OF BOWEL	x		x		
44100	BIOPSY OF BOWEL			x		
44110	EXCISE INTESTINE LESION(S)	x		x		
44111	EXCISION OF BOWEL LESION(S)	x		x		
44120	REMOVAL OF SMALL INTESTINE	x		x		
44121	REMOVAL OF SMALL INTESTINE	x		x		
44125	REMOVAL OF SMALL INTESTINE	x		x		
44126	ENTERECTOMY W/O TAPER, CONG.	x		x		
44127	ENTERECTOMY W/TAPER, CONG.	x		x		
44128	ENTERECTOMY SM INTEST. EA ADDED RESEC.	x		x		
44130	BOWEL TO BOWEL FUSION	x		x		
44135	INTESTINAL ALLOTRANSPL. CADAVER DONOR			x		
44137	REMOVAL TRANS. INTEST. ALLOGRAFT COMPLETE	x		x		
44139	MOBILIZATION OF COLON	x				
44140	PARTIAL REMOVAL OF COLON	x		x		
44141	PARTIAL REMOVAL OF COLON	x		x		
44143	PARTIAL REMOVAL OF COLON	x		x		
44144	PARTIAL REMOVAL OF COLON	x		x		
44145	PARTIAL REMOVAL OF COLON	x		x		
44146	PARTIAL REMOVAL OF COLON	x		x		
44147	PARTIAL REMOVAL OF COLON	x		x		
44150	REMOVAL OF COLON	x		x		
44151	REMOVAL OF COLON/ILEOSTOMY	x		x		
44155	REMOVAL OF COLON/ILEOSTOMY	x		x		
44156	REMOVAL OF COLON/ILEOSTOMY	x		x		
44157	COLECTOMY W/ILEOANAL ANAST.	x		x		
44158	COLECTOMY W/NEO-RECTUM POUCH	x		x		
44160	REMOVAL OF COLON	x		x		
44180	LAP. ENTEROLYSIS	x		x		
44186	LAP. JEJUNOSTOMY	x		x		
44187	LAP. ILEOJEJUNO-STOMY	x		x		
44188	LAP. COLOSTOMY	x		x		
44202	LAP. ENTERECTOMY	x		x		
44203	LAPAROSCOPIC RESECTION SM INTESTINE	x		x		
44204	LAPARO PARTIAL COLECTOMY	x		x		
44205	LAP COLECTOMY PART W/ILEUM	x		x		
44206	LAP PART COLECTOMY W/STOMA	x		x		
44207	L COLECTOMY/COLOPROCTOSTOMY	x		x		
44208	L COLECTOMY/COLOPROCTOSTOMY	x		x		
44210	LAPARO TOTAL PROCTOCOLECTOMY	x		x		
44211	LAP COLECTOMY W/PROCTECTOMY	x		x		

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
44212	LAPARO TOTAL PROCTOCOLECTOMY	x		x		
44213	LAP. MOBIL SPLENIC FL ADD-ON	x		x		
44227	LAP. CLOSE ENTEROSTOMY	x		x		
44238	LAPAROSCOPE PROC. INTESTINE	x	x	x		
44300	OPEN BOWEL TO SKIN	x		x		
44310	ILEOSTOMY/JEJUNOSTOMY	x		x		
44312	REVISION OF ILEOSTOMY			x		
44314	REVISION OF ILEOSTOMY	x		x		
44316	DEVISE BOWEL POUCH	x		x		
44320	COLOSTOMY	x		x		
44322	COLOSTOMY WITH BIOPSIES	x		x		
44340	REVISION OF COLOSTOMY			x		
44345	REVISION OF COLOSTOMY	x		x		
44346	REVISION OF COLOSTOMY	x		x		
44360	SMALL BOWEL ENDOSCOPY			x		
44361	SMALL BOWEL ENDOSCOPY/BIOPSY			x		
44363	SMALL BOWEL ENDOSCOPY			x		
44364	SMALL BOWEL ENDOSCOPY			x		
44365	SMALL BOWEL ENDOSCOPY			x		
44366	SMALL BOWEL ENDOSCOPY			x		
44369	SMALL BOWEL ENDOSCOPY			x		
44370	SMALL BOWEL ENDOSCOPY/STENT			x		
44372	SMALL BOWEL ENDOSCOPY			x		
44373	SMALL BOWEL ENDOSCOPY			x		
44376	SMALL BOWEL ENDOSCOPY			x		
44377	SMALL BOWEL ENDOSCOPY/BIOPSY			x		
44378	SMALL BOWEL ENDOSCOPY			x		
44379	S BOWEL ENDOSCOPE W/STENT			x		
44380	SMALL BOWEL ENDOSCOPY			x		
44382	SMALL BOWEL ENDOSCOPY			x		
44383	ILEOSCOPY W/STENT			x		
44385	ENDOSCOPY OF BOWEL POUCH			x		
44386	ENDOSCOPY, BOWEL POUCH/BIOP			x		
44388	COLONOSCOPY			x		
44389	COLONOSCOPY WITH BIOPSY			x		
44390	COLONOSCOPY FOR FOREIGN BODY			x		
44391	COLONOSCOPY FOR BLEEDING			x		
44392	COLONOSCOPY & POLYPECTOMY			x		
44393	COLONOSCOPY, LESION REMOVAL			x		
44394	COLONOSCOPY W/SNARE			x		
44397	COLONOSCOPY W/STENT			x		
44602	SUTURE, SMALL INTESTINE	x		x		
44603	SUTURE, SMALL INTESTINE	x		x		
44604	SUTURE, LARGE INTESTINE	x		x		
44605	REPAIR OF BOWEL LESION	x		x		
44615	INTESTINAL STRICTUROPLASTY	x		x		
44620	REPAIR BOWEL OPENING	x		x		
44625	REPAIR BOWEL OPENING	x		x		
44626	REPAIR BOWEL OPENING	x		x		
44640	REPAIR BOWEL-SKIN FISTULA	x		x		
44650	REPAIR BOWEL FISTULA	x		x		
44660	REPAIR BOWEL-BLADDER FISTULA	x		x		
44661	REPAIR BOWEL-BLADDER FISTULA	x		x		
44680	SURGICAL REVISION, INTESTINE	x		x		
44700	SUSPEND BOWEL W/PROSTHESIS	x		x		
44701	INTRAOP COLON LAVAGE ADD-ON	x				
44715	PREPARE DONOR INTESTINE	x		x		
44720	PREP DONOR INTESTINE/VEINOUS	x		x		
44721	PREP DONOR INTESTINE/ARTERY	x		x		
44799	UNLISTED PROCEDURE INTESTINE			x		
44800	EXCISION OF BOWEL POUCH	x		x		
44820	EXCISION OF MESENTERY LESION	x		x		
44850	REPAIR OF MESENTERY	x		x		
44899	BOWEL SURGERY PROCEDURE	x		x		
44900	DRAIN APP ABSCESS, OPEN	x		x		
44901	DRAIN APP ABSCESS, PERCUT			x		
44950	APPENDECTOMY	x		x		
44955	APPENDECTOMY, N OTHER MAJOR PROCEDURE	x		x		
44960	APPENDECTOMY	x		x		
44970	LAPAROSCOPY, APPENDECTOMY	x		x		
44979	LAPAROSCOPE PROC. APP	x	x	x		
45000	DRAINAGE OF PELVIC ABSCESS			x		
45005	DRAINAGE OF RECTAL ABSCESS			x		
45020	DRAINAGE OF RECTAL ABSCESS			x		
45100	BIOPSY OF RECTUM			x		
45108	REMOVAL OF ANORECTAL LESION			x		
45110	REMOVAL OF RECTUM	x		x		
45111	PARTIAL REMOVAL OF RECTUM	x		x		
45112	REMOVAL OF RECTUM	x		x		
45113	PARTIAL PROCTECTOMY	x		x		
45114	PARTIAL REMOVAL OF RECTUM	x		x		
45116	PARTIAL REMOVAL OF RECTUM	x		x		
45119	REMOVE RECTUM W/RESERVOIR	x		x		
45120	REMOVAL OF RECTUM	x		x		
45121	REMOVAL OF RECTUM AND COLON	x		x		
45123	PARTIAL PROCTECTOMY	x		x		
45126	PELVIC EXENTERATION	x		x		
45130	EXCISION OF RECTAL PROLAPSE	x		x		
45135	EXCISION OF RECTAL PROLAPSE	x		x		
45136	EXCISE ILEOANAL RESERVOIR	x		x		
45150	EXCISION OF RECTAL STRICTURE			x		
45160	EXCISION OF RECTAL LESION	x		x		
45171	EXC RECT TUM TRANSANAL PART	x		x		
45172	EXC RECT TUM TRANSANAL FULL	x		x		
45190	DESTRUCTION, RECTAL TUMOR			x		
45300	PROCTOSIGMOIDOSCOPY DX			x		
45303	PROCTOSIGMOIDOSCOPY DILATE			x		
45305	PROCTOSIGMOIDOSCOPY W/BX			x		
45307	PROCTOSIGMOIDOSCOPY FB			x		
45308	PROCTOSIGMOIDOSCOPY REMOVAL			x		
45309	PROCTOSIGMOIDOSCOPY REMOVAL			x		
45315	PROCTOSIGMOIDOSCOPY REMOVAL			x		
45317	PROCTOSIGMOIDOSCOPY BLEED			x		
45320	PROCTOSIGMOIDOSCOPY ABLATE			x		
45321	PROCTOSIGMOIDOSCOPY VOLVUL			x		
45327	PROCTOSIGMOIDOSCOPY W/STENT			x		

Covered Surgery	Code	Description	Modifier				
			Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
45330		DIAGNOSTIC SIGMOIDOSCOPY			X		
45331		SIGMOIDOSCOPY AND BIOPSY			X		
45332		SIGMOIDOSCOPY W/FB REMOVAL			X		
45333		SIGMOIDOSCOPY & POLYPECTOMY			X		
45334		SIGMOIDOSCOPY FOR BLEEDING			X		
45335		SIGMOIDOSCOPY W/SUBMUC INJ			X		
45337		SIGMOIDOSCOPY & DECOMPRESS			X		
45338		SIGMOIDOSCOPY W/TUMR REMOVE			X		
45339		SIGMOIDOSCOPY W/ABLATE TUMR			X		
45340		SIG W/BALLOON DILATION			X		
45341		SIGMOIDOSCOPY W/ULTRASOUND			X		
45342		SIGMOIDOSCOPY W/US GUIDE BX			X		
45345		SIGMOIDOSCOPY W/STENT			X		
45355		SURGICAL COLONOSCOPY			X		
45378		DIAGNOSTIC COLONOSCOPY			X		
45379		COLONOSCOPY W/FB REMOVAL			X		
45380		COLONOSCOPY AND BIOPSY			X		
45381		COLONOSCOPY, SUBMUCOUS INJ			X		
45382		COLONOSCOPY/CONTROL BLEEDING			X		
45383		LESION REMOVAL COLONOSCOPY			X		
45384		LESION REMOVE COLONOSCOPY			X		
45385		LESION REMOVAL COLONOSCOPY			X		
45386		COLONOSCOPY DILATE STRICTURE			X		
45387		COLONOSCOPY W/STENT			X		
45391		COLONOSCOPY W/ENDOSCOPE IUS			X		
45392		COLONOSCOPY W/ENDOSCOPIC FNB			X		
45395		LAP. REMOVAL OF RECTUM	X		X		
45397		LAP. REMOVE RECTUM W/POUCH	X		X		
45400		LAPAROSCOPIC PROC	X		X		
45402		LAP PROCTOPEXY W/SIG RESECT	X		X		
45499		LAPAROSCOPE PROC. RECTUM	X		X		
45500		REPAIR OF RECTUM			X		
45505		REPAIR OF RECTUM			X		
45520		TREATMENT OF RECTAL PROLAPSE			X		
45540		CORRECT RECTAL PROLAPSE	X		X		
45541		CORRECT RECTAL PROLAPSE	X		X		
45550		REPAIR RECTUM/REMOVE SIGMOID	X		X		
45560		REPAIR OF RECTOCELE	X		X		
45562		EXPLORATION/REPAIR OF RECTUM	X		X		
45563		EXPLORATION/REPAIR OF RECTUM	X		X		
45800		REPAIR RECT/BLADDER FISTULA	X		X		
45805		REPAIR FISTULA W/COLOSTOMY	X		X		
45820		REPAIR RECTOURETHRAL FISTULA	X		X		
45825		REPAIR FISTULA W/COLOSTOMY	X		X		
45900		REDUCTION OF RECTAL PROLAPSE			X		
45905		DILATION OF ANAL SPHINCTER			X		
45910		DILATION OF RECTAL NARROWING			X		
45915		REMOVE RECTAL OBSTRUCTION			X		
45990		SURG DX EXAM. ANORECTAL			X		
45999		RECTUM SURGERY PROCEDURE			X		
46020		PLACEMENT OF SETON			X		
46030		REMOVAL OF RECTAL MARKER			X		
46040		INCISION OF RECTAL ABSCESS			X		
46045		INCISION OF RECTAL ABSCESS			X		
46050		INCISION OF ANAL ABSCESS			X		
46060		INCISION OF RECTAL ABSCESS			X		
46070		INCISION OF ANAL SEPTUM			X		
46080		INCISION OF ANAL SPHINCTER			X		
46083		INCISE EXTERNAL HEMORRHOID			X		
46200		REMOVAL OF ANAL FISSURE			X		
46220		REMOVAL OF ANAL TAG			X		
46221		LIGATION OF HEMORRHOID(S)			X		
46230		REMOVAL OF ANAL TAGS			X		
46250		HEMORRHOIDECTOMY			X		
46255		HEMORRHOIDECTOMY			X		
46257		REMOVE HEMORRHOIDS & FISSURE			X		
46258		REMOVE HEMORRHOIDS & FISTULA			X		
46260		HEMORRHOIDECTOMY			X		
46261		REMOVE HEMORRHOIDS & FISSURE			X		
46262		REMOVE HEMORRHOIDS & FISTULA			X		
46270		REMOVAL OF ANAL FISTULA			X		
46275		REMOVAL OF ANAL FISTULA			X		
46280		REMOVAL OF ANAL FISTULA			X		
46285		REMOVAL OF ANAL FISTULA			X		
46288		REPAIR ANAL FISTULA			X		
46320		REMOVAL OF HEMORRHOID CLOT			X		
46500		INJECTION INTO HEMORRHOID(S)			X		
46505		CHEMODENERVATION ANAL MUSC		X	X		
46600		DIAGNOSTIC ANOSCOPY			X		
46604		ANOSCOPY AND DILATION			X		
46606		ANOSCOPY AND BIOPSY			X		
46608		ANOSCOPY, REMOVE FOR BODY			X		
46610		ANOSCOPY, REMOVE LESION			X		
46611		ANOSCOPY			X		
46612		ANOSCOPY, REMOVE LESIONS			X		
46614		ANOSCOPY, CONTROL BLEEDING			X		
46615		ANOSCOPY			X		
46700		REPAIR OF ANAL STRICTURE			X		
46705		REPAIR OF ANAL STRICTURE	X		X		
46706		REPR OF ANAL FISTULA W/GLUE			X		
46707		REPAIR ANORECTAL FIST W/PLUG			X		
46710		REPR PER/VAG POUCH SNGL PROC	X		X		
46712		REPR PER/VAG POUCH DBL PROC	X		X		
46715		REP PERF ANOPER FISTU	X		X		
46716		REP PERF ANOPER/VESTIB FISTU	X		X		
46730		CONSTRUCTION OF ABSENT ANUS	X		X		
46735		CONSTRUCTION OF ABSENT ANUS	X		X		
46740		CONSTRUCTION OF ABSENT ANUS	X		X		
46742		REPAIR OF IMPERFORATED ANUS	X		X		
46744		REPAIR OF CLOACAL ANOMALY	X		X		
46746		REPAIR OF CLOACAL ANOMALY	X		X		
46748		REPAIR OF CLOACAL ANOMALY	X		X		
46750		REPAIR OF ANAL SPHINCTER	X		X		
46751		REPAIR OF ANAL SPHINCTER	X		X		
46753		RECONSTRUCTION OF ANUS			X		
46754		REMOVAL OF SUTURE FROM ANUS			X		

