

Health Outcomes Subcommittee Recommendations on the Designation of New 2009 CPT CDT Codes

PRIORITIZED LIST

Code	Description	Recommended Placement	Recommended Lines
27027	DECOMPRESSION FASCIOTOMY(IES), PELVIC (BUTTOCK) COMPARTMENT(S) (EG, GLUTEUS MEDIUS-MINIMUS, GLUTEUS MAXIMUS, ILIOPSOAS, AND/OR TENSOR FASCIA LATA MUSCLE), UNILATERAL	List	143 CRUSH INJURIES OTHER THAN DIGITS
27057	DECOMPRESSION FASCIOTOMY(IES), PELVIC (BUTTOCK) COMPARTMENT(S) (EG, GLUTEUS MEDIUS-MINIMUS, GLUTEUS MAXIMUS, ILIOPSOAS, AND/OR TENSOR FASCIA LATA MUSCLE) WITH DEBRIDEMENT OF NONVIABLE MUSCLE, UNILATERAL	List	143 CRUSH INJURIES OTHER THAN DIGITS
35535	BYPASS GRAFT, WITH VEIN; HEPATORENAL	List	270 ARTERIAL EMBOLISM/THROMBOSIS: ABDOMINAL AORTA, THORACIC AORTA 306 DISSECTING OR RUPTURED AORTIC ANEURYSM 330 DISORDERS OF ARTERIES, OTHER THAN CAROTID OR CORONARY 347 NON-DISSECTING ANEURYSM WITHOUT RUPTURE 465 ATHEROSCLEROSIS, AORTIC AND RENAL
35570	BYPASS GRAFT, WITH VEIN; TIBIAL-TIBIAL, PERONEAL-TIBIAL, OR TIBIAL/PERONEAL TRUNK-TIBIAL	List	307 COMPLICATIONS OF A PROCEDURE ALWAYS REQUIRING TREATMENT 375 ATHEROSCLEROSIS, PERIPHERAL
35633	BYPASS GRAFT, WITH OTHER THAN VEIN; ILIO-MESENTERIC	List	270 ARTERIAL EMBOLISM/THROMBOSIS: ABDOMINAL AORTA, THORACIC AORTA 306 DISSECTING OR RUPTURED AORTIC ANEURYSM 330 DISORDERS OF ARTERIES, OTHER THAN CAROTID OR CORONARY 347 NON-DISSECTING ANEURYSM WITHOUT RUPTURE 465 ATHEROSCLEROSIS, AORTIC AND RENAL
35634	BYPASS GRAFT, WITH OTHER THAN VEIN; ILIORENAL	List	270 ARTERIAL EMBOLISM/THROMBOSIS: ABDOMINAL AORTA, THORACIC AORTA 306 DISSECTING OR RUPTURED AORTIC ANEURYSM 330 DISORDERS OF ARTERIES, OTHER THAN CAROTID OR CORONARY 347 NON-DISSECTING ANEURYSM WITHOUT RUPTURE 465 ATHEROSCLEROSIS, AORTIC AND RENAL

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43273	ENDOSCOPIC CANNULATION OF PAPILLA WITH DIRECT VISUALIZATION OF COMMON BILE DUCT(S) AND/OR PANCREATIC DUCT(S) (LIST SEPARATELY IN ADDITION TO CODE(S) FOR PRIMARY PROCEDURE)	List	60 CHOLELITHIASIS, CHOLECYSTITIS, COMMON BILIARY DUCT STONE 201 ACUTE PANCREATITIS 267 CHRONIC PANCREATITIS 318 ANOMALIES OF GALLBLADDER, BILE DUCTS, AND LIVER 339 CANCER OF PANCREAS 453 CANCER OF GALLBLADDER AND OTHER BILIARY 659 GALL STONES WITHOUT CHOLECYSTITIS
43279	LAPAROSCOPY, SURGICAL, ESOPHAGOMYOTOMY (HELLER TYPE), WITH FUNDOPLASTY, WHEN PERFORMED	List	70 CONGENITAL ANOMALIES OF UPPER ALIMENTARY TRACT, EXCLUDING TONGUE 406 ESOPHAGEAL STRICTURE 408 ESOPHAGITIS; ESOPHAGEAL AND INTRAESOPHAGEAL HERNIAS 416 ACHALASIA, NON-NEONATAL
46930	DESTRUCTION OF INTERNAL HEMORRHOID(S) BY THERMAL ENERGY (EG, INFRARED COAGULATION, CAUTERY, RADIOFREQUENCY)	List	492 THROMBOSED AND COMPLICATED HEMORRHOIDS 668 UNCOMPLICATED HEMORRHOIDS
49652	LAPAROSCOPY, SURGICAL, REPAIR, VENTRAL, UMBILICAL, SPIGELIAN OR EPIGASTRIC HERNIA (INCLUDES MESH INSERTION, WHEN PERFORMED); REDUCIBLE	List	176 COMPLICATED HERNIAS; UNCOMPLICATED HERNIA IN CHILDREN UNDER AGE 18; PERSISTENT HYDROCELE 538 UNCOMPLICATED HERNIA
49653	LAPAROSCOPY, SURGICAL, REPAIR, VENTRAL, UMBILICAL, SPIGELIAN OR EPIGASTRIC HERNIA (INCLUDES MESH INSERTION, WHEN PERFORMED); INCARCERATED OR STRANGULATED	List	176 COMPLICATED HERNIAS; UNCOMPLICATED HERNIA IN CHILDREN UNDER AGE 18; PERSISTENT HYDROCELE
49654	LAPAROSCOPY, SURGICAL, REPAIR, INCISIONAL HERNIA (INCLUDES MESH INSERTION, WHEN PERFORMED); REDUCIBLE	List	176 COMPLICATED HERNIAS; UNCOMPLICATED HERNIA IN CHILDREN UNDER AGE 18; PERSISTENT HYDROCELE 538 UNCOMPLICATED HERNIA
49655	LAPAROSCOPY, SURGICAL, REPAIR, INCISIONAL HERNIA (INCLUDES MESH INSERTION, WHEN PERFORMED); INCARCERATED OR STRANGULATED	List	176 COMPLICATED HERNIAS; UNCOMPLICATED HERNIA IN CHILDREN UNDER AGE 18; PERSISTENT HYDROCELE
49656	LAPAROSCOPY, SURGICAL, REPAIR, RECURRENT INCISIONAL HERNIA (INCLUDES MESH INSERTION, WHEN PERFORMED); REDUCIBLE	List	176 COMPLICATED HERNIAS; UNCOMPLICATED HERNIA IN CHILDREN UNDER AGE 18; PERSISTENT HYDROCELE 538 UNCOMPLICATED HERNIA
49657	LAPAROSCOPY, SURGICAL, REPAIR, RECURRENT INCISIONAL HERNIA (INCLUDES MESH INSERTION, WHEN PERFORMED); INCARCERATED OR STRANGULATED	List	176 COMPLICATED HERNIAS; UNCOMPLICATED HERNIA IN CHILDREN UNDER AGE 18; PERSISTENT HYDROCELE

