

Procedures excluded from Prospective Payment System encounter reimbursement

This document lists the procedure codes that do **not** count as a Prospective Payment System (PPS) encounter under Oregon Administrative Rule 410-147-0120 and as such, do not qualify for fee-for-service PPS reimbursements or wraparound payments.

Medical / physical health codes

HCPCS	CPT
All A, B, C, E, J, K, L, P, R and V codes All M codes (except M0243-M0248)	36400-36420
G0001-G0007, G0011-G0100, G0103-G0107, G0109-G0175, G0178, G0244, G0247-G0374, G0377-G0465, G0471-G2024, G2026-G8900, G9013-G9130	70000-89999, 90281-90399, 93000-93350, 98969,
Q0001-Q3013, Q3015-Q9999	99000-99199, 99360-99380, 99429-99440, 99444-99459, 99481-99607, 97811, 97814
S0000-S0604, S0614-S0619, S2022-S2077, S2079-S2113, S2118-S2249, S2251-S2299, S2301-S9139, S9142-S9454, S9466-S9469, S9471-S9999	(*Telehealth codes are PPS encounter rate reimbursable: 99421-99423, 99441-99443, 98966-98968)
T1000-T1014, T1016-T5999	

Dental codes

D1203-D1204, D1206, D1208	D9210-D9248 (Anesthesia)
D0415-D0470 (tests/exams)	D9630
D0210-D0350 (radiographs, x-rays)	D9910-D9920
D0472-D0999 (laboratory)	D9940-D9941
D5986-D5991	

Behavioral health codes

90846, 90882, 90887, 99000	S5146, S5151, S9125, S9480, S9484
H0002, H0006, H0012, H0015, H0017-H0019, H0023, H0033, H0035, H0045, H0048, H2011, H2013, H2033-H2037, M0076	T1005, T1013, T1016, T1023, T1502, T2010- T2011, HG Codes