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
46760	REPAIR OF ANAL SPHINCTER	x		x		
46761	REPAIR OF ANAL SPHINCTER	x		x		
46762	IMPLANT ARTIFICIAL SPHINCTER	x		x		
46900	DESTRUCTION, ANAL LESION(S)			x		
46910	DESTRUCTION, ANAL LESION(S)			x		
46916	CRYOSURGERY, ANAL LESION(S)			x		
46917	LASER SURGERY, ANAL LESIONS			x		
46922	EXCISION OF ANAL LESION(S)			x		
46924	DESTRUCTION, ANAL LESION(S)			x		
46930	DESTROY INTERNAL HEMORRHOIDS			x		
46940	TREATMENT OF ANAL FISSURE			x		
46942	TREATMENT OF ANAL FISSURE			x		
46945	LIGATION OF HEMORRHOIDS			x		
46946	LIGATION OF HEMORRHOIDS			x		
46947	HEMORRHOIDOPEXY BY STAPLING			x		
46999	ANUS SURGERY PROCEDURE			x		
47000	NEEDLE BIOPSY OF LIVER			x		
47010	OPEN DRAINAGE, LIVER LESION	x		x		
47011	PERCUT DRAIN, LIVER LESION			x		
47015	INJECT/ASPIRATE LIVER CYST	x		x		
47100	WEDGE BIOPSY OF LIVER	x		x		
47120	PARTIAL REMOVAL OF LIVER	x		x		
47122	EXTENSIVE REMOVAL OF LIVER	x		x		
47125	PARTIAL REMOVAL OF LIVER	x		x		
47130	PARTIAL REMOVAL OF LIVER	x		x		
47135	TRANSPLANTATION OF LIVER	x		x		
47136	TRANSPLANTATION OF LIVER	x		x		
47140	PARTIAL REMOVAL, DONOR LIVER	x		x		
47141	PARTIAL REMOVAL, DONOR LIVER	x		x		
47142	PARTIAL REMOVAL, DONOR LIVER	x		x		
47143	PREP DONOR LIVER, WHOLE	x		x		
47144	PREP DONOR LIVER, 3-SEGMENT	x		x		
47145	PREP DONOR LIVER, LOBE SPLIT	x		x		
47146	PREP DONOR LIVER/VENOUS	x		x		
47147	PREP DONOR LIVER/ARTERIAL	x		x		
47300	SURGERY FOR LIVER LESION	x		x		
47350	REPAIR LIVER WOUND	x		x		
47360	REPAIR LIVER WOUND	x		x		
47361	REPAIR LIVER WOUND	x		x		
47362	REPAIR LIVER WOUND	x		x		
47370	LAPARO ABLATE LIVER TUMOR RF	x		x		
47371	LAPARO ABLATE LIVER CRYOSURG	x		x		
47379	LAPAROSCOPE PROCEDURE, LIVER	x		x		
47380	OPEN ABLATE LIVER TUMOR RF	x		x		
47381	OPEN ABLATE LIVER TUMOR CRYO	x		x		
47382	PERCUT ABLATE LIVER RF			x		
47399	LIVER SURGERY PROCEDURE			x		
47400	INCISION OF LIVER DUCT	x		x		
47420	INCISION OF BILE DUCT	x		x		
47425	INCISION OF BILE DUCT	x		x		
47460	INCISE BILE DUCT SPHINCTER	x		x		
47480	INCISION OF GALLBLADDER	x		x		
47490	INCISION OF GALLBLADDER			x		
47500	INJECTION FOR LIVER X-RAYS			x		
47505	INJECTION FOR LIVER X-RAYS			x		
47510	INSERT CATHETER, BILE DUCT			x		x
47511	INSERT BILE DUCT DRAIN		x	x		x
47525	CHANGE BILE DUCT CATHETER		x	x		x
47530	REVISE/REINSERT BILE TUBE			x		
47550	BILE DUCT ENDOSCOPY ADD-ON	x		x		
47552	BILIARY ENDOSCOPY THRU SKIN			x		
47553	BILIARY ENDOSCOPY THRU SKIN			x		
47554	BILIARY ENDOSCOPY THRU SKIN			x		
47555	BILIARY ENDOSCOPY THRU SKIN			x		
47556	BILIARY ENDOSCOPY THRU SKIN			x		
47560	LAPAROSCOPY W/CHOLANGIO			x		
47561	LAPARO W/CHOLANGIO/BIOPSY			x		
47562	LAPAROSCOPIC CHOLECYSTECTOMY	x		x		
47563	LAPARO CHOLECYSTECTOMY/GRAPH	x		x		
47564	LAPARO CHOLECYSTECTOMY/EXPLR	x		x		
47570	LAPARO CHOLECYSTOENTEROSTOMY	x		x		
47579	LAPAROSCOPE PROC, BILIARY	x	x	x		
47600	REMOVAL OF GALLBLADDER	x		x		
47605	REMOVAL OF GALLBLADDER	x		x		
47610	REMOVAL OF GALLBLADDER	x		x		
47612	REMOVAL OF GALLBLADDER	x		x		
47620	REMOVAL OF GALLBLADDER	x		x		
47630	REMOVE BILE DUCT STONE			x		
47700	EXPLORATION OF BILE DUCTS	x		x		
47701	BILE DUCT REVISION			x		
47711	EXCISION OF BILE DUCT TUMOR	x		x		
47712	EXCISION OF BILE DUCT TUMOR	x		x		
47715	EXCISION OF BILE DUCT CYST	x		x		
47720	FUSE GALLBLADDER & BOWEL	x		x		
47721	FUSE UPPER GI STRUCTURES	x		x		
47740	FUSE GALLBLADDER & BOWEL	x		x		
47741	FUSE GALLBLADDER & BOWEL	x		x		
47760	FUSE BILE DUCTS AND BOWEL	x		x		
47765	FUSE LIVER DUCTS & BOWEL	x		x		
47780	FUSE BILE DUCTS AND BOWEL	x		x		
47785	FUSE BILE DUCTS AND BOWEL	x		x		
47800	RECONSTRUCTION OF BILE DUCTS	x		x		
47801	PLACEMENT, BILE DUCT SUPPORT	x		x		
47802	FUSE LIVER DUCT & INTESTINE	x		x		
47900	SUTURE BILE DUCT INJURY	x		x		
47999	BILE TRACT SURGERY PROCEDURE			x		
48000	DRAINAGE OF ABDOMEN	x		x		
48001	PLACEMENT OF DRAIN, PANCREAS	x		x		
48020	REMOVAL OF PANCREATIC STONE	x		x		
48100	BIOPSY OF PANCREAS, OPEN	x		x		
48102	NEEDLE BIOPSY, PANCREAS			x		
48105	RESECT/DEBRIDE PANCREAS	x		x		
48120	REMOVAL OF PANCREAS LESION	x		x		
48140	PARTIAL REMOVAL OF PANCREAS	x		x		
48145	PARTIAL REMOVAL OF PANCREAS	x		x		
48146	PANCREATECTOMY	x		x		

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
48148	REMOVAL OF PANCREATIC DUCT	X		X		
48150	PARTIAL REMOVAL OF PANCREAS	X		X		
48152	PANCREATECTOMY	X		X		
48153	PANCREATECTOMY	X		X		
48154	PANCREATECTOMY	X		X		
48155	REMOVAL OF PANCREAS	X		X		
48160	PANCREATECTOMY TOTAL W TRANSPLANTATION			X		
48500	SURGERY OF PANCREATIC CYST	X		X		
48510	DRAIN PANCREATIC PSEUDOCYST	X		X		
48511	DRAIN PANCREATIC PSEUDOCYST			X		
48520	FUSE PANCREAS CYST AND BOWEL	X		X		
48540	FUSE PANCREAS CYST AND BOWEL	X		X		
48545	PANCREATORRHAPHY	X		X		
48547	DUODENAL EXCLUSION	X		X		
48548	FUSE PANCREAS AND BOWEL	X		X		
48551	PREP DONOR PANCREAS	X		X		
48552	PREP DONOR PANCREAS/VENOUS	X		X		
48554	TRANSPL ALLOGRAFT PANCREAS	X		X		
48556	REMOVAL, ALLOGRAFT PANCREAS	X		X		
48999	PANCREAS SURGERY PROCEDURE	X		X		
49000	EXPLORATION OF ABDOMEN	X		X		
49002	REOPENING OF ABDOMEN	X		X		
49010	EXPLORATION BEHIND ABDOMEN	X		X		
49020	DRAIN ABDOMINAL ABSCESS	X		X		
49021	DRAIN ABDOMINAL ABSCESS			X		
49040	DRAIN, OPEN, ABDOM ABSCESS	X		X		
49041	DRAIN, PERCUT, ABDOM ABSCESS	X		X		
49060	DRAIN, OPEN, RETROP ABSCESS			X		
49061	DRAIN, PERCUT, RETROP ABSCESS			X		
49062	DRAIN TO PERITONEAL CAVITY	X		X		
49082	ABDOM PARACENTESIS DX/THER W/O IMAGING GUIDANCE			X		
49083	ABDOM PARACENTESIS DX/THER W IMAGING GUIDANCE			X		
49084	PERITONEAL LAVAGE W/WO IMAGING GUIDANCE			X		
49180	BIOPSY, ABDOMINAL MASS			X		
49203	EXC ABD TUM 5 CM OR LESS	X		X		
49204	EXC ABD TUM OVER 5 CM	X		X		
49205	EXC ABD TUM OVER 10 CM	X		X		
49215	EXCISE SACRAL SPINE TUMOR	X		X		
49220	MULTIPLE SURGERY, ABDOMEN	X		X		
49250	EXCISION OF UMBILICUS			X		
49255	REMOVAL OF OMENTUM	X		X		
49320	DIAG LAPARO SEPARATE PROC	X		X		
49321	LAPAROSCOPY, BIOPSY	X		X		
49322	LAPAROSCOPY, ASPIRATION	X		X		
49323	LAPARO DRAIN LYMPHOCELE	X		X		
49324	LAP INSERTION PERM IP CATH	X		X		
49325	LAP REVISION PERM IP CATH	X		X		
49326	LAP W/ OMENTOPEXY ADD-ON	X		X		
49327	LAPS W/INSERTION NTRSTL DEV W/IMG GUID 1+	X		X		
49329	LAPARO PROC, ABDOM/PER/OMENT	X	X	X		
49400	AIR INJECTION INTO ABDOMEN			X		
49402	REMOVE FOREIGN BODY, ABDOMEN			X		
49405	GUIDED CATH DRAINAGE VISCERAL			X		
49406	GUIDED CATH DRAINAGE VISCERAL PERIT OR RETROPERIT PERQ			X		
49407	GUIDED CATH DRAINAGE VISCERAL PERIT OR RETROPERIT			X		
49411	INS MARK ABD/PEL FOR RT PERQ			X		
49412	PLMT INTRSTL DEV OPN W/IMG GUID 1+			X		
49418	INSJ INTRAPERITONEAL CATHETER W/IMG GUID			X		
49419	INSRT ABDOM CATH FOR CHEMOTX			X		
49421	INSERT ABDOM DRAIN, PERM			X		
49422	REMOVE PERM CANNULA/CATHETER			X		
49423	EXCHANGE DRAINAGE CATHETER			X		
49424	ASSESS CYST, CONTRAST INJECT			X		
49425	INSERT ABDOMEN-VENOUS DRAIN	X		X		
49426	REVISE ABDOMEN-VENOUS SHUNT			X		
49427	INJECTION, ABDOMINAL SHUNT			X		
49428	LIGATION OF SHUNT			X		
49429	REMOVAL OF SHUNT			X		
49435	INSERT SUBQ EXTEN TO IP CATH	X		X		
49436	EMBEDDED IP CATH EXIT-SITE	X		X		
49440	PLACE GASTROSTOMY TUBE PERC			X		
49441	PLACE DUOD/JEJ TUBE PERC			X		
49442	PLACE CECOSTOMY TUBE PERC			X		
49446	CHANGE G-TUBE TO G-J PERC			X		
49450	REPLACE G/C TUBE PERC			X		
49451	REPLACE DUOD/JEJ TUBE PERC			X		
49452	REPLACE G-J TUBE PERC			X		
49460	FIX G/COLON TUBE W/DEVICE			X		
49465	FLUORO EXAM OF G/COLON TUBE			X		
49491	RPR HERN PREMIE REDUC	X	X	X		X
49492	RPR ING HERN PREMIE, BLOCKED	X	X	X		X
49495	RPR ING HERNIA BABY, REDUC	X	X	X		X
49496	RPR ING HERNIA BABY, BLOCKED	X	X	X		X
49500	RPR ING HERNIA, INIT, REDUCE	X	X	X		X
49501	RPR ING HERNIA, INIT BLOCKED	X	X	X		X
49505	PRP I/HERN INIT REDUC >5 YR	X	X	X		X
49507	PRP I/HERN INIT BLOCK >5 YR	X	X	X		X
49520	REREPAIR ING HERNIA, REDUCE	X	X	X		X
49521	REREPAIR ING HERNIA, BLOCKED	X	X	X		X
49525	REPAIR ING HERNIA, SLIDING	X	X	X		X
49540	REPAIR LUMBAR HERNIA	X	X	X		X
49550	RPR FEM HERNIA, INIT, REDUCE	X	X	X		X
49553	RPR FEM HERNIA, INIT BLOCKED	X	X	X		X
49555	REREPAIR FEM HERNIA, REDUCE	X	X	X		X
49557	REREPAIR FEM HERNIA, BLOCKED	X	X	X		X
49560	RPR VENTRAL HERN INIT, REDUC	X	X	X		X
49561	RPR VENTRAL HERN INIT, BLOCK	X	X	X		X
49565	REREPAIR VENTRAL HERN, REDUCE	X	X	X		X
49566	REREPAIR VENTRAL HERN, BLOCK	X	X	X		X
49568	HERNIA REPAIR W/MESH	X	X	X		X
49570	RPR EPIGASTRIC HERN, REDUCE	X	X	X		X
49572	RPR EPIGASTRIC HERN, BLOCKED	X	X	X		X
49580	RPR UMBIL HERN, REDUC <5 YR	X		X		
49582	RPR UMBIL HERN, BLOCK <5 YR	X		X		
49585	RPR UMBIL HERN, REDUC >5 YR	X		X		

Covered Surgery Code	Description	Modifier				Site (e.g., E1-E4)	Left/Right (LT or RT)
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)			
49587	RPR UMBIL HERN BLOCK > 5 YR	x		x			
49590	REPAIR SPIGELIAN HERNIA	x	x	x			x
49600	REPAIR UMBILICAL LESION	x		x			
49605	REPAIR UMBILICAL LESION	x		x			
49606	REPAIR UMBILICAL LESION	x		x			
49610	REPAIR UMBILICAL LESION	x		x			
49611	REPAIR UMBILICAL LESION	x		x			
49650	LAP ING HERNIA REPAIR INIT	x	x	x			x
49651	LAP ING HERNIA REPAIR RECUR	x	x	x			x
49652	LAP VENT/ABD HERNIA REPAIR	x	x	x			
49653	LAP VENT/ABD HERN PROC COMP	x	x	x			
49654	LAP INC HERNIA REPAIR	x	x	x			x
49655	LAP INC HERN REPAIR COMP	x	x	x			x
49656	LAP INC HERNIA REPAIR RECUR	x	x	x			x
49657	LAP INC HERN RECUR COMP	x	x	x			x
49659	LAPARO PROC. HERNIA REPAIR	x	x	x			
49900	REPAIR OF ABDOMINAL WALL	x		x			
49904	OMENTAL FLAP, EXTRA-ABDOM			x			
49905	OMENTAL FLAP	x		x			
49906	FREE OMENTAL FLAP, MICROVASC			x			
49999	ABDOMEN SURGERY PROCEDURE			x			
50010	EXPLORATION OF KIDNEY	x	x	x			x
50020	RENAL ABSCESS, OPEN DRAIN			x			x
50021	RENAL ABSCESS, PERCUT DRAIN	*		*			*
50040	DRAINAGE OF KIDNEY		x	x			x
50045	EXPLORATION OF KIDNEY	x	x	x			x
50060	REMOVAL OF KIDNEY STONE	x	x	x			x
50065	INCISION OF KIDNEY	x	x	x			x
50070	INCISION OF KIDNEY	x	x	x			x
50075	REMOVAL OF KIDNEY STONE	x	x	x			x
50080	REMOVAL OF KIDNEY STONE		x	x			x
50081	REMOVAL OF KIDNEY STONE	x	x	x			x
50100	REVISE KIDNEY BLOOD VESSELS	x	x	x			x
50120	EXPLORATION OF KIDNEY	x	x	x			x
50125	EXPLORE AND DRAIN KIDNEY	x	x	x			x
50130	REMOVAL OF KIDNEY STONE	x	x	x			x
50135	EXPLORATION OF KIDNEY	x	x	x			x
50200	BIOPSY OF KIDNEY		x	x			x
50205	BIOPSY OF KIDNEY	x	x	x			x
50220	REMOVE KIDNEY, OPEN	x	x	x			x
50225	REMOVAL KIDNEY OPEN, COMPLEX	x	x	x			x
50230	REMOVAL KIDNEY OPEN, RADICAL	x	x	x			x
50234	REMOVAL OF KIDNEY & URETER	x	x	x			x
50236	REMOVAL OF KIDNEY & URETER	x	x	x			x
50240	PARTIAL REMOVAL OF KIDNEY	x	x	x			x
50250	CRYOABLATE RENAL MASS OPEN	x		x			x
50280	REMOVAL OF KIDNEY LESION	x	x	x			x
50290	REMOVAL OF KIDNEY LESION	x		x			x
50320	REMOVE KIDNEY, LIVING DONOR		x	x			x
50323	PREP CADAVER RENAL ALLOGRAFT	x		x			x
50325	PREP DONOR RENAL GRAFT	x		x			x
50327	PREP RENAL GRAFT/VENOUS	x		x			x
50328	PREP RENAL GRAFT/ARTERIAL	x		x			x
50329	PREP RENAL GRAFT/URETERAL	x		x			x
50340	REMOVAL OF KIDNEY	x	x	x			x
50360	TRANSPLANTATION OF KIDNEY	x		x			x
50365	TRANSPLANTATION OF KIDNEY	x	x	x			x
50370	REMOVE TRANSPLANTED KIDNEY	x		x			
50380	REIMPLANTATION OF KIDNEY	x		x			
50382	CHANGE URETER STENT, PERCUT		x	x			x
50384	REMOVE URETER STENT, PERCUT		x	x			x
50385	CHANGE STENT VIA TRANSURETH		x	x			x
50386	REMOVE STENT VIA TRANSURETH		x	x			x
50387	CHANGE EXT/INT URETER STENT		x	x			x
50389	REMOVE RENAL TUBE W/FLUORO		x	x			x
50390	DRAINAGE OF KIDNEY LESION		x	x			x
50391	INSTILL RX AGNT INTO RNAL TUB		x	x			x
50392	INSERT KIDNEY DRAIN		x	x			x
50393	INSERT URETERAL TUBE		x	x			x
50394	INJECTION FOR KIDNEY X-RAY		x	x			x
50395	CREATE PASSAGE TO KIDNEY		x	x			x
50396	MEASURE KIDNEY PRESSURE		x	x			x
50398	CHANGE KIDNEY TUBE		x	x			x
50400	REVISION OF KIDNEY/URETER	x	x	x			x
50405	REVISION OF KIDNEY/URETER	x	x	x			x
50500	REPAIR OF KIDNEY WOUND	x		x			x
50520	CLOSE KIDNEY-SKIN FISTULA	x		x			x
50525	REPAIR RENAL-ABDOMEN FISTULA	x		x			x
50526	REPAIR RENAL-ABDOMEN FISTULA	x		x			x
50540	REVISION OF HORSESHOE KIDNEY	x		x			
50541	LAPARO ABLATE RENAL CYST	x	x	x			x
50542	LAPARO ABLATE RENAL MASS	x	x	x			x
50543	LAPARO PARTIAL NEPHRECTOMY	x	x	x			x
50544	LAPAROSCOPY, PYELOPLASTY	x	x	x			x
50545	LAPARO RADICAL NEPHRECTOMY	x	x	x			x
50546	LAPAROSCOPIC NEPHRECTOMY	x	x	x			x
50547	LAPARO REMOVAL DONOR KIDNEY	x	x	x			x
50548	LAPARO REMOVE W/URETER	x	x	x			x
50549	LAPAROSCOPE PROC, RENAL	x	x	x			
50551	KIDNEY ENDOSCOPY		x	x			x
50553	KIDNEY ENDOSCOPY		x	x			x
50555	KIDNEY ENDOSCOPY & BIOPSY		x	x			x
50557	KIDNEY ENDOSCOPY & TREATMENT		x	x			x
50561	KIDNEY ENDOSCOPY & TREATMENT		x	x			x
50562	RENAL SCOPE W/TUMOR RESECT	x		x			x
50570	KIDNEY ENDOSCOPY		x	x			x
50572	KIDNEY ENDOSCOPY		x	x			x
50574	KIDNEY ENDOSCOPY & BIOPSY		x	x			x
50575	KIDNEY ENDOSCOPY		x	x			x
50576	KIDNEY ENDOSCOPY & TREATMENT		x	x			x
50580	KIDNEY ENDOSCOPY & TREATMENT		x	x			x
50590	FRAGMENTING OF KIDNEY STONE		x	x			x
50592	PERC RE ABLATE RENAL TUMOR		x	x			x
50593	PERC CRYO ABLATE RENAL TUM	x		x			x
50600	EXPL ORATION OF URETER	x	x	x			x
50605	INSERT URETERAL SUPPORT	x	x	x			x

