



Prior Authorization Update Summary

Type of Service	Effective Date	Addition/Deletion
Initial Occupational, Physical, Speech Therapy Evaluations	09/01/19	Deletion
Durable Medical Equipment (DME)/Equipment/Supplies exceeding Texas Medicaid Limitations	10/01/19	Addition
Case by Case Added Services (CPT/HCPCS codes that are listed as not payable in the TMHP fee schedule)	10/01/19	Addition
DME Repair (K0379) when greater than 35 units	10/01/19	Addition
Miscellaneous DME (E1399) when billed amount is greater than \$500	10/01/19	Addition
Clinician Administered Drugs: C9045 - Injection, moxetumomab pasudotox-tdfk (Lumoxiti) ; C9049 - Injection, tagraxofusp-erzs (Elzonris); C9050 - Injection, emapalumab-lzsg (Gamifant)	10/01/19	Addition
Clinician Administered Drugs:Lutetium lu 177, dotatate (Lutathera) A9513	10/01/19	Addition
Clinician Administered Drugs: Onasemnogene Abeparvovec-xioi (Zolgensma) (J3490)	10/01/19	Addition
Clinician Administered Drugs: Esketamine (Spravato) J3490	10/01/19	Addition
Oximeter Device: (E0445) - over the limit of 1 per 6 mo	10/01/19	Addition
Mobility Aids: E0639 - Patient lift, moveable from room to room with disassembly and reassembly, includes all components/accessories; E0640 - Patient lift, fixed System, includes all components/accessories	11/07/19	Addition
Therapeutic Continuous Glucose Monitoring (K0553, K0554)	04/01/20	Addition
Clinician Administered Drugs: Injection, crizanlizumab-tmca, (Adakveo) C9053	05/26/20	Addition
E0325, E0638 (removal from hospital bed group - unrelated)	05/26/20	Deletion
Secretion and Mucous Clearance Devices, IntraPercussive Ventilation (E0480, E0841, E0842, E0483)	06/03/20	Addition
Prosthetics code (reference provider alert for specific codes)	06/03/20	Addition
Augmentative Communication Device: Speech generating software -(E2511)	06/23/20	Addition
Wheelchair accessory -(E2227)	06/23/20	addition
Clinician Administered Drug: C9055 - Brexanolone (Zulresso)	07/01/20	Addition
Mobility Aids: Patient Lifts (E0630, E0635, E0621, E0637, E0641)	07/03/20	Addition
Hospital bed group update - (E0250, E0255, E0260, E0265, E0271, E0300, E0316, E0328, E0329)	08/26/20	Addition
Electrical Bone Growth Stimulator (E0747, E0748)	09/04/20	Addition
Custom fitted orthosis (reference provider alert for specific codes)	09/05/20	Addition
Clinician Administered Drugs: Injection, golodirsen (Vyondys 53) - code updated tJ1429 (replacing J3490)	07/01/20	Addition
Clinician Administered Drugs: Injection, crizanlizumab-tmca, (Adakveo) - code updated tJ0791 (replacing C9053)	07/28/20	Addition
Clinician Administered Drugs: Onasemnogene Abeparvovec-xioi (Zolgensma) - code updated tJ3399 (replacing J3590)	07/28/20	Addition

Mobility Aids: Patient Lifts (E0630, E0635, E0621, E0637, E0641)	07/03/20	Addition
Hospital bed group update - (E0250, E0255, E0260, E0265, E0271, E0300, E0316, E0328, E0329)	08/25/20	Addition
TMJ diagnosis and treatment additional codes (21029, 21030, 21245)	12/22/20	Addition
Skilled Nursing Facility codes added SNF (reference provider alert for specific codes)	08/25/20	Addition
Clinician Administered Drugs: Injection, luspatercept-aamt (Reblozyl)	09/01/20	Addition
Electrical Bone Growth Stimulator (E0747, E0748)	09/04/20	Addition
Custom fitted orthosis (reference provider alert for specific codes)	09/05/20	Addition
Crisis Intervention, per 15 minutes removed from Mental Health Rehabilitation/Targeted Case Management	09/22/20	Deletion
Substance Use Disorder code (H0050)	09/23/20	Addition
Botulinum Toxin (J0585, J0586, J0587, J0588) revised to only require auth when billed outside of allowed diagnosis codes"	10/01/20	Addition
Immobilized lipase cartridges (procedure code B4105)	03/01/21	Addition
Uplizna (J1823)	01/01/21	Addition
Tecartus (C9073)	01/01/21	Addition
Vilteps(C9071)	03/01/21	Addition
Crysvita (J0584)	01/06/21	Addition
Mental Health Rehabilitation H2014 and H2017	10/28/20	Deletion
Tepezza (replaced code C9061)	01/29/21	Addition
Incontinence Supplies diapers, wipes, underpads	12/22/20	Addition
Genetic testing (S3800, S3840, S3841, S3842, S3846)	03/01/21	Addition
Mental Health Rehabilitation Services (H0034, H2012)	12/22/20	Addition
Hearing aid or assistive listening device/supplies/accessories, not otherwise specified (V5267)	02/25/21	Addition
Hospital Grade Blood Pressure Monitors (A9279)	02/25/21	Deletion
MEG Scans (95965, 95966, 95967)	02/25/21	Deletion
Mepolizumab (Nucala) J2182	02/25/21	Deletion
Evrysdi (risdiplam)	02/01/21	Addition
Genetic testing invalid code 81530	11/24/20	Deletion
Genetic testing (Codes 81202 through 81341)	03/01/21	Addition
Non-emergency transportation; taxi (A0100)	11/24/20	Deletion
Wheelchair accessory, dynamic positioning hardware for back (E2398)	03/01/21	Addition
Personal care services Star Kids only G0162- Skilled services by a registered nurse (RN) for management and evaluation of the plan of care; each 15	03/01/21	Addition
A9900 (Miscellaneous DME supply, accessory) over \$500	03/01/21	Addition
For CHIP: Day Program for Acute Needs (H2012), Medication Training and Support (H0034), Crisis Intervention H2011), and Psychosocial rehabilitation services H2017)	11/24/20	Deletion
Controlled dose inhalation drug delivery system (K0730)	03/08/21	Addition
IPPB machine, all types, with built-in nebulization; manual or automatic valves; internal or external power source (E0500)	03/08/21	Addition
Mental Health Rehabilitation – Code H2011	09/22/20	Deletion

