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# >> Prioritization of Health Services

A Report to the Governor and the 83<sup>rd</sup> Oregon Legislature



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# Acknowledgments

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# Executive summary

The Health Evidence Review Commission (HERC) is charged by state statute to maintain the Prioritized List of Health Services, which the Legislature uses to determine the benefit package for the Oregon Health Plan (OHP). HERC uses clinical effectiveness, cost-effectiveness and public input to rank combinations of conditions and treatments on the list by importance. The “2026–27 Prioritized List of Health Services” aka (“Prioritized List”) (see Appendix C) shows the final line rankings approved by HERC for implementation in 2026–27 as of May 2025. References to line numbers in the following narrative summary reflect lines of the Prioritized List from 2024–25 that served as the basis for updates made for 2026–27.

HERC made the following biennial changes:

- Deleted the line for thrombosed and complicated hemorrhoids (471) and moved relevant codes to lines 56 or 614, adding coverage for surgical treatments. An accompanying guideline note (234) was developed to clarify coverage intent (see Appendix B).
- Deleted a redundant line for hepatorenal syndrome (486). Codes for this condition already appear on two other lines (261 and 331).
- Combined two lines (377 and 506) related to gastroesophageal reflux disease (GERD) treatment. Newer evidence broadened the indications for proton pump inhibitor therapy for GERD symptoms.
- Deleted the lower line for cerumen impaction (492) and moved the condition to a higher priority line (426). Previously, ear lavage appeared in the funded region when the impaction was causing hearing loss, but HERC decided that this service is important even without hearing loss.
- Deleted the line for central retinal artery occlusion (640) and moved the condition to the higher stroke line (314). This condition is an emergency and requires ophthalmology services.
- Combined two lines (109 and 576) related to thrombophilia. Line 109 now represents all types of clotting disorders.
- Deleted the line for enophthalmos (479) and moved diagnosis codes for this condition to the craniofacial anomaly line (254).

- Deleted two lines related to unproven or clinically ineffective services (495 and 654). The two accompanying guidelines (172 and 173) were converted into Excluded Services guidelines (E1 and E2).
- Deleted the liver angiosarcoma line (556). Codes on this line already appeared on a funded line (312) and this was a non-functional line.
- Deleted the fingertip avulsion line (603) since all of the codes on this line already appear on the deep open wound line (206).
- Deleted the line representing non-obstructive foreign bodies in the gastrointestinal tract (513) since all of the codes on this line already appeared on line 41.

The Commission also reprioritized the line for ill-defined malignant neoplasms from line 586 to line 395.

Finally, in fulfillment of the requirements of ORS 414.690(b) as amended by Senate Bill 1508 (2024), the Commission and its staff assessed the impact on access to medically necessary treatment and services by persons with disabilities or chronic illnesses resulting from the Commission's prior use of any quality of life in general measures (QoLiGM) or any research or analysis that referred to or relied upon a QoLiGM. This review can be found in Appendix E. Since the implementation of this bill, the Commission now employs a review process to screen for any QoLiGMs in meeting materials and no longer uses or relies upon these measures for any coverage determinations.

HERC appreciates the opportunity to serve the state of Oregon.

# Charge to the Health Evidence Review Commission

HB 2100 (2011) established the Health Evidence Review Commission (HERC) in part to:

“[D]evelop and maintain a list of health services ranked by priority, from the most important to the least important, representing the comparative benefits of each service to the population to be served.”<sup>1</sup>

As it performs this work, HERC is also directed to:

“[C]onsider both the clinical effectiveness and cost-effectiveness of health services, including drug therapies, in determining their relative importance using peer-reviewed medical literature...”<sup>2</sup>

HERC is composed of 13 members, appointed by the governor and confirmed by the Oregon Senate. ORS 414.688 contains the membership requirements. Specifically, there are five physicians (including one doctor of osteopathy and one hospital-based physician), two consumer representatives, a public health nurse, a behavioral health representative, a dentist, a complementary and alternative medicine provider, a pharmacy representative, and a health insurance representative. HERC relies heavily on input from its subcommittees and ad hoc advisory panels. HERC’s Value-based Benefits Subcommittee (VbBS) reviews all potential changes to the Prioritized List before they are considered by the HERC for adoption. VbBS includes both Commission members and other representatives of provider organizations and other organizations.<sup>3</sup> The Evidence-based Guidelines Subcommittee (EbGS) primarily produces in-depth evidence reports which inform decisions about changes to the Prioritized List, including Coverage Guidances and Multisector Intervention Reports. An Oral Health Advisory Panel, Behavioral Health Advisory Panel and Genetics Advisory Panel provide recommendations on new codes and issues specific to their areas of expertise.

HERC’s Prioritized List is composed of condition-treatment pairs of diagnosis and treatment codes used to define the services represented. The conditions on the list are represented by the coding nomenclature of the International Classification of Diseases, Tenth

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<sup>1</sup> Oregon Revised Statutes (ORS) 414.690(3).

<sup>2</sup> Oregon Revised Statutes 414.690(4)(c).

<sup>3</sup> See Appendix A for a list of the commission, VbBS, and EbGS members



Revision, Clinical Modification (ICD-10-CM). Medical treatments are listed using codes from the American Medical Association's Current Procedural Terminology (CPT), the American Dental Association's Current Dental Terminology (CDT) and the Healthcare Common Procedure Coding System (HCPCS). Appropriate diagnostic services are covered under the Oregon Health Plan (OHP) regardless of whether the final diagnosis appears in the funded region of the Prioritized List. After a diagnosis is established, the list is used to determine whether further treatments are covered under the plan. Therefore, the list does not include diagnosis codes representing signs and symptoms and procedures codes for diagnostic procedures, which are covered services under the OHP. Palliative care is covered regardless of the underlying condition. Palliative care is described by the first of eight statements of intent associated with the Prioritized List.

Ancillary services are covered for conditions that are in the funded region. Examples of covered services include prescription drugs, durable medical equipment, or services such as the removal of sutures. Because of the volume of codes that represent ancillary services and their frequent association with many diagnoses, these codes do not appear on the list. In some cases, HERC has created guideline notes for specific ancillary and diagnostic services to establish coverage criteria for appropriate, evidence-informed use of these services.

There are some procedure codes which are not included on the list because they are not appropriate for coverage, such as experimental treatments or cosmetic services. Diagnosis codes that are non-specific or do not identify a health condition or disease process are also generally not included on the Prioritized List. The Oregon Health Authority's Medicaid Division maintains electronic files to account for codes not appearing on the list and to ensure appropriate fee-for-service reimbursement. OHP providers and coordinated care organizations (CCOs) have web-based access to the information in these electronic files through the Medicaid Management Information System (MMIS) so that service coverage is as uniform as possible.

HERC staff regularly consult with CCO medical directors and staff from the Oregon Health Authority's Medicaid Division and Office of Actuarial and Financial Analytics to determine the potential impact of changes the HERC is considering to the Prioritized List on program cost and administrative burden. These entities share this information with HERC during its decision-making process as appropriate. This collaboration supports effective implementation of a coverage change, including any necessary adjustments to the CCO global budgets.

# The prioritization methodology

HERC continues to use the prioritization methodology that has been in place since 2008<sup>4</sup>. Each line item on the Prioritized List is assigned to one of eight broad health care categories that establish a basic framework for the list (see Figure 1). Once the line items have been assigned to one of the categories, a list of criteria is used to sort them within the categories (shown as Figure 2, with the range of scores shown in parentheses). These criteria are felt to best capture the impacts on both individuals' and the population's health that HERC believes are essential in determining the relative importance of a condition-treatment pair.

Because not every service in category 1 is more important than every service in category 2, and so on, a weight is applied to each category that is multiplied by the total criteria score for each condition-treatment pair. The category weights are shown in parentheses after the title for each category in Figure 1. A total score is then calculated for each line using the formula shown in Figure 3 to sort all line items. The lowest net cost breaks any ties. For certain lines, HERC sets the priority manually when the Commission decides the appropriate placement differs from the score calculated using the methodology above. This manual ranking is used for about three percent of lines.

Services near the top of the list as a result of this methodology include the following:

- Maternity care and newborn services
- Preventive services found to be effective by the U.S. Preventive Services Task Force, and
- Treatments for chronic diseases where ongoing maintenance therapy can prevent exacerbations of the disease that lead to avoidable, high-intensity service utilization, morbidity and death. Examples of these diseases include diabetes, major depression, asthma and hypertension.

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<sup>4</sup> The methodology was established by the Health Services Commission, a predecessor to HERC.

Figure 1: Rank order of health care categories

1. Maternity & Newborn Care (100)
2. Primary Prevention and Secondary Prevention (95)
3. Chronic Disease Management (75)
4. Reproductive Services (70)
5. Fatal Conditions, Where Treatment is Aimed at Disease Modification or Cure (40)
6. Nonfatal Conditions, Where Treatment is Aimed at Disease Modification or Cure (20)
7. Self-limiting Conditions (5)
8. Inconsequential Care (1)

Figure 2: Population and individual impact measures

1. Impact on Healthy Life (0 to 10)
2. Impact on Suffering (0 to 5)
3. Population Effects (0 to 5)
4. Vulnerability of Population Affected (0 to 5)
5. Tertiary Prevention (0 to 5)
6. Effectiveness (0 to 5)
7. Need for Medical Services (0 to 100%)
8. Net Cost (0 to 5)

Figure 3: Prioritization formula

$$\begin{array}{l} \text{Health Care} \\ \text{Category} \\ \text{Weight} \end{array} \times \begin{array}{l} \text{Impact on Healthy Life} \\ + \text{Impact on Suffering} \\ + \text{Population Effects} \\ + \text{Vulnerability of} \\ \text{Population Affected} \\ + \text{Tertiary Prevention} \\ \text{(Health care categories} \\ \text{6 \& 7 only)} \end{array} \times \text{Effectiveness} \times \text{Need for} \\ \text{Service}$$

# Biennial review of the Prioritized List

HERC conducted the 17th biennial review of the Prioritized List of Health Services in 2024–2025.

The most substantial change in prioritization related to the line for ill-defined malignant neoplasms, Line 586. In October, 2024, HERC had moved many of the diagnosis codes found on this line to other funded lines. However, there were several less-specific codes, such as ICD-10-CM C80.0 and C80.1, which are codes for cancers that are so mutated that their tissue of origin cannot be determined. In November, 2024, HERC reprioritized this line to the funded region, from 586 to 395.

In addition, the Commission made several other changes to the list:

- Deleted the line for thrombosed and complicated hemorrhoids. Previously, two lines existed to differentiate between complicated (471) and uncomplicated (614) hemorrhoids. During HERC’s March 2024 meeting, experts provided testimony regarding treatments for significantly bleeding hemorrhoids, and HERC expanded coverage, moving relevant diagnosis codes from line 471 to line 56. A new guideline (234) clarifies coverage whether first- through fourth-degree hemorrhoids are funded or unfunded.
- Deleted the line for hepatorenal syndrome (486). This condition previously appeared on three lines (261, 331 and 486), and was the only diagnosis listed on line 486. There was no guideline note specifying coverage criteria, rendering 486 a non-functional line.
- Combined two lines (377 and 506) containing treatment of gastroesophageal reflux disease (GERD). Previously, a guideline (144) specified indications for long-term proton pump inhibitor (PPI) therapy only for GERD with Barrett’s esophagus. Newer evidence demonstrates long-term PPI is safe for more indications than were previously listed. HERC deleted both the guideline and lower line.
- Combined the lower line for cerumen impaction (492) with the line for foreign body in ear and nose (426), deleting the lower line. Previously, ear lavage appeared in the funded region only when the impaction was causing hearing loss. However, private payers and CMS cover lavage for cerumen impaction for a variety of reasons, including pain, hearing loss, or need for better evaluation of the

tympanic membrane.

- Deleted the line for central retinal artery occlusion (640) and moved the diagnosis code to the higher stroke line (314). This condition is an emergency and is considered a type of stroke, requiring ophthalmology services.
- Combined two lines (109 and 576) related to thrombophilia. OHA Pharmacy & Therapeutics staff have indicated that direct oral anticoagulants, warfarin and similar medication have no prior authorization criteria, and therefore a funded and unfunded line is not necessary. Line 109 now represents all types of clotting disorders.
- Deleted the line for enophthalmos (479) and moved codes for this condition to the craniofacial anomaly line (254), which already contained many orbital implant procedure codes. A local oculoplastic ophthalmologist provided input regarding coding determinations.
- Deleted two lines related to unproven or clinically ineffective services (495 and 654). Earlier in the history of the List, services that were reviewed and found to be experimental, ineffective or had risk of harms were placed on the Excluded file; this file was not visible to the public or providers, and thus two lines and accompanying guidelines (172 and 173) were created for transparency. However, there has been confusion at appeal hearings as to which rules apply, and thus these two guidelines were converted into Excluded Services guidelines (E1 and E2).
- Deleted the liver angiosarcoma transplant line (556). The two diagnosis codes on this line already appeared on a funded line relating to cancer of the liver (312). Expert testimony from liver surgeons have indicated that liver transplant is not an appropriate intervention to diagnoses found on the lower line and this was a non-functional line.
- Deleted the fingertip avulsion line (603) since nearly all of the codes on this line already appear on the deep open wound line (206). Since there was no guideline distinguishing between when a diagnosis code was to pair on the higher or lower line, the lower line was deleted.
- Deleted the line representing non-obstructive foreign bodies in the gastrointestinal tract (513). The codes on this line also appear on the intestinal obstruction line (41). The intent of the lower line was to indicate that non-obstructive bodies were to be medically observed for passage. There is still a guideline that will indicate this intent.

Tables 1 and 2 show the structural changes made to lines during this biennial review.

Table 1: Restructured lines

2026–27 line	2026–27 line description	2024–25 line	2024–25 line description
109	COAGULATION DEFECTS <a href="#">AND THROMBOPHILIAS</a>	109	COAGULATION DEFECTS
		576	THROMBOTIC DISORDERS
426	FOREIGN BODY IN EAR AND NOSE; <a href="#">CERUMEN IMPACTION</a>	426	FOREIGN BODY IN EAR AND NOSE
		492	CERUMEN IMPACTION
377	ESOPHAGITIS; ESOPHAGEAL AND INTRAESOPHAGEAL HERNIAS; <a href="#">GERD</a>	377	ESOPHAGITIS; GERD
		506	ESOPHAGITIS AND GERD; ESOPHAGEAL SPASM; ASYMPTOMATIC DIAPHRAGMATIC HERNIA

Table 2: Deleted lines (Conditions on these lines were moved to existing lines)

2024–25 line	2024–25 line description
471	Complicated hemorrhoids
479	Enophthalmos
486	Hepatorenal syndrome
492	Cerumen impaction
495	Conditions for which interventions result in marginal clinical benefit or low cost-effectiveness
506	Esophagitis and GERD; Esophageal spasm; Asymptomatic Diaphragmatic hernia
513	Foreign body in gastrointestinal tract without risk of perforation or obstruction
532	Ichthyosis
556	Angiosarcoma of liver; intrahepatic bile duct carcinoma
576	Thrombotic disorders
603	Fingertip avulsion
640	Central retinal artery occlusion
654	Conditions for which certain interventions are unproven, have no clinically important benefit or have harms that outweigh benefits

## Other biennial review changes

In total, this biennial review resulted in the deletion of 13 lines and the creation of no new lines, resulting in a net reduction of 13 lines on the List. The Prioritized List appearing in Appendix C is 641 lines long. However, changes in line structure occurred both in the List's funded and unfunded regions. Therefore, line 470 on the new List equates to the funding level of the 2024–25 list at line 469. In the Oregon Health Plan Medicaid 1115(c) demonstration waiver, effective 2022–27, the state agreed with the Centers for Medicare and Medicaid Services to continue to keep the funding line at the same relative position in which it has appeared since 2012, extending an agreement that dates to 2016.

# Interim modifications to the Prioritized List

In addition to the work on the biennial review of the Prioritized List, HERC continues to maintain the list as necessary during the interim periods. The 2026–27 Prioritized List incorporates interim modifications previously reported to legislative leadership in conjunction with the prioritized lists published on Oct. 1, 2023, Jan. 1, 2024, Oct. 1, 2024, and Jan. 1, 2025. These notices are located on HERC’s website. They include a detailed description of the thousands of changes due to incorporating new medical codes, advancements in technology, new data regarding existing technologies, and error or omission corrections. HERC continues its use of a transparent process, which allows any stakeholder to request review of a prioritization topic. Interim modifications to the 2024–25 Prioritized List will be published Oct. 1, 2025, and these will be incorporated into the Jan. 1, 2026, Prioritized List when it is published in December 2025.



# Senate Bill 1508 (2024) Implementation

Senate Bill 1508 was passed in 2024 and prohibits HERC from relying upon a quality of life in general measure (QoLiGM) or from relying on any research or analyses that rely upon or refer to a quality of life measure, unless specified conditions are met (Sections 1 and 4 [of the bill](#)). This term was defined in the bill as:

**“Quality of life in general measure”** means an assessment of the value, effectiveness or cost-effectiveness of a treatment that gives greater value to a year of life lived in perfect health than the value given to a year of life lived in less than perfect health. “Quality of life in general measure” does not mean an assessment of the value, effectiveness or cost-effectiveness of a treatment during a clinical trial in which a study participant is asked to rate the participant’s physical function, pain, general health, vitality, social functions or other similar domains.

Quality Adjusted Life Years (QALYs) is frequently used as a quality of life in general measure.

SB 1508 also included provisions on HERC’s meeting procedures (Section 2), use of evidence vendors (Sections 3 and 4), and research practices when studying health outcomes relevant to people with disabilities or chronic illnesses (Section 4).