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
50610	REMOVAL OF URETER STONE	x	x	x		x
50620	REMOVAL OF URETER STONE	x	x	x		x
50630	REMOVAL OF URETER STONE	x	x	x		x
50650	REMOVAL OF URETER	x	x	x		x
50660	REMOVAL OF URETER	x		x		x
50684	INJECTION FOR URETER X-RAY		x	x		x
50686	MEASURE URETER PRESSURE			x		x
50688	CHANGE OF URETER TUBE/STENT			x		x
50690	INJECTION FOR URETER X-RAY			x		x
50700	REVISION OF URETER	x	x	x		x
50715	RELEASE OF URETER	x	x	x		x
50722	RELEASE OF URETER	x		x		x
50725	RELEASE/REVISE URETER	x		x		x
50727	REVISE URETER	x		x		x
50728	REVISE URETER	x		x		x
50740	FUSION OF URETER & KIDNEY	x		x		x
50750	FUSION OF URETER & KIDNEY	x		x		x
50760	FUSION OF URETERS	x		x		x
50770	SPLICING OF URETERS	x		x		
50780	REIMPLANT URETER IN BLADDER	x	x	x		x
50782	REIMPLANT URETER IN BLADDER	x	x	x		x
50783	REIMPLANT URETER IN BLADDER	x	x	x		x
50785	REIMPLANT URETER IN BLADDER	x	x	x		x
50800	IMPLANT URETER IN BOWEL	x	x	x		x
50810	FUSION OF URETER & BOWEL	x		x		x
50815	URINE SHUNT TO INTESTINE	x	x	x		x
50820	CONSTRUCT BOWEL BLADDER	x	x	x		x
50825	CONSTRUCT BOWEL BLADDER	x		x		
50830	REVISE URINE FLOW	x		x		x
50840	REPLACE URETER BY BOWEL	x	x	x		x
50845	APPENDICO-VESICOSTOMY	x		x		
50860	TRANSPLANT URETER TO SKIN	x	x	x		x
50900	REPAIR OF URETER	x	x	x		x
50920	CLOSURE URETER/SKIN FISTULA	x		x		x
50930	CLOSURE URETER/BOWEL FISTULA	x		x		x
50940	RELEASE OF URETER	x	x	x		x
50945	LAPAROSCOPY URETEROLITHOTOMY	x	x	x		x
50947	LAPARO NEW URETER/BLADDER	x	x	x		x
50948	LAPARO NEW URETER/BLADDER	x	x	x		x
50949	LAPAROSCOPE PROC. URETER	x	x	x		
50951	ENDOSCOPY OF URETER		x	x		x
50953	ENDOSCOPY OF URETER		x	x		x
50955	URETER ENDOSCOPY & BIOPSY		x	x		x
50957	URETER ENDOSCOPY & TREATMENT		x	x		x
50961	URETER ENDOSCOPY & TREATMENT		x	x		x
50970	URETER ENDOSCOPY		x	x		x
50972	URETER ENDOSCOPY & CATHETER		x	x		x
50974	URETER ENDOSCOPY & BIOPSY		x	x		x
50976	URETER ENDOSCOPY & TREATMENT		x	x		x
50980	URETER ENDOSCOPY & TREATMENT		x	x		x
51020	INCISE & TREAT BLADDER	x		x		
51030	INCISE & TREAT BLADDER			x		
51040	INCISE & DRAIN BLADDER	x		x		
51045	INCISE BLADDER/DRAIN URETER	x		x		x
51050	REMOVAL OF BLADDER STONE	x		x		
51060	REMOVAL OF URETER STONE	x		x		x
51065	REMOVE URETER CALCULUS			x		x
51080	DRAINAGE OF BLADDER ABSCESS	x		x		
51100	DRAIN BLADDER BY NEEDLE			x		
51101	DRAIN BLADDER BY TROCAR/CATH			x		
51102	DRAIN BL W/CATH INSERTION			x		
51500	REMOVAL OF BLADDER CYST	x		x		
51520	REMOVAL OF BLADDER LESION	x		x		
51525	REMOVAL OF BLADDER LESION	x		x		
51530	REMOVAL OF BLADDER LESION	x		x		
51535	REPAIR OF URETER LESION	x	x	x		x
51550	PARTIAL REMOVAL OF BLADDER	x		x		
51555	PARTIAL REMOVAL OF BLADDER	x		x		
51565	REVISE BLADDER & URETER(S)	x		x		
51570	REMOVAL OF BLADDER	x		x		
51575	REMOVAL OF BLADDER & NODES	x		x		
51580	REMOVE BLADDER/REVISE TRACT	x		x		
51585	REMOVAL OF BLADDER & NODES	x		x		
51590	REMOVE BLADDER/REVISE TRACT	x		x		
51595	REMOVE BLADDER/REVISE TRACT	x		x		
51596	REMOVE BLADDER/CREATE POUCH	x		x		
51597	REMOVAL OF PELVIC STRUCTURES	x		x		
51600	INJECTION FOR BLADDER X-RAY			x		
51605	PREPARATION FOR BLADDER XRAY			x		
51610	INJECTION FOR BLADDER X-RAY			x		
51700	IRRIGATION OF BLADDER			x		
51701	INSERT BLADDER CATHETER			x		
51702	INSERT TEMP BLADDER CATH			x		
51703	INSERT BLADDER CATH. COMPLEX			x		
51705	CHANGE OF BLADDER TUBE			x		
51710	CHANGE OF BLADDER TUBE			x		
51715	ENDOSCOPIC INJECTION/IMPLANT			x		
51720	TREATMENT OF BLADDER LESION			x		
51725	SIMPLE CYSTOMETROGRAM			x		
51726	COMPLEX CYSTOMETROGRAM			x		
51727	CYSTOMET ROGRAM W/UP			x		
51728	CYSTOMET ROGRAM W/UP			x		
51729	CYSTOMET ROGRAM W/UP & UP			x		
51736	URINE FLOW MEASUREMENT			x		
51741	ELECTRO-UROFLOWMETRY, FIRST			x		
51772	URETHRA PRESSURE PROFILE			x		
51784	ANAL/URINARY MUSCLE STUDY			x		
51785	ANAL/URINARY MUSCLE STUDY			x		
51792	URINARY REFLEX STUDY			x		
51795	URINE VOIDING PRESSURE STUDY			x		
51797	VOIDING PRESSURE STUDIES (V/P)			x		
51798	US URINE CAPACITY MEASURE			x		
51800	REVISION OF BLADDER/URETHRA	x		x		
51820	REVISION OF URINARY TRACT	x		x		
51840	ATTACH BLADDER/URETHRA	x		x		
51841	ATTACH BLADDER/URETHRA	x		x		

Covered Surgery Code	Description	Modifier				Site (e.g., E1-E4)	Left/Right (LT or RT)
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)			
51845	REPAIR BLADDER NECK	x		x			
51860	REPAIR OF BLADDER WOUND	x		x			
51865	REPAIR OF BLADDER WOUND	x		x			
51880	REPAIR OF BLADDER OPENING	x		x			
51900	REPAIR BLADDER/VAGINA LESION	x		x			
51920	CLOSE BLADDER-UTERUS FISTULA	x		x			
51925	HYSTERECTOMY/BLADDER REPAIR	x		x			
51940	CORRECTION OF BLADDER DEFECT	x		x			
51960	REVISION OF BLADDER & BOWEL	x		x			
51980	CONSTRUCT BLADDER OPENING	x		x			
51990	LAPARO URETHRAL SUSPENSION	x		x			
51992	LAPARO SLING OPERATION	x		x			
52000	CYSTOSCOPY			x			
52001	CYSTOSCOPY, REMOVAL OF CLOTS			x			
52005	CYSTOSCOPY & URETER CATHETER			x			x
52007	CYSTOSCOPY AND BIOPSY		x	x			x
52010	CYSTOSCOPY & DUCT CATHETER			x			x
52204	CYSTOSCOPY W/BIOPSY(S)			x			
52214	CYSTOSCOPY AND TREATMENT			x			
52224	CYSTOSCOPY AND TREATMENT			x			
52234	CYSTOSCOPY AND TREATMENT			x			
52235	CYSTOSCOPY AND TREATMENT			x			
52240	CYSTOSCOPY AND TREATMENT			x			
52250	CYSTOSCOPY AND RADIOTRACER			x			
52260	CYSTOSCOPY AND TREATMENT			x			
52265	CYSTOSCOPY AND TREATMENT			x			
52270	CYSTOSCOPY & REVISE URETHRA			x			
52275	CYSTOSCOPY & REVISE URETHRA			x			
52276	CYSTOSCOPY AND TREATMENT			x			
52277	CYSTOSCOPY AND TREATMENT			x			
52281	CYSTOSCOPY AND TREATMENT			x			
52282	CYSTOSCOPY, IMPLANT STENT			x			
52283	CYSTOSCOPY AND TREATMENT			x			
52285	CYSTOSCOPY AND TREATMENT			x			
52287	CYSTOSCOPY CHEMODENERVATION			x			
52290	CYSTOSCOPY AND TREATMENT			x			
52300	CYSTOSCOPY AND TREATMENT			x			
52301	CYSTOSCOPY AND TREATMENT			x			
52305	CYSTOSCOPY AND TREATMENT			x			
52310	CYSTOSCOPY AND TREATMENT			x			
52315	CYSTOSCOPY AND TREATMENT			x			
52317	REMOVE BLADDER STONE			x			
52318	REMOVE BLADDER STONE			x			
52320	CYSTOSCOPY AND TREATMENT		x	x			x
52325	CYSTOSCOPY, STONE REMOVAL		x	x			x
52327	CYSTOSCOPY, INJECT MATERIAL		x	x			x
52330	CYSTOSCOPY AND TREATMENT		x	x			x
52332	CYSTOSCOPY AND TREATMENT		x	x			x
52334	CREATE PASSAGE TO KIDNEY		x	x			x
52341	CYSTO W/URETER STRICTURE TX		x	x			x
52342	CYSTO W/UP STRICTURE TX		x	x			x
52343	CYSTO W/RENAL STRICTURE TX		x	x			x
52344	CYSTO/URETERO, STRICTURE TX		x	x			x
52345	CYSTO/URETERO W/UP STRICTURE		x	x			x
52346	CYSTOURETERO W/RENAL STRICT			x			x
52351	CYSTOURETERO & OR PYELOSCOPE			x			x
52352	CYSTOURETERO W/STONE REMOVE		x	x			x
52353	CYSTOURETERO W/LITHOTRIPSY		x	x			x
52354	CYSTOURETERO W/BIOPSY		x	x			x
52355	CYSTOURETERO W/EXCISE TUMOR		x	x			x
52356	CYSTOURETERO W/LITHOTRIPSY INS STENT		x	x			x
52400	CYSTOURETERO W/CONGEN REPR			x			
52402	CYSTOURETHRO CUT EJACUL DUCT			x			
52450	INCISION OF PROSTATE			x			
52500	REVISION OF BLADDER NECK			x			
52601	PROSTATECTOMY (TURP)			x			
52630	REMOVE PROSTATE REGROWTH			x			
52640	RELIEVE BLADDER CONTRACTURE			x			
52647	LASER SURGERY OF PROSTATE			x			
52648	LASER SURGERY OF PROSTATE			x			
52649	PROSTATE LASER ENUCLEATION			x			
52700	DRAINAGE OF PROSTATE ABSCESS			x			
53000	INCISION OF URETHRA			x			
53010	INCISION OF URETHRA			x			
53020	INCISION OF URETHRA			x			
53025	INCISION OF URETHRA			x			
53040	DRAINAGE OF URETHRA ABSCESS			x			
53060	DRAINAGE OF URETHRA ABSCESS			x			x
53080	DRAINAGE OF URINARY LEAKAGE			x			
53085	DRAINAGE OF URINARY LEAKAGE	x		x			
53200	BIOPSY OF URETHRA			x			
53210	REMOVAL OF URETHRA	x		x			
53215	REMOVAL OF URETHRA	x		x			
53220	TREATMENT OF URETHRA LESION			x			
53230	REMOVAL OF URETHRA LESION	x		x			
53235	REMOVAL OF URETHRA LESION	x		x			
53240	SURGERY FOR URETHRA POUCH			x			
53250	REMOVAL OF URETHRA GLAND			x			
53260	TREATMENT OF URETHRA LESION			x			
53265	TREATMENT OF URETHRA LESION			x			
53270	REMOVAL OF URETHRA GLAND			x			
53275	REPAIR OF URETHRA DEFECT			x			
53400	REVISE URETHRA, STAGE 1	x		x			
53405	REVISE URETHRA, STAGE 2	x		x			
53410	RECONSTRUCTION OF URETHRA	x		x			
53415	RECONSTRUCTION OF URETHRA	x		x			
53420	RECONSTRUCT URETHRA, STAGE 1			x			
53425	RECONSTRUCT URETHRA, STAGE 2	x		x			
53430	RECONSTRUCTION OF URETHRA	x		x			
53431	RECONSTRUCT URETHRA/BLADDER	x		x			
53440	MALE SLING PROCEDURE	x		x			
53442	REMOVE/REVISE MALE SLING	x		x			
53444	INSERT TANDEM CLIFF	x		x			
53445	INSERT UROVES NCK SPHINCTER	x		x			
53446	REMOVE URO SPHINCTER	x		x			
53447	REMOVE/REPLACE UR SPHINCTER	x		x			