Cosmetic services Code 36469, Single or multiple injections of sclerosingsolutions, spide	11/24/20	Deletion
Cosmetic services Codes 15786,15787, 15830, 67900 through 67903, 67909, 67911, 30465,and 30520	03/08/21	Addition
Oral surgery: D9094	11/24/20	Deletion
D1515 space maintainer - fixed - bilateral		
D1525 space maintainer - removable - bilateral		
D1550 re-cement or re-bond space maintainer		
D1555 removal of fixed space maintainer		
D5281 removable unilateral partial denture – one-piece cast metal (including clasps and teeth)		
D5510 repair broken complete denture base		
D5610 repair resin denture base		
D5620 repair cast framework		
D9940 occlusal guard, by report		
D0260 extraoral - each additional radiographic image		
D0290 posterior-anterior or lateral skull and facial bone survey radiographic image		
D0360 cone beam ct - craniofacial data capture		
D0362 cone beam - two-dimensional image reconstruction using existing data, includes multiple images		
D0363 cone beam - three-dimensional image reconstruction using existing data, includes multiple images		
D0421 genetic test for susceptibility toral diseases		
D1203 topical application of fluoride - child		
D1204 topical application of fluoride - adult		
D4271 free soft tissue graft procedure (including donor site surgery)		
D5281 removable unilateral partial denture – one-piece cast metal (including clasps and teeth)		
D5860 overdenture - complete, by report		
D5861 overdenture - partial, by report		
D6053 implant/abutment supported removable denture for completely edentulous arch		
D6054 implant/abutment supported removable denture for partially edentulous arch		
D6078 implant/abutment supported fixed denture for completely edentulous arch		
D6079 implant/abutment supported fixed denture for partially edentulous arch		
D6079 implant/abutment supported fixed denture for partially edentulous arch		
D6970 post and core in addition to fixed partial denture retainer, indirectly fabricated		
D6972 prefabricated post and core in addition to fixed partial denture retainer		
D6973 core build up for retainer, including any pins		
D6975 coping		
D6976 each additional indirectly fabricated post - same tooth		
D6977 each additional prefabricated post - same tooth		
D8691 repair of orthodontic appliance		
D8692 replacement of lost or broken retainer		
D8693 re-cement or re-bond fixed retainer		
D9220 deep sedation/general anesthesia - first 30 minutes		
D9221 deep sedation/general anesthesia - each additional 15 minutes		
D9241 intravenous moderate (conscious) sedation/analgesia - first 30 minutes		
D9242 intravenous moderate (conscious) sedation/analgesia - each additional 15 minutes		
D9940 occlusal guard, by report		
D0416 Viral culture		
D0425 Caries susceptibility tests		
D0431 Adjunctive pre-diagnostic test that aids in detection of mucosal abnormalities including premalignant andmalignant lesions, not to include cytology or biopsy procedures		
D0472 Accession of tissue, gross examination, preparation and transmission of written report		
D0473 Accession of tissue, gross and microscopic examination, preparation and transmission of written report		
D0474 Accession of tissue, gross and microscopic examination, including assessment of surgical margins for presence of disease, preparation and transmission of written report		
D0475 Decalcification procedure		
D0476 Special stains for microorganisms		
D0477 Special stains, not for microorganisms		
D0478 Immunohistochemical stains		
D0479 Tissue in-situ hybridization, including interpretation		

D0480 Accession of exfoliative cytologic smears, microscopic examination, preparation and transmission of written report
 D0481 Electron microscopy
 D0482 Direct immunofluorescence
 D0483 Indirect immunofluorescence
 D0484 Consultation on slides prepared elsewhere
 D0485 Consultation, including preparation of slides from biopsy material supplied by referring source
 D0486 Laboratory accession of transepithelial cytologic sample, microscopic examination, preparation and transmission of written report
 D1310 Nutritional counseling for control of dental disease
 D1320 Tobacco Counseling for the control and prevention of oral disease
 D2410 Gold foil - one surface
 D2420 Gold foil – two surfaces
 D2430 Gold foil - three surfaces
 D2610 Inlay - porcelain/ceramic - one surface
 D2620 Inlay - porcelain/ceramic – two surfaces
 D2630 Inlay - porcelain/ceramic - three or more surfaces
 D2642 Onlay - porcelain/ceramic – two surfaces
 D2643 Onlay - porcelain/ceramic - three surfaces
 D2644 Onlay - porcelain/ceramic - four or more surfaces
 D2712 Crown - ¾ resin-based composite (indirect)
 D2799 Provisional crown– further treatment or completion of diagnosis necessary prior to final impression
 D2975 Coping
 D3221 Pulpal debridement, primary and permanent teeth
 D3331 Treatment of root canal obstruction; non-surgical access
 D3332 Incomplete endodontic therapy; inoperable, unrestorable or fractured tooth
 D3333 Internal root repair of perforation defects
 D4263 Bone replacement graft - retained natural tooth - first site in quadrant
 D4264 Bone replacement graft - retained natural tooth - each additional site in quadrant
 D4265 Biologic materials aid in soft and osseous tissue regeneration
 D4268 Surgical revision procedure, per tooth
 D5225 Maxillary partial denture - flexible base (including any clasps, rests and teeth)
 D5226 Mandibular partial denture - flexible base (including any clasps, rests and teeth)
 D5867 Replacement of replaceable part of semi-precision or precision attachment (male or female component)
 D5875 Modification of removable prosthesis following implant surgery
 D6010 Surgical placement of implant body: endosteal implant
 D6012 Surgical placement of interim implant body for transitional prosthesis: endosteal implant
 D6040 Surgical placement: eposteal implant
 D6050 Surgical placement: transosteal implant
 D6055 Connecting bar – implant supported or abutment supported
 D6056 Prefabricated abutment – includes modification and placement
 D6057 Custom fabricated abutment – includes placement
 D6058 Abutment supported porcelain/ceramic crown
 D6059 Abutment supported porcelain fused to metal crown (high noble metal)
 D6060 Abutment supported porcelain fused to metal crown (predominantly base metal)
 D6061 Abutment supported porcelain fused to metal crown (noble metal)
 D6062 Abutment supported cast metal crown (high noble metal)
 D6063 Abutment supported cast metal crown (predominantly base metal)
 D6064 Abutment supported cast metal crown (noble metal)
 D6065 Implant supported porcelain/ceramic crown
 D0476 Special stains for microorganisms
 D0477 Special stains, not for microorganisms
 D0478 Immunohistochemical stains
 D0479 Tissue in-situ hybridization, including interpretation
 D0480 Accession of exfoliative cytologic smears, microscopic examination, preparation and transmission of written report
 D0481 Electron microscopy
 D0482 Direct immunofluorescence
 D0483 Indirect immunofluorescence
 D0484 Consultation on slides prepared elsewhere

