

Oscar Health, Inc.

Prior Authorization List

Effective Date: 01 Jul 2026

This document is a quick guide for your office to use for prior authorization with patients enrolled in Oscar Health, Inc. Individual insurance plans.

You can use this document as an overview of best practices working with Oscar. It will be your reference for Current Procedural Terminology (CPT®) codes for services, programs and prescriptions that require approval for coverage.

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Prior Authorizations

Certain services require prior authorization before Oscar will cover their costs. Generally, in-network health care providers submit prior authorization requests on behalf of their patients, although Oscar members may contact their Concierge team at 1-855-672-2755 for Oscar Plans to initiate authorization requests in some out-of-network cases. The prior authorization process is part of the Utilization Review (UR) activities performed by Oscar. Utilization Review is the assessment performed to determine if a medical, behavioral, or pharmacy service meets Oscar’s medical necessity criteria for coverage.

Please note, prior authorizations through the Utilization Review process are not intended to provide medical advice or medical care. Medical advice and care should be discussed with treating providers.

Prior Authorization Submission: Medical

To confirm authorization requirements for a specific code or service, or to submit an authorization request, in-network Health Care Providers can use Oscar’s Provider Portal at <https://provider.hioscar.com> or call 1-855-672-2755 for Oscar Plans. Providers can use this same phone number to request authorization and check the status of an existing authorization. For services where Oscar delegates utilization review, you will be transferred to or instructed to contact the appropriate vendor. For authorization requests handled by Oscar, providers may also request authorization by faxing the Authorization Request Form located in the Provider Manual to 1-844-965-9053 or 1-855-449-4485 for California Commercial plans.

Oscar requires the requesting provider to submit the following information when requesting an authorization:

- Member information (name, Oscar ID, date of birth).
- Facility (if applicable).
- Referring and treating provider name, National Provider Identifier (NPI), and Taxpayer Identification Number (TIN).
- Treatment information including diagnostic and/or procedure codes, requested amount and length of treatment(s).

Clinical information relevant to the authorization request will be requested and may include clinical notes including consultation notes, labs, radiology, and other health pertinent information.

All determinations or requests for more information in order to make an initial UR determination are made in a timely fashion appropriate for the member's specific condition, not to exceed the timeframes required by NCQA, state, and/or federal regulations. Decisions are communicated both verbally and/or in writing to providers and members, as required by regulations.

Prior-Authorization Submission: Pharmacy

Oscar plans use CVS/caremark to provide and coordinate the outpatient prescription drug benefit. Formularies are dynamic documents and can be accessed at <https://www.hioscar.com/search/>.

- For Oscar plans, a drug authorization can be initiated at <https://www.covermy meds.com/epa/caremark> or faxed to Oscar: 844-814-2259 for Specialty Drug requests, or 1-844-814-2258 for Non-Specialty Drug requests.
- For California, requests can be faxed to CVS: 1-866-249-6155.

Definitions

Utilization Review

A system for Prospective, Concurrent, or Retrospective review of the Medical Necessity and appropriateness of health care services and a system for Prospective, Concurrent, or Retrospective review to determine the Experimental or Investigational nature of health care services. The term does not include a review in response to an elective request for clarification of coverage.

Prospective Review

A request for Precertification conducted prior to a health care service, admission or treatment in accordance with Oscar's requirement that the health care service, admission or course of treatment, in whole or in part, be approved prior to its provision.

Concurrent Review

A Utilization Review for ongoing health care or for an extension of treatment beyond previously approved health care conducted during a patient's hospital stay or course of treatment.

Retrospective Review

For the purposes of this UM Program, any review, for coverage purposes, of Medical Necessity conducted after services have been provided to a member. A form of Utilization Review for health care services that have been provided to a member. Retrospective Review does not include review of services for which Prospective or Concurrent Utilization Review was previously conducted or should have been previously conducted.

Health Care Provider

A person, corporation, facility, or institution that is:

- Licensed by a state to provide or is otherwise lawfully providing health care services; and
- Eligible for independent reimbursement for those health care services.

Includes a doctor of medicine, osteopathic medicine, optometry, dentistry, podiatry, or chiropractic who is licensed and authorized to practice.

Reporting

Oscar tracks the number of prior authorization requests received, and makes available prior authorization approval and denial rates on a yearly basis. Please find these statistics posted under www.hioscar.com/forms.