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
53448	REMOV/REPLC UR SPHINCTR COMP	x		x		
53449	REPAIR URO SPHINCTER	x		x		
53450	REVISION OF URETHRA			x		
53460	REVISION OF URETHRA			x		
53500	URETHRLYS, TRANSVAG W/ SCOPE	x		x		
53502	REPAIR OF URETHRA INJURY			x		
53505	REPAIR OF URETHRA INJURY	x		x		
53510	REPAIR OF URETHRA INJURY	x		x		
53515	REPAIR OF URETHRA INJURY	x		x		
53520	REPAIR OF URETHRA DEFECT			x		
53600	DILATE URETHRA STRICTURE			x		
53601	DILATE URETHRA STRICTURE			x		
53605	DILATE URETHRA STRICTURE			x		
53620	DILATE URETHRA STRICTURE			x		
53621	DILATE URETHRA STRICTURE			x		
53660	DILATION OF URETHRA			x		
53661	DILATION OF URETHRA			x		
53665	DILATION OF URETHRA			x		
53850	PROSTATIC MICROWAVE THERMOTX			x		
53852	PROSTATIC RF THERMOTX			x		
53855	NSERT PROST URETHRAL STENT			x		
53860	TRURL RF FEMALE BLADDER NECK STRS URIN INCONT			x		
53899	UROLOGY SURGERY PROCEDURE			x		
54000	SLITTING OF PREPUCE			x		
54001	SLITTING OF PREPUCE			x		
54015	DRAIN PENIS LESION			x		
54050	DESTRUCTION, PENIS LESION(S)			x		
54055	DESTRUCTION, PENIS LESION(S)			x		
54056	CRYOSURGERY, PENIS LESION(S)			x		
54057	LASER SURG, PENIS LESION(S)			x		
54060	EXCISION OF PENIS LESION(S)			x		
54065	DESTRUCTION, PENIS LESION(S)			x		
54100	BIOPSY OF PENIS			x		
54105	BIOPSY OF PENIS			x		
54110	TREATMENT OF PENIS LESION	x		x		
54111	TREAT PENIS LESION, GRAFT	x		x		
54112	TREAT PENIS LESION, GRAFT	x		x		
54115	TREATMENT OF PENIS LESION	x		x		
54120	PARTIAL REMOVAL OF PENIS	x		x		
54125	REMOVAL OF PENIS	x		x		
54130	REMOVE PENIS & NODES	x		x		
54135	REMOVE PENIS & NODES	x		x		
54150	CIRCUMCISION W/REGIONL BLOCK			x		
54160	CIRCUMCISION, NEONATE			x		
54161	CIRCUM 28 DAYS OR OLDER			x		
54162	LYSIS PENIL CIRCUMIC LESION			x		
54163	REPAIR OF CIRCUMCISION			x		
54164	FRENULOTOMY OF PENIS			x		
54200	TREATMENT OF PENIS LESION			x		
54205	TREATMENT OF PENIS LESION	x		x		
54220	TREATMENT OF PENIS LESION			x		
54230	PREPARE PENIS STUDY			x		
54231	DYNAMIC CAVERNOSOMETRY			x		
54235	PENILE INJECTION			x		
54300	REVISION OF PENIS	x		x		
54304	REVISION OF PENIS	x		x		
54308	RECONSTRUCTION OF URETHRA	x		x		
54312	RECONSTRUCTION OF URETHRA	x		x		
54316	RECONSTRUCTION OF URETHRA	x		x		
54318	RECONSTRUCTION OF URETHRA	x		x		
54322	RECONSTRUCTION OF URETHRA	x		x		
54324	RECONSTRUCTION OF URETHRA	x		x		
54326	RECONSTRUCTION OF URETHRA	x		x		
54328	REVISE PENIS/URETHRA	x		x		
54332	REVISE PENIS/URETHRA	x		x		
54336	REVISE PENIS/URETHRA	x		x		
54340	SECONDARY URETHRAL SURGERY	x		x		
54344	SECONDARY URETHRAL SURGERY	x		x		
54348	SECONDARY URETHRAL SURGERY	x		x		
54352	RECONSTRUCT URETHRA/PENIS	x		x		
54360	PENIS PLASTIC SURGERY	x		x		
54380	REPAIR PENIS	x		x		
54385	REPAIR PENIS	x		x		
54390	REPAIR PENIS AND BLADDER	x		x		
54400	INSERT SEMI-RIGID PROSTHESIS			x		
54401	INSERT SELF-CONTD PROSTHESIS			x		
54405	INSERT MULTI-COMP PENIS PROS	x		x		
54406	REMOVE MUTI-COMP PENIS PROS	x		x		
54408	REPAIR MULTI-COMP PENIS PROS	x		x		
54410	REMOVE/REPLACE PENIS PROSTH	x		x		
54411	REMOV/REPLC PENIS PROS, COMP	x		x		
54415	REMOVE SELF-CONTD PENIS PROS	x		x		
54416	REMOV/REPLC PENIS CONTAIN PROS	x		x		
54417	REMOV/REPLC PENIS PROS, COMPL	x		x		
54420	REVISION OF PENIS	x		x		
54430	REVISION OF PENIS	x		x		
54435	REVISION OF PENIS			x		
54440	REPAIR OF PENIS	x		x		
54450	PREPUTIAL STRETCHING			x		
54500	BIOPSY OF TESTIS		x	x		x
54505	BIOPSY OF TESTIS		x	x		x
54512	EXCISE LESION TESTIS		x	x		x
54520	REMOVAL OF TESTIS		x	x		x
54522	ORCHIECTOMY, PARTIAL	x	x	x		x
54530	REMOVAL OF TESTIS	x	x	x		x
54535	EXTENSIVE TESTIS SURGERY	x	x	x		x
54550	EXPLORATION FOR TESTIS	x	x	x		x
54560	EXPLORATION FOR TESTIS	x	x	x		x
54600	REDUCE TESTIS TORSION		x	x		x
54620	SUSPENSION OF TESTIS		x	x		x
54640	SUSPENSION OF TESTIS		x	x		x
54650	ORCHIOPEXY (FOWLER-STEPHENS)	x	x	x		x
54660	REVISION OF TESTIS		x	x		x
54670	REPAIR TESTIS INJURY		x	x		x
54680	RELOCATION OF TESTIS(ES)	x	x	x		x
54690	LAPAROSCOPY, ORCHIECTOMY	x	x	x		x

Covered Surgery Code	Description	Modifier				Site (e.g., E1-E4)	Left/Right (LT or RT)
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)			
54692	LAPAROSCOPY, ORCHIOPEXY		X	X			X
54699	LAPAROSCOPE PROC. TESTIS	X	X	X			
54700	DRAINAGE OF SCROTUM		X	X			
54800	BIOPSY OF EPIDIDYMIS		X	X			X
54830	REMOVE EPIDIDYMIS LESION		X	X			X
54840	REMOVE EPIDIDYMIS LESION		X	X			X
54860	REMOVAL OF EPIDIDYMIS			X			
54861	REMOVAL OF EPIDIDYMIS			X			
54865	EXPLORE EPIDIDYMIS			X			X
54900	FUSION OF SPERMATIC DUCTS			X			
54901	FUSION OF SPERMATIC DUCTS			X			
55000	DRAINAGE OF HYDROCELE		X	X			X
55040	REMOVAL OF HYDROCELE			X			
55041	REMOVAL OF HYDROCELES			X			
55060	REPAIR OF HYDROCELE		X	X			X
55100	DRAINAGE OF SCROTUM ABSCESS			X			
55110	EXPLORE SCROTUM			X			
55120	REMOVAL OF SCROTUM LESION			X			
55150	REMOVAL OF SCROTUM	X		X			
55175	REVISION OF SCROTUM			X			
55180	REVISION OF SCROTUM			X			
55200	INCISION OF SPERM DUCT			X			
55250	REMOVAL OF SPERM DUCT(S)			X			
55300	PREPARE, SPERM DUCT X-RAY			X			
55400	REPAIR OF SPERM DUCT	X	X	X			X
55450	LIGATION OF SPERM DUCT			X			
55500	REMOVAL OF HYDROCELE		X	X			X
55520	REMOVAL OF SPERM CORD LESION	X	X	X			X
55530	REVISE SPERMATIC CORD VEINS		X	X			X
55535	REVISE SPERMATIC CORD VEINS	X	X	X			X
55540	REVISE HERNIA & SPERM VEINS		X	X			X
55550	LAPARO LIGATE SPERMATIC VEIN	X	X	X			X
55559	LAPARO PROC. SPERMATIC CORD	X	X	X			
55600	INCISE SPERM DUCT POUCH		X	X			X
55605	INCISE SPERM DUCT POUCH		X	X			X
55650	REMOVE SPERM DUCT POUCH	X	X	X			X
55680	REMOVE SPERM POUCH LESION		X	X			
55700	BIOPSY OF PROSTATE			X			
55705	BIOPSY OF PROSTATE			X			
55706	PROSTATE SATURATION SAMPLING	X		X			
55720	DRAINAGE OF PROSTATE ABSCESS	X		X			
55725	DRAINAGE OF PROSTATE ABSCESS	X		X			
55801	REMOVAL OF PROSTATE	X		X			
55810	EXTENSIVE PROSTATE SURGERY	X		X			
55812	EXTENSIVE PROSTATE SURGERY	X		X			
55815	EXTENSIVE PROSTATE SURGERY	X		X			
55821	REMOVAL OF PROSTATE	X		X			
55831	REMOVAL OF PROSTATE	X		X			
55840	EXTENSIVE PROSTATE SURGERY	X		X			
55842	EXTENSIVE PROSTATE SURGERY	X		X			
55845	EXTENSIVE PROSTATE SURGERY	X		X			
55860	SURGICAL EXPOSURE, PROSTATE			X			
55862	EXTENSIVE PROSTATE SURGERY	X		X			
55865	EXTENSIVE PROSTATE SURGERY	X		X			
55866	LAPARO RADICAL PROSTATECTOMY	X		X			
55873	CRYOABLATE PROSTATE			X			
55875	TRANSPERI NEEDLE PLACE, PROS			X			
55876	PLACE RT DEVICE/MARKER, PROS			X			
55899	GENITAL SURGERY PROCEDURE			X			
55920	PLACE NEEDLES PELVIC FOR RT			X			
56405	I & D OF VULVA/PERINEUM			X			
56420	DRAINAGE OF GLAND ABSCESS			X			X
56440	SURGERY FOR VULVA LESION			X			X
56441	LYSIS OF LABIAL LESION(S)			X			
56442	HYMENOTOMY			X			
56501	DESTROY, VULVA LESIONS, SIM			X			
56515	DESTROY VULVA LESION/S COMPL			X			
56605	BIOPSY OF VULVA/PERINEUM			X			
56620	PARTIAL REMOVAL OF VULVA	X		X			
56625	COMPLETE REMOVAL OF VULVA	X		X			
56630	EXTENSIVE VULVA SURGERY	X		X			
56631	EXTENSIVE VULVA SURGERY	X		X			
56632	EXTENSIVE VULVA SURGERY	X		X			
56633	EXTENSIVE VULVA SURGERY	X		X			
56634	EXTENSIVE VULVA SURGERY	X		X			
56637	EXTENSIVE VULVA SURGERY	X		X			
56640	EXTENSIVE VULVA SURGERY	X	X	X			X
56700	PARTIAL REMOVAL OF HYMEN	X		X			
56740	REMOVE VAGINA GLAND LESION		X	X			
56800	REPAIR OF VAGINA	X		X			
56805	REPAIR CLITORIS	X		X			
56810	REPAIR OF PERINEUM	X		X			
56820	EXAM OF VULVA W/SCOPE			X			
56821	EXAM/BIOPSY OF VULVA W/SCOPE			X			
57000	EXPLORATION OF VAGINA			X			
57010	DRAINAGE OF PELVIC ABSCESS			X			
57020	DRAINAGE OF PELVIC FLUID			X			
57022	I & D VAGINAL HEMATOMA, PP			X			
57023	I & D VAG HEMATOMA, NON-OB			X			
57061	DESTROY VAG LESIONS, SIMPLE			X			
57065	DESTROY VAG LESIONS, COMPLEX			X			
57100	BIOPSY OF VAGINA			X			
57105	BIOPSY OF VAGINA			X			
57106	REMOVE VAGINA WALL, PARTIAL	X		X			
57107	REMOVE VAGINA TISSUE, PART			X			
57109	VAGINECTOMY PARTIAL W/NODES	X		X			
57110	REMOVE VAGINA WALL, COMPLETE	X		X			
57111	REMOVE VAGINA TISSUE, COMPL	X		X			
57112	VAGINECTOMY W/NODES, COMPL	X		X			
57120	CLOSURE OF VAGINA	X		X			
57130	REMOVE VAGINA LESION	X		X			
57135	REMOVE VAGINA LESION			X			
57150	TREAT VAGINA INFECTION			X			
57155	INSERT UTERI TANDEMS/OVOIDS			X			
57156	INSJ VAGINAL RADIATION DEVICE			X			
57160	INSERT PESSARY/OTHER DEVICE			X			

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
57170	FITTING OF DIAPHRAGM/CAP			X		
57180	TREAT VAGINAL BLEEDING			X		
57200	REPAIR OF VAGINA	X		X		
57210	REPAIR VAGINA/PERINEUM	X		X		
57220	REVISION OF URETHRA	X		X		
57230	REPAIR OF URETHRAL LESION	X		X		
57240	REPAIR BLADDER & VAGINA	X		X		
57250	REPAIR RECTUM & VAGINA	X		X		
57260	REPAIR OF VAGINA	X		X		
57265	EXTENSIVE REPAIR OF VAGINA	X		X		
57267	INSERT PROSTH REPAIR PELVIC FLOOR EA VAG			X		
57268	REPAIR OF BOWEL BULGE	X		X		
57270	REPAIR OF BOWEL POUCH	X		X		
57280	SUSPENSION OF VAGINA	X		X		
57282	COLPOPEXY, EXTRAPERITONEAL	X		X		
57283	COLPOPEXY, INTRAPERITONEAL	X		X		
57284	REPAIR PARAVAG DEFECT, OPEN	X		X		
57285	REPAIR PARAVAG DEFECT, VAG	X		X		
57287	REVISE/REMOVE SLING REPAIR	X		X		
57288	REPAIR BLADDER DEFECT	X		X		
57289	REPAIR BLADDER & VAGINA	X		X		
57291	CONSTRUCTION OF VAGINA	X		X		
57292	CONSTRUCT VAGINA WITH GRAFT	X		X		
57295	REVISE VAG GRAFT VIA VAGINA	X		X		
57296	REVISE VAG GRAFT, OPEN ABD	X		X		
57300	REPAIR RECTUM-VAGINA FISTULA	X		X		
57305	REPAIR RECTUM-VAGINA FISTULA	X		X		
57307	FISTULA REPAIR & COLOSTOMY	X		X		
57308	FISTULA REPAIR, TRANSPERINE	X		X		
57310	REPAIR URETHROVAGINAL LESION	X		X		
57311	REPAIR URETHROVAGINAL LESION	X		X		
57320	REPAIR BLADDER-VAGINA LESION	X		X		
57330	REPAIR BLADDER-VAGINA LESION	X		X		
57335	REPAIR VAGINA	X		X		
57400	DILATION OF VAGINA			X		
57410	PELVIC EXAMINATION			X		
57415	REMOVE VAGINAL FOREIGN BODY			X		
57420	EXAM OF VAGINA W/SCOPE			X		
57421	EXAM/BIOPSY OF VAG W/SCOPE			X		
57423	REPAIR PARAVAG DEFECT, LAP	X		X		
57425	LAPAROSCOPY, SURG, COLPOPEXY	X		X		
57426	REVISE PROSTH VAG GRAFT LAP	X		X		
57452	EXAM OF CERVIX W/SCOPE			X		
57454	BX/CURETT OF CERVIX W/SCOPE			X		
57455	BIOPSY OF CERVIX W/SCOPE			X		
57456	ENDOCERV CURETTAGE W/SCOPE			X		
57460	BX OF CERVIX W/SCOPE, LEEP			X		
57461	CONZ OF CERVIX W/SCOPE, LEEP			X		
57500	BIOPSY OF CERVIX			X		
57505	ENDOCERVICAL CURETTAGE			X		
57510	CAUTERIZATION OF CERVIX			X		
57511	CRYOCAUTERY OF CERVIX			X		
57513	LASER SURGERY OF CERVIX			X		
57520	CONIZATION OF CERVIX			X		
57522	CONIZATION OF CERVIX			X		
57530	REMOVAL OF CERVIX	X		X		
57531	REMOVAL OF CERVIX, RADICAL	X		X		
57540	REMOVAL OF RESIDUAL CERVIX	X		X		
57545	REMOVE CERVIX/REPAIR PELVIS	X		X		
57550	REMOVAL OF RESIDUAL CERVIX	X		X		
57555	REMOVE CERVIX/REPAIR VAGINA	X		X		
57556	REMOVE CERVIX, REPAIR BOWEL	X		X		
57558	D&C OF CERVICAL STUMP			X		
57700	REVISION OF CERVIX			X		
57720	REVISION OF CERVIX	X		X		
57800	DILATION OF CERVICAL CANAL			X		
58100	BIOPSY OF UTERUS LINING			X		
58120	DILATION AND CURETTAGE			X		
58140	MYOMECTOMY ABDOM METHOD	X		X		
58145	MYOMECTOMY VAG METHOD	X		X		
58146	MYOMECTOMY ABDOM COMPLEX	X		X		
58150	TOTAL HYSTERECTOMY	X		X		
58152	TOTAL HYSTERECTOMY	X		X		
58180	PARTIAL HYSTERECTOMY	X		X		
58200	EXTENSIVE HYSTERECTOMY	X		X		
58210	EXTENSIVE HYSTERECTOMY	X		X		
58240	REMOVAL OF PELVIS CONTENTS	X		X		
58260	VAGINAL HYSTERECTOMY	X		X		
58262	VAG HYST INCLUDING T/O	X		X		
58263	VAG HYST W/T/O & VAG REPAIR	X		X		
58267	VAG HYST W/URINARY REPAIR	X		X		
58270	VAG HYST W/ENTEROCLE REPAIR	X		X		
58275	HYSTERECTOMY/REVISE VAGINA	X		X		
58280	HYSTERECTOMY/REVISE VAGINA	X		X		
58285	EXTENSIVE HYSTERECTOMY	X		X		
58290	VAG HYST COMPLEX	X		X		
58291	VAG HYST INCL T/O, COMPLEX	X		X		
58292	VAG HYST T/O & REPAIR, COMPL	X		X		
58293	VAG HYST W/URO REPAIR, COMPL	X		X		
58294	VAG HYST W/ENTEROCLE, COMPL	X		X		
58301	REMOVE INTRAUTERINE DEVICE			X		
58340	CATHETER FOR HYSTEROGRAPHY			X		
58346	INSERT HEYMAN UTERI CAPSULE			X		
58353	ENDOMETRIAL ABLATE, THERMAL			X		
58356	ENDOMETRIAL CRYOABLATION	X		X		
58400	SUSPENSION OF UTERUS	X		X		
58410	SUSPENSION OF UTERUS	X		X		
58520	REPAIR OF RUPTURED UTERUS	X		X		
58540	REVISION OF UTERUS	X		X		
58541	LSH, UTERUS 250 G OR LESS	X		X		
58542	LSH W/T/O UT 250 G OR LESS	X		X		
58543	LSH UTERUS ABOVE 250 G	X		X		
58544	LSH W/T/O UTERUS ABOVE 250 G	X		X		
58545	LAPAROSCOPIC MYOMECTOMY	X		X		
58546	LAPARO-MYOMECTOMY, COMPLEX	X		X		
58548	LAP RADICAL HYST	X		X		