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61796	STEREOTACTIC RADIOSURGERY (PARTICLE BEAM, GAMMA RAY, OR LINEAR ACCELERATOR); 1 SIMPLE CRANIAL LESION	List	138 BENIGN NEOPLASM OF THE BRAIN 163 BENIGN NEOPLASM OF PITUITARY GLAND 319 CANCER OF BRAIN AND NERVOUS SYSTEM 340 STROKE 460 TRIGEMINAL AND OTHER NERVE DISORDERS
61797	STEREOTACTIC RADIOSURGERY (PARTICLE BEAM, GAMMA RAY, OR LINEAR ACCELERATOR); EACH ADDITIONAL CRANIAL LESION, SIMPLE (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)	List	138 BENIGN NEOPLASM OF THE BRAIN 163 BENIGN NEOPLASM OF PITUITARY GLAND 319 CANCER OF BRAIN AND NERVOUS SYSTEM 340 STROKE 460 TRIGEMINAL AND OTHER NERVE DISORDERS
61798	STEREOTACTIC RADIOSURGERY (PARTICLE BEAM, GAMMA RAY, OR LINEAR ACCELERATOR); 1 COMPLEX CRANIAL LESION	List	138 BENIGN NEOPLASM OF THE BRAIN 163 BENIGN NEOPLASM OF PITUITARY GLAND 319 CANCER OF BRAIN AND NERVOUS SYSTEM 340 STROKE 460 TRIGEMINAL AND OTHER NERVE DISORDERS
61799	STEREOTACTIC RADIOSURGERY (PARTICLE BEAM, GAMMA RAY, OR LINEAR ACCELERATOR); EACH ADDITIONAL CRANIAL LESION, COMPLEX (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)	List	138 BENIGN NEOPLASM OF THE BRAIN 163 BENIGN NEOPLASM OF PITUITARY GLAND 319 CANCER OF BRAIN AND NERVOUS SYSTEM 340 STROKE 460 TRIGEMINAL AND OTHER NERVE DISORDERS
61800	APPLICATION OF STEREOTACTIC HEADFRAME FOR STEREOTACTIC RADIOSURGERY (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)	List	138 BENIGN NEOPLASM OF THE BRAIN 163 BENIGN NEOPLASM OF PITUITARY GLAND 319 CANCER OF BRAIN AND NERVOUS SYSTEM 340 STROKE 460 TRIGEMINAL AND OTHER NERVE DISORDERS
63620	STEREOTACTIC RADIOSURGERY (PARTICLE BEAM, GAMMA RAY, OR LINEAR ACCELERATOR); 1 SPINAL LESION	List	209 CANCER OF BONES 319 CANCER OF BRAIN AND NERVOUS SYSTEM
63621	STEREOTACTIC RADIOSURGERY (PARTICLE BEAM, GAMMA RAY, OR LINEAR ACCELERATOR); EACH ADDITIONAL SPINAL LESION (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)	List	209 CANCER OF BONES 319 CANCER OF BRAIN AND NERVOUS SYSTEM
64455	INJECTION(S), ANESTHETIC AGENT AND/OR STEROID, PLANTAR COMMON DIGITAL NERVE(S) (EG, MORTON'S NEUROMA)	List	551 LESION OF PLANTAR NERVE; PLANTAR FASCIAL FIBROMATOSIS
64632	DESTRUCTION BY NEUROLYTIC AGENT; PLANTAR COMMON DIGITAL NERVE	List	551 LESION OF PLANTAR NERVE; PLANTAR FASCIAL FIBROMATOSIS

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65756	KERATOPLASTY (CORNEAL TRANSPLANT); ENDOTHELIAL	List	307 COMPLICATIONS OF A PROCEDURE ALWAYS REQUIRING TREATMENT 335 CORNEAL OPACITY AND OTHER DISORDERS OF CORNEA
65757	BACKBENCH PREPARATION OF CORNEAL ENDOTHELIAL ALLOGRAFT PRIOR TO TRANSPLANTATION (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)	List	307 COMPLICATIONS OF A PROCEDURE ALWAYS REQUIRING TREATMENT 335 CORNEAL OPACITY AND OTHER DISORDERS OF CORNEA
77785	REMOTE AFTERLOADING HIGH DOSE RATE RADIONUCLIDE BRACHYTHERAPY; 1 CHANNEL	List	138 BENIGN NEOPLASM OF THE BRAIN 145 CANCER OF CERVIX 168 CANCER OF COLON, RECTUM, SMALL INTESTINE AND ANUS 198 CANCER OF BREAST 208 CANCER OF SOFT TISSUE 219 CANCER OF UTERUS 275 CANCER OF PENIS AND OTHER MALE GENITAL ORGANS 277 CANCER OF RETROPERITONEUM, PERITONEUM, OMENTUM AND MESENTERY 278 CANCER OF LUNG, BRONCHUS, PLEURA, TRACHEA, MEDIASTINUM AND OTHER RESPIRATORY ORGANS 286 CANCER OF BLADDER AND URETER 310 CANCER OF VAGINA, VULVA AND OTHER FEMALE GENITAL ORGANS 311 CANCER OF ORAL CAVITY, PHARYNX, NOSE AND LARYNX 319 CANCER OF BRAIN AND NERVOUS SYSTEM 337 CANCER OF ESOPHAGUS 354 CANCER OF PROSTATE GLAND 399 BENIGN NEOPLASM OF RESPIRATORY AND INTRATHORACIC ORGANS 613 SECONDARY AND ILL-DEFINED
77786	REMOTE AFTERLOADING HIGH DOSE RATE RADIONUCLIDE BRACHYTHERAPY; 2-12 CHANNELS	List	See 77785
77787	REMOTE AFTERLOADING HIGH DOSE RATE RADIONUCLIDE BRACHYTHERAPY; OVER 12 CHANNELS	List	See 77785
90951	END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES MONTHLY, FOR PATIENTS < 2 YEARS OF AGE TO INCLUDE MONITORING FOR THE ADEQUACY OF NUTRITION, ASSESSMENT OF GROWTH AND DEVELOPMENT, AND COUNSELING OF PARENTS; 4 OR MORE FACE-TO-FACE PHYSICIAN VISITS PER MONTH	List	65 END STAGE RENAL DISEASE