D0485 Consultation, including preparation of slides from biopsy material	11/24/20	Deletion
D0486 Laboratory accession of transepithelial cytologic sample, microscopic examination		
Preparation and transmission of written report		
D1310 Nutritional counseling for control of dental disease		
D1320 Tobacco counseling for the control and prevention of oral disease		
D2410 Gold foil - one surface		
D2420 Gold foil - two surfaces		
D2430 Gold foil - three surfaces		
D2610 Inlay - porcelain/ceramic - one surface		
D2620 Inlay - porcelain/ceramic – two surfaces		
D2630 Inlay - porcelain/ceramic - three or more surfaces		
D2642 Onlay - porcelain/ceramic – two surfaces		
D2643 Onlay - porcelain/ceramic - three surfaces		
D2644 Onlay - porcelain/ceramic - four or more surfaces		
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D4268 Surgical revision procedure, per tooth		
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D6055 Connecting bar – implant supported or abutment supported		
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D6057 Custom fabricated abutment – includes placement		
D6058 Abutment supported porcelain/ceramic crown		
D6059 Abutment supported porcelain fused to metal crown (high noble metal)		
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D6063 Abutment supported cast metal crown (predominantly base metal)		
D6064 Abutment supported cast metal crown (noble metal)		
D6065 Implant supported porcelain/ceramic crown		
D6066 Implant supported porcelain fused to metal crown (titanium, titanium alloy, high noble metal)		
D6067 Implant supported metal crown (titanium, titanium alloy, high noble metal)		
D6068 Abutment supported retainer for porcelain/ceramic FPD		
D6069 Abutment supported retainer for porcelain fused to metal FPD (high noble metal)		
D6070 Abutment supported retainer for porcelain fused to metal FPD (predominantly base metal)		
D6071 Abutment supported retainer for porcelain fused to metal FPD (noble metal)		
D6072 Abutment supported retainer for cast metal FPD (high noble metal)		
D6073 Abutment supported retainer for cast metal FPD (predominantly base metal)		
D6074 Abutment supported retainer for cast metal FPD (noble metal)		
D6075 Implant supported retainer for ceramic FPD		
D6076 Implant supported retainer for porcelain fused to metal FPD (titanium, titanium alloy, orhigh noble metal)		
D6077 Implant supported retainer for cast metal FPD (titanium, titanium alloy, or high noble metal)		
D6080 Implant maintenance procedures when prostheses are removed and reinserted, including cleansing of prostheses and abutments		
D6090 Repair implant supported prosthesis, by report		