Prior Authorization List

Summary of Changes

The following outlines the additions and removals made to the Prior Authorization List from the previous version to the current version. These changes apply to all states for Individual Oscar Health Plans.

Additions

N/A

Removals

Short Description	CPT® Codes	Effective Date
Gene Analysis	81302, 81303, 81304, 81518, 81520, 81521, 0217U, S3800	01-Jul-2026
Musculoskeletal Therapy Agents	J7318, J7320, J7321, J7322, J7323,	01-Jul-2026

	J7324, J7325, J7326, J7327, J7328, J7329, J7331, J7332	
Gene Analysis	0425U, 0426U	01-Aug-2026

Current Prior Authorization List

The below is the prior authorization list effective as of the date listed on the cover-sheet of this document.

Short Description	CPT® Codes
Abdomen - Unlisted Procedures	22999
Abdomen, Peritoneum, Omentum - Radiation Therapy Marker Implantation	49411, 49412
Abdomen, Peritoneum, Omentum - Unlisted Procedures	49999
Abdomen, Peritoneum, Omentum - Unlisted Procedures (Major Surgeries)	49329
Ablation for Arrhythmia	33254, 33255, 33256, 33257, 33259, 33265, 33266
Ablation of Incompetent Vein (Surgical Procedures)	36475, 36476, 36478, 36479
Ablation of Lesion from Palate and Uvula	42160
Ablation of Nerve from Extracranial Nerve, Peripheral, Autonomic Nerve	0442T
Ablation of Scar Tissue from Spine and Spinal Cord	62264
Above Elbow - Protheses	L6955
Above Knee - Protheses	L5230, L5321
Above Knee - Prosthesis Accessories	L5651, L5926
Access/Management of Dialysis Circuit	C7513, C7514, C7515, C7530
Accessory Sinuses - Unlisted Procedures	31299
Acromioplasty	23130
Adaptive Behavior Therapy	97153, 97154, 97155, 97156
Adaptive Behavioral Assessment	97151, 97152

Air Ambulance Mileage	A0435, A0436
Air Ambulance Transportation	A0430, A0431
Allergenic Extracts/Biologicals Misc	J2504
Alpha-Proteinase Inhibitor (Human)	J0256, J0257
Aminoglycosides	J7682
Amputation of Penis	54125
Analgesics - Anti-Inflammatory	Q0237, Q5135, Q5140, Q5141, Q5142, Q5143, Q5156
Analgesics - Non Narcotic	J2278
Androgens - Anabolic	J1073, J3145, S0189
Ankle - Prostheses	L5050
Ankle - Prosthesis Accessories	L5649
Ankle Foot - Prostheses	L5979
Ankle Rehabilitation Devices	E1822, E1823
Anterior Segment - Ocular Device Implant/Explant	0449T
Anterior Segment - Unlisted Procedures	66999
Anterior Tibial Tubercleplasty	27418
Anti-Infective Agents - Misc.	J0872, J0875, J2183, J2406, J2407
Anti-Inflammatory Agents	J0129, J0638, J1602, J1745, J1748, J2323, J2793, J3262, J3357, Q5103, Q5104, Q5109, Q5132, Q5133, Q5137, Q5138, Q5145
Antiasthmatic and Bronchodilator Agents	J0517, J2182, J2356, J2357, J2786
Antidepressants	J0013
Antidiabetics	J9381
Antidotes and Specific Antagonists	J0208, J0209, J0211, J2315
Antiemetics	J0185, J1434, J1453, J1454, J1456, J1627, J2469, J8597, J8655, J8670, Q0167
Antifungals	J0349, J2246
Antihemophilic Products	J0599, J7168, J7170, J7175, J7179, J7180, J7181, J7182, J7183, J7185, J7186, J7187, J7188, J7189, J7190, J7192, J7193, J7194, J7195, J7198, J7199, J7200, J7201, J7202,