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90952	END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES MONTHLY, FOR PATIENTS < 2 YEARS OF AGE TO INCLUDE MONITORING FOR THE ADEQUACY OF NUTRITION, ASSESSMENT OF GROWTH AND DEVELOPMENT, AND COUNSELING OF PARENTS; 2-3 FACE-TO-FACE PHYSICIAN VISITS PER MONTH	List	65 END STAGE RENAL DISEASE
90953	END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES MONTHLY, FOR PATIENTS < 2 YEARS OF AGE TO INCLUDE MONITORING FOR THE ADEQUACY OF NUTRITION, ASSESSMENT OF GROWTH AND DEVELOPMENT, AND COUNSELING OF PARENTS; 1 FACE-TO-FACE PHYSICIAN VISIT PER MONTH	List	65 END STAGE RENAL DISEASE
90954	END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES MONTHLY, FOR PATIENTS 2-11 YEARS OF AGE TO INCLUDE MONITORING FOR THE ADEQUACY OF NUTRITION, ASSESSMENT OF GROWTH AND DEVELOPMENT, AND COUNSELING OF PARENTS; 4 OR MORE FACE-TO-FACE PHYSICIAN VISITS PER MONTH	List	65 END STAGE RENAL DISEASE
90955	END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES MONTHLY, FOR PATIENTS 2-11 YEARS OF AGE TO INCLUDE MONITORING FOR THE ADEQUACY OF NUTRITION, ASSESSMENT OF GROWTH AND DEVELOPMENT, AND COUNSELING OF PARENTS; WITH 2-3 FACE-TO-FACE PHYSICIAN VISITS PER MONTH	List	65 END STAGE RENAL DISEASE
90956	END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES MONTHLY, FOR PATIENTS 2-11 YEARS OF AGE TO INCLUDE MONITORING FOR THE ADEQUACY OF NUTRITION, ASSESSMENT OF GROWTH AND DEVELOPMENT, AND COUNSELING OF PARENTS; WITH 1 FACE-TO-FACE PHYSICIAN VISIT PER MONTH	List	65 END STAGE RENAL DISEASE
90957	END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES MONTHLY, FOR PATIENTS 12-19 YEARS OF AGE TO INCLUDE MONITORING FOR THE ADEQUACY OF NUTRITION, ASSESSMENT OF GROWTH AND DEVELOPMENT, COUNSELING OF PARENTS; 4 OR MORE FACE-TO-FACE PHYSICIAN VISITS PER MONTH	List	65 END STAGE RENAL DISEASE

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90958	END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES MONTHLY, FOR PATIENTS 12-19 YEARS OF AGE TO INCLUDE MONITORING FOR THE ADEQUACY OF NUTRITION, ASSESSMENT OF GROWTH AND DEVELOPMENT, AND COUNSELING OF PARENTS; WITH 2-3 FACE-TO-FACE PHYSICIAN VISITS PER MONTH	List	65 END STAGE RENAL DISEASE
90959	END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES MONTHLY, FOR PATIENTS 12-19 YEARS OF AGE TO INCLUDE MONITORING FOR THE ADEQUACY OF NUTRITION, ASSESSMENT OF GROWTH AND DEVELOPMENT, AND COUNSELING OF PARENTS; WITH 1 FACE-TO-FACE PHYSICIAN VISIT PER MONTH	List	65 END STAGE RENAL DISEASE
90960	END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES MONTHLY, FOR PATIENTS 20 YEARS OF AGE AND OLDER; WITH 4 OR MORE FACE-TO-FACE PHYSICIAN VISITS PER MONTH	List	65 END STAGE RENAL DISEASE
90961	END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES MONTHLY, FOR PATIENTS 20 YEARS OF AGE AND OLDER; WITH 2-3 FACE-TO-FACE PHYSICIAN VISITS PER MONTH	List	65 END STAGE RENAL DISEASE
90962	END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES MONTHLY, FOR PATIENTS 20 YEARS OF AGE AND OLDER; WITH 1 FACE-TO-FACE PHYSICIAN VISIT PER MONTH	List	65 END STAGE RENAL DISEASE
90963	END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES FOR HOME DIALYSIS PER FULL MONTH, FOR PATIENTS YOUNGER THAN 2 YEARS OF AGE TO INCLUDE MONITORING FOR THE ADEQUACY OF NUTRITION, ASSESSMENT OF GROWTH AND DEVELOPMENT, AND COUNSELING OF PARENTS	List	65 END STAGE RENAL DISEASE
90964	END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES FOR HOME DIALYSIS PER FULL MONTH, FOR PATIENTS 2-11 YEARS OF AGE TO INCLUDE MONITORING FOR THE ADEQUACY OF NUTRITION, ASSESSMENT OF GROWTH AND DEVELOPMENT, AND COUNSELING OF PARENTS	List	65 END STAGE RENAL DISEASE