In fulfillment of the requirements of ORS 414.690(b) as amended by Senate Bill 1508 (2024), the Commission and its staff assessed the impact on access to medically necessary treatment and services by persons with disabilities or chronic illnesses resulting from the Commission’s prior use of any QoLiGM or any research or analysis that referred to or relied upon a QoLiGM. This review can be found in Appendix E.

Since the implementation of this bill, the Commission now employs a review process to screen for any QoLiGMs in meeting materials and the HERC no longer uses or relies upon these measures for any coverage determinations.



# Recommendations

The Health Evidence Review Commission is pleased to offer these recommendations to the Governor and 83<sup>rd</sup> Oregon Legislature:

1. Adopt the Prioritized List of Health Services appearing in Appendix C for calendar year 2026-27. Once interim modifications to the List are completed in October 2025, the complete 2026-27 Prioritized List of Health Services will be published on HERC's website.
2. Adopt the revised practice guideline incorporated into the Prioritized List (Appendix B).
3. Maintain a funding level adequate to support lines 1-470 in the funded region, as required under the terms and conditions of the 1115(c) waiver extension the Department of Health and Human Services most recently extended for 2022-27.

HERC thanks the Governor and Legislature for the opportunity to serve the citizens of Oregon.

# Appendix A: Commission and subcommittee members

## Health Evidence Review Commissioners

**Devan Kansagara, MD, Chair**  
Physician, Portland

**Adriane Irwin, PharmD, Vice Chair**  
Pharmacy Representative, Corvallis

**Mark Buchholz, MD**  
Insurance Industry Representative, Portland

**Michael Collins**  
Consumer Representative, Warm Springs

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Complementary and Alternative Medicine Representative, Portland

**Stacy Geisler, DDS, PhD**  
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**Benjamin Hoffman, MD**  
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**Lynnea Lindsey, PhD**  
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**Holly Jo Hodges, MD, Chair**  
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**Sara Love, ND**  
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**Liz Walker**, PhD, MPH, Policy Analyst

**Daphne Peck**, Program Analyst

**Jessica Malstrom**, Administrative Specialist

# Appendix B: Practice guideline changes

## Changes related to Hemorrhoids

Revised guideline note (effective Jan. 1, 2026):

### **Guideline note 234, Complicated Hemorrhoids**

Lines 56, 603

First through fourth degree hemorrhoids (ICD-10-CM K64.0, K64.1, K64.2, K64.3) are included on line 56 only when

A) The patient has not responded to conservative management, including topical medications and dietary management; AND

B) One of the following is present:

a) There is recurrent hemorrhoidal bleeding resulting in anemia (hemoglobin less than 10 g/dL or hemoglobin less than 11 g/dL if use of iron is documented); OR

b) The hemorrhoids cause pain and functional limitations which interfere with ADLs and/or ability to obtain or maintain gainful employment; this must be assessed and documented by a medical professional.

Otherwise, first through fourth degree hemorrhoids are included on line 603.

For first and second degree hemorrhoids only: treatment is limited to office-based procedures (for example, banding and sclerotherapy). Other surgical procedures are only included on line 56 for third and fourth degree hemorrhoids.

ICD-10-CM K64.8 (Other hemorrhoids) is only included on line 56 when representing strangulated hemorrhoids.

# Appendix C: Prioritized health services

## Frequently asked questions: A user's guide to the Prioritized List

This summary of the most frequently asked questions and their answers provides an overview of the Prioritized List format, defines important terms and provides educational examples.

### 1. Does the line descriptor contain every diagnosis?

Each line has a description of both a condition and treatment. Some lines have only one condition, but others may have several related conditions. A line may include physical, behavioral health or oral health conditions. The line descriptor contains the most frequent condition, or a cluster of conditions represented by the ICD-10-CM codes. For example, cystic fibrosis is listed by itself on line 20, but the codes listed on line 205 — described broadly as “Zoonotic bacterial diseases” — include plague, tularemia, anthrax, brucellosis, cat scratch disease and other specific diseases.

### 2. What do the line numbers represent?

The line numbers represent the rank order of the condition-treatment pairs assigned by the HERC. The lines are ranked according to the Commission's determination of the importance of these services to the population being served; the services on line 1 are most important to provide and those on line 641 are least important.

### 3. How is the funding line established?

The Oregon Legislature will review the Prioritized List included in this report. Per an agreement with the Centers for Medicare and Medicaid Services (CMS), Oregon will not move the funding line from its current relative position throughout the current Medicaid waiver demonstration period. If this report is accepted, the Legislature is expected to establish the funding line for this list after line 470 as part of the state budget unless a waiver amendment to move the funding line is sought. Upon CMS approval, the benefit



package represented by the services listed on or above the established funding line will be reimbursed under the Oregon Health Plan beginning no earlier than Jan. 1, 2026.

**4. Why do many diagnoses appear more than once?**

A given diagnosis or condition may have a continuum of treatments including medical, surgical or transplant services. For instance, all transplantations for either bone marrow or solid organs have a separate line in addition to the medical/surgical treatment. These treatments may vary in their clinical effectiveness and/or cost-effectiveness. Therefore, the HERC gives them separate rankings.

**5. What are statements of intent?**

Statements of intent allow HERC to indicate its intent for coverage of services that cannot be easily identified by medical codes. The titles of these statements appear later in Appendix C immediately following the list of lines on the Prioritized List.

**6. What are practice guidelines?**

Guidelines are used to further delineate conditions where the coding system does not adequately distinguish between subgroups of services that are treated differently or to indicate the most effective use of a particular treatment. This report provides a listing of the guideline titles. This includes guidelines associated with diagnostic and ancillary services. Some of these services appear on the Prioritized List, while others do not. A full listing of the practice guidelines is posted on HERC's website.

**7. What are diagnostic services and are they covered?**

In most instances, diagnostic services are covered and do not appear on the list. If a condition is diagnosed that appears below the funding line, the diagnostic visit and any necessary tests will be covered. However, subsequent office visits and ancillary services such as home health services will not be covered. Certain diagnostic services have either not been shown to be effective or do not affect management of the patient and, therefore, the Commission recommends they not be covered under the Oregon Health Plan.

**8. What about preventive services?**

The Oregon Health Plan encourages prevention and early intervention. Effective preventive services for adults and children are ranked on line 3 and include services recommended by the U.S. Preventive Services Task Force ("A" and "B" Recommendations), American Academy of Pediatrics (Bright Futures Guidelines), Health Resources and Services Administration (Women's

Preventive Services) and the Advisory Committee on Immunization Practices. In addition, preventive dental services are included on line 53.

**9. What are ancillary services and are they covered?**

Ancillary services are those goods, services and therapies considered integral to the condition's successful treatment. They include prescription drugs, durable medical equipment, hospital care and anesthesia. Ancillary services are generally reimbursable when used in conjunction with a covered condition, but may be subject to practice guidelines, Oregon Administrative Rules or other prior authorization criteria. For some ancillary services, HERC has developed a guideline note to ensure appropriate use of these services. In addition, some ancillary services are listed in Excluded Guideline notes 1 and 2 after HERC found that they met the criteria for these guideline notes, including little or no benefit, lack of cost-effectiveness or harms that outweigh benefits.

**10. What other resources are available to answer other questions?**

See HERC's webpage for questions about the Prioritized List, the methodology used to create and maintain the List or other information concerning the work of the Health Evidence Review Commission.

See the Health Systems Division's Oregon Health Plan webpage for questions about plan eligibility or administration, or contact our office at 503-373-1985.

# Line descriptions for the “2026–27 Prioritized List of Health Services”

## Prioritized List of Health Services

Biennial list for planned implementation Jan. 1, 2026–Dec. 31, 2027

Line	Condition	Treatment
1	PREGNANCY	MATERNITY CARE
2	BIRTH OF INFANT	NEWBORN CARE
3	PREVENTION SERVICES WITH EVIDENCE OF EFFECTIVENESS	MEDICAL THERAPY
4	SUBSTANCE USE DISORDER	MEDICAL/PSYCHOTHERAPY
5	TOBACCO DEPENDENCE	MEDICAL THERAPY/BEHAVIORAL COUNSELING
6	REPRODUCTIVE SERVICES	CONTRACEPTION MANAGEMENT; STERILIZATION
7	MAJOR DEPRESSION, RECURRENT; MAJOR DEPRESSION, SINGLE EPISODE, SEVERE	MEDICAL/PSYCHOTHERAPY
8	TYPE 1 DIABETES MELLITUS	MEDICAL THERAPY
9	ASTHMA	MEDICAL THERAPY
10	GALACTOSEMIA	MEDICAL THERAPY
11	RESPIRATORY CONDITIONS OF FETUS AND NEWBORN	MEDICAL THERAPY
12	HIV DISEASE (INCLUDING ACQUIRED IMMUNODEFICIENCY SYNDROME) AND RELATED OPPORTUNISTIC INFECTIONS	MEDICAL THERAPY
13	CONGENITAL HYPOTHYROIDISM	MEDICAL THERAPY
14	PHENYLKETONURIA (PKU)	MEDICAL THERAPY
15	CONGENITAL INFECTIOUS DISEASES	MEDICAL THERAPY
16	LOW BIRTH WEIGHT; PREMATURE NEWBORN	MEDICAL THERAPY
17	NEONATAL MYASTHENIA GRAVIS	MEDICAL THERAPY
18	FEEDING PROBLEMS IN NEWBORNS	MEDICAL THERAPY
19	HYDROCEPHALUS AND BENIGN INTRACRANIAL HYPERTENSION	MEDICAL AND SURGICAL TREATMENT
20	CYSTIC FIBROSIS	MEDICAL THERAPY
21	VESICoureteral REFLUX	MEDICAL THERAPY, SURGERY
22	SCHIZOPHRENIC DISORDERS	MEDICAL/PSYCHOTHERAPY
23	INTRACRANIAL HEMORRHAGES; CEREBRAL CONVULSIONS, DEPRESSION, COMA, AND OTHER ABNORMAL CEREBRAL SIGNS OF THE NEWBORN	MEDICAL THERAPY
24	ENDOCRINE AND METABOLIC DISTURBANCES SPECIFIC TO THE FETUS AND NEWBORN	MEDICAL THERAPY
25	ABNORMAL PAP SMEARS; DYSPLASIA OF CERVIX AND CERVICAL CARCINOMA IN SITU, CERVICAL CONDYLOMA	MEDICAL AND SURGICAL TREATMENT
26	BIPOLAR DISORDERS	MEDICAL/PSYCHOTHERAPY
27	TYPE 2 DIABETES MELLITUS	MEDICAL THERAPY
28	DRUG WITHDRAWAL SYNDROME IN NEWBORN	MEDICAL THERAPY
29	REGIONAL ENTERITIS, IDIOPATHIC PROCTOCOLITIS, ULCERATION OF INTESTINE	MEDICAL AND SURGICAL TREATMENT
30	EPILEPSY AND FEBRILE CONVULSIONS	MEDICAL THERAPY
31	SEVERE BIRTH TRAUMA FOR BABY; INTRAVENTRICULAR	MEDICAL THERAPY

	HEMORRHAGE	
32	HEMATOLOGICAL DISORDERS OF FETUS AND NEWBORN	MEDICAL THERAPY
33	SPINA BIFIDA	SURGICAL TREATMENT
34	OTHER CONGENITAL ANOMALIES OF MUSCULOSKELETAL SYSTEM	MEDICAL AND SURGICAL TREATMENT
35	TERMINATION OF PREGNANCY	INDUCED ABORTION
36	ACQUIRED HYPOTHYROIDISM, DYSHORMONOGENIC GOITER	MEDICAL AND SURGICAL TREATMENT
37	ECTOPIC PREGNANCY; HYDATIDIFORM MOLE; CHORIOCARCINOMA	MEDICAL AND SURGICAL TREATMENT
38	PRIMARY AND SECONDARY SYPHILIS	MEDICAL THERAPY
39	DISORDERS RELATING TO LONG GESTATION AND HIGH BIRTHWEIGHT	MEDICAL THERAPY
40	PANHYPOPITUITARISM, IATROGENIC AND OTHER PITUITARY DISORDERS	MEDICAL THERAPY
41	INTUSSUSCEPTION, VOLVULUS, INTESTINAL OBSTRUCTION, HAZARDOUS FOREIGN BODY IN GI TRACT WITH RISK OF PERFORATION OR OBSTRUCTION	MEDICAL AND SURGICAL TREATMENT
42	CLEFT PALATE WITH AIRWAY OBSTRUCTION	MEDICAL AND SURGICAL TREATMENT, ORTHODONTICS
43	NEONATAL INFECTIONS OTHER THAN SEPSIS	MEDICAL THERAPY
44	COARCTATION OF THE AORTA	SURGICAL TREATMENT
45	CORONARY ARTERY ANOMALY	REIMPLANTATION OF CORONARY ARTERY
46	RHEUMATOID ARTHRITIS AND OTHER INFLAMMATORY POLYARTHROPATHIES	MEDICAL THERAPY, INJECTIONS
47	DEEP ABSCESES, INCLUDING APPENDICITIS AND PERIORBITAL ABSCESS	MEDICAL AND SURGICAL TREATMENT
48	CHRONIC RESPIRATORY DISEASE ARISING IN THE NEONATAL PERIOD	MEDICAL THERAPY
49	CONGENITAL HYDRONEPHROSIS	NEPHRECTOMY/REPAIR
50	PULMONARY TUBERCULOSIS	MEDICAL THERAPY
51	ACUTE PELVIC INFLAMMATORY DISEASE	MEDICAL AND SURGICAL TREATMENT
52	GONOCOCCAL INFECTIONS AND OTHER SEXUALLY TRANSMITTED DISEASES OF THE ORAL, ANAL AND GENITOURINARY TRACT	MEDICAL THERAPY
53	PREVENTIVE DENTAL SERVICES	CLEANING, FLUORIDE AND SEALANTS
54	DENTAL CONDITIONS (E.G., INFECTION, PAIN, TRAUMA)	EMERGENCY DENTAL SERVICES
55	COMPLICATED STONES OF THE GALLBLADDER AND BILE DUCTS; CHOLECYSTITIS	MEDICAL AND SURGICAL TREATMENT
56	ULCERS, GASTRITIS, DUODENITIS, AND GI HEMORRHAGE	MEDICAL AND SURGICAL TREATMENT
57	SEVERE BURNS	FREE SKIN GRAFT, MEDICAL THERAPY
58	BRONCHIECTASIS	MEDICAL AND SURGICAL TREATMENT
59	END STAGE RENAL DISEASE	MEDICAL THERAPY INCLUDING DIALYSIS
60	METABOLIC DISORDERS	MEDICAL THERAPY
61	TORSION OF OVARY	OOPHORECTOMY, OVARIAN CYSTECTOMY
62	SUBSTANCE-INDUCED MOOD, ANXIETY, DELUSIONAL AND OBSESSIVE-COMPULSIVE DISORDERS	MEDICAL/PSYCHOTHERAPY
63	SPONTANEOUS ABORTION; MISSED ABORTION	MEDICAL AND SURGICAL TREATMENT
64	CONGENITAL ANOMALIES OF UPPER ALIMENTARY TRACT, EXCLUDING TONGUE	MEDICAL AND SURGICAL TREATMENT
65	SUBSTANCE-INDUCED DELIRIUM; SUBSTANCE INTOXICATION AND WITHDRAWAL	MEDICAL/PSYCHOTHERAPY
66	LARYNGEAL STENOSIS OR PARALYSIS WITH AIRWAY	INCISION/EXCISION/ENDOSCOPY

	COMPLICATIONS	
67	VENTRICULAR SEPTAL DEFECT	CLOSURE
68	ACUTE BACTERIAL MENINGITIS	MEDICAL THERAPY
69	ACUTE AND SUBACUTE ISCHEMIC HEART DISEASE, MYOCARDIAL INFARCTION	MEDICAL AND SURGICAL TREATMENT
70	CONGENITAL PULMONARY VALVE ANOMALIES	PULMONARY VALVE REPAIR
71	NEUROLOGICAL DYSFUNCTION IN BREATHING, EATING, SWALLOWING, BOWEL, OR BLADDER CONTROL CAUSED BY CHRONIC CONDITIONS; ATTENTION TO OSTOMIES	MEDICAL AND SURGICAL TREATMENT (E.G., G-TUBES, J-TUBES, RESPIRATORS, TRACHEOSTOMY, UROLOGICAL PROCEDURES)
72	POLYCYTHEMIA NEONATORUM, SYMPTOMATIC	MEDICAL THERAPY
73	DERMATOMYOSITIS, POLYMYOSITIS	MEDICAL THERAPY
74	ADDISON'S DISEASE	MEDICAL THERAPY
75	HYPERTENSION AND HYPERTENSIVE DISEASE	MEDICAL THERAPY
76	PATENT DUCTUS ARTERIOSUS; AORTIC PULMONARY FISTULA/WINDOW	LIGATION
77	INJURY TO MAJOR BLOOD VESSELS	LIGATION/REPAIR
78	PHLEBITIS AND THROMBOPHLEBITIS, DEEP	MEDICAL THERAPY
79	INJURY TO INTERNAL ORGANS	MEDICAL AND SURGICAL TREATMENT
80	FRACTURE OF HIP	MEDICAL AND SURGICAL TREATMENT
81	MYOCARDITIS, PERICARDITIS, AND ENDOCARDITIS	MEDICAL AND SURGICAL TREATMENT
82	DEEP OPEN WOUND OF NECK, INCLUDING LARYNX; FRACTURE OF LARYNX OR TRACHEA	REPAIR
83	DIABETES MELLITUS WITH END STAGE RENAL DISEASE	SIMULTANEOUS PANCREAS/KIDNEY (SPK) TRANSPLANT, PANCREAS AFTER KIDNEY (PAK) TRANSPLANT
84	ENDOCARDIAL CUSHION DEFECTS	REPAIR
85	CONGENITAL PULMONARY VALVE ATRESIA	SHUNT/REPAIR
86	CONGENITAL ANOMALIES OF GENITOURINARY SYSTEM	RECONSTRUCTION
87	NECROTIZING ENTEROCOLITIS IN FETUS OR NEWBORN	MEDICAL AND SURGICAL TREATMENT
88	DISCORDANT CARDIOVASCULAR CONNECTIONS	REPAIR
89	CONGENITAL MITRAL VALVE STENOSIS/INSUFFICIENCY	MITRAL VALVE REPAIR/REPLACEMENT
90	GUILLAIN-BARRE SYNDROME	MEDICAL THERAPY
91	SEVERE/MODERATE HEAD INJURY: HEMATOMA/EDEMA WITH PERSISTENT SYMPTOMS	MEDICAL AND SURGICAL TREATMENT
92	CHILDHOOD LEUKEMIAS	MEDICAL THERAPY, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
93	UNDESCENDED TESTICLE	SURGICAL TREATMENT
94	HEREDITARY IMMUNE DEFICIENCIES	BONE MARROW TRANSPLANT
95	DIABETIC AND OTHER RETINOPATHY	MEDICAL, SURGICAL, AND LASER TREATMENT
96	BORDERLINE PERSONALITY DISORDER	MEDICAL/PSYCHOTHERAPY
97	HEART FAILURE	MEDICAL THERAPY
98	CARDIOMYOPATHY	MEDICAL AND SURGICAL TREATMENT
99	END STAGE RENAL DISEASE	RENAL TRANSPLANT
100	CONGENITAL ANOMALIES OF DIGESTIVE SYSTEM AND ABDOMINAL WALL EXCLUDING NECROSIS; CHRONIC INTESTINAL PSEUDO-OBSTRUCTION	MEDICAL AND SURGICAL TREATMENT