	J7203, J7204, J7205, J7207, J7208, J7209, J7210, J7211, J7212, J7214
Antihyperlipidemics	C9079, J1305, J1306
Antimalarials	J0391
Antineoplastics and Adjunctive Therapies	A9513, A9606, A9607, A9699, C2616, C9069, C9070, C9073, C9081, C9098, C9257, G0458, J0202, J0640, J0641, J0642, J0870, J0893, J0894, J1323, J1326, J1448, J1950, J1952, J2277, J2783, J3055, J3263, J3315, J3316, J8522, J8560, J8565, J8600, J8610, J8611, J8612, J8700, J8705, J8999, J9000, J9011, J9015, J9017, J9021, J9022, J9023, J9024, J9025, J9026, J9027, J9028, J9030, J9032, J9033, J9034, J9035, J9036, J9039, J9040, J9041, J9042, J9043, J9045, J9046, J9047, J9048, J9049, J9050, J9051, J9052, J9054, J9055, J9056, J9057, J9060, J9061, J9063, J9064, J9065, J9071, J9072, J9073, J9074, J9075, J9076, J9098, J9100, J9118, J9119, J9120, J9130, J9144, J9145, J9150, J9153, J9155, J9161, J9171, J9172, J9173, J9174, J9176, J9177, J9178, J9179, J9181, J9184, J9185, J9190, J9196, J9198, J9200, J9201, J9202, J9203, J9204, J9205, J9206, J9207, J9208, J9209, J9211, J9214, J9215, J9216, J9217, J9218, J9219, J9223, J9225, J9227, J9228, J9229, J9230, J9245, J9246, J9248, J9249, J9255, J9260, J9261, J9262, J9263, J9264, J9266, J9267, J9268, J9269, J9271, J9272, J9273, J9274, J9275, J9276, J9280, J9281, J9282, J9285, J9286, J9289, J9292, J9293, J9294, J9295, J9296, J9297, J9298, J9299, J9301, J9302, J9303, J9304, J9305, J9306, J9307, J9308, J9309, J9311, J9312, J9313, J9314, J9316, J9317, J9318, J9319, J9320, J9321, J9322, J9323, J9324, J9325, J9326, J9328, J9329, J9330, J9331, J9341, J9342, J9345, J9347, J9348, J9349, J9350, J9351, J9352, J9353, J9354, J9355, J9356, J9357, J9358, J9359, J9360, J9361, J9370, J9380, J9382, J9390, J9393, J9394, J9395, J9400, J9600, J9999, Q2017, Q2041, Q2043, Q2050, Q2053, Q2054, Q2055, Q2056, Q5107, Q5112, Q5113, Q5114, Q5115, Q5116, Q5117, Q5118, Q5119, Q5123, Q5126, Q5129, Q5144, Q5146, Q5160, S0088, S0156, S0172, S0178, S0182
Antiparkinson and Related Therapy Agents	J0364
Antipsoriatics	J1628, J1747, J2327, J3245
Antipsychotics/Antimanic Agents	J2427
Antivirals	J0248, J0741, J1746, J1961, S0145

Anus - Unlisted Procedures	46999
Apnea Monitors	E0618, E0619
Application of Compression System to Arm	29584
Application of Compression System to Leg	29581
Arm Rehabilitation Devices	E0738
Arteries and Veins - Unlisted Procedures	37799
Arthrodesis of Cervical Spine	22551, 22552, 22554, 22600
Arthrodesis of Foot and Toes	28750, 28755, 28760
Arthrodesis of Hand and Finger	C7506
Arthrodesis of Lumbar Spine	22533, 22558, 22612, 22630, 22633
Arthrodesis of Pelvis and Hip Joint	27278
Arthrodesis of Spine	22534, 22548, 22585, 22586, 22590, 22595, 22614, 22632, 22634, 22800, 22802, 22804, 22808, 22810, 22812
Arthrodesis of Thoracic Spine	22532, 22556, 22610
Arthroplasty Implant/Explant of Cervical Spine	0095T, 0098T
Arthroplasty Implant/Explant of Lumbar Spine	22860, 0164T, 0165T
Arthroplasty of Pelvis and Hip Joint	27130, 27132, 27134, 27137, 27138
Arthroplasty of Shoulder	23470, 23472, 23473, 23474
Arthroplasty of Thigh and Knee	27438, 27440, 27441, 27442, 27443, 27446, 27447
Arthroscopy of Head	29804
Arthroscopy of Musculoskeletal System	29999
Arthroscopy of Pelvis and Hip Joint	29860, 29861, 29862, 29863, 29866, 29914, 29915, 29916
Arthroscopy of Shoulder	29805, 29806, 29807, 29819, 29820, 29821, 29822, 29823, 29824, 29825, 29826, 29827, 29828
Arthroscopy of Thigh and Knee	29867, 29868, 29870, 29871, 29873, 29874, 29875, 29876, 29877, 29879, 29880, 29881, 29882, 29883, 29884, 29885, 29886, 29887, 29888, 29889
Arthrotomy of Head	21010

