

eviCore Laboratory Management Program



| Procedure Code | Full Description | Program | How Code is Managed | AWIA Effective Date | Termination Date |
|----------------|---|--------------|----------------------|---------------------|------------------|
| 80047 | Measurement Of Glucose | NONMOLECULAR | Claim Policies Apply | 01/01/08 | None |
| 80048 | Basic Metabolic Panel With Measurement Of Total Calcium | NONMOLECULAR | Claim Policies Apply | 01/01/08 | None |
| 80050 | Buffy Coat Differential White Blood Cell Count | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 80051 | Electrolyte Panel | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 80053 | Measurement Of Chloride | NONMOLECULAR | Claim Policies Apply | 01/01/00 | None |
| 80055 | Hepatitis B Surface Antigen Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 80061 | Lipid Panel | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 80069 | Measurement Of Sodium | NONMOLECULAR | Claim Policies Apply | 01/01/00 | None |
| 80074 | Hepatitis B Core Igm Antibody Test | NONMOLECULAR | Claim Policies Apply | 01/01/00 | None |
| 80076 | Measurement Of Total Bilirubin | NONMOLECULAR | Claim Policies Apply | 01/01/00 | None |
| 80081 | Obstetric Panel | NONMOLECULAR | Claim Policies Apply | 01/01/16 | None |
| 80143 | Acetaminophen | NONMOLECULAR | Claim Policies Apply | 01/01/21 | None |
| 80145 | Adalimumab | NONMOLECULAR | Claim Policies Apply | 01/01/20 | None |
| 80150 | Measurement Of Amikacin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 80151 | Amiodarone | NONMOLECULAR | Claim Policies Apply | 01/01/21 | None |
| 80155 | Measurement Of Caffeine | NONMOLECULAR | Claim Policies Apply | 01/01/14 | None |
| 80156 | Measurement Of Total Carbamazepine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 80157 | Measurement Of Free Carbamazepine | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 80158 | Measurement Of Cyclosporine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 80159 | Measurement Of Clozapine | NONMOLECULAR | Claim Policies Apply | 01/01/14 | None |
| 80161 | Carbamazepine; -10,11-epoxide | NONMOLECULAR | Claim Policies Apply | 01/01/21 | None |
| 80162 | Measurement Of Total Digoxin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 80163 | Measurement Of Free Digoxin | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80164 | Measurement Of Dipropylacetic Acid | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 80165 | Measurement Of Valproic Acid | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80167 | Felbamate | NONMOLECULAR | Claim Policies Apply | 01/01/21 | None |
| 80168 | Measurement Of Ethosuximide | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 80169 | Measurement Of Everolimus | NONMOLECULAR | Claim Policies Apply | 01/01/14 | None |
| 80170 | Measurement Of Gentamicin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 80171 | Measurement Of Gabapentin | NONMOLECULAR | Claim Policies Apply | 01/01/14 | None |
| 80173 | Measurement Of Haloperidol | NONMOLECULAR | Claim Policies Apply | 01/01/14 | None |
| 80175 | Measurement Of Lamotrigine | NONMOLECULAR | Claim Policies Apply | 01/01/14 | None |
| 80176 | Measurement Of Lidocaine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 80177 | Measurement Of Levetiracetam | NONMOLECULAR | Claim Policies Apply | 01/01/14 | None |
| 80178 | Measurement Of Lithium | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 80179 | Salicylate | NONMOLECULAR | Claim Policies Apply | 01/01/21 | None |
| 80180 | Measurement Of Mycophenolate | NONMOLECULAR | Claim Policies Apply | 01/01/14 | None |
| 80181 | Flecainide | NONMOLECULAR | Claim Policies Apply | 01/01/21 | None |
| 80183 | Measurement Of Oxcarbazepine | NONMOLECULAR | Claim Policies Apply | 01/01/14 | None |
| 80184 | Measurement Of Phenobarbital | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 80185 | Measurement Of Total Phenytoin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 80186 | Measurement Of Free Phenytoin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 80187 | Posaconazole | NONMOLECULAR | Claim Policies Apply | 01/01/20 | None |
| 80188 | Measurement Of Primidone | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 80189 | Itraconazole | NONMOLECULAR | Claim Policies Apply | 01/01/21 | None |
| 80190 | Measurement Of Procainamide | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 80192 | Measurement Of Procainamide And Metabolites | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 80193 | Leflunomide | NONMOLECULAR | Claim Policies Apply | 01/01/21 | None |
| 80194 | Measurement Of Quinidine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 80195 | Measurement Of Sirolimus | NONMOLECULAR | Claim Policies Apply | 01/01/06 | None |
| 80197 | Measurement Of Sacrolimus | NONMOLECULAR | Claim Policies Apply | 01/01/97 | None |
| 80198 | Measurement Of Theophylline | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 80199 | Measurement Of Tiagabine | NONMOLECULAR | Claim Policies Apply | 01/01/14 | None |
| 80200 | Measurement Of Tobramycin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |

Legend:

Requires Prior Authorization: Requests containing these codes should be submitted directly to eviCore

Claim Policies Apply: eviCore manages this code with claim edits. This code by itself does not require prior authorization. However, all procedure codes (81105-81479) included in a multiple procedure code panel are subject to medical necessity review if any code requires prior authorization. This ensures a holistic approach to a panel test.

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|-------|--|--------------|----------------------|----------|------|
| 80201 | Measurement Of Topiramate | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 80202 | Measurement Of Vancomycin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 80203 | Measurement Of Zonisamide | NONMOLECULAR | Claim Policies Apply | 01/01/14 | None |
| 80204 | Methotrexate | NONMOLECULAR | Claim Policies Apply | 01/01/21 | None |
| 80210 | Rufinamide | NONMOLECULAR | Claim Policies Apply | 01/01/21 | None |
| 80220 | Hydroxychloroquine | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 80230 | Infliximab | NONMOLECULAR | Claim Policies Apply | 01/01/20 | None |
| 80235 | Lacosamide | NONMOLECULAR | Claim Policies Apply | 01/01/20 | None |
| 80280 | Vedolizumab | NONMOLECULAR | Claim Policies Apply | 01/01/20 | None |
| 80285 | Voriconazole | NONMOLECULAR | Claim Policies Apply | 01/01/20 | None |
| 80299 | Quantitation of drug, not elsewhere classified. | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 80305 | Drug test(s), presumptive, any number of drug classes, any number of devices or procedures; capable of being read by direct optical observation only (eg, utilizing immunoassay [eg, dipsticks, cups, cards, or cartridges]), includes sample validation when performed, per date of service | NONMOLECULAR | Claim Policies Apply | 01/01/17 | None |
| 80306 | Drug test(s), presumptive, any number of drug classes, any number of devices or procedures; read by instrument assisted direct optical observation (eg, utilizing immunoassay [eg, dipsticks, cups, cards, or cartridges]), includes sample validation when performed, per date of service | NONMOLECULAR | Claim Policies Apply | 01/01/17 | None |
| 80307 | Drug test(s), presumptive, any number of drug classes, any number of devices or procedures; by instrument chemistry analyzers (eg, utilizing immunoassay [eg, EIA, ELISA, EMIT, FPIA, IA, KIMS, RIA]), chromatography (eg, GC, HPLC), and mass spectrometry either with or without chromatography, (eg, DART, DESI, GC-MS, GC-MS/MS, LC-MS, LC-MS/MS, LDTD, MALDI, TOF) includes sample validation when performed, per date of service | NONMOLECULAR | Claim Policies Apply | 01/01/17 | None |
| 80320 | Measurement Of Alcohol | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80321 | Detection Of Alcohol Biomarker | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80322 | Detection Of Alcohol Biomarker | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80323 | Measurement Of Alkaloids | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80324 | Measurement Of Amphetamine | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80325 | Measurement Of Amphetamine | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80326 | Measurement Of Amphetamine | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80327 | Measurement Of Anabolic Steroids | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80328 | Measurement Of Anabolic Steroids | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80329 | Measurement Of Non-Opioid Analgesics | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80330 | Measurement Of Non-Opioid Analgesics | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80331 | Measurement Of Non-Opioid Analgesics | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80332 | Measurement Of Serotnergic Class 2 Antidepressant Drug | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80333 | Measurement Of Serotnergic Class 3 Antidepressant Drug | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80334 | Measurement Of Serotnergic Antidepressant Drug | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80335 | Measurement Of Cyclical Antidepressant Drug | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80336 | Measurement Of Tricyclic Antidepressant Drug | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80337 | Measurement Of Cyclical Antidepressant Drug | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80338 | Measurement Of Antidepressants | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80339 | Measurement Of Antiepileptic Drug | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80340 | Measurement Of Antiepileptic Drug | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80341 | Measurement Of Antiepileptic Drug | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80342 | Measurement Of Antipsychotic Drug | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80343 | Measurement Of Antipsychotic Drug | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80344 | Measurement Of Antipsychotic Drug | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80345 | Measurement Of Barbiturate | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80346 | Measurement Of Benzodiazepine | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80347 | Measurement Of Benzodiazepine | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80348 | Measurement Of Buprenorphine | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80349 | Measurement Of Natural Cannabinoid | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80350 | Measurement Of Synthetic Cannabinoid | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80351 | Measurement Of Synthetic Cannabinoid | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80352 | Measurement Of Synthetic Cannabinoid | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80353 | Measurement Of Cocaine | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80354 | Measurement Of Fentanyl | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80355 | Measurement Of Gabapentin | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |

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|-------|--|--------------|----------------------|----------|----------|
| 80356 | Measurement Of Heroin Metabolite | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80357 | Measurement Of Norketamine | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80358 | Measurement Of Methadone | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80359 | Measurement Of Methylenedioxyamphetamines | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80360 | Measurement Of Methylphenidate | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80361 | Measurement Of Opiate | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80362 | Measurement Of Opiate Analog | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80363 | Measurement Of Opiate Analog | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80364 | Measurement Of Opiate Analog | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80365 | Measurement Of Oxycodone | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80366 | Measurement Of Pregabalin | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80367 | Measurement Of Propoxyphene | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80368 | Measurement Of Non-Benzodiazepine Sedative Hypnotics | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80369 | Measurement Of Skeletal Muscle Relaxants | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80370 | Measurement Of Skeletal Muscle Relaxants | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80371 | Measurement Of Synthetic Stimulant | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80372 | Measurement Of Tapentadol | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80373 | Measurement Of Tramadol | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80374 | Measurement Of Stereoisomer Drug | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80375 | Quantitative Measurement Of Drug | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80376 | Qualitative Measurement Of Drug | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80377 | Qualitative Measurement Of Substance | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 80400 | Acth Stimulation Panel For Adrenal Insufficiency | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 80402 | Measurement Of Cortisol | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 80406 | Measurement Of 17 Hydroxypregnenolone | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 80408 | Aldosterone Suppression Evaluation Panel | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 80410 | Calcitonin Stimulation Panel | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 80412 | Corticotropin Releasing Hormone (Crh) Stimulation Panel | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 80414 | Chorionic gonadotropin stimulation panel; testosterone response This panel must include the following: Testosterone (84403 x 2 on 3 pooled blood samples) | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 80415 | Chorionic gonadotropin stimulation panel; estradiol response This panel must include the following: Estradiol, total (82670 x 2 on 3 pooled blood samples) | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 80416 | Measurement Of Renin | NONMOLECULAR | Claim Policies Apply | 01/01/96 | None |
| 80417 | Peripheral Vein Renin Stimulation Panel | NONMOLECULAR | Claim Policies Apply | 01/01/96 | None |
| 80418 | Combined Rapid Anterior Pituitary Evaluation Panel | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 80420 | Measurement Of Cortisol | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 80422 | Glucagon Tolerance Panel For Insulinoma | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 80424 | Glucagon Tolerance Panel For Pheochromocytoma | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 80426 | Gonadotropin Releasing Hormone Stimulation Panel | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 80428 | Measurement Of Human Growth Hormone | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 80430 | Growth Hormone Suppression Panel | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 80432 | Insulin-induced C-peptide suppression panel | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 80434 | Insulin tolerance panel; for ACTH insufficiency | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 80435 | Measurement Of Human Growth Hormone | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 80436 | Metyrapone Panel | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 80438 | 1 Hour Thyrotropin Releasing Hormone Stimulation Panel | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 80439 | Measurement Of Thyroid Stimulating Hormone | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 80500 | Clinical Pathology Consultation | NONMOLECULAR | Claim Policies Apply | 01/01/93 | 12/31/21 |
| 80502 | Clinical Pathology Consultation With Review Of Patient History And Medical Record | NONMOLECULAR | Claim Policies Apply | 01/01/93 | 12/31/21 |
| 80503 | Pathology clinical consultation; for a clinical problem, with limited review of patient's history and medical records and straightforward medical decision making | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 80504 | Pathology clinical consultation; for a moderately complex clinical problem, with review of patient's history and medical records and moderate level of medical decision making | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 80505 | Pathology clinical consultation; for a highly complex clinical problem, with comprehensive review of patient's history and medical records and high level of medical decision making | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 80506 | Pathology clinical consultation; prolonged service, each additional 30 minutes (List separately in addition to code for primary procedure) | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 81000 | Manual Urinalysis Using Dip Stick And Microscopy Of Urine | NONMOLECULAR | Claim Policies Apply | 01/01/11 | None |
| 81001 | Automated Urinalysis Using Dip Stick And Microscopy Of Urine | NONMOLECULAR | Claim Policies Apply | 01/01/96 | None |
| 81002 | Manual Urinalysis Using Dip Stick | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |

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|-------|--|-------------------|------------------------------|----------|------|
| 81003 | Automated Urinalysis Using Tablet Reagent | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 81005 | Semiquantitative Urinalysis | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 81007 | Screen For Bacteriuria | NONMOLECULAR | Claim Policies Apply | 01/01/90 | None |
| 81015 | Microscopy Of Urine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 81020 | Two-Glass Test Of Urine | NONMOLECULAR | Claim Policies Apply | 01/01/95 | None |
| 81025 | Urine Pregnancy Test Using Visual Color Comparison Method | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 81050 | Volume Measurement For Timed Collection Of Urine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 81099 | Unlisted urinalysis procedure | NONMOLECULAR | Claim Policies Apply | 01/01/11 | None |
| 81105 | Human Platelet Antigen 1 genotyping (HPA-1), ITGB3 (integrin, beta 3 [platelet glycoprotein IIIa], antigen CD61 [GPIIIa]) (eg, neonatal alloimmune thrombocytopenia [NAIT], post-transfusion purpura), gene analysis, common variant, HPA-1a/b (L33P) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/18 | None |
| 81106 | Human Platelet Antigen 2 genotyping (HPA-2), GP1BA (glycoprotein Ib [platelet], alpha polypeptide [GPIba]) (eg, neonatal alloimmune thrombocytopenia [NAIT], post-transfusion purpura), gene analysis, common variant, HPA-2a/b (T145M) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/18 | None |
| 81107 | Human Platelet Antigen 3 genotyping (HPA-3), ITGA2B (integrin, alpha 2b [platelet glycoprotein IIb of IIb/IIIa complex], antigen CD41 [GPIIb]) (eg, neonatal alloimmune thrombocytopenia [NAIT], post-transfusion purpura), gene analysis, common variant, HPA-3a/b (I843S) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/18 | None |
| 81108 | Human Platelet Antigen 4 genotyping (HPA-4), ITGB3 (integrin, beta 3 [platelet glycoprotein IIIa], antigen CD61 [GPIIIa]) (eg, neonatal alloimmune thrombocytopenia [NAIT], post-transfusion purpura), gene analysis, common variant, HPA-4a/b (R143Q) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/18 | None |
| 81109 | Human Platelet Antigen 5 genotyping (HPA-5), ITGA2 (integrin, alpha 2 [CD49B, alpha 2 subunit of VLA-2 receptor] [GPIa]) (eg, neonatal alloimmune thrombocytopenia [NAIT], post-transfusion purpura), gene analysis, common variant (eg, HPA-5a/b (K505E)) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/18 | None |
| 81110 | Human Platelet Antigen 6 genotyping (HPA-6w), ITGB3 (integrin, beta 3 [platelet glycoprotein IIIa, antigen CD61] [GPIIIa]) (eg, neonatal alloimmune thrombocytopenia [NAIT], post-transfusion purpura), gene analysis, common variant, HPA-6a/b (R489Q) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/18 | None |
| 81111 | Human Platelet Antigen 9 genotyping (HPA-9w), ITGA2B (integrin, alpha 2b [platelet glycoprotein IIb of IIb/IIIa complex, antigen CD41] [GPIIb]) (eg, neonatal alloimmune thrombocytopenia [NAIT], post-transfusion purpura), gene analysis, common variant, HPA-9a/b (V837M) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/18 | None |
| 81112 | Human Platelet Antigen 15 genotyping (HPA-15), CD109 (CD109 molecule) (eg, neonatal alloimmune thrombocytopenia [NAIT], post-transfusion purpura), gene analysis, common variant, HPA-15a/b (S682Y) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/18 | None |
| 81120 | IDH1 (isocitrate dehydrogenase 1 [NADP+], soluble) (eg, glioma), common variants (eg, R132H, R132C) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/18 | None |
| 81121 | IDH2 (isocitrate dehydrogenase 2 [NADP+], mitochondrial) (eg, glioma), common variants (eg, R140W, R172M) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/18 | None |
| 81161 | DMD (dystrophin) (eg, Duchenne/Becker muscular dystrophy) deletion analysis, and duplication analysis, if performed | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/13 | None |
| 81162 | BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis and full duplication/deletion analysis (ie, detection of large gene rearrangements) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/16 | None |
| 81163 | BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/19 | None |
| 81164 | BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full duplication/deletion analysis (ie, detection of large gene rearrangements) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/19 | None |
| 81165 | BRCA1 (BRCA1, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/19 | None |
| 81166 | BRCA1 (BRCA1, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full duplication/deletion analysis (ie, detection of large gene rearrangements) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/19 | None |
| 81167 | BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full duplication/deletion analysis (ie, detection of large gene rearrangements) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/19 | None |
| 81168 | CCND1/IGH t(11;14) (eg, mantle cell lymphoma) translocation analysis, major breakpoint, qualitative and quantitative, if performed | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/21 | None |
| 81170 | ABL1 (ABL proto-oncogene 1, non-receptor tyrosine kinase) (eg, acquired imatinib tyrosine kinase inhibitor resistance), gene analysis, variants in the kinase domain | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/16 | None |
| 81171 | AFF2 (AF4/FMR2 family, member 2 [FMR2]) (eg, fragile X mental retardation 2 [FRAXE]) gene analysis; evaluation to detect abnormal (eg, expanded) alleles | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81172 | AFF2 (AF4/FMR2 family, member 2 [FMR2]) (eg, fragile X mental retardation 2 [FRAXE]) gene analysis; characterization of alleles (eg, expanded size and methylation status) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81173 | AR (androgen receptor) (eg, spinal and bulbar muscular atrophy, Kennedy disease, X chromosome inactivation) gene analysis; full gene sequence | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/19 | None |

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|-------|---|-------------------|------------------------------|----------|------|
| 81174 | AR (androgen receptor) (eg, spinal and bulbar muscular atrophy, Kennedy disease, X chromosome inactivation) gene analysis; known familial variant | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/19 | None |
| 81175 | ASXL1 (additional sex combs like 1, transcriptional regulator) (eg, myelodysplastic syndrome, myeloproliferative neoplasms, chronic myelomonocytic leukemia), gene analysis; full gene sequence | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/18 | None |
| 81176 | ASXL1 (additional sex combs like 1, transcriptional regulator) (eg, myelodysplastic syndrome, myeloproliferative neoplasms, chronic myelomonocytic leukemia), gene analysis; targeted sequence analysis (eg, exon 12) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/18 | None |
| 81177 | ATN1 (atrophin 1) (eg, dentatorubral-pallidoluyian atrophy) gene analysis, evaluation to detect abnormal (eg, expanded) allele | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81178 | ATXN1 (ataxin 1) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) allele | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81179 | ATXN2 (ataxin 2) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81180 | ATXN3 (ataxin 3) (eg, spinocerebellar ataxia, Machado-Joseph disease) gene analysis, evaluation to detect abnormal (eg, expanded) allele | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81181 | ATXN7 (ataxin 7) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81182 | ATXN8OS (ATXN8 opposite strand [non-protein coding]) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81183 | ATXN10 (ataxin 10) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81184 | CACNA1A (calcium voltage-gated channel subunit alpha1 A) (eg, spinocerebellar ataxia) gene analysis; evaluation to detect abnormal (eg, expanded) alleles | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81185 | CACNA1A (calcium voltage-gated channel subunit alpha1 A) (eg, spinocerebellar ataxia) gene analysis; full gene sequence | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/19 | None |
| 81186 | CACNA1A (calcium voltage-gated channel subunit alpha1 A) (eg, spinocerebellar ataxia) gene analysis; known familial variant | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/19 | None |
| 81187 | CNBP (CCHC-type zinc finger nucleic acid binding protein) (eg, myotonic dystrophy type 2) gene analysis, evaluation to detect abnormal (eg, expanded) alleles | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81188 | CSTB (cystatin B) (eg, Unverricht-Lundborg disease) gene analysis; evaluation to detect abnormal (eg, expanded) alleles | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81189 | CSTB (cystatin B) (eg, Unverricht-Lundborg disease) gene analysis; full gene sequence | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/19 | None |
| 81190 | CSTB (cystatin B) (eg, Unverricht-Lundborg disease) gene analysis; known familial variant(s) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/19 | None |
| 81191 | NTRK1 (neurotrophic receptor tyrosine kinase 1) (eg, solid tumors) translocation analysis | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/21 | None |
| 81192 | NTRK2 (neurotrophic receptor tyrosine kinase 2) (eg, solid tumors) translocation analysis | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/21 | None |
| 81193 | NTRK3 (neurotrophic receptor tyrosine kinase 3) (eg, solid tumors) translocation analysis | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/21 | None |
| 81194 | NTRK (neurotrophic-tropomyosin receptor tyrosine kinase 1, 2, and 3) (eg, solid tumors) translocation analysis | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/21 | None |
| 81200 | ASPA (aspartoacylase) (eg, Canavan disease) gene analysis, common variants (eg, E285A, Y231X) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81201 | APC (adenomatous polyposis coli) (eg, familial adenomatosis polyposis [FAP], attenuated FAP) gene analysis; full gene sequence | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/13 | None |
| 81202 | APC (adenomatous polyposis coli) (eg, familial adenomatosis polyposis [FAP], attenuated FAP) gene analysis; known familial variants | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/13 | None |
| 81203 | APC (adenomatous polyposis coli) (eg, familial adenomatosis polyposis [FAP], attenuated FAP) gene analysis; duplication/deletion variants | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/13 | None |
| 81204 | AR (androgen receptor) (eg, spinal and bulbar muscular atrophy, Kennedy disease, X chromosome inactivation) gene analysis; characterization of alleles (eg, expanded size or methylation status) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81205 | BCKDHB (branched-chain keto acid dehydrogenase E1, beta polypeptide) (eg, maple syrup urine disease) gene analysis, common variants (eg, R183P, G278S, E422X) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81206 | BCR/ABL1 (t(9;22)) (eg, chronic myelogenous leukemia) translocation analysis; major breakpoint, qualitative or quantitative | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81207 | BCR/ABL1 (t(9;22)) (eg, chronic myelogenous leukemia) translocation analysis; minor breakpoint, qualitative or quantitative | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81208 | BCR/ABL1 (t(9;22)) (eg, chronic myelogenous leukemia) translocation analysis; other breakpoint, qualitative or quantitative | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81209 | BLM (Bloom syndrome, RecQ helicase-like) (eg, Bloom syndrome) gene analysis, 2281del6ins7 variant | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81210 | BRAF (B-Raf proto-oncogene, serine/threonine kinase) (eg, colon cancer, melanoma), gene analysis, V600 variant(s) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |

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| 81212 | BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; 185delAG, 5385insC, 6174delT variants | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81215 | BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; known familial variant | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81216 | BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81217 | BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; known familial variant | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81218 | CEBPA (CCAAT/enhancer binding protein [C/EBP], alpha) (eg, acute myeloid leukemia), gene analysis, full gene sequence | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/16 | None |
| 81219 | CALR (calreticulin) (eg, myeloproliferative disorders), gene analysis, common variants in exon 9 | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/16 | None |
| 81220 | CFTR (cystic fibrosis transmembrane conductance regulator) (eg, cystic fibrosis) gene analysis; common variants (eg, ACMG/ACOG guidelines) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81221 | CFTR (cystic fibrosis transmembrane conductance regulator) (eg, cystic fibrosis) gene analysis; known familial variants | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81222 | CFTR (cystic fibrosis transmembrane conductance regulator) (eg, cystic fibrosis) gene analysis; duplication/deletion variants | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81223 | CFTR (cystic fibrosis transmembrane conductance regulator) (eg, cystic fibrosis) gene analysis; full gene sequence | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81224 | CFTR (cystic fibrosis transmembrane conductance regulator) (eg, cystic fibrosis) gene analysis; intron 8 poly-T analysis (eg, male infertility) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81225 | CYP2C19 (cytochrome P450, family 2, subfamily C, polypeptide 19) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3, *4, *8, *17) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81226 | CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3, *4, *5, *6, *9, *10, *17, *19, *29, *35, *41, *1XN, *2XN, *4XN) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81227 | CYP2C9 (cytochrome P450, family 2, subfamily C, polypeptide 9) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3, *5, *6) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81228 | Cytogenomic constitutional (genome-wide) microarray analysis; interrogation of genomic regions for copy number variants (eg, bacterial artificial chromosome [BAC] or oligo-based comparative genomic hybridization [CGH] microarray analysis) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81229 | Cytogenomic constitutional (genome-wide) microarray analysis; interrogation of genomic regions for copy number and single nucleotide polymorphism (SNP) variants for chromosomal abnormalities | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81230 | CYP3A4 (cytochrome P450 family 3 subfamily A member 4) (eg, drug metabolism), gene analysis, common variant(s) (eg, *2, *22) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 81231 | CYP3A5 (cytochrome P450 family 3 subfamily A member 5) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3, *4, *5, *6, *7) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 81232 | DPYD (dihydropyrimidine dehydrogenase) (eg, 5-fluorouracil/5-FU and capecitabine drug metabolism), gene analysis, common variant(s) (eg, *2A, *4, *5, *6) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 81233 | BTK (Bruton's tyrosine kinase) (eg, chronic lymphocytic leukemia) gene analysis, common variants (eg, C481S, C481R, C481F) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81234 | DMPK (DM1 protein kinase) (eg, myotonic dystrophy type 1) gene analysis; evaluation to detect abnormal (expanded) alleles | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81235 | EGFR (epidermal growth factor receptor) (eg, non-small cell lung cancer) gene analysis, common variants (eg, exon 19 LREA deletion, L858R, T790M, G719A, G719S, L861Q) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/13 | None |
| 81236 | EZH2 (enhancer of zeste 2 polycomb repressive complex 2 subunit) (eg, myelodysplastic syndrome, myeloproliferative neoplasms) gene analysis, full gene sequence | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81237 | EZH2 (enhancer of zeste 2 polycomb repressive complex 2 subunit) (eg, diffuse large B-cell lymphoma) gene analysis, common variant(s) (eg, codon 646) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81238 | F9 (coagulation factor IX) (eg, hemophilia B), full gene sequence | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 81239 | DMPK (DM1 protein kinase) (eg, myotonic dystrophy type 1) gene analysis; characterization of alleles (eg, expanded size) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81240 | F2 (prothrombin, coagulation factor II) (eg, hereditary hypercoagulability) gene analysis, 20210G>A variant | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81241 | F5 (coagulation factor V) (eg, hereditary hypercoagulability) gene analysis, Leiden variant | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81242 | FANCC (Fanconi anemia, complementation group C) (eg, Fanconi anemia, type C) gene analysis, common variant (eg, IVS4+4A>T) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81243 | FMR1 (fragile X mental retardation 1) (eg, fragile X mental retardation) gene analysis; evaluation to detect abnormal (eg, expanded) alleles | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81244 | FMR1 (Fragile X mental retardation 1) (eg, fragile X mental retardation) gene analysis; characterization of alleles (eg, expanded size and promoter methylation status) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |

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| 81245 | FLT3 (fms-related tyrosine kinase 3) (eg, acute myeloid leukemia), gene analysis; internal tandem duplication (ITD) variants (ie, exons 14, 15) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81246 | FLT3 (fms-related tyrosine kinase 3) (eg, acute myeloid leukemia), gene analysis; tyrosine kinase domain (TKD) variants (eg, D835, I836) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/15 | None |
| 81247 | G6PD (glucose-6-phosphate dehydrogenase) (eg, hemolytic anemia, jaundice), gene analysis; common variant(s) (eg, A, A-) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/18 | None |
| 81248 | G6PD (glucose-6-phosphate dehydrogenase) (eg, hemolytic anemia, jaundice), gene analysis; known familial variant(s) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 81249 | G6PD (glucose-6-phosphate dehydrogenase) (eg, hemolytic anemia, jaundice), gene analysis; full gene sequence | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 81250 | G6PC (glucose-6-phosphatase, catalytic subunit) (eg, Glycogen storage disease, type 1a, von Gierke disease) gene analysis, common variants (eg, R83C, Q347X) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81251 | GBA (glucosidase, beta, acid) (eg, Gaucher disease) gene analysis, common variants (eg, N370S, 84GG, L444P, IVS2+1G>A) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81252 | GJB2 (gap junction protein, beta 2, 26kDa, connexin 26) (eg, nonsyndromic hearing loss) gene analysis; full gene sequence | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/13 | None |
| 81253 | GJB2 (gap junction protein, beta 2, 26kDa, connexin 26) (eg, nonsyndromic hearing loss) gene analysis; known familial variants | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/13 | None |
| 81254 | GJB6 (gap junction protein, beta 6, 30kDa, connexin 30) (eg, nonsyndromic hearing loss) gene analysis, common variants (eg, 309kb [del(GJB6-D13S1830)] and 232kb [del(GJB6-D13S1854)]) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/13 | None |
| 81255 | HEXA (hexosaminidase A [alpha polypeptide]) (eg, Tay-Sachs disease) gene analysis, common variants (eg, 1278insTATC, 1421+1G>C, G269S) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81256 | HFE (hemochromatosis) (eg, hereditary hemochromatosis) gene analysis, common variants (eg, C282Y, H63D) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81257 | HBA1/HBA2 (alpha globin 1 and alpha globin 2) (eg, alpha thalassemia, Hb Bart hydrops fetalis syndrome, HbH disease), gene analysis; common deletions or variant (eg, Southeast Asian, Thai, Filipino, Mediterranean, alpha3.7, alpha4.2, alpha20.5, Constant Spring) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81258 | HBA1/HBA2 (alpha globin 1 and alpha globin 2) (eg, alpha thalassemia, Hb Bart hydrops fetalis syndrome, HbH disease), gene analysis; known familial variant | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 81259 | HBA1/HBA2 (alpha globin 1 and alpha globin 2) (eg, alpha thalassemia, Hb Bart hydrops fetalis syndrome, HbH disease), gene analysis; full gene sequence | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 81260 | IKBKAP (inhibitor of kappa light polypeptide gene enhancer in B-cells, kinase complex-associated protein) (eg, familial dysautonomia) gene analysis, common variants (eg, 2507+6T>C, R696P) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81261 | IGH@ (Immunoglobulin heavy chain locus) (eg, leukemias and lymphomas, B-cell), gene rearrangement analysis to detect abnormal clonal population(s); amplified methodology (eg, polymerase chain reaction) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81262 | IGH@ (Immunoglobulin heavy chain locus) (eg, leukemias and lymphomas, B-cell), gene rearrangement analysis to detect abnormal clonal population(s); direct probe methodology (eg, Southern blot) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81263 | IGH@ (Immunoglobulin heavy chain locus) (eg, leukemia and lymphoma, B-cell), variable region somatic mutation analysis | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81264 | IGK@ (Immunoglobulin kappa light chain locus) (eg, leukemia and lymphoma, B-cell), gene rearrangement analysis, evaluation to detect abnormal clonal population(s) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81265 | Comparative analysis using Short Tandem Repeat (STR) markers; patient and comparative specimen (eg, pre-transplant recipient and donor germline testing, post-transplant non-hematopoietic recipient germline [eg, buccal swab or other germline tissue sample] and donor testing, twin zygosity testing, or maternal cell contamination of fetal cells) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81266 | Comparative analysis using Short Tandem Repeat (STR) markers; each additional specimen (eg, additional cord blood donor, additional fetal samples from different cultures, or additional zygosity in multiple birth pregnancies) (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81267 | Chimerism (engraftment) analysis, post transplantation specimen (eg, hematopoietic stem cell), includes comparison to previously performed baseline analyses; without cell selection | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81268 | Chimerism (engraftment) analysis, post transplantation specimen (eg, hematopoietic stem cell), includes comparison to previously performed baseline analyses; with cell selection (eg, CD3, CD33), each cell type | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81269 | HBA1/HBA2 (alpha globin 1 and alpha globin 2) (eg, alpha thalassemia, Hb Bart hydrops fetalis syndrome, HbH disease), gene analysis; duplication/deletion variants | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 81270 | JAK2 (Janus kinase 2) (eg, myeloproliferative disorder) gene analysis, p.Val617Phe (V617F) variant | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81271 | HTT (huntingtin) (eg, Huntington disease) gene analysis; evaluation to detect abnormal (eg, expanded) alleles | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |

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| 81272 | KIT (v-kit Hardy-Zuckerman 4 feline sarcoma viral oncogene homolog) (eg, gastrointestinal stromal tumor [GIST], acute myeloid leukemia, melanoma), gene analysis, targeted sequence analysis (eg, exons 8, 11, 13, 17, 18) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/16 | None |
| 81273 | KIT (v-kit Hardy-Zuckerman 4 feline sarcoma viral oncogene homolog) (eg, mastocytosis), gene analysis, D816 variant(s) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/16 | None |
| 81274 | HTT (huntingtin) (eg, Huntington disease) gene analysis; characterization of alleles (eg expanded size) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81275 | KRAS (Kirsten rat sarcoma viral oncogene homolog) (eg, carcinoma) gene analysis; variants in exon 2 (eg, codons 12 and 13) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81276 | KRAS (Kirsten rat sarcoma viral oncogene homolog) (eg, carcinoma) gene analysis; additional variant(s) (eg, codon 61, codon 146) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/16 | None |
| 81277 | Cytogenomic neoplasia (genome-wide) microarray analysis, interrogation of genomic regions for copy number and loss-of-heterozygosity variants for chromosomal abnormalities | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/20 | None |
| 81278 | IGH@/BCL2 (t(14;18)) (eg, follicular lymphoma) translocation analysis, major breakpoint region (MBR) and minor cluster region (mcr) breakpoints, qualitative or quantitative | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/21 | None |
| 81279 | JAK2 (Janus kinase 2) (eg, myeloproliferative disorder) targeted sequence analysis (eg, exons 12 and 13) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/21 | None |
| 81283 | IFNL3 (interferon, lambda 3) (eg, drug response), gene analysis, rs12979860 variant | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 81284 | FXN (frataxin) (eg, Friedreich ataxia) gene analysis; evaluation to detect abnormal (expanded) alleles | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81285 | FXN (frataxin) (eg, Friedreich ataxia) gene analysis; characterization of alleles (eg, expanded size) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81286 | FXN (frataxin) (eg, Friedreich ataxia) gene analysis; full gene sequence | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/19 | None |
| 81287 | MGMT (O-6-methylguanine-DNA methyltransferase) (eg, glioblastoma multiforme), promoter methylation analysis | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/14 | None |
| 81288 | MLH1 (mutL homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; promoter methylation analysis | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/15 | None |
| 81289 | FXN (frataxin) (eg, Friedreich ataxia) gene analysis; known familial variant (s) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/19 | None |
| 81290 | MCOLN1 (mucopolipin 1) (eg, Mucopolipidosis, type IV) gene analysis, common variants (eg, IVS3-2A>G, del6.4kb) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81291 | MTHFR (5,10-methylenetetrahydrofolate reductase) (eg, hereditary hypercoagulability) gene analysis, common variants (eg, 677T, 1298C) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81292 | MLH1 (mutL homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; full sequence analysis | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81293 | MLH1 (mutL homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; known familial variants | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81294 | MLH1 (mutL homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; duplication/deletion variants | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81295 | MSH2 (mutS homolog 2, colon cancer, nonpolyposis type 1) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; full sequence analysis | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81296 | MSH2 (mutS homolog 2, colon cancer, nonpolyposis type 1) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; known familial variants | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81297 | MSH2 (mutS homolog 2, colon cancer, nonpolyposis type 1) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; duplication/deletion variants | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81298 | MSH6 (mutS homolog 6 [E. coli]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; full sequence analysis | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81299 | MSH6 (mutS homolog 6 [E. coli]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; known familial variants | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81300 | MSH6 (mutS homolog 6 [E. coli]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; duplication/deletion variants | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81301 | Microsatellite instability analysis (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) of markers for mismatch repair deficiency (eg, BAT25, BAT26), includes comparison of neoplastic and normal tissue, if performed | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81302 | MECP2 (methyl CpG binding protein 2) (eg, Rett syndrome) gene analysis; full sequence analysis | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81303 | MECP2 (methyl CpG binding protein 2) (eg, Rett syndrome) gene analysis; known familial variant | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81304 | MECP2 (methyl CpG binding protein 2) (eg, Rett syndrome) gene analysis; duplication/deletion variants | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81305 | MYD88 (myeloid differentiation primary response 88) (eg, Waldenstrom's macroglobulinemia, lymphoplasmacytic leukemia) gene analysis, p.Leu265Pro (L265P) variant | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81306 | NUDT15 (nudix hydrolase 15) (eg, drug metabolism) gene analysis, common variant(s) (eg, *2, *3, *4, *5, *6) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/19 | None |

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| 81307 | PALB2 (partner and localizer of BRCA2) (eg, breast and pancreatic cancer) gene analysis; full gene sequence | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/20 | None |
| 81308 | PALB2 (partner and localizer of BRCA2) (eg, breast and pancreatic cancer) gene analysis; known familial variant | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/20 | None |
| 81309 | PIK3CA (phosphatidylinositol-4, 5-biphosphate 3-kinase, catalytic subunit alpha) (eg, colorectal and breast cancer) gene analysis, targeted sequence analysis (eg, exons 7, 9, 20) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/20 | None |
| 81310 | NPM1 (nucleophosmin) (eg, acute myeloid leukemia) gene analysis, exon 12 variants | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81311 | NRAS (neuroblastoma RAS viral [v-ras] oncogene homolog) (eg, colorectal carcinoma), gene analysis, variants in exon 2 (eg, codons 12 and 13) and exon 3 (eg, codon 61) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/16 | None |
| 81312 | PABPN1 (poly[A] binding protein nuclear 1) (eg, oculopharyngeal muscular dystrophy) gene analysis, evaluation to detect abnormal (eg, expanded) alleles | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81313 | PCA3/KLK3 (prostate cancer antigen 3 [non-protein coding]/kallikrein-related peptidase 3 [prostate specific antigen]) ratio (eg, prostate cancer) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/15 | None |
| 81314 | PDGFRA (platelet-derived growth factor receptor, alpha polypeptide) (eg, gastrointestinal stromal tumor [GIST]), gene analysis, targeted sequence analysis (eg, exons 12, 18) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/16 | None |
| 81315 | PML/RARalpha, t(15;17), (promyelocytic leukemia/retinoic acid receptor alpha) (eg, promyelocytic leukemia) translocation analysis; common breakpoints (eg, intron 3 and intron 6), qualitative or quantitative | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81316 | PML/RARalpha, t(15;17), (promyelocytic leukemia/retinoic acid receptor alpha) (eg, promyelocytic leukemia) translocation analysis; single breakpoint (eg, intron 3, intron 6 or exon 6), qualitative or quantitative | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81317 | PMS2 (postmeiotic segregation increased 2 [S. cerevisiae]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; full sequence analysis | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81318 | PMS2 (postmeiotic segregation increased 2 [S. cerevisiae]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; known familial variants | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81319 | PMS2 (postmeiotic segregation increased 2 [S. cerevisiae]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; duplication/deletion variants | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81320 | PLCG2 (phospholipase C gamma 2) (eg, chronic lymphocytic leukemia) gene analysis, common variants (eg, R665W, S707F, L845F) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81321 | PTEN (phosphatase and tensin homolog) (eg, Cowden syndrome, PTEN hamartoma tumor syndrome) gene analysis; full sequence analysis | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/13 | None |
| 81322 | PTEN (phosphatase and tensin homolog) (eg, Cowden syndrome, PTEN hamartoma tumor syndrome) gene analysis; known familial variant | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/13 | None |
| 81323 | PTEN (phosphatase and tensin homolog) (eg, Cowden syndrome, PTEN hamartoma tumor syndrome) gene analysis; duplication/deletion variant | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/13 | None |
| 81324 | PMP22 (peripheral myelin protein 22) (eg, Charcot-Marie-Tooth, hereditary neuropathy with liability to pressure palsies) gene analysis; duplication/deletion analysis | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/13 | None |
| 81325 | PMP22 (peripheral myelin protein 22) (eg, Charcot-Marie-Tooth, hereditary neuropathy with liability to pressure palsies) gene analysis; full sequence analysis | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/13 | None |
| 81326 | PMP22 (peripheral myelin protein 22) (eg, Charcot-Marie-Tooth, hereditary neuropathy with liability to pressure palsies) gene analysis; known familial variant | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/13 | None |
| 81327 | SEPT9 (Septin9) (eg, colorectal cancer) promoter methylation analysis | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/17 | None |
| 81328 | SLCO1B1 (solute carrier organic anion transporter family, member 1B1) (eg, adverse drug reaction), gene analysis, common variant(s) (eg, *5) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 81329 | SMN1 (survival of motor neuron 1, telomeric) (eg, spinal muscular atrophy) gene analysis; dosage/deletion analysis (eg, carrier testing), includes SMN2 (survival of motor neuron 2, centromeric) analysis, if performed | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81330 | SMPD1 (sphingomyelin phosphodiesterase 1, acid lysosomal) (eg, Niemann-Pick disease, Type A) gene analysis, common variants (eg, R496L, L302P, fsP330) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81331 | SNRPN/UBE3A (small nuclear ribonucleoprotein polypeptide N and ubiquitin protein ligase E3A) (eg, Prader-Willi syndrome and/or Angelman syndrome), methylation analysis | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81332 | SERPINA1 (serpin peptidase inhibitor, clade A, alpha-1 antiproteinase, antitrypsin, member 1) (eg, alpha-1-antitrypsin deficiency), gene analysis, common variants (eg, *S and *Z) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81333 | TGFBI (transforming growth factor beta-induced) (eg, corneal dystrophy) gene analysis, common variants (eg, R124H, R124C, R124L, R555W, R555Q) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81334 | RUNX1 (runt related transcription factor 1) (eg, acute myeloid leukemia, familial platelet disorder with associated myeloid malignancy), gene analysis, targeted sequence analysis (eg, exons 3-8) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/18 | None |
| 81335 | TPMT (thiopurine S-methyltransferase) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 81336 | SMN1 (survival of motor neuron 1, telomeric) (eg, spinal muscular atrophy) gene analysis; full gene sequence | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/19 | None |
| 81337 | SMN1 (survival of motor neuron 1, telomeric) (eg, spinal muscular atrophy) gene analysis; known familial sequence variant(s) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/19 | None |

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| 81338 | MPL (MPL proto-oncogene, thrombopoietin receptor) (eg, myeloproliferative disorder) gene analysis; common variants (eg, W515A, W515K, W515L, W515R) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/21 | None |
| 81339 | MPL (MPL proto-oncogene, thrombopoietin receptor) (eg, myeloproliferative disorder) gene analysis; sequence analysis, exon 10 | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/21 | None |
| 81340 | TRB@ (T cell antigen receptor, beta) (eg, leukemia and lymphoma), gene rearrangement analysis to detect abnormal clonal population(s); using amplification methodology (eg, polymerase chain reaction) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81341 | TRB@ (T cell antigen receptor, beta) (eg, leukemia and lymphoma), gene rearrangement analysis to detect abnormal clonal population(s); using direct probe methodology (eg, Southern blot) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81342 | TRG@ (T cell antigen receptor, gamma) (eg, leukemia and lymphoma), gene rearrangement analysis, evaluation to detect abnormal clonal population(s) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81343 | PPP2R2B (protein phosphatase 2 regulatory subunit B beta) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81344 | TBP (TATA box binding protein) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81345 | TERT (telomerase reverse transcriptase) (eg, thyroid carcinoma, glioblastoma multiforme) gene analysis, targeted sequence analysis (eg, promoter region) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/19 | None |
| 81346 | TYMS (thymidylate synthetase) (eg, 5-fluorouracil/5-FU drug metabolism), gene analysis, common variant(s) (eg, tandem repeat variant) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 81347 | SF3B1 (splicing factor [3b] subunit B1) (eg, myelodysplastic syndrome/acute myeloid leukemia) gene analysis, common variants (eg, A672T, E622D, L833F, R625C, R625L) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/21 | None |
| 81348 | SRSF2 (serine and arginine-rich splicing factor 2) (eg, myelodysplastic syndrome, acute myeloid leukemia) gene analysis, common variants (eg, P95H, P95L) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/21 | None |
| 81349 | Cytogenomic (genome-wide) analysis for constitutional chromosomal abnormalities; interrogation of genomic regions for copy number and loss-of-heterozygosity variants, low-pass sequencing analysis | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/22 | None |
| 81350 | UGT1A1 (UDP glucuronosyltransferase 1 family, polypeptide A1) (eg, drug metabolism, hereditary unconjugated hyperbilirubinemia [Gilbert syndrome]) gene analysis, common variants (eg, *28, *36, *37) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81351 | TP53 (tumor protein 53) (eg, Li-Fraumeni syndrome) gene analysis; full gene sequence | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/21 | None |
| 81352 | TP53 (tumor protein 53) (eg, Li-Fraumeni syndrome) gene analysis; targeted sequence analysis (eg, 4 oncology) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/21 | None |
| 81353 | TP53 (tumor protein 53) (eg, Li-Fraumeni syndrome) gene analysis; known familial variant | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/21 | None |
| 81355 | VKORC1 (vitamin K epoxide reductase complex, subunit 1) (eg, warfarin metabolism), gene analysis, common variant(s) (eg, -1639G>A, c.173+1000C>T) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81357 | U2AF1 (U2 small nuclear RNA auxiliary factor 1) (eg, myelodysplastic syndrome, acute myeloid leukemia) gene analysis, common variants (eg, S34F, S34Y, Q157R, Q157P) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/21 | None |
| 81360 | ZRSR2 (zinc finger CCCH-type, RNA binding motif and serine/arginine-rich 2) (eg, myelodysplastic syndrome, acute myeloid leukemia) gene analysis, common variant(s) (eg, E65fs, E122fs, R448fs) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/21 | None |
| 81361 | HBB (hemoglobin, subunit beta) (eg, sickle cell anemia, beta thalassemia, hemoglobinopathy); common variant(s) (eg, HbS, HbC, HbE) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 81362 | HBB (hemoglobin, subunit beta) (eg, sickle cell anemia, beta thalassemia, hemoglobinopathy); known familial variant(s) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 81363 | HBB (hemoglobin, subunit beta) (eg, sickle cell anemia, beta thalassemia, hemoglobinopathy); duplication/deletion variant(s) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 81364 | HBB (hemoglobin, subunit beta) (eg, sickle cell anemia, beta thalassemia, hemoglobinopathy); full gene sequence | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 81370 | HLA Class I and II typing, low resolution (eg, antigen equivalents); HLA-A, -B, -C, -DRB1/3/4/5, and -DQB1 | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81371 | HLA Class I and II typing, low resolution (eg, antigen equivalents); HLA-A, -B, and -DRB1 (eg, verification typing) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81372 | HLA Class I typing, low resolution (eg, antigen equivalents); complete (ie, HLA-A, -B, and -C) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81373 | HLA Class I typing, low resolution (eg, antigen equivalents); one locus (eg, HLA-A, -B, or -C), each | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81374 | HLA Class I typing, low resolution (eg, antigen equivalents); one antigen equivalent (eg, B*27), each | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81375 | HLA Class II typing, low resolution (eg, antigen equivalents); HLA-DRB1/3/4/5 and -DQB1 | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81376 | HLA Class II typing, low resolution (eg, antigen equivalents); one locus (eg, HLA-DRB1, -DRB3/4/5, -DQB1, -DQA1, -DPB1, or -DPA1), each | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81377 | HLA Class II typing, low resolution (eg, antigen equivalents); one antigen equivalent, each | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81378 | HLA Class I and II typing, high resolution (ie, alleles or allele groups), HLA-A, -B, -C, and -DRB1 | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |

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| 81379 | HLA Class I typing, high resolution (ie, alleles or allele groups); complete (ie, HLA-A, -B, and -C) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81380 | HLA Class I typing, high resolution (ie, alleles or allele groups); one locus (eg, HLA-A, -B, or -C), each | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81381 | HLA Class I typing, high resolution (ie, alleles or allele groups); one allele or allele group (eg, B*57:01P), each | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81382 | HLA Class II typing, high resolution (ie, alleles or allele groups); one locus (eg, HLA-DRB1, -DRB3/4/5, -DQB1, -DQA1, -DPB1, or -DPA1), each | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81383 | HLA Class II typing, high resolution (ie, alleles or allele groups); one allele or allele group (eg, HLA-DQB1*06:02P), each | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/12 | None |
| 81400 | Molecular pathology procedure, Level 1 (eg, identification of single germline variant [eg, SNP] by techniques such as restriction enzyme digestion or melt curve analysis) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81401 | Molecular pathology procedure, Level 2 (eg, 2-10 SNPs, 1 methylated variant, or 1 somatic variant [typically using nonsequencing target variant analysis], or detection of a dynamic mutation disorder/triplet repeat) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81402 | Molecular pathology procedure, Level 3 (eg, >10 SNPs, 2-10 methylated variants, or 2-10 somatic variants [typically using non-sequencing target variant analysis], immunoglobulin and T-cell receptor gene rearrangements, duplication/deletion variants of 1 exon, loss of heterozygosity [LOH], uniparental disomy [UPD]) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81403 | Molecular pathology procedure, Level 4 (eg, analysis of single exon by DNA sequence analysis, analysis of >10 amplicons using multiplex PCR in 2 or more independent reactions, mutation scanning or duplication/deletion variants of 2-5 exons) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81404 | Molecular pathology procedure, Level 5 (eg, analysis of 2-5 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 6-10 exons, or characterization of a dynamic mutation disorder/triplet repeat by Southern blot analysis) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81405 | Molecular pathology procedure, Level 6 (eg, analysis of 6-10 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 11-25 exons, regionally targeted cytogenomic array analysis) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81406 | Molecular pathology procedure, Level 7 (eg, analysis of 11-25 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 26-50 exons) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81407 | Molecular pathology procedure, Level 8 (eg, analysis of 26-50 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of >50 exons, sequence analysis of multiple genes on one platform) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81408 | Molecular pathology procedure, Level 9 (eg, analysis of >50 exons in a single gene by DNA sequence analysis) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/12 | None |
| 81410 | Aortic dysfunction or dilation (eg, Marfan syndrome, Loeys Dietz syndrome, Ehler Danlos syndrome type IV, arterial tortuosity syndrome); genomic sequence analysis panel, must include sequencing of at least 9 genes, including FBN1, TGFB1, TGFB2, COL3A1, MYH11, ACTA2, SLC2A10, SMAD3, and MYLK | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/15 | None |
| 81411 | Aortic dysfunction or dilation (eg, Marfan syndrome, Loeys Dietz syndrome, Ehler Danlos syndrome type IV, arterial tortuosity syndrome); duplication/deletion analysis panel, must include analyses for TGFB1, TGFB2, MYH11, and COL3A1 | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/15 | None |
| 81412 | Ashkenazi Jewish associated disorders (eg, Bloom syndrome, Canavan disease, cystic fibrosis, familial dysautonomia, Fanconi anemia group C, Gaucher disease, Tay-Sachs disease), genomic sequence analysis panel, must include sequencing of at least 9 genes, including ASPA, BLM, CFTR, FANCC, GBA, HEXA, IKBKAP, MCOLN1, and SMPD1 | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/16 | None |
| 81413 | Cardiac ion channelopathies (eg, Brugada syndrome, long QT syndrome, short QT syndrome, catecholaminergic polymorphic ventricular tachycardia); genomic sequence analysis panel, must include sequencing of at least 10 genes, including ANK2, CASQ2, CAV3, KCNE1, KCNE2, KCNH2, KCNJ2, KCNQ1, RYR2, and SCN5A | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/17 | None |
| 81414 | Cardiac ion channelopathies (eg, Brugada syndrome, long QT syndrome, short QT syndrome, catecholaminergic polymorphic ventricular tachycardia); duplication/deletion gene analysis panel, must include analysis of at least 2 genes, including KCNH2 and KCNQ1 | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/17 | None |
| 81415 | Exome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/15 | None |
| 81416 | Exome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis, each comparator exome (eg, parents, siblings) (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/15 | None |
| 81417 | Exome (eg, unexplained constitutional or heritable disorder or syndrome); re-evaluation of previously obtained exome sequence (eg, updated knowledge or unrelated condition/syndrome) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/15 | None |

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| 81419 | Epilepsy genomic sequence analysis panel, must include analyses for ALDH7A1, CACNA1A, CDKL5, CHD2, GABRG2, GRIN2A, KCNQ2, MECP2, PCDH19, POLG, PRRT2, SCN1A, SCN1B, SCN2A, SCN8A, SLC2A1, SLC9A6, STXBP1, SYNGAP1, TCF4, TPP1, TSC1, TSC2, and ZEB2 | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/21 | None |
| 81420 | Fetal chromosomal aneuploidy (eg, trisomy 21, monosomy X) genomic sequence analysis panel, circulating cell-free fetal DNA in maternal blood, must include analysis of chromosomes 13, 18, and 21 | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/15 | None |
| 81422 | Fetal chromosomal microdeletion(s) genomic sequence analysis (eg, DiGeorge syndrome, Cri-du-chat syndrome), circulating cell-free fetal DNA in maternal blood | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/17 | None |
| 81425 | Genome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/15 | None |
| 81426 | Genome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis, each comparator genome (eg, parents, siblings) (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/15 | None |
| 81427 | Genome (eg, unexplained constitutional or heritable disorder or syndrome); re-evaluation of previously obtained genome sequence (eg, updated knowledge or unrelated condition/syndrome) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/15 | None |
| 81430 | Hearing loss (eg, nonsyndromic hearing loss, Usher syndrome, Pendred syndrome); genomic sequence analysis panel, must include sequencing of at least 60 genes, including CDH23, CLRN1, GJB2, GPR98, MTRNR1, MYO7A, MYO15A, PCDH15, OTOF, SLC26A4, TMC1, TMPRSS3, USH1C, USH1G, USH2A, and WFS1 | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/15 | None |
| 81431 | Hearing loss (eg, nonsyndromic hearing loss, Usher syndrome, Pendred syndrome); duplication/deletion analysis panel, must include copy number analyses for STRC and DFNB1 deletions in GJB2 and GJB6 genes | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/15 | None |
| 81432 | Hereditary breast cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer); genomic sequence analysis panel, must include sequencing of at least 10 genes, always including BRCA1, BRCA2, CDH1, MLH1, MSH2, MSH6, PALB2, PTEN, STK11, and TP53 | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/16 | None |
| 81433 | Hereditary breast cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer); duplication/deletion analysis panel, must include analyses for BRCA1, BRCA2, MLH1, MSH2, and STK11 | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/16 | None |
| 81434 | Hereditary retinal disorders (eg, retinitis pigmentosa, Leber congenital amaurosis, cone-rod dystrophy), genomic sequence analysis panel, must include sequencing of at least 15 genes, including ABCA4, CNGA1, CRB1, EYS, PDE6A, PDE6B, PRPF31, PRPH2, RDH12, RHO, RP1, RP2, RPE65, RPGR, and USH2A | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/16 | None |
| 81435 | Hereditary colon cancer disorders (eg, Lynch syndrome, PTEN hamartoma syndrome, Cowden syndrome, familial adenomatous polyposis); genomic sequence analysis panel, must include sequencing of at least 10 genes, including APC, BMPR1A, CDH1, MLH1, MSH2, MSH6, MUTYH, PTEN, SMAD4, and STK11 | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/15 | None |
| 81436 | Hereditary colon cancer disorders (eg, Lynch syndrome, PTEN hamartoma syndrome, Cowden syndrome, familial adenomatous polyposis); duplication/deletion analysis panel, must include analysis of at least 5 genes, including MLH1, MSH2, EPCAM, SMAD4, and STK11 | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/15 | None |
| 81437 | Hereditary neuroendocrine tumor disorders (eg, medullary thyroid carcinoma, parathyroid carcinoma, malignant pheochromocytoma or paraganglioma); genomic sequence analysis panel, must include sequencing of at least 6 genes, including MAX, SDHB, SDHC, SDHD, TMEM127, and VHL | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/16 | None |
| 81438 | Hereditary neuroendocrine tumor disorders (eg, medullary thyroid carcinoma, parathyroid carcinoma, malignant pheochromocytoma or paraganglioma); duplication/deletion analysis panel, must include analyses for SDHB, SDHC, SDHD, and VHL | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/16 | None |
| 81439 | Hereditary cardiomyopathy (eg, hypertrophic cardiomyopathy, dilated cardiomyopathy, arrhythmogenic right ventricular cardiomyopathy), genomic sequence analysis panel, must include sequencing of at least 5 cardiomyopathy-related genes (eg, DSG2, MYBPC3, MYH7, PKP2, TTN) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/17 | None |
| 81440 | Nuclear encoded mitochondrial genes (eg, neurologic or myopathic phenotypes), genomic sequence panel, must include analysis of at least 100 genes, including BCS1L, C10orf2, COQ2, COX10, DGUOK, MPV17, OPA1, PDS2, POLG, RRM2B, SCO1, SCO2, SLC25A4, SUCLA2, SUCLG1, TAZ, TK2, and TYMP | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/15 | None |
| 81442 | Noonan spectrum disorders (eg, Noonan syndrome, cardio-facio-cutaneous syndrome, Costello syndrome, LEOPARD syndrome, Noonan-like syndrome), genomic sequence analysis panel, must include sequencing of at least 12 genes, including BRAF, CBL, HRAS, KRAS, MAP2K1, MAP2K2, NRAS, PTPN11, RAF1, RIT1, SHOC2, and SOS1 | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/16 | None |

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| 81443 | Genetic testing for severe inherited conditions (eg, cystic fibrosis, Ashkenazi Jewish-associated disorders [eg, Bloom syndrome, Canavan disease, Fanconi anemia type C, mucopolipidosis type VI, Gaucher disease, Tay-Sachs disease], beta hemoglobinopathies, phenylketonuria, galactosemia), genomic sequence analysis panel, must include sequencing of at least 15 genes (eg, ACADM, ARSA, ASPA, ATP7B, BCKDHA, BCKDHB, BLM, CFTR, DHCR7, FANCC, G6PC, GAA, GALT, GBA, GBE1, HBB, HEXA, IKBKAP, MCOLN1, PAH) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/19 | None |
| 81445 | Targeted genomic sequence analysis panel, solid organ neoplasm, DNA analysis, and RNA analysis when performed, 5-50 genes (eg, ALK, BRAF, CDKN2A, EGFR, ERBB2, KIT, KRAS, NRAS, MET, PDGFRA, PDGFRB, PGR, PIK3CA, PTEN, RET), interrogation for sequence variants and copy number variants or rearrangements, if performed | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/15 | None |
| 81448 | Hereditary peripheral neuropathies (eg, Charcot-Marie-Tooth, spastic paraplegia), genomic sequence analysis panel, must include sequencing of at least 5 peripheral neuropathy-related genes (eg, BSCL2, GJB1, MFN2, MPZ, REEP1, SPAST, SPG11, SPTLC1) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 81450 | Targeted genomic sequence analysis panel, hematolymphoid neoplasm or disorder, DNA analysis, and RNA analysis when performed, 5-50 genes (eg, BRAF, CEBPA, DNMT3A, EZH2, FLT3, IDH1, IDH2, JAK2, KRAS, KIT, MLL, NRAS, NPM1, NOTCH1), interrogation for sequence variants, and copy number variants or rearrangements, or isoform expression or mRNA expression levels, if performed | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/15 | None |
| 81455 | Targeted genomic sequence analysis panel, solid organ or hematolymphoid neoplasm, DNA analysis, and RNA analysis when performed, 51 or greater genes (eg, ALK, BRAF, CDKN2A, CEBPA, DNMT3A, EGFR, ERBB2, EZH2, FLT3, IDH1, IDH2, JAK2, KIT, KRAS, MLL, NPM1, NRAS, MET, NOTCH1, PDGFRA, PDGFRB, PGR, PIK3CA, PTEN, RET), interrogation for sequence variants and copy number variants or rearrangements, if performed | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/15 | None |
| 81460 | Whole mitochondrial genome (eg, Leigh syndrome, mitochondrial encephalomyopathy, lactic acidosis, and stroke-like episodes [MELAS], myoclonic epilepsy with ragged-red fibers [MERFF], neuropathy, ataxia, and retinitis pigmentosa [NARP], Leber hereditary optic neuropathy [LHON]), genomic sequence, must include sequence analysis of entire mitochondrial genome with heteroplasmy detection | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/15 | None |
| 81465 | Whole mitochondrial genome large deletion analysis panel (eg, Kearns-Sayre syndrome, chronic progressive external ophthalmoplegia), including heteroplasmy detection, if performed | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/15 | None |
| 81470 | X-linked intellectual disability (XLID) (eg, syndromic and non-syndromic XLID); genomic sequence analysis panel, must include sequencing of at least 60 genes, including ARX, ATRX, CDKL5, FGD1, FMR1, HUWE1, IL1RAPL, KDM5C, L1CAM, MECP2, MED12, MID1, OCRL, RPS6KA3, and SLC16A2 | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/15 | None |
| 81471 | X-linked intellectual disability (XLID) (eg, syndromic and non-syndromic XLID); duplication/deletion gene analysis, must include analysis of at least 60 genes, including ARX, ATRX, CDKL5, FGD1, FMR1, HUWE1, IL1RAPL, KDM5C, L1CAM, MECP2, MED12, MID1, OCRL, RPS6KA3, and SLC16A2 | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/15 | None |
| 81479 | Unlisted molecular pathology procedure | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/13 | None |
| 81490 | Autoimmune (rheumatoid arthritis), analysis of 12 biomarkers using immunoassays, utilizing serum, prognostic algorithm reported as a disease activity score | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/16 | None |
| 81493 | Coronary artery disease, mRNA, gene expression profiling by real-time RT-PCR of 23 genes, utilizing whole peripheral blood, algorithm reported as a risk score | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/16 | None |
| 81500 | Oncology (ovarian), biochemical assays of two proteins (CA-125 and HE4), utilizing serum, with menopausal status, algorithm reported as a risk score | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/13 | None |
| 81503 | Oncology (ovarian), biochemical assays of five proteins (CA-125, apolipoprotein A1, beta-2 microglobulin, transferrin, and pre-albumin), utilizing serum, algorithm reported as a risk score | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/14 | None |
| 81504 | Oncology (tissue of origin), microarray gene expression profiling of > 2000 genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as tissue similarity scores | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/14 | None |
| 81506 | Endocrinology (type 2 diabetes), biochemical assays of seven analytes (glucose, HbA1c, insulin, hs-CRP, adiponectin, ferritin, interleukin 2-receptor alpha), utilizing serum or plasma, algorithm reporting a risk score | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/13 | None |
| 81507 | Fetal aneuploidy (trisomy 21, 18, and 13) DNA sequence analysis of selected regions using maternal plasma, algorithm reported as a risk score for each trisomy | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/14 | None |
| 81508 | Fetal congenital abnormalities, biochemical assays of two proteins (PAPP-A, hCG [any form]), utilizing maternal serum, algorithm reported as a risk score | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/13 | None |
| 81509 | Fetal congenital abnormalities, biochemical assays of three proteins (PAPP-A, hCG [any form], DIA), utilizing maternal serum, algorithm reported as a risk score | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/13 | None |
| 81510 | Fetal congenital abnormalities, biochemical assays of three analytes (AFP, uE3, hCG [any form]), utilizing maternal serum, algorithm reported as a risk score | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/13 | None |

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| 81511 | Fetal congenital abnormalities, biochemical assays of four analytes (AFP, uE3, hCG [any form], DIA) utilizing maternal serum, algorithm reported as a risk score (may include additional results from previous biochemical testing) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/13 | None |
| 81512 | Fetal congenital abnormalities, biochemical assays of five analytes (AFP, uE3, total hCG, hyperglycosylated hCG, DIA) utilizing maternal serum, algorithm reported as a risk score | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/13 | None |
| 81513 | Infectious disease, bacterial vaginosis, quantitative real-time amplification of RNA markers for Atopobium vaginae, Gardnerella vaginalis, and Lactobacillus species, utilizing vaginal-fluid specimens, algorithm reported as a positive or negative result for bacterial vaginosis | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/21 | None |
| 81514 | Infectious disease, bacterial vaginosis and vaginitis, quantitative real-time amplification of DNA markers for Gardnerella vaginalis, Atopobium vaginae, Megasphaera type 1, Bacterial Vaginosis Associated Bacteria-2 (BVAB-2), and Lactobacillus species (L. crispatus and L. jensenii), utilizing vaginal-fluid specimens, algorithm reported as a positive or negative for high likelihood of bacterial vaginosis, includes separate detection of Trichomonas vaginalis and/or Candida species (C. albicans, C. tropicalis, C. parapsilosis, C. dubliniensis), Candida glabrata, Candida krusei, when reported | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/21 | None |
| 81518 | Oncology (breast), mRNA, gene expression profiling by real-time RT-PCR of 11 genes (7 content and 4 housekeeping), utilizing formalin-fixed paraffin- embedded tissue, algorithms reported as percentage risk for metastatic recurrence and likelihood of benefit from extended endocrine therapy | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/19 | None |
| 81519 | Oncology (breast), mRNA, gene expression profiling by real-time RT-PCR of 21 genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as recurrence score | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/15 | None |
| 81520 | Oncology (breast), mRNA gene expression profiling by hybrid capture of 58 genes (50 content and 8 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a recurrence risk score | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 81521 | Oncology (breast), mRNA, microarray gene expression profiling of 70 content genes and 465 housekeeping genes, utilizing fresh frozen or formalin-fixed paraffin-embedded tissue, algorithm reported as index related to risk of distant metastasis | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 81522 | Oncology (breast), mRNA, gene expression profiling by RT-PCR of 12 genes (8 content and 4 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as recurrence risk score | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/20 | None |
| 81523 | Oncology (breast), mRNA, next-generation sequencing gene expression profiling of 70 content genes and 31 housekeeping genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as index related to risk to distant metastasis | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/22 | None |
| 81525 | Oncology (colon), mRNA, gene expression profiling by real-time RT-PCR of 12 genes (7 content and 5 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a recurrence score | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/16 | None |
| 81528 | Oncology (colorectal) screening, quantitative real-time target and signal amplification of 10 DNA markers (KRAS mutations, promoter methylation of NDRG4 and BMP3) and fecal hemoglobin, utilizing stool, algorithm reported as a positive or negative result | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/16 | None |
| 81529 | Oncology (cutaneous melanoma), mRNA, gene expression profiling by real-time RT-PCR of 31 genes (28 content and 3 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as recurrence risk, including likelihood of sentinel lymph node metastasis | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/21 | None |
| 81535 | Oncology (gynecologic), live tumor cell culture and chemotherapeutic response by DAPI stain and morphology, predictive algorithm reported as a drug response score; first single drug or drug combination | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/16 | None |
| 81536 | Oncology (gynecologic), live tumor cell culture and chemotherapeutic response by DAPI stain and morphology, predictive algorithm reported as a drug response score; each additional single drug or drug combination (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/16 | None |
| 81538 | Oncology (lung), mass spectrometric 8-protein signature, including amyloid A, utilizing serum, prognostic and predictive algorithm reported as good versus poor overall survival | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/16 | None |
| 81539 | Oncology (high-grade prostate cancer), biochemical assay of four proteins (Total PSA, Free PSA, Intact PSA, and human kallikrein-2 [hK2]), utilizing plasma or serum, prognostic algorithm reported as a probability score | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/17 | None |
| 81540 | Oncology (tumor of unknown origin), mRNA, gene expression profiling by real-time RT-PCR of 92 genes (87 content and 5 housekeeping) to classify tumor into main cancer type and subtype, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a probability of a predicted main cancer type and subtype | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/16 | None |
| 81541 | Oncology (prostate), mRNA gene expression profiling by real-time RT-PCR of 46 genes (31 content and 15 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a disease-specific mortality risk score | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 81542 | Oncology (prostate), mRNA, microarray gene expression profiling of 22 content genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as metastasis risk score | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/20 | None |