101	HEMOLYTIC DISEASE DUE TO ISOIMMUNIZATION, ANEMIA DUE TO TRANSPLACENTAL HEMORRHAGE, AND FETAL AND NEONATAL JAUNDICE	MEDICAL THERAPY
102	POISONING BY INGESTION, INJECTION, MEDICINAL AND NON-MEDICINAL AGENTS	MEDICAL THERAPY
103	BOTULISM	MEDICAL THERAPY
104	TETRALOGY OF FALLOT (TOF); CONGENITAL VENOUS ABNORMALITIES	REPAIR
105	CONGENITAL STENOSIS AND INSUFFICIENCY OF AORTIC VALVE	SURGICAL VALVE REPLACEMENT/VALVULOPLASTY
106	GIANT CELL ARTERITIS, POLYMYALGIA RHEUMATICA AND KAWASAKI DISEASE	MEDICAL THERAPY
107	FRACTURE OF RIBS AND STERNUM, OPEN	MEDICAL AND SURGICAL TREATMENT
108	SUBACUTE MENINGITIS (E.G., TUBERCULOSIS, CRYPTOCOCCOSIS)	MEDICAL THERAPY
109	COAGULATION DEFECTS AND THROMBOPHILIAS	MEDICAL THERAPY
110	CONGENITAL HEART BLOCK; OTHER OBSTRUCTIVE ANOMALIES OF HEART	MEDICAL THERAPY
111	CANCER OF TESTIS	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
112	CANCER OF EYE AND ORBIT	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
113	APLASTIC ANEMIAS; AGRANULOCYTOSIS; SICKLE CELL DISEASE	BONE MARROW TRANSPLANT
114	CHRONIC MYELOID LEUKEMIA	MEDICAL THERAPY, WHICH INCLUDES CHEMOTHERAPY, RADIATION AND RADIONUCLIDE THERAPY
115	HODGKIN'S DISEASE	BONE MARROW TRANSPLANT
116	FOREIGN BODY IN PHARYNX, LARYNX, TRACHEA, BRONCHUS AND ESOPHAGUS	REMOVAL OF FOREIGN BODY
117	NUTRITIONAL DEFICIENCIES	MEDICAL THERAPY
118	ATRIAL SEPTAL DEFECT, SECUNDUM	REPAIR SEPTAL DEFECT
119	CHOANAL ATRESIA	REPAIR OF CHOANAL ATRESIA
120	ABUSE AND NEGLECT	MEDICAL/PSYCHOTHERAPY
121	ATTENTION DEFICIT/HYPERACTIVITY DISORDERS	MEDICAL/PSYCHOTHERAPY
122	MALARIA, CHAGAS' DISEASE AND TRYPANOSOMIASIS	MEDICAL THERAPY
123	ANAPHYLACTIC SHOCK; EDEMA OF LARYNX	MEDICAL THERAPY
124	THYROTOXICOSIS WITH OR WITHOUT GOITER, ENDOCRINE EXOPHTHALMOS; CHRONIC THYROIDITIS	MEDICAL AND SURGICAL TREATMENT WHICH INCLUDES RADIATION THERAPY
125	BENIGN NEOPLASM OF THE BRAIN AND SPINAL CORD	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
126	ACUTE KIDNEY INJURY	MEDICAL THERAPY INCLUDING DIALYSIS
127	MODERATE BURNS	FREE SKIN GRAFT, MEDICAL THERAPY
128	COMMON TRUNCUS	TOTAL REPAIR/REPLANT ARTERY
129	GRANULOMATOSIS WITH POLYANGIITIS	MEDICAL THERAPY, WHICH INCLUDES RADIATION THERAPY
130	TOTAL ANOMALOUS PULMONARY VENOUS CONNECTION	COMPLETE REPAIR
131	CRUSH INJURIES OTHER THAN DIGITS; COMPARTMENT SYNDROME	MEDICAL AND SURGICAL TREATMENT
132	OPEN FRACTURE/DISLOCATION OF EXTREMITIES	MEDICAL AND SURGICAL TREATMENT

133	CANCER OF CERVIX	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
134	INTERRUPTED AORTIC ARCH	TRANSVERSE ARCH GRAFT
135	HODGKIN'S DISEASE	MEDICAL THERAPY, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
136	TRAUMATIC AMPUTATION OF LEG(S) (COMPLETE)(PARTIAL) WITH AND WITHOUT COMPLICATION	MEDICAL AND SURGICAL TREATMENT
137	OPPORTUNISTIC INFECTIONS IN IMMUNOCOMPROMISED HOSTS; CANDIDIASIS OF STOMA; PERSONS RECEIVING CONTINUOUS ANTIBIOTIC THERAPY	MEDICAL THERAPY
138	EBSTEIN'S ANOMALY	REPAIR SEPTAL DEFECT/VALVULOPLASTY/REPLACEMENT
139	GLAUCOMA, OTHER THAN PRIMARY ANGLE-CLOSURE	MEDICAL, SURGICAL AND LASER TREATMENT
140	MYASTHENIA GRAVIS	MEDICAL THERAPY, THYMECTOMY
141	SYSTEMIC LUPUS ERYTHEMATOSUS, OTHER DIFFUSE DISEASES OF CONNECTIVE TISSUE	MEDICAL THERAPY
142	CONDITIONS INVOLVING THE TEMPERATURE REGULATION OF NEWBORNS	MEDICAL THERAPY
143	PNEUMOTHORAX AND PLEURAL EFFUSION TUBE THORACOSTOMY	SURGICAL THERAPY, MEDICAL THERAPY
144	HYPOTHERMIA	MEDICAL THERAPY, EXTRACORPOREAL CIRCULATION
145	ANEMIA OF PREMATUREITY OR TRANSIENT NEONATAL NEUTROPENIA	MEDICAL THERAPY
146	ENTERIC INFECTIONS AND OTHER BACTERIAL FOOD POISONING	MEDICAL THERAPY
147	GLYCOGENOSIS	MEDICAL THERAPY
148	ACQUIRED HEMOLYTIC ANEMIAS	MEDICAL THERAPY
149	FEEDING AND EATING DISORDERS OF INFANCY OR CHILDHOOD	MEDICAL/PSYCHOTHERAPY
150	CERVICAL VERTEBRAL DISLOCATIONS/FRACTURES, OPEN OR CLOSED; OTHER VERTEBRAL DISLOCATIONS/FRACTURES, OPEN OR UNSTABLE; SPINAL CORD INJURIES WITH OR WITHOUT EVIDENCE OF VERTEBRAL INJURY	MEDICAL AND SURGICAL TREATMENT
151	DISORDERS OF MINERAL METABOLISM, OTHER THAN CALCIUM	MEDICAL THERAPY
152	NON-PULMONARY TUBERCULOSIS	MEDICAL THERAPY
153	PYOGENIC ARTHRITIS	MEDICAL AND SURGICAL TREATMENT
154	VASCULAR INSUFFICIENCY OF INTESTINE	SURGICAL TREATMENT
155	HERPES ZOSTER; HERPES SIMPLEX AND WITH NEUROLOGICAL AND OPHTHALMOLOGICAL COMPLICATIONS	MEDICAL THERAPY
156	ACROMEGALY AND GIGANTISM	MEDICAL THERAPY
157	CANCER OF COLON, RECTUM, SMALL INTESTINE AND ANUS	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
158	NON-HODGKIN'S LYMPHOMAS	MEDICAL THERAPY, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
159	TOXIC EPIDERMAL NECROLYSIS AND STAPHYLOCOCCAL SCALDED SKIN SYNDROME; STEVENS-JOHNSON SYNDROME; ERYTHEMA MULTIFORME MAJOR; ECZEMA HERPETICUM	MEDICAL THERAPY
160	TRAUMATIC AMPUTATION OF ARM(S), HAND(S), THUMB(S), AND	MEDICAL AND SURGICAL TREATMENT

	FINGER(S) (COMPLETE)(PARTIAL) WITH AND WITHOUT COMPLICATION	
161	GRANULOCYTE DISORDERS	MEDICAL THERAPY
162	NON-HODGKIN'S LYMPHOMAS	BONE MARROW TRANSPLANT
163	CARCINOMA IN SITU OF UPPER AIRWAY, INCLUDING ORAL CAVITY	INCISION/EXCISION, MEDICAL THERAPY
164	PREVENTIVE FOOT CARE IN HIGH-RISK PATIENTS	MEDICAL AND SURGICAL TREATMENT OF TOENAILS AND HYPERKERATOSES OF FOOT
165	ANAL, RECTAL AND COLONIC POLYPS	MEDICAL AND SURGICAL TREATMENT
166	GONOCOCCAL AND CHLAMYDIAL INFECTIONS OF THE EYE; NEONATAL CONJUNCTIVITIS	MEDICAL THERAPY
167	COMPLICATED HERNIAS; PERSISTENT HYDROCELE	REPAIR
168	NON-DIABETIC HYPOGLYCEMIC COMA	MEDICAL THERAPY
169	ACUTE MASTOIDITIS	MASTOIDECTOMY, MEDICAL THERAPY
170	AMEBIASIS	MEDICAL THERAPY
171	HYPERTENSIVE HEART AND RENAL DISEASE	MEDICAL THERAPY
172	POSTTRAUMATIC STRESS DISORDER	MEDICAL/PSYCHOTHERAPY
173	GENERALIZED CONVULSIVE OR PARTIAL EPILEPSY WITHOUT MENTION OF IMPAIRMENT OF CONSCIOUSNESS	SINGLE FOCAL SURGERY
174	POLYARTERITIS NODOSA AND ALLIED CONDITIONS	MEDICAL THERAPY
175	COMMON VENTRICLE	TOTAL REPAIR
176	DISORDERS OF AMINO-ACID TRANSPORT AND METABOLISM (NON PKU); HEREDITARY FRUCTOSE INTOLERANCE	MEDICAL THERAPY
177	INTRACEREBRAL HEMORRHAGE	MEDICAL THERAPY
178	ACUTE LEUKEMIA, MYELODYSPLASTIC SYNDROME	BONE MARROW TRANSPLANT
179	URETERAL STRICTURE OR OBSTRUCTION; HYDRONEPHROSIS; HYDROURETER	MEDICAL AND SURGICAL TREATMENT
180	CONDITIONS INVOLVING EXPOSURE TO NATURAL ELEMENTS (E.G., LIGHTNING STRIKE, HEATSTROKE)	MEDICAL THERAPY, BURN TREATMENT
181	SEPTICEMIA	MEDICAL THERAPY
182	FRACTURE OF PELVIS, OPEN AND CLOSED	MEDICAL AND SURGICAL TREATMENT
183	ACUTE OSTEOMYELITIS	MEDICAL AND SURGICAL TREATMENT
184	DIVERTICULITIS OF COLON	COLON RESECTION, MEDICAL THERAPY
185	RHEUMATIC MULTIPLE VALVULAR DISEASE	SURGICAL TREATMENT
186	CUSHING'S SYNDROME; HYPERALDOSTERONISM, OTHER CORTICOADRENAL OVERACTIVITY, MEDULLOADRENAL HYPERFUNCTION	MEDICAL THERAPY/ADRENALECTOMY
187	CONGENITAL TRICUSPID ATRESIA AND STENOSIS	REPAIR
188	CHRONIC ISCHEMIC HEART DISEASE	MEDICAL AND SURGICAL TREATMENT
189	NEOPLASMS OF ISLETS OF LANGERHANS	EXCISION OF TUMOR
190	CANCER OF BREAST; AT HIGH RISK OF BREAST CANCER	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY, RADIATION THERAPY AND BREAST RECONSTRUCTION
191	ANGIOEDEMA	MEDICAL THERAPY
192	AUTISM SPECTRUM DISORDERS	MEDICAL THERAPY/BEHAVIORAL MODIFICATION INCLUDING APPLIED BEHAVIOR ANALYSIS
193	HEREDITARY ANEMIAS, HEMOGLOBINOPATHIES, AND DISORDERS OF THE SPLEEN	MEDICAL THERAPY
194	ACUTE PANCREATITIS	MEDICAL THERAPY



195	SUBARACHNOID AND INTRACEREBRAL HEMORRHAGE/HEMATOMA; CEREBRAL ANEURYSM; COMPRESSION OF BRAIN	BURR HOLES, CRANIECTOMY/CRANIOTOMY
196	CONGENITAL LUNG ANOMALIES	MEDICAL AND SURGICAL TREATMENT
197	CHRONIC HEPATITIS; VIRAL HEPATITIS	MEDICAL THERAPY
198	CANCER OF SOFT TISSUE	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
199	CANCER OF BONES	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
200	CHRONIC ORGANIC MENTAL DISORDERS INCLUDING DEMENTIAS	MEDICAL THERAPY
201	SLEEP APNEA, NARCOLEPSY, INSOMNIA AND REM BEHAVIORAL DISORDER	MEDICAL AND SURGICAL TREATMENT
202	DEPRESSION AND OTHER MOOD DISORDERS, MILD OR MODERATE	MEDICAL/PSYCHOTHERAPY
203	PNEUMOCOCCAL PNEUMONIA, OTHER BACTERIAL PNEUMONIA, BRONCHOPNEUMONIA	MEDICAL THERAPY
204	SUPERFICIAL ABSCESES AND CELLULITIS	MEDICAL AND SURGICAL TREATMENT
205	ZOONOTIC BACTERIAL DISEASES	MEDICAL THERAPY
206	DEEP OPEN WOUND, WITH OR WITHOUT TENDON OR NERVE INVOLVEMENT	MEDICAL AND SURGICAL TREATMENT
207	CANCER OF UTERUS	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
208	RUPTURE OF LIVER	SUTURE/REPAIR
209	CANCER OF THYROID	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
210	NON-SUBSTANCE-RELATED ADDICTIVE BEHAVIORAL DISORDERS	MEDICAL/PSYCHOTHERAPY
211	BULLOUS DERMATOSES OF THE SKIN	MEDICAL THERAPY
212	ACUTE PULMONARY HEART DISEASE AND PULMONARY EMBOLI	MEDICAL AND SURGICAL TREATMENT
213	CANCER OF KIDNEY AND OTHER URINARY ORGANS	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
214	CANCER OF STOMACH	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
215	PORTAL VEIN THROMBOSIS	MEDICAL AND SURGICAL TREATMENT
216	SOLID CANCERS WITH INDICATIONS FOR BONE MARROW OR CELL TRANSPLANTATION	BONE MARROW RESCUE AND TRANSPLANT
217	DENTAL CONDITIONS (E.G., PERIODONTAL DISEASE)	BASIC PERIODONTICS
218	PULMONARY FIBROSIS	MEDICAL AND SURGICAL TREATMENT
219	DYSLIPIDEMIAS	MEDICAL THERAPY
220	DISORDERS OF FLUID, ELECTROLYTE, AND ACID-BASE BALANCE	MEDICAL THERAPY, DIALYSIS
221	OCCUPATIONAL LUNG DISEASES	MEDICAL THERAPY
222	DISEASES AND DISORDERS OF AORTIC VALVE	MEDICAL AND SURGICAL THERAPY
223	DISORDERS OF PARATHYROID GLAND; BENIGN NEOPLASM OF PARATHYROID GLAND; DISORDERS OF CALCIUM METABOLISM	MEDICAL AND SURGICAL TREATMENT
224	ACUTE INFLAMMATION OF THE HEART DUE TO RHEUMATIC FEVER	MEDICAL THERAPY