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90965	END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES FOR HOME DIALYSIS PER FULL MONTH, FOR PATIENTS 12-19 YEARS OF AGE TO INCLUDE MONITORING FOR THE ADEQUACY OF NUTRITION, ASSESSMENT OF GROWTH AND DEVELOPMENT, AND COUNSELING OF PARENTS	List	65 END STAGE RENAL DISEASE
90966	END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES FOR HOME DIALYSIS PER FULL MONTH, FOR PATIENTS 20 YEARS OF AGE AND OLDER	List	65 END STAGE RENAL DISEASE
90967	END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES FOR DIALYSIS LESS THAN A FULL MONTH OF SERVICE, PER DAY; FOR PATIENTS YOUNGER THAN 2 YEARS OF AGE	List	65 END STAGE RENAL DISEASE
90968	END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES FOR DIALYSIS LESS THAN A FULL MONTH OF SERVICE, PER DAY; FOR PATIENTS 2-11 YEARS OF AGE	List	65 END STAGE RENAL DISEASE
90969	END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES FOR DIALYSIS LESS THAN A FULL MONTH OF SERVICE, PER DAY; FOR PATIENTS 12-19 YEARS OF AGE	List	65 END STAGE RENAL DISEASE
90970	END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES FOR DIALYSIS LESS THAN A FULL MONTH OF SERVICE, PER DAY; FOR PATIENTS 20 YEARS OF AGE AND OLDER	List	65 END STAGE RENAL DISEASE
93279	PROGRAMMING DEVICE EVALUATION WITH ITERATIVE ADJUSTMENT OF THE IMPLANTABLE DEVICE TO TEST THE FUNCTION OF THE DEVICE AND SELECT OPTIMAL PERMANENT PROGRAMMED VALUES WITH PHYSICIAN ANALYSIS, REVIEW AND REPORT; SINGLE LEAD PACEMAKER SYSTEM	List	76 ACUTE AND SUBACUTE ISCHEMIC HEART DISEASE, MYOCARDIAL INFARCTION 196 CHRONIC ISCHEMIC HEART DISEASE 303 LIFE-THREATENING CARDIAC ARRHYTHMIAS 373 CARDIAC ARRHYTHMIAS
93280	PROGRAMMING DEVICE EVALUATION WITH ITERATIVE ADJUSTMENT OF THE IMPLANTABLE DEVICE TO TEST THE FUNCTION OF THE DEVICE AND SELECT OPTIMAL PERMANENT PROGRAMMED VALUES WITH PHYSICIAN ANALYSIS, REVIEW AND REPORT; DUAL LEAD PACEMAKER SYSTEM	List	76 ACUTE AND SUBACUTE ISCHEMIC HEART DISEASE, MYOCARDIAL INFARCTION 196 CHRONIC ISCHEMIC HEART DISEASE 303 LIFE-THREATENING CARDIAC ARRHYTHMIAS 373 CARDIAC ARRHYTHMIAS

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93281	PROGRAMMING DEVICE EVALUATION WITH ITERATIVE ADJUSTMENT OF THE IMPLANTABLE DEVICE TO TEST THE FUNCTION OF THE DEVICE AND SELECT OPTIMAL PERMANENT PROGRAMMED VALUES WITH PHYSICIAN ANALYSIS, REVIEW AND REPORT; MULTIPLE LEAD PACEMAKER SYSTEM	List	76 ACUTE AND SUBACUTE ISCHEMIC HEART DISEASE, MYOCARDIAL INFARCTION 196 CHRONIC ISCHEMIC HEART DISEASE 303 LIFE-THREATENING CARDIAC ARRHYTHMIAS 373 CARDIAC ARRHYTHMIAS
93282	PROGRAMMING DEVICE EVALUATION WITH ITERATIVE ADJUSTMENT OF THE IMPLANTABLE DEVICE TO TEST THE FUNCTION OF THE DEVICE AND SELECT OPTIMAL PERMANENT PROGRAMMED VALUES WITH PHYSICIAN ANALYSIS, REVIEW AND REPORT; SINGLE LEAD IMPLANTABLE CARDIOVERTER-DEFIBRILLATOR	List	76 ACUTE AND SUBACUTE ISCHEMIC HEART DISEASE, MYOCARDIAL INFARCTION 110 CARDIOMYOPATHY, HYPERTROPHIC MUSCLE 196 CHRONIC ISCHEMIC HEART DISEASE 303 LIFE-THREATENING CARDIAC ARRHYTHMIAS 373 CARDIAC ARRHYTHMIAS
93283	PROGRAMMING DEVICE EVALUATION WITH ITERATIVE ADJUSTMENT OF THE IMPLANTABLE DEVICE TO TEST THE FUNCTION OF THE DEVICE AND SELECT OPTIMAL PERMANENT PROGRAMMED VALUES WITH PHYSICIAN ANALYSIS, REVIEW AND REPORT; DUAL LEAD IMPLANTABLE CARDIOVERTER- DEFIBRILLATOR	List	76 ACUTE AND SUBACUTE ISCHEMIC HEART DISEASE, MYOCARDIAL INFARCTION 110 CARDIOMYOPATHY, HYPERTROPHIC MUSCLE 196 CHRONIC ISCHEMIC HEART DISEASE 303 LIFE-THREATENING CARDIAC ARRHYTHMIAS 373 CARDIAC ARRHYTHMIAS
93284	PROGRAMMING DEVICE EVALUATION WITH ITERATIVE ADJUSTMENT OF THE IMPLANTABLE DEVICE TO TEST THE FUNCTION OF THE DEVICE AND SELECT OPTIMAL PERMANENT PROGRAMMED VALUES WITH PHYSICIAN ANALYSIS, REVIEW AND REPORT; MULTIPLE LEAD IMPLANTABLE CARDIOVERTER- DEFIBRILLATOR	List	76 ACUTE AND SUBACUTE ISCHEMIC HEART DISEASE, MYOCARDIAL INFARCTION 110 CARDIOMYOPATHY, HYPERTROPHIC MUSCLE 196 CHRONIC ISCHEMIC HEART DISEASE 303 LIFE-THREATENING CARDIAC ARRHYTHMIAS 373 CARDIAC ARRHYTHMIAS
93286	PERI-PROCEDURAL DEVICE EVALUATION AND PROGRAMMING OF DEVICE SYSTEM PARAMETERS BEFORE OR AFTER A SURGERY, PROCEDURE, OR TEST WITH PHYSICIAN ANALYSIS, REVIEW AND REPORT; SINGLE, DUAL, OR MULTIPLE LEAD PACEMAKER SYSTEM	List	76 ACUTE AND SUBACUTE ISCHEMIC HEART DISEASE, MYOCARDIAL INFARCTION 196 CHRONIC ISCHEMIC HEART DISEASE 303 LIFE-THREATENING CARDIAC ARRHYTHMIAS 373 CARDIAC ARRHYTHMIAS
93287	PERI-PROCEDURAL DEVICE EVALUATION AND PROGRAMMING OF DEVICE SYSTEM PARAMETERS BEFORE OR AFTER A SURGERY, PROCEDURE, OR TEST WITH PHYSICIAN ANALYSIS, REVIEW AND REPORT; SINGLE, DUAL, OR MULTIPLE LEAD IMPLANTABLE CARDIOVERTER-DEFIBRILLATOR SYSTEM	List	76 ACUTE AND SUBACUTE ISCHEMIC HEART DISEASE, MYOCARDIAL INFARCTION 110 CARDIOMYOPATHY, HYPERTROPHIC MUSCLE 196 CHRONIC ISCHEMIC HEART DISEASE 303 LIFE-THREATENING CARDIAC ARRHYTHMIAS 373 CARDIAC ARRHYTHMIAS