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
58550	LAPARO-ASST VAG HYSTERECTOMY	x		x		
58552	LAPARO-VAG HYST INCL T/O	x		x		
58553	LAPARO-VAG HYST COMPLEX	x		x		
58554	LAPARO-VAG HYST W/T/O COMPL	x		x		
58555	HYSTEROSCOPY, DX, SEP PROC			x		
58558	HYSTEROSCOPY, BIOPSY			x		
58559	HYSTEROSCOPY, LYSIS			x		
58560	HYSTEROSCOPY, RESECT SEPTUM	x		x		
58561	HYSTEROSCOPY, REMOVE MYOMA			x		
58562	HYSTEROSCOPY, REMOVE FB			x		
58563	HYSTEROSCOPY, ABLATION			x		
58565	HYSTEROSCOPY, STERILIZATION			x		
58570	TLH, UTERUS 250 G OR LESS	x		x		
58571	TLH W/T/O 250 G OR LESS	x		x		
58572	TLH, UTERUS OVER 250 G	x		x		
58573	TLH W/T/O UTERUS OVER 250 G	x		x		
58578	LAPARO PROC, UTERUS	x	x	x		
58579	HYSTEROSCOPE PROCEDURE	x	x	x		
58600	DIVISION OF FALLOPIAN TUBE	x		x		
58605	DIVISION OF FALLOPIAN TUBE	x		x		
58611	LIGATE OVIDUCT(S) ADD-ON	x		x		
58615	OCCLUDE FALLOPIAN TUBE(S)	x		x		
58660	LAPAROSCOPY, LYSIS	x		x		
58661	LAPAROSCOPY, REMOVE ADNEXA	x	x	x		
58662	LAPAROSCOPY, EXCISE LESIONS	x		x		
58670	LAPAROSCOPY, TUBAL CAUTERY			x		
58671	LAPAROSCOPY, TUBAL BLOCK			x		
58672	LAPAROSCOPY, FIMBRIOPLASTY	x	x	x		x
58673	LAPAROSCOPY, SALPINGOSTOMY	x	x	x		x
58679	LAPARO PROC, OVIDUCT-OVARY	x	x	x		
58700	REMOVAL OF FALLOPIAN TUBE	x		x		
58720	REMOVAL OF OVARY/TUBE(S)	x		x		
58740	ADHESIOLYSIS TUBE, OVARY	x		x		
58800	DRAINAGE OF OVARIAN CYST(S)			x		
58805	DRAINAGE OF OVARIAN CYST(S)	x		x		
58820	DRAIN OVARY ABSCESS, OPEN	x	x	x		
58822	DRAIN OVARY ABSCESS, PERCUT	x	x	x		
58823	DRAIN PELVIC ABSCESS, PERCUT			x		x
58825	TRANSPOSITION, OVARY(S)	x		x		
58900	BIOPSY OF OVARY(S)	x		x		
58920	PARTIAL REMOVAL OF OVARY(S)	x		x		
58925	REMOVAL OF OVARIAN CYST(S)	x		x		
58940	REMOVAL OF OVARY(S)	x		x		
58943	REMOVAL OF OVARY(S)	x		x		
58950	RESECT OVARIAN MALIGNANCY			x		
58951	RESECT OVARIAN MALIGNANCY			x		
58952	RESECT OVARIAN MALIGNANCY			x		
58953	TAH, RAD DISSECT FOR DEBULK	x		x		
58954	TAH RAD DEBULK LYMPH REMOVE	x		x		
58956	BSO, OMENECTOMY W/TAH	x		x		
58957	RESECT RECURRENT GYN MAL	x		x		
58958	RESECT RECUR GYN MAL W/LYM	x		x		
58960	EXPLORATION OF ABDOMEN	x		x		
58999	GENITAL SURGERY PROCEDURE			x		
59000	AMNIOCENTESIS, DIAGNOSTIC			x		
59001	AMNIOCENTESIS, THERAPEUTIC			x		
59012	FETAL CORD PUNCTURE, PRENATAL			x		
59015	CHORION BIOPSY			x		
59030	FETAL SCALP BLOOD SAMPLE			x		
59050	INITIATE/SUPERVISE FETAL MONIT LABOR			x		
59051	FETAL MONITOR INTERPRETATION ONLY			x		
59070	TRANSABDOM AMNIOINFUS W/US	x		x		
59072	UMBILICAL CORD OCCLUD W/US			x		
59074	FETAL FLUID DRAINAGE W/US	x		x		
59076	FETAL SHUNT PLACEMENT, W/US	x		x		
59100	REMOVE UTERUS LESION	x		x		
59120	TREAT ECTOPIC PREGNANCY	x		x		
59121	TREAT ECTOPIC PREGNANCY	x		x		
59130	TREAT ECTOPIC PREGNANCY			x		
59135	TREAT ECTOPIC PREGNANCY			x		
59136	TREAT ECTOPIC PREGNANCY	x		x		
59140	TREAT ECTOPIC PREGNANCY	x		x		
59150	TREAT ECTOPIC PREGNANCY	x		x		
59151	TREAT ECTOPIC PREGNANCY	x		x		
59160	D & C AFTER DELIVERY			x		
59200	INSERT CERVICAL DILATOR			x		
59300	EPISIOTOMY OR VAGINAL REPAIR			x		
59320	REVISION OF CERVIX			x		
59325	REVISION OF CERVIX			x		
59350	REPAIR OF UTERUS	x		x		
59409	OBSTETRICAL CARE			x		
59410	OBSTETRICAL CARE			x		
59412	EXTERNAL CEPHAL VERSION, WWWO TOGYSIS			x		
59414	DELIVER PLACENTA			x		
59430	CARE AFTER DELIVERY			x		
59514	CESAREAN DELIVERY ONLY	x		x		
59515	CESAREAN DELIVERY			x		
59525	HYSTERECTOMY AFTER CESAREAN	x		x		
59612	VBAC DELIVERY ONLY			x		
59614	VBAC CARE AFTER DELIVERY			x		
59620	ATTEMPTED VBAC DELIVERY ONLY	x		x		
59622	ATTEMPTED VBAC AFTER CARE			x		
59812	TREATMENT OF MISCARRIAGE			x		
59820	CARE OF MISCARRIAGE			x		
59821	TREATMENT OF MISCARRIAGE			x		
59830	TREAT UTERUS INFECTION			x		
59840	ABORTION			x		
59841	ABORTION			x		
59850	ABORTION			x		
59851	ABORTION			x		
59852	ABORTION			x		
59855	ABORTION			x		
59856	ABORTION			x		
59857	ABORTION			x		
59870	EVACUATE MOLE OF UTERUS	x		x		
59871	REMOVE CERCLAGE SUTURE			x		

Covered Surgery Code	Description	Modifier				Site (e.g., E1-E4)	Left/Right (LT or RT)
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)			
59897	FETAL INVAS PX W/US			X			
59898	LAPARO PROC. OB CARE/DELIVER	X	X	X			
59899	MATERNITY CARE PROCEDURE	X		X			
60000	DRAIN THYROID/TONGUE CYST			X			
60100	BIOPSY OF THYROID			X			
60200	REMOVE THYROID LESION	X		X			
60210	PARTIAL THYROID EXCISION	X		X			
60212	PARTIAL THYROID EXCISION	X		X			
60220	PARTIAL REMOVAL OF THYROID	X		X			
60225	PARTIAL REMOVAL OF THYROID	X		X			
60240	REMOVAL OF THYROID	X		X			
60252	REMOVAL OF THYROID	X		X			
60254	EXTENSIVE THYROID SURGERY	X		X			
60260	REPEAT THYROID SURGERY	X	X	X			X
60270	REMOVAL OF THYROID	X		X			
60271	REMOVAL OF THYROID	X		X			
60280	REMOVE THYROID DUCT LESION	X		X			
60281	REMOVE THYROID DUCT LESION	X		X			
60300	ASPIR/INJ THYROID CYST			X			
60500	EXPLORE PARATHYROID GLANDS	X		X			
60502	RE-EXPLORE PARATHYROID	X		X			
60505	EXPLORE PARATHYROID GLANDS	X		X			
60520	REMOVAL OF THYMUS GLAND	X		X			
60521	REMOVAL OF THYMUS GLAND	X		X			
60522	REMOVAL OF THYMUS GLAND	X		X			
60540	EXPLORE ADRENAL GLAND	X	X	X			X
60545	EXPLORE ADRENAL GLAND	X	X	X			X
60600	REMOVE CAROTID BODY LESION	X		X			X
60605	REMOVE CAROTID BODY LESION	X		X			X
60650	LAPAROSCOPY ADRENALECTOMY	X	X	X			X
60659	LAPARO PROC. ENDOCRINE	X	X	X			
60699	ENDOCRINE SURGERY PROCEDURE	X		X			
61000	REMOVE CRANIAL CAVITY FLUID			X			X
61001	REMOVE CRANIAL CAVITY FLUID			X			X
61020	REMOVE BRAIN CAVITY FLUID			X			
61026	INJECTION INTO BRAIN CANAL			X			
61050	REMOVE BRAIN CANAL FLUID			X			
61070	BRAIN CANAL SHUNT PROCEDURE			X			
61105	TWIST DRILL HOLE			X			
61108	DRILL SKULL FOR DRAINAGE			X			
61120	BURR HOLE FOR PUNCTURE			X			X
61140	PIERCE SKULL FOR BIOPSY	X		X			X
61150	PIERCE SKULL FOR DRAINAGE			X			
61151	PIERCE SKULL FOR DRAINAGE			X			
61154	PIERCE SKULL & REMOVE CLOT	X	X	X			X
61156	PIERCE SKULL FOR DRAINAGE	X		X			
61210	PIERCE SKULL IMPLANT DEVICE			X			
61215	INSERT BRAIN-FLUID DEVICE			X			
61250	PIERCE SKULL & EXPLORE	X	X	X			X
61253	PIERCE SKULL & EXPLORE	X		X			X
61304	OPEN SKULL FOR EXPLORATION	X		X			X
61305	OPEN SKULL FOR EXPLORATION	X		X			
61312	OPEN SKULL FOR DRAINAGE	X		X			X
61313	OPEN SKULL FOR DRAINAGE	X		X			X
61314	OPEN SKULL FOR DRAINAGE	X		X			
61315	OPEN SKULL FOR DRAINAGE	X		X			
61316	IMPLT CRANIAL FLAP TO ABDQ			X			
61320	OPEN SKULL FOR DRAINAGE	X		X			X
61321	OPEN SKULL FOR DRAINAGE	X		X			
61322	DECOMPRESSIVE CRANIOTOMY	X		X			X
61323	DECOMPRESSIVE LOBECTOMY			X			
61330	DECOMPRESS EYE SOCKET	X	X	X			X
61332	EXPLORE/BOPSY EYE SOCKET	X	X	X			X
61333	EXPLORE ORBIT/REMOVE LESION	X	X	X			X
61334	EXPLORE ORBIT/REMOVE OBJECT	X	X	X			X
61340	SUBTEMPORAL DECOMPRESSION	X	X	X			X
61343	INCISE SKULL (PRESS RELIEF)	X		X			
61345	RELIEVE CRANIAL PRESSURE	X		X			
61440	INCISE SKULL FOR SURGERY	X		X			
61450	INCISE SKULL FOR SURGERY	X		X			
61458	INCISE SKULL FOR BRAIN WOUND	X		X			X
61460	INCISE SKULL FOR SURGERY	X		X			X
61470	INCISE SKULL FOR SURGERY	X		X			
61480	INCISE SKULL FOR SURGERY	X		X			
61490	INCISE SKULL FOR SURGERY	X	X	X			X
61500	REMOVAL OF SKULL LESION	X		X			X
61501	REMOVE INFECTED SKULL BONE	X		X			X
61510	REMOVAL OF BRAIN LESION	X		X			X
61512	REMOVE BRAIN LINING LESION	X		X			X
61514	REMOVAL OF BRAIN ABSCESS	X		X			X
61516	REMOVAL OF BRAIN LESION	X		X			X
61517	IMPLT BRAIN CHEMOTX ADD-ON			X			
61518	REMOVAL OF BRAIN LESION	X		X			
61519	REMOVE BRAIN LINING LESION	X		X			
61520	REMOVAL OF BRAIN LESION	X		X			
61521	REMOVAL OF BRAIN LESION	X		X			
61522	REMOVAL OF BRAIN ABSCESS	X		X			
61524	REMOVAL OF BRAIN LESION	X		X			
61526	REMOVAL OF BRAIN LESION			X			X
61530	REMOVAL OF BRAIN LESION			X			X
61531	IMPLANT BRAIN ELECTRODES	X		X			
61533	IMPLANT BRAIN ELECTRODES	X		X			
61534	REMOVAL OF BRAIN LESION	X		X			X
61535	REMOVE BRAIN ELECTRODES	X		X			X
61536	REMOVAL OF BRAIN LESION	X		X			X
61537	REMOVAL OF BRAIN TISSUE	X		X			X
61538	REMOVAL OF BRAIN TISSUE	X		X			
61539	REMOVAL OF BRAIN TISSUE	X		X			X
61540	REMOVAL OF BRAIN TISSUE	X		X			X
61541	INCISION OF BRAIN TISSUE	X		X			
61542	REMOVAL OF BRAIN TISSUE	X		X			
61543	REMOVAL OF BRAIN TISSUE	X		X			
61544	REMOVE & TREAT BRAIN LESION	X		X			
61545	EXCISION OF BRAIN TUMOR	X		X			
61546	REMOVAL OF PITUITARY GLAND	X		X			
61548	REMOVAL OF PITUITARY GLAND	X		X			

Covered Surgery Code	Description	Modifier				Site (e.g., E1-E4)	Left/Right (LT or RT)
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)			
61550	RELEASE OF SKULL SEAMS	x		x			
61552	RELEASE OF SKULL SEAMS	x		x			
61556	INCISE SKULL/SUTURES	x		x			x
61557	INCISE SKULL/SUTURES	x		x			
61558	EXCISION OF SKULL/SUTURES	x		x			
61559	EXCISION OF SKULL/SUTURES	x		x			
61563	EXCISION OF SKULL TUMOR	x		x			
61564	EXCISION OF SKULL TUMOR	x	x	x			x
61566	REMOVAL OF BRAIN TISSUE	x		x			
61567	INCISION OF BRAIN TISSUE	x		x			
61570	REMOVE FOREIGN BODY, BRAIN	x		x			
61571	INCISE SKULL FOR BRAIN WOUND	x		x			
61575	SKULL BASE/BRAINSTEM SURGERY	x		x			
61576	SKULL BASE/BRAINSTEM SURGERY	x		x			
61580	CRANIOFACIAL APPROACH, SKULL		x	x			x
61581	CRANIOFACIAL APPROACH, SKULL		x	x			x
61582	CRANIOFACIAL APPROACH, SKULL	x		x			
61583	CRANIOFACIAL APPROACH, SKULL	x		x			x
61584	ORBITOCRANIAL APPROACH/SKULL	x	x	x			x
61585	ORBITOCRANIAL APPROACH/SKULL	x	x	x			x
61586	RESECT NASOPHARYNX, SKULL	x		x			
61590	INFRA TEMPORAL APPROACH/SKULL	x	x	x			x
61591	INFRA TEMPORAL APPROACH/SKULL	x	x	x			x
61592	ORBITOCRANIAL APPROACH/SKULL	x	x	x			x
61595	TRANS TEMPORAL APPROACH/SKULL	x	x	x			x
61596	TRANSCOCHLEAR APPROACH/SKULL	x	x	x			x
61597	TRANSCONDYLAR APPROACH/SKULL	x	x	x			x
61598	TRANSPETROSAL APPROACH/SKULL	x		x			x
61600	RESECT/EXCISE CRANIAL LESION	x		x			x
61601	RESECT/EXCISE CRANIAL LESION	x		x			x
61605	RESECT/EXCISE CRANIAL LESION	x		x			x
61606	RESECT/EXCISE CRANIAL LESION	x		x			x
61607	RESECT/EXCISE CRANIAL LESION	x		x			x
61608	RESECT/EXCISE CRANIAL LESION	x		x			x
61609	TRANSECT ARTERY, SINUS	x		x			x
61610	TRANSECT ARTERY, SINUS	x		x			x
61611	TRANSECT ARTERY, SINUS	x		x			x
61612	TRANSECT ARTERY, SINUS	x		x			x
61613	REMOVE ANEURYSM, SINUS	x	x	x			x
61615	RESECT/EXCISE LESION, SKULL	x		x			
61616	RESECT/EXCISE LESION, SKULL	x		x			
61618	REPAIR DURA	x		x			
61619	REPAIR DURA	x		x			
61623	ENDOVASC TEMPORARY VESSEL OCCL	x		x			x
61624	TRANSCATH OCCLUSION, CNS			x			
61626	TRANSCATH OCCLUSION, NON-CNS			x			
61680	INTRACRANIAL VESSEL SURGERY	x		x			x
61682	INTRACRANIAL VESSEL SURGERY	x		x			x
61684	INTRACRANIAL VESSEL SURGERY	x		x			x
61686	INTRACRANIAL VESSEL SURGERY	x		x			x
61690	INTRACRANIAL VESSEL SURGERY	x		x			x
61692	INTRACRANIAL VESSEL SURGERY	x		x			x
61697	BRAIN ANEURYSM REPR, COMPLX	x		x			
61698	BRAIN ANEURYSM REPR, COMPLX	x		x			
61700	BRAIN ANEURYSM REPR, SIMPLE	x		x			
61702	INNER SKULL VESSEL SURGERY	x		x			
61703	CLAMP NECK ARTERY	x		x			x
61705	REVISE CIRCULATION TO HEAD	x		x			x
61708	REVISE CIRCULATION TO HEAD	x		x			x
61710	REVISE CIRCULATION TO HEAD			x			x
61711	FUSION OF SKULL ARTERIES	x		x			x
61720	INCISE SKULL/BRAIN SURGERY			x			x
61735	INCISE SKULL/BRAIN SURGERY			x			x
61750	INCISE SKULL/BRAIN BIOPSY			x			
61751	BRAIN BIOPSY W/CT/MR GUIDE			x			
61760	IMPLANT BRAIN ELECTRODES			x			x
61770	INCISE SKULL FOR TREATMENT			x			
61781	STRICTC CPTR ASSTD PX IDRL CRNL			*			
61782	STRICTC CPTR ASSTD PX XDRL CRNL			*			
61783	STRICTC CPTR ASSTD PX SPINAL			*			
61790	TREAT TRIGEMINAL NERVE			x			x
61791	TREAT TRIGEMINAL TRACT			x			x
61850	IMPLANT NEUROELECTRODES	x		x			x
61860	IMPLANT NEUROELECTRODES	x		x			x
61863	IMPLANT NEUROELECTRODE	x	x	x			
61864	TWIST DRILL, BURR HOLE, CRANIOT EA ADD	x		x			
61867	IMPLANT NEUROELECTRODE	x	x	x			
61868	TWIST DRILL, BURR HOLE, CRANIOT W EA ADD	x		x			
61870	IMPLANT NEUROELECTRODES	x		x			x
61875	IMPLANT NEUROELECTRODES	x		x			x
61880	REVISE/REMOVE NEUROELECTRODE	x	x	x			
61885	INSRT/REDO NEUROSTIM T ARRAY		x	x			x
61886	IMPLANT NEUROSTIM ARRAYS			x			
61888	REVISE/REMOVE NEURORECEIVER		x	x			x
62000	TREAT SKULL FRACTURE			x			x
62005	TREAT SKULL FRACTURE	x		x			x
62010	TREATMENT OF HEAD INJURY	x		x			x
62100	REPAIR BRAIN FLUID LEAKAGE	x		x			x
62115	REDUCTION OF SKULL DEFECT	x		x			
62116	REDUCTION OF SKULL DEFECT	x		x			
62117	REDUCTION OF SKULL DEFECT	x		x			
62120	REPAIR SKULL CAVITY LESION	x		x			
62121	INCISE SKULL REPAIR	x		x			
62140	REPAIR OF SKULL DEFECT	x		x			x
62141	REPAIR OF SKULL DEFECT	x		x			x
62142	REMOVE SKULL PLATE/FLAP	x		x			
62143	REPLACE SKULL PLATE/FLAP	x		x			
62145	REPAIR OF SKULL & BRAIN	x		x			
62146	REPAIR OF SKULL WITH GRAFT	x		x			x
62147	REPAIR OF SKULL WITH GRAFT	x		x			x
62148	RETR BONE FLAP TO FIX SKULL			x			x
62160	NEUROENDOSCOPY ADD-ON			x			x
62161	DISSECT BRAIN W/SCOPE	x		x			x
62162	REMOVE COLLOID CYST W/SCOPE	x		x			x
62163	NEUROENDOSCOPY W/FB REMOVAL	x		x			x
62164	REMOVE BRAIN TUMOR W/SCOPE	x		x			x