225	RUPTURED VISCUS	REPAIR
226	INTESTINAL MALABSORPTION	MEDICAL THERAPY
227	FRACTURE OF FACE BONES; INJURY TO OPTIC AND OTHER CRANIAL NERVES	SURGICAL TREATMENT
228	MALIGNANT MELANOMA OF SKIN	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
229	URINARY FISTULA	SURGICAL TREATMENT
230	MYCOBACTERIA, FUNGAL INFECTIONS, TOXOPLASMOSIS, AND OTHER OPPORTUNISTIC INFECTIONS	MEDICAL THERAPY
231	HYPOPLASTIC LEFT HEART SYNDROME	REPAIR
232	ADULT RESPIRATORY DISTRESS SYNDROME; ACUTE RESPIRATORY FAILURE; RESPIRATORY CONDITIONS DUE TO PHYSICAL AND CHEMICAL AGENTS	MEDICAL THERAPY
233	ACUTE LYMPHOCYTIC LEUKEMIAS (ADULT) AND MULTIPLE MYELOMA	MEDICAL THERAPY, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
234	LIMB THREATENING VASCULAR DISEASE, INFECTIONS, AND VASCULAR COMPLICATIONS	MEDICAL AND SURGICAL TREATMENT
235	TETANUS	MEDICAL THERAPY
236	ACUTE PROMYELOCYTIC LEUKEMIA	MEDICAL THERAPY, WHICH INCLUDES CHEMOTHERAPY, RADIATION AND RADIONUCLIDE THERAPY
237	CANCER OF OVARY	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
238	SHORT BOWEL SYNDROME	INTESTINE AND INTESTINE/LIVER TRANSPLANT
239	CONDITIONS REQUIRING HEART-LUNG AND LUNG TRANSPLANTATION	HEART-LUNG AND LUNG TRANSPLANT
240	DERMATOLOGICAL PREMALIGNANT LESIONS AND CARCINOMA IN SITU	DESTRUCT/EXCISION/MEDICAL THERAPY
241	PRIMARY ANGLE-CLOSURE GLAUCOMA	MEDICAL, SURGICAL AND LASER TREATMENT
242	CORNEAL ULCER; SUPERFICIAL INJURY OF EYE AND ADNEXA	CONJUNCTIVAL FLAP; MEDICAL THERAPY
243	TORSION OF TESTIS	ORCHIECTOMY, REPAIR
244	LIFE-THREATENING EPISTAXIS	SEPTOPLASTY/REPAIR/CONTROL HEMORRHAGE
245	RETAINED INTRAOCULAR FOREIGN BODY, MAGNETIC AND NONMAGNETIC	FOREIGN BODY REMOVAL
246	METABOLIC BONE DISEASE	MEDICAL THERAPY
247	PARKINSON'S DISEASE	MEDICAL THERAPY
248	CHRONIC PANCREATITIS	MEDICAL AND SURGICAL TREATMENT
249	MULTIPLE SCLEROSIS AND OTHER DEMYELINATING DISEASES OF CENTRAL NERVOUS SYSTEM	MEDICAL THERAPY
250	PSYCHOLOGICAL FACTORS AGGRAVATING PHYSICAL CONDITION (E.G., ASTHMA, CHRONIC GI CONDITIONS, HYPERTENSION)	MEDICAL/PSYCHOTHERAPY
251	ARTERIAL EMBOLISM/THROMBOSIS: ABDOMINAL AORTA, THORACIC AORTA	SURGICAL TREATMENT
252	CHRONIC OSTEOMYELITIS	MEDICAL AND SURGICAL TREATMENT
253	MULTIPLE ENDOCRINE NEOPLASIA	MEDICAL AND SURGICAL TREATMENT

254	DEFORMITIES OF HEAD AND HANDICAPPING MALOCCLUSION	CRANIOTOMY/CRANIECTOMY; ORTHODONTIA
255	DISEASES OF MITRAL, TRICUSPID, AND PULMONARY VALVES	VALVULOPLASTY, VALVE REPLACEMENT, MEDICAL THERAPY
256	CANCER OF PENIS AND OTHER MALE GENITAL ORGANS	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
257	CANCER OF ENDOCRINE SYSTEM, EXCLUDING THYROID; CARCINOID SYNDROME	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
258	MULTIPLE MYELOMA	BONE MARROW TRANSPLANT
259	CANCER OF RETROPERITONEUM, PERITONEUM, OMENTUM AND MESENTERY	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
260	CANCER OF LUNG, BRONCHUS, PLEURA, TRACHEA, MEDIASTINUM AND OTHER RESPIRATORY ORGANS	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
261	CONDITIONS REQUIRING LIVER TRANSPLANT	LIVER TRANSPLANT
262	CONGESTIVE HEART FAILURE, CARDIOMYOPATHY, MALIGNANT ARRHYTHMIAS, AND COMPLEX CONGENITAL HEART DISEASE	CARDIAC TRANSPLANT; HEART/KIDNEY TRANSPLANT
263	TRACHOMA	MEDICAL THERAPY
264	ACUTE, SUBACUTE, CHRONIC AND OTHER TYPES OF IRIDOCYCLITIS	MEDICAL THERAPY
265	DENTAL CONDITIONS (TIME SENSITIVE EVENTS)	URGENT DENTAL SERVICES
266	RICKETTSIAL AND OTHER ARTHROPOD-BORNE DISEASES	MEDICAL THERAPY
267	DIABETES INSIPIDUS	MEDICAL THERAPY
268	ADVANCED DEGENERATIVE DISORDERS AND CONDITIONS OF GLOBE	ENUCLEATION
269	CANCER OF BLADDER AND URETER	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
270	TRAUMATIC AMPUTATION OF FOOT/FEET (COMPLETE)(PARTIAL) WITH AND WITHOUT COMPLICATION	MEDICAL AND SURGICAL TREATMENT
271	LEPROSY, YAWS, PINTA	MEDICAL THERAPY
272	RETINOPATHY OF PREMATURITY	CRYOSURGERY
273	UROLOGIC INFECTIONS	MEDICAL THERAPY
274	CANCER OF SKIN, EXCLUDING MALIGNANT MELANOMA	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
275	OTHER PSYCHOTIC DISORDERS	MEDICAL/PSYCHOTHERAPY
276	HYDROPS FETALIS	MEDICAL THERAPY
277	RETINAL DETACHMENT AND OTHER RETINAL DISORDERS	RETINAL REPAIR, VITRECTOMY
278	BUDD-CHIARI SYNDROME, AND OTHER VENOUS EMBOLISM AND THROMBOSIS	THROMBECTOMY/LIGATION
279	LIFE-THREATENING CARDIAC ARRHYTHMIAS	MEDICAL AND SURGICAL TREATMENT
280	ANOREXIA NERVOSA	MEDICAL/PSYCHOTHERAPY
281	CHRONIC OBSTRUCTIVE PULMONARY DISEASE; CHRONIC RESPIRATORY FAILURE	MEDICAL THERAPY
282	DISSECTING OR RUPTURED AORTIC ANEURYSM	MEDICAL AND SURGICAL TREATMENT
283	COMPLICATIONS OF A PROCEDURE ALWAYS REQUIRING TREATMENT	MEDICAL AND SURGICAL TREATMENT

284	CANCER OF VAGINA, VULVA, AND OTHER FEMALE GENITAL ORGANS	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
285	CANCER OF ORAL CAVITY, PHARYNX, NOSE AND LARYNX	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
286	OSTEOPETROSIS	BONE MARROW RESCUE AND TRANSPLANT
287	CRUSH AND OTHER INJURIES OF DIGITS	MEDICAL AND SURGICAL TREATMENT
288	ACUTE STRESS DISORDER	MEDICAL/PSYCHOTHERAPY
289	ADRENAL OR CUTANEOUS HEMORRHAGE OF FETUS OR NEONATE	MEDICAL THERAPY
290	NEUROLOGICAL DYSFUNCTION IN POSTURE AND MOVEMENT CAUSED BY CHRONIC CONDITIONS	MEDICAL AND SURGICAL TREATMENT (E.G., DURABLE MEDICAL EQUIPMENT AND ORTHOPEDIC PROCEDURE)
291	ANOMALIES OF GALLBLADDER, BILE DUCTS, AND LIVER	MEDICAL AND SURGICAL TREATMENT
292	CANCER OF BRAIN AND NERVOUS SYSTEM	LINEAR ACCELERATOR, MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
293	APLASTIC ANEMIAS	MEDICAL THERAPY
294	CATARACT	EXTRACTION OF CATARACT
295	AFTER CATARACT	DISCISSION, LENS CAPSULE
296	FISTULA INVOLVING FEMALE GENITAL TRACT	CLOSURE OF FISTULA
297	VITREOUS DISORDERS	VITRECTOMY
298	CLEFT PALATE AND/OR CLEFT LIP	EXCISION AND REPAIR VESTIBULE OF MOUTH, ORTHODONTICS
299	GOUT	MEDICAL THERAPY
300	PERTUSSIS AND DIPHTHERIA	MEDICAL THERAPY
301	THROMBOCYTOPENIA	MEDICAL AND SURGICAL TREATMENT
302	VIRAL PNEUMONIA	MEDICAL THERAPY
303	DISORDERS OF ARTERIES, OTHER THAN CAROTID OR CORONARY	MEDICAL AND SURGICAL TREATMENT
304	PARALYTIC ILEUS	MEDICAL AND SURGICAL TREATMENT
305	CHRONIC INFLAMMATORY DISORDER OF ORBIT	MEDICAL THERAPY
306	CONGENITAL DISLOCATION OF HIP; COXA VARA AND VALGA	SURGICAL TREATMENT
307	CORNEAL OPACITY AND OTHER DISORDERS OF CORNEA	KERATOPLASTY
308	HEARING LOSS - AGE 5 OR UNDER	MEDICAL THERAPY INCLUDING HEARING AIDS, LIMITED SURGICAL THERAPY
309	GENDER AFFIRMING TREATMENT	MEDICAL AND SURGICAL TREATMENT/PSYCHOTHERAPY
310	DISORDERS INVOLVING THE IMMUNE SYSTEM	MEDICAL THERAPY
311	CANCER OF ESOPHAGUS; BARRETT'S ESOPHAGUS WITH DYSPLASIA	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
312	CANCER OF LIVER	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
313	CANCER OF PANCREAS	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
314	STROKE	MEDICAL THERAPY

315	PURULENT ENDOPHTHALMITIS	VITRECTOMY
316	FOREIGN BODY IN CORNEA AND CONJUNCTIVAL SAC	REMOVAL CONJUNCTIVAL FOREIGN BODY
317	OBESE IN ADULTS AND CHILDREN; OVERWEIGHT STATUS IN ADULTS WITH CARDIOVASCULAR RISK FACTORS	BEHAVIORAL INTERVENTIONS INCLUDING INTENSIVE NUTRITIONAL AND PHYSICAL ACTIVITY COUNSELING; BARIATRIC SURGERY
318	DERMATOLOGIC HEMANGIOMAS, COMPLICATED; PORT WINE STAINS	MEDICAL THERAPY
319	OTHER ANEURYSM OF PERIPHERAL ARTERY	SURGICAL TREATMENT
320	SIALOADENITIS, ABSCESS, FISTULA OF SALIVARY GLANDS	MEDICAL AND SURGICAL TREATMENT
321	CYSTICERCOSIS, OTHER CESTODE INFECTION, TRICHINOSIS	MEDICAL THERAPY
322	NON-DISSECTING ANEURYSM WITHOUT RUPTURE	SURGICAL TREATMENT
323	SENSORINEURAL HEARING LOSS	COCHLEAR IMPLANT
324	FUNCTIONAL AND MECHANICAL DISORDERS OF THE GENITOURINARY SYSTEM INCLUDING BLADDER OUTLET OBSTRUCTION	MEDICAL AND SURGICAL TREATMENT
325	DISSEMINATED INTRAVASCULAR COAGULATION	MEDICAL AND SURGICAL TREATMENT
326	CANCER OF PROSTATE GLAND	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
327	SYSTEMIC SCLEROSIS; SJOGREN'S SYNDROME	MEDICAL THERAPY
328	ACUTE PROMYELOCYTIC LEUKEMIA	BONE MARROW TRANSPLANT
329	CONDITIONS REQUIRING HYPERBARIC OXYGEN THERAPY	HYPERBARIC OXYGEN
330	BENIGN CEREBRAL CYSTS	DRAINAGE
331	ALCOHOLIC FATTY LIVER OR ALCOHOLIC HEPATITIS, CIRRHOSIS OF LIVER	MEDICAL THERAPY
332	SCLERITIS	MEDICAL THERAPY
333	RUBEOSIS AND OTHER DISORDERS OF THE IRIS	LASER SURGERY
334	WOUND OF EYE GLOBE	SURGICAL REPAIR
335	ACUTE NECROSIS OF LIVER	MEDICAL THERAPY
336	CHRONIC KIDNEY DISEASE	MEDICAL THERAPY INCLUDING DIALYSIS
337	HEREDITARY HEMORRHAGIC TELANGIECTASIA	EXCISION
338	RHEUMATIC FEVER	MEDICAL THERAPY
339	OTHER AND UNSPECIFIED ANTERIOR PITUITARY HYPERFUNCTION, BENIGN NEOPLASM OF THYROID GLAND AND OTHER ENDOCRINE GLANDS	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES RADIATION THERAPY
340	DENTAL CONDITIONS (E.G., CARIES, FRACTURED TOOTH)	BASIC RESTORATIVE (E.G., COMPOSITE RESTORATIONS FOR ANTERIOR TEETH, AMALGAM RESTORATIONS FOR POSTERIOR TEETH)
341	DENTAL CONDITIONS (E.G., SEVERE CARIES, INFECTION)	ORAL SURGERY (I.E., EXTRACTIONS AND OTHER INTRAORAL SURGICAL PROCEDURES)
342	NEUROLOGICAL DYSFUNCTION IN COMMUNICATION CAUSED BY CHRONIC CONDITIONS	MEDICAL THERAPY
343	CONDITIONS OF THE BACK AND SPINE WITH URGENT SURGICAL INDICATIONS	SURGICAL THERAPY
344	CARDIAC ARRHYTHMIAS	MEDICAL THERAPY, PACEMAKER
345	MILD/MODERATE BIRTH TRAUMA FOR BABY	MEDICAL THERAPY
346	NON-LIMB THREATENING PERIPHERAL VASCULAR DISEASE	SURGICAL TREATMENT

347	SARCOIDOSIS	MEDICAL THERAPY
348	STRABISMUS DUE TO NEUROLOGIC DISORDER	MEDICAL AND SURGICAL TREATMENT
349	URINARY SYSTEM CALCULUS	MEDICAL AND SURGICAL TREATMENT
350	STRUCTURAL CAUSES OF AMENORRHEA	SURGICAL TREATMENT
351	PENETRATING WOUND OF ORBIT	MEDICAL AND SURGICAL TREATMENT
352	CLOSED FRACTURE OF EXTREMITIES (EXCEPT MINOR TOES)	OPEN OR CLOSED REDUCTION
353	RHEUMATOID ARTHRITIS, OSTEOARTHRITIS, OSTEOCHONDRITIS DISSECANS, AND ASEPTIC NECROSIS OF BONE	ARTHROPLASTY/RECONSTRUCTION
354	CONDITIONS OF PULMONARY ARTERY	SURGICAL TREATMENT
355	BODY INFESTATIONS (E.G., LICE, SCABIES)	MEDICAL THERAPY
356	DEFORMITY/CLOSED DISLOCATION OF JOINT AND RECURRENT JOINT DISLOCATIONS	SURGICAL TREATMENT
357	CHORIORETINAL INFLAMMATION	MEDICAL, SURGICAL, AND LASER TREATMENT
358	SCOLIOSIS	MEDICAL AND SURGICAL THERAPY
359	DYSTONIA (UNCONTROLLABLE); LARYNGEAL SPASM	MEDICAL THERAPY
360	CYST AND PSEUDOCYST OF PANCREAS	DRAINAGE OF PANCREATIC CYST
361	ACUTE SINUSITIS	MEDICAL TREATMENT
362	HYPHEMA	REMOVAL OF BLOOD CLOT
363	ALLERGIC BRONCHOPULMONARY ASPERGILLOSIS	MEDICAL THERAPY
364	ENTROPION AND TRICHIASIS OF EYELID	REPAIR
365	STREPTOCOCCAL SORE THROAT AND SCARLET FEVER; VINCENT'S DISEASE; ULCER OF TONSIL; UNILATERAL HYPERTROPHY OF TONSIL	MEDICAL THERAPY, TONSILLECTOMY/ADENOIDECTOMY
366	INTESTINAL PARASITES	MEDICAL THERAPY
367	AMBLYOPIA	MEDICAL AND SURGICAL TREATMENT
368	ENCEPHALOCELE	SURGICAL TREATMENT
369	BENIGN NEOPLASM OF RESPIRATORY AND INTRATHORACIC ORGANS	LOBECTOMY, MEDICAL THERAPY, WHICH INCLUDES RADIATION THERAPY
370	ACNE CONGLOBATA AND ACNE FULMINANS	MEDICAL AND SURGICAL TREATMENT
371	RETINAL TEAR	LASER PROPHYLAXIS
372	CHOLESTEATOMA; INFECTIONS OF THE PINNA	MEDICAL AND SURGICAL TREATMENT
373	DISRUPTIONS OF THE LIGAMENTS AND TENDONS OF THE ARMS AND LEGS, EXCLUDING THE KNEE, RESULTING IN SIGNIFICANT INJURY/IMPAIRMENT	REPAIR, MEDICAL THERAPY
374	DYSFUNCTION RESULTING IN LOSS OF ABILITY TO MAXIMIZE LEVEL OF INDEPENDENCE IN SELF-DIRECTED CARE CAUSED BY CHRONIC CONDITIONS THAT CAUSE NEUROLOGICAL DYSFUNCTION	MEDICAL THERAPY (SHORT-TERM REHABILITATION WITH DEFINED GOALS)
375	ESOPHAGEAL STRICTURE; ACHALASIA	MEDICAL AND SURGICAL TREATMENT
376	CHRONIC ULCER OF SKIN; VARICOSE VEINS WITH MAJOR COMPLICATIONS	MEDICAL AND SURGICAL TREATMENT
377	ESOPHAGITIS; ESOPHAGEAL AND INTRAESOPHAGEAL HERNIAS; GERD	SHORT-TERM MEDICAL THERAPY; SURGICAL TREATMENT
378	BULIMIA NERVOSA AND UNSPECIFIED EATING DISORDERS	MEDICAL/PSYCHOTHERAPY
379	LATE SYPHILIS	MEDICAL THERAPY
380	CENTRAL SEROUS CHORIORETINOPATHY	MEDICAL AND SURGICAL TREATMENT
381	DENTAL CONDITIONS (E.G., PULPAL PATHOLOGY, PERMANENT ANTERIOR TOOTH)	BASIC ENDODONTICS (I.E., ROOT CANAL THERAPY)