Arthrotomy of Thigh and Knee	27310, 27332, 27333, 27334, 27335, 27337, 27403
Aspiration of Spine and Spinal Cord	62287, 62330, 62331
Attended Sleep Studies	95782, 95783, 95807, 95808, 95810, 95811
Balloon Dilation of Blocked Vein/Artery	C7563
Balloon Valvuloplasty	92990
Bariatric Surgery	43644, 43645, 43770, 43771, 43772, 43773, 43774, 43775, 43845, 43886, 43887, 43888, 43889, C9784, C9785
Bariatric Surgery with Gastric Bypass	43846, 43847, 43848
Behavioral Assessment	96127
Behavioral Health Care Management	C7900, C7901, C7902
Below Elbow - Prosthesis	L6935
Below Knee - Prosthesis	L5100, L5301
Below Knee - Temporary Prosthesis	L5540
Biliary Tract - Endoscopic Retrograde Cholangiopancreatography	C7560
Biliary Tract - Unlisted Procedures	47579, 47999
Biochemical Assay (Hepatitis C)	81596
Biochemical Assay (Liver Function)	0002M, 0003M
Biochemical Assay (Prostate Specific Antigen)	81539
Biofeedback Training	90901, 90912, 90913
Blood Testing (Colorectal Cancer)	G0327
Bone Density Regulators	J0897, J2430, J3111, J3489
Bone Graft to Head	21127, 21210, 21215
Bradykinin B2 Receptor Antagonists	J1744
Breast - Implantable Prosthesis	C1789
Canalith Repositioning	95992
Capsulorrhaphy	23450, 23455, 23460, 23462, 23465, 23466
Cardiac Catheterization with Ablation	93650, 93655, 93657

Cardiac Diagnostic Evaluation and Monitoring	93998
Cardiac Diagnostic Imaging	0331T, 0332T
Cardiac Implants	C1605, C1721, C1722, C1764, C1777, C1779, C1785, C1786, C1824, C1882, C1895, C1896, C1898, C1899, C1900, C2619, C2620, C2621, E0616
Care Coordination and Case Management	99366, 99368, 0794T
Cartilage Graft	20910, 20912
Catheter Implant/Explant into Spine and Spinal Cord	62324, 62325, 62326, 62327, 62350, 62351
Catheter Implant/Explant into Trachea and Bronchi	31643
Catheterization for Coronary Angioplasty	93454, 93455, 93456, 93457, 93458, 93459, 93460, 93461, C7516, C7517, C7518, C7519, C7520, C7521, C7522, C7523, C7524, C7525, C7526, C7527, C7528, C7529, C7552, C7553, C7557, C7562
Central Angiography and Angioplasty, with or without Stenting	37236, 37237, 37238, 37239, 37246, 37247, 37248, 37249, C7532
Central Nervous System Assessments/Tests	96125
Cephalosporins	J0681, J0699
Chemicals	J7642, J7643
Chemodeneration of Nerve of Extracranial Nerve, Peripheral, Autonomic Nerve	64633, 64634, 64635, 64636
Claviclectomy	23120
Clitoroplasty	56805
Closure of Congenital Coronary Defect	93580, 93582
Cochlear Implant Component Replacements	L8619, L8627, L8628
Cochlear Implants	L8614
Cognitive Therapy	97129, 97130
Colon - Unlisted Procedures	45399