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
62165	REMOVE PITUIT TUMOR W/SCOPE			X		
62180	ESTABLISH BRAIN CAVITY SHUNT	X		X		X
62190	ESTABLISH BRAIN CAVITY SHUNT			X		
62192	ESTABLISH BRAIN CAVITY SHUNT	X		X		
62194	REPLACE/IRRIGATE CATHETER			X		X
62200	ESTABLISH BRAIN CAVITY SHUNT	X		X		
62201	BRAIN CAVITY SHUNT W/SCOPE			X		
62220	ESTABLISH BRAIN CAVITY SHUNT	X		X		X
62223	ESTABLISH BRAIN CAVITY SHUNT	X		X		X
62225	REPLACE/IRRIGATE CATHETER			X		X
62230	REPLACE/REVISE BRAIN SHUNT	X		X		X
62256	REMOVE BRAIN CAVITY SHUNT	X		X		X
62258	REPLACE BRAIN CAVITY SHUNT	X		X		X
62263	EPIDURAL LYSIS MULT SESSIONS			X		
62264	EPIDURAL LYSIS ON SINGLE DAY			X		
62267	INTERDISCAL PERQ ASPIR. DX			X		
62268	DRAIN SPINAL CORD CYST			X		
62269	NEEDLE BIOPSY. SPINAL CORD			X		
62270	SPINAL FLUID TAP. DIAGNOSTIC			X		
62272	DRAIN CEREBRO SPINAL FLUID			X		
62273	INJECT EPIDURAL PATCH			X		
62280	TREAT SPINAL CORD LESION			X		
62281	TREAT SPINAL CORD LESION			X		
62282	TREAT SPINAL CANAL LESION			X		
62284	INJECTION FOR MYELOGRAM			X		
62287	PERCUTANEOUS DISKECTOMY			X		
62290	INJECT FOR SPINE DISK X-RAY			X		
62291	INJECT FOR SPINE DISK X-RAY			X		
62292	INJECTION INTO DISK LESION			X		
62294	INJECTION INTO SPINAL ARTERY			X		
62310	INJECT SPINE C/T			X		
62311	INJECT SPINE L/S (CD)			X		
62318	INJECT SPINE W/CATH. C/T			X		
62319	INJECT SPINE W/CATH L/S (CD)			X		
62350	IMPLANT SPINAL CANAL CATH			X		
62351	IMPLANT SPINAL CANAL CATH	X		X		
62355	REMOVE SPINAL CANAL CATHETER			X		
62360	INSERT SPINE INFUSION DEVICE			X		
62361	IMPLANT SPINE INFUSION PUMP			X		
62362	IMPLANT SPINE INFUSION PUMP			X		
62365	REMOVE SPINE INFUSION DEVICE			X		
62369	ELECT ANLYS IMPLT ITHCLJEDRL PMP W/REPRG&REFILL			*		
62370	ELEC ANLYS IMPLT ITHCLJEDRL PMP W/REPR&REF PHYS			*		
63001	REMOVAL OF SPINAL LAMINA	X		X		
63003	REMOVAL OF SPINAL LAMINA	X		X		
63005	REMOVAL OF SPINAL LAMINA	X		X		
63011	REMOVAL OF SPINAL LAMINA	X		X		
63012	REMOVAL OF SPINAL LAMINA	X		X		
63015	REMOVAL OF SPINAL LAMINA	X		X		
63016	REMOVAL OF SPINAL LAMINA	X		X		
63017	REMOVAL OF SPINAL LAMINA	X		X		
63020	NECK SPINE DISK SURGERY	X	X	X		X
63030	LOW BACK DISK SURGERY	X	X	X		X
63035	SPINAL DISK SURGERY ADD-ON	X	X	X		X
63040	LAMINOTOMY. SINGLE CERVICAL	X	X	X		X
63042	LAMINOTOMY. SINGLE LUMBAR	X	X	X		X
63043	LAMINOTOMY. ADD+L CERVICAL	X	X	X		X
63044	LAMINOTOMY. ADD+L LUMBAR	X	X	X		X
63045	REMOVAL OF SPINAL LAMINA	X		X		
63046	REMOVAL OF SPINAL LAMINA	X		X		
63047	REMOVAL OF SPINAL LAMINA	X		X		
63048	LAMINECTMY COM FACTE >= FORM EAC ADD SEG	X		X		
63050	CERVICAL LAMINOPLASTY	X		X		
63051	C-LAMINOPLASTY W/GRAFT/PLATE	X		X		
63055	DECOMPRESS SPINAL CORD	X		X		
63056	DECOMPRESS SPINAL CORD	X		X		
63057	TRANS DECOMP SP CORD EA ADD:THOR/LUMBAR	X		X		
63064	DECOMPRESS SPINAL CORD	X		X		
63066	COSTOVERTEBRAL DECOMP S THOR:EAC ADD SEG	X				
63075	NECK SPINE DISK SURGERY	X		X		
63076	DISKECTOMY ANT DECOMP NERVE:CERVIC.EA AD	X		X		
63077	SPINE DISK SURGERY. THORAX	X		X		
63078	DISKEC ANTER INC OSTEO:THOR EA ADD INTSP	X		X		
63081	REMOVAL OF VERTEBRAL BODY	X		X		
63082	REMOVE VERTEBRAL BODY ADD-ON	X		X		
63085	REMOVAL OF VERTEBRAL BODY	X		X		
63086	REMOVE VERTEBRAL BODY ADD-ON	X		X		
63087	REMOVAL OF VERTEBRAL BODY	X		X		
63088	REMOVE VERTEBRAL BODY ADD-ON	X		X		
63090	REMOVAL OF VERTEBRAL BODY	X		X		
63091	REMOVE VERTEBRAL BODY ADD-ON	X		X		
63101	REMOVAL OF VERTEBRAL BODY	X				
63102	REMOVAL OF VERTEBRAL BODY	X		X		
63103	REMOVAL OF VERTEBRAL BODY	X		X		
63170	INCISE SPINAL CORD TRACT(S)	X		X		
63172	DRAINAGE OF SPINAL CYST	X		X		
63173	DRAINAGE OF SPINAL CYST	X		X		
63180	REVISE SPINAL CORD LIGAMENTS	X		X		
63182	REVISE SPINAL CORD LIGAMENTS	X		X		
63185	INCISE SPINAL COLUMN/NERVES	X		X		
63190	INCISE SPINAL COLUMN/NERVES	X		X		
63191	INCISE SPINAL COLUMN/NERVES	X	X	X		X
63194	INCISE SPINAL COLUMN & CORD	X		X		
63195	INCISE SPINAL COLUMN & CORD	X		X		
63196	INCISE SPINAL COLUMN & CORD	X		X		
63197	INCISE SPINAL COLUMN & CORD	X		X		
63198	INCISE SPINAL COLUMN & CORD	X		X		
63199	INCISE SPINAL COLUMN & CORD	X		X		
63200	RELEASE OF SPINAL CORD	X		X		
63250	REVISE SPINAL CORD VESSELS	X		X		
63251	REVISE SPINAL CORD VESSELS	X		X		
63252	REVISE SPINAL CORD VESSELS	X		X		
63265	EXCISE INTRASPINAL LESION	X		X		
63266	EXCISE INTRASPINAL LESION	X		X		
63267	EXCISE INTRASPINAL LESION	X		X		
63268	EXCISE INTRASPINAL LESION	X		X		

Covered Surgery Code	Description	Modifier			
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)
63270	EXCISE INTRASPINAL LESION	x		x	
63271	EXCISE INTRASPINAL LESION	x		x	
63272	EXCISE INTRASPINAL LESION	x		x	
63273	EXCISE INTRASPINAL LESION	x		x	
63275	BIOPSY/EXCISE SPINAL TUMOR	x		x	
63276	BIOPSY/EXCISE SPINAL TUMOR	x		x	
63277	BIOPSY/EXCISE SPINAL TUMOR	x		x	
63278	BIOPSY/EXCISE SPINAL TUMOR	x		x	
63280	BIOPSY/EXCISE SPINAL TUMOR	x		x	
63281	BIOPSY/EXCISE SPINAL TUMOR	x		x	
63282	BIOPSY/EXCISE SPINAL TUMOR	x		x	
63283	BIOPSY/EXCISE SPINAL TUMOR	x		x	
63285	BIOPSY/EXCISE SPINAL TUMOR	x		x	
63286	BIOPSY/EXCISE SPINAL TUMOR	x		x	
63287	BIOPSY/EXCISE SPINAL TUMOR	x		x	
63290	BIOPSY/EXCISE SPINAL TUMOR	x		x	
63295	REPAIR LAMINECTOMY DEFECT	x		x	
63300	REMOVAL OF VERTEBRAL BODY	x		x	
63301	REMOVAL OF VERTEBRAL BODY	x		x	
63302	REMOVAL OF VERTEBRAL BODY	x		x	
63303	REMOVAL OF VERTEBRAL BODY	x		x	
63304	REMOVAL OF VERTEBRAL BODY	x		x	
63305	REMOVAL OF VERTEBRAL BODY	x		x	
63306	REMOVAL OF VERTEBRAL BODY	x		x	
63307	REMOVAL OF VERTEBRAL BODY	x		x	
63308	VRT COR PAR/COM EXCI S SEG-EACH ADD SEGM	x		x	
63600	REMOVE SPINAL CORD LESION			x	
63610	STIMULATION OF SPINAL CORD			x	
63615	REMOVE LESION OF SPINAL CORD			x	
63620	SRS, SPINAL LESION	x		x	
63621	SRS, SPINAL LESION, ADDL	x		x	
63650	IMPLANT NEUROELECTRODES			x	
63655	IMPLANT NEUROELECTRODES	x		x	
63661	REMOVE SPINE ELTRD PERQ ARAY	x		x	
63662	REMOVE SPINE ELTRD PLATE	x		x	
63663	REVISE SPINE ELTRD PERQ ARAY	x		x	
63664	REVISE SPINE ELTRD PLATE	x		x	
63685	INSRT/REDO SPINE N GENERATOR	x		x	
63688	REVISE/REMOVE NEURORECEIVER			x	
63700	REPAIR OF SPINAL HERNIATION	x		x	
63702	REPAIR OF SPINAL HERNIATION	x		x	
63704	REPAIR OF SPINAL HERNIATION	x		x	
63706	REPAIR OF SPINAL HERNIATION	x		x	
63707	REPAIR SPINAL FLUID LEAKAGE	x		x	
63709	REPAIR SPINAL FLUID LEAKAGE	x		x	
63710	GRAFT REPAIR OF SPINE DEFECT	x		x	
63740	INSTALL SPINAL SHUNT	x		x	
63741	INSTALL SPINAL SHUNT	x		x	
63744	REVISION OF SPINAL SHUNT	x		x	
63746	REMOVAL OF SPINAL SHUNT	x		x	
64400	N BLOCK INJ. TRIGEMINAL		x		
64402	N BLOCK INJ. FACIAL		x		
64405	N BLOCK INJ. OCCIPITAL		x		
64408	N BLOCK INJ. VAGUS		x		
64410	N BLOCK INJ. PHRENIC		x		
64412	N BLOCK INJ. SPINAL ACCESSOR		x		
64413	N BLOCK INJ. CERVICAL PLEXUS		x		
64415	N BLOCK INJ. BRACHIAL PLEXUS		x		
64416	N BLOCK CONT INFUSE, B PLEX		x		
64417	N BLOCK INJ. AXILLARY		x		
64418	N BLOCK INJ. SUPRASCAPULAR		x		
64420	N BLOCK INJ. INTERCOST. SNG		x		
64421	N BLOCK INJ. INTERCOST. MLT		x		
64425	N BLOCK INJ. ILIO-ING/HYPOGI		x		
64430	N BLOCK INJ. PUDENDAL		x		
64435	N BLOCK INJ. PARACERVICAL		x		
64445	N BLOCK INJ. SCIATIC. SNG		x		
64446	N BLK INJ. SCIATIC. CONT INF		x		
64447	N BLOCK INJ. FEM. SINGLE		x		
64448	N BLOCK INJ. FEM. CONT INF		x		
64449	N BLOCK INJ. LUMBAR PLEXUS		x		
64450	N BLOCK. OTHER PERIPHERAL		x		
64455	N BLOCK INJ. PLANTAR DIGIT		x		
64479	INJ FORAMEN EPIDURAL C/T		x		
64480	INJ FORAMEN EPIDURAL ADD-ON		x		
64483	INJ FORAMEN EPIDURAL L/S		x		
64484	INJ FORAMEN EPIDURAL ADD-ON		x		
64490	INJ PARAVERTE F. JNT C/T 1 LEV	x	x		
64491	INJ PARAVERTE F. JNT C/T 2 LEV	x	x		
64492	INJ PARAVERTE F. JNT C/T 3 LEV	x	x		
64493	INJ PARAVERTE F. JNT L/S 1 LEV	x	x		
64494	INJ PARAVERTE F. JNT L/S 2 LEV	x	x		
64495	INJ PARAVERTE F. JNT L/S 3 LEV	x	x		
64505	N BLOCK. SPENOPALATINE GANGL		x		
64508	N BLOCK. CAROTID SINUS S/P		x		
64510	N BLOCK. STELLATE GANGLION		x		
64517	N BLOCK INJ. HYPOGAS PLXS		x		
64520	N BLOCK. LUMBAR/THORACIC		x		
64530	N BLOCK INJ. CELIAC PELUS		x		
64569	APPLY NEUROSTIMULATOR			x	
64553	IMPLANT NEUROELECTRODES			x	
64555	IMPLANT NEUROELECTRODES			x	
64561	IMPLANT NEUROELECTRODES		x		
64565	IMPLANT NEUROELECTRODES		x		
64566	POST TIB NEUROSTIMULATION PRQ NEEDLE ELECTRODE			x	
64568	INC IMPLTJ CRNL NRV NSTIM ELTRDS & PULSE GENER		x		
64569	REVISION/REPLMT NSTIM CRNL ELTRDS		x		
64570	REMOVAL CRNL NRV NSTIM ELTRDS & PULSE GENERATOR		x		
64575	IMPLANT NEUROELECTRODES			x	
64580	IMPLANT NEUROELECTRODES			x	
64581	IMPLANT NEUROELECTRODES	x			
64585	REVISE/REMOVE NEUROELECTRODE			x	
64590	INSRT/REDO PN/GASTR STIMUL			x	
64595	REVISE/RMV PN/GASTR STIMUL			x	
64600	INJECTION TREATMENT OF NERVE			x	
64605	INJECTION TREATMENT OF NERVE		x	x	