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93288	INTERROGATION DEVICE EVALUATION (IN PERSON) WITH PHYSICIAN ANALYSIS, REVIEW AND REPORT, INCLUDES CONNECTION, RECORDING AND DISCONNECTION PER PATIENT ENCOUNTER; SINGLE, DUAL, OR MULTIPLE LEAD PACEMAKER SYSTEM	List	76 ACUTE AND SUBACUTE ISCHEMIC HEART DISEASE, MYOCARDIAL INFARCTION 196 CHRONIC ISCHEMIC HEART DISEASE 303 LIFE-THREATENING CARDIAC ARRHYTHMIAS 373 CARDIAC ARRHYTHMIAS
93289	INTERROGATION DEVICE EVALUATION (IN PERSON) WITH PHYSICIAN ANALYSIS, REVIEW AND REPORT, INCLUDES CONNECTION, RECORDING AND DISCONNECTION PER PATIENT ENCOUNTER; SINGLE, DUAL, OR MULTIPLE LEAD IMPLANTABLE CARDIOVERTER-DEFIBRILLATOR SYSTEM, INCLUDING ANALYSIS	List	76 ACUTE AND SUBACUTE ISCHEMIC HEART DISEASE, MYOCARDIAL INFARCTION 110 CARDIOMYOPATHY, HYPERTROPHIC MUSCLE 196 CHRONIC ISCHEMIC HEART DISEASE 303 LIFE-THREATENING CARDIAC ARRHYTHMIAS 373 CARDIAC ARRHYTHMIAS
93292	INTERROGATION DEVICE EVALUATION (IN PERSON) WITH PHYSICIAN ANALYSIS, REVIEW AND REPORT, INCLUDES CONNECTION, RECORDING AND DISCONNECTION PER PATIENT ENCOUNTER; WEARABLE DEFIBRILLATOR SYSTEM	List	76 ACUTE AND SUBACUTE ISCHEMIC HEART DISEASE, MYOCARDIAL INFARCTION 110 CARDIOMYOPATHY, HYPERTROPHIC MUSCLE 196 CHRONIC ISCHEMIC HEART DISEASE 303 LIFE-THREATENING CARDIAC ARRHYTHMIAS 373 CARDIAC ARRHYTHMIAS
93293	TRANSTELEPHONIC RHYTHM STRIP PACEMAKER EVALUATION(S) SINGLE, DUAL, OR MULTIPLE LEAD PACEMAKER SYSTEM, INCLUDES RECORDING WITH AND WITHOUT MAGNET APPLICATION WITH PHYSICIAN ANALYSIS, REVIEW AND REPORT(S), UP TO 90 DAYS	List	76 ACUTE AND SUBACUTE ISCHEMIC HEART DISEASE, MYOCARDIAL INFARCTION 196 CHRONIC ISCHEMIC HEART DISEASE 303 LIFE-THREATENING CARDIAC ARRHYTHMIAS 373 CARDIAC ARRHYTHMIAS
93294	INTERROGATION DEVICE EVALUATION(S) (REMOTE), UP TO 90 DAYS; SINGLE, DUAL, OR MULTIPLE LEAD PACEMAKER SYSTEM WITH INTERIM PHYSICIAN ANALYSIS, REVIEW(S) AND REPORT(S)	List	76 ACUTE AND SUBACUTE ISCHEMIC HEART DISEASE, MYOCARDIAL INFARCTION 196 CHRONIC ISCHEMIC HEART DISEASE 303 LIFE-THREATENING CARDIAC ARRHYTHMIAS 373 CARDIAC ARRHYTHMIAS
93295	INTERROGATION DEVICE EVALUATION(S) (REMOTE), UP TO 90 DAYS; SINGLE, DUAL, OR MULTIPLE LEAD IMPLANTABLE CARDIOVERTER-DEFIBRILLATOR SYSTEM WITH INTERIM PHYSICIAN ANALYSIS, REVIEW(S) AND REPORT(S)	List	76 ACUTE AND SUBACUTE ISCHEMIC HEART DISEASE, MYOCARDIAL INFARCTION 110 CARDIOMYOPATHY, HYPERTROPHIC MUSCLE 196 CHRONIC ISCHEMIC HEART DISEASE 303 LIFE-THREATENING CARDIAC ARRHYTHMIAS 373 CARDIAC ARRHYTHMIAS