D6091 Replacement of semi-precision or precision attachment (male or female component) of implant/abutment supported prosthesis, per attachment
D6092 Re-cement or re-bond implant/abutment supported crown
D6093 Re-cement or re-bond implant/abutment supported fixed partial denture
D6095 Repair implant abutment, by report
D6100 Implant removal, by report
D6190 Radiographic/surgical implant index, by report
D6194 Abutment supported retainer crown for FPD (titanium)
D6199 Unspecified implant procedure, by report
D6205 Pontic - indirect resin based composite
D6214 Pontic - titanium
D6253 Provisional pontic - further treatment or completion of diagnosis necessary prior to final impression
D6600 Retainer inlay - porcelain/ceramic, two surfaces
D6601 Retainer inlay - porcelain/ceramic, three or more surfaces
D6602 Retainer inlay - cast high noble metal, two surfaces
D6603 Retainer inlay - cast high noble metal, three or more surfaces
D6604 Retainer inlay - cast predominantly base metal, two surfaces
D6605 Retainer inlay - cast predominantly base metal, three or more surfaces
D6606 Retainer inlay - cast noble metal, two surfaces
D6607 Retainer inlay - cast noble metal, three or more surfaces
D6608 Retainer onlay - porcelain/ceramic, two surfaces
D6609 Retainer onlay - porcelain/ceramic, three or more surfaces
D6610 Retainer onlay - cast high noble metal, two surfaces
D6611 Retainer onlay - cast high noble metal, three or more surfaces
D6612 Retainer onlay - cast predominantly base metal, two surfaces
D6613 Retainer onlay - cast predominantly base metal, three or more surfaces
D6614 Retainer onlay - cast noble metal, two surfaces
D6615 Retainer onlay - cast noble metal, three or more surfaces
D6624 Inlay titanium
D6634 Onlay titanium
D6710 Retainer crown - indirect resin-based composite
D6793 Provisional retainer crown - further treatment or completion of diagnosis necessary prior to final impression
D6794 Retainer crown - titanium
D6985 Pediatric partial denture fix
D7287 Exfoliative cytological sample collection
D7288 Brush biopsy - transepithelial sample collection
D7292 Placement of temporary anchorage device [screw retained plate] requiring flap; includes device removal
D7293 Placement of temporary anchorage device requiring flap; includes device removal
D7294 Placement of temporary anchorage device without flap; includes device removal
D7311 Alveoloplasty in conjunction with extractions - one to three teeth or tooth spaces, per quadrant
D7321 Alveoloplasty not in conjunction with extractions - one to three teeth or tooth spaces, per quadrant
D7412 Excision of benign lesion, complicated
D7415 Excision of malignant lesion, complicated
D7471 Removal of lateral exostosis (maxilla or mandible)
D7473 Removal of torus mandibularis
D7485 Reduction of osseous tuberosity
D7490 Radical resection of maxilla or mandible
D7511 Incision and drainage of abscess - intraoral soft tissue - complicated (includes drainage of multiplefacial spaces)
D7521 Incision and drainage of abscess - extraoral soft tissue - complicated (includes drainage of multiplefacial spaces)
D7610 Maxilla - open reduction (teeth immobilized, if present)
D7620 Maxilla - closed reduction (teeth immobilized, if present)
D7630 Mandible - open reduction (teeth immobilized, if present)
D7640 Mandible - closed reduction (teeth immobilized, if present)
D7650 Malar and/or zygomatic arch - open reduction
D7660 Malar and/or zygomatic arch - closed reduction
D7671 Alveolus - open reduction, may include stabilization of teeth
D7680 Facial bones - complicated reduction with fixation and multiple surgical approaches
D7710 Maxilla - open reduction

D7720 Maxilla - closed reduction
D7730 Mandible - open reduction
D7740 Mandible - closed reduction
D7750 Malar and/or zygomatic arch - open reduction
D7760 Malar and/or zygomatic arch - closed reduction
D7770 Alveolus - open reduction stabilization of teeth
D7771 Alveolus - closed reduction stabilization of teeth
D7780 Facial bones - complicated reduction with fixation and multiple approaches
D7810 Open reduction of dislocation
D7830 Manipulation under anesthesia
D7840 Condylectomy
D7850 Surgical discectomy, with/without implant
D7852 Disc repair
D7854 Synovectomy
D7856 Myotomy
D7858 Joint reconstruction
D7860 Arthrotomy
D7865 Arthroplasty
D7870 Arthrocentesis
D7871 Non-arthroscopic lysis and lavage
D7872 Arthroscopy - diagnosis, with or without biopsy
D7873 Arthroscopy: lavage and lysis of adhesions
D7874 Arthroscopy: disc repositioning and stabilization
D7875 Arthroscopy: synovectomy
D7876 Arthroscopy: discectomy
D7877 Arthroscopy: debridement
D7920 Skin graft (identify defect covered, location and type of graft)
D7940 Osteoplasty - for orthognathic deformities
D7941 Osteotomy - mandibular ram
D7943 Osteotomy - mandibular rami with bone graft; includes obtaining the graft
D7944 Osteotomy - segmented or subapical
D7945 Osteotomy - body of mandible
D7946 LeFort I (maxilla - total)
D7947 LeFort I (maxilla - segmented)
D7948 LeFort II or LeFort III (osteoplasty of facial bones for midface hypoplasia or retrusion) - without bone graft
D7949 LeFort II or LeFort III - with bone graft
D7950 Osseous, osteoperiosteal, or cartilage graft of the mandible or maxilla - autogenous or nonautogenous, by report
D7951 Sinus augmentation with bone or bone substitutes via a lateral open approach
D7953 Bone replacement graft for ridge preservation - per site
D7963 Frenuloplasty
D7981 Excision of salivary gland, by report
D7982 Sialodochoplasty
D7990 Emergency tracheotomy
D7991 Coronoidectomy
D7995 Synthetic graft - mandible or facial bones, by report
D7996 Implant-mandible for augmentation purposes (excluding alveolar ridge), by report
D7998 Intraoral placement of a fixation device not in conjunction with a fracture
D8010 Limited orthodontic treatment of the primary dentition
D8020 Limited orthodontic treatment of the transitional dentition
D8030 Limited orthodontic treatment of the adolescent dentition
D8040 Limited orthodontic treatment of the adult dentition
D8070 Comprehensive orthodontic treatment of the transitional dentition
D8090 Comprehensive orthodontic treatment of the adult dentition
D9215 Local anesthesia in conjunction with operative or surgical procedure
D9450 Case presentation, detailed and extensive treatment planning
D9911 Application of desensitizing resin for cervical and/or root surface, per tooth
D9941 Fabrication of athletic mouthguard
D9942 Repair and/or reline of occlusal guard
D9971 Odontoplasty 1-2 teeth; includes removal of enamel projections