Complement Inhibitors	J0596, J0597, J0598, J1303
Compression Devices	E0650, E0651, E0652, E0666, E0667, E0668, E0669, E0671, E0672, E0673, E0676
Conjunctiva - Unlisted Procedures	68899
Continuous Glucose Monitor Receiver	A9278, E2103
Continuous Glucose Monitor Sensors	A9276
Continuous Glucose Monitor Supplies	A4239
Continuous Glucose Monitor Transmitter	A9277
Contraceptive Drug Releasing Implants	J7297, J7307
Coronary Angioplasty	C7533
Corpectomy	63082, 63085, 63086, 63087, 63088, 63090, 63091, 63101, 63102, 63103
Corticosteroids	J3299, J3304, J8541
Corticotropin	J0801, J0802
CPAP Machine	E0470, E0471, E0601
CPAP Machine Accessories	A7027, A7028, A7029, A7030, A7031, A7032, A7033, A7034, A7035, A7045, A7046, E0561, E0562
CPAP Machine Supplies	A4604, A7036, A7037, A7038, A7039, A7044
Cranial Electrotherapy Stimulation System	E0732
CT Scan (Abdomen And Pelvis)	74174, 74176, 74177, 74178
CT Scan (Abdomen)	74150, 74160, 74170, 74175
CT Scan (Abdominal Aorta And Both Leg Arteries)	75635
CT Scan (Arm)	73200, 73201, 73202, 73206
CT Scan (Arteries)	0710T, 0711T, 0712T, 0713T
CT Scan (Bone Density)	77078
CT Scan (Brain)	70472, 70473
CT Scan (Breast)	0633T, 0636T
CT Scan (Chest)	71250, 71260, 71270, 71275

CT Scan (Colon)	74261, 74262, 74263
CT Scan (Cranial Cavity)	70480, 70481, 70482
CT Scan (Face)	70486, 70487, 70488
CT Scan (Head and Neck)	70471
CT Scan (Head or Brain)	70450, 70460, 70470
CT Scan (Head)	70496
CT Scan (Heart)	75572, 75573, 75574, 75577
CT Scan (Leg)	73700, 73701, 73702, 73706
CT Scan (Lungs)	71271
CT Scan (Neck)	70490, 70491, 70492, 70498
CT Scan (Pelvis)	72191, 72192, 72193, 72194
CT Scan (Spine)	72125, 72126, 72127, 72128, 72129, 72130, 72131, 72132, 72133
CT Scan (Unspecified)	76380, 76497, S8092
Cystic Fibrosis Agents	J7639
Cystourethroscopy with Biopsy	C7550
Cystourethroscopy with Cystoscopy	C7554
Dermatological Gene Therapy Drugs	J3401
Dermatologicals	C9164, C9166, J3247, J7354, Q5098, Q5099, Q5100, Q9996, Q9997, Q9998
Developmental Testing	96110, 96112, 96113
Diagnostic Cardiac Catheterization (Major Surgeries)	93451, 93452, 93453, 93593, 93594, 93595, 93596, 93597, C9792
Diagnostic Products	J3240
Diaphragm - Unlisted Procedures	39599
Digital Behavioral Therapy	A9291, A9292
Dilation of Sinus (Small Surgical Procedures)	31295, 31296, 31297
Dilation of Sinus (Surgical Procedures)	31298
Diuretics	J1941

DME Management and Services	97542, 97755
Drugs - Anti Bladder Cancer Gene Therapy	J9029
Drugs - Miscellaneous Therapeutic Classes	C9305, J9038, J9332, J9334
Echosclerotherapy	S2202
Elbow - Prostheses	L6200
Elbow - Prosthesis Accessories	L6696
Elbow Rehabilitation Devices	E1803, E1804
Electric Stimulation Cancer Treatment Devices	E0766
Electrical Bone Healing Device Procedures	20974, 20975
Electrical Stimulation Wound Therapy	G0281, G0282
Electroejaculation	55870
Electrophysiology Recording and Mapping	93602, 93603, 93609, 93613, 93619, 93620, 93621, 93622, 93653, 93654, 93656, C9787
Endocrine and Metabolic Agents - Misc.	J0217, Q5136, Q5157, Q5158, Q5159
Endovascular Catheter	C1600
Endovascular Repair of Descending Thoracic Aorta	33882
Enteral Formula	B4102, B4103, B4104
Enzyme Replacement Therapy Drugs	C9167, G0138, J1203, J7171
Enzymes	J0775
Esophagus - Unlisted Procedures	43499
Excision and Skin Grafting on Integumentary System	15100, 15120, 15156, 15220, 15240, 15271, 15272, 15273, 15274, 15275, 15276, 15277, 15278, 15760, 15769, 15770, 15773, 15774
Excision of Bone from Shoulder	23000
Excision of Tumor from Extracranial Nerve, Peripheral, Autonomic Nerve	C7551
Exploration of Trachea and Bronchi	C7509, C7510, C7511, C7512, C7556