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93296	INTERROGATION DEVICE EVALUATION(S) (REMOTE), UP TO 90 DAYS; SINGLE, DUAL, OR MULTIPLE LEAD PACEMAKER SYSTEM OR IMPLANTABLE CARDIOVERTER-DEFIBRILLATOR SYSTEM, REMOTE DATA ACQUISITION(S), RECEIPT OF TRANSMISSIONS AND TECHNICIAN REVIEW, TECHNICAL SUPPORT AND DISTRIBUTION OF RESULTS	List	76 ACUTE AND SUBACUTE ISCHEMIC HEART DISEASE, MYOCARDIAL INFARCTION 110 CARDIOMYOPATHY, HYPERTROPHIC MUSCLE 196 CHRONIC ISCHEMIC HEART DISEASE 303 LIFE-THREATENING CARDIAC ARRHYTHMIAS 373 CARDIAC ARRHYTHMIAS
95992	CANALITH REPOSITIONING PROCEDURE(S) (EG, EPLEY MANEUVER, SEMONT MANEUVER), PER DAY	List	530 VERTIGINOUS SYNDROMES AND OTHER DISORDERS OF VESTIBULAR SYSTEM
99460	INITIAL HOSPITAL OR BIRTHING CENTER CARE, PER DAY, FOR EVALUATION AND MANAGEMENT OF NORMAL NEWBORN INFANT	List	2 BIRTH OF INFANT
99461	INITIAL CARE, PER DAY, FOR EVALUATION AND MANAGEMENT OF NORMAL NEWBORN INFANT SEEN IN OTHER THAN HOSPITAL OR BIRTHING CENTER	List	2 BIRTH OF INFANT
99462	SUBSEQUENT HOSPITAL CARE, PER DAY, FOR EVALUATION AND MANAGEMENT OF NORMAL NEWBORN	List	2 BIRTH OF INFANT
99463	INITIAL HOSPITAL OR BIRTHING CENTER CARE, PER DAY, FOR EVALUATION AND MANAGEMENT OF NORMAL NEWBORN INFANT ADMITTED AND DISCHARGED ON THE SAME DATE	List	2 BIRTH OF INFANT
99464	ATTENDANCE AT DELIVERY (WHEN REQUESTED BY THE DELIVERING PHYSICIAN) AND INITIAL STABILIZATION OF NEWBORN	List	2 BIRTH OF INFANT
99468	INITIAL INPATIENT NEONATAL CRITICAL CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A CRITICALLY ILL NEONATE, 28 DAYS OF AGE OR LESS	List	99XXX code containing lines
99469	SUBSEQUENT INPATIENT NEONATAL CRITICAL CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A CRITICALLY ILL NEONATE, 28 DAYS OF AGE OR LESS	List	99XXX code containing lines
99471	INITIAL INPATIENT PEDIATRIC CRITICAL CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A CRITICALLY ILL INFANT OR YOUNG CHILD, 29 DAYS THROUGH 24 MONTHS OF AGE	List	99XXX code containing lines
99472	SUBSEQUENT INPATIENT PEDIATRIC CRITICAL CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A CRITICALLY ILL INFANT OR YOUNG CHILD, 29 DAYS THROUGH 24 MONTHS OF AGE	List	99XXX code containing lines

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Code	Description	Recommended Placement	Recommended Lines
99475	INITIAL INPATIENT PEDIATRIC CRITICAL CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A CRITICALLY ILL INFANT OR YOUNG CHILD, 2 THROUGH 5 YEARS OF AGE	List	99XXX code containing lines
99476	SUBSEQUENT INPATIENT PEDIATRIC CRITICAL CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF A CRITICALLY ILL INFANT OR YOUNG CHILD, 2 THROUGH 5 YEARS OF AGE	List	99XXX code containing lines
99478	SUBSEQUENT INTENSIVE CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF THE RECOVERING VERY LOW BIRTH WEIGHT INFANT (PRESENT BODY WEIGHT LESS THAN 1500 GRAMS)	List	99XXX code containing lines
99479	SUBSEQUENT INTENSIVE CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF THE RECOVERING LOW BIRTH WEIGHT INFANT (PRESENT BODY WEIGHT OF 1500-2500 GRAMS)	List	99XXX code containing lines
99480	SUBSEQUENT INTENSIVE CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF THE RECOVERING INFANT (PRESENT BODY WEIGHT OF 2501-5000 GRAMS)	List	99XXX code containing lines

ANCILLARY

Code	Description	Recommended Placement	Recommended Lines
00211	ANESTHESIA FOR INTRACRANIAL PROCEDURES; CRANIOTOMY OR CRANIECTOMY FOR EVACUATION OF HEMATOMA	Ancillary	
00567	ANESTHESIA FOR DIRECT CORONARY ARTERY BYPASS GRAFTING; WITH PUMP OXYGENATOR	Ancillary	
96360	IV INFUSION HYDRATION INITIAL 31 MIN-1 HOUR	Ancillary	
96361	IV INFUSION HYDRATION EACH ADDITIONAL HOUR	Ancillary	
96365	IV INFUSION THERAPY/PROPHYLAXIS /DX 1ST >1 HOUR	Ancillary	
96366	IV INFUSION THERAPY PROPHYLAXIS/DX EA HOUR	Ancillary	
96367	IV NFS THER PROPH/DX ADDL SEQUENTIAL NFS >1 HR	Ancillary	
96368	IV NFS THERAPY PROPHYLAXIS/DX CONCURRENT NFS	Ancillary	
96369	SUBCUTANEOUS INFUSION INITIAL 1 HR W/PUMP SET-UP	Ancillary	
96370	SUBCUTANEOUS INFUSION EACH ADDITIONAL HOUR	Ancillary	
96371	SUBQ INFUSION ADDITIONAL PUMP INFUSION SITE	Ancillary	