D9972	External bleaching - per arch - performed in office	11/24/20	Deletion
D9973	External bleaching - per tooth		
D3221	Pulpal debridement, primary and permanent teeth		
D3331	Treatment of root canal obstruction; non-surgical access		
D3332	Incomplete endodontic therapy; inoperable,unrestorable or fractured tooth	11/24/20	Deletion
D3333	Internal root repair of perforation defects	11/24/20	Deletion
D4263	Bone replacement graft - retained natural tooth - first site in quadrant	11/24/20	Deletion
D4264	Bone replacement graft - retained natural tooth - each additional site in quadrant	11/24/20	Deletion
D4265	Biologic materials aid in soft and osseous tissue regeneration	11/24/20	Deletion
D4268	Surgical revision procedure, per tooth	11/24/20	Deletion
D5225	Maxillary partial denture – flexible base including any clasps, rests and teeth)	11/24/20	Deletion
D5226	Mandibular partial denture - flexible base(including any clasps, rests and teeth)	11/24/20	Deletion
D5867	Replacement of replaceable part of semi-precision or precisionattachment (male or female component)	11/24/20	Deletion
D5875	Modification of removable prosthesis following implant surgery	11/24/20	Deletion
D6010	Surgical placement of implant body: endosteal implant	11/24/20	Deletion
D6012	Surgical placement of interim implant body for transitional prosthesis:endosteal implant	11/24/20	Deletion
D6040	Surgical placement: eosteal implant	11/24/20	Deletion
D6050	Surgical placement: transosteal implant	11/24/20	Deletion
D6055	Connecting bar – implant supported or abutment supported	11/24/20	Deletion
D6056	Prefabricated abutment – includes modification and placement	11/24/20	Deletion
D6057	Custom fabricated abutment – includes placement	11/24/20	Deletion
D6058	Abutment supported porcelain/ceramic crown	11/24/20	Deletion
D6059	Abutment supported porcelain fused to metal crown (high noble metal)	11/24/20	Deletion
D6060	Abutment supported porcelain fused to metal crown(predominantly base metal)	11/24/20	Deletion
D6061	Abutment supported porcelain fused to metal crown (noble metal)	11/24/20	Deletion
D6062	Abutment supported cast metal crown (high noble metal)	11/24/20	Deletion
D6063	Abutment supported cast metal crown (predominantly base metal)	11/24/20	Deletion
D6064	Abutment supported cast metal crown (noble metal)	11/24/20	Deletion
D6065	Implant supported porcelain/ceramic crown	11/24/20	Deletion
D6066	Implant supported porcelain fused to metal crown (titanium, titanium alloy, high noble metal)	11/24/20	Deletion
D6067	Implant supported metal crown (titanium, titanium alloy, high noble metal)	11/24/20	Deletion
D6068	Abutment supported retainer for porcelain/ceramic FPD	11/24/20	Deletion
D6069	Abutment supported retainer for porcelain fused metal FPD(high noble metal)	11/24/20	Deletion

D6070	Abutment supported retainer for porcelain fused to metal FPD (predominantly base metal)	11/24/20	Deletion
D6071	Abutment supported retainer for porcelain fused to metal FPD(noble metal)	11/24/20	Deletion
D6072	Abutment supported retainer for cast metal FPD (high noble metal)	11/24/20	Deletion
D6073	Abutment supported retainer for cast metal FPD(predominantly base metal)	11/24/20	Deletion
D6074	Abutment supported retainer for cast metal FPD (noble metal)	11/24/20	Deletion
D6075	Implant supported retainer for ceramic FPD	11/24/20	Deletion
D6076	Implant supported retainer for porcelain fused to metal FPD(titanium, titanium alloy, or high noble metal)	11/24/20	Deletion
D6077	Implant supported retainer for cast metal FPD(titanium, titanium alloy, or high noble metal)	11/24/20	Deletion
D6080	Implant maintenance procedures when prostheses are removed and reinserted, including cleansing of prostheses and abutments	11/24/20	Deletion
D6090	Repair implant supported prosthesis, by report	11/24/20	Deletion
D6091	Replacement of semi-precision or precision attachment (male or female component) of implant/abutment supported prosthesis, per attachment	11/24/20	Deletion
D6092	Re-cement or re-bond implant/abutment supported crown	11/24/20	Deletion
D6093	Re-cement or re-bond implant/abutment supported fixed partial denture	11/24/20	Deletion
D6095	Repair implant abutment, by report	11/24/20	Deletion
D6100	Implant removal, by report	11/24/20	Deletion
D6190	Radiographic/surgical implant index, by report	11/24/20	Deletion
D6194	Abutment supported retainer crown for FPD (titanium)	11/24/20	Deletion
D6199	Unspecified implant procedure, by report	11/24/20	Deletion
D6205	Pontic - indirect resin based composite	11/24/20	Deletion
D6214	Pontic - titanium	11/24/20	Deletion
D6253	Provisional pontic - further treatment or completion of diagnosis necessary prior to final impression	11/24/20	Deletion
D6600	Retainer inlay - porcelain/ceramic, two surfaces	11/24/20	Deletion
D6601	Retainer inlay - porcelain/ceramic, three or more surfaces	11/24/20	Deletion
D6602	Retainer inlay - cast high noble metal, two surfaces	11/24/20	Deletion
D6603	Retainer inlay - cast high noble metal, three or more surfaces	11/24/20	Deletion
D6604	Retainer inlay - cast predominantly base metal, two surfaces	11/24/20	Deletion
D6605	Retainer inlay - cast predominantly base metal, three or more surfaces	11/24/20	Deletion
D6606	Retainer inlay - cast noble metal, two surfaces	11/24/20	Deletion
D6607	Retainer inlay - cast noble metal, three or more surfaces	11/24/20	Deletion
D6608	Retainer onlay - porcelain/ceramic, two surfaces	11/24/20	Deletion
D6609	Retainer onlay - porcelain/ceramic, three or more surfaces	11/24/20	Deletion
D6610	Retainer onlay - cast high noble metal, two surfaces	11/24/20	Deletion
D6611	Retainer onlay - cast high noble metal, three or more surfaces	11/24/20	Deletion