Covered Surgery Code	Description	Modifier			
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)
64610	INJECTION TREATMENT OF NERVE		x	x	
64611	CHEMODENERV PAROTID&SUBMANDIBL SALIVARY GLNDS BI			x	
64612	DESTROY NERVE, FACE MUSCLE		x	x	
64613	DESTROY NERVE, NECK MUSCLE		x	x	
64614	DESTROY NERVE, EXTREM MUSC		x	x	
64615	CHEMODENERV MUSC MIGRAINE			x	
64616	DESTROY NERVE, NECK MUSCLE UNILATERAL		x	x	
64617	DESTROY NERVE, LARYNX UNILATERAL		x	x	
64620	INJECTION TREATMENT OF NERVE			x	
64630	INJECTION TREATMENT OF NERVE			x	
64632	N BLOCK INJ, COMMON DIGIT		x	x	
64633	DSTR NROLYTC AGNT PARVERTEB FCT SNGL CRVCL/THORA		x	x	
64634	DSTR NROLYTC AGNT PARVERTEB FCT ADDL CRVCL/THORA		x	x	
64635	DSTR NROLYTC AGNT PARVERTEB FCT SNGL LMBR/SACRAL		x	x	
64636	DSTR NROLYTC AGNT PARVERTEB FCT ADDL LMBR/SACRAL		x	x	
64640	INJECTION TREATMENT OF NERVE			x	
64642	CHEMODENERV 1 EXTREMITY 1-4 MUSC			x	
64644	CHEMODENERV 1 EXTREMITY 5+ MUSC			x	
64646	CHEMODENERV TRUNK MUSC 1-5			x	
64647	CHEMODENERV TRUNK MUSC 6+			x	
64650	CHEMODENERV ECCRINE GLANDS			x	
64653	CHEMODENERV ECCRINE GLANDS			x	
64680	INJECTION TREATMENT OF NERVE			x	
64681	INJECTION TREATMENT OF NERVE			x	
64702	REVISE FINGER/TOE NERVE			x	
64704	REVISE HAND/FOOT NERVE	x		x	
64708	REVISE ARM/LEG NERVE	x		x	
64712	REVISION OF SCIATIC NERVE	x	x	x	
64713	REVISION OF ARM NERVE(S)	x	x	x	
64714	REVISE LOW BACK NERVE(S)	x	x	x	
64716	REVISION OF CRANIAL NERVE	x		x	
64718	REVISE ULNAR NERVE AT ELBOW		x	x	
64719	REVISE ULNAR NERVE AT WRIST		x	x	
64721	CARPAL TUNNEL SURGERY		x	x	
64722	RELIEVE PRESSURE ON NERVE(S)	x		x	
64726	RELEASE FOOT/TOE NERVE			x	
64727	NEUROLYSIS,INT.W/OUT MICRODISSECTION			x	
64732	INCISION OF BROW NERVE	x	x	x	
64734	INCISION OF CHEEK NERVE		x	x	
64736	INCISION OF CHIN NERVE	x	x	x	
64738	INCISION OF JAW NERVE	x	x	x	
64740	INCISION OF TONGUE NERVE	x	x	x	
64742	INCISION OF FACIAL NERVE	x	x	x	
64744	INCISE NERVE, BACK OF HEAD		x	x	
64746	INCISE DIAPHRAGM NERVE	x	x	x	
64752	INCISION OF VAGUS NERVE	x		x	
64755	INCISION OF STOMACH NERVES	x		x	
64760	INCISION OF VAGUS NERVE	x		x	
64761	INCISION OF PELVIS NERVE	x		x	
64763	INCISE HIP/THIGH NERVE	x	x	x	
64766	INCISE HIP/THIGH NERVE	x	x	x	
64771	SEVER CRANIAL NERVE	x		x	
64772	INCISION OF SPINAL NERVE	x		x	
64774	REMOVE SKIN NERVE LESION			x	
64776	REMOVE DIGIT NERVE LESION			x	
64778	DIGIT NERVE SURGERY ADD-ON			x	
64782	REMOVE LIMB NERVE LESION			x	
64783	LIMB NERVE SURGERY ADD-ON			x	
64784	REMOVE NERVE LESION			x	
64786	REMOVE SCIATIC NERVE LESION	x	x	x	
64788	REMOVE SKIN NERVE LESION			x	
64790	REMOVAL OF NERVE LESION			x	
64792	REMOVAL OF NERVE LESION	x		x	
64795	BIOPSY OF NERVE			x	
64802	REMOVE SYMPATHETIC NERVES	x	x	x	
64804	REMOVE SYMPATHETIC NERVES	x	x	x	
64809	REMOVE SYMPATHETIC NERVES	x	x	x	
64818	REMOVE SYMPATHETIC NERVES	x	x	x	
64820	REMOVE SYMPATHETIC NERVES			x	
64821	REMOVE SYMPATHETIC NERVES		x	x	
64822	REMOVE SYMPATHETIC NERVES		x	x	
64823	REMOVE SYMPATHETIC NERVES		x	x	
64831	REPAIR OF DIGIT NERVE		x	x	
64832	REPAIR NERVE ADD-ON			x	
64834	REPAIR OF HAND OR FOOT NERVE		x	x	
64835	REPAIR OF HAND OR FOOT NERVE	x	x	x	
64836	REPAIR OF HAND OR FOOT NERVE	x	x	x	
64837	REPAIR NERVE ADD-ON	x	x		
64840	REPAIR OF LEG NERVE	x	x	x	
64856	REPAIR/TRANSPOSE NERVE			x	
64857	REPAIR ARM/LEG NERVE	x		x	
64858	REPAIR SCIATIC NERVE	x	x	x	
64859	NERVE SURGERY	x		x	
64861	REPAIR OF ARM NERVES	x	x	x	
64862	REPAIR OF LOW BACK NERVES	x	x	x	
64864	REPAIR OF FACIAL NERVE	x		x	
64865	REPAIR OF FACIAL NERVE	x		x	
64866	FUSION OF FACIAL/OTHER NERVE	x		x	
64868	FUSION OF FACIAL/OTHER NERVE	x		x	
64870	FUSION OF FACIAL/OTHER NERVE	x		x	
64872	REPAIR OF FACIAL NERVE	x		x	
64874	REPAIR OF FACIAL NERVE	x		x	
64876	REPAIR OF FACIAL NERVE	x		x	
64885	NERVE GRAFT, HEAD OR NECK	x		x	
64886	NERVE GRAFT, HEAD OR NECK	x		x	
64890	NERVE GRAFT, HAND OR FOOT	x		x	
64891	NERVE GRAFT, HAND OR FOOT	x		x	
64892	NERVE GRAFT, ARM OR LEG	x		x	
64893	NERVE GRAFT, ARM OR LEG	x		x	
64895	NERVE GRAFT, HAND OR FOOT	x		x	
64896	NERVE GRAFT, HAND OR FOOT	x		x	
64897	NERVE GRAFT, ARM OR LEG	x		x	
64898	NERVE GRAFT, ARM OR LEG	x		x	
64901	NERVE GRAFT ADD-ON	x		x	
64902	NERVE GRAFT ADD-ON	x			
64905	NERVE PEDICLE TRANSFER	x		x	

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
64907	NERVE PEDICLE TRANSFER	x		x		
64910	NERVE REPAIR WALLGRAFT	x		x		
64911	NEUROBRAPHY W/VEIN AUTOGRAFT	x		x		
64999	NERVOUS SYSTEM SURGERY			x		
65091	REVISE EYE		x	x		x
65093	REVISE EYE WITH IMPLANT		x	x		x
65101	REMOVAL OF EYE		x	x		x
65103	REMOVE EYE/INSERT IMPLANT		x	x		x
65105	REMOVE EYE/ATTACH IMPLANT	x	x	x		x
65110	REMOVAL OF EYE	x	x	x		x
65112	REMOVE EYE/REVISE SOCKET	x	x	x		x
65114	REMOVE EYE/REVISE SOCKET	x	x	x		x
65125	REVISE OCULAR IMPLANT		x	x		x
65130	INSERT OCULAR IMPLANT		x	x		x
65135	INSERT OCULAR IMPLANT		x	x		x
65140	ATTACH OCULAR IMPLANT		x	x		x
65150	REVISE OCULAR IMPLANT		x	x		x
65155	REINSERT OCULAR IMPLANT		x	x		x
65175	REMOVAL OF OCULAR IMPLANT		x	x		x
65205	REMOVE FOREIGN BODY FROM EYE		x	x		x
65210	REMOVE FOREIGN BODY FROM EYE		x	x		x
65220	REMOVE FOREIGN BODY FROM EYE		x	x		x
65222	REMOVE FOREIGN BODY FROM EYE		x	x		x
65235	REMOVE FOREIGN BODY FROM EYE		x	x		x
65260	REMOVE FOREIGN BODY FROM EYE	x	x	x		x
65265	REMOVE FOREIGN BODY FROM EYE	x	x	x		x
65270	REPAIR OF EYE WOUND		x	x		x
65272	REPAIR OF EYE WOUND		x	x		x
65273	REPAIR OF EYE WOUND		x	x		x
65275	REPAIR OF EYE WOUND		x	x		x
65280	REPAIR OF EYE WOUND		x	x		x
65285	REPAIR OF EYE WOUND		x	x		x
65286	REPAIR OF EYE WOUND		x	x		x
65290	REPAIR OF EYE SOCKET WOUND		x	x		x
65400	REMOVAL OF EYE LESION		x	x		x
65410	BIOPSY OF CORNEA		x	x		x
65420	REMOVAL OF EYE LESION		x	x		x
65426	REMOVAL OF EYE LESION		x	x		x
65430	CORNEAL SMEAR		x	x		x
65435	CURETTE/TREAT CORNEA		x	x		x
65436	CURETTE/TREAT CORNEA		x	x		x
65450	TREATMENT OF CORNEAL LESION		x	x		x
65600	REVISION OF CORNEA		x	x		x
65710	CORNEAL TRANSPLANT	x	x	x		x
65730	CORNEAL TRANSPLANT	x	x	x		x
65750	CORNEAL TRANSPLANT	x	x	x		x
65755	CORNEAL TRANSPLANT	x	x	x		x
65756	CORNEAL TRNSPL ENDOTHELIAL	x	x	x		x
66757	PREP CORNEAL ENDOALLOGRAFT			x		x
65760	REVISION OF CORNEA			x		x
65770	REVISE CORNEA WITH IMPLANT	x	x	x		x
65771	RADIAL KERATOTOMY	*	*	*		*
65772	CORRECTION OF ASTIGMATISM		x	x		x
65775	CORRECTION OF ASTIGMATISM		x	x		x
65778	PLACE AMNIOTIC MEMB OCULAR SURFACE SELF RETAIN		x	x		x
65779	PLACE AMNIOTIC MEMBRANE OCULAR SURFACE SUTURED		x	x		x
65780	OCULAR RECONST. TRANSPLANT	x	x	x		x
65781	OCULAR RECONST. TRANSPLANT	x	x	x		x
65782	OCULAR RECONST. TRANSPLANT		x	x		x
65800	DRAINAGE OF EYE		x	x		x
65810	DRAINAGE OF EYE		x	x		x
65815	DRAINAGE OF EYE		x	x		x
65820	RELIEVE INNER EYE PRESSURE		x	x		x
65850	INCISION OF EYE		x	x		x
65855	LASER SURGERY OF EYE		x	x		x
65860	INCISE INNER EYE ADHESIONS		x	x		x
65865	INCISE INNER EYE ADHESIONS		x	x		x
65870	INCISE INNER EYE ADHESIONS		x	x		x
65875	INCISE INNER EYE ADHESIONS		x	x		x
65880	INCISE INNER EYE ADHESIONS		x	x		x
65900	REMOVE EYE LESION	x	x	x		x
65920	REMOVE IMPLANT OF EYE		x	x		x
65930	REMOVE BLOOD CLOT FROM EYE		x	x		x
66020	INJECTION TREATMENT OF EYE		x	x		x
66030	INJECTION TREATMENT OF EYE		x	x		x
66130	REMOVE EYE LESION		x	x		x
66150	GLAUCOMA SURGERY		x	x		x
66155	GLAUCOMA SURGERY		x	x		x
66160	GLAUCOMA SURGERY		x	x		x
66165	GLAUCOMA SURGERY	x	x	x		x
66170	GLAUCOMA SURGERY	x	x	x		x
66172	INCISION OF EYE	x	x	x		x
66174	TRLUML DILAT AQUEOUS CANAL W/O DEV/STNT	x	x	x		x
66175	TRLUML DILAT AQUEOUS CANAL W/DEV/STNT	x	x	x		x
66180	IMPLANT EYE SHUNT	x	x	x		x
66183	INS AQUEOUS DRAIN DEV	x	x	x		x
66185	REVISE EYE SHUNT	x	x	x		x
66220	REPAIR EYE LESION	x	x	x		x
66225	REPAIR/GRAFT EYE LESION		x	x		x
66250	FOLLOW-UP SURGERY OF EYE		x	x		x
66500	INCISION OF IRIS		x	x		x
66505	INCISION OF IRIS		x	x		x
66600	REMOVE IRIS AND LESION		x	x		x
66605	REMOVAL OF IRIS		x	x		x
66625	REMOVAL OF IRIS		x	x		x
66630	REMOVAL OF IRIS		x	x		x
66635	REMOVAL OF IRIS		x	x		x
66680	REPAIR IRIS & CILIARY BODY		x	x		x
66682	REPAIR IRIS & CILIARY BODY		x	x		x
66700	DESTRUCTION CILIARY BODY		x	x		x
66710	CILIARY TRANSFLERAL THERAPY		x	x		x
66711	CILIARY ENDOSCOPIC ABLATION		x	x		x
66720	DESTRUCTION CILIARY BODY		x	x		x
66740	DESTRUCTION CILIARY BODY		x	x		x
66761	REVISION OF IRIS		x	x		x
66762	REVISION OF IRIS		x	x		x

Covered Surgery Code	Description	Modifier				Site (e.g., E1-E4)	Left/Right (LT or RT)
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)			
66770	REMOVAL OF INNER EYE LESION		X	X			X
66820	INCISION, SECONDARY CATARACT		X	X			X
66821	AFTER CATARACT LASER SURGERY		X	X			X
66825	REPOSITION INTRAOCULAR LENS		X	X			X
66830	REMOVAL OF LENS LESION		X	X			X
66840	REMOVAL OF LENS MATERIAL		X	X			X
66850	REMOVAL OF LENS MATERIAL		X	X			X
66852	REMOVAL OF LENS MATERIAL		X	X			X
66920	EXTRACTION OF LENS		X	X			X
66930	EXTRACTION OF LENS		X	X			X
66940	EXTRACTION OF LENS		X	X			X
66982	CATARACT SURGERY, COMPLEX		X	X			X
66983	CATARACT SURG W/IOL 1 STAGE		X	X			X
66984	CATARACT SURG W/IOL 1 STAGE		X	X			X
66985	INSERT LENS PROSTHESIS		X	X			X
66986	EXCHANGE LENS PROSTHESIS		X	X			X
66990	OPHTHALMIC ENDOSCOPE ADD-ON			X			X
66999	EYE SURGERY PROCEDURE		X	X			
67005	PARTIAL REMOVAL OF EYE FLUID		X	X			X
67010	PARTIAL REMOVAL OF EYE FLUID		X	X			X
67015	RELEASE OF EYE FLUID		X	X			X
67025	REPLACE EYE FLUID		X	X			X
67027	IMPLANT EYE DRUG SYSTEM	X	X	X			X
67028	INJECTION EYE DRUG		X	X			X
67030	INCISE INNER EYE STRANDS		X	X			X
67031	LASER SURGERY, EYE STRANDS		X	X			X
67036	REMOVAL OF INNER EYE FLUID	X	X	X			X
67039	LASER TREATMENT OF RETINA	X	X	X			X
67040	LASER TREATMENT OF RETINA	X	X	X			X
67041	VIT FOR MACULAR PUCKER	X	X	X			X
67042	VIT FOR MACULAR HOLE	X	X	X			X
67043	VIT FOR MEMBRANE DISSECT	X	X	X			X
67101	REPAIR DETACHED RETINA		X	X			X
67105	REPAIR DETACHED RETINA		X	X			X
67107	REPAIR DETACHED RETINA	X	X	X			X
67108	REPAIR DETACHED RETINA	X	X	X			X
67110	REPAIR DETACHED RETINA		X	X			X
67112	REREPAIR DETACHED RETINA	X	X	X			X
67113	REPAIR RETINAL DETACH, CPLX	X	X	X			X
67115	RELEASE ENCIRCLING MATERIAL		X	X			X
67120	REMOVE EYE IMPLANT MATERIAL		X	X			X
67121	REMOVE EYE IMPLANT MATERIAL	X	X	X			X
67141	TREATMENT OF RETINA		X	X			X
67145	TREATMENT OF RETINA		X	X			X
67208	TREATMENT OF RETINAL LESION		X	X			X
67210	TREATMENT OF RETINAL LESION		X	X			X
67218	TREATMENT OF RETINAL LESION		X	X			X
67220	TREATMENT OF CHOROID LESION		X	X			X
67221	OCULAR PHOTODYNAMIC THER			X			
67225	OCULAR PHOTODYNAMIC THER ADD-ON			X			
67227	TREATMENT OF RETINAL LESION		X	X			X
67228	TREATMENT OF RETINAL LESION		X	X			X
67229	TR RETINAL LES PRETERM INF		X	X			X
67250	REINFORCE EYE WALL		X	X			X
67255	REINFORCE/GRAFT EYE WALL	X	X	X			X
67299	EYE SURGERY PROCEDURE		X	X			
67311	REVISE EYE MUSCLE		X	X			X
67312	REVISE TWO EYE MUSCLES		X	X			X
67314	REVISE EYE MUSCLE		X	X			X
67316	REVISE TWO EYE MUSCLES		X	X			X
67318	REVISE EYE MUSCLE(S)		X	X			X
67320	REVISE EYE MUSCLE(S) ADD-ON			X			X
67331	EYE SURGERY FOLLOW-UP ADD-ON		X	X			X
67332	REREVISE EYE MUSCLES ADD-ON		X	X			X
67334	REVISE EYE MUSCLE W/SUTURE		X	X			X
67335	EYE SUTURE DURING SURGERY		X	X			X
67340	REVISE EYE MUSCLE ADD-ON	X		X			X
67343	RELEASE EYE TISSUE		X	X			X
67345	DESTROY NERVE OF EYE MUSCLE		X	X			X
67346	BIOPSY, EYE MUSCLE		X	X			X
67399	EYE MUSCLE SURGERY PROCEDURE	X	X	X			
67400	EXPLORE/BIOPSY EYE SOCKET		X	X			X
67405	EXPLORE/DRAIN EYE SOCKET		X	X			X
67412	EXPLORE/TREAT EYE SOCKET		X	X			X
67413	EXPLORE/TREAT EYE SOCKET	X	X	X			X
67414	EXPLR/DECOMPRESS EYE SOCKET	X	X	X			X
67415	ASPIRATION, ORBITAL CONTENTS		X	X			X
67420	EXPLORE/TREAT EYE SOCKET	X	X	X			X
67430	EXPLORE/TREAT EYE SOCKET	X	X	X			X
67440	EXPLORE/DRAIN EYE SOCKET	X	X	X			X
67445	EXPLR/DECOMPRESS EYE SOCKET	X	X	X			X
67450	EXPLORE/BIOPSY EYE SOCKET	X	X	X			X
67500	INJECT/TREAT EYE SOCKET		X	X			X
67505	INJECT/TREAT EYE SOCKET		X	X			X
67515	INJECT/TREAT EYE SOCKET		X	X			X
67550	INSERT EYE SOCKET IMPLANT		X	X			X
67560	REVISE EYE SOCKET IMPLANT		X	X			X
67570	DECOMPRESS OPTIC NERVE	X	X	X			X
67599	ORBIT SURGERY PROCEDURE	X	X	X			
67700	DRAINAGE OF EYELID ABSCESS		X	X	X		
67710	INCISION OF EYELID		X	X	X		X
67715	INCISION OF EYELID FOLD		X	X	X		X
67800	REMOVE EYELID LESION			X	X		X
67801	REMOVE EYELID LESIONS			X	X		X
67805	REMOVE EYELID LESIONS			X	X		X
67808	REMOVE EYELID LESION(S)			X	X		X
67810	BIOPSY OF EYELID		X	X	X		
67820	REVISE EYELASHES		X	X	X		X
67825	REVISE EYELASHES		X	X	X		X
67830	REVISE EYELASHES		X	X	X		
67835	REVISE EYELASHES		X	X	X		
67840	REMOVE EYELID LESION		X	X	X		
67850	TREAT EYELID LESION		X	X	X		
67875	CLOSURE OF EYELID BY SUTURE		X	X	X		X
67880	REVISION OF EYELID		X	X	X		X
67882	REVISION OF EYELID		X	X	X		X