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Code	Description	Recommended Placement	Recommended Lines
96372	THERAPEUTIC, PROPHYLACTIC, OR DIAGNOSTIC INJECTION (SPECIFY SUBSTANCE OR DRUG); SUBCUTANEOUS OR INTRAMUSCULAR	Ancillary	
96373	THERAPEUTIC, PROPHYLACTIC, OR DIAGNOSTIC INJECTION (SPECIFY SUBSTANCE OR DRUG); INTRA-ARTERIAL	Ancillary	
96374	THERAPEUTIC, PROPHYLACTIC, OR DIAGNOSTIC INJECTION (SPECIFY SUBSTANCE OR DRUG); INTRAVENOUS PUSH, SINGLE OR INITIAL SUBSTANCE/DRUG	Ancillary	
96375	THERAPEUTIC, PROPHYLACTIC, OR DIAGNOSTIC INJECTION (SPECIFY SUBSTANCE OR DRUG); EACH ADDITIONAL SEQUENTIAL INTRAVENOUS PUSH OF A NEW SUBSTANCE/DRUG (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)	Ancillary	
96376	THERAPEUTIC, PROPHYLACTIC, OR DIAGNOSTIC INJECTION (SPECIFY SUBSTANCE OR DRUG); EACH ADDITIONAL SEQUENTIAL INTRAVENOUS PUSH OF THE SAME SUBSTANCE/DRUG PROVIDED IN A FACILITY (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)	Ancillary	
96379	UNLISTED THERAPEUTIC, PROPHYLACTIC, OR DIAGNOSTIC INTRAVENOUS OR INTRA-ARTERIAL INJECTION OR INFUSION	Ancillary	
99465	DELIVERY/BIRTHING ROOM RESUSCITATION, PROVISION OF POSITIVE PRESSURE VENTILATION AND/OR CHEST COMPRESSIONS IN THE PRESENCE OF ACUTE INADEQUATE VENTILATION AND/OR CARDIAC OUTPUT	Ancillary	
99466	CRITICAL CARE SERVICES DELIVERED BY A PHYSICIAN, FACE-TO-FACE, DURING AN INTERFACILITY TRANSPORT OF CRITICALLY ILL OR CRITICALLY INJURED PEDIATRIC PATIENT, 24 MONTHS OF AGE OR LESS; FIRST 30-74 MINUTES OF HANDS-ON CARE DURING TRANSPORT	Ancillary	
99467	CRITICAL CARE SERVICES DELIVERED BY A PHYSICIAN, FACE-TO-FACE, DURING AN INTERFACILITY TRANSPORT OF CRITICALLY ILL OR CRITICALLY INJURED PEDIATRIC PATIENT, 24 MONTHS OF AGE OR LESS; EACH ADDITIONAL 30 MINUTES (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY SERVICE)	Ancillary	

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DIAGNOSTIC			
Code	Description	Recommended Placement	Recommended Lines
55706	BIOPSIES, PROSTATE, NEEDLE, TRANSPERINEAL, STEREOTACTIC TEMPLATE GUIDED SATURATION SAMPLING, INCLUDING IMAGING GUIDANCE	Diagnostic	
62267	PERCUTANEOUS ASPIRATION WITHIN THE NUCLEUS PULPOSUS, INTERVERTEBRAL DISC, OR PARAVERTEBRAL TISSUE FOR DIAGNOSTIC PURPOSES	Diagnostic	
78808	INJECTION PROCEDURE FOR RADIOPHARMACEUTICAL LOCALIZATION BY NON-IMAGING PROBE STUDY, INTRAVENOUS (EG, PARATHYROID ADENOMA)	Diagnostic	
83876	MYELOPEROXIDASE MPO	Diagnostic	
85397	COAGULATION AND FIBRINOLYSIS, FUNCTIONAL ACTIVITY, NOT OTHERWISE SPECIFIED (EG, ADAMTS-13), EACH ANALYTE	Diagnostic	
88720	BILIRUBIN TOTAL TRANSCUTANEOUS	Diagnostic	
93228	WEARABLE MOBILE CARDIOVASCULAR TELEMETRY WITH ELECTROCARDIOGRAPHIC RECORDING, CONCURRENT COMPUTERIZED REAL TIME DATA ANALYSIS AND GREATER THAN 24 HOURS OF ACCESSIBLE ECG DATA STORAGE (RETRIEVABLE WITH QUERY) WITH ECG TRIGGERED AND PATIENT SELECTED EVENTS	Diagnostic	
93229	WEARABLE MOBILE CARDIOVASCULAR TELEMETRY WITH ELECTROCARDIOGRAPHIC RECORDING, CONCURRENT COMPUTERIZED REAL TIME DATA ANALYSIS AND GREATER THAN 24 HOURS OF ACCESSIBLE ECG DATA STORAGE (RETRIEVABLE WITH QUERY) WITH ECG TRIGGERED AND PATIENT SELECTED EVENTS	Diagnostic	
93285	PROGRAMMING DEVICE EVALUATION WITH ITERATIVE ADJUSTMENT OF THE IMPLANTABLE DEVICE TO TEST THE FUNCTION OF THE DEVICE AND SELECT OPTIMAL PERMANENT PROGRAMMED VALUES WITH PHYSICIAN ANALYSIS, REVIEW AND REPORT; IMPLANTABLE LOOP RECORDER SYSTEM	Diagnostic	
93290	INTERROGATION DEVICE EVALUATION (IN PERSON) WITH PHYSICIAN ANALYSIS, REVIEW AND REPORT, INCLUDES CONNECTION, RECORDING AND DISCONNECTION PER PATIENT ENCOUNTER; IMPLANTABLE CARDIOVASCULAR MONITOR SYSTEM, INCLUDING ANALYSIS OF 1 OR MORE RECORDED PHYSIOLOGIC CARDIOVASCULAR DATA ELEMENTS FROM ALL INTERNAL AND EXTERNAL SENSORS	Diagnostic	