D6612	Retainer onlay - cast predominantly base metal, two surfaces	11/24/20	Deletion
D6613	Retainer onlay - cast predominantly base metal, three or more surfaces	11/24/20	Deletion
D6614	Retainer onlay - cast noble metal, two surfaces	11/24/20	Deletion
D6615	Retainer onlay - cast noble metal, three or more surfaces	11/24/20	Deletion
D6624	Inlay titanium	11/24/20	Deletion
D6634	Onlay titanium	11/24/20	Deletion
D6710	Retainer crown - indirect resin based composite	11/24/20	Deletion
D6793	Provisional retainer crown - further treatment or completion of diagnosis necessary prior to final impression	11/24/20	Deletion
D6794	Retainer crown - titanium	11/24/20	Deletion
D6985	Pediatric partial denture fix	11/24/20	Deletion
D7287	Exfoliative cytological sample collection	11/24/20	Deletion
D7288	Brush biopsy - transepithelial sample collection	11/24/20	Deletion
D7292	Placement of temporary anchorage device [screw retained plate]requiring flap; includes device removal	11/24/20	Deletion
D7293	Placement of temporary anchorage device requiring flap; includes device removal	11/24/20	Deletion
D7294	Placement of temporary anchorage device without flap; includes device removal	11/24/20	Deletion
D7311	Alveoloplasty in conjunction with extractions - one to three teeth or tooth spaces, per quadrant	11/24/20	Deletion
D7321	Alveoloplasty not in conjunction with extractions - one to three teeth or tooth spaces, per quadrant	11/24/20	Deletion
D7412	Excision of benign lesion, complicated	11/24/20	Deletion
D7415	Excision of malignant lesion, complicated	11/24/20	Deletion
D7471	Removal of lateral exostosis (maxilla or mandible)	11/24/20	Deletion
D7473	Removal of torus mandibularis	11/24/20	Deletion
D7485	Reduction of osseous tuberosity	11/24/20	Deletion
D7490	Radical resection of maxilla or mandible	11/24/20	Deletion
D7511	Incision and drainage of abscess - intraoral soft tissue - complicated (includes drainage of multiple fascial spaces)	11/24/20	Deletion
D7521	Incision and drainage of abscess - extraoral soft tissue - complicated (includes drainage of multiple fascial spaces)	11/24/20	Deletion
D7610	Maxilla - open reduction (teeth immobilized, if present)	11/24/20	Deletion
D7620	Maxilla - closed reduction (teeth immobilized, if present)	11/24/20	Deletion
D7630	Mandible - open reduction (teeth immobilized, if present)	11/24/20	Deletion
D7640	Mandible - closed reduction (teeth immobilized, if present)	11/24/20	Deletion
D7650	Malar and/or zygomatic arch - open reduction	11/24/20	Deletion
D7660	Malar and/or zygomatic arch - closed reduction	11/24/20	Deletion
D7671	Alveolus - open reduction, may include stabilization of teeth	11/24/20	Deletion
D7680	Facial bones - complicated reduction with fixation and multiple surgical approaches	11/24/20	Deletion

D7710	Maxilla - open reduction	11/24/20	Deletion
D7720	Maxilla - closed reduction	11/24/20	Deletion
D7730	Mandible - open reduction	11/24/20	Deletion
D7740	Mandible - closed reduction	11/24/20	Deletion
D7750	Malar and/or zygomatic arch - open reduction	11/24/20	Deletion
D7760	Malar and/or zygomatic arch - closed reduction	11/24/20	Deletion
D7770	Alveolus - open reduction stabilization of teeth	11/24/20	Deletion
D7771	Alveolus - closed reduction stabilization of teeth	11/24/20	Deletion
D7780	Facial bones - complicated reduction with fixation and multiple approaches	11/24/20	Deletion
D7810	Open reduction of dislocation	11/24/20	Deletion
D7830	Manipulation under anesthesia	11/24/20	Deletion
D7840	Condylectomy	11/24/20	Deletion
D7850	Surgical discectomy, with/without implant	11/24/20	Deletion
D7852	Disc repair	11/24/20	Deletion
D7854	Synovectomy	11/24/20	Deletion
D7856	Myotomy	11/24/20	Deletion
D7858	Joint reconstruction	11/24/20	Deletion
D7860	Arthrotomy	11/24/20	Deletion
D7865	Arthroplasty	11/24/20	Deletion
D7870	Arthrocentesis	11/24/20	Deletion
D7871	Non-arthroscopic lysis and lavage	11/24/20	Deletion
D7872	Arthroscopy - diagnosis, with or without biopsy	11/24/20	Deletion
D7873	Arthroscopy: lavage and lysis of adhesions	11/24/20	Deletion
D7874	Arthroscopy: disc repositioning and stabilization	11/24/20	Deletion
D7875	Arthroscopy: synovectomy	11/24/20	Deletion
D7876	Arthroscopy: discectomy	11/24/20	Deletion
D7877	Arthroscopy: debridement	11/24/20	Deletion
D7920	Skin graft (identify defect covered, location and type of graft)	11/24/20	Deletion
D7940	Osteoplasty - for orthognathic deformities	11/24/20	Deletion
D7941	Osteotomy - mandibular ram	11/24/20	Deletion
D7943	Osteotomy - mandibular rami with bone graft; includes obtaining the graft	11/24/20	Deletion
D7944	Osteotomy - segmented or subapical	11/24/20	Deletion
D7945	Osteotomy - body of mandible	11/24/20	Deletion
D7946	LeFort I (maxilla - total)	11/24/20	Deletion
D7947	LeFort I (maxilla - segmented)	11/24/20	Deletion
D7948	LeFort II or LeFort III (osteoplasty of facial bones for midface hypoplasia or retrusion) - without bone graft	11/24/20	Deletion
D7949	LeFort II or LeFort III - with bone graft	11/24/20	Deletion
D7950	Osseous, osteoperiosteal, or cartilage graft of the mandible or maxilla - autogenous or nonautogenous, by report	11/24/20	Deletion