External Defibrillators	K0606
Extracranial Nerve, Peripheral, Autonomic Nerve - Baroreflex Activation Device Implant/Explant	64654, 64655, 64656, 64657, 64658, 64659
Extracranial Nerve, Peripheral, Autonomic Nerve - Unlisted Procedures	64999
Eye - Implantable Prostheses	C1783
Eye - Prostheses	V2629
Eye - Unlisted Procedures	92499
Facial - Prostheses	L8045
Female Genital System - Unlisted Procedures	58999
Fertility Regulators	S0126, S0128
Finger Rehabilitation Devices	E1826, E1827
Foot - Prostheses	L5971, L5972, L5980, L5981, L5987
Foot and Toes - Ostectomy	28110
Foot and Toes - Unlisted Procedures	28899
Forearm and Wrist - Unlisted Procedures	25999
Gastrectomy	43631, 43632, 43633, 43634
Gastrointestinal Agents - Misc.	Q9999
Gene Analysis	81162, 81163, 81165, 81166, 81167, 81173, 81174, 81185, 81186, 81189, 81190, 81201, 81202, 81203, 81212, 81215, 81216, 81217, 81221, 81222, 81223, 81225, 81226, 81227, 81228, 81229, 81230, 81231, 81232, 81238, 81248, 81249, 81252, 81253, 81257, 81258, 81259, 81269, 81277, 81283, 81286, 81289, 81291, 81292, 81293, 81294, 81295, 81296, 81297, 81298, 81299, 81300, 81306, 81307, 81308, 81317, 81318, 81319, 81321, 81322, 81323, 81325, 81326, 81327, 81328, 81335, 81336, 81337, 81346, 81349, 81350, 81351, 81353, 81354, 81355, 81361, 81362, 81363, 81364, 81400, 81401, 81402, 81403, 81404, 81405, 81406, 81407, 81408, 81410, 81411, 81412, 81413, 81414, 81415, 81416, 81417, 81418, 81419, 81422, 81425, 81426, 81427, 81430, 81431, 81432, 81434, 81435, 81437, 81439, 81440, 81441, 81442,

	81443, 81445, 81448, 81449, 81450, 81451, 81455, 81456, 81458, 81459, 81460, 81465, 81470, 81471, 81479, 81490, 81493, 81500, 81503, 81504, 81519, 81522, 81525, 81529, 81535, 81536, 81538, 81540, 81541, 81542, 81546, 81551, 81552, 81554, 81595, 81599, 0001U, 0004M, 0005U, 0006M, 0007M, 0011M, 0012M, 0013M, 0016M, 0017M, 0018U, 0019U, 0022U, 0026U, 0029U, 0030U, 0031U, 0032U, 0034U, 0036U, 0037U, 0045U, 0047U, 0048U, 0050U, 0055U, 0060U, 0067U, 0069U, 0070U, 0071U, 0072U, 0073U, 0074U, 0075U, 0076U, 0079U, 0087U, 0088U, 0089U, 0090U, 0094U, 0101U, 0102U, 0103U, 0114U, 0118U, 0120U, 0129U, 0130U, 0133U, 0134U, 0136U, 0137U, 0138U, 0153U, 0156U, 0157U, 0158U, 0159U, 0160U, 0161U, 0162U, 0169U, 0170U, 0171U, 0172U, 0173U, 0175U, 0179U, 0203U, 0205U, 0209U, 0212U, 0213U, 0216U, 0218U, 0229U, 0230U, 0231U, 0232U, 0233U, 0234U, 0235U, 0236U, 0237U, 0238U, 0239U, 0244U, 0245U, 0246U, 0252U, 0253U, 0254U, 0258U, 0260U, 0262U, 0264U, 0265U, 0266U, 0267U, 0268U, 0269U, 0270U, 0271U, 0272U, 0273U, 0274U, 0276U, 0277U, 0278U, 0282U, 0285U, 0288U, 0289U, 0290U, 0291U, 0292U, 0293U, 0294U, 0296U, 0297U, 0298U, 0299U, 0300U, 0306U, 0307U, 0313U, 0314U, 0315U, 0317U, 0318U, 0319U, 0320U, 0326U, 0329U, 0331U, 0332U, 0333U, 0335U, 0336U, 0340U, 0341U, 0343U, 0345U, 0347U, 0348U, 0349U, 0350U, 0355U, 0356U, 0362U, 0363U, 0379U, 0481U, 0485U, 0486U, 0487U, 0488U, 0489U, 0493U, 0494U, 0506U, 0532U, 0536U, 0538U, 0539U, 0540U, 0543U, 0549U, 0567U, 0581U, 0582U, 0583U, 0585U, G9143, S3840, S3841, S3842, S3844, S3845, S3846, S3850, S3852, S3854, S3861, S3865, S3866, S3870
Gene Analysis (Alzheimers)	0596U
Gene Analysis (Bladder Cancer)	0613U
Gene Analysis (Blood Cancer)	0364U, 0592U
Gene Analysis (Brain Cancer)	81524
Gene Analysis (Breast Cancer)	0597U
Gene Analysis (Cancer)	0586U
Gene Analysis (Colon Cancer)	0421U, 0496U, 0498U, 0501U
Gene Analysis (Colorectal Cancer)	0368U, 0537U
Gene Analysis (Dementia)	0568U
Gene Analysis (Diabetes)	0602U