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| 81546 | Oncology (thyroid), mRNA, gene expression analysis of 10,196 genes, utilizing fine needle aspirate, algorithm reported as a categorical result (eg, benign or suspicious) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/21 | None |
| 81551 | Oncology (prostate), promoter methylation profiling by real-time PCR of 3 genes (GSTP1, APC, RASSF1), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a likelihood of prostate cancer detection on repeat biopsy | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 81552 | Oncology (uveal melanoma), mRNA, gene expression profiling by real-time RT-PCR of 15 genes (12 content and 3 housekeeping), utilizing fine needle aspirate or formalin-fixed paraffin-embedded tissue, algorithm reported as risk of metastasis | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/20 | None |
| 81554 | Pulmonary disease (idiopathic pulmonary fibrosis [IPF]), mRNA, gene expression analysis of 190 genes, utilizing transbronchial biopsies, diagnostic algorithm reported as categorical result (eg, positive or negative for high probability of usual interstitial pneumonia [UIP]) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/21 | None |
| 81560 | Transplantation medicine (allograft rejection, pediatric liver and small bowel), measurement of donor and third-party-induced CD154+T-cytotoxic memory cells, utilizing whole peripheral blood, algorithm reported as a rejection risk score | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 81595 | Cardiology (heart transplant), mRNA, gene expression profiling by real-time quantitative PCR of 20 genes (11 content and 9 housekeeping), utilizing subfraction of peripheral blood, algorithm reported as a rejection risk score | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/16 | None |
| 81596 | Infectious disease, chronic hepatitis C virus (HCV) infection, six biochemical assays (ALT, A2-macroglobulin, apolipoprotein A-1, total bilirubin, GGT, and haptoglobin) utilizing serum, prognostic algorithm reported as scores for fibrosis and necroinflammatory activity in liver | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/19 | None |
| 81599 | Unlisted multianalyte assay with algorithmic analysis | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/13 | None |
| 82009 | Qualitative Analysis Of Acetone In Serum | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82010 | Measurement Of Ketone Body In Serum | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82013 | Measurement Of Red Blood Cell Acetylcholinesterase | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82016 | Qualitative Analysis Of Acylcarnitine | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 82017 | Measurement Of Acylcarnitine | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 82024 | Measurement Of Adrenocorticotrophic Hormone (Acth) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82030 | Measurement Of Cyclic 5-Monophosphate Adenosine (Cyclic Amp) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82040 | Measurement Of Albumin In Plasma | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82042 | Measurement Of Albumin In Urine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82043 | Measurement Of Microalbumin In Urine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82044 | Semiquantitative Analysis Of Microalbumin In Urine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82045 | Measurement Of Ischemia Modified Albumin | NONMOLECULAR | Claim Policies Apply | 01/01/05 | None |
| 82075 | Alcohol (ethanol); breath | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82077 | Alcohol (ethanol); any specimen except urine and breath, immunoassay (eg, IA, EIA, ELISA, RIA, EMIT, FPIA) and enzymatic methods (eg, alcohol dehydrogenase) | NONMOLECULAR | Claim Policies Apply | 01/01/21 | None |
| 82085 | Measurement Of Aldolase | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82088 | Measurement Of Aldosterone | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82103 | Measurement Of Total Alpha-1-Antitrypsin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82104 | Analysis Of Alpha-1-Antitrypsin Phenotype | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82105 | Measurement Of Alpha-Fetoprotein (Afp) In Serum | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82106 | Measurement Of Alpha-Fetoprotein (Afp) In Amniotic Fluid | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82107 | Measurement Of Alpha Fetoprotein-L3 Fraction Isoform And Total Alpha-Fetoprotein With Ratio | NONMOLECULAR | Claim Policies Apply | 01/01/07 | None |
| 82108 | Measurement Of Aluminum | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82120 | Qualitative Analysis Of Amine In Vaginal Fluid | NONMOLECULAR | Claim Policies Apply | 01/01/00 | None |
| 82127 | Amino acids; single, qualitative, each specimen | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 82128 | Amino acids; multiple, qualitative, each specimen | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82131 | Amino acids; single, quantitative, each specimen | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82135 | Aminolevulinic acid, delta (ALA) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82136 | Amino acids, 2 to 5 amino acids, quantitative, each specimen | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 82139 | Amino acids, 6 or more amino acids, quantitative, each specimen | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 82140 | Ammonia | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82143 | Amniotic fluid scan (spectrophotometric) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82150 | Measurement Of Amylase | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82154 | Measurement Of Androstenediol Glucuronide | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 82157 | Measurement Of Androstenedione | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82160 | Measurement Of Androsterone | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82163 | Measurement Of Angiotensin Ii | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82164 | Measurement Of Angiotensin I-Converting Enzyme (Ace) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82172 | Measurement Of Apolipoprotein | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82175 | Measurement Of Arsenic | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |

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| 82180 | Measurement Of Ascorbic Acid In Blood | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82190 | Atomic absorption spectroscopy, each analyte | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82232 | Measurement Of Beta-2 Microglobulin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82239 | Measurement Of Total Bile Acids | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82240 | Measurement Of Cholyglycine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82247 | Measurement Of Total Bilirubin | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 82248 | Measurement Of Direct Bilirubin | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 82252 | Qualitive Analysis Of Bilirubin In Feces | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82261 | Measurement Of Biotinidase | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 82270 | Qualitative Analysis Of Occult Blood In Consecutive Collected Fecal Specimens By Peroxidase Activity | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82271 | Qualitative Analysis Of Occult Blood By Peroxidase Activity | NONMOLECULAR | Claim Policies Apply | 01/01/06 | None |
| 82272 | Qualitative Analysis Of Occult Blood In Feces By Peroxidase Activity | NONMOLECULAR | Claim Policies Apply | 01/01/06 | None |
| 82274 | Qualitative Immunoassay For Hemoglobin In Feces | NONMOLECULAR | Claim Policies Apply | 01/01/02 | None |
| 82286 | Measurement Of Bradykinin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82300 | Measurement Of Cadmium | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82306 | Measurement Of Vitamin D 25 Hydroxy | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82308 | Measurement Of Calcitonin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82310 | Measurement Of Total Calcium | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82330 | Measurement Of Ionized Calcium | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82331 | Measurement Of Calcium After Calcium Infusion Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82340 | Measurement Of Calcium In Timed Urine Specimen | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82355 | Qualitative Chemical Analysis Of Calculus | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82360 | Quantitative Chemical Analysis Of Calculus | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82365 | Infrared Spectroscopy Of Calculus | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82370 | X-Ray Diffraction Of Calculus | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82373 | Measurement Of Carbohydrate Deficient Transferrin | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 82374 | Measurement Of Carbon Dioxide | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82375 | Measurement Of Carboxyhemoglobin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82376 | Qualitative Analysis Of Carboxyhemoglobin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82378 | Measurement Of Carcinoembryonic Antigen | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82379 | Measurement Of Free And Total Carnitine | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 82380 | Measurement Of Carotene | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82382 | Measurement Of Total Catecholamines In Urine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82383 | Measurement Of Catecholamines In Blood | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82384 | Measurement Of Fractionated Catecholamines | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82387 | Measurement Of Cathepsin-D | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82390 | Measurement Of Ceruloplasmin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82397 | Chemiluminescent Assay | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82415 | Measurement Of Chloramphenicol | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82435 | Measurement Of Chloride In Blood | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82436 | Measurement Of Chloride In Urine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82438 | Measurement Of Chloride In Specimen | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82441 | Screening For Chlorinated Hydrocarbon | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82465 | Measurement Of Total Cholesterol In Whole Blood | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82480 | Measurement Of Cholinesterase In Serum | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82482 | Measurement Of Red Blood Cell Cholinesterase | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82485 | Measurement Of Chondroitin B Sulfate | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82495 | Measurement Of Chromium | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82507 | Measurement Of Citrate | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82523 | Measurement Of Collagen Cross Link | NONMOLECULAR | Claim Policies Apply | 01/01/97 | None |
| 82525 | Measurement Of Copper | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82528 | Measurement Of Corticosterone | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82530 | Measurement Of Free Cortisol | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82533 | Measurement Of Total Cortisol | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82540 | Measurement Of Creatine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82542 | Quantitative Column Chromatography | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 82550 | Measurement Of Total Creatine Kinase (Ck) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82552 | Measurement Of Creatine Kinase (Ck) Isoenzymes | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82553 | Measurement Of Creatine Kinase (Ck) Muscle And Brain (Mb) Fraction | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |

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| 82554 | Measurement Of Creatine Kinase (Ck) Isoforms | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82565 | Measurement Of Creatinine In Blood | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82570 | Measurement Of Creatinine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82575 | Creatinine Clearance Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82585 | Measurement Of Cryofibrinogen | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82595 | Semi-Quantitative Analysis Of Cryoglobulin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82600 | Measurement Of Cyanide | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82607 | Measurement Of Cyanocobalamin (Vitamin B-12) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82608 | Measurement Of Unsaturated Cyanocobalamin (Vitamin B-12) Binding Capacity | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82610 | Measurement Of Cystatin C | NONMOLECULAR | Claim Policies Apply | 01/01/08 | None |
| 82615 | Qualitative Analysis Of Cystine And Homocystine In Urine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82626 | Measurement Of Dehydroepiandrosterone (Dhea) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82627 | Measurement Of Dehydroepiandrosterone-Sulfate (Dhea-S) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82633 | Measurement Of 11-Desoxycorticosterone | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82634 | Measurement Of 11-Desoxycortisol | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82638 | Dibucaine Number Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82642 | Dihydrotestosterone (DHT) | NONMOLECULAR | Claim Policies Apply | 01/01/19 | None |
| 82652 | Measurement Of 1, 25 Dihydroxy Vitamin D | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82653 | Elastase, pancreatic (EL-1), fecal; quantitative | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 82656 | Qualitative Analysis Of Pancreatic Elastase (EI-1) In Feces | NONMOLECULAR | Claim Policies Apply | 01/01/05 | None |
| 82657 | Enzyme activity in blood cells, cultured cells, or tissue, not elsewhere specified; nonradioactive substrate, each specimen | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 82658 | Enzyme activity in blood cells, cultured cells, or tissue, not elsewhere specified; radioactive substrate, each specimen | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 82664 | Electrophoretic technique, not elsewhere specified | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82668 | Measurement Of Erythropoietin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82670 | Estradiol; total | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82671 | Measurement Of Fractionated Estrogens | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82672 | Measurement Of Total Estrogens | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82677 | Measurement Of Estriol | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82679 | Measurement Of Estrone | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82681 | Estradiol; free, direct measurement (eg, equilibrium dialysis) | NONMOLECULAR | Claim Policies Apply | 01/01/21 | None |
| 82693 | Qualitative Analysis Of Ethylene Glycol | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82696 | Measurement Of Etiocholanolone | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82705 | Qualitative Analysis Of Lipids In Feces | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82710 | Measurement Of Fat In Feces | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82715 | Measurement Of Fat Differential In Feces | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82725 | Measurement Of Nonesterified Fatty Acids | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82726 | Measurement Of Very Long Chain Fatty Acids | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 82728 | Measurement Of Ferritin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82731 | Semi-Quantitative Analysis Of Fetal Fibronectin In Cervicovaginal Secretion | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 82735 | Measurement Of Fluoride | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82746 | Measurement Of Folic Acid In Serum | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82747 | Measurement Of Red Blood Cell Folic Acid | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82757 | Measurement Of Fructose In Semen | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82759 | Measurement Of Red Blood Cell Galactokinase | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82760 | Measurement Of Galactose | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82775 | Measurement Of Galactose-1-Phosphate Uridyl Transferase | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82776 | Screening For Galactose-1-Phosphate Uridyl Transferase | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82777 | Galectin-3 Measurement | NONMOLECULAR | Claim Policies Apply | 01/01/13 | None |
| 82784 | Gammaglobulin (immunoglobulin); IgA, IgD, IgG, IgM, each | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82785 | Measurement Of Immunoglobulin E (Ige) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82787 | Measurement Of Immunoglobulin Subclass | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82800 | Analysis Of Ph Of Blood | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82803 | Analysis Of Blood Gases | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82805 | Analysis Of Co2 Of Blood | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 82810 | Direct Measurement Of O2 Saturation In Blood | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 82820 | Measurement Of Hemoglobin-Oxygen Affinity | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82930 | Gastric Acid Analysis With Ph | NONMOLECULAR | Claim Policies Apply | 01/01/11 | None |
| 82938 | Measurement Of Gastrin After Secretin Stimulation | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |

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|-------|---|--------------|----------------------|----------|------|
| 82941 | Measurement Of Gastrin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82943 | Measurement Of Glucagon | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82945 | Measurement Of Glucose In Body Fluid | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 82946 | Glucagon Tolerance Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82947 | Measurement Of Glucose In Blood | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82948 | Measurement Of Glucose In Blood Using Reagent Strip | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82950 | Measurement Of Glucose After Glucose Dose | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82951 | Glucose; tolerance test (GTT), 3 specimens (includes glucose) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82952 | Glucose; tolerance test, each additional beyond 3 specimens (List separately in addition to code for primary procedure) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82955 | Measurement Of Glucose-6-Phosphate Dehydrogenase (G6Pd) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82960 | Screening For Glucose-6-Phosphate Dehydrogenase (G6Pd) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82962 | Measurement Of Blood Glucose Using Fda-Approved Home Glucose Monitoring Device | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82963 | Measurement Of Beta Glucosidase | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82965 | Measurement Of Glutamate Dehydrogenase | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82977 | Measurement Of Gamma Glutamyltransferase (Ggt) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82978 | Measurement Of Glutathione | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82979 | Measurement Of Red Blood Cell Glutathione Reductase | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 82985 | Measurement Of Glycated Protein | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83001 | Measurement Of Follicle Stimulating Hormone (Fsh) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83002 | Measurement Of Luteinizing Hormone (Lh) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83003 | Measurement Of Human Growth Hormone (Hgh) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83006 | Growth Stimulation Expressed Gene 2 Analysis | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 83009 | Analysis Of Urease Activity In Blood Using C13 Isotope For Diagnosis Of Helicobacter Pylori | NONMOLECULAR | Claim Policies Apply | 01/01/05 | None |
| 83010 | Measurement Of Haptoglobin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83012 | Haptoglobin Phenotype Analysis | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83013 | Analysis Of Urease Activity In Breath Using C13 Isotope For Diagnosis Of Helicobacter Pylori | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 83014 | Administration Of Isotope For Analysis Of Urease Activity For Diagnosis Of Helicobacter Pylori | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 83015 | Screening For Heavy Metal | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83018 | Measurement Of Heavy Metal | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83020 | Fractionation And Measurement Of Hemoglobin Using Electrophoresis | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83021 | Fractionation And Measurement Of Hemoglobin Of Hemoglobin Using Chromatography | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 83026 | Measurement Of Hemoglobin Using Copper Sulfate Method | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83030 | Chemical Analysis Of Hemoglobin F | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83033 | Qualitative Analysis Of Hemoglobin F (Hb F) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83036 | Measurement Of Glycosylated Hemoglobin (Hba1C) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83037 | Measurement Of Glycosylated Hemoglobin By Fda-Approved Home Device | NONMOLECULAR | Claim Policies Apply | 01/01/06 | None |
| 83045 | Qualitative Analysis Of Methemoglobin In Hemoglobin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83050 | Measurement Of Methemoglobin In Hemoglobin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83051 | Measurement Of Hemoglobin In Plasma | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83060 | Measurement Of Sulfhemoglobin In Hemoglobin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83065 | Thermolabile Hemoglobin Heat Denaturation Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83068 | Screening For Unstable Hemoglobin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83069 | Analysis Of Hemoglobin In Urine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83070 | Qualitative Analysis Of Hemosiderin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83080 | Measurement Of B-Hexosaminidase | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 83088 | Measurement Of Histamine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83090 | Measurement Of Homocysteine | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 83150 | Measurement Of Homovanillic Acid (Hva) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83491 | Measurement Of Hydroxycorticosteroids, 17- (17-Ohcs) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83497 | Measurement Of 5-Hydroxyindolacetic Acid (Hiaa) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83498 | Measurement Of 17-D Hydroxyprogesterone | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83500 | Analysis Of Free Hydroxyproline | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83505 | Analysis Of Total Hydroxyproline | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83516 | Semiquantitative Immunoassay Using Multiple Step Method | NONMOLECULAR | Claim Policies Apply | 01/01/95 | None |
| 83518 | Qualitative Immunoassay Using Single Step Method | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83519 | Quantitative Immunoassay Using Radioimmunoassay | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |

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|-------|--|--------------|----------------------|----------|------|
| 83520 | Quantitative Immunoassay | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83521 | Immunoglobulin light chains (ie, kappa, lambda), free, each | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 83525 | Measurement Of Total Insulin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83527 | Measurement Of Free Insulin | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 83528 | Measurement Of Intrinsic Factor | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83529 | Interleukin-6 (IL-6) | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 83540 | Measurement Of Iron | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83550 | Measurement Of Iron Binding Capacity | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83570 | Measurement Of Isocitric Dehydrogenase (Idh) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83582 | Fractionation Of Ketogenic Steroids | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83586 | Measurement Of Total 17-Ketosteroids | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83593 | Fractionation Of 17-Ketosteroids | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83605 | Measurement Of Lactate (Lactic Acid) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83615 | Measurement Of Lactate Dehydrogenase (Ld), (Ldh) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83625 | Separation And Measurement Of Lactate Dehydrogenase (Ld), (Ldh) Isoenzymes | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83630 | Qualitative Analysis Of Lactoferrin In Feces | NONMOLECULAR | Claim Policies Apply | 01/01/05 | None |
| 83631 | Measurement Of Lactoferrin In Feces | NONMOLECULAR | Claim Policies Apply | 01/01/06 | None |
| 83632 | Measurement Of Human Placental Lactogen | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83633 | Qualitative Analysis Of Lactose In Urine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83655 | Measurement Of Lead | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83661 | Assessment Of Fetal Lung Maturity Using Lecithin Sphingomyelin (L/S) Ratio | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83662 | Assessment Of Fetal Lung Maturity Using Foam Stability Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83663 | Assessment Of Fetal Lung Maturity Using Fluorescence Polarization | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 83664 | Assessment Of Fetal Lung Maturity Using Lamellar Body Density | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 83670 | Measurement Of Leucine Aminopeptidase (Lap) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83690 | Measurement Of Lipase | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83695 | Measurement Of Lipoprotein (A) | NONMOLECULAR | Claim Policies Apply | 01/01/06 | None |
| 83698 | Measurement Of Lipoprotein-Associated Phospholipase A2 (Lp-Pla2) | NONMOLECULAR | Claim Policies Apply | 01/01/07 | None |
| 83700 | Separation And Measurement Of Lipoprotein In Blood Using Electrophoresis | NONMOLECULAR | Claim Policies Apply | 01/01/06 | None |
| 83701 | High Resolution Fractionation And Measurement Of Lipoprotein In Blood | NONMOLECULAR | Claim Policies Apply | 01/01/06 | None |
| 83704 | Measurement Of Lipoprotein Particle Numbers And Lipoprotein Particle Subclasses In Blood | NONMOLECULAR | Claim Policies Apply | 01/01/06 | None |
| 83718 | Direct Measurement Of High Density Cholesterol (Hdl Cholesterol) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83719 | Direct Measurement Of Very Low Density Cholesterol (Vldl Cholesterol) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83721 | Direct Measurement Of Low Density Cholesterol (Ldl Cholesterol) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83722 | Lipoprotein, direct measurement; small dense LDL cholesterol | NONMOLECULAR | Claim Policies Apply | 01/01/19 | None |
| 83727 | Measurement Of Luteinizing Releasing Factor (Lrh) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83735 | Measurement Of Magnesium | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83775 | Measurement Of Malate Dehydrogenase | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83785 | Measurement Of Manganese | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83789 | Quantitative Mass Spectrometry | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 83825 | Measurement Of Mercury | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83835 | Measurement Of Metanephrines | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83857 | Measurement Of Methemalbumin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83861 | Microfluidic Analysis Of Osmolarity In Tears Using Integrated Collection And Analysis Device | NONMOLECULAR | Claim Policies Apply | 01/01/11 | None |
| 83864 | Measurement Of Acid Mucopolysaccharides | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83872 | Mucin Coagulation Test In Synovial Fluid | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83873 | Analysis Of Myelin Basic Protein In Cerebrospinal Fluid | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83874 | Measurement Of Myoglobin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83876 | Measurement Of Myeloperoxidase (Mpo) | NONMOLECULAR | Claim Policies Apply | 01/01/09 | None |
| 83880 | Measurement Of Natriuretic Peptide | NONMOLECULAR | Claim Policies Apply | 01/01/03 | None |
| 83883 | Nephelometry | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83885 | Measurement Of Nickel | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83915 | Measurement Of 5'-Nucleotidase | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83916 | Oligoclonal Band Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83918 | Organic acids; total, quantitative, each specimen | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83919 | Organic acids; qualitative, each specimen | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 83921 | Organic acid, single, quantitative | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 83930 | Analysis Of Osmolality In Blood | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |

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|-------|---|--------------|----------------------|----------|------|
| 83935 | Analysis Of Osmolality In Urine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83937 | Measurement Of Osteocalcin (Bone G1A Protein) | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 83945 | Measurement Of Oxalate | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83950 | Measurement Of Her-2/Neu Oncoprotein | NONMOLECULAR | Claim Policies Apply | 01/01/02 | None |
| 83951 | Measurement Of Des-Gamma-Carboxy-Prothrombin (Dcp) Oncoprotein | NONMOLECULAR | Claim Policies Apply | 01/01/09 | None |
| 83970 | Measurement Of Parathormone (Parathyroid Hormone) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83986 | Analysis Of Ph In Body Fluid | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83987 | Analysis Of Ph In Exhaled Breath Condensate | NONMOLECULAR | Claim Policies Apply | 01/01/10 | None |
| 83992 | Measurement Of Phencyclidine (Pcp) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 83993 | Measurement Of Calprotectin In Feces | NONMOLECULAR | Claim Policies Apply | 01/01/08 | None |
| 84030 | Measurement Of Phenylalanine (Pku) In Blood | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84035 | Qualitative Analysis Of Phenylketone | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84060 | Measurement Of Total Acid Phosphatase | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84066 | Measurement Of Prostatic Acid Phosphatase | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84075 | Measurement Of Alkaline Phosphatase | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84078 | Measurement Of Heat Stable Alkaline Phosphatase | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84080 | Measurement Of Alkaline Phosphatase Isoenzymes | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84081 | Measurement Of Phosphatidylglycerol | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84085 | Measurement Of Red Blood Cell 6-Dehydrogenase Phosphogluconate | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84087 | Measurement Of Phosphohexose Isomerase | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84100 | Measurement Of Inorganic Phosphorus (Phosphate) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84105 | Measurement Of Inorganic Phosphorus (Phosphate) In Urine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84106 | Qualitative Analysis Of Porphobilinogen In Urine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84110 | Measurement Of Porphobilinogen In Urine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84112 | Qualitative Analysis Of Placental Alpha Microglobulin-1 (Pamg-1) In Cervicovaginal Secretion | NONMOLECULAR | Claim Policies Apply | 01/01/11 | None |
| 84119 | Qualitative Analysis Of Porphyrins In Urine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84120 | Fractionation And Measurement Of Porphyrins In Urine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84126 | Measurement Of Porphyrins In Feces | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84132 | Measurement Of Potassium In Whole Blood | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84133 | Measurement Of Potassium In Urine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84134 | Measurement Of Prealbumin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84135 | Measurement Of Pregnanediol | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84138 | Measurement Of Pregnanetriol | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84140 | Measurement Of Pregnenolone | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 84143 | Measurement Of 17-Hydroxypregnenolone | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 84144 | Measurement Of Progesterone | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84145 | Measurement Of Procalcitonin (Pct) | NONMOLECULAR | Claim Policies Apply | 01/01/10 | None |
| 84146 | Measurement Of Prolactin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84150 | Measurement Of Prostaglandin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84152 | Direct Measurement Of Complexed Prostate Specific Antigen (Psa) | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 84153 | Measurement Of Total Prostate Specific Antigen (Psa) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84154 | Measurement Of Free Prostate Specific Antigen (Psa) | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 84155 | Measurement Of Total Protein In Whole Blood | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84156 | Measurement Of Total Protein In Urine | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| 84157 | Measurement Of Total Protein | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| 84160 | Measurement Of Total Protein Using Refractometry | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84163 | Measurement Of Pregnancy-Associated Plasma Protein-A (Papp-A) | NONMOLECULAR | Claim Policies Apply | 01/01/05 | None |
| 84165 | Protein; electrophoretic fractionation and quantitation, serum | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84166 | Protein; electrophoretic fractionation and quantitation, other fluids with concentration (eg, urine, CSF) | NONMOLECULAR | Claim Policies Apply | 01/01/05 | None |
| 84181 | Western Blot Protein Immunoassay On Blood | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84182 | Protein; Western Blot, with interpretation and report, blood or other body fluid, immunological probe for band identification, each | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84202 | Measurement Of Red Blood Cell Protoporphyrin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84203 | Screening For Red Blood Cell Protoporphyrin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84206 | Measurement Of Proinsulin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84207 | Measurement Of Pyridoxal Phosphate (Vitamin B-6) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84210 | Measurement Of Pyruvate | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84220 | Measurement Of Pyruvate Kinase | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |

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|-------|---|--------------|----------------------|----------|------|
| 84228 | Measurement Of Quinine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84233 | Assay For Estrogen Receptor | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84234 | Assay For Progesterone Receptor | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84235 | Assay For Endocrine Receptor | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84238 | Receptor assay; non-endocrine (specify receptor) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84244 | Measurement Of Renin Activity+C6442 | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84252 | Measurement Of Riboflavin (Vitamin B-2) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84255 | Measurement Of Selenium | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84260 | Measurement Of Serotonin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84270 | Measurement Of Sex Hormone Binding Globulin (Shbg) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84275 | Measurement Of Sialic Acid | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84285 | Measurement Of Silica | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84295 | Measurement Of Sodium In Plasma | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84300 | Measurement Of Sodium In Urine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84302 | Measurement Of Sodium | NONMOLECULAR | Claim Policies Apply | 01/01/03 | None |
| 84305 | Measurement Of Somatomedin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84307 | Measurement Of Somatostatin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84311 | Spectrophotometry, analyte not elsewhere specified | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84315 | Measurement Of Specific Gravity | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84375 | Sugars, chromatographic, TLC or paper chromatography | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84376 | Sugars (mono-, di-, and oligosaccharides); single qualitative, each specimen | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 84377 | Sugars (mono-, di-, and oligosaccharides); multiple qualitative, each specimen | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 84378 | Sugars (mono-, di-, and oligosaccharides); single quantitative, each specimen | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 84379 | Sugars (mono-, di-, and oligosaccharides); multiple quantitative, each specimen | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 84392 | Sulfate, urine | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 84402 | Measurement Of Free Testosterone | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84403 | Measurement Of Total Testosterone | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84410 | Testosterone Bioavailable | NONMOLECULAR | Claim Policies Apply | 01/01/17 | None |
| 84425 | Measurement Of Thiamine (Vitamin B-1) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84430 | Measurement Of Thiocyanate | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84431 | Measurement Of Thromboxane Metabolite In Urine | NONMOLECULAR | Claim Policies Apply | 01/01/10 | None |
| 84432 | Measurement Of Thyroglobulin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84436 | Measurement Of Total Thyroxine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84437 | Measurement Of Thyroxine With Elution | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84439 | Measurement Of Free Thyroxine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84442 | Measurement Of Thyroxine Binding Globulin (Tbg) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84443 | Measurement Of Thyroid Stimulating Hormone (Tsh) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84445 | Measurement Of Thyroid Stimulating Immune Globulins (Tsi) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84446 | Measurement Of Alpha Tocopherol (Vitamin E) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84449 | Measurement Of Transcortin (Cortisol Binding Globulin) | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 84450 | Measurement Of Aspartate Amino Transferase (Ast) (Sgot) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84460 | Measurement Of Alanine Amino Transferase (Alt) (Sgpt) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84466 | Measurement Of Transferrin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84478 | Measurement Of Triglycerides | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84479 | Measurement Of Triiodothyronine Uptake | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84480 | Measurement Of Total Triiodothyronine (Tt-3) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84481 | Measurement Of Free Triiodothyronine (T3) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84482 | Measurement Of Reverse Triiodothyronine (Rt3) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84484 | Measurement Of Troponin | NONMOLECULAR | Claim Policies Apply | 01/01/97 | None |
| 84485 | Measurement Of Trypsin In Duodenal Fluid | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84488 | Qualitative Analysis Of Trypsin In Feces | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84490 | Measurement Of Trypsin In 24-Hour Collection Of Feces | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84510 | Measurement Of Tyrosine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84512 | Qualitative Analysis Of Troponin | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 84520 | Measurement Of Blood Urea Nitrogen (Bun) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84525 | Semiquantitative Analysis Of Blood Urea Nitrogen (Bun) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84540 | Measurement Of Urea Nitrogen In Urine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84545 | Measurement Of Blood Urea Nitrogen (Bun) Clearance | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84550 | Measurement Of Uric Acid In Blood | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |

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|-------|---|-------------------|------------------------------|----------|------|
| 84560 | Measurement Of Uric Acid | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84577 | Measurement Of Urobilinogen In Feces | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84578 | Qualitative Analysis Of Urobilinogen In Urine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84580 | Measurement Of Urobilinogen In Timed Urine Specimen | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84583 | Semiquantitative Analysis Of Urobilinogen In Urine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84585 | Measurement Of Vanillylmandelic Acid (Vma) In Urine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84586 | Measurement Of Vasoactive Intestinal Peptide (Vip) | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 84588 | Measurement Of Vasopressin (Antidiuretic Hormone, Adh) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84590 | Vitamin A | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84591 | Vitamin, not otherwise specified | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 84597 | Vitamin K | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84600 | Measurement Of Volatile Substance | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84620 | Xylose Absorption Test On Blood And Urine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84630 | Measurement Of Zinc | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84681 | Measurement Of C-Peptide | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84702 | Measurement Of Chorionic Gonadotropin (Hcg) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84703 | Qualitative Analysis Of Chorionic Gonadotropin (Hcg) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84704 | Measurement Of Free Beta Chain Chorionic Gonadotropin (Hcg) | NONMOLECULAR | Claim Policies Apply | 01/01/08 | None |
| 84830 | Ovulation Test For Human Luteinizing Hormone Using Visual Color Comparison Method | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 84999 | Unlisted chemistry procedure | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/93 | None |
| 85002 | Measurement Of Bleeding Time | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85004 | Automated Differential Leukocyte (Wbc) Count | NONMOLECULAR | Claim Policies Apply | 01/01/03 | None |
| 85007 | Estimated Leukocyte (Wbc) And Platelet Count By Microscopic Examination Of Blood Smear With Manual Differential Leukocyte (Wbc) Count | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85008 | Estimated Leukocyte (Wbc) And Platelet Count By Microscopic Examination Of Blood Smear | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85009 | CS | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85013 | Measurement Of Spun Microhematocrit | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85014 | Measurement Of Hematocrit (Hct) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85018 | Measurement Of Hemoglobin (Hgb) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85025 | Automated Measurement Of Hematocrit | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85027 | Automated Red Blood Cell (Rbc) Count | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85032 | Manual Red Blood Cell (Rbc) Count | NONMOLECULAR | Claim Policies Apply | 01/01/03 | None |
| 85041 | Automated Red Blood Cell (Rbc) Count | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85044 | Manual Reticulocyte Count | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85045 | Automated Reticulocyte Count | NONMOLECULAR | Claim Policies Apply | 01/01/90 | None |
| 85046 | Automated Reticulocyte Count With Cellular Parameter | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 85048 | Automated White Blood Cell (Wbc) Count | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85049 | Automated Platelet Count | NONMOLECULAR | Claim Policies Apply | 01/01/03 | None |
| 85055 | Assay For Reticulated Platelets | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| 85060 | Interpretation Of Peripheral Blood Smear | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85097 | Interpretation Of Bone Marrow Smear | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85130 | Chromogenic substrate assay | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85170 | Clot Retraction Study | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85175 | Whole Blood Dilution Clot Lysis Time Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85210 | Assay For Clotting Factor Ii | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85220 | Assay For Clotting Factor V (Acf Or Proaccelerin) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85230 | Assay For Clotting Factor Vii | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85240 | 1-Stage Assay For Clotting Factor Viii (Ahg) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85244 | Assay For Clotting Factor Viii-Related Antigen | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85245 | Assay For Ristocetin Cofactor | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85246 | Assay For Factor Viii Antigen | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85247 | Assay For Clotting Factor Viii With Multimeric Analysis | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85250 | Assay For Clotting Factor Ix (Ptc) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85260 | Assay For Clotting Factor X (Stuart-Prower) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85270 | Assay For Clotting Factor Xi (Pta) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85280 | Assay For Clotting Factor Xii (Hageman) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85290 | Assay For Clotting Factor Xiii (Fibrin Stabilizing) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85291 | Solubility Screening For Clotting Factor Xiii (Fibrin Stabilizing) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85292 | Assay For Prekallikrein (Fletcher Factor) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |

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| 85293 | Assay For High Molecular Weight Kininogen (Fitzgerald Factor) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85300 | Assay For Antithrombin Iii Activity | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85301 | Assay For Antithrombin Iii Antigen | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85302 | Assay For Protein C Antigen | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85303 | Assay For Protein C Activity | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85305 | Assay For Total Protein S | NONMOLECULAR | Claim Policies Apply | 01/01/92 | None |
| 85306 | Assay For Free Protein S | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85307 | Assay For Activated Protein C (Apc) Resistance | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 85335 | Factor Inhibitor Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85337 | Assay For Thrombomodulin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85345 | Lee And White Coagulation Time Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85347 | Activated Coagulation Time Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85348 | Coagulation Time Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85360 | Euglobulin Lysis Time Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85362 | Semiquantitative Analysis Of Fibrin Degradation Products (Fdp) (Fsp) Using Agglutination Slide Method | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85366 | Analysis Of Fibrin Degradation Products (Fdp) (Fsp) Using Paracoagulation Method | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85370 | Measurement Of Fibrin Degradation Products (Fdp) (Fsp) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85378 | Qualitative Analysis Of D-Dimer Fibrin Degradation Products | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85379 | Measurement Of D-Dimer Fibrin Degradation Products | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85380 | Ultrasensitive Qualitative Analysis Of D-Dimer Fibrin Degradation Products | NONMOLECULAR | Claim Policies Apply | 01/01/03 | None |
| 85384 | Measurement Of Fibrinogen Activity | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85385 | Measurement Of Fibrinogen Antigen | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85390 | Screening For Fibrinolysins With Interpretation And Report | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85396 | Coagulation/Fibrinolysis Assay On Whole Blood Using Pharmacologic Additive, With Interpretation And Written Report | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| 85397 | Analysis Of Functional Activity Of Coagulation And Fibrinolysis | NONMOLECULAR | Claim Policies Apply | 01/01/09 | None |
| 85400 | Measurement Of Plasmin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85410 | Measurement Of Alpha-2 Antiplasmin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85415 | Measurement Of Plasminogen Activator | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85420 | Measurement Of Plasminogen | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85421 | Antigenic Assay Of Plasminogen | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85441 | Direct Heinz Body Stain | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85445 | Induced Heinz Body Stain Using Acetyl Phenylhydrazine | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85460 | Differential Lysis Stain For Fetomaternal Hemorrhage | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85461 | Fetal Red Cell Rosette Test For Fetomaternal Hemorrhage | NONMOLECULAR | Claim Policies Apply | 01/01/95 | None |
| 85475 | Acid Hemolysin Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85520 | Assay For Heparin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85525 | Heparin Neutralization Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85530 | Heparin-Protamine Tolerance Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85536 | Iron Stain Of Peripheral Blood | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 85540 | Leukocyte Alkaline Phosphatase Test With Count | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85547 | Red Blood Cell Mechanical Fragility Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85549 | Muramidase Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85555 | Red Blood Cell Osmotic Fragility Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85557 | Incubated Red Blood Cell Osmotic Fragility Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85576 | In Vitro Platelet Aggregation Study | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 85597 | Platelet Phospholipid Neutralization Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85598 | Hexagonal Phospholipid Neutralization Test | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 85610 | Prothrombin Time Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85611 | Diluted Prothrombin Time Test With Substitution Of Plasma Fractions | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85612 | Russell Viper Venom Time Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85613 | Diluted Russell Viper Venom Time Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85635 | Reptilase Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85651 | Erythrocyte Sedimentation Rate | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85652 | Automated Erythrocyte Sedimentation Rate | NONMOLECULAR | Claim Policies Apply | 01/01/96 | None |
| 85660 | Sickling Of Red Blood Cell Reduction Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85670 | Thrombin Time Test On Plasma | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 85675 | Thrombin Time Titer | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 85705 | Tissue Thromboplastin Inhibition Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |

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|-------|--|--------------|----------------------|----------|------|
| 85730 | Partial Thromboplastin Time Test On Plasma | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85732 | Partial Thromboplastin Time Test With Substitution Of Plasma Fractions | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85810 | Viscosity Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 85999 | Unlisted hematology and coagulation procedure | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86000 | Febrile Agglutinin Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86001 | Semiquantitative Allergen Specific Immunoglobulin G Test | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 86003 | Quantitative Allergen Specific Immunoglobulin E Test | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 86005 | Qualitative Multiallergen Screening For Allergen Specific Immunoglobulin E | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 86008 | Allergen Specific Ige; Quantitative Or Semiquantitative, Recombinant Or Purified Component, Each | NONMOLECULAR | Claim Policies Apply | 01/01/18 | None |
| 86015 | Actin (smooth muscle) antibody (ASMA), each | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 86021 | Identification Of Leukocyte Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86022 | Identification Of Platelet Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86023 | Assay For Platelet Associated Immunoglobulin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86036 | Antineutrophil cytoplasmic antibody (ANCA); screen, each antibody | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 86037 | Antineutrophil cytoplasmic antibody (ANCA); titer, each antibody | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 86038 | Measurement Of Antinuclear Antibodies (Ana) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86039 | Antinuclear Antibodies (Ana) Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86051 | Aquaporin-4 (neuromyelitis optica [NMO]) antibody; enzyme-linked immunosorbent immunoassay (ELISA) | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 86052 | Aquaporin-4 (neuromyelitis optica [NMO]) antibody; cell-based immunofluorescence assay (CBA), each | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 86053 | Aquaporin-4 (neuromyelitis optica [NMO]) antibody; flow cytometry (ie, fluorescence-activated cell sorting [FACS]), each | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 86060 | Antistreptolysin O Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86063 | Screening For Antistreptolysin O | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86077 | Evaluation Of Blood Cross Match With Interpretation And Written Report | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86078 | Investigation Of Transfusion Reaction With Interpretation And Written Report | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86079 | Authorization For Deviation From Standard Blood Banking Procedure With Written Report | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86140 | Measurement Of C-Reactive Protein | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86141 | Measurement Of C-Reactive Protein By High Sensitivity Assay | NONMOLECULAR | Claim Policies Apply | 01/01/02 | None |
| 86146 | Assay For Beta 2 Glycoprotein I Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 86147 | Assay For Cardiolipin (Phospholipid) Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86148 | Assay For Anti-Phosphatidylserine (Phospholipid) Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 86152 | Cell enumeration using immunologic selection and identification in fluid specimen (eg, circulating tumor cells in blood); | NONMOLECULAR | Claim Policies Apply | 01/01/13 | None |
| 86153 | Cell enumeration using immunologic selection and identification in fluid specimen (eg, circulating tumor cells in blood); physician interpretation and report, when required | NONMOLECULAR | Claim Policies Apply | 01/01/13 | None |
| 86155 | Chemotaxis Assay | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86156 | Screening For Cold Agglutinin | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86157 | Cold Agglutinin Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86160 | Assay For Complement Component Antigen | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86161 | Assay For Complement Functional Activity Of Complement Component Antigen | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86162 | Total Hemolytic Complement (Ch50) Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86171 | Complement Antigen Fixation Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86200 | Assay For Cyclic Citrullinated Peptide (Ccp) Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/06 | None |
| 86215 | Assay For Deoxyribonuclease Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86225 | Assay For Native Deoxyribonuclease Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86226 | Assay For Single Stranded Deoxyribonuclease Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86231 | Endomysial antibody (EMA), each immunoglobulin (Ig) class | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 86235 | Assay For Antibody To Extractable Nuclear Antigen | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86255 | Fluorescent noninfectious agent antibody; screen, each antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86256 | Fluorescent noninfectious agent antibody; titer, each antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86258 | Gliadin (deamidated) (DGP) antibody, each immunoglobulin (Ig) class | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 86277 | Assay For Human Growth Hormone (Hgh) Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86280 | Hemagglutination Inhibition Test (Hai) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86294 | Qualitative Immunoassay For Tumor Antigen | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 86300 | Quantitative Immunoassay For Ca 15-3 Tumor Antigen | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 86301 | Quantitative Immunoassay For Ca 19-9 Tumor Antigen | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 86304 | Quantitative Immunoassay For Ca 125 Tumor Antigen | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |

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| 86305 | Human Epididymis Protein 4 (He4) Test | NONMOLECULAR | Claim Policies Apply | 01/01/10 | None |
| 86308 | Screening For Heterophile Antibodies | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86309 | Heterophile Antibodies Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86310 | Heterophile Antibodies Titer After Absorption With Beef Cells And Guinea Pig Kidney | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86316 | Immunoassay for tumor antigen, other antigen, quantitative (eg, CA 50, 72-4, 549), each | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86317 | Immunoassay for infectious agent antibody, quantitative, not otherwise specified | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86318 | Immunoassay for infectious agent antibody, qualitative or semiquantitative, single-step method (eg, reagent strip). | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86320 | Immuno-electrophoresis; serum | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86325 | Immuno-electrophoresis; other fluids (eg, urine, cerebrospinal fluid) with concentration | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86327 | Immuno-electrophoresis; crossed (2-dimensional assay) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86328 | Immunoassay for infectious agent antibody, qualitative or semiquantitative, single step method (eg, reagent strip); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) | NONMOLECULAR | Claim Policies Apply | 04/10/20 | None |
| 86329 | Immunodiffusion; not elsewhere specified | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86331 | Immunodiffusion; gel diffusion, qualitative (Ouchterlony), each antigen or antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86332 | Immune complex assay | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86334 | Immunofixation electrophoresis; serum | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86335 | Immunofixation electrophoresis; other fluids with concentration (eg, urine, CSF) | NONMOLECULAR | Claim Policies Apply | 01/01/05 | None |
| 86336 | Assay For Inhibin A | NONMOLECULAR | Claim Policies Apply | 01/01/02 | None |
| 86337 | Assay For Insulin Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86340 | Assay For Intrinsic Factor Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86341 | Assay For Islet Cell Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 86343 | Leukocyte Histamine Release Test (Lhr) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86344 | Leukocyte Phagocytosis | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86352 | Cellular Function Assay With Stimulation And Detection Of Biomarker | NONMOLECULAR | Claim Policies Apply | 01/01/10 | None |
| 86353 | Lymphocyte Mitogen Response Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86355 | Total B Cell Count | NONMOLECULAR | Claim Policies Apply | 01/01/06 | None |
| 86356 | Measurement Of Mononuclear Cell Antigen | NONMOLECULAR | Claim Policies Apply | 01/01/08 | None |
| 86357 | Total Natural Killer (Nk) Cell Count | NONMOLECULAR | Claim Policies Apply | 01/01/06 | None |
| 86359 | Total T Cell Count | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 86360 | Absolute Cd4 And Cd8 T Cell Count With Ratio | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 86361 | Absolute Cd4 T Cell Count | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 86362 | Myelin oligodendrocyte glycoprotein (MOG-IgG1) antibody; cell-based immunofluorescence assay (CBA), each | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 86363 | Myelin oligodendrocyte glycoprotein (MOG-IgG1) antibody; flow cytometry (ie, fluorescence-activated cell sorting [FACS]), each | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 86364 | Tissue transglutaminase, each immunoglobulin (Ig) class | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 86367 | Total Stem Cell Count | NONMOLECULAR | Claim Policies Apply | 01/01/06 | None |
| 86376 | Microsomal antibodies (eg, thyroid or liver-kidney), each | NONMOLECULAR | Claim Policies Apply | 01/01/06 | None |
| 86381 | Mitochondrial antibody (eg, M2), each | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 86382 | Viral Neutralization Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86384 | Nitroblue Tetrazolium Dye Test (Ntd) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86386 | Qualitative Assay For Nuclear Matrix Protein 22 (Nmp22) | NONMOLECULAR | Claim Policies Apply | 01/01/12 | None |
| 86403 | Screening Particle Agglutination Assay | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86406 | Screening Particle Agglutination Titer | NONMOLECULAR | Claim Policies Apply | 01/01/95 | None |
| 86408 | Neutralizing antibody, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID19]); screen | NONMOLECULAR | Claim Policies Apply | 08/10/20 | None |
| 86409 | Neutralizing antibody, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID19]); titer | NONMOLECULAR | Claim Policies Apply | 08/10/20 | None |
| 86413 | Severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (Coronavirus disease [COVID-19]) antibody, quantitative | NONMOLECULAR | Claim Policies Apply | 09/08/20 | None |
| 86430 | Qualitative Assay For Rheumatoid Factor | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86431 | Rheumatoid Factor Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86480 | Tuberculosis Test By Cell Mediated Immunity Antigen Response Measurement | NONMOLECULAR | Claim Policies Apply | 01/01/06 | None |
| 86481 | Tuberculosis Test By Cell Mediated Immunity Antigen Response Measurement Using Enumeration Of Gamma Interferon-Producing T-Cells In Cell Suspension | NONMOLECULAR | Claim Policies Apply | 01/01/11 | None |
| 86485 | Candida Skin Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86486 | Skin test; unlisted antigen, each | NONMOLECULAR | Claim Policies Apply | 01/01/08 | None |
| 86490 | Coccidioides Skin Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86510 | Histoplasma Skin Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |

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| 86580 | Intradermal Tuberculosis Skin Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86590 | Assay For Streptokinase Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86592 | Qualitative Assay For Non-Treponemal Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86593 | Quantitative Assay For Non-Treponemal Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86596 | Voltage-gated calcium channel antibody, each | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 86602 | Actinomyces Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86603 | Adenovirus Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86606 | Aspergillus Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86609 | Bacterium Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86611 | Assay For Bartonella Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 86612 | Blastomyces Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86615 | Assay For Bordetella Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86617 | Confirmatory Assay For Borrelia Burgdorferi Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/95 | None |
| 86618 | Assay For Borrelia Burgdorferi Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86619 | Assay For Borrelia Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86622 | Assay For Brucella Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86625 | Assay For Campylobacter Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86628 | Assay For Candida Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86631 | Chlamydia Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86632 | Chlamydia Immunoglobulin M Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86635 | Coccidioides Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86638 | Coxiella Burnetii Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86641 | Cryptococcus Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86644 | Cytomegalovirus Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86645 | Cytomegalovirus Immunoglobulin M Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86648 | Diphtheria Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86651 | California Encephalitis Virus Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86652 | Eastern Equine Encephalitis Virus Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86653 | St. Louis Encephalitis Virus Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86654 | Western Equine Encephalitis Virus Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86658 | Enterovirus Antibody Panel | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86663 | Epstein-Barr (Eb) Virus Early Antigen (Ea) Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86664 | Epstein-Barr (Eb) Virus Nuclear Antigen (Ebna) Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86665 | Epstein-Barr (Eb) Virus Viral Capsid (Vca) Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86666 | Assay For Ehrlichia Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 86668 | Antibody; Francisella tularensis | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86671 | Assay For Fungus Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86674 | Antibody; Giardia lamblia | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86677 | Helicobacter Pylori Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86682 | Assay For Helminth Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86684 | Haemophilus Influenza Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86687 | Human T Cell Leukemia I Virus (Htlv-I) Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/90 | None |
| 86688 | Human T Cell Leukemia Ii Virus (Htlv-Ii) Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86689 | Confirmatory Assay For Human Immunodeficiency Virus (Hiv) Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/90 | None |
| 86692 | Assay For Hepatitis Delta Agent Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86694 | Herpes Simplex Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86695 | Herpes Simplex Type 1 Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86696 | Herpes Simplex Type 2 Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 86698 | Histoplasma Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86701 | Assay For Human Immunodeficiency Virus 1 (Hiv-1) Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86702 | Assay For Human Immunodeficiency Virus 2 (Hiv-2) Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86703 | Combined Assay For Human Immunodeficiency Virus 1 (Hiv-1) Antibody And Human Immunodeficiency Virus 2 (Hiv-2) Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86704 | Assay For Total Hepatitis B Core Antibody (Hbcab) | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 86705 | Assay For Hepatitis B Immunoglobulin M Core Antibody (Hbcab) | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 86706 | Assay For Hepatitis B Surface Antibody (Hbsab) | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 86707 | Assay For Hepatitis Be Antibody (Hbeab) | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 86708 | Assay For Total Hepatitis A Antibody (Haab) | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 86709 | Assay For Hepatitis A Immunoglobulin M Antibody (Haab) | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 86710 | Influenza Virus Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |

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| 86711 | John Cunningham Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/13 | None |
| 86713 | Legionella Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86717 | Leishmania Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86720 | Leptospira Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86723 | Listeria Monocytogenes Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86727 | Lymphocytic Choriomeningitis Virus Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86732 | Mucormycosis Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86735 | Mumps Virus Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86738 | Mycoplasma Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86741 | Neisseria Meningitidis Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86744 | Nocardia Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86747 | Parvovirus Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86750 | Plasmodium Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86753 | Assay For Protozoa Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86756 | Respiratory Syncytial Virus Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86757 | Rickettsia Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 86759 | Rotavirus Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86762 | Rubella Virus Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86765 | Rubeola Virus Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86768 | Salmonella Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86769 | Antibody; severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) | NONMOLECULAR | Claim Policies Apply | 04/10/20 | None |
| 86771 | Shigella Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86774 | Clostridium Tetani Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86777 | Toxoplasma Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86778 | Toxoplasma Immunoglobulin M Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86780 | Assay For Treponema Pallidum Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/10 | None |
| 86784 | Trichinella Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86787 | Varicella-Zoster Virus Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86788 | Assay For West Nile Virus Immunoglobulin M Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/07 | None |
| 86789 | Assay For West Nile Virus Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/07 | None |
| 86790 | Antibody; virus, not elsewhere specified | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86793 | Yersinia Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86794 | Antibody; Zika Virus, Igm | NONMOLECULAR | Claim Policies Apply | 01/01/18 | None |
| 86800 | Thyroglobulin Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86803 | Hepatitis C Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 86804 | Comfirmatory Hepatitis C Antibody Titer | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 86805 | Lymphocytotoxicity Assay With Titration And Visual Crossmatch | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86806 | Lymphocytotoxicity Assay With Visual Crossmatch | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86807 | Screening For Cytotoxic Percent Reactive Antibody (Pra) In Serum Using Standard Method | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86808 | Screening For Cytotoxic Percent Reactive Antibody (Pra) In Serum Using Rapid Method | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86812 | HLA typing; A, B, or C (eg, A10, B7, B27), single antigen | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86813 | HLA typing; A, B, or C, multiple antigens | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86816 | HLA typing; DR/DQ, single antigen | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86817 | HLA typing; DR/DQ, multiple antigens | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86821 | HLA typing; lymphocyte culture, mixed (MLC) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86825 | Human leukocyte antigen (HLA) crossmatch, non-cytotoxic (eg, using flow cytometry); first serum sample or dilution | NONMOLECULAR | Claim Policies Apply | 01/01/10 | None |
| 86826 | Human leukocyte antigen (HLA) crossmatch, non-cytotoxic (eg, using flow cytometry); each additional serum sample or sample dilution (List separately in addition to primary procedure) | NONMOLECULAR | Claim Policies Apply | 01/01/10 | None |
| 86828 | Antibody to human leukocyte antigens (HLA), solid phase assays (eg, microspheres or beads, ELISA, flow cytometry); qualitative assessment of the presence or absence of antibody(ies) to HLA Class I and Class II HLA antigens | NONMOLECULAR | Claim Policies Apply | 01/01/13 | None |
| 86829 | Antibody to human leukocyte antigens (HLA), solid phase assays (eg, microspheres or beads, ELISA, Flow cytometry); qualitative assessment of the presence or absence of antibody(ies) to HLA Class I or Class II HLA antigens | NONMOLECULAR | Claim Policies Apply | 01/01/13 | None |
| 86830 | Antibody to human leukocyte antigens (HLA), solid phase assays (eg, microspheres or beads, ELISA, Flow cytometry); antibody identification by qualitative panel using complete HLA phenotypes, HLA Class I | NONMOLECULAR | Claim Policies Apply | 01/01/13 | None |

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| 86831 | Antibody to human leukocyte antigens (HLA), solid phase assays (eg, microspheres or beads, ELISA, Flow cytometry); antibody identification by qualitative panel using complete HLA phenotypes, HLA Class II | NONMOLECULAR | Claim Policies Apply | 01/01/13 | None |
| 86832 | Antibody to human leukocyte antigens (HLA), solid phase assays (eg, microspheres or beads, ELISA, Flow cytometry); high definition qualitative panel for identification of antibody specificities (eg, individual antigen per bead methodology), HLA Class I | NONMOLECULAR | Claim Policies Apply | 01/01/13 | None |
| 86833 | Antibody to human leukocyte antigens (HLA), solid phase assays (eg, microspheres or beads, ELISA, Flow cytometry); high definition qualitative panel for identification of antibody specificities (eg, individual antigen per bead methodology), HLA Class II | NONMOLECULAR | Claim Policies Apply | 01/01/13 | None |
| 86834 | Antibody to human leukocyte antigens (HLA), solid phase assays (eg, microspheres or beads, ELISA, Flow cytometry); semi-quantitative panel (eg, titer), HLA Class I | NONMOLECULAR | Claim Policies Apply | 01/01/13 | None |
| 86835 | Antibody to human leukocyte antigens (HLA), solid phase assays (eg, microspheres or beads, ELISA, Flow cytometry); semi-quantitative panel (eg, titer), HLA Class II | NONMOLECULAR | Claim Policies Apply | 01/01/13 | None |
| 86849 | Unlisted immunology procedure | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86850 | Antibody screen, RBC, each serum technique | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86860 | Elution Of Red Blood Cell Antibody | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86870 | Red Blood Cell Antibody Panel | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86880 | Direct Antihuman Globulin Test (Coombs Test) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86885 | Indirect Qualitative Antihuman Globulin Test (Coombs Test) | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 86886 | Antihuman Globulin Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86890 | Collection, Processing, And Storage Of Predeposited Autologous Blood | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86891 | Intra-Operative Salvage, Processing, And Storage Of Autologous Blood Product | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86900 | Abo Blood Typing | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86901 | Rh (D) Blood Typing | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86902 | Antigen Testing Of Donor Blood Using Reagent Serum | NONMOLECULAR | Claim Policies Apply | 01/01/11 | None |
| 86904 | Antigen Screening Of Donor Blood For Compatibility Using Patient Serum | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86905 | Red Blood Cell Antigen Testing | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86906 | Complete Rh Phenotyping | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86910 | Abo, Rh And Mn Blood Typing For Paternity Testing | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86911 | Blood Typing For Paternity Testing | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| 86920 | Compatibility Testing Of Blood For Transfusion Using Immediate Spin Technique | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86921 | Compatibility Testing Of Blood For Transfusion Using Incubation Spin Technique | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86922 | Compatibility Testing Of Blood For Transfusion Using Antiglobulin Technique | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86923 | Electronic Compatibility Testing Of Blood For Transfusion | NONMOLECULAR | Claim Policies Apply | 01/01/06 | None |
| 86927 | Thawing Of Fresh Frozen Plasma | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86930 | Preparation And Freezing Of Frozen Blood | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86931 | Thawing Of Frozen Blood | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86932 | Preparation, Freezing, And Thawing Of Frozen Blood | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86940 | Screening Of Hemolysins And Agglutinins | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86941 | Incubation Of Hemolysins And Agglutinins | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86945 | Irradiation Of Blood Product | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86950 | Leukocyte Transfusion | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86960 | Volume Reduction Of Blood Product | NONMOLECULAR | Claim Policies Apply | 01/01/06 | None |
| 86965 | Pooling Of Platelets | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86970 | Pretreatment Of Red Blood Cells For Use In Red Blood Cell Antibody Compatibility Testing By Incubation With Drug | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86971 | Pretreatment Of Red Blood Cells For Use In Red Blood Cell Antibody Compatibility Testing By Incubation With Enzyme | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86972 | Pretreatment Of Red Blood Cells For Use In Red Blood Cell Antibody Identification And Compatibility Testing By Density Gradient Separation | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86975 | Pretreatment Of Serum For Use In Red Blood Cell Antibody Identification By Incubation With Drug | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86976 | Pretreatment Of Serum For Use In Red Blood Cell Antibody Identification By Dilution | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86977 | Pretreatment Of Serum For Use In Red Blood Cell Antibody Identification By Incubation With Inhibitor | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86978 | Pretreatment Of Serum For Use In Red Blood Cell Antibody Identification By Differential Red Cell Absorption Using Red Blood Cells Of Known Phenotype | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86985 | Splitting Of Blood Product Unit | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 86999 | Unlisted transfusion medicine procedure | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87003 | Inoculation, Observation, And Dissection Of Small Animal | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87015 | Concentration Of Sample For Examination For Infectious Agent | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87040 | Aerobic Bacterial Culture Of Blood With Isolation And Presumptive Identification Of Isolate | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |

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| 87045 | Aerobic Bacterial Culture Of Stool With Isolation And Preliminary Examination | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87046 | Aerobic Bacterial Culture Of Stool With Isolation And Presumptive Identification Of Isolate | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 87070 | Bacterial Culture | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87071 | Quantitative Aerobic Bacterial Culture With Isolation And Presumptive Identification Of Isolate | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 87073 | Quantitative Anaerobic Bacterial Culture With Isolation And Presumptive Identification Of Isolate | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 87075 | Bacterial Culture With Isolation And Presumptive Identification Of Isolate | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87076 | Procedure For Definitive Identification Of Anaerobic Isolate | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87077 | Procedure For Definitive Identification Of Aerobic Isolate | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 87081 | Presumptive Screening Culture For Pathogenic Organism | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87084 | Presumptive Screening Culture For Pathogenic Organism With Colony Estimation Using Density Chart | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87086 | Bacterial Culture Of Urine With Quantitative Colony Count | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87088 | Bacterial Culture Of Urine With Isolation And Presumptive Identification Of Isolate | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87101 | Fungal Culture Of Skin With Isolation And Presumptive Identification Of Isolate | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87102 | Fungal Culture With Isolation And Presumptive Identification Of Isolate | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87103 | Fungal Culture Of Blood With Isolation And Presumptive Identification Of Isolate | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87106 | Procedure For Definitive Identification Of Yeast Isolated From Fungal Culture | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87107 | Procedure For Definitive Identification Of Mold Isolated From Fungal Culture | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 87109 | Bacterial Culture For Mycoplasma | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87110 | Bacterial Culture For Chlamydia | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87116 | Bacterial Culture For Acid-Fast Bacilli | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87118 | Procedure For Definitive Identification Of Mycobacterium Isolated From Bacterial Culture | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87140 | Culture, typing; immunofluorescent method, each antiserum | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87143 | Culture, typing; gas liquid chromatography (GLC) or high pressure liquid chromatography (HPLC) method | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87147 | Culture, typing; immunologic method, other than immunofluorescence (eg, agglutination grouping), per antiserum | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87149 | Culture, typing; identification by nucleic acid (DNA or RNA) probe, direct probe technique, per culture or isolate, each organism probed | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/01 | None |
| 87150 | Culture, typing; identification by nucleic acid (DNA or RNA) probe, amplified probe technique, per culture or isolate, each organism probed | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/10 | None |
| 87152 | Culture, typing; identification by pulse field gel typing | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/01 | None |
| 87153 | Culture, typing; identification by nucleic acid sequencing method, each isolate (eg, sequencing of the 16S rRNA gene) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/10 | None |
| 87154 | Culture, typing; identification of blood pathogen and resistance typing, when performed, by nucleic acid (DNA or RNA) probe, multiplexed amplified probe technique including multiplex reverse transcription, when performed, per culture or isolate, 6 or more targets | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/22 | None |
| 87158 | Culture, typing; other methods | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87164 | Specimen Collection And Dark Field Examination | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87166 | Dark Field Examination | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87168 | Macroscopic Examination For Arthropod | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 87169 | Macroscopic Examination For Parasite | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 87172 | Examination Of Cellophane Tape Preparation Slide For Pinworm | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 87176 | Tissue Homogenization For Culture | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87177 | Examination Of Direct Smear And Smear Of Concentrated Material For Ova And Parasites, With Identification | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87181 | Antimicrobial Agent Susceptibility Study Using Agar Dilution Method | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87184 | Antimicrobial Agent Susceptibility Study Using Disk Method | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87185 | Antimicrobial Agent Susceptibility Study Using Enzyme Detection | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 87186 | Minimum Inhibitory Concentration (Mic) Antimicrobial Agent Susceptibility Study Using Agar Dilution Method | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87187 | Minimum Lethal Concentration (Mlc) Antimicrobial Agent Susceptibility Study Using Microdilution Method | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87188 | Antimicrobial Agent Susceptibility Study Using Macrobroth Dilution Method | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87190 | Antimicrobial Agent Susceptibility Study On Mycobacteria Using Proportion Method | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87197 | Serum Bactericidal Titer | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87205 | Smear From Primary Source With Giemsa Stain For Cell Type | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87206 | Smear From Primary Source With Acid Fast Stain For Virus. With Interpretation | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87207 | Smear From Primary Source With Special Stain For Parasite | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87209 | Smear From Primary Source With Special Stain For Ova And Parasite, With Interpretation | NONMOLECULAR | Claim Policies Apply | 01/01/06 | None |

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| 87210 | Wet Mount Smear For Infectious Agent From Primary Source | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87220 | Tissue Examination By Potassium Hydroxide Slide Of Sample From Nail For Fungus | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87230 | Tissue Culture With Toxin Assay | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87250 | Inoculation Of Small Animal For Virus Isolation With Observation And Dissection | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87252 | Tissue Culture Inoculation For Virus Isolation With Observation And Presumptive Identification By Cytopathic Effect | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87253 | Tissue Culture For Virus Isolation | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 87254 | Virus Isolation Using Centrifuge Enhanced Technique And Identification Using Immunofluorescence Stain | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 87255 | Virus Isolation And Identification | NONMOLECULAR | Claim Policies Apply | 01/01/03 | None |
| 87260 | Adenovirus Antigen Detection Using Immunofluorescent Technique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87265 | Bordetella Pertussis Antigen Detection Using Immunofluorescent Technique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87267 | Enterovirus Antigen Detection Using Direct Fluorescent Antibody Technique | NONMOLECULAR | Claim Policies Apply | 01/01/03 | None |
| 87269 | Giardia Antigen Detection Using Immunofluorescent Technique | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| 87270 | Chlamydia Trachomatis Antigen Detection Using Immunofluorescent Technique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87271 | Cytomegalovirus Antigen Detection Using Direct Fluorescent Antibody Technique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87272 | Cryptosporidium Antigen Detection Using Immunofluorescent Technique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87273 | Herpes Simplex Virus Type 2 Antigen Detection Using Immunofluorescent Technique | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 87274 | Herpes Simplex Virus Type 1 Antigen Detection Using Immunofluorescent Technique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87275 | Influenza B Virus Antigen Detection Using Immunofluorescent Technique | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 87276 | Influenza A Virus Antigen Detection Using Immunofluorescent Technique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87278 | Legionella Pneumophila Antigen Detection Using Immunofluorescent Technique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87279 | Parainfluenza Virus Antigen Detection Using Immunofluorescent Technique | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 87280 | Respiratory Syncytial Virus Antigen Detection Using Immunofluorescent Technique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87281 | Pneumocystis Carinii Antigen Detection Using Immunofluorescent Technique | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 87283 | Rubeola Antigen Detection Using Immunofluorescent Technique | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 87285 | Treponema Pallidum Antigen Detection Using Immunofluorescent Technique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87290 | Varicella Zoster Virus Antigen Detection Using Immunofluorescent Technique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87299 | Infectious agent antigen detection by immunofluorescent technique; not otherwise specified, each organism | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87300 | Infectious agent antigen detection by immunofluorescent technique, polyvalent for multiple organisms, each polyvalent antiserum | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 87301 | Infectious agent antigen detection by immunoassay technique, (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]) qualitative or semiquantitative; adenovirus enteric types 40/41 | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87305 | Aspergillus Antigen Detection Using Semiquantitative Multiple Step Enzyme Immunoassay Technique | NONMOLECULAR | Claim Policies Apply | 01/01/07 | None |
| 87320 | Chlamydia Trachomatis Antigen Detection Using Qualitative Multiple Step Enzyme Immunoassay Technique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87324 | Clostridium Difficile Toxin Antigen Detection Using Qualitative Multiple Step Enzyme Immunoassay Technique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87327 | Cryptococcus Neoformans Antigen Detection Using Semiquantitative Multiple Step Enzyme Immunoassay Technique | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 87328 | Cryptosporidium Antigen Detection Using Qualitative Multiple Step Enzyme Immunoassay Technique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87329 | Giardia Antigen Detection Using Semiquantitative Multiple Step Enzyme Immunoassay Technique | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| 87332 | Cytomegalovirus Antigen Detection Using Semiquantitative Multiple Step Enzyme Immunoassay Technique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87335 | Escherichia Coli O157 Antigen Detection Using Semiquantitative Multiple Step Enzyme Immunoassay Technique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87336 | Entamoeba Histolytica Dispar Group Antigen Detection Using Semiquantitative Multiple Step Enzyme Immunoassay Technique | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 87337 | Entamoeba Histolytica Group Antigen Detection Using Semiquantitative Multiple Step Enzyme Immunoassay Technique | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 87338 | Helicobacter Pylori Antigen Detection In Stool Using Qualitative Multiple Step Enzyme Immunoassay Technique | NONMOLECULAR | Claim Policies Apply | 01/01/00 | None |
| 87339 | Helicobacter Pylori Antigen Detection Using Semiquantitative Multiple Step Enzyme Immunoassay Technique | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 87340 | Hepatitis B Surface Antigen (Hbsag) Detection Using Qualitative Multiple Step Enzyme Immunoassay Technique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |

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| 87341 | Hepatitis B Surface Antigen (Hbsag) Neutralization Using Qualitative Multiple Step Enzyme Immunoassay Technique | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 87350 | Hepatitis Be (Hbeag) Detection Using Qualitative Multiple Step Enzyme Immunoassay Technique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87380 | Hepatitis Delta Agent Antigen Detection Using Semiquantitative Multiple Step Enzyme Immunoassay Technique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87385 | Histoplasma Capsulatum Antigen Detection Using Qualitative Multiple Step Enzyme Immunoassay Technique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87389 | Human Immunodeficiency Virus 1 Antigen And Human Immunodeficiency Virus 1 And 2 Antibody Detection Using Semiquantitative Multiple Step Enzyme Immunoassay Technique | NONMOLECULAR | Claim Policies Apply | 01/01/12 | None |
| 87390 | Human Immunodeficiency Virus 1 Antigen Detection Using Qualitative Multiple Step Enzyme Immunoassay Technique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87391 | Human Immunodeficiency Virus 2 Antigen Detection Using Qualitative Multiple Step Enzyme Immunoassay Technique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87400 | Influenza A Antigen Detection Using Semiquantitative Multiple Step Enzyme Immunoassay Technique | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 87420 | Respiratory Syncytial Virus Antigen Detection Using Semiquantitative Multiple Step Enzyme Immunoassay Technique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87425 | Rotavirus Antigen Detection Using Semiquantitative Multiple Step Enzyme Immunoassay Technique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87426 | Infectious agent antigen detection by immunoassay technique, (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], immunochemiluminometric assay [IMCA]) qualitative or semiquantitative; severe acute respiratory syndrome coronavirus (eg, SARS-CoV, SARS-CoV-2 [COVID-19]) | NONMOLECULAR | Claim Policies Apply | 06/25/20 | None |
| 87427 | Shiga-Like Toxin Antigen Detection Using Qualitative Multiple Step Enzyme Immunoassay Technique | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 87428 | Infectious agent antigen detection by immunoassay technique, (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]) qualitative or semiquantitative; severe acute respiratory syndrome coronavirus (eg, SARS-CoV, SARS-CoV-2 [COVID-19]) and influenza virus types A and B | NONMOLECULAR | Claim Policies Apply | 11/10/20 | None |
| 87430 | Group A Streptococcus Antigen Detection Using Qualitative Multiple Step Enzyme Immunoassay Technique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87449 | Infectious agent antigen detection by immunoassay technique, (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]) qualitative or semiquantitative; not otherwise specified, each organism | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87451 | Infectious agent antigen detection by immunoassay technique, (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]) qualitative or semiquantitative; polyvalent for multiple organisms, each polyvalent antiserum | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 87471 | Infectious agent detection by nucleic acid (DNA or RNA); Bartonella henselae and Bartonella quintana, amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87472 | Infectious agent detection by nucleic acid (DNA or RNA); Bartonella henselae and Bartonella quintana, quantification | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87475 | Infectious agent detection by nucleic acid (DNA or RNA); Borrelia burgdorferi, direct probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87476 | Infectious agent detection by nucleic acid (DNA or RNA); Borrelia burgdorferi, amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87480 | Infectious agent detection by nucleic acid (DNA or RNA); Candida species, direct probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87481 | Infectious agent detection by nucleic acid (DNA or RNA); Candida species, amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87482 | Infectious agent detection by nucleic acid (DNA or RNA); Candida species, quantification | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87483 | Infectious agent detection by nucleic acid (DNA or RNA); central nervous system pathogen (eg, Neisseria meningitidis, Streptococcus pneumoniae, Listeria, Haemophilus influenzae, E. coli, Streptococcus agalactiae, enterovirus, human parechovirus, herpes simplex virus type 1 and 2, human herpesvirus 6, cytomegalovirus, varicella zoster virus, Cryptococcus), includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, multiple types or subtypes, 12-25 targets | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/17 | None |
| 87485 | Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia pneumoniae, direct probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87486 | Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia pneumoniae, amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |

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| 87487 | Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia pneumoniae, quantification | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87490 | Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia trachomatis, direct probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87491 | Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia trachomatis, amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87492 | Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia trachomatis, quantification | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87493 | Infectious agent detection by nucleic acid (DNA or RNA); Clostridium difficile, toxin gene(s), amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/10 | None |
| 87495 | Infectious agent detection by nucleic acid (DNA or RNA); cytomegalovirus, direct probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87496 | Infectious agent detection by nucleic acid (DNA or RNA); cytomegalovirus, amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87497 | Infectious agent detection by nucleic acid (DNA or RNA); cytomegalovirus, quantification | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87498 | Infectious agent detection by nucleic acid (DNA or RNA); enterovirus, amplified probe technique, includes reverse transcription when performed | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/07 | None |
| 87500 | Infectious agent detection by nucleic acid (DNA or RNA); vancomycin resistance (eg, enterococcus species van A, van B), amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/08 | None |
| 87501 | Infectious agent detection by nucleic acid (DNA or RNA); influenza virus, includes reverse transcription, when performed, and amplified probe technique, each type or subtype | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/11 | None |
| 87502 | Infectious agent detection by nucleic acid (DNA or RNA); influenza virus, for multiple types or sub-types, includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, first 2 types or sub-types | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/11 | None |
| 87503 | Infectious agent detection by nucleic acid (DNA or RNA); influenza virus, for multiple types or sub-types, includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, each additional influenza virus type or sub-type beyond 2 (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/11 | None |
| 87505 | Infectious agent detection by nucleic acid (DNA or RNA); gastrointestinal pathogen (eg, Clostridium difficile, E. coli, Salmonella, Shigella, norovirus, Giardia), includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, multiple types or subtypes, 3-5 targets | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/15 | None |
| 87506 | Infectious agent detection by nucleic acid (DNA or RNA); gastrointestinal pathogen (eg, Clostridium difficile, E. coli, Salmonella, Shigella, norovirus, Giardia), includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, multiple types or subtypes, 6-11 targets | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/15 | None |
| 87507 | Infectious agent detection by nucleic acid (DNA or RNA); gastrointestinal pathogen (eg, Clostridium difficile, E. coli, Salmonella, Shigella, norovirus, Giardia), includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, multiple types or subtypes, 12-25 targets | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/15 | None |
| 87510 | Infectious agent detection by nucleic acid (DNA or RNA); Gardnerella vaginalis, direct probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87511 | Infectious agent detection by nucleic acid (DNA or RNA); Gardnerella vaginalis, amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87512 | Infectious agent detection by nucleic acid (DNA or RNA); Gardnerella vaginalis, quantification | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87516 | Infectious agent detection by nucleic acid (DNA or RNA); hepatitis B virus, amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87517 | Infectious agent detection by nucleic acid (DNA or RNA); hepatitis B virus, quantification | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87520 | Infectious agent detection by nucleic acid (DNA or RNA); hepatitis C, direct probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87521 | Infectious agent detection by nucleic acid (DNA or RNA); hepatitis C, amplified probe technique, includes reverse transcription when performed | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87522 | Infectious agent detection by nucleic acid (DNA or RNA); hepatitis C, quantification, includes reverse transcription when performed | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87525 | Infectious agent detection by nucleic acid (DNA or RNA); hepatitis G, direct probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87526 | Infectious agent detection by nucleic acid (DNA or RNA); hepatitis G, amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87527 | Infectious agent detection by nucleic acid (DNA or RNA); hepatitis G, quantification | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87528 | Infectious agent detection by nucleic acid (DNA or RNA); Herpes simplex virus, direct probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87529 | Infectious agent detection by nucleic acid (DNA or RNA); Herpes simplex virus, amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |

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| 87530 | Infectious agent detection by nucleic acid (DNA or RNA); Herpes simplex virus, quantification | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87531 | Infectious agent detection by nucleic acid (DNA or RNA); Herpes virus-6, direct probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87532 | Infectious agent detection by nucleic acid (DNA or RNA); Herpes virus-6, amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87533 | Infectious agent detection by nucleic acid (DNA or RNA); Herpes virus-6, quantification | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87534 | Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, direct probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87535 | Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, amplified probe technique, includes reverse transcription when performed | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87536 | Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, quantification, includes reverse transcription when performed | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87537 | Infectious agent detection by nucleic acid (DNA or RNA); HIV-2, direct probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87538 | Infectious agent detection by nucleic acid (DNA or RNA); HIV-2, amplified probe technique, includes reverse transcription when performed | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87539 | Infectious agent detection by nucleic acid (DNA or RNA); HIV-2, quantification, includes reverse transcription when performed | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87540 | Infectious agent detection by nucleic acid (DNA or RNA); Legionella pneumophila, direct probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87541 | Infectious agent detection by nucleic acid (DNA or RNA); Legionella pneumophila, amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87542 | Infectious agent detection by nucleic acid (DNA or RNA); Legionella pneumophila, quantification | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87550 | Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria species, direct probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87551 | Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria species, amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87552 | Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria species, quantification | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87555 | Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria tuberculosis, direct probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87556 | Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria tuberculosis, amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87557 | Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria tuberculosis, quantification | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87560 | Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria avium-intracellulare, direct probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87561 | Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria avium-intracellulare, amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87562 | Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria avium-intracellulare, quantification | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87563 | Infectious agent detection by nucleic acid (DNA or RNA); Mycoplasma genitalium, amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/20 | None |
| 87580 | Infectious agent detection by nucleic acid (DNA or RNA); Mycoplasma pneumoniae, direct probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87581 | Infectious agent detection by nucleic acid (DNA or RNA); Mycoplasma pneumoniae, amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87582 | Infectious agent detection by nucleic acid (DNA or RNA); Mycoplasma pneumoniae, quantification | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87590 | Infectious agent detection by nucleic acid (DNA or RNA); Neisseria gonorrhoeae, direct probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87591 | Infectious agent detection by nucleic acid (DNA or RNA); Neisseria gonorrhoeae, amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87592 | Infectious agent detection by nucleic acid (DNA or RNA); Neisseria gonorrhoeae, quantification | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87623 | Infectious agent detection by nucleic acid (DNA or RNA); Human Papillomavirus (HPV), low-risk types (eg, 6, 11, 42, 43, 44) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/15 | None |
| 87624 | Infectious agent detection by nucleic acid (DNA or RNA); Human Papillomavirus (HPV), high-risk types (eg, 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 68) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/15 | None |
| 87625 | Infectious agent detection by nucleic acid (DNA or RNA); Human Papillomavirus (HPV), types 16 and 18 only, includes type 45, if performed | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/15 | None |
| 87631 | Infectious agent detection by nucleic acid (DNA or RNA); respiratory virus (eg, adenovirus, influenza virus, coronavirus, metapneumovirus, parainfluenza virus, respiratory syncytial virus, rhinovirus), includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, multiple types or subtypes, 3-5 targets | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/13 | None |

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| 87632 | Infectious agent detection by nucleic acid (DNA or RNA); respiratory virus (eg, adenovirus, influenza virus, coronavirus, metapneumovirus, parainfluenza virus, respiratory syncytial virus, rhinovirus), includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, multiple types or subtypes, 6-11 targets | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/13 | None |
| 87633 | Infectious agent detection by nucleic acid (DNA or RNA); respiratory virus (eg, adenovirus, influenza virus, coronavirus, metapneumovirus, parainfluenza virus, respiratory syncytial virus, rhinovirus), includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, multiple types or subtypes, 12-25 targets | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/13 | None |
| 87634 | Infectious agent detection by nucleic acid (DNA or RNA); respiratory syncytial virus, amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/18 | None |
| 87635 | Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 03/13/20 | None |
| 87636 | Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (Coronavirus disease [COVID-19]) and influenza virus types A and B, multiplex amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 10/06/20 | None |
| 87637 | Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (Coronavirus disease [COVID-19]), influenza virus types A and B, and respiratory syncytial virus, multiplex amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 10/06/20 | None |
| 87640 | Infectious agent detection by nucleic acid (DNA or RNA); Staphylococcus aureus, amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/07 | None |
| 87641 | Infectious agent detection by nucleic acid (DNA or RNA); Staphylococcus aureus, methicillin resistant, amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/07 | None |
| 87650 | Infectious agent detection by nucleic acid (DNA or RNA); Streptococcus, group A, direct probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87651 | Infectious agent detection by nucleic acid (DNA or RNA); Streptococcus, group A, amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87652 | Infectious agent detection by nucleic acid (DNA or RNA); Streptococcus, group A, quantification | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87653 | Infectious agent detection by nucleic acid (DNA or RNA); Streptococcus, group B, amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/07 | None |
| 87660 | Infectious agent detection by nucleic acid (DNA or RNA); Trichomonas vaginalis, direct probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/04 | None |
| 87661 | Infectious agent detection by nucleic acid (DNA or RNA); Trichomonas vaginalis, amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/14 | None |
| 87662 | Infectious agent detection by nucleic acid (DNA or RNA); Zika virus, amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/18 | None |
| 87797 | Infectious agent detection by nucleic acid (DNA or RNA), not otherwise specified; direct probe technique, each organism | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87798 | Infectious agent detection by nucleic acid (DNA or RNA), not otherwise specified; amplified probe technique, each organism | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87799 | Infectious agent detection by nucleic acid (DNA or RNA), not otherwise specified; quantification, each organism | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/98 | None |
| 87800 | Infectious agent detection by nucleic acid (DNA or RNA), multiple organisms; direct probe(s) technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/01 | None |
| 87801 | Infectious agent detection by nucleic acid (DNA or RNA), multiple organisms; amplified probe(s) technique | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/01 | None |
| 87802 | Group B Streptococcus Antigen Detection By Immunoassay With Direct Optical Observation | NONMOLECULAR | Claim Policies Apply | 01/01/02 | None |
| 87803 | Clostridium Difficile Toxin A Antigen Detection By Immunoassay With Direct Optical Observation | NONMOLECULAR | Claim Policies Apply | 01/01/02 | None |
| 87804 | Influenza Antigen Detection By Immunoassay With Direct Optical Observation | NONMOLECULAR | Claim Policies Apply | 01/01/02 | None |
| 87806 | Hiv-1 Antigen Detection By Immunoassay With Direct Optical Observation | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 87807 | Respiratory Syncytial Virus Antigen Detection By Immunoassay With Direct Optical Observation | NONMOLECULAR | Claim Policies Apply | 01/01/05 | None |
| 87808 | Trichomonas Vaginalis Antigen Detection By Immunoassay With Direct Optical Observation | NONMOLECULAR | Claim Policies Apply | 01/01/07 | None |
| 87809 | Adenovirus Antigen Detection By Immunoassay With Direct Optical Observation | NONMOLECULAR | Claim Policies Apply | 01/01/08 | None |
| 87810 | Chlamydia Trachomatis Antigen Detection By Immunoassay With Direct Optical Observation | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87811 | Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (Coronavirus disease [COVID-19]) | NONMOLECULAR | Claim Policies Apply | 10/06/20 | None |
| 87850 | Neisseria Gonorrhoeae Antigen Detection By Immunoassay With Direct Optical Observation | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |

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| 87880 | Group A Streptococcus Antigen Detection By Immunoassay With Direct Optical Observation | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87899 | Infectious agent antigen detection by immunoassay with direct optical observation; not otherwise specified | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 87900 | Infectious agent drug susceptibility phenotype prediction using regularly updated genotypic bioinformatics | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/06 | None |
| 87901 | Infectious agent genotype analysis by nucleic acid (DNA or RNA); HIV-1, reverse transcriptase and protease regions | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/01 | None |
| 87902 | Infectious agent genotype analysis by nucleic acid (DNA or RNA); Hepatitis C virus | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/02 | None |
| 87903 | Infectious agent phenotype analysis by nucleic acid (DNA or RNA) with drug resistance tissue culture analysis, HIV 1; first through 10 drugs tested | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/01 | None |
| 87904 | Infectious agent phenotype analysis by nucleic acid (DNA or RNA) with drug resistance tissue culture analysis, HIV 1; each additional drug tested (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/01 | None |
| 87905 | Infectious agent enzymatic activity other than virus (eg, sialidase activity in vaginal fluid) | NONMOLECULAR | Claim Policies Apply | 01/01/09 | None |
| 87906 | Infectious agent genotype analysis by nucleic acid (DNA or RNA); HIV-1, other region (eg, integrase, fusion) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/11 | None |
| 87910 | Infectious agent genotype analysis by nucleic acid (DNA or RNA); cytomegalovirus | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/13 | None |
| 87912 | Infectious agent genotype analysis by nucleic acid (DNA or RNA); Hepatitis B virus | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/13 | None |
| 87913 | Infectious agent genotype analysis by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]), mutation identification in targeted region(s) | MOLECULAR GENOMIC | Claim Policies Apply | 02/21/22 | None |
| 87999 | Unlisted microbiology procedure | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88000 | Gross Necropsy | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88005 | Gross Necropsy Including Brain | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88007 | Gross Necropsy Including Brain And Spinal Cord | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88012 | Gross Necropsy Including Brain | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88014 | Gross And Microscopic Necropsy Including Brain | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88016 | Gross Necropsy Of Macerated Subject | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88020 | Gross And Microscopic Necropsy | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88025 | Gross And Microscopic Necropsy Including Brain | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88027 | Gross And Microscopic Necropsy Including Brain And Spinal Cord | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88028 | Gross And Microscopic Necropsy Including Brain | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88029 | Gross And Microscopic Necropsy Including Brain | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88036 | Microscopic Regional Necropsy | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88037 | Gross Necropsy Of Organ | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88040 | Forensic Necropsy | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88045 | Necropsy With Coroner In Attendance | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88099 | Unlisted necropsy (autopsy) procedure | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88104 | Cytopathology, fluids, washings or brushings, except cervical or vaginal; smears with interpretation | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88106 | Cytopathology, fluids, washings or brushings, except cervical or vaginal; simple filter method with interpretation | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88108 | Cytopathology, concentration technique, smears and interpretation (eg, Saccomanno technique) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88112 | Cytopathology, selective cellular enhancement technique with interpretation (eg, liquid based slide preparation method), except cervical or vaginal | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| 88120 | Cytopathology, in situ hybridization (eg, FISH), urinary tract specimen with morphometric analysis, 3-5 molecular probes, each specimen; manual | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/11 | None |
| 88121 | Cytopathology, in situ hybridization (eg, FISH), urinary tract specimen with morphometric analysis, 3-5 molecular probes, each specimen; using computer-assisted technology | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/11 | None |
| 88125 | Forensic Cytopathology | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88130 | Identification Of Barr Bodies | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88140 | Identification Of Polymorphonuclear Drumsticks In Peripheral Blood Smear | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88141 | Interpretation Of Cytopathology On Vaginal Smear | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 88142 | Cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation; manual screening under physician supervision | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 88143 | Cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation; with manual screening and rescreening under physician supervision | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 88147 | Cytopathology smears, cervical or vaginal; screening by automated system under physician supervision | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |

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| 88148 | Cytopathology smears, cervical or vaginal; screening by automated system with manual rescreening under physician supervision | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 88150 | Cytopathology, slides, cervical or vaginal; manual screening under physician supervision | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88152 | Cytopathology, slides, cervical or vaginal; with manual screening and computer-assisted rescreening under physician supervision | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 88153 | Cytopathology, slides, cervical or vaginal; with manual screening and rescreening under physician supervision | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 88155 | Cytopathology, slides, cervical or vaginal, definitive hormonal evaluation (eg, maturation index, karyopyknotic index, estrogenic index) (List separately in addition to code[s] for other technical and interpretation services) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88160 | Cytopathology, smears, any other source; screening and interpretation | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88161 | Cytopathology, smears, any other source; preparation, screening and interpretation | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88162 | Cytopathology, smears, any other source; extended study involving over 5 slides and/or multiple stains | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88164 | Cytopathology, slides, cervical or vaginal (the Bethesda System); manual screening under physician supervision | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 88165 | Cytopathology, slides, cervical or vaginal (the Bethesda System); with manual screening and rescreening under physician supervision | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 88166 | Cytopathology, slides, cervical or vaginal (the Bethesda System); with manual screening and computer-assisted rescreening under physician supervision | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 88167 | Cytopathology, slides, cervical or vaginal (the Bethesda System); with manual screening and computer-assisted rescreening using cell selection and review under physician supervision | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 88172 | Cytopathology, evaluation of fine needle aspirate; immediate cytohistologic study to determine adequacy for diagnosis, first evaluation episode, each site | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88173 | Cytopathology, evaluation of fine needle aspirate; interpretation and report | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88174 | Cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation; screening by automated system, under physician supervision | NONMOLECULAR | Claim Policies Apply | 01/01/03 | None |
| 88175 | Cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation; with screening by automated system and manual rescreening or review, under physician supervision | NONMOLECULAR | Claim Policies Apply | 01/01/03 | None |
| 88177 | Cytopathology, evaluation of fine needle aspirate; immediate cytohistologic study to determine adequacy for diagnosis, each separate additional evaluation episode, same site (List separately in addition to code for primary procedure) | NONMOLECULAR | Claim Policies Apply | 01/01/11 | None |
| 88182 | Flow cytometry, cell cycle or DNA analysis | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/00 | None |
| 88184 | Flow cytometry, cell surface, cytoplasmic, or nuclear marker, technical component only; first marker | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/05 | None |
| 88185 | Flow cytometry, cell surface, cytoplasmic, or nuclear marker, technical component only; each additional marker (List separately in addition to code for first marker) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/05 | None |
| 88187 | Flow cytometry, interpretation; 2 to 8 markers | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/05 | None |
| 88188 | Flow cytometry, interpretation; 9 to 15 markers | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/05 | None |
| 88189 | Flow cytometry, interpretation; 16 or more markers | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/05 | None |
| 88199 | Unlisted cytopathology procedure | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/00 | None |
| 88230 | Tissue culture for non-neoplastic disorders; lymphocyte | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/00 | None |
| 88233 | Tissue culture for non-neoplastic disorders; skin or other solid tissue biopsy | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/00 | None |
| 88235 | Tissue culture for non-neoplastic disorders; amniotic fluid or chorionic villus cells | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/00 | None |
| 88237 | Tissue culture for neoplastic disorders; bone marrow, blood cells | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/00 | None |
| 88239 | Tissue culture for neoplastic disorders; solid tumor | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/00 | None |
| 88240 | Cryopreservation, freezing and storage of cells, each cell line | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/99 | None |
| 88241 | Thawing and expansion of frozen cells, each aliquot | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/99 | None |
| 88245 | Chromosome analysis for breakage syndromes; baseline Sister Chromatid Exchange (SCE), 20-25 cells | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/00 | None |
| 88248 | Chromosome analysis for breakage syndromes; baseline breakage, score 50-100 cells, count 20 cells, 2 karyotypes (eg, for ataxia telangiectasia, Fanconi anemia, fragile X) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/00 | None |
| 88249 | Chromosome analysis for breakage syndromes; score 100 cells, clastogen stress (eg, diepoxybutane, mitomycin C, ionizing radiation, UV radiation) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/99 | None |
| 88261 | Chromosome analysis; count 5 cells, 1 karyotype, with banding | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/00 | None |
| 88262 | Chromosome analysis; count 15-20 cells, 2 karyotypes, with banding | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/00 | None |
| 88263 | Chromosome analysis; count 45 cells for mosaicism, 2 karyotypes, with banding | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/00 | None |
| 88264 | Chromosome analysis; analyze 20-25 cells | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/99 | None |
| 88267 | Chromosome analysis, amniotic fluid or chorionic villus, count 15 cells, 1 karyotype, with banding | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/00 | None |

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| 88269 | Chromosome analysis, in situ for amniotic fluid cells, count cells from 6-12 colonies, 1 karyotype, with banding | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/00 | None |
| 88271 | Molecular cytogenetics; DNA probe, each (eg, FISH) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/99 | None |
| 88272 | Molecular cytogenetics; chromosomal in situ hybridization, analyze 3-5 cells (eg, for derivatives and markers) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/99 | None |
| 88273 | Molecular cytogenetics; chromosomal in situ hybridization, analyze 10-30 cells (eg, for microdeletions) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/99 | None |
| 88274 | Molecular cytogenetics; interphase in situ hybridization, analyze 25-99 cells | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/99 | None |
| 88275 | Molecular cytogenetics; interphase in situ hybridization, analyze 100-300 cells | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/99 | None |
| 88280 | Chromosome analysis; additional karyotypes, each study | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/00 | None |
| 88283 | Chromosome analysis; additional specialized banding technique (eg, NOR, C-banding) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/00 | None |
| 88285 | Chromosome analysis; additional cells counted, each study | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/00 | None |
| 88289 | Chromosome analysis; additional high resolution study | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/00 | None |
| 88291 | Cytogenetics and molecular cytogenetics, interpretation and report | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/99 | None |
| 88299 | Unlisted cytogenetic study | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/00 | None |
| 88300 | Level I - Surgical pathology, gross examination only | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88302 | Level II - Surgical pathology, gross and microscopic examination | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88304 | Level III - Surgical pathology, gross and microscopic examination | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88305 | Level IV - Surgical pathology, gross and microscopic examination | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88307 | Level V - Surgical pathology, gross and microscopic examination | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88309 | Level VI - Surgical pathology, gross and microscopic examination | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88311 | Decalcification Procedure | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88312 | Group I Special Stain For Microorganisms With Interpretation And Report | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88313 | Group II Special Stain With Interpretation And Report | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88314 | Histochemical Stain On Frozen Tissue Block | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88319 | Group III Special Stain For Enzyme Constituents With Interpretation And Report | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88321 | Consultation And Report On Referred Slides | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88323 | Consultation And Report On Referred Material With Preparation Of Slides | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88325 | Comprehensive Consultation With Review Of Records And Specimens And Report On Referred Material | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88329 | Intraoperative Pathology Examination | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88331 | Intraoperative Pathology Examination With Frozen Section | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88332 | Intraoperative Pathology Examination With Frozen Section | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88333 | Intraoperative Cytologic Examination | NONMOLECULAR | Claim Policies Apply | 01/01/06 | None |
| 88334 | Intraoperative Cytologic Examination | NONMOLECULAR | Claim Policies Apply | 01/01/06 | None |
| 88341 | Immunohistochemistry or immunocytochemistry, per specimen; each additional single antibody stain procedure (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/15 | None |
| 88342 | Immunohistochemistry or immunocytochemistry, per specimen; initial single antibody stain procedure | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/00 | None |
| 88344 | Immunohistochemistry or immunocytochemistry, per specimen; each multiplex antibody stain procedure | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/15 | None |
| 88346 | Immunofluorescence, per specimen; initial single antibody stain procedure | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88348 | Electron microscopy, diagnostic | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88350 | Immunofluorescence, per specimen; each additional single antibody stain procedure (List separately in addition to code for primary procedure) | NONMOLECULAR | Claim Policies Apply | 01/01/16 | None |
| 88355 | Morphometric analysis; skeletal muscle | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88356 | Morphometric analysis; nerve | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88358 | Morphometric analysis; tumor (eg, DNA ploidy) | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88360 | Morphometric analysis, tumor immunohistochemistry (eg, Her-2/neu, estrogen receptor/progesterone receptor), quantitative or semiquantitative, per specimen, each single antibody stain procedure; manual | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/05 | None |
| 88361 | Morphometric analysis, tumor immunohistochemistry (eg, Her-2/neu, estrogen receptor/progesterone receptor), quantitative or semiquantitative, per specimen, each single antibody stain procedure; using computer-assisted technology | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/04 | None |
| 88362 | Nerve Teasing Preparation | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88363 | Examination And Selection Of Retrieved Archival Tissue For Molecular Analysis | NONMOLECULAR | Claim Policies Apply | 01/01/11 | None |
| 88364 | In situ hybridization (eg, FISH), per specimen; each additional single probe stain procedure (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/15 | None |
| 88365 | In situ hybridization (eg, FISH), per specimen; initial single probe stain procedure | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/00 | None |
| 88366 | In situ hybridization (eg, FISH), per specimen; each multiplex probe stain procedure | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/15 | None |
| 88367 | Morphometric analysis, in situ hybridization (quantitative or semi-quantitative), using computer-assisted technology, per specimen; initial single probe stain procedure | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/05 | None |

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| 88368 | Morphometric analysis, in situ hybridization (quantitative or semi-quantitative), manual, per specimen; initial single probe stain procedure | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/05 | None |
| 88369 | Morphometric analysis, in situ hybridization (quantitative or semi-quantitative), manual, per specimen; each additional single probe stain procedure (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/15 | None |
| 88371 | Protein analysis of tissue by Western Blot, with interpretation and report; | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88372 | Protein analysis of tissue by Western Blot, with interpretation and report; immunological probe for band identification, each | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88373 | Morphometric analysis, in situ hybridization (quantitative or semi-quantitative), using computer-assisted technology, per specimen; each additional single probe stain procedure (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/15 | None |
| 88374 | Morphometric analysis, in situ hybridization (quantitative or semi-quantitative), using computer-assisted technology, per specimen; each multiplex probe stain procedure | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/15 | None |
| 88375 | Optical endomicroscopic image(s), interpretation and report, real-time or referred, each endoscopic session | NONMOLECULAR | Claim Policies Apply | 01/01/13 | None |
| 88377 | Morphometric analysis, in situ hybridization (quantitative or semi-quantitative), manual, per specimen; each multiplex probe stain procedure | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/15 | None |
| 88380 | Microdissection (ie, sample preparation of microscopically identified target); laser capture | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/02 | None |
| 88381 | Microdissection (ie, sample preparation of microscopically identified target); manual | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/08 | None |
| 88387 | Macroscopic examination, dissection, and preparation of tissue for non-microscopic analytical studies (eg, nucleic acid-based molecular studies); each tissue preparation (eg, a single lymph node) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/10 | None |
| 88388 | Macroscopic examination, dissection, and preparation of tissue for non-microscopic analytical studies (eg, nucleic acid-based molecular studies); in conjunction with a touch imprint, intraoperative consultation, or frozen section, each tissue preparation (eg, a single lymph node) (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/10 | None |
| 88399 | Unlisted surgical pathology procedure | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 88720 | Transcutaneous Measurement Of Total Bilirubin | NONMOLECULAR | Claim Policies Apply | 01/01/09 | None |
| 88738 | Transcutaneous Measurement Of Hemoglobin (Hgb) | NONMOLECULAR | Claim Policies Apply | 01/01/10 | None |
| 88740 | Transcutaneous Measurement Of Carboxyhemoglobin | NONMOLECULAR | Claim Policies Apply | 01/01/09 | None |
| 88741 | Transcutaneous Measurement Of Methemoglobin | NONMOLECULAR | Claim Policies Apply | 01/01/09 | None |
| 88749 | Unlisted in vivo (eg, transcutaneous) laboratory service | NONMOLECULAR | Claim Policies Apply | 01/01/11 | None |
| 89049 | Caffeine Halothane Contracture Test (Chct) For Malignant Hyperthermia Susceptibility | NONMOLECULAR | Claim Policies Apply | 01/01/06 | None |
| 89050 | Cell Count On Body Fluid | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 89051 | Cell Count And Differential Count On Body Fluid | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 89055 | Qualitative Assessment Of Leukocytes In Feces | NONMOLECULAR | Claim Policies Apply | 01/01/03 | None |
| 89060 | Crystal Identification In Tissue Using Light Microscopy With Polarizing Lens Analysis | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 89125 | Fat Stain Of Feces | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 89160 | Microscopic Examination For Meat Fibers In Feces | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 89190 | Nasal Smear For Eosinophils | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 89220 | Obtaining Of Sputum Specimen | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| 89230 | Sweat Collection By Iontophoresis | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| 89240 | Unlisted miscellaneous pathology test | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| 89250 | Culture Of Embryo | NONMOLECULAR | Claim Policies Apply | 01/01/96 | None |
| 89251 | Culture Of Oocyte With Culture Of Embryo | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 89253 | Assisted Embryo Hatching Using Microtechnique | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 89254 | Oocyte Identification From Follicular Fluid | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 89255 | Preparation Of Embryo For Transfer | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 89257 | Sperm Identification From Testicular Aspirate | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 89258 | Cryopreservation Of Embryo | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 89259 | Cryopreservation Of Sperm | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 89260 | Sperm Isolation With Semen Analysis For Insemination | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 89261 | Sperm Isolation Using Albumin Gradient With Semen Analysis For Diagnosis | NONMOLECULAR | Claim Policies Apply | 01/01/98 | None |
| 89264 | Sperm Identification From Fresh Testis Tissue | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| 89268 | Insemination Of Oocyte | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| 89272 | Culture Of Oocyte | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| 89280 | Assisted Oocyte Fertilization Using Microtechnique | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| 89281 | Assisted Oocyte Fertilization Using Microtechnique | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| 89290 | Biopsy Of Oocyte Polar Body Using Microtechnique | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| 89291 | Biopsy Of Embryo Blastomere Using Microtechnique | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| 89300 | Evaluation Of Sperm Presence | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |

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| 89310 | Semen Analysis With Evaluation Of Sperm Motility And Differential Count | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 89320 | Evaluation Of Sperm Motility | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 89321 | Semen Analysis With Evaluation Of Sperm Presence And Motility | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| 89322 | Semen Analysis With Measurement Of Volume, Sperm Count, Evaluation Of Sperm Motility, And Differential Count Using Strict Morphologic Criteria | NONMOLECULAR | Claim Policies Apply | 01/01/08 | None |
| 89325 | Antisperm Antibody Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 89329 | Evaluation Of Sperm Penetration Of Hamster Zona Free Ovum | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 89330 | Evaluation Of Sperm Penetration Of Cervical Mucus With Spinnbarkeit Test | NONMOLECULAR | Claim Policies Apply | 01/01/93 | None |
| 89331 | Microscopic Examination Of Urine For Sperm | NONMOLECULAR | Claim Policies Apply | 01/01/08 | None |
| 89335 | Cryopreservation Of Testicular Tissue | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| 89337 | Cryopreservation Of Mature Oocyte | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| 89342 | Storage Of Embryo | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| 89343 | Storage Of Semen | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| 89344 | Storage Of Testicular Tissue | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| 89346 | Storage Of Oocyte | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| 89352 | Thawing Of Cryopreserved Embryo | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| 89353 | Thawing Of Cryopreserved Semen | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| 89354 | Thawing Of Cryopreserved Testicular Tissue | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| 89356 | Thawing Of Cryopreserved Oocytes | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| 89398 | Unlisted reproductive medicine laboratory procedure | NONMOLECULAR | Claim Policies Apply | 01/01/10 | None |
| 0001U | Red blood cell antigen typing, DNA, human erythrocyte antigen gene analysis of 35 antigens from 11 blood groups, utilizing whole blood, common RBC alleles reported | MOLECULAR GENOMIC | Requires Prior Authorization | 02/01/17 | None |
| 0002M | Liver disease, ten biochemical assays (ALT, A2-macroglobulin, apolipoprotein A-1, total bilirubin, GGT, haptoglobin, AST, glucose, total cholesterol and triglycerides) utilizing serum, prognostic algorithm reported as quantitative scores for fibrosis, steatosis and alcoholic steatohepatitis (ASH) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/13 | None |
| 0002U | Oncology (colorectal), quantitative assessment of three urine metabolites (ascorbic acid, succinic acid and carnitine) by liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring acquisition, algorithm reported as likelihood of adenomatous polyps | NONMOLECULAR | Claim Policies Apply | 02/01/17 | None |
| 0003M | Liver disease, ten biochemical assays (ALT, A2-macroglobulin, apolipoprotein A-1, total bilirubin, GGT, haptoglobin, AST, glucose, total cholesterol and triglycerides) utilizing serum, prognostic algorithm reported as quantitative scores for fibrosis, steatosis and nonalcoholic steatohepatitis (NASH) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/13 | None |
| 0003U | Oncology (ovarian) biochemical assays of five proteins (apolipoprotein A-1, CA 125 II, follicle stimulating hormone, human epididymis protein 4, transferrin), utilizing serum, algorithm reported as a likelihood score | NONMOLECULAR | Claim Policies Apply | 02/01/17 | None |
| 0004M | Scoliosis, DNA analysis of 53 single nucleotide polymorphisms (SNPs), using saliva, prognostic algorithm reported as a risk score | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/13 | None |
| 0005U | Oncology (prostate) gene expression profile by real-time RT-PCR of 3 genes (ERG, PCA3, and SPDEF), urine, algorithm reported as risk score | MOLECULAR GENOMIC | Requires Prior Authorization | 05/01/17 | None |
| 0006M | Oncology (hepatic), mRNA expression levels of 161 genes, utilizing fresh hepatocellular carcinoma tumor tissue, with alpha-fetoprotein level, algorithm reported as a risk classifier | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/15 | None |
| 0007M | Oncology (gastrointestinal neuroendocrine tumors), real-time PCR expression analysis of 51 genes, utilizing whole peripheral blood, algorithm reported as a nomogram of tumor disease index | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/15 | None |
| 0007U | Drug test(s), presumptive, with definitive confirmation of positive results, any number of drug classes, urine, includes specimen verification including DNA authentication in comparison to buccal DNA, per date of service | NONMOLECULAR | Claim Policies Apply | 08/01/17 | None |
| 0008U | Helicobacter pylori detection and antibiotic resistance, DNA, 16S and 23S rRNA, gyrA, pbp1, rdxA and rpoB, next-generation sequencing, formalin-fixed paraffin embedded or fresh tissue or fecal sample, predictive, reported as positive or negative for resistance to clarithromycin, fluoroquinolones, metronidazole, amoxicillin, tetracycline, and rifabutin | MOLECULAR GENOMIC | Claim Policies Apply | 08/01/17 | None |
| 0009U | Oncology (breast cancer), ERBB2 (HER2) copy number by FISH, tumor cells from formalin fixed paraffin embedded tissue isolated using image-based dielectrophoresis (DEP) sorting, reported as ERBB2 gene amplified or non-amplified | MOLECULAR GENOMIC | Claim Policies Apply | 08/01/17 | None |
| 0010U | Infectious disease (bacterial), strain typing by whole genome sequencing, phylogenetic-based report of strain relatedness, per submitted isolate | MOLECULAR GENOMIC | Claim Policies Apply | 08/01/17 | None |
| 0011M | Oncology, prostate cancer, mRNA expression assay of 12 genes (10 content and 2 housekeeping), RT-PCR test utilizing blood plasma and urine, algorithms to predict high-grade prostate cancer risk | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |

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| 0011U | Prescription drug monitoring, evaluation of drugs present by LCMS/MS, using oral fluid, reported as a comparison to an estimated steady-state range, per date of service including all drug compounds and metabolites | NONMOLECULAR | Claim Policies Apply | 08/01/17 | None |
| 0012M | Oncology (urothelial), mRNA, gene expression profiling by real-time quantitative PCR of five genes (MDK, HOXA13, CDC2 [CDK1], IGFBP5, and CXCR2), utilizing urine, algorithm reported as a risk score for having urothelial carcinoma | MOLECULAR GENOMIC | Requires Prior Authorization | 04/01/18 | None |
| 0012U | Germline disorders, gene rearrangement detection by whole genome next-generation sequencing, DNA, whole blood, report of specific gene rearrangement(s) | MOLECULAR GENOMIC | Requires Prior Authorization | 08/01/17 | None |
| 0013M | Oncology (urothelial), mRNA, gene expression profiling by real-time quantitative PCR of five genes (MDK, HOXA13, CDC2 [CDK1], IGFBP5, and CXCR2), utilizing urine, algorithm reported as a risk score for having recurrent urothelial carcinoma | MOLECULAR GENOMIC | Requires Prior Authorization | 04/01/18 | None |
| 0013U | Oncology (solid organ neoplasia), gene rearrangement detection by whole genome next-generation sequencing, DNA, fresh or frozen tissue or cells, report of specific gene rearrangement(s) | MOLECULAR GENOMIC | Requires Prior Authorization | 08/01/17 | None |
| 0014M | Liver disease, analysis of 3 biomarkers (hyaluronic acid [HA], procollagen III amino terminal peptide [PIIINP], tissue inhibitor of metalloproteinase 1 [TIMP-1]), using immunoassays, utilizing serum, prognostic algorithm reported as a risk score and risk of liver fibrosis and liver-related clinical events within 5 years | NONMOLECULAR | Claim Policies Apply | 04/01/20 | None |
| 0014U | Hematology (hematolymphoid neoplasia), gene rearrangement detection by whole genome next-generation sequencing, DNA, whole blood or bone marrow, report of specific gene rearrangement(s) | MOLECULAR GENOMIC | Requires Prior Authorization | 08/01/17 | None |
| 0015M | Adrenal cortical tumor, biochemical assay of 25 steroid markers, utilizing 24-hour urine specimen and clinical parameters, prognostic algorithm reported as a clinical risk and integrated clinical steroid risk for adrenal cortical carcinoma, adenoma, or other adrenal malignancy | NONMOLECULAR | Claim Policies Apply | 10/01/20 | None |
| 0016M | Oncology (bladder), mRNA, microarray gene expression profiling of 219 genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as molecular subtype (luminal, luminal infiltrated, basal, basal claudin-low, neuroendocrine-like) | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/20 | None |
| 0016U | Oncology (hematolymphoid neoplasia), RNA, BCR/ABL1 major and minor breakpoint fusion transcripts, quantitative PCR amplification, blood or bone marrow, report of fusion not detected or detected with quantitation | MOLECULAR GENOMIC | Claim Policies Apply | 08/01/17 | None |
| 0017M | Oncology (diffuse large B-cell lymphoma [DLBCL]), mRNA, gene expression profiling by fluorescent probe hybridization of 20 genes, formalin-fixed paraffinembedded tissue, algorithm reported as cell of origin | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/21 | None |
| 0017U | Oncology (hematolymphoid neoplasia), JAK2 mutation, DNA, PCR amplification of exons 12-14 and sequence analysis, blood or bone marrow, report of JAK2 mutation not detected or detected | MOLECULAR GENOMIC | Claim Policies Apply | 08/01/17 | None |
| 0018M | Transplantation medicine (allograft rejection, renal), measurement of donor and third-party-induced CD154+T-cytotoxic memory cells, utilizing whole peripheral blood, algorithm reported as a rejection risk score | NONMOLECULAR | Claim Policies Apply | 10/01/21 | None |
| 0018U | Oncology (thyroid), microRNA profiling by RT-PCR of 10 microRNA sequences, utilizing fine needle aspirate, algorithm reported as a positive or negative result for moderate to high risk of malignancy | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/17 | None |
| 0019U | Oncology, RNA, gene expression by whole transcriptome sequencing, formalin-fixed paraffin embedded tissue or fresh frozen tissue, predictive algorithm reported as potential targets for therapeutic agents | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/17 | None |
| 0021U | Oncology (prostate), detection of 8 autoantibodies (ARF 6, NKX3-1, 5'UTR-BMI1, CEP 164, 3'-UTR Ropporin, Desmocollin, AURKAIP1, CSNK2A2), multiplexed immunoassay and flow cytometry serum, algorithm reported as risk score | NONMOLECULAR | Claim Policies Apply | 10/01/17 | None |
| 0022U | Targeted genomic sequence analysis panel, cholangiocarcinoma and non-small cell lung neoplasia, DNA and RNA analysis, 1-23 genes, interrogation for sequence variants and rearrangements, reported as presence/absence of variants and associated therapy(ies) to consider | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/17 | None |
| 0023U | Oncology (acute myelogenous leukemia), DNA, genotyping of internal tandem duplication, p.D835, p.I836, using mononuclear cells, reported as detection or nondetection of FLT3 mutation and indication for or against the use of midostaurin | MOLECULAR GENOMIC | Claim Policies Apply | 10/01/17 | None |
| 0024U | Glycosylated acute phase proteins (GlycA), nuclear magnetic resonance spectroscopy, quantitative | NONMOLECULAR | Claim Policies Apply | 01/01/18 | None |
| 0025U | Tenofovir, by liquid chromatography with tandem mass spectrometry (LC-MS/MS), urine, quantitative | NONMOLECULAR | Claim Policies Apply | 01/01/18 | None |
| 0026U | Oncology (thyroid), DNA and mRNA of 112 genes, next-generation sequencing, fine needle aspirate of thyroid nodule, algorithmic analysis reported as a categorical result ("Positive, high probability of malignancy" or "Negative, low probability of malignancy") | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 0027U | JAK2 (Janus kinase 2) (eg, myeloproliferative disorder) gene analysis, targeted sequence analysis exons 12-15 | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/18 | None |

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| 0029U | Drug metabolism (adverse drug reactions and drug response), targeted sequence analysis (ie, CYP1A2, CYP2C19, CYP2C9, CYP2D6, CYP3A4, CYP3A5, CYP4F2, SLCO1B1, VKORC1 and rs12777823) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 0030U | Drug metabolism (warfarin drug response), targeted sequence analysis (ie, CYP2C9, CYP4F2, VKORC1, rs12777823) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 0031U | CYP1A2 (cytochrome P450 family 1, subfamily A, member 2)(eg, drug metabolism) gene analysis, common variants (ie, *1F, *1K, *6, *7) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 0032U | COMT (catechol-O-methyltransferase)(drug metabolism) gene analysis, c.472G>A (rs4680) variant | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 0033U | HTR2A (5-hydroxytryptamine receptor 2A), HTR2C (5-hydroxytryptamine receptor 2C) (eg, citalopram metabolism) gene analysis, common variants (ie, HTR2A rs7997012 [c.614-2211T>C], HTR2C rs3813929 [c.-759C>T] and rs1414334 [c.551-3008C>G]) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 0034U | TPMT (thiopurine S-methyltransferase), NUDT15 (nudix hydroxylase 15)(eg, thiopurine metabolism), gene analysis, common variants (ie, TPMT *2, *3A, *3B, *3C, *4, *5, *6, *8, *12; NUDT15*3, *4, *5) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/18 | None |
| 0035U | Neurology (prion disease), cerebrospinal fluid, detection of prion protein by quaking-induced conformational conversion, qualitative | NONMOLECULAR | Claim Policies Apply | 04/01/18 | None |
| 0036U | Exome (ie, somatic mutations), paired formalin-fixed paraffin-embedded tumor tissue and normal specimen, sequence analyses | MOLECULAR GENOMIC | Requires Prior Authorization | 04/01/18 | None |
| 0037U | Targeted genomic sequence analysis, solid organ neoplasm, DNA analysis of 324 genes, interrogation for sequence variants, gene copy number amplifications, gene rearrangements, microsatellite instability and tumor mutational burden | MOLECULAR GENOMIC | Requires Prior Authorization | 04/01/18 | None |
| 0038U | Vitamin D, 25 hydroxy D2 and D3, by LC-MS/MS, serum microsample, quantitative | NONMOLECULAR | Claim Policies Apply | 04/01/18 | None |
| 0039U | Deoxyribonucleic acid (DNA) antibody, double stranded, high avidity | NONMOLECULAR | Claim Policies Apply | 04/01/18 | None |
| 0040U | BCR/ABL1 (t(9;22)) (eg, chronic myelogenous leukemia) translocation analysis, major breakpoint, quantitative | MOLECULAR GENOMIC | Claim Policies Apply | 04/01/18 | None |
| 0041U | Borrelia burgdorferi, antibody detection of 5 recombinant protein groups, by immunoblot, IgM | NONMOLECULAR | Claim Policies Apply | 04/01/18 | None |
| 0042U | Borrelia burgdorferi, antibody detection of 12 recombinant protein groups, by immunoblot, IgG | NONMOLECULAR | Claim Policies Apply | 04/01/18 | None |
| 0043U | Tick-borne relapsing fever Borrelia group, antibody detection to 4 recombinant protein groups, by immunoblot, IgM | NONMOLECULAR | Claim Policies Apply | 04/01/18 | None |
| 0044U | Tick-borne relapsing fever Borrelia group, antibody detection to 4 recombinant protein groups, by immunoblot, IgG | NONMOLECULAR | Claim Policies Apply | 04/01/18 | None |
| 0045U | Oncology (breast ductal carcinoma in situ), mRNA, gene expression profiling by realtime RT-PCR of 12 genes (7 content and 5 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as recurrence score | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/18 | None |
| 0046U | FLT3 (fms-related tyrosine kinase 3) (eg, acute myeloid leukemia) internal tandem duplication (ITD) variants, quantitative | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/18 | None |
| 0047U | Oncology (prostate), mRNA, gene expression profiling by real-time RT-PCR of 17 genes (12 content and 5 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a risk score | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/18 | None |
| 0048U | Oncology (solid organ neoplasia), DNA, targeted sequencing of protein-coding exons of 468 cancer-associated genes, including interrogation for somatic mutations and microsatellite instability, matched with normal specimens, utilizing formalin-fixed paraffin-embedded tumor tissue, report of clinically significant mutation(s) | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/18 | None |
| 0049U | NPM1 (nucleophosmin) (eg, acute myeloid leukemia) gene analysis, quantitative | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/18 | None |
| 0050U | Targeted genomic sequence analysis panel, acute myelogenous leukemia, DNA analysis, 194 genes, interrogation for sequence variants, copy number variants or rearrangements | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/18 | None |
| 0051U | Prescription drug monitoring, evaluation of drugs present by liquid chromatography tandem mass spectrometry LC-MS/MS, urine or blood, 31 drug panel, reported as quantitative results, detected or not detected, per date of service | NONMOLECULAR | Claim Policies Apply | 07/01/18 | None |
| 0052U | Lipoprotein, blood, high resolution fractionation and quantitation of lipoproteins, including all five major lipoprotein classes and subclasses of HDL, LDL, and VLDL by vertical auto profile ultracentrifugation | NONMOLECULAR | Claim Policies Apply | 07/01/18 | None |
| 0053U | Oncology (prostate cancer), FISH analysis of 4 genes (ASAP1, HDAC9, CHD1 and PTEN), needle biopsy specimen, algorithm reported as probability of higher tumor grade | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/18 | None |
| 0054U | Prescription drug monitoring, 14 or more classes of drugs and substances, definitive tandem mass spectrometry with chromatography, capillary blood, quantitative report with therapeutic and toxic ranges, including steady-state range for the prescribed dose when detected, per date of service | NONMOLECULAR | Claim Policies Apply | 07/01/18 | None |
| 0055U | Cardiology (heart transplant), cell-free DNA, PCR assay of 96 DNA target sequences (94 single nucleotide polymorphism targets and two control targets), plasma | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/18 | None |

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| 0056U | Hematology (acute myelogenous leukemia), DNA, whole genome nextgeneration sequencing to detect gene rearrangement(s), blood or bone marrow, report of specific gene rearrangement(s) | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/18 | None |
| 0058U | Oncology (Merkel cell carcinoma), detection of antibodies to the Merkel cell polyoma virus oncoprotein (small T antigen), serum, quantitative | NONMOLECULAR | Claim Policies Apply | 07/01/18 | None |
| 0059U | Oncology (Merkel cell carcinoma), detection of antibodies to the Merkel cell polyoma virus capsid protein (VP1), serum, reported as positive or negative | NONMOLECULAR | Claim Policies Apply | 07/01/18 | None |
| 0060U | Twin zygosity, genomic targeted sequence analysis of chromosome 2, using circulating cell-free fetal DNA in maternal blood | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/18 | None |
| 0061U | Transcutaneous measurement of five biomarkers (tissue oxygenation [StO2], oxyhemoglobin [ctHbO2], deoxyhemoglobin [ctHbR], papillary and reticular dermal hemoglobin concentrations [ctHb1 and ctHb2]), using spatial frequency domain imaging (SFDI) and multi-spectral analysis | NONMOLECULAR | Claim Policies Apply | 07/01/18 | None |
| 0062U | Autoimmune (systemic lupus erythematosus), IgG and IgM analysis of 80 biomarkers, utilizing serum, algorithm reported with a risk score | NONMOLECULAR | Claim Policies Apply | 10/01/18 | None |
| 0063U | Neurology (autism), 32 amines by LCMS/MS, using plasma, algorithm reported as metabolic signature associated with autism spectrum disorder | NONMOLECULAR | Claim Policies Apply | 10/01/18 | None |
| 0064U | Antibody, Treponema pallidum, total and rapid plasma reagin (RPR), immunoassay, qualitative | NONMOLECULAR | Claim Policies Apply | 10/01/18 | None |
| 0065U | Syphilis test, non-treponemal antibody, immunoassay, qualitative (RPR) | NONMOLECULAR | Claim Policies Apply | 10/01/18 | None |
| 0066U | Placental alpha-micro globulin-1 (PAMG1), immunoassay with direct optical observation, cervico-vaginal fluid, each specimen | NONMOLECULAR | Claim Policies Apply | 10/01/18 | None |
| 0067U | Oncology (breast), immunohistochemistry, protein expression profiling of 4 biomarkers (matrix metalloproteinase-1 [MMP-1], carcinoembryonic antigen-related cell adhesion molecule 6 [CEACAM6], hyaluronoglucosaminidase [HYAL1], highly expressed in cancer protein [HEC1]), formalin-fixed paraffin-embedded precancerous breast tissue, algorithm reported as carcinoma risk score | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/18 | None |
| 0068U | Candida species panel (C. albicans, C. glabrata, C. parapsilosis, C. kruseii, C. tropicalis, and C. auris), amplified probe technique with qualitative report of the presence or absence of each species | MOLECULAR GENOMIC | Claim Policies Apply | 10/01/18 | None |
| 0069U | Oncology (colorectal), microRNA, RT-PCR expression profiling of miR-31-3p, formalin fixed paraffin-embedded tissue, algorithm reported as an expression score | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/18 | None |
| 0070U | CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, common and select rare variants (ie, *2, *3, *4, *4N, *5, *6, *7, *8, *9, *10, *11, *12, *13, *14A, *14B, *15, *17, *29, *35, *36, *41, *57, *61, *63, *68, *83, *xN) | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/18 | None |
| 0071U | CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, full gene sequence (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/18 | None |
| 0072U | CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, targeted sequence analysis (ie, CYP2D6-2D7 hybrid gene) (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/18 | None |
| 0073U | CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, targeted sequence analysis (ie, CYP2D7-2D6 hybrid gene) (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/18 | None |
| 0074U | CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, targeted sequence analysis (ie, non-duplicated gene when duplication/multiplication is trans) (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/18 | None |
| 0075U | CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, targeted sequence analysis (ie, 5' gene duplication/multiplication) (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/18 | None |
| 0076U | CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, targeted sequence analysis (ie, 3' gene duplication/ multiplication) (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/18 | None |
| 0077U | Immunoglobulin paraprotein (M-protein), qualitative, immunoprecipitation and mass spectrometry, blood or urine, including isotype | NONMOLECULAR | Claim Policies Apply | 10/01/18 | None |
| 0078U | Pain management (opioid-use disorder) genotyping panel, 16 common variants (ie, ABCB1, COMT, DAT1, DBH, DOR, DRD1, DRD2, DRD4, GABA, GAL, HTR2A, HTTLPR, MTHFR, MUOR, OPRK1, OPRM1), buccal swab or other germline tissue sample, algorithm reported as positive or negative risk of opioid-use disorder | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/18 | None |
| 0079U | Comparative DNA analysis using multiple selected single-nucleotide polymorphisms (SNPs), urine and buccal DNA, for specimen identity verification | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/18 | None |

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| 0080U | Oncology (lung), mass spectrometric analysis of galectin-3-binding protein and scavenger receptor cysteine-rich type 1 protein M130, with five clinical risk factors (age, smoking status, nodule diameter, nodule-spiculation status and nodule location), utilizing plasma, algorithm reported as a categorical probability of malignancy | NONMOLECULAR | Claim Policies Apply | 01/01/19 | None |
| 0082U | Drug test(s), definitive, 90 or more drugs or substances, definitive chromatography with mass spectrometry, and presumptive, any number of drug classes, by instrument chemistry analyzer (utilizing immunoassay), urine, report of presence or absence of each drug, drug metabolite or substance with description and severity of significant interactions per date of service | NONMOLECULAR | Claim Policies Apply | 01/01/19 | None |
| 0083U | Oncology, response to chemotherapy drugs using motility contrast tomography, fresh or frozen tissue, reported as likelihood of sensitivity or resistance to drugs or drug combinations | NONMOLECULAR | Claim Policies Apply | 01/01/19 | None |
| 0084U | Red blood cell antigen typing, DNA, genotyping of 10 blood groups with phenotype prediction of 37 red blood cell antigens | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/19 | None |
| 0086U | Infectious disease (bacterial and fungal), organism identification, blood culture, using rRNA FISH, 6 or more organism targets, reported as positive or negative with phenotypic minimum inhibitory concentration (MIC)-based antimicrobial susceptibility | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/19 | None |
| 0087U | Cardiology (heart transplant), mRNA gene expression profiling by microarray of 1283 genes, transplant biopsy tissue, allograft rejection and injury algorithm reported as a probability score | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/19 | None |
| 0088U | Transplantation medicine (kidney allograft rejection), microarray gene expression profiling of 1494 genes, utilizing transplant biopsy tissue, algorithm reported as a probability score for rejection | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/19 | None |
| 0089U | Oncology (melanoma), gene expression profiling by RTqPCR, PRAME and LINC00518, superficial collection using adhesive patch(es) | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/19 | None |
| 0090U | Oncology (cutaneous melanoma), mRNA gene expression profiling by RT-PCR of 23 genes (14 content and 9 housekeeping), utilizing formalin-fixed paraffin-embedded (FFPE) tissue, algorithm reported as a categorical result (ie, benign, intermediate, malignant) | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/19 | None |
| 0091U | Oncology (colorectal) screening, cell enumeration of circulating tumor cells, utilizing whole blood, algorithm, for the presence of adenoma or cancer, reported as a positive or negative result | NONMOLECULAR | Claim Policies Apply | 07/01/19 | None |
| 0092U | Oncology (lung), three protein biomarkers, immunoassay using magnetic nanosensor technology, plasma, algorithm reported as risk score for likelihood of malignancy | NONMOLECULAR | Claim Policies Apply | 07/01/19 | None |
| 0093U | Prescription drug monitoring, evaluation of 65 common drugs by LC-MS/MS, urine, each drug reported detected or not detected | NONMOLECULAR | Claim Policies Apply | 07/01/19 | None |
| 0094U | Genome (eg, unexplained constitutional or heritable disorder or syndrome), rapid sequence analysis | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/19 | None |
| 0095U | Inflammation (eosinophilic esophagitis), ELISA analysis of eotaxin-3 (CCL26 [C-C motif chemokine ligand 26]) and major basic protein (PRG2 [proteoglycan 2, pro eosinophil major basic protein]), specimen obtained by swallowed nylon string, algorithm reported as predictive probability index for active eosinophilic esophagitis | NONMOLECULAR | Claim Policies Apply | 07/01/19 | None |
| 0096U | Human papillomavirus (HPV), high-risk types (ie, 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 66, 68), male urine | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/19 | None |
| 0101U | Hereditary colon cancer disorders (eg, Lynch syndrome, PTEN hamartoma syndrome, Cowden syndrome, familial adenomatous polyposis), genomic sequence analysis panel utilizing a combination of NGS, Sanger, MLPA, and array CGH, with mRNA analytics to resolve variants of unknown significance when indicated (15 genes [sequencing and deletion/duplication], EPCAM and GREM1 [deletion/duplication only]) | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/19 | None |
| 0102U | Hereditary breast cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer), genomic sequence analysis panel utilizing a combination of NGS, Sanger, MLPA, and array CGH, with mRNA analytics to resolve variants of unknown significance when indicated (17 genes [sequencing and deletion/duplication]) | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/19 | None |
| 0103U | Hereditary ovarian cancer (eg, hereditary ovarian cancer, hereditary endometrial cancer), genomic sequence analysis panel utilizing a combination of NGS, Sanger, MLPA, and array CGH, with mRNA analytics to resolve variants of unknown significance when indicated (24 genes [sequencing and deletion/duplication], EPCAM [deletion/duplication only]) | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/19 | None |
| 0105U | Nephrology (chronic kidney disease), multiplex electrochemiluminescent immunoassay (ECLIA) of tumor necrosis factor receptor 1A, receptor superfamily 2 (TNFR1, TNFR2), and kidney injury molecule-1 (KIM-1) combined with longitudinal clinical data, including APOL1 genotype if available, and plasma (isolated fresh or frozen), algorithm reported as probability score for rapid kidney function decline (RKFD) | NONMOLECULAR | Claim Policies Apply | 10/01/19 | None |

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| 0106U | Gastric emptying, serial collection of 7 timed breath specimens, non-radioisotope carbon-13 (13C) spirulina substrate, analysis of each specimen by gas isotope ratio mass spectrometry, reported as rate of 13CO2 excretion | NONMOLECULAR | Claim Policies Apply | 10/01/19 | None |
| 0107U | Clostridium difficile toxin(s) antigen detection by immunoassay technique, stool, qualitative, multiple-step method | NONMOLECULAR | Claim Policies Apply | 10/01/19 | None |
| 0108U | Gastroenterology (Barrett's esophagus), whole slide-digital imaging, including morphometric analysis, computer-assisted quantitative immunolabeling of 9 protein biomarkers (p16, AMACR, p53, CD68, COX-2, CD45RO, HIF1a, HER-2, K20) and morphology, formalin-fixed paraffin-embedded tissue, algorithm reported as risk of progression to high-grade dysplasia or cancer | NONMOLECULAR | Claim Policies Apply | 10/01/19 | None |
| 0109U | Infectious disease (Aspergillus species), real-time PCR for detection of DNA from 4 species (A. fumigatus, A. terreus, A. niger, and A. flavus), blood, lavage fluid, or tissue, qualitative reporting of presence or absence of each species | MOLECULAR GENOMIC | Claim Policies Apply | 10/01/19 | None |
| 0110U | Prescription drug monitoring, one or more oral oncology drug(s) and substances, definitive tandem mass spectrometry with chromatography, serum or plasma from capillary blood or venous blood, quantitative report with steady-state range for the prescribed drug(s) when detected | NONMOLECULAR | Claim Policies Apply | 10/01/19 | None |
| 0111U | Oncology (colon cancer), targeted KRAS (codons 12, 13, and 61) and NRAS (codons 12, 13, and 61) gene analysis utilizing formalin-fixed paraffin-embedded tissue | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/19 | None |
| 0112U | Infectious agent detection and identification, targeted sequence analysis (16S and 18S rRNA genes) with drug-resistance gene | MOLECULAR GENOMIC | Claim Policies Apply | 10/01/19 | None |
| 0113U | Oncology (prostate), measurement of PCA3 and TMPRSS2-ERG in urine and PSA in serum following prostatic massage, by RNA amplification and fluorescence-based detection, algorithm reported as risk score | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/19 | None |
| 0114U | Gastroenterology (Barrett's esophagus), VIM and CCNA1 methylation analysis, esophageal cells, algorithm reported as likelihood for Barrett's esophagus | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/19 | None |
| 0115U | Respiratory infectious agent detection by nucleic acid (DNA and RNA), 18 viral types and subtypes and 2 bacterial targets, amplified probe technique, including multiplex reverse transcription for RNA targets, each analyte reported as detected or not detected | MOLECULAR GENOMIC | Claim Policies Apply | 10/01/19 | None |
| 0116U | Prescription drug monitoring, enzyme immunoassay of 35 or more drugs confirmed with LC-MS/MS, oral fluid, algorithm results reported as a patient-compliance measurement with risk of drug to drug interactions for prescribed medications | NONMOLECULAR | Claim Policies Apply | 10/01/19 | None |
| 0117U | Pain management, analysis of 11 endogenous analytes (methylmalonic acid, xanthurenic acid, homocysteine, pyroglutamic acid, vanilmandelate, 5-hydroxyindoleacetic acid, hydroxymethylglutarate, ethylmalonate, 3-hydroxypropyl mercapturic acid (3-HPMA), quinolinic acid, kynurenic acid), LC-MS/MS, urine, algorithm reported as a pain-index score with likelihood of atypical biochemical function associated with pain | NONMOLECULAR | Claim Policies Apply | 10/01/19 | None |
| 0118U | Transplantation medicine, quantification of donor-derived cell-free DNA using whole genome next-generation sequencing, plasma, reported as percentage of donor-derived cell-free DNA in the total cell-free DNA | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/19 | None |
| 0119U | Cardiology, ceramides by liquid chromatography-tandem mass spectrometry, plasma, quantitative report with risk score for major cardiovascular events | NONMOLECULAR | Claim Policies Apply | 10/01/19 | None |
| 0120U | Oncology (B-cell lymphoma classification), mRNA, gene expression profiling by fluorescent probe hybridization of 58 genes (45 content and 13 housekeeping genes), formalin-fixed paraffin-embedded tissue, algorithm reported as likelihood for primary mediastinal B-cell lymphoma (PMBCL) and diffuse large B-cell lymphoma (DLBCL) with cell of origin subtyping in the latter | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/19 | None |
| 0121U | Sickle cell disease, microfluidic flow adhesion (VCAM-1), whole blood | NONMOLECULAR | Claim Policies Apply | 10/01/19 | None |
| 0122U | Sickle cell disease, microfluidic flow adhesion (P-Selectin), whole blood | NONMOLECULAR | Claim Policies Apply | 10/01/19 | None |
| 0123U | Mechanical fragility, RBC, shear stress and spectral analysis profiling | NONMOLECULAR | Claim Policies Apply | 10/01/19 | None |
| 0129U | Hereditary breast cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer), genomic sequence analysis and deletion/duplication analysis panel (ATM, BRCA1, BRCA2, CDH1, CHEK2, PALB2, PTEN, and TP53) | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/19 | None |
| 0130U | Hereditary colon cancer disorders (eg, Lynch syndrome, PTEN hamartoma syndrome, Cowden syndrome, familial adenomatous polyposis), targeted mRNA sequence analysis panel (APC, CDH1, CHEK2, MLH1, MSH2, MSH6, MUTYH, PMS2, PTEN, and TP53) (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/19 | None |
| 0131U | Hereditary breast cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer), targeted mRNA sequence analysis panel (13 genes) (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/19 | None |
| 0132U | Hereditary ovarian cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer), targeted mRNA sequence analysis panel (17 genes) (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/19 | None |