382	SUPERFICIAL INJURIES WITH INFECTION	MEDICAL AND SURGICAL TREATMENT
383	PITUITARY DWARFISM	MEDICAL THERAPY
384	ANOGENITAL VIRAL WARTS	MEDICAL AND SURGICAL TREATMENT
385	SEPARATION ANXIETY DISORDER	MEDICAL/PSYCHOTHERAPY
386	ACUTE OTITIS MEDIA	MEDICAL AND SURGICAL TREATMENT
387	INTESTINAL DISACCHARIDASE AND OTHER DEFICIENCIES	MEDICAL THERAPY
388	PANIC DISORDER; AGORAPHOBIA	MEDICAL/PSYCHOTHERAPY
389	CROUP SYNDROME, EPIGLOTTITIS, ACUTE LARYNGOTRACHEITIS	MEDICAL THERAPY, INTUBATION, TRACHEOTOMY
390	STRABISMUS WITHOUT AMBLYOPIA AND OTHER DISORDERS OF BINOCULAR EYE MOVEMENTS; CONGENITAL ANOMALIES OF EYE; LACRIMAL DUCT OBSTRUCTION IN CHILDREN	MEDICAL AND SURGICAL TREATMENT
391	ANAL FISTULA	SPHINCTEROTOMY, FISSURECTOMY, FISTULECTOMY, MEDICAL THERAPY
392	ENDOMETRIOSIS AND ADENOMYOSIS	MEDICAL AND SURGICAL TREATMENT
393	ACUTE MYELOID LEUKEMIA	BONE MARROW TRANSPLANT AND MEDICAL THERAPY, WHICH INCLUDES CHEMOTHERAPY, RADIATION AND RADIONUCLIDE THERAPY
394	MYELOID DISORDERS	MEDICAL THERAPY, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
395	SECONDARY AND ILL-DEFINED MALIGNANT NEOPLASMS	MEDICAL AND SURGICAL TREATMENT
396	SEVERE SACROILIITIS	SURGICAL THERAPY
397	INFLUENZA, COVID-19 AND OTHER NOVEL RESPIRATORY VIRAL ILLNESS	MEDICAL THERAPY
398	CHRONIC MYELOID LEUKEMIA	BONE MARROW TRANSPLANT
399	BENIGN CONDITIONS OF BONE AND JOINTS AT HIGH RISK FOR COMPLICATIONS	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
400	CONDITIONS OF THE BACK AND SPINE	RISK ASSESSMENT, PHYSICAL MODALITIES, COGNITIVE BEHAVIORAL THERAPY, MEDICAL THERAPY
401	LYMPHADENITIS	MEDICAL AND SURGICAL TREATMENT
402	UTERINE LEIOMYOMA	SURGICAL TREATMENT
403	APHAKIA AND OTHER DISORDERS OF LENS	MEDICAL AND SURGICAL THERAPY
404	ANOMALIES OF EXTERNAL EAR WITH IMPAIRMENT OF HEARING	RECONSTRUCT OF EAR CANAL
405	DISSOCIATIVE DISORDERS	MEDICAL/PSYCHOTHERAPY
406	EPIDERMOLYSIS BULLOSA	MEDICAL THERAPY
407	DELIRIUM DUE TO MEDICAL CAUSES	MEDICAL THERAPY
408	MIGRAINE AND TENSION HEADACHES	MEDICAL THERAPY
409	DENTAL CONDITIONS (E.G., PULPAL PATHOLOGY, PERMANENT BICUSPID/PREMOLAR TOOTH)	BASIC ENDODONTICS (I.E., ROOT CANAL THERAPY)
410	SCHIZOTYPAL PERSONALITY DISORDERS	MEDICAL/PSYCHOTHERAPY
411	BALANOPOSTHITIS AND OTHER DISORDERS OF PENIS	MEDICAL AND SURGICAL TREATMENT
412	OVERANXIOUS DISORDER; GENERALIZED ANXIETY DISORDER; ANXIETY DISORDER, UNSPECIFIED	MEDICAL/PSYCHOTHERAPY
413	TRANSIENT CEREBRAL ISCHEMIA; OCCLUSION/STENOSIS OF PRECEREBRAL ARTERIES WITHOUT OCCLUSION	MEDICAL THERAPY; THROMBOENDARTERECTOMY
414	PERIPHERAL NERVE ENTRAPMENT; PALMAR FASCIAL	MEDICAL AND SURGICAL TREATMENT

	FIBROMATOSIS	
415	DISORDERS OF SHOULDER, INCLUDING SPRAINS/STRAINS GRADE 4 THROUGH 6	REPAIR/RECONSTRUCTION, MEDICAL THERAPY
416	MODERATE TO SEVERE HIDRADENITIS SUPPURATIVA	MEDICAL AND SURGICAL THERAPY
417	CHRONIC LEUKEMIAS WITH POOR PROGNOSIS	MEDICAL THERAPY, WHICH INCLUDES CHEMOTHERAPY, RADIATION AND RADIONUCLIDE THERAPY
418	OPPOSITIONAL DEFIANT DISORDER; CONDUCT DISORDER AGE 18 OR UNDER	MEDICAL/PSYCHOTHERAPY
419	UTERINE POLYPS	MEDICAL AND SURGICAL TREATMENT
420	LYMPHEDEMA	MEDICAL THERAPY, OTHER OPERATION ON LYMPH CHANNEL
421	MENSTRUAL BLEEDING DISORDERS	MEDICAL AND SURGICAL TREATMENT
422	COMPLICATIONS OF A PROCEDURE USUALLY REQUIRING TREATMENT	MEDICAL AND SURGICAL TREATMENT
423	ADRENOGENITAL DISORDERS	MEDICAL AND SURGICAL TREATMENT
424	SEVERE INFLAMMATORY SKIN DISEASE	MEDICAL THERAPY
425	NON-MALIGNANT OTITIS EXTERNA	MEDICAL THERAPY
426	VAGINITIS AND CERVICITIS	MEDICAL THERAPY
427	FOREIGN BODY IN EAR AND NOSE; CERUMEN IMPACTION	REMOVAL OF FOREIGN BODY
428	NONINFLAMMATORY DISORDERS AND BENIGN NEOPLASMS OF OVARY, FALLOPIAN TUBES AND UTERUS; OVARIAN CYSTS; GONADAL DYSGENESIS	MEDICAL AND SURGICAL TREATMENT
429	URETHRAL FISTULA	EXCISION, MEDICAL THERAPY
430	INTERNAL DERANGEMENT OF KNEE AND LIGAMENTOUS DISRUPTIONS OF THE KNEE, RESULTING IN SIGNIFICANT INJURY/IMPAIRMENT	REPAIR, MEDICAL THERAPY
431	PERSISTENT DEPRESSIVE DISORDER	MEDICAL/PSYCHOTHERAPY
432	HYPOSPADIAS AND EPISPADIAS	REPAIR
433	CANCER OF GALLBLADDER AND OTHER BILIARY	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND RADIATION THERAPY
434	PRECANCEROUS VULVAR CONDITIONS	MEDICAL THERAPY
435	RECURRENT EROSION OF THE CORNEA	ANTERIAL STROMAL PUNCTURE, REMOVAL OF CORNEAL EPITHELIUM; WITH OR WITHOUT CHEMOCAUTERIZATION
436	STEREOTYPED MOVEMENT DISORDER WITH SELF-INJURIOUS BEHAVIOR DUE TO NEURODEVELOPMENTAL DISORDER	CONSULTATION/MEDICATION MANAGEMENT/LIMITED BEHAVIORAL MODIFICATION
437	FOREIGN BODY IN UTERUS, VULVA AND VAGINA	MEDICAL AND SURGICAL TREATMENT
438	RESIDUAL FOREIGN BODY IN SOFT TISSUE	REMOVAL
439	VENOUS TRIBUTARY (BRANCH) OCCLUSION; CENTRAL RETINAL VEIN OCCLUSION	SURGICAL TREATMENT INCLUDING LASER SURGERY, MEDICAL THERAPY INCLUDING INJECTION
440	TRIGEMINAL AND OTHER NERVE DISORDERS	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES RADIATION THERAPY
441	MALUNION AND NONUNION OF FRACTURE	SURGICAL TREATMENT
442	DENTAL CONDITIONS (E.G., PULPAL PATHOLOGY, PERMANENT MOLAR TOOTH)	BASIC ENDODONTICS (I.E., ROOT CANAL THERAPY)
443	ADJUSTMENT DISORDERS	MEDICAL/PSYCHOTHERAPY
444	HEARING LOSS - OVER AGE OF FIVE	MEDICAL THERAPY INCLUDING HEARING



		AIDS, LIMITED SURGICAL THERAPY
445	TOURETTE'S DISORDER AND TIC DISORDERS	MEDICAL/PSYCHOTHERAPY
446	ATHEROSCLEROSIS, AORTIC AND RENAL	MEDICAL AND SURGICAL TREATMENT
447	DEGENERATION OF MACULA AND POSTERIOR POLE	MEDICAL, SURGICAL AND LASER TREATMENT
448	REACTIVE ATTACHMENT DISORDER OF INFANCY OR EARLY CHILDHOOD	MEDICAL/PSYCHOTHERAPY
449	DISORDERS OF REFRACTION AND ACCOMMODATION	MEDICAL THERAPY
450	EXOPHTHALMOS AND CYSTS OF THE EYE AND ORBIT	SURGICAL TREATMENT
451	SEVERE CYSTIC ACNE	MEDICAL AND SURGICAL TREATMENT
452	DENTAL CONDITIONS (E.G., MISSING TEETH, PROSTHESIS FAILURE)	REMOVABLE PROSTHODONTICS (E.G., FULL AND PARTIAL DENTURES, RELINES)
453	RECTAL PROLAPSE	SURGICAL TREATMENT
454	DENTAL CONDITIONS (E.G., PULPAL PATHOLOGY, PERMANENT ANTERIOR TOOTH)	ADVANCED ENDODONTICS (E.G., RETREATMENT OF PREVIOUS ROOT CANAL THERAPY)
455	URINARY INCONTINENCE	MEDICAL AND SURGICAL TREATMENT
456	DISORDERS OF PLASMA PROTEIN METABOLISM	MEDICAL THERAPY
457	SIMPLE PHOBIAS AND SOCIAL ANXIETY DISORDER	MEDICAL/PSYCHOTHERAPY
458	ACUTE BRONCHITIS AND BRONCHIOLITIS	MEDICAL THERAPY
459	CENTRAL PTERYGIUM AFFECTING VISION	EXCISION OR TRANSPOSITION OF PTERYGIUM WITHOUT GRAFT, RADIATION THERAPY
460	BRANCHIAL CLEFT CYST; THYROGLOSSAL DUCT CYST; CYST OF PHARYNX OR NASOPHARYNX	EXCISION, MEDICAL THERAPY
461	OBSESSIVE-COMPULSIVE DISORDERS	MEDICAL/PSYCHOTHERAPY
462	OSTEOARTHRITIS AND ALLIED DISORDERS	MEDICAL THERAPY, INJECTIONS
463	ATELECTASIS (COLLAPSE OF LUNG)	MEDICAL THERAPY
464	CHRONIC SINUSITIS	MEDICAL AND SURGICAL TREATMENT
465	BRACHIAL PLEXUS LESIONS	MEDICAL THERAPY
466	UTERINE PROLAPSE; CYSTOCELE	MEDICAL AND SURGICAL TREATMENT
467	DENTAL CONDITIONS (E.G., CARIES, FRACTURED TOOTH)	ADVANCED RESTORATIVE (I.E., BASIC CROWNS)
468	GONADAL DYSFUNCTION, MENOPAUSAL MANAGEMENT	OOPHORECTOMY, ORCHIECTOMY, HORMONAL REPLACEMENT FOR PURPOSES OTHER THAN INFERTILITY
469	ENCOPRESIS NOT DUE TO A PHYSIOLOGICAL CONDITION	MEDICAL/PSYCHOTHERAPY
470	ACQUIRED PTOSIS AND OTHER EYELID DISORDERS WITH VISION IMPAIRMENT	PTOSIS REPAIR
<b>Equivalent to the funding level for the 2024–2025 Prioritized List</b>		
471	KERATOCONJUNCTIVITIS	MEDICAL AND SURGICAL TREATMENT
472	CHRONIC OTITIS MEDIA; OPEN WOUND OF EAR DRUM	PE TUBES/ADENOIDECTOMY/TYMPANOPLASTY, MEDICAL THERAPY
473	OTOSCLEROSIS	MEDICAL AND SURGICAL TREATMENT
474	CLOSED DISLOCATIONS/FRACTURES OF NON-CERVICAL VERTEBRAL COLUMN WITHOUT NEUROLOGIC INJURY OR STRUCTURAL INSTABILITY	MEDICAL AND SURGICAL TREATMENT
475	BREAST CYSTS AND OTHER DISORDERS OF THE BREAST	MEDICAL AND SURGICAL TREATMENT
476	CYSTS OF BARTHOLIN'S GLAND AND VULVA	INCISION AND DRAINAGE, MEDICAL

		THERAPY
477	MILD/MODERATE LICHEN PLANUS	MEDICAL THERAPY
478	RUPTURE OF SYNOVIUM	REMOVAL OF BAKER'S CYST
479	BELL'S PALSY, EXPOSURE KERATOCONJUNCTIVITIS	TARSORRHAPHY
480	PERIPHERAL ENTHESOPATHIES	MEDICAL THERAPY
481	CLOSED FRACTURE OF ONE OR MORE PHALANGES OF THE FOOT, NOT INCLUDING THE GREAT TOE	MEDICAL AND SURGICAL TREATMENT
482	DERMATOPHYTOSIS OF NAIL, GROIN, AND FOOT AND OTHER DERMATOMYCOSIS	MEDICAL AND SURGICAL TREATMENT
483	CLOSED FRACTURES OF RIBS, STERNUM AND COCCYX	MEDICAL THERAPY
484	DENTAL CONDITIONS (E.G., PERIODONTAL DISEASE)	ADVANCED PERIODONTICS (E.G., SURGICAL PROCEDURES AND SPLINTING)
485	PARAPHILIAS AND OTHER PSYCHOSEXUAL DISORDERS	MEDICAL/PSYCHOTHERAPY
486	ECTROPION AND BENIGN NEOPLASM OF EYE	ECTROPION REPAIR
487	RAYNAUD'S SYNDROME	MEDICAL THERAPY
488	HYDROXYAPETITE DEPOSITION DISEASE	MEDICAL THERAPY
489	PHIMOSIS	SURGICAL TREATMENT
490	SIALOLITHIASIS, MUCOCELE, DISTURBANCE OF SALIVARY SECRETION, OTHER AND UNSPECIFIED DISEASES OF SALIVARY GLANDS	MEDICAL AND SURGICAL TREATMENT
491	CHRONIC CONJUNCTIVITIS, BLEPHAROCONJUNCTIVITIS	MEDICAL THERAPY
492	OTHER DISORDERS OF SYNOVIUM, TENDON AND BURSA, COSTOCHONDRITIS, AND CHONDRODYSSTROPHY	MEDICAL THERAPY
493	ERYTHEMATOUS CONDITIONS	MEDICAL THERAPY
494	PERIPHERAL ENTHESOPATHIES	SURGICAL TREATMENT
495	NASAL POLYPS, OTHER DISORDERS OF NASAL CAVITY AND SINUSES	MEDICAL AND SURGICAL TREATMENT
496	DENTAL CONDITIONS (E.G., PULPAL PATHOLOGY, PERMANENT BICUSPID/PREMOLAR TOOTH)	ADVANCED ENDODONTICS (E.G., RETREATMENT OF PREVIOUS ROOT CANAL THERAPY)
497	CIRCUMSCRIBED SCLERODERMA	MEDICAL THERAPY
498	PERIPHERAL NERVE DISORDERS	MEDICAL THERAPY
499	DYSFUNCTION OF NASOLACRIMAL SYSTEM IN ADULTS; LACRIMAL SYSTEM LACERATION	MEDICAL AND SURGICAL TREATMENT
500	BENIGN NEOPLASM OF KIDNEY AND OTHER URINARY ORGANS	MEDICAL AND SURGICAL TREATMENT
501	VERTIGINOUS SYNDROMES AND OTHER DISORDERS OF VESTIBULAR SYSTEM	MEDICAL AND SURGICAL TREATMENT
502	MILD HIDRADENITIS SUPPURATIVA; DISSECTING CELLULITIS OF THE SCALP	MEDICAL THERAPY
503	CHRONIC PROSTATITIS, OTHER DISORDERS OF PROSTATE	MEDICAL THERAPY
504	PHLEBITIS AND THROMBOPHLEBITIS, SUPERFICIAL	MEDICAL THERAPY
505	DISORDERS OF SWEAT GLANDS	MEDICAL THERAPY
506	PARALYSIS OF VOCAL CORDS OR LARYNX	INCISION/EXCISION/ENDOSCOPY
507	POSTTHROMBOTIC SYNDROME	MEDICAL THERAPY
508	PANNICULITIS	MEDICAL THERAPY
509	ROSACEA; MILD/MODERATE ACNE	MEDICAL AND SURGICAL TREATMENT
510	SEXUAL DYSFUNCTION	PSYCHOTHERAPY, MEDICAL AND SURGICAL TREATMENT