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Code	Description	Recommended Placement	Recommended Lines
93291	INTERROGATION DEVICE EVALUATION (IN PERSON) WITH PHYSICIAN ANALYSIS, REVIEW AND REPORT, INCLUDES CONNECTION, RECORDING AND DISCONNECTION PER PATIENT ENCOUNTER; IMPLANTABLE LOOP RECORDER SYSTEM, INCLUDING HEART RHYTHM DERIVED DATA ANALYSIS	Diagnostic	
93297	INTERROGATION DEVICE EVALUATION(S), (REMOTE) UP TO 30 DAYS; IMPLANTABLE CARDIOVASCULAR MONITOR SYSTEM, INCLUDING ANALYSIS OF 1 OR MORE RECORDED PHYSIOLOGIC CARDIOVASCULAR DATA ELEMENTS FROM ALL INTERNAL AND EXTERNAL SENSORS, PHYSICIAN ANALYSIS, REVIEW(S)	Diagnostic	
93298	INTERROGATION DEVICE EVALUATION(S), (REMOTE) UP TO 30 DAYS; IMPLANTABLE LOOP RECORDER SYSTEM, INCLUDING ANALYSIS OF RECORDED HEART RHYTHM DATA, PHYSICIAN ANALYSIS, REVIEW(S) AND REPORT(S)	Diagnostic	
93299	INTERROGATION DEVICE EVALUATION(S), (REMOTE) UP TO 30 DAYS; IMPLANTABLE CARDIOVASCULAR MONITOR SYSTEM OR IMPLANTABLE LOOP RECORDER SYSTEM, REMOTE DATA ACQUISITION(S), RECEIPT OF TRANSMISSIONS AND TECHNICIAN REVIEW, TECHNICAL SUPPORT AND DISTRIBUTION OF RESULTS	Diagnostic	
93306	ECHOCARDIOGRAPHY, TRANSTHORACIC, REAL-TIME WITH IMAGE DOCUMENTATION (2D), INCLUDES M-MODE RECORDING, WHEN PERFORMED, COMPLETE, WITH SPECTRAL DOPPLER ECHOCARDIOGRAPHY, AND WITH COLOR FLOW DOPPLER ECHOCARDIOGRAPHY	Diagnostic	
93351	ECHOCARDIOGRAPHY, TRANSTHORACIC, REAL-TIME WITH IMAGE DOCUMENTATION (2D), INCLUDES M-MODE RECORDING, WHEN PERFORMED, DURING REST AND CARDIOVASCULAR STRESS TEST USING TREADMILL, BICYCLE EXERCISE AND/OR PHARMACOLOGICALLY INDUCED STRESS, WITH INTERPRETATION	Diagnostic	
93352	USE OF ECHOCARDIOGRAPHIC CONTRAST AGENT DURING STRESS ECHOCARDIOGRAPHY (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)	Diagnostic	

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Never Covered			
Code	Description	Recommended Placement	Recommended Lines
20696	APPLICATION OF MULTIPLANE, UNILATERAL, EXTERNAL FIXATION WITH STEREOTACTIC COMPUTER-ASSISTED ADJUSTMENT, INCLUDING IMAGING; INITIAL AND SUBSEQUENT ALIGNMENT(S), ASSESSMENT(S), AND COMPUTATION(S) OF ADJUSTMENT SCHEDULE(S)	Never Covered	
20697	APPLICATION OF MULTIPLANE (PINS OR WIRES IN MORE THAN ONE PLANE), UNILATERAL, EXTERNAL FIXATION WITH STEREOTACTIC COMPUTER-ASSISTED ADJUSTMENT (EG, SPATIAL FRAME), INCLUDING IMAGING; EXCHANGE (IE, REMOVAL AND REPLACEMENT) OF STRUT, EACH	Never Covered	
22856	TOTAL DISC ARTHROPLASTY (ARTIFICIAL DISC), ANTERIOR APPROACH...SINGLE INTERSPACE, CERVICAL	Never Covered	
22861	REVISION INCLUDING REPLACEMENT OF TOTAL DISC ARTHROPLASTY (ARTIFICIAL DISC), ANTERIOR APPROACH, SINGLE INTERSPACE; CERVICAL	Never Covered	
22864	REMOVAL OF TOTAL DISC ARTHROPLASTY (ARTIFICIAL DISC), ANTERIOR APPROACH, SINGLE INTERSPACE; CERVICAL	Never Covered	
41512	TONGUE BASE SUSPENSION, PERMANENT SUTURE TECHNIQUE	Never covered	
41530	SUBMUCOSAL ABLATION OF THE TONGUE BASE, RADIOFREQUENCY, ONE OR MORE SITES, PER SESSION	Never covered	
83951	ONCOPROTEIN; DES-GAMMA-CARBOXY-PROTHROMBIN (DCP)	Never Covered	
87905	INFECTIOUS AGENT ENZYMATIC ACTIVITY OTHER THAN VIRUS (EG, SIALIDASE ACTIVITY IN VAGINAL FLUID)	Never Covered	
88740	HEMOGLOBIN, QUANTITATIVE, TRANSCUTANEOUS, PER DAY; CARBOXYHEMOGLOBIN	Never Covered	
88741	HEMOGLOBIN, QUANTITATIVE, TRANSCUTANEOUS, PER DAY; METHEMOGLOBIN	Never Covered	
95803	ACTIGRAPHY TESTING, RECORDING, ANALYSIS, INTERPRETATION, AND REPORT (MINIMUM OF 72 HOURS TO 14 CONSECUTIVE DAYS OF RECORDING)	Never Covered	

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New CDT Codes			
Code	Description	Recommended Placement	Recommended Lines
Diagnostics			
D0417	collection and preparation of saliva sample for laboratory diagnostic testing	Never Covered	
D0418	analysis of saliva sample - Chemical or biological analysis of saliva sample for diagnostic purposes	Never Covered	
Endodontics			
D3222	partial pulpotomy for apexogenesis - permanent tooth with incomplete root development - Removal of a portion of the pulp and application of a medicament with the aim of maintaining the vitality of the remaining portion to encourage continued physiological development and formation of the root. This procedure is not to be construed as the first stage of root canal therapy.	List	59 DENTAL CONDITIONS (EG. INFECTIONS) Treatment: URGENT AND EMERGENT DENTAL SERVICES 357 DENTAL CONDITIONS (EG. DENTAL CARIES, FRACTURED TOOTH) Treatment: BASIC RESTORATIVE
Maxillofacial Prosthetics			
D5991	topical medicament carrier - A custom fabricated carrier that covers the teeth and alveolar mucosa, or alveolar mucosa alone, and is used to deliver topical corticosteroids and similar effective medicaments for maximum sustained contact with the alveolar ridge and/or attached gingival tissues for the control and management of immunologically mediated vesiculobullous mucosal, chronic recurrent ulcerative, and other desquamative diseases of the gingiva and oral mucosa.	List	59 DENTAL CONDITIONS (EG. INFECTIONS) Treatment: URGENT AND EMERGENT DENTAL SERVICES