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| 0133U | Hereditary prostate cancer–related disorders, targeted mRNA sequence analysis panel (11 genes) (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/19 | None |
| 0134U | Hereditary pan cancer (eg, hereditary breast and ovarian cancer, hereditary endometrial cancer, hereditary colorectal cancer), targeted mRNA sequence analysis panel (18 genes) (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/19 | None |
| 0135U | Hereditary gynecological cancer (eg, hereditary breast and ovarian cancer, hereditary endometrial cancer, hereditary colorectal cancer), targeted mRNA sequence analysis panel (12 genes) (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/19 | None |
| 0136U | ATM (ataxia telangiectasia mutated) (eg, ataxia telangiectasia) mRNA sequence analysis (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/19 | None |
| 0137U | PALB2 (partner and localizer of BRCA2) (eg, breast and pancreatic cancer) mRNA sequence analysis (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/19 | None |
| 0138U | BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) mRNA sequence analysis (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/19 | None |
| 0139U | Neurology (autism spectrum disorder [ASD]), quantitative measurements of 6 central carbon metabolites (ie, α-ketoglutarate, alanine, lactate, phenylalanine, pyruvate, and succinate), LC-MS/MS, plasma, algorithmic analysis with result reported as negative or positive (with metabolic subtypes of ASD) | NONMOLECULAR | Claim Policies Apply | 01/01/20 | 10/01/21 |
| 0140U | Infectious disease (fungi), fungal pathogen identification, DNA (15 fungal targets), blood culture, amplified probe technique, each target reported as detected or not detected | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/20 | None |
| 0141U | Infectious disease (bacteria and fungi), gram-positive organism identification and drug resistance element detection, DNA (20 gram-positive bacterial targets, 4 resistance genes, 1 pan gram-negative bacterial target, 1 pan Candida target), blood culture, amplified probe technique, each target reported as detected or not detected | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/20 | None |
| 0142U | Infectious disease (bacteria and fungi), gram-negative bacterial identification and drug resistance element detection, DNA (21 gram-negative bacterial targets, 6 resistance genes, 1 pan gram-positive bacterial target, 1 pan Candida target), amplified probe technique, each target reported as detected or not detected | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/20 | None |
| 0143U | Drug assay, definitive, 120 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service | NONMOLECULAR | Claim Policies Apply | 01/01/20 | None |
| 0144U | Drug assay, definitive, 160 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service | NONMOLECULAR | Claim Policies Apply | 01/01/20 | None |
| 0145U | Drug assay, definitive, 65 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service | NONMOLECULAR | Claim Policies Apply | 01/01/20 | None |
| 0146U | Drug assay, definitive, 80 or more drugs or metabolites, urine, by quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service | NONMOLECULAR | Claim Policies Apply | 01/01/20 | None |
| 0147U | Drug assay, definitive, 85 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service | NONMOLECULAR | Claim Policies Apply | 01/01/20 | None |
| 0148U | Drug assay, definitive, 100 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service | NONMOLECULAR | Claim Policies Apply | 01/01/20 | None |
| 0149U | Drug assay, definitive, 60 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service | NONMOLECULAR | Claim Policies Apply | 01/01/20 | None |
| 0150U | Drug assay, definitive, 120 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service | NONMOLECULAR | Claim Policies Apply | 01/01/20 | None |
| 0152U | Infectious disease (bacteria, fungi, parasites, and DNA viruses), microbial cell-free DNA, plasma untargeted next-generation sequencing, report for significant positive pathogens | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/20 | None |

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| 0153U | Oncology (breast), mRNA, gene expression profiling by next-generation sequencing of 101 genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a triple negative breast cancer clinical subtype(s) with information on immune cell involvement | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/20 | None |
| 0154U | Oncology (urothelial cancer), RNA, analysis by real-time RT-PCR of the FGFR3 (fibroblast growth factor receptor 3) gene analysis (ie, p.R248C [c.742C>T], p.S249C [c.746C>G], p.G370C [c.1108G>T], p.Y373C [c.1118A>G], FGFR3-TACC3v1, and FGFR3-TACC3v3), utilizing formalin-fixed paraffin-embedded urothelial cancer tumor tissue, reported as FGFR gene alteration status | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/20 | None |
| 0155U | Oncology (breast cancer), DNA, PIK3CA (phosphatidylinositol-4,5-bisphosphate 3-kinase, catalytic subunit alpha) (eg, breast cancer) gene analysis (ie, p.C420R, p.E542K, p.E545A, p.E545D [g.1635G>T only], p.E545G, p.E545K, p.Q546E, p.Q546R, p.H1047L, p.H1047R, p.H1047Y), utilizing formalin-fixed paraffinembedded breast tumor tissue, reported as PIK3CA gene mutation status | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/20 | None |
| 0156U | Copy number (eg, intellectual disability, dysmorphology), sequence analysis | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/20 | None |
| 0157U | APC (APC regulator of WNT signaling pathway) (eg, familial adenomatous polyposis [FAP]) mRNA sequence analysis (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/20 | None |
| 0158U | MLH1 (mutL homolog 1) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) mRNA sequence analysis (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/20 | None |
| 0159U | MSH2 (mutS homolog 2) (eg, hereditary colon cancer, Lynch syndrome) mRNA sequence analysis (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/20 | None |
| 0160U | MSH6 (mutS homolog 6) (eg, hereditary colon cancer, Lynch syndrome) mRNA sequence analysis (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/20 | None |
| 0161U | PMS2 (PMS1 homolog 2, mismatch repair system component) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) mRNA sequence analysis (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/20 | None |
| 0162U | Hereditary colon cancer (Lynch syndrome), targeted mRNA sequence analysis panel (MLH1, MSH2, MSH6, PMS2) (List separately in addition to code for primary procedure) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/20 | None |
| 0163U | Oncology (colorectal) screening, biochemical enzyme-linked immunosorbent assay (ELISA) of 3 plasma or serum proteins (teratocarcinoma derived growth factor-1 [TDGF-1, Cripto1], carcinoembryonic antigen [CEA], extracellular matrix protein [ECM]), with demographic data (age, gender, CRCscreening compliance) using a proprietary algorithm and reported as likelihood of CRC or advanced adenomas | NONMOLECULAR | Claim Policies Apply | 04/01/20 | None |
| 0164U | Gastroenterology (irritable bowel syndrome [IBS]), immunoassay for antiCdtB and anti-vinculin antibodies, utilizing plasma, algorithm for elevated or not elevated qualitative results | NONMOLECULAR | Claim Policies Apply | 04/01/20 | None |
| 0165U | Peanut allergen-specific quantitative assessment of multiple epitopes using enzyme-linked immunosorbent assay (ELISA), blood, individual epitope results and probability of peanut allergy | NONMOLECULAR | Claim Policies Apply | 04/01/20 | None |
| 0166U | Liver disease, 10 biochemical assays (α2- macroglobulin, haptoglobin, apolipoprotein A1, bilirubin, GGT, ALT, AST, triglycerides, cholesterol, fasting glucose) and biometric and demographic data, utilizing serum, algorithm reported as scores for fibrosis, necroinflammatory activity, and steatosis with a summary interpretation | NONMOLECULAR | Claim Policies Apply | 04/01/20 | None |
| 0167U | Gonadotropin, chorionic (hCG), immunoassay with direct optical observation, blood | NONMOLECULAR | Claim Policies Apply | 04/01/20 | None |
| 0168U | Fetal aneuploidy (trisomy 21, 18, and 13) DNA sequence analysis of selected regions using maternal plasma without fetal fraction cutoff, algorithm reported as a risk score for each trisomy | MOLECULAR GENOMIC | Claim Policies Apply | 04/01/20 | 10/01/21 |
| 0169U | NUDT15 (nudix hydrolase 15) and TPMT (thiopurine S-methyltransferase) (eg, drug metabolism) gene analysis, common variants | MOLECULAR GENOMIC | Requires Prior Authorization | 04/01/20 | None |
| 0170U | Neurology (autism spectrum disorder [ASD]), RNA, next-generation sequencing, saliva, algorithmic analysis, and results reported as predictive probability of ASD diagnosis | MOLECULAR GENOMIC | Requires Prior Authorization | 04/01/20 | None |
| 0171U | Targeted genomic sequence analysis panel, acute myeloid leukemia, myelodysplastic syndrome, and myeloproliferative neoplasms, DNA analysis, 23 genes, interrogation for sequence variants, rearrangements and minimal residual disease, reported as presence/absence | MOLECULAR GENOMIC | Requires Prior Authorization | 04/01/20 | None |
| 0172U | Oncology (solid tumor as indicated by the label), somatic mutation analysis of BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) and analysis of homologous recombination deficiency pathways, DNA, formalin-fixed paraffin-embedded tissue, algorithm quantifying tumor genomic instability score | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/20 | None |
| 0173U | Psychiatry (ie, depression, anxiety), genomic analysis panel, includes variant analysis of 14 genes | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/20 | None |
| 0174U | Oncology (solid tumor), mass spectrometric 30 protein targets, formalin fixed paraffin-embedded tissue, prognostic and predictive algorithm reported as likely, unlikely, or uncertain benefit of 39 chemotherapy and targeted therapeutic oncology agents | NONMOLECULAR | Claim Policies Apply | 07/01/20 | None |
| 0175U | Psychiatry (eg, depression, anxiety), genomic analysis panel, variant analysis of 15 genes | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/20 | None |

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| 0176U | Cytolethal distending toxin B (CdtB) and vinculin IgG antibodies by immunoassay (ie, ELISA) | NONMOLECULAR | Claim Policies Apply | 07/01/20 | None |
| 0177U | Oncology (breast cancer), DNA, PIK3CA (phosphatidylinositol-4,5-bisphosphate 3- kinase catalytic subunit alpha) gene analysis of 11 gene variants utilizing plasma, reported as PIK3CA gene mutation status | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/20 | None |
| 0178U | Peanut allergen-specific quantitative assessment of multiple epitopes using enzyme-linked immunosorbent assay (ELISA), blood, report of minimum eliciting exposure for a clinical reaction | NONMOLECULAR | Claim Policies Apply | 07/01/20 | None |
| 0179U | Oncology (non-small cell lung cancer), cell-free DNA, targeted sequence analysis of 23 genes (single nucleotide variations, insertions and deletions, fusions without prior knowledge of partner/breakpoint, copy number variations), with report of significant mutation(s) | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/20 | None |
| 0180U | Red cell antigen (ABO blood group) genotyping (ABO), gene analysis Sanger/chain termination/conventional sequencing, ABO (ABO, alpha 1-3 Nacetylgalactosaminyltransferase and alpha 1-3-galactosyltransferase) gene, including subtyping, 7 exons | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/20 | None |
| 0181U | Red cell antigen (Colton blood group) genotyping (CO), gene analysis, AQP1 (aquaporin 1 [Colton blood group]) exon 1 | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/20 | None |
| 0182U | Red cell antigen (Cromer blood group) genotyping (CROM), gene analysis, CD55 (CD55 molecule [Cromer blood group]) exons 1-10 | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/20 | None |
| 0183U | Red cell antigen (Diego blood group) genotyping (DI), gene analysis, SLC4A1 (solute carrier family 4 member 1 [Diego blood group]) exon 19 | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/20 | None |
| 0184U | Red cell antigen (Dombrock blood group) genotyping (DO), gene analysis, ART4 (ADP-ribosyltransferase 4 [Dombrock blood group]) exon 2 | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/20 | None |
| 0185U | Red cell antigen (H blood group) genotyping (FUT1), gene analysis, FUT1 (fucosyltransferase 1 [H blood group]) exon 4 | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/20 | None |
| 0186U | Red cell antigen (H blood group) genotyping (FUT2), gene analysis, FUT2 (fucosyltransferase 2) exon 2 | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/20 | None |
| 0187U | Red cell antigen (Duffy blood group) genotyping (FY), gene analysis, ACKR1 (atypical chemokine receptor 1 [Duffy blood group]) exons 1-2 | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/20 | None |
| 0188U | Red cell antigen (Gerbich blood group) genotyping (GE), gene analysis, GYPC (glycophorin C [Gerbich blood group]) exons 1-4 | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/20 | None |
| 0189U | Red cell antigen (MNS blood group) genotyping (GYPA), gene analysis, GYPA (glycophorin A [MNS blood group]) introns 1, 5, exon 2 | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/20 | None |
| 0190U | Red cell antigen (MNS blood group) genotyping (GYPB), gene analysis, GYPB (glycophorin B [MNS blood group]) introns 1, 5, pseudoexon 3 | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/20 | None |
| 0191U | Red cell antigen (Indian blood group) genotyping (IN), gene analysis, CD44 (CD44 molecule [Indian blood group]) exons 2, 3, 6 | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/20 | None |
| 0192U | Red cell antigen (Kidd blood group) genotyping (JK), gene analysis, SLC14A1 (solute carrier family 14 member 1 [Kidd blood group]) gene promoter, exon 9 | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/20 | None |
| 0193U | Red cell antigen (JR blood group) genotyping (JR), gene analysis, ABCG2 (ATP binding cassette subfamily G member 2 [Junior blood group]) exons 2- 26 | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/20 | None |
| 0194U | Red cell antigen (Kell blood group) genotyping (KEL), gene analysis, KEL (Kell metallo-endopeptidase [Kell blood group]) exon 8 | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/20 | None |
| 0195U | KLF1 (Kruppel-like factor 1), targeted sequencing (ie, exon 13) | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/20 | None |
| 0196U | Red cell antigen (Lutheran blood group) genotyping (LU), gene analysis, BCAM (basal cell adhesion molecule [Lutheran blood group]) exon 3 | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/20 | None |
| 0197U | Red cell antigen (Landsteiner-Wiener blood group) genotyping (LW), gene analysis, ICAM4 (intercellular adhesion molecule 4 [Landsteiner-Wiener blood group]) exon 1 | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/20 | None |
| 0198U | Red cell antigen (RH blood group) genotyping (RHD and RHCE), gene analysis Sanger/chain termination/conventional sequencing, RHD (Rh blood group D antigen) exons 1-10 and RHCE (Rh blood group CcEe antigens) exon 5 | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/20 | None |
| 0199U | Red cell antigen (Scianna blood group) genotyping (SC), gene analysis, ERMAP (erythroblast membrane associated protein [Scianna blood group]) exons 4, 12 | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/20 | None |
| 0200U | Red cell antigen (Kx blood group) genotyping (XK), gene analysis, XK (Xlinked Kx blood group) exons 1-3 | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/20 | None |
| 0201U | Red cell antigen (Yt blood group) genotyping (YT), gene analysis, ACHE (acetylcholinesterase [Cartwright blood group]) exon 2 | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/20 | None |
| 0202U | Infectious disease (bacterial or viral respiratory tract infection), pathogen specific nucleic acid (DNA or RNA), 22 targets including severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), qualitative RT-PCR, nasopharyngeal swab, each pathogen reported as detected or not detected | MOLECULAR GENOMIC | Claim Policies Apply | 05/20/20 | None |
| 0203U | Autoimmune (inflammatory bowel disease), mRNA, gene expression profiling by quantitative RT-PCR, 17 genes (15 target and 2 reference genes), whole blood, reported as a continuous risk score and classification of inflammatory bowel disease aggressiveness | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/20 | None |

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| 0204U | Oncology (thyroid), mRNA, gene expression analysis of 593 genes (including BRAF, RAS, RET, PAX8, and NTRK) for sequence variants and rearrangements, utilizing fine needle aspirate, reported as detected or not detected | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/20 | None |
| 0205U | Ophthalmology (age-related macular degeneration), analysis of 3 gene variants (2 CFH gene, 1 ARMS2 gene), using PCR and MALDI-TOF, buccal swab, reported as positive or negative for neovascular age-related macular-degeneration risk associated with zinc supplements | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/20 | None |
| 0206U | Neurology (Alzheimer disease); cell aggregation using morphometric imaging and protein kinase C-epsilon (PKCe) concentration in response to amylopheroïd treatment by ELISA, cultured skin fibroblasts, each reported as positive or negative for Alzheimer disease | NONMOLECULAR | Claim Policies Apply | 10/01/20 | None |
| 0207U | Neurology (Alzheimer disease); quantitative imaging of phosphorylated ERK1 and ERK2 in response to bradykinin treatment by in situ immunofluorescence, using cultured skin fibroblasts, reported as a probability index for Alzheimer disease (List separately in addition to code for primary procedure) | NONMOLECULAR | Claim Policies Apply | 10/01/20 | None |
| 0208U | Oncology (medullary thyroid carcinoma), mRNA, gene expression analysis of 108 genes, utilizing fine needle aspirate, algorithm reported as positive or negative for medullary thyroid carcinoma | MOLECULAR GENOMIC | Retired | 10/01/20 | 12/31/21 |
| 0209U | Cytogenomic constitutional (genome-wide) analysis, interrogation of genomic regions for copy number, structural changes and areas of homozygosity for chromosomal abnormalities | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/20 | None |
| 0210U | Syphilis test, non-treponemal antibody, immunoassay, quantitative (RPR) | NONMOLECULAR | Claim Policies Apply | 10/01/20 | None |
| 0211U | Oncology (pan-tumor), DNA and RNA by next-generation sequencing, utilizing formalin-fixed paraffin-embedded tissue, interpretative report for single nucleotide variants, copy number alterations, tumor mutational burden, and microsatellite instability, with therapy association | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/20 | None |
| 0212U | Rare diseases (constitutional/heritable disorders), whole genome and mitochondrial DNA sequence analysis, including small sequence changes, deletions, duplications, short tandem repeat gene expansions, and variants in non-uniquely mappable regions, blood or saliva, identification and categorization of genetic variants, proband | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/20 | None |
| 0213U | Rare diseases (constitutional/heritable disorders), whole genome and mitochondrial DNA sequence analysis, including small sequence changes, deletions, duplications, short tandem repeat gene expansions, and variants in non-uniquely mappable regions, blood or saliva, identification and categorization of genetic variants, each comparator genome (eg, parent, sibling) | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/20 | None |
| 0214U | Rare diseases (constitutional/heritable disorders), whole exome and mitochondrial DNA sequence analysis, including small sequence changes, deletions, duplications, short tandem repeat gene expansions, and variants in non-uniquely mappable regions, blood or saliva, identification and categorization of genetic variants, proband | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/20 | None |
| 0215U | Rare diseases (constitutional/heritable disorders), whole exome and mitochondrial DNA sequence analysis, including small sequence changes, deletions, duplications, short tandem repeat gene expansions, and variants in non-uniquely mappable regions, blood or saliva, identification and categorization of genetic variants, each comparator exome (eg, parent, sibling) | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/20 | None |
| 0216U | Neurology (inherited ataxias), genomic DNA sequence analysis of 12 common genes including small sequence changes, deletions, duplications, short tandem repeat gene expansions, and variants in non-uniquely mappable regions, blood or saliva, identification and categorization of genetic variants | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/20 | None |
| 0217U | Neurology (inherited ataxias), genomic DNA sequence analysis of 51 genes including small sequence changes, deletions, duplications, short tandem repeat gene expansions, and variants in non-uniquely mappable regions, blood or saliva, identification and categorization of genetic variants | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/20 | None |
| 0218U | Neurology (muscular dystrophy), DMD gene sequence analysis, including small sequence changes, deletions, duplications, and variants in non-uniquely mappable regions, blood or saliva, identification and characterization of genetic variants | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/20 | None |
| 0219U | Infectious agent (human immunodeficiency virus), targeted viral next-generation sequence analysis (ie, protease [PR], reverse transcriptase [RT], integrase [INT]), algorithm reported as prediction of antiviral drug susceptibility | MOLECULAR GENOMIC | Claim Policies Apply | 10/01/20 | None |
| 0220U | Oncology (breast cancer), image analysis with artificial intelligence assessment of 12 histologic and immunohistochemical features, reported as a recurrence score | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/20 | None |
| 0221U | Red cell antigen (ABO blood group) genotyping (ABO), gene analysis, next-generation sequencing, ABO (ABO, alpha 1-3-N-acetylgalactosaminyltransferase and alpha 1-3-galactosyltransferase) gene | MOLECULAR GENOMIC | Claim Policies Apply | 10/01/20 | None |
| 0222U | Red cell antigen (RH blood group) genotyping (RHD and RHCE), gene analysis, next-generation sequencing, RH proximal promoter, exons 1-10, portions of introns 2-3 | MOLECULAR GENOMIC | Claim Policies Apply | 10/01/20 | None |

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| 0223U | Infectious disease (bacterial or viral respiratory tract infection), pathogen-specific nucleic acid (DNA or RNA), 22 targets including severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), qualitative RT-PCR, nasopharyngeal swab, each pathogen reported as detected or not detected | MOLECULAR GENOMIC | Claim Policies Apply | 06/25/20 | None |
| 0224U | Antibody, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), includes titer(s), when performed | NONMOLECULAR | Claim Policies Apply | 06/25/20 | None |
| 0225U | Infectious disease (bacterial or viral respiratory tract infection) pathogen-specific DNA and RNA, 21 targets, including severe acute respiratory syndrome coronavirus 2 (SARSCoV-2), amplified probe technique, including multiplex reverse transcription for RNA targets, each analyte reported as detected or not detected | MOLECULAR GENOMIC | Claim Policies Apply | 08/10/20 | None |
| 0226U | Surrogate viral neutralization test (sVNT), severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), ELISA, plasma, serum | NONMOLECULAR | Claim Policies Apply | 08/10/20 | None |
| 0227U | Drug assay, presumptive, 30 or more drugs or metabolites, urine, liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, includes sample validation | NONMOLECULAR | Claim Policies Apply | 01/01/21 | None |
| 0228U | Oncology (prostate), multianalyte molecular profile by photometric detection of macromolecules adsorbed on nanosponge array slides with machine learning, utilizing first morning voided urine, algorithm reported as likelihood of prostate cancer | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/21 | None |
| 0229U | BCAT1 (Branched chain amino acid transaminase 1) and IKZF1 (IKAROS family zinc finger 1) (eg, colorectal cancer) promoter methylation analysis | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/21 | None |
| 0230U | AR (androgen receptor) (eg, spinal and bulbar muscular atrophy, Kennedy disease, X chromosome inactivation), full sequence analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, short tandem repeat (STR) expansions, mobile element insertions, and variants in non-uniquely mappable regions | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/21 | None |
| 0231U | CACNA1A (calcium voltage-gated channel subunit alpha 1A) (eg, spinocerebellar ataxia), full gene analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, short tandem repeat (STR) gene expansions, mobile element insertions, and variants in non-uniquely mappable regions | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/21 | None |
| 0232U | CSTB (cystatin B) (eg, progressive myoclonic epilepsy type 1A, Unverricht-Lundborg disease), full gene analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, short tandem repeat (STR) expansions, mobile element insertions, and variants in non-uniquely mappable regions | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/21 | None |
| 0233U | FXN (frataxin) (eg, Friedreich ataxia), gene analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, short tandem repeat (STR) expansions, mobile element insertions, and variants in non-uniquely mappable regions | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/21 | None |
| 0234U | MECP2 (methyl CpG binding protein 2) (eg, Rett syndrome), full gene analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, mobile element insertions, and variants in non-uniquely mappable regions | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/21 | None |
| 0235U | PTEN (phosphatase and tensin homolog) (eg, Cowden syndrome, PTEN hamartoma tumor syndrome), full gene analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, mobile element insertions, and variants in non-uniquely mappable regions | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/21 | None |
| 0236U | SMN1 (survival of motor neuron 1, telomeric) and SMN2 (survival of motor neuron 2, centromeric) (eg, spinal muscular atrophy) full gene analysis, including small sequence changes in exonic and intronic regions, duplications, deletions, and mobile element insertions | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/21 | None |
| 0237U | Cardiac ion channelopathies (eg, Brugada syndrome, long QT syndrome, short QT syndrome, catecholaminergic polymorphic ventricular tachycardia), genomic sequence analysis panel including ANK2, CASQ2, CAV3, KCNE1, KCNE2, KCNH2, KCNJ2, KCNQ1, RYR2, and SCN5A, including small sequence changes in exonic and intronic regions, deletions, duplications, mobile element insertions, and variants in non-uniquely mappable regions | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/21 | None |
| 0238U | Oncology (Lynch syndrome), genomic DNA sequence analysis of MLH1, MSH2, MSH6, PMS2, and EPCAM, including small sequence changes in exonic and intronic regions, deletions, duplications, mobile element insertions, and variants in non-uniquely mappable regions | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/21 | None |
| 0239U | Targeted genomic sequence analysis panel, solid organ neoplasm, cell-free DNA, analysis of 311 or more genes, interrogation for sequence variants, including substitutions, insertions, deletions, select rearrangements, and copy number variations | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/21 | None |
| 0240U | Infectious disease (viral respiratory tract infection), pathogen-specific RNA, 3 targets (severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2], influenza A, influenza B), upper respiratory specimen, each pathogen reported as detected or not detected | MOLECULAR GENOMIC | Claim Policies Apply | 10/06/20 | None |

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| 0241U | Infectious disease (viral respiratory tract infection), pathogen-specific RNA, 4 targets (severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2], influenza A, influenza B, respiratory syncytial virus [RSV]), upper respiratory specimen, each pathogen reported as detected or not detected | MOLECULAR GENOMIC | Claim Policies Apply | 10/06/20 | None |
| 0242U | Targeted genomic sequence analysis panel, solid organ neoplasm, cell-free circulating DNA analysis of 55-74 genes, interrogation for sequence variants, gene copy number amplifications, and gene rearrangements | MOLECULAR GENOMIC | Requires Prior Authorization | 04/01/21 | None |
| 0243U | Obstetrics (preeclampsia), biochemical assay of placental-growth factor, time-resolved fluorescence immunoassay, maternal serum, predictive algorithm reported as a risk score for preeclampsia | NONMOLECULAR | Claim Policies Apply | 04/01/21 | None |
| 0244U | Oncology (solid organ), DNA, comprehensive genomic profiling, 257 genes, interrogation for single-nucleotide variants, insertions/deletions, copy number alterations, gene rearrangements, tumor-mutational burden and microsatellite instability, utilizing formalin-fixed paraffin-embedded tumor tissue | MOLECULAR GENOMIC | Requires Prior Authorization | 04/01/21 | None |
| 0245U | Oncology (thyroid), mutation analysis of 10 genes and 37 RNA fusions and expression of 4 mRNA markers using next-generation sequencing, fine needle aspirate, report includes associated risk of malignancy expressed as a percentage | MOLECULAR GENOMIC | Requires Prior Authorization | 04/01/21 | None |
| 0246U | Red blood cell antigen typing, DNA, genotyping of at least 16 blood groups with phenotype prediction of at least 51 red blood cell antigens | MOLECULAR GENOMIC | Requires Prior Authorization | 04/01/21 | None |
| 0247U | Obstetrics (preterm birth), insulin-like growth factor-binding protein 4 (IBP4), sex hormone-binding globulin (SHBG), quantitative measurement by LC-MS/MS, utilizing maternal serum, combined with clinical data, reported as predictive-risk stratification for spontaneous preterm birth | NONMOLECULAR | Claim Policies Apply | 04/01/21 | None |
| 0248U | Oncology (brain), spheroid cell culture in a 3D microenvironment, 12 drug panel, tumor-response prediction for each drug | NONMOLECULAR | Claim Policies Apply | 07/01/21 | None |
| 0249U | Oncology (breast), semiquantitative analysis of 32 phosphoproteins and protein analytes, includes laser capture microdissection, with algorithmic analysis and interpretative report | NONMOLECULAR | Claim Policies Apply | 07/01/21 | None |
| 0250U | Oncology (solid organ neoplasm), targeted genomic sequence DNA analysis of 505 genes, interrogation for somatic alterations (SNVs [single nucleotide variant], small insertions and deletions, one amplification, and four translocations), microsatellite instability and tumor-mutation burden | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/21 | None |
| 0251U | Hepcidin-25, enzyme-linked immunosorbent assay (ELISA), serum or plasma | NONMOLECULAR | Claim Policies Apply | 07/01/21 | None |
| 0252U | Fetal aneuploidy short tandem-repeat comparative analysis, fetal DNA from products of conception, reported as normal (euploidy), monosomy, trisomy, or partial deletion/duplication, mosaicism, and segmental aneuploidy | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/21 | None |
| 0253U | Reproductive medicine (endometrial receptivity analysis), RNA gene expression profile, 238 genes by next-generation sequencing, endometrial tissue, predictive algorithm reported as endometrial window of implantation (eg, pre-receptive, receptive, post-receptive) | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/21 | None |
| 0254U | Reproductive medicine (preimplantation genetic assessment), analysis of 24 chromosomes using embryonic DNA genomic sequence analysis for aneuploidy, and a mitochondrial DNA score in euploid embryos, results reported as normal (euploidy), monosomy, trisomy, or partial deletion/duplication, mosaicism, and segmental aneuploidy, per embryo tested | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/21 | None |
| 0255U | Andrology (infertility), sperm-capacitation assessment of ganglioside GM1 distribution patterns, fluorescence microscopy, fresh or frozen specimen, reported as percentage of capacitated sperm and probability of generating a pregnancy score | NONMOLECULAR | Claim Policies Apply | 10/01/21 | None |
| 0256U | Trimethylamine/trimethylamine N-oxide (TMA/TMAO) profile, tandem mass spectrometry (MS/MS), urine, with algorithmic analysis and interpretive report | NONMOLECULAR | Claim Policies Apply | 10/01/21 | None |
| 0257U | Very long chain acyl-coenzyme A (CoA) dehydrogenase (VLCAD), leukocyte enzyme activity, whole blood | NONMOLECULAR | Claim Policies Apply | 10/01/21 | None |
| 0258U | Autoimmune (psoriasis), mRNA, next-generation sequencing, gene expression profiling of 50-100 genes, skin-surface collection using adhesive patch, algorithm reported as likelihood of response to psoriasis biologics | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/21 | None |
| 0259U | Nephrology (chronic kidney disease), nuclear magnetic resonance spectroscopy measurement of myo-inositol, valine, and creatinine, algorithmically combined with cystatin C (by immunoassay) and demographic data to determine estimated glomerular filtration rate (GFR), serum, quantitative | NONMOLECULAR | Claim Policies Apply | 10/01/21 | None |
| 0260U | Rare diseases (constitutional/heritable disorders), identification of copy number variations, inversions, insertions, translocations, and other structural variants by optical genome mapping | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/21 | None |
| 0261U | Oncology (colorectal cancer), image analysis with artificial intelligence assessment of 4 histologic and immunohistochemical features (CD3 and CD8 within tumor-stroma border and tumor core), tissue, reported as immune response and recurrence-risk score | NONMOLECULAR | Claim Policies Apply | 10/01/21 | None |
| 0262U | Oncology (solid tumor), gene expression profiling by real-time RT-PCR of 7 gene pathways (ER, AR, PI3K, MAPK, HH, TGFB, Notch), formalin-fixed paraffin-embedded (FFPE), algorithm reported as gene pathway activity score | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/21 | None |

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| 0263U | Neurology (autism spectrum disorder [ASD]), quantitative measurements of 16 central carbon metabolites (ie, α -ketoglutarate, alanine, lactate, phenylalanine, pyruvate, succinate, carnitine, citrate, fumarate, hypoxanthine, inosine, malate, S-sulfocysteine, taurine, urate, and xanthine), liquid chromatography tandem mass spectrometry (LC-MS/MS), plasma, algorithmic analysis with result reported as negative or positive (with metabolic subtypes of ASD) | NONMOLECULAR | Claim Policies Apply | 10/01/21 | None |
| 0264U | Rare diseases (constitutional/heritable disorders), identification of copy number variations, inversions, insertions, translocations, and other structural variants by optical genome mapping | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/21 | None |
| 0265U | Rare constitutional and other heritable disorders, whole genome and mitochondrial DNA sequence analysis, blood, frozen and formalin-fixed paraffin-embedded (FFPE) tissue, saliva, buccal swabs or cell lines, identification of single nucleotide and copy number variants | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/21 | None |
| 0266U | Unexplained constitutional or other heritable disorders or syndromes, tissue-specific gene expression by whole-transcriptome and next-generation sequencing, blood, formalin-fixed paraffin-embedded (FFPE) tissue or fresh frozen tissue, reported as presence or absence of splicing or expression changes | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/21 | None |
| 0267U | Rare constitutional and other heritable disorders, identification of copy number variations, inversions, insertions, translocations, and other structural variants by optical genome mapping and whole genome sequencing | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/21 | None |
| 0268U | Hematology (atypical hemolytic uremic syndrome [aHUS]), genomic sequence analysis of 15 genes, blood, buccal swab, or amniotic fluid | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/21 | None |
| 0269U | Hematology (autosomal dominant congenital thrombocytopenia), genomic sequence analysis of 14 genes, blood, buccal swab, or amniotic fluid | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/21 | None |
| 0270U | Hematology (congenital coagulation disorders), genomic sequence analysis of 20 genes, blood, buccal swab, or amniotic fluid | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/21 | None |
| 0271U | Hematology (congenital neutropenia), genomic sequence analysis of 23 genes, blood, buccal swab, or amniotic fluid | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/21 | None |
| 0272U | Hematology (genetic bleeding disorders), genomic sequence analysis of 51 genes, blood, buccal swab, or amniotic fluid, comprehensive | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/21 | None |
| 0273U | Hematology (genetic hyperfibrinolysis, delayed bleeding), genomic sequence analysis of 8 genes (F13A1, F13B, FGA, FGB, FGG, SERPINA1, SERPINE1, SERPINF2, PLAU), blood, buccal swab, or amniotic fluid | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/21 | None |
| 0274U | Hematology (genetic platelet disorders), genomic sequence analysis of 43 genes, blood, buccal swab, or amniotic fluid | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/21 | None |
| 0275U | Hematology (heparin-induced thrombocytopenia), platelet antibody reactivity by flow cytometry, serum | NONMOLECULAR | Claim Policies Apply | 10/01/21 | None |
| 0276U | Hematology (inherited thrombocytopenia), genomic sequence analysis of 23 genes, blood, buccal swab, or amniotic fluid | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/21 | None |
| 0277U | Hematology (genetic platelet function disorder), genomic sequence analysis of 31 genes, blood, buccal swab, or amniotic fluid | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/21 | None |
| 0278U | Hematology (genetic thrombosis), genomic sequence analysis of 12 genes, blood, buccal swab, or amniotic fluid | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/21 | None |
| 0279U | Hematology (von Willebrand disease [VWD]), von Willebrand factor (VWF) and collagen III binding by enzyme-linked immunosorbent assays (ELISA), plasma, report of collagen III binding | NONMOLECULAR | Claim Policies Apply | 10/01/21 | None |
| 0280U | Hematology (von Willebrand disease [VWD]), von Willebrand factor (VWF) and collagen IV binding by enzyme-linked immunosorbent assays (ELISA), plasma, report of collagen IV binding | NONMOLECULAR | Claim Policies Apply | 10/01/21 | None |
| 0281U | Hematology (von Willebrand disease [VWD]), von Willebrand propeptide, enzyme-linked immunosorbent assays (ELISA), plasma, diagnostic report of von Willebrand factor (VWF) propeptide antigen level | NONMOLECULAR | Claim Policies Apply | 10/01/21 | None |
| 0282U | Red blood cell antigen typing, DNA, genotyping of 12 blood group system genes to predict 44 red blood cell antigen phenotypes | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/21 | None |
| 0283U | von Willebrand factor (VWF), type 2B, platelet-binding evaluation, radioimmunoassay, plasma | NONMOLECULAR | Claim Policies Apply | 10/01/21 | None |
| 0284U | von Willebrand factor (VWF), type 2N, factor VIII and VWF binding evaluation, enzyme-linked immunosorbent assays (ELISA), plasma | NONMOLECULAR | Claim Policies Apply | 10/01/21 | None |
| 0285U | Oncology, response to radiation, cell-free DNA, quantitative branched chain DNA amplification, plasma, reported as a radiation toxicity score | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/22 | None |
| 0286U | CEP72 (centrosomal protein, 72-KDa), NUDT15 (nudix hydrolase 15) and TPMT (thiopurine S-methyltransferase) (eg, drug metabolism) gene analysis, common variants | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/22 | None |