511	UNCOMPLICATED HERNIA AND VENTRAL HERNIA	REPAIR
512	BENIGN NEOPLASM OF NASAL CAVITIES, MIDDLE EAR AND ACCESSORY SINUSES	EXCISION, RECONSTRUCTION
513	CHRONIC ANAL FISSURE	SPHINCTEROTOMY, FISSURECTOMY, FISTULECTOMY, MEDICAL THERAPY
514	MENIERE'S DISEASE	MEDICAL AND SURGICAL TREATMENT
515	DEFORMITIES OF UPPER BODY AND ALL LIMBS	REPAIR/REVISION/RECONSTRUCTION/RELOCATION/MEDICAL THERAPY
516	DISORDERS OF FUNCTION OF STOMACH AND OTHER FUNCTIONAL DIGESTIVE DISORDERS	MEDICAL AND SURGICAL THERAPY
517	CONDITIONS OF THE BACK AND SPINE WITHOUT URGENT SURGICAL INDICATIONS	SURGICAL THERAPY
518	FIBROMYALGIA, CHRONIC FATIGUE SYNDROME, AND RELATED DISORDERS	MEDICAL THERAPY
519	CHRONIC PELVIC INFLAMMATORY DISEASE, PELVIC PAIN SYNDROME, DYSPAREUNIA	MEDICAL AND SURGICAL TREATMENT
520	MILD ECZEMA	MEDICAL THERAPY
521	CONTACT DERMATITIS AND NON-INFECTIOUS OTITIS EXTERNA	MEDICAL THERAPY
522	HYPOTENSION	MEDICAL THERAPY
523	VIRAL, SELF-LIMITING ENCEPHALITIS, MYELITIS AND ENCEPHALOMYELITIS	MEDICAL THERAPY
524	PERIPHERAL NERVE DISORDERS	SURGICAL TREATMENT
525	DENTAL CONDITIONS (E.G., PULPAL PATHOLOGY, PERMANENT MOLAR TOOTH)	ADVANCED ENDODONTICS (E.G., RETREATMENT OF PREVIOUS ROOT CANAL THERAPY)
526	LESION OF PLANTAR NERVE; PLANTAR FASCIAL FIBROMATOSIS	MEDICAL THERAPY, EXCISION
527	TENSION HEADACHES	MEDICAL THERAPY
528	MILD PSORIASIS; DERMATOPHYTOSIS: SCALP, HAND, BODY	MEDICAL THERAPY
529	DEFORMITIES OF FOOT	FASCIOTOMY/INCISION/REPAIR/ARTHRODESIS
530	FOREIGN BODY GRANULOMA OF MUSCLE, SKIN AND SUBCUTANEOUS TISSUE	REMOVAL OF GRANULOMA
531	UNCOMPLICATED HYDROCELE; SPERMATOCELE	MEDICAL THERAPY, EXCISION
532	SYMPTOMATIC URTICARIA	MEDICAL THERAPY
533	IMPULSE DISORDERS	MEDICAL/PSYCHOTHERAPY
534	SUBLINGUAL AND PELVIC VARICES	VENOUS INJECTION, VASCULAR SURGERY
535	ASEPTIC MENINGITIS	MEDICAL THERAPY
536	TMJ DISORDER	TMJ SPLINTS
537	CHRONIC DISEASE OF TONSILS AND ADENOIDS	TONSILLECTOMY AND ADENOIDECTOMY
538	SOMATIC SYMPTOMS AND RELATED DISORDERS	CONSULTATION
539	OTHER NONINFECTIOUS GASTROENTERITIS AND COLITIS	MEDICAL THERAPY
540	HEMATOMA OF AURICLE OR PINNA AND HEMATOMA OF EXTERNAL EAR	DRAINAGE
541	OTHER HYPERTROPHIC OR ATROPHIC CONDITIONS OF SKIN	MEDICAL THERAPY
542	CHONDROMALACIA	MEDICAL THERAPY
543	CYST OF KIDNEY, ACQUIRED	MEDICAL THERAPY
544	DYSMENORRHEA	MEDICAL AND SURGICAL TREATMENT
545	BENIGN NEOPLASM OF BONE AND ARTICULAR CARTILAGE INCLUDING OSTEOID OSTEOMAS; BENIGN NEOPLASM OF	MEDICAL AND SURGICAL TREATMENT, WHICH INCLUDES CHEMOTHERAPY AND

	CONNECTIVE AND OTHER SOFT TISSUE	RADIATION THERAPY
546	SPASTIC DYSPHONIA	MEDICAL THERAPY
547	MACROMASTIA	BREAST REDUCTION
548	ALLERGIC RHINITIS AND CONJUNCTIVITIS, CHRONIC RHINITIS	MEDICAL THERAPY
549	BENIGN NEOPLASM AND CONDITIONS OF EXTERNAL FEMALE GENITAL ORGANS	EXCISION
550	HORDEOLUM AND OTHER DEEP INFLAMMATION OF EYELID; CHALAZION	INCISION AND DRAINAGE, MEDICAL THERAPY
551	ACUTE ANAL FISSURE	FISSURECTOMY, MEDICAL THERAPY
552	PLEURISY	MEDICAL THERAPY
553	PERITONEAL ADHESION	SURGICAL TREATMENT
554	DERMATITIS DUE TO SUBSTANCES TAKEN INTERNALLY	MEDICAL THERAPY
555	BLEPHARITIS	MEDICAL THERAPY
556	UNSPECIFIED URINARY OBSTRUCTION AND BENIGN PROSTATIC HYPERPLASIA WITHOUT OBSTRUCTION	MEDICAL THERAPY
557	MINOR COMPLICATIONS OF A PROCEDURE	MEDICAL AND SURGICAL TREATMENT
558	REDUNDANT PREPUCE	ELECTIVE CIRCUMCISION
559	ANEMIAS DUE TO DISEASE	MEDICAL THERAPY
560	PERSONALITY DISORDERS EXCLUDING BORDERLINE AND SCHIZOTYPAL	MEDICAL/PSYCHOTHERAPY
561	ACUTE NON-SUPPURATIVE LABYRINTHITIS	MEDICAL THERAPY
562	DEVIATED NASAL SEPTUM, ACQUIRED DEFORMITY OF NOSE, OTHER DISEASES OF UPPER RESPIRATORY TRACT	EXCISION OF CYST/RHINECTOMY/PROSTHESIS
563	STOMATITIS AND OTHER DISEASES OF ORAL SOFT TISSUES	INCISION AND DRAINAGE, MEDICAL THERAPY
564	CAVUS DEFORMITY OF FOOT; FLAT FOOT; SYNDACTYLY OF TOES	MEDICAL THERAPY, ORTHOTIC
565	INFECTIOUS MONONUCLEOSIS	MEDICAL THERAPY
566	URETHRITIS, NON-SEXUALLY TRANSMITTED	MEDICAL THERAPY
567	CONGENITAL ANOMALIES OF FEMALE GENITAL ORGANS EXCLUDING VAGINA	SURGICAL TREATMENT
568	CANDIDIASIS OF MOUTH, SKIN AND NAILS	MEDICAL THERAPY
569	BENIGN NEOPLASM OF MALE GENITAL ORGANS: TESTIS, PROSTATE, EPIDIDYMIS	MEDICAL AND SURGICAL TREATMENT
570	ATROPHY OF EDENTULOUS ALVEOLAR RIDGE	VESTIBULOPLASTY, GRAFTS, IMPLANTS
571	DISEASE OF NAILS, HAIR AND HAIR FOLLICLES	MEDICAL THERAPY
572	ACUTE TONSILLITIS OTHER THAN BETA-STREPTOCOCCAL	MEDICAL THERAPY
573	CORNS AND CALLUSES	MEDICAL THERAPY
574	SYNOVITIS AND TENOSYNOVITIS	MEDICAL THERAPY
575	PROLAPSED URETHRAL MUCOSA	SURGICAL TREATMENT
576	DENTAL CONDITIONS (E.G., CARIES, FRACTURED TOOTH)	ADVANCED RESTORATIVE-ELECTIVE (INLAYS, ONLAYS, GOLD FOIL AND HIGH NOBLE METAL RESTORATIONS)
577	GANGLION	EXCISION
578	EPISCLERITIS	MEDICAL THERAPY
579	DIAPER RASH	MEDICAL THERAPY
580	TONGUE TIE AND OTHER ANOMALIES OF TONGUE	FRENOTOMY, TONGUE TIE
581	INCONSEQUENTIAL CYSTS OF ORAL SOFT TISSUES	INCISION AND DRAINAGE

582	CONGENITAL DEFORMITIES OF KNEE	MEDICAL AND SURGICAL TREATMENT
583	HERPES SIMPLEX WITHOUT COMPLICATIONS, EXCLUDING GENITAL HERPES	MEDICAL THERAPY
584	DENTAL CONDITIONS (E.G., MISSING TEETH)	COMPLEX PROSTHODONTICS (I.E., FIXED BRIDGES, OVERDENTURES)
585	CONGENITAL ANOMALIES OF THE EAR WITHOUT IMPAIRMENT OF HEARING; UNILATERAL ANOMALIES OF THE EAR	OTOPLASTY, REPAIR AND AMPUTATION
586	KELOID SCAR; OTHER ABNORMAL GRANULATION TISSUE	INTRALESIONAL INJECTIONS/DESTRUCTION/EXCISION, RADIATION THERAPY
587	DISORDERS OF SOFT TISSUE	MEDICAL THERAPY
588	MINOR BURNS	MEDICAL THERAPY
589	DISORDERS OF SLEEP WITHOUT SLEEP APNEA	MEDICAL THERAPY
590	ORAL APHTHA	MEDICAL THERAPY
591	SPRAINS AND STRAINS OF ADJACENT MUSCLES AND JOINTS, MINOR	MEDICAL THERAPY
592	ASYMPTOMATIC URTICARIA	MEDICAL THERAPY
593	ABUSE OF NONADDICTIVE SUBSTANCES	MEDICAL THERAPY
594	MINOR HEAD INJURY: HEMATOMA/EDEMA WITH NO PERSISTENT SYMPTOMS	MEDICAL THERAPY
595	VIRAL WARTS EXCLUDING VENEREAL WARTS	MEDICAL AND SURGICAL TREATMENT, CRYOSURGERY
596	ACUTE UPPER RESPIRATORY INFECTIONS AND COMMON COLD	MEDICAL THERAPY
597	OTHER VIRAL INFECTIONS	MEDICAL THERAPY
598	PHARYNGITIS AND LARYNGITIS AND OTHER DISEASES OF VOCAL CORDS	MEDICAL THERAPY
599	ANOMALIES OF RELATIONSHIP OF JAW TO CRANIAL BASE, MAJOR ANOMALIES OF JAW SIZE, OTHER SPECIFIED AND UNSPECIFIED DENTOFACIAL ANOMALIES	OSTEOPLASTY, MAXILLA/MANDIBLE
600	DENTAL CONDITIONS (E.G., MALOCCLUSION)	ORTHODONTIA (I.E., FIXED AND REMOVABLE APPLIANCES AND ASSOCIATED SURGICAL PROCEDURES)
601	DENTAL CONDITIONS (E.G., MISSING TEETH)	IMPLANTS (I.E., IMPLANT PLACEMENT AND ASSOCIATED CROWN OR PROSTHESIS)
602	BENIGN LESIONS OF TONGUE	EXCISION
603	UNCOMPLICATED HEMORRHOIDS	HEMORRHOIDECTOMY, MEDICAL THERAPY
604	PREVENTION SERVICES WITH LIMITED OR NO EVIDENCE OF EFFECTIVENESS	MEDICAL THERAPY
605	OPEN WOUND OF INTERNAL STRUCTURES OF MOUTH WITHOUT COMPLICATION	REPAIR SOFT TISSUES
606	SEBACEOUS CYST	MEDICAL AND SURGICAL TREATMENT
607	SEBORRHEIC KERATOSIS, DYSCHROMIA, AND VASCULAR DISORDERS, SCAR CONDITIONS, AND FIBROSIS OF SKIN	MEDICAL AND SURGICAL TREATMENT
608	CONJUNCTIVAL CYST	EXCISION OF CONJUNCTIVAL CYST
609	BENIGN NEOPLASMS OF SKIN AND OTHER SOFT TISSUES	MEDICAL THERAPY
610	DISEASE OF CAPILLARIES	EXCISION
611	BENIGN GYNECOLOGICAL CONDITIONS	MEDICAL THERAPY
612	CYST, HEMORRHAGE, AND INFARCTION OF THYROID	SURGICAL TREATMENT
613	PICA IN ADULTS	MEDICAL/PSYCHOTHERAPY
614	ACUTE VIRAL CONJUNCTIVITIS	MEDICAL THERAPY

615	MUSCULAR CALCIFICATION AND OSSIFICATION	MEDICAL THERAPY
616	SUPERFICIAL WOUNDS WITHOUT INFECTION AND CONTUSIONS	MEDICAL THERAPY
617	CHRONIC BRONCHITIS	MEDICAL THERAPY
618	GALACTORRHEA, MASTODYNIA, ATROPHY, BENIGN NEOPLASMS AND UNSPECIFIED DISORDERS OF THE BREAST	MEDICAL AND SURGICAL TREATMENT
619	BENIGN POLYPS OF VOCAL CORDS	MEDICAL THERAPY, STRIPPING
620	BENIGN NEOPLASMS OF DIGESTIVE SYSTEM	SURGICAL TREATMENT
621	VARICOSE VEINS OF LOWER EXTREMITIES WITHOUT ULCER OR OTHER MAJOR COMPLICATION	STRIPPING/SCLEROTHERAPY, MEDICAL THERAPY
622	HYPERTELORISM OF ORBIT	ORBITOTOMY
623	GALLSTONES WITHOUT CHOLECYSTITIS	MEDICAL THERAPY, CHOLECYSTECTOMY
624	GYNECOMASTIA	MASTECTOMY
625	TMJ DISORDERS	TMJ SURGERY
626	EDEMA AND OTHER CONDITIONS INVOLVING THE SKIN OF THE FETUS AND NEWBORN	MEDICAL THERAPY
627	DENTAL CONDITIONS WHERE TREATMENT IS CHOSEN PRIMARILY FOR AESTHETIC CONSIDERATIONS	COSMETIC DENTAL SERVICES
628	DENTAL CONDITIONS WHERE TREATMENT RESULTS IN MARGINAL IMPROVEMENT	ELECTIVE DENTAL SERVICES
629	MENTAL DISORDERS WITH NO OR MINIMALLY EFFECTIVE TREATMENTS OR NO TREATMENT NECESSARY	EVALUATION
630	INTRACRANIAL CONDITIONS WITH NO OR MINIMALLY EFFECTIVE TREATMENTS OR NO TREATMENT NECESSARY	EVALUATION
631	INFECTIOUS DISEASES WITH NO OR MINIMALLY EFFECTIVE TREATMENTS OR NO TREATMENT NECESSARY	EVALUATION
632	ENDOCRINE AND METABOLIC CONDITIONS WITH NO OR MINIMALLY EFFECTIVE TREATMENTS OR NO TREATMENT NECESSARY	EVALUATION
633	CARDIOVASCULAR CONDITIONS WITH NO OR MINIMALLY EFFECTIVE TREATMENTS OR NO TREATMENT NECESSARY	EVALUATION
634	SENSORY ORGAN CONDITIONS WITH NO OR MINIMALLY EFFECTIVE TREATMENTS OR NO TREATMENT NECESSARY	EVALUATION
635	NEUROLOGIC CONDITIONS WITH NO OR MINIMALLY EFFECTIVE TREATMENTS OR NO TREATMENT NECESSARY	EVALUATION
636	DERMATOLOGICAL CONDITIONS WITH NO OR MINIMALLY EFFECTIVE TREATMENTS OR NO TREATMENT NECESSARY	EVALUATION
637	RESPIRATORY CONDITIONS WITH NO OR MINIMALLY EFFECTIVE TREATMENTS OR NO TREATMENT NECESSARY	EVALUATION
638	GENITOURINARY CONDITIONS WITH NO OR MINIMALLY EFFECTIVE TREATMENTS OR NO TREATMENT NECESSARY	EVALUATION
639	MUSCULOSKELETAL CONDITIONS WITH NO OR MINIMALLY EFFECTIVE TREATMENTS OR NO TREATMENT NECESSARY	EVALUATION
640	GASTROINTESTINAL CONDITIONS WITH NO OR MINIMALLY EFFECTIVE TREATMENTS OR NO TREATMENT NECESSARY	EVALUATION
641	MISCELLANEOUS CONDITIONS WITH NO OR MINIMALLY EFFECTIVE TREATMENTS OR NO TREATMENT NECESSARY	EVALUATION

# Statements of intent and guideline note descriptions for the “2026–27 Prioritized List of Health Services”

## Statements of intent

Statement of intent 1: Palliative care

Statement of intent 2: Death with Dignity Act

Statement of intent 3: Lower priority services

Statement of intent 4: Role of the prioritized list in coverage

Statement of intent 5: Treatment of chronic pain

Statement of intent 6: Telephonic services during an outbreak or epidemic

Statement of intent 7: Public health emergencies

Statement of intent 8: Smoking cessation and elective surgical procedures

## Guideline notes for ancillary, diagnostic and excluded services not appearing on the Prioritized List

Guideline note A1: Nerve blocks

Guideline note A2: Self-monitoring of blood glucose in diabetes

Guideline note A3: IVC filters for trauma

Guideline note A5: Telehealth, teleconsultations and online/telephonic services

Guideline note D1: Non-prenatal genetic testing guideline

Guideline note D2: Implantable cardiac loop recorders/  
subcutaneous cardiac rhythm monitors