D7951	Sinus augmentation with bone or bone substitutes via a lateral open approach	11/24/20	Deletion
D7953	Bone replacement graft for ridge preservation - per site	11/24/20	Deletion
D7963	Frenuloplasty	11/24/20	Deletion
D7981	Excision of salivary gland, by report	11/24/20	Deletion
D7982	Sialodochoplasty	11/24/20	Deletion
D7990	Emergency tracheotomy	11/24/20	Deletion
D7991	Coronoidectomy	11/24/20	Deletion
D7995	Synthetic graft - mandible or facial bones, by report	11/24/20	Deletion
D7996	Implant-mandible for augmentation purposes (excluding alveolar ridge),by report	11/24/20	Deletion
D7998	Intraoral placement of a fixation device not in conjunction with a fracture	11/24/20	Deletion
D8010	Limited orthodontic treatment of the primary dentition	11/24/20	Deletion
D8020	Limited orthodontic treatment of the transitional dentition	11/24/20	Deletion
D8030	Limited orthodontic treatment of the adolescent dentition	11/24/20	Deletion
D8040	Limited orthodontic treatment of the adult dentition	11/24/20	Deletion
D8070	Comprehensive orthodontic treatment of the transitional dentition	11/24/20	Deletion
D8090	Comprehensive orthodontic treatment of the adult dentition	11/24/20	Deletion
D9215	Local anesthesia in conjunction with operative or surgical procedure	11/24/20	Deletion
D9450	Case presentation, detailed and extensive treatment planning	11/24/20	Deletion
D9911	Application of desensitizing resin for cervical and/or root surface, per tooth	11/24/20	Deletion
D9941	Fabrication of athletic mouthguard	11/24/20	Deletion
D9942	Repair and/or relines of occlusal guard	11/24/20	Deletion
D9971	Odontoplasty 1-2 teeth; includes removal of enamel projections	11/24/20	Deletion
D9972	External bleaching - per arch - performed in office	11/24/20	Deletion
D9973	External bleaching - per tooth	11/24/20	Deletion
	Residential Treatment Services Alcohol and/or other drug treatment program, per hour (H2035)	09/23/20	Addition
	Residential Withdrawal Management Treatment Services: Alcohol and/or drug services; subacute detoxification (residential addiction program outpatient) (H0012)	09/23/20	Addition
	Residential Withdrawal Management Treatment Services: Mental health assessment, by nonphysician (H0031)	09/23/20	Addition
	Substance Use Disorder (SUD) Services: Alcohol and/or drug services; medical/somatic (medical intervention in ambulatory setting) (H0012)	09/23/20	Addition
	Substance Use Disorder (SUD) Services: Alcohol and/or drug services, brief intervention, per 15 minutes (H0050)	09/23/20	Addition
	Mental Health Rehabilitation (H2011)	09/22/20	Deletion
	Golodirsen Vyondys 53 (J1429)	08/01/20	Addition
	Electric Bone Growth Stimulator: Osteogenesis stimulator, electrical, surgically implanted (E0749)	02/01/21	Addition
	Electric Bone Growth Stimulator: Osteogenesis stimulator, low intensity ultrasound, noninvasive (E0760)	02/01/21	Addition

Clinician Administered Drugs: Injection, moxetumomab pasudotox-tdfk, 0.01 mg (C9045)	10/28/20	Deletion
Clinician Administered Drugs: Injection, emapalumab-lzsg, 1 mg (C9050)	10/28/20	Deletion
Clinician Administered Drugs: Injection, burosumab-twza, 1 mg (Crysvita) J0584	02/01/21	Addition
Clinician Administered Drugs: Injection, ibalizumab-uiyk, 10 mg (Trogarzo) J1746	02/01/21	Addition

Clinician Administered Drugs: Injection, vestronidase alfa-vjvk, 1 mg (Mepsevii) J3397	02/01/21	Addition
Clinician Administered Drugs: Injection, tagraxofusp-erzs, 10 mcg (Elzonris)J9269	02/01/21	Addition
Clinician Administered Drugs: Injection, abatacept, 10 mg (Orencia) J0129	02/01/21	Addition
Clinician Administered Drugs: Injection, alglucosidase alfa, 10 mg, not otherwise specified J0220	02/01/21	Addition
Clinician Administered Drugs: Injection, alglucosidase alfa, (Lumizyme), 10 mg J0221	02/01/21	Addition
Clinician Administered Drugs: Injection, benralizumab, 1 mg (Fasenra) J0517)	02/01/21	Addition
Clinician Administered Drugs: Injection, clofarabine, 1 mg (Clolar) J9027	02/01/21	Addition
Clinician Administered Drugs: Injection, fluocinolone acetonide, intravitreal implant (Retisert), 0.01 mg J7311	02/01/21	Addition
Clinician Administered Drugs: Injection, omalizumab, 5 mg (Xolair) J2357	02/01/21	Addition
Clinician Administered Drugs: Injection, reslizumab, 1 mg (Cinqair) J2786	02/01/21	Addition
Orthotics: (L0112 L0220 L0460 L0466 L0480 L0622 L0624 L0626 L0627 L0629 L0631 L0632 L0633 L0634 L0636 L0637 L0639 L0640 L1610 L1620 L1630 L1640 L1680 L1685 L1700 L1710 L1720 L1730 L1755 L1810 L1834 L1840 L1843 L1844 L1846 L1847 L1860 L1900 L1904 L1920 L1980 L1990 L2000 L2005 L2006 L20120 L2020 L2030 L2038 L2050 L2060 L2070 L2080 L2090 L2106 L2108 L2126 L2128 L2232 L2320 L2330 L2520 L2526 L2800 L3230 L3250 L3252 L3253 L3671 L3674 L3677 L3702 L3720 L3730 L3740 L3763 L3764 L3765 L3766 L3806 L3891 L3900 L3901 L3904 L3915 L3917 L3921 L3923 L3929 L3933 L3935 L3961 L3967 L3971 L3973 L3975 L3976 L3977 L3978 L4030 L4040 L4045 L4050 L4055 L4396 L4631 L0130 L0170 L0700 L0710 L1110 L2250 L2510 L2525 L2530 L2627 L3001 L3002 L3003 L3040 L3050 L3251 L4020)	03/01/21	Addition
Wheelchairs K0008 Custom manual wheelchair/base (K0008)	03/01/21	Addition
Biofeedback training by any modality (90901)	03/01/21	Addition
Biofeedback training, perineal muscles, anorectal or urethral sphincter, including EMG and/or manometry, when performed; initial 15 minutes of one-on-one physician or other qualified health care professional contact with the patient (90912)	03/01/21	Addition
Biofeedback training, perineal muscles, anorectal or urethral sphincter, including EMG and/or manometry, when performed; each additional 15 minutes of one-on-one physician or other qualified health care professional contact with the patient (90913)	03/01/21	Addition
Substance Use Disorder (SUD) Services H0016 - Alcohol and/or drug services; medical/somatic (medical intervention in ambulatory setting) H0050 - Alcohol and/or drug services, brief intervention, per 15 minutes Residential Withdrawal Management Treatment Services H0012 - Alcohol and/or drug services; subacute detoxification (residential addiction program outpatient) H0031 - Mental health assessment, by non-physician	9/23/20	Addition
TMJ diagnosis and treatment all codes	4/20/21	Deletion