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
67900	REPAIR BROW DEFECT		X	X		X
67901	REPAIR EYELID DEFECT		X	X	X	X
67902	REPAIR EYELID DEFECT		X	X	X	X
67903	REPAIR EYELID DEFECT		X	X	X	X
67904	REPAIR EYELID DEFECT		X	X	X	X
67906	REPAIR EYELID DEFECT		X	X	X	X
67908	REPAIR EYELID DEFECT		X	X	X	X
67909	REVISE EYELID DEFECT		X	X	X	X
67911	REVISE EYELID DEFECT		X	X	X	X
67912	CORRECTION EYELID W/IMPLANT		X	X	X	X
67914	REPAIR EYELID DEFECT		X	X	X	X
67915	REPAIR EYELID DEFECT		X	X	X	X
67916	REPAIR EYELID DEFECT		X	X	X	X
67917	REPAIR EYELID DEFECT		X	X	X	X
67921	REPAIR EYELID DEFECT		X	X	X	X
67922	REPAIR EYELID DEFECT		X	X	X	X
67923	REPAIR EYELID DEFECT		X	X	X	X
67924	REPAIR EYELID DEFECT		X	X	X	X
67930	REPAIR EYELID WOUND		X	X	X	
67935	REPAIR EYELID WOUND		X	X	X	
67938	REMOVE EYELID FOREIGN BODY		X	X	X	
67950	REVISION OF EYELID		X	X	X	
67961	REVISION OF EYELID		X	X	X	
67966	REVISION OF EYELID		X	X	X	
67971	RECONSTRUCTION OF EYELID		X	X	X	X
67973	RECONSTRUCTION OF EYELID	X	X	X	X	
67974	RECONSTRUCTION OF EYELID	X	X	X	X	
67975	RECONSTRUCTION OF EYELID		X	X	X	X
67999	REVISION OF EYELID		X	X		
68020	INCISE/DRAIN EYELID LINING		X	X	X	
68040	TREATMENT OF EYELID LESIONS		X	X	X	
68100	BIOPSY OF EYELID LINING		X	X	X	
68110	REMOVE EYELID LINING LESION		X	X	X	
68115	REMOVE EYELID LINING LESION		X	X	X	
68130	REMOVE EYELID LINING LESION		X	X	X	
68135	REMOVE EYELID LINING LESION		X	X	X	
68200	TREAT EYELID BY INJECTION		X	X	X	
68320	REVISE/GRAFT EYELID LINING		X	X	X	
68325	REVISE/GRAFT EYELID LINING		X	X	X	
68326	REVISE/GRAFT EYELID LINING		X	X	X	
68328	REVISE/GRAFT EYELID LINING		X	X	X	
68330	REVISE EYELID LINING		X	X	X	
68335	REVISE/GRAFT EYELID LINING		X	X	X	
68340	SEPARATE EYELID ADHESIONS		X	X	X	
68360	REVISE EYELID LINING		X	X	X	
68362	REVISE EYELID LINING		X	X	X	
68371	HARVEST EYE TISSUE, ALOGRAFT		X	X	X	
68399	EYELID LINING SURGERY		X	X		
68400	INCISE/DRAIN TEAR GLAND		X	X		X
68420	INCISE/DRAIN TEAR SAC		X	X		X
68440	INCISE TEAR DUCT OPENING		X	X		X
68500	REMOVAL OF TEAR GLAND		X	X		X
68505	PARTIAL REMOVAL TEAR GLAND		X	X		X
68510	BIOPSY OF TEAR GLAND		X	X		X
68520	REMOVAL OF TEAR SAC		X	X		X
68525	BIOPSY OF TEAR SAC		X	X		X
68530	CLEARANCE OF TEAR DUCT		X	X		X
68540	REMOVE TEAR GLAND LESION		X	X		X
68550	REMOVE TEAR GLAND LESION		X	X		X
68700	REPAIR TEAR DUCTS		X	X		X
68705	REVISE TEAR DUCT OPENING		X	X		X
68720	CREATE TEAR SAC DRAIN	X	X	X		X
68745	CREATE TEAR DUCT DRAIN	X	X	X		X
68750	CREATE TEAR DUCT DRAIN	X	X	X		X
68760	CLOSE TEAR DUCT OPENING		X	X		X
68761	CLOSE TEAR DUCT OPENING		X	X		X
68770	CLOSE TEAR SYSTEM FISTULA		X	X		X
68801	DILATE TEAR DUCT OPENING		X	X		X
68810	PROBE NASOLACRIMAL DUCT		X	X		X
68811	PROBE NASOLACRIMAL DUCT		X	X		X
68815	PROBE NASOLACRIMAL DUCT		X	X		X
68816	PROBE NL DUCT W/BALLOON		X	X		X
68840	EXPLORE/IRRIGATE TEAR DUCTS		X	X		X
68850	INJECTION FOR TEAR SAC X-RAY		X	X		X
68899	TEAR DUCT SYSTEM SURGERY		X	X		
69000	DRAIN EXTERNAL EAR LESION		X	X		X
69005	DRAIN EXTERNAL EAR LESION		X	X		X
69020	DRAIN OUTER EAR CANAL LESION		X	X		X
69100	BIOPSY OF EXTERNAL EAR			X		X
69105	BIOPSY OF EXTERNAL EAR CANAL		X	X		X
69110	REMOVE EXTERNAL EAR, PARTIAL		X	X		X
69120	REMOVAL OF EXTERNAL EAR			X		X
69140	REMOVE EAR CANAL LESION(S)		X	X		X
69145	REMOVE EAR CANAL LESION(S)		X	X		X
69150	EXTENSIVE EAR CANAL SURGERY		X	X		X
69155	EXTENSIVE EAR/NECK SURGERY	X		X		X
69200	CLEAR OUTER EAR CANAL		X	X		X
69205	CLEAR OUTER EAR CANAL		X	X		X
69210	REMOVE IMPACTED EAR WAX			X		
69220	CLEAN OUT MASTOID CAVITY		X	X		X
69222	CLEAN OUT MASTOID CAVITY		X	X		X
69300	REVISE EXTERNAL EAR		X	X		X
69310	REBUILD OUTER EAR CANAL		X	X		X
69320	REBUILD OUTER EAR CANAL	X	X	X		X
69399	OUTER EAR SURGERY PROCEDURE			X		
69400	INFLATE MIDDLE EAR CANAL		X	X		X
69401	INFLATE MIDDLE EAR CANAL		X	X		X
69405	CATHETERIZE MIDDLE EAR CANAL		X	X		X
69420	INCISION OF EARDRUM		X	X		X
69421	INCISION OF EARDRUM		X	X		X
69424	REMOVE VENTILATING TUBE		X	X		X
69433	CREATE EARDRUM OPENING		X	X		X
69436	CREATE EARDRUM OPENING		X	X		X
69440	EXPLORATION OF MIDDLE EAR		X	X		X
69450	EARDRUM REVISION		X	X		X
69501	MASTOIDECTOMY		X	X		X

Covered Surgery Code	Description	Modifier				
		Assistant at Surgery (80)	Bilateral Surgery (50)	Multiple Surgery (51)	Site (e.g., E1-E4)	Left/Right (LT or RT)
69502	MASTOIDECTOMY		X	X		X
69505	REMOVE MASTOID STRUCTURES		X	X		X
69511	EXTENSIVE MASTOID SURGERY		X	X		X
69530	EXTENSIVE MASTOID SURGERY	X	X	X		X
69535	REMOVE PART OF TEMPORAL BONE		X	X		X
69540	REMOVE EAR LESION		X	X		X
69550	REMOVE EAR LESION	X	X	X		X
69552	REMOVE EAR LESION	X	X	X		X
69554	REMOVE EAR LESION	X	X	X		X
69601	MASTOID SURGERY REVISION		X	X		X
69602	MASTOID SURGERY REVISION		X	X		X
69603	MASTOID SURGERY REVISION		X	X		X
69604	MASTOID SURGERY REVISION		X	X		X
69605	MASTOID SURGERY REVISION	X	X	X		X
69610	REPAIR OF EARDRUM		X	X		X
69620	REPAIR OF EARDRUM		X	X		X
69631	REPAIR EARDRUM STRUCTURES		X	X		X
69632	REBUILD EARDRUM STRUCTURES		X	X		X
69633	REBUILD EARDRUM STRUCTURES		X	X		X
69635	REPAIR EARDRUM STRUCTURES		X	X		X
69636	REBUILD EARDRUM STRUCTURES		X	X		X
69637	REBUILD EARDRUM STRUCTURES		X	X		X
69641	REVISE MIDDLE EAR & MASTOID		X	X		X
69642	REVISE MIDDLE EAR & MASTOID		X	X		X
69643	REVISE MIDDLE EAR & MASTOID		X	X		X
69644	REVISE MIDDLE EAR & MASTOID		X	X		X
69645	REVISE MIDDLE EAR & MASTOID		X	X		X
69646	REVISE MIDDLE EAR & MASTOID		X	X		X
69650	RELEASE MIDDLE EAR BONE		X	X		X
69660	REVISE MIDDLE EAR BONE		X	X		X
69661	REVISE MIDDLE EAR BONE		X	X		X
69662	REVISE MIDDLE EAR BONE		X	X		X
69666	REPAIR MIDDLE EAR STRUCTURES		X	X		X
69667	REPAIR MIDDLE EAR STRUCTURES		X	X		X
69670	REMOVE MASTOID AIR CELLS	X	X	X		X
69676	REMOVE MIDDLE EAR NERVE		X	X		X
69700	CLOSE MASTOID FISTULA		X	X		X
69710	IMPLANT/REPLACE HEARING AID		X	X		X
69711	REMOVE/REPAIR HEARING AID	X	X	X		X
69714	IMPLANT TEMPLE BONE W/STIMUL		X	X		X
69715	TEMPLE BONE IMPLNT W/STIMULAT		X	X		X
69717	TEMPLE BONE IMPLANT REVISION		X	X		X
69718	REVISE TEMPLE BONE IMPLANT		X	X		X
69720	RELEASE FACIAL NERVE		X	X		X
69725	RELEASE FACIAL NERVE	X	X	X		X
69740	REPAIR FACIAL NERVE	X	X	X		X
69745	REPAIR FACIAL NERVE	X	X	X		X
69799	MIDDLE EAR SURGERY PROCEDURE		X	X		X
69801	INCISE INNER EAR		X	X		X
69805	EXPLORE INNER EAR	X	X	X		X
69806	EXPLORE INNER EAR		X	X		X
69820	ESTABLISH INNER EAR WINDOW	X	X	X		X
69840	REVISE INNER EAR WINDOW	X	X	X		X
69905	REMOVE INNER EAR		X	X		X
69910	REMOVE INNER EAR & MASTOID		X	X		X
69915	INCISE INNER EAR NERVE	X	X	X		X
69930	IMPLANT COCHLEAR DEVICE		X	X		X
69949	INNER EAR SURGERY PROCEDURE		X	X		X
69950	INCISE INNER EAR NERVE	X	X	X		X
69955	RELEASE FACIAL NERVE	X	X	X		X
69960	RELEASE INNER EAR CANAL	X	X	X		X
69970	REMOVE INNER EAR LESION	X	X	X		X
69979	TEMPORAL BONE SURGERY		X	X		
69990	MICROSURGERY ADD-ON	X				

*** DRAFT - NOT YET FILED ***

5160-4-22

Surgical services.

(A) Coverage.

(1) In general, payment may be made to an eligible provider for performing a medically necessary surgical procedure on an eligible recipient. The following limitations, however, apply.

(a) No separate payment is made to the provider of a surgical service for local infiltration, the administration of general anesthesia or sedation, normal uncomplicated preoperative and postoperative care, or any procedure that is performed incidental to or as an integral part of the operation. On claims, providers should report comprehensive surgical services; they must not itemize or "unbundle" individual components.

(b) Certain characteristics of a surgical procedure performed on the same patient by the same provider may affect how it is reported on a claim and how payment for it is made.

(i) The department recognizes four groups of surgical procedures defined by a particular characteristic:

(a) Multiple procedures, for which payment is reduced when more than one is performed;

(b) Bilateral procedures, for which payment is adjusted when they are performed on both body parts of a corresponding pair;

(c) Assistant-at-surgery procedures, for which payment is reduced when they are performed by an assistant at surgery; and

(d) Procedures performed on fingers, toes, eyelids, or coronary arteries.

(ii) In assigning procedures to these groups, the department follows the policies of the medicare program.

(2) The following constraints apply to payment for assistant-at-surgery procedures:

(a) No payment is made for more than one assistant at surgery, regardless of the extent of the surgery;

(b) Payment may be made for an assistant at surgery in a teaching hospital only if any of the following conditions is met:

- (i) The service performed is medically necessary, the physician who performs it is primarily engaged in the field of surgery, and the primary surgeon does not use residents or interns for any part of the surgical procedure (including preoperative and postoperative care);
 - (ii) The service constitutes concurrent care for a medical condition that requires the presence of and active treatment by a physician of another specialty during surgery;
 - (iii) Complex medical procedures are performed that require a team of physicians; or
 - (iv) Exceptional medical circumstances warrant an assistant at surgery; and
 - (c) No payment is made for an assistant at surgery in a teaching hospital if the following two conditions are met:
 - (i) The hospital has a training program in the medical specialty required for the surgical procedure; and
 - (ii) A resident in that training program is available to serve as an assistant at surgery.
- (3) Payment for the surgical treatment of obesity requires prior authorization.
- (4) Payment for physician visits in addition to surgery is addressed in rule 5160-4-06 of the Administrative Code.
- (5) Certain types of surgery are often supplemented by the use of a cast, splint, strap, or other traction device. For initial application and removal that is performed in conjunction with covered musculoskeletal surgery, payment for the surgery includes the application and removal procedures, all materials (casting components, splints, or straps), and incidental supplies. In all other circumstances, the following provisions apply:
 - (a) Payment for the work depends on the nature and purpose of the procedure.
 - (i) For initial application and removal that is not performed in conjunction with surgery (e.g., the casting or strapping of a sprained joint), payment may be made for an appropriate evaluation and management service;
 - (ii) For necessary replacement, payment may be made for an appropriate casting/strapping procedure; and

(iii) For necessary repair, payment may be made for an appropriate evaluation and management service.

(b) Separate payment may be made for materials only if the service was rendered in a non-hospital setting.

(c) No separate payment is made for incidental supplies.

(B) Claim payment. Payment for a surgical procedure is the lesser of two figures:

(1) The provider's submitted charge; or

(2) A percentage of the amount specified in rule 5160-1-60 of the Administrative Code or in appendix DD to that rule, determined in the following manner:

(a) For a procedure that is not performed incidental to or as an integral part of an operation and that is not subject to multiple-procedure payment reduction, one hundred per cent;

(b) For a procedure that is subject to multiple-procedure payment reduction, the relevant percentage from the following list:

(i) For a primary procedure (i.e., the procedure with the highest maximum amount listed in rule 5160-1-60 of the Administrative Code or in appendix DD to that rule), one hundred per cent;

(ii) For a secondary procedure (i.e., the procedure with the next highest maximum amount listed in rule 5160-1-60 of the Administrative Code or in appendix DD to that rule), fifty per cent; or

(iii) For any other procedure, twenty-five per cent;

(c) For a bilateral procedure, one hundred fifty per cent; or

(d) For an assistant-at-surgery procedure, twenty-five per cent.

Replaces: 5160-4-22

Effective:

Five Year Review (FYR) Dates:

Certification

Date

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