Guideline note D3: Echocardiograms with contrast for cardiac conditions other than cardiac anomalies

Guideline note D4: Advanced imaging for low back pain

Guideline note D5: Neuroimaging for headache

Guideline note D6: Breast MRI

Guideline note D7: Neuroimaging in dementia

Guideline note D8: Diagnostic testing for obstructive sleep apnea

Guideline note D9: Wireless capsule endoscopy

Guideline note D11: MRI of the spine (cervical and thoracic)

Guideline note D12: Upper endoscopy for GERD or dyspepsia symptoms

Guideline note D15: Computer-aided mammography

Guideline note D16: Osteoporosis screening and monitoring

Guideline note D17: Prenatal genetic testing

Guideline note D18: Advanced imaging for staging of prostate cancer



Guideline note D19:	SPECT
Guideline note D20:	Ophthalmology diagnostic visits
Guideline note D21:	Pharmacogenetics testing for psychiatric medication management
Guideline note D22:	PET scans
Guideline note D23:	Urine drug testing
Guideline note D24:	Cardiac magnetic resonance imaging
Guideline note D25:	Hereditary cancer genetic testing
Guideline note D26:	Neurobehavioral status exams and neuropsychological testing
Guideline note D27:	SARS-COV-2 (COVID-19) testing
Guideline note E1:	Interventions with marginal clinical benefit or low cost-effectiveness for certain conditions
Guideline note E2:	Interventions that are unproven, have no clinically important benefit or have harms that outweigh benefits for certain conditions

## Guideline notes for health services that appear on the Prioritized List

Guideline note 1:	Routine cervical cancer screening
Guideline note 2:	Fetal surgery
Guideline note 3:	Prophylactic treatment for prevention of cancer in women at increased risk
Guideline note 4:	Tobacco dependence, including during pregnancy
Guideline note 5:	Obesity and overweight
Guideline note 6:	Rehabilitative and habilitative therapies
Guideline note 7:	Erythropoiesis-stimulating agent (ESA) guideline
Guideline note 8:	Bariatric surgery
Guideline note 9:	Corneal collagen cross linking
Guideline note 10:	Central serous chorioretinopathy and posterior cyclitis
Guideline note 11:	Colony stimulating factor (CSF) guidelines
Guideline note 12:	Patient-centered care of advanced cancer
Guideline note 13:	Hemangiomas, complicated; port wine stains
Guideline note 14:	Laser interstitial thermal therapy for refractory epilepsy
Guideline note 15:	Heterotopic bone formation
Guideline note 16:	Proton beam therapy for cancer
Guideline note 17:	Preventive dental care
Guideline note 18:	Ventricular assist devices
Guideline note 19:	Neuropsychological testing for PTSD
Guideline note 20:	Attention deficit/hyperactivity disorders in children



- Guideline note 21: Severe inflammatory skin disease
- Guideline note 22: Planned cesarean delivery
- Guideline note 23: Colon cancer surveillance
- Guideline note 24: Complicated hernias
- Guideline note 25: Bone marrow and stem cell transplant
- Guideline note 26: Pelvic congestion syndrome
- Guideline note 27: Treatment of sleep apnea
- Guideline note 28: Trochanteric bursitis
- Guideline note 29: Tympanostomy tubes in acute otitis media
- Guideline note 31: Cochlear implantation
- Guideline note 32: Cataract
- Guideline note 33: Nitrous oxide for labor pain
- Guideline note 34: Extraction of impacted wisdom teeth
- Guideline note 35: Sinus surgery
- Guideline note 36: Adenotonsillectomy for indications other than obstructive sleep apnea
- Guideline note 37: Surgical interventions for conditions of the back and spine other than scoliosis
- Guideline note 38: Subtalar arthroereisis
- Guideline note 39: Endometriosis and adenomyosis
- Guideline note 40: Uterine leiomyoma
- Guideline note 41: Scoliosis
- Guideline note 42: Solid organ transplants
- Guideline note 43: Lymphedema
- Guideline note 44: Menstrual bleeding disorders
- Guideline note 45: Other diseases of the vocal cords
- Guideline note 46: Age-related macular degeneration
- Guideline note 47: Urinary incontinence
- Guideline note 48: Frenulectomy/frenulotomy
- Guideline note 49: Wearable cardiac defibrillators
- Guideline note 50: Pelvic organ prolapse surgery
- Guideline note 51: Chronic otitis media with effusion
- Guideline note 52: Chronic anal fissure
- Guideline note 53: Basic periodontics
- Guideline note 54: Conduct disorder
- Guideline note 55: Pelvic pain syndrome
- Guideline note 56: Non-interventional treatments for conditions of the back and spine
- Guideline note 57: Pelvic physical therapy for interstitial cystitis
- Guideline note 58: Impulse disorders
- Guideline note 59: Dysmenorrhea
- Guideline note 60: Opioids for conditions of the back and spine
- Guideline note 61: Hospitalization for acute viral infections
- Guideline note 62: Negative pressure wound therapy

- Guideline note 63: Hydrocele repair
- Guideline note 65: Severe cystic acne
- Guideline note 66: Cervical dysplasia
- Guideline note 67: Brow ptosis
- Guideline note 68: Treatment of chronic lower extremity venous disease
- Guideline note 69: Electroconvulsive therapy (ECT)
- Guideline note 70: Twelve-month contraceptive dispensing
- Guideline note 71: Hip resurfacing
- Guideline note 72: Congenital urologic conditions
- Guideline note 73: Penile anomalies
- Guideline note 74: Growth hormone treatment
- Guideline note 75: Applied behavior analysis for autism spectrum disorder
- Guideline note 76: Diagnostic testing for liver fibrosis to guide management in chronic liver disease
- Guideline note 77: TIPS procedure
- Guideline note 78: Hepatic metastases
- Guideline note 79: Breast reconstruction
- Guideline note 80: Repair of nose tip
- Guideline note 81: Buerger's disease
- Guideline note 82: Early intervention for psychosis
- Guideline note 83: Hip core decompression
- Guideline note 84: Medical nutrition therapy for epilepsy
- Guideline note 85: Elective induction of labor
- Guideline note 86: Organic mental disorders
- Guideline note 87: Influenza
- Guideline note 88: Use of progesterone containing IUDs for non-contraceptive indications
- Guideline note 89: Revascularization for chronic stable angina
- Guideline note 90: Cognitive rehabilitation
- Guideline note 91: Caries arresting medicament application
- Guideline note 92: Acupuncture
- Guideline note 93: Endobrachial valves
- Guideline note 94: Pectus excavatum
- Guideline note 95: Implantable cardiac defibrillators
- Guideline note 96: Treatment of benign neoplasm of urinary organs
- Guideline note 97: Management of acromioclavicular joint sprain
- Guideline note 98: Significant injuries to ligaments, tendons and menisci
- Guideline note 99: Routine prenatal ultrasound
- Guideline note 100: Smoking and spinal fusion
- Guideline note 101: Artificial disc replacement

Guideline note 102: Repetitive transcranial magnetic stimulation  
Guideline note 103: Bone anchored hearing aids  
Guideline note 104: Newer interventions for osteoarthritis of the knee  
Guideline note 105: Mediastinitis  
Guideline note 106: Preventive services  
Guideline note 107: Hyperbaric oxygen  
Guideline note 108: Continuous glucose monitoring  
Guideline note 109: Vertebroplasty, kyphoplasty and sacroplasty  
Guideline note 110: Chronic pelvic inflammatory conditions  
Guideline note 111: Intra-aortic balloon pumps  
Guideline note 112: Lung volume reduction surgery  
Guideline note 113: Diseases of lips  
Guideline note 114: Femoroacetabular impingement syndrome  
Guideline note 115: Extracorporeal photopheresis  
Guideline note 116: Anal irrigation systems  
Guideline note 117: Removal of tori and excision of hyperplastic tissue  
Guideline note 118: Septoplasty  
Guideline note 119: Carotid endarterectomy  
Guideline note 120: Trigger thumb and trigger finger  
Guideline note 121: Concussion and post-concussion syndrome  
Guideline note 122: Oral health risk assessment in medical settings  
Guideline note 123: Dental implant removal  
Guideline note 124: Alcohol septal ablation  
Guideline note 125: Carotid artery stenting  
Guideline note 126: Applied behavior analysis interventions for self-injurious behavior  
Guideline note 127: Gender affirming treatment  
Guideline note 128: Foreign bodies in the GI tract  
Guideline note 129: Fecal incontinence  
Guideline note 130: Blepharoplasty  
Guideline note 131: Hypotony  
Guideline note 132: Acne conglobata and acne fulminans  
Guideline note 133: Acute peripheral motor and digital nerve injury  
Guideline note 134: Neonatal nasolacrimal duct obstruction  
Guideline note 135: Fibromyalgia  
Guideline note 136: Collapsed vertebra  
Guideline note 137: Benign bone tumors  
Guideline note 138: Obstructive and reflux uropathy  
Guideline note 139: Frenotomy for tongue-tie in newborns  
Guideline note 140: Breastfeeding support and supplies  
Guideline note 141: Laryngeal stenosis or paralysis; dysphonia  
Guideline note 142: Stereotactic body radiation therapy  
Guideline note 143: Treatment of unilateral hearing loss  
Guideline note 144: Proton pump inhibitor therapy for

gastroesophageal reflux disease (GERD)

Guideline note 145: Treatments for benign prostate enlargement with lower urinary tract symptoms

Guideline note 146: Ablation procedures for atrial fibrillation

Guideline note 147: IVC filters for active pulmonary embolism (PE)/deep vein thrombosis (DVT)

Guideline note 148: Biomarker tests of cancer tissue

Guideline note 149: Sclerotherapy of fluid collections

Guideline note 150: Fetal MRI

Guideline note 151: Cardiac transplant genetic testing for transplant rejection

Guideline note 152: Microtia

Guideline note 153: Planned out-of-hospital birth

Guideline note 154: Ear drum repair

Guideline note 155: Electric tumor treatment fields for glioblastoma

Guideline note 156: Encounter for desensitization to allergens

Guideline note 157: Wigs

Guideline note 158: Hallux rigidus

Guideline note 159: Cardiac resynchronization therapy

Guideline note 160: Congenital muscular torticollis

Guideline note 161: Sacroiliac anesthetic injections and sacroiliac joint fusion

Guideline note 162: Long-acting reversible contraceptive (LARC) placement

Guideline note 163: Skin substitutes for chronic skin ulcers

Guideline note 164: Percutaneous repair of paravalvular leaks

Guideline note 165: Fecal microbiota transplant

Guideline note 166: Breast reduction surgery for macromastia

Guideline note 167: Cholecystectomy for cholecystitis and biliary colic

Guideline note 168: Intrastromal corneal ring segments

Guideline note 169: Orthodontics for craniofacial anomalies and handicapping malocclusion

Guideline note 170: Intrathecal or epidural drug infusion

Guideline note 171: Lattice degeneration, asymptomatic retinal breaks and round holes

Guideline note 174: Cryoablation of pulmonary tumors

Guideline note 175: Medication-assisted treatment of opioid dependence

Guideline note 176: Opportunistic salpingectomy

Guideline note 178: Spinal cord stimulator therapy

Guideline note 179: Diabetes prevention program

Guideline note 180: Medically indicated circumcision

Guideline note 181: Postpartum depression screening

Guideline note 182: Testosterone replacement for testicular

hypofunction

- Guideline note 183: Donor breast milk for high-risk infants
- Guideline note 184: MRGfUS for essential tremor
- Guideline note 185: Yttrium-90 therapy
- Guideline note 186: Transoral incisionless fundoplication for treatment of GERD
- Guideline note 187: Pulmonary rehabilitation
- Guideline note 189: Embolization of arterial malformations
- Guideline note 190: Shoulder decompression surgery
- Guideline note 191: Repair of varicoceles in children and adolescents
- Guideline note 192: Sacral nerve stimulation for urinary conditions
- Guideline note 193: Artificial urinary sphincters
- Guideline note 194: Insomnia
- Guideline note 195: Temporary percutaneous mechanical circulatory support with Impella devices
- Guideline note 196: Breast surgery revision
- Guideline note 197: Counseling for pregnant and postpartum women
- Guideline note 198: Hidradenitis suppurativa
- Guideline note 200: Surgeries related to female genital mutilation
- Guideline note 201: Tethered cord
- Guideline note 202: Magnetoencephalography
- Guideline note 203: Food allergy treatment
- Guideline note 204: Nerve allografts
- Guideline note 205: Developmental delay coding
- Guideline note 206: Panniculectomy
- Guideline note 207: Other intestinal malabsorption
- Guideline note 208: Carcinoma in situ of the penis
- Guideline note 209: Compression of vein
- Guideline note 210: Catheter directed thrombolysis
- Guideline note 211: Benign neoplasm of parotid gland
- Guideline note 212: Knee arthroscopy
- Guideline note 213: Other specified eating disorder
- Guideline note 214: Implantation of intravitreal drug delivery system
- Guideline note 215: Orthoptic and/or pleoptic training
- Guideline note 216: Rhinoplasty
- Guideline note 217: Plantar fascia injection
- Guideline note 218: Cervicogenic headache
- Guideline note 219: Chemodenervation
- Guideline note 220: Osteochondral allograft/autograft transplantation (OAT) of the knee
- Guideline note 222: Partial wrist neurectomy
- Guideline note 223: Peroral endoscopic myotomy (poem)
- Guideline note 224: Decoronation or submergence of an erupted tooth
- Guideline note 225: Thermal ablation of renal cell carcinoma

Guideline note 226: Dorsal rhizotomy for spastic cerebral palsy  
Guideline note 227: Gastric electrical stimulation  
Guideline note 228: PANDAS, PANS, and autoimmune encephalitis  
Guideline note 229: High-frequency chest wall oscillation devices  
Guideline note 231: Low level laser therapy  
Guideline note 232: High risk foot care  
Guideline note 233: Insomnia  
Guideline note 234: Complicated hemorrhoids  
Guideline note 235: Treatment of benign paroxysmal positioning  
vertigo  
Guideline note 236: Posterior tibial nerve stimulation  
Guideline note 237: Deep brain stimulation  
Guideline note 238: Ultrasound guided percutaneous tenotomy  
Guideline note 239: Incidental appendectomy

# Appendix D: Evidence-based reports

Coverage guidances are evidence-based reports that include recommendations to payers and providers to guide coverage of health services. In addition, the Health Evidence Review Commission (HERC) develops multisector intervention reports to guide payers considering interventions outside of the clinical setting that can improve individual or population health. Note that multisector interventions are not required Oregon Health Plan benefits; they are appended to the Prioritized List as a resource for coordinated care organizations in making decisions about health-related services offered under Oregon’s approved waiver.

The HERC approved the following evidence-based reports from May 2023 through May 2025 (approval dates noted below). After approval, reports are reviewed when staff become aware of evidence or information that may result in a new recommendation. Those reports reaffirmed or updated from a prior review of the same topic are noted with an asterisk.

Where indicated, the new or updated report resulted in approved changes to the Prioritized List. The “List changes” column in the following table indicates whether changes to the Prioritized List were approved between August 2023 and May 2025 in conjunction with these coverage guidance approvals.

## Evidence-based reports

Evidence-based report	Approval date	List changes	Report type
Continuous glucose monitoring in diabetes mellitus	9/28/2023	Yes	Coverage guidance*
Chronic disease self-management programs	3/14/2024	Yes	Coverage guidance

\* Report has been updated from a prior review or since initial publication.





## Appendix E: Quality of life in general measure impact assessment

In fulfillment of the requirements of ORS 414.690(b) as amended by Senate Bill 1508 (2024), the Commission and its staff assessed the impact on access to medically necessary treatment and services by persons with disabilities or chronic illnesses resulting from the Commission's prior use of any quality of life in general measures (QoLiGM) or any research or analysis that referred to or relied upon a QoLiGM.

Two HERC staff members completed separate, individual reviews in the fall and winter of 2024-25, searching all available meeting materials and minutes for any reference to "quality adjusted life year", "QALY" or "ICER" (a research organization that commonly references QALY in their published materials) since the last change in ranking methodology, which was reported in the 2007 biennial report.

For each topic where QALYs were mentioned, staff include a brief description of the discussion topic, report the coverage decision made, and state whether or not QALYs/ICERS appeared to be a decision factor. Topics that were discussed in consecutive meetings were grouped together. For topics where the decision was to limit or exclude a service due to QALYs, these were flagged for re-review by the HERC at a future meeting date; these topics appear **in bold font** in the following table, entitled HERC Staff QoLiGM Review.

Upon completion of the review, there were 74 topics in total where QALYs were mentioned; among these, 5 topics relied upon QALYs as a decision factor to limit or exclude a service. In all 5 of these cases, coverage has already been expanded without relying on QoLiGM so no additional HERC review is needed.

Since the implementation of this bill, the Commission now employs a review process to screen for any QoLiGMs in meeting materials and the HERC no longer uses or relies upon these measures for any coverage determinations.