Genetic testing 81329 Spinal Muscular Atrophy (SMA) and 81229 Cystic Fibrosis (CF)	5/25/21	Deletion
Fetal MRI 74712	1/01/20	Addition
Fetal MRI 74712	4/01/20	Addition
Clinician Administered Drugs: Amondys 45 (Casimersen) C9075	7/1/21	Addition
Genetic Testing Cystic Fibrosis: 81220, 81221, 81223, 81224	5/25/21	Deletion
Genetic Testing Spinal Muscular Atrophy: 81329, 81336, 81337	5/25/21	Deletion
Genetic testing: Heme/Onc - Chromosome Analysis Panel 88237 278502 TISSUE CULT NEOPLASTIC DISORD; BONE MARROW OR BLOOD 88264 278509 CHROMOSOME ANALYZE 20-25 CELLS 88280 278514 CHROMOSOME ANALYSIS ADD'L KARYOTYPES, EA STUDY	6/22/21	Deletion
Heme/Onc - One FISH Analysis Panel (each specimen) 88237 278502 TISSUE CULT NEOPLASTIC DISORD; BONE MARROW OR BLOOD 88271 278510 MOLECULAR CYTOGENETICS DNA PROBE, EACH 88275 278513 INTERPHASE IN SITU HYBRID ANALYZE 100-300 CELLS		
Heme/Onc - Add on - One FISH Analysis 88271 278510 MOLECULAR CYTOGENETICS DNA PROBE, EACH 88275 278513 INTERPHASE IN SITU HYBRID ANALYZE 100-300 CELLS	6/22/21	Deletion
Cytogenetic testing: 81265, 81266	6/22/21	Deletion
Reading of CGM data: 95251	6/22/21	Deletion
Biofeedback: 90901,90912, 90913	8/1/21	Deletion
DME Repair: K0379 when greater than 35 units	8/1/21	Deletion
Transfer system: E1035	8/1/21	Addition
Breast Reduction: 19318	8/1/21	Addition
Cosmetic Surgery: 36473	8/1/21	Addition
Adjunct continuous glucose monitoring (CGM) system: A9276, A9277, and A9278	9/1/21	Addition
Miscellaneous DME: T1999 when billed amount is greater than \$500	11/1/21	Addition
Ocular Implant: L8610	11/1/21	Addition
Inpatient EEG: 95726, 95700, 95718, 95720, 95722, 95724	11/1/21	Addition
Dermal filler: Q2026	11/1/21	Addition

Functional Endoscopic Sinus Surgery: 31240, 31253, 31254, 31255, 31256, 31257, 31259, 31267, 31276, 31287, 31288	11/1/21	Addition
Mobility Aids: E0641	11/1/21	Addition
Joint Replacement Surgery: 23470, 23472, 23473, 23474, 24360, 24361, 24362, 24363, 24370, 24371, 27120, 27122, 27125, 27130, 27132, 27134, 27137, 27138, 27412, 27446, 27447, 27486, 27487, 29866, 29867, 29868	11/1/21	Addition
Spinal Surgery for Ages 21 and Up : 22100, 22101, 22102, 22110, 22112, 22114, 22206, 22207, 22210, 22212, 22214, 22220, 22224, 22532, 22533, 22548, 22551, 22554, 22556, 22558, 22586, 22590, 22600, 22610, 22630, 22633, 22800, 22802, 22804, 22808, 22810, 22812, 22818, 22819, 22830, 22849, 22850, 22852, 22855, 22865, 22899, 63001, 63003, 63005, 63011, 63012, 63015, 63016, 63017, 63020, 63030, 63040, 63042, 63045, 63046, 63047, 63050, 63055, 63056, 63064, 63075, 63077, 63081, 63085, 63087, 63090, 63101, 63102, 63170, 63172, 63173, 63185, 63190, 63191, 63194, 63195, 63196, 63198, 63199, 63200, 63250, 63251, 63252, 63265, 63267, 63268, 63300, 63301, 63302, 63303, 63304, 63305, 63306, 63307, 63308	11/1/21	Addition