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| 0287U | Oncology (thyroid), DNA and mRNA, next-generation sequencing analysis of 112 genes, fine needle aspirate or formalin-fixed paraffin-embedded (FFPE) tissue, algorithmic prediction of cancer recurrence, reported as a categorical risk result (low, intermediate, high) | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/22 | None |
| 0288U | Oncology (lung), mRNA, quantitative PCR analysis of 11 genes (BAG1, BRCA1, CDC6, CDK2AP1, ERBB3, FUT3, IL11, LCK, RND3, SH3BGR, WNT3A) and 3 reference genes (ESD, TBP, YAP1), formalin-fixed paraffin-embedded (FFPE) tumor tissue, algorithmic interpretation reported as a recurrence risk score | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/22 | None |
| 0289U | Neurology (Alzheimer disease), mRNA, gene expression profiling by RNA sequencing of 24 genes, whole blood, algorithm reported as predictive risk score | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/22 | None |
| 0290U | Pain management, mRNA, gene expression profiling by RNA sequencing of 36 genes, whole blood, algorithm reported as predictive risk score | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/22 | None |
| 0291U | Psychiatry (mood disorders), mRNA, gene expression profiling by RNA sequencing of 144 genes, whole blood, algorithm reported as predictive risk score | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/22 | None |
| 0292U | Psychiatry (stress disorders), mRNA, gene expression profiling by RNA sequencing of 72 genes, whole blood, algorithm reported as predictive risk score | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/22 | None |
| 0293U | Psychiatry (suicidal ideation), mRNA, gene expression profiling by RNA sequencing of 54 genes, whole blood, algorithm reported as predictive risk score | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/22 | None |
| 0294U | Longevity and mortality risk, mRNA, gene expression profiling by RNA sequencing of 18 genes, whole blood, algorithm reported as predictive risk score | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/22 | None |
| 0295U | Oncology (breast ductal carcinoma in situ), protein expression profiling by immunohistochemistry of 7 proteins (COX2, FOXA1, HER2, Ki-67, p16, PR, SIAH2), with 4 clinicopathologic factors (size, age, margin status, palpability), utilizing formalin-fixed paraffin-embedded (FFPE) tissue, algorithm reported as a recurrence risk score | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 0296U | Oncology (oral and/or oropharyngeal cancer), gene expression profiling by RNA sequencing at least 20 molecular features (eg, human and/or microbial mRNA), saliva, algorithm reported as positive or negative for signature associated with malignancy | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/22 | None |
| 0297U | Oncology (pan tumor), whole genome sequencing of paired malignant and normal DNA specimens, fresh or formalin-fixed paraffin-embedded (FFPE) tissue, blood or bone marrow, comparative sequence analyses and variant identification | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/22 | None |
| 0298U | Oncology (pan tumor), whole transcriptome sequencing of paired malignant and normal RNA specimens, fresh or formalin-fixed paraffin-embedded (FFPE) tissue, blood or bone marrow, comparative sequence analyses and expression level and chimeric transcript identification | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/22 | None |
| 0299U | Oncology (pan tumor), whole genome optical genome mapping of paired malignant and normal DNA specimens, fresh frozen tissue, blood, or bone marrow, comparative structural variant identification | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/22 | None |
| 0300U | Oncology (pan tumor), whole genome sequencing and optical genome mapping of paired malignant and normal DNA specimens, fresh tissue, blood, or bone marrow, comparative sequence analyses and variant identification | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/22 | None |
| 0301U | Infectious agent detection by nucleic acid (DNA or RNA), Bartonella henselae and Bartonella quintana, droplet digital PCR (ddPCR); | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/22 | None |
| 0302U | Infectious agent detection by nucleic acid (DNA or RNA), Bartonella henselae and Bartonella quintana, droplet digital PCR (ddPCR); following liquid enrichment | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/22 | None |
| 0303U | Hematology, red blood cell (RBC) adhesion to endothelial/subendothelial adhesion molecules, functional assessment, whole blood, with algorithmic analysis and result reported as an RBC adhesion index; hypoxic | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 0304U | Hematology, red blood cell (RBC) adhesion to endothelial/subendothelial adhesion molecules, functional assessment, whole blood, with algorithmic analysis and result reported as an RBC adhesion index; hypoxic normoxic | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 0305U | Hematology, red blood cell (RBC) functionality and deformity as a function of shear stress, whole blood, reported as a maximum elongation index | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| 0306U | Oncology (minimal residual disease [MRD]), next-generation targeted sequencing analysis, cell-free DNA, initial (baseline) assessment to determine a patient-specific panel for future comparisons to evaluate for MRD | MOLECULAR GENOMIC | Requires Prior Authorization | 04/01/22 | None |
| 0307U | Oncology (minimal residual disease [MRD]), next-generation targeted sequencing analysis of a patient-specific panel, cell-free DNA, subsequent assessment with comparison to previously analyzed patient specimens to evaluate for MRD | MOLECULAR GENOMIC | Requires Prior Authorization | 04/01/22 | None |
| 0308U | Cardiology (coronary artery disease [CAD]), analysis of 3 proteins (high sensitivity [hs] troponin, adiponectin, and kidney injury molecule-1 [KIM-1]), plasma, algorithm reported as a risk score for obstructive CAD | NONMOLECULAR | Claim Policies Apply | 04/01/22 | None |
| 0309U | Cardiology (cardiovascular disease), analysis of 4 proteins (NT-proBNP, osteopontin, tissue inhibitor of metalloproteinase-1 [TIMP-1], and kidney injury molecule-1 [KIM-1]), plasma, algorithm reported as a risk score for major adverse cardiac event | NONMOLECULAR | Claim Policies Apply | 04/01/22 | None |

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| 0310U | Pediatrics (vasculitis, Kawasaki disease [KD]), analysis of 3 biomarkers (NTproBNP, C-reactive protein, and T-uptake), plasma, algorithm reported as a risk score for KD | NONMOLECULAR | Claim Policies Apply | 04/01/22 | None |
| 0311U | Infectious disease (bacterial), quantitative antimicrobial susceptibility reported as phenotypic minimum inhibitory concentration (MIC)-based antimicrobial susceptibility for each organism identified | MOLECULAR GENOMIC | Claim Policies Apply | 04/01/22 | None |
| 0312U | Autoimmune diseases (eg, systemic lupus erythematosus [SLE]), analysis of 8 IgG autoantibodies and 2 cell-bound complement activation products using enzyme-linked immunosorbent immunoassay (ELISA), flow cytometry and indirect immunofluorescence, serum, or plasma and whole blood, individual components reported along with an algorithmic SLE-likelihood assessment | NONMOLECULAR | Claim Policies Apply | 04/01/22 | None |
| 0313U | Oncology (pancreas), DNA and mRNA next-generation sequencing analysis of 74 genes and analysis of CEA (CEACAM5) gene expression, pancreatic cyst fluid, algorithm reported as a categorical result (ie, negative, low probability of neoplasia or positive, high probability of neoplasia) | MOLECULAR GENOMIC | Requires Prior Authorization | 04/01/22 | None |
| 0314U | Oncology (cutaneous melanoma), mRNA gene expression profiling by RT-PCR of 35 genes (32 content and 3 housekeeping), utilizing formalin-fixed paraffin-embedded (FFPE) tissue, algorithm reported as a categorical result (ie, benign, intermediate, malignant) | MOLECULAR GENOMIC | Requires Prior Authorization | 04/01/22 | None |
| 0315U | Oncology (cutaneous squamous cell carcinoma), mRNA gene expression profiling by RT-PCR of 40 genes (34 content and 6 housekeeping), utilizing formalin-fixed paraffin-embedded (FFPE) tissue, algorithm reported as a categorical risk result (ie, Class 1, Class 2A, Class 2B) | MOLECULAR GENOMIC | Requires Prior Authorization | 04/01/22 | None |
| 0316U | Borrelia burgdorferi (Lyme disease), OspA protein evaluation, urine | NONMOLECULAR | Claim Policies Apply | 04/01/22 | None |
| 0317U | Oncology (lung cancer), four-probe FISH (3q29, 3p22.1, 10q22.3, 10cen) assay, whole blood, predictive algorithm generated evaluation reported as decreased or increased risk for lung cancer | MOLECULAR GENOMIC | Requires Prior Authorization | 04/01/22 | None |
| 0318U | Pediatrics (congenital epigenetic disorders), whole genome methylation analysis by microarray for 50 or more genes, blood | MOLECULAR GENOMIC | Requires Prior Authorization | 04/01/22 | None |
| 0319U | Nephrology (renal transplant), RNA expression by select transcriptome sequencing, using pretransplant peripheral | MOLECULAR GENOMIC | Requires Prior Authorization | 04/01/22 | None |
| 0320U | Nephrology (renal transplant), RNA expression by select transcriptome sequencing, using posttransplant peripheral blood, algorithm reported as a risk score for acute cellular rejection | MOLECULAR GENOMIC | Requires Prior Authorization | 04/01/22 | None |
| 0321U | Infectious agent detection by nucleic acid (DNA or RNA), genitourinary pathogens, identification of 20 bacterial and fungal organisms and identification of 16 associated antibiotic-resistance genes, multiplex amplified probe technique | MOLECULAR GENOMIC | Claim Policies Apply | 04/01/22 | None |
| 0322U | Neurology (autism spectrum disorder [ASD]), quantitative measurements of 14 acyl carnitines and microbiome-derived metabolites, liquid chromatography with tandem mass spectrometry (LC-MS/MS), plasma, results reported as negative or positive for risk of metabolic subtypes associated with ASD | NONMOLECULAR | Claim Policies Apply | 04/01/22 | None |
| 0323U | Infectious agent detection by nucleic acid (DNA and RNA), central nervous system pathogen, metagenomic next-generation sequencing, cerebrospinal fluid (CSF), identification of pathogenic bacteria, viruses, parasites, or fungi | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/22 | None |
| 0324U | Oncology (ovarian), spheroid cell culture, 4-drug panel (carboplatin, doxorubicin, gemcitabine, paclitaxel), tumor chemotherapy response prediction for each drug | NONMOLECULAR | Claim Policies Apply | 07/01/22 | None |
| 0325U | Oncology (ovarian), spheroid cell culture, poly (ADP-ribose) polymerase (PARP) inhibitors (niraparib, olaparib, rucaparib, velparib), tumor response prediction for each drug | NONMOLECULAR | Claim Policies Apply | 07/01/22 | None |
| 0326U | Targeted genomic sequence analysis panel, solid organ neoplasm, cell-free circulating DNA analysis of 83 or more genes, interrogation for sequence variants, gene copy number amplifications, gene rearrangements, microsatellite instability and tumor mutational burden | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/22 | None |
| 0327U | Fetal aneuploidy (trisomy 13, 18, and 21), DNA sequence analysis of selected regions using maternal plasma, algorithm reported as a risk score for each trisomy, includes sex reporting, if performed | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/22 | None |
| 0328U | Drug assay, definitive, 120 or more drugs and metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS), includes specimen validity and algorithmic analysis describing drug or metabolite and presence or absence of risks for a significant patient-adverse event, per date of service | NONMOLECULAR | Claim Policies Apply | 07/01/22 | None |
| 0329U | Oncology (neoplasia), exome and transcriptome sequence analysis for sequence variants, gene copy number amplifications and deletions, gene rearrangements, microsatellite instability and tumor mutational burden utilizing DNA and RNA from tumor with DNA from normal blood or saliva for subtraction, report of clinically significant mutation(s) with therapy associations | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/22 | None |
| 0330U | Infectious agent detection by nucleic acid (DNA or RNA), vaginal pathogen panel, identification of 27 organisms, amplified probe technique, vaginal swab | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/22 | None |

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| 0331U | Oncology (hematolymphoid neoplasia), optical genome mapping for copy number alterations and gene rearrangements utilizing DNA from blood or bone marrow, report of clinically significant alterations | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/22 | None |
| 0423T | Secretory Type II Phospholipase A2 (Spla2-ii) | NONMOLECULAR | Claim Policies Apply | 01/01/17 | 12/31/21 |
| 0500T | Infectious agent detection by nucleic acid (DNA or RNA), human papillomavirus (HPV) for five or more separately reported high-risk HPV types (eg, 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 68) (ie, genotyping) | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/18 | None |
| 0564T | Oncology, chemotherapeutic drug cytotoxicity assay of cancer stem cells (CSCs), from cultured CSCs and primary tumor cells, categorical drug response reported based on percent of cytotoxicity observed, a minimum of 14 drugs or drug combinations | NONMOLECULAR | Claim Policies Apply | 01/01/20 | None |
| G0027 | Semen analysis; presence and/or motility of sperm excluding hühner | NONMOLECULAR | Claim Policies Apply | 01/01/95 | None |
| G0103 | Prostate cancer screening; prostate specific antigen test (psa) | NONMOLECULAR | Claim Policies Apply | 01/01/00 | None |
| G0123 | Screening cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, screening by cytotechnologist under physician supervision | NONMOLECULAR | Claim Policies Apply | 04/01/98 | None |
| G0124 | Screening cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, requiring interpretation by physician | NONMOLECULAR | Claim Policies Apply | 04/01/98 | None |
| G0141 | Screening cytopathology smears, cervical or vaginal, performed by automated system, with manual rescreening, requiring interpretation by physician | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| G0143 | Screening cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, with manual screening and rescreening by cytotechnologist under physician supervision | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| G0144 | Screening cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, with screening by automated system, under physician supervision | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| G0145 | Screening cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, with screening by automated system and manual rescreening under physician supervision | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| G0147 | Screening cytopathology smears, cervical or vaginal, performed by automated system under physician supervision | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| G0148 | Screening cytopathology smears, cervical or vaginal, performed by automated system with manual rescreening | NONMOLECULAR | Claim Policies Apply | 01/01/99 | None |
| G0248 | Demonstration, prior to initiation of home inr monitoring, for patient with either mechanical heart valve(s), chronic atrial fibrillation, or venous thromboembolism who meets medicare coverage criteria, under the direction of a physician; includes: face-to-face demonstration of use and care of the inr monitor, obtaining at least one blood sample, provision of instructions for reporting home inr test results, and documentation of patient's ability to perform testing and report results | NONMOLECULAR | Claim Policies Apply | 07/01/02 | None |
| G0249 | Provision of test materials and equipment for home inr monitoring of patient with either mechanical heart valve(s), chronic atrial fibrillation, or venous thromboembolism who meets medicare coverage criteria; includes: provision of materials for use in the home and reporting of test results to physician; testing not occurring more frequently than once a week; testing materials, billing units of service include 4 tests | NONMOLECULAR | Claim Policies Apply | 07/01/02 | None |
| G0250 | Physician review, interpretation, and patient management of home inr testing for patient with either mechanical heart valve(s), chronic atrial fibrillation, or venous thromboembolism who meets medicare coverage criteria; testing not occurring more frequently than once a week; billing units of service include 4 tests | NONMOLECULAR | Claim Policies Apply | 07/01/02 | None |
| G0306 | Complete cbc, automated (hgb, hct, rbc, wbc, without platelet count) and automated wbc differential count | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| G0307 | Complete (cbc), automated (hgb, hct, rbc, wbc; without platelet count) | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| G0327 | Colorectal cancer screening; blood-based biomarker | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/21 | None |
| G0328 | Colorectal cancer screening; fecal occult blood test, immunoassay, 1-3 simultaneous | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| G0416 | Surgical pathology, gross and microscopic examinations, for prostate needle biopsy, any method | NONMOLECULAR | Claim Policies Apply | 01/01/09 | None |
| G0432 | Infectious agent antibody detection by enzyme immunoassay (eia) technique, hiv-1 and/or hiv-2, screening | NONMOLECULAR | Claim Policies Apply | 04/01/10 | None |
| G0433 | Infectious agent antibody detection by enzyme-linked immunosorbent assay (elisa) technique, hiv-1 and/or hiv-2, screening | NONMOLECULAR | Claim Policies Apply | 04/01/10 | None |
| G0435 | Infectious agent antibody detection by rapid antibody test, hiv-1 and/or hiv-2, screening | NONMOLECULAR | Claim Policies Apply | 04/01/10 | None |
| G0452 | Molecular pathology procedure; physician interpretation and report | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/13 | None |
| G0472 | Hepatitis c antibody screening, for individual at high risk and other covered indication(s) | NONMOLECULAR | Claim Policies Apply | 01/01/15 | None |
| G0475 | Hiv antigen/antibody, combination assay, screening | NONMOLECULAR | Claim Policies Apply | 01/01/16 | None |

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| G0476 | Infectious agent detection by nucleic acid (dna or rna); human papillomavirus (hpv), high-risk types (eg, 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 68) for cervical cancer screening, must be performed in addition to pap test | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/16 | None |
| G0480 | Drug test(s), definitive, utilizing (1) drug identification methods able to identify individual drugs and distinguish between structural isomers (but not necessarily stereoisomers), including, but not limited to gc/ms (any type, single or tandem) and lc/ms (any type, single or tandem and excluding immunoassays (e.g., ia, eia, elisa, emit, fpia) and enzymatic methods (e.g., alcohol dehydrogenase)), (2) stable isotope or other universally recognized internal standards in all samples (e.g., to control for matrix effects, interferences and variations in signal strength), and (3) method or drug-specific calibration and matrix-matched quality control material (e.g., to control for instrument variations and mass spectral drift); qualitative or quantitative, all sources, includes specimen validity testing, per day; 1-7 drug class(es), including metabolite(s) if performed | NONMOLECULAR | Claim Policies Apply | 01/01/16 | None |
| G0481 | Drug test(s), definitive, utilizing (1) drug identification methods able to identify individual drugs and distinguish between structural isomers (but not necessarily stereoisomers), including, but not limited to gc/ms (any type, single or tandem) and lc/ms (any type, single or tandem and excluding immunoassays (e.g., ia, eia, elisa, emit, fpia) and enzymatic methods (e.g., alcohol dehydrogenase)), (2) stable isotope or other universally recognized internal standards in all samples (e.g., to control for matrix effects, interferences and variations in signal strength), and (3) method or drug-specific calibration and matrix-matched quality control material (e.g., to control for instrument variations and mass spectral drift); qualitative or quantitative, all sources, includes specimen validity testing, per day; 8-14 drug class(es), including metabolite(s) if performed | NONMOLECULAR | Claim Policies Apply | 01/01/16 | None |
| G0482 | Drug test(s), definitive, utilizing (1) drug identification methods able to identify individual drugs and distinguish between structural isomers (but not necessarily stereoisomers), including, but not limited to gc/ms (any type, single or tandem) and lc/ms (any type, single or tandem and excluding immunoassays (e.g., ia, eia, elisa, emit, fpia) and enzymatic methods (e.g., alcohol dehydrogenase)), (2) stable isotope or other universally recognized internal standards in all samples (e.g., to control for matrix effects, interferences and variations in signal strength), and (3) method or drug-specific calibration and matrix-matched quality control material (e.g., to control for instrument variations and mass spectral drift); qualitative or quantitative, all sources, includes specimen validity testing, per day; 15-21 drug class(es), including metabolite(s) if performed | NONMOLECULAR | Claim Policies Apply | 01/01/16 | None |
| G0483 | Drug test(s), definitive, utilizing (1) drug identification methods able to identify individual drugs and distinguish between structural isomers (but not necessarily stereoisomers), including, but not limited to gc/ms (any type, single or tandem) and lc/ms (any type, single or tandem and excluding immunoassays (e.g., ia, eia, elisa, emit, fpia) and enzymatic methods (e.g., alcohol dehydrogenase)), (2) stable isotope or other universally recognized internal standards in all samples (e.g., to control for matrix effects, interferences and variations in signal strength), and (3) method or drug-specific calibration and matrix-matched quality control material (e.g., to control for instrument variations and mass spectral drift); qualitative or quantitative, all sources, includes specimen validity testing, per day; 22 or more drug class(es), including metabolite(s) if performed | NONMOLECULAR | Claim Policies Apply | 01/01/16 | None |
| G0499 | Hepatitis b screening in non-pregnant, high risk individual includes hepatitis b surface antigen (hbsag), antibodies to hbsag (anti-hbs) and antibodies to hepatitis b core antigen (anti-hbc), and is followed by a neutralizing confirmatory test, when performed, only for an initially reactive hbsag result | NONMOLECULAR | Claim Policies Apply | 09/28/16 | None |
| G0659 | Drug test(s), definitive, utilizing drug identification methods able to identify individual drugs and distinguish between structural isomers (but not necessarily stereoisomers), including but not limited to gc/ms (any type, single or tandem) and lc/ms (any type, single or tandem), excluding immunoassays (e.g., ia, eia, elisa, emit, fpia) and enzymatic methods (e.g., alcohol dehydrogenase), performed without method or drug-specific calibration, without matrix-matched quality control material, or without use of stable isotope or other universally recognized internal standard(s) for each drug, drug metabolite or drug class per specimen; qualitative or quantitative, all sources, includes specimen validity testing, per day, any number of drug classes | NONMOLECULAR | Claim Policies Apply | 01/01/17 | None |
| G9143 | Warfarin responsiveness testing by genetic technique using any method, any number of specimen(s) | MOLECULAR GENOMIC | Requires Prior Authorization | 08/03/09 | None |
| H0003 | Alcohol and/or drug screening; laboratory analysis of specimens for presence of alcohol and/or drugs | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| P2028 | Cephalin flocculation, blood | NONMOLECULAR | Claim Policies Apply | 01/01/86 | None |
| P2029 | Congo red, blood | NONMOLECULAR | Claim Policies Apply | 01/01/86 | None |
| P2031 | Hair analysis (excluding arsenic) | NONMOLECULAR | Claim Policies Apply | 01/01/86 | None |
| P2033 | Thymol turbidity, blood | NONMOLECULAR | Claim Policies Apply | 01/01/86 | None |
| P2038 | Mucoprotein, blood (seromuroid) (medical necessity procedure) | NONMOLECULAR | Claim Policies Apply | 01/01/86 | None |

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| P3000 | Screening papanicolaou smear, cervical or vaginal, up to three smears, by technician under physician supervision | NONMOLECULAR | Claim Policies Apply | 01/01/92 | None |
| P3001 | Screening papanicolaou smear, cervical or vaginal, up to three smears, requiring interpretation by physician | NONMOLECULAR | Claim Policies Apply | 01/01/92 | None |
| P7001 | Culture, bacterial, urine; quantitative, sensitivity study | NONMOLECULAR | Claim Policies Apply | 01/01/86 | None |
| P9010 | Blood (whole), for transfusion, per unit | NONMOLECULAR | Claim Policies Apply | 01/01/87 | None |
| P9011 | Blood, split unit | NONMOLECULAR | Claim Policies Apply | 01/01/87 | None |
| P9012 | Cryoprecipitate, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/87 | None |
| P9016 | Red blood cells, leukocytes reduced, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/87 | None |
| P9017 | Fresh frozen plasma (single donor), frozen within 8 hours of collection, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/87 | None |
| P9019 | Platelets, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/87 | None |
| P9020 | Platelet rich plasma, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/87 | None |
| P9021 | Red blood cells, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/87 | None |
| P9022 | Red blood cells, washed, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/87 | None |
| P9023 | Plasma, pooled multiple donor, solvent/detergent treated, frozen, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/00 | None |
| P9025 | Plasma, cryoprecipitate reduced, pathogen reduced, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| P9026 | Cryoprecipitated fibrinogen complex, pathogen reduced, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/22 | None |
| P9031 | Platelets, leukocytes reduced, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| P9032 | Platelets, irradiated, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| P9033 | Platelets, leukocytes reduced, irradiated, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| P9034 | Platelets, pheresis, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| P9035 | Platelets, pheresis, leukocytes reduced, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| P9036 | Platelets, pheresis, irradiated, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| P9037 | Platelets, pheresis, leukocytes reduced, irradiated, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| P9038 | Red blood cells, irradiated, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| P9039 | Red blood cells, deglycerolized, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| P9040 | Red blood cells, leukocytes reduced, irradiated, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| P9041 | Infusion, albumin (human), 5%, 50 ml | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| P9043 | Infusion, plasma protein fraction (human), 5%, 50 ml | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| P9044 | Plasma, cryoprecipitate reduced, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| P9045 | Infusion, albumin (human), 5%, 250 ml | NONMOLECULAR | Claim Policies Apply | 01/01/02 | None |
| P9046 | Infusion, albumin (human), 25%, 20 ml | NONMOLECULAR | Claim Policies Apply | 01/01/02 | None |
| P9047 | Infusion, albumin (human), 25%, 50 ml | NONMOLECULAR | Claim Policies Apply | 01/01/02 | None |
| P9048 | Infusion, plasma protein fraction (human), 5%, 250 ml | NONMOLECULAR | Claim Policies Apply | 01/01/02 | None |
| P9050 | Granulocytes, pheresis, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/02 | None |
| P9051 | Whole blood or red blood cells, leukocytes reduced, cmv-negative, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| P9052 | Platelets, hla-matched leukocytes reduced, apheresis/pheresis, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| P9053 | Platelets, pheresis, leukocytes reduced, cmv-negative, irradiated, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| P9054 | Whole blood or red blood cells, leukocytes reduced, frozen, deglycerol, washed, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| P9055 | Platelets, leukocytes reduced, cmv-negative, apheresis/pheresis, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| P9056 | Whole blood, leukocytes reduced, irradiated, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| P9057 | Red blood cells, frozen/deglycerolized/washed, leukocytes reduced, irradiated, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| P9058 | Red blood cells, leukocytes reduced, cmv-negative, irradiated, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| P9059 | Fresh frozen plasma between 8-24 hours of collection, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| P9060 | Fresh frozen plasma, donor retested, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/04 | None |
| P9070 | Plasma, pooled multiple donor, pathogen reduced, frozen, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/16 | None |
| P9071 | Plasma (single donor), pathogen reduced, frozen, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/16 | None |
| P9073 | Platelets, pheresis, pathogen-reduced, each unit | NONMOLECULAR | Claim Policies Apply | 01/01/18 | None |
| P9099 | Blood component or product not otherwise classified | NONMOLECULAR | Claim Policies Apply | 01/01/20 | None |
| P9100 | Pathogen(s) test for platelets | NONMOLECULAR | Claim Policies Apply | 01/01/18 | None |
| Q0091 | Screening papanicolaou smear; obtaining, preparing and conveyance of cervical or vaginal smear to laboratory | NONMOLECULAR | Claim Policies Apply | 01/01/92 | None |
| Q0111 | Wet mounts, including preparations of vaginal, cervical or skin specimens | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| Q0112 | All potassium hydroxide (koh) preparations | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| Q0114 | Fern test | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| Q0115 | Post-coital direct, qualitative examinations of vaginal or cervical mucous | NONMOLECULAR | Claim Policies Apply | 01/01/94 | None |
| S3600 | Stat laboratory request (situations other than s3601) | NONMOLECULAR | Claim Policies Apply | 01/01/02 | None |
| S3601 | Emergency stat laboratory charge for patient who is homebound or residing in a nursing facility | NONMOLECULAR | Claim Policies Apply | 01/01/02 | None |

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|-------|---|-------------------|------------------------------|----------|------|
| S3620 | Newborn metabolic screening panel, includes test kit, postage and the laboratory tests specified by the state for inclusion in this panel (e.g., galactose; hemoglobin, electrophoresis; hydroxyprogesterone, 17-d; phenylalanine (pku); and thyroxine, total) | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| S3630 | Eosinophil count, blood, direct | NONMOLECULAR | Claim Policies Apply | 01/01/02 | None |
| S3645 | Hiv-1 antibody testing of oral mucosal transudate | NONMOLECULAR | Claim Policies Apply | 01/01/00 | None |
| S3650 | Saliva test, hormone level; during menopause | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| S3652 | Saliva test, hormone level; to assess preterm labor risk | NONMOLECULAR | Claim Policies Apply | 01/01/00 | None |
| S3655 | Antisperm antibodies test (immunobead) | NONMOLECULAR | Claim Policies Apply | 10/01/02 | None |
| S3708 | Gastrointestinal fat absorption study | NONMOLECULAR | Claim Policies Apply | 01/01/01 | None |
| S3722 | Dose optimization by area under the curve (auc) analysis, for infusional 5-fluorouracil | NONMOLECULAR | Claim Policies Apply | 01/01/12 | None |
| S3800 | Genetic testing for amyotrophic lateral sclerosis (als) | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/07 | None |
| S3840 | Dna analysis for germline mutations of the ret proto-oncogene for susceptibility to multiple endocrine neoplasia type 2 | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/03 | None |
| S3841 | Genetic testing for retinoblastoma | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/03 | None |
| S3842 | Genetic testing for von hippel-lindau disease | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/03 | None |
| S3844 | Dna analysis of the connexin 26 gene (gjb2) for susceptibility to congenital, profound deafness | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/03 | None |
| S3845 | Genetic testing for alpha-thalassemia | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/03 | None |
| S3846 | Genetic testing for hemoglobin e beta-thalassemia | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/03 | None |
| S3849 | Genetic testing for niemann-pick disease | MOLECULAR GENOMIC | Claim Policies Apply | 07/01/03 | None |
| S3850 | Genetic testing for sickle cell anemia | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/03 | None |
| S3852 | Dna analysis for apoe epsilon 4 allele for susceptibility to alzheimer's disease | MOLECULAR GENOMIC | Requires Prior Authorization | 07/01/03 | None |
| S3853 | Genetic testing for myotonic muscular dystrophy | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/04 | None |
| S3854 | Gene expression profiling panel for use in the management of breast cancer treatment | MOLECULAR GENOMIC | Requires Prior Authorization | 01/01/06 | None |
| S3861 | Genetic testing, sodium channel, voltage-gated, type v, alpha subunit (scn5a) and variants for suspected brugada syndrome | MOLECULAR GENOMIC | Requires Prior Authorization | 10/01/08 | None |
| S3865 | Comprehensive gene sequence analysis for hypertrophic cardiomyopathy | MOLECULAR GENOMIC | Requires Prior Authorization | 04/01/09 | None |
| S3866 | Genetic analysis for a specific gene mutation for hypertrophic cardiomyopathy (hcm) in an individual with a known hcm mutation in the family | MOLECULAR GENOMIC | Requires Prior Authorization | 04/01/09 | None |
| S3870 | Comparative genomic hybridization (cgh) microarray testing for developmental delay, autism spectrum disorder and/or intellectual disability | MOLECULAR GENOMIC | Requires Prior Authorization | 04/01/09 | None |
| U0001 | Cdc 2019 novel coronavirus (2019-ncov) real-time rt-pcr diagnostic panel | MOLECULAR GENOMIC | Claim Policies Apply | 02/04/20 | None |
| U0002 | 2019-ncov coronavirus, sars-cov-2/2019-ncov (covid-19), any technique, multiple types or subtypes (includes all targets), non-cdc | MOLECULAR GENOMIC | Claim Policies Apply | 02/04/20 | None |
| U0003 | Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]), amplified probe technique, making use of high-throughput technologies as described by CMS-2020-01-R | MOLECULAR GENOMIC | Claim Policies Apply | 03/18/20 | None |
| U0004 | 2019-nCoV Coronavirus, SARS-CoV-2/2019-nCoV (COVID-19), any technique, multiple types or subtypes (includes all targets), non-CDC, making use of high throughput technologies as described by CMS-2020-01-R | MOLECULAR GENOMIC | Claim Policies Apply | 03/18/20 | None |
| U0005 | Infectious agent detection by nucleic acid (dna or rna); severe acute respiratory syndrome coronavirus 2 (sars-cov-2) (coronavirus disease [covid-19]), amplified probe technique, cdc or non-cdc, making use of high throughput technologies, completed within 2 calendar days from date of specimen collection (list separately in addition to either hcpcs code u0003 or u0004) as described by cms-2020-01-r2 | MOLECULAR GENOMIC | Claim Policies Apply | 01/01/21 | None |

All codes, including those that require prior authorization as indicated, are subject to claim policies and post-service claim review.

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All procedure codes (81105-81479) included in a multiple procedure code panel are subject to medical necessity review if any code requires prior authorization.