HERC Staff QoLiGM Review			
Meeting Date	Topic Description	Coverage Decision	Was QALY decision factor?
6/28/07; 8/7/07	<u>Non-surgical management of obesity</u> - Intensive multi-modal therapy has been shown to be effective in weight loss and management	Cover	No, decision was based on an updated clinical evidence review
5/22/08	<u>Colorectal cancer screening</u> - Part of a consent agenda item related to USPSTF updates	Expand coverage	No, decision was based on USPSTF recommendations
5/22/08	<u>PET scans</u> - A type of scan that helps to stage and restage certain cancers	Expand coverage	No, decision was based on clinical evidence review
5/22/08	<u>Xolair</u> - An anti-IgE medication therapy for asthma which is administered like chemotherapy	Not cover*  (*Coverage is now determined by P&T and this medicine is now covered as a non-preferred medication)	Yes, QALYs were cited directly as a decision factor
5/22/08; 8/8/08; 12/4/08; 10/15/09; 12/10/09	<u>Elaprase</u> - Enzyme replacement therapy for Hunter's Syndrome resulted in marginal improvement in walking distance	Not cover*  (*Coverage is now determined by P&T and this medication is now covered without restriction)	Yes, QALYs were cited directly as a decision factor
8/8/08	<u>Anal dysplasia screening</u> - a type of anal pap smear for anal cancer	Cover	No, decision was based on an updated clinical evidence review
1/15/09	<u>Hip resurfacing</u> -- A substantial body of evidence shows this intervention is associated with consistent and strong symptomatic and functional improvements at follow-up to 5 years	Cover	No, decision was based on an updated clinical evidence review
6/11/09; 8/6/09	<u>Growth hormone treatment</u> - Based on conflicting evidence of benefit to continued treatment, growth hormone treatment should be provided only until adult height is achieved	Clarify coverage	No, decision based on clinical evidence review and other payers' policy
8/6/09; 10/15/09	<u>Cancer treatment near end of life</u> - The Commission declined to define a \$/QALY strict threshold on end-of-life treatments.	No decision	This was a statement of intent guideline

8/6/09	<u>Non-myeloablative transplant</u> – This is an experimental therapy as compared to standard bone marrow transplants	Not cover	No, evidence did not support clinical benefit
10/15/09	<u>Liver metastases</u> – Cancer from a primary site that has spread to the liver was reprioritized to a higher line on the list.	Cover	No, decision was based on clinical evidence profile
12/10/09	<u>Cardiac CT for morphology</u> – This scan is more accurate than standard protocol and good for patients who are unable to undergo an MRI	Cover	No, decision was based on expert input and evidence
12/10/09	<u>Cystic fibrosis screening in pregnancy</u> – Screening for a genetic disorder during pregnancy for higher-risk couples.	Cover	Yes, QALYs were directly cited as a decision factor
12/10/09	<u>Value based services</u> – A list of services was surveyed by staff to look for high-value services to incentivize.	No decision	Not applicable
3/8/12	<u>Continuous glucose monitors</u> – No evidence of improvement in blood glucose levels was found for people with type 2 diabetes, and limited evidence for use was found for type 1 diabetes.	Not cover	No, evidence did not support clinical benefit; STAFF NOTE: This therapy is now covered with some limitations.
3/8/12	<u>HPV Vaccination in Males</u> – Newly-released ACIP guidelines recommended two HPV vaccines (2 and 4) for males aged 9-26.	Expand coverage	No, OHA follows ACIP recommendations for vaccination coverage
5/10/12	<u>Diabetic foot care</u> – There was moderate to good evidence for foot exams, podiatry referrals and use of padding/orthotics for the prevention of diabetic foot ulcers in high-risk patients.	No decision	No, staff were directed to work with podiatry experts to refine coverage
5/10/12; 6/14/12	<u>Balloon dilation of intracranial vasospasm</u> – Trusted sources (NICE, SIGN) concluded the evidence for this intervention is inadequate and should only be used in the context of clinical research given its experimental status.	Not cover	No, decision based on insufficient evidence for clinical effectiveness
8/9/12	<u>MRI breast cancer screening</u> – While shown to increase detection when compared with mammography alone, did not show a benefit on morbidity or mortality, and there is a possibility of overdiagnosis associated with harm.	Not cover	No, evidence did not support benefit
8/9/12	<u>Fabrazyme/enzyme replacement</u> – Multiple systematic reviews were unable to demonstrate clear improvement in clinically important outcomes of enzyme replacement therapy in Fabry's disease.	Not cover	No, decision based on lack of effectiveness for clinically important outcomes
8/9/12	<u>Sleep disorders</u> – No effective treatments were found for several types of sleep disorders, but clonazepam for REM sleep behavior disorder was found to have evidence of value.	Mixed: Add coverage for REM sleep disorder; not	No, decisions to cover were based on cost and clinical

		cover other disorders	effectiveness of available therapies
8/9/12	<u>Hyperbaric oxygen therapy</u> – NICE, a trusted evidence source, conducted a review and did not recommend use of hyperbaric oxygen for diabetic foot ulcers or for treatment of multiple sclerosis.	Not cover	No, decision was based on the NICE review, which did not contain the QALY references
10/11/12	<u>Artificial disc replacement</u> – Compared to spinal fusion, this intervention was shown to be safer in patients who meet specific criteria, per a newly-updated evidence review from NICE.	Expand coverage	No, decision was based on an updated coverage guidance review
10/11/12	<u>Electrical stimulation for urinary incontinence</u> – There was insufficient evidence to determine effectiveness of electrical stimulation compared to placebo or alternative non-surgical techniques.	Not cover	No, decision was based on lack of evidence of clinical effectiveness
12/13/12	<u>Bladder chemodenervation</u> – There was good evidence to show that botulinum toxin adequately treats detrusor overactivity when conservative therapies do not work.	Add coverage	No, decision based on RCT clinical evidence
12/13/12	<u>Botox for migraines</u> – Due to industry funding and study design, there was insufficient evidence of effectiveness for clinically significant outcomes.	Not cover	No, decision was based on lack of clinical effectiveness
3/14/13	<u>Uterine artery embolization</u> – There was moderate to good evidence that this procedure was as efficacious as hysterectomy or myomectomy for treatment of uterine fibroids, with similar costs among procedures	Add coverage	Yes, QALYs were directly considered in this decision
3/14/13	<u>Coronary computed tomography angiography</u> – Given the risk of harms and potential overutilization, the benefit of this procedure is unclear.	Not cover	No, the relatively underdeveloped evidence base for this new therapy was not established
3/14/13	<u>Acupuncture for knee osteoarthritis</u> – There was evidence to support use of acupuncture for short term pain relief in limited circumstances.	Add coverage	Yes, QALYs were cited in the evidence synthesis
3/14/13	<u>Acupuncture for neck pain</u> – Despite some short-term relief, the evidence did not demonstrate a long-term benefit of acupuncture for this condition.	Not cover	No, decision based on published clinical evidence
3/14/13; 5/9/13	<b><u>Lung volume reduction surgery</u></b> – Given the significant risk of peri-operative morbidity and mortality, and high cost, this procedure would only be effective in select patients with bilateral emphysema who meet specific criteria.	<b>Restrict coverage*</b>  (*This service is now covered as outlined in Guideline Note 112— Medicare and commercial payers follow	<b>Yes, QALYs were cited directly as a decision factor. Coverage was limited based on high morbidity and high cost.</b>

		<b>the same criteria.)</b>	
3/14/13; 5/9/13; 3/12/15	<u>Bilateral cochlear implants for severe hearing loss</u> – There is limited quality evidence to support that bilateral implants improve ability to localize sound or speech for adults, but there is more evidence to support use for children.	Expand coverage	No, decision based on initial and then updated evidence review
5/9/13; 8/8/13; 1/10/13; 10/10/13	<u>End of life guideline note 12</u> – Commission discussed the impact of the newly-passed Affordable Care Act’s prohibition on denying health benefits on the basis of expected length of life, revising GN 12.	Not applicable	A workgroup was convened and made changes to GN 12 to conform with ACA
8/8/13	<u>Intraocular steroid implants</u> – There is moderate quality evidence that demonstrates efficacy of this therapy following central retinal vein occlusion and uveitis but not diabetic macular edema.	Expand coverage	No, decision based on published clinical evidence and rate of harms reported
8/8/13	<u>MRI for multiple sclerosis</u> – There is no clinical evidence that recommends imaging at specific intervals after initial diagnosis and professional society clinical guidelines recommend measuring symptoms or function, not monitoring via imaging.	Not cover	No, decision based on professional clinical guidelines and lack of published evidence
8/8/13	<u>Spinal fusion and smoking cessation</u> – Published evidence demonstrating that smoking reduces the success of cervical fusion.	No change	No, decision was based on clinical evidence
10/10/13	<u>Fibromyalgia</u> – Therapies with good evidence for effectiveness (medications and exercise) for this condition are already covered and other therapies either had low or no evidence of effectiveness.	No change	No, decision was based on clinical evidence
10/10/13	<u>Upper endoscopy for GERD</u> – This procedure has evidence of diagnostic efficacy (as compared to medical management) for patients with persistent symptoms and dysphagia, but not for patients with non-malignant findings.	Add coverage	No, decision was based on a recently completed coverage guidance review
10/10/13	<u>Lp-PLA2 assay test for coronary artery disease</u> - Lp-PLA2 assay is correlated with cardiovascular disease; however, it does not appear to have a significant clinical utility.	Not cover	No, decision was on published clinical evidence
10/10/13	<u>Femoroacetabular impingement syndrome</u> – Surgery for this procedure had good evidence in patients unresponsive to physical therapy and severe hip or groin pain without advanced osteoarthritis.	Add coverage	No, decision was based on an updated coverage guidance review
1/9/14	<u>Carotid artery stent</u> – This procedure has been found to have a slightly higher risk of stroke and death compared to carotid endarterectomy.	Add coverage	No, decision based on risk profile and published health outcomes
1/9/14	<u>Colonoscopy with endoscopic ultrasound</u> – This procedure demonstrated a high sensitivity and specificity for detection of T stage rectal cancer.	Add coverage	No, decision was based on published clinical evidence

1/9/14	<u>DXA scan for osteoporosis</u> – There was good evidence for this diagnostic test for initial staging of the condition, but not for repeat DXA screening.	Add coverage	No, decision was based on an updated coverage guidance review
5/8/14	<u>Electroconvulsive therapy</u> – This therapy was shown to be effective for patients with severe or prolonged mania or severe depressive illness.	Expand coverage	No, decision based on expert input and published clinical outcomes
6/12/14	<b>Bone anchored hearing aid</b> - The evidence for BAHA improving sound localization, speech recognition, or other outcomes compared to other types of hearing aids or no treatment is extremely limited.	<b>Restrict coverage*</b>  (*This service is now covered as outlined in Guideline Note 103)	<b>Yes, QALYs were cited in evidence synthesis.</b>
6/12/14; 8/8/14	<b>Hepatitis C treatment</b> – Currently available evidence does not provide sufficient case for routine use of sofosbuvir-containing regimens for Hepatitis C infection.	No decision	Yes, QALYs were directly considered in the VbBS decision to recommend non-coverage.  <b>STAFF NOTE: HERC did not approve the VbBS recommendation; these medications are now covered.</b>
8/14/14	<u>Chiropractic for migraine</u> – The majority of evidence reviews found no evidence of effectiveness for this therapy for tension headaches or migraines.	Restrict coverage	No, decision was based on published clinical outcomes
8/14/14	<u>RSV prophylaxis</u> - Immunoprophylaxis remains an option for a very small number of children, but palivizumab immunoprophylaxis was shown to have only a minimal effect on the burden of RSV disease.	Not cover <sup>48</sup>	No, decision was based on an updated evidence review
11/13/14	<u>Liver elastography</u> – Given its unclear clinical utility and underdeveloped evidence base, this therapy is not as effective as liver biopsy in managing hepatitis B and C.	Not cover	No, decision based on published clinical evidence
11/13/14	<u>Breast cancer biomarkers</u> – Gene expression profiling is recommended as an option for guiding adjuvant chemotherapy	Add coverage	No, decision was based on clinical evidence
11/13/14	<u>Intraocular steroid implants for diabetic macular edema</u> – There was short-term benefit of this intervention but an exceedingly high rate of complications, making this therapy useful post-cataract surgery	Expand coverage	Yes, cost effectiveness measures were cited in evidence synthesis

11/13/14	<u>Stool colorectal cancer screening</u> – There was insufficient evidence in the published literature to demonstrate clinical utility	Not cover	No, decision based on other payer policies and published evidence
1/8/15	<u>Spinal fusion for back pain</u> - Surgical treatments for discogenic or non-specific lumbar and cervical back conditions have equivalent outcomes to conservative treatment, but at considerably higher risk and cost.	Expand coverage	No, decision was based on a number of meta-analyses reporting clinical effectiveness
1/8/15; 3/12/15	<u>Cochlear implants</u> – Current coverage was determined to be consistent with trusted evidence sources and major medical plan coverage.	Expand coverage	No, decision based on other plans' coverage
3/12/15	<u>Intraocular steroid implants for diabetic macular edema</u> – Dexamethasone intraocular implants resulted in improved visual acuity at 12 and 36 months compared to sham treatment, though with a higher complication rate.	Add coverage	No, decision based on published clinical evidence and rate of harms reported
3/12/15; 5/17/15; 8/13/15	<u>Left ventricular assist devices</u> – This therapy prolongs survival for patients with end stage heart failure compared to optimal medical management.	Add coverage	No, decision is based on therapy prolonging survival
5/7/15; 11/9/17; 11/14/19; 1/16/20	<u>Varicose veins treatment</u> – Minimally invasive therapies for varicose veins appear to be as effective as surgical vein stripping.	Add coverage	No, decision based on clinical effectiveness evidence
8/13/15	<u>Exhaled nitrous oxide testing for asthma</u> – A test for airway inflammation was not shown to accurately diagnose asthma and evidence shows it likely causes harm in children via increased dosing of inhaled corticosteroids.	Not cover	No, decision was based on lack of clinical effectiveness and experimental nature of this intervention
10/1/15; 11/12/15; 8/11/16	<u>Tobacco cessation coverage</u> – A number of evidence-based strategies are effective for reducing incidence of tobacco dependence.	Expand coverage	No, decision was based on clinical evidence review and ACA requirements
10/1/15; 11/12/15; 1/14/16	<u>Proton beam therapy</u> – A type of radiation deposited at the target of a cancer has strong evidence for some cancers.	Mixed: Add coverage for some cancers but not others	No, decision was based on a coverage guidance and evidence of PBT short or long-term effects is lacking for many cancers
11/12/15	<u>Genetic testing codes</u> – New codes released described several genetic tests, including for cancer and prenatal conditions, with varying degrees of evidence supporting their use.	Mixed: Add coverage for most of the tests but not others	No, decision was based on effectiveness of the tests and not cost-effectiveness
3/10/16	<u>Bariatric surgery</u> – Metabolic surgery is associated with lower rates of all-cause mortality, despite a short-term increased risk of perioperative mortality and complications.	Add coverage	No, decision was based on a coverage guidance report

10/6/16; 11/10/16	<u>Pharmacotherapy for obesity</u> – There is insufficient evidence to support significant improvements in health outcomes for these pharmacologic treatments. A number of obesity drugs have been pulled off the market due to adverse effects.	Not cover	No, decision was based on long-term patient health outcomes, cost, and safety concerns
11/10/16	<u>Left atrial appendage</u> – Percutaneous LAA was not found to be superior compared to anticoagulation and there is a high rate of complications.	Not cover	No, decision based on the experimental nature of this device and lack of long-term safety
2/2/17	<u>Digital breast tomography</u> – The evidence for using DBT for breast cancer screening is limited to observational studies and evidence base is low-quality with mixed results.	Not cover	No, decision was based on lack of decrease of recall rates and lack of improvement in cancer detection
2/2/17	<u>Hepatitis C treatment</u> – From data on progression, treatment at higher stages of fibrosis ensures that those most likely to progress to the long-term complications would have the greatest benefit.	No decision	HERC made no change
1/18/18	<u>Visual acuity thresholds for cataracts</u> – Evidence supported the removal of these thresholds, replacing it with vision related quality of life measures, which broadens coverage.	Expand coverage	Yes, QALYs were cited as a decision factor
1/18/18	<u>Deep brain stimulation</u> – This intervention appears to be cost-effective in improving motor symptoms and functionality in patients with advanced Parkinson’s disease whose symptoms are not adequately treated with optimal medical management.	Add coverage	Yes, QALYs were cited as a decision factor
3/8/18	<u>PET scans for breast cancer</u> – Medical literature, including NCCN, indicates this scan has limited utility in staging and restaging breast cancer.	Not cover	No, decision based NCCN panel decision and clinical evidence
3/8/18	<u>Diagnosis of sleep apnea</u> -- Insufficient evidence supports screening for obstructive sleep apnea with clinical tools. Home sleep studies appear to be of reasonable efficacy compared to laboratory polysomnography.	Clarify coverage	No, decision based on diagnostic accuracy of interventions
8/9/18	<u>Drug eluting stents</u> – Second generation drug eluting stents appear to have initially higher cost than bare metal stents, but overall lower costs due to lower rates of repeat revascularization procedures and other complications.	Add coverage	Yes, QALYs were cited as a decision factor
8/9/18	<u>Diabetes prevention program</u> – These programs (DPPs) are a cost-effective way to reduce incident diabetes and return individuals to a normoglycemic state based on high strength of evidence. They also reduce HbA1c and reduce weight.	Add coverage	Yes, QALYs were cited as a decision factor

11/8/18	<u>Subcutaneous cardiac rhythm monitors</u> – These are devices used to monitor cardiac rhythms for 30 days or longer and have good evidence for their use.	Add coverage	No, decision based on clinical evidence review for effectiveness
1/17/19	<u>Sacroiliac joint fusion</u> – This procedure is more effective than conservative management for reducing pain and improving function, and is likely cost-effective.	Add coverage	Yes, QALYs were cited as a decision factor



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