Gene Analysis (Drug Metabolism)	0438U, 0476U, 0477U, 0516U, 0533U
Gene Analysis (Liver Cancer)	0565U, 0611U, 0612U
Gene Analysis (Liver Transplant Rejection)	0575U, 0576U
Gene Analysis (Lung and Colon Cancer)	0499U
Gene Analysis (Lung Cancer)	0478U, 0566U
Gene Analysis (Melanoma)	0578U
Gene Analysis (Minimal Residual Disease)	0560U, 0561U
Gene Analysis (Ovarian Cancer)	0507U, 0577U
Gene Analysis (Pancreatic Cancer)	0510U, 0573U
Gene Analysis (Prostate Cancer)	0403U, 0475U, 0495U, 0497U, 0534U, 0572U, 0591U
Gene Analysis (Psychiatric Conditions)	0411U, 0419U
Gene Analysis (Reproductive Medicine)	0552U, 0553U, 0554U, 0555U, 0607U, 0608U
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Growth Hormones	J2941
Hand - Prostheses	L6707, L6715, L6880, L7007, L7008, L7009, L7045
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Head - Coronoideotomy	21070
Head - External Fixation Implant/Explant (Surgical Procedures)	21110
Head - Meniscectomy	21060
Head - Osteoplasty	21208, 21209
Head - Osteotomy	21198, 21199, 21206
Head - Remolding Orthoses	S1040
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Head - Unlisted Procedures	21499
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Hematopoietic Agents	C9172, J0791, J0881, J0882, J0885, J0887, J0888, J0889, J0896, J1202, J1411, J1437, J1439, J1440, J1442, J1447, J1449, J1750, J1756, J1786, J2506, J2562, J2802, J2820, J2916, J3060, J3385, J3392, J3393, Q0138, Q0139, Q4081, Q5101, Q5105, Q5106, Q5108, Q5110, Q5111, Q5120, Q5122, Q5125, Q5127, Q5130, Q5148
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Home Occupational Therapy	G0152, G0158, G0160, G2169, S9129
Home Physical Therapy	G0151, G0157, G0159, G2168, S9131
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Hospice or Home Skilled Nursing Services	G0162, G0299, G0300, G0493, G0494, G0495, G0496
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Hospital Beds	E0194, E0265, E0266, E0296, E0297, E0300, E0302, E0304, E0328, E0329

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Immunology (Prostate Cancer)	0609U
Immunology (Prostate Specific Antigen)	81313
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Infertility Pathology	89254, 89257, 89264, Q0115
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Injection into Extracranial Nerve, Peripheral, Autonomic Nerve	64490, 64491, 64492, 64493, 64494, 64495
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Injection of Anesthetic	64479, 64480, 64483, 64484, 64510, 64520
Injection of Cells or Tissue into Lumbar Spine	0627T, 0628T, 0629T, 0630T
Injection of Medication into Arteries and Veins	J0911
Injection of Medication into Kidney	C9789

Injection of Medication into Spine and Spinal Cord	62280, 62281, 62282, 62292, 62320, 62321, 62322, 62323
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Lung and Pleura - Unlisted Procedures	32999
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Lymph Nodes and Lymphatic Channels - Unlisted Procedures	38999
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MRI (Brain)	70551, 70552, 70553, 70554, 70555, 0865T, 0866T
MRI (Breast)	77046, 77047, 77048, 77049, C8903, C8905, C8906, C8908
MRI (Chest)	71550, 71551, 71552, 71555, C8909, C8910, C8911, C9791
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MRI (Head)	70544, 70545